

## 11.7. Jihwastambha

### जिह्वास्तम्भ (Jihvā-stambha) — “tongue-stiffness / paralysis”

(A member of **Vatavyādhi** group, clinically akin to isolated glossal palsy, bulbar-LMN involvement or severe dysarthria after stroke/viral neuritis)

## 1 रोगस्वरूपम् | Classical snapshot

“जिह्वास्तम्भः स्तम्भिताक्षरभाषितः

स्नाद्यपाने व्यवहितः वाक्प्रवृत्तिविवर्जितः”

— Mādhava Nidāna, Vātavyādhi Nidāna, śloka 52

“When aggravated **Vāta** impairs the nerves of the voice-track, the tongue becomes stiff; the patient cannot articulate, chew, drink or speak.”

### Key clinical signs

- Sudden heaviness & numbness of tongue
- Slurred / absent speech, drooling, bite injuries
- Difficult deglutition, cough while sipping

## 2 सम्प्राप्ति (Pathogenesis)

Ghaṭaka	Details
Hetu	Direct cold-dry wind on face/ neck, day-sleep, speaking for long, post-viral neuritis, brain-stem stroke, trauma around ear
Doṣa	<b>Vāta</b> (Prāṇa + Udāna) ↑; often <b>Kapha āvaraṇa</b> (local oedema)
Dūṣya	Snāyu (hypoglossal nerve & intrinsic muscles), Rakta / Māṃsa
Srotas	Rasavaha & Nāḍīvaha of head-neck
Adhiṣṭhāna	Jihvā-mūla & stylomastoid canal (nerve exit)

Pathway → rukṣatā / śīṭala guṇa dries myelin → Vāta blocks conduction → tongue becomes rigid or flaccid.

### 2.1 Samprāpti-vighaṭana (Break-the-chain strategy)

1. **If Kapha/āma cloak present** → Rūkṣa nāḍī-sweda + mṛdu virecana (castor oil)
2. **Sneha-sātmyakaraṇa** — internal & external oils restore lipid sheath
3. **Local Sweda** — nāḍī-sweda / Kṣīra-dhūma milk-steam (classic for tongue palsy)
4. **Nasya / Nāvana** — direct drug-delivery to cranial vault (see sūtra below)
5. **Basti** (for chronic / recurrent cases) - pacifies root Vāta

## 3 चिकित्सा-सूत्र (concise rule-set)

“अदिते नावनं मूर्ध्नि तैलं तर्पणमेव च,



नाडीस्वेदोपनाहाश्च...” — C. S. Cikitsā 28 | 99 (guideline for head-neck vatika)

Applied to Jihvā-stambha it yields the mnemonic “**N S T S B R**”

Letter	Measure	Purpose
<b>N</b>	<b>Nāvana-nasya</b> (Brahmī-ghṛita / Ānū-taila 6 drops/nostril × 7-14 d)	Unblocks Prāṇa-vāta channels
<b>S</b>	<b>Sneha-pāna</b> (Kṣīrabala 101 taila 10-15 ml b.i.d.)	Re-myelination, vāta-śamana
<b>T</b>	<b>Taruṇa-Kṣīra-dhūma</b> (medicated milk-steam) to face/tongue 10 min	Snigdha sweda, improves nerve blood-flow
<b>S</b>	<b>Swedana / Upanāha</b> – Nirgundī-tila-saindhava paste over jaw 4 h daily	Local warmth & drug penetration
<b>B</b>	<b>Basti</b> (Dashamūla nirūha + Kṣīrabala anuvāsana, 8-day yoga-basti)	Root-level Vāta control, prevents relapse
<b>R</b>	<b>Rasāyana</b> phase (Aśvagandhā-lehya, Guḍūcī-satva, Śilājatu) for 8-12 wk	Axonal repair & speech recovery

## 4 प्रायोगिक चिकित्सा-योजना (21-day clinic template)

Day	A.M.	Noon	P.M.	Goals
1-3	Dry nāḍī-sweda to face + hot water sips; Hingvāṣṭaka 2 g t.i.d.	Light gruel	<b>Erand-taila</b> 20 ml bedtime (once)	Clear Kapha/āma
4-10	Kṣīrabala taila pāna 10 ml; Head abhyanga; <b>Kṣīra-dhūma</b> 10 min	Mahārasnādi kaṣāya 40 ml	Nasya 6 drops; facial physio drills	Sneha-Sweda-Nasya core
11-18	<b>Yoga-basti</b> schedule (alt. nirūha / anuvāsana)	Continue kaṣāya	Upanāha over jaw; mirror speech therapy	Deep vāta-śamana
19-21	Start Rasāyana stack: Aśvagandhā-lehya 10 g h.s., Brahmī vati 250 mg t.i.d.	Soft diet	Kṣīrabala pāna 5 ml	Neural rebuild

(doses tailored to deha-bala & agni)

## 5 Rasāyana add-ons (weeks 3-12)

Drug	Dose	Neuro-action
<b>Aśvagandhā-lehya</b>	10 g h.s. with warm milk	Nerve growth, myo-tone
<b>Brahmī-ghṛita</b> (oral)	5 ml a.m.	Synaptic plasticity
<b>Guḍūcī-satva</b>	500 mg b.i.d.	Anti-inflammatory, antioxidant
<b>Śilājatu</b> (śuddha)	250 mg b.i.d.	Trace minerals for axoplasm

## 6 Pathyā • Apathyā

### Pathyā

- Warm ghee-enriched diet (rice-gruel, mung-soup).
- Garlic-milk at night, sesame-laddu for lipid sheath.
- Daily head-abhyanga, scarf protection from wind, vocal rest.
- Tongue-mobilising physiotherapy: balloon blowing, “la-ra-ta-ka” drills.

### Apathyā

- Cold fizzy drinks, dry snacks, smoking, excess sour pickles.



- Speaking loudly for long, day-sleep post-lunch, night-vigil.
- AC draft directly on face / neck.

## 7 Why Nasya & Kṣīra-dhūma are pivotal

Nasya is the “gateway to the cranial vault”; Prāṇa-vāta seats include **jihvā (tongue)** itself, so oil drops reach the facial-nerve plexus quickly.

Kṣīra-dhūma combines **uṣṇa (heat) + sneha (milk fat)** → reduces nerve oedema, re-lubricates myelin, proven useful in Jihvā-stambha, Ardita and Hanustambha.

### Take-home mnemonic → “N S T S B R”

Nasya → Sneha-pāna → Tāruṇa Kṣīra-dhūma → Sweda/Upanāha → Basti → Rasāyana.

Follow the sequence, respect āma/kapha first, keep diet warm-unctuous, and tongue palsy usually regains speech within 3-6 weeks.