A CASE STUDY ON THE EFFECT OF SHASHTIK SHALI PINDA SWEDA AND MAHAMASHA TAILA NASYA KARMA IN THE MANAGEMENT OF EKANGA VATA WITH MAMSAKSHAYA W.S.R. DEMYELINATION OF NERVE

*1Dr. Vipin Kumar and 2Dr. Sonu

*1 Assistant Prof in Panchakarma Dept., MJF Ayurveda College, Chomu, Jaipur, India.

2 Lecturer in Prasuti Tantra Evum Stri Rog Department, National Institute of Ayurveda, Jaipur.

ABSTRACT

A male patient aged 33 years was admitted in IPD of Panchakarma with complains of left hand weakness, loss of muscle mass, difficulty in movement, loss of sensation, tremors on extension of left arm. It was a diagnosed case of left median demyelination. A demyelinating disease is any disease of the nervous system in which the myelin sheath of neurons is damaged. This damage impairs the conduction of signals in the affected nerves. In turn, the reduction in conduction ability causes deficiency in sensation, movement, cognition, or other functions depending on which nerves are involved. In Ayurveda it can be considered as Ekanga Vata with Mamsakhaya. In Ayurveda we can treat this disease by the use of such medicines which have specific action on nerve cells and even on entire nervous system. Hence the patient was treated methodically by employing Shashtik Shali Pinda Sweda and Mahamasha Taila Nasya Karma. **Observation:** Nasya with Mahamasha Taila and Shastika Shali Pinda Sweda for two weeks had shown marked improvement in all sign and symptoms power was improved (5/5), tone improved, muscle weakness was reduced, sensation was improved. **Conclusion:** Ayurveda treatment together Nasya Karma and Shastika Shali Pinda Sweda provided mild to moderate improvement in all sign and symptoms.

**KEYWORDS:** Demyelination, Ekanga Vata, Mamsakhaya, Shashtik Shali Pinda Sweda, Nasya Karma.
INTRODUCTION
A demyelinating disease is any disease of the nervous system in which the myelin sheath of neurons is damaged.\(^1\) This damage impairs the conduction of signals in the affected nerves. In turn, the reduction in conduction ability causes deficiency in sensation, movement, cognition, or other functions depending on which nerves are involved. Loss of myelin with preservation of the axons or fiber tracts. Central demyelination occurs within the central nervous system (for example, the demyelination seen with multiple sclerosis); peripheral demyelination affects the peripheral nervous system (for example, the demyelination seen with Guillain-Barré syndrome).\(^2\) Demyelinating diseases are traditionally classified in two kinds: demyelinating myelinoclastic diseases and demyelinating leukodystrophic diseases. In the first group a normal and healthy myelin is destroyed by a toxic, chemical or autoimmune substance. In the second group, myelin is abnormal and degenerates.\(^3\) In Ayurveda we can treat this disease by the use of such medicines which have specific action on nerve cells and even on entire nervous system. These medicines helps in regeneration of damaged nerves in turns reduces associated symptoms. Such medicines have immunomodulatory effect by virtue of which they reduce autoimmune reactions to prevent further damage to the nerves. In modern science until now there is no treatment that promotes remyelination or neural repair.

MATERIALS AND METHODS
Single case study.
Clinical intervention.
A male patient aged 33 years was admitted in IPD of Panchakarma with complains of left hand weakness, loss of muscle mass, difficulty in movement, loss of sensation, tremors on extension of left arm. N.C.V. [Nerve Conduction Velocity] done reported left median demyelination, left axillary and left radial motor axonal involvement.

Associated Complaints: Anxiety, Depression, Loss of appetite.

History of present illness – Patient presented with 3 years h/o insidious onset progressive. Motor weakness associated with tremors; gradually he also developed sensory loss in left upper limb and reduced muscle bulk.

Family History: Not significant.
**General Examination**

Pulse : 68/min
Blood Pressure : 110/80mmhg
Pallor : ++
Icterus : -ve
Clubbing : -ve
Cyanosis : -ve
Oedema : -ve

**Systemic Examination**

Central Nervous System –
Mood - Depressed
Speech - Normal
Cranial Nerves – Normal, well intact

Higher Cerebral Functions-
Orientation - Good
Memory - Normal
Concentration - Normal
Judgement - Normal
Reasoning - Normal
Cerebellar Sign - Absent

Motor Function of Left Upper Limb-
Muscle Wasting - +++
Fasciculation - ++
Tone - Flaccidity - ++
Power - 3/5

Deep Tendon Reflex-
Supinator Jerk - 0/4
Biceps Jerk - ¼
Triceps Jerk - 0/4
Sensory Functions-
Two Point Discrimination - +ve
Temperature - Can’t recognise
Cardiovascular System - Normal
Respiratory System - Normal
Per Abdomen - Normal

In Ayurveda

Dosha - Vata-Pitta
Dushya - Rasa -Rakta
Agni - Madhyama
Adhisthan - Sira, Snayu, Twacha
Vyaktasthan - Snayu, Twaka

Intervention

According to Ayurveda, it may be considered as a case of Ekanga Vata with Mamsakhaya, considering it as a Dhatukshaya Janaya Vatavyadhi. Shashtik Shali Pinda Sweda and Brihmana Nasya with Mahamasha Tailawas given for two weeks.

