

Ayurvedic Approach for Management of Kaphaja Dushta Pratishyaya

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Abstract—A 12-year-old male patient who presented with symptoms of nasal obstruction, mucopurulent discharge, night time cough, facial swelling, heaviness in head associated with deviated nasal septum and multiple turbinate hypertrophies leading to airway blockage were recommended for surgical correction.

This was treated with Ayurvedic intervention targeting both symptomatic relief and underlying imbalances such as breathing difficulty, running nose, night time cough, facial swelling, heaviness in head with herbal formulations, iobine tab, kanchanar guggulu, pancha tiktaka ghrita guggulu, triphala guggulu, kashaya - combination of Seethopaladi, Harithaki, Trikatu and Yashtimadhu, were administered. The patient's diet was tailored to boost immunity and support the healing process. The treatment yielded significant improvements in the patient's symptoms and overall well-being. Moreover, reduced the need for immediate surgical intervention.

Index Terms—#Sinusitis #cold #Dns #Ayurvedic management #dushta pratishyaya

I. INTRODUCTION

Sinusitis, a prevalent condition affecting individuals during their teenage years, presents a multifaceted challenge. Often, surgical correction is recommended as an only solution. However, Ayurvedic treatment, has gained attention due to its holistic and non-invasive nature. This case study delves into a unique instance wherein a teenage patient grappling with sinusitis and suggested for surgical intervention sought an Ayurvedic approach. Over the course of two and half months, Ayurvedic management offers insights into the potential efficacy of this traditional system of medicine in addressing sinusitis and its related complications. The case sheds light on the

outcomes of the Ayurvedic intervention, highlighting the role of holistic healing in the context of sinusitis management.

II. PATIENT INFORMATION

Background Information:

The patient was born to non-consanguineous parents, full-term normal delivery. Family history reveals a recurring pattern of sinus issues, suggesting a potential genetic predisposition to respiratory concerns.

Presenting Symptoms:

The patient's current condition is marked by severe nasal obstruction, mucopurulent discharge, night-time cough, heaviness in head and facial swelling, which persisted for the past 15 days. These symptoms have significantly impacted the patient's quality of life and daily activities.

Medical History:

The patient's medical history indicates a history of on-and-off sinus issues, possibly indicating a chronic susceptibility to respiratory ailments. Previous medical interventions have involved allopathic management, including the use of NSAIDs, antibiotics, and antihistamines to address the sinusitis symptoms. However, these measures failed to provide substantial relief, prompting a recommendation for surgical intervention.

III. CLINICAL FINDINGS

General examination:

Patient is having normal stature and BMI within normal range indicating normal weight.

Inspection:

Deviated nasal septum towards the left, this could lead to airflow obstruction and potential breathing difficulties. The inferior turbinates appear enlarged on both sides. This hypertrophy could contribute to nasal congestion and obstruction. There is noticeable swelling or inflammation observed in the maxillary sinus on the right side of the patient's face. This could indicate an underlying sinus infection or inflammation.

Palpation:

When palpating the area around the right maxillary sinus (located in the cheekbone area), the patient exhibits mild tenderness.

Auscultation:

While auscultating the patient's chest, grade 1 wheezing is detected.

Other Observations: Apart from the mentioned clinical findings, no additional significant abnormalities are noted during the examination.

IV. DIAGNOSTIC ASSESSMENT

CT paranasal sinuses

Mucosal thickening in bilateral maxillary, ethmoid, sphenoid, and left frontal sinuses. Hypoplastic right frontal sinuses. Osteomeatal complex, sphenoid ethmoid recess and naso frontal recess are opacified on both sides. Mild deviated nasal septum to left side.

CT Thorax

Atelectasis noted in left lower lobe. Centrilobular nodules few of them showing tree in bud appearance noted in left lower lobe-endobronchial spread of infection.

Nose endoscopy

Sinusitis, DNS to left, Bilateral HIT, HMT, Adenoid HT

Ayurvedic

On rogi pareeksha patient is having kapha pitta prakriti with madyama Sara and satwa. Agni is prakrutha with madyama jarana sakthi. Mala is found to be badha with once in 3 days. Mutra and nidra are normal. Alpa sophya is present in the maxillary area.

Differential diagnosis: Peenasa, Kaphaja Pratishyaya, Kaphaja Dushta pratisyaya

Prognosis: Krehra sadya

V. THERAPEUTIC INTERVENTIONS

Internal Medications:

a. Iobine Tablet: (J&J DeChane Laboratories, Contains Hydrocotyle asiatica, Swertia chirata, Hemidesmus indicus, Sulphur, Lawsonia alba, Melia azadirachta, Calotropis gigantea)

Dosage: One tablet in the morning and one tablet at night with hot water after food.

b. Kanchanara Guggulu Tab 500mg:

Dosage: One tablet in the morning and one tablet at night with hot water after food.

c. Pancha Tikta Grita Guggulu Tab 500mg:

Dosage: One tablet in the morning and one tablet at night with hot water after food.

d. Triphala Guggulu Tab 500mg:

Dosage: One tablet in the morning and one tablet at night with hot water after food.

