Research Paper

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Efficacy of Nasya with & Without Oral Drug in Prathishyaya w.s.r. to Rhinitis

Medical Science

KEYWORDS : Prathishyaya, Langhana, Nasyakarma, panchamrutha ras.

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ABSTRACT

Nowadays prathishyaya (Rhinitis) is one of the commonest and most prevalent diseases. The seasonal changes, climatic changes, air pollution, contaminated water, irregular food habits, stress & strain have an impact on the equilibrium of doshas in the body. Due to above etiological factors, vitiated doshas with predominance of vata settled in Nasika and manifests prathishyaya (all types Rhinitis). If it not treated in time it leads to further complications. For that selected Nasya and internal medicine. Nasya drug is Shadbindu ghrutham. It contains lavanga,yashti, kushta, shunti, bhrungaraja swaras and gogrutha is the base. Nasya drug nourishes nasal mucous membrane, reduces inflammation of the nasal mucosa and keeps healthy. Oral drug ingredients are S.Parada, S.Gandhaka, S.Tankana, S.Nabhi and Maricha are having deepana and pachana properties. It means dhatvagni vardhaka & Ama pachak properties. Parada is having Rasayana property also. These will improve dhatvagni as well as immunity system. In allopathy system there are many side effects of medications. The main aims & objectives of the study are to prevent side effects and to improve the immune system of the patient along with curative and preventive measures with simple, safe and cost effective drugs. Materials & Methods: Totally 30 patients were selected from O.P.D. of Shalakya Unit, at G.A.H., Erragadda, Hyderabad. These are divided into 2 groups. Group A patients are given only Nasya karma and advised diet restrictions to them. Group B patients are given Nasya karma and oral medicine. Results are excellent in the group B patients, who were given both nasya and oral medication than group A patients. Concluding the study is route of administration of Nasya is independent procedure is efficacious in relieving the prathishyaya and also panchamrutha ras is more effective. Nidana parivarjana is also plays an important role for the management of prathishyaya. In addition to these drugs, some rasayana therapy is advised to the above patients.

INTRODUCTION

Ayurveda is the science of life. Ayurveda is mainly based on the Tridosha theory. The main aim of Ayurveda is to protect health of the healthy individuals and alleviate disorders in diseased persons[1]. Nowadays Prathishyaya is one of the commonest and most prevalent diseases. The main principle of health according to Ayurveda is equilibrium of trodoshas[2]. The seasonal changes and climatic changes, air pollution, contaminated water, irregular food habits, stress & strain have an impact on the equilibrium of doshas in the body. Vitiated doshas separately or collectively along with raktha accumulated and aggravated by various factors get located in head and settled in nasika and manifests prathishyaya[3] (all types of Rhinitis). Quality of life is lowered with Prathishyaya. The occupational life is hampered. If the disease is not treated properly, it leads to dushta prathishyaya and causes multiple complications like Badhiryam(Deafness), Andhathvam(Blindness), Aghranathvam(Anosmia), khalithyam(Hair loss), Palithyam(Premature graying of hair), arumshika(Pediculosis) and systemic problems also[4]. So we should treat the prathishyaya in time to prevent complications and to improve quality of life.

The basic aim of chikitsa is to bring the equilibrium of vitiated doshas by nidana parivarjana[5], sodhana and shamana. First point in the line of treatment is langhana is 3-5 nights[6] according to patient's condition and disease severity. Here langhana means fasting or light diet advised. After that sodhana therapy given. For sodhana therapy, the procedure adopted in this work is "Nasya karma" with "**Shadbindu ghrutham**"[7] which is one of the specialized techniques of pancha karmas in Ayurveda. It contains lavanga, yashtimadhu, kushta, shunti, Bhrungaraja swaras and goghrutham(Ref: Yoga Ratnakara) Goghrutha acts as yogavahi. These drugs are having vata kapha hara, amapachaka properties and eliminate vitiated doshas through nose with sneezings. Internal medicine is selected "**Panchamrutha ras**"[8] contains Suddha Parad, Suddha gandhak, Suddha Tankan, Sodhitaha Nabhi and Maricha. Bhavana dravya is ardraka swaras, which is having vata kaphahara, amapachaka and also works as anti biotic, anti-inflammatory and anti-allergic which is required in the treatment of prathishyaya. These therapies have great role in eliminating the morbid doshas and builds up immunity against most of the ailments in order to enhance the quality of life and increase longevity in present life style.

