

## JEERNA PRATISHYAYA AND ITS MANAGEMENT IN AYURVEDA “A CRITICAL REVIEW”

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<https://doi.org/10.46607/iamj1012112024>

(Published Online: November 2024)

### Open Access

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Article Received: 05/10/2024 - Peer Reviewed: 30/10/2024 - Accepted for Publication: 14/11/2024.



## ABSTRACT

Jirna Pratishaya (Chronic Allergic Rhinitis) is a significantly commonly observed disease these days. Many people suffer from Jirna Pratishaya due to changed lifestyles and environmental conditions. Pratishyaya (common cold) is a prevalent condition affecting any age group of both genders and spread worldwide. The symptoms include Shukla Sheeta Nasa Srava (whitish nasal discharge), Shoonaa-Akshi-Koota-Shotha (edematous face), Shirog gaurava (heaviness in the head), Shirashoola (Headache) etc. It occurs due to Dust, smoke, Pollen, and other substances, which are nasal irritants and victimise the person recurrently to get a nasal problem that leads to a high susceptibility of Jeerna Pratishyaya. Numerous treatment modalities are explained in allopathy, like corticosteroids, antihistamines, antiallergics, inhalers, etc., but they are only somewhat helpful in curing the ailment and preventing its recurrence. Besides, they have their side effects. Thus, Ayurvedic management is more advantageous in Jeerna Pratishyaya.

**Keywords:** Jirna Pratishaya, Shira roga Gaurva, Shira Shoola.

## INTRODUCTION

Diseases of the respiratory system have become very troublesome nowadays. Changed environmental conditions, changed dietary habits, stressful lifestyles,

drinking cold beverages, increased pollution, industrialisation, and alterations in seasonal climate affect hu-

man health deeply. Due to these changes, so many diseases like metabolic disorders, autoimmune diseases, and allergic conditions are developing in human beings. In allergic conditions, Allergic Rhinitis is very common. Pratishyaya is one among Nasagata Roga, which is, first and foremost, an essential condition. If it is not treated in its early stage, it will lead to the development of another condition named Jeerna Pratishyaya. Pratishyaya is a Vata-Kaphaja Roga and can correlate with rhinitis, which is described in modern medical science. Clinical features of Pratishyaya are Nasasrava (running nose), Ghrauparodha (nasal obstruction), Shirahshoola (headache), Shiroguravam (heaviness in head), Jwara (fever), Kasa (cough), Kaphotklesha (phlegm), Swarabheda (hoarseness of voice), Aruchi (anorexia), Klama (tiredness), Indriyanamasmrthyama (altered functions of sense organs). Suppose Pratishyaya is not treated in its early stage. In that case, it also develops numerous conditions like Kasa (cough), Agnimandya (anorexia), Aghrana (anosmia), Daruna Netra Roga (severe ocular disorders), Badhirya (deafness), Andhata (blindness) and Shopha (inflammation). In modern medical science, Jeerna Pratishyaya can be correlated with chronic rhinitis. Chronic simple rhinitis is an advanced stage of unresolved acute rhinitis due to the presence of predisposing factors.

#### **AIM AND OBJECTIVES**

1. To study the literature review of Jeerna Pratishyaya.
2. To study the Ayurvedic management of Jeerna Pratishyaya.

#### **Review of Disease**

**Etymology** The word "Pratishyaya" comes from Dhatu "Shyeng Gatau" and Upsarga "Prati," which means the movement of Doshas is ceaseless in Pratishyaya. The disease in which Kaphadi Doshas move towards Vata or out of the nose is called Pratishyaya, and when it is left untreated, it leads to "Jeerna Pratishyaya."

#### **Nidana**

**Many samadhi depict** common causative factors of Praktishyaya. Acharya Sushruta has portrayed causes

of Praktishyaya, such as Nariprasanga, Shirsoabhitapa, Dhuli, Raja, Shitamatipratapa, Mutrapurisha Sandharanam, etc.

#### **Stages of Pratishyaya**

Acharya Dalhana has described two stages of Pratishyaya, i.e., 1. Amavastha 2. Pakwavastha.

