



Ayurvedic Management Of Oral Mucocele Of Lip: A Case Study

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Abstract: Background- Oral mucocele is a common benign lesion of minor salivary glands, frequently affecting the lower lip. Conventional management mainly involves surgical excision, which may result in recurrence and cosmetic concerns. Ayurveda correlates this condition with Medoja Oshtha Prakopa.

Aim-To evaluate the efficacy of Jalaukavacharana along with Ayurvedic oral and local medications in the management of oral mucocele.

Materials and Methods- A 36-year-old male patient presenting with lower lip swelling for three months was treated with Jalaukavacharana (leech therapy), internal Ayurvedic medicines, and local application. Clinical assessment was done based on reduction in swelling, pain, itching, and healing response.

Results- Significant reduction in swelling and associated symptoms was observed without surgical intervention. Healing occurred without scar formation or recurrence during follow-up.

Conclusion- Jalaukavacharana combined with Ayurvedic management proved to be a safe, minimally invasive, and cosmetically acceptable treatment modality for oral mucocele.

Keywords - Oral mucocele, Jalaukavacharana, Raktamokshana, Medoja Oshtha Prakopa, Ayurveda

I. INTRODUCTION

Oral mucocele is the most common disorder of minor salivary glands characterized by a bluish, translucent, fluctuant swelling, most commonly seen on the lower lip. It occurs either due to mucus extravasation following trauma or mucus retention caused by ductal obstruction. Clinically, lesions are painless, recurrent, and vary in size.

In Ayurveda, similar features are described under Medoja Oshtha Prakopa. Acharya Sushruta explains lesions presenting with mridu, sthira, guru, itching sensation, and clear discharge resembling crystal-like secretion. Considering the involvement of Kapha and Meda, therapies having Shothahara, Lekhana, and Ropana properties are indicated.

II. Materials and Methods-

Study Design- Single case study.

III. Patient case report-

- Age: 36 years
- Gender: Male
- Date of visit: 22/11/2024
- OPD No. 05 (ENT)- Dr. D. Y. Patil Ayurvedic Hospital, Nerul, Navi Mumbai

- **Chief Complaints-**

- Recurrent swelling over lower lip
- Mild pain, blackish discoloration
- Itching sensation
(Duration: 3 months)



- **History-**

- No trauma or lip biting history
- No tobacco or alcohol use
- No systemic illness (DM, HTN, thyroid disorders)
- The patient was advised surgical intervention, but patient denied to undergo the procedure.

- **Local Examination-**

L/E-	ORAL CAVITY	
LIPS-	UPPER LIP- NORMAL	LOWER LIP- A BLUISH CYSTIC PAINFUL SWELLING, BLACKISH DISCOLOURATION
GUMS	NORMAL	
TEETH	NORMAL	
TONGUE	NORMAL	
BUCCAL MUCOSA	NORMAL	
EAR, NOSE, THROAT	NORMAL	

- **Diagnosis-**

After assessing symptoms and local examination the patient was diagnosed with Oral mucocele of lip.

- Management-

Sr. No.	Chikitsa	Aushadhi	Contents	Dose	Duration	Actions
1	Shaman Aushadhi	Medopachak ghan vati 250mg	Musta, Parpata, Ushira, Chandan, Udichya, Nagara, Ativisha, Guduchi, Katuki	2 vati 2 times a day	8 weeks	Kapha- meda shoshana, deals with excessive fatty tissue, prevents cystic growth
		Kanchanar guggulu 250mg	Kanchanar twak, guggulu, triphala, trikatu, varuna twak, ela, twak, tejpatra	2 vati 2 times a day	8 weeks	Granthi hara, anti-inflammatory
		Kukkutnakhi guggulu 250mg	Kukkutanakhi, guggula, triphala, trikatu, vidanga, chitraka, musta, danti, trivrit, pippalimoola	2 vati 2 times a day	8 weeks	Lekhana, Shothahara
2	Lepa (local application)	Kukkutanakhi mula lepa	Kukkutanakhi moola	5 gm mixed with water Twice a day	8 weeks	Ropana, Shothahara, Lekhana
3	Raktamokshan	Jalauka avcharan	-	Once weekly	3 sessions (weekly intervals)	Removes vitiated doshas, relieves congestion, reduces swelling

1. Jalaukavacharana (Leech Therapy)-

Purva Karma

- Informed consent obtained
- Area cleaned with sterile water
- Patient positioned supine
- Healthy medicinal leech selected

Pradhan karma:

- Application of Jalauka:
 - i. Jalauka applied on the affected lip swelling (mucocele site).
 - ii. Jalauka attaches firmly with its anterior sucker.
 - iii. Once attached, jalauka starts sucking blood and skin around lesion puckers.

