

Patola–Nimba–Triphala Kwatha Dhavana in the Management of Adhimamsa (Pericoronitis of Wisdom Tooth)- A Case Study

Dr. Priya Nitin Salve¹ and Dr. Kajal Tushar Firake²

¹PG Scholar Shalakyatantra S.M.B.T. Ayurved College and Hospital, Igatpuri, Nashik

²Guide S.M.B.T. Ayurved College and Hospital, Igatpuri, Nashik

Abstract: *Adhimamsa is a Mukharoga described in Ayurvedic classics, characterized by excessive soft tissue growth, inflammation, pain, and difficulty in mastication. Clinically, it closely resembles pericoronitis of wisdom tooth an inflammatory condition of the soft tissues surrounding a partially erupted third molar (wisdom tooth). Modern management includes antibiotics and surgical intervention, which may have limitations such as recurrence and adverse effects. Ayurveda offers local therapeutic measures like Dhavana (oral irrigation), which is effective in controlling local inflammation and infection. Patola–Nimba–Triphala Kwatha possesses Tikta–Kashaya rasa, Kleda-shoshana, Krimighna, and Shothahara properties, making it a rational choice in the management of Adhimamsa. This article discusses the role of Patola–Nimba–Triphala Kwatha Dhavana with classical references and its modern correlation with pericoronitis of wisdom tooth*

Keywords: Adhimamsa, Pericoronitis, Patola, Nimba, Triphala, KwathaDhavana, Mukharoga

I. INTRODUCTION

Oral health disorders significantly affect quality of life due to pain, difficulty in eating, and infection. In Ayurveda Mukharoga includes various diseases of the oral cavity. Adhimamsa is described as a condition involving excessive growth and inflammation of the gums, often associated with pain and discharge.

हानव्ये पश्चिमे दन्ते महाञ्छोथो महारुजः ॥

लालासावी कफकृतो विज्ञेयः सोऽधिमांसकः । सु.नि. १६-२५ ⁽¹⁾

दन्तान्ते कीलवच्छोफो हनुकर्णरुजाकरः ॥

प्रतिहन्त्यभ्यवहतिं श्लेष्मणा सोऽधिमांसकः ॥ वा.उ. २१-२७ ⁽²⁾

According to sushrut the main symptoms of adhimamsa is mahan shotha hanavye paschime dante (big swelling around the molar tooth of the lower jaw), maharaja (severe pain), lalastrav (excessive salivation) due to aggravation of kapha. Pericoronitis is a common dental condition seen in young adults, especially involving partially erupted mandibular third molars. The presence of an operculum favors food debris accumulation and bacterial growth, leading to inflammation. Ayurvedic local therapies such as Dhavana help in mechanical cleansing, drug delivery, and control inflammation .

AIM:

To evaluate the effect of Patola–Nimba–Triphala Kwatha Dhavana in the management of Adhimamsa (Pericoronitis of wisdom tooth).

OBJECTIVE:

- To assess reduction in pain, swelling, and discharge.
- To observe improvement in oral hygiene and functional comfort.
- To correlate Ayurvedic intervention with modern clinical outcomes.



CASE STUDY:

Age/Sex: 24-year-old male

Chief Complaints:

- Pain and swelling in the lower right posterior region of jaw
- Difficulty in mouth opening
- Bad breath and occasional pus discharge (5 days)

Clinical Findings:

- Partially erupted mandibular third molar
- Inflamed operculum with tenderness and erythema
- Mild purulent discharge

Diagnosis:

- Ayurvedic: Adhimamsa
- Modern: pericoronitis of wisdom tooth

II. MATERIAL AND METHODS

Adhimamsa: Ayurvedic Perspective

According to Sushruta Samhita, Adhimamsa is characterized by abnormal overgrowth of gingival tissue associated with pain and inflammation.

Classical Reference:

हानव्ये पश्चिमे दन्ते महाञ्छोथो महारुजः ॥

लालासावी कफकृतो विज्ञेयः सोऽधिमांसकः । सु.नि. १६-२५

Samprapti (Pathogenesis):

Vitiation of Kapha and Rakta

Local Mamsa dhatu dushti

Kleda accumulation and Krimi involvement

Clinical features include:

- Pain and swelling around the wisdom tooth
- Difficulty in mouth opening (trismus)
- Halitosis and purulent discharge
- Fever in severe cases

The pathology involves bacterial colonization beneath the operculum, which aligns with Krimija and Kledaja pathology described in Ayurveda.

Concept of Kwatha Dhavana

Dhavana is a local therapeutic procedure involving washing or irrigating the oral cavity with medicated decoctions. It helps in Mechanical removal of debris, Reduction of microbial load, Local delivery of anti-inflammatory and healing properties.

