

Ayurvedic approach to *Shitada* (Gingivitis)- and its Management with *Triphaladi Kwath Gandusha* and *Pippali Churna Pratisarna*– A Case Report

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Abstract:

Gingivitis is a reversible oral disease that refers to gingival inflammation induced by bacterial biofilms, also called plaque, adherent to tooth surfaces. In Ayurvedic classical texts there are many treatment modalities given e.g. *Pratisarna*, *Raktamokshana* and some internal medicine for systemic cause of *Shitada*. In present study we have discussed a case of 22 years old male patient came to our OPD with chief complaints of foul smell from mouth, bleeding from gums on brushing and spitting, generalised inflamed gums and blackish discoloration of gums from last two months. On examination of oral cavity; oral hygiene was fair, hallitosis, poor gums consistency, bleeding from gums, calculus was found. Ayurvedic treatment was planned and *Triphaladi Kwatha Gandusha* and *Pippali Churna Pratisarna* was started.

Key Words - Bleeding gums, *Gandusha*, Gingivitis, *Shitada*, *Triphaladi Kwatha*.

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Introduction

Oral cavity is a unique area of the body which is also known as the window of G.I.T. because many systemic disease can be clinically correlated upto some extent. If oral hygiene is not maintained properly than its sequale can be quite dangerous. Without treatment gingivitis can progress to periodontitis, in which the inflammation of the gums results in tissue destruction and bone reabsorption around the teeth which is more serious and can eventually lead to loss of teeth in 40-45% of population of India^{[1][2]}. Gingivitis is known as inflammation of gums usually caused by bacterial infection, it can become a more serious infection known as periodontitis. According to American Dental Association gingivitis and periodontitis are major cause of tooth loss in adults. Dental infections can add up to health as well as wealth of the person. According to the centres for Medicare and Medicaid, Americans spent an estimated \$117 billion on dental service in 2015. Gingiva actually attaches to the teeth at a lower point than the gum edges that we see, this forms a small space called sulcus. Food and plaque can get trapped in this space and cause a gum infection or it may leads to gingivitis on chronic accumulation of food or plaque. Plaque

is a thin film of bacteria which is continuously formed on the surface of teeth, as plaque advances it hardens and gets converted into tartar, when plaque extends below cervical line it may leads to bacterial infections like Gingivitis. If left untreated this bacterial infection can leads to detachment of gums from tooth surface and the tooth/teeth may become loose and unstable. So in this case the aim was to evaluate the efficacy of *Triphaladi Kwatha Gandusha*, and *Pippali Churna Pratisarna* in the management of *Shitada* (Gingivitis).

Case Report:

A 22 years old male patient visited OPD of *Shalakyatantra*, IPGT and RA Hospital, Jamnagar with complaints of foul smell from mouth, bleeding from gums on brushing and spitting, generalised inflamed gums and blackish discoloration of gums from last two months. On examination the Oral Hygiene-Poor, Hallitosis (grade 4), Poor gums consistency (grade 2) Bleeding from gums (grade 3) and Calculus (grade 1) were noticed. In personal history, mixed diet, poor appetite, disturbed sleep, constipated bowel, bladder: Normal, *Madhyama Koshtha*, *visham Agni*. Vitals are PR-74/mintues, BP-120/80 mm Hg, RR-14/mintues, Temp.-37°C found.

Assessment Grades:

Table-1:Foul smell from mouth

Foul smell from mouth	Score
Absence of bad odour	0
Slight bad odour which decreases after mouth wash	1
Moderate bad odour rarely decreases after mouth wash	2
Persistent bad odour even after repeated mouth wash	3

Table-2:Bleeding from gums

Bleeding from gums	Score
Absence of bleeding	0
Slight bleeding on brushing or occasional bleeding	1
Moderate bleeding on brushing or eating hard articles	2

Severe bleeding on brushing or even on chewing food	3
Spontaneous bleeding	4

Table-3:Generalised inflamed gums

Generalised inflamed gums	Score
Absence of inflammation	0
Mild inflammation, slight change in colour and in texture of the marginal or papillary gingival unit	1
Moderate inflammation, glazing redness, oedema of the marginal or papillary gingival unit	2
Severe inflammation, marked redness, oedema of the marginal or papillary gingival unit	3

Table-4:Blackish discoloration of gums

Blackish discoloration of gums	Score
Normal (pinkish red)	0
Slight discoloration of gums, reddish	1
Moderate discoloration of gums, reddish blue	2
Severe discoloration of gums, bluish red, or blue	3

Table 5: Observations in weekly assessment :

Symptoms	1st Week	2nd Week	3rd Week	4th Week
Foul smell from mouth	+++	++	+	-
Bleeding from gums on brushing and spitting	+++	++	+	-
Generalised inflamed gums	+++	+	-	-
Blackish discoloration of gums	+++	+	+	-

Treatment:

Triphaladi Kwatha (*Bhaisajyaratnvali, Mukharoga chiktisa prakaran 61/10*) in a dose of 20ml twice daily for *Gandusha*, Morning and Evening.^[3] *Kwatha* had been prepared as per the classical *Kwatha Kalpana Vidhi* as mentioned by Acharya Sharangdhar and *Pippali Choorna Pratisarna* for 1 month.^[4] Also the patient was advised to maintain his oral hygiene by appropriate tooth brushing.

