

AYURVEDIC MANAGEMENT IN *KAPHAJ PRATISHYAYAY*: A CASE STUDYSanjivani Santosh Bhalerao<sup>1</sup>, Amit Chavan<sup>2</sup>

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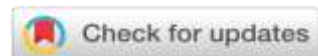
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## ABSTRACT

*Pratishyayay* is *Urdhwajatrugat (Shirorog) Vikaar* <sup>(1,2)</sup> & the indicated treatment for *Urdhwajatrugat Vikaar* is *Nasya*. '*Nasya*' is prime therapy for maintaining the health of '*Urdhwajatru*', and the only Karma found in references like '*Dinacharya*'. The present study has reported a case of *Pratishyayay*. The patient had complaints about *Aruchi*, *Nasavrata*, *Nasa Avarodha*, and *Shirogaurav Kandū* when she visited the hospital. She was treated with *Snehana* with *Til Taila*, *Swedana* and *Pipplyadi Avapida Nasya*. In this study, we came across the scope of Ayurvedic treatment to address this disease. The therapy was purely based on the principle of Ayurveda. After the treatment, the signs and symptoms were reduced to a greater extent.

**Keywords:** *Kaphaj, Pratishyayay, Avapida Nasya, Nasya, Rhinitis.*

## INTRODUCTION

*Pratishyayay* is the most common & frequently observed ailment. Though it seems simple, it affects day-to-day activities. <sup>(3,4)</sup> Acharya Chakrapani explains the importance of *Pratishyayay* as the leading cause of all diseases. As we approach the 21st century, there are

dramatic changes in lifestyle, habits & environment. Humans started facing all types of diseases, which made them weak & unable to carry out a routine healthy life. <sup>(5)</sup> Ayurveda, the ancient Indian system of natural and holistic medicine, means "The science of

life” and is at the doorstep of global acceptance due to various discussions and research from ancient times onward. Ayurveda has continuously developed since ancient times as an independent health science, giving equal importance to preventive and curative aspects of diseases.<sup>(6)</sup> Panchakarma, an integral part of Ayurveda, is vital in managing stubborn & chronic diseases. Emphasising the importance of Panchakarma therapy, Ayurveda says that Shodhana conflict is at the root of the disease, and thus, the disease treated by it does not reoccur again, while treated with other methods may recur. The nose is the body part which performs many functions, such as olfactory and respiratory.<sup>(7)</sup> Because of increased pollution and busy life, Rhinitis is a common disease in this present era. According to all Ayurvedic scholars and ancient literature, *Nasya Karma* is the best therapy for *Urdhvajatrugata Rogas* and *Nasagata Rogas*. For meditation, a rich vascular plexus of the nasal cavity provides a direct path into the stream, which quickly passes the mucosal membrane.<sup>(8)</sup> Without *Nasya Karma*, eliminating the vitiated doshas, which are situated in *Shirah* or *Nasa Pradesh*, is impossible. Medicated *Kwath* used for *Nasya Karma* protects the nasal mucosa from foreign bodies and potentiates immunity to *Nasa Pradesh* and *Urdhvajatru*. However, no research work using *Pipplyadi Nasya* has been done to date. Hence, *Nasya* with *Pipplyadi* is being undertaken. Considering all these facts, a clinical trial on *Kaphaj Pratishyayay* was conducted to find a treatment protocol with *Pipplyadi Nasya*. *Kaphaja Pratishyayay* is one of the most common diseases. Its cardinal signs and symptoms are (Cough), *Aruchi* (Anorexia), *Nasasrava* (running nose), *Nasa Avarodha* (Nasal obstruction), *Shirogaurav* (Heaviness of Head), and *Kandu* (itching).<sup>(9)</sup>

**AIM:** To evaluate the efficacy of *Pipplyadi Nasya* in *Kaphaj Pratishyayay*.

#### OBJECTIVES

- 1) Primary-
  - To find out the effect of *Pipplyadi Avapida Nasya* in *Kaphaj Pratishyayay*.
- 2) Secondary-

- To study *Pipplyadi Avapida Nasya* from Ayurvedic literature.
- To study *Pratishyayay* literature in detail.
- To propose ancient modalities of treatment in *Pratishyayay*. To study *Nasya* literature in detail.
- Materials and methods

A 49-year-old female patient visited *Panchkarma* OPD of Y.M.T Ayurvedic Hospital, Kharghar, Navi Mumbai. She had the following complaints:

- *Aruchi*
- *Nasasrava*
- *Nasa Avarodha*
- *Shirogaurav*
- *Kandu*

All the complaints mentioned above were in the last 4-5 months, and I had taken many other treatments but got no relief. The symptoms got aggravated for 15-20 days. The patient then visited the PanchKarma OPD of Y.M.T Ayurvedic Hospital, Kharghar, Navi Mumbai.

