

**A CLINICAL STUDY ON VACHA PIPPALI AVAPEEDANA NASYA IN SURYAVARTA  
WITH SPECIAL REFERENCE TO FRONTAL SINUSITIS**<sup>1</sup>\*Dr. Pratibha Kondibharao Waghmare and <sup>2</sup>Dr. N. A. Khan<sup>1</sup>Assistant Professor, Shalakyatantra Department, SSVP Ayurved College Hatta.<sup>2</sup>Associate Professor, Shalakyatantra Department, G.A.C Vazirabad Nanded.**\*Corresponding Author: Dr. Pratibha Kondibharao Waghmare**

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Article Received on 16/10/2022

Article Revised on 06/11/2022

Article Accepted on 26/11/2022

**ABSTRACT**

*Shiras* is the one of the three vital principal organs of the body where *prana* resides. *Shira* is considered as a *Uttamanga* as it is the *Ashraya* for *Prana*, *Pranavaha Strotas*, *Sadhya Pranahar Marma* and control all the function of *Karmendriya*. *Suryavarta* is one among the 11 types of *Shirorogas* mentioned by *Bhruhatrays* with clinical features of pain in the region of *Akshi* (eye) and *Bhru* (eye brow) with periodicity of pain increasing in morning and subsides in evening. The symptoms of *Suryavarta* mostly resembles to Frontal Sinusitis. Frontal sinusitis affects 14% of total population with the peak incidence in the age group between 20- 30 years. In modern medicine frontal sinusitis is managed by nasal Decongestants, Antibiotics, Analgesics and Surgery. After instilling decongestant drops rebound congestion after few hours is there Patient having fear for surgery and its complications. This instil a need for *ayurvedic* management of *Suryavarta*. As per *Acharya Charak Vata* and *Rakta Dosha* are responsible for *Suryavart*. *Nasya Karma* is said to be the prime treatment modality in *Shiroroga* as well as *Suryavarta*. *Vacha Pippali* being *Tikshna* and *Snigdha* act as *Shirovirechaka* and *Shulaprashamana*.

**KEYWORDS:** *Prana*, *Pranavaha Strotas*, *Sadhya Pranahar Marma*, *Suryavarta*, *Vacha*, *Pippali*, *Avapeedana nasya*, Frontal sinusitis.

**INTRODUCTION**

Ayurveda is an ancient medical science which deals with the restoration of health, prevention and management of diseases.

*Shalakyas* is one of the eight *Angas* mentioned in Ayurveda. *Shalakyas Tantra* is also known as *Urdhwanga Tantra* or *Uttamanga Tantra* or *NimiTantra*. The subject is about *Urdhwanga Roga* and *Chikitsa*. It includes *Netra roga*, *Karna roga*, *Mukha roga*, *Nasa roga*, and *Shiro roga* along with their management. Among the 11 *Shirorogas* explained in the classical texts, the most prevalent one in this present era is *Suryavarta*. The features of *Suryavarta* are severe pain in region of *Shankha* (temporalregion), *Akshi* (eye), *Bhru Pradesha* (eye brow) and *Lalata*(forehead) with characteristic periodicity which begin in early morning gradually increase and reaches its peak by noon and then starts decreasing by evening. Most of its features correlate with the features of frontal sinusitis.

Sinusitis is inflammatory condition of mucous membrane. Sinusitis is about a highly prevalent disease caused on exposure to cold and dust, recurrence rate is high. If it is not treated properly it leads to many complications such as orbital cellulitis, osteomyelitis and fistula formation of frontal bone, meningitis, brain

abscess. This condition has become more prevalent because of some common *Nidanas* such as *Rajo Dhoomosevana*, *Purovatasevana*, *Ambukrida*, *Sheeta Annapana* and *Vegadharana* etc factors.

In Ayurvedic classics, it is considered that *Nasya karma* is the main line of treatment for all the *Shirorogas*, as *Nasa* is considered to be the gateway of *Shiras*. Also, *acharyas* have mentioned that "*Suryavarthevidhitavyanasyakarmadibheshajam*" i.e. in *Suryavarta*, *Nasya* is the best line of treatment. *Acharya Sushruta* has described '*Vacha pippali Avapeedana nasya* as a treatment for *Suryavarta*. Drugs used in this *Nasya Karma* are easily available, cost effective, easy to prepare, easily administered with no complications. Here an effect is made to constitute all relevant inflammation being arranged sequentially related to *Suryavarta*.

**AIM AND OBJECTIVE-** To evaluate the efficacy of *Vacha Pippali Avapeeda Nasya* in the management of *Suryavarta*. (frontal sinusitis)

**CASE REPORT**

A 28 years male patient visited to ENT Opd of *Shalakyas tantra* department with chief complaint of frontal headache, upper eye lid swelling, nasal block, tenderness over inner canthus of the eye.

These all symptoms are prominent during the day time. The patient is suffering from all these symptoms Since 5 years. He consulted a local hospital in his area, and diagnosed as a frontal sinusitis, and took medication but was not satisfied.

### Personal History

Diet-mixed, Cold drinks. Appetite- Low. Bowel- Regular. Micturition- Normal Sleep- Disturbed. Habits-

Long drive.

