

AN OBSERVATIONAL STUDY ON EFFECTS OF FOOD AND OCCUPATION IN VATAJ PRATISHYAY (ALLERGIC RHINITIS)

***Dr. Vaishnavi Janardhan Dhande**

Article Received on
09 April 2022,

Revised on 30 April 2022,
Accepted on 20 May 2022

DOI: 10.20959/wjpr20227-24223

*Corresponding Author

**Dr. Vaishnavi Janardhan
Dhande**

PG Scholar, c/o Pawan
Dhande C 101 Peace Vally
Kunal icon road, Pimple
Saudagar, Pune, Maharashtra,
India.

ABSTRACT

Food and occupation collide in a significant way on vataj pratishyay (allergic rhinitis). The current study was undertaken to see if there was any link between food and work and vataj pratishyay (allergic rhinitis).

Material and Methods: A total of 100 people with vataj pratishyay were contacted. Case histories were gathered using the Questionnaires.

Result:- Following the evaluation of 100 participants, it was discovered that food and occupation have a connection to vataj pratishya. **Conclusion:** The purpose of this observational study was to see how food and occupation affected vataj pratishyay (allergic rhinitis). The findings indicate that food and occupation play an important impact in vataj pratishyay (allergic rhinitis). Improper food habits and exposure to allergens in the workplace are two factors

linked to this high occurrence.

KEYWORDS: Food, occupation, Vataj pratishyay (allergic rhinitis).

INTRODUCTION

Allergy rhinitis is a frequent condition characterised by spasmodic attacks of intense sneezing and rhinorrhea. It is an allergic reaction to certain antigens. Heredity, hormonal changes, changes in humidity, contaminants in the air, and psychological issues are all predisposing factors for allergic rhinitis. It usually affects young individuals starting at the age of 15 and gradually fades beyond the age of 40 to 50. Young children may be affected. Both men and women are affected equally. In India, the prevalence of allergic rhinitis is estimated to be between 20% and 30%.^[3]

Vataj Pratishyay is mentioned as one of the variety among the six types of *Pratishyayas*. It is mentioned as *Sadhya Vyadhi*(curable). *Acharya Sushruta* has devoted a separate chapter in *Uttartantra* on *Pratishyaya* after explaining *Nasagat Rogas* (diseases of nose)^[1] This fact itself shows that *Pratishyaya* has been a major problem to the physicians since long back. *Pratishyaya* is a complex disease involving several symptoms and diverse pathogenesis. *Vata* is the main *dosha* and *kapha*, *pitta* and *rakta* are associated *doshas* responsible for pathogenesis to cause *pratishyaya*. Improper management of *pratishyaya* leads to severe and complicated condition called *Dushta Pratishyaya* which is very difficult to treat and causes lot of complications like *Badhirya*(deafness), *Andhata*(blindness), *Ghrananasa* (loss of smell) etc. Allergic Rhinitis mentioned in modern medicine closely resembles *Vataj Pratishyaya*.^[5]

CAUSES

Causes of *pratishyay* mentioned in *sushrutauttartantra* 24th *adhyaya* are over indulgence in sex, exposure to dew/mist/ fog, too cold or warm climate, smoke, dust, suppressing natural urges. Drinking lot of cool water (especially after meal), drinking water from other sources or of different kinds (which is not accustomed to), indulging more in water sports, indigestion, *rutuvishamta* (inappropriate climate), day time sleeping, keeping awake at night, excessively talking, eating sweet and heavy cool, *ruksha* food items frequently; bathing after eating heavy food items or while suffering from indigestion; usages of uncomfortable pillow (too thick or thin); to reside in valley or high mountain.^[2]

According to modern causes are dust, pollen, animal odour, feathers, moulds, house dust and mites. Food like egg fish, milk, citrus fruit and cocoa. Contact with cosmetics and powders. Irritants like fumes and smoke, drugs like aspirin, hypotensive, iodides. Endogenous like intestinal helminths.^[3]

METHODOLOGY

Type of study: Cross Sectional Study.

