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A CASE STUDY: AYURVEDIC MANAGEMENT OF KAPHAJA PRATISHYAYA W.S.R TO ALLERGIC RHINITIS.

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ABSTRACT

Kaphaja pratishyaya is one of the types of pratishyaya characterised by snigdha Shukla kapha sruthi, Kandu in thalu nasa gala shiro guruthiva, shoonakshi, kasa. Based on the above symptoms it can be compared with Allergic Rhinitis. It is a disorder of the nose induced by an IgE-mediated inflammation after Allergen exposure leading to Rhinorrhea, nasal pruritus, and bilateral nasal stuffiness associated with cough. In this study, a 31-year-old female patient was selected based on the symptoms of kaphaja pratishyaya. She was then administered gudadi nasya for seven days, later shamana chikitsa (palliative medicines) with selected medications were administered. After completion of the treatment course, considerable improvement was observed in the clinical symptoms of Kaphaja pratishyaya.

Keywords: Kaphaja pratishyaya, allergic rhinitis, Gudadi nasya, Naradiya laxmivilasa rasa, Nishamrita tablet

INTRODUCTION

The nose is considered the gateway of the head^[1] according to *Ayurveda* and medicine instilled through the nose provides strength to the structures above the neck. Nose being exposed more to the external

environment gives rise to various infectious and allergic manifestations. In the present era, global warming, industrialization, and urbanization have paved the way for various health issues Rhinitis or

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Pratishyaya are common among them. Increased pollution, exposure to dust and smoke, seasonal changes, exposure to allergens, changing lifestyles, and improper food habits are the causes of Rhinitis or Pratishyaya. Ayurveda has explained the disease Pratishyaya under Nasagata Rogas and has classified it into five types, Kaphaja pratishyaya is one of the types of pratishyaya characterised by snigdha Shukla kapha sruthi, Kandu in thalu nasa gala shiro guruthiva, shoonakshi, kasa. Based on the above symptoms it can be compared with Allergic Rhinitis. It is a disorder of the nose induced by an IgE-mediated inflammation after Allergen exposure leading to Rhinorrhea, nasal pruritus, and bilateral nasal stuffiness associated with cough. IgE forms after the initial contact with an allergen and becomes attached to cells within the tissues, referred to as mast cells, when the body encounters an equivalent allergen again it's going to react with the IgE, causing the mast cells to release a variety of chemicals including histamine the chemical cause swelling and inflammation within the surrounding tissues and provides rise to varied allergic symptoms, counting on which a part of the body is affected. An allergy means an abnormal reaction of body tissues to some foreign substances which are usually protenious in nature and are called allergens. In response to Allergen, the body produces specific Antibodies. In allergic subjects additionally, to circulating antibodies, there's a special sort of reaginic antibody which may fix itself on tissue cells including mast cells. In Antigen-antibody reaction during which reaginic antibody takes part, there's a realease of histamines and alike amines to cause local vasodilation and increased capillary permeability to supply local oedema, which is a characteristic feature of nasal allergy. Nasal allergy could also be perennial or seasonal.

CASE REPORT

A 31-year-old female patient presented to *shalakya* tantra OPD of GAMC and Sri jayachamrajendra

Government ayurveda and unani hospital Bengaluru-09 [OPD registration NO- 63654] with complaints of thick white nasal discharge, sneezing, nose block, nasal itching for 2 years. Previously he was taking allopathic medications, but it was giving temporary relief and symptoms aggravates once he stops taking medication hence patient approached our hospital.

Chief complaints

Nasal discharge, sneezing, nose block, nasal itching for 2 years.

Previous history

The patient was taking tab – montek-lc 0-0-1, and Furomist nasal spray.

Family history- His brother is also suffering from allergic rhinitis.

HETU

Exposure to dust, cold wind,

SAMPRAPTI

In *Pratishyaya* due to the *Nidana sevana* vitiates *Vatadi dosha* either individually or together accumulates in Shiras then propagates to the nose causing *Pratishyaya*^[2].

