

**AYURVEDIC MANAGEMENT OF KAPHAJA SHIROROGA
(CHRONIC SINUSITIS)- A CASE STUDY**

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ABSTRACT

Introduction:- Chronic sinusitis, especially in the frontal and maxillary sinuses, is a long-standing inflammatory condition often resistant to conventional treatment. In Ayurveda, it correlates with *Kaphaja Shiroroga*, caused by an imbalance of *Kapha dosha*, leading to symptoms like nasal congestion, facial pain, and headache. **Material and Method:-** A 49-year-old patient diagnosed with chronic Rhinosinusitis unresponsive to long-term allopathic treatment underwent *Kaphaja Shiroroga chikitsa* that include *Nasya* (Medicated nasal instillation), *Sthanik Lepa*, along with *Shamana Chikitsa* (Palliative treatment) using herbal formulations. along with dietary and lifestyle changes to balance *Kapha*. **result** - After two months, the patient showed significant improvement. Follow-up revealed continued relief and no recurrences, highlighting the effectiveness of ayurvedic management in chronic sinusitis.

KEYWORDS: Chronic Sinusitis, *Kaphaja Shiroroga*, *Ayurveda*, *Nasya*, Herbal Medicine.

INTRODUCTION

Acharya Sushruta in his text *Sushrut Samhita* has outlines eleven types of *Shiroroga* in *uttaratantra*.^[1] One such disorder, *Kaphaja Shiroroga*, closely corresponds to sinusitis.

The clinical features of *Kaphaja Shiroroga* described by *Acharya Sushruta* are *Guru Pratistabdham* (Heaviness and fullness of head), *Himam* (Coldness in head), *Shuna*

Akshikoota Vadanam (Swelling of face especially around the eyes), *Shirobhitapa* (Headache), *Shirogalam Kaphopdigdham* (Feeling of having a coating of phlegm inside the head and throat).^[2] In modern medicine, sinusitis is characterized by inflammation of the sinus linings, which are air-filled spaces in the forehead, cheeks, and nasal region. This inflammation often results in facial pain, nasal congestion or discharge, headaches, and, in some cases, fever.^[3] Based on these clinical features, *Kaphaja Shiroroga* can be correlated to sinusitis.^[4]

The human skull has four sets of paired paranasal sinuses—maxillary, ethmoid, sphenoid, and frontal with the maxillary sinuses being most affected. A study showed that 40% of maxillary sinuses showed abnormalities followed by 14% of anterior ethmoidal sinuses, 2.5% of sphenoidal, 2% of frontal and 1.5% of posterior ethmoidal sinuses.^[5] While sinusitis is commonly triggered by a viral infection, it can also arise from bacterial, fungal, or allergic causes. Due to increased environmental pollution and busy lifestyle in the present era, incidence of rhinitis is increasing, which leads to sinusitis if not properly treated.

A study analyzing outpatient antibiotic prescriptions in India's private sector found that acute upper respiratory infections accounted for 20.4% of antibiotic prescriptions.^[6] This category also includes sinusitis, which often see a high use of antibiotics, contributing significantly to healthcare expenditure through direct costs such as physician visits and antibiotic purchase.

The treatment of sinusitis includes antibiotics, decongestants, antihistamines, analgesics and surgical procedures. Although these treatments provide their best contributions towards the healing process, sinusitis is not successfully combated.^[7] Drug side effects, like rhinitis medicamentosa and thickened secretions, can worsen the condition, while surgeries are costly and risky.

In view of the magnitude of the problem, there is a need for a therapy within reach of the patient, free from side effects and having curative properties. Considering all the above factors *Nasya*, *Sthanik Lepa* and *shaman chikitsa* were selected which are indicated in *Kaphaja Shiroroga*.^[8]

CASE REPORT

Basic information on the patient

Age: 49 years

Sex: Male

Religion: Hindu

Occupation: Electrician on ship

Chief complaints: frequent episode of frontal headache, Persistent nasal congestion, facial heaviness, orbital swelling and fatigue since the last 3 years.

