

VACHA TAILA NASYA IN NASAPRATINHA WITH SPECIAL REFERENCE TO DEVIATED NASAL SEPTUM (D.N.S) - A CASE STUDY

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ABSTRACT

*Nasapratinaha*¹ is a commonly encountered disease in clinical practice. It is one of the nasal disorders, explained in *Ayurveda*, having nasal obstruction leading to difficulty in breathing as the main cardinal feature. In contemporary science, this condition can be correlated with various diseases such as, deviated nasal septum, turbinate hypertrophy, nasal polyps, mucosal congestion, allergic rhinitis, and others. The medical treatment has limitation for prolonged use because of health purpose; surgical approaches failed to achieve desired results in deviated nasal septum due to complications and its recurrence rate. The medical and surgical managements have their own limitations, merits, and demerits like synechia formation, rhinitis sicca, severe nasal bleeding, or osteonecrosis of the turbinate bone. A parasurgical treatment explained in *Ayurveda*, known as *Nasyakarma*², which is a minimal invasive and precise procedure for this ailment, tried to overcome this problem. '*Nasyakarma*' is a popular treatment modality in *Ayurveda* in *urdhvajatrugat vikara* as *nasa hi shirso dwaram*³. Clinical observation has shown its effectiveness in the management of deviated nasal septum. A case report of 68-year-old male who presented with complaints of frequent nasal obstruction, nasal discharge, discomfort in nose, and headache; and diagnosed as *Nasapratinaha* (deviated nasal septum) has been presented here. The patient was treated with *Nasyakarma* in both nostrils. The treatment was found significantly effective in symptoms noticed in the follow up.

Keywords: *Nasyakarma*, *Urdhvajatrugat Vikara*, *Chikitsa*, DNS, *Nasapratinaha*

INTRODUCTION

Nasal obstruction is a very common and troublesome complaint in ear, nose, and throat (ENT) practice. The main causative factor for this condition is deviated nasal septum⁴. Other etiological factors involved are nasal allergy, vasomotor rhinitis, rhinitis medicamentosa, any nasal mass, and turbinate hypertrophy. Deviated Nasal Septum is responsible for nasal obstruction

more often than is commonly thought. The inferior turbinates are the largest turbinates and are responsible for most of the airflow direction, humidification, heating, and filtering of air inhaled through the nose. Allergies, exposure to environmental irritants, or a persistent inflammation within the sinuses can lead to turbinate swelling. Deformity of the nasal septum can

also result in enlarged turbinates. Enlargement can be due to increase in soft tissues of turbinate or due to thickened bone. The medical management includes a variety of antihistamines, decongestants, and topical and systemic corticosteroids. These drugs provide only symptomatic improvement; they cannot cure the condition. They also can create side effects such as drowsiness, bleeding, drying, and crusting. Among the many surgical procedures that have been used for the treatment of nasal obstruction are the trimming of the inferior turbinates, laser therapy, linear cautery, submucosal diathermy, and turbinate cryotherapy. Thus, a wide variety of surgical procedures have been performed on the septum for the relief of gross deviated nasal septum. This condition is not fatal, however gross D.N.S leads to many adverse sequelae including mouth breathing, dryness of the oropharynx, nasal speech, distorted sleep, restlessness, malaise, an adverse effect on quality of life, and reduced lung volumes. As per *Ayurvedic Classics*, in *Nasapratinaha* the vitiated *Kapha Dosha* along with *Vata Dosha* blocks the inspired air, leading to nasal obstruction. Based on the classical symptom of it, can be considered as one of the nasal obstructive lesion hypertrophied turbinate, in which there is enlargement of the sub mucosa and the bone itself.

