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**MANAGEMENT OF *VATAJA PRATISHYAYA* THROUGH AYURVEDIC
LINE OF TREATMENT WITH SPECIAL REFERENCE TO ALLERGIC
RHINITIS-A CASE STUDY**

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ABSTRACT

Vataja Pratishyaya is a *Nasagata roga* described in detail in *Sushruta Samhita Uttaratantra*. In modern we can correlate it with Allergic rhinitis depending on signs and symptoms. It commonly affects people with low immunity. It is usually a long-standing condition that if not treated on time can lead to serious respiratory complications. It is characterized by Nasal blockage, Runny nose, change in voice, Dryness of mouth- throat, Severe headache, and Itching in the eyes. It is mainly caused due to exposure to allergens like dust, pollen, and seasonal changes. According to *Ayurveda*, *vataja pratishyaya* is the result of *Vata-Kapha dosha* vitiation. The vitiated *doshas* get lodged in *mastishka* leading to *vataja pratishyaya*. In the description of *Vataja pratishyaya chikitsa*, *Acharya Sushruta* says to take *panchalavanasiddha sarpipana*, *Vidarigandhadi gana chikitsa*, *Nasyadi chikitsa*, *Ardita chikitsa*. Here, the patient is treated with *Nasya* therapy with *Anu taila* along with some oral medications.

Keywords: Allergic rhinitis, Shamana chikitsa, Shodhana Nasya, Vataja Pratishyaya

INTRODUCTION:

According to *Ayurveda Vataja Pratishyaya* is mentioned under *Urdhwajatrugata vikara*. It is one among the five types of *Pratishyaya* mentioned in the classics. It is the commonest occurring disease around the world that affects the routine of people. In the *Uttharatantra*, *Acharya Sushruta* emphasizes the significance of *Pratishyaya*. *Vata*, the primary *Dosha*, is involve in *Pratishyaya*, and it is interconnected with *Kapha*, *Pitta*, and *Rakta* (Blood). It is caused due to *Sharirik* and *Manasik karanas* [1]. It represents complaints like *Ananddha pihita* (Nasal blockage), *Nasa tanu srava* (Watery discharge from nose), *Galatalvoshtashosha* (Dryness of *Gala-Talu-Oshtha*), *Nistoda Shankhayo* (Sharp pain at temporal region), *Swaropaghata*. These symptoms are similar to Allergic rhinitis. Inadequate management of *Pratishyaya*, or rhinitis, can progress to a severe and complex condition known as *Dushta Prathishyaya*. This can result in complications such as *Badhirya* (Hearing loss), *Andhatwa* (Blindness), and *Aghranatwam* (Anosmia) [2]. In contemporary medical understanding, rhinitis, characterized by symptoms like nasal congestion, runny nose, sneezing, and eye irritation, is commonly triggered by airborne allergens such as dust mites, pollen, spores, as well as animal skin, urine, and saliva. The

presentation often resembles cold-like symptoms, with clear nasal discharge [3]. Globally, allergic rhinitis (AR) affects approximately 10% to 30% of adults and can reach up to 40% in children. The concurrent occurrence of AR and asthma is notably elevated, with a coexistence prevalence rate of 65.24%, reaching 80% in the southern regions of India [4]. According to *Acharya Sushruta*, *Vataja pratishyaya* is an *Amashayottha janya vyadhi*. So, here initially *Deepana-pachana aushadhis* are given, and later, *Shodhana nasya* is administered.

CASE REPORT:

History of present illness -

A 51-year-old female patient came to the OPD with complaints of watering from bilateral nostrils and occasional nasal obstruction. The patient was normal before 2 months; then, she started having complaints of watering from bilateral nostrils and sneezing. Additionally, she developed a cough, headache, and nasal obstruction sometimes. The patient didn't want to take allopathic medication, so she came to the ENT OPD of Parul Ayurveda Hospital for an Ayurvedic line of management.

History of Past illness: Not Specific

Personal history:

<i>Ahara</i>	Mixed
<i>Nidra</i>	Disturbed
<i>Mala pravrutti</i>	Prakrut
<i>Mutra Pravrutti</i>	Prakrut
<i>Vyasan</i>	No Any
<i>Asatmya</i>	No Any
<i>Vyayama</i>	Moderate
<i>Vyavasaya</i>	Housewife

Ashtavidha Pariksha:

<i>Nadi</i>	<i>Vata-Kapha</i>
<i>Mutra</i>	Prakrut
<i>Mala</i>	Prakrut
<i>Jivha</i>	Alipta
<i>Shabda</i>	Prakrut
<i>Sparsha</i>	Anushnasheeta
<i>Druk</i>	Prakrut
<i>Akruti</i>	Madhyama

Vitals: -

Respiratory Rate: 24/min

Blood Pressure- 130/70 mmHg

Temperature: 97 ° F.

