A Case Study on Efficacy of Chaturjatak Taila Pratimarsh Nasya & Shatyadi Churna (Internally) for the Management of Pratishyaya w.s.r. to Allergic Rhinitis

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ABSTRACT
Pratishyaya (Allergic rhinitis) is one of the most common and most prevalent disease, familiar to all with an equal distribution more or less throughout the world, rather without any exception to the developed and under developed countries. It is unsolved mystery of medicine and can be traced to the days of Hippocrates – the father of Modern medicine. It is difficult to treat and is seldom cured, but it may improve and is never a fatal. However, Allergic rhinitis may act as the forerunner of asthma.

KEYWORDS
Pratishyaya, Allergic Rhinitis, Asthma
INTRODUCTION
The disease Pratishyaya considerably attracted the ancient physicians, which is evident from their detailed descriptions, classifications, symptoms, complications and management written in the samhitas. The disease Pratishyaya in the initial phases is a curable disease entity, but if it takes a chronic course may lead to many associated complications. The entity Pratishyaya covers a broad spectrum of nasal and Para nasal infections. This disease can occur as a separate entity, or as a symptom of a systemic pathology or as a complication of other diseases. Improper management can lead this simple disease to a dangerous stage of complication.
Pratishyaya is a severe & general body debilitating condition, which manifest due to the migration of the Kapha, Rakta & Pitta from the root of the Nasa pradesha, they get lodged into Shiraha Pradeshha, which is already forcibly titrated & vitiated by the Vata Dosha³.
Acharya Sushruta has mentioned the disease Pratishyaya in Uttar Tantra of Sushruta Samhita. He has elaborately described, Pratishyaya with its classification, symptoms, complications & management¹.

CASE REPORT
A 22 years old male patient complained of recurrent nasal blockage, sneezing, repeated attack of cold since last 2 - 3 years with the associated complaints like itching sensation in the nose, eyes and ears. On advice he underwent for AEC investigation on March 2017 and was found to have Absolute Eosinophil Count 28% and was diagnosed as Vataja Pratishyaya. He was under Ayurvedic management for two months in Shalakya Department. There was not only reduction in AEC level to normal but also marked relief was noted in associated symptoms and recurrence of disease with Chaturjatak Taila Pratimarsh Nasya & Shatyadi Churna, Internally.

PRADHAN VEDANA (CHIEF COMPLAINT):
Excessive sneezing, watery nasal discharge and nasal blockage

VARTAMAN VEDANAVRUTTA (H/O PRESENT COMPLAINT):
As the patient told that he is suffering with nasal congestion (feeling like blockage), watery nasal discharge, sneezing and difficulty in breathing since last three years. Difficulty in breathing gets aggravate when he sleep in supine position. He told that these symptoms were prominent on usage of cooler or fan, in cold weather and especially in the morning. On exposure to
dust particles he suffers from continuous sneezing associated with running nose, in warmer conditions he felt more comfortable.

**PURVA VYADHIVRUTTA (HISTORY OF PAST ILLNESS):**
- Medical history: No history found.
- Surgical history: No history found

**OCCUPATIONAL HISTORY:**
- Student

**TREATMENT HISTORY:**
- Allopathic decongestant nasal drops, antihistamine and anti allergic treatment has been taken previously.

**FAMILY HISTORY:**
- None of the family members was reported with such a problem.
- His parents & grandfather suffered from slight wheezing problem.

**SOCIO–ECONOMIC HISTORY:**
- Middle class

**PRAKRITI (CONSTITUTION):**
- Vata – Kapha

**SAMANYA SHARIRIK (GENERAL EXAMINATION)** -
- Appetite: Decreased,
- Bowel : 1 time/day,
- Micturation: 6 to7 times/day
- Sleep: Sound sleep 7 hrs (with fan)
- Diet: Mixed diet
- Habit: No habit of alcohol and smoking, coffee or tea 2 times\ day
- Decubitus : Sitting

- Face : Ill looking
- Built : Medium
- Nourishment : Moderate
- Pallor : Absent
- Icterus : Absent
- Cyanosis : Absent
- Clubbing : Absent
- Kylonechia : Absent
- Lymphedinoopathy : Absent

**HEAD TO TOE EXAMINATION:**
- Hair : Normal
- Eye lash : Normal
- Scalp : Normal
- Eye brow : Normal
- Eye lid : Normal
- Sclera : Slightly reddish
- Lens: Normal
- Nose: ‘S’ shaped deformity is presented
- Lips: NAD
- Buccal cavity: No abnormality seen
- Throat: Dryness along with pricking type of pain
- Ear: Itching sensation in both the ears
- Neck: No thyroid enlargement, no torticolis
- Chest examination: No scar marks
- Lower & upper limbs: No associated deformity

**VITAL SIGNS:**
- Temperature: 98.6\° c
- Pulse: 80 beats/min
Respiration rate: 16 cycles/min
B.P.: 120/80 mm Hg

ASHTA STHANA PAREEKSHA:
NADI: Hamsagati
PUREESHA: Prakrutha
MUTRA: Prakrutha
JIHVA: Coated
SHABDHA: Prakrutha
DRUK: Prakrutha
SPARSHA: Prakrutha
AKRUTI: Prakrutha

SYSTEMATIC EXAMINATION:
RESPIRATORY SYSTEM:
No abnormalities detected on inspection, palpation, percussion, auscultation.
CARDIOVASCULAR SYSTEM:
S1, S2 heard
No abnormalities detected on inspection, palpation, percussion, auscultation.
GI SYSTEM:
Sour belching, heart burn.