Pathya: *Yava* (Barley), *Mudga* (Green Garm), *Kulattha* (Horse Gram), *Shatavari* (Asparagus),

Karavellaka (BitturJuard), *Patola* (Pointed gourd), *Ushnodaka* (Boiled Water), *Tambula* (Betel), *Ghrita* (Ghee), *Khadira* (Catechu), *Katu – Tikta Dravya* (Bitter,Spicy food).^[5]

Apathya: *Snana* (Bath), *AmlaDravya* (Sour food), *Matsya* (Fish) ,*Dadhi* (Cured), *Kshira* (Milk), *Guda* (Jaggery), *Masha* (Black Garm), *Rukshanna* (Arid food), *Kathina Dravyas* (Soid food), *Guru* (Heavy food), *Abhishyandhi Ahara* (Deliquescent food), *Diva Swapna* (Day sleep), *Adhomukha shayana* (Sleeping in erect position).^[6]

**Fig-1: Before Treatment****Fig-2: After Treatment****Result and Discussion:**

After the internal medication of 1 month, the oral examination of patient was done and asked orally about any symptomatic relief in complaints which the patient was having 1 month ago, the patient was fully satisfied with the treatment protocol and all the chief complaints (halitosis, bleeding gums, poor contour of gums, discoloration of gums) were resolved completely (Table 5).

There has been a general perception that oral health in India is considered to be least important. Albandar in an overview concluded that subjects of Asian ethnicity had the third highest prevalence of periodontitis.^[7] Bacterial plaque accumulates in the spaces between the gums and teeth and in calculus (tartar) that forms on the teeth. As Gingivitis (*Shitada*) is a very common and the most complicated disease of the oral cavity. Its description in classical texts is found under *Dantamoolagata Vyadhi* and it has been mentioned in classical texts that most of the *Dantamoolgata Vyadhis* occur due to *Kapha* and *Rakta Dushti*.^[8] So in the present case study an attempt has been made to treat *Kapha* and *Rakta Dosha* at systemic level.

The ingredients of *Triphaladi Kwatha* are having *Kasaya*, *Katu Rasa* which decreases the *Kapha* and stops bleeding.^[9] It dries up the excessive fluid and decreases the inflammation. The drugs by their *Laghu*, *Ruksha* properties help in *Chhedana* of vitiated *Kapha* that can also be correlated with plaque. Most of the drugs possess anti-inflammatory and anti-bacterial activities. Due to these it can prevent recurrent infections and reduces inflammation. *Pippali Churna* for *Pratisarna* is used due to its *Lekhana* property on the materia alba and dental plaque. So, overall relief was observed in gingivitis as there is overall improvement in chief complaints of the patient.

Conclusion:

Finally it can conclude that *Triphaladi Kwath Gandusha* and *Pippali Churna Pratisarna* is beneficial in the management of *Shitada* (Gingivitis) and need to try this formulation in more cases. Large sample study on same drugs should be carried out to bring authenticity to science.

References:

1. Kumar D, Parkhi V, Vaghela DB, Clinical effect of *Manjisthadi Kwatha* orally and *Pippali Churna Pratisaran* in the management of Gingivitis – A Case Study. Int. J AYUSH CaRe. 2019; 3(1): 28-31.
2. Shah N. National commission on Macroeconomics and Health, Ministry of Health and Family Welfare. New Delhi: Government of India; 2005, Oral and dental disease :Causes, prevention and treatment strategies- Burden of disease in India (New Delhi), p.275-98.
3. Siddhinandan M. editor Bhaisajyaratnvali, Mukharoga chiktisa prakaran 61/10, 1st edition, Chaukhambha Surbharati Prakashan, Varanasi, 2015, p.966.
4. Sri Brahma SM commentator Bhavprakash Samhita Madhyam khanda Mukharogadikara 66/1 part 2 reprint edition chaukhambha Sanskrit Bhawan Varansi, 2009; p- 701.
5. Brahmashankara S., editor. Yogaratnakar Mukharoga Nidanaprakarana 1-3, reprint edition Chaukhambha prakashana, Varanasi, 2015, p. 287
6. Brahmashankara S., editor. Yogaratnakar Mukharoga Nidanaprakarana 1-3, reprint edition Chaukhambhaprakashana, Varanasi, 2015, p.287.
7. Albandar JM, Rams TE. Global epidemiology of periodontal diseases: An overview. Periodontology disease. 2002;29(1):7-10.
8. Acharya YT editor Sushruta Samhita, nidana sthana, mukharoga nidana, 16/1-3 reprint edition Chaukhambha Surbharati Prakashana, Varanasi, 2003, p.383.
9. Siddhinandan M. editor of Bhaisajyaratnvali, Mukharoga chiktisa prakaran 61/10, 1st edition Chaukhambha Surbharati Prakashan, Varanasi, 2015 p. 966.

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