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Management of Vocal Cord Palsy through Ayurveda: A Special Case Report

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I. INTRODUCTION-

The word paralysis refers to complete or partial loss of function especially when involving the motion or sensation in a part of the body. Vocal cord paralysis refers to reduced or absence of movement of both vocal folds. It can cause laryngeal dysfunction ranging from slight hoarseness to lifethreatening airway obstruction. Etiologies include neoplasm, surgical iatrogenic injury, and blunt and penetrating trauma in the head, neck, and thorax, inflammatory and infectious conditions. The increased incidence of post thyroidectomy vocal cord paralysis has also been reported. The common symptoms include, altered voice quality, hoarseness of voice, difficult to swallow and weak cough. It can have a significant impact on the suffers's daily life, including employment, social contacts, and leisure activities¹. Acharya Sushruta² while explaining Swarabhedapratishedha adhyaya, he mentions pravratathe kshamaswara.krichrat swaram. khurkhuratwa of shabdha as the lakshanas of Swarabheda. The symptoms observed in vocal cord palsy can be equated with that lakshanas of Swarabheda. Here is an interesting case study on vocal cord palsy with specific treatment modalities has played a role in pacifying the condition.

Case details

A 60 yrs old male patient reported to shalakya OPD of SKAMCH & RC Bengaluru, with complaints of hoarseness of voice, low pitched voice, difficulty in speaking and tiredness while talking. The history revealed that, in April 2021 after travelling for long distance on two wheelers, on the very next cough, cold and throat day he experienced discomfort. Cough and cold continued for 1 month for which he visited an allopathic clinic near by where he was prescribed with some oral medicines(details unknown) by which he was relieved from symptoms. Gradually after few days, he started experiencing difficulty and tiredness in speaking continuously for more than 2-3 minutes. For this he consulted Rangadore memorial hospital Bengaluru, where he was suggested to do laryngoscopy and CT scan and he was diagnosed with right vocal cord paralysis. He was given with few oral medications (details unknown) and suggested surgery as the last option.But the patient could not find any relief with the oral medications even after one month.So he approached shalakya OPD of SKAMCH &RC Bengaluru, with these complaints on 18/8/21. Clinical examination was done with laryngoscopy and diagnosis was confirmed.





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Before treatment laryngoscopy report- No mobility in right vocal cord, pooling of saliva present, right vocal cord palsy. Thickened right aryepiglottic fold and posterior aspects of right vocal with preserved fat planes-Inflammatory.

Course of treatment given

Date	Treatment given	Observation
18/8/2021 to 25/8/2021	1) Triphala kashaya+ pinch of tankana - Kavala 2) Yastimadhu ksheerapaka gandoosha Orally, 3) Ashwaganda churna with milk HS 4) Dashamoolakatutrayadi kashaya 2tsp TID 5) Agastyaharitaki rasayana 1 tsp BD with milk	 ❖ Complaints of low pitched voice ❖ Difficulty in talking continuously ❖ Hoarseness of voice
26/8/2021 to 15/9/2021	1) Gandoosha with ksheera bala taila Orally, 2) Nishamalaki 2 cap TID 3) Asanadi kashaya 2 tsp TID	 Complaints of low pitched voice Difficulty in talking continuously On blood investigation patient was diagnosed with type 2 Diabetic mellitus. FBS- 252 mg/dl PPBS- 449mg/dl
15/9/2021to 25/9/2021	Sarvanga udwartana with kolakulattadi choorna for 10 days. Sarvanga parisheka with dashamoola kashaya for 10 days.	 Complaints still persists FBS-173 mg/ dl PPBS-239 mg/ dl
26/9/2021 to 29/9/2021	1) Snehapana with murchita tila taila 1st day -30 ml 2nd day-60 ml 3rd day- 120 ml	❖ Complaints still persists
3/10/21	Sarvanga abhyanga with murchita tila taila & bashpa sweda for 3 days followed by Virechana with trivrut lehya 50 gms	❖ Patient noticed reduced hoarseness of voice with improved clarity in speech
15/10/21 to 21/10/21	1) Anutaila nasya 15 drops in each nostrils for 3 days Ksheerabala 101 taila	 ❖ Patient's voice became normal ❖ FBS-110 mg/ dl PPBS-130 mg/ dl



