

# WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 6.805

Volume 6, Issue 1, 680-695.

Research Article

ISSN 2277-7105

# A COMPARATIVE OPEN CLINICAL STUDY ON EFFICACY OF VYAGHRI TAILA NASYA, RASANJANADI TAILA NASYA & VYOSHADI VATI IN MANAGEMENT OF DUSHTA PRATISHYAYA W.S.R. TO CHRONIC RHINITIS.

<sup>1</sup>\*Dr. Preeti Pahwa, <sup>1</sup>M.S. Shalakya and <sup>2</sup>Dr. (Prof.) Rekha Madhavrao Patil

<sup>1</sup>Assistant Professor (Shalakya) in Patanjali Ayurveda College & Hospital, Haridwar. <sup>1</sup>Ex-Consultant Ayurveda Physician, CCRAS-Sreedhareeyam Ayurvedic Eye Hospital & Research Facility, Ayurveda Central Research Institute, Punjabi Bagh (W), New Delhi-110026.

Article Received on 25 Oct. 2016,

Revised on 15 Nov. 2016, Accepted on 05 Dec. 2016

DOI: 10.20959/wjpr20171-7575

# \*Corresponding Author Dr. Preeti Pahwa

Assistant Professor (Shalakya) in Patanjali Ayurveda College & Hospital, Haridwar.

#### **ABSTRACT**

A study was conducted for a period of 2 months including 1 month follow up time to evaluate the efficiency and safety of Ayurvedic medical management in patients of Dushta pratishyaya (Chronic Simple Rhinitis). On day care basis 7 days marsh nasya was planned In two groups with Vyaghri tail & Rasanjanadi tail & orally vyoshadi vati was being given. Significant improvement was observed in signs & symptoms of Dushta Pratishyaya after completing treatment. No significant adverse effects of medicines were observed.

**KEYWORDS:** Dushta Pratishyaya, Chronic Simple Rhinitis, Nasya.

# **INTRODUCTION**

Ayurveda is a system of medicine which gives the way of perfect living with nature. Shalakya is an important branch of Ayurveda which deals the diseases manifesting above clavicular region. Acharya Nimi is considered as the Acharya of Shalakya. Acharya Susrutha is the only person who explained the Ophthalmology and ENT in a systemic manner in Uttharatantra portion of his treatise Sushruta Samhitha. In Utthara tantra, Acharya Sushruta has devoted one separate chapter to Prathishyaya after explaining Nasagataroga in total. [9] This fact shows that Prathishyaya has been a major problem to the physicians since long back.

<sup>&</sup>lt;sup>2</sup>Professor (PG Guide) Shalakaya Vibhaga in SST Ayurveda Mahavidyalya, Maharashtra.

Prathishyaya by word itself indicating that it is a recurrent attack and can precipitate even due to minute etiological factors. Vata is the main dosha and Kapha Pitta and Rakta are associated doshas. Improper management of Prathishyaya leads to a severe and complicated condition called Dushta Prathishyaya which is very difficult to treat and causes lot of complications like Badhirya, Andhata, Ghrananasa etc.

The features of the disease Dushta Pratishyaya in modern science generally can be compared with of chronic rhinitis & sometimes its complications. So here in the study Dushta pratishyaya is being correlated with Chronic Simple Rhinitis. This disease is characterised by nasal blockage, nasal discharge, headache, sneezing, heaviness in head, halitosis etc. As nose is in direct contact with external environment, it is exposed to a lot of microorganisms and pollutants present in the atmosphere. Due to the increased environmental pollution and busy life, rhinitis is a common disease in this present era. Improper management of this stage leads to chronicity and later it results into Chronic Simple rhinitis, Hypertrophic rhinitis, Atrophic rhinitis, Rhinitis sicca & so on Rhinitis caseosa. Chronic simple rhinitis is most commonly seen upper Respiratory disorder in all age, religion, region and sex. In Ayurveda a detailed description of Pratishyaya and its chronic phase i.e. Dushta Pratishyaya is available. A lot of treatment modalities are also explained by Acharyas for this disease according to the condition of patient and progression of disease. All Acharyas have described Dushta Pratishyaya as a condition of much complication and with poor prognosis. So much work has been done on Dustha Pratishyaya & Chronic Rhinitis till date, But Comparative study on Marsh Nasya Karma for Dushta Pratishyaya has never been done before. So this is the first time that trial of doing comparative study on Nasya in Dushta Pratishyaya is carried here.

