

## Clinical Efficacy of *Panchendriyavardhan Tailam Nasya* in the management of *Ramsay Hunt Syndrome* (Post herpetic fascial palsy) - A case study

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### Abstract:

“The Shingles or Herpes Zoster is caused by varicella, which is a manifestation of previous dormant chicken pox infection.” This affects dermatome of the nerve in the body. When immunity becomes weak infection manifests over the skin. If it affects the face, facial nerve may get affected and resulting into facial palsy. It is termed as Ramsay Hunt Syndrome (Post herpetic facial / VII<sup>th</sup> nerve palsy). Prognosis of non herpetic palsy is comparatively good. This palsy hampers the quality of life of patient. Here we reported a case of Ramsay Hunt Syndrome. A male patient of 53 years old consulted to OPD, Vasantdada Patil Ayurvedic Medical College and Institute of Yoga, Sangli, with sudden macules, papules over face, severe burning sensation, and regular shaped pustules on left side of face since 1 month. He was unable to drink liquids, unable to close his eyes, burning sensation and pain unable to raise his eyebrows, curved mouth from left side. He was having redness to his left eye. Ophthalmic and dermatological treatments were taken for one month but only relief from vesicles. This case was managed with a local application of *Abhyanga tailam* and *snehana* over face and *Panchendriyavardhan Tailam Nasya* for 15 days. He was also advised to continue fascial exercises for 4 weeks. This case concluded that regular local exercise and *Panchendriyavardhan Tailam Nasya* is helpful in post herpetic fascial palsy.

**Key Words:** *Ardita*, Fascial paralysis, *Kaksha*, Ramsay Hunt Syndrome.

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**Introduction:**

Ramsay Hunt syndrome (Herpes Zoster of the ear VII<sup>th</sup> nerve palsy.) is an infection of a facial nerve. Incidence is 5–10 cases per 1000 persons among individuals. Recurrent herpes zoster is exceedingly rare except in immune compromised hosts, especially those with AIDS. Herpes zoster occurs at all ages.

It is a neurological disorder in which the *Varicella zoster* virus infects VII<sup>th</sup> nerve in the head. The condition is also known as Herpes zoster oticus. Shingles or Herpes Zoster is caused by *Varicella zoster* virus or chicken pox, once affected, the viruses remain dormant for years and usually when immunity is compromised by any illness or any cause it damage to dermatome underlying tissues and manifest as a herpes zoster infection over the skin. It is a rare complication of herpes zoster in which reactivation of latent varicella zoster virus infection in the geniculate ganglion occurs. It represents a difficult problem which significantly affects the quality of life of patient by pain, localized supra added infection, sudden papules over face, severe burning sensation, and regular shaped pustules over the skin. Post herpetic neuralgia can sometimes occur due to nerve damage. Post Herpetic Neuralgia in the affected dermatome, fascial palsy is a major complication. In *Ayurveda*, these types of etiology can be consider under *Kakshacausing Ardita Dusta-Vata*, which is all sudden and pain is more.<sup>[1]</sup> Type of *vyadhi* is *Kshudra Vyadhi*<sup>[2]</sup>. *Dushya-Rakta Dushta*

is one in which there is localization of *Dosha vata, pita and kapha*. There is an *intense* pain and takes a long period to recover. In *Samhitas* treatment described as *Pittaja visarpa*.<sup>[3]</sup> *Yaccha sarpimahatiktam Pittakushtamnibahranam Ardite Nawanam Murdhni Taila Tarpanmewacha*<sup>[4]</sup>.

Hence considering the post herpetic palsy as an *Ardita*. Patients may take from a few weeks to several months to recover from Ramsay Hunt syndrome. If treatment is delayed and nerve damage is severe, a full recovery is much less likely.

**Case Report:**

A 53 year male patient, consulted to outpatient department of Vasantdada Patil Ayurvedic Medical College and Institute of Yoga, Sangli; (O.P.D. No 1194/2019) was presented with painful, sudden macules, papules over face, severe burning sensation, and regular shaped pustules on left side of face since 1 month. He was unable to drink liquids, unable to close his eyes, burning sensation and pain unable to raise his eyebrows, curved mouth from left side. He was having redness to his left eye. Patient was on ophthalmic Acyclovir drops and neomycin ointment. And as per physicians advice he was on tablet Acyclovir 400 mg 5 times a day for 10 days and tablet Prednisolone 10 mg three times a day in a weekly tapering manner for 4weeks. Pain was more so patient was advised to take tablet Paracetamol 500 mg and complete bed rest till recovery. Dermatologist added an

Acyclovir ointment and eye padding and dark goggle. Pain was more so patient was advised to take complete bed rest till recovery. He had taken for one month but only relief only from vesicles.

Patient was unable to drink on his affected left side. Patient had no previous history of hypertension (HTN) and diabetes mellitus (DM). During that period he observed all attempts of modern medicine so patient approached to Ayurveda hospital. Patient was examined and found healed scars and pigmentation over left side of face and neuralgic pain. The post herpetic fascial palsy diagnosis was made clinically as Bell's phenomenon was found. This case was planned with aim to evaluate the effect of *Panchendriyavardhan Tailam Nasya*.

