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Review Article

NASYA-MOST VITAL THERAPEUTIC INTERVENTION OF PANCHAKARMA-A REVIEW

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ABSTRACT

Ayurveda is a Science and art of appropriate living which helps to achieve longevity. *Panchakarma* present a unique approach of *Ayurveda* to therapy with specially designed five procedures of internal purification of the body. One of the *Panchakarma*, the *Nasyakarma* is considered the best and the most specific procedure for disease of *Urdhvajatrugatarogas* like *Pratishyay*, *Shirahshoola etc.* It is also useful in other systemic diseases like *Ardita*, *Kampavata*. According to *Ayurveda*, the nose is the gate way to *Shirah*. So, systemically performed *Nasyakarma* cures almost all the diseases of *Urdhvajatrugata rogas*. Other procedures of *Panchakarma* are also very effective in numerous diseases according to condition but *Nasya Karma* is very easy to perform and there are no many strict regimens to follow during *Nasya Karma* but it will give effectual results in loads of diseases due to direct contact with nerve terminals by the nasal mucosa. So, it is demand of time to know about *Nasyakarma* and its importance. In this direction, to evaluate the actual efficacy of different *Ayurveda* treatment modalities; few works on *Nasya Karma* are compiled here. In current attempt, it has been planned to review as such works done on *Nasyakarma*. By this Present study it can be stated that in various diseases Nasya Karma is found to be significantly effective. It proved to be a better therapy as compared to only oral drug because it provides affect for longer duration than oral drug.

KEYWORDS: Panchkarma, Nasyakarma, Urdhavajatrugata rogas, Ardita, Shirahshoola, Pratishyaya.

INTRODUCTION

Ayurveda's main objective is being to relieve human suffering and impart healthful longevity^[1].In Ayurveda, Panchkarma is not only a Shodhana therapy but also has wider range of therapeutics and one of Panchkarma, the Nasyakarma is considered the best and the most specific procedure for disease of *Urdhvajatrugata rogas*^[2] and also other systemic disorders. In *Urdhvajatru*, *Shirah* being the prime seat of the knowledge and also the prime controller of the entire body has been termed as "Uttmanga"^[3]. According to Avurveda nose is gate way of Shirah^[4]. So, systemically performed Nasyakarma cures almost all diseases of Urdhvajatrugata. Acharya Charaka has mentioned one specific anatomical structure named "Munja"^[5]- which is like type of grass which acts like painter's brush when instilled in the paint, absorbs the paint. In the same way the Nasya medicine attract and remove only vitiated Doshas. History also reveals that Nasyakarma was also practiced during ancient era for example Sanjivani Nasya in Ramayan, Vaidya Jivak gave Nasva Karma to lord Buddha for Virechana Karma. The present review is a humble effort to evaluate efficacy of Nasya Karma in various conditions especially in Urdhva jatrugatarogas.

AIM: To appraise effect of *Nasya Karma* in various diseases.

MATERIAL AND METHODS: Works carried out in different department at IPGT&RA, Jamnagar, India and published paper on *Nasya Karma* were complied and

screened to revalidate the therapy attributes of *Nasyakarma* on Various disease conditions.

