

EFFICACY OF JALANETI AND SHUNTYADI CHOORNA IN THE MANAGEMENT OF VATAJA PRATISHYAYA WITH SPECIAL REFERENCE TO ALLERGIC RHINITIS- AN EXPERIMENTAL STUDY

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ABSTRACT

Allergic Rhinitis is a common health condition affecting the Immune system. It is an Allergic response to the specific allergens causing the inflammation of the nasal mucosa. Allergic Rhinitis is a significant risk factor for poor asthma control and affects quality of life. Cardinal symptoms include Nasal Congestion, rhinorrhea and Pruritis of the nose and eyes. Patients who suffer from Allergic Rhinitis sustain significant morbidity and loss of Productivity. The symptoms of allergic Rhinitis can be co-related to the lakshanas of Vataja Pratishyaya as per Ayurveda. In this single-arm pre-post Experimental Clinical Study, without regard to sex, religion, or other factors, 30 individuals with the defining signs and symptoms of Vataja Pratishyaya(Allergic Rhinitis) were chosen for this research trial. In the current study, Jalaneti, one of the Shat(six) shuddikriya mentioned in Ayurvedic Classics along with intake of Deepaniya yoga Shuntyadi Churna prescribed by Gheranda Samhita were administered for 21 days, with a regular follow up of 8th, 14th and 21st days and post intervention follow up upto 30 days respectively with alteration in diet and lifestyle. Results showed that cardinal symptoms of Rhinitis, i.e Congestion and rhinorrhea, were reduced by 79.33% and 68.93%, respectively. In comparison, pruritis showed 57.47% improvement, and a Total of 56.44% improvement was observed in the classical symptoms of Vataja Pratishyaya, which were statistically significant. Statistically, significant results were also found in the TNSS AND TOSS scores, respectively. Thus, Conservative cumulative management of Jalaneti and Shuntyadi Churna for a specific period when administered with proper

duration dose and time relieves the clinical signs and symptoms of *Vataja Pratishyaya*(Allergic Rhinitis) along with no side effects.

Keywords: *Jalaneti*, *Shuntyadi Choorna*, *Vataja Pratishyaya*, Allergic Rhinitis

INTRODUCTION

In this Modern era, Environmental stress factors such as pollution, chemicals, pesticides, genetically modified foods, smoke, irregular meals, overeating, cold beverages, ice creams, and other factors continuously affect the human body and cause respiratory tract disorders. These elements reduce the nasal mucosal membrane's immunity. Among these diseases, one of the most common disorders found is Allergic Rhinitis¹. An estimated 20–30% of Indians get Allergic Rhinitis. Neither an age nor a sex preference exists. Infants as early as six months old or older may develop it. Usually, the onset is 12-16 years of age.²

In Ayurveda, Allergic Rhinitis can be broadly correlated to *Pratishyaya*, specifically *Vataja Pratishyaya*. After describing 31 varieties of *Nasagata roga*, Acharya Sushruta devotes a distinct chapter in the *Uttaratantra* of *Pratishyaya*. *Pratishyaya* by word itself indicates that it is a recurrent attack and can precipitate even due to minute etiological factors. *Vata* is the main *Dosha* and *Kapha*, *Pitta* and *Rakta*.³ are associated with it. So, it can be concluded that *Pratishyaya* is a condition of continuous nasal discharge. *Vatapradhana* disease Accumulation of *Doshas* in *Uttamanga*. *Vataja Pratishyaya* is explained in the Ayurvedic system of medicine as Sneezing, Watery discharge from the nose, a Stuffy nose, itching in the nose, etc.⁴ which have relevance with Allergic Rhinitis. Allergic rhinitis is an IgE-mediated immunologic response of nasal mucosa to airborne allergens and is characterised by watery nasal discharge, nasal obstruction, sneezing and itching in the nose.⁵

The *Shatkarmas* mentioned in *Hatha Yoga Pradipika* and *Gheranda Samhita* are the purifying, preventive, and curative processes. Among the six purificatory procedures, *Jalaneti*⁶ is the nasal cleansing technique. Nasal hygiene is essential as it is linked to conditions like allergic rhinitis, sinusitis, etc. In *Jalaneti*, luke-warm saline water is used, which leads to

vasodilatation and has the central role of draining the mucous secretion and helping to clear out the nasal obstruction. Curing disease is easy if one follows proper diet and lifestyle changes. Many formulations in Ayurveda act as *deepana*, *pachana* and help treat *Vataja Vikara*. One such familiar drug that has a role in kitchen formulations is *Shuntyadi Churna*.

