“MANAGEMENT OF VATAJA PRATISHYAYA WITH CHITRAKA HARIKTAI AVLEHA AND ANU TAILA NASYA”

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ABSTRACT
In the present era, there is a controversial place for faith in tradition and authority for ancient texts. Faith has been replaced by skepticism and scientific study, even for the traditionally established truths for Ayurveda. For laymen, clinical research means a process of growing ideas, but to a research scholar it means definite discipline which leads to logical conclusions, based on sound logical evidences leading to an advancement of knowledge and also proving the old facts. Clinical study has its own importance in assessing the infra structure of the disorder (i.e. effects on mind and body) and also assessing the efficacy of drugs clinically, the evaluation of diseases and drugs is one of the important fields of research. Here, the objectives of clinical study is same i.e. to assess the efficacy of Ayurvedic drugs in Management of vataja Pratishyaya. Total 20 patients were registered and were given Chitraka Haritaki Avleha 10 gms. Twice a day with milk orally and Anu Taila Nasya 3 drops in each nostril twice a day. All the patients have completed the trial and there was markedly improvement in 10%, moderately improvement in 60% and slightly improvement in 25% in 21 days.

KEYWORDS: Chitraka Haritaki Avleha, Anu Taila, vataja Pratishyaya.

INTRODUCTION
Good health is considered to be the root of objectives of human life like Dharma, Artha, Kama and Moksha.[1] Health does not mean a mere absence of disease but it is a physical, mental and spiritual well being of a person.[2] Disease stands as a great obstacle in the
achievement of good health. Ayurveda, the science of life offers a natural care to the protection of health and prevention of diseases.[3] Certain disease may not be life threatening but increasingly annoying and irritating to the individual in his routine activity. Moreover when neglected they may lead to a series of complications later. A very common clinical conditions, Pratishyaya is one among them[4]; increasingly prevalent now a days, demanding greater concern over it.

While going through the Ayurvedic classic we observe a vivid description of the disease pratishyaya. There is descriptive mention of this disease with regard to aetiopathogensis, classification, symptomatology, complication and management.[5] This reflects that ancient Ayurvedic galary was well versed with the concept of Pratishyaya. The importance of this disease is reflected by the fact that Aacharya Sushruta has mentioned it as separate chapter for detail description of Pratishyaya.[6]

Aacharya Vagbhatta has admitted that if clinician neglects this disease, it becomes a potential cause of Kshya Roga[7] (A. H. Ut. 19/2). Apart from that, Pratishyaya itself is an aetiological factor for various other diseases also.


Present study is planned to evaluate the nature of the disease, course of the disease and management with the help of some herbal drugs with the hope that there will prove to be more efficacious and least toxic. The research work was planned in such a way that effect of two herbal formulations named Chitraka Haritaki Avleha, (C.D. 58/31-33)[9] and Anu Taila Nasya (Ch. Chi. 26/139-140)[10] were evaluated under a research project entitled “Management of Vataja Pratishyaya with Chitraka Haritaki Avleha and Anu Taila Nasya”

**MATERIALS AND METHODS**

To meet the objective of present research work; total numbers of twenty patients of Vataja Pratishyaya were selected from Shalakya Tantra OPD/IPD of hospital affiliated to R.G.G.P.G.Ayu. College Paprola; after obtaining their consent. Case study was random and
patients were selected regardless of the age, sex, caste, creed or religion etc. History of all patients was recorded according to the proforma. All the patients were followed up after commencement of trial.

**CRITERIA FOR SELECTION OF PATIENTS**

1. **Inclusion criteria**

   Patient of different age group having features described in Vataja Pratishyaya were selected.

2. **Exclusion criteria**

   a) Severe nasal obstruction i.e. severe DNS, adhesion of nasal cavity, nasal polyp.
   b) Systemic disorders like hypertension, diabetes mellitus.
   c) Pregnancy and lactation.

**MODE OF ADMINISTRATION AND DOSE OF TRIAL DRUG**

Chitraka Haritaki Avleha orally 10 gm\(^{11,12}\) twice a day with milk and Anu Taila Nasya\(^{13,14}\) locally 3 drops in each nostril, twice a day for duration of 21 days & followed up after completion of trial every week for 1 month.

**CRITERIA OF ASSESSMENT OF RESULT**

1. **Subjective**

    Grading and scoring system was adopted for assessing each symptom before the commencement of trial and after completion of trial. The scoring of criteria of assessment was analysed statistically. Paired ‘t’ test was carried out at level of \( P < 0.05 \) and \( p <0.001 \). Overall results were adjudged in terms of percentage relief obtained in symptoms.

2. **Objective criteria**

    a) **Haematological parameters**

        Hb %, TLC, DLC, ESR, TEC (Total eosinophilic count)

    b) **Radiological parameters**

        ‘X’ rays PNS (water’s view with open mouth).

**OBSERVATION**

The observations have been made in the present study and clinical profile of 20 patients.
No. of patient registered  
20

No. of patients completed trial  
20

**EFFECT OF THERAPY**

The efficacy of both the therapies i.e. Chitaraka Haritaki Avleha and Anu Taila Nasya in combination was adjusted in 20 patients on various parameters and results were derived after execution of statistical methodology.

