

## TO STUDY THE EFFICACY OF NASYA KARMA IN THE MANAGEMENT OF KESHSHATAN W.S.R. TO HAIRFALLING

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### ABSTRACT

In the competitive & fast going 21<sup>st</sup> century people have manifested many kind of disorders like lifestyle disorders, environmental disorders, sexual disorders. Alopecia is one of the symptoms among these lifestyle generated disorders. Ayurvedic literature has also indicated this type of condition as *Khalitya*, *Indralupta* etc. This condition still remains incurable. The present status emphasizes the importance of imparting adequate knowledge about the hair care and its management. According to Ayurveda, *Nasyakarma* is the best purification procedure as well as shaman for the disease of upper clavicular region. Though Ayurvedic therapy *Nasyakarma* with the use of *Chandanadhya tailm yogahad* been selected for this study. Considering the above aspects, a clinical trial was conducted with clinically diagnosed patients of *keshshatan*. In this study, 15 patients were selected and treated along with restricted diet pattern for 8 weeks. The treatment was done by *chandanadhya tail* in 15 patients. *Nasya karma* was done in dose of 8 drops in each nostril for 15 days and results were obtained

**Keywords:** *Elopecia, Nasyakarma, Chandanadhya Taila* .

### INTRODUCTION

Hair falling is one of the conditions found in maximum population which is just because of the irregular daily routine. *Kesha* is mala of *asthi dhatu*<sup>1</sup> and *Shatana* is generally physiological but due to vitiation of *dosha* when more hair falling occurs, it becomes pathological. Ayurvedic literatures indicate this condition under the title of *Khalitya*, *Ruhya*, *Indralupta* etc.<sup>2</sup> *Acharya Sushruta* described them under the *kshudra roga*<sup>3</sup> and *Acharya Vagbhata* under the *Shiroroga*.<sup>4</sup> The line of treatment for the *Khalitya* contains *Nasyakarma*, *Abhyanga*, *Lepa*, *Rasayana* and *Keshya dravya*<sup>5</sup>. *Panchakarma* therapy, the vital modality of Ayurveda, deals with

purification by eradicating the vitiated *doshas* or toxins from the body.<sup>6</sup> Among *Panchakarma*, *Nasyakarma* is considered as best therapeutic measure for the disease of *Urdhvajatrugata pradesh* (supraclavicular region).<sup>7</sup> Ayurveda texts noted as head is root of body and nose is entrance of head.<sup>8</sup> *Nasyakarma* has broad field of action and affects the *Tridosha* as well as whole body. A brief understanding of its relation with *doshas* is necessary for the pathogenesis and understanding the line of management with Ayurvedic drugs. Such an attempt is being made here, and necessary finding of the clinical study conducted in this regard are furnished.

**Aims and Objects: -**

The study was oriented:

1. To frame out etiopathogenesis, Symptomatology according to Ayurvedic and modern science
2. To assess the role of *Nasya karma* in the management of *Keshhashtan(hair falling)*.
3. To assess the effect of “*Chandanadhya Tail*” in the management of *Keshhashtan (hair falling)*.

**Material and Methods: -**

15 patients attended the O.P.D. of Govt. Akhandanand Ayu. College & Hospital, Ahmadabad who were Fulfilling the criteria of the disease was selected irrespective of their age, religion etc. for the present study.

**Inclusion Criteria:-**

Patients other than those who were excluded and coming within age limit of 20 to 40years were included without any bar of caste, religion and occupation.

1. Patients who fulfilled the clinical signs and symptoms of *Keshhashtan (hair falling)* described in classical Ayurvedic text and Modern literature.
2. Patients had been selected from 20 to 45 years of age.

**Exclusion Criteria:-**

1. Patients whose age is less than 20 and above 45 years.
2. Patients who had disease like Tinea capitals, Folliculitis devaculans and in Ayurvedic wise who had been *Asadhya Lakshana*.
3. Patient suffered from any severe systemic disease like rheumatoid arthritis,

systemic lupus erythmatus, psoriasis etc were excluded.

4. Patient suffered from Cancer, AIDS, Diabetes mellitus, Hypertension, Depression, T.B. and other complicated disorders was excluded.
5. Anasyarh (Contra- indicated for nasya karma) according to classical text.

**Investigation:**

- Routine hematological examinations like Hb% (Haemoglobin), TLC (Total Leucocyte count), DLC (Differential Leucocytes count), ESR (Erythrocyte sedimentation Rate), and PCV (Packed Cell Volume) were performed to rule out any other pathological condition.
- Urine Routine and Microscopic to rule out urinary tract infections.
- Stool Routine and Microscopic.

**Management of Patients:-**

Randomly the 15 patients selected for the present study

➤ Group: *Nasya karma*

Drug: Chandanadhy tailm

No of patients: 15

Dose: 8 drops in each nostril

Duration: 15 days

Duration: For the duration 2 weeks.

Follow up: follow up should been taken at the 4 weeks.

**Criteria of Assessment:-**

As recorded in the Study Protocol Case Report Forms. Investigator Rating Scale for Subject Assessment in the course of this study.

