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## Ayurvedic Management of Adenoids: A Clinical Case Study

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### ABSTRACT:

**Background:** Adenoid hypertrophy, referred to as Kanthashalooka in Ayurveda, is a common cause of nasal obstruction in children. Conventional management often involves surgery, but Ayurvedic alternatives may provide safe and effective non-surgical options. **Objective:** To evaluate the effectiveness of Ayurvedic treatment modalities in the management of adenoids in a pediatric patient. **Methods:** An 8-year-old female presented with nasal obstruction, snoring, mouth breathing, and recurrent respiratory infections. Treatment included Deepana-Pachana-Anulomana, Nasya with Anutaila, and Shamana aushadhi. Clinical symptoms and radiological findings were assessed before and after treatment. **Results:** Significant improvement in nasal obstruction, snoring, and sleep quality was observed. Follow-up radiology showed reduced adenoid size. No recurrence of symptoms was reported till 9 months of follow up. **Conclusion:** Ayurvedic treatment provided successful conservative management of adenoids, highlighting its potential as a non-surgical alternative.

### KEYWORDS:

Adenoid hypertrophy, Kanthashalooka, Ayurveda, Pediatric nasal obstruction, Nasya, Anutaila, Deepana-Pachana, Shamana Aushadhi, Non-surgical management, Respiratory health.

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**INTRODUCTION:**

*Kanthashalooka* as the name indicates is a *kanthagat vyadhi*, correlated with adenoids in modern science. Being one of the common causes of nasal obstruction in children, it leads to disturbance in auditory and orthognathic apparatus causing sleep apnoea and concentration difficulties. A recent meta-analysis showed the prevalence of adenoid hypertrophy among a randomized representative sample of children and adolescents was 34.46 % (1). When hypertrophied nasopharyngeal tonsils start producing symptoms, the condition is referred to as adenoids. Clinical features are associated with nasal obstruction, infection of the ear, nose and throat and adenoid faces. General features may include nocturnal enuresis and night terrors due to suffocation. Patients are diagnosed easily on signs and symptoms, but posterior rhinoscopy and radiological examination can be used for confirmation of diagnosis (2)

**Lakshana:** According to Ayurveda (Ashtang Hruday Uttartantra 21)

- Kolasthimatra
- Kaphasambhava
- Granthi Gale
- Kantak Shukabhoota
- Khara Sthira
- Shastra nipata sadhya. Sushrut Nidanasthana 16/51(3)
- Utpala kanda...Nyaya Chandrika.
- Antargale ghurghurikanwitam
- Uchhwasa nirodhakari...(Charak Chikitsasthan 12)

**Granthokta Chikitsa:** According to Vagbhatacharya:

Treatment principles like kaphaj rohini should be adopted (swedanottar lekhan, pratisaran, gandoosha, nasya), Visravana, Tundikerivata chikitsa, Ekakala yavanna sevana = langhana

**Case Description**

An 8 year old female child came to our Outpatient Department with following complaints:

- Blocking sensation in nose with sneezing
- Difficulty in breathing, disturbed sleep at night due to breathlessness occasionally with snoring
- Mouth breathing
- Cough and cold on and off
- Patient was diagnosed with enlarged adenoids given conservative treatment and advised surgery for the same so patient's mother was willing for Ayurvedic treatment and came to our OPD

**Local Examination:**

- Ear- bilateral tympanic membrane intact, retracted
- Nose- mild Deviated Nasal Septum to left, bilateral inferior turbinate hypertrophy
- Throat- mild congestion.
- Diagnosis: Enlarged adenoids confirmed clinically and radiologically.

**Methodology**

Consent: An informed written consent of child's mother was taken in the language best understood. The disease and line of treatment was explained. The protocol included Panchakarma and Shamana chikitsa.

