

CASE STUDY

Managing Recurrent Oral Ulcers with Ayurveda- A Case Study of Mukhapaka

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ABSTRACT

Stomatitis (Mukhapaka) is an inflammatory condition of the oral mucosa, often associated with burning sensation, pain, and recurrent ulcers. A 27-year-old female presented with these symptoms for six months. Based on Ayurvedic assessment, a Pitta-predominant Mukhapaka diagnosis was made. Treatment included Saptamruta Loha Vati, Yashtimadhu Ghrita (local application), Gandusha with Yashtimadhu Churna, and Avipattikar Churna. Significant improvement was observed, with complete resolution of symptoms by the first follow-up. This case highlights the effectiveness of classical Ayurvedic formulations in the management of Mukhapaka.

KEYWORDS: Oral Health, Pratisarana, Dietary Modifications, Ulcer, Gandusha

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INTRODUCTION

Stomatitis is a mucosal inflammatory condition involving the oral cavity, commonly affecting the tongue, gingiva, lips, buccal mucosa, and the floor of the mouth. Clinically, it is characterized by erythema, ulceration, and significant discomfort or pain. It can cause painful sores, redness, swelling, and discomfort, making it difficult to eat, drink, or speak. Stomatitis can be caused by infections (like viruses or bacteria) [1], irritation from dentures or braces, allergic reactions, nutritional deficiencies, or certain medical conditions. In the pursuit of safer therapeutic options, herbal formulations are increasingly being utilized by traditional practitioners and indigenous healers worldwide for the management of ulcerative conditions. The extensive legacy of ethnomedicinal knowledge is now gaining recognition and interest on a global scale. *Mukhapaka* is identified as one of the 40 distinct disorders arising from *pitta dosha* (*Nanatmaja Pitta Rogas*) as per *Acharya Charaka. Dalhana*, in his commentary on the *Sushruta Samhita*, describes *Mukhapaka* as fundamentally a *pittaja* condition. However, *Acharya Sushruta* categorizes *Sarvasara Mukharoga* into four types based on the predominance of doshas—*vataja*, *pittaja*, *kaphaja*, and *raktaja*. The provocation of these doshas (*vata*, *pitta*, *kapha*, and *rakta*) leads to inflammatory changes and ulcerative lesions (*paka* and *vrana*) within the oral cavity [3, 5].

CASE STUDY

A 27-year-old female patient came to OPD with following symptoms.

- Burning sensation in mouth in the last 6 months
- Pain
- Recurrent Ulcers

Medical History: No significant past medical history.

Clinical Assessment

History of Present Illness

A 27-year-old female presented to the OPD with complaints of a burning sensation in the oral cavity for the past six months, accompanied by intermittent pain and recurrent oral ulcers. The burning worsens with spicy or acidic foods. The ulcers are painful, shallow, and reappear at irregular intervals. There is no

history of trauma, systemic illness, or relevant drug intake. The patient has no habits of tobacco use, smoking, or alcohol consumption.

Personal History

- Bowel-Regular
- Appetite-Good (excessive intake of spicy food)
- Acidity++
- Micturation-5-6 times/day
- Sleep-Sound

Ashtasthana pareeksha

- Nadi-68/min
- Mala-Regular
- Mutra-4-5 times/day
- Jivha- Aipta
- Shabda- Prakruta
- Sparsha-Anushna sheeta
- Druk-Prakruta
- Akrti-Madhyam

Vitals

- Pulse-68/min
- Respiratory rate-16/min
- Temp-98.60 F
- BP-120/80mm of Hg

Systemic Examination-All the systemic examinations revealed no abnormalities.

Clinical Examination:

Otorhinolaryngological Examination

Oral cavity-Tongue-Ulcer present at Rt side of Dorsal surface of tongue
 Buccal Mucosa-Ulcer on Lt buccal mucosa

Table no-1-Ear Examination

Rt Ear	EAC-Mild Wax	TM-Intact
Lt Ear	EAC-NAD	TM-Intact

Nose-DNS towards left side-(c-Shaped)

- ITH left nostril
- PNS-Non tender

Table no-2-Grading of Mouth Ulcer

Symptoms	Before Treatment	After Treatment	1 st follow up
-Daha	2	1	0
-Shoola	3	1	0
-Lalasarava	0	0	0
-Vrana	2	0	0
-Araktata	3	1	0

