

**TUNDIKERI WITH ITS MODERN ASPECT- A REVIEW LITERATURE**\*<sup>1</sup>Vd. Mahadev S. Bhoite and <sup>2</sup>Vd. P. K. Dash<sup>1</sup>P.G. Scholar Dept. of Kaumarbhritya Yashwant Ayurvedic College, Kodoli (Kolhapur).<sup>2</sup>Head of the Dept. of Kaumarbhritya Yashwant Ayurvedic College, Kodoli (Kolhapur).**\*Corresponding Author: Vd. Mahadev S. Bhoite**

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**INTRODUCTION**

In Ayurvedic perspective, Tundikeri can be correlated with Tonsillitis which presents features like Kathinasotha (enlargement of tonsils), resembling Karpasaphala (fruit of cotton), Toda (pain), Ragatwa (redness), Galoparodha (dysphagia), and asyavairasya (distaste in mouth). Tundikeri is a highly prevalent disease in the age group of 5-15 years. Tundikeri is one among the Urdhvajatrugata roga; mentioned in Talugataroga as well as Kanthagataroga. Mouth breathing, decreased appetite, poor school performance, restless sleep are the problems associated with recurrent tonsillitis and it makes the disease chronic & vulnerable for infectious diseases. Several health hazards like laryngeal edema, acute otitis media, and rheumatic fever, rheumatic heart diseases are often seen as systemic complications.

**KEYWORDS:** Kathinasotha (enlargement of tonsils), resembling Karpasaphala (fruit of cotton), Toda (pain).**Tonsillitis**

Tonsillitis is the disease of Upper respiratory tract infection which usually occurs due to the seasonal variations. Inflammation of palatine Tonsils causes pricking pain in throat and dysphagia. It is one of the most prevalent diseases in children, during first decade of life, incidences 7% of all visits to the pediatricians.<sup>[14]</sup>

**Defination**

The definition given by Acharya Sushruta resembles the acute stage of tonsillitis whereas the definition by Acharya Vagbhata is featuring probably the chronic stage of tonsillitis. Tundikeri is that disease caused by the vitiation of Kapha and Rakta. There is Sthula Shotha (oedema), Toda (pricking type of pain), Daha (burning sensation), Prapaki (Suppuration).

According to Acharya Vagbhata, Tundikeri is having the shape of Karpasiphala and is Hanusandhi Asrita Kanta (root of the temperomandibular joint) It is Picchila (Slimy), Manda Ruk (Mild pain) and a firm swelling.

**Nidana**

There is no specific Nidana mentioned for the disease Tundikeri in either of the Samhitas. So the Samanya Nidana for Mukha Rogas can be said in this context since Tundikeri is the disease of either the Talu or the Kanta, which are the parts of Mukha.

**Aaharaja**

Excessive consumption of Matsya (fish), Mahisa Mamsa (buffalo's meat), Varaha (pig'smeat), Amalaka

Mulam (rawradish), Masa (urad dal), Dadhi (curds), Ksira (milk), Sukta, Iksurasa (sugarcane juice), and Phanitha. Many of these Aharas are having Madhura Rasa or are of Amla Rasa. So these cause the vitiation of Kapha and Pitta which results in the vitiation of Rakta and hence the occurrence of the disease.

**Viharaja**

Excessive indulgence in Avaksayya (sleeping in prone position), Dwishato Dantadhavana (improper dental hygiene), Dhuma (improper Dhumpna), Cardana (improper vomiting), Gandusa (improper gargling), Siravyadha (improper vinesection). Avoidance of proper oral hygiene leads to the accumulation and Prakopa of Kaphapradhana. Dosa and results in the occurrence of many disorders of the mouth (Mukharoga).

**Purvaroop**

As Tundikeri is a disease characterized by Shotha, premonitory symptoms of Shotha can be considered here i.e. mild pain, mild burning sensation, Dhirghibhava of Siras with mild swelling and increase in local temperature.

**Roopa**

Shotha, Toda, Daha, Prapaka in Talu Pradesha, according to Acharya Sushruta (Swelling, Pricking pain, burning sensation and temperature rise, suppuration there are likely to be present in acute infections). Karpasiphala appearance, Picchila, Mandaruk, Sopha which is Katina according to Acharya Vagbhata. (Mild pain and firm swelling are symptoms likely to be present

in chronic infection

### Samprapti

Improper oral hygiene either due to intake of excessive Madhura, Amla, Lavana Rasa Ahara, Snigdha, Abhisyandi Ahara or due to improper dental hygiene or on sleeping in prone position leads to Kaphadosa Prakopa. This causes Kaphavrita Srotorodha and

Agnimandya. Due to this the Dosas are flowing with Manda Gati in Srotas. This leads to Sthana Samsraya of Dosas in Talu or Kanta Pradesha. According to Acharya Sushruta, he has considered Rakta to be a Dosa. There is Pitta and Rakta Margavarodha in Talu or Kanta resulting in Shotha, Paka in that area.