Shuntyadi Churna is a polyherbal compound that includes *Shunthi* (*Zingiber officinale*), *Maricha* (*piper nigrum*), *Twak* (*Cinnamomum zeylanicum*), *Ela* (*Elettaria cardamomum*), and *Pippali* (*Piper longum*). These drugs are *Ushan Virya* (hot potency) and *Vata Kapha Hara* properties. i.e *Ushna*, *Tikshna*, *Katu Rasa*. In Ayurveda Classics, the Drug is indicated in *Tamaka Shwasa*, i.e *Bronchial Asthma*. However, looking at the line of treatment and *Samparapti Vighatana* of the drug, and being *Vata Shamaka* and *Ushna Veerya*, the Drug is selected to intervene in *Vataja Pratishyaya*.

In *Pratishyaya*, the principle involved *Doshas* are *Vata*, and the disease is *Amashaya Samudhbhava*, so *Shuntyadi Churna*, by its properties, breaks down *Samprapti* of disease and cures the ailment. 7. *Shunthi Zingiber officinale* has bronchodilatory and anti-inflammatory effects on bronchioles.⁸ The interventions selected here are cost-effective and free from side effects. Thus, this research can be valuable to society. This holistic approach combines *Jala neti* practice and administration of *Shuntyadi Choorna* and would be an effective practical approach to managing allergic rhinitis in the age group 18-35 years.

AIMS AND OBJECTIVES

1. To assess the effect of *Jalaneti* and *Shuntyadi Choorna* in *Vataja Pratishyaya*.(Allergic Rhinitis).
2. To assess the effect of *Jalaneti* and *Shuntyadi Choorna* on the Total Nasal Symptom Score and Total Ocular Symptom Score of allergic rhinitis.

3. To assess the effect of Jalaneti and Shuntyadi Choorna on Classical Symptoms of Vataja Pratishyaya.

MATERIALS AND METHODS

All the participants enrolled in the study based on the inclusion criteria were asked to fill out the consent form and were provided with the total information regarding the study in the most understandable language. This study was a single arm pre- and post-trial with a sample size of 26 patients (4 patients withdrew from the study). The total study duration was 21 days, including follow-ups at regular intervals of the 8th, 14th and 21st days and post-intervention follow-ups up to 30 days, respectively, with alterations in Diet and life-style. Participants with severe nasal obstruction like Deviated Septum, any adhesion of nasal cavity, nasal polyps, those who have done any nasal surgeries within the last 6 months and those with chronic systemic disorders were excluded from the Trial.

DRUG AND POSOLOGY

1. JALANETI-Standard Operating Procedure⁹

Pre-Procedure

Jalaneti-included a one of the significant Shat-karma/shat shuddikriya especially advised for Urdhwajatrugata Rogas to be done in morning hours (Kapha Kala). The patient is asked to clear his natural urges and wear clean, breathable clothes.

2. SHUNTYADI CHURNA

No	Drugs ¹⁰	Latin Name	Rasa	Virya	Vipaka	Part Used
1.	Shunthi	Zingiber Officinale	Madhura	Ushna	Madhura	Rhizome
2.	Marich	Piper Nigrum	Katu	Ushana	Katu	Fruit
3.	Pippali	Piper Longum	Madhura	Ushna	Madhura	Fruit
4.	Nagada	Piper bettle	Madhura	Ushna	Katu	Patra
5.	Twak	Cinnamomum Zeylinicum	Madhura	Ushna	Katu	Twak
6.	Ela	Ellatoria Cardomomum	Madhura	Ushna	Katu	Fruit
7.	Sharkara					Powder

