

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

A Brief Understanding of Pratishyaya Nidanas

Arvind Sharma^{1*}, Kamlesh Kumar Sharma²

*1PG Scholar first year department of Shalakya Tantra,

²Professor & Head Department of PG Studies moulik samhita evam siddhant vibhag, MMM G.A.C Udaipur Rajasthan.

ABSTRACT-

Ayurveda is an ancient science that is related with the health of all living beings. The two main motives of Ayurveda are to make a man healthy and other one is to cure a diseased person. While treating a patient the most important thing is to diagnosis of certain disease. The two fundamental elements of the Ayurveda diagnosis process are Rogapariksha and Rogipariksha. Among these, Rogapariksha provides us with comprehensive information about an illness, covering everything from its aetiology to its actual manifestation. Rogapariksha's five fundamental elements are Nidana, Purvarupa, Rupa, Upashaya and Samprapti are referred to as Nidana Panchakas. The most important of these, Nidana, not only provides information about the causes but also aids in treatment by preventing them. Since Nasa is important organ for olfaction and respiration among all the Indriyas, extra attention and care should be given to its protection. It would be easier to administer treatment effectively and prevention from diseases if you are aware of the severity of the contributing causes to Nasa rogas especially pratishyaya.

Key words: NidanaPanchaka, Nasarogas, Pratishyaya

INTRODUCTION-

Among the *Nasaroga*, *Pratishyaya* is the most crucial and primary condition. Because of its frequency and potential health consequences, nasal allergies are now thought to make it difficult for people to engage in both indoor and outdoor activities if their symptoms are not adequately managed. There are many direct and indirect causes of rhinosinusitis. It has been explained by *Acharyas* that *Pratishyaya* is not just a nose ailment; it is also a contributing cause to other illnesses. The same *Nidana* that *Acharyas* described for *Nasaroga* also applies to *Pratishyaya*. With particular reference to rhinosinusitis, and rhinitis this article discusses brief understanding of *Pratishyaya Nidanas* as described by *Acharyas* and contemporary science.

MATERIALS AND METHODS-

Acharyas explains each Nidana and evaluates its applicability to day to day lifestyle. According to available texts vitiated Doshas, and the specific causes of Pratishyaya are discussed here.

Pratishyaya Definition-

" Vatam Prati Abhimukham Syayo Gamnam Kaphadinam Yatra Sa Pratishyayaha" [1]

The disease in which *Kaphadi doshas* moves towards the direction of *Vata dosha* is called as *Pratishyaya* that is vitiated *Kaphadi doshas* are eliminated through the nose is known as *Pratishyaya*.

Vishisht Nidanas-

Sandharnaajirna Rajotibhashya krodhartuvaishmya shirobhitaapai /

Prajagaratiswapnambusheetairavashyaya Maithunvashpdhumai //

Sanstyandoshai shirasi pravraddho vayu pratishyaymudirayetu ||(Ch.Chi. 26/104)

Naariprasanga shirasobhitapo dhuli raja sheetanatipratap /

Sandharanam mutrapurishyoccha sadhya pratishyay nidanmuktam ||(Su.Utt. 24/3)

Avashyayanilrajo bhashyati swapnprajagrai /

Nichaatyuchhopdhanen pitenaanyenvaarina //

Atyambupanramanachhardivashpgrahadibhi /

Kruddha Vatolbanadosha Nasayam Styantaam gata //

Janayanti pratishyayam Vardhmanam kshyapradam | (As.Hr.Utt. 19/2)

Classical view- According to Aacharya Charaka causes and occurance of sinus and nose diseases are Restraining the Urges(Sandharana), Indigestion(Ajirna), Consumption of Dust(Rajo), To much Talking(Atibhashya), To much Getting Angry(Krodha), Odd Season(Rituvaishmya), Pain in the Head(Shirobhitapa), To much Staying Awake in the Night(Prajagarati), To much Sleeping during Day Time(Swapna), Drinking Cold Water(Ambusheetai), Dew(Avashyaya), Excessive Intercourse(Maithuna), Excessive Crying(Vashpa), Excessive Smoking (Dhumai) etc when phlegm and other toxins get collected in the head than due to above mentioned reasons the air in the head region increases and gives rise to disease of nose and cortex.[2]