In the present study Vyaghri Taila marsha nasya, Rasanjanadi Taila marsha nasya & Vyoshadi vati orally are selected for comparative clinical study on Dushta Pratishyaya (Chronic simple Rhinitis) since no such study in this pattern has been conducted so far. Dushta Pratishyaya is Vata Pradhana Tridoshaja Vyadhi and in this stage of Pratishyaya immunity of the patient is always compromised. Hence, Vyoshadi vati described in **Ashtaang hridya** is selected as oral medication. In Vyoshadi vati Trikatu, Taleesa & Chavya etc. are contents which are having Deepana, Pachana, Sroto shodhana, Vatanulomana, Rasayna & Shothahara properties. All these properties of vyoshadi vati help to treat the disease Dushta Pratishyaya. Madhu was selected as Sahapana of vyoshadi vati, which is having Chhedana, Yogavahi & Lekhanakara properties. By having all these properties Madhu directly acts on

the Vikrita Kapha as well as a vehicle for the Aushadhi Dravya. Considering all these facts, a clinical trial on Dushta Prathishyaya with Marsh Nasya with Vyaghri taila described in **chakradutta samhita** and Rasanjanadi taila<sup>18</sup> described in **Sushruta Samhita** are selected & vyoshadi vati mentioned in **Ashtaang Hridya** was planned to find out a treatment protocol for the management of chronic ailment i.e. Dushta Pratishyaya. Both of these taila are having shodhna & shirovirechana properties and that is why these are selected for comparative study.

# AIMS AND OBJECTIVES

- 1. To study the disease Dushta Pratishyaya in Ayurvedic and modern Parlance.
- 2. To assess the role of Vyaghri taila marsh nasya for 7 days & vyoshadi vati for 30 days in Dushta Pratishyaya in group A.
- 3. To assess the role of Rasanjanadi taila marsh nasya for 7 days & vyoshadi vati for 30 days in Dushta pratishyaya in group B.
- 4. To study & compare the effect of Vyaghri taila nasya combined with Vyoshadi vati in group A & Rasanjanadi taila nasya combined with vyoshadi vati in group B.

#### MATERIAL AND METHODS

The data was collected from the patients of Dushta Pratishyaya from the O.P.D of Shalakya tantra of SST Ayurveda Mahavidyalaya Maharashtra. Trial drugs were prepared in Rasa Department of SST Ayurveda Mahavidyalaya. Total 67 patients with signs and symptoms of Dushta Pratishyaya were registered and randomly divided into two groups for this study. Out of which 60 patients completed the course of treatment. The simple random sampling method was applied in this study.

## CRITERIA FOR SELECTION OF PATIENTS

- Patients presenting with the classical features of Dushta Pratishyaya between the age group of 18 to 40 yrs were selected.
- Patients were selected irrespective of sex, occupation, religion, socio economic status and duration of illness.

## **EXCLUSION CRITERIA**

- Patients below 18 years and above 40 years of age were excluded.
- Pneumonia
- D.N.S.
- Nasal polyps

• Tumors of nose, etc. Systemic disorders like; Tuberculosis, CA lungs.

# **INVESTIGATIONS**

- 1. CBC before & after treatment.
- 2. FBS before & after treatment.
- **3.** AEC before & after treatment.

#### RESEARCH DESIGN

Patients were divided into 2 groups for comparative study i.e. Group A and Group B.

Group A -	Vyaghr taila Nasya for 7 days was administred, 8 in each nostril, once daily in the morning before food. Vyoshadi Vati 500 mg tablet TDS with honey for 30 days.
Group B -	Rasanjanadi taila Nasya for 7 days was administred, 8 drops in each nostril, once daily in the morning before food. Vyoshadi Vati 500 mg tablet TDS with honey for 30 days.

#### **FOLLOW-UP**

A follow up study for the duration of one month on 45<sup>th</sup> & 60<sup>th</sup> day has been carried out in the Patients after completion of Nasya 7 days & oral medicines 30 days treatments.

#### METHOD OF PREPARATION OF ALL DRUGS

The ingredients of vyaghri taila, Rasanjanadi taila & Vyoshadi Vati were procured from a reputed pharmacy and both tailas & Vati was prepared in the Rasa Department of SST Mahavidyalaya as per taila paka viddhi & Vati Kalpana method respectively.



urÉÉbÉëÏSliÉÏuÉcÉÉÍvÉaÉëÒxÉÒUxÉurÉÉåwÉxÉælkÉuÉæ: | mÉÉÍcÉiÉÇ lÉÉuÉIÉÇ iÉæsÉÇ mÉÕÍiÉIÉÉxÉÉaÉSÇ eÉrÉåiÉé ||

