

Asava Nasya as a remedy to relieve the symptoms of chronic sinusitis : A case report

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Abstract: Chronic sinusitis is inflammation of the mucosa of nose and paranasal sinuses for more than 12 weeks. According to the science of Ayurveda, Dushta Pratisyaya condition, has a close proximity with chronic sinusitis. Asava (fermented formulation) is mentioned for nasal administration. Nimbasava is a formulation of Asava Kalpana prepared with Guggulu Tikthaka Gritha Yoga explained in Vathavyadhi Chikitsa. Sigrubeeja (seed of Moringa Oleifera) and Saindhava (rock salt) are explained among Shirovirechana Gana (group of medicines can be used for nasal administration). A 58 year old female patient came to OPD of Shalaky Tantra presented with severe foul smelling blood stained purulent nasal discharge, post nasal drip, nasal obstruction and head ache with heaviness of head. CT – head and PNS showed mucosal thickening in maxillary, frontal and ethmoidal sinuses with rhinolith. In this case Varanadi kwatha and Kanchanara guggulu were given orally. Nasya has been done with a combination of Nimbasava & laksha churna. The improvements provided by the therapy was assessed on the basis of signs and symptoms before and after the treatment. The treatment was found to be effective and safe

Key Words: Chronic sinusitis, Asava Nasya, Nimbasava, Sigrubeeja.

1. INTRODUCTION:

Rhinosinusitis is a frequently occurring disease, with significant impact on quality of life and health. It has become the most prevalent chronic illness affecting more than 25 % of whole population(1). It is the inflammation of mucosa of nose and paranasal sinuses with clinical features like head ache, heaviness of head, post nasal drip, purulent nasal discharge and halitosis. Acute infection destroys normal ciliated epithelium and impairing drainage from the sinus. Pooling and stagnation of secretions in the sinus forms an ideal medium for the growth of various pathogens(2). The management includes antibiotics, anti-inflammatory drugs and nasal decongestants. Recent studies show that there will be recurrence of this disease atleast 4 times in a year even after modern management due to its limitations(3). On the other hand, prolonged use of nasal decongestants can cause side effects such as rhinitis medicamentosa. The disease needs an early and aggressive management as it may cause serious complications like meningitis, encephalitis, osteomyelitis etc if not treated timely. The aetiology, symptoms and complications of chronic sinusitis has a close proximity with the disease 'Dushta Pratisyaya' explained in classics.

Ayurveda, the holistic science has its own approach towards various diseases. Nasya (nasal administration of drugs) is one among Panchakarma therapies which has well appreciable role in curing Urdhwa Jatru Gata Roga(4) (diseases above the clavicular region). Theekshna Virechana Nasya ie nasal administration of drugs with high potency helps to expel the accumulated Doshas (humors) from the channels from its root and thus prevents the recurrence. Here when the sinuses are overloaded with exudates due to capillary bed dialation and active secretions from goblet cells, it is not prudent enough to still over load the already diseased cilia with oil based nasal drops. Asavas are indicated for virechana nasya(5). Even though the reference is available in the literature, 'Asava Nasya' is not common in practice. Here in this study, patient was managed with Nimbasava Nasya with Sigrubeeja and Saindhava.

2. CASE STUDY: Case Report - A 58 year old female patient came to OPD of Shalaky Tantra presented with severe foul smelling blood stained purulent nasal discharge, post nasal drip, nasal obstruction and head ache with heaviness of head.

3. HISTORY OF PRESENT ILLNESS :

The patient was experiencing head ache and post nasal discharge since 9 years. She was consulted in an allopathic hospital, diagnosed sinusitis and took one course of treatment. Gradually the symptoms worsened and frequency of episodes increased. Climate changes, cold exposure, intake of cold food items, sun exposure etc were the aggravating factors. The nature of nasal discharge became more purulent, thick, blood stained and foul smelling. Foul

smell of discharge compelled her to avoid attending functions. There was nasal obstruction, halitosis, head ache which become severe on stooping posture.

History Of Past Illness - There was no relevant past history

Family History – no family members had similar complaints.

Personal History – Personal history has mentioned in table no: 1

Table 1. Personal history of the patient

Diet	Mixed diet
Micturition	3-4 times in day, 0-2 times in night
Appetite	Moderate
Sleep	Disturbed due to nasal obstruction
Bowel habit	Regular
Addiction	Nil

ASHTAVIDHA PARIKSHA : *Ashtavidha pariksha* (eight fold classification) has been mentioned in table :2

Table 2. *Ashtavidha pariksha* of the patient

Nadi(pulse)	66/ min
Mala (stool)	1-2 times
Mutra (urine)	3-4 times in day, 0-2 times in night
Jihva (tongue)	Sama (coated)
Shabda (speech)	Spashta (clear)
Sparsha (touch)	Anushnasheeta
Drik (eyes)	Samanya (normal)
Akruti(built)	Madhyama

3.1. BLOOD INVESTIGATION: blood investigation (Hb, TLC, DLC) were normal except ESR value. ESR value was found to be 60 mm/hr

3.2. LOCAL EXAMINATION Anterior rhinoscopy- Inferior turbinate hypertrophy seen bilaterally , Rhinolith seen in left nasal cavity deep in the canal, Thick purulent discharge seen in left nasal cavity.