##### **1. Amavastha:**

Symptoms include Aruchi (anorexia), Vaktra Virasam (tastelessness), Nasa Srava (thin nasal discharge), Ruja (pain), Shirogurutwama (heaviness in the head), Kshavathu (sneezing), and Jwara (fever).

##### **2. Pakwavastha:**

Symptoms include Tanutwam Ama Linginama (decreased severity of Ama Lakshana), Shirolaghuta, Nasalaghuta, Asyalaghuta (feeling of lightness in head, nose, and mouth), and Ghanpeetakaphatvam (thick and yellowish nasal discharge).

**Purvarupa of Pratishyaya:** Acharya Sushruta has depicted the prodromal symptoms of Pratishyaya as Shirogurutwama, Kshavathu, Angamarda, and Parihrishtramta.

**Classification of Pratishyaya:** Acharya Vagbhatta, Madhavakara, Sushruta, Bhava Mishra and Sharangdhara have explained five types of Pratishyaya, i.e., Vataja, Pittaja, Kaphaja, Raktaja and Sannipataja. Acharya Charaka has described four types of Pratishyaya, i.e., Vataja, Pittaja, Kaphaja, & Sannipataja and depicted Dushta Pratishyaya as the late stage of Pratishyaya. Ras Vagbhatta has mentioned Malasanchya janya Pratishyaya.

#### **Samprapti Ghatak of Pratishyaya**

1. Nidana: Kapha Vata Prakopaka Ahara Vihara.
2. Dosh: Kapha Vata Pradhana, Alpa Pitta, Rakta.
3. Dushya: Rasa and Rakta
4. Agni: Jatharagni, Rasadhatwagni
5. Srotas: Pranavaha, Rasavaha, Raktavaha Srotas
6. Srotodushti: Sanga, Vimargagamana, Atipravriti
7. Adhishthana: Nasa

#### **Samprapti of Pratishyaya**

According to Acharya Charaka, consumption of etiological factors leads to aggravation of Vata Dosh in the head and to Pratishyaya. Acharya Sushruta has portrayed that the vitiated Vata and other Doshas, individually or collectively associated with or without

Rakta, accumulate in the head and lead to Pratishyaya. Acharya Vagbhatta has portrayed that the vitiation of Vata Dosha in the nasal cavity leads to Pratishyaya.

### **Lakshana of Pratishyaya**

**Samanya Lakshana:** These are mentioned only by Acharya Charaka and Maharishi Kashyapa, which are as follows:

**Acharya Charaka:** Shirahshoola, Shirogauravam, Ghranviplava, Jwara, Kasa, Kaphotklesha, Swarabheda, Indriya Asamarthatva.

**Maharishi Kashyapa:** Daurgandhya, Parikledata etc.

### **Vishishta Lakshana**

**Vataja Pratishyaya:** Anaddha Pihita Nasa (obstructed and stuffed nose), Tanusrava Pravartini (watery nasal discharge), Galtaluoshtha Shosha (dryness in throat, palate, and lips), Swaraupghata (hoarseness of voice).

**Pittaja Pratishyaya:** Ushna Evam Peeta Nasarava (warm and yellow nasal discharge). The patient suffers from Krishta (emaciation), Pandu (anaemia), Jwara (fever), and Trishna (thirst), as well as Sadhoomam Sehsha Vahnim Vamtiva (feeling of smoking and burning sensation in throat and nose).

**Kaphaja Pratishyaya:** Shukla Sheeta Nasarava (white and cold nasal discharge), Shuklavabhasa Shunaksha (white eyes with swollen lids), Guru Shiromukha (heaviness on head and face) and Shiragalaoshthalu Kandu (itching in head, throat, lips, and palate).

**Raktaja Pratishyaya:** Raktarava (blood-stained nasal discharge), Tamraksha (coppery discoloration of the eyes), Uroghata like symptoms, Durgandhuchhvasa Vadanastatha (ozostomia and foetor oris), Gandhananaveti (anosmia), Krimi Shweta, Snigdha Tatha Anu (presence of small, smooth and white maggots in the nasal cavity), Krimimurdhavigara Samanam Lakshanam (symptoms same as Krimija Shiro-roga).