History of present illness: The patient was apparently normal 3 years ago and he gradually developed complaints of frequent episodes of headache, recurrent nasal congestion, heaviness in the forehead, facial pain, and occasional post-nasal drip. Symptoms worsened during cold weather and after consuming heavy or oily foods. The patient had a history of frequent antibiotic use with temporary relief. The intervals between the headache episodes were with short duration.

Past history: Nothing significant

Family history: Nothing significant

Clinical findings

- *Prakriti: Kapha-Pitta dominant*
- *Nadi pariksha: Kapha vitiation*
- *Nadi sankhya- 74/minute*
- Blood pressure- 130/80 mm of Hg
- Diagnostic imaging: X-Ray paranasal sinuses with Water's and Caldwell's view revealed mucosal thickening in the frontal and maxillary sinuses suggestive of Chronic rhinosinusitis.
- Ayurvedic diagnosis: *Kaphaja Shiroroga*

Samprapti ghataka

- *Dosha – Kapha*
- *Dushya -Rasa, Rakta*
- *Agni-Jatharagnimandya*
- *Srotas -Rasavaha, Raktavaha, Annavaha*
- *Nidana -exposure to Anupa Desha, excess intake of guru, Snigdha Aahar, untimely intake of food, Ratrijagarana, Stress, lack of physical activity.*

Local examination: Table 1

Serial number	Examination	Findings
1	Anterior Rhinoscopy	Inferior turbinate hypertrophy, Nasal mucosal thickening
2	Posterior Rhinoscopy	Postnasal drip present
3	Otoscopy	Bilateral retracted eardrums
4	Palpation over maxillary sinusitis	Tenderness
5	Palpation over frontal sinusitis	Pain and tenderness
6	Eyes –visual acuity	Unaided – 6/36 bilateral Aided- 6/9 bilateral Pinhole -6/12 bilateral
7	Orbits	Swelling on and off
8	IOP	Within normal limits
9	Fundus examination	NAD
10	Dental Examination	NAD

Treatment

Given for 2 months.

Treatment prescribed: Table 2

Serial number	Therapy	Formulations	Dose		Duration
1	<i>Shirovirechan-Marsh Nasya</i> <i>Pratimarsh Nasya</i>	<i>Anu Taila</i>	6 drops	Local <i>Snehan</i> with <i>Til taila</i> and <i>swedana</i> with <i>Dashmool kashay</i>	7 days- 3 sessions With intervals of 1-week prati marsha nasya in between
2		<i>Panchendriyavardhan Taila</i>	2 drops		
3	<i>Shaman Chikitsa</i>	<i>Aampaachak vati</i> <i>Pathyadi Ghan vati</i> <i>Sutashekhar</i> <i>Punarnavadi Kashay</i>	2 tablets of 250mg 3 times a day 15ml 2 times a day	Warm water	6 weeks
4	<i>Pathya</i>	<i>Triphala Ghrita</i>	15 ml at bedtime	Warm water	21 days
5	<i>Sthanik Lepa Chikitsa</i>	Powdered formulation of <i>Vacha</i> , <i>Yashtimadhu</i> & <i>Daruharidra</i>	Paste is formed with 10 gms of mixture with water	Local application at sinus region two times a day	21 days