Duration of study: 6 Months

Sample size: 100 Participants

Type of sampling: Random

Study center: Ayurved Hospital.

Clinical sources: known case of *vataj pratishyay* (allergic rhinitis)

- 100 subjects on the basis of diagnosed condition *vataj pratishyay* (allergic rhinitis) were approached.
- A structured and validated questionnaire was distributed and filled by the participants.
- Based on the questionnaire clinical assessment and statistical analysis was done.

Inclusion Criteria

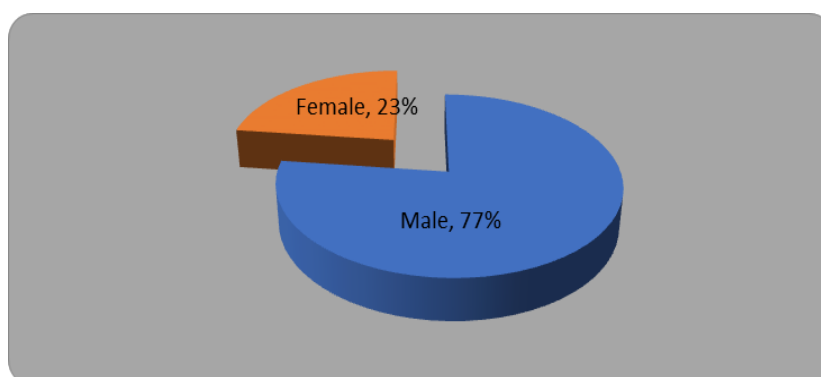
- Individuals having clinical features of *vataj pratishyay* (allergic rhinitis)
- Irrespective to age, sex, religion, occupation and economic status.

Exclusion Criteria

- Subjects having history of Hypertension and Diabetes Mellitus.
- Chronic infectious disease.
- *Pratishyaya* other than *Vata Dosha* predominance or Rhinitis other than allergic one.
- Rhinitis due to systemic disorders like tuberculosis and syphilis.