#### Criteria for Assessment of Result

Based on the symptoms, an assessment was done. The above symptoms of the disease were observed in the patient.

#### Treatment Given:

*Pipplyadi Avapida Nasya* had six drops in each nostril for seven days (Alternate days), and the assessment was taken on the 14<sup>th</sup> day.

#### Method of *Nasya Karma*<sup>(10)</sup>

1. *Purvakarma*: *Snehan* with *Tila Taila Mukha Pradesh* and *Nadi Sweda* was done for 10 minutes.
2. *Pradhan Karma*: The patient was made to lie supine, and the head was advised to be in a *Pralambita* Position. The Patient's eyes were covered with cotton. *Pipplyadi Kashaya* was taken in *Gokarna* (Droper), and six drops were administered in each nostril. After that, the patient was instructed to inhale profoundly and was advised to spit out the *Utklesha Kapha*, reaching up to the throat and oral cavity.

#### *Paschat Karma*: -

After performing the *Nasya Karma*, the patient was asked to relax supine. Then, *Mrudu Abhyanga* and *Sweda* performed around the nose, head, neck, face,

and chin. The patient was asked to spit out nasal secretions.

*Kavalgraha*- *Kavalgraha* is the process of holding the liquid in the mouth without restricting movements inside the mouth. Lukewarm water was used for *Kavalgraha*. *Dhumapana Varti* was made by (*Raal*, *Haridra*, *Shuddha Guggula*, *Shigru*, and *Aguru*, each in equal quantity with applying *Panchatikta Ghrita*)

and was given to the patient. The patient was advised to inhale three times by each nostril and exhaled through the mouth only. After *Dhumapana*, the patient was instructed to rest and go home by covering the head and exposing part of the face and neck. The patient was advised to avoid air conditioners, sit under a rotating fan and cold breeze, consuming cold water/drinks/stale food.

**CRITERIA FOR ASSESSMENT OF SUBJECTIVE PARAMETERS:** The subjective gradation of symptoms will be done as follows, and the intensity of each symptom will be calculated.

1) *Shukla – Sheeta Strava* (white – cold discharge)

Discharge	Yes	No
1.NO DISCHARGE		
2.OCCATIONAL		
3.SCANTY INTERMITTENT	✓	
4.RECURRENT	✓	
5.PROFUSE MUCOPURULENT		

2) *Shirogalosthatalu Kandu* (itching overhead, throat, lips, palate)

1.Itching	Yes	No
2.NO		
3.Mild		
4.Moderate	✓	
5.Severe		

3) *Shukalavbhas* (feeling of whitish all around)

	Yes	No
1.Occasional	✓	
2.Intermittent';''		
3.Continues		
4.Intolerable		

4) *Shoonakshi* (Swelling of eyes)

Swelling of eye	Yes	No
1.No		✓
2.Occasional Present		
3.Swelling of one eye		
4.Swelling of both eyes		

