



Research Article

A COMPARATIVE CLINICAL STUDY OF MRIDWEEKADI CHURNA AND YAVAGRAJADI VATI IN TUNDIKERI (TONSILLITIS) IN CHILDREN

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ABSTRACT

Tonsillitis is one of the common diseases in pediatric age group. In Ayurveda it can be correlated with *Tundikeri*, Which has been described under the *Mukharoga*. Description of *Mridweekadi Churna* is mentioned in *Charaka Samhita* in *Trimarmiya Aadhyay* under *Mukha Rogas Chikitsa*, and description of *Yavagrajadi Vati* is mentioned in *Yoga Ratnakar* in *Mukha Roga Chikitsa Aadhyay*. According to *Acharya Vagbhata* the main *Dosha* involved in *Tundikeri* is *Kapha Dosha*. Majority of ingredients of *Mridweekadi Churna* and *Yavagrajadi Vati* have *Tikta, Kashaya, Laghu, Ruksha Guna*, due to this it subsides *Kapha Dosha*. Therefore, a study was planned to compare the effect of both drug in *Tundikeri* (tonsillitis). **Methods:** Children, aged 5 to 16 years, suffering from tonsillitis were registered and categorized under two groups: group- A and group-B. Group A- Patients were treated with *Mridweekadi Churna*, and Group B- Patients were treated with *Yavagrajadi Vati* for 10 days and 7 days follow up also done by drug free period. **Results:** In Group-A, 55% patients were moderately improved and 45% patients showed mild improvements. In Group-B, 15% patients showed marked improvement, 75% patients were moderately improved and 10% patients showed mild improvement. **Conclusion:** Tonsillitis is an inflammation of the tonsils and it is a common childhood illness. During childhood period there is a natural dominancy of *Kapha dosha* and *Tundikeri*- a *Kapha Pradhana* disease (according to *Acharya Vagbhata*), hence children are more prone to it. To treat this, drugs should have the *Kaphahar* properties like *Tikta, Kashaya ras* and *Laghu, Ruksha Guna*. In this comparative clinical study both the chosen drugs, *Mridweekadi Churna* and *Yavagrajadi Vati* possesses all these properties and also are markedly effective in *Tundikeri*, but group B *Yavagrajadi Vati* display better results than *Mridweekadi Churna*. This study will also help future researchers to evaluate further in this research work.

INTRODUCTION

Children are vulnerable to malnutrition and infectious disease. Tonsillitis is one of the most prevalent infectious diseases in pediatric age group. It is amongst the recurrent infections of upper respiratory tract.

Globally more than 1.5 million deaths annually from respiratory infections are attributable to the environment, including at least 42% of lower respiratory infections and 24% of upper respiratory infections in developing countries^[1]. Any Infection in a child may impact growth and development and hamper immunity. Tonsils are the part of the immune system and work as a first line of defense at the Oropharyngeal gateway. Therefore, they are called as the 'Police man of GI tract.' When these tonsils get inflamed due to bacteria and virus it is called tonsillitis. It commonly occur now-a-day due to the dietary factor (taking spicy food, cold beverage), climatic factor (cold climate) and due to lower socioeconomic factor (low

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immunity status). These factors grouped together result in recurrent episode of the disease.

In modern medicine tonsillitis is often treated by antibiotics. Surgery is performed when child stops responding to medicine and in obligatory conditions. The most frequent surgeries performed on children in ENT practice is Tonsillectomy.

In Ayurveda clinical presentation of *Tundikeri* is more like tonsillitis. It is described under *Mukha Roga*. Acharya Charaka described four types of *Mukharoga* on the basis of predominance of *Doshas*^[2]. Acharya Sushruta described it under *Talu gatarog*^[3] and Acharya Vagbhatta under *Kantha gataroga*^[4]. According to Acharya Sushruta *Tundikeri* is manifested as a swelling in *Talu* associated with burning sensation and suppuration and according to Acharya Vagbhatta it is a swelling of *Hanusandhi Pradesha* resembling *Vanakarpasa Phala* (cotton fruit).

