



ISSN 2456-3110

Vol 9 · Issue 9

September 2024

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Maharshi Charaka
Ayurveda

Indexed

Ayurvedic management of *Nasa Arsha* w.s.r. to Nasal Polyp: A Case Report

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ABSTRACT

Nasa Arsha is one among the *Nasagata Roga* explained in Ayurvedic classics. When the *Prakupit Dosha* gets localised in the *Ghran Pradesh*, the person gets the symptoms like *Pratishyaya* (cold), *Atim Matra Kshavathu* (excessive sneezing), *Kruchchhra Uchchhawas* (difficulty in breathing), *Putinasya* (fedor nasalis), *Shirah Shul* (headache), *Anunasik Vakya Dukha* (difficulty in nasal letters). Nasal polyp is oedematous grape-like protrusions most often originating in the upper part of the nose around the osteomeatal complex on the lateral wall. The surface epithelium tends to be smooth and consists of pale translucent tissue which distinguishes them from the more vascular mucosa of the nasal cavity. Polyps can vary widely in size and should be considered a bilateral condition. Rare cases of unilateral polyps should only be diagnosed. *Shikhari Taila*, known for its anti-inflammatory and antihistaminic properties, this medicated oil penetrates deep into the fine channels, facilitating *Sroto Shodhan* (cleansing of the channels).

Key words: *Shikhari Taila, Nasa Pichu, Nasa Arsha, nasal polyp*

INTRODUCTION

According to *Acharya Sushruta*, when a person indulges in *Nidan Sevan* such as excessive exposure to *Raja* (dust), *Dhuma* (smoke), intense *Abhitapa* (severe heat), prolonged exposure to *Pravat* (headwind), and the suppression of natural urges like *Mutra* (urination) and *Purisha* (bowel movement), the *Prakupit Doshas* invade the *Ghrana Pradesh*, leading to the development of *Nasarsha*. These aggravated *Doshas* lodge in the nasal region, vitiating *Twak, Mamsa*, and

Medo, resulting in the formation of *Nasarsha*. *Sushruta* described four types of *Nasarsha*: *Vataja, Pittaja, Kaphaja*, and *Sannipataja*, along with four types of treatments: *Aushadhi, Kshar Karma, Agnikarma*, and *Shastra Karma*. *Nasarsha* can be correlated with nasal polyps.^[1] The body constantly attempts to expel unwanted substances, a process that can be correlated with the *Chala* quality of *Vata*, particularly *Vyana Vayu* and *Prana Vayu* for *Urdhva Jatru*. When the *Nidana* (causative factors) are excessive, the *Samprapti* (pathogenesis) of the disease becomes more complex, leading the body to intensify its efforts to expel these excessive vitiated *Dosha* from the body.^[2] Nasal polyps, associated with conditions like rhinosinusitis, cystic fibrosis, and allergic fungal sinusitis, can be understood as hypersensitivity reactions primarily driven by *Vata*, aimed at eliminating excess from the body.^[3] Therefore, the primary focus should be on avoiding the *Nidana* and implementing *Shodhana* (purification), *Shamana* (pacification), and *Prakriti Sthapana* (restoration of normalcy) to maintain the normal physiological structure. Special emphasis should be placed on *Shodhana* to remove the excessively vitiated

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Submission Date: 14/08/2024 Accepted Date: 26/09/2024

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: [10.21760/jaims.9.9.42](https://doi.org/10.21760/jaims.9.9.42)

Doshas from the *Urdhva Jatru* (region above the clavicle) while preserving the integrity of the nasal mucosa.

The annual incidence of CRSwNP is between 1 and 20 per 1000 population. This incidence declines after 60 years of age. In the normal population the prevalence is between 1 and 4% in adults and 0.1% in children. Nasal polyps are more common in males (2-4:1). There is no racial predilection. Certain systemic diseases carry a much higher incidence of nasal polyps.^[4]

Staging of Polyps can be staged based on the size

Stage I: Limited to the extent of middle turbinate

Stage II: Extending beyond the limit of Middle Turbinate.

Stage III: Approaching inferior turbinate.

Stage IV: Going up to the floor of the nose.^[5]

Common side effects of intranasal corticosteroids include local irritation and epistaxis. Potential adverse events related to the administration of intranasal corticosteroids are effects on growth, ocular effects, effects on bone and effects on the hypothalamic pituitary-adrenal axis. Cases of adrenal suppression and Cushing's syndrome from systemic absorption have been reported. acute cardiac toxicity is an increasingly recognized potential adverse effect of antimicrobial drug treatment and several agents of the macrolide class of antibiotics are known to interfere with the delayed rectifier potassium current, which results in accumulation of potassium ions in cardiac myocytes and thereby delays cardiac repolarization.^[6] To avoid the adverse effects of allopathic medicines, *Nasa Pichu* is an excellent *Chikitsa* (treatment)

Acharya Charaka stated that *Taila*(oil) is highly effective for pacifying *Vata* due to its qualities such as *Vyavayi*, *Ushna*, *Guru*, and *Sneha*. When processed with *Aushdha* (drug) that possesses *Vata*-pacifying properties, its medicinal benefits are enhanced.^[7]

Shikhari Taila, known for its anti-inflammatory and antihistaminic properties, contains ingredients that predominantly exhibit *Katu Rasa*, *Laghu Guna*, *Ushna Virya*, *Katu Vipaka*, and *Kapha-Vata-shamaka*

qualities. Due to its *Vyavayi* and *Sukshma Guna*, this medicated oil penetrates deep into the fine channels, facilitating *Sroto Shodhan* (cleansing of the channels).

