

## WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 6.805

Volume 5, Issue 9, 1440-1445.

Case Report

ISSN 2277- 7105

# EFFECT OF AYURVEDIC REGIME IN ALLERGIC RHINITIS: A CASE REPORT

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Article Received on 09 July 2016, Revised on 29 July 2016, Accepted on 18 August 2016 DOI: 10.20959/wipr20169-6921

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#### INTRODUCTION

Allergic rhinitis is the most common complain of the patients attending the *shalakya tantra* OPD. In the present environment, pollution is a big problem which leads to exposure to various pollutants in atmosphere leading to allergic rhinitis. Pathologically allergic rhinitis is preventive histamine reaction occurring in nose in response to various allergens. It results in discharge from nose, sneezing, itching and pricking sensation in nose, throat, ears and many times in eyes also. The fluid from the nose is usually clear. Symptoms onset is often within minutes following exposure and they can affect sleep, the ability to work, and the ability to concentrate at school.<sup>[1]</sup> Those whose symptoms are due to pollen typically develop symptoms during specific times of the

year. [2] Many people with allergic rhinitis also have asthma, allergic conjunctivitis, or atopic dermatitis. It may be associated with headache and discharge from eyes. A number of medications may improve symptoms including nasal steroids, antihistamines such as diphenhydramine, cromolyn sodium, and leukotriene receptor antagonists such as montelukast. [3] Rhinitis is defined as inflammation of the nasal membrane [4] and is characterized by a symptom complex that consists of any combination of the following: sneezing, nasal congestion, nasal itching, and rhinorrhea. [5] Similar features are also given in purva rupa of Pratishyay in Ayurveda. [6][7]

In Ayurveda it can be described under the heading of *Vataja Pratishyay* having similar symptoms. *Galatalvoshthashushkata*<sup>[8]</sup> is also given as its symptom, which is felt due to increased discharge from nose leads to peripheral areal dehydration. *Pratishyay* literally

means "Vatam prati abhimukham shyayo gamanam kaphadinam yatra sa pratishyay" i.e. movement of kaphadi doshas in accordance to vata.

#### **CASE REPORT**

Here presenting a case study of a patient complaining of sneezing of recurrent type (8-10 at once), discharge from nose, itching and irritation in nose and throat, nasal blockage. Patient was taking allopathic and homeopathic treatment including steroids and antibiotics but got symptomatic relief only for the time while treatment was continuing. After discontinuing it recurs with worse symptoms. So, patient turned to Ayurveda for relief.

The female patient, 22 years old, Hindu by religion, student living in sardarshahar presented at the OPD of Shalakya Tantra Department, SBLD Ayurved Vishwabharati Hospital, Sardarshahar on April 21, 2016. She complained of recurrent sneezing (8-10 at once), nasal discharge and blockage with irritation in nose and throat.

Patient was asymptomatic before 5 years when she was living in Jaipur, her problem started when she shifted to Sardarshahar. Atmosphere of Sardarshahar is dusty and dry as it comes in desert zone. She has taken allopathic and homeopathic treatment. She was given antihistaminics, antibiotics and steroids by which she got only temporary relief. After it the next phase became more aggresive. She had also gone through endoscopy which revealed everything normal except mild DNS towards left side. Similarly, with homeopathic treatment she had temporary relief. So, finally she came here for the proper management of her problem.

#### On Clinical Examination

NOSE:

Mild DNS towards left side

Left inferior turbinate hypertrophied

Right middle turbinate enlarged

Nasal Mucosa was congested

**THROAT** 

Very mild congestion

Post Nasal Discharge was present

**EAR** 

EAC – clear bilaterally

TM- Intact and retracted on left side, Right TM - intact and normal

#### **Investigations**

Hemoglobin- 10.5gm%

 $TLC - 8400/mm^3$ 

DLC - P59, L38, M01, E03, B0

ESR-10 mm

FBS-98 mg/dl

Urine- Routine and Microscopic-NAD

Endoscopy- Mild DNS towards left side and turbinate enlargement

X-Ray PNS Water's view- clear sinuses

#### **TREATMENT**

Nasya Karma with Anu Taila<sup>[10]</sup> for 7 days in 3 sittings followed by dhumpana with varti made of haridra, guggulu and ingudi was done along with oral medication. Oral medicines consisted of Sitopaladi churna, Godanti bhasma, Hingwashtaka churna and Vyoshadi vati<sup>[11]</sup>. All other medicines allopathic and homeopathic were stopped.

