Ayurvedic management of Nasa Arsha w.s.r. to Nasal Polyp - A Single Case Study

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ABSTRACT

Arshas is described as one of the Asta Mahagada Roga by Acharyas and is also explained as a fourfold treatment such as Bhesaja, Shastra, Kshara and Agni Karma. The Nasa Arshas means Arshas located in the nasal cavity causing nasal obstruction. The predominant Dosha is Kapha and Dushya is Twak, Mamsa and Medho Dhatus. Nasa Arshas can be correlated with nasal polyps. Nasal polyps are non-neoplastic masses of oedematous, prolapsed, pendunculated nasal or sinus mucosa. It can be treated by medical and surgical methods. Prolonged usage of anti-histaminics, steroids, antibiotics, nasal decongestants cause drug resistance, decreases the immunity, rebound congestion and there is a lot of chance for reoccurrence, even after the surgery especially in ethmoidal polyp. In Ayurveda, several treatment modalities have been planned for the treatment of Arsha as Shastra Karma (operative procedure), Kshara Karma (applying some alkaline drugs), Agni Karma (cauterization) and Bhaishaja (conservative/medical treatment). Here the present case study was planned to evaluate the efficacy of Anu Taila Nasya with Shamanaoushadhas.

Key words: Arsha, Nasa Arsha, Anu Taila Nasya, Nasal Polyp

INTRODUCTION

The term Arshas is defined as “Arivet Prana Shruntiarsha” - The disease which tortures the person like enemy.¹ Nasa Arshas is mentioned in both Bhrihat Trayee and Laghubrayee. Acharya Sushruttha has explained total 4 types of Nasa Arsha: Vataja, Pittaja, Kaphaja and Sannipataja as well as explained fourfold treatments: Bhesaja, Shastra, Kshara and Agni Karma.²

Nasal polyps is defined as an inflammatory, collection of extracellular fluid and non-neoplastic masses of edematous, prolapsed nasal mucosa arise from the sinuses or the nasal cavity. The polyps are sessile in the beginning and later become pedunculated due to the effect of gravity and the excessive sneezing. The 2 most common clinical types are ethmoidal and antrochoanal.³ Nasal polyps can be associated with allergic or without allergic manifestation. Statistically in general population the overall prevalence rate of nasal polyposis ranges from 1-4%. It is more common in adults than in children under 10 years of age except when it is associated with cystic fibrosis. The association of nasal polyposis with asthma is well recognized ranging from 7-20%. The association of nasal polyposis, bronchial asthma, and aspirin sensitivity- Samter’s triad has also been found. Furthermore, the incidence of nasal polyps is higher in non-atopic asthmatics and rhinitis than atopic rhinitis and asthmatics.⁴
The clinical features explained by Acharya Sushruta, Acharya Vagbhata and the Clinical Features mentioned in Modern Science areas follows:\(^{[5,6]}\)

<table>
<thead>
<tr>
<th>Symptoms of Nasa Arshas</th>
<th>Symptoms of Nasal Polyps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pratishaya Atimatram</td>
<td>Runny nose</td>
</tr>
<tr>
<td>Nasa Avarodha</td>
<td>Nasal obstruction (difficulty in breathing)</td>
</tr>
<tr>
<td>Kshvathu</td>
<td>Sneezing, itchy nose- if associated with allergy</td>
</tr>
<tr>
<td>Putinas</td>
<td>Hyposmia or anosmia depending on severity.</td>
</tr>
<tr>
<td>Saanunasika Vakyam</td>
<td>Hyponasal voice</td>
</tr>
<tr>
<td>Shirovyatha</td>
<td>Headache</td>
</tr>
<tr>
<td>-</td>
<td>Altered or reduced sensation of taste</td>
</tr>
<tr>
<td>-</td>
<td>Post nasal drip</td>
</tr>
</tbody>
</table>

**Staging\(^{[7]}\)**

Polyps can be staged based on the size

**Stage I:** Limited to the extent of middle meatus.

**Stage II:** Extending beyond the limit of Middle Turbinate.

**Stage III:** Approaching to inferior turbinate.

**Stage IV:** Going up to the floor of nose.

Management of nasal polyposis can be done by both conservative and surgical procedures. Early edematous polypoidal mucosal changes may revert to normal by using antihistamines, control of infection, and allergy. Prolonged usage of Anti antihistamines, oral corticosteroids, nasal decongestants causes drug resistance, decreases immunity and rebound congestion. Polyps that are not responding to medication are managed by Functional Endoscopic Sinus Surgery (FESS) By doing surgery nasal obstruction will be reduced but does not control the allergy, infection, and polyps may reoccur. Hence the present case study was planned to evaluate the efficacy of Anu taila nasya along with internal medication in the management of Nasaarshas w.s.r to nasal polyps.

**CASE STUDY**

**Chief Complaints with Duration**

A female patient of age 58 years has been suffering from nasal blockage, sneezing, difficulty in nasal breathing, watery nose, and frontal headache on and off for 3-4 years.

