ROLE OF AYURVEDA IN THE MANAGEMENT OF ALLERGIC RHINITIS- A CASE STUDY

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ABSTRACT

Introduction: Prathishyaya is one among 31 nasagatharoga explained by sushrutaacharya. Vata and Kapha are said to be the predominant Doshas involved in the manifestation of this condition. Vatajaprathishyaya is one among 5 types of prathishyaya. It is a common disorder characterized by anaddhapihitanasa, tanusrava, shosha in gala taalu and oshta, pain in shankapradesha and swaropaghatha. It is correlated to allergic rhinitis. This is a disorder in which there are episodes of nasal congestion, watery nasal discharge sneezing and redness and itching in eyes and nose. Allergic Rhinitis is due to an immediate hypersensitivity reaction to nasal mucosa. According to ayurvedic perspective allergy is scientifically explained under Asatmyaja Vyadhi and is mainly caused due to hereditary factor, Viruddhahara, dushivisha & ritusandhi. This is the case report of 25 years old male patient with complaints of continuous episodes of sneezing, running nose, itching in eyes and nose since 2 years. Materials and Methods: The subject who approached Shalakya Tantra OPD of Government Ayurveda Medical College Bengaluru with symptoms of episodes of sneezing, running nose, itching in eyes and nose since 2 years was systematically reviewed and treatment modalities like anutaila nasya and internally Vyagradhi kashaya, Vyoshadi vati and Chitrakaharitaki lehya is advised. Results: The subject showed marked improvement symptomatically and marked changes are seen in haematological investigations. Discussion: Vatajaprathishyaya is affecting the urdhwajatru especially nasa and hampering the lifestyle of the patient. It is mainly vata and
kaphajavyadhi. Nasya and abhyantara yoga advised are vata - kaphahara in nature, having anti-inflammatory and antiallergic property hence it has shown marked improvement.

**KEYWORDS:** Vataja Pratishyaya, Allergic Rhinitis Anutaila Nasya, Ayurvedic management.

**INTRODUCTION**

Rhinitis is the condition in which the mucous membrane of the nose is inflamed. Allergic Rhinitis is an immunoglobulin IgE mediated type 1 hypersensitivity inflammatory disease. It is a type of inflammation in the nasal mucosa, paranasal sinuses and sometimes mucosa of the lower respiratory tract which occurs when the immune system overreacts to allergens in the air. When an allergen such as pollen or dust is inhaled by an individual with a sensitized immune system, triggering antibody production, these antibodies often bind to histamine-containing mast cells. When the mast cells are stimulated by pollen and dust, histamine (and other chemicals) are released. This causes running nose, sneezing, red, itchy, and watery eyes, and swelling around the eyes. Allergic Rhinitis is an acute, recurrent and episodic disease.[1]

Worldwide it affects between 10-25% of the population and in India 20-30% of population suffer from this disease. This is one such condition extensively prevailing and disturbing the individual’s routine life and certainly lowering the quality of life due to its more prevalence in all different age groups and in both the sexes. In conventional system of medicines antihistamines, decongestants and corticosteroids are advised.

According to Ayurvedic perspective it is corelated to Vatajaprathishyaya. Vata and Kapha are said to be the predominant Doshas involved in the manifestation of this condition. Clinical manifestations of the allergic rhinitis is same as vatajaprathishyaya. It is a common disorder characterized by anaddhapihitanasa, tanusrava, shosha in gala taalu and oshta, pain in shankapradesha and swaropaghatha.[2] The treatment modalities which are adopted in this case study is Nasya which is helpful in restoring the normalcy of nasal mucosa and internal medicine gives rasayana effect so helps in preventing the reoccurrence of the disease.

**OBJECTIVES**

1. To understand the pathophysiology of vatajaprathishyaya with respective to allergic rhinitis.
2. To find better and satisfying ayurvedic approach in vatajapratishyaya.

MATERIALS AND METHODS

Case Report

Basic information of the patient
Age: 25 years
Gender: male
Religion: Muslim
Occupation: Engineer
Socioeconomic status: Middle class

Chief Complaints

Complaints of continuous episodes of sneezing, watering and itching in eyes and running nose since 2 years.

History of present illness

Patient was apparently normal 2 years back then he developed continuous episodes of sneezing, blockage in nose, sometimes watery discharge in eyes and nose and itching in eyes and nose. For these complaints he approached allopathic hospitals but never felt any kind of relief so he then approached Sri Jayachamarajendra Institute of Indian Medicine Hospital for better management.

History of past illness: Nothing specific.

Personal history

Appetite- decreased appetite
Sleep - good
Bowel - regular
Micturition- 5-6 times/ day

Examination

Ashtasthana pareeksha

- Nadi: 76/min
- Mutra: 5-6 times/day
- Mala: regular
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- Jihwa: alipta
- Shabda: prakruta
- Sparsha: prakrutha
- Druk: prakkruta
- Akruthi: Madhyama

**Vitals**
- Pulse rate: 76/min
- Respiratory rate: 24/min
- BP: 130/84 mmHg

**Systemic examination**
No specific abnormalities detected

**Examination of Nose**[3]
1) Inspection: Swelling of the nasal mucosa, thin secretions.
2) Anterior Rhinoscopy – Lower and anterior part of septum, middle turbinate appears red, floor of the nose appeared red, mucosa red, septum normal.
3) Obstruction of nose/ Nasal Patency- No nasal polyps.

