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**Case Report** 

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# ROLE OF PRADHAMANA NASYA IN THE MANAGEMENT OF ANOSMIA- A CASE REPORT

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# ABSTRACT

Anosmia is the loss of the sense of smell, either totally or partially. Anosmia may be caused by head injury, infection, or blockage of the nose. *Nasya karma* has been considered an effective treatment modality for all kinds of *Urdhva Jatrugata rogas* and *Nasagata vikaras*. In *Pradhamana nasya*, the drugs in *Churna* form are administered into the nostril. The present case of a 31-year-old female with anosmia for 3 months was administered with *Pradhamana nasya* with *Vacha churna*. This case shows that *Pradhamana nasya* is helpful in the management of anosmia and helps in improving the quality of life.

Keywords: Anosmia, Pradhamana nasya, Vacha churna

### INTRODUCTION

Anosmia is the loss of the sense of smell and is one of the disorders of olfaction. The causes of anosmia include nasal obstruction, rhinitis, allergic and vascular rhinitis, bromine fumes, neurological causes including trauma, peripheral neuritis, intracranial lesions, senile atrophy, etc. The incidence of anosmia ranges from 9.2 % to 30.19%. It can occur in any age group, but it is seen more after 60 years of age. *Nasya karma* is the treatment modality that deals with the health status of the sense organs that reside above the clavicles. Here an effort was made to evaluate the

efficiency of ayurvedic management of anosmia with *Nasya karma*.

# CASE REPORT

A female patient aged 31 years, c/o total loss of sense of smell for 3 months, associated with tastelessness came to OPD of Panchakarma department, SDM Hospital, Hassan was admitted under IPD NO 059789.

### HISTORY OF PRESENT ILLNESS

The patient was apparently healthy for 3 months. One day she met with a road accident, and since then patient observed a total loss of sense of smell associated with tastelessness. She consulted a physician and took a general check-up and was advised for MRI brain and no relevant abnormalities were detected. So, she came to SDM Hospital for better treatment.

### PAST HISTORY

No H/O any chronic illness, or surgical interventions. **PERSONAL HISTORY** 

Diet- mixed Bowel- regular(1/day) Appetite-good Micturition- 5-6 per day Sleep- sound

### CLINICAL FINDINGS

**General examination-** The general condition of the patient was fair, and her vital signs were normal.

**On examination-** On the local examination – external nose-no abnormality was detected, tenderness of paranasal sinus was absent, on anterior rhinoscopy – nasal septum was normal, nasal mucosa- was normal (pinkish in colour), no polyp, no discharge and no hypertrophy were noted. Smell test- the patient was not able to recognise the smell of cotton swabs dipped in rectified spirit (alcohol content 60% w/w). Routine haematology tests like Haemoglobin, Total Leukocyte Count, Differential Leukocyte Count, ESR, and Absolute eosinophilic count investigations were done before starting the treatment. It was observed ESR and absolute eosinophil count were slightly increased but haemoglobin, total leukocyte count, and differential leukocyte count were within the normal limits.

#### THERAPEUTIC INTERVENTION

The patient was administered *Vacha churna Pradhamana Nasya* for 7 days. Details of the procedure are as follows.

*Purva karma-Nasya* was performed in a closed room having enough daylight and devoid of direct atmospheric influences like dust, wind, etc. Blood pressure-120/80mmhg and pulse rate-72/minute was recorded prior to *Nasya karma* for observational purposes.

**Pradhana karma**-Patient was instructed to lie down in a supine position with bending of the head at about 45 angles from the edge of the table. The patient was asked to close the eyes. *Pradhamana nasya* with 3 *Mucchyuti* of *Vacha churna* was taken and kept at one end of the straw and air is blown through the mouth of Vaidya from the other end into the nostril. The procedure is repeated with the other nostril also.

**Paschat karma-** After completion of the procedure blood pressure and pulse rate were noted and was normal. Patient was advised to stay in a non-breezy room, avoiding day sleep, dust smoke, etc. Properties of *vacha* 

RASAVIPAKAVIRYAKARMUKTATikta, katuKatuUshnaKapha vatahara

#### FOLLOW-UP AND OUTCOME

After 7 days of treatment, the patient showed significant improvement in the sense of smell. The patient was able to recognise the smell of rectified spirit (alcohol content 60% w/w) after the treatment and follow-up was done on the  $14^{th}$  day also shows the same improvement. There were no side effects observed during the treatment as well as after the completion of the treatment.

#### DISCUSSION

Anosmia is the loss of smell that occurs due to abnormalities of the olfactory bulb and nerves. Nasa being the gateway of *Shiras*, drugs administered through the nostrils reach the *shira* and eliminate the morbid *Doshas*. According to *Acharya Charaka, Shirovirechana* is indicated for *Grana nasha*<sup>1</sup>. The drug *Vacha* is mentioned as one of the drugs that can be used as Shirovirechana<sup>2</sup>. The properties of *Vacha*  helps in *Sroto shodhana* and help in removing the *Avarana*. Hence *Vacha* was the drug of choice.

#### CONCLUSION

Based on this single case study, it can be concluded that *Pradhamana nasya* with *Vacha churna* is effective in the management of anosmia. As this study is based on a single case, a further large sample size study is required to know the better results.

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