**Table no-1:** Assessment criteria of the symptoms

	Symptoms	Gradation
<b>A.</b>	<b>Keshshatan (Hairfall)</b>	
	Severe(hair fall on simple stretching)	3
	Moderate(hair fall on washing)	2
	Mild(hair fall on combing)	1

	Absent	0
<b>B</b>	<b>Shirokandu (itching)</b>	
	Severe(coming more than 5 episode in a day)	3
	Moderate(coming 3-4 episode in a day)	2
	Mild(coming 1-2 episode in a day)	1
	Absent	0
<b>C</b>	<b>Darunak (dandruff)</b>	
	Severe (Permanent seen)	3
	Moderate (seen after 2-3 days after hair wash)	2
	Mild (occasionally seen)	1
	Absent	0

**Study of treatment plan:**

**Group:**

- Purvakarma: Abhyanga was done with *til tail&mild Nadi swedana* had been given to head region.
- Pradhana karma: Patients had done *Nasyakarma* with “*Chandanadhya Tailam*” in the dose of 8 drops in each nostril for the duration of 2 weeks (15 days).

- Paschatkarma: *Kavalgraha* had been done by *Ushanodaka*(luke warm water).

**Total Effect of the Therapies:-**

**Table- 2:** Overall effect of the therapy was assessed in terms of Complete Remission, Marked Improvement, Moderate Improvement, Mild Improvement and Unchanged by adopting the following criteria.

<b>Complete Remission</b>	100% relief in chief complaints and associated symptoms no recurrence during follow up study was considered as complete remission.
<b>Marked Improvement</b>	More than 75% improvement in chief complaints and associated symptoms was recorded as marked improvement.
<b>Moderate Improvement</b>	50% to 75% improvement in chief complaints and associated symptoms was considered as moderate improvement.
<b>Mild Improvement</b>	25% to 49% improvement in chief complaints and associated symptoms was considered as mild improvement.
<b>Unchanged</b>	Less than 25% reduction in chief complaints and associated symptoms was noted as unchanged.

**Statistical Analysis:-<sup>9</sup>**

The information collected on the basis of above observations was subjected to statistical analysis in terms of mean (X), standard deviation (S.D.) and standard error (S.E.) Paired ‘t’ test was carried out at  $P > 0.05$ ,  $P < 0.01$  and  $P < 0.001$  levels.

The obtained results were interpreted as: -

- Insignificant  $P > 0.05$
- Significant  $P < 0.05$
- Highly significant  $P < 0.01$ ,  $P < 0.001$

**Observation and Results:-**

**Effect of therapy:-**

15 patients treated with *Nasyakarma* (*Chandanadhya tail*) in a dose of 8 drops in each

**Table : 3: Effect on Chief complaints in 15 patients of Keshshatan**

Chief	Com-	Mean	D	%	X	S.D.	S.E.	‘t’	P
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plaints	B.T.	A.T.							
Keshashatan	2.57	0.28	2.29	89.74	3.6	0.63	0.17	13.19	0.001
Darunaka	1.64	0.35	1.29	84.28	3.6	0.65	0.18	7.67	0.001
Shirah kandu	1.50	0.35	1.15	82.05	3.6	0.72	0.20	6.12	0.001

**Table –4 : Effect on associated symptoms in 15 patients of Keshashatan**

Associated Symp-toms	Mean			%	X	S.D.	S.E.	‘t’	P
	B.T.	A.T.	Mea n						
Kesha Rukshata	0.86	0.13	0.73	84.61	3.87	0.79	0.20	3.55	0.01
Keshabhoomi Daha	0.93	0.13	0.8	85.71	3.87	0.77	0.20	4	0.01
Keshabhoomi sweda	1	0.47	0.53	53.33	3.87	0.74	0.19	2.78	0.05
Palitya	1.27	0.47	0.8	63.16	3.87	0.56	0.14	5.53	0.001
Kesha Tanutva	1.4	0.33	1.07	76.19	3.87	0.79	0.20	5.17	0.001
Vibandha	0.17	00	0.67	100	3.87	0.62	0.16	4.18	0.001
Pandu	1.2	0.47	0.73	61.11	3.87	0.45	0.12	6.20	0.001

**Table – 5: Overall Effect Therapy**

Result	%Percentage
Complete Cure	6.66%
Markedly Improved	46.67%
Moderately improved	46.67%
Mild improvement	0%
No response	0%

## DISCUSSION

*Khalitya* does not cause any disability in the body but look wise it is a little bit embarrassing and quite frustrating (especially in male or female pattern baldness) condition. The disease is caused by mainly *vata pitta Dosha*. As per *Susharut Pitta* along with *Vata* by involving the roots of hair (*Romakoopa*) causes fall of hairs and thereafter *Kapha* along with *Rakta* obstructs the channel of *romakoopa* leading to the stoppage of the regeneration of the hair and this condition is known as *Indralupta*, *Khalitya* or *Ruhya*.<sup>10</sup> *Acharya Charak* mentions that *Tejas* by involving *Vatadi Dosha* when scorches up the scalp, it results in *Khalati*. According to *Chakra-pani* word *Tejas* here denotes *Dehoshma* as well as *Pitta Dosha*.<sup>11</sup> *Acharya Vagbhata* differentiates the *Indralupta* from *Khalitya*. He mentions that in *Indralupta* sudden hair fall is present where as in *Kha-*

