



**PRATISHYAYA AS A DISEASE ENTITY IN AYURVEDA EXPOSITION W.S.R.
RECURRENT UPPER RESPIRATORY TRACT INFECTION – A LITERARY REVIEW**

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ABSTRACT

Ayurveda as a whole is a pure life science having its principles for a healthy mankind. It covers all the different disease entities in its *Asthangas* known as *Ashtanga* Ayurveda. *Pratishyaya* is a condition commonly found in every human being. *Pratishyaya* can be a symptom or a complex disease with critical manifestation. Wide description of the disease *Pratishyaya* is found in almost all Ayurveda treatises. *Pratishyaya* can be correlated with recurrent Upper Respiratory Tract Infections which is the problem for which parents visit pediatric OPD many times. So this topic needs special narration in the context of *Pratishyaya*. The increased incidence and gravity of the problem become more evident from the consideration of ancient *Acharyas* that *Pratishyaya* can serve as the substratum for the emergence of many other disorders. If the *Pratishyaya* is left untreated it can cause immune deficiency & there by several diseases like *Kshaya*. Here an attempt has been made to throw a light on *Pratishyaya* etiology and treatment described in Ayurveda classics.

KEYWORDS: Ayurveda, *Pratishyaya*, Etiology, Treatment.

INTRODUCTION

The disease *Pratishyaya* is such a broad entity that leads a critical analysis through different points of view including the modern medical thought. In Ayurveda the diseases are mentioned on symptomatological basis and this methodology is in this era not that much valid. So it is a necessity to criticize, classify and interpret those Ayurvedic concepts in the light of modern medical methodology. In this disease review emphasis is made on different critical evaluation of the broad spectrum disease *Pratishyaya*. This mode of approach seems to be more helpful as far as planning of the treatment modality is concerned. A good number of modern clinical conditions go hand in hand with the symptomatology of *Pratishyaya*. But looking through the five aspects of a disease viz *Nidana*, *Purvarupa*, *Rupa*, *Upashaya* and *Samprapti*, only certain conditions which are mentioned above make fit with the disease *Pratishyaya*.

Etymology and Definition

The word *Pratishyaya* is derived from “*Shyeng*” *Dhatu* that means to move.

When the *Dhatu* is prefixed by “*Prati*” and suffixed by “*Gata*” the word *Pratishyaya* is evolved. It means a condition with a continuous flow.

Amarakosha says.^[1]

‘*Pratikshanam Syayate Iti Pratishyayah !*’

It is further explained by the commentators as ‘*Pratikshanam Syayate Iti Nah*

Pratishyayate Anaya Iti Ling Pratishyaya Api’.^[2]

i.e., in case of *Pratishyaya* the continuous flow mentioned here is nothing but nasal discharge.

Dalhana, the commentator of Sushruta Samhita defines *Pratishyaya* as –

‘*Vatam Prati Abhimukham Shyayo Gamanam Kaphadinam Yatra Sa Pratishyayah*’.^[3]

Means, the condition in which *Kapha*, *Pitta* and *Rakta* move along with *Vata* in the same direction is termed as *Pratishyaya*.

Bhavamishra interprets *Pratishyaya* as a condition in which the vitiated *Dosha* get accumulated in *Shira* in every moment and hence called by the name.^[4]

Acharya Charaka while explaining *Rajayakshma* mentions that *Pratishyaya* is a severe debilitating condition, which gets manifested due to the migration of vitiated *Kapha*, *Rakta* and *Pitta* from the *Ghranamoola* which has already been forcibly titrated and vitiated by *Vata Dosha*.^[5]

NIDANA (Causative factors)

The *Nidanas* of *Pratishyaya* could broadly be classified under

1. *Sadyojanaka Nidanas*
2. *Kalantarajanaka Nidanas*.^[6]

The analysis of the detailed list of etiological factors mentioned by various *Acharyas* it could be seen that majority of them come under the immediate triggering factors and some of them like *Mandagni*, *Ajirna*, and

other diseases producing *Pratishyaya* as a complication come under the latter. The *Sannikrishta Hetus* described by *Acharya*, cause *Achaya Purvaka Dosha Prakopa* which leads to the disease, whereas the *Viprakrishta Hetus* lead to *Chaya* and then only to *Prakopa*. The etiological factors can again be classified under the headings.

