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A CASE STUDY ON PRATISHAYA (ALLERGIC RHINITIS)

Dr. Amita

Associate Professor, Department of Rog Nidan and Vikrati Vigyan, Ch. Devi Lal Ayurvedic Medical College & Hospital, Jagadhri, Yamuna Nagar, Haryana.

Email id: amitagv95@gmail.com

ABSTRACT

Introduction One of the five varieties of Prathishyaya is Anaddha Pihita Nasa, Tanusrava, Shosha in Gala Taalu and Oshta, and discomfort in Shankapradesha and Swaropaghatha are the hallmarks of this prevalent illness. It is associated with allergic rhinorrhea. This illness is characterized by periods of watery nasal discharge, redness, and itching in the nose and eyes, as well as congestion of the nasal passages. An instantaneous hypersensitivity response to the nasal mucosa causes allergic rhinitis. From an Ayurvedic perspective, allergies are primarily induced by genetic factors, Viruddhahara, Dushivisha, and Ritu Sandhi, and is scientifically described under Asatmyaja Vyadhi. **Methodology** The patient who had been experiencing episodes of sneezing, running nose, and itching in the nose and eyes for four years was referred to the Roga Nidana and Vikrati Vigyan Department, OPD of the Ch. Devi Lal Ayurvedic Medical College & Hospital, Jagadhri. Treatment modalities such as Nirgundi Taila Nasya and internally administered Guda Maricha yoga were recommended. The patient's file was thoroughly reviewed. **Findings** The patient's symptoms significantly improved, and the results of the haematological tests revealed significant alterations. **Discussion and Conclusion** Pratishyaya affects Urdhwajatu, particularly Nasa, and interferes with the patient's way of life. Vata and Kaphaja Vyadhi predominate. Since Nasya and Abhyantara yoga are Vata-Kapha in nature and have anti-inflammatory and anti-allergic properties, they have demonstrated a noticeable improvement.

KEYWORDS –Prathishyaya, Allergic Rhinitis, Common cold etc.

INTRODUCTION

The inflammation of the nose's mucous membrane is known as rhinitis. An immunoglobulin IgE-mediated type 1 hypersensitivity inflammatory illness is called allergic rhinitis. It is a form of inflammation that develops when the immune system overreacts to airborne allergens, affecting the mucosa of the nose, paranasal sinuses, and occasionally the lower respiratory tract. when a person with a compromised immune system breathes in an allergen, such dust or pollen, which causes the body to produce antibodies. These antibodies frequently attach to mast cells that carry histamine. Histamine and other substances are produced when dust and pollen trigger the mast cells. Sneezing, runny nose, watery, red eyes, and swelling around the eyes are caused by this. Acute, recurring, and episodic is the description of allergic rhinitis.[1] Between 10 and 25 percent of people worldwide and 20 to 30 percent of people in India are afflicted by this illness. This is one of those conditions that is widely prevalent, interferes with a person's daily activities, and undoubtedly lowers quality of life because it affects people of all ages and genders equally.

Decongestants, corticosteroids, and antihistamines are recommended in the traditional medical system. From an Ayurvedic standpoint, it is associated with Prathishyaya. It is stated that the two main Doshas responsible for this condition's presentation are Vata and Kapha. The clinical signs of allergic rhinitis are identical to those of Prathishyaya.[2]

Anaddha Pihita Nasa, Tanusrava, Shosha in Gala Taalu and Oshta, and discomfort in Shankapradesha and Swaropaghatha are the hallmarks of this prevalent illness.[3] In this case study, the therapy methods used include Nasya, which helps to restore the normality of the nasal mucosa, and internal medication, which has a Rasayana effect and helps to prevent the sickness from recurring.

CASE STUDY

Age: 28 years

Gender: male

Religion: Hindu

Occupation: Private Job

Socioeconomic status: Middle class

CHIEF COMPLAINT

complaints of constant sneeze fits, wetness, eye itching, and runny nose over the past four years.