- Observation during sucking:
 - i. Periodically sprinkle drops of water on leech to keep it active.
 - ii. Duration- until leech detaches naturally or after 30-45 minutes.

- Detachment:
 - i. Once Jalauka is satiated it detaches naturally.
 - ii. If not detaching naturally, apply a pinch of turmeric powder near mouth it will detach safely.



- **Benefits of jalauka avcharan-**

Ayurvedic Perspective	Modern Scientific Perspective
Kapha-pitta shamak- Reduces swelling, itching, burning	Hirudin-anticoagulant, improves blood flow
Shothahara- Relieves inflammation and congestion	Bdellins & Eglins- Anti inflammatory, reduces edema and pain
Vedana shamana- Reduces pain and discomfort	Anesthetic peptides- local Pain relief
Ropana- Promotes healing and tissue repair	Hyalurodinase- enhances tissues penetration and absorption
Varnaprasadana- Improves discolouration and restores lip appearance	Destabilase- fibrinolytic, Prevents microthrombi
Raktamokshana- safe for delicate sites	Anti- microbial factors- Prevents secondary infections

2. Shaman Chikitsa-

- Kukkutnaki Guggulu – Granthi hara and Shothahara
- Kanchanar Guggulu – Lekhana, Kapha-Medohara, anti-inflammatory
- Medopachak Ghan Vati – metabolic correction and Kapha-Meda balance

3. Local Application-

- Kukkutnaki Moola Lepa applied locally for anti-inflammatory and healing action.

- **Results-**

Sr. No.	Signs & Symptoms	Before treatment	1 st follow up (8th day)	2 nd follow up (after 1 month)
1	Swelling	Bluish cystic swelling on lower lip	Swelling reduced size	Completely resolved, lip normal
2	Pain	Mild pain present	Reduced	No pain
3	Itching	Mild itching	Reduced	No itching
4	Discolouration	Bluish, cosmetic concern	Fading of discolouration	Normal lip colour restored

5	Patient comfort	Discomfort during speech	More comfortable	Comfortable, satisfied, improved quality of life
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- **Before treatment-**



- **After treatment-**



- **Discussion-**

- **A. Jalauka Avacharan -**

- Local decompression: removes congested 'vitiated' blood and stagnant inflammatory mediators from the lesion, reducing hydrostatic pressure in the extravasated mucus area.
- Bioactive saliva factors: hirudin (anticoagulant) & destabilase (fibrinolytic) improve microcirculation; bdellins-eglin reduce protease-mediated inflammation, hyaluronidase increases diffusion of mediators away from site, anesthetic peptides reduce local pain and itch.
- Ayurvedic effect: Kapha-Pitta shamana, Shothahara, Ropana — thereby promoting shrinkage and healing without cutting tissue.

○ **B. Oral Ayurvedic medicines-**

● **Kukkutnaki Guggulu:**

- Granthi hara- cyst resolving and Shothahara - act systemically to reduce local swelling, and prevent recurrence.

- Reference- Chikitsa pradip- gandamala, galaganda, apachi, granthi, arbuda roga.

● **Kanchanar Guggulu:**

- Lekhana, Kapha-Medohara, Shothahara, Granthi-nashaka, Deepana-Pachana, Vedanasthapana.

- Reference- Bhaishjya Ratnavali Galaganda roga chikitsa 44/ 64-69

● **Medopachak Ghan Vati:**

- Supports metabolic correction (Medahapakar) and Kapha–Meda balancing, prevents cyst formation.

- Reference -Charak chikitsa sthana-jwara chikitsa- 03/200-203

○ **C. Local Application:**

- **Kukkutnaki mool lepa-** anti inflammatory, Lekhana (resolving) and Ropana (healing) action on mucosa; augments jalauka effect and promotes epithelial repair.

- Reference- Vd. Padeshastri. Vanoshadhigunadarsha pg.no. 306. Raghuvanshi Prakashan, Mumbai, part-4.

■ **Advantages Over Surgery-**

- Minimally invasive
- Scar-free healing
- Cost-effective
- Safe for delicate lip tissue
- Better cosmetic acceptance

■ **Conclusion-**

- Jalauka avacharan combined with oral and local Ayurvedic interventions offers a safe, effective and minimally invasive management for oral mucocele (Medoja oshtha prakopa).

- However, further studies with a larger sample size are required to validate these findings and establish wider clinical applicability.

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