**Sthanik Pariksha (Local examination):**  
During the local examinations following findings were noted. Ability to drink liquids, ability to close eyes, burning sensation and pain ability to raise eyebrows, curved mouth of affected side.

Skin: erythematous and hyperpigmented  
Tenderness: Present. Regional Lymph node: Not enlarged and palpable. Macules, papules over face, severe burning sensation, and regular shaped pustules.

**Preparation of Panchendriyavardhan Tailam Nasya** a Proprietary medicine each 100 ml *Taila* contains ingredients mentioned in table-1

**Table-1: Ingredients of Panchendriyavardhan Tailam**

Name of ingredient	Botanical name	Part used	Properties
<i>Manuka</i>	<i>Vitis vinifera</i>	Fruit	<i>Vatapittaghna</i>
<i>Jivak alternative Vidarikanda</i>	<i>Microstylis muscifera</i> <i>Alternative Puararia tuberosa DC</i>	Root	<i>Vatapittaghna</i>
<i>Pimpali</i>	<i>Piper longum</i>	Root	<i>Kafaghna, Vatashamak</i>
<i>Shweta Kamal</i>	<i>Nelumbo nucifera</i>	Stem	<i>Kafapittaghna</i>
<i>Manjishtha</i>	<i>Rubia cordifolia</i>	Stem	<i>Kafaghna</i>
<i>Punarnava</i>	<i>Boerhaavia diffusa</i>	Root	<i>Kafavathaghna</i>
<i>Bruhati</i>	<i>Solanum indicum</i>	Root	<i>Kafaghna, Vataghna</i>
<i>Rasna</i>	<i>Pluchea lanceolata</i>	Root	<i>Vathakaphaghna</i>
<i>Rushabhak alternative Vidarikanda</i>	<i>Microstylis wallichi</i> <i>alternative Puararia tuberosa DC</i>	Root	<i>Vatapittaghna</i>

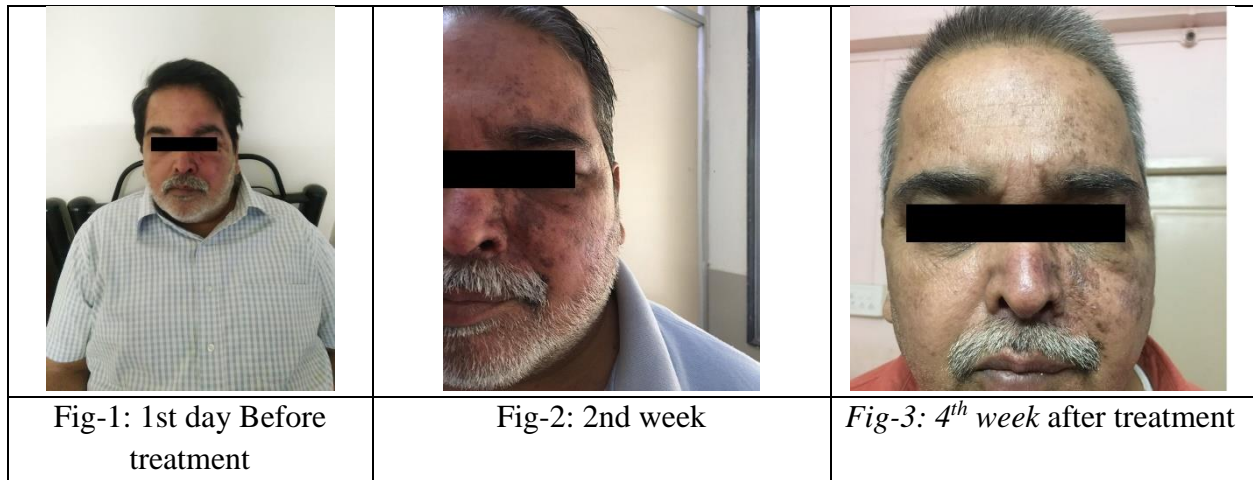
	<i>Glycyrrhiza glabra</i>	Stem	<i>Pittavataghna</i>
<i>Kantakari</i>	<i>Solanum xanthocarpum</i>	Root	<i>Kaphavataghna</i>
<i>Twaka</i>	<i>Cinamomum zelyanicum</i>	Bark	<i>Vathakaphaghna</i>
<i>Saindhav Lavan</i>	<i>Rock Salt</i>	-	<i>Pittashamak</i>
<i>Gokharu</i>	<i>Tribulus terrestris</i>	Root	<i>Vataghna, Pittashamak</i>
<i>Godugdha 100ml</i>	-	-	<i>Pittashamak</i>
<i>Tila Tel 10 ml.</i>	<i>Sesamum indicum</i>	-	<i>Vatashamak</i>
<i>Water.</i>			

**Methodology or application of drug:**

*Abhyangatailam snehana* and *nirgundipatra swarasa nadi swedana* over face and *Panchendriyavardhan Tailam Nasya* daily once in the morning hours.