Aims & Objectives of the study: 1.The main aim of the study is to treat prathishyaya with simple, safe and effective remedies and decreases the incidence of attacks & improves the immune system of the patients especially school going children, youth. We should treat in time to prevent complications and improves quality of life. 2. To co-relate the classical features of Prathishyaya with signs and symptoms of Rhinitis according to modern text book.

MATERIALS & METHODS: Totally 30 patients were selected from O.P.D. of Shalakya Unit Govt. Ayurvedic Hospital, Erragadda, Hyderabad. Patients suffering from prathishyaya are selected at random in the age group of 10-60 years, irrespective of sex, diet, religion, economic status and occupation.

Inclusion criteria: Patients are presenting with classical features of Prathishyaya are sneezing, nasa srava, nasavarodha, shira shoola, siro guruthvam.

Exclusion criteria: The patients suffering from upadrava yuktha prathishyaya, nasal polyps and systemic diseases are excluded from this study.

Patients were categorized into 2 groups. **In 1st Group** Patients having symptoms of prathishyaya with short duration given only nasya, and advised them, to follow pathya ahaara and viharaas(diet instructions; do's and donot's). **In 2nd Group** patients having prathishyaya symptoms with long duration and having attacks frequently (chronic Rhinitis) were given oral medication and nasya karma and they are also instructed to follow pathya ahaara and vihaaras.

Group A: 15 Registered patients only Nasya and advised pathya ahaara and viharas.

Group B: 15 Registered patients were given Panchamrutha ras and Nasya karma and also advised pathya ahaara and viharas

Dosage & duration of trial: 4-8 pills (each pill -250 mg) in divided doses according to age, body weight and disease severity.

Nasya karma-It is a simple and effective method of pancha karma. The method of administration of nasya consists of three stages.

I. **Poorva karma (pre-operative procedure):** In this stage-mrudu abhyanga with medicated oil on the face and hot fomentation.

II. **Pradhana karma (operative procedure):** In this stage-nasya medicine made into luke warm and instillation of drops into both nostrils.

III.**Paschat karma (post-operative procedure**): In this stage-again hot fomentation on the face and gargling with luke warm water mixed with pinch of saindhava lavana and haridra powder.

Dosage of Nasya drug: 6-12 drops once a day for 1 week, followed by prathimarsha Nasya. Prathimarsha means 2 drops in each nostril. If necessary nasya karma repeated after one week.

Duration of treatment: is 6 weeks.

Assessment criteria: two types of parameters adopted.

a. **Subjective parameters**: Relief of clinical signs and symptoms.
b. **Objective parameters**: Blood for Hb%; RBC count; W.B.C. - T, C & D.C.; E.S.R.; X-ray PNS.

Observations and Results: these 30 patients of prathishyaya were evaluated under different parameters viz age, sex, occupation, religion, food habits & economical status.

OBSERATIONS:

Table No: 1 - Sex wise distribution:

sex	No. pts.	Percentage
Male	13	43.33%
Female	17	56.67%

It shows females are more prone to get prathishyaya.

Table No: 2- Age & Sex wise distribution:

S. No:	Age group	Male	Female	Children	Total	Percentage
1	1-20 yrs	1	4	2	7	23.3%
2	21-40 yrs	9	11	-	20	66.67%
3	41-60 yrs	1	2	-	3	10%

It shows adults & middle age group (21-40 years) are more prone to get prathishyaya.