Ahara vihara during treatment

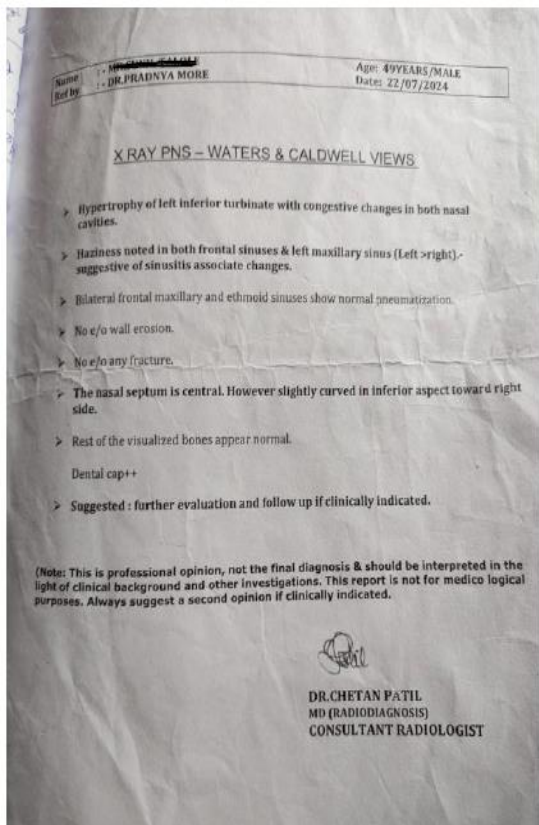
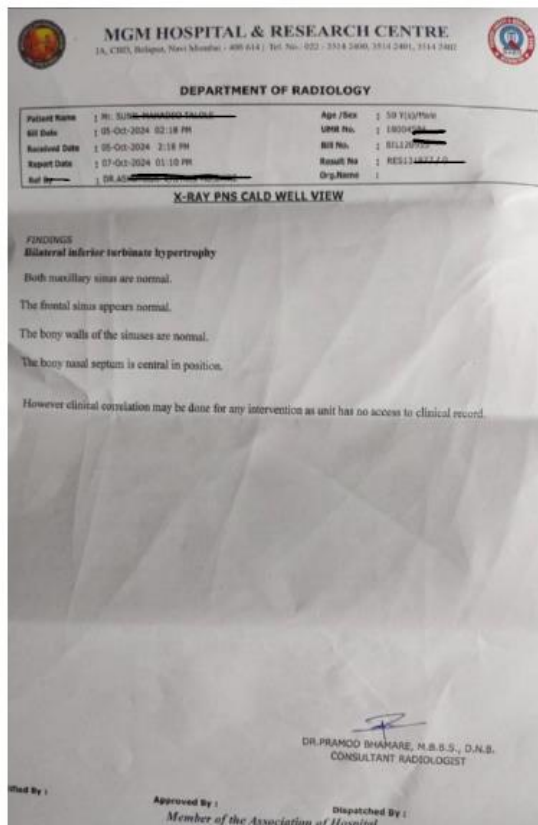
Avoiding cold water, oily and spicy foods, daytime sleeping, and kapha-aggravating items such as fruits, juices, milk, and curd. Emphasis was placed on timely meals. Patient was also advised to increase physical activity, avoid head baths, and minimize exposure to direct wind or air conditioning.

RESULTS

Symptoms	Day 0	Day 7	Day 20	Day 30	Day 60
<i>Guru Pratistabdham</i> (Heaviness in head)	3	2	1	0	0
<i>Shuna Akshikoota Vadanam</i> (Swelling around the eyes)	2	1	0	0	0
<i>Shirobhitapa</i> (Headache)	4	3	1	1	0
<i>Shirolagam Kaphopdigdham</i> (Phlegm inside head and throat)	3	2	1	0	0

*(0-no symptoms, 1-mild, 2-moderate, 3-severe, 4-profound)

Radiological finding

Before treatment	After treatment
<p>Haziness in both frontal and maxillary sinuses.</p>  <p>Figure 1</p>	<p>Both frontal and maxillary sinuses appear normal and well-aerated.</p>  <p>Figure 2</p>

After the 2 months of the treatment, patient experienced marked improvement in his symptoms. X-Ray of paranasal sinuses with Water's and Caldwell's views done after 1 month after the completion of treatment revealed well-aerated maxillary and frontal sinuses.