UxÉÉgeÉlÉåxÉÉÍiÉÍuÉwÉå qÉÒxiÉÉrÉÉÇ pÉSëSÉÂÍhÉ | iÉæsÉÇ ÍuÉmÉYuÉÇ lÉxrÉÉjÉïå ÍuÉSkrÉÉccÉɧÉ oÉÒήqÉÉlÉè ||

urÉÉåwÉiÉÉsÉÏxÉcÉÍuÉM ÉÍiÉÍliÉQÏM ÉqsÉuÉåiÉxÉqÉè| xÉÉalrÉeÉÉÍeÉ Ë²mÉÍsÉÇM iuÉaÉåsÉÉmɧÉmÉÍSMqÉè|| eÉÏhÉÉïSè aÉÒQÉiÉÒsÉÉkÉïålÉ mÉYuÉålÉ uÉOM ÏM×iÉqÉè| mÉÏlÉxɵÉÉxÉM ÉxÉblÉÇ ÂÍcÉxuÉUMUÇ mÉUqÉè ||

# GRADATION INDEX FOR ASSESSMENT CRITERIA

#### Table 20

PARAMETER	GRADE
1.Nasa Srava (Nasal discharge)	
No discharge	0
Occassional	1
Frequent	2
Continuous Heavy	3
Continuous Heavy & Foul smell	4
Kshavathu (Sneezing)	
No sneezing	0
Occasionally <5/day	1
5-10 times / day	2
11-15 times / day	3
>16 times / day	4
Nasavarodha (Nasal obstruction):	
No obstruction	0
Partially, occasionally and unilateral	1
Partially, occasionally and bilateral	2
Complete, frequently and unilateral	3
Always complete and bilateral	4
Shirahshoola (Headache) or Shirogaurav (Heaviness in head):	
No headache	0
Occasionally with low intensity	1
Frequently with moderate intensity but do not disturb daily routine work	2
Always with moderate intensity, some times disturb routine work	3
Always severe intensity associated with Vomiting, nausea etc	4

# ASSESSMENT OF TOTAL EFFECT OF THERAPY

a) Marked relief - 75% & Above 75% Improvement

b) Moderate relief - 50% - 74% Improvement

c) Mild relief - 24% - 49% Improvement

d) No relief - 25% & Below 25% Improvement

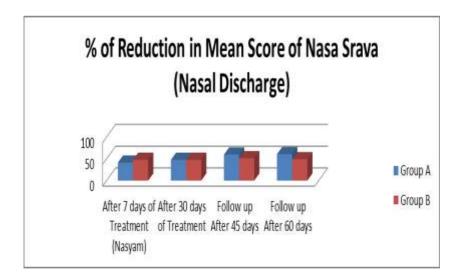
#### EFFECT OF THE THERAPIES

60 patients were taken up for the study out of which 30 patients of group A were administered Vyaghri taila marsha Nasya for consecutive 7 days & vyoshadi vati orally for 30 days and 30 patients of group B were administered with Rasanjanadi taila Marsh Nasya for consecutive 7 days & vyoshadi vati orally for 30 days. The effects of the therapy on each parameter of assessment are being explained here under separate headings.

# EFFECT ON NASAL DISCHARGE

The symptom of nasal discharge was recorded according to the gradation index. Data was collected and statistically analysed.

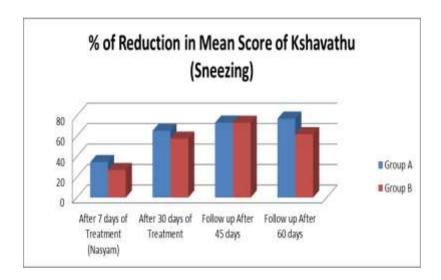
				Gro	up A									Group B	3			
Nasa Srava (Nasal Discha	Mean Sc	cre	Peducti on in Mean	% af Reducti on in Mean		S.E. of Mean	ď	ન્ત Value	"p" Yake	Mean So	are	Reducti on in Mean	% of Reducti on in Mean	S.D. of Mean	SE of Mean	đ	42 Yake	*p* Value
rge)	вт	AT	Score	Score						BT	ΑT	Score	Score					
After T days of Treatme nt (Nasyam	2.73	16	113	4139	1002	D.183	23	6.2	<0.D1	2.87	15	137	47.74	0.964	0.176	29	7.763	<0.01
After 30 days of Treatme of	2.73	143	13	47.62	1.002	D.183	29	7.032	<1.D1	2.87	15	137	47.74	D:326	0.169	29	8.806	<0.01
Follow up After	2.73	11	163	59.71	0.991	D.181	29	9.014	am	2.87	14	147	51.22	0.959	0.175	29	8.377	<0.01
Follow up After 60 days	2.13	107	1.66	60.81	1.D46	D.191	29	B.727	01.D1	2.87	147	14	48.78	D.964	0.176	29	7.957	<0.01



## **EFFECT ON SNEEZING**

The symptom of sneezing was recorded according to the gradation index. Data was collected and statistically analysed.