According to Aacharya sushruta Coitus with Women(Naariprasanga), Works by which Head is Getting more Heat(shirobhitapa), Smoge(Dhuli), Dust(Raja), Excessive Cold(Atisheeta) Excessive Heat(Atitaapa), Stopping the Urges of Urine(Mutra Vegasandharana) and Defection(Purisha Vegasandharana) are main immediate reasons of pratishyaya.[3]

According to Aacharya Vagbhatta Cold Dew(Avashyaya), Wind(Anil), Dust(Rajo), Talking to Much(Atibhashya), Day Sleeping(Swapna), Awakening in Night(Ratrijagarana), Use of to Low or to High Pillow(Nichatuchhyopdhana), Drinking Liquids other than Water(Pitenaanyenvaarina), Drinking so much Water(Atyambupana), Coitus(Ramana), Forceful Stopping of Vomiting(Chhardi) and Forceful Stop of Crying(Vashpagraha) all these reasons vitiated air goes into nose and causes pratishyaya.[4]

Modern view-*Pratishyaya*(Rhino Sinusitis) according to modern science is an inflammation of the nose and Para nasal air sinuses, it is divided into different types on the basis of **duration 1.Acute Rhino sinusitis**(ARS)- < 4 weeks duration. **2.Subacute Rhino sinusitis**(CRS)- 4-12 weeks duration. **3.Chronic Rhino sinusitis**(CRS)- > 12 weeks duration.[5]

For clinical management RS is classified as-

1.Acute viral sinusitis- airborne viral infection aetiology(common viruses are *rhinovirus* and *parainfluenza virus*), other viruses are *Adeno virus*, *Picorna virus*, *respiratory syncytial virus*. 2.Acute and Subacute bacterial Rhino sinusitis- bacterial aetiology(majority of cases are of *S. Pneumoniae*, *H.influenzae*, and *M.catarrhalis*) others are *anaerobes*, *streptococcal species* and *staphylococcus aureus*. 3.Fungal Rhino sinusitis- fungal aetiology(most common fungi are *aspergillus species* and *mucorales(mucormycosis)*). others are *Rhinosporidosis seeberi*. 4.Paediatric Rhino sinusitis-common causes are anatomical obstruction in nasal passage like (septal deviation, nasal polyp, adenoids) others are allergy, GERD, air pollution, first or second hand smoke. 5.Chronic Rhino sinusitis- etiologic factors for chronic rhino sinusitis are Infection(viral, bacterial, fungal and parasitic),Traumatic(maxillofacial injuries, foreign bodies), Hypersensitivity(IgE and Non IgE mediated, aspirin hypersensitivity, vasomotor factors), Environmental(cold and wet climate and overcrowding), Immunodeficiency(congenital and aquired), Endocrine(rhinitis of pregnancy and hypothyroidisim), Mucociliary abnormalities(cystic fibrosis and primary ciliary dysmotility), Mass(neoplasm of nose, retention cysts, polyps), Autoimmune or Idiopathic(granulomatous(sarcoid and wegner's),vasculitis[systemic lupus erythematous(SLE) and churg strauss syndrome] and pemphigoid), Pollution(dust, smoke, cigarette smoking and snuff), Structural defects(DNS, synechia, chonal atresia and osteometal complex abnormalities), Lifestyle(excessive intake of carbohydrate and lack of excercise).[6]

Allergic rhinitis – It is an IgE mediated immunologic response of nasal mocosa.it is of two types seasonal or perennial its main seasonal aetiological factors are pollens of tree and grasses and perennial allergens are moulds, dust mites, cockroaches and dender from animals.[7]

Non allergic rhinitis - It is divided into vaso motor rhinitis and other Non allergic forms of rhinitis. 1. Vasomotor Rhinitis (VMR) is autonomic nervous system unstability due to emotional changes or change in temperature, humidity, blasts of air, small amount of dust or smoke while 2. Other Non Allergic forms of rhinitis are Drug Induced (several antihypertensive such as reserpine, guanethidine, methyl dopa, propranolol and sympathetic blocking agents and some anticholineasterase drugs like neostigmine), Rhinitis Medicamentosa (excessive use of tropical decongestents), Rhinitis of Pregency (may be due to hormonal changes), Honeymoon Rhinitis (sexual excitement induced nasal stufiness), Emotional Rhinitis (anxiety, tension, hostility, humiliation, resentment and grief), Rhinitis due to Hypothyroidism (hypo thyroidism leads to hypoactivity of sympathetic system results in stuffiness of nose and cold), Gustatory Rhinitis (cholinergic response to stimulation of sensory receptors on palate due to spicy and pungent food), Non air flow Rhinitis (in patients of larngectomy and tracheostomy). [8]