Dealing with the treatment of *Tundikeri* Acharya Charaka has described medicinal treatment of *Mukha roga*. Acharya Sushruta classified it under *Bhedya Roga* and mentions that it should be treated as per the lines of treatment of the disease *Galashundika*, followed by the local application of drugs having properties like *Lekhana*, *Shothahara*, *Sandhaniya*, *Ropana*, *Rakta Stambhana* and *Vedanasthapana*^[5]. Acharya Vagbhata mentions treatment of *Tundikeri* as per the lines of treatment of the disease *Kaphaj Rohini*^[6]. Tonsillitis is a commonly occurs infectious diseases in pediatric age group and exerts untoward effect on the entire growth, development, and psychology of the children.

Description of *Mridweekadi Churna* is mentioned in *Charaka Samhita* in *Trimarmiya Aadhyay* under *Mukha Rogas Chikitsa*^[7], and description of *Yavagrajadi Vati* is mentioned in *Yoga Ratnakar* in *Mukha Roga Chikitsa Aadhyay*^[8]. According to Acharya Vagbhata the main *Dosha* involved in *Tundikeri* is *Kapha Dosha*. Majority of ingredients of *Mridweekadi Churna* and *Yavagrajadi Vati* have *Tikta*, *Kashaya*, *Laghu*, *Ruksha Guna* due to this it subsides *Kapha Dosha*. Also, majority of ingredients possess *Shothahara*, *Vedanahara*, *Rasayana*, *Jwarghna*, *Aamapachana* and *Kasaghna* properties.

AIM

To compare the efficacy of *Mridweekadi Churna* and *Yavagrajadi Vati* in *Tundikeri*.

OBJECTIVES

The objective of the study is-

1. To determine the efficacy of *Mridweekadi Churna* on graded subjective parameters of *Tundikeri*.
2. To determine the efficacy of *Yavagrajadi Vati* on graded subjective parameters of *Tundikeri*.

Plan of Study

Total 40 patients were selected for the study. The cases registered for the study were divided into two groups named as group A and group B, both the groups comprising of 20 children. Following are the details of the study.

Inclusion Criteria

1. Children belonging to the age group of 5 to 16 years.
2. Children diagnosed with acute tonsillitis.

Exclusion Criteria

1. Children below 5 years and above 16 years were excluded.
2. Children having chronic tonsillitis were excluded.
3. Children having other systemic disorder with tonsillitis were excluded.

Discontinuation Criteria

1. ADR
2. Patients not willing to continue
3. Appearance of any severe complication.
4. Any other severe acute illness

Type of Study - Open label

Duration of Study- 10 days

Observation period

The child was assessed clinically on 1st, 4th, 7th, and 10th day during the treatment and follow up after 7 days.

Study Design

Selection of drug

1. Group A- Patients were treated with *Mridweekadi Churna*.
2. Group B- Patients were treated with *Yavagrajadi Vati*.

Table 1 and 2 shows the contents of *Mridweekadi Churna* and *Yavagrajadi Vati* respectively. The details of the drug dose are given in table 3.

Table 1: Contents of Mridweekadi Churna

S.No.	Content	Botanical Name	Family	Ras	Guna	Virya	Vipaka
1	<i>Mridweeka</i>	<i>Vitis vinifera</i> Linn.	Vitaceae	<i>Madhur</i>	<i>Snigdha, Guru, Mridu</i>	<i>Sheeta</i>	<i>Madhur</i>
2	<i>Katuka</i>	<i>Picrorthizakurroa Royal ex Benth</i>	Scrophulariaceae	<i>Tikta</i>	<i>Laghu, Ruksha</i>	<i>Sheeta</i>	<i>Katu</i>
3	<i>Shunthi</i>	<i>Zingiber officinale</i>	Zingiberaceae	<i>Katu</i>	<i>Laghu,</i>	<i>Ushna</i>	<i>Madhur</i>

		<i>Rose.</i>			<i>Snigdha</i>		
4	<i>Pippali</i>	<i>Piper logum</i> Linn.	Piperaceae	<i>Katu</i>	<i>Laghu, Snigdha, Teekshana</i>	<i>Anushana Sheeta</i>	<i>Madhur</i>
5	<i>Marich</i>	<i>Piper nigrum</i> Linn.	Piperaceae	<i>Katu</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Katu</i>
6	<i>Darvitwak</i>	<i>Berberis aristata</i> DC	Berberidaceae	<i>Tikta, Kashaya</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Katu</i>
7	<i>Amalaki</i>	<i>Emblica officinalis</i> Gaertn.	Euphorbiaceae	<i>Pancheas</i>	<i>Guru, Ruksha</i>	<i>Sheeta</i>	<i>Madhur</i>
8	<i>Haritaki</i>	<i>Terminalia chebula</i> Retz.	Combretaceae	<i>Panchras</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Madhur</i>
9	<i>Vibhitak</i>	<i>Terminalia bellirica</i> Roxb.	Combretaceae	<i>Kashaya</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Madhur</i>
10	<i>Nagarmotha</i>	<i>Cyperus rotundus</i> Linn.	Cyperaceae	<i>Tikta, Katu, Kashaya</i>	<i>Laghu, Ruksha</i>	<i>Sheeta</i>	<i>Katu</i>



