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**Case Study** 

# AYURVEDIC MANAGEMENT OF ALLERGIC RHINITIS WITH CORRELATION TO *VATA KAPHAJA PRATISHAYA*

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#### **ABSTRACT**

Sinusitis is a chronic inflammatory condition of the paranasal sinuses that is associated with nasal obstruction, frontal headache, and mucopurulent discharge. In Ayurveda, this condition closely resembles Kaphaja Pratishaya, caused by the vitiation of Kapha and Vata Doshas, obstructing Pranayaha Strotas. Aim: To evaluate the efficacy of Ayurvedic management in a diagnosed case of chronic sinusitis (Kaphaja Pratishaya). Material and Methods: A single clinical case of a 51-year-old female patient with chronic sinusitis and nasal polyp (Nasarsha) was treated with internal and external Ayurvedic therapies for eight weeks. The regimen included Pratimarsha Nasya Karma with IAFA Nasal All Clear X Drops and Nasa Yoga Grutham, internal administration of Aahar Amrutham Ras, Pitpapra Capsules, IAFA Respiratory Detox Tablets, Sitopaladi Churna, Respiro Detox Formula, and Haridrakhandam, along with dietary regulation and Pranayama. Clinical assessment was done before, during, and after treatment. Results: Significant reduction in nasal obstruction, frontal headache, snoring, and mucus discharge was observed after four weeks, with complete remission by eight weeks. The patient reported improved olfactory function, restful sleep, and no recurrence after exposure to cold or allergens. **Conclusion:** The Ayurvedic approach focusing on Kapha-Vata Shamana, Srotoshodhana, and Rasayana principles effectively managed chronic sinusitis. This case report of sinusitis correlated with Kaphaja Pratishaya highlights Ayurveda's treatment potential in chronic respiratory disorders.

### **INTRODUCTION**

Sinusitis is an inflammatory disorder of the paranasal sinuses, characterized by mucosal edema, sinus ostial obstruction, and mucus retention leading to local infection or even allergy-mediated inflammation. It is one of the most prevalent upper respiratory tract conditions worldwide, which affects approximately 10-15% of adults and significantly impacts quality of life and productivity.<sup>[1,2]</sup> The paranasal sinuses, i.e., frontal, maxillary, ethmoidal, and sphenoidal, are air-filled cavities that help to humidify inhaled air, lighten the skull, and enhance vocal resonance in human beings.



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When drainage through the sinus ostia is compromised due to inflammation, polyp formation, or structural deviation, mucociliary clearance becomes impaired, which leads to chronic sinus mucosal congestion and secondary microbial growth.[3,4] Clinically, chronic sinusitis manifests with nasal obstruction, mucopurulent discharge, postnasal drip, facial pain or pressure, and headache persisting for more than 12 weeks. The disease results from dysregulated epithelial barrier integrity, altered immune response of the body, and biofilm formation within the sinus cavities. In Ayurveda, the condition is closely correlated with Kaphaja Pratishaya, one of the Urdhwa Jatrugata Rogas (diseases affecting the supraclavicular region) described in classical literature like Sushruta Charaka Samhita, Ashtanga Hridya, etc. The term Pratishaya refers to nasal discharge, and when Kapha dosha predominates, it produces classical symptoms such as Guruta (heaviness of the head), Kandu (itching), Kasa (cough), Arochaka (loss of taste or

Sleshma Pravritti (thick mucus), Nasa appetite). Avarodha (nasal obstruction), and Shiroshoola (headache).<sup>[5,6]</sup> The *Samprapti* (pathogenesis) begins with Kapha aggravation due to causative factors such as cold exposure, heavy meals, daytime sleep, and suppression of natural urges. This leads to obstruction (Srotorodha) of Pranavaha Srotas. stagnation of mucus and inflammation in the nasal passages. In advanced stages, associated Vata vitiation causes pain, dryness, and secondary infection, mirroring the modern understanding of sinus mucosal dysfunction and ostial blockage.

Ayurvedic management of Kaphaja Pratishaya, therefore, emphasizes Kapha Shoshana (drying of excess mucus), Srotoshodhana (clearing obstructed channels), Vata shamana, and strengthening Agni (metabolic fire). Nasya Karma (nasal administration of medicated oil or extract) and internal medication (Aantrika Chikitsa) are the main therapies that restore nasal patency, reduce mucosal inflammation, and enhance systemic immunity. Avurvedic management of sinusitis parallels modern intranasal drug delivery strategies that ensure rapid mucosal absorption and localized anti-inflammatory effects. Along with these, recent studies have revealed that the pharmacological actions of several Avurvedic herbs used in this context, such as Punarnava (Boerhavia diffusa), Nirgundi (Vitex negundo), Haridra (Curcuma longa), and Tulasi (Ocimum sanctum) etc., are known for their mucolytic, anti-inflammatory, antimicrobial, and immunemodulatory properties. [7-11]

Hence, understanding sinusitis through the perspective of *Kaphaja Pratishaya* provides an integrative approach that helps in dealing with pathology (*Samprapti*) and systemic *Dosha* imbalance. This case study presents a successful Ayurvedic management of chronic sinusitis through an Ayurvedic treatment protocol including *Nasya Karma* and internal use of various formulations, resulting in symptom resolution and no recurrence.

