



**ORIGINAL RESEARCH PAPER**

**Homeopathic**

**ROLE OF NIDANPARIVARJAN IN PRATISHYAYAIN THE CHILDREN**

**KEY WORDS:**

Nidanparivarjan, Hetu, Pratishyaya.

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**ABSTRACT**

Pratishyaya is one of the diseases in which inflammation of mucous membrane of the nose is observed and it is characterized by Nasasrava, NasavarodhaKshavathu, Shirashoola, Swasavarodha, Gandhajnana etc. It's a very contagious disease seen all over the world causing much distress and discomfort to the people. The constant nasal discharge, foul smell of the nose and recurrent occurrence of the condition drag the individual far from the normal life. Pratishyaya, the simple disease if untreated may lead to Kasa, Swasa and even severe disease like Rajayakshma. Elaborate description of the disease pratishyaya in terms of its etiology, pathology, signs and symptoms, prognosis and treatment are available in ancient main texts of Ayurveda like Charakasamhita, sushrutasamhita. Hence, it is necessary to study the role of nidanparivarjan (Prevention of causative factor) in the disease pratishyaya in children. While studying this it is observed that there are so many factors responsible as causative agent. So this articles reflects the importance of prevention of causes of pratishyaya in children.

**Introduction:**

The incidence of the common cold varies by age. Rates are highest in children younger than 5 years. Children have about 3-8 viral respiratory illnesses per year. The common cold is the most common illness. Infants and children are affected more often and experience more prolonged symptoms than adults. The common cold accounts for approximately 22 million missed days of school and 20 million absences from work, including time away from work caring for ill children.

Colds cause about 500 FP visits per 1000 patients per year. 1 Because colds occur all year round, the total burden of illness caused by them is greater than the burden caused by seasonal influenza. Colds account for 40% of all time lost from jobs and 30% of all absenteeism from school. There are more than 200 viruses, continuously changing, that are associated with the common cold.

Generally the people desire to get relief of their trouble in minimum period. Though a number of medicines are available in every system of medicines for curing a single disease, still always challenges exists. So it necessary to think on Causative aspect of Pratishyaya (Common cold).

The following are described as nidanas of pratishyaya:

1. Mandagni
2. Ajeerna
3. Vishamashana
4. Atijalapana
5. Atishitaambupana
6. Intake of atishitajala by persons of shleshmaprakriti.
7. Excessive intake of guru, shita, madhura substances.
8. Atinarparsanga
9. Atidivaswapna
10. Ratrijagarana
11. Nidra after dugdhapana
12. Atiparshwashayana
13. Nityaanupahitashayana
14. Apavritamukhashayana
15. Vega sandharana
16. Atiashrusrava
17. Tapa sevana
18. Dhuli rajah sevana
19. Atipratapa
20. Rituvashmya
21. Snana in ajeerna
22. Snana with shitajala
23. Atijalakrida
24. Atibhashana
25. Shirosobhitapa

26. Shitamati pratapa
27. Shirovedana

**Aim:**

To study the role nidanparivarjan in pratishyaya in children.

**MATERIAL AND METHODS**

**Materials –**

1. Hetu of Pratishyaya

Method of study:-

Reviewing the literature.

Probable effect of nidanas on doshas:

- 1) Intake of Athisheetajala (Consumption of Chilled Water):

Excessive consumption of Shitajala vitiates VataDosh. Due to ShitaGuna, this vitiated or VriddhaVata when reaches ShiraPradesha Kapha, Pitta and RaktaAvarana of Doshas for the Gati or he movement of Vayu Doshas get lodged in ShiraPradesha VriddhaVataexpels out Kapha, Pitta and Rakta through nasal route manifesting the disease Pratishyaya. This Samprapti is Sadhya in nature as mentioned by Sushruta. (Sushrut Uttartantra 12/3)

On the other hand if same Nidanas are consumed for a longer duration, it vitiates KaphaDosh which leads to Mandagni in turn produces Amavisha which creates Rasa Dhatu Dushti Through Hridaya it circulates all over the body through Rasavahi and Raktavahi Srotasas SamaDoshas obstructs the movement of Vata, thus creating PratilomaGati of Vayu takes Sthana Sanshraya in ShiraPradesha, due to Khavaigunya DosaDushyaSammurchhana takes place, which in tern manifests the disease Pratishyaya (Rogotpatti) by expelling Kapha, Pitta and Rakta through nasal route.