Mridweeka



Sunthi



Katuka



Pippali



Maricha



Daruharidra



Amalaki



Haritaki



Vibhitaki



Nagarmotha

Table 2: Contents of Yavagrajadi Vati

S.No	Content	Botanical Name	Family	Ras	Guna	Virya	Vipaka
1	Yavagrajam (Yavakshar)	<i>Hordeum vulgare</i> Linn.	Poaceae	Kashay, Madhur (ch.)	Rukshana, Aguru (ch.)	Sheeta	Katu
				Kashay, Madhur (su.)	Ruksha, Pichhila (su.) Ruksha,	Sheeta	Katu
				Madhur (vag.)	Guru, Sara (vag.)	Sheeta	Katu
2	Tejvati	<i>Zanthoxylum armatum</i> DC.	Rutaceae	Katu, Tikta	Laghu, Ruksha, Teekshana	Ushna	Katu
3	Patha	<i>Cissampelos pareira</i> Linn.	Menispermaceae	Tikta	Laghhu, Teekshana	Ushna	Katu
4	Rasanjam	<i>Berberis aristata</i> DC.	Berberidaceae	Tikta, Kashaya	Laghu, Ruksha	Ushna	Katu
5	Darunisha	<i>Berberis aristata</i> DC.	Berberidaceae	Tikta, Kashaya	Laghu, Ruksha	Ushna	Katu
6	Krishna	<i>Piper logum</i> Linn.	Piperaceae	Katu	Laghu, Snigdha, Teekshana	Anushana Sheeta	Madhur

**Yavakshar****Tejvati****Patha****Daruharidra****Pippali****Rasanjan****Table 3: Drug Dose**

Group	Group A (Mridweekadi Churna (Vati))	Group B (Yavagrajadi Vati)
Dose	05-08 years (1 TDS)	05-08 years (1/2 TDS)
	09-12 years (2 TDS)	09-12 years (1 TDS)
	13-16 years (3 TDS)	13-16 years (3 TDS)
Route	Oral	Oral
Duration	10 Days	10 Days

No. of Patients - 40

Formulation of drug - In Vati form

Criteria for Assessment

The assessment of the trial was done based on subjective and objective parameters. The subjective parameters include the clinical features of *Tundikeri* (tonsillitis) as describe in Ayurvedic and modern texts, which are (1) *Toda* (pain), (2) *Galoparodha* (dysphagia) and (3) *Asyavairasya* (alter taste of mouth). Whereas the objective parameters include (1) *Kathina sotha* (enlargement of tonsils), (2) *Ragatwa* (redness), (3) *Mukha daurgandhya* (halitosis) and (4) *Jwara* (fever).

The grading of various clinical features is as follow:

***Toda* (Pain)**

No pain	0
Mild tenderness on pressing	1
Pain during deglutition	2
Pain during rest	3

***Galoparodha* (Dysphagia)**

No difficulty	0
Difficulty in taking solid food only	1
Difficulty in taking solid and liquid food	2
Difficulty in swallowing saliva	3

***Asyavairasya* (Alter taste of mouth)**

Normal taste in food, feeling to eat food in time	0
<i>Aruchi</i> - Feeling to take food but not having taste	1
<i>Anannabhilasha</i> - Not feeling to take food even if hungry	2
<i>Bhktadvesha</i> - Aversion to food	3

***Kathina sotha* (Enlargement of tonsils)**

Tonsils are located within the tonsillar fossa	0
Tonsils hypertrophy till the brim of the tonsillar fossa	1
Tonsil hypertrophy extends beyond the pillars but not touching each other	2
Tonsils are in contact with each other	3

***Ragatwa* (Redness)**

No erythema	0
Light red	1
Moderate red	2
Bright red	3

***Mukha daurgandhya* (Halitosis)**

No halitosis	0
Present only when mouth is open completely	1
Present during yawning	2
Present even during talking	3

***Jwara* (Fever)**

Normal temperature	0
98.6°F -100°F	1
100°F -102°F	2
>102°F	3

Investigation: Hb%, TLC, DLC, ESR

Statistical Analysis: Statistical calculation was done by the SIGMA STAT software and GRAPH PAD software. Wilcoxon Signed Ranked Test, Mann Whitney Rank Sum Test, Paired t test, Unpaired t Test was applied.

