

AYURVEDIC MANAGEMENT OF PERICHONDritis (VIDARIKA) - A CASE STUDY

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ABSTRACT

Ayurveda being the science of life deals with the detailed description & Management of all disease conditions. In our *Samhitha* the importance is given to all system equally. Ayurveda is mainly divided into study of 8 branches which includes *Urdwajatrugata* as one of the important branches. This science includes all the ailments & Description about the *Vyadhis* related to *Urdwajatru* i.e. structures above neck which include Netra (Eye), Karna (Ear), Nasa (Nose), *Mukha* (Oral) and Shiro (Head). Karna being the organ for hearing is given more importance in every *Samhithas*. Karna is divided into 3 parts *Bahya Karna* (Outer ear), *Madhya Karna* (Middle ear), *Abhyanthara Karna* (Inner ear). Here, in this article an attempt is made to discuss a case of *Vidarika* which is one among *Karnapaliroga*.

Keywords: *Karnapali*, *Vidarika*, Perichondritis

INTRODUCTION

Indriya, which is not seen with naked eye, along with 'Shashkuli' is called *Shrotra* i.e. Karna¹. *Charakacharya* have mentioned that

Karnendriyaadhistana exhibits 2 parts namely Karna *Shashkuli* and *Karnaputraka*², where Chakrapani have commented on this as *Karnashaskuli* is *Karnagata*

Avarta and *Karnaputraka* is *Bahyakarna*. As per the modern medicine the external ear exhibits many elevations and depressions on lateral surface of pinna which resemble the whirl, and this is to be taken as *Avarta*. So *Karnashaskuli* is that part of Karna which resembles *Avarta*³. *Astanga Hridayakara*⁴ and *Astanga Sangrahaakara*⁵ mentions *Karnaroga* as 25 in no, in which 15 are *Karnagata Roga* and 10 are *Karna Paligataroga*. One among the *Karnapaligata Roga* is *Vidarika* which is been discussed here in this case.

Aim and Objectives

To evaluate the efficacy of Ayurvedic medicines in the management of *Vidarika*.

Presenting Concern

A male patient of age 49 years (**OPD NO-G5840**) who is not a known case of Diabetes mellitus and Hypertension, was apparently healthy 15 years back. In 2005 one day he noticed with pain in the right ear with mild swelling and this was associated with itching sensation. The size of swelling was increasing day by day and one day this got ruptured leaving a wound. Watery discharge was seen first and later he noticed serous discharge from the wound occasionally and mild redness still persisted over the pinna. Gradually there was pulling type of pain in the pinna and head occasionally. So, he consulted an allopathic hospital at Chitradurga for the same and was prescribed with medication. After using those medication there was reduction of these symptoms. The pain got reduced after medication all the symptoms got relieved subsequently. In between 2005-2018 he had 4 episodes of same complaint which he noticed that it appears only in the right ear and on having medication it used to get reduced. In 2019 February he developed with pulling type of pain in the pinna and right side of head with mild swelling in the pinna associated with Redness and itching of right pinna since 2-3 days, discharge (serous discharge). Hence, he consulted Shalakyia OPD of

SKAMC. His personality was average built; body weight was 77 kg and belonging to middle class socioeconomic status. Occupationally, he was a businessman. No significant family history and personal history identified. His vitals were within normal limits. On general examination, there was no pallor, icterus, clubbing of nails, oedema or lymphadenopathy noted. No CVS, CNS abnormalities noted on through examination.

Ear Examination-

Examination of External Ear

Shape and size of Pinna-Normal

Microtia & Macrotia- absent

Colour and texture- Reddish, tenderness present (Rt ear)

Oedematous(Rt ear)

Wound present on anterior part of right ear (Rt ear)

Serous discharge seen (Rt ear)

Left ear- Normal

Examination of middle ear, Tympanic membrane,

Tuning fork test- Normal

Case Concept and Line of Treatment

Perichondritis results from infection secondary to lacerations, Haematoma or Surgical incisions. It can also result from extension of infection from diffuse otitis externa or a furuncle of meatus. Pseudomonas and mixed flora are the pathogens responsible. Initial symptoms are red, hot and painful pinna which feels stiff. Later abscess may form between the cartilage and perichondrium with necrosis of cartilage. In Ayurveda this can be correlated to *Vidarika* which is one among *Karnapaligata Roga* specially mentioned by Acharya Vagbhata, he mentions its signs and symptoms as painful, static, skin coloured swelling seen in *Karnashaskuli* (here its seen in Anti helix region) due to the vitiation of *Tridosha*. He also mentions it as an *Asadya Vyadhi* but also quotes that *Amavasta* can be taken as *Sadhya* and *Pakwavasta* as *Asadhya*.