1. *Aharaja*
2. *Viharaja*
3. *Manasika*

Table no. 1. *Nidana* according to different *Acharyas*.^[7,8,9]

Sr. No.	<i>Aharaja</i> (Dietary)	<i>Viharaja</i> (Behavioral)	<i>Manasika</i>
1.	<i>Mandagni</i>	<i>Ati Nariprasanga</i>	<i>Atikrodha</i>
2.	<i>Ajirna</i>	<i>Ati Swapna</i>	<i>Atishoka</i>
3.	<i>Vishamashana</i>	<i>Ratri Jagarana</i>	<i>Chinta</i>
4.	<i>Atijalapana</i>	<i>Nidra after Dugdha Pana</i>	<i>Shirasobhitapa</i>
5.	<i>Atishitambupana</i>	<i>Atiparshwa Shayana</i>	<i>Ati Bhashana</i>
6.	<i>Atishita Jala Pana</i> by <i>Shleshma</i>	<i>Nitya Anupahita Shayana</i>	<i>Ati pratapa</i>
7.	<i>Prakriti</i> persons	<i>Apavrita Mukha Shayana</i>	<i>Atiashru Srava</i>
8.	Excessive intake of <i>Guru</i> , <i>Shita</i> , <i>Madhura</i> substance	<i>Vega Sandharana</i> , <i>Tapa Sevana</i> <i>Dhuli, Rajah, Dhumra Sevana</i> , <i>Ritu Vaishamya</i> <i>Snana in Ajeerna</i> <i>Snana with Shita Jala</i> <i>Ati Jala Krida</i> <i>Shirovedana</i>	

***Pratishyaya* secondary to other diseases-** *Pratishyaya* can occur as symptom in many other diseases which are enlisted below.

1. *Jwara*: *Acharyas* have accepted that, *Pratishyaya* occurs in many types of *Jwara* like *Shleshmika Jwara*.^[10]
2. *Udavarta*: *Pratishyaya* also occurs due to suppression of natural urges. This theory is widely accepted by all *Acharyas*. *Udavarta* can also caused by *Vegasandharana*. It has been noted in all the diseases caused by suppression of natural urges in which aggravation of *Vata* are very clear.^[11]
3. *Anaha*- *Pratishyaya* has been mentioned as one of the main symptom in *Amaja Anaha*.^[12]
4. *Gulma*: A type of *Udara Vyadhi* in which *Pratishyaya* is described under the *Lakshanas* of *Ashadhya Gulma*. *Pratishyaya* has been also included in the *Lakshanas* of *Kaphaja Gulma*.^[13]
5. *Raktapitta*: *Pratishyaya* has not been directly related to *Raktapitta*, but *Dushta Pratishyaya* has been included in the diseases caused by sudden stoppage of blood in the *Raktapitta*.^[14]
6. *Rajayakshma*: In this disease an independent *Samprapti* of the *Pratishyaya* has been given by *Acharya Charaka*.^[15]
7. *Shiro Roga*: Head is the seat of all the diseases of *Nasa* & *Shirovedana*, *Vayu* is main cause for pain & head is the seat of *Kapha*. Vitiated *Vayu* vitiates *Tarpaka Kapha* & gets lodged in *Shirahpradesha* producing headache. This *Vata* & *Kapha* obstructing the *Nasagata Srotas* results in manifestation of *Pratishyaya*, when main symptom subsides, *Pratishyaya* will also subside.

8. *Chhardi*: Suppression of *Chhardi* can cause the disease *Pratishyaya*. *Chhardi* (vomiting) is an independent disease & also one of the *Vegas* (urges) produced in *Amashaya*. Its suppression causes vitiation of *Vayu* leading to *Udavartajanya Samprapti* of *Pratishyaya*.

9. *Bashpanigrahana*: Suppression of *Vega* of tear can also cause the disease *Pratishyaya*.^[16]

PURVA RUPA (Pre-symptoms)

In acute disease condition manifested by exposure to triggering factors it is not necessary that *Purvarupas* be present. But in the disease produced by *Kalantarajanaka Nidanas* a full-blown picture of *Purvarupas* will be associated.

Sirogurutwa, Kshavathu, Angamarda, Parihrishta Romata etc. are the *Purvarupas* described by *Acharya Sushruta*.^[17] While in *Videha Samhita Ghrandhumayanam, Manthana, Kshavathu, Taludaranama, Kanthodhwansa, Mukhasrava* etc. *Purvarupas* are mentioned. An overview of the *Purvarupas* highlights the generalized vitiation of *Doshas*. Moreover they are suggestive of the dominance of *Kapha* and *Vata* in the initial stage of etiopathogenesis.