### Tundikeri Sampraptighataka.

Dosha	:-	Kapha (According to Acharya Vagbhata)
Dushya	:-	Kapha Rakta (According to Acharya Sushruta)
Srotasa	:-	Rasa, Rakta, Mamsa
Agni	:-	Rasavaha, Raktavaha,
Srotodushti	:-	Jataragni, Dhathwagni Mandya
Roga Marga	:-	Sanga and Granthi
Udbhava Sthana:	:-	Madhyama
Adhithana	:-	Amasaya
Vyakrithana	:-	Mukha, Hanusandhi
	:-	Talu or Kanta

The above mentioned Aharas and Viharas create an environment in the throat for the invasion of bacteria. Common causative bacteria include hemolytic streptococcus, staphylococcus, pneumococcus. Tonsillitis is one primary focus of infection, which further leads to different morbid conditions owing to the additional secondary infection of upper respiratory tract infection.

### Treatment of Tundikeri

According to Acharya Vagbhata, among the 75 Mukha Rogas, 23 of them are Asadhya and the rest are Sadhya. Sadhya Rogas are again divided into Sukha Sadhya and Krichra Sadhya. Tundikeri is considered to be Krichra Sadhya i.e. it can be cured by Ausada and if not by Sastra Karma. Acharya Sushruta too has given the same opinion regarding Sadhya Asadhya. For all types of Mukha Rogas, according to Acharyas: □ Snehana, Swedana, Vamana, Virecana, Ghritapana, Dhumapana, □ Kavalagraha, Abhyanga, Pradhmana nasya can be administered □ According to Acharya Charaka - Dhumrapana, Pradhman Nasya, Virecana, Vamana, Lekhana are indicated. □ Acharya Sushruta has nowhere mentioned the medicinal treatment for the disease Tundikeri. The treatments advocated by him are both surgical Bhedana (Incision), Chedana (Excision).

Acharya Vagbhata has instructed that Tundikeri has to be treated on the line of Shlesmaja Rohini, which is as follows: □ Raktamoksana □ Nasya with Tikсна Drugs □ ~~Gala~~ with Tikсна Drugs □ Kwatha of Bark (Twak) of Daruharidra, Nimba, Rasanjana, Indrayava. Gargling (Kavala or Gandusa) with Triphala, Trikatu, Citraka, Patha, Nimba Sukta and Gomutra. Sarangadhara in Uttara Khanda has mentioned Gandusa, Kavala, and Pratisarana as remedial measures for Gala Rogas. Pratisarana includes Patha, Haridra, Katuki and Musta. Thus the Chikitsa of Tundikeri can be done in two ways:

(1) Medicinal (Ashastrakrita) (2) Surgical (Shastrakrita) Shastrakrita -Rakta Moksana, Chedana, Bhedana Ashastrakrita -Pratisarana, Kavala, Gandusa

Systemic description of the whole procedure:

1. Purva Karma (Pre-Operative)
2. Pradhana Karma (Operative)
3. Paschat Karma (Post-Operative)

### REFERANCES

1. It is described in Madhavnidan on page no.230 as Talugataroga.
2. It is described in Sushruta Samhita Nidanstan 16/42 on page no.387.
3. It is described in shloka 21/47 on page 712. Kalaka Churna Pratisaran describe in shloka 22/99 on page no.857.
4. Kalaka Churna Pratisaran described in Charak Samhita shlok 26/194,195 on page no.668.
5. Tundikeri is described in it occurs due to Kapha and Rakta vitiation on page no. 1007 and treatment on page no.10.
6. It is described in Bhaishajya Ratnavali on page no.967 and it is taken as treatment of tundikeri.
7. Tundikeri is explained on page no.473 in shlok 47 and in shlok 63 it is given that tundikeri is treated as kaphajrohini.
8. Kalaka Churna Pratisaran is described in Bharat Bhaishajya Ratnavali on page no.215.
9. Galshundika is explained on page no. in shloka 459: 33-36.
10. It is described in Sharangadhar Samhita on page no.111.
11. In kantharoga Chiktisa Tundikeri is explained on page no.331 and Galashundi.
12. Text book of ENT; Diseases of Ear Nose and Throat<sup>[16]</sup>; P. L. Dhingra, Shurti Dhingra 6<sup>th</sup> edition

- tonsillitis is described on page no.258 -261.
13. Text book of ENT ; E.N.T. diseases<sup>[13]</sup>; K. B. Bhargava, S. K. Bhargava, T. M. Shah.9<sup>th</sup> edition tonsillitis is described on page no. 245-247.
  14. Text book of Pathology Harsh Mohan 6<sup>th</sup> edition Pathology of tonsillitis is explained on page no.517 &518.
  15. Nelson textbook of pediatrics <sup>16-1</sup>stSouth Asia edition Vol. 2–Kliegman, Stanton, St.Geme, Schor - page no.2023 – 2026.