On Examination

Pale nasal mucosa and swollen inferior turbinates were found. ESR: 32 mmUhour

and AEC: 480.0 cells/cu.mm.

DIAGNOSIS

Kaphaja pratishyaya

INTERVENTION

The patient was treated on OPD basis at GAMC &H Bengaluru. treatment adopted includes *Gudadi nasya, Pratishyayahara churna* – 1 tsf with warm water BD, Tab *Nishamrita* 2bd, Tab-*Naradiya laxmi vilasa rasa* 2 bd.

The patient was administered *urdhwajatru pradesha abhyanga* with *ksheerabala taila* and *sweda* with *dashamoola Kashaya* followed by *gudadi nasya* daily for 7 days.

Days	1	2	3	4	5	6	7
Urdhwajatru pradesha abhyanga and sweda	✓	✓	✓	✓	✓	✓	✓
Gudadi nasya Dose - 6bindu	✓	√	√	√	✓	✓	✓

Shamana Aushadhis

After Shodhana(first follow-up)

Tab- *Nishamrita*(*Nisha*, *amrita*, *Chandana*, *manjishta*) 2-0-2 A/F for 15 days.

Pratishyayahara churna 1 tsf-0-1tsf with honey for days.

Tab- Naradiya laxmi vilasa rasa 2-0-2 A/F for 15 days.

After 22 days (second follow up)

Tab-Nishamrita 0-0-2 A/F

Agastya haritaki rasayana 1 tsf-0-1 tsf with milk B/F.

OBSERVATION AND RESULTS

The patient was treated with the following *Chikitsa* sutra explained in the classics as

Gudadi nasya for 7 days followed by Shamana aushadis. The first follow-up was done after nasya treatment at that time patient told her sneezing was reduced by upto 60% and 50% relief in nasal obstruction, nasal itching, and discharge.

On the second follow-up visit i.e., on the 22nd day of treatment, sneezing frequency reduced by up to 80% and 70% relief in nasal obstruction and nasal discharge. Nasal discharge was completely reduced.

On the third follow-up visit i.e., on the 37th-day patient was happy that her sneezing frequency completely reduced and 70% relief in nasal obstruction and nasal discharge.

DISCUSSION

- 1) Gudadi Nasya is made by Shunthi, Guda and Jala. Equal quantity of Guda & Shunthi macerated with water. Shunthi possess Katu & Laghu properties along with Ushna Virya and Madhura Vipaka. Guda offers Madhura Vipaka, Laghu Guna and Ushna Virya. . Gudadi Nasya having Laghu and Snigdha gunas thus possess Kapha Vata Hara action. Ushna, Teekshna, and Laghu property of Gudadi nasya pacify aggravated Kapha and Vata dosha⁽³⁾.
- 2) Pratishyayahara churna is a combination of talisadi churna, sitopaladi churna, abhraka bhasma, shuntichurna, and haridra churna having kapha doshahara property.

- 3) Tablet *Nishamrita* contains *haridra*, *manjishta*, *Chandana*, and *amrita*. *Haridra* is having antiallergic and immunomodulatory action^[4]. *Amrita* is having an anti-inflammatory, mild analgesic effect, anti-allergic and bronchodilator action.
- 4) Tablet Naradiyalaxmivilasa rasa mainly contains Abhraka Bhasma^[5]. It has Tridoshahra and Rasayana properties with Madhura-Kashaya Rasa. Hence, it will mainly pacify Vata-Kapha Dosha
- 5) Agastya haritaki rasayana being kapha dominant condition, katu rasa in Agastya Haritaki Rasayana is kaphahara and srotosodhana; tikta rasa is lekhana, kantha shodhana and sroto shodhana and ushna veerya is kapha vilayanakara and vata kapaha shamaka^[6].

CONCLUSION

Gudadi nasya and yogas like pratishyayahara churna, Nishamrita and naradiya laxmivilasa rasa, and Agastya haritaki rasayana have shown better relief in reducing symptoms of kaphaja pratishyaya(allergic rhinitis).

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