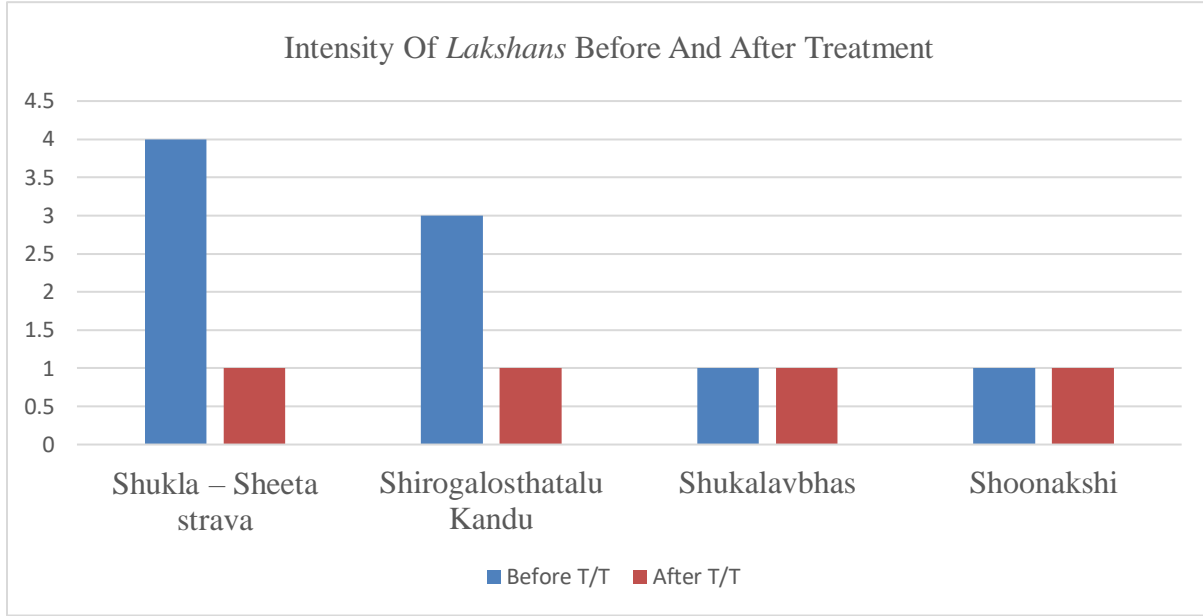
**RESULT**

The patient had started recovering during the *Nasya* treatment, and at the end of the treatment, i.e., 14 days, there was a remarkable recovery. So, we concluded

that the symptoms got better with the help of Ayurvedic treatment, i.e The intensity/severity of *Shukla-Sheeta Strava* was 4(more) before treatment and came down to 1 after treatment. The intensity/severity of *Shirogaloshatalu* was 3(more) before treatment and

came down to 1 after treatment. The intensity/severity of *Shukalavbhas* was one before and remained one after treatment. The intensity/severity of *Shoonakshi* was one before treatment and remained one after

treatment. So, we found more relief in *Shukla-Sheeta Strava* and *Shirogaloshatalu Kandu*. This is shown in the graph below.



## DISCUSSION

In today's world, some diseases are rampant and need special attention. Changing lifestyles, increased pollution, urban sprawl, and increased antibiotic resistance are responsible for the increased prevalence of many diseases. Nose being exposed to the external environment is more than all those factors with recurrent infections. Upper respiratory tract infections are a more common problem among all age groups. <sup>(11)</sup> Acharya Charaka has described that *Nasya* is the only gateway to *Shirah* (Ch. Si. 2/22), so the medicine administered through *Nasya* can quickly spread to *Shirah* and get absorbed. Acharya Vagbhata has given more details about the mode of action (As.S. Su. 29/3). It has explained that *Nasya* being the gateway to *Shirah*, the drug administration through the nostril reaches *Shringataka*, a *Sira Marma* by *Nasya Srota* and spreads in the *Murdha*, taking the route of *Netra*, *Shrotra*, *Kantha*, and stretches the morbid *Doshas* from *Urdhwajatru* and expels them from *Uttamanga*. The *Nasya Karma*, the instillation of medicine into the nose, acts as *Srothoshodhana*, a way of *Vyadhipratyanika Chikitsa*. The drug, which is used in the

treatment has *Katu*, *Tikta*, *Ushna*, *Laghu*, and *Ruksha* properties. Because of these properties of drugs, we got relief in the symptoms of *Kaphaj Pratishyayay*.

## CONCLUSION

Most of the *Nidanans* explained in Ayurvedic classics act as precipitating or triggering factors, like Allergen, a Cold substance for *Pratishyayay*. *Vihara Sambhandhi Nidana*, like exposure to *Raja*, *dharma*, *Sheeta Vayu*, *Jala Krida* and diseases like *Pratishyayay*, have a significant role in the onset of *Kaphaj Pratishyayay*. *Kaphaj Pratishyayay* is more prevalent in *VataKaphaj* and *Kaphavataja Prakrithi*.

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2. सुश्रुत, सुश्रुतसंहिता उत्तरतंत्र अ. २४  
चयं गता मूर्धनि मारुतादयः पृथक् समस्ताश्च तथैव शोणितम् । प्रकुप्यमाणा विविधैः प्रकोपणैस्ततः प्रतिश्यायकरा भवन्ति हि ॥

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