





## MANAGEMENT OF MUKHAPAKA WITH YASTI MADHU KWATH

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*Mukha Swasthya plays an important role in every individual. Over consumption of extremely pungent and spicy food, consuming and chewing of chemical agents like Tobacco-Gutakha, Insomnia, Vitamin deficiency, many life threatening disease like Malignancy, Submucosal fibrosis, Skin disease and disturbances in G.I. tract like Constipation, Dysentery are the main causative factors responsible for this most common ENT ailment. The aim of any medical science is for attainment of level of health, which enables every individual to lead a happy life socially and economically. In this regard Ayurveda stand first as it is the science which primarily aims at preservation of positive health. "Mukha Paka" is considered as Pittaja Nanatmaja and Rakta Pradoshaja Vikara characterized by Vedanaayukta Vrana in the Mukha Kuhara. The Lakshanas of Mukha paka such as Raktavarnayuktavrana, Tanu, Teevraruja, Teevradaha, Tiktaasyata etc (based on the vitiation of doshas ) are seen. It can be correlated to a clinical entity of Stomatitis. It is characterized by painful, single or multiple shallow hyperemic ulceration in the oral mucosa, gums, tongue and lips with recurrent episodes. In modern medicine, several mouth paints and mouth gargles are used for the treatment for Aphthous ulcer adjuvant to steroids, B'Complex group of drugs, injection placentrex (sub mucosal) which have their own limitations and there is no successful, satisfactory and cost effective treatment available. Gandusha is one of prime treatment procedure in oral disorders. which can be done by patient and is more effective. Among the single remedies Yasti madhu kwath (Gandusha) which is having both Shamana and Ropana property is selected for the present study, which is economic and commonly available.*

**KEY WORDS:** Mukhapaka, Stomatitis, Gandusha, Yastimadhu.

## INTRODUCTION

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**Mukha Swasthya** plays an important role in every individual. Habits like tobacco chewing, smoking, stress, vitamin deficiency,(Astanga Hridaya nidanasthana 1995) will increase the incidence of diseases pertaining to oral cavity(Sushrutha Nidanasthana 2005). The aim of any medical science is for attainment of level of health, which enables every individual to lead a happy life socially and economically. In this regard Ayurveda stand first as it is the science which primarily aims at preservation of positive health.

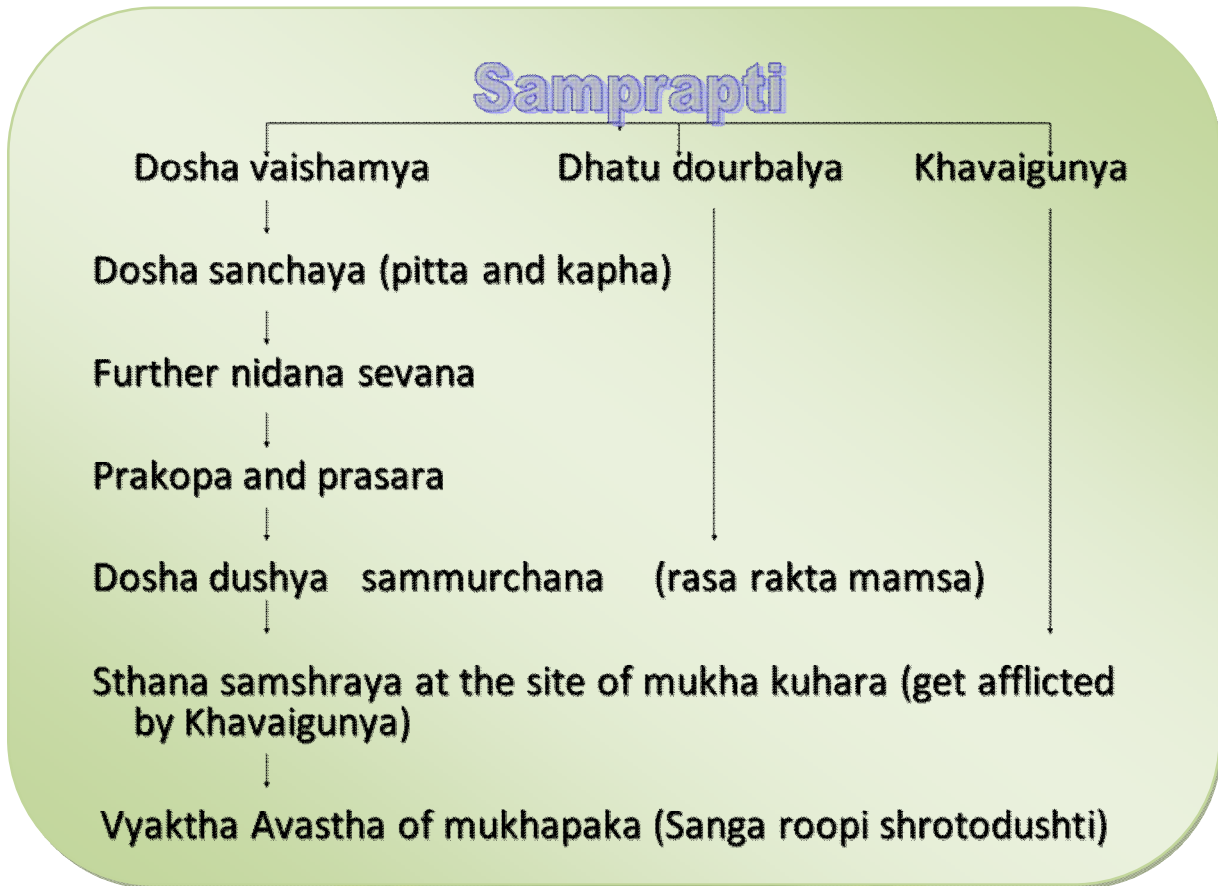
Among the Mukha rogas “**Mukha Paka**” is considered as Pittaja Nanatmaja(Sushrutha Nidanasthana 2005) and Rakta Pradoshaja Vikara characterized by Vedanaayukta Vrana in the Mukha Kuhara.The Lakshanas of Mukha paka such as Raktavarnayuktavrana, Tanu, Teevruja, Teevradaha, Tiktaasyata etc (based on the