Pulse Rate- 78/ min

Physical Examination:

Height: 5 feet

Weight: 52 Kg

Pallor: No Pallor

Lymphadenopathy: No lymphadenopathy

Examination of Nose:

Parts of Nose	Anterior Rhinoscopy Examination
Septum	Deviated to left side
Mucosa	Bilateral nasal mucosa congested
Turbinate	Inferior turbinate hypertrophy
Discharge	Watery discharge from bilateral nostrils

Examination of Sinus:

Tenderness present on bilateral frontal sinus

Examination of throat:

Postnasal Drip present

Examination of Ear:

Parts of Ear	Right Ear	Left Ear
External Auditory Canal	Clear	Mild wax
Tympanic Membrane	Intact	Intact

Examination of Eyes:

Parts of Eye	Right Eye	Left Eye
Lids and lashes	No abnormality detected	No abnormality detected
Conjunctiva	No abnormality detected	No abnormality detected
Cornea	Clear	Clear
Pupil	Round, Regular, Reactive	Round, Regular, Reactive
Anterior chamber	No abnormality detected	No abnormality detected
Lens	Transparent	Transparent

Laboratory Investigations:

Hb%- 12.4 gm/dl

TLC- 8830 /cmm

Platelets- 242000 /Microliter

Neutrophils- 69%

Lymphocytes- 25%

Monocytes- 3%

Eosinophil- 3%

Basophils- 0

RBS- 86 mg/dl

TREATMENT:

The patient was managed in Parul Ayurved Hospital, and following treatment was given:

Shamana Chikitsa for 10 days, *Nasya karma* started from 4th day of treatment.

Sr. no	Treatment	Dose	Anupana	Interval	Time	Duration
1.	<i>Amruttotara kashaya</i>	15 ml	45 ml warm water	Twice a Day	Before food	3 Days
2.	<i>Haridrakhanda rasayana</i>	1 tsp	<i>Godugdha</i>	Once a Day	At Night After food	7 Days
3.	<i>Sitopaladi choorna</i>	1gm	<i>Madhu</i>	Twice a Day	After food	7 Days
4.	<i>Shodhana Nasya with Anutaila</i>	8 drops each Nostrils	-	Once a Day	At morning	7 Days

OBSERVATION:

In the initial days of *Shamana Aushadhis*, the patient started feeling relief from nasal discharge. Subsequently, *Nasyakarma* was followed for 7 days. After that, she experienced significant relief from headache and nasal obstruction.

After the completion of treatment for 10 days, improvement was noted in the patient's condition. A follow up was planned after 1 week.

RESULTS:

Until the final day of the treatment, there was significant improvement in the patient's condition. Nasal discharge was subsided on day 3. On 6th day she also felt relieved from sneezing, cough, nasal blockage, and headache. On the Alternate follow up she was satisfied with the treatment. She was feeling 70- 80%relief in all the symptoms and had improvement in troubled sleep. On the final

follow up at day 11, patient felt entire relief from all the symptoms.

EXAMINATION AFTER TREATMENT:

Examination of Nose	Anterior Rhinoscopy Examination
Septum	Deviated to left side
Mucosa	No abnormality detected
Turbinate	No abnormality detected
Discharge	Absent

Examination of Sinus: No abnormality detected

Examination of throat: No abnormality detected

DISSCUSION:

Allergic rhinitis is the most common occurring disease among all types of Rhinitis. People nowadays are more prone to this disease due to increased pollution in the environment, stressful life, bad habits of a person and low immunity [5]. According to *Ayurveda*, *Vataja pratishyaya* is *amashayottha janya vyadhi*. So, to treat the disease, first, we had to do the *Chikitsa* of

Ama. Here, in this case, *Ama chikitsa* was done by *Amrutottara Kashaya*. It has antimicrobial properties, does *Deepana pachana* and improves digestion. In the context of allergic rhinitis, the anti-inflammatory, antioxidant, and immunomodulatory properties of *Guduchi* and *Haritaki* in *Amrutottara Kashaya* suggest potential benefits [6]. Besides that in *Haridra Khanda*, most of the components exhibit properties *Agnivardhak* (Enhance digestive fire), *Deepana* (promote digestion), and *Pachana* (assist in the breakdown of toxins). *Haridra Khanda* itself possesses *Rasayana* (rejuvenating), *Jeevaniya* (life-sustaining), *Balya* (strength-enhancing), *Bhrumhaniya* (tissue-nourishing), *Ojovardhaka* (vitality-boosting), *Ayurvedhaka* (longevity-promoting), and *Dhatuposhaka* (tissue-nourishing) properties, indirectly boosting the body's resistance against diseases. Scientifically validated effects include anti-inflammatory, analgesic, antipyretic, antioxidant, immune-modulating, anti-allergic, and anti-histaminic activities attributed to the ingredients of *Haridra Khanda* [7]. *Sitopaladi Choorna* has properties that increase digestive fire, improve appetite, and remove *ama*. It also possesses anti-inflammatory and expectorant properties, making it a prescribed remedy for respiratory

problems. *Sitopaladi Choorna* boasts vigorous antioxidant properties that can help combat the damaging effects of free radicals. Additionally, it exhibits antihistaminic activity [8]. Once the patient got *Nirama Avastha*, *Nasya* therapy with *Anutaila* was administered.