Shuntyadi Churna administered 3 gm of honey 3 times a day after food for 6 weeks. Pathyapathya was

Procedure

- The neti pot indicated for Jalaneti should be cleaned and dried, and lukewarm water should be filled up to the neck of the Pot.
- The Doer/Subject, after clearing all his natural urges in the morning, is asked to stand straight with both legs apart and hold the Neti pot in his right Hand.
- The body is forward bent, the neck is tilted upward, and the nasal brim faces the sky.
- The lukewarm water is inserted from one nostril, and simultaneously, the water emerges from the opposite nostril.
- The process should be carried out until all the water in the pot is successfully poured in the nostril.
- Repeat the Procedure from the opposite Nostril.
- Wipe the face after the Procedure with a clean cotton towel/Napkin

Post-Procedure

The Subject is asked to stand in Tadasana with both hands lifted up and joined together. A strong jump is taken with a strong sneeze to remove the excess kapha/mucous. Four sets of Asanas are asked to be performed, giving 1 minute for each asana, and then the patient is asked to lie down and relax.

advised to all the patients as per classics¹¹. After completion of treatment, patients were asked to follow up for 2 weeks

ASSESSMENT CRITERIA¹²

1. Objective Assessment

Assessment was done based on improvement in the patient's clinical condition, i.e., relief in signs and symptoms. Scoring was done based on

- ✓ Total Nasal Symptoms Score (TNSS)

a) TNSS (Total Nasal Symptoms Score)

SYMPTOMS	NONE	MILD	MODERATE
1. Rhinorrhea	0	1	2
2 Nasal Congestion	0	1	2
3. Itching	0	1	2
4. Sneezing	0	1	2

b) TOSS (Total Ocular Symptoms Score)

SYMPTOMS	NONE	MILD	MODERATE
1. Itching of Eyes	0	1	2
2 Redness in Eyes	0	1	2
3. Watery Eyes	0	1	2
4. Swelling	0	1	2

2. Subjective Assessment¹³

Subjective assessment was done based on the classical symptoms of Vataja Pratishyaya texted in Ayurveda Classics, as per the Scoring pattern.

1. Kshavathu

Sr.no	Parameter	Grade
1	No sneezing	0
2	1-10 sneezes in each bout	1
3	10-15 sneezes in each bout	2
4	15-20 sneezes in each bout	3
5	>20 sneezes in each bout	4

2. Nasa Avarodha

Sr.no	Parameter	Grade
1	No Discharge	0
2	Occasional Rhinorrhea with a feeling of running nose without visible fluid	1
3	Rhinorrhea with occasional running nose with visible fluid	2
4	Rhinorrhea with running nose, which needs mopping	3
5	Severe Rhinorrhea with copious fluid needs continuous moping	4

3. Nasa Strava

Sr.no	Parameter	Grade
1	No sneezing	0
2	Feeling of obstruction in inhalation and exhalation with one nostril	1

- ✓ Total Ocular Symptoms Score (TOSS)

The Total Nasal Symptoms Score is a brief questionnaire to evaluate the severity of the main symptoms of allergic rhinitis. The maximum score is 12. The Total Ocular Symptom Score is the ocular symptoms seen in allergic rhinitis. The maximum score is 16

3	Feeling of obstruction in inhalation and exhalation with both nostrils	2
4	Inhalation and exhalation with both nostrils with effort	3
5	Complete blockage with total mouth breathing	4

4. Aruchi

Sr.no	Parameter	Grade
1	No loss of Appetite	0
2	Occasional loss of Appetite	1
3	Moderate loss of Appetite	2
4	Continous loss of Appetite	3
5	Loss of appetite associated with nausea and vomiting	4

5. Swarabhanga

Sr.no	Parameter	Grade
1	No Hoarseness of Voice	0
2	Occasional hoarseness of voice	1
3	Frequent hoarseness of voice, more in the morning hours	2
4	Frequent hoarseness of voice throughout the day	3
5	Cannot speak due to hoarseness of voice	4