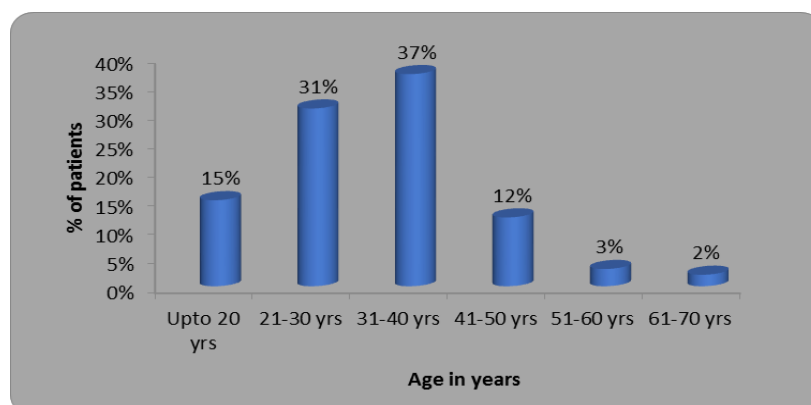
OBSERVATION AND RESULT

1. Gender wise distribution of patients



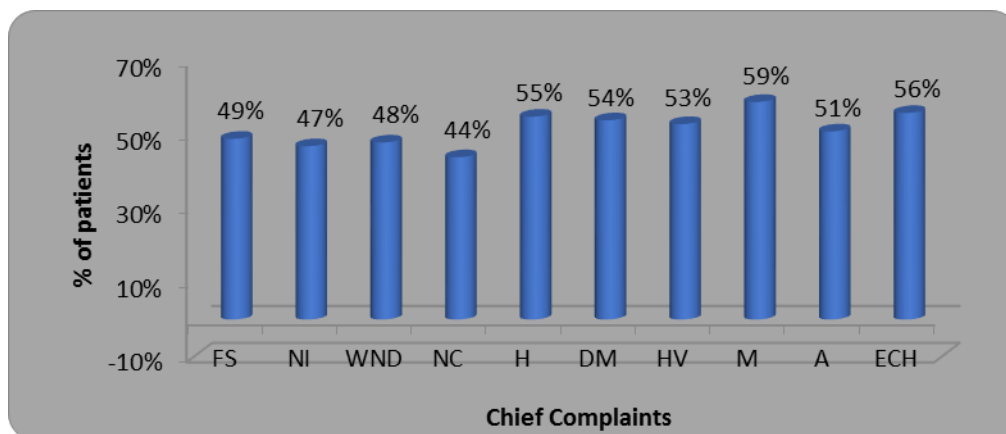
77% of male were suffer from allergic rhinitis whereas 23 % of female were sufferer.

2. Distribution of patients according to their age(yrs)



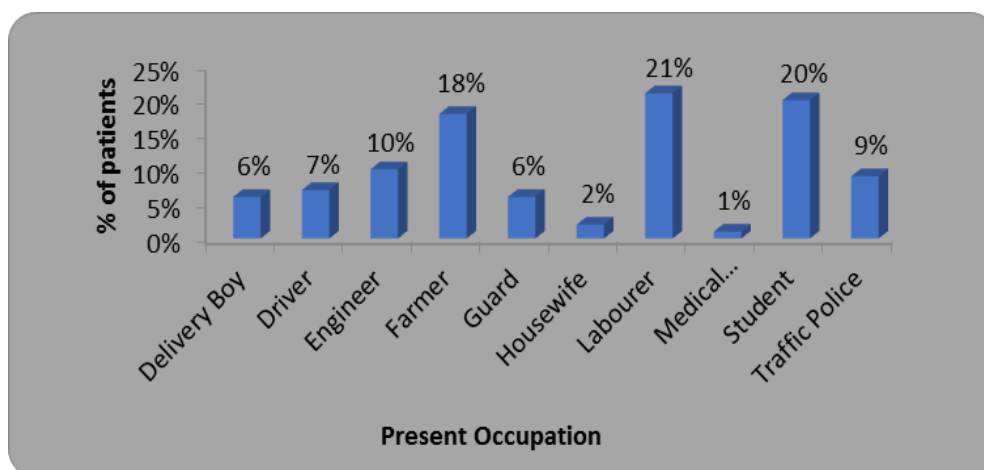
15% of subjects belongs to the age group upto 20yrs, 31% upto 30yrs, 37% upto 40yrs, 12% upto 50yrs, 3% upto 60yrs, 2% upto 70yrs were found as sufferer of allergic rhinitis.

3. Distribution of patients according to present complaints



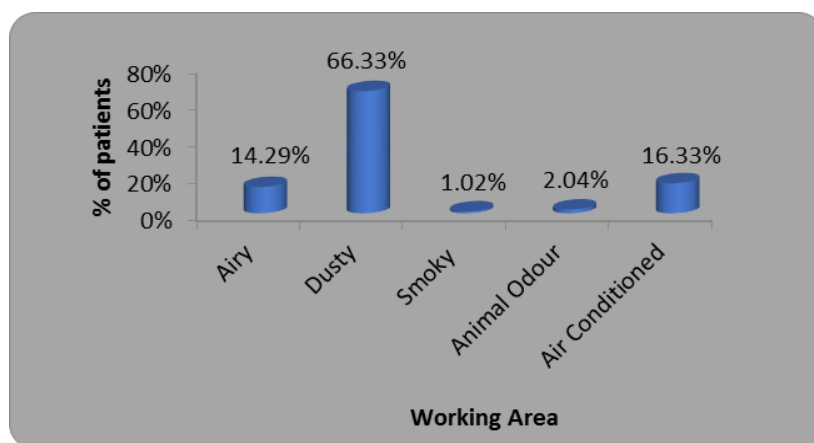
49% of subjects has symptom of frequent sneezing among 100 subjects, 47% of nasal irritation, 48% of watery nasal discharge, 44% of nasal congestion, 55% of headache, 54% of dryness of mouth, 53% of hoarseness of voice, 59% of malaise, 51% of anorexia, 56% of earache.