Internal Liquid Formulations:

a. Combination of Vasarishta (150ml), Pushkaramoola (100ml), Kanakasava (100ml), Sudarsanasava (100ml):

Dosage: 30ml, three times a day, after food.

b. Kashaya Combination:

A mixture of Yashtimadhu (5g), Seethopaladi (20g), Haritaki (5g), and Trikatu (5g). Dosage: 5g of the mixture with honey in the morning and night after food.

Pathya (Favorable diet and habit to be followed):

- Warm Fluids: Drink warm water, herbal teas, and soups.
- Steam Inhalation: Inhaling steam with eucalyptus oil or tulasi.
- Honey: Consume honey mixed with warm water.
- Ginger: Incorporate ginger in your diet through teas, soups, or as a spice. Ginger has anti-inflammatory properties.
- Turmeric: Turmeric milk or add turmeric to meals.

- Warm Foods: Eat warm, easily digestible foods like khichdi, porridge, and soups.
- Old shali rice, kulatha, green gram,pravala, drum stick should be used.
- Rest: Give rest to body to recover and heal.
- Hot water bath

Apathya (Unfavorable diet and habits not to be followed):

- Cold Foods and Drinks: Avoid cold beverages, ice creams, and foods.
- Processed Foods: Stay away from processed, oily, and spicy foods that might worsen congestion.
- Caffeine: These can dehydrate the body and may interfere with the healing process.
- Smoke and Pollution: Avoid exposure to smoke and pollution as they can irritate the respiratory tract.
- Strenuous Activities: Avoid heavy physical activities and outdoor games that can strain the body and slow down the healing process.
- Sweets and Sugary Foods.
- Excessive thinking.
- Suppression of natural urges.
- Day sleep.
- Late night sleep.

Follow up and outcomes:

Table 1. Patients concerns and percentage change after therapeutic interventions

Symptoms	Follow up			
	7days	14 days	44 days	74 days
Breathing difficulty	30% reduced	70% reduced	80% reduced	95% reduced
Nasal discharge	50% reduced	60% reduced	80% reduced	100% reduced
Facial swelling	80% reduced	90% reduced	100% reduced	100% reduced
Heaviness in head	60% reduced	70% reduced	100% reduced	100% reduced
Night time cough	30% reduced	40% reduced	75% reduced	100% reduced
Grade 1 Wheezing	30% reduced	50% reduced	90% reduced	100% reduced
Turbinate hypertrophies	05% reduced	20% reduced	50% reduced	80% reduced

In the first to third follow up, no major additional complaints were mentioned and the patient was

advised to continue the same medications.

On fourth Follow-Up, the medication plan was reviewed and modified as follows:

Iobin Tablet:

Taken twice a day, with 2 tablets each in the morning and night, ingested with hot water after food.

Kanchanar Guggulu Tab 500mg and Pancha Tikta Grita Guggulu Tab 500mg: Taken twice daily, with one tablet each after morning breakfast and after night meals with hot water.

VI. DISCUSSION

In this case study, we analyzed a patient presenting with symptoms of Pratishtyaya, which is a common respiratory disorder characterized by symptoms such as mucopurulent nasal discharge, nasal obstruction, facial swelling, and heaviness in the head. The patient's history reveals irregular dietary habits including the consumption of junk foods, ice creams, and veghadharana (unwholesome eating habits), suggesting a potential etiological connection between the dietary choices and the development of Pratishtyaya. Improper treatment and further exposure to etiology may leded development of dushta pratishtyaya. The symptoms are kapha pitta vikaras. So here kapha pitta samana aushadha are used.

Iobine tablets mainly contain Hydrocotyle asiatica,Swertia chirata,Hemidesmus indicus, Sulphur,Lawsonia alba,Melia azadirachta,Calotropis gigantea which pacifies pratishtyaya. Kanchanara guggulu is used as grandhi nasana to reduce the mass of multiple turbinate hypertrophies. Triphala guggulu acts as a potent analgesic and anti-inflammatory drug.Pancha tikta ghrita guggulu is pita samana. Arishta asava combinations act together to reduce pratishtyaya and kasa which helped to reduce wheezing, where kashaya blend may provide relief from respiratory congestion, promote healthy mucus production, and aid in soothing the respiratory tract. These combinations of medicines together result in significant reduction in symptoms as shown in Table labove.

Patients' perspective

The patient commented it as he came first in outpatient department with full of chaos where he was suggested

for surgical intervention by allopathic doctors. Then when he started ayurvedic medication within one week he started to get significant relief on symptoms, where his confidence on ayurveda got increased.

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