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Management of Sinonasal Polyposis through Ayurveda: A Case Study

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ABSTRACT

Nasal polyps are benign masses of edematous nasal and paranasal sinus mucosa. It has become a challenging problem in recent years. In modern science, it is clinically stabilized by medications but not curable as there is recurrence of disease even after surgical interventions. As per *Ayurveda* texts, nasal polyp can be considered as *Nasarsha* and its treatment principle is same as of *Arsha* (Hemorrhoids). In present case study, a 24 year old male patient came with complaint of nasal obstruction and recurrent attacks of cold with CT scan findings of sinonasal polyposis. He was treated with local application of *Tuttha* along with *Nasya* therapy, *Nasapichu* and oral medications. There was significant improvement in patient complaints and marked reduction in polypoidal mass.

KEYWORDS

Nasarsha, Nasal polyposis, Nasya, Nasapichu



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INTRODUCTION

Nasal polyps are hypertrophied edematous mucosa and submucosa of nose and paranasal sinuses appearing as smooth, round, semi-translucent pale masses. The clinical manifestations of nasal polyps depend on their extent and consist of difficulty in breathing (due to obstructed nasal passages), hyposmia or anosmia (due to obstruction of the olfactory groove), headache (due to impaired ventilation and drainage in the paranasal sinuses), snoring, rhinophonia clausa, and frequent throat clearing due to associated postnasal drainage¹.

In *Ayurveda*, nasal polyps can be considered as *Nasarsha*. Four types of *Nasarsha* - *Vataja*, *Pittaja*, *Kaphaja* and *Sannipataja* are described by *Aacharya Sushruta* among thirty one *Nasagata rogas*². *Aacharya Charak* has mentioned in *Arsha chikitsa* that some physicians opine that the fleshy growth appear on many regions of body like penis, vagina, throat, palate, mouth, nose, ear, eyelids and skin. These hypertrophied or fleshy growths are termed as *Adhimamsa*. The seat of these growths is *Twak*, *Mamsa* and *Meda*³. *Aacharya Sushruta* has mentioned that the aggravated *Doshas* when moved upwards occupying ear, eye, nose and mouth; vitiates their *Mamsa* and *Rakta* and produce

Arshas. Common symptoms in all the four types of *Nasaarsha* are difficulty in breathing, running nose, continuous sneezing, nasal voice, bad smell in the nose and headache⁴.

In general population, the prevalence of Nasal polyps is considered to be around 4% with at least a 2:1 male to female preponderance. It predominantly affects patients older than 20 years. The prevalence of nasal polyposis is higher in subjects with asthma than in non-asthmatics⁵. More than 10 million cases per year are diagnosed with nasal polyp in India⁶. Nasal polyposis severely affects the quality of life of a patient.

In modern science, most effective medical treatment for nasal polyposis is corticosteroids, which can be administered locally in spray or drop form, or systemically. But use of steroids give symptomatic relief for a time being and have a lot of side effects. Due to the nature of nasal polyposis as an inflammatory disease of the mucous membrane, surgery cannot be expected to cure the disease⁷. Considering poor effects of therapeutic interventions and frequent recurrences, there is a need to find an alternative treatment approach. Therefore, the present case study was aimed to find the efficacy of *Nasya*, *Nasapichu* and local application of *Tuttha* along with oral medications.



CASE REPORT

A 24 year old male patient came to *Shalakya* OPD of National institute of *Ayurveda*, Jaipur with complaints of nasal obstruction, recurrent attacks of cold, sneezing and voice changes since 2 years. Complaint of nasal obstruction was bilateral but worse on right side, insidious in onset, gradually progressing in severity. According to patient the symptoms worsens during the attack of common cold and on exposure to cold environment. CT scan PNS showed polypoidal soft tissue mucosal thickening of all sinuses, bilateral nasal cavities with blockage of bilateral osteomeatal units and internal hyperdensity – suggestive of sinonasal polyposis. Reports of routine hematological tests like hemoglobin, total leukocyte count, differential count, and erythrocyte sedimentation rate were within normal limits.

On examination –

- External nose - normal appearance
- Nasal vestibule - normal
- Mucoïd nasal discharge present.
- Anterior rhinoscopy - bilateral nasal cavities filled with pale glistening masses (Figure 1 and Figure 2), anterior part of bilateral inferior turbinates and caudal nasal septum visible.