Date	Treatment Given	Result
13/02/2019	Stanika Abhyanga With Moorchitha Tila Taila Patrapinda Sweda Guggulu Dhooma Karna Pichu With Jatyadi Taila Karna Pali Prakshalana With Panchavalkala Kwatha Trayodashanga Guggulu 2 TID	Pulling type of pain in right pinna Pain right side of head Swelling in right pinna Mild discharge Redness and itching in right pinna
14/02/2019	Stanika Abhyanga With Moorchitha Tila Taila Patrapinda Sweda Guggulu Dhooma Karna Pichu With Jatyadi Taila Karna Pali Prakshalana With Panchavalkala Kwatha Trayodashanga Guggulu 2 TID	Pulling type of pain in right pinna persisted Pain right side of head slight relief Swelling in right pinna Mild discharge Redness and itching in right pinna
15/02/2019	Stanika Abhyanga With Moorchitha Tila Taila Patrapinda Sweda Guggulu Dhooma Karna Pichu With Jatyadi Taila Karna Pali Prakshalana With Panchavalkala Kwatha Trayodashanga Guggulu 2 TID	Pulling type of pain in right pinna Pain right side of head reduced Swelling in right pinna reduced Mild discharge Redness and itching in right pinna-slight relief
16/02/2019	Stanika Abhyanga With Moorchitha Tila Taila Patrapinda Sweda Guggulu Dhooma Trayodashanga Guggulu 2 TID	Pulling type of pain in right pinna persisted but about 70 % reduced Pain right side of head reduced Swelling in right pinna reduced Discharge reduced Redness and itching in right pinna-reduced
17/02/2019	Stanika Abhyanga With Moorchitha Tila Taila Patrapinda Sweda Guggulu Dhooma Trayodashanga Guggulu 2 TID	Pulling type of pain in right pinna persisted but about 40-60% Pain right side of head Absent Swelling in right pinna reduced No discharge Redness and itching in right pinna-absent
18/02/2019	Stanika Abhyanga With Moorchitha Tila Taila Patrapinda Sweda Guggulu Dhooma Trayodashanga Guggulu 2 TID	Pulling type of pain in right pinna persisted but about 20-30%
19/02/2019	Stanika Abhyanga With Moorchitha Tila Taila Patrapinda Sweda Guggulu Dhooma Trayodashanga Guggulu 2 TID	Pulling type of pain in right pinna- absent

Result: Significant changes in signs and symptoms were noticed before treatment and after treatment with short course duration of 7 days. Patient felt good response after 2nd day of intake of treatment. On the last day of commencement of treatment -7th day; he was happy and was free from the condition. On follow

up the sign and symptoms didn't reoccur and till date there were no such complaints reported by the patient.

DISCUSSION

In this study a combination of internal medicine along with external therapeutic procedure is been given simultaneously. So, a combination all these medicines

gave the best results. Here *Abhayanga* was done to the pinna and nearby areas, *Snehana* is a measure adopted to bring *snigdha* in our body. *Vidarika* is a *tridoshaja vyadhi* and as the patient was also complaining of pulling type of pain in pinna, with the *Snehana* and *swedana* effect this complains got reduced. For *snehana moorchitha tila thaila* was used, *Tila Taila* has properties like *Snehana*, *Sandhaniya*, *Rasayana*, and also other properties. Whereas *swedana* was done by *patrapinda sweda* which has many *vatakaphahara* drugs as ingredients in making the potli used for *patrapinda sweda*. Mainly *Nirgundi*, *Eranda*, *Arka*, *Shigru*, *Agnimanta* etc. leaves are used here, these possess *Kapha-Vata Shamaka*, *Rasayana*, analgesic and anti-inflammatory properties, which helps in reduction of the swelling. *Guggulu dhooma* was given after the *Snehana* and *Swedana*. *Guggulu* has *vatahara* property. *Guggulu* is beneficial in cleansing and healing of wounds and to reduce oedema due to its anti inflammatory and antiseptic properties. Here *Jatyadi thaila karna pichu* is kept on the pinna for 3 days and acquired result was obtained as *Jatyadi Thaila* possess properties like *Shothahara*, *vedanastapana* and *Ropaka* the wound healed, and discharge stopped. Whereas *Panchavalkala Kwatha* as name suggests *Kashaya* made up of *Panchavalkala* that is a group of bark of five trees *Vata*, *Ashwatta*, *Plaksha*, *Parisha*, *Udumbara* is found to be very effective in *vraha Shodana* and *Ropana* property. *Trayodashanga Guggulu* which is a combination of 13 drugs and *Guggulu* as main ingredients acts as *Shoolaprashamana*, *Tridosha Shamaka*, *Shothahara* and *Vranahara* action. Thus, by the combination of all these drugs acted well in this case and improvement with best results was seen with no reoccurrence till date.

CONCLUSION

Vidarika was told in classics is an *Asadya Vyadhi* but acharya has also mentioned that it can be treated and by these treatments we can prove that an attempt can be made for treating cases like *Vidarika* or perichondritis. *Sthanika Abhyanga* and *Patrapinda sweda* helps in released pain, relaxation of the muscles, activated the local metabolic process, increased local blood flow, and thus increased the absorption of *Sneha* through the skin. After administration of *Swedana*, it might produce a hypoanalgesic effect by diverted stimuli. *Guggulu* has *yogvahi* property which makes it useful in this condition.

Acharya Charaka and Vagbhata has mentioned in our Samhitha that *Karnapoorana* can should be done as daily routine to keep away from ear diseases, simple *Tila Taila* can also be used for this purpose.

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