1. *Aandha Pihita nasa* (Nasal obstruction and Stuffiness)

   The initial means score of nasal obstruction and stuffiness was 1.8 which was reduced to 0.5 after the treatment. The percentage of relief was 72.2 %. Which is significant statistically at the level of P<0.001 (t =7.9).

2. *Tanusrava pravartini* (Watery discharge)

   The initial mean score of watery nasal discharge was 2.45 which were reduced to 0.4 after the treatment. The percentage of relief was 83.67 %. Which is significant statistically at the level of P<0.001 (t = 15.15).

3. *Galtalvoshath shoshach* (Dryness in throat, palate and lips)

   The initial mean score before the treatment was 1.00 which was increased to 1.25 after the treatment, this increase mean score was statistically insignificant at the level of P > 0.05 (t =1).


   The initial mean score before the treatment was 1.3 which was reduced to 0.4 after the treatment. The percentage of relief was 66.1%. Which is significant statistically at the level of P < 0.001 (t = 5.01).

5. *Swaropghata* (Hoarseness)

   The initial mean score before the treatment was 1.3 which was reduced to 0.2 after the treatment. The percentage of relief was 84.6%. Which is significant statistically at the level of P<0.001 (t = 11).
6. *Kshawathu* (Sneezing)

The initial mean score before the treatment was 2.3 which were reduced to 1.6. The percentage of relief was 73.9%. Which is significant statistically at the level of $P < 0.001$ ($t = 11.57$).

7. *Gharanatitoda* (Painful sensation in nose)

The initial mean score before the treatment was 1.2 which was reduced to 0.3 after the treatment. The percentage of relief was 72.95 %. Which is significant statistically at the level of $P <0.05$ ($t = 4.4$).

**Effect of Chitraka Haritaki Avleha and Anu Taila Nasya on haematological findings.**

In treated group haematological parameters only total eosinophilic count (TEC) shows statistically significant difference at the level of $P <0.05$ ($t =2.15$) rest of the haematological parameters changes are statistically insignificant. The percentage relief observed in TEC is 18.9 % after the treatment.

**OVER ALL RESULT OF TREATMENT ON VATAJA PRATISHYAYA.**

<table>
<thead>
<tr>
<th>Assessment</th>
<th>No. of patients</th>
<th>% age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cured</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Markedly improved</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Moderately improved</td>
<td>12</td>
<td>60</td>
</tr>
<tr>
<td>Slightly improved</td>
<td>5</td>
<td>25</td>
</tr>
<tr>
<td>Unimproved</td>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

**DISCUSSION**

*Chitraka Haritaki Avleha* having predominance of *katu* and *tikta rasa* (27.44%) each, *laghu guna* (28.96%), *ushna virya* (77.18%), *katu vipaka* (52.08 %) and *vata kapha hara* properties (80.30%). Whereas *Anu Taila Nasya* having predominance of *Tikta rasa* (34.92%) *guru*, *snigdha guna* (39.96%), *ushna virya* (73.26 %), *katu vipaka* (53.28%) and *vata kapha hara* properties (77.2%). This can counteract the samprapti of the disease pratishyaya. According to different classical textual references the drug also possess properties like *shotha hara* (Anti inflammatory), *Vedanahara* (Analgesic), *Agni deepna* (stomachis) *vata hara* (vata alleviating), *Rasayana* (Immuno modulator). Which further verify the action of the trial drugs over the disease *vataja pratishyaya*. 
SYMPTOMS OF VATAJA PRATISHAYAYA VIS-A-VIS

MODERN SYMPTOMATOLOGY

<table>
<thead>
<tr>
<th>No.</th>
<th>Ayurvedic Symptom</th>
<th>Modern Symptom</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aandha Pihita nasa</td>
<td>Nasal Obstruction and stuffiness</td>
</tr>
<tr>
<td>2</td>
<td>Tanusarava pravartini</td>
<td>Watery nasal discharge</td>
</tr>
<tr>
<td>3</td>
<td>Galtalvoshath shoshach</td>
<td>Dryness in throat, palate, lips</td>
</tr>
<tr>
<td>4</td>
<td>Nistodah shankhyostathadant,shankh, shirovyatha</td>
<td>Pricking sensation in region of temples; Painful sensation in the teeth, temporal region and head</td>
</tr>
<tr>
<td>5</td>
<td>Swaropghata</td>
<td>Hoarseness</td>
</tr>
<tr>
<td>6</td>
<td>Kshawathu</td>
<td>Sneezing</td>
</tr>
<tr>
<td>7</td>
<td>Gharanatitoda</td>
<td>Painful sensation in nose</td>
</tr>
</tbody>
</table>

CONCLUSION

If we see the symptomatology of vattaja pratishyaya in Ayurveda we find the same symptomatology of acute rhinitis. In modern’s acute rhinitis and allergic rhinitis we found the same symptoms in the beginning of disease. It is very difficult for modern people also to differentiate these two diseases in beginning. The difference is only that all the symptoms are of recurrent type or remains in whole of the year. So, Vataj Pratishyaya can be correlated to Allergic Rhinitis if it is of recurrent type.

REFERENCES