**Treatment plan:**

Deepan pachan anulomana

Sthanik snehan with tila taila and sthanik swedan with dashmool kwatha

Nasya with Anutaila 6/6bindu for 7days (1 cycle)

3 nasya cycles performed with 1 week gap between each cycle

Shaman aushadhi given for 1 month

Observation and results drawn

1. Sthanik snehana-swedana followed by
2. Nasya with anutaila 6/6bindu (3 cycles)(3)

#### Shaman aushadhi for 1 month

1. Khadiradi vati 250mg 2bd
2. Sukshma triphala vati(Bharat Bhaishajya Ratnakar) 250mg 2bd
3. Sitopaladi churna 1gm in 3 divided doses with madhu

Pathya and apathya was explained and advised to follow.

Comparison is made based on relief of signs and symptoms before and after treatment with related investigation.

#### Intervention

**Deepana-Pachan-Anulomana-** for 5 days

1. Amapachak vati 250mg before food twice a day and
2. Avipattikar churna 1gm at night with lukewarm water

#### Panchkarma:

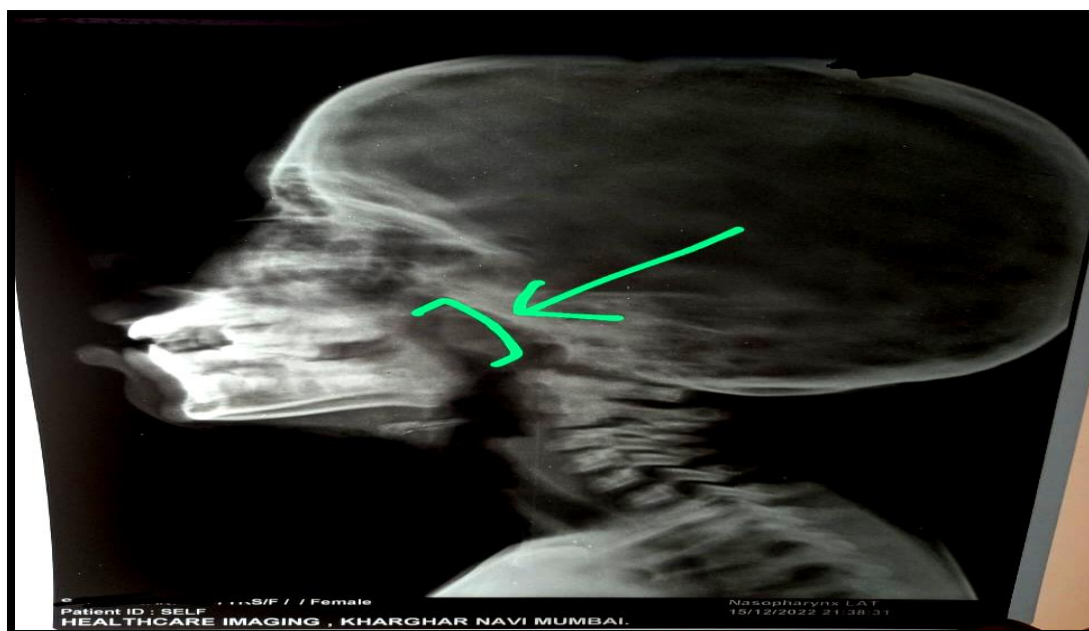
#### Observation and Results: Table no. 1

Signs and symptoms	Before treatment	After treatment
Difficulty in breathing	Present	Relieved
Mouth breathing with snoring	Profound	Absent
Cold and cough	Occasionally	Relieved
X-ray nasopharynx lateral view	Enlarged adenoids	Reduced