OSERVATION AND RESULTS

1. Dusta Pratishyaya^[6] (chronic Rhinitis)

Total of 30 patients were registered and randomly grouped into two for this study. Out of which 26 patients completed the course of treatment. Before starting the treatment, Deepana -Pachana with Trikatu Churnam (3-5 gm BD), Koshtha Shudhdhi with Eranda Bhrishta Haritaki (5 gm at Bed time) was given for three day to all the patients. In group A, Patients were treated with Anu taila Nasya in dose of 8 drops in each nostrils along with *Vvaghri Haritaki Avaleha*^[7]. Nasya was given for 3 sittings, seven days in each, with the interval of seven days between each sitting. In group B only Vyaghri Haritaki Avaleha was given in dose of 5-10gms twice a day for 2 months. In complaint of Nasasrava 80.77 % relief was observed in group A and 88.24 % in group B. 66.46 % and 84.21% relief was observed in group A and group B respectively in the complaint of Nasaavarodha. In complaint of Shirashoola, 72.73% relief was observed in group A and 75.86% in group B. In group A 50% and in group B 42.86% relief was observed in complaint of Gandhaaqvanata. 100 % relief was observed in Kasa in both the groups. In both the groups no one was totally cured. In group A 46.15 % patients and in group B 53.85 % patients got marked relief. In group A 38.46 % patients and in group B 23.08 % patients got moderate relief. In Group A 15.38 % patients and in Group B 23.08 % patients got mild relief in signs and symptoms of the disease. Both the group showed almost equally better results in different symptoms, but objectively group A showed better result.

2. Migraine^[8]

This study was conducted on 33 clinical and pathological diagnosed patients of migraine. Out of the three groups, in group-A *Kumkumadi Ghrita Nasya*^[9] was administered in dose of 6 drops in each nostril for 21 days, in group B Dashmoola Shrita Ksheera^[10] Shirodhara was done for 21 days, in group C Tab. Propranolol 40 mg twice a day and diclofenac 50 mg twice a day were given. In group A highly significant results were obtained in Intensity of pain by 68.75%, in episodic interval 69.56%, in duration of headache 66.66%, while significant results were found in nausea by 68.86%, in vomiting by 68.75%. 69.23% of improvement in both photophobia and phonophobia was observed which was statistically significant, whereas 71.42% relief was seen in both the symptom of visual disturbance and vertigo which was no significant statistically.

In Group B, 37.93% relief in intensity of pain which was highly significant statistically and 41.1% relief in episodic interval which was significant statistically, while 48% relief in duration of headache which was also significant statistically. The study also showed 41.66% relief in nausea & 33.33% relief in vomiting which were no significant statistically and significant statistically respectively. 46.15% improvement in photophobia and 50% in phonophobia both were statically significant where as 45.45 % & 50% relief was observed in the symptom of visual disturbance & vertigo which were found no significant. In group C highly significant results were obtained in Intensity of pain by 75.86%, in episodic interval 45%, in duration of headache 76%, in vomiting by 75% and in phonophobia by 80%. Significant results were found in nausea by 81.81%, in photophobia 80%Whereas 71.42 relief was seen in both the symptom of visual disturbance and vertigo which was no significant statistically, whereas 80% & 75% relief was observed in the symptom of visual disturbance & vertigo which were found no significant. The overall effect of therapy showed that in group A, complete and moderate improvement was seen in 20% in each, 50% patients had marked improvement and 10% patients had mild improvement. In Group B, 20% patients had marked improvement, 50% patients had moderate improvement and 30% patients had mild improvement while in Group C, complete and moderate improvement was seen in 30% in each and 40% patients had marked improvement.

It is concluded that *Kumkumadi Ghrita Nasya* was more effective in alleviating symptoms of Migraine than *Dashmool shrita ksheer Shirodhara*. Allopathic drugs were slightly more effective than *Kumkumadi Ghrita Nasya* except relief in episodic interval, Allopathic drugs were lesser effective than *Nasya*.

3. Jirna Pratishyaya^[11](chronic Rhinitis)

In this clinical trial Total 50 patients were registered, which were divided into 2 groups. 13 patients left the treatment i.e. 2 in Nasya group and 11 in Shamana group. In group A Patients were treated with *Anu taila*

