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An Ayurvedic treatment protocol in the management of *Vataja Prathishyaya* w.s.r. to Allergic Rhinitis - A Case Report

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ABSTRACT

Introduction: *Prathishyaya* is one among 31 *Nasagatha Roga* explained by *Sushruta Acharya*. *Vata* and *Kapha* are said to be the predominant *Doshas* involved in the manifestation of this condition. *Vataja prathishyaya* is one among 5 types of *Prathishyaya*. It is a common disorder characterized by *Anaddha Pihita Nasa*, *Tanusrava*, *Shosha in Gala Taalu* and *Oshta*, pain in *Shankpradesha* and *Swaropaghatha*. It is correlated to allergic rhinitis. This is a disorder in which there are episodes of nasal congestion, watery nasal discharge sneezing and redness and itching in eyes and nose. Allergic Rhinitis is due to an immediate hypersensitivity reaction to nasal mucosa. According to ayurvedic perspective allergy is scientifically explained under *Asatmyaja Vyadhi* and is mainly caused due hereditary factor, *Viruddhahara*, *Dushivisha* & *Ritu Sandhi*. This is the case report of 20 years old male patient complaints of continuous episodes of sneezing, running nose, itching in eyes and nose since 3 years. **Materials and Methods:** The subject who approached *Shalaky Tantra* OPD of Government Ayurveda Medical College, Bengaluru with symptoms of episodes of sneezing, running nose, itching in eyes and nose since 3 years was systematically reviewed and treatment modalities like *Nirgundi Taila Nasya* and internally *Guda Maricha* yoga is advised. **Results:** The subject showed marked improvement symptomatically and marked changes are seen in haematological investigations. **Discussion:** *Vataja Prathishyaya* is affecting the *Urdhwajatru* especially *Nasa* and hampering the lifestyle of the patient. It is mainly *vata* and *kaphaja vyadhi*. *Nasya* and *Abhyantara yoga* advised are *Vata - Kaphara* in nature, having anti-inflammatory and antiallergic property hence it has shown marked improvement.

Key words: *Vataja Prathishyaya*, *Allergic Rhinitis*, *Nirgundi Taila Nasya*, *Guda Maricha Yoga*

INTRODUCTION

Rhinitis is the condition in which the mucous membrane of the nose is inflamed. Allergic Rhinitis is an immunoglobulin IgE mediated type 1 hypersensitivity inflammatory disease. It is a type of

inflammation in the nasal mucosa, paranasal sinuses and sometimes mucosa of the lower respiratory tract which occurs when the immune system overreacts to allergens in the air. When an allergen such as pollen or dust is inhaled by an individual with a sensitized immune system, triggering antibody production. These antibodies often bind to histamine-containing mast cells. When the mast cells are stimulated by pollen and dust, histamine (and other chemicals) is released. This causes running nose, sneezing, red, itchy, and watery eyes, and swelling around the eyes. Allergic Rhinitis is an acute, recurrent and episodic disease.^[1]

Worldwide it affects between 10-25% of the population and in India 20- 30% of population suffer from this disease. This is one such condition extensively prevailing and disturbing the individual's routine life and certainly lowering the quality of life

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due to its more prevalence in all different age groups and in both the sexes.

In conventional system of medicines antihistamines, decongestants and corticosteroids are advised. According to ayurvedic perspective it is correlated to *Vataja Prathishyaya*. *Vata* and *Kapha* are said to be the predominant *Doshas* involved in the manifestation of this condition. Clinical manifestations of the allergic rhinitis are same as *Vataja Prathishyaya*. It is a common disorder characterized by *Anaddha Pihita Nasa*, *Tanusrava*, *Shosha in Gala Taalu* and *Oshta*, pain in *Shankapradesha* and *Swaropaghatha*.^[2] The treatment modalities which are adopted in this case study is *Nasya* which is helpful in restoring the normalcy of nasal mucosa and internal medicine gives *Rasayana* effect so helps in preventing the reoccurrence of the disease.

OBJECTIVES

1. To understand the pathophysiology of *Vataja Prathishyaya* with respective to allergic rhinitis.
2. To find better and satisfying ayurvedic approach in *Vataja Prathishyaya*.