Mode of Action of Nasya Karma:

Nasya karma is a therapeutic procedure in *Ayurveda*, it involves administering medicine through the nasal route. According to *Acharya Charaka* and *Vagbhatta*, the medication spreads easily into the *Sira* (Channels), get absorbed, and eliminates *vikrut doshas* present in the *Urdhva Jatrugata Pradesha* (upper respiratory tract). Prior to *Nasya*, *Urdhvajatrugata Abhyanga* and *Swedana* are performed to aid drug absorption. The head is positioned lower during administration to retain the medicine in the nasopharynx, prolonging contact with the mucosa. Following absorption, the drug may take neural (olfactory and trigeminal) and circulatory (cavernous sinus) pathways to reach the target site, influencing various levels, such as the limbic system, sensory and motor functions, and general circulation, leading to either excitation or sedation. *Anutaila*, due to its fine spreading ability through small channels, is used for *Nasya*. Its properties, including *Tikta-Katu Rasa*, *Laghu-*

Tikshna Guna, *Ushna Veerya*, and *Katu-Vipaka*, contribute to cleansing the channels. This helps remove obstructions in natural sinus openings, facilitating drainage and reducing discharge. The preparation also possesses properties like *Indriyadardhyakarata*, *Balya*, *Preenana*, and *Brimhana*, enhancing both general and local immunity. Components with *Madhura Rasa*, *Sheeta Veerya*, *Snigdha Guna*, and *Tridosahara* properties nourish *Dhatu* (tissues), boosting overall and mucosal health. Additionally, many ingredients have anti-inflammatory and bacteriostatic properties, preventing secondary infections [9]. All these combinations of *Shamana* and *Shodhana* treatment can cure the *Vataja Pratishyaya* and prevent its recurrence.

CONCLUSION:

As we observed during the treatment, the medicines given were very helpful for the patient's symptoms. *Haridrakhanda rasayana* with anti-allergic properties and *Sitopaladi choorna* which has anti-inflammatory properties helped to relieve watering from nostrils and nasal obstruction, improving respiration and relieving condition. *Amrutottara Kashaya* helped in *Deepanapachana*, improving digestion. *Anu taila Nasya* prescribed as a *shodhana* therapy helped to treat the disease from root cause.

After all these treatments, patient felt much relieved from symptoms.

REFERENCES:

- [1] Pawar VJ, Kumar P. The Effect of Rasanjanadi Taila Nasya and Gudardraka internally in Vataja Pratishyaya (Allergic Rhinitis): A Randomized Comparative Clinical Study. *Annals of Ayurvedic Medicine*. 2022 Jul 9;11(2):135-.
- [2] Ambikadatt Shastri, *Sushruta Samhita of Sushruta with Ayurveda Tatva Sandipika Hindi Commentary*, Uttartantra, Reprint Edition, 2021, Varanasi: Chaukhambha Sanskrit Sansthana, Chapter 24, verse 6-7, pg. 154.
- [3] Wheatley LM, Togias A. Allergic rhinitis. *New England Journal of Medicine*. 2015 Jan 29;372(5):456-63.
- [4] Sharma R, Bhat P. Management of allergic rhinitis with Rajanyadi Churna and Guduchi Kwatha-A case report. *Journal of Ayurveda and Integrative Medicine*. 2023 Jul 1;14(4):100740.
- [5] Moragne W. *Allergies*. Twenty-First Century Books; 2011 Sep 1.
- [6] Raman LS, Shanmuganathan A, Chandrashekar S, Kaliyaperumal P, Perumal E, Mudiganti RK,

- Nachammai KT, Kulanthaivel L, Subbaraj GK, Chandrasekaran K, Ramrao Sontakke B. Antioxidant, Anti-Inflammatory, and Anticarcinogenic Efficacy of an Ayurvedic Formulation: Amritotharanam Kashyam. *Advances in Pharmacological and Pharmaceutical Sciences*. 2023 Apr 28;2023.
- [7] Peiris KP, Abegunasekara NS, Jayawardena GA. The Efficacy of 'Haridra Khanda' on Vataja Pratishyaya.
- [8] Negi J, Prashar B, Gupta J. Sitopaladi Churna As Anti-Tussive: A Review'. *International Journal of Health and Clinical Research*. 2019;2(6):1-5.
- [9] Dave PP, Bhatta KH, Vaghela DB, Dhiman KS. Role of Vyaghri Haritaki Avaleha and anu Taila Nasya in the management of Dushta Pratishyaya (chronic sinusitis). *International Journal of Ayurvedic Medicine*. 2016 Jan 1;7(1):49-55.