



**AN AYURVEDIC APPROACH OF SARVASARA MUKHROGA WSR ORAL
SUBMUCOSA FIBROSIS (OSMF) – A CASE STUDY**

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ABSTRACT:

Oral Submucosa Fibrosis is on steady rise due to excessive use of betel nut chewing and tobacco consumption in various form. the fibrosis stays refractory and grossly baulk the quality of life young male begins the most affected group. This condition has more reflects adversities beyond one individual health. On analyzing the disease condition with *Ayurveda* approach, it seems to be nearer to the *Vata-Pitta* dominant chronic *Sarvasar mukhroga* and need to be treated at local as systemic level. in present case study 25-year male patient was diagnosed with *Sarvasar mukhroga*. was treated with *Sathanik Snehana Swedan, Kaval Mukha Pratisaran* along with *Saman Chikitsa*. these therapies Provided marked improvement in the sign and symptoms.

Key words: *Sarvasar mukha roga, Oral submucous fibrosis, Kaval, Mukhapratisaran, Saman Chikitsa*

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INTRODUCTION

Ayurveda that deals with the diseases of the supraclavicular region ^[1]. The *Mukha* i.e. oral cavity is gateway to human body the diseases of this part should be dealt carefully. *Mukhagata vyadhis* have been described by *Acharya Sushruta* in *Nidana Sthana* chapter 16; *Acharya Sushruta* has described 65 *Mukhagata rogas* and classified them into seven subsites i.e. *Oshtha*, *Danta*, *Dantamulagata*, *Jihva*, *Talu*, *Kantha* and *Sarvasara* ^[2] OSMF can be included in *Sarvasara Rogas*. *Vagbhat* at many contexts mentions many features relatable to OSMF as ulceration, restricted mouth opening, oral burning sensation oral dryness and fibrosis etc.^[3] The treatment modalities for the initial stages include discontinuation of addictive habits, nutritional support, antioxidants, physiotherapy, immunomodulatory drugs, local infiltration of steroids, hyalurodinase, human placental extract etc^[4] whereas the advanced cases warrant scalpel intervention.^[5] Ayurveda which is holistic science opens new horizon this disease. Efficacy of *Kaval* has been studied in this case study. *Kaval* strengthens oral mucosa and hence promotes easy penetration of the drug, hypothesised to mitigate *Vata Pitta* vitiation to reverse the clinical picture of OSMF.

Oral Sub Mucous Fibrosis (OSMF) is defined as an insidious chronic condition of unknown ethology affecting the oral mucosa characterized by dense collagen tissue deposition within submucosa, occasionally extending to the pharynx and esophagus. ^[6] The disease is characterized by blanching and stiffness of oral mucosa, trismus, burning sensation, loss of mobility of tongue and loss of gustatory sensation. There may be stiff and small Majority of these cases are seen in Indian population. ^[7] The prevalence varies from 0.20-0.5% in India with a higher percentage being found in the southern parts of the country ^[8]. This condition is usually seen in the age group of 30-50 years. Males are more affected than female. tongue, blanched and leathery floor of mouth, fibrotic and depigmented gingiva, rubbery soft palate with decreased mobility and balanced and atrophic tonsils and shrunken bud like uvula, mouth opening become progressively reduced. according to pindborg jj, atrophy of the epithelium increases the vulnerability of the action of carcinogens. Due to irritation by exogenous factors, the atrophic epithelium undergoes hyperkeratinisation, there is intercellular oedema in the pickle cell layers and basal cell undergo hyperplasia. after this carcinoma can develop at any stage. Congestion of blood

vessels due to excessive fibrosis in the connective tissue compromises the blood supply some have demonstration abnormal expression of P-53 tumoursuppressor gene as detected by immunohistochemistry in the epithelium of OSMF. In 1957, desa divided OSMF into three categories. In grade -1 stage of stomatitis and vesiculation. Grade -2 stage of fibrosis. Grade -3 stage of sequel. all these grade having limited treatment protocol such as nutritional support, immunomodular drugs, physiotherapy, local drug delivery, stem cell therapy and surgical management etc. But Ayurveda provide marked improvement in

sign and symptoms of the patient and good quality of life.

Materials and Method-

1. study design: single clinical
2. Informed written consent taken from patient in his language before treatment.
3. For the present study, 25-year male patient having sign and symptoms of *Sarvasar Mukharoga* science 6 months is been discussed in detail manner.
4. Assessment criteria: Based on “sign and symptoms” patient had, before and after treatment.