- 2) Intake of Athishitajala in SleshmaPrakriti (Consumption of Chilled Water In ShleshmaPrakriti Person):

Same pathogenesis will takes place but, with more severity of symptoms due to ShleshmaPrakriti. Because along with VataPrakopa, Kapha is also being triggered or vitiated it due to ShitaGuna of Jala and KaphaPrakriti of the person. So along with Vata vitiation Kapha also gets vitiated and the pathogenesis of the disease Pratishyaya may take place, in either of the ways, mentioned above.

- 3) Athimatra Guru-Shita-Madhura Ahara (Consumption of Heavy, Cold and Sweet Meals in Excessive Quantity):

As mentioned by Acharya Charaka -With excessive intake of Guru, Shita and Madhura Ahara, Vata and Kapha both Doshas

get aggravated due to the principle "Sama-GunaVridhhi" and these aggravated. Vata and Kapha follow the same vicious cycle of pathogenesis, as mentioned above to manifest the disease Pratishtyaya.

- 4) Snana with Atisheetajala (To Take Bath with Too Cold Water):  
5) AthiJalaKrida (Excessive Bath/Swimming in Cold Water):

Snana with ShitaJala and AtiJalaKrida, both vitiate VataDosh. This vitiated Vata when reaches ShiraPradesha, where it is obstructed by the Avarana of Kapha, Pitta and Rakta. Thus, the VridhaVata expels out the Doshas through nose giving rise to the disease Pratishtyaya, as mentioned above. When the same etiology continuous for a longer duration, it may vitiate Kapha along with Vata also, leading to same pathogenesis of Pratishtyaya due to Agnimandya, as mentioned in the Nidana first.

- 6) Nidra after DugdhaPana (Sleep after Taking Milk):

Increases SnigdhaGuna KaphaVridhhi vitiates Agni leads to Agnimandya Amotpatti Rasa Dhatu Dushti and so on, the manifestation of the disease Pratishtyaya.

7) ShitamAtipratapa (Exposure of Head to cold): Excessive exposure of head to cold, (Su.Ut. 24/3.) may cause a local lesion in ShiraPradesha (Khavaigunya) by vitiating Vata, Kapha, Pitta and Rakta, that too particularly in person having low immunity. In such cases any further exposure leads to Sadya or Acute manifestation of the disease i.e. AchayaPrakopa. Kapha, Pitta and Rakta obstructs the movement of Vata, which leads to PratilomaGati of Vayu and following the same pathogenesis creates the same sympatmatology of the disease Pratishtyaya.

8) Mandagni: Due to Mandagni there is indigestion of ingested food leading to production of Amavisha vitiates Rasa Dhatu vitiates Doshas while circulating throughout the body through Srotasas takes SthanaSanshraya at Khavaigunya in ShiraPradesha Avarana of Vata with SamaDosh (hampering the Gati of Vayu) leading to PratilomaGati (Avarana of UdanaVayu) manifestation of the disease Pratishtyaya.

9) Ajirna: Acharya Charaka endorses the same etiopathogenesis in the production of disease Pratishtyaya with Ajirna, where production of Amavisha takes place with indigestion which results Mandagni and the same pathogenesis takes place to produce the disease Pratishtyaya as mentioned above. (Charaksamhitachikitsa 15/42-45)

10) Vishamashana: Acharya Charaka again cites another causative factor, Vishamashana, for the manifestation of the disease Pratishtyaya. The same pathogenesis participates in the manifestation of disease by production of Ama. (Charaksamhitachikitsa 15/42-45)

11) Snana in Ajirna (To Take Bath in Ajirna): Snana which is contraindicated in Ajirna, when patient ignores the precautions then much more production of Ama takes place leading to Mandagni and same Samprapti takes place for the disease.

12) AtiNariPrasanga (Excessive Indulgence in Sex): According to Sushruta, there is a Sadya manifestation of the disease Pratishtyaya with Nidanans like AtiNariPrasanga, Mala, Mutra, Vega Sandharana etc. by vitiation of VataDosh (Charaksamhita 26/104-105) Vitiated Vata when reaches ShiraPradesha it manifests the disease as already described earlier.

Otherwise also this Nidana creates DhatuKshaya VataPrakopa leads to Vishamagni Mandagni increases Ama Amavisha vitiates Rasa Dhatu. Thus vitiating Doshas i.e.

Kapha, Pitta and Rakta SamaDoshas obstruct the movement of Vayu manifestation of the disease Pratishtyaya. (SushrutUttartantra 24/3)

13) Vega Sandharana (Suppression of the Urge defecation and micturition): Similar pathogenesis takes place to produce the disease due to VataPrakopa and due to Kapha leading to Mandagni, as mentioned by Acharya Charaka. (SushrutUttartantra 24/3)

14) AtiBhashana (Excessive Talking): Due to VataVridhhi, Vata gets vitiated Avarana by Kapha, Pitta and Rakta in ShiraPradesha obstruction in Gati PratilomaGati and same symptomatology i.e. expulsion of Doshas through nasal route, manifesting the disease Pratishtyaya.

