

**APPLICATION OF APAMARGA KSHAR IN NASA-ARSHA
(ANGIACTACTIC NASAL POLYP) - A CASE STUDY**

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ABSTRACT

Angiactatic nasal polyps are relatively uncommon pseudoneoplastic sinonasal lesions, appears grossy as gelatinous, semitranslucent masses. Under this parasurgical procedure, various forms of external kshara application are used in treating the Nasa-arsha. In this present study, single case study patient suffering from angiactatic nasal polyp age 90 yr old woman, with the complaints of inflammation at nose, breathlessness, pain at the site of nasarsha. By local application of apamarga (*Achyranthus aspera* Linn.) kshar directly on the ANP for alternate day, for 30 days in 100 kala matra dose and the result was assessed thoroughly on the basis of observations and investigations like CT scan (BT & AT), Apamarga kshara was prepared as per the standard method described in Ayurvedic texts. It was concluded

that kshar had shown significant result in ANPs without any side effect.

KEYWORDS: Angiactatic polyp, Nasa-arsha, Apamarga kshar, Sinonasal.

INTRODUCTION

The angiactatic nasal polyps (ANPs) are inflammatory or allergic sinonasal polyps develop extensive vascular proliferation and etasia with deposition of pseudomyloid.^[1] These are rare and representing only 4-5%. It is also called nasal polyp with hemorrhagic and necrosis.^[2]

ANPs are type of inflammatory sinonasal polyp which can clinically and radiologically mimic a sinonasal neoplasm.^[1]

These polyps are present in a myriad of ways often simulating other pathologies including malignancy.

In Ayurveda this condition is named as Narshas. Nasarsha is a condition in which nose get blocked with mucosal material. Acharya Sushruta had mentioned 4 types of nasarsha. 1. Vataj 2. Pittaj 3. Kaphaj 4. Sannipataj^[5] as per symptoms mentioned in classics we correlated Sannipataj nasarsh as a angiectatic nasal polyp. Treatment suggested for these polyps are only surgery in modern.^[4] in Ayurveda 4 types of treatment is suggested. 1. Aushadhi 2. Ksharkarma 3. Agnikarma 4. Shastrakarma (Surgery).^[6]

For present study we decided for ksharkarm. Kshar chikitsa has been in practice since 500BC. As per Sushruta kshar is prepared from 22 plants. In this case we prepared apamarg kshar as per standard methods describe in classics.^[7] Kshar karma modality is the best one, taking into the consideration its convenience, easy adoptability, cost effectiveness and curative results.^[3] Kshar has properties of chedan, bhedan and lekhan.^[8] and by virtue of these properties, kshar produced shrinking effect on polyp.

Case History

A 90 years old female came to the Shalakyia (ENT) OPD of Dr. D.Y. Patil Ayurved college Pimpri, Pune with unilateral nasal obstruction. She had complaints of Anosmia and severe headache. On examination there was a big polypoidal mass present in the Right Nostril. The patient gave a history of 2 months for the growth. HRCT showed gross mass extending into the right nostril impeding the right medial rectus muscle that was leading to mild swelling over the right inner canthus. The mass had occupied the entire ethmoidal sinuses and frontoethmoidal recess on the right side.

A biopsy of the growth was done that revealed it to be Angiectatic Choanal Polyp with Inflammation, Thrombosis and infarcts. Considering the age of the patient it was decided to use Ayurvedic modalities to treat the disease instead of surgical clearance of the disease. The Shalakyia Tantra Department along with Rasa Shastra Department decided the use of Apamarga Kshara application in this case.

Kshara was prepared as per the classics by the Rasashastra Departmental Teaching Pharmacy of Dr. D.Y. Patil Ayurved College, Pune. This was then applied to the patient for around 100 matra kalas followed by application of Nimbu Rasa in order to remove the effect of excess Kshara. This application was done after every two days and the growth of mass was noted. After about 10 days of application of Kshara the mass started regressing. A further biopsy was taken to confirm that the mass had not converted into malignancy as ANP's can get converted into malignancy. After about 15 days of application of Kshara, the anosmia complaint got resolved. Around 30 days after the application of Kshara, the mass regressed beyond the middle turbinate making it impossible to apply kshara further. A repeat scan after this confirmed the regression of mass.

OBJECTIVES

1. To prepare Apamarg Kshar according to Sharangdhar Samhita.
2. Single case study on Nasarsh (Rt. Nostril Angeactatic Mass)."

MATERIAL AND METHODS

Material

Apamarg – collection of whole plant of apamarg from institute teaching pharmacy.

Method

1) Preparation of Apamarg Kshar

Apamarg kshar was prepared as per Sharangadhara samhita.

Table No. 01 Description of Apamarg Kshar

Sr.No.	Parameter	Result
1.	Colour	Dull white
2.	Odour	Smooth
3.	Taste	Alkaline

2) Analytical study Apamarg kshar

The pharmaceutical study of apamarga kshara was done.

