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### **“THE EFFICACY OF TRIPHALA KWATH GANDUSH WITH PIPPALI CHURNA PRATISARAN IN THE MANAGAMENT OF SHEETADA WITH SPECIAL REFERENCE TO GINGIVITIS : A SINGLE CASE STUDY.”**

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#### **Abstract:**

Sheetada, a type of Dantamoolgataroga (peridontal disease),is extensively described in Ayurveda. Ayurvedic classics recommend various treatment modalities such as Pratisaran, Gandoosh, and Kavala for managing Sheetada. Formation documented for treating oral cavity disorders like Raktasrava(bleeding gums),Kandu(itching),and Ruja(pain), Krishnatha (discolouration), Shotha (oedema), Mukha Daurgandhya (halitosis), Mrudutha (spongy gums), Prakledatha (moistness). According to Sushrut Samhita, Sheetada develops due to the imbalance of Kapha and Rakta doshas and shows similarities with marginal gingivitis in terms of symptoms, anotomical involvement ,etiology, and prognosis.Gingivitis, characterized by inflammatory responce of the gigiva without the destruction of supportive tissues, swelling, bleeding and exudation.

Gingivitis is a treatable oral condition marked by inflammation of the gingiva brought on by plaque, a bacterial biofilm, sticking to tooth surfaces. Without treatment, gingivitis can progress to periodontitis, a more serious conditon involving gum inflammation, tissue destruction, and bone resorption around the teeth, potentially leading to tooth loss in 40-45% of the indian population.

This case study aims to evaluate the efficacy of Triphala Kwath Gandusha and pippali churn with Madhu Pratisaran with internal medicine in managing Sheetada (gingivitis ). A 33-years-old female patient presented with complaints of bleeding gums, gun swelling, and halitosis.

**Key Words:** Sheetada, Gingivitis, Triphala Kwath, Gandusha, Pippali, Pratisaran

## **Introduction**

The mouth is regarded as a crucial part of the Urdhvjatra(above the clavicle bone) because it reflects overall body health, serving as the gateway of the alimentary canal. Unhealthy habits such as the fast food culture, smoking, and improper oral hygiene have led to ieerversible damage to human health. One of the primary diseases resulting from these factors is Sheetada, mentioned in Ayurvedic classics, which correlates with Gingivitis according to modern dentistry. Oral diseases remain a significant global health concern. In Ayurveda, Sheetada is classified as a Dantamulagatha (periodontal) disorder within the category of Mukha Roga (oral diseases) as described in Sushruta Samhita. Sheetada arises deu to the

vitiation of doshas of Kapha and Rakta doshas and shares similarities with Marginal Gingivitis. in terms of symptoms, anatomical involvement ,etiology, and prognosis as Shushrut Samhita. If left untreated, gingivitis can progress to more severe periodontal diseases, such as periodontitis, leading to irreversible damage to the teeth and supporting structures. Triphala Kwath Gandusha and Pippli churn Pratisaran are Ayurvedic treatment modalities that have been traditionally used for managing oral diseases including gingivitis. Triphala, a well known Ayurvedic formilation consisting of three fruits, exhibits anti-inflammatory, antimicrobial and antioxidant properties. Pippali (Piper longum) is also known for its anti-

inflammatory and anti-microbial effects. This single case study aims to explore the efficacy of Triphala Kwath Gandusha with Pippali Churna Pratisarana in the management of Sheetada, with special reference to Gingivitis. This single case study focuses on providing insights into the effectiveness of these Ayurvedic interventions in managing gingivitis and improving oral health outcomes. This article presents a detailed examination.

### **Aim**

To evaluate the efficacy of Trifala kwath Gandusha and Pippali Churna Pratisaran in the management of sheetada, with a special reference to Gingivitis.

### **Objectives**

1. To assess the effectiveness of Triphala Kwath Gandush and Pippali Churna Pratisaran in reducing the symptoms of Sheetada with special reference to Gingivitis.
2. To monitor and document the changes in oral health condition before and after the ayurvedic treatment, establishing its efficacy in managing Gingivitis.

### **Material and Methods**

A patient presenting signs and symptoms of Shetada visited our Shalaky Tantra OPD. Detailed history was obtained and through examination was conducted. The

patient was treated with Triphala Kwath Gandusha and Pippali Churn Pratisaran for 15 days. Assessment was performed before and after treatment course.

### **A Case Report**

A 33 years-old female came to Shalaky Tantra OPD with chief complaints of Raktasrava (Bleeding gums), Shotha (Oedema), Mukha Daurgandya (Halitosis) since one month and the symptoms aggravated from the past 2 weeks. The complaints get aggravated while taking sweet substances. patient used regular mouthwash but didn't get any kind of relief, so the patient came to our hospital for further management.

Past History: No relevant past medical history.

Family History: No significant disease-related family history.