Administering this medicated oil can help reduce post-nasal and anterior nasal drips, as well as soothe irritation by delivering targeted medicine to the mucosal lining for optimal absorption. Using *Nasa Pichu* increases the retention time of the oil in the nasal cavity, enhancing its bioavailability and absorption. Regular application of medicated oil in the nose prevents irritation of the mucous membrane caused by allergens such as pollen, dust, and brass particles, thereby helping to manage allergies or infections. Additionally, it aids in removing unwanted substances like allergens from the nasal cavity and supports proper drainage.

CASE STUDY

Chief Complaints with Duration: A 50-year-old male patient has been suffering from nasal stuffiness, paroxysmal sneezing, mucoidal nasal discharge, hyposmia, foul smell from the nose, and intermittent itching in the throat, nose, eyes, and ears, along with occasional frontal headaches for the past 3 years.

History of Present Illness:

Patient was asymptomatic before 3 years and gradually developed nasal congestion, difficulty in nasal breathing, excessive sneezing associated with bilateral watery discharge along with foul smell, that patient was unable to concentrate on daily activities, the symptoms worsened and frequency also increased. So he consulted an ENT specialist on nasal examination diagnosed as polyps then he was prescribed antihistamines, nasal decongestants, topical and systemic corticosteroids. After using medication the patient got relief for a few days but recurrence of symptoms. So, the doctor suggested undergoing surgery for nasal polyp Patient was not willing to go under surgical treatment. So, a patient came to our OPD for further treatment.

Past History: History of allergy to brass particle, dust, smoke

Personal History

- a) *Kshudha* - Poor, *Agnimandya* (low digestive power), *Udargaurav* (heaviness in abdomen)
- b) *Nidra* - Disturbed due to difficulty in breathing, snoring
- c) *Mala Pravrutti - Vibandha* (constipation)
- d) *Mutra Pravrutti - Samyak*

Nasal Examination

Inspection - DNS towards Right side, mucoidal discharge in both nostrils.

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.

Posterior Rhinoscopy - Post nasal drip

Ear Examination

External Auditory Canal - Wet

TM - Retraction (Grade - 2)

MATERIALS AND METHODS

A patient presenting symptoms of *Nasa Arsha* or nasal polyp was selected from the *Shalaky Tantra* OPD of ITRA Jamnagar. Both internal as well as local treatments were given to the patient. A medicinal drug was selected based on the classical reference of *Chakradatta*.

Table 1: Assessment Scale of Grading

<i>Nasavarodha</i> (Nasal Stiffness)	Score
No Obstruction	0
Partially Occasional & Unilateral	1
Partially Occasional & Bilateral	2
Complete, Frequently & Unilateral	3
Always Complete & Bilateral	4

<i>Tanu Srava</i> (Watery Discharge)	Score
No discharge	0
Negligible discharge	1
Intermittent discharge	2
Continuous discharge	3
Profuse discharge	4
<i>Ati Kshavathu</i> (Excessive Sneezing)	Score
No	0
1-5 bouts per day	1
6-10 bouts per day	2
11-20 bouts per day	3
More than 21 bouts per day	4
<i>Shirah Shoola</i> (Headache)	Score
No	0
Occasional	1
Intermittent	2
Continuous	3
Intolerable	4
<i>Nasa, Netra, Karna Kandu</i> (Nasal, Eye, Ear Pruritus)	Score
Absent	0
Occasionally Present	1
Often Present	2
Continuously Present	3
Intolerable	4
<i>Puti Nasa</i> (Fetor Nasalis)	Score
Absence of odour	0

Questionable odour	1
Mild Malodour	2
Moderate malodour, detectable	3
Strong malodour is detected	4

Therapeutic Intervention

After examining the patient, we administered *Vaishwanar Churna* for *Deepan*, *Pachan*, and *Anuloman* to address digestive symptoms such as *Agnimandya* and *Udargaurav*, as *Agnimandya* can lead to various disorders. Additionally, *Dashmool Kwath* was prescribed for *Vata shaman*, *Arand Taila* with lukewarm water was also given at bedtime to alleviate *Avarana Avastha* and *Vacha Churna* was applied locally to the nose for *Sroto Shodhan* after 4 days of starting the medicine, as clearing *Agnimandya* is the first priority before initiating any *Sthanik Chikitsa*.