**History of Present Illness**

The patient was asymptomatic for 3-4 years, gradually she developed difficulty in nasal breathing, sneezing, watery nose along with nasal blockage. She took conservative treatment but did not get relief. So patient came to our OPD for treatment purposes.

**History of Past Illness**

Medical History - seasonal allergy

**Personal History**

a) Appetite - Normal
b) Bowel - Regular
c) Micturation - Normal
d) Sleep - Normal

**Family History** - NAD

**Examination**

**Ashtasthana Pareeksha**

* Nadi: 78/min
* Mala: Regular, twice a day
* Mutra: 5-6 times/day
* Jhwa: Anavrutta
* Shabda: Prakruta
* Sparsha: Prakrutha
* Druk: Prakruta
* Akruthi: Madhyama
Vitals

Pulse rate - 78/min, Respiratory rate - 22/min, BP - 126/84 mm of Hg, Temp. - Afebrile

Systemic examination

No specific abnormalities detected

Nasal Examination

Inspection - DNS towards Right side

Palpation - Examination of paranasal sinuses-tenderness present in maxillary, frontal sinus.

Anterior Rhinoscopy - Bilateral round, pale, glossy, polypoidal masses in the middle meatus is seen. Insensitive to probing, does not bleed on touch when examined by using Jobsons probe.

B/L Inferior turbinate hypertrophy.

Treatment Given

<table>
<thead>
<tr>
<th>SN</th>
<th>Name of the medicine</th>
<th>Dose</th>
<th>Time</th>
<th>Anupana</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Tab. Kaishore Guggulu</td>
<td>2-x-2</td>
<td>After food</td>
<td>Lukewarm water</td>
</tr>
<tr>
<td>2.</td>
<td>Dashmoola Kwath along with Pippali Churna</td>
<td>30 ml</td>
<td>Empty stomach</td>
<td>Lukewarm water</td>
</tr>
<tr>
<td>3.</td>
<td>Chitraka Haritaki Lehyam</td>
<td>3g-x-3g</td>
<td>After food</td>
<td>Lukewarm milk</td>
</tr>
<tr>
<td>4.</td>
<td>Tribhuvan Kirti Rasa</td>
<td>2-x-2</td>
<td>after food</td>
<td>Lukewarm water</td>
</tr>
<tr>
<td>5.</td>
<td>Cap. Nilsin</td>
<td>1-x-1</td>
<td>after food</td>
<td>Lukewarm water</td>
</tr>
<tr>
<td>6.</td>
<td>Anu Taila Nasya</td>
<td>2 drops</td>
<td>---</td>
<td>-----</td>
</tr>
</tbody>
</table>

(Nilsin capsule contains Mahasudarshan, Sunthi, Vach, Kosta Kulijan and Sitopaladi as its key ingredients)

Anu Taila as Pratimarsha Nasya to lubricate the nasal passage and helps to decongest the sinuses.

Pathya to be followed are like staying in Nirvata Pradesha, drinking hot water or boiled water by adding pinch of Shunti and Dhanya powder, Laghu Ahara, Pranayama.

Apathya to be avoided are eating freeze food, fast food, fried food, afternoon sleep, late night awakening, traveling, exposing to cool air.

Observations and Results

The condition of the patient improved gradually. After completion of 90 days of treatment, the patient has shown excellent improvement.

Discussion

Ayurveda creates new hope for the treatment of nasal polyps (Nasa Arsha) as it believes in treating the disease at its root cause. In the Samprapti of Nasa Arshas the predominant Dosha was Kapha along with Alpa Vata and Alpa Pitta, and Dushya is Twak, Mamsa, Medo, along with Jalabahulyata. So, to break the above pathogenesis Nasya with Shamana Chikitsa was given to the patient. Nasya Karma with Anu Taila was instilled into both nostrils and was expected to strengthen the vital functions of the sense organs by its unique mode of action through Shringatika Marma. Internally Kaishore Guggulu has Tridoshahara especially Kapharaha, Sotha Hara, Lekhana and Chedana at Mamsa and Medha level and is anti-inflammatory in nature. Chitraka Haritaki is prescribed to mainly increase the Agni and Vatakapha Shamana and it also has Kaphanissaraka and Lekhana property. Dashmoola Kwath along with Pipali Churna pacifies vitiated Tridoshas. Thus, internal medications also helped to pacify the vitiated DOSHAS and brought into an equilibrium state. The combination of both Nasya and Shamana Chikitsa acted synergistically to combat the vitiated Tri DOSHAS in the pathology of Nasa Arsha.

Conclusion

Nasal polyp i.e., Nasa Arsha is a chronic inflammatory disease. Ayurveda believes in cleansing the body and pacifying the Tridoshas from the roots by using unique treatment modalities such as Sodhana, Shamana and Sthanika Chikitsa. These treatment approaches create a balanced physiology which regress the size of nasal
polyps and thus making the patient symptom free by non-invasive method.

Before Treatment

After treatment

REFERENCES


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