Pathya and Apathya In Pratishyaya-Pathya Ahara - Godhuma, Shali, Mudga, Yava, Puranaghrita, Patola, Shigru, Rasayana dravyas Pathya Vihara - Sweda, Virechana, Vamana, Nasya, Brahmacharyapalana, Alapbhashna Apathya Ahara - Kaphakara and Guru Aharas Apathya Vihara - Shirasnana, Vyayama Kandooyana.[9]

RESULT AND DISCUSSION-

Man has become a slave to his habits in the fast-paced, technologically enhanced world of today. Our reliance on devices and technology directly affects our health. Nasal problems are caused by constantly disobey the *Dincharya*, *Ratricharya*, *Ritucharya*, *Sadvritta* and *Aachar Rasayana*. *Ayurveda* outlines methods for managing and preventing illnesses since it is acknowledged as the most important science of life. Additionally, it discusses the Nose, including its conditions and therapies. One should learn more about *Nidanas* in order to prevent illnesses. To gain a deeper understanding, *Nasa Roga Nidanas* has to be evaluated scientifically in light of contemporary lifestyle. Following the *Nidanas* alone won't cause diseases; instead, prodromal symptoms will appear before the sickness manifests. Our lifestyle needs to change as a result.

CONCLUSION-

Knowing the Nidana facilitates the evaluation of the Dosha vitiation, the determination of the Vyadhi's Sadhya Asadhyata, the analysis of the Samprapti, and the appropriate treatment strategy. The best therapy methods used to control the ailment would not be helpful if the Nidanas are not addressed and avoided; for this reason, our Acharyas have explicitly said that "Sanksepataha Kriyayoge Nidana Parivarjanam." Nidana can act alone, in concert, or in combination to activate Doshagati, aggravate an existing illness, or cause Dosha Prakopa to cause new disease.

REFERANCES-

- 1.Kaviraj Ambikadatta Shastry, Sushrutasamhita of Uttaratantra chapter 24th Ayurveda tatvasandipika vyakyana 11th edition, Varanasi; Chowkambha Sanskrit Sansthana Vol- 2, 1997, P.N.118.
- 2.Pt. Kashinathshastri and Dr. Gorakhanathchaturvedi, CharakaSamhita of charaka with Vidyostini Hindi Commentary, Chikitsasthana, Reprint edition; 2013 chapter 26 versus 104 Varanasi: Chaukhambhabharati academy, 2013; 736.
- 3.AmbikadattShastri, SushrutaSamhita of Sushruta with Ayurveda TatvaSandipika Hindi Commentary, UttarTantra Reprint edition chapter 24 versus 3, Varanasi: Chaukhambha Sanskrit Sansthana, 2016; 152.
- 4.Kaviraja Atrideva Gupta, Astanga Hridya of *Vagbhatta*, "*Vidyotini*" Hindi Commentary,edited by VaidyaYadunandanaUpadhyaya, Uttar Tantra Reprint edition Chapter19 Versus2, Varanasi: Chaukhambha Sanskrit Bhawan, 2009; 701.
- 5.Mohan Bansal Diseases of Ear Nose And Throat 3rd edition chapter 41: 340
- 6.Mohan Bansal Diseases of Ear Nose And Throat 3rd edition chapter 41: 345-347
- 7.P.L. Dhingra Assisted by Deeksha Dhingra Diseases of Ear, Nose and Throat 8th Edition Chapter, 30: 194.
- 8.P.L. Dhingra Assisted by Deeksha Dhingra Diseases of Ear, Nose and Throat 8th Edition Chapter, 31: 198-99.
- 9. Dr Indradev Tripathi Yogratnakara: 'vaidhyaprabha'- hindivyakhyopeta 4th edition chapter 2013 P.g. no. 746