Nasyakarma is a popular treatment modality in *Ayurveda*, which has been advocated in disorders of *nasa* and *Shirorogas* like *Nasapratinaha*, *Pratishyaya*, *Ardhavybedak* besides many other diseases of *Urdhvajatrugat Vikaras* which can be treated. It is explained that *Nasa* being the *dwara* to *Shira*, (head), the drug administered through nostril reaches *Shringataka* a *sira marma* by *nasa srotas* and spreads in the *Murdha* (brain) reaches at the junctional place of *Netra* (eyes) *Karna* (ears), *Kantha* (throat) *Siramukhas* (opening of the vessels) etc. *Nasya* has mainly property to remove or detach the morbid *doshas* present above supraclavicular region and expel them from the *Uttamanga*. Hence considering this point it is assumed that the use of *Vacha Taila Nasya*⁵ can be an effective solution in the management of *Nasapratinaha* w.r.t. deviated nasal septum. This case study showed significant results in the patient.

Case Report:

Age- 68 years, Sex- Male, OPD: Shalakyia OPD
C/O:-

1. Frequent nasal obstruction in both nostrils,
2. Deviated nasal septum towards right side,
3. Watery Nasal discharge,
4. Discomfort in nose,

All complaints since 1 year.

On Examination:

On local examination of the nose⁶ the external nose was normal with widened anterior nares. On anterior rhinoscopic examination, deviated nasal septum towards right side and inferior turbinate in left side of the cavity was markedly hypertrophied with congestion of the nasal mucous membrane. In right side of the nasal cavity also there was mild hypertrophy of middle turbinate present. Routine hematology (haemoglobin, total count, differential count, erythrocyte sedimentation rate, and absolute eosinophil count) investigations were done. Haemoglobin, total count, and differential count were within normal limits.

History:

Patient had taken medical treatment which included a variety of antihistamines, decongestants, and topical and systemic corticosteroids since 1 year; but get relief as long as in use. After discontinuation of medication recurrence in the symptoms of *Nasanaha* was observed. As the disease was not treated with medical treatment and leading to complications like sleep apnoea and mouth breathing, *Nasya Karma* was selected in this case.

Procedure administered to the patient:

Purva Karma: *Nasya* was performed in '*Nasyakarma room*' located in *Shalakyatantra* OPD, place is having enough day light & is devoid of direct atmospheric influences like dust, wind, etc.

1. Blood pressure-120/80 mmHg
2. Pulse-78/min. was recorded prior to the *Nasya Karma* for observational purpose.

Snehana: *Abhyanga* (oil massage) with *Tila Taila* was done *Urdhvanga* i.e. face, scalp, temporal & neck region for about 10-15 minutes. **Swedana:** *Bashpaswedan* given to the patient at *Urdhvanga*.

Pradhana Karma:

- After completion of *Purvakarma*, position of patients was given a *Nasya* position i.e. bending of head at about 45 angles from the edge of table.
- Patients were instructed to be in a relaxed posture.
- Limbs were placed apart & on both the sides.
- Patients were asked to close their eyes.
- Nasal dropper was held in right hand & with the help of left index fingertip of the nose is elevated up.
- With the help of nasal dropper -2 *Bindu* of *Vacha taila* was instilled in each nostril in a continuous stream⁷.

Paschat Karma:

- After performing the *Nasya karma*, patient was asked to remain in the same position till 100 *Matra*⁸
- Again *Abhyanga & Swedana* was performed in the regions indicated previously. Here time duration was changed to 3-5 minutes only.
- Simultaneously rub both the hands (palm sole) vigorously raising them slightly, for 1 to 2 minutes, at the same time foot soles were also rubbed.
- Patient was advised to spit out the nasal secretions reaching the throat & asked to gargle with warm water.

Follow-up: The patient was advised to follow-up daily for 7 days.

Table 1: Observation of the patient.

Complaints of Patients	1 st DAY	2 nd DAY	3 rd DAY	4 th DAY	5 th DAY	6 th DAY	7 th DAY
Frequent nasal obstruction	+++	+++	++	++	++	+	0
Deviated nasal septum towards rt side	++	++	++	++	++	++	++
Nasal discharge	+++	+++	+++	++	++	+	0
Discomfort in nose	+++	++	++	+	+	0	0

0-Nil, +-Mild, +-Moderate, +++-Severe.