4. Distribution of patients according to present occupation



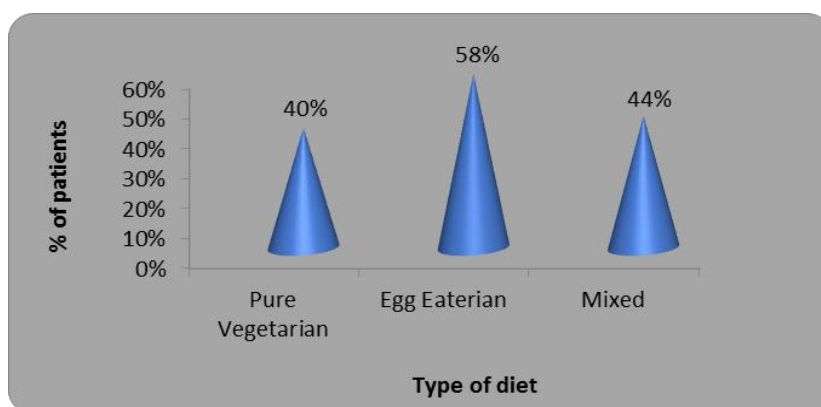
Present occupation of 6% subjects were delivery boy, 7% were driver, 10% were engineer, 18% were farmer, 6% were guard, 2% were housewife, 21% were labor, 1% were medical representative, 20% were student, 9% were traffic police

5. Distribution of patients according to working area



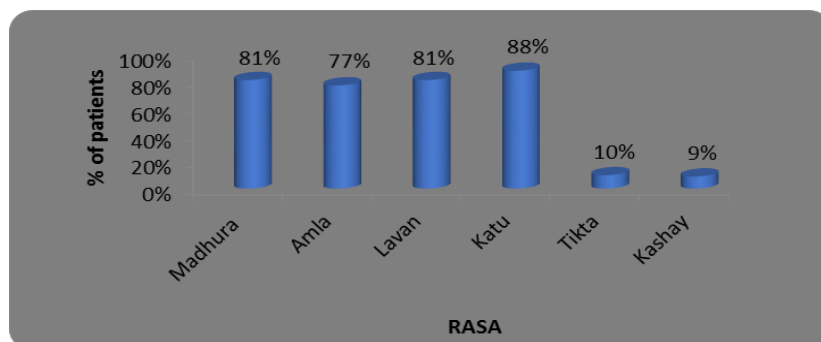
14.29% of subjects works in airy area, 66.33% in dusty area, 1.02% in smoky area, 2.04% in animal odour, 16.33% in air conditioned area.

6. Distribution of patients according to type of diet



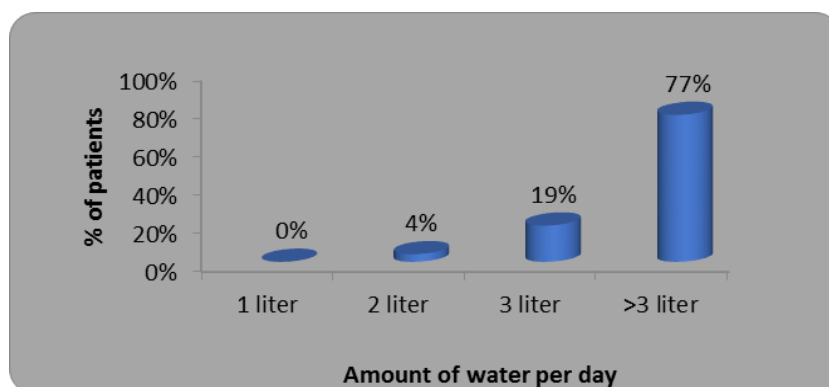
40% of subjects are pure vegetarian, 58% are egg eaterian, and 44% are mixed

7. Distribution of patients according to RASA



81% of subjects intakes more madhur rasa, 77% amla rasa, 81% lavan rasa, 88% katu rasa, 10% tikta rasa, 9% kashay rasa.