OBSERVATION

Table 4: Age wise distribution of group A and group B

Age	Group A	Group B	Total	Percentage
5-8 years	9	10	19	47.5%
9-12 years	2	8	10	25%
13-15 years	9	2	11	27.5%

Table 5: Sex wise distribution of group A and group B

Sex	Group A	Group B	Total	Percentage
Male	13	11	24	60%
Female	7	9	16	40%

Table 6: Socioeconomic wise distribution of group A and group B

Socioeconomic status	Group A	Group B	Total	Percentage
Lower	7	7	14	35%
Middle	13	13	26	65%
Higher	0	0	0	0%

Table 7: Sign and symptoms wise distribution of group A and group B

Sign and symptoms	Group A	Group B	Total	Percentage
<i>Toda</i>	20	20	40	100%
<i>Galoparodha</i>	20	20	40	100%
<i>Asyavairasya</i>	19	19	38	95%
<i>Katina Sotha</i>	20	20	40	100%
<i>Ragawta</i>	20	20	40	100%
<i>Mukha daurgandhya</i>	19	18	37	92.5%
<i>Jwara</i>	13	14	27	67.5%

RESULTS

Table 8: Efficacy study of Group-A on Subjective Parameters

Group-A	N	Median		Wilcoxon Signed Rank W	P-Value	% Effect	Result
		BT	AT				
<i>Toda</i>	20	2	1	-4.099a	0.000	55.32	Significant
<i>Galoparodha</i>	20	2.5	1.5	-3.176a	0.001	34.04	Significant
<i>Asyavairasya</i>	19	2	1	-3.666a	0.000	58.34	Significant

Table 9: Efficacy study of Group-B on subjective parameters

Group-A	N	Median		Wilcoxon Signed Rank W	P-Value	% Effect	Result
		BT	AT				
<i>Toda</i>	20	3	1	-4.042a	0.000	66.67	Significant
<i>Galoparodha</i>	20	2	1	-3.542a	0.000	45.45	Significant
<i>Asyavairasya</i>	19	2	1	-3.938a	0.000	71.66	Significant

Table 10: Intergroup comparison of subjective parameters

Subjective Parameters	Group	N	Mean Rank	Sum of Ranks	Mann Whitney U	P-Value	Results
<i>Toda</i>	Group A	20	16.85	337.00	127.000	0.024	Significant
	Group B	20	24.15	483.00			
	Total	40					
<i>Galoparodha</i>	Group A	20	19.00	380.00	170.000	0.038	Significant
	Group B	20	22.00	440.00			
	Total	40					
<i>Asyavairasya</i>	Group A	19	17.00	323.000	133.000	0.095	Non-Significant
	Group B	19	22.00	418.000			
	Total	38					

Table 11: Efficacy study of Group-A on objective parameters

Group-A	N	Median		Wilcoxon Signed Rank W	P-Value	% Effect	Result
		BT	AT				
<i>Kathina sotha</i>	20	3	2	-3.419a	0.001	30.00	Significant
<i>Mukha daurgandhya</i>	19	2	1	-4.184a	0.000	55.01	Significant
<i>Ragatwa</i>	20	2	1	-4.053a	0.000	68.29	Significant
<i>Jwara</i>	13	1	0	-3.464a	0.001	70.59	Significant

Table 12: Efficacy study of Group-B on objective parameters

Group-B	N	Median		Wilcoxon Signed Rank W	P-Value	% Effect	Result
		BT	AT				
<i>Kathina sotha</i>	20	2	1	-4.053a	0.000	69.57	Significant
<i>Mukha daurgandhya</i>	18	2	1	-3.729a	0.000	68.42	Significant
<i>Ragatwa</i>	20	2	1	-3.720a	0.000	74.58	Significant
<i>Jwara</i>	14	1	0	-3.419a	0.001	60.00	Significant