DISCUSSION

Nasal cavities provide conduction, filtration, heating, humidification and chemo sensation of air which is mainly performed through mucosa and contours of the turbinates. Deviated nasal septum caused by impact trauma, such as by a blow to the face. It can also be congenital disorders, caused by compression of the nose during childbirth. This often causes a marked restriction in air flow through the valve region with a concomitant sensation of severe nasal blockage. Hence, nasal obstruction by deviated nasal septum causes significant difficulty affecting the daily activities of the patients. Nasal obstruction due to mild to severe deviated nasal septum, which leads to difficulty in nasal breathing. Repeated episodes of nasal blockage and breathlessness with turbinate hypertrophy are main symptoms. The inflammatory response or inflammation is an important body response to injury. When bacteria, toxins, burns, or other culprits damage tissue; the injured tissues leak chemicals, including histamine and other substances. This chemical cock-

tail causes blood vessels around the damaged area to leak fluid into the injured tissues and make them swell. Here, the enlargement of turbinate is almost always due to swelling of the submucosa and mucosa. Thus, in deviated nasal septum, with increase in turbinate size as well as submucosal or mucosal hypertrophy, we had planned *Vachatail Nasya*. Nose is being the gate of the head, *Nasya Dravya* is reaching the brain and acting on important centres controlling different function and thus showing systemic effects and *Nasyakarma* is the treatment for all the *Siro-roga* and *nasa rogas* like *nasapratinaha*, *Pratishyaya*, *Ardhavybedak* etc.

Mode of action of Nasya Karma⁹:

In *Astang Samgraha* it is explained that *Nasa* being the entry to *Shira*, (head), the drug administered through, nostril reaches *Shringataka* a *Sira Marma* by *Nasa Srotas* and spreads in the *Murdha* (brain) reaches at the junctional place of *Netra* (eyes) *Srotra* (ears), *Kantha* (throat) *Siramukhas* (opening of the vessels) etc and remove or detach the morbid *Doshas* present

above supraclavicular region and expels them from the *Uattamanga*. According to *Acharya Charaka*, *Nasa* is the portal (gateway) of *Shiras*. The drug administered through nose as *Nasya* reaches to the brain and eliminates only the morbid *doshas* responsible for producing the disease. The *Dravya* administered by *Nasya Karma* enters the *Shira* (head) and draws out exclusively the morbid matter as the *Path* (sika) is taken out after removing the fibrous coating of *Munja* (a type of grass) adhered to it. *Acharya Sushruta* has explained *Sringatakarma* as a *Sira Marma*, present in the middle of the confluence of *Sira* supplying nourishment to the *Nasa* (nose), *Karna* (ears), *Chakshu* (eyes) and *Jivha* (tongue) Vital points at the confluence of veins (inside the head) by name "*Sringataka*" under the complication of *nasya karma sushruta* noted that the excessive eliminative nasal therapy (*Shodhan Nasya*) may cause *Mastulunga* (CSF) to flow out, this shows the relation between the *nasa* as the gateway of *Shira*.

VACHA¹⁰:

Latin name: *Acorus calamus*

Family: Aracaceae

Rasa: *Katu, Tikta*

Guna: *Laghu, Tikshna*

Virya: *Ushna*

Vipaka: *Katu*

Karma: *Vataghna, kaphahara*

Vacha Tail having properties of *Vataghna* and *Kaphaghna*, it reaches to nasal obstruction and removes all obstruction and decreased the symptoms of nasal discharge and difficulty in respiration. It leads to clear nasal pathway of respiratory tract, patient got relief from Symptoms of *Nasapratinaha*.

CONCLUSION

There are certain methods of *Nasya* but in this patient *pratimarsha nasya* of *vacha taila* which has been proved very effective in the treatment of *urdhva jatrugat vikaras* was taken for the trial and is being practiced widely. In this present case report, *Vacha taila* (*Acorus calamus*), one among the best *Nasya dravya*. Two drops of it instilled into both nostrils for 7 days continuously to find out its efficacy and adverse effects. It has given significant results in the treatment of deviated nasal septum. This effectiveness of *Nasya karma* can be attributed only to the potency of the content is the best one,

taking into the consideration of its convenience, easy adoptability, cost-effectiveness and curative results. Thus, *Vacha taila Nasya karma* is said to be very useful in treating the Deviated Nasal Septum locally.

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