Nasya in dose of 5-8 drops in each nostril along with indigenous drug yoga Shireeshadi Yoga. Nasya was given in three sittings of 7 days each. There was a 3 days interval in between two sittings of *Nasya Karma*. In group - B Patients were treated with only compound of indigenous drug Shireeshadiyoga^[12]- 6gms once in a day for 21 days. In group A and B, highly significant results were obtained in all cardinal symptoms. In group-A, there was relief in nasal obstruction by 81.97%, in rhinorrhea-83.58%, in sneezing-80%, in headache-72.22%, in cough-91.30% were found. In group B, percentage of relief in nasal obstruction-70.3%, in rhinorrhea-70.77%, in sneezing-69.49%, in headache-67.44%, in cough-75.86% were found. In group A, marked relief was observed in 33.33% of patients, moderate relief in 27.78% and mild relief in 5.56% of the patients. None of the patients remained unchanged. In group B marked improvement was observed in 21.05% of patients, moderate improvement was observed in 15.79% of patients, mild relief in 26.32% and in 5.26% of the patients symptoms remained unchanged. Combined therapy of Anutail Nasya and Shireeshadi yoga is more effective as compared to the individual treatment.

4. *Indralupta*^[13] (Alopecia)

In this study, in group A-Total 20 patients were registered in this group, among them 12 patients had completed the treatment and 8 Left. Patients of this group was given Karviradi Taila^[14] for Moordha Taila (massage of hair oil in scalp) in the dose of 15 ml/day for the duration of six weeks along with *Keshpoorak yoga*^[15] in the dose of 10 gm/day in two divided doses for the same. In group B out of 14 registered patients, 11 patients completed the treatment while rest of the 3 patients Left. Patients of this group were administered *Shadbindu Taila Nasya*^[16] in dose of 6 drops in three sittings of seven days for 6 weeks along with Kesh Poorak Yoga and Karviradi Taila for Moordha *Taila.* Statistically highly significant results were observed in Group A in term of the symptom Hair loss, Khalitya, Daruanaka and Shirahkandu. The relief obtained in the case of chief complaints i.e. Hair loss, Khalitya, Daruanaka and Shirahkandu were 46.15%, 77.27%, 92.30% and 90% respectively. Statistically highly significant results were observed in group B in term of the symptom *Khalitya* by 76.19%, in Daruanaka 72.86%, in Shirahkandu 85.71%, while significant result in Hair loss by 21.43%. Overall effect of therapy shows that in group A 16% patients were observed cured, 50% patients were markedly improved, 25% patients were moderately improved while 09% patients remained unchanged. In group B, 18% patients were observed cured, 56% patients found markedly improved, 18% patients reported moderately improved while 08% patients remained unchanged. More than 75% overall relief was found in Group B which is more in comparison to Group A due to the combined effect of Shiroabhyanga, Rasayana and Nasya karma.

5. *Vatik shirahshoola*^[17] (Tension headache)

In this study 30 patients were registered which were divided into 2 groups. 28 patients were completed the course of the therapy while 2 were dropped out. In Group-A, *Rasnaditaila Nasya*^[18] was administered in dose of 8 Drops in each nostrils for 7 Days followed by gap of 7 days in 2 sittings while in group-B, oral administration of

Pathvadi kwatha^[19] was given in dose of 40 ml twice a day for 21 days. In Group A: highly significant results were obtained in most of the cardinal symptoms (P < 0.001). Percentage of relief in Shankhanistoda was 80%, in Ghata Sambheda 57.50%, and Sirajal Sphurana 82.61% Significant relief was found in Akshinishkasanvat pida 66.67% and in Shirahghruna 69.57%. In Group B: highly significant results were obtained in Shankhanistoda was 57.50 %, in *Ghata Sambheda* 60%, were observed. Significant relief was found in Sirajal Sphurana 66.67%. Statistically insignificant (>0.05) results were obtained in Akshinishkasanvat pida 41.67% and in Shirahahruna 41.67%. In group A, complete relief was observed in 7.14%, marked relief was in 35.71% of patients, moderate relief in 28.57%, and mild relief in 14.29 of the patients, 14.29% patients remained unchanged. In Group B none of the patients were completely cured, marked improvement observed in 7.14% of patients, moderate was improvement in 42.86% of patient, mild relief in 28.57% and in 21.43% of the patients' symptoms remained unchanged. It can be stated that, Vatika Shirahshoola can be managed effectively by Rasnadi Taila Nasya.