Table 13: Intergroup comparison of objective parameters

Objective Parameters	Group	N	Mean Rank	Sum of Ranks	Mann Whitney U	P-Value	Results
<i>Kathina sotha</i>	Group A	20	14.10	282.00	72.000	0.000	Significant
	Group B	20	26.90	538.00			
	Total	40					
<i>Mukha daurgandhya</i>	Group A	19	26.13	306.50	116.500	0.0454	Non-Significant
	Group B	18	22.02	396.00			
	Total	37					
<i>Ragatwa</i>	Group A	20	19.00	380.00	170.000	0.034	Significant
	Group B	20	22.00	440.00			
	Total	40					
<i>Jwara</i>	Group A	13	13.03	169.50	78.500	0.0345	Non-Significant
	Group B	14	14.89	208.50			
	Total	27					

Table 14: Efficacy study of Group-A on biochemical parameters

Biological Parameter	Mean		N	SD	SE	t-Value	P-Value	Result
ESR	BT	20.90	20	11.41	2.55	3.501	0.002	Significant
	AT	17.45	20	10.53	2.35			
HB%	BT	11.34	20	1.18	0.26	-1.962	0.065	Non-Significant
	AT	11.45	20	1.23	0.27			
TLC	BT	8470.00	20	711.63	159.13	4.774	0.000	Non-Significant
	AT	8240.00	20	645.96	144.44			
Polymorphs	BT	71.25	20	3.06	0.68	1.506	0.148	Significant
	AT	70.45	20	3.91	0.88			
Lymphocytes	BT	25.20	20	3.93	0.88	1.165	0.258	Significant
	AT	24.80	20	3.41	0.76			
Eosinophils	BT	3.55	20	0.94	0.21	2.651	0.016	Significant
	AT	3.10	20	1.17	0.26			
Monocytes	BT	1.00	20	0.00	0.00	-1.831	0.083	Non-Significant
	AT	1.15	20	0.37	0.08			

Table 15: Efficacy study of Group-B on biochemical parameters

Biological Parameter	Mean		N	SD	SE	t-Value	P-Value	Result
ESR	BT	16.55	20	6.64	1.49	2.402	0.027	Significant
	AT	13.90	20	5.12	1.14			
HB%	BT	11.53	20	1.53	0.34	-1.058	0.303	Non-Significant
	AT	11.65	20	1.41	0.31			
TLC	BT	7460.00	20	685.49	153.28	1.766	0.093	Non-Significant
	AT	7270.00	20	1005.30	224.79			
Polymorphs	BT	68.85	20	2.06	0.46	3.359	0.003	Significant
	AT	66.30	20	4.09	0.92			
Lymphocytes	BT	25.90	20	2.99	0.67	5.434	0.000	Significant
	AT	22.30	20	3.67	0.82			
Eosinophils	BT	3.25	20	1.21	0.27	3.240	0.004	Significant
	AT	2.70	20	1.22	0.27			
Monocytes	BT	0.90	20	0.64	0.14	-0.809	0.428	Non-Significant
	AT	1.00	20	0.65	0.15			

Table 16: Intergroup comparison of biochemical parameters

Biological Parameters	Group	N	Mean	SD	SE	t-Value	P-Value	Result
ESR	Group A	20	4.15	3.72	0.83	-0.367	0.716	Non-Significant
	Group B	20	4.55	3.15	0.71			
HB%	Group A	20	0.12	0.26	0.06	-1.897	0.065	Non-Significant
	Group B	20	0.32	0.41	0.09			
TLC	Group A	20	240.00	203.65	45.54	-2.491	0.017	Significant
	Group B	20	430.00	273.57	61.17			
Polymorphs	Group A	20	1.70	1.81	0.40	-2.859	0.007	Significant
	Group B	20	3.55	2.26	0.51			

Lymphocytes	Group A	20	1.20	1.01	0.22	-4.432	0.000	Significant
	Group B	20	3.90	2.53	0.57			
Eosinophils	Group A	20	0.75	0.44	0.10	0.000	1.000	Non-Significant
	Group B	20	0.75	0.55	0.12			
Monocytes	Group A	20	0.15	0.37	0.08	-1.125	0.267	Non-Significant

Table 17: Comparative assessment of % relief on various symptoms

Symptoms	% Relief in group A	% Relief in group B
Toda	55.32	66.67
Galoparodha	34.04	45.45
Asyavairasya	58.34	71.66
Kathina sotha	30.00	69.57
Mukha daurgandhya	55.01	68.42
Ragatwa	68.29	74.58
Jwara	70.59	60.00