Table No: 3 –Occupation wise distribution:

S. No	Occupation	No. patients	Percentage
1	White collared	1	3.3%
2	Housewives	8	26.6%
3	Field workers	2	6.66%
4	Students	11	36.66%
5	Employees	8	26.66%

It shows housewives and students are more prone to suffer prathishyaya.

Table No: 4--Diet wise Distribution:

Dietary habits	No. patients	Percentage
Vegetarian	6	20%
Non-Vegetarian	24	80%

It shows non-veg people are more prone to suffer prathishyaya.

Above 4 tables reveals that females, 21-40 years of age group people, students and mixed diet people are more prone to get rhinitis. It reveals may be due to irregular diet habits, exposure to dust, stress and strain are causing of vitiated tridoshas.

RESULTS:

Table No: 5:- symptom wise results in Group-A (after 6 week's period)

Sl. No.	Symptoms	No Of patients			% of Relief	χ^2	P value
		B T	A T				
			Re-lieved	Not-re-lieved			
1	Kshavadhu	10	8	2	80 %	3.6	0.05777
2	Nasa srava	11	9	2	81.8 %	4.455	0.0347
3	Sira:shoola	13	10	3	76.9 %	5.333	0.0239
4	Nasavarodha	12	10	2	83 %	5.333	0.0239
5	Siroguruthvam	10	7	3	70 %	1.6	0.259
6	Kandu	1	1	0	100 %	1	0.31
7	Nasadaha	1	0	1	----	0	1

Table No: 6:-Symptom wise results in Group-B (after 6 week's period)

Sl. No.	Symptoms	No Of Patients			% of Relief	χ^2	P value
		B T	A T				
			Re-lieved	Not-re-lieved			
1	Kshavadhu	12	12	0	100 %	12	0.000532
2	Nasa srava	12	10	2	83 %	5.333	0.0209
3	Sira:shoola	13	11	2	84.6 %	6.231	0.01255
4	Nasavarodha	10	8	2	80 %	3.6	0.05777
5	Siroguruthvam	12	10	2	83 %	5.333	0.0209
6	Kandu	4	3	1	75 %	1	0.317
7	Nasadaha	4	2	2	50 %	0	1

Table No: 7: Overall Result:

	Group -A		Group -**B**		χ^2	P value
	No. of pts.	Relief of %	No. of pts.	Relief of %		
Good	3	20%	6	40 %		
Moderate	9	60%	8	53.3 %	2.059	0.357185
Poor	3	20%	1	6.6 %		

Good relief: The relief of >70% of symptoms of prathishyaya (Rhinitis) assume complete/Good relief

Moderate relief: The relief of 40-70% of prathishyaya (Rhinitis) assume Moderate relief.

No-Relief: The relief of symptoms < 30% of Prathishyaya (Rhinitis) assume No-Relief.

Results: The results are very good in Group-B patients with dual medication i.e, nasya and oral medication compare with Group-A patients are only on nasya.

In this study subjective parameters taken only, numerical data not taken. For this χ^2 (chi square) is applicable. For numerical data t test is applicable. So χ^2 and p values are mentioned.

DISCUSSION: Prathishyaya is the result of vitiated doshas with predominance of Vata hampers the immunity system of the body. The ingredients of Panchamrutha ras are having deepana, pachana, vata kapha hara, ama pachaka properties. It can compare with anti-biotic, anti-allergic and anti-inflammatory properties. Nasya drug ingredients are also having anti-biotic, anti-inflammatory properties (locally acting) and also nourish the nasal mucosa. Above table shows shadbindu grutham and panchamrutha ras-oral drugs are effective in prathishyaya w.s.r. to Rhinitis. χ^2 shows stastistically significant in prathishyaya w.s.r. to Rhinitis.

Conclusion: Concluding the study, the Nasya karma with shadbindu ghrutham and Panchamrutharas internal medicine in prathishyaya are more effective. So both drugs should advise in the treatment of prathishyaya (nasya karma as well as Oral medication). Nidana parivarjana is also plays an important role for the management of Prathishyaya. In addition to these drugs, rasayana therapy is advised to some patients.

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