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## OUTCOME EVALUATION OF PANCHVALKAL KWATH GANDUSHA ON POOR ORAL HYGIENE: A CASE REPORT

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## **ABSTRACT**

Poor oral hygiene is a common complaint of the youth of the present world. Improper time management and lazy behavior toward cleanliness may affect the oral hygiene of an individual. 33% of Indian youth are affected by poor oral hygiene. In this case study, a 32-year-old adult presents with gum swelling, discoloration of teeth, and persistent bad odor from mouth for 2 months, history reflected negligence behavior towards oral care. The patient's present status was quantified on the index of oral hygiene (OHI) having Debris Index (DI) and Calculus Index (CI). OHI before treatment resulted in a score of 3.85 reflecting poor oral hygiene and after doing *Gandusha* (~holding the medicated liquid in mouth) with *PanchvalkalKwatha* for 30 days, the OHI reduced to 2.67 reflecting fair oral hygiene. *Gandusha* is a conventional treatment method for improving various oral ailments as per Ayurveda while *PanchvalkalKwatha* (~dry mixture of 5 medicines) has an established antibacterial activity whose effect corrects the swelling and bad odor and continuous use helps in *Lekhaniya* (~therapeutic scrapping) property reduces the debris impacted to give discoloration to the tooth, *Rukshaguna* (~dry property) and *Kashayarasa* (~astringent taste) of all the drugs reduces vitiated *Kaphadosha* resulting in the improved oral hygiene.

**Keywords:** Oral hygiene Index, Debris Index, Calculus Index, Gandusha, Panchvalkalkwath

#### INTRODUCTION

The oral cavity helps people stay hydrated and nutritionally healthy. One of the key activities for keeping the oral cavity healthy and free of infections is to maintain oral hygiene. [1] Regular brushing is the most popular approach to cleaning the teeth. Dental diseases and poor dental hygiene cannot be prevented with brushing and cleaning agents alone. [2] Most people are unaware of bleeding gums due to the effects of dental plaque, which affects not only the tooth but also its supporting components.[3] The fundamental goal of Ayurveda is to maintain optimal health. [4] Ayurveda texts explain oral hygiene under Dinacharaya(~daily regimen) and Ratricharaya (~night regimen) for this purpose. [5, 6, 7] Oral diseases are not explained under a separate chapter in texts of Ayurveda although symptoms of Sitada (~Dantamulagataroga-Diseases of Dental root) resemble poor oral hygiene.[8]

#### **CASEREPORT**

A 32-year-old male patient came to dental OPD of the National Institute of Ayurveda Jaipur on 24 August 2022 with complaints of swelling and discoloration of teeth for 2 months as well as a persistent bad odor coming from his mouth. The patient had never received dental treatment and had improper brushing. His mother is also suffering from the same problem. No history of Hypertension and Diabetic Mellitus. The patient was medically fit and well and had no history of smoking, he drinks alcohol sometimes. He had no history of constipation. He had a normal diet and there was no history of dry mouth. The patient was assessed with simplified Oral Hygiene Index (OHI-S) scoring. Clinical Examination shows the presence of debris and calculus deposits.

**Material and Methods**- The patient was advised for counseled to maintain proper oral hygiene and to take *Gandusha* with *PanchvalkalKwath* and *Madhu* (~honey) for 30 days. <sup>[9]</sup>Details of *PanchvalkalKwath* are mentioned in Table 01. <sup>[10]</sup>Complaints of patients were quantified before and after treatment with Simplified (OHI-S) by Green and Vermillion taken to

evaluate the oral hygiene status of the individual whose details were provided underneath.

Oral Hygiene Index – Simplified (OHI-S) by Green and Vermillion was taken to evaluate the oral hygiene status of the individual. This index is simplified to consider only six teeth which will represent all the teeth in the oral cavity. They are 16, 11, 26, 36, 31, and 46. Further, only one surface of each tooth examined will be taken into consideration i.e. facial surface of 16, 11, 26, 31, and the lingual surfaces of 36 and 46. [11]

**DebrisIndex** – Simplified (DI-S) Criteria for scoring debris index. (Table 02)

**CalculusIndex** – Simplified (CI-S) Criteria for scoring calculus index. (Table 03)

OHI-S = DI-S + CI-S

Clinical levels of oral hygiene can be assessed by OHI-S as mentioned in Table 04

ON EXAMINATION: Details of the examination are mentioned in Table 05

**RESULTS**: The debris index (DI) was counted as 2 and the calculus index (CI) was counted as 1.85 which together resulted in a 3.85 score of Oral hygiene index (OHI) inferred as poor oral hygiene. After 30 days of treatment, complaints of swelling of gums subsided and calculus and debris were reduced substantially. Later on, with the use of *PanchwalkalKwath* the DI score was reduced to 1 and the CI reduced to 1.67 commonly as the OHI score reduced to 2.67 which is stated as fair oral hygiene.