8. Distribution of patients according to amount of water per day



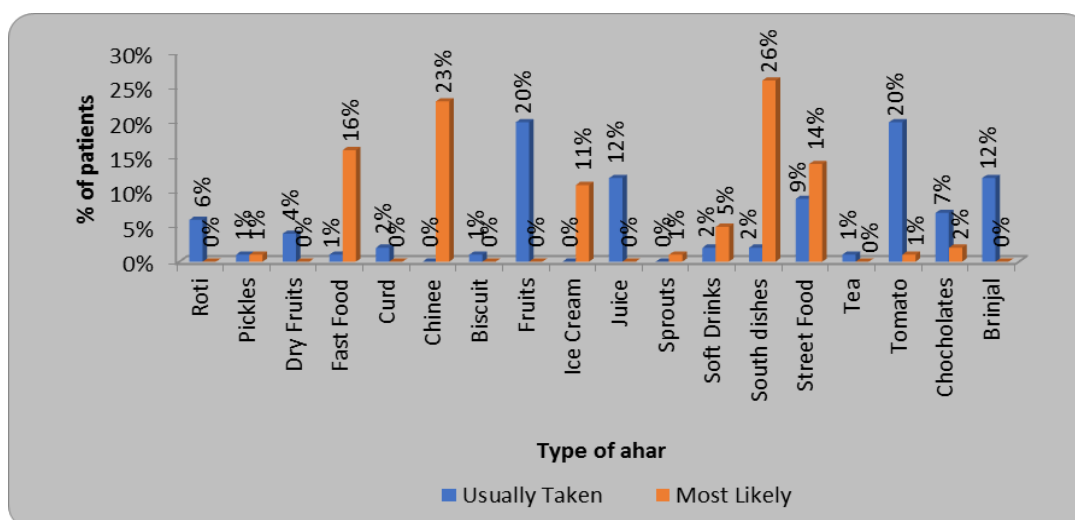
4% subjects intake 2 litre water, 19% subjects intake 3 litre water, 77% of subjects intake of water is more than 3 litre while no subject had intake of water 1litre.

9. Distribution of patients according to type of water

Type of water	No of patients	Percentage
Cold	60	60
Normal	40	40
Total	100	100

60% of subjects drink cold water, 40% drinks normal water

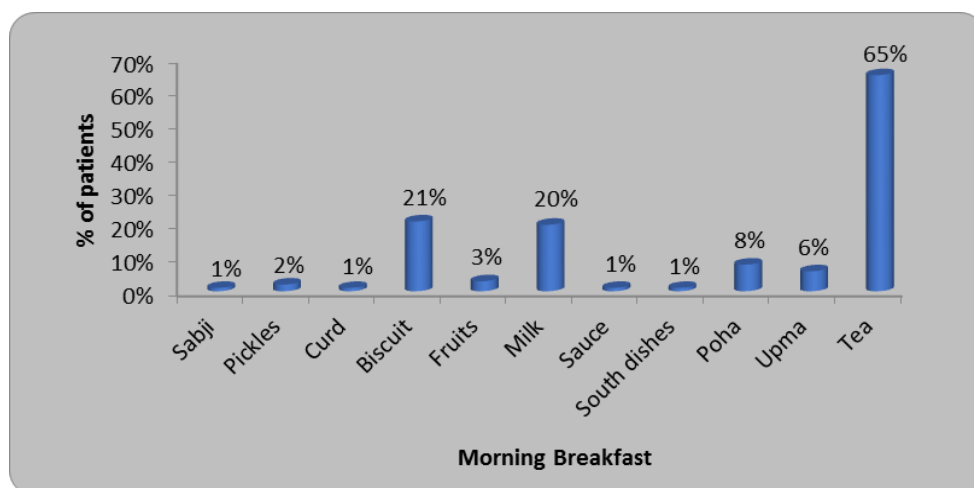
10. Distribution of patients according to type of ahar