The assessment was done on the basis of relief in symptoms i.e. ability to drink liquids, ability to close eyes, burning sensation and pain ability to raise eyebrows, curved mouth of affected side.

**Images of assessment during facial observations:**



### Result and Discussion:

In this case involvement of fascial nerve due to herpes zoster causing fascia weakness and neuralgic pain occurs. Though this infection is self limiting, recovers well but as a complication the prognosis is not well. In this case the prognosis of the disease was explained to the patient and consent has been taken that facial palsy may persist forever.

After the allopathic treatment over or inflammatory healing is completed, treatments plan included treatment like *Pittaja Visarpa and Ardita*. Deranged *Doshas* can be treated with the *Vatashaman and Pittashamka Chikitsa*.<sup>[5]</sup>

Therefore number of drugs of different properties is described as *Vatashaman and Pittashamka Chikitsa* in the management of *Ardita*. Medicines which contain *Katu, Tikta, Madhura* and *Kashaya Rasa* are more useful. In *Vatavyadhi* like *Ardita local snehna as well as Nasya* is indicated which is treatment to achieve the main goal of *Vatashaman*, it is necessary to remove the maximum *Dushti* by the virtue of *Snehana, Dahahara* and *Shoolaprashamana*. Drugs should be *Amapachaka, Tridosahara, Viatahara. Shoolaprashamana*. Alleviating these inhibitory factors is the goal of *Sthanik Chikitsa*. Along with this facial exercise to be followed further. Mostly drugs have vata pitagna and kapha vatagna properties. The drug contains mainly *Teekshna* drugs like *Vidang (Embelica ribes), Pippali (Piper longum), nidigdhika (Solanum surratense Burm.f.), twaka (Cinnamomum zeylanicum*

*breyne)* which are responsible for the clearing of the *Strotasa*.<sup>[6-7]</sup> *Vaata* is considered as the controller of the nerves. All the drugs are having the *Vaata hara* property with *Ushna* and *Snigdha guna*. So the pacification of the *Vaata* also is playing an important role in the action of the drug. The *Madhooka (Madhooka indica)* and *Saindhava lavana (Potassium chloride)* are having *Pittahara* action. This may be helping in reducing the burning sensation which is a *Pittapradhana* symptom.

The daily *Panchendriyavardhan Tailam Nasya* started and observed for improvement in ability to drink liquids, ability to close eyes, burning sensation and pain ability to raise eyebrows, curved mouth of affected side were observed weekly.

On the 1st week, patient was having inability to drink liquids, inability to close eyes, severe burning sensation and pain inability to raise eyebrows, curved mouth of affected side. Left sided skin was observed unhealthy granulation and erythematous area [Fig-1]. On 2nd week, scars were present over skin curved mouth of affected side with reduced burning [Fig-2]. On 3rd week, ability to close eyes and reduced burning sensation. During this treatment patient drink liquids well and intensity of pain reduced. After 4 weeks of treatment, only scars or pigmentations were present, with normal face movements and with no pain and burning sensation. [Fig.3.]. *Tila taila* has a soothing property. *Tila taila* is soothing and instant pain relieving since it

pacifies *vata*. Seasamol a chemical present in *tila* has a phenol ring and acts as an anti-inflammatory drug. Properties that may help to accelerating anti-inflammatory process.<sup>[8]</sup> In addition, *Panchendriyavardhana Nasya* as a *shirovirechana* or *shaman nasya* is helpful in *mukhavakrata* increasing blood flow to that area anti inflammatory action by increasing local temperature, reducing inflammation by eliminating *tikshna guna* of *pitta* and relieving pain, by keeping the skin soft by reducing *rukshata* of *vayu* .

*Panchendriyavardhan* is a formulation with *Kashaya Rasa* (astringent taste) predominance and by the action of *Rasa*; it acts as anti-inflammatory *drug*. It also must be acting as an *Indryaprasadak Shamaka*. Due to all these properties, it must have reduced the *Srava* (discharge). The *Stambhana* effect might also be attributed to the *Sheeta Veerya* (cold in potency) of the drug. Probable action of *Panchendriyavardhan Tailam Nasya* is that all drugs of *Panchendriyavardhan Tailam* are found to have anti-inflammatory, analgesic, properties. Anti-inflammatory effect may be achieved by *Panchendriyavardhan Tailam Nasya*.<sup>[9]</sup>

### Conclusion:

This single case concluded that regular fascial exercises along with *Abhyanga tailam snehana* and *nirgundipatra swarasa nadi swedana* over face and *Panchendriyavardhan Tailam Nasya* have

healing activity in post herpetic fascial palsy Ramsay Hunt Syndrome. After treatment there was no complication of post herpetic neuralgia. This treatment is safe, easy to apply and tolerable to the patient without any side effect. This treatment need to be tried in more number of cases.

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