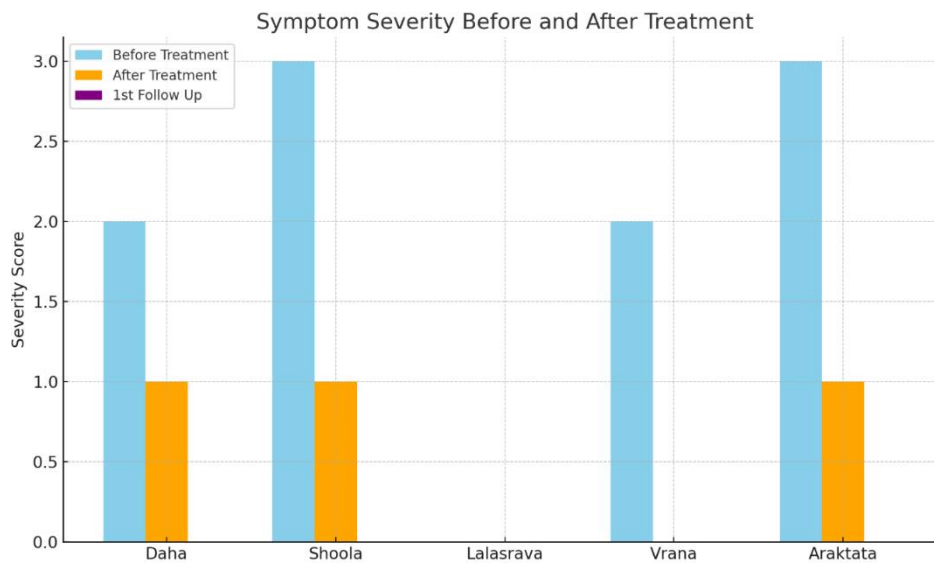


FIGURE:1 Observation Before & After treatment of Mouth Ulcer(stomatitis)

Table No-3 Treatment Protocol

Sr no	Name of drug	Dose of drug	Kal	Frequency and Anupana
1	Saptamruta Loha Vati	2 tab	After food	Thrice a day with Ghrita
2	Yashtimadhu Ghrita	For local application	-	-
3	Yashtimadhu Churna + Tila Taila + Sandhaiva	For Gandusha	-	Twice a day
4	Avipattikar Churna	2gm	After food	At night

DISCUSSION

Yashtimadhu Ghrita [1-4]

It helps to soothe the inflamed oral mucosa and promotes the healing of ulcer. It pacifies aggravated Pitta and Rakta doshas, which are often implicated in the inflammation and ulceration of Mukhapaka. The lipophilic nature of ghee enhances the mucosal absorption of phytoconstituents, bypassing first-pass hepatic metabolism and facilitating rapid therapeutic action. The primary bioactive compounds, including glycyrrhizin and liquiritin, possess anti-inflammatory, antioxidant, demulcent, and immunomodulatory properties. These agents promote epithelial regeneration (Vrana Ropana). The lipophilic nature of ghee enhances the mucosal absorption of phytoconstituents, bypassing first-pass hepatic metabolism and facilitating rapid therapeutic action. The primary bioactive compounds, including glycyrrhizin and liquiritin, possess anti-inflammatory, antioxidant, demulcent, and immunomodulatory properties. These agents promote epithelial regeneration, reduce oxidative stress, and modulate local immune responses, aiding in mucosal healing and inflammation control. Submucosal administration is particularly effective for conditions requiring localized therapy (e.g., oral ulcers, sinusitis, or proctitis) and ensures enhanced bioavailability of the formulation. Ghrita acts as a bioenhancer, improving the penetration and efficacy of the herbal constituents at the target site. reduce oxidative stress, and modulate local immune responses, aiding in mucosal healing and inflammation control. Submucosal administration is particularly effective for conditions requiring localized therapy (e.g., oral ulcers, sinusitis, or proctitis) and ensures enhanced bioavailability of the formulation. Ghrita acts as a bioenhancer, improving the penetration and efficacy of the herbal constituents at the target site.

Saptamruta Loha Vati [5]

A classical Ayurvedic iron-based formulation, comprises Lauha Bhasma along with rejuvenate and digestive herbs such as Triphala, yashtimadhu, etc. This formulation is particularly beneficial in conditions associated with oral ulcers, which may be exacerbated by iron deficiency or suboptimal haemoglobin levels. By enhancing erythropoiesis and improving systemic oxygenation, it supports the regeneration of oral mucosa. Additionally, its herbal constituents possess anti-inflammatory and deepana-pachana (digestive and metabolic enhancing) properties that help reduce Ama (metabolic toxins), thereby promoting overall mucosal integrity and healing.

Yashtimadhu churna+Tila taila Gandusha [6-7]

A mouth full of liquid, taila, ghrita, honey without any movement inside mouth is called as Gandusha. Holding liquid full in mouth cause mechanical pressure on salivary gland. Salivary gland produces saliva. Saliva has bacteriostatic action not permit to the infectious origins. Yashtimadhu has vrana ropana properties and Tila Taila has warming, nourishing, and balancing properties.

