



Case Study

AYURVEDIC TREATMENT OF ALLERGIC RHINITIS - A CASE STUDY

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ABSTRACT

Respiratory allergies are major cause of morbidity in both children and adult. Allergic rhinitis is one of the prime disease of respiratory system found in all age groups irrespective of sex. Among *Nasagat rogas Pratishyaya* is the one which is described by almost all the *Acharyas* in detail, which shows its importance due to dreadful nature. This disease is also known for its recurrence and chronicity if not treated from its root. Sedentary Life style like having exposure to cold weather, Air Conditioner and cooler, and food habits like consuming junk foods, ice creams cold drinks, curd, sour items like pickles, sauce etc. are the major causative factors of this disease. The disorder creates headache and fatigue, limits routine activities, interferes with sleep and results in poor work performance. Its clinical features like *Tanu nasa srava*, *Shirahshula*, *Kshvathu* etc. are very much similar to *Vataja pratishyaya* features described in Ayurved. Modern medicine undoubtedly relieves symptoms very fast but permanent cure is very much possible through holistic approach of Ayurvedic science. Ayurved, the science of life if applied systematically has the ability to ensure complete cure. *Panchkarma* is a potent tool of Ayurved to cure the disease from its root. *Nasya karma* is an important part of *Panchkarma* and is the best treatment for "*Urdhavajraturoga*". A chronic case of Allergic Rhinitis is presented in this paper which got cured by adopting systematic Ayurvedic approach of *Vataj pratishyaya* line of treatment by using *Vyaghri haritaki* and *Anu taila nasya*.

KEYWORDS: Allergic rhinitis, *Anu taila*, *Vataja pratishyaya*, *Vyaghri haritaki*.

INTRODUCTION

Ayurved is the one and only medical system which gives the way of perfect living with nature.^[1] Human body consists of five sense organs (Eye, Ear, Nose, Skin, Tongue), which are responsible for the perception of objects. If any obstacle comes in between the sense organ and sensory object, then perception of object becomes challenging (or difficult). Any disease of sense organ creates problem in perception of that particular object but AR is such a disease which creates problem in all the five sense organs. Nasal allergies can make it difficult for people to take part in both indoor and outdoor activities if their symptoms are not well controlled^[2]. It significantly impairs patient's quality of life and productivity by imposing sneezing, nasal discharge, nasal blockage, headache, heaviness in head, itching in eyes, throat, palate etc. According to WHO, 400 million persons worldwide suffer from Allergic rhinitis^[3].

Modern treatment modalities for the management of Allergic rhinitis includes, H1 receptor antagonists (antihistamines), nasal decongestants, mast cell stabilizers, leukotriene receptor antagonists, corticosteroids and anti-cholinergic agents in oral or topical nasal formulations^[4]. But all these give symptomatic relief only and are having severe side-

effects. Thus modern medicines have no permanent answer for AR.

Asatmyendriyarthasamyoga (improper use of sensory and motor organs in day to day life), *Prajnaparadha* (living against social and communal codes) and *Parinama* (time and season) are the root cause of any disease.^[5] The above 3 factors are very important in preventive and curative aspects. In Ayurved, based on the symptoms of AR, it is mostly similar to *Vataja pratishyaya*. *Acharya Sushruta* dealt *Vataj pratishyaya* in *Nasagat rogas* along with its complete aetiology, prodromal symptoms, diagnosis, prevention and treatment guideline^[6]. In the present case, visiting ENT OPD of Shri Sai Ayurvedic P.G. medical College & Hospital, treated with the *Chikitsa sutra* mentioned in Ayurvedic classics.

CASE

A diagnosed case of *Vataj pratishyaya* (AR), female patient of 24 years attended the ENT OPD of Shri Sai Ayurvedic P.G medical College & Hospital on 12-03-2016 with complaint of excessive nasal discharge, nasal obstruction (unilateral and intermittent) nasal congestion excessive sneezing (50-60times in a day) watering from eyes, foreign body sensation in nose, hoarseness of voice and headache.

O/E Her nasal mucosa was pale bluish, nasal septum was slightly deviated towards left side.

Ashtavidha Pareeksha

Sr. No.	Sthan	Lakshan
1	Nadi	78/min.
2	Mutra	Samyak
3	Mala	Samyak
4	Jihwa	Niram
5	Shabda	Prakrut
6	Sparsha	Samshitoshna
7	Druk	Prakrut
8	Akruti	Madhyam

Past history: H/o dry coughing with fever treated with Antibiotics, antipyretics and Antitussives in June 2014. Relapse of coughing in December 2014 and took Homeopathic treatment for the same for 6 months with negligible improvement.

Since then she was on Levocetirizine 5 mg. Once daily with temporary relief. Her haematological and biological laboratory findings (on 12-03-2016 at Shri Sai Ayurvedic P.G medical College & Hospital) showed.

TLC : 12000/Cumm

DLC : N₄₀ L₃₉ E₁₈ M₃

AEC : 750/cumm

FBS : 86 mg/dl

ESR : 55/hr

INTERVENTION & RESULTS

The patient was treated with following *Chikitsa sutra* explained in classics as *Anu taila Nasya* and *Shaman chikitsa* with *Vyaghri haritaki rasayan*.