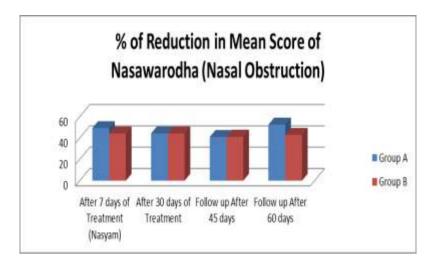
				Gro	up A									Group B				
Kshav athu (Sneez	Mean So	one	Reducti on in Mean	% of Reducti on in	S.D. of Mean	S.E. of Mean	DF		"p" Value	Mean So				S.D. of Mean	S.E. of Mean	Dł		"p" Yalue
_	BT	AT	Score	Mean						BT	AT	Score	Mean					Ш
After Tdays of Treatme or Nasyani	153	1	0.53	34.64	0.751	0.194	14	2.729	0.01	186	136	0.5	26.88	0.569	0.267	13	1.876	>0.01
After 30 days of Treatme of	153	0.53	1	65.36	0.756	0.196	14	5.097	<1.D1	186	0.79	1.07	57.53	0.965	0.258	13	416	<0.01
Follow up Alten 45 days	153	0.41	112	73.2	0.755	0.195	14	5.729	<11.D1	1.86	0.5	136	73.12	1.001	0.269	t3	5.037	<0.01
Follow up After 60 days	153	0.35	1.18	77.12	0.747	0.193	14	6.1	<1.D1	1.86	0.71	114	61.83	1.058	0.283	t3	4.039	<0.01



# **EFFECT ON NASAL OBSTRUCTION**

The symptom of nasal obstruction was recorded according to the gradation index. Data was collected and statistically analysed.

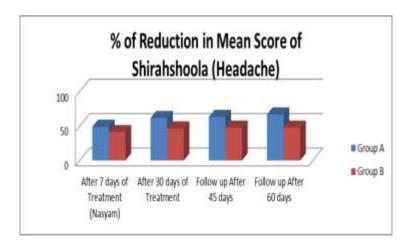
				Gro	up A									Group B				
Masaw arodha (Masal Obstru ction)	Mean Sc BT	one IAT	Reducti on in Mean Score	on in Mean		S.E. of Mean	ď	جرہ Value	"p" Value	Mean So	are AT	Reducti on in Mean Score	Heducti on in Mean	S.D. of Mean	S.E. of Mean	ď	۹۶ Value	"p" Value
After 7 days of Treatme nt (Nasyan )	217	11	107	Soure 49.31	1.01	0.188	28	5.673	<0.01			1.03	Score 44.21	0.997	0.182	29	5.663	<0.01
Alter 30 days of Treatme nt		121	0.97	44.24	1116	0.207	28	4.657	<0.01	2.33	13	1.03	44.21	D.888	0.162	29	6.36	<0.01
Follow up Aher 45 days	2:17	128	0.89	41.01	1.035	0.192	28	4.67	<0.01	2.33	137	0.97	412	0.904	0.165	29	5.865	<0.01
Follow up After 60 days		1.03	114	52.53	1.019	0.189	28	6.011	<0.01	2.33	133	1	42.32	D.899	0.164	29	6.106	<0.01



# **EFFECT ON HEADACHE**

The symptom of Headache was recorded according to the gradation index. Data was collected and statistically analysed.

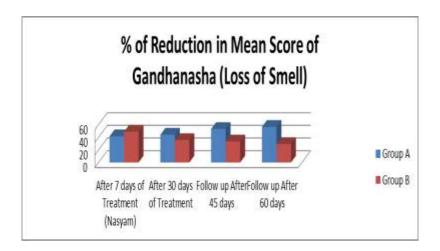
				Gro	φÂ									Group B	}			
Shira shoola (Head			Mean	Reducti on in		S.E. of Mean	Dř	ج» Value	"p" Value	Mean So	one	Mean	Reducti on in	S.D. of	S.E. of Mean	Di-	न्द Value	"p" Value
After 7 days of Treatme nt Nasyam		D.97	0.93	Mean 48.95	0.904	0.165	29	5,689	<0.01	BT 2.43	AT 143		Mean 4115	0.762	0.139	29	7.211	<0.01
After 30 days of Treatme nt		0.73	117	6158	0.991	0.161	29	6.438	<0.01	2.43	13	113	46.5	0.764	0.143	29	7.953	<0.01
Fallow up After 45 days	19	0.7	12	63.16	0.883	0.163	29	7.38	<0.01	2.43	127	117	47.74	0.817	0.149	29	7.847	<0.01
Fallow up After 60 days	19	0.63	127	66.84	0.904	0.165	29	7.68	<0.01	243	127	11î	47.74	0.817	0.149	29	7.847	<0.01



## EFFECT ON LOSS OF SMELL

The symptom of loss of smell was recorded according to the gradation index. Data was collected and statistically analysed.