Avipattikar Churna:

A classical polyherbal formulation known for its efficacy in managing hyperacidity and related gastrointestinal disturbances. Composed of ingredients such as *Triphala*, *Trikatu* and Ela, among others, it exerts a cooling and soothing effect on the digestive tract [8]. The formulation helps regulate excessive Pitta activity, which is often implicated in acid peptic disorders. By normalizing acid secretion and promoting healthy digestion, *Avipattikar Churna* alleviates symptoms like burning sensation and acid reflux. This reduction in gastric acidity also has a positive impact on recurrent oral ulcers, which are commonly aggravated by Pitta-induced hyperacidity. Its mild laxative and detoxifying action further support systemic balance, making it beneficial in both the prevention and healing of stomatitis (*Mukhapaka*).[9, 10]

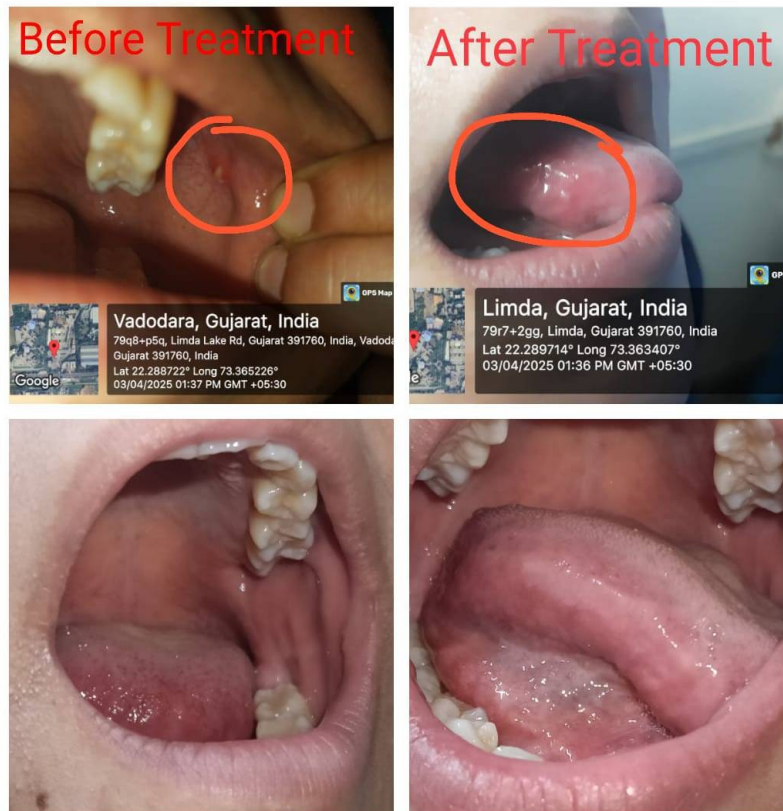


FIGURE-2 Before & After Treatment (Mouth Ulcer)

Before Treatment (Top Left) (Fig 2)

- The circled area shows a small, round sore inside the cheek.
- It appears:
- Reddish with a possible pale/white center
- Slightly inflamed and irritated
- This is typical of an active ulcer:
- The red border = inflammation
- The pale center = tissue breakdown covered by a thin layer (fibrin)
- These ulcers are usually painful, especially when eating or touching

After Treatment (Top Right) (Fig 2)

- The same area looks:
- Less red and less inflamed

- More pink and smooth
- No obvious open sore or white center
- This indicates:
- Healing of the mucosal tissue
- Reduction in inflammation
- Tissue regeneration has begun or completed

CONCLUSION

This case study highlights the effective management of *Mukhapaka* (stomatitis) through a multi-modal Ayurvedic approach targeting Pitta and Rakta dosha vitiation, which are central to the pathogenesis of oral ulcers. The combination therapy using *Saptamruta Loha Vati*, *Yashtimadhu Ghrita*, Gandusha with *Yashtimadhu Churna* and Tila Taila, and *Avipattikar Churna* demonstrated a significant reduction in classical symptoms such as *daha* (burning), *shoola* (pain), *vrana* (ulceration), and *araktata* (erythema) across the follow-up period. These interventions, by virtue of their anti-inflammatory, mucosal healing, pitta-pacifying, and digestive-balancing properties, provided symptomatic relief and promoted tissue regeneration. This case supports the therapeutic potential of classical Ayurvedic formulations in managing chronic, recurrent stomatitis, suggesting their role as effective and safe alternatives or adjuncts to conventional care in similar clinical presentations.

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