6. Ardita^[20] (Facial paralysis)

In this clinical trial Total 20 patients were registered, which were divided into 2 groups, 10 patients in each group. In Group-A. Anutaila Nasva^[21] was administered in dose of 6 drops in each nostril for 15 days, while in group B Mashaditaila Nasya^[22] was administered in dose of 6 drops in each nostril for 15 days. In both the groups' same significant results were obtained in Vakasanga i.e. 70%, and in Lalastrav by 77.77%. In group A, highly significant result was found in only *Netra-vikriti* by 68.75%, and significant results were obtained in Vaktradhvakrta by 62.5%, in Sphurna 100%, in Shoola 94.11%. In group B highly significant results were obtained in Netra-vikriti by 86.66%, in Vaktradhvakrta 56.25%, in Sphurna 100%, while significant result was found in Shoola by 100%. In Assessing overall effect of therapy, it was seen that 50% patients were completely cured in both the groups. In group A 40% patients had marked relief, and 10% had moderate response. In group B, 30% had marked relief, 10% patients had moderate response and 10 % patients had mild response. So it is well observed that both the groups are equally effective, but Anu Taila is little more effective than Mashadi Taila.

Discussion

By going through above studies we can say that Nasya karma is a very good remedy in Nasagata rogas like Jirna pratisyay, Dushta pratisyay. It is also useful therapy in treatment of Shirogata rogas like Indralupta and also in Shirahshoola as observed. Although this study does not include much reviews on Psychological and Neurological problems. But, it can be seen that Nasyakarma either independently or along with other therapies provides remarkable results in Neurological and Psychological diseases like Ardita, Anxiety disorder, Kampvata etc. It can be very well inferred that the medicines used in Nasyakarma may help in healing inflammation of Nasal cavity and Paranasal sinuses and gives better results. Results are also seen in deeper condition like Hairfall, Alopecia etc. Obviously in the Ancient Samhitas it is noted that *Nasyakarma* is good in all pathologies occurring in head region. *Nasa* is considered as therapeutic gate way of Head. Thus, the medicine administered during *Nasyakarma* can affect the *Doshas* in head eitherly by *Shamana* or *Shodhana*. When we consider all the above observations it is evident that combined therapy of *Shodhana* (here *Nasya Karma*) with *Shamana* showed better response in patients. Earlier studies have also inferred Mode of action of *Nasya*.^[23]

-Possibilities of 3 Ways of Pharmacological benefits that occurs during process of *Nasyakarma*.

1. Direct absorption in Cerebrospinal fluid through the arachnoids matter sleeve which is extended to the sub mucosal area of the nose along with Olfactory nerve.

2. Venous regurgitation of blood passing through the olfactory and facial vein and through small venuoles coming into venous sinuses of the brain. (Experiments have shown that the dye injected to arachnoids matter has caused colouration of nasal mucosa within seconds. Ref-Hamilton 1971)

3. Sometimes similar to *Ghreya prayoga*, which can happen due to appropriate stimulation of sensory neurons of Olfactory nerve. This nerve has potential connection to higher centres of Brain likes Hypothalamus, Limbic system.

Thus, it is very interesting to understand that how much greater effect does *Nasyakarma* has occurring in head region including neurologically and psychologically and other organs in head.

CONCLUSION

It can be concluded from these 6 studies that the *Nasyakarma* especially exerts its beneficial effects on the *Urdhwajatrugata Pradesha* and also in systemic disease. *Nasya karma* proved to be a better therapy as compared to only oral drug because *Nasya Karma* provides affect for longer duration then oral drug. It could be hypothesized that *Nasya* acts in both local as well as general levels, by the direct contact with nerve terminals or uptake of the drugs by the nasal mucosa.

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