DISCUSSION

Chronic sinusitis is a widespread health concern that markedly affects patients' daily life and productivity. From an *Ayurvedic* point of view, excessive *Kapha* accumulation due to cold, damp environments, heavy foods, and lack of physical activity leads to mucus stagnation, resulting in blocked sinuses. The *Vata dosha* imbalance causes dryness and impaired mucus clearance, worsening the congestion. *Pitta* aggravation contribute to inflammation, producing symptoms like burning sensation, and yellow nasal discharge. Further, external factors like dust, pollution, and seasonal changes also influence the severity and recurrence of the condition.

For treatment purpose *Ayurvedic* approach to sinusitis focuses on eliminating excess *Kapha*, improving nasal drainage, and strengthening immunity.

Acharya Vagbhat has mentioned the use of *Stanik Lepa*, *Nasya*, *Ruksha*, *Ushna*, *Teekshan Dravya* for *Kaphaja Shiroroga* treatment. Considering all these factors the treatment mention in this case study works through multiple mechanisms to address the root cause of congestion, inflammation, and excess mucus production.

Probable mode of action of drugs used

- *Anu Tail nasya*^[9]- Acted as a *Shirovirechana* agent that facilitates *Srotoshodhana* (Channel cleansing) by clearing nasal congestion, liquefying, and expelling *kapha*, thereby balancing all three doshas and alleviating heaviness in the head.
- *Panchendriyavardhana tail nasya*^[10]- Enhanced *Indriya Bala* (Sensory strength) by improving nasal function and olfactory perception, which is often impaired in chronic sinusitis.
- *Sthanik Lepa*- A combination of *Vacha*, *Yastimadhu*, and *Daruharidra* acted synergistically. *Vacha*, with its *Lekhana* (Scraping) action, helps in reducing excessive *Kapha* accumulation. *Yastimadhu*, known for its *Shothahara* (Anti-inflammatory) properties, reduces swelling and congestion in the sinuses. *Daruharidra*, being a *Krimighna* (Antimicrobial) agent, prevents secondary infections, which are common in chronic sinusitis.

➤ Shamana chikitsa-

- *Amapachana vati*^[11]- Helped to digest *Ama*, preventing overproduction of mucus and help to restore function of *Rasa, Rakta and Anavaha strotas*.
- *Pathyadi Ghana Vati*^[12]- Played a crucial role in *Deepana* (Digestive stimulation), *Pachana* (Metabolic enhancement), *Shothahara* (Anti-inflammatory), and *Srotoshodhana* (Clearing nasal channels), effectively reducing Kapha accumulation in the sinuses.
- *Sutshekhar Rasa*,^[13] A classical pitta-balancing formulation, aided in maintaining doshic equilibrium, preventing excessive heat or inflammation.
- *Punarnavadi Kashaya*^[14]- Known for its *shothahara* (Anti-inflammatory) and *Mutrala* (Diuretic) properties, helped in reducing fluid retention and sinus congestion.
- *Triphala Ghrita*,^[15] acted as *Chakshushya* (Eye tonic) and *Kapha-Vata Shamana*, not only clears nasal passages but also strengthens eye function, benefiting overall sensory health.

This comprehensive approach helps to liquefy and expel *Kapha*, reduce inflammation and swelling, prevent microbial infections, and enhance sensory function and circulation, ultimately providing relief in *Kaphaja Shiroroga*.

CONCLUSION

According to this case study it can be concluded that *Ayurvedic* protocol in management of *Kaphaja Shiroroga* in comparison with conventional treatment for chronic sinusitis, demonstrated significant clinical efficacy. The patient had been on long term allopathic treatment without relief but responded well to ayurvedic intervention involving *Nasya*, *Nasalepa* and the systemic medications which arrested further pathogenesis and improving the symptoms thereby improving the quality of life of the patient.

Additionally, this case showed a noteworthy improvement in vision of patient, suggesting that this ayurvedic intervention may have broader systemic benefits beyond symptomatic relief. Further studies and clinical evaluations are warranted to establish a more comprehensive understanding of its therapeutic scope.

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