6% of total subjects usually takes roti, 1% people usually and mostly eats pickle, 4% of subjects usually eats dry-fruits, 1% subjects usually takes fast food and 16% subject most likely likes fast food to eat, curd is usually taken by 2%, 23% of subject most like to have Chinese food, 1% of subjects usually eats biscuits, 11% of subjects most like ice cream, 20% subjects

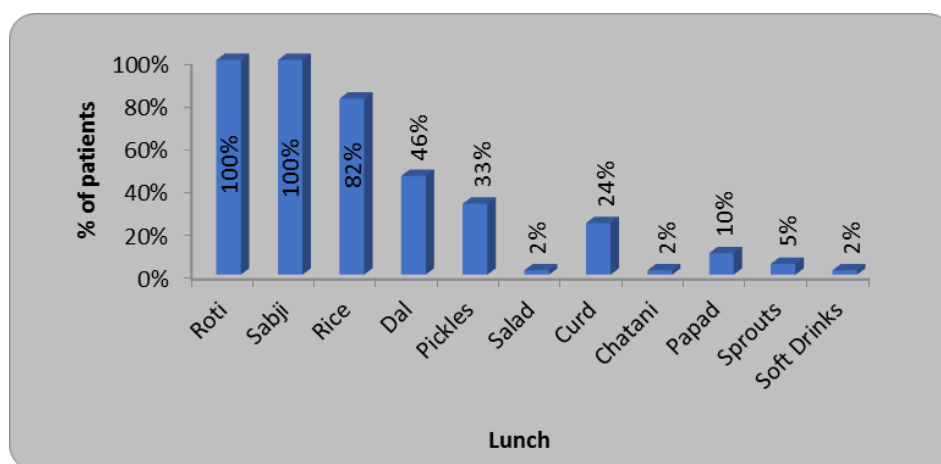
usually takes fruits, juice is usually taken by 12% of subjects, 1% of subject most like to have spruts in their diet, 2% of subjects usually drink soft drink and 5% of subject most like to have it, 2% of people usually eats south dishes and 26% of subject like it most, 9% subjects usually eats street food and 14% most like it, 1% subjects usually drinks tea, 20% subjects usually takes tomato in their diet and 1% subjects most like it, 7% subject usually eats chocolates and 2% likes to have it, brinjel is usually taken by 12% of subjects.

11. Distribution of patients according to morning breakfast



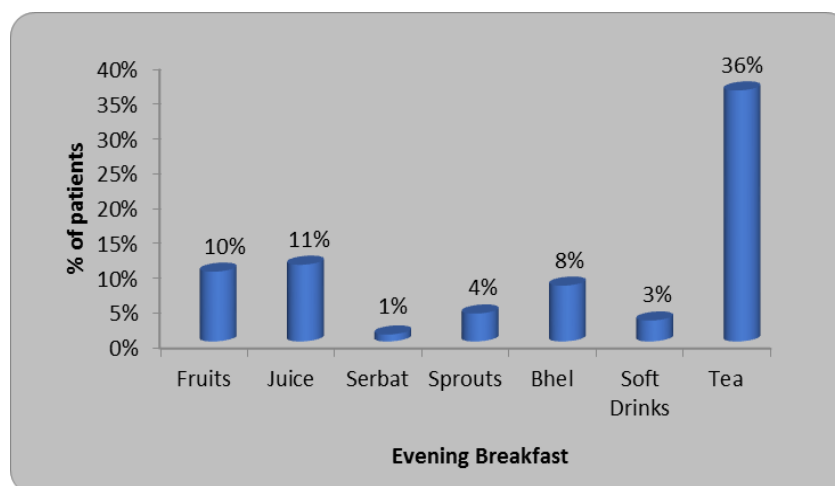
In morning breakfast 1% subject eats sabji, 2% subjects pickles, 1% curd, 21% biscuits, 3% fruits, 20% milk, sauce 1 %, 8% of poha, 6% upma, 65% tea.