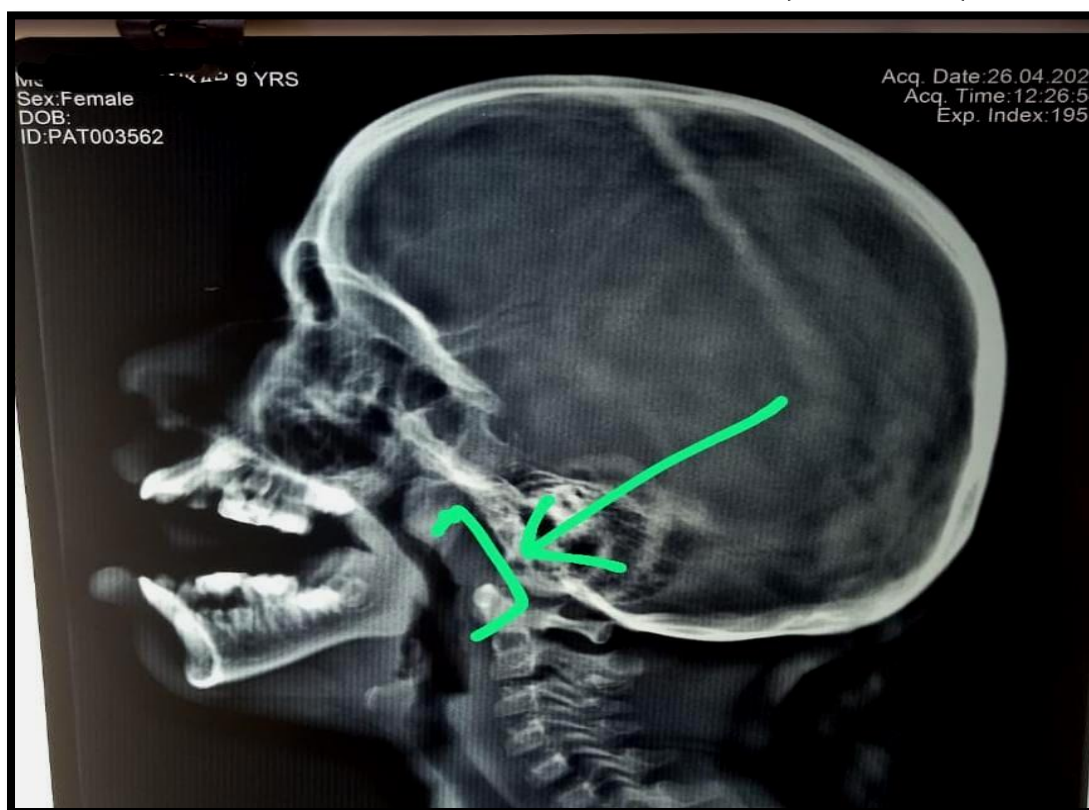
Within the first cycle of Nasya and Shamana aushadhi, marked improvement in nasal obstruction, snoring, and sleep quality was observed. Radiological evaluation confirmed reduction in adenoid size. At 9 months follow-up, the patient remained symptom-free with no recurrence. The patient did not visit the hospital again for the adenoid related complaint

#### XRAY LATERAL VIEW NASOPHARYNX BEFORE TREATMENT (IMAGE NO.1)





**XRAY LATERAL VIEW NASOPHARYNX AFTER TREATMENT (IMAGE NO.2)**



### DISCUSSION:

#### Mode of Action:

The therapeutic effect is explained by the properties of the administered formulations:

- Anutaila has mentioned by our Acharyas have sukshma strotogamitva and mahaguna

which helps in alleviating kapha and vata dosha from the shira and kantha pradesha thereby reducing size of adenoids.(5)

- Khadiradi vati mentioned in bharat bhaishajya ratnakar used for treating all types of mukha, kantha and galarogas (6)

- Sukshma triphala internally given is having kledaghna, lekhanika, jantughna and yogavahi properties due to Kajjali leading to reduction in size of adenoids. (7, 8)

-Sitopaladi churna pratisaran also helps in alleviating kapha dosha along with honey thereby reducing the signs and symptoms of kanthagat roga kanthashalooka. (9)

These synergistic actions helped alleviate symptoms and reduce adenoid size without surgery.

#### **CONCLUSION:**

Ayurvedic interventions including Nasya and herbal formulations provide an effective conservative approach to adenoid management. This case demonstrates that Ayurveda may be considered a valid non-surgical treatment alternative in mild to moderate pediatric adenoid hypertrophy.

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