Burning sensation	score
No <i>Mukhadaha</i> (Burning sensation in mouth)	0
On taking spicy food	1
On taking food	2
Without food	3
Colour of oral mucosa	Score
Pink normal	0
Light pink	1
Pale white	2
Blanched white	3
Ulceration in mouth	Score
Nil	0
Mild	1

Moderate	2
Severe	3
Fibrous band on Palpation	Score
No fibrous band	0
One or two solitary fibrous band	1
Band felt almost on entire surface	2
Adherent fibrous band producing rigidity of mucosa	3

5. Patient was treated with *Panchkarma* therapy along with “oral medicine”.

Case report

A Patient 25-year old, male from Ratlam come to OPD with following complaints

1. Difficulty in mouth opening
2. Burning sensation and red mucosa.
3. Painful and restricted movements of Jaw.

4. ulcer in mouth.

5. intolerance of hot and spicy food.

6. Dryness of mouth.

Patient was apparently since 6 months and gradually started suffering from above complaints. He consulted from government hospital, Indore on 13/09/2022. was Prescribed dexamethasone and Placental extract 4 setting was done. Also H/O- alcohol consuming and smoking from 5-6 year.

Examination

There was formation of bilateral fibrous band in the lateral border of tongue and buccal mucosa. The mouth opening/inter incisal distance 1c.m. the symptoms were recorded during history taking.

Assessment criteria

Symptoms were reviewed and inter incisal distance (IID) was measured with measure

tap by taking the distance between the mesial angles of upper and lower central incisors.

Treatment administered-

The *Nidan Parivarjan* is the 1st line of

treatment in the management of *Sarvasar*

Mukha Roga. 1. *Erandbhrastaharitaki* – 3gr

B.D. (with lukewarm water)

2. Shadbindu tail - 8 drops (each nostril) 3. Sthanik

Abhyang – Ksheerbala oil

4. Sthanik Swedan - Ksheerdhooma (bala &

dasmoola kasaya) 5. Kaval-1. Erimedadi tail (10-15min)

2. Jati patra + haridra (10-15 min)

6. Mukhapratisaran - Madhupippalyadi yoga (5-10 min)

7. Saman chikitsa-1. Tab-Kanchnaar gugglu 2 t.d.s

2. Tab. Chandraprabhavati-2 B.D. 3. Syp. Rasayan yoga 2tsf B.D.

Table-1 Madhupippalyadi yoga

Sr.No.	Name of the Drug	Botanical/Latine name	Part
1	<i>Pippali</i>	<i>Pipper longam</i>	1\2
2	<i>Yastimadhu</i>	<i>Glycyrriza glabra</i>	1
3	<i>Garika</i>	Ochre (Fe ₂ O ₃)	1
4	<i>Jati</i>	<i>Jasminum officinale</i>	1
5	<i>Haridra</i>	<i>Curcuma longa</i>	1
6	<i>Madhu</i>	<i>Apis mellifica</i>	As Required

Table-2 Rasayan yoga

Sr.No.	Name of the drug	Botanical /latine name	part
1	<i>Guduchi</i>	<i>Tinospora cordifolia</i>	1
2	<i>Amlaki</i>	<i>Embelia officinalis</i>	1
3	<i>Gokshura</i>	<i>Tribulus terrestris</i>	1

4	<i>Haridra</i>	<i>Curcuma longa</i>	1\2
5	<i>Yastimadhu</i>	<i>Glycyrriza glabra</i>	1
6	<i>Madhu</i>	<i>Apis Mellifica</i>	As required
7	Ghee		As required

Observations-

Post treatment changes were noted in respect to sign and symptoms there was

significant clinical improvement. The mouth opening was 1c.m. and there was reduction in fibrous band masses (table 3)

Table-3 Post treatment sign and symptoms

Sr.no.	symptoms	Before treatment	After treatment
1.	Burning sensation	3	1
2.	Colour of oral mucosa	2	1
3.	Ulceration in mouth	3	0
4.	Fibrous band palpation	3	2
5.	Intolerance of spicy food	3	0
6.	Inter incisional distance	1c.m.	2 c.m.