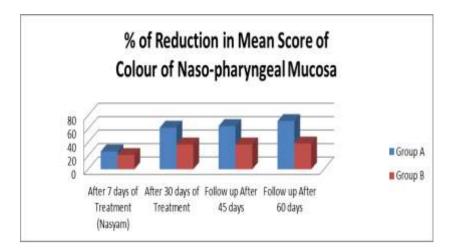
				Gno	up A									Group B				
a	Mean Sc	one	Reducti on in	% of Reducti on in	SD of	S.E. of Mean	ď	÷	<b>4</b> 7	Mean Sc	one	Reducti on in			S.E. of Mean	đ	47	÷.
(Lass of Smell)	BT	TA	Mean Score	Mean Score	Mean	mean		Value	Yalue	ВТ	AT	Mean Score	Mean Score	Mean	nean		Yalue	Value
After 7 days of Treatme nt (Nasyam )	162	0.95	0.67	41.36	1.044	0.228	20	2.919	<0.01	214	11	104	48.6	0.763	0.172	19	6.102	<0.01
After 30 days of Treatme of	162	0.51	0.71	43.83	1.017	0.222	20	3.213	<0.01	214	138	0.76	35.51	0.858	0.192	19	3.963	<0.01
Follow up Alter 45 days		0.76	D.86	53.09	0.966	0.211	20	4.055	<0.01	214	143	0.71	33.18	0.97	0.217	19	3.297	o1.01
Follow up Alter 60 days		0.71	0.91	56.17	0.93	0.203	20	4.466	<0.01	214	152	0.62	28.97	0.97	0.217	19	2.85	o1.01



# EFFECT ON NASOPHARYNGEAL MUCOSA

The effect on nasopharyngeal mucosa was recorded according to the gradation index. Data was collected and statistically analyzed.

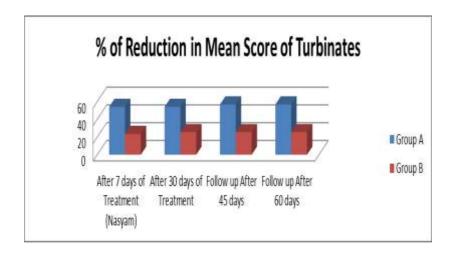
				Group	Αq									Group B				
Colour of Naso- pharynge	Mean Sc	ore	Reducti on in Mean	on in	S.D. of Mean	S.E. of Mean	Dł	4º Value	"p" Value	Mean Sc	ore	Reducti on in Mean	on in	S.D. of Mean	S.E. of Mean	DH	۹۲ Value	"p" Value
al mucosa	ВТ	ΑT	Score	Mean Score						BT	ΤA	Scare	Mean Score					
After T days of Treatment (Nasyani)	162	119	0.43	26.54	1102	0.216	25	1563	>0.01	159	152	0.41	21.24	1154	0.222	26	1835	x0.01
After 30 days of Treatment		0.62	1	61.73	1102	0.216	25	4.631	<0.01	159	122	0.7	36.79	1:54	0.222	26	3.173	o1.01
Follov up After 45 days		1.58	104	64.2	1142	0.224	25	4.644	o1.01	159	122	0.7	36.79	154	0.222	26	3.173	<0.01
Follov up Afner 60 days		0.46	116	71.6	1.107	0.217	25	5.317	o1.01	159	119	0.74	38.34	1144	0.22	29	3.37	01.01



# **EFFECT ON TURBINATES**

The Effcet on Turbinates was recorded according to the gradation index. Data was collected and statistically analysed.

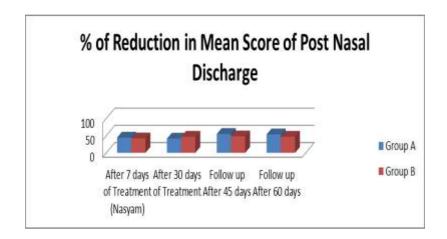
				Group	pΑ									Group B				
Turbinate		ore AT	Mean	Reducti on in	S.D. of	S.E. of Mean	ID: I	न्द Value	ʻp' Yalue	Mean Sc	ore AT	Mean	Reducti on in	S.D. af	S.E. of Mean	Dł	न्द Value	'p' Yalue
нетия	BT	Al .	Score	Mean	-		-			BT	Al .	Score	Mean					ш
of Treatment	148	0.68	0.8	54.05	0.86	0.172	24	4.66	<0.01	196	15	0.46	23.47	0.719	0.136	27	3.416	<0.01
After 3 days c Treatment	148	0.68	0.8	54.05	0.88	0.172	24	4.66	<0.01	196	146	0.5	25.51	0.719	0.136	27	3.684	<0.01
Fallov u After 4 days	p 5 148	0.64	0.84	56.76	0.885	0.173	24	4.85	<0.01	196	146	0.5	25.51	0.719	0.136	27	3.684	<0.01
	p 0 148	0.64	0.84	56.76	0.885	0.173	24	4.85	<0.01	136	146	0.5	25.51	0.719	0.136	27	3.684	<0.01



# EFFECT ON POST NASAL DISCHARGE

The Effcet on Post Nasal Discharge was recorded according to the gradation index. Data was collected and statistically analysed.