Rupa (Symptoms)

Rupa is the most vital diagnostic key of a disease. *Rupa* is clinical presentation of the disease and it occurs at a stage when *Dosha Dushta Sammurchhana* has been completed and *Samprapti Prakriya* reaches the level of

Vyaktavasta. *Sirahshula*, *Sirogurutwa*, *Ghranaviplava*, *Jwara*, *Kasa*, *Kaphotklesha*, *Swarabheda*, *Aruchi*, *Klama*, *Yakshma*, *Indriya- asamarthatha* etc. are the cardinal features of *Pratishyaya* described by Acharya Charaka.^[18] These descriptions are given in the context of *Rajayakshma*. So the generalized somatic manifestations described here are to be considered in the light of the abundant vitiation of all the three *Dosas* taking place in *Rajayakshma*. An in general clinical picture Kashyapa mentions that the face, head and nose

of the patient become just as if obstructed and there will be anosmia or impairment to olfactory sensation.^[19]

Classification

The disease is classified into 5 i.e. *Vataja*, *Pittaja*, *Kaphaja*, *Raktaja* and *Sannipataja* by Acharya Sushruta. Charaka and Kashyapa do not accept *Raktaja* *Pratishyaya*. A detailed description regarding the symptomatology becomes clear in the classics while different types of *Pratishyaya* are described.

Table No. 2. Lakshanas of Pratishyaya according to various Acharyas.^[20,21,22]

Sr No.	Vataja	Pittaja	Kaphaja	Raktaja
1.	<i>Uttanashayanasyapi Kshavathu</i>	<i>Pitakapha Srava</i>	<i>Shitasrava Ghanasrava</i>	<i>Raktasrava</i>
2.	<i>Tanu Nasasrava</i>	<i>Nasagrapaka Nasapaka</i>	<i>Nasakandu Sushka Kaphasruti Snigdhakaphasrava</i>	<i>Tamrakshata Uroghata-</i>
3.	<i>Shishirakapha-shruti</i>	<i>Ghranapidika Ushnapittasrava</i>	<i>Kshavathu Aruchi, Oshthakandu Talukandu</i>	<i>Mukha Dauragandh</i>
4.	<i>Nasavarodha, Nasatoda, Nasavedana</i>	<i>Tamravarasrava Rukshasrava Sahasadhoomaagni-vahini</i>	<i>Mukhamadhurya Mukhagaurava Kasa</i>	<i>Krimi Pradurbhava</i>
5.	<i>PihitaNasa, Chiratpaki</i>	<i>Jwara Trishna Panduta, Pipasa</i>	<i>Netrashotha Manyagraha</i>	<i>Krimija Shirahshula</i>
6.	<i>Shirahshoola, Sankhapradesavedana, Kshavathu</i>	<i>Bhrama, Pralapa</i>	<i>Shooladhikya Shirogaurava Shirakandu</i>	<i>Uraha Suptata</i>
7.	<i>Oshtashosha Mukhashosha Galashosha Talushosha</i>	<i>Asyapaka Ushnavayunirgamana Karshya Akshipaka</i>	<i>Shuklavabhasata Gatragaurava</i>	<i>Srota-akshi-nasa Kandu</i>
8.	<i>Swaropaghata Swarabheda</i>	<i>Ushnaabhitapta Ushnaabhipidita</i>	<i>Hrillasa Vamana</i>	
9.	<i>Jagartyabhikshnam</i>	<i>Mukhashosha Talushosha Ativamana</i>	<i>Shwasa</i>	

SAMPRAPTI (Etiology): While explaining the *Samprapti* of *Pratishyaya* the following points are to be taken into consideration

- In certain individuals, so called “allergic persons” there is pre-existing *Agnimandya* and mild *Srotovairagunya* are already present, which may be temporary or permanent in nature, when get exposed to any of the triggering factors (*Sadyojanaka Nidanas*) they produce *Achaya Prakopa* of *Doshas* resulting in the production of the disease.