CASE REPORT

Basic information of the patient

Age: 20 years

Gender: male

Religion: Hindu

Occupation: Student

Socioeconomic status: Middle class

Chief complaints

Complaints of continuous episodes of sneezing, watering and itching in eyes and running nose since 3 years.

History of present illness

Patient was apparently normal 3 years back then he developed continuous episodes of sneezing, blockage in nose, sometimes watery discharge in eyes and nose and itching in eyes and nose for these complaints he

approached allopathic hospitals but never felt any kind of relief so he then approached our hospital for better management.

History of past illness

Nothing specific.

Treatment history

Cetirizine - 5 mg bd.

Personal History

Appetite: Patient had taken a mixed type of diet, Madhur rasa dominance, and moderate appetite. *Koshta: Madhyama Koshta*.

Micturition: regular and normal.

Bowel habits: irregular.

Sleep: disturbed sometimes.

Vitals

- Respiratory rate: 24/min
- Regular Temperature: 98.6F
- Blood pressure: 120/90 mm of Hg
- Pulse: 104/min

Physical Examination

- Weight: 46 kg
- Height: 150 cm
- Pallor: No pallor
- Lymphadenopathy: No lymphadenopathy

Examination of Eye

No conjunctival infection, frequent rubbing of the eyes, irritability and mucous discharge.

Itching and watering of eyes present.

Examination of Nose^[3]

1. Inspection: Swelling of the nasal mucosa, thin secretions.
2. Anterior Rhinoscopy: Lower and anterior part of septum, middle turbinate appears red, floor of the nose becomes red, mucosa red, septum normal.

3. Obstruction of nose/ Nasal Patency: No nasal polyps.

Examination of Ear

a) EAC: Normal

b) Tympanic Membrane: Normal

Examination of sinus: Facial tenderness on palpation of the sinuses.

Examination of throat: Posterior oropharynx is moist, mucous accumulation in the back of the nose and throat, no sign of inflammation.

Laboratory

- Hb% - 14.5 gm%
- TLC – 5800/cu mm
- Neutrophils - 63%, Lymphocytes - 29%, Monocytes - 3 %, Eosinophil - 5, Basophils
- ESR – 30 mm/hour
- Absolute Eosinophil count – 595 /cu.mm

Instrumentation^[6]

Symptoms	Score
Nasavarodha (Nasal Obstruction)	
No Obstruction	0
Partially Occasional & Unilateral	1
Partially Occasional & Bilateral	2
Complete, Frequently & Unilateral	3
Always Complete & Bilateral	4
Kshavathu (Sneezing)	
No	0
1-5 bouts per day	1
6-10 bouts per day	2
11-20 bouts per day	3
More than 21 bouts per day	4

Shirashoola (Headache)	
No	0
Occasional	1
Intermittent	2
Continuous	3
Intolerable	4
Anterior Rhinoscopic Findings (Color of mucosa)	
Pink (Normal)	0
Red (Inflamed)	1
Cherry Red / Blue (Blood stained)	2
Tanu Srava (Watery discharge)	
No discharge	0
Negligible discharge	1
Intermittent discharge	2
Continuous discharge	3
Profuse discharge	4
Swarbhedha (Hoarseness of voice)	
No change of voice	0
Occasional hoarseness of voice	1
Frequent hoarseness of voice in morning hours	2
Frequent hoarseness of voice throughout the day	3
Cannot speak due to hoarseness of voice	4
Post Nasal Discharge	
Not Present	0
Occasional Present	1
Frequent Discharge	2
Continuous Discharge	3
Continuous Heavy Discharge	4

Treatment Adopted

The patient was treated in the OPD of the Shalaky Department of GAMC Bengaluru and treatment was planned considering involved *Dosha* and *Dushya*. *Nasya* was planned for 14 days with the gap of 7 days along with the internal medicine. Following treatment was administered:

- *Shodhana* done with *Trivritth Lehya* - 40 gms was administered for a day 8 *Vegas* was observed and 1day *Parihara Kala* with the intake of light food.
- *Snehana* - *Mridu Abhyanga* with *Ksheerbala Taila* [*Ashtanga Hridaya, Vatarakta Chikitsa Adhyaya 22/44*] (*Bala, Ksheera, Tila Taila*) was done on scalp, forehead and over neck regions for 3-5 minutes.
- *Swedan* - *Bhashpa Swedan* for 2-3 minutes.
- *Nasya Karma* - *Shodhana Nasya* with *Nirgundi Taila*. 4-6 drops of lukewarm *Nirgundi Taila* (4) was administered to each nostril in the morning for 14 days with the gap of 7 days in between.
- Oral Medication - *Guda Maricha Yoga* ^[5] - *Guda and Maricha* both are taken in equal quantity and *Choorna* is prepared. This *Choorna* is given 3 gms bd.