				Grou	pΑ									Group B				
Post Nasal Dischar		Score	Reducti on in Mean	Reducti	SIL of	S.E. of Mean	ď	ب Value	"p" Value	Mean Sc		Reducti an in Mean	Reducti	S.D. af	S.E. of Mean	ď.	47 Yalue	"p" Value
е	BT	AT	Score	Mean						BT	ΑT	Score	Mean					
of Treatment	22	123	0.97	44.09	0.386	0.18	29	5.372	<0.01	2.23	13	0.93	41.7	0.734	0.134	29	6.955	<0.01
	30 of 2.2 t	13	0.9	40.91	0.931	0.17	29	5.299	<0.01	2.23	12	103	45.19	0.833	0.152	29	6.787	<0.01
	и 45 2 2	1	12	54.55	0.887	0.12	29	7.413	<0.01	2.23	117	107	47.53	0.86	0.157	29	6.78	<0.01
	ир 80 2.2	103	117	53.18	0.865	0.15	29	7.376	<0.01	2.23	12	103	46.19	0.833	0.152	29	6.787	<0.01



Over all improvement / relief	Group A	Group B
Over an improvement / rener	%	%
Marked relief	40	12
Moderate relief	39	43
Mild relief	11	18
No Relief	10	27

#### **DISCUSSION**

Here in present study Dushta pratishyaya is being correlated with Chronic simple Rhinitis on the basis of its etiology, signs & symptoms. DUshta pratishyaya is the occurrence mostly when upeksha of pratishyaya is being done. Same is with chronic Simple rhinitis results from improper treatment of rhinitis. Further symptoms of Dushta pratishyaya are Nasa avrodha (Nasal blockage in rhinitis), Shirogaurava (Heaviness of head in Rhinitis), Nasa Srava (Mucopurulent Nasal Discharge in Rhinitis), Gandhanasha (Temporaray Hyposmia in Rhinitis). Further complications of both diseases are also similar like Karna Roga (Otitis Media in Rhinitis), Ghor Nayana Amaya (Ophthamic Complications), Kasa & Shopha (Tonsillitis & Pharyngitis). Prognosis is also krichasadhya in both pathies.

Vyaghri taila nasya is administered as nasya in Group A. In group B, nasya with Rasanjanadi taila was administered for comparative assessment. And as I got results after all observations, Vyaghri taila was found more effective in reducing the main signs & symptoms of Dushta Pratishyaya. It may be because of better vata Kapha shamaka mode of action of Vyaghri taila than Rasanjanadi taila as vyoshadi vati was common drug between two groups.

The contents of vyaghri taila are vyaghri, danti, vacha, shigru, surasa, pippali, maricha, shunti, Saindhava and tila taila. Vyaghri has the properties like Antiinflammatory, antibiotic, vasoconstrictor and histamine releasing activity. Hence it is proved to be effective in the management of Dushta Pratishyaya (Chronic Simple Rhinitis). Danti is said to be possessing qualities like kaphapittahara which can be considered as vyadhi pratyanika dravya. Further Vacha, shigru, Surasa medicines are also possessing properties of antibacterial, anti-inflammatory & shirovirechana. These drugs are immunomodulators also. Pippali has antiallergic activity. It effectively reduced passive cutaneous anaphylaxis in rats and protected guinea pigs against antigen-induced bronchospasm; a 30% protection of mast cells was observed in an in-vitro study. A common use of the fruit is in the prevention of recurrent attacks of bronchial asthma and common cold. Maricha has anti-oxidant, anti-Inflammatory, antibacterial properties. Shunthi inhibits prostaglandin synthesis, anti-inflammatory, antioxidant and antibacterial. Tila has properties like free radical scavenging, decreases susceptibility to oxidative stress. All these factors made Vyaghri taila, a good ayurvedic medicine for controlling Dushta Pratishyaya.

Further drugs used in the preparation of Rasanjanadi taila were Rasanjan (Daruharidra aqueous extract), Attivisha, Mustha, Bhadradaruni (Devadaru), Til Taila.

