



#### **CASE STUDY**

# Role of Ayurveda in the Management of Enlargement of Adenoids (*Kanthashaluka*): A Single Case Study Analysis

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# **ABSTRACT**

Adenoid hypertrophy is one of the foremost causes of nasal obstruction, causing alterations to the EAC (external auditory canal) and Eustachian tube dysfunction and sleep disorders such as snoring and obstructive apnoea resulting in educational and social issues. Inefficient medical management regarding the re-occurrence of symptoms and disinclination to surgery necessitates an alternate approach. This case study is taken with the Ayurvedic approach consisting of Ayurvedic oral preparation and *kriyakalpa* to fulfill this aim. The female child of 12 years old has complained of mouth breathing at night due to difficulty in breathing for 2-3 years on an off basis. X-ray of the skull shows an enlargement of adenoids which have been treated by ayurvedic medication and *nasya* and *nasalepa* successfully. There has been no reoccurrence of the condition till now in this patient.

Key Words Adenoids, Kanthashaluka, Nasya, Nasalepa, Ayurveda

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# INTRODUCTION

When hypertrophied nasopharyngeal tonsils begin creating indications, the condition alluded to as adenoids. Adenoids are a mass of lymphoid tissue located at the back of the nasal cavity, near the opening of the Eustachian tubes. They are part of the immune system and protect the body from infections by trapping bacteria and viruses that enter the nose.

The adenoids are most prominent in early childhood and tend to shrink as a child grows older. Often the hypertrophy of adenoids is physiological, but it is considered to be unhealthy if it produces symptoms. However, in some cases, the adenoids may enlarge due to various factors like infections, allergies, and genetic factors. It causes various symptoms like nasal congestion, mouth breathing, snoring sleep disturbance, and tubal obstruction in the ear.<sup>1</sup>

The adenoids are removed by surgical intervention called adenoidectomy. Adenoid infection may cause symptoms such as difficulty in breathing from the nose, which can be treated by its removal. Studies have shown that adenoid

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regrowth occurs in 20% of the cases after Post-operative complications removal. include vomiting, severe dysphagia, pain, and bleeding.

In Ayurveda, adenoid enlargement can be well correlated with Kanthashaluka owing to the marked similarities of the clinical presentations of these two disease entities. Kanthashaluka is the vyadi described by Acharya Shushrut and Acharya Vagbhat in kanthagata rogas. The mentioned in Sanhita treatment shodhana nasya and nasalep along with internal medication<sup>2</sup>.

# CASE REPORT

The 12-year-old female child reported to the Shalakya OPD presenting with the symptoms of sleep apnoea and mouth breathing at night mostly while sleeping for 3-4 months, rhinosinusitis and difficulty in breathing by the nose. As per her guardians, she was hale and hearty i.e.

asymptomatic 2 years back. Gradually she started these symptoms which went on increasing slowly and slowly. To get emancipation from this disease she was given medicines from a local doctor. Getting no remarkable relief, the guardian visited the senior physician. The child was given antibiotics and nasal decongestant spray as a treatment, but didn't have any relief. The X-ray / was done by the physician to confirm the diagnosis. Having assumed the medical management was inefficient, the physician directed the guardians of the patient to switch over to adenoidectomy. To get non-surgical Ayurvedic management, the patient was brought into Shalakya OPD.

- Past medical history No any history of major illness
- Past surgical history No any surgical history.
- No known history of genetic disorder.

#### **EXAMINATION**

Table 1 Examination of ear, nose, and throat

Tuble 1 Examination of car, noise, and throat			
1.	Ear examination	B/L TM retracted	
2.	Nose examination	B/L inferior turbinate hypertrophy, Nasal Mucosal Congestion, watery discharge	
3.	Throat examination	PPW congestion, mild tonsillar enlargement	
INVE	STIGATION	As mentioned in the Sanhitas the treatment of	

#### INVESTIGATION

X-ray of a nasopharyngeal view of the skull shows an enlargement of adenoids. (Figure No. 1)

As mentioned in the Sanhitas, the treatment of Kanthashaluka is the shodhan nasya and nasalepa along with internal medicines (table no.2 and 3).

## AYURVEDIC MANAGEMENT

**Table 2** Therapeutic index – Avurvedic Krivakalpa and Internal medicine

Sr. No.	Medicine name	Dose	Route of	Duration
			administration	
1.	Nasya- Shadbindu tail³	6 drops in each nostril in	Nasal route	2 cycles of 7 days with a
		the morning		gap of 7 days
2.	Nasalepa <sup>4</sup> – vacha: musta: shunthi	At the morning and	l Local application	14 days



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	in 1:2:1 ratio	bedtime		
		Internal medicines		
3.	Kanchnar guggul⁵	1 TDS	Orally after food	14 days
4.	Laxmi Vilas Ras <sup>6</sup>	1 TDS	Orally after food	14 days
5.	Sukshma triphala vati	1 TDS	Orally after food	14 days
6.	Pathyadi kwath $^7$ + amrutarishta $^8$	2tsp+2tsp BD	Orally after food	21 days
7.	Sitopaladi churna <sup>9</sup>	½ tsp TDS	Orally with honey	14 days