H/O present illness- The patient seemed normal. He began experiencing frequent episodes of sneezing, nasal blockage, watery discharge, and itching in his eyes and nose four years ago. After visiting several allopathic hospitals in search of relief, he came to our hospital in search of improved care.

H/O of past illness

Nothing specific.

Treatment history

Fexofenadine - 120 mg bd.

Personal History

Appetite: Patient had taken a mixed type of diet, Madhur rasa dominance, and moderate appetite.

Koshta: Madhyama Koshta.

Micturition: regular and normal.

Bowel habits: irregular.

Sleep: disturbed often.

Vitals History

- Respiratory rate: 20/min
- Regular Temperature: 98.8F
- Blood pressure: 130/80 mm of Hg
- Pulse: 83/min

Physical Examination

- Weight: 54 kg

- Height: 160 cm
- Pallor: No pallor
- Lymphadenopathy: No lymphadenopathy

Examination of Eye

No conjunctival infection, frequent rubbing of the eyes, irritability and mucous discharge.

Itching and watering of eyes present.

Examination of Nose [4]

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 becomes red, mucosa red, septum normal. Obstruction of nose/ Nasal Patency: No nasal polyps.

Examination of Ear

a) **EAC:** Normal

b) **Tympanic Membrane:** Normal

Examination of sinus: Facial tenderness on palpation of the sinuses.

Examination of throat: Mucous buildup in the throat and back of the nose, posterior oropharynx is wet, and there are no signs of inflammation.

Laboratory Investigation-

- Hb% - 12.4 gm%
- TLC – 6200/cu mm
- Neutrophils - 5400%,
- Lymphocytes - 26%,
- Monocytes - 6 %
- Eosinophil - 3,
- Basophils-0
- ESR – 22 mm/hour

SUBJECTIVE CRITERIA

Symptoms	Score
<i>Nasavarodha</i> (Nasal Obstruction)	
No Obstruction	0
Partially Occasional & Unilateral	1
Partially Occasional & Bilateral	2
Complete, Frequently & Unilateral	3
Always Complete & Bilateral	4
<i>Kshavathu</i> (Sneezing)	
No	0
1-5 bouts per day	1
6-10 bouts per day	2
11-20 bouts per day	3
More than 21 bouts per day	4
<i>Shirashoola</i> (Headache)	
No	0
Occasional	1
Intermittent	2
Continuous	3
Intolerable	4
Anterior Rhinoscopic Findings (Color of mucosa)	
Pink (Normal)	0
Red (Inflamed)	1

Cherry Red / Blue (Blood stained)	2
<i>Tanu Srava (Watery discharge)</i>	
No discharge	0
Negligible discharge	1
Intermittent discharge	2
Continuous discharge	3
Profuse discharge	4
<i>Swarbhedha (Hoarseness of voice)</i>	
No change of voice	0
Occasional hoarseness of voice	1
Frequent hoarseness of voice in morning hours	2
Frequent hoarseness of voice throughout the day	3
Cannot speak due to hoarseness of voice	4
Post Nasal Discharge	
Not Present	0
Occasional Present	1
Frequent Discharge	2
Continuous Discharge	3
Continuous Heavy Discharge	4

The patient received therapy in the outpatient (OPD) department of Ch. Devi Lal Ayurvedic Medical College & Hospital, Jagadhri, Roga Nidana and Vikrati Vigyan Department. The course of treatment was designed with Dosha and Dushya in mind. Nasya was scheduled for 14 days, with a 7-day break, in addition to internal medication. The following course of therapy was followed: Trivritth Lehya - 40 gms was given for 8 days of observation in Vegas, and 1 day of Parihara Kala with the consumption of light diet.[5]

Snehana: Mridu Abhyanga on the scalp, forehead, and neck areas was performed for three to five minutes using Ksheerbala Taila [Ashtanga Hridaya, Vatarakta Chikitsa Adhyaya 22/44] (Bala, Ksheera, Tila Taila).

Swedan: Spend two to three minutes with Bhashpa Swedan.