The drug **Rasanjan** is aqueus extract of drug Daruharidra which contains Cerylalcohol, Saponin, Hentriacontane in its stem & roots. Its actions are mainly Antibacterial, Antimicrobial, Antipyretic, Antimicobacterial, Anti-tumour, Anti- inflammatory. So this is very effective in kapha dushti condition of Dushta Pratishyaya. The drug **Attivisha** contains alkaloids (atisine, dihydroatisine, hetisined and heteratisine) & much amount of starch. Attivisha is very ushna virya drug. In classics this drug is explained in Krimiroga, Jvara, Kasa. Mustha & Devadaru are mainly having properties of deepana, Pachana, Krimighana & Vishghana & mode of action is kaphapittahara. So it is also effective in management of Dushta Pratishyaya. But Vyaghri tail as based on the contents of the drug possessed more potency for management of Dushta Pratishyaya. Vyaghri taila Nasya & 30 days Vyoshadi

vati orally provided significant relief in nasal discharge by 47.62%, sneezing by 65.36%, in nasal obstruction by 44.24%, in Headache by 61.58%, in loss of smell by 43.83%, in nasopharyngeal congestion by 61.73%, in swollen turbinates by 54.05% and reduction in post nasal discharge by 40.91%. Rasanjanadi taila Nasya& 30 days vyoshadi vati orally provided significant relief in nasal discharge by 47.74%, sneezing by 57.53%, in nasal obstruction by 44.21%, in Headache by 46.5%, in loss of smell by 35.51%, in nasopharyngeal congestion by 36.79%, in swollen turbinates by 25.51% and reduction in post nasal discharge by 46.19%. In above observations it was observed that the symptom nasal discharge & nasal obstruction was reduced to almost same level in both groups. Only reduction in Post Nasal Discharge was better in group B with Rasanjanadi tail Nasya.

**Vyoshadi Vati** was the common drug between two groups. Effectiveness of Vyoshadi vati in peenas roga is well established earlier also by many researches. So this drug is established drug for management of Dushta Pratishyaya. Here in the present study Vyoshadi Vati acted like a catalyst with Marsh Nasyam in both groups.

Further Nasya acts by acting on shringhatak marma as it is the union point of Shrotas of Jihwa, Ghrana, Netra and Shrotra (Su. Sha. 6/27). It Confirms the influence of Nasya Karma on senses. So in Ayurvedic point of view assimilation and transportation of Nasya drug take place through Shringataka Marma and reaches to local as well as general circulation.

#### **CONCLUSION**

Literal review taken from basic scripts of Ayurveda shows there is detail description of the disease Dushta Pratishyaya, its causative factors, symptomatology, Pathogenesis (samprapti), complications & treatments available. Description obtained from Ayurvedic Classics shows its clinical similarity with Chronic Simple Rhinitis described in modern principle texts of Medicine.

- In this study it is found that structural deformity, immunity and chronicity of Dushta Pratishyaya may play important role in Prognosis like Krichchhra Sadhya, Yapya and sometimes asadhya also.
- In this present study Vyaghri taila marsha nasya with Vyoshadi vati showed significant relief in symptoms of the diease & Sarvadehika lakshanas also than Rasanjanadi taila marsh nasya with vyoshadi vati.

• For better and long lasting results Shodhana & Shamana therapy used compositely may give more encouraging results.

# **BIBLIOGRAPHY**

#### **AYURVEDIC BOOKS**

- 1. Agnivesha. Charaka Samhita, Comm. Chakrapanidatta Ed. Vd. Jadavaji Trikamji Acharya, Chaukhamba Surbharati Prakashana, Varanasi, 2008.
- 2. Bhaishajya Ratnavali of Shri Govind das (2005), 8<sup>th</sup> revised edited and enlaged by Bhishagratna Shri Brahmashanka Mishra, 'Vidyotini' Hindi Commetary Analysis with Appendixes by Shri Kaviraja Ambikadatta Shastri Ayurvedacharya, ed. Shri Rajeshwadatta Shastri, Chaukhambha Sanskrit Sansthan, Varanasi.
- 3. Bhavamishra, Bhavaprakasha Nighantu, (2006), Reprint, Comment. Dr. K.C. Chunekar, ed. Dr. G.S. Pandey, Chaukhambha Bharati Academy, Varanasi.
- 4. Bhavamishra. Bhavaprakasha with Vidhyotini Hindi Comm., Ed. by Shri Brahmashankara Mishra, Chaukhambha Sanskrita Sansthan, Varanasi, 11<sup>th</sup> edition, 2005.
- Agnivesha Charakasamhita with Ayurveda Dipika commentary of Charkapanidatta.
   Chaukhambha Surabharathi Prakashana, Varanasi, reprint 2000. Charaka Samhita Chikitsa Sthana.
- Data Base on Medicinal Plants: By P. C. Sharma, M. B. Yelne, T. S. Dennis.: Publisher Documentation and Publication Division, Central Council of Research in Ayurveda and Siddha. Jawaharlal Nehru Bharatiya Chikitsa Avum Homeopathy Anusandhana Bhavan. New Delhi – 110058: Printed on 2001. Volume 1,2,4,5 and 6.
- 7. Sharangdhar Samhita, (2005), Comment. Adhamalla"s "Dipika" and Kasiram"s" Gudhartha Dipika", ed. Pt. Parashuram Shastri Vidyasagar, Reprint, 6<sup>th</sup> edi. Chaukhamba Orientelia, Varanasi.
- 8. Madhavakara. Madhava Nidana (Purvardha) with 'Madhukosha' Sanskrita comm. by Shrivijayarakshita & Shrikanthadatta and 'Vidyotini' Hindi Comm. by Shri Sudarshana Shashtri, edited by Prof. Yadunandana Upadhyaya. Chaukhambha Sanskrita Bhavana, Varanasi, 32<sup>nd</sup> edition.
- 9. Madhavakara. Madhava Nidana (Uttarardha) with 'Madhukosha' Sanskrita comm. by Shrivijayarakshita & Shrikanthadatta and 'Vidyotini' Hindi Comm. by Shri Sudarshana Shashtri, edited by Prof. Yadunandana Upadhyaya. Chaukhambha Sanskrita Bhavana, Varanasi, 31<sup>st</sup> edition.