She was followed up every 15th day for 2 months. Her progressive reports are as follows:

On the first follow up visit patient told very much relieved in all the symptoms. Her Sneezing frequency was reduced upto 50%. She also felt almost 50 % relief in nasal discharge, nasal congestion, nasal obstruction and itching, foreign body sensation ,watering from eyes and hoarseness of voice.

On the second follow up visit i.e. on 30th day of treatment patient was very much happy observing the relief from symptoms. In all the symptoms patient was feeling relieved up to 60-70%.

On the third follow up visit i.e. on 45th day of treatment, the patient's sneezing frequency was 2-3/ day. Nasal itching & hoarseness of voice had completely gone. Nasal obstruction & nasal discharge was also markedly decreased.

On the last follow up visit, the patient was quite satisfied since she was almost completely relieved from disease.

After completion of 2nd month treatment the nasal condition was as follows:

Nasal mucosa was normal

Haematological and biological laboratory reports of patients after treatment 13-05-2016 showed :

TLC : 5700/Cumm

DLC : N₆₀ L₃₂ E₅ M₃

AEC : 325/cumm

FBS : 76 mg/dl

ESR : 25/hr

DISCUSSION

In the present era it is seen mostly that people believe Ayurvedic medicine act gradually but on contrary if proper diagnose and proper medicine is prescribed then it acts wonderfully. *Nasya* is the term used generally for medicines or medicated oil administered through nasal routes. *Nasya* called as *Urdhava jatrugata vikareshu visheshanyabhimisnate*. *Panchkarma* is the best treatment for "*Urdhavyatrugat*" *rogas*. The quotation "*Nasa hi shirasodwaram*" itself explains its importance and it is the only *karma* which finds a place in *Dincharya* . In the present study *Nasya* is the chief *Shodhana* procedure selected because *Nasya karma* can expel the deep-seated *Doshas* and can cure it of its root. Due to *Sukshma* and *Vyavayi guna*, *Anutaila* possess a good spreading capacity through minute channels. *Tikta*, *Katu rasa*, *Laghu Tikshna guna*, *Ushna veerya* and *Katu vipaka* does *Srotho shodakatwa* (Clearance of obstruction in *Srotasas* i.e., channels of the body). By the above two properties the *Nasya* drug removes the obstruction of natural sinus ostia and facilitate the drainage of purulent discharge. *Indriya dardya karatwa* (provide strength to sense organs), *Balya* (increases strength), *Preenana* and *Brimhana* (nourishes the body) properties can increase general and local immunity. *Madhura rasa*, *Sheeta veerya*, *Snigdha guna* and *Tridoshahara* properties will promote the nourishment of *Dhatu*s which ultimately increases the general and local immunity. This immune modulation will reduce the inflammatory process in nasal cavity and sinuses. Therefore, *Anu Taila* exerts a marked anti-inflammatory effect on the nasal mucosa by inhibiting the release of inflammatory mediators from the Mast cells and Basophils, and by blocking the inflammatory effect of Leucocytes in the nose.

Most of the drugs in *Vyaghri Haritaki Rasayan* are having *Katu*, *Tikta rasa*, *Laghu*, *Ruksha guna*, *Ushna veerya*, *Katu vipaka* and *Vata Kaphahara* properties. All the above properties are very useful to remove the *Srotho rodha* (obstructions in various channels of the body) and promote the expulsion of vitiated *Doshas*. *Agni deepana* action will cause increased food intake and retain the *Samyaka dhatu parinama* which is responsible for increased nutrition of body as well as immunity. Anti-inflammatory property of ingredients will reduce the inflammatory process in nose. Antibacterial activity arrests the secondary infection and prevents recurrence of the disease. All these above factors will ultimately lead to *Vataja prathishyaya*

shamana (relieve symptoms of Allergic Rhinitis). No adverse and toxic effects were observed during the trial and after the treatment. In the study both the drugs are having highly significant results in *Nasavrava* (Rhinorrhoea), Nasal obstruction, sneezing and nasal congestion.

CONCLUSION

Allergic rhinitis if ignored or not managed properly, can lead to complications such as asthma, sinusitis etc. This calls for the need of early diagnosis and ideal treatment for the patients of allergic rhinitis.

It will be mandatory to recommend here that if a patient of Allergic rhinitis goes for an Ayurvedic treatment in the initial stage then better results in short duration can be expected. *Anu Taila* gave better result in *Kshavathu* (Sneezing), *Nasavarodha* (Nasal obstruction), *Tanusrava* (Watery nasal discharge), retracted tympanic membrane, *Gandhahani* (Loss of smell), *Kandu* (Itching) and turbinate hypertrophy. *Vyaghri Haritaki rasayan* is better in relieving nasal congestion, *Kasa* (Coughing), *Swarbheda* (Hoarseness of voice), *Shirahshoola* (Headache) and Post nasal drip. Combine therapy of *Anu taila nasya* and *Vyaghri haritaki rasayan* together gave excellent results. There is a need of

further study to be conducted on large number of patients.

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