#### DISCUSSION

Ayurveda the ancient system of medicine mentioned various types of treatment and has a unique way of explaining the mode of action of drugs. The etiology of poor oral hygiene in the present case study is due to improper method of brushing of teeth which leads to accumulation of calculus and debris, due to which resulted in bad breath. The regular use of *Gandush* with *PanchwalkalKwath* reduced the symptoms of swelling and halitosis. *Gandusha* is a type of *Sho*-

dhanaChikitsa (~eliminative treatment)adopted in Mukha Pradesh (~oral cavity). [12] The oral cavity is site of the BodhakaKapha(~a KaphaDosha), as a result of which applied drug gets absorbed easily and faster and shows speedy recovery than systemic management. [13] The action of drugs is executed in the body through its pharmacodynamic properties like Rasa (~taste), Guna(~quality), Veerya(~potency), and Vipaka(~bio-transformed Rasa) along with these Prabhava (~nomenclature based on specific action) is the specific property inherited by the drug which cannot be explained, and the principle of treatment in Ayurveda is based on SampraptiVighatana (~pathogenesis break) which is achieved by relieving DoshaDushyaSammurchana(~pathogenesis process). Gandusha may also act by increasing the saliva which contains lysosomes and another detoxifying agent which is again helpful in the removal of infection and provide relief from symptoms. The Kwath (~decoction)of a drug used in lukewarm condition, PanchvalkalKwath suppress bacterial infection due to its antibacterial action, it enhances local immunity of the mouth and improves resistance against infection. The Kasayarasa (~astringent taste)of ingredients relief Sotha(~swelling), Vrana(~wound or ulcers), and Sodhana (~purifacation) effects enhance the healing of damaged teeth and reduce gum problems. [14] Prolonged and forceful mechanical action during Gandusha could play a vital part in dislodging calculus as well as debris from another part of the mouth.

In Panchvalkal all the drugs are Kashya Rasa, SheetaVeerya, KatuVipaka, and KaphapittaShamak. In Mukhroga mainly vitiated doshas are Kapha and Rakta, Kapha is vitiated by its Snigdha(~oily) and PichhillaGuna(~slimmy), and due to Pitta and Rakta are the same in quality therefore Rakta is vitiated by its Ushna (~hotness) and Visraguna and the vitiated Snigdhaguna (~unctousness)is pacified by the Rukshaguna (~dryness) of Panchvalkal and Dravata (~fluidity) of vitiated Rakta is pacified by the Shosanaguna of *KashyaRasa,Srotoshodhana*(~clearing channels) and Krimiahar (~wormicidal) property of

the *Katu rasa*. <sup>[15,16]</sup>*Panchvalkalkwath*is phytochemically dominant in phenolic group components like tannis, and flavonoids which are mainly responsible for its excellent activities antiseptic, and anti-inflammatory. <sup>[17]</sup>Tannins have been reported to have antibacterial potential due to their basic character that allows them to react with proteins to form stable water-soluble compounds, thereby killing bacteria by directly damaging their cell membrane. Due to the properties of the above-mentioned drug, the complaint of swelling and bleeding from gums and halitosis subsided. Through the assessment of the oral hygiene index, we found that debris and calculus were reduced substantially.

#### CONCLUSION

The present case study showed that PanchvalkalKasayaGandusha and oral hygiene measures are very effective in this case. Panchvalkal have Antimicrobial Activity due to presence of Tannin, Saponin, Flavinoids, Terpenoids etc. In Ayurveda, the equilibrium of Dosha is the main aim of the treatment of disease. So in this disease, KaphaPittashamak, Shothahara, as well as KrimiharaDravya, will be beneficial for the treatment. The Panchvalkal Kwatha has a wide range medicinal values Antimicrobial, Antiinflammatory, Anti-septic, wound purifying, and healing, etc. Despite the limitation of this case in a single patient, this treatment modality may be eyeopening for further studies to effectively manage oral hygiene through Ayurveda.