Pathya Apathya (dietary and lifestyle guidelines)

The patient was strictly advised to avoid cold drinks, ice cream, junk food, curd, salad, fruit, fermented food items, and spicy foods. The regular intake of *Sunthi Siddha Aushadha Jala* throughout the day was recommended as part of their routine. *Pravat Sevan* (Head wind) *Diwaswapa* (daytime sleeping) should be avoided, and *Goghrita* or *Shikhari Taila* was to be regularly applied to the nasal mucosa to prevent irritation from brass particles.

Table 2: Content of Shikhari Taila (Chakradatta Nasarogaadhikara)^[8]

Drug	Botanical Name	Part Used	Proportion
<i>Gruhadhoom</i>	<i>Soot</i>	Ash	18gms
<i>Pippali</i>	<i>Piper Longum</i>	Fruit	18gms
<i>Devadaru</i>	<i>Cedrus Deodara</i>	Bark	18gms
<i>Yavakshara</i>	<i>Hordeum Vulgare</i>	Whole Plant	18gms
<i>Karanja</i>	<i>Pongamia Pinnata</i>	Seed	18gms

<i>Saindhava</i>	<i>Rock Salt</i>	-	18gms
<i>Apamarga</i>	<i>Achyranthes Aspera</i>	Seed	18gms
<i>Tila Taila</i>	<i>Sesamum Orientale</i>	Seed Oil	500ml

Nasa Pichu Procedure

Poorva Karma - *Mukha Abhyanga* with *Bala Taila* followed by *Bhashpa Sweda*.

Pradhana Karma - *Shikhari Taila Nasa Pichu* for 15 minutes in each nostril for 7 days (3 cycles) with a three day gap.


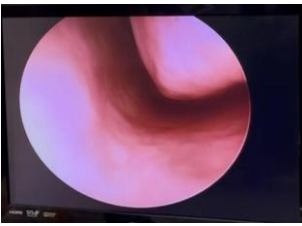
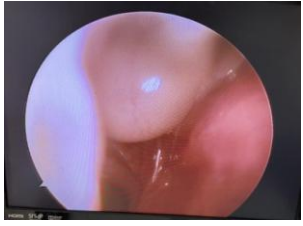

Paschat Karma - Lukewarm water *Gandush* and *Prayogik Dhumapan* were administered to the patient.

OBSERVATION AND RESULTS

Significant reduction in the presenting symptoms of the patient was seen after 3 weeks of treatment with a 3 days interval after 1 month of follow up. The patient's condition showed gradual improvement, assessed through both subjective symptoms and objective findings. A comprehensive evaluation was performed, after completion of therapy.

Table 3: Subjective Criteria

SN	Symptoms	BT	After 1st Sitting	After 2nd Sitting	After 3 Sitting	Follow up After 1 month
1.	Nasal Stuffiness	4	3	2	1	0
2.	Nasal Discharge	3	2	1	1	0
3.	Sneezing	4	3	1	0	1
4.	Headache	1	0	0	0	0
5.	Fetor Nasalis	3	2	2	1	0
6.	Itching in nose, eyes, and ears	2	1	1	0	0

Pictogram of Nasal Polyp	
	
BT - Rt nose	AT - Rt nose
	
BT - Lt nose	AT - Lt nose

DISCUSSION

Shikhari Taila, known for its anti-inflammatory and antihistaminic properties, *Nasa Pichu* increases the retention time of the oil in the nasal cavity, enhancing its bioavailability and absorption, its helps potentially reducing oedematous mucosal swelling and aiding in the dilation of constricted nasal passages. The local action of the *Pichu* is attributed to the cellular absorption of the medicine, which acts as both *Snehana* (oleation) and *Lekhana* (scraping), thereby diminishing mucosal oedema.

CONCLUSION

Nasal polyps can be correlated with *Nasa Arsha* (Nasal polyp) based on their pathogenesis and clinical features. *Nasapichu* yields highly effective results in the treatment of *Nasa Arsha* (Nasal polyp). It is an economical and efficient procedure that does not cause adverse effects, unlike modern medicine. However, modern medicine often focuses on suppressing natural reactions. In contrast, *Ayurveda* supports the body in expelling the *Dushit Dosh*a that accumulates within the body. *Ayurveda* emphasises cleansing the body and pacifying the *Tridoshas* from

the root through treatment modalities such as *Nidana Parivarjana* and *Samprapti Vighatana* by employing *Shodhan* therapies. This is accompanied by appropriate *Pathya-Apathya* (dietary and lifestyle guidelines). Internal medications are used to enhance *Agni* and strengthen the patient’s *Bala*. Overall, there is significant improvement in the condition, with no recurrence of symptoms. Therefore, there is a need to implement Ayurvedic treatments on a larger scale to draw more concrete conclusions.

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How to cite this article: Poonam Malaviya, D.B. Vaghela. Ayurvedic management of Nasa Arsha w.s.r. to Nasal Polyp: A Case Report. J Ayurveda Integr Med Sci 2024;9:262-266. <http://dx.doi.org/10.21760/jaims.9.9.42>
Source of Support: Nil, **Conflict of Interest:** None declared.