- 10. P.V. Sharma. Dravyaguna Vignana, Vol. 2, Chaukhambha Bharati Academy, Varanasi, 2003.
- 11. Sharangdhar Samhita, (2005), Comment. Adhamalla's 'Dipika' and Kasiram's 'Gudhartha Dipika', ed. Pt. Parashuram Shastri Vidyasagar, Chaukhamba Orientelia, Varanasi, 7<sup>th</sup> edition, 2008.
- 12. Vagabhata, Ashtanga Samgrah Shashilekha comm. by Indu, Ed. By Shivprasada Sharma, Chowkhamba Sanskrit Series Office, Varanasi, 2006.
- Vagbhata. Ashtanga Hridaya Sarvanga Sundari Comm. Arunadatta & Ayurvedarasayana comm. – Hemadri, Ed. By Pt. Sadashiva Shastri Paradakara, Chaukhamba Surbharati Prakashana, Varanasi, 2007.
- 14. Vriddha Jeevaka. Kashyapa Samhita with Vidyotini Hindi Comm. & transalation of Sanskrita introduction by Shri Satyapala Bhishagacharya, Chaukhambha Sanskrita Sansthana, Varanasi, 8<sup>th</sup> edition.
- 15. Chakradatta Of sri Chakra panidatta with Bhavartha Sandipini Hindi comentry By Jagadishvara Prasad Tripati. Published by Chaukhamba Series office. Edition 5<sup>th</sup> 1983. Nasa Roga Chikitsa Chapter

#### **MODERN BOOKS**

- 1. B.D. Chaurasia. Human Anatomy-Regional and Applied, C B S Publishers 3<sup>rd</sup> Edition Volume-3.
- 2. Davidson's Principles and practice of Medicine, Published by Churchill Livingstone, 18<sup>th</sup> edition, 1999.
- 3. Divya Prabhat. Practical ENT, Vora Medical Publication, 2<sup>nd</sup> edition, reprint, 1998.
- 4. Gerard J. Tortora & Bryan Derrickson. Principles of Anatomy and Physiology, published by John wiley & Sons, Inc. 11<sup>th</sup> edition.
- 5. Ian S Mackay, T R Bull. Scott-Brown's Otolaryngology, Butterworth-Heinemann International Editions, 6<sup>th</sup> edition, 1997, Volume-4 Rhinology.
- 6. John Jacob Ballinger. Diseases of the Nose, Throat, Ear, Head and Neck, Lea & Febiger, Philadelphia 1977, 12<sup>th</sup> edition.
- 7. K.B Bhargava, S.K. Bhargava & T.M. Shah. A Short Text Book of ENT Diseases; Usha Publications Mumbai, 7<sup>th</sup> Edition, 2005.
- 8. Macminn's Color Atlas of Human anatomy, Elsevier Science Ltd 5<sup>th</sup> Edition, 2003.
- 9. Michael Gleeson. Scott-Brown's Otolaryngology, Butterworth-Heinemann International Editions, 6<sup>th</sup> edition, 1997, Volume-1, Basic Sciences.

- 10. Mohammad Maqbool. Text Book of Ear Nose and Throat Diseases, Jaypee Brothers Medical Publishers (P) Ltd. 9<sup>th</sup> Edition 2000.
- 11. P.L. Dhingra. Diseases of Ear Nose and Throat, Published by Elsevier, a divison of Reed Elsevier India Private limited, New Delhi, 4<sup>th</sup> Edition, 2007.

# **OTHER BOOKS**

- 1. B.K. Mahajan, Medtods in Biostatistics, 6<sup>th</sup> edition, 1997.
- 2. Baghel M.S. (2005), Researches in Ayurveda, 2<sup>nd</sup> edi, Mridu Ayurvedic Publication & Sales.
- 3. P.C. Sharma et al (2000), Database on medicinal plants used in Ayurveda, Documentation & Publication division, C.C.R.A.S., New Delhi, Vol. 1 to 8.