Table 18: Overall response in each Group

Improvement %	Group A		Group B		Total	
	N	P	N	P	N	P
Markedly improvement (75-100%)	0	0	3	15	3	7.5
Moderately improvement (50-74%)	11	55	12	75	26	65
Mildly improvement (25-49%)	9	45	2	10	11	27.5
No improvement (< 25%)	0	0	0	0	0	0

DISCUSSION

- The present research work was conducted on *Mridweekadi Churna* and *Yavagrajadi Vati*.
- Contents of *Mridweekadi Churna* are *Mridweeka*, *Katuka*, *Shunthi*, *Pippali*, *Marich*, *Darvitwak*, *Amalaki*, *Haritaki*, *Vibhitak* and *Nagarmotha*.
- Mridweeka* and *Pippali* have *Kanthy* property as *Acharya Charak* described *Mridweeka* and *Pippali* under *Kanthy Mahakashaya*^[9].
- Darvitwak* have *Vishghna*, *Shothahara*, *Vedanahara*, *Shodana*, *Kasaghna*, *Dahaghna* and *Rakta prasadana* properties.
- Pippali* have *Jwarghna*, *Vedanahara*, *Aamapachana*, *Kasaghna* and *Rasayana* properties.
- Contents of *Yavagrajadi Vati* are *Yavakshar*, *Tejvati*, *Patha*, *Rasanjan*, *Darunisha* and *Krishna*.
- Yavakshar* have *Vishghna*, *Shothahara* and *Vedanahara* properties.
- Patha* have *Jwarghna*, *Vedanahara* and *Shodhana* properties.
- Tejvati* have *Jwarghna*, *Vedanahara* and *Kasaghna* properties.
- These contents also have antiulcer, antifungal, antibacterial, antipyretic, antimicrobial, anti-viral, anti-inflammatory and wound healing properties.
- The ingredients of *Mridweekadi Churna (Vati)* and *Yavagrajadi Vati* have *Madhur*, *Amla*, *Katu*, *Tikta* and *Kashaya Rasa*.
- As we know according to *Acharya Vagbhata Tundikeri* occurs due to vitiation of *Kapha Dosha*, due to *Tikta*, *Katu* and *Kashaya Rasa* it subsides the vitiated *Kapha Dosha*.
- According to *Acharya Charak* property of *Madhur Rasa* are *Kanthy* (beneficial for throat), *Mukha-kantha-Oshtha-jihwa prahadano*^[10] (delighting for throat, lips and tongue).
- Property of *Katu Rasa* are *Mukhasodhak* (cleanses the mouth), *Swayathuuphanti*^[11] (alleviates swelling).
- Property of *Tikta Rasa* is *Jwarghna*^[12] (antipyretic).
- Property of *Amla Rasa* is *Bhaktamrochyati*^[13] (give rise to relish food). So from the above we can conclude that these property of *Mridweekadi Churna* and *Yavagrajadi Vati* helps in relieving the symptoms of *Tundikeri*.

CONCLUSION

The following are the conclusions drawn from the present study:

- Tonsillitis is one of the most prevalent infectious diseases in pediatric age group.

2. There is a natural dominancy of *Kapha Dosha* in childhood and *Tundiker* is also a *Kapha Pradhana* disease, so children are more prone to it.
3. Dietary factor (taking spicy food, cold beverage), climatic factor (cold climate) and lower socio-economic factor (low immunity status) are responsible factor for tonsillitis.
4. Total 40 patients were registered and the entire patients completed the full course of trial.
5. In Group-A, 55% patients were moderately improved and 45% patients showed mild improvements.
6. In Group-B, 15% patients showed marked improvement, 75% patients were moderately improved and 10% patients showed mild improvement.
7. Overall effect of therapy shows that, 7.5% patients showed marked improvement, 65% patients were moderately improved and 27.5% patients showed mild improvement.
8. Intergroup comparison showed non-significant result in *Asyavairasya*, *Mukha daurgandhya* and *Jwara* and significant results in *Toda* and *Galoparodha*, *Kathina sotha* and *Ragatwa*
9. On comparative assessment, maximum percentage of relief was seen in Group-B in all symptoms except *Jwara*.
10. Between both groups, Group B (*Yavagrajadi Vati*) displayed better results when compared with *Mridweekadi Churna*.
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