The Kalantarajanaka Nidanas act in multiple ways

- They produce *Agnimandya* resulting in the production of *Ama*. Because of the intercourse of abundantly vitiated *Doshas* a toxic condition is produced in the body.^[23] Moreover the vitiated *Doshas* and *Dushyas* getting mixed with *Ama* get circulated all over body causing obstruction in *Srotases*.^[24]
- The etiological factors produce vitiation of all the three *Doshas*. *Prana Vayu*; *Bhrajaka* and *Alochaka Pitta*;

Tarpaka Kapha are chiefly involved. Dalhana clearly mentions that vitiation is maximum for these factors.^[25]

- In the context of the physiological & pathological perspectives of 5 types of *Vata*, *Vagbhata* state that the diseases of neck & head to vitiation of *Udana Vayu*.^[26]
- While explaining different types of *Avaranas* Charaka confines that the complaints like *Pratishyaya*, *Sirograha*, *Niswasochwasa*, *Samgraha* etc. take place when vitiated *Prana Vayu* obstructs *Udana Vayu*.^[27]
- Kashyapa has specifically mentioned two factors i.e. *Mandagni* and *Vishamashan* as essential pre-requisites in the pathogenesis of *Pratishyaya*.^[28]
- Kashyapa has also described the disease *Pratishyaya* under 80 types of *Vataja Nanatmaja Vikaras*.^[29]
- Charaka says the aggravated *Vayu* which are provoked by the specific factor spread it upward from its natural habit to affect heart. From there it moves further upward to the head.^[30] All the *Samprapti Ghatakas* are enlisted below in table no.2.

Table no. 3-Samprapti Ghataka of Pratishyaya.

Sr no.	Samprapti Ghataka	Specification
1.	Nidana	Kapha Vata Prakopaka Ahara, Vihara etc.
2.	Dosha	Kapha Vata Pradhana, Alpa Pitta
3.	Dushya	Rasa, Rakta
4.	Agni	Jatharagni, Rasadhatwagni
5.	Ama	Rasadhatwagnimandhya
6.	Srotas	Pranavaha, Rasavaha, Annavaha, Raktavaha
7.	Srotodushti	Sanga, Vimargagamana, Atipravriti, Siragranthi
8.	Udbhavasthana	Amashaya
9.	Sancharithana	Gala, Urdhwajatru, Nasa, Ganda Pradesha
10.	Vyaktasthana	Nasa
11.	Rogamarga	Bahya
12.	Dosha Marga	Shakha
13.	Vyadhiswabhava	Ashukari
14.	Vyadhi Avastha	Vyakta
15.	Adhisthana	Nasa, Shiras

UPADRAVAS (Complications)

The improper management of the disease leads to progression of pathogenesis of the disease beyond *Vyakta Avastha* & the disease will cause lot of disturbances in the metabolism of *Doshas*, *Dhatus* and *Malas* which culminate in the production of untoward effects known as *Upadravas*.^[31] According to Sushruta, the *Upadravas* include: *Badhirya*, *Andhata*, *Aghranam*, *Ghoranayana Rogas*, *Kasa*, *Agnimandya*, *Sopha* Almost all *Acharyas* except Charaka has mentioned various *Upadravas* in the context of *Pratishyaya*. An analysis of the *Upadravas* clearly mentions that the *Samprapti* on due course of time affects all the sense organs except *Rasanendriya*. Moreover it adds to complications pertaining to abnormalities of *Rasavaha Srotas* and *Pranavaha Srotas*. Considering the symptoms like *Badhirya*, *Andhata*, *Aghrana* and *Ghoranayana Roga* it could be concluded that the *Samprapti* is getting progressed through *Sringhataka Marma*. *Sringhataka Marma* is considered as the common point where the channels from *Jihwa*, *Akshi*, *Ghrana* and *Srotra* meet.^[32]

CHIKITSA (Treatment)

Regarding the treatment of *Pratishyaya*, the following are the considerations postulated by different *Acharyas*. In the management of *Nava Pratishyaya*, the protocol includes.^[33]

Swedana

- *Ushna Bhojana*
- *Ardraka* with *milk*
- *Ardraka* with *Ikshuvikaras*

The common protocol which could be adopted in the management of all types of *Pratishyaya* except *Nava Pratishyaya* includes.^[34]

- *Sarpishah Pana*
- Different types of *Swedas*
- *Vamana*
- *Avapidana Nasya*

Procedures to be adopted in *Pakwa Pratishyaya* include.^[35]

- *Vairechanic Nasya*
- *Virechana*
- *Asthapana Vasti*
- *Dhumapana*
- *Kavala*

In the disease associated with complications like *Chhardi*, *Angasada*, *Jwara*, *Gourava*, *Arochaka*, *Arati* and *Atisara* the protocol consists of *Langhana*, *Deepana* and *Pachana* in addition to the routine procedures.^[36]

If there is abundant vitiation of *Vata* and *Kapha*, and if the patient is able to tolerate he should be subjected for *Vamana* therapy after giving him large quantity of liquids.^[37] The complications should be taken care of with respective medicines particular for the conditions.