Nasya Karma - Nirgundi Taila and Shodhana Nasya. For 14 days, with a 7-day interval in between, 4-6 drops of lukewarm Nirgundi Taila were applied to each nostril in the morning.

Medication used orally - Guda Maricha Yoga [6] - Choorna is produced after taking equal amounts of Guda and Maricha. We are giving this Choorna 3 gms bd.

Following a 21-day course of therapy and a one-month follow-up, clinical evaluations based on patient interviews and objective parameter assessments were conducted. The result showed a significant alteration in the parameters as follows:

Symptoms	BT	AT (After first sitting of nasya)	AT (After second sitting of nasya)	Follow up (After 30 days)
<i>Nasavarodha</i> (Nasal Obstruction)	2	1	1	1
<i>Tanu Srava</i> (Watery discharge)	2	1	1	0
<i>Kshavathu</i> (Sneezing)	3	1	1	1
<i>Swarbhedha</i> (Hoarseness of voice)	2	0	0	0
<i>Shirashoola</i> (Headache)	1	0	0	0
Post Nasal Discharge	2	2	1	1
Anterior Rhinoscopic Findings (Colour of mucosa)	1	1	0	0

Haematological investigations	Before treatment	After treatment
ESR	30 mm/hour	15mm/hour
AEC	590/cu. Mm	400/cu.mm

DISCUSSION

The condition known as allergic rhinitis lowers a person's quality of life and interferes with their regular activities. Because of rising environmental contamination, stressed lives, and lowered immunity, the incidence rate of this disease is rising daily.[7] If treatment for allergic rhinitis is not received at this point, it may result in infection and other consequences. The causes of allergic rhinitis include dust, smoking, allergies, and air pollution.[8]

Variations in humidity and psychological aspects. Sneezing, nasal obstruction, watery nasal discharge, voice changes, headache, and dry lips and throat are among the symptoms of allergic rhinorrhea that are included in Allopathic Science.[9]

Pratishyaya is a Nasagata Roga that is extensively explained in Ayurvedic classics. It involves the vitiation of Vata and Kapha Doshas, which leads to various symptoms such as profuse sneezing, nasal obstruction, watery nasal discharge, Gala Talu Shushkata, dryness of the lips and throat, voice change, and Shirashoola. (Headache).[10] It may have a connection to the condition known as allergic rhino-rhinitis in contemporary science.

1. Inhaled allergens release either freshly generated or preformed mediators, which can cause tissue oedema and nasal obstruction as well as increased vascular permeability and vasodilation.
2. A shift in the tone of the smooth muscles, followed by bronchospasm.[11]
3. Extreme gland hyperactivity, which is accompanied by increased production and rhinorrhea.

The majority of Urdhwajatrugata Vikaras recommend Nasya as one of the efficient therapeutic modalities. Being one of the Nasagatharoga, Prathishyaya benefits from this

therapy just as much. The finest Vatahara and Prathishyayahara medicine, Nirgundi, is employed in this study to treat Nasya in the form of Taila. Guda Maricha yoga, which is also Ushna, Snigdha, and Vatakaphahara in nature, will also be used as Abhyantaraprayoga. Internal medicine will increase immunity through its Rasayana impact, while Taila Nasya aids in restoring the natural structural and functional integrity of the nasal mucosa.[12]

CONCLUSION

If left untreated, Prathishyaya (allergic rhinitis) can cause sinusitis, bronchial asthma, recurring middle ear infections, and a persistent cough. Prathishyaya has shown extraordinary efficacy in the case study, with substantial results in the majority of the assessment criteria. The symptom score remained unchanged and did not go worse. This pilot study examined the effectiveness of Nasya Karma and oral medication in treating Prathishyaya. The results were sufficiently positive in terms of assessment parameters, as well as aiding in the patient's development of resistance against allergens and recurrent attacks, promoting immunity, and improving both physical and mental health.

CONFLICT OF INTEREST -NIL

SOURCE OF SUPPORT -NONE

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