*litya* it is gradually<sup>12</sup>. According to modern medical science hair fall is one of the important symptoms which indicate many pathological conditions. As per modern medical science *Khalitya* can be compared with Baldness. Hair fall may be occurred mainly due to hormonal disturbance. As per *Acharya, Nasyakarma* is specially indicated in *Uradhava- Jatrugata Vyadhi*. The Role of *Nasyakarma* in *Khalitya* can be strengthened by the fact that, the *Vagbhata* has included this disease in the group of '*Kapalgat Vyadhi*' This is in addition to the number of *Chikitsasutras* of *Khalitya* stated by various *Acharyas* like *Sushruta, Charaka, Chandanadhya tail* has been mentioned for the *Nasya* in *Khalitya*. Specific preparatory method, *Chandanadhya taila* posses a good spreading capacity even in minute channels and attain *Brumhanatwa, Doshatryaharatwa* and *Indriyabala vardhakatwa*. *Chandanadhya taila*

contained *Chandan, Murva, Triphala, Haritaki, Kamala, Jatamansi, Loha, Bhringraj, Yastimadhu* etc.<sup>13</sup> All described drug have *Keshya, Balya, Rasayana* and *tridoshashamaka* property. In whole yoga combination, there are *Tikta & Madhur rasa* are dominant. *Tikta & Madhur rasa* are said to be *Pitta shamaka*. *Tikta rasa* have antagonistic properties to that of *Kapha Madhur rasa* have *vata-pitta shamaka* properties. In *Khalitya*, there are *Rasavaha, Swedavaha srotas dusti*. In *srotas chikitsa Charakacharya* mention that *Swedavaha srotas* treated like *Jwar*<sup>14</sup>. In *Jwar chikitsa Tikta rasa* is main rasa as per these reference we can see good result of *Chandanadhy tail* in the *Khalitya*. *Sheet Viryatva* is mainly in the drug. *Sheet Virya* removes the *Pitta* and *Rakta dusti*. The *Guna* of the drug is *Ruksha, Guru* and *Snigdha*. *Snigdha guna* is a *Parthiva* and *Apya*. *Charka* said that *Kesha* is a *Parthivabhav*, so *Snigdha guna* increase *Kesha* because of *Samanyavishesha Siddhanta* (Ca.Sa. 7/16). *Guru guna* has *vata shamaka* properties & *Ruksha guna* stated the *Kaphadusti*. *Katu & Madhura Vipaka* which was intended to have a *Tridoshashamaka* effect. It is also indicated as a *Prabhava*. The *Rasayana* therapy aims specially at the promotion of strength and vitality in the body. It has been stated as a measure to contribute excellently and has been maintained the integrity of *Saptadhatu* of the body and thus increases the longevity. *Keshya* suggests that the drug is helpful in production and nourishment of hair. It has also *Vishaghan* and *Tvachya* properties. All these effects join together act in the cessation of hair fall and ultimately of *Khalitya*.

#### **Nasya karma action:**

When oil is prepared by the *Tailapavidhi* according to “*Sanskaro Hi Gunantaradhanam*” their individual properties

emerged into each other and emerges some new properties. Whereas this Tail when applied as *Nasya* would act as a *Shirovyadhisamaka*, which is the *Prabhava* of *Nasya karma* as described in the effects of *Nasya*. More ever *Nasya* would help in the internal correction of the *dosha* working locally by their position in the scalp and nutritive the roots of the hair would avert hair, so hair falling would be stopped. The tail has *Laghu, Sukshma, Tikshna, Snigdha* properties and it was prepared with *Keshya* drug. It would act on, which is a main causative factor of *Khalitya*. The obstruction of *Srotas* will clear by the *Sukshma guna*, which affects the growth of new hair. Regarding this, many references have been found for the use of tail in daily routine. Before *Nasyakarma* we had done *Purvakarma* (*Shirahbhayang and Mrudu Swedana*). Both *Purvakarma* would decrease the *Rukshata* of scalp & doing *Srotomukha Vishodana* and excoriated the *Prakupit dosha*.

#### **CONCLUSION**

Above study plan showed that in case of *khalityaNasya karmawas* given good result. *Nasya karma* break out the cycle of pathogenesis with its internal correction of the *dosha* working locally by their position in the scalp and nutritive the roots of the hair would avert hair, so hair falling would be stopped. The tail has *Laghu, Sukshma, Tikshna, Snigdha* properties and it was prepared with *Keshya* drug. It would act on, which is a main causative factor of *Khalitya*. The obstruction of *Srotas* will clear by the *Sukshma guna*, which affects the growth of new hair.

#### **Suggestions for further study:**

- 1) Procedure performed with shaman *chikitsa* then it will be given better result in short duration.
- 2) In this study small sample was taken in future study we can take number of pa-

tients after then analyzed it give more satisfactory result.

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