6. Jwara

Sr.no	Parameter	Grade
1	No Fever	0
2	Intermittent Fever	1
3	Continuous Fever	2
4	Double rise with morning and evening peaks	3
5	Complete blockage with total mouth breathing	4

Observations and Results

TNSS SCORE

Among 26 subjects, 4% had a score of 11, 12% had a score of 10, 16% had a score of 9, 28% had a score of 8, 24% had a score of 7, 12% had a score of 6 and 4% had a score of 4 before treatment. On the 11th day of treatment, those with scores 11, 10, 9, 8 and 7 became nil. 12% each had scores six and five, 40% scored four, 24% scored three and 12% scored two. On the 21st day of treatment, those with scores from eleven to four became nil. Four is the minimum score needed to diagnose allergic rhinitis. During follow-up on the 61st day, these subjects also showed no recurrence of

symptoms. Hence, the intervention seemed very effective.

TOSS SCORE

In this study, among 26 subjects 4% of subjects had score 11, 8% had score 10, 12% had score 9, 12% had score 8, 32% had score 7, 20% had score 6, 4% had scores 5 and 4% had score four before treatment. On the 16th day of treatment, those with scores 11, 10, 9, 8, and 7 became nil. 8% had scored 6, 16% had scored 5, 16% had scored 4, 28% had scored 3, 8% had scored 2, and 4% had scored 1. On the 21st day of treatment, those with scores from eleven to six became nil. During follow-up on the 30th day, these subjects also showed no recurrence of symptoms. Hence, the intervention seemed very effective.

Table 3-Showing the Interpretation of before and After Therapy values on TNSS

TNSS	Mean	SD	Median	Mean Rank	Chi-Square	p-value
0 Day	7.28	1.59	8	1	66.924* (3, N = 25)	P<0.01
8 th Day	3.54	1.66	4	2		
14 th Day	1.20	0.69	1	3		
21 st Day	1.88	0.85	1	4		

Table 4- Showing the Interpretation of before and After Therapy values on TOSS

TOSS	Mean	SD	Median	Mean Rank	Chi-Square	p-value
0 Day	7.28	1.59	7	1	65.19* (3, N = 25)	P<0.01
8 th Day	3.87	1.66	4	2		
14 th Day	2.0	0.69	3	3		
21 st Day	1.32	0.85	2	4		

SUBJECTIVE

- 1. Kshavathu (Sneezing):** The initial score of sneezing was 2.3, which was reduced to 0.6 after treatment. The percentage relief was 73.91%, which is highly significant statistically at the level of $p<0.001$ ($t=11.129$).
- 2. Nasavarodha (Nasal obstruction):** The initial score of nasal obstruction was 1.9, which was reduced to 0.4 after treatment. The percentage relief was 78.94%, which is highly significant statistically at the level of $p<0.001$ ($t=8.573$).
- 3. Nasasrava (Nasal discharge):** The initial score of nasal discharge was 2.2, which was reduced to 0.6 after treatment. The percentage relief was 72.72%, which is highly significant statistically at the level of $p<0.001$ ($t=9.798$).
- 4. Aruchi (Anorexia)-**The initial score of Aruchi was 2.3, which was reduced to 0.77 after treatment. The percentage relief was 66%, which is highly significant statistically at the level of $p<0.001$ ($t=6.424$).
- 5. Swarabhanga (Hoarseness of voice):** The initial score of change in voice was two, which was reduced to 0.33 after treatment. The percentage relief was 83.5%, statistically significant at $p<0.050$ ($t=5.000$).
- 6. Jwara (Fever)-** The initial fever score was 1.83, which was reduced to 0.5 after treatment. The percentage relief was 72.67%, which is significant statistically at the level of $p<0.050$ ($t=4.000$).

DISCUSSION

Demographic In this study, the maximum number of patients, i.e 61.18%, belonged to the 21-30 age group. A maximum number of patients, i.e 82.12 %, belonged to the Hindu religion. They mostly belonged to the lower middle class (45.83%), had graduate level education (37.65%), and had an occupational status of Official and Sedentary work (39.55%). 65.59% had a mixed diet consumption with more Amla and Lavana Rasa intake, and 97.75 patients consumed Katu Rasa. The maximum number of patients had Vishamagni (65.05%). Most patients, 57.65%, had disturbed sleep and practiced Vegadharana (Suppression of urges) in 83.33%.