Specific treatments

In addition to the general guidelines for management details of medicaments and procedures to be adopted in the specific management of different types of *Pratishyaya* are also enlisted in the classics.

Table no. 4. Chikitsa Upkramas in Pratishyaya. [38,39,40,41]

Sr No.	Vataja	Pittaja	Kaphaja	Sannipataja
1.	Ghritapana	Ghritapana	Ghritapana	Ghritapana
2.	Shirovirechana (Nasya)	Nasya	Nasya	Nasya Shirovirechana
3.	Snigdha Dugdhapana	Dugdhapana	Langhana	Avaleha
4.	Mamsarasa	Ghreya (Koshna)	Yusha (Kwathapana)	Kavala Dharana
5.	Dhumapana	Lepa (Pradeha)	Dhumrapana Shire Ghritalepa	Dhumrapana
6.	Panisweda Upanaha Sankara Sweda	Parishechana	Sweda, Parisheka Antarika Aushadhisevana	Sweda
7.	Niruha Basti	Virechana Kavala Dharana	Vamana Dhumravarti	Gutika

PATHYAPATHYA (Do's and don'ts)

In the treatment of *Pratishyaya*, a long list of *Pathyapathy* is mentioned by *Acharyas*.

Pathya in the treatment of *Pratishyaya* are enlisted below. [42,43]

Table No. 5. Pathy-Apathya in Pratishyaya.

Sr. No	➤ Pathya	➤ Apathya
1	• Remain in a place devoid of wind	• Cold water, exposure to cold
2	• Cover head with thick, warm cloths	• Anger, stress, sorrow
3	• Foods - Having <i>Laghu</i> , <i>Snigdha</i> properties - Not too liquid in nature - <i>Amla</i> , <i>Lavana</i> dominant - <i>Jangala Mamsa</i> , jaggery, milk, <i>Canaka</i> , <i>Trikatu</i> , <i>Yava</i> , <i>Godhuma</i> , <i>Dadhi</i> , <i>Dadima</i> , <i>Haritaki</i> <i>Yushas</i> of <i>Balamulaka</i> or <i>Kulattha</i>	• Excess dry foods
4	• Luke warm <i>Dashamula Paniya</i> , <i>Purana Madya</i>	• Suppression of urges
5	• <i>Snehana</i> , <i>Swedana</i> , <i>Vamana</i>	• Newly prepared wines
6	• Strong <i>Nasya</i> , <i>Dhumapana</i> , <i>Gandusha</i> , <i>Ushnajala</i>	• Excess sleep and bath

Recurrent upper respiratory tract infection: Upper respiratory tract infection (URI) represents the most common acute illness evaluated in the outpatient setting. URIs range from the common cold—typically a mild, self-limited, catarrhal syndrome of the nasopharynx to life-threatening illnesses such as epiglottitis (see the image below). Recurrent respiratory tract infections are one of the most frequent reasons for pediatric visits and hospitalization. Causes of this pathology are multiple ranging from congenital to acquired and local to general. Immune deficiencies are considered as underlying conditions predisposing to this pathology. Recurrent respiratory infections have multiple etiologies. They are frequent during childhood and seem inevitable during the first months of life because of the immunity learning. A good knowledge of these aspects is necessary in order to differentiate between a physiological (immunity learning) and a pathological (immune deficiency) situation.

Recurrence of respiratory infections during the first years of life has an impact on the broncho-alveolar as well as the vascular development of the lungs. This could lead to average and long term after-effects. Therefore, an early treatment, depending on the etiology, should be initiated.

According to World Health Organization (WHO) data, a kid could present, annually, during its five years of life, 4 to 8 episodes of respiratory infections, affecting mainly lower respiratory system. Respiratory infections are considered as recurrent from three episodes of acute infections during a six month period.

CONCLUSION

Tridosha Siddhanta is the key of Ayurveda Pathophysiology. So, when a patient approaches to the physician with symptoms of *Pratishyaya* it becomes very important to look for involvement of *Doshas*. As mentioned earlier, *Pratishyaya* can be a symptom as well as a disease complex. When it is just a symptom of another disease it is important to find the main diseases and treat it first. As, the main disease if kept untreated it can lead to other complications e.g. *Pratishyaya* is a symptom in *Rajyakshma* and if it is untreated especially in children age group it can get complicated into *Kshyaya*. Though the disease *Pratishyaya* seems to be a simple condition, it is duty of a physician to go through each and every particulars of *Samprapti Ghatakas* and a *Vyadhiviparita* or *Vyadhiviparitarthakari Chikitsa* should be done.

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