Patient was treated in following order

#### Procedure of Nasya

#### Poorva Karma

Patient was given dipana pachana medicine chitrakadi vati 1 tablet thrice a day. Then Koshtha shodhana was done by Triphala churna. During Nasya procedure, abhyanga was done by Bala taila in head, face and neck. After abhyanga, swedana was done by hot steam. For swedana water was boiled in a covered vessel then kept in front of patient. Patient was covered with a towel at the time of steaming for the time period in which patient started sweating.

#### Nasya Procedure

Patient was told to lie in head down position then luke warm *anu taila* drops were instilled in nose. Then after feeling taste of *taila* in throat patient was asked to spit the oil mixed *kapha* in a kidney tray at sides<sup>[12]</sup>. In first sitting, 8 drops were instilled then increased to 10 drops in second sitting and then to 12drops in third sitting. After this, patient was given *kawala* with warm water until feeling of clearance of oil from throat.

#### Pashchat Karma

#### Dhumpana

Patient was given *dhumpna* with a varti made of *haridra*, *guggulu* and *ingudi*. Dhumpana was done in classical way,inhaled from nose and exhaled from mouth. First three times, inhaled from one nostril then next three times from the other. This process was repeated for three times. After *dhumpana* again steam was given in the above explained way. Patient was advised to stay in *nivata sthana* after nasya for 30 minutes.

Patient was advised to avoid cold, oily and sticky food items and to avoid direct cold wind. ORAL MEDICINE:

Combination of Sitopaladi churna 3gm and Godanti bhasma 500mg twice daily mixed with honey.

Hingwashtak churna in dose of 5gm twice daily before meals.

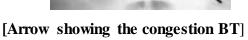
Vyoshadi vati- 1 tablet thrice daily.

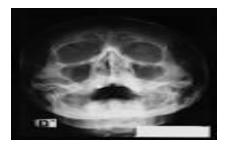
#### **RESULTS**

S. No.	Parameter	Before t/t grade	After t/t grade	% Relief
1	Sneezing	3	1	75%
2	Nasal discharge	3	0	100%
3	Irritation in nose and throat	3	1	75%
4	Headache	2	0	100%
5	Nasal blockage	2	0	100%

#### **PICTURES**







[Normal Sinus and Nasal Mucosa AT]

There was marked reduction of signs and symptoms like sneezing, nasal discharge, irritation in nose and throat, nasal blockage. No adverse effect of the therapy was observed during treatment and follow up. Patient was observed keenly for a period of three months with

follow up every 15 days. Patient remained asymptomatic during this period. With the relief in signs and symptoms recurrence had also stopped.

#### **DISCUSSION**

Allergic rhinitis also known as hay fever is a type of inflammation in the nose which occurs when the immune system overreacts to allergens in the air. [14] Vataja pratishyay needs a regime which not only pacifies vata but also gives symptomatic relief with decreased rate of recurrence. Dipana pachana drugs enhance absorption of drug and koshtha shodhana provides better results by expulsing the toxins and impurities. Ayurveda says there is viguna gati of vata in pratishyay which is controlled by hingwashtaka churna. [15] It regulates the vayu and thus the other doshas also get normal movement. Compound drug contains sitopaladi churna gives relief from nasal discharge and headache. [16] Godanti bhasma also pacifies headache and sneezing. Both being mucolytic, remove congestion and clear the nasal obstruction. Vyoshadi vati improves status of agni and its drugs have chhedana action on kapha. The main treatment Nasya karma is helpful in shaman of vata dosha and Pinasa rog[17]. It nourishes the nasal route and help in clearance of nasal pathway. Nasya also diminishes the recurrency of complain as it makes the nasal mucosa snigdha and prevents the direct reaction between allergens and nasal mucosa. Abhyanga and swedana done prior to nasya and dhumpana makes the mucous of sinuses thin and increases the mobility. [18]

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