### **Contents of medicines**

Table 3 Ingredients of Ayurvedic medicines used for treatment

Sr. No.	Medication name	Ingredients
1.	Kanchnar Guggul	Kanchnar, twak, amalaki, bibhitaki, haritaki, shunthi, krishnamarich,
		pippali, varun, guggul.
2.	Laxmi vilas ras	Shuddha parad, Shuddha gandhak, abhrak Bhasma, Kapoor, javitri,
		jaiphal, vidhara seed, vidarikand, shatavari, nagabala, atibala, gokharu,
		samudraphen, nagvel patra swaras.
3.	Sukshma triphala	Shuddha parad, Shuddha gandhak, amalaka, bibhitaki, haritaki.
4.	Pathyadi kadha	Haritaki, bibhitaki, amalaki, kirattikta, haridra, nimba, guduchi, dhataki,
		gud
5.	Amrutarishta	Guduchi, shunthi, marich, pippali,dashmool kwath,shwet jeerak,
		saptaparni, musta, katuka, ativisha, indrayav, nagkeshar
6.	Sitopaladi churna	Sita, vanshlochan, ela, twak, pippali,
7.	Shadbindu tail	Bhringraj, erandmool, tagar, soya, jeevanti, rasanapatra, saindhav,
		ajadugdh, shatpushpa, shunthi, krushnatil, vidanga, yasthimadhu
8.	Nasalep	Vacha, musta, shunthi

# OBSERVATION AND RESULTS

# After 15 days of the treatment:

The patient came for a follow-up after 15 days and a local examination of the ear, nose, and throat was done showing mild improvement. (table no.4).

Table 4 Examination of ear, nose, and throat after 15 days

1.	Ear Examination	B/L TM intact
2.	Nose Examination	Mucosal congestion
		B/L
3.	Throat Examination	PPW congestion
A ft.	u 1 month of the tweet	manti

#### After 1 month of the treatment:

The patient came for a follow-up after 15 days again and a local examination of the ear, nose, and throat was done showing improvement with complete symptomatic relief. (table no.5)

**Table 5** Examination of ear, nose, and throat after 1 month

1.	Ear Examination	B/L TM intact	
2.	Nose Examination	NAD	
3.	Throat Examination	NAD	

• X-ray of the nasopharyngeal view of the skull is repeated after 1 month. (Figure no.2)

After 1 month of ayurvedic treatment, the patient has complete symptomatic relief. The X-ray also shows no abnormality in the nasopharynx related to enlarged adenoids. The patient was cured completely within 1 month by ayurvedic medicine treatment without any surgical intervention.

# **DISCUSSION**

In Ayurveda, the enlarged adenoid is correlated with *kanthashaluka* which is described in *kanthagata rogas*. In this disease, the *vaat* is *avrutta* by *kapha dosha*, so *vaatanulomak and kaphanashan chikitsa* should be done. Ayurvedic treatment includes *shodhan nasya, nasalepa* and



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internal medicine. In this case, the *nasya* with a *shadbindu tail* gives nerve stimulation and helps in the *dravikaran* and *chhedan* followed by

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REF BY : DR. SUNITA MAGAR

AGE: 12 YEARS / FEMALE

DATE: 23/11/2023

XRAY NASOPHARYNX: LATERAL VEW

Soft tissue is seen along the postero superior portion of the nasopharynx s/o
enlarged adenoids.

Mild narrowing of the airway is seen at this level.

Rest of the visualized airway appears normal.

Epiglottis and soft palate appear normal.

Visualized portions of the mandible, skull and cervical spine appear unremarkable.

Impression:

Findings are suggestive of enlarged adenoids.

Suggested: further evaluation and follow up if clinically indicated

Note: This is professional opinion, not the final diagnosis & should be interpreted in the light of clinical background and other investigations. This report is not for medico logical purposes. Always suggest a second opinion if clinically indicated.)

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anuloman of kapha and vaat doshas. Nasalepa relieves the inflammation of nasal mucosa hence removing the sensation of blocking of nose.



Figure 1 X-ray skull nasopharyngeal view (Before Treatment)





Figure 2 X-ray skull nasopharyngeal view (After Treatment)







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After 1 cycle of *nasya* and *nasalepa* significant relief is seen symptomatically and also in local examination. Internal medicine is also given. *Kanchnar guggul* helps to reduce lymphoid tissue swelling. *Sukshma triphala* and *Lakshmi vilas ras* do the *kaphanashan* and help to relieve symptoms of rhinosinusitis due to the property of *sukshmstrotogamitva*. *Sitopaladi churna also does Kaphanashan* and relieves the congestion in the throat. *Pathyadi kwath and amrutarishta* help in building the immunity of the body as well as regulate the vitiated *tridoshas* in the body.

# **CONCLUSION**

A combination of Shadbindu tail nasya, nasalep along with internal medication proved to be effective in the management of enlarged adenoids. Ayurvedic medication has great potential to be effective in Adenoid enlargement without any surgical treatment. If the patient approaches earlier then better results can be given in a short duration. Do's and Don'ts should be properly guided during and after the treatment.





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