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Table 1: Content of PanchvalkalKwath

Sr. no.	Drug Name	<b>Botanical Name</b>	RASA	VEERYA	VIPAKA	KARM	GUNA
1	Vata	Ficusbenghalensis Linn.	Kashaya	Sheeta	Katu	Dosha- Kaphapittaghna, Dhatu – Rakta	Guru Ruksha
2	Ashvat- tha	Ficusreligiosa Linn.	Kashaya	Sheet	Katu	Dosha- KaphapittaghnDhatu – Rakta	Guru Ruksha
3	Udumbar	Ficusreacemosa	Kashaya-	Sheet	Katu	Dosha-	Guru

		Linn.	Madhu			Kphapittasham	Ruksha
						Dhatu-Rakta	
4	Plaksha	Ficusmicrocarpa	Kashaya	Sheet	Katu	DoshaKaphapittagh-	Guru
		Linn.				na	Ruksha
						Dhatu – Rakta	
5	Parisha	Thes-	KashayaTi	Mild Ush-	Katu	Dhatu – Rakta Dosha – Tridoshaha-	Guru
5	Parisha	Thes- pesiapopuolnea	KashayaTi kta	Mild Ush-	Katu		Guru Ruksha

## Table 2: Assessment of simplified (DI-S) Criteria for scoring debris index

0	No debris or no stains present
1	Debris present up to gingival 1/3rd or crown
2	Debris presents more than 1/3rd but less than 2/3rd of crown
3	more than 2/3rd of crown

DI- S = Total no. of scores/6

## Table 3: Assessment of simplified (CI-S) Criteria for scoring calculus index

0	No Calculus present	
1	Only Supragingival calculus covering less than 1/3rd of the clinical crown	
2	Supragingival Calculus covering more than 1/3rd and or flecks or subgingival calculus	
3	Supragingival calculus covering more than 2/3rd of clinical crown or/ and continuous band of subgingival	
	calculus	

#### CI-S = Total no of scores/6

## Table 4: Assessment of oral hygiene by OHI-S

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Good	0 to 1.2
Fair	1.3 to 3.0
Poor	3.1 to 6.0

#### Table 5: Details of the examination

EXTRAORAL	INTRA ORAL	HARD TISSUE EXAMINATION
Facial symmetry –Symmetrical	Halitosis – Present	Missing teeth – All teeth are present
Lips – normal	Labial mucosa – No abnormality diagnosed (NAD)	Stains/ Discoloration – Present
Lymph nodes – Not Palpable	Buccal mucosa – NAD	Calculus – Moderate
	The floor of the mouth – NAD	Caries – Absent
	Tongue – NORMAL	Tenderness on percussion – NAD
	Vestibule – NAD	
	Tonsillar pillars and Pharynx – NAD	

Table 6: OHI-S before and after treatment (BT and AT scores):

Scores Before Treatment			Scores After Treatment		
DI	CI	OHI	DI	CI	OHI
16-1	16-1	The total OHI-S score is the	16-1	16-1	The total OHI-S score is the addi-
31-2	31-3	addition of CI+DI	31-1	31-0	tion of CI+DI
11-3	11-3	2+1.85=3.85 Reflects Bad	11-1	11-2	1+1.67=2.67 Reflects Fair oral
26-2	26-2	oral hygiene	26-2	26-1	hygiene
36-2	36-1		36-0	36-1	
46-2	46-1		46-1	46-1	
Score	11/6=1.85		Score	7/6=1.67	
=			=		
12/6=2			6/6=1		

Table 7: Timeline of the patient

24/8/22	The patient came to dental OPD of the National Institute of Ayurveda- the patient had complained of swelling and discoloration of teeth for 2 months and as well as a persistent bad odor coming from his mouth.
24/8/22	The patient was advised to take the Gandush of PanchvalkalKwath
08/09/22	Relief in symptoms of swelling, bad odor, and discoloration of teeth persist
23/9/22	Relief in gum swelling, halitosis, and calculus and debris were reduced substantially.

Figure 1: Oral examination (before treatment) showing gum swelling, discoloration of teeth, calculus



Figure 2: Oral examination (after treatment) showing reduced gum swelling and discoloration of teeth and calculus deposition over teeth