**Examination of Ear**
a) EAC: Normal
b) Tympanic Membrane: Normal, Intact Tympanic membrane in both ear

**Examination of Sinus**: Facial tenderness on palpation of the sinuses.

**Examination of Throat**: Posterior oropharynx is moist, mucous accumulation in the back of the nose and throat, no sign of inflammation.

**Laboratory Test**
- Hb% - 13.5 gm%
- TLC – 6000/cu mm
- Neutrophils - 66%, Lymphocytes - 26%, Monocytes - 4%, Eosinophil - 6,
  Basophils 1%
- ESR – 38 mm/hour
- Absolute Eosinophil count – 625 /cu.mm
Treatment adopted
The patient was treated in the OPD of the Shalakya Tantra department of GAMC Bengaluru and treatment was planned considering involved Dosha and Dushya. Nasya Karma was planned for 7 days along with the internal medications. Following treatment was administered.

- **Sadyovirechana**: Trivruth lehya 40 gm with Triphala Kashaya Anupana
- **Nasya**-
  - **poorva karma**: Mukhabhyanga with murchita tila taila followed by bashpa sweda.
  - **Pradhana karma**: Nasya with Anutaila 8 bindu in each nostril. For 7 days in the morning before food.
  - **Pashchat karma**: Gandusha with Ushna jala and dhoomapaana with Haridra varthi.
- **Shamanoushadis**-
  - Vyagradhikashaya 15 ml bd before food with equal quantity of sukoshna jala
  - Vyoshadi vati[^d]-2 bd after food
  - Chitrakaharitaki lehya-1 tsp at night with milk, was given as Rasayana for 1 month.
- Suitable pathya ahara and vihara are advised as per the condition.

**OBSERVATIONS AND RESULTS**
After 7 days of treatment and follow up for 1 month clinical assessments were made from the interrogation with patient and assessment of objective parameters was done. The outcome observed was a drastic change in the parameters as.

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>BT</th>
<th>After completion of nasya karma</th>
<th>After 30 days of medication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nasavarodha (Nasal Obstruction)</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>TanuSrava (Watery discharge)</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Kshavathu (Sneezing)</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Swara bhedha (Hoarseness of voice)</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Shirashoola (Headache)</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Post Nasal Discharge</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Anterior Rhinoscopic Findings</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Haematological investigations</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESR</td>
<td>38 mm/hour</td>
<td>17 mm/hour</td>
</tr>
<tr>
<td>AEC</td>
<td>625/cu. Mm</td>
<td>430/cu. mm</td>
</tr>
</tbody>
</table>
DISCUSSION

Allergic Rhinitis is a disease which hampers the quality of life and disturbs the daily activities of the person. The incidence rate of this disease is increasing day by day due to the increased environmental pollution, stressful life and decreased immunity of the person. At this stage, if Allergic Rhinitis is not treated, it may lead to infection resulting in various complications. Allergic Rhinitis is caused due to smoke, dust, allergy, atmospheric pollution, change in humidity and psychological factors. The features of Allergic Rhinitis mentioned in Allopathic Science are Sneezing, Nasal Obstruction, Watery Nasal Discharge, Change in Voice, Headache, Dryness of throat and lips.

VatajaPratishyaya is a Nasagataroga described in detail in Ayurvedic classics in which there is vitiation of Vata and Kapha doshas resulting in Kshawathu (profuse sneezing), Nasaavarodha(nasal obstruction), jala srava from Nasa (watery nasal discharge), Gala TaluShushkata (dryness of the throat and lips), Swaropaghata (change in voice), Shirashoola (headache). It can be co – related with the disease Allergic Rhinitis mentioned in modern science.

The allergens which are inhaled releases newly formed or preformed mediators, which leads to the causation of.
1. Increased vascular permeability and vasodilation followed by tissue oedema and nasal blockage.
2. Change in smooth muscle tone followed by Bronchospasm.
3. Hyperactivity of glands followed by increased secretion and rhinorrhoea.

Nasya is one of the effective lines of treatment indicated in most of the urdhwajatrugata vikaras. This treatment is equally beneficial in treating vataja prathishyaya as it is one among the nasagatharoga. Trans-nasal administration of medicated drugs plays an important role in treating the disease by preventing the contact of the allergens by forming barrier between the nasal mucosa which helps in preventing the reoccurrence of disease.

In this present study, Anutaila a best tridoshahara and prathishyayahara drug is used for nasya. Tailanasya helps in restoring the normal structural and functional integrity of nasal mucosa and internal medication will boost the immunity by its rasayana effect.
Vyagradhikashaya and Vyoshadivati are vatakaphahara, anti allergic and anti histaminic in action. Agastyahratik Rasayana prevents the reoccurrence and is anti-allergic.

CONCLUSION

Vatajaprathishyaya (Allergic Rhinitis) if untreated can lead to bronchial asthma, recurrent middle ear infections, sinusitis and chronic cough. The case study has revealed a remarkable efficacy in vatajaprathishyaya with a significant result in most of the assessment criteria. The symptoms score did not worsen and was maintained. This was pilot study to evaluate the efficacy of Nasya karma and oral medication in the management of vatajaprathishyaya and the result produced was encouraging enough not only on the assessment parameters, but also helped to gain resistance against allergens, repeated attacks and promoted immunity, physical and mental health of the patient.

REFERENCES