Experimental Data-The resemblance of Vataj Pratishyaya with Allergic rhinitis in terms of aetiology, clinical features and complications is evident from following discussion: Aetiology of Vataja Pratishyaya grouped into various categories can be compared with etiological factors of Allergic rhinitis which include food and drug ingestion (Aharaja Nidana), Occupational (Viharaja Nidana), allergy and infection (Rogaja nidana) and iatrogenic causes.¹⁴

An increase in adverse effects is associated with the usage of modern medicines like antihistamines, nasal decongestants, corticosteroids, etc. Avoidance of allergens is the optimum treatment, which is rarely possible totally. Topical use of daily nasal decongestants¹⁵ can lead to rhinitis medicamentosa due to the rapid development of rebound vasodilation. Systemic decongestants are more suitable for long-term use but occasionally make the patient feel unwell. The main side effects of oral antihistamines are drowsiness and

dryness of mucous membranes. Though corticosteroids¹⁶ play an effective role in the treatment of AR, they have side effects like epistaxis, nasal irritation, nasal septal perforation, etc.

Hence, there is a need for a nonpharmacological, low-cost, simple, and effective mode of treatment to overcome the symptoms of this disease and improve the quality of health. Thus, taking into consideration the above fact, the above yogic intervention, along with a Formulation having potency and gunas like Laghu, Ushna, Katu vipaka, Tridoshahara, and specially indicated in Nasa rogas, and shwasa rogas, was selected.

Probable Mode of Action of Jala Neti¹⁷

1. Neti is the best procedure for those suffering from the common cold, allergic rhinitis, and sinusitis. Neti removes dirt, bacteria, and mucous from within the nose.
2. Lukewarm Water Used in Jala Neti causes Vasodilation, which Ultimately Increases Phagocytosis and decreases Inflammation.
3. Lukewarm water also helps in the Drainage of Mucous from the nose
4. NaCl converts thick secretions into thin secretions, which also provides a Favorable condition for drainage.

Shuntyadi Churna¹⁸

- The drug Shuntyadi Churna consists of many ingredients that excellently balance each other in Pancakes and enhance the Vata-Kaphahara, Deepana, Pachana, and Vatanulomana properties.
- The Vata-Kaphahara property of most of the content alleviates both Vata and Kapha, which are the main Doshas in the pathogenesis of Kasa and Shwasa.
- Further, the Shothahara Karma of most of the contents will neutralize the Srotorodha in Pranavaha Srotas due to Shotha created by Sama Vata.

The Dosha-Prashamana effect (Shunthi, Pippali, Maricha, Nagadala, Tvak) acts on the main Doshas contributing to the Samprapti. Vata and Kapha. Deepana-Pachana Karma (Shunthi, Pippali, Maricha, Nagadala, Sukshaila) digest Ama. Vatanulomana property (Shunthi, Pippali) maintains the normal flow of Vata. Shwasa, Kasa, and Shothahara Prabhava are all the

ingredients that act on the symptoms. Srotorodha nivarana Prabhava (Shunthi, Maricha) removes Srotorodha from the Pranavaha and Rasavaha Srotasas¹⁵

CONCLUSION

It can be concluded that Jala Neti and Shuntyadi Choorna have a sustainable cumulative efficacy in treating and preventing Vataja Pratishyaya (Allergic rhinitis). Duration. Treatment of Allergic Rhinitis According to the Modern System of Medicine has a higher rate of Relapse and Treatment Failure. Hence, Jala neti and Shuntyadi Choorna gave a significant result in reducing the frequency of symptoms of allergic rhinitis, which was assessed through Total Nasal Symptom Score (TNSS) and Total Ocular Symptom Score (TOSS), along with classical lakshanas of Pratishyaya. Thus, the use of Jala Neti and Shuntyadi Choorna at large levels of patients should be done in future to prove and establish its significance.

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