12. Distribution of patients according to lunch



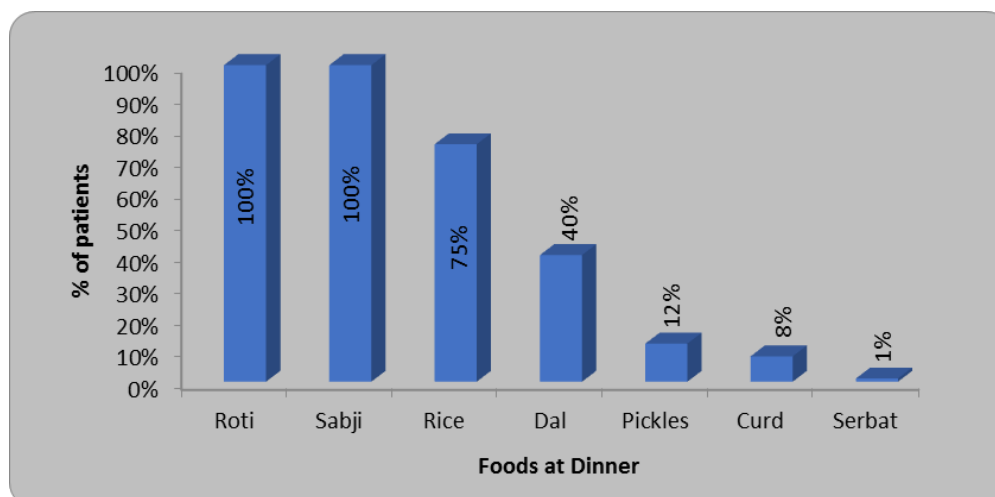
100% subject eats roti in their diet, 100% subjects eat sabji in lunch, rice is taken by 82% of subjects, dal is taken by 46% of subjects, 33% subjects eats pickle, 2% subjects eats salad, 24% subjects eats curd, 2% subjects eats chatani, 10% eats papad, 5% eats sprouts, 2% drinks soft drinks.

13. Distribution of patients according to evening breakfast



10% subject eats fruits in evening breakfast, 11% juice, 1% serbat, 4% sprouts, 8% bhel, 3% soft drinks, 36% tea.

14. Distribution of patients according to dinner



100% subject consumes roti in their diet, 100% subjects eat sabji, 75% rice, 40% dal, 12% pickles, 8% curd, 1% serbat.

DISCUSSION

This research study was conducted to know that, effect of food and occupation in vataj pratishyaya. Number of patients of age group 21 to 40 are more because allergic rhinitis affects more to young adults. percentage of male suffering from allergic rhinitis was more because occupation of male was the main cause of allergic rhinitis such as delivery boy, because in this occupation exposure to air, dust, smoke, another pollutants was the reason of allergic rhinitis. 58% of subjects were egg eaterian, eating egg is the etiological factor for the

allergic rhinitis. 81% subjects got who takes more madhur rasa and having allergic rhinitis because eating sweet and heavy food products precipitates pratishyay, same with amla and lavan rasa. Katu rasa increases ruksha guna in the body which also a cause of pratishyay. 60% subject were drinking cold water because of altered food habits of age group 20-40; And drinking cold water is the main cause of vataj pratishyay. most of the subjects works in dusty area which is the main precipitating factor for allergic rhinitis. As well as other subject were found working in airy, smoky, animal odor, air conditioned which are the commonest inhalant external agents or allergens of allergic rhinitis according to modern as well as ancient literatures. caffine and tannine may cause allergy to some subjects but most subjects drink tea as a morning breakfast, milk is an ingestant allergent which also taken by the 20% of subjects, biscuits are taken by 21% of subjects which again increase ruksha guna in the body. most of the subjects most likes chineese, south indian food, biscuits, and fast food which aggrevates vata dosha, amla rasa of south Indian dishes cause aggravation of all doshas because of its vidahi property. Tomato and bringel which are usually taken releases histamines which develops the allergic reactions.