Personal History: Ahar- She consumed vegetarian food daily, including spicy, fermented, and bakery items, along with excessive intake of sour and salty taste.

Appetite: Good, Sleep: Sound,

Bowel: Regular, Bladder: Normal, Koshta: Madhyama, Ani: sama.

Vitals: pulse- 84/min, BP- 130/80 mm of Hg. RR- 18/min, Temp.- Afebrile. Systemic examination: RS- clear, CVS- S<sub>1</sub>S<sub>2</sub> Normal, CNS- Oriented.

Dasha Vidha Pariksha: Prakruti: Kapha - pitta, Vikruti: Rktaj, Satwa, Sara, Smhana, Ahar Shakti, Vyayam Shakti, Satmya, Praman: Madhyam.

Ashta Vidha Pariksha: Nadi, Mutra, Shabda- are normal. Mala- Constipation, Jihwa- Uncoated, Sparsha- Ushna, Akruti- madyam, Drika- normal.

Specific Examination : Examination of lips, tongue, buccal mucosa- NAD, Teeth- Yellowish, no caries lesions. Examination of Gingiva : Consistency- Oedematous, bleeding on probing. Hallitosis- present.

**Inclusion Criteria:**

- Patient diagnosed with Sheetada (gingivitis) based on Ayurvedic and modern dental criteria.
- Willingness to comply with the treatment protocol and follow-up schedule.

**Exclusion Criteria:**

- Patient With systemic condition affecting oral health (e.g, diabetes, immunocomprised states).
- Patients undergoing other concurrent periodontal treatment.

**Assessment Criteria**

- ❖ Subjective Criteria

- ❖ Akasmath Raktsrava,

- ❖ Shotha,

- ❖ Mukhdaurgandhya,

- ❖ Vedana

- ❖ Objective Criteria

- ❖ Gingival index

- ❖ Gingival bleeding index

**Method of preparation**

1. Kwath : Triphala Kwath was prepared by boiling 10 grams of Triphala (a combination of Amalaki, Bibhitaki and Haritaki) in 200ml of water until the volume reduced to 50 ml. Triphala Kwath was prepared by boiling 10 grams of Triphala (a combination of Amalaki, Bibhitaki, and Haritaki) in 200 ml of water until the volume reduced to 100 ml. The decoction was then strained and cooled to a lukewarm temperature.

2.Churn : Pippali Churn was made by finely powdering dried Pippali.

**Treatment Protocol**

| Sr no . | Ayur vedic Medicine | Do se | Fre que ncy | Administ r ation | A nu pa n | Dur atio n |
|---------|---------------------|-------|-------------|------------------|-----------|------------|
|         |                     |       |             |                  |           |            |

|   |                         |       |             |  |        |         |
|---|-------------------------|-------|-------------|--|--------|---------|
| 1 | Triphala Kwath Gandusha | 20 ml | 2 times/day | The patient was instructed to retain the Triphala Kwath with the head tilted upward, focusing on holding the solution until feeling secretion from nose, eyes, then spit it out. |        | 15 days |
| 2 | Pippli Churn Pratisaran | 1 gm  | 2 times/day | The patient applied Pippli Churna to the gums using clean finger, gently massage the gums for 2-3 min.   | Madhuh | 15 days |
| 3 | Manjishtadi Kwath       | 10 ml | 2 times/day | Internally (oral)  |        | 15 days |

  

|   |                     |        |             |                   |                 |         |
|---|---------------------|--------|-------------|-------------------|-----------------|---------|
| 4 | Arogyavardhini vati | 250 mg | 2 times/day | Internally (oral) | Luke warm Water | 15 days |
|---|---------------------|--------|-------------|-------------------|-----------------|---------|

**Follow up**  
 → The patient was followed up at 7th and 15th day of treatment to evaluate the improvement in clinical symptoms and overall oral health.

**Observation and results**

| Sr No | Criteria                                   | Grading scale  | Before Treatment | After Treatment |
|-------|--|--|------------------|-----------------|
| 1     | Subjective criteria<br>Akasmath Raktstrava | 0-None -No bleeding<br>1-Rare-Occasional bleeding<br>2-Frequent-Frequent bleeding episodes<br>3-Continuos-Continuos bleeding | 3-Continuous     | 1-Rare          |

|   |                                   |  |                          |              |
|---|-----------------------------------|--|--------------------------|--------------|
| 2 | Shotha                            | 0-None-No swelling<br>1-Mild-Mild swelling<br>2-Moderate-Moderate swelling<br>3-Severe - Severe swelling               | 3-severe                 | 1-Mild       |
| 3 | Mukhd aurgandhya                  | 0-None-No bad breath<br>1-Occasional-Occasional bad breath<br>2-Persistence-Persistence bad breath                     | 2-Persistence bad breath | 1-Occasional |
| 4 | Vedana                            | 0-None-None pain<br>1-mild-Mild pain<br>2-Moderate=Moderate pain<br>3-Severe-Severe pain                               | 3-Severe                 | 1-Mild       |
| 5 | Objective Criteria Gingival index | 0-None-no inflammation<br>1-Mild-Mild inflammation<br>2-Moderate-Moderate inflammation<br>3-Severe-Severe inflammation | 3-Severe                 | 1-Mild       |

|   |                         |   |          |        |
|---|-------------------------|---|----------|--------|
| 6 | Gingival bleeding index | 0-None-No bleeding upon probing<br>1-Minimal-Minimal bleeding upon probing<br>2-Moderate-Moderate-bleeding upon probing<br>3-Severe bleeding upon probing | 3-Severe | 1-Mild |
|---|-------------------------|---|----------|--------|