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20 drops nasya for 4 days

Follow- up & Outcome of the treatment:

Patient was treated from 18thAugust 2021 to 21st October 2021 with active intervention for vocal cord

paralysis. A complete recovery in the voice was noticed by the patient after the entire course of treatment.



After treatment laryngoscopy report — Bilateral vocal cords mobile with minimal restriction of right vocal cord for abduction.

II. DISCUSSION:

According to our ayurveda Acharyas swarabheda the condition where a person will have different types of voice(swara) based on vitiated doshas either avarana or prakopa of individual doshas causing obstruction in producing vaak pravrutti which is mainly done by udaana vaata followed by vimaarga gamana of udaana vaata.

Acharya Sushrutha has mentioned Samanya chikitsa for swara bheda as vamana, virechana, basti, nasya,different varieties of kavala in 52nd chapter of uttara tantra³.

Hence in the present case treatment modality started with triphala kashaya, kavala/gandusha, yastimadhu ksheerapaka gandusha, dashamoola katutrayadi kashaya, agastyaharitaki rasayana, ashwagandha choorna.

Triphala kashaya kavala- triphala which is having tridoshahara properties thereby it normalise the vititated doshas⁴.

Yastimadhu Ksheerpaka⁵- yastimadhu is specially indicated as swarya which improves voice and also pacifies pitta as well as vata dosha, as it is having vranaropana & shotahara properties thus helps to reduce the inflammation and soothens the mucosa of the throat.

Dashamoola katutrayadi kashaya⁶- most of the drugs are having ushna virya, vaatakaphahara properties, it reduces the vitiated vata and kapha dosha. Due to its anti-inflammatory and bronchodilatory action it is more helpful in treating the swasana anila kaasadi roga.

Agastya hareetaki rasayana⁷- most of the ingredients are having tikta-kashaya-madhura rasa, laghu-ruksha-teekshna guna, katu vipaka,ushna virya and having kaphavata shaamaka property.

Rooksha poorvaka shodhana⁸- udvartana which is having meda-pravilapa, agnin-deepana, vatahara, siramukha viviktata, gourava hara⁹ hence rookshana in the form of udvartana with triphala and kolaphala churna was beneficial in reducing the dooshita kapha dosha by their usha-teekshnakaphamedohara properties, hence in the present case even the patient was diagnosed with Diabetic mellitus as it is santarpana janya vyaadhi, udvartana was beneficial in preparing the patient shodhana(virechana)¹⁰ which was adopted due to their bahudosha-nirharana shakti , sroto-shodhana effect, pittadosha nirharana, correcting agni has helped in countering the vitiated doshas which are the dushya in the manifestation of swarabheda their by giving significant result in alleviating the symptoms of swarabheda.

Once the avarana was removed by shodhana then brihmana nasya was adopted to counter the prakupita vata thus it normalises the vata dosha.



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Ayurveda management through whole system approach in which treatment initiated for morbid increase in vata along with kapha dosha and was modulated to vata predominant stage and continued with brihmana line of management (regenerative). Ayurveda management showed complete recovery in vocal cord paralysis.

III. CONCLUSION:

This case study shows that proper diagnosis and specific treatment modalities are more effective in the management of vocal cord paralysis (swarabheda). This case study demonstrated that Ayurvedic management helped to regain voice and improve the quality of voice in vocal cord paralysis (swarabheda). These treatments were safe and effective. By adopting Ayurvedic line of treatment in vocal cord paralysis we can prevent the surgery which is only last option of the treatment in allopathic science.

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