### Ashtavidha Pariksha

Nadi- Vata Pradhan Pitta. Mala- Prakrut. Mutra- Prakrut. Jivha- Saama. Shabda- Spashta. Sparsha- Ruksha. Drik- Prakrut. Akriti- Madhyam.

No.	Subjective Parameters	Objective parameters
1	Frontal Headache	Tenderness over frontal sinus area
2	Nasal block	X-ray PNS waters view
3	Nasal discharge	
4	Oedema on upper eyelid	

### Local Examination

Nasal mucosa was congested and tenderness over frontal sinus area.

Transillumination Test -The lighted bulbs are placed against the floor of the two sinuses and the transillumination of two sinuses is compared. Both right and left sinuses are opaque.

### Investigations before treatment-

Hb- 11.6 gm %, TLC - 6000, Neutrophils 54%, Lymphocytes- 42%, Monocytes-1%, Eosinophils 6%, Basophils 1%, ESR-10.

X ray PNS waters view and CT Scan- Opacity in both right and left frontal sinuses. Mucosal thickening also seen.

**Procedure Administered to patient-** Vacha Pippali Avapeedana Nasya.

**Route of administration of drug-** Nasal.

### OBSERVATION

Symptoms	Before treatment	After treatment
Frontal headache	++++	----
Nasal discharge	++++	----
Nasal block	+++	---
Oedema on upper eyelid	++	--
Tenderness over frontal sinus area	++++	----

CT Scan and Xray PNS	Before treatment	After treatment
Right frontal sinus	Mucosal thickening	Normal mucosa
Left frontal sinus	Mucosal thickening	Minimal mucosal thickening

### DISCUSSION

Considering hypothetical *Samanya samprapti* of *Shirorogas*, *Shira* is the site of *Vata Dosha*, *majja dhatu*. In *Shiro roga samprapti* aggravated *vata* resulting in *sira sankocha* and *sira antah avarana kaphasanchaya*. *Sira sankoch* form *rasa rakta sanchaya*. Pressure arises because of *rasa rakta sanchaya*. This pressure result into *vata prakop* and patient gets spasmodic pain. This type of pain present in *Suryavarta vyadhi*.

*Nasya Karma* treatment as *Vacha Pippali Avapeedana Nasya* 6 drops in each nostril daily for 7 days with a gap of 7 days in two sittings was given along with *Snehan Swedan* and *Pathya Apathya*.

### Follow up findings

**After 7 days-** There was frontal headache present as it is, nasal discharge was decreased, no nasal blocking, tenderness over frontal sinuses decreased. Oedema on upper eyelid.

**After 14 days-** Frontal headache decreased, no nasal discharge, no nasal blocking, tenderness over frontal sinuses was absent. Oedema on upper eyelid decreased.

**After 21 days-** No frontal headache, no nasal discharge, no nasal blocking, tenderness over frontal region was absent, no oedema on upper eyelid.

In *Suryavarta*, *vacha pippali avapeedana nasya* administered through nostrils it goes towards the nasal cavity and reaches the *Shringataka marma*. *Shringataka* are the most important group of *Srotas* in the *Urdhwanga* (head) and drugs acting through these *Srotas* are certain to bring about *Srotoshuddhi* (cleaning) in *Urdhwanga*. After that it will stay there upto some time. Then it absorbs by *rasa rakta vaha strotas*. After that pain relieve because of reduced pressure due to mitigate *vata*

*prakopa*. *Nasya* has direct and sudden effect because there is no time delay of digestion of medicine. The wall of nasal chamber and frontal sinus are lined almost entirely by pseudostatified columnar ciliated epithelium converted in microvilli thus increasing the surface area and hence suggested as a site of all drugs absorption. The active ingredients into *Vacha Pippali Avapeeda nasya* might have been absorbed by the same said route it has anti-inflammatory and analgesic effects.

Anti-inflammatory action of *vacha* and *pippali* reduces pain and odema within the sinus there by reducing the *Akshi Ruk*. Main karma of *vacha* and *pippali* are *Shoolaprashamana*. *Pippali* helps to reduce *vata* by its *madhura vipaka* and *Ushna veerya* and *vacha* by its *ushna veerya* and *tikta rasa*. So *lalat ruk* and *Shankha ruk* both symptoms got significant result after *nasya karma*. The tenderness over frontal sinus area is mainly because of excess mucus production and inflammation of the sinus. *Vacha* and *pippali* are having anti-inflammatory action and *teekshna guna* helps to drain out the excess mucus from the sinus.

## CONCLUSION

The Etiology, Pathology and the clinical features are nearly similar in *Suryavarta vyadhi* and Frontal Sinusitis. It is characterized by frontal headache, nasal block, nasal discharge, eyelid oedema. Now a day's people believe in ayurvedic medicines. Ayurveda believes that '*Nasa hi shiraso dvaram*'. *Nasya karma* is highly effective in *Suryavarta* with special reference to frontal sinusitis. Nasal route and sinus pathway is cleared, cleaned, and inflammation is decreased by *Nasya karma* with *Vacha Pippali Avapeedana nasya*. Patient tolerates *Nasya karma*, responses very well to it and does not got any side effect during and after the treatment. *Avapeedana Nasya* performed with *Vacha Pippali* provided significant relief in the signs and symptoms of *Suryavarta*. Further study will continue on number of patients.

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