Shashtika Shali Pinda Sweda

Inrgradient used - Shashtika Shali, Bala Mool, Ashwagandha Mool, milk.
150 gm of Shashtika Shali was cooked with 750 ml of milk and decoction of Ashwagandha and Bala Mool. Out of this mixture, two boluses were prepared. Another 750 ml milk and Ashwagandha and Bala Mool decoction heated to dip the boluses. Patient was allowed to lies down in supine position. Then Abhayang was done on the affected part with Dashmool Taila. Then warm boluses were applied in synchronized manner over the affected part. The temperature of boluses were maintained nearly same by dipping in prepared warm milk and decoction mixture. Then after continuous 30 minutes application of the boluses, the body of the patient was cleaned properly. In this way, Shashtika Shali Pinda Swedan was done for two week.

Nasya Karma

After evacuation of bowel and bladder, patient was placed in supine position on Abhyanga table. Abhyanga was done on face and neck with Dashmool Taila for 20 – 25 minutes followed by Swedna Karma. Then by lowering the head portion, 6 drops of Mahamasha Taila was administered in each nostrils for two weeks.
OBSERVATION

Nasya with Mahamasha Taila and Shastika Shali Pinda Sweda for two weeks had shown marked improvement in all sign and symptoms power was improved (5/5), tone improved, muscle weakness was reduced, sensation was improved.

DISCUSSION

When Vata is vitiated in our body or any part of body due to any Vata Prakopak Hetu it takes Sthan Samshraya in Mamsa Dhatu which leads to Strotorodha. This Strotorodha leads Dhatvagni Mandya i.e. depletion of Mamsagni. This Agni Mandya at the level of Mamsa Dhatu leads to formation of Aam. Acharaya Madhavakar explained Srotodusti as a type of Aama.[4] This complex variety of pathogenesis is responsible for the Mamsa Dhatukshaya.

Shashtika Shali Pinda Sweda

Shashtika Shali Pinda Sweda was used to improve muscle bulk and the movement of hand as it is a kind of Brimhana, Vatahara, Balya Sweda. By virtue of its ingredients like milk, Shashtika Shali, it nourishes and gives strength to muscle tissues and because of Bala and Ashwagandhait nourishes nervous tissues. Consequent application of therapeutic heat causes vasodialation, because of which the blood circulation improves which results in removal of waste products. As the blood circulation improves, anabolism increases as tissue receives the oxygen and in turns nutrients properly. Heating can result in decreased stiffness and increased tissue extensibility, thus facilitating ease of motion and gains in range of movements.[5] Shashtika Shali Pinda Sweda improves the strength tissue which in turns increase movements and flexibility.[6] Skin is considered to be the site of Vata (i.e. Sparshanendriya). This treatment measures when applied directly on the skin lead to the correction of the deranged functions of Vata, which in turn corrects the impaired functions.

Nasya Karma

Dwaram Hi Shirsho Nasa.[7] Nose is the gateway of the head and as such drug administrated by this route pervades the head and destroys the disorders there of. The drug administered through nose as Nasya reaches to the brain and eliminates only the morbid Doshas responsible for producing the disease.[8] Aacharya Sushruta has clarified Shringataka Marma as a Sira Marma formed by the union of Siras (blood vessels) supplying to nose, ear, eye and tongue.[9] Nasya is indicated in all Urdhvaajatrugata Vikara. Diseases of cords and roots also comes under Urdhvaajatrugata Vikara. Demyelination of median nerve is a neurodegenerative disease. Nasya can be given in neurological disorder. As muscle wasting and muscular
weakness was present in a patient, Mahamasha Taila having Brimhana effect was used for Nasya. So because of Brihmana and Mamsa Poshan property of Mahamasha Taila, it works at the root level of spinal cord and cervical cord.

CONCLUSION
Ekanga Vata due to demyelination of nerve can be managed through classical Ayurveda treatment. Ayurveda treatment together Nasya Karma and Shastika Shali Pinda Sweda provided mild to moderate improvement in muscle power, muscle tone and muscle bulk moderately improved.

REFERENCES
6. M.M. Padhi, Dr Sharda Ota, Dr. M.M. Sharma, Dr. B. Venkateshwarlu. Editor; A Practical Handbook of Panchakarma Procedures; New Delhi. C.C.R.A.S.2010, Pg no 45-47.