15) Ratrijagarana (Night vigilance) : Ratrijagarana creates Rukshata increases VataDosh and above mentioned pathogenesis takes place. In the case of prolongation of same Nidana leads to VataDushti and manifestation of disease Pratishtyaya. (Charaksamhita sutra 21/50)

16) Divaswapna (Day Sleep): Increases KaphaDosh which leads to Mandagni. Indigestion takes place with the production of Ama and Rasa Dushti amalgamation with Amavish Vitiated Rasa Dhatu manifests the disease, after lodging in ShiraPradesha.

17) Shiraso-Abhitapa (Exposure to Heat of Head): Excessive heat vitiates Pitta Dosh UshnaGuna of Pitta dries up Snigdha in Shira Pradesh and melts KaphaDosh (Vilayana) Decrease in Snigdha, increases Rukshatva and Kharatva results in VataVridhhi in ShiraPradesha vitiated VataDosh expels out Kapha through Nose manifesting the disease Pratishtyaya. Sushruta labels it as Nidana for Sadya or acute pathogenesis of the disease.

18) RituVaishamya: RituVaishamya has a direct impact on Jatharagni. According to Charaka, Vitiation of Jatharagni produces Amavisha, resulting to improper digestion of ingested food. This Ama vitiates Rasa Dhatu and manifests pathogenesis for the disease Pratishtyaya. (Charaksamhitachikitsa 15/42-45)

In another reference Charaka mentions, while describing the Nidanans of Pratishtyaya, due to RituVaishamya there is TridoshaPrakopa and excessive increase of Vata which manifests the disease Pratishtyaya, where pathogenesis starts with the obstruction of movement of Vayu. (SushrutUttartantra 24/3)

19) Dhuli-Rajah-Dhuma (Exposure to Dust, Smoke etc.): Same pathogenesis has been described regarding Dhuli-Raja Sevana in Charaka. Due to such etiological factors there is a SadyahPrakopa of Vata leading to manifestation of the disease, with AchayaPrakopa.

20) NityaAnupahitaShayana (Sleeping in improper posture)

21) ApavritaMukhaShayana (Sleep with covering the face)

22) AtiParshwaShayana (Sleeping on one side): According to Kashyapa all these factors in a due course of time vitiates VataDosh and then same pathogenesis takes place in the manifestation of the disease after getting obstructed by KaphaDosh in ShiraPradesha, as described earlier. (kashyapsamhitachikitsa 15/42-45, 48)

According to Acharyas Krodha, Shoka, Chinta, AshruvegaSandharana, Atiashrusrava are the prime psychical etiological factors takes role in the manifestation of the disease Pratishtyaya. (Charaksamhita sutra 21/50)

23)AtiahsruSrava(Excessive secretion of tears):Due to NidanaSevana, there may be Atipravritti or Dushti of UdanaVayu, leading to VatakaphaPrakopa in Shirah Pradesh, thus manifesting the disease Pratishyaya.

Purvarupa have been explained in each and every text which should be considered as prodromal symptoms. The cardinal features of pratishyaya is described in detail in trimarmiyachikitsa not only general but also in sepatetypes of the disease. So as to pin point the treatment direct it against the specific disease rather than treating it as a general. In all the text it has been clearly mentioned if it is untreated the disease gets converted into dushtapratishyaya that means showing its chronicity.Thus becoming more difficult to treat. The disease itself can be not only be considered as a simple single disease but can also be considered as a secondary to some underlying disease and also as a causative factor to other diseases. Pratishyaya has seen to be secondary to other diseases in the following:

Jwara, Udavarta, Gulma, Raktapitta, Rajayakshma, Shiroroga, Chardi

**Discussion:**

संक्षेपतक्रियायोगेनिदानपरीवर्जनम | सुउ.1/25

This explains avoidance of causative factors of the disease. In short, this is very important part of a treatment. If the causes are eliminated, the course of disease or progress of the disease can be arrested, its recurrence will be prevented and effects of the treatment will be seen quickly.

For this identification of Hetus i.e. causes is very important one who finds out the root cause of the disease, becomes a very successful physician.

Thus, Nidanaparivarjana helps in complete cure of the disease.

**Conclusion:**

Nidanaparivarjana has main & important role in prevention and also cure of the disease. It also helps to avoid recurrence of disease.

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