Preparation of Kwatha

1. Patola (Trichosanthes dioica) – 1 part

2. Nimba (Azadirachta indica) – 1 part

3. Triphala (Haritaki, Bibhitaki, Amalaki) – 1 part

Kwatha was prepared by boiling coarse powder with 16 parts of water and reducing to 1/4th.



Dhavana Procedure

Lukewarm kwatha used for oral irrigation

Duration: 3–5 minutes

Frequency: Twice daily

Treatment period: 7 days

No systemic antibiotics were administered during the study.

ASSESSMENT CRITERIA:

Symptom	Before Treatment	After Treatment
Pain	Severe	Absent
Swelling	Marked	Mild
Discharge	Present	Absent
Mouth opening	Restricted	Normal
Oral hygiene	Poor	Improved

Indication:

Sushruta advocates Prakshalana and Dhavana in inflammatory Mukharogas.

Drug Review

पटोलत्रिफलानिम्बकषायश्चात्र धावने ।

हितः शिरोविरेकश्च धूमो वैरेचनश्च यः ॥ सु.चि. २२-२४, २५⁽³⁾

1. Patola (*Trichosanthes dioica*)⁽⁴⁾

Rasa: Tikta

Guna: Laghu, Ruksha

Karma: Pitta-Kapha shāmaka, Shothahara, Raktaprasādana

2. Nimba (*Azadirachta indica*)⁽⁵⁾

Rasa: Tikta, Kashaya

Karma: Krimighna, Raktashodhaka, Dantya

Well known for antimicrobial and anti-inflammatory action

3. Triphala (*Haritaki, Bibhitaki, Amalaki*)⁽⁶⁾

Rasa: Predominantly Kashaya

Karma: Vrana-ropana, Shothahara, Krimighna

Promotes healing of inflamed tissues

Probable Mode of Action

Tikta–Kashaya rasa → Reduces Kleda and inflammation

Krimighna guna → Controls microbial infection

Raktashodhana → Reduces congestion and bleeding

Local Dhavana → Enhances penetration and rapid relief

III. RESULT

After 7 days of Patola–Nimba–Triphala Kwatha Dhavana, the patient showed marked improvement in pain, swelling, and discharge. Mouth opening became comfortable, and local inflammation subsided without any adverse effects.



IV. DISCUSSION

Adhimamsa and pericoronitis share similar clinical and pathological features. Modern management primarily focuses on antibiotics and surgical removal of the operculum, which may not always be feasible. Patola–Nimba–Triphala Kwatha Dhavana offers a safe, cost-effective, and non-invasive alternative. Patola and Nimba possess Tikta–Kashaya rasa, Laghu–Ruksha guna, and Kapha–Pitta shamaka properties, making them effective in reducing inflammation and infection. Triphala is well known for its Shodhana, Rasayana, and Krimighna effects.

Dhavana acts as a local cleansing therapy, removing debris, reducing microbial load, and promoting wound healing. From a modern perspective, the formulation exhibits anti-inflammatory, antibacterial, and antioxidant actions, which help in managing pericoronitis conservatively.

V. CONCLUSION

Patola–Nimba–Triphala Kwatha Dhavana is an effective, safe, and economical treatment modality in the management of Adhimamsa (pericoronitis). It offers significant symptomatic relief and can be considered as a conservative Ayurvedic approach before opting for surgical intervention. This approach can be safely integrated into routine dental and Ayurvedic practice, especially in early and mild cases.

REFERENCES

- [1]. Dr. Shastri A. adhyay 16 shalok no 27. Maharsi-Susruta Samhita nidansthan. Reprint 2014. Varanasi: Chaukhamba Sanskrit Sansthan; 2014. page no- 384.
- [2]. Dr. Garde G. Mukharoga adhyay 21 shalok no 27. Sartha Vagbhata Uttarsthan. Reprint 2018. Varansi: Chaukhamba Surbharti Prakashan; 2018. Page no.413.
- [3]. Dr. Shastri A. adhyay 22 shalok no 25. Maharsi-Susruta Samhita Chikitsasthan. Reprint 2014. Varanasi: Chaukhamba Sanskrit Sansthan; 2014. page no- 123.
- [4]. Dr. Chunekar K.C. shak varga shlok no 70 .In: Pandey G.S, editor. Bhavaprakash Nighantu. Varanasi: Chukhamba Bharti Academy; Page no.686.
- [5]. Dr. Chunekar K.C. Haritkyadi varga shlok no 43 .In: Pandey G.S, editor. Bhavaprakash Nighantu. Varanasi: Chukhamba Bharti Academy; Page no.12.
- [6]. Dr. Chunekar K.C. guduchyadi varga shlok no 95-96 .In: Pandey G.S, editor. Bhavaprakash Nighantu. Varanasi: Chukhamba Bharti Academy; Page no.328.