violation of doshas ) are seen. It can be correlated to a clinical entity of Stomatitis. It is characterized by painful, single or multiple shallow hyperemic ulceration in the oral mucosa, gums, tongue and lips with recurrent episodes ([https://en.wikipedia.org/wiki/Mouth\\_ulcer](https://en.wikipedia.org/wiki/Mouth_ulcer)).

Among the various procedures mentioned for Mukha Paka, **Gandusha** is one which is explained more effectively. Among the single remedies Yasti madhu kwath(Dravya guna vijnan 1995) (**Gandusha**) which is having both Shamana and Ropana property is selected for the present study, which is economic and commonly available.

Previous Research Works are reviewed, shows that maximum number of patients were suffering with recurrent episodes. Hence the present study is aimed to establish the effect of Yashtimadhu Kashaya Gandusha in Mukha Paka to standardize the drug, duration and frequency of the procedure.

To assess this clinical trail was conducted on 20 patients with Yashtimadhu Kashaya Gandusha in S.D.M.C.A & H. Hassan. The results were assessed in pre and post treatment designed proforma. The detailed study, related data will be presented in full paper.



#### AIMS AND OBJECTIVES

- To evaluate the effect of Effect of yastimadhu kwatha Gandusha in the management of Mukhapaka

#### SOURCE OF DATA

- 20 diagnosed patients of Mukhapaka Were selected randomly from, O.P.D and I.P.D. of S. D. M. College of Ayurveda and Hospital, Hassan.

#### INCLUSION CRITERIA

- Recurrent oral ulcer
- Diagnosed patients of Mukhapaka Chronicity of Mukhapaka less than 1year

#### EXCLUSION CRITERIA

- Agantuja Mukhapaka.
- Patients suffering from Grave's disease such as AIDS, Oral cancer and Diabetes mellitus.

#### LABORATORY

- Haemoglobin
- Total leucocyte count
- Differential leucocyte count
- Erythrocyte sedimentation rate.

**ASSESSMENT CRITERIA**

**SUBJECTIVE CRITERIA**

- Asyaruja
- Asyadaha
- Asyavrana
- Asyashopha
- Asyavairasya

**OBJECTIVE CRITERIA**

- pH of saliva before and after treatment by litmus paper.
- Pictorial representation.
- Number of Vrana.
- Appearance of shudha vrana lakshanas.