DIFFERENTIAL DIAGNOSIS:
Allergic rhinitis
Hyper tropic rhinitis

FINAL DIAGNOSIS:
Allergic rhinitis

AYURVEDIC DIAGNOSIS:
The feeling of obstruction in the nose
A thin discharge from the nose (watery cold and fresh)
Dryness in throat lips and palate
Pricking pain in the temporal region

Hardness of voice

DRUG, DOSE & DURATION:
DRUG:
Shatyadi Churna as oral medicine.
Chaturjatak Taila as Pratimarsh Nasya medicine.
DOSE:
Shatyadi Churna – 3 to 6 gms twice a day.
Chaturjatak Taila – 2 – 2 drops in each nostril 2 times a day.
DURATION:
Shatyadi Churna (Internally) – 1 month
Chaturjatak Taila (Pratimarsh Nasya) – 1 month

OBSERVATION
Overall effect of the therapy was assessed in terms of scoring method, is observed by adopting the following criteria (Table No 1).

<table>
<thead>
<tr>
<th>BT</th>
<th>AT</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) Marked: 76% to 99% complaints</td>
<td>(0) Cured: 100% relief in the complaints</td>
</tr>
<tr>
<td>(2) Moderate: 51% to 75% complaints</td>
<td>(2) Marked Improvement: 76% to 99% relief in the complaints</td>
</tr>
<tr>
<td>(1) Mild: 26% to 50% complaints</td>
<td>(2) Moderate Improvement: 51% to 75% relief in the complaints</td>
</tr>
<tr>
<td>(3) Mild Improvement: 26% to 50% relief in the complaints</td>
<td>(4) Unchanged: up to 25% relief in the complaints</td>
</tr>
</tbody>
</table>

Table 1 Criteria of Scoring Method
RESULTS
In this case study we found that patient got complete relief most of the symptoms of pratishyaya, moderate relief in excessive sneezing in the morning (Table No.2), as well as Absolute Eosinophil Count also found within normal limit 7% which was 28% before treatment (Table No. 3).

Table 2 Effect of Therapy

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Complaints</th>
<th>Duration BT</th>
<th>15 days</th>
<th>30 days</th>
<th>45 days</th>
<th>AT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Kshavathu (Sneezing)</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2.</td>
<td>Nasavarodha(Nasal obstruction)</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>Nasa strava (Nasal discharge)</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4.</td>
<td>Kasa (Coughing)</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>5.</td>
<td>Shirh shoola (Headache)</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>6.</td>
<td>Kandu (Iching)</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7.</td>
<td>Bhutwa – Bhutwa (Recurrent attack)</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

DISCUSSION
Clinical presentation of allergic rhinitis show resemblance with Pritishyaya described in Ayurvedic text but its looks closure to Tridoshaja Pratishyaya but the clinical feature of Vata and Kapha vitiation (dusti) are more prominent.

Table 3 Effect of therapy on Biochemical parameters

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Investigation</th>
<th>BT</th>
<th>AT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>AEC</td>
<td>28%</td>
<td>7%</td>
</tr>
</tbody>
</table>

Yog ratnakar mentioned chaturjatak taila nasya and shatyadi churana in the management of Pratishyaya. Chaturjatak is a unique combination of four ingredients Dalchini, Ela, Tejpatra, and Nagkeshar and Shatyadi Churna having five ingredients Kachur, Bhuamalki, Shunthi, Marich, and Pippali which are mentioned in yog ratnakar as a prime treatment of Pratishyaya.

MODE OF ACTION:
उर्ध्वजत्रु विकारेषु विशेषात्न्यपिमिष्टे/A.H.20

Su.chi 40
Acharya Vagbhata has given some more details about the mode of action. It is explained that Nasa being gate way to Shirah, the drug administrated through nostrils reaches Sringata, a Siramarma by Nasa Srota and spreads in the Murdha (Brain), taking routes of Netra (eyes), Shrotra (ears), Kantha (throat) and Stretches the morbid doshas in Urdwajatru and expells them from Uttamanga. So, the medicine administered through Nasya can easily spread to Shira and get absorbed.
In Chaturjatka taila most of ingredients having usna virya and katu vipaka as well as in the form of taila, these all are having Vata and Kapha shamaka effect and Nasya is a prime treatment of Urdhwaajartrugata Roga like in Pratishyaya. Shatyadi Churna (Internally) are unique combination in the treatment of Pratishyaya which is mentioned in yogratnakar in nasaroga chikitsa, most of the ingredients of both are usna virya and katu vipaka so these all are having Vata - Kapha shamaka. In this study we found that patient got significant relief in sign & symptoms of pratishyaya (Table No.2) as well as his AEC (Absolute Eosinophil Count) also decrease from 28% to 7% (Table No.3) with the treatment of Shatyadi Churna (Internally) and Chaturjatka taila pratimarsh nasya.

CONCLUSION
This case study reveals that the purification of obstructed channels of nose by Pratimarsh Nasya of chaturjatak taila which is followed by palliative therapy with shatyadi churna was found as a suitable plan to manage allergic rhinitis. The analysis of gradually reduced sign and symptoms shows that these medicines are very effective due to their vata – kapha shamak properties with appropriate pathya sevana (Aaharaj and Viharaj).
REFERENCES