Table No. 02. Pharmaceutical study of Apamarg Kshar

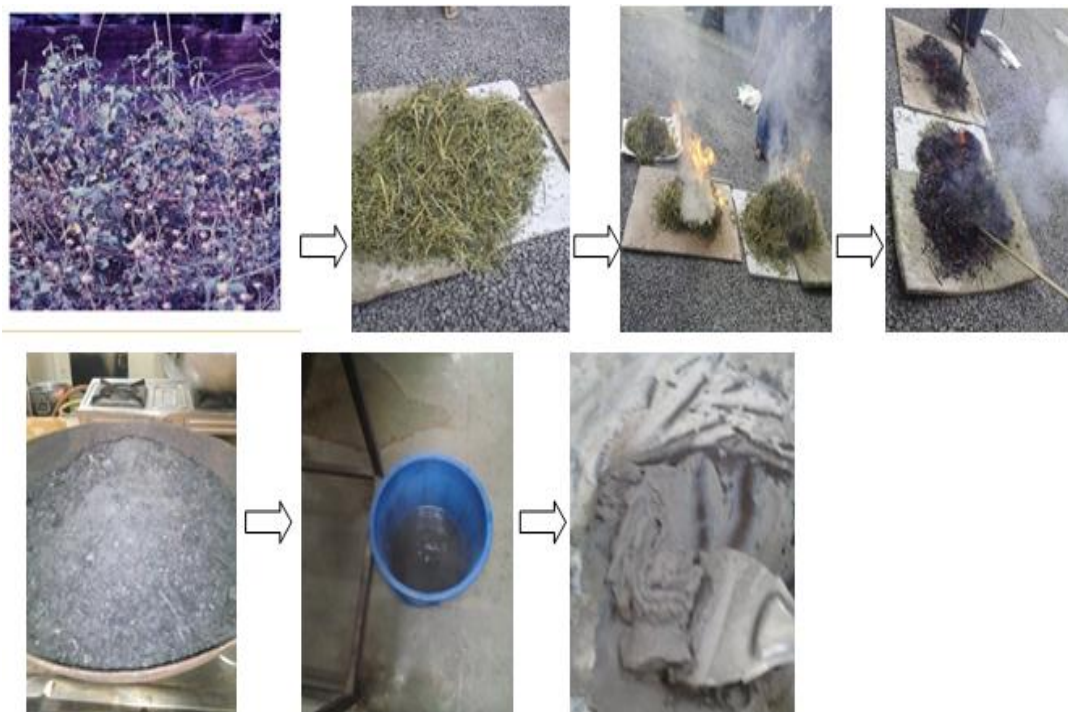
Sr.No.	Parameter	Result
1.	Loss On Drying at 110°C	7.25% w/w
2.	pH of 5% by pH paper	10
3.	Ash value	67.75%
4.	Water soluble extractive	78% w/w

3. Application of Ksharsutra on Nasarsh patient (Rt. Nostril Angeactatic Mass).”

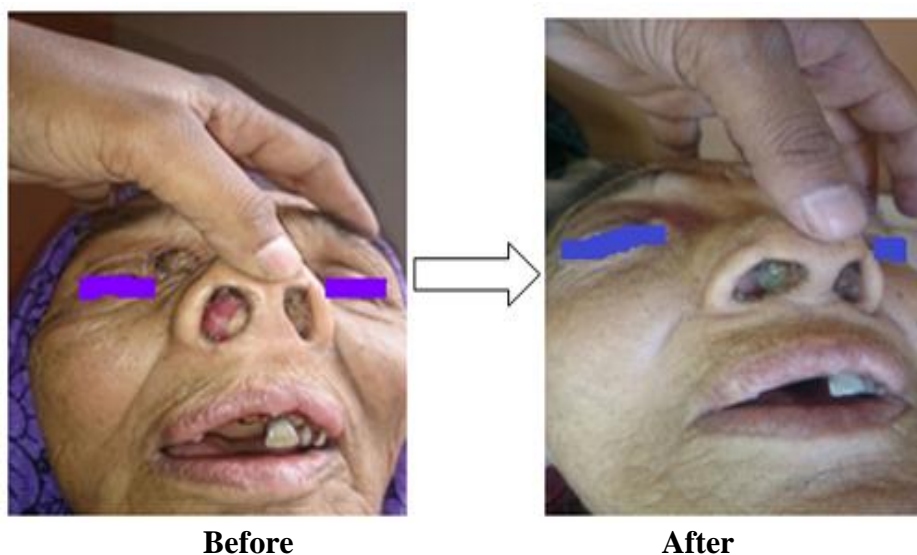
Single Nasarsh patient was selected for study from Shalakyta tantra OPD of Dr. D.Y. Patil College of Ayurved and Research Centre, Pune.