### Discussion

The observed clinical improvements were analyzed in the context of Ayurvedic principles and modern periodontal therapy to understand the integrative benefits of the treatment.

Probable Mode of Action of Triphala Kwath Gandusha

Gandusha (oil pulling) works by removing toxins and debris from interdental spaces, marginal areas, and gingival margins, effectively cleansing the oral cavity. It enhances drug penetration into the oral mucosa. The use of lukewarm Triphala Kwath aids in dilating blood vessels in the oral mucosa, facilitating the absorption of active ingredients present in the medicine. This process strengthens the roots of the teeth. The drugs in this preparation have anti-inflammatory, anti-infective, and

antioxidant properties, promoting faster healing. Gandusha with this decoction also helps reduce specific harmful bacteria in the oral cavity.

Probable Mode of Action of Pratisaran

Pippali Churna for Pratisarna is used due to its Lekhana property on the materia alba and dental plaque. Pralepa effectively removes food debris, plaque, necrotic tissue remnants, inflamed granulation tissue, and bacterial colonies, thus eliminating the primary causative factors of the disease. It increases the rate of gingival crevicular fluid

production, which inhibits bacterial diffusion into the tissues due to its content of phagocytic leukocytes, specific antibodies, and enzymes. Pralepa also promotes salivation, facilitating faster healing. Additionally, the presence of Madhu (honey) provides cleansing, debriding, anti-inflammatory, and antibacterial properties, making it an excellent healing agent.

Probable Mode of Action of Manjistha Kwatha

Manjistha Kwatha's Laghu and Ruksha qualities act on Kapha and Pitta Dosh, providing a balancing effect and possessing Rakta Shodhaka (blood purifying) properties. As a result of blood

purification, relief from bleeding gums, the main symptom of Sheetada, is observed.

Arogyavardhini Vati works by:

Balancing Rakta dosha (blood component). Detoxifying the body. Improving digestion and metabolism. Balancing Pitta and Kapha doshas. Boosting immunity. Exhibiting anti-inflammatory and antioxidant effects.

### **Conclusion:**

Triphala Kwath Gandush helped in cleansing the oral cavity, reducing inflammation, and promoting absorption of active ingredients. Pippali Churna Pratisaran facilitated direct application of medication to the affected gums, promoting healing and reducing bacterial growth. The findings suggest that the combination therapy of Triphala Kwath Gandush with Pippali Churna Pratisaran can be effective in managing Sheetada with a special focus on Gingivitis. This approach offers a holistic and potentially beneficial treatment option for gingival health. However, further research with larger sample sizes is warranted to validate these findings and explore its efficacy in a broader population.

### **References:**

1. Ashtanga Hrudaya with Commentaries of Sarvangasundara of Arunadatta &

Ayurveda Rasayana of Hemadri edited by

Pt. Hari Sadashiva Shastri

2. Ashtanga Sangraha with Hindi Commentary, by Shri. Kaviraja AtridevaGupta, Vol-1; Chowkhamba Krishnadasa Academy; Varanashi. Reprint (2002) P 25

3. Sushruta Samhita with the Nibhanhasangraha Commentary of Shri Dalhanacharya edited by Vaidya Yadavaji Trikamji Acharya; Choukambha Sanskrit Samsthana, Varanashi Re- print(2010); p.55

4. Ashtanga Hrudaya with Commentaries of Sarvangasundara of Arunadatta and ayurveda Rasayana of Hemadri edited by Pt. Hari Sadashiv Shastri Paradakara,Choukambha Sanskrit Samsthana, Varanashi Reprint(2012)p.300

5. Ashtanga Sangraha with Hindi Commentary, by Shri. Kaviraj Atrideva Gupta, Vol- 1, Chowkhamba Krishnadasa Academy; Varanashi. P.223

6. Sharangadhara: Sharangdhar Samhita of Pandita Sarangadhara with Commentaries of Adhamalla Dipika & KashiramaGudharth Dipika, edited by Pandita Parashuram Shastri Vidyasagar, Chaukhamba Publication, New

Delhi,Reprint (2013). p.352

7. Ibid. VriddhaVagbhatt: Ashtanga Hrudaya Sutrasthana 22/3-4, p.299