CONCLUSION

This study reveals that incidence of allergic rhinitis cases was commonly seen in the age group of 20-40. Maximum number of subjects is male. Egg Eaterian subjects were more prone to allergic rhinitis. Allergic rhinitis was found in the subjects who are more likely consuming katu rasatmak ahar. Subject consuming cold water everyday are suffering with allergic rhinities. Subjects were fonder of Chinese, south Indian dishes, fast food, visham agni was observed in 71% of subjects. farmers, labour and student are affected more, but drivers, engineers, guardand traffic police were also affected with allergic rhinitis. The subjects, who were working in dusty area for more than 9-12 hours, as well as in airy, smoky and air conditioned area, were suffering from allergic rhinitis.

After this observational study it can be concluded that food and occupation have strong effect on vataj pratishyay (allergic rhinities).

LIMITATIONS

- It is a short-term project
- Sample size is less.

RECOMMENDATIONS

The study should be conducted at IPD level with more sample size and appropriate parameters.

REFERENCES

- 1 SushrutSamhita, Editor- Anataran Sharma, Publisher- ChaukhambaSurbharatiPrakashan Varanasi, Uttartantra 24thAdhyay, 166.
- 2 Shiro-karna-nasa&mukha-dantarogvidnyan, prof. Narayan J. Vidhwansa, dr. MrsNandini, Dhargalkar, shiro-karna-nasa&mukha-dantaroga vidnyan, 1st edition, 135.
- 3 K.B. Bhargava, S. K. Bhargava, T. M. shah, Ashort textbook of E. N. T. Diseases, 7th Edition, 165.
- 4 Nicki R. colledge, Brain R. walker, Stuart H. Ralston, Davidson's principals & practice of medicine, 21st edition, 721.
- 5 Vermaswati, Role of KatphaladiKwatha and Anu Tail Nasya in the management of VatajPratishyay (Allergic Rhinitis), International Medical Journal, ISSN:2320 5091.
- 6 ChawardolSeema G, Jain Sapan B, Ayurvedic line of treatment of Allergic Rhinitis (*VatakaphajPratishyay*), International Journal of Ayurvedic and Herbal Medicine, 2014; 4:4: 1527-1531.
- 7 SushrutSamhita, Editor-AnataranSharma, PublisherChaukhamba SurbharatiPrakashan Varanasi, Uttartantra 24thAdhyay, 17 shloka, 179.
- 8 Ashtang hriday samhita, editor- dr bramhanand tripathi, publisher- chaukhamba Sanskrit prakashan delhi, sharirsthan 3rd adhyay, 4th shloka, 367.
- 9 SushrutSamhita, Editor-AnataranSharma, Publisher-Chaukhamba SurbharatiPrakashan Varanasi, sharirsthana 1stAdhyay, 26 shloka, 679.
- 10 Charak samhita, editor- Acharya vidyadhar Shukla, prof ravidatt tripathi, publisher- chaukhamba Sanskrit prakashan delhi, sharirsthana, 4th adhyay, 11th shloka.
- 11 Shiro karna nasa and mukha danta roga vigyan, auther- prof dr. Narayan j. vidhwansa, Publisher- vimal vision publication, pune, 3rd chapter, 142-147.
- 12 A short textbook of E. N. T. Diseases, K.B. Bhargava, S. K. Bhargava, T. M. shah, 10th Edition, 119.