OBSERVATIONS AND RESULTS

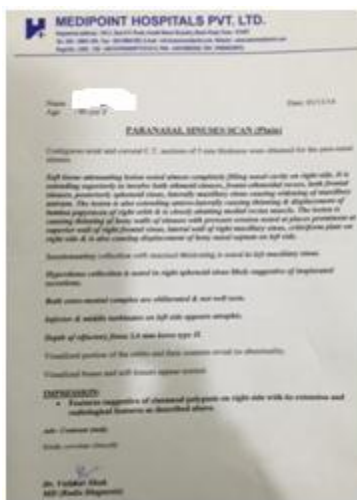
Preparation of *Apamarg Kshar*



Application of Kshar on Nasarsh patient (Rt. Nostril Angeactatic Mass).” Effect of Apamarg Kshar on Single Nasarsh patient



Reports of patient



B/620/15
23/02/15.

Section shows a polypoidal mass partly covered by stratified squamous epithelium and partly by ulcerated epithelium. The subepithelial fibrovascular stroma shows foci of hemorrhage, dense mixed inflammation with focal aggregates of plasma cells and neutrophils. Large ectatic vessels are seen which some of which shows thrombosis.

Impression - inflammatory polyp.

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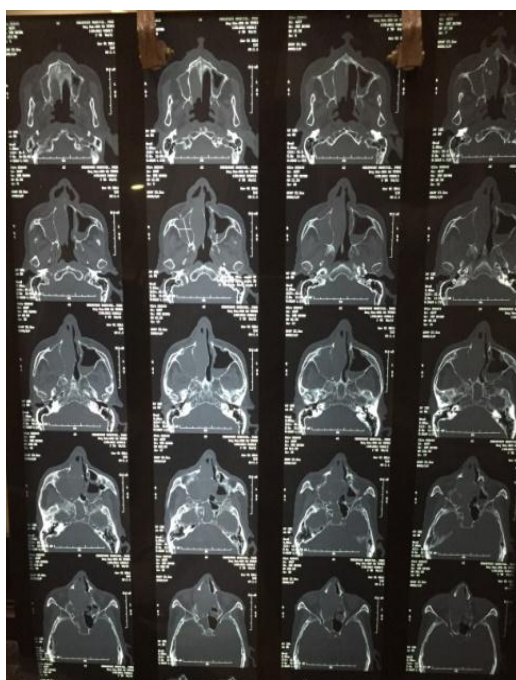


Department of Pathology
CYTOLOGY / SPECIAL HAEMATOLOGY LAB FORM

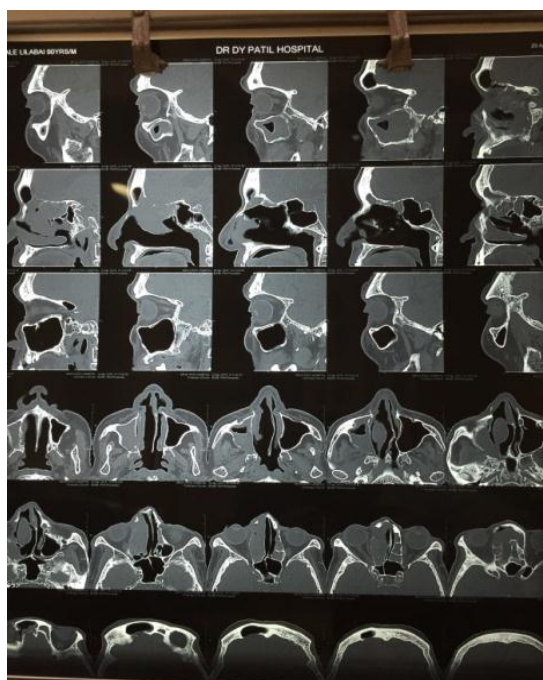
Report No: 2282/15 Date: 21/02/15

copy from - sent for H&E

REPORT
Recd. a specimen in - high power
from @ 11.10.15 cm
Left to find - squamous
epithelium in ulcer.
on investigation, from biopsy seen with
10- show abs. of congestive reaction
C1, C2 - H&E.



Before Treatment



After Treatment

DISSCUSSION

Kshara Application helps in chemically cauterization. This cauterization helps in burning the excessive tissue hence reducing its size. This method can be used in sinonasal polyposis as well. Proper use of Kshara can therefore help in minimizing the surgical procedures. By saying this one cannot say that it can be an alternative for surgery as this procedure can reduce the size but not completely remove the disease as can be achieved by surgery (FESS). Nevertheless this is a safe procedure having far too less complications compared to surgery. Also the time involved for treating by this method is far more than surgery. Hence this treatment might not be advisable for immediate relief in symptoms, but can be used for patients contraindicated for surgery or those who don't want surgery.

CONCLUSION

Kshara therapy is definitely useful in regressing polyps. The only downside to this is the time and patience required to complete the therapy. But this therapy can be used for patients not fit for surgery and will only help in giving symptomatic relief to the patient as there definitely is a limitation to apply kshar beyond a particular level. This method cannot remove the disease entirely and hence cannot be an alternative to surgical procedures.

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