OBSERVATIONS & RESULTS

After completion of 21 days of treatment and follow up for 1 month's clinical assessments were made from the interrogation with patient and assessment of objective parameters. The outcome observed was a drastic change in the parameters as:

Symptoms	BT	AT (After first sitting of nasya)	AT (After second sitting of nasya)	Follow up (After 30 days)
<i>Nasavarodha</i> (Nasal Obstruction)	2	1	1	1
<i>Tanu Srava</i> (Watery	2	1	1	0

discharge)				
<i>Kshavathu</i> (Sneezing)	3	1	1	1
<i>Swarbhedha</i> (Hoarseness of voice)	2	0	0	0
<i>Shirashoola</i> (Headache)	1	0	0	0
Post Nasal Discharge	2	2	1	1
Anterior Rhinoscopic Findings (Colour of mucosa)	1	1	0	0

Haematological investigations	Before treatment	After treatment
ESR	30 mm/hour	15mm/hour
AEC	590/cu. Mm	400/cu.mm

DISCUSSION

Allergic Rhinitis is a disease which hampers the quality of life and disturbs the daily activities of the person. The incidence rate of this disease is increasing day by day due to the increased environmental pollution, stressful life and decreased immunity of the person. At this stage, if Allergic Rhinitis is not treated, it may lead to infection resulting in various complications. Allergic Rhinitis is caused due to smoke, dust, allergy, atmospheric pollution,

Change in humidity and psychological factors. The features of Allergic Rhinitis mentioned in Allopathic Science are Sneezing, Nasal Obstruction, Watery Nasal Discharge, Change in Voice, Headache, Dryness of throat and lips.

Vataja Prathishyaya is a *Nasagata Roga* described in detail in Ayurvedic classics in which there is vitiation of *Vata* and *Kapha Doshas* resulting in *Kshawathu* (profuse sneezing), *Nasaavarodha* (nasal obstruction), *Jalaja Nasa Srava* (watery nasal discharge), *Gala Talu Shushkatha* (dryness of the throat and lips), *Swaropaghata* (change in voice), *Shirashoola*

(headache). It can be co-related with the disease Allergic Rhinitis mentioned in modern science.

The allergens which are inhaled releases newly formed or preformed mediators, which leads to the causation of;

1. Increased vascular permeability and vasodilation followed by tissue oedema and nasal blockage.
2. Change in smooth muscle tone followed by Bronchospasm.
3. Hyperactivity of glands followed by increased secretion and rhinorrhoea.

Nasya is one of the effective lines of treatment indicated in most of the *Urdhwajatrugata Vikaras*. This treatment is equally beneficial in treating *Vataja Prathishyaya* as it is one among the *Nasagatharoga*. Trans-nasal administration of medicated drugs plays an important role in treating the disease by preventing the contact of the allergens by forming barrier between the nasal mucosa which helps in preventing the reoccurrence of disease.

In this present study, *Nirgundi a best Vataharaand Prathishyayahara* drug is used for *Nasya* in the form of *Taila* and along with that *Guda Marichyoga* will be used as *Abhyantaraprayoga* which is also *Ushna, Snigdha* and *Vatakaphahara* in nature. *Taila Nasya* helps in restoring the normal structural and functional integrity of nasal mucosa and internal medication will boost the immunity by its *Rasayana* effect.

CONCLUSION

Vataja Prathishyaya (Allergic Rhinitis) if untreated can lead to bronchial asthma, recurrent middle ear infections, sinusitis and chronic cough. The case study has revealed a remarkable efficacy in *Vataja Prathishyaya* with a significant result in most of the

assessment criteria. The symptoms score did not worsen and was maintained. This was pilot study to evaluate the efficacy of *Nasya Karma* and oral medication in the management of *Vataja Prathishyaya* and the result produced was encouraging enough not only on the assessment parameters, but also helped to gain resistance against allergens, repeated attacks and promoted immunity, physical and mental health of the patient.

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