- Probing - bilateral masses not sensitive to touch, soft in consistency and no bleeding.
- Ooscopic examination – bilateral External auditory canal patent and normal; right tympanic membrane - intact and normal, left tympanic membrane- intact with mild congestion.
- Bilateral tonsils - congested
- Posterior pharyngeal wall showed granules.
- Spatula test – showed bilaterally very much reduced area of mist formation

Before treatment



Fig 1 Right



Fig 1 Left

Treatment administered

1. *Nasya* with *Kshara Taila* for 7 days 4-4 drops per nostril



2. *Tuttha* application on polyp once a week for 4 sittings

3. *Nasapichu* with *Kasishadi Taila* in alternate nostril for one month

4. *Shamanaushadha* -

- *Lakshmivilasa Rasa* 125 mg 2 tablet tds after food for one month

- *Kanchnaar Guggulu* 500 mg 2 tablet bd after food with lukewarm water for one month

After treatment

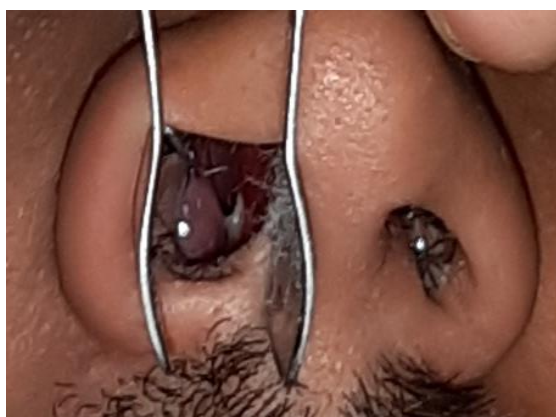


Fig 3 Right



Fig 4 Left

OBSERVATION AND RESULTS

From 3rd day of *Nasya* with *Kshara taila* and *Kashishadi Taila Nasapichu*, patient showed relief in complaint of nasal

obstruction and patient had sound sleep. A pinch of fine powder of *Tuttha* was applied on polyp surface for 2 minutes by using cotton rolled over Jobson probe. It causes burning sensation and bluish white slough formation with mucus which was wiped out. *Jatyadi taila* was applied to overcome the burning sensation. After 4 sittings of *Tuttha* application, on anterior rhinoscopy there was marked reduction in polypoidal mass in right nasal cavity (figure 3) and almost complete regression of polyp in left nasal cavity (figure 4). Spatula test showed good area of misting on both sides. After completion of one month treatment there was remarkable result in complaints of nasal obstruction and the symptom of nasal voice was also relieved.

DISCUSSION

Aacharya Sushruta has mentioned that treatment of *Nasarsha* is same as of general *Arsha*. There are four means of treating *Arshas*- *Aushadha*, *Ksharkarma*, *Agnikarma* and *Shastrakarma*. As mentioned by *Aacharya Sushruta* that aggravated *Doshas* reaching *Nasa* vitiating *Sthanika Mamsa* and *Rakta* generates *Nasaarsha*. Therefore *Nasya* therapy helps in removal of vitiating *Dosha* and *Dushya* of nose and paranasal sinuses. *Kshara taila* contains ingredients like *Mulaka Ksahra*,



Sajjikshara, *Yavakshara* etc. and *Kshara* helps in chemical cauterization by burning the excessive tissue hence reducing its size. Moreover anti-inflammatory, *Lekhana*, *Kaphavataghna* and *Tikshna* property of *Kshara Taila* and *Shodhana* effect of *Nasya* helped in relieving sinonasal mucosal edema and thereby clearing nasal obstruction. *Kashisadi taila* is described in *Bhaisajaya Ratnawali* for treatment of *Arsha* as *Arsha shatana Yoga*. Therefore, *Nasapichu* with *Kasishadi taila* reduced the *Arsha* like *Kshara* without hampering normal nasal mucosa. *Tuttha* or *Sasyaka*, is one among *Maharajas*, with chemical formula $CuSO_4 \cdot 5H_2O$, also known as copper (II) sulfate or blue vitriol. According to *Ayurveda* classics, properties of *Tuttha* are *Katu*, *Kashaya*, *Laghu*, *Usna virya*, Alkali (*Kshara*), *Vamaka*, *Lekhana*, *Bhedana*, *Cakshushya*, *Kapha – Pitta shamaka*, *Medohara* and also indicated in *Arsha*⁸. Therefore application of *Tuttha*, cauterizes the polypoidal mass directly because of its corrosive nature and produces shrinking effect on the hypertrophied tissue. As *Kanchnar Guggulu* is indicated in *Granthi*, *Arbuda*, *Sotha* etc, and having *Lekhana* property it thereby helps in reducing the polypoidal mass and mucosal inflammation of paranasal sinuses. *Lakshmivilasa Rasa* having immune-modulatory effect helps in

resolving associated complaints like recurrent attacks of common cold and inflammatory features of throat.

CONCLUSION

Present case study showed that *Nasya* therapy, local application of *Kasishadi taila* *Nasa Pichu* and *Tuttha* application along with oral medications had been found very effective in this case. Despite the limitations of this case study to a single study, this treatment modality may be an eye opener for further studies as an effective management through *Ayurveda* in polypoidal masses.



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