DISCUSSION

Though there are many treatment modalities present in the contemporary science but they are not effective and have many side effect too. approach of *Ayurveda* is having a good result without any side effect. The *Sodhan* and *Saman chikitsa* causes strengthening of the oral mucosa hence promotes easier and effective penetration of drugs. Pooga (areca nut – *Areca catechu* Linn.) is having Kashaya Rasa (astringent taste), *Ruksha* (dry), *Sheeta* (cold) and *Vikasi* (causing looseness of tissues and joints by the diminution of vital essence)

properties^[9] Its excessive and constant chewing seems to be the *Atiyoga* (over use) of *KashayaRasa* ^[10] that affects locally predominantly causing *Sthanadushti* (local tissue harm) as well systemically to provoke the *VataDosha* which is the prime factor in the pathogenesis leading to *Rukshata* (dryness), *Kharata* (hardness), *Stambha* (stiffness) and *Shushkata* (atrophy) in *SthanasthaDhatu*s (fibrosis of sub epithelial tissue and atrophy of epithelium of oral cavity). *Tamraparna* (tobacco – *Nicotianatabacum* Linn) ^[11] and lime (alkali) are having *Katu* (pungent), *Ushna* (hot),

Tikshna (penetrating) and *Pitta* provoking properties. Its excessive and constant chewing results in *AgantuVrana* (local irritation and injury) causing local tissue harm while its systemic absorption provoke the *Pitta Dosha* contributing to the disease process. Excessive consumption of chillies and spices can be taken as *Atiyogas* (excessive use) of *katu ras* and *tikshna, ushna dravyas* which act locally as irritant and also provoke *Pitta* along with *Vata* aggravating the disease. Consuming *Alpa* in quantity and *Rukshya* food is responsible for the *Vata* vitiation and *Dhatukshaya* promoting the disease condition.

Probable mode of action –

Oral sub mucous fibrosis is a chronic supraclavicular disease hence holistic management of OSMF should begin with *Kosthashuddhi* (mild purgation) *Acharya Vagbhatta* has stated purification of body and head by *Kosthashuddhi* as the first line of treatment in *Mukharogas*. *Kosthashuddhi* causes *Anulomana* of *Doshas* and prepare the organ for better absorption while *kosthashuddhi* removes the *Srotorodha* (obstructions in channels) and opens the channels for absorption in supraclavicular region which might have enhanced the effect of all the used

drugs and procedures. Most of the drugs of *Rasayana Yoga* are having *Rasayana* (rejuvenating), *Balya, Deepana* (carminative), *Pachana* (digestion), *Shothahara, Vranapaha* (wound healing) and *Tridosha* predominantly *Vata Pitta* pacifying properties. Furthermore, most of the drugs are having immunomodulatory, antioxidant, anti-inflammatory, and cancer preventive properties that may have improved the status of *Dhatus* (tissues). By virtue of *Yogavahi* (has special affinity to carry and potentiate the action of main drug), *Sukshma* and *Sanskaranuvarti* (affinity to carry the properties of main drug along with own) properties, *Madhu* and *Ghrita* serve as a best vehicle for the drugs.

Pratisarana (external application) and *Kaval* (gargling) is the local therapies mostly used in *Mukharogas*. Here, local therapy is to prevent and reverse the fibrosis. *Madhupippalyadi Yoga Pratisarana* has overall *Lekhana* (fibrolytic), *Shothahara* (anti-inflammatory), *Vranashodhana* (wound cleaning), *Vranaropana* (wound healing) and *Vata Pitta* dominant *Tridosha* pacifying effect as well most of the drugs possess anti-inflammatory and antioxidant properties. Fibrolytic and cancer preventive activities of *Haridra* have been proven and its use in OSMF is also

documented in few journals and research works. Furthermore, gentle massage over the oral mucosa in *Pratisarana* improves blood circulation resulting in better absorption of the drugs.

Ksheerabala dhooma is having *Snehana* (unctuous), *Balya* (strength enhancing), *Brimhana* (bulk enhancing), *Ropana* (healing) and *VataPitta* pacifying properties and most of the drugs possess anti-inflammatory, muscle relaxant and tonic properties. The common base of *Balachurna* it is also the best pacifying drug for the *VatajaVikara*. Moreover, pre- and post-procedure of supraclavicular massage and fomentation help to improve circulation to local region increasing absorption of the drugs along with it, movement of mouth in Kavala procedure is also useful as physiotherapeutic measure to relive stiffness.

Thus, complete treatment protocol is helpful to subside ulceration, inflammation and burning sensation and also prevent the further progress. Improving mouth movement, reverses fibrosis in some extent and improve overall immunity which interns increases the strength of oral mucosa and submucosa to overcome the diseases.

Conclusion

In present study *Ayurvedic* treatment protocol ensure the regain of the normalcy of oral mucosa it is effective in the management of oral submucosa fibrosis without any side effect as well as having sustained relief in follow-up. It can be considered as a better alternative to the modern treatment modality in management of OSMF.

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