**Tridoshaja Pratishyaya:** Bhutwa Bhutwa Pratishyayo Akasmata Vinivartate (Pratishyaya which appears and disappears all sudden), Sampakvo Va Apakvo (may or may not be associated with suppuration), and Lingani Chaiva Sarvesham Peenasanam (have mixed features of all types of Pratishyaya).

### **Chikitsa (Treatment)**

#### **Samanya Chikitsa**

**Aam Peenasa Chikitsa:** Langhana, Deepana, Pachana, Swedana, Ikshu Vikara.

**Pakwa Peenasa Chikitsa:** Shirovirechana, Kaval Graha, Dhoompana, Snehpaaana, Vamana, Virechana, Asthapan Basti, Shamana Aushadha. Acharya Chakradutta has specified some Aushadha Yogas like Pan-chamula Siddha Ghrita, Chitraka Haritaki, Sarpiguda, Shadang Yusha, Vyoshadi, Nasya with Shadbindu Taila and Pathadi Taila.

#### **Updrava (Complications)**

The Updrava of Pratishyaya is primarily due to anatomical relationships and the standard blood supply of organs through which the infections travel. The Sadya Pranahara Marma, i.e., Shringataka Marma, is the union point of Srotas of Jihwa (tongue), Nasika (nose), Akshi (eyes) and Shraavanendriya (ears). Pratishyaya causes deterioration of this Marma and leads to various complications. Peenasa, Indriyavikara, Badhirya, Andhatwa, Ghranavikara, Darunanetra, Kasa and Shotha are Updrava of Pratishyaya. Acharya Madhavakara said that if Pratishyaya is not treated in the early stages, it will lead to Kasa and then further lead to Kshaya.

#### **Sadhya-Asadhyata**

Acharya Sushruta has described Jeerna Pratishyaya as Krichhrasadhya (challenging to cure), while Vagbhatta said that it is Yapyata and Madhavakara noted that it is Krichhrasadhya or Asadhyata (not curable)

## **DISCUSSION**

Pratishyaya is a broad term covering all the nasal and paranasal sinuses and upper and lower respiratory tract infections. Pratishyaya can occur as an independent disease, as a symptom of a disease or as a complication of many other diseases. Pratishyaya is a Vata Kapha predominant Tridoshaja Vyadhi. After analysing all Nidana of Pratishyaya, it is understood that allergens like dust and fumes cause paroxysmal sneezing and rhinor-

rhoea. At the same time, other factors like seasonal variations, head injury, suppression of natural urges, etc., can be potent to initiate the pathological variations of the disease. Acharya Vagbhatta has described that the root cause of each disease is Mandagni, so due to Agnimandya, Sara Dhatu is not formed, leads to Alpa Vyadhikshamatva (low immunity) and Agnimandya also leads to vitiation of Doshas. So, it becomes challenging to treat this disease. After analysing all Nidana, it can be stated that all Nidana are classified under Asatmya Indriyarthasanyoga, Pragyapradha and Parinama.

## CONCLUSION

Jeerna Pratishyaya (Chronic Rhinitis) is the most common disorder worldwide, affecting all age groups of both sexes and is well known for its recurrence & chronicity. Ayurveda offers a comprehensive approach to managing this disorder, addressing both the root cause and symptoms through detoxification, herbal remedies, dietary adjustments, and lifestyle changes. Factors like the patient's Desha, Kala, and Vaya should also be considered while treating the disease. Pathya-Apathya should also be added along with the prescribed medicines. Regular follow-up and preventive care are critical to avoiding recurrences and maintaining long-term relief from symptoms.

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**Source of Support: Nil**

**Conflict of Interest: None Declared**

How to cite this URL: Abineet Raina & Mohit Bakshi: Jeerna pratishyaya and its management in ayurveda "a critical review". International Ayurvedic Medical Journal {online} 2024 {cited November 2024} Available from: [http://www.iamj.in/posts/images/upload/1994\\_1997.pdf](http://www.iamj.in/posts/images/upload/1994_1997.pdf)