3.3. RADIOLOGICAL EXAMINATION: CT – head and PNS showed mucosal thickening in maxillary, frontal and ethmoidal sinuses. Rhinolith in left nasal cavity , DNS to right

3.4. TREATMENT: Treatments given to the patient has been enlisted in table .3

Table 3: Posology of treatment protocol

S.No	Drug	Dose	Route	Duration
1	Varanadi kwatha	60 ml before meal twice a day	Orally	1 month
2	Kanchanara guggulu	2-0-2 (1 week), 1-0-1 (3 weeks) after meals	Orally	1 month
3	Nimbasava & laksha churna	8 bindu in both nostrils, morning 6am	Nasally	7 days
4	Nimbasava , saindhava & sigrubeeja	8 bindu in both nostrils	Nasally	For the next 7 days

Patient is advised to take boiled water for drinking . meals should be devoid of black gram, sweets, meat, fish ,curd and other diary products, cool drinks etc. Grades of assessment of overall effect of therapy has been mentioned in Table no:4

Table 4 . Scoring in signs and symptoms of chronic sinusitis

Nasal Discharge	Score
No discharge	0
Occasional	1
Frequent	2
Continuous heavy	3
Continuous heavy with foul smelling	4
Nasal Obstruction	Score
No obstruction	0
Partially, occasionally and unilateral	1
Partially, occasionally and bilateral	2

Complete, frequently and unilateral	3
Always, complete and bilateral	4
Headache and Heaviness in head	Score
No headache	0
Occasionally with low intensity	1
Frequently with moderate intensity but not disturbing routine work	2
Always with moderate intensity sometimes disturbing routine work	3
Always with severe intensity and associated with nausea, vomiting, etc.	4
Post nasal discharge	Score
No post nasal discharge	0
Occasional	1
Frequent	2
Continuous	3
Halitosis	Score
No halitosis	0
Occasional bed smell comes from mouth	1
frequent bed smell comes from mouth	2
Continuous bed smell comes from mouth	3
Severe bed smell which can be perceived by others	4

4. RESULTS:

After 7th, 15th, 30th and 60th day assessment and variation in the results were noted on each symptoms associated with chronic sinusitis. Patient got relief from her symptoms with gradual improvement. Assessment of each symptoms presented in table no: 5. Patient was advised to continue *Pratimarsa Nasya* for one year with *Anutaila*..

Table 5. Assessment on symptoms of chronic sinusitis

Sl no	Symptoms	0 th day (BT)	AT			
			7 th day	15 th day	30 th day	60 th day
1	Nasal discharge	4	2	1	0	0
2	Halitosis	4	1	1	0	0
3	Post nasal dripping	3	2	0	0	0
4	Nasal obstruction	3	2	1	1	1
5	Head ache	4	1	0	0	0
6	Heaviness of head	3	1	0	0	0

5. DISCUSSION:

In Ayurveda, the *Chikitsa* (treatment) is mainly divided in to *Shamana* and *Shodana*. *Shamana Chikitsa* may subside the symptoms, but there will be chance of recurrence if proper *Shodana* (expulsion of *Dosha*)not done. Thus the main aim of *Shodana* therapy is elimination of *Dosha* from its root , especially when the disease is chronic. Here *Virechananasya* is selected as the aim is to expel out the accumulated *Dosha* from the sinuses. Thus *Asava Kalpana* (fermented formulation)was selected which assumed to spread fastly over the mucosa , which absorbs rapidly through the mucosal lining through its *Teekshna*, *Sookshma* , *Vyavayi* nature. Since it is an alcoholic medium, the pH will be acidic , the absorption of drugs through the mucosa will be more in acidic medium. Here pH of this *Nasya Yoga* is found to be 4 . Hypertonicity , lesser viscosity and acidic pH are the factors promoting drug absorption . *Asava* posses all these properties. *Nimbasaava* is *Asava kalpana* made of *Guggulutikthaka gritha* yoga explained in *Vatavyadhi Chikitsa*⁶. It was selected because of anti inflammatory , anti bacterial and fungicidal property of *Guggulu* and *Pancha Tikta* (*Azadirachta indica*, *Tinospora cordifolia*, *Adathoda vasica*, *Trichosanthes dioica* and *Solanum xanthocarpum*) drugs which are the main ingredients in the formulation . This has an action on lower and upper respiratory tract. *Sigrubeeja* (seeds of *Moringa Pterygosperma*.) is one among *Sirovirechana Gana* (group of drugs using to expel out dosha through nostrils) has *Theekshna* , *Ushna*, and *Kaphavathahara* properties. On adding *Saindava* (rock salt)to this *nasya yoga*, the piercing property of the medicine increases as it has *Sookshma*, and *Lekhana* (scraping) property. The combination of these drugs can be used for *Virechananasya* for expelling vitiated *Dosha* from channels.

6. CONCLUSION:

Asava Nasya has showed significant role in relieving the symptoms of chronic sinusitis. Use of *Asava Nasya* for a longer duration has not showed any complications . Hence it can be advised without doubt by assessing the stage of disease properly.

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