**DEMOGRAPHIC DATA**

**Table No. 01. Showing the Demographic data collected during study**

Sl.	DD	Pt.'s	%	Sl.	DD	Pt.'s	%		
01.	Age in years	18 -30	12	60	03.	Religion	Hindu	11	55
		31 – 40	07	35			Muslim	08	40
		41 – 50	01	05			Christian	01	05
02.	Sex	Male	15	75	04.	Diet	Veg	07	35
		Female	05	25			Mixed	13	65
05.	Nidana	Tobacco	06	30	06.	Prakriti	VP	03	15
		Smoking	05	25			PK	12	60
		Alcohol	05	25			KV	05	25
		Tea/coffee	02	10	07.	Occu.	HW	06	30
		No habits	02	10			Business	11	55

**DD – Demographic Data, Sl. – Serial number. Pt.'s – Number of patients Veg. – Vegetarian, VP – Vata-pitta Prakriti, PK– Pitta-kapha prakriti, KV – Kapha vata prakriti, Occu. – Occupation, HW – House wife.% - percentage.**

## Mukhapaka



## YASTIMADHU



### STUDY PROCEDURE AND DURATION

- Each patient was subjected 50 ml of Yashtimadhu kwatha Gandusha up to samyak gandusha lakshana.
- Followed by Mrudu sweda and Dhooma.
- The same procedure was done for 7 days.
- During the procedure the patient was advised to take luke warm water and Laghu ahara-vihara.
- The follow up study was done for 3 months, with the gap of 15 days

## Procedure



### OBSERVATION AND RESULTS:

- All the patients were received the trial drug, 50 ml of Yashtimadhu kwatha Gandusha
- Results were assessed on the basis of pre and post treatment changes in subjective and objective parameters with self formulated gradings.

**Table No.04. Showing overall response of the study.**

Sl.	Response	No. of Pt.'s	%
01.	Complete relief	08	40
02.	Mild relief	12	60
03.	Moderate relief	00	00
04.	Average relief	00	00

## DISCUSSION

- Mukha paka is included under Sarvasara Mukha Rogas.
  - It is one of the pittaja nanatmaja and Rakta pradoshaja vikara, as pitta indicates that for the occurrence of Vrana or Paka
  - It seems to be more relevant as in contemporary medical science; ulcerative stomatitis is considered as a condition occurring in movable mucosa of oral cavity like lips, cheeks, floor of the mouth, soft palate.
  - Yastimadhu is a very well known drug which is having very good effect on different systems. Part used is Root.
  - It acts as anti inflammatory and wound healing effect by Glycyrrhetic acid, Glycyrrhign, Glycyrrhizic acid, Liquitrin, etc by its chemical constituents.
  - It acts as Kapha nissaraka, laxative in nature, good soothing agent,
- scraps out the debris present over the ulcer, by this doshas are forcefully expelled.
- It is a ruchya dravya, as it is madhura in Rasa easily acceptable by even children causes salivation that cleanses the ulcers and promotes the healing. Gandusha is used as Sthanika shamana chikitsa. Gadi + Gandescha which means mukha purnam i.e. filling the mouth. Strengthens the of muscles of oral cavity.
  - Snehana, Shodhana and Ropana roopi Gandusha are used. Which Increases local defense mechanism, Soothing effect with increased vascular permeability.
  - Protects the oral mucosa by creating alkali media in the exudations of the mouth

## CONCLUSION

- Out of 20 patients studied, maximum number of patients (60%) belonged to the age group of 18-30 years, Male (75%), and Hindu religion (85%), students (40%), moderate socio economic status (60%), moderate nature of work (65%), mixed diet (80%), anupa desha (60), and addicted to tobacco chewing (30%)



- Most of the patients were of pitta kapha prakriti (45%), preferring madhura rasa and amla rasa (35%and35% each), with positive history of ratri jagarana (50%) and chinta (50%) and poor oral hygiene (65%) practicing only danta dhavana (70%) with (55%)
- Maximum numbers of patients were suffering from pittaja type of mukhapaka (50%) with more occurrences in oshta and jiwha (35% and 30% respectively) and more incidences in sharat and hemanta ritu (35%and 30% respectively)
- Cardinal symptoms and signs like ruja, daha, kruchra mukha vivranata, Shopha, rakta varnata, presence of vrana, recurrence of attack were present in all patients(100%).

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