#### **Case Presentation**

A 51-year-old female patient presented with a chronic history of nasal obstruction, frontal headache, and mucopurulent nasal discharge that worsened during cold exposure, winter months, after intake of pickles, and after intake of refrigerated food. The symptom complex had persisted for more than twenty years with gradual progression. She reported frequent post-nasal drips, snoring, and a feeling of heaviness in the forehead and paranasal region. Modern therapy with analgesics and nasal decongestant drops gave only transient relief. On Ayurvedic assessment, her constitution (*Prakriti*) was *Dwandaja*, i.e., *Kapha*-predominant with *Vata*. The disease process was

traced to *Kapha-Vata Dosha prakopa* and *Pranavaha Strotas Dushti*, leading to *Shiro-Guruta* (head heaviness), *Nasavarodha* (nasal blockage), and *Shleshma-Pravritii* (mucus accumulation). The patient was enrolled for Ayurvedic management at the Institute of Applied Food Allergy (IAFA), India, after obtaining informed consent.

#### **Patient Details**

Age/Sex: 51 years / Female

Date of first consultation: 26<sup>th</sup> April 2022 Duration of illness: More than 20 years

Past-history: Recurrent migraine headaches, episodic nasal allergy.

Previous medication: Painkillers and nasal drops (self-medicated).

## **Chief Complaints**

- Recurrent frontal headache (right>left) aggravated by air-conditioning, cold wind, and refrigerated food.
- Nasal obstruction with thick, viscid discharge, providing temporary relief after expulsion.
- Snoring and disturbed sleep, especially during winter.
- Post-nasal drips cause throat irritation.
- Burning or warmth in the eyes after the intake of mangoes.

## Family History

No hereditary or familial history of chronic sinusitis, asthma, or nasal polyposis was reported. Parents and siblings were free from allergies or atopic diseases.

# **Final Diagnosis**

Chronic sinusitis (Kaphaja Pratishaya or Kapha-Vata Samsrita Pratishaya with involvement of Pranavaha Strotas and Urdhva Jatru Pradesha).

#### Rationale of diagnosis

Correlation was established between the classical symptoms described in classical literature, like *Sleshma-Pravritti, Nasavarodha, Shiro-guruta*, and the patient's clinical presentation of nasal blockage, post-nasal discharge, heaviness of head, and mucus accumulation. Hence, the condition was identified as *Kaphaja Pratishyaya*, equivalent to chronic sinusitis in modern terminology.

## **METHODS**

# **Intervention Protocols**

The study adopted a single-case observation following classical Ayurvedic diagnostic and therapeutic principles. The intervention aimed to work on *Kapha-Vata Dosha Prakopa, Srotorodha* (obstruction of nasal passages), and inflammation of *Pranavaha Strotas* corresponding to chronic sinusitis.

The treatment comprised a combination of external procedures (Nasya Karma) and internal use of various herbal formulations. All formulations were administered as per the IAFA (Institute of Applied Food Allergy) therapeutic regimen under the supervision of a qualified Ayurvedic physician. Evaluation was carried out at baseline, 4 weeks, and 8 weeks using symptom-based scoring for nasal obstruction, headache, mucus discharge, snoring, and postnasal drip.

### **Ayurvedic Diagnosis**

# Diagnosis was established through Ayurvedic parameters:

- *Dosha* involvement: Predominantly *Kapha*, with associated *Vata*.
- Dushya: Rasa and Mamsa Dhatu.
- Strotas involved: Pranavaha and Urdhva- Jatrugata Strotas.
- Srotodushti type: Sanga (obstruction) and Strotomargavarodha.
- Roga Marga: Bahya Marga (Urdhvajatrugata).
- Rogabheda: Kaphaja Pratishaya

The Ayurvedic pathogenesis (Samprapti) initiated with Kapha Vriddhi caused by cold exposure, excessive sleep, heavy food, and Vegavarodha (suppression of natural urges). This resulted in Pranavaha Strotas Sanga, impaired Agni, and

accumulation of *Sleshma* in the nasal passages, producing *Shiro-guruta* (head heaviness) and *Nasavarodha* (nasal obstruction). Thus, therapy focused on *Kapha- Soshana* (liquefaction and elimination of *Kapha Dosha*), *Vata- Shamana* (pacification of *Vata*), *Srotoshodhana* (cleansing of nasal channels), *Agni- Dipana*, and *Rasayana chikitsa* (enhancement of metabolism and immunity).

## **Ayurvedic Treatment Protocols**

**External Therapy:** *Pratimarsha Nasya Karma* was selected as the primary local intervention due to its direct effect on the nasal passages (*Nasa hi Siraso Dvaram- Shusruta, Uttara Tantra*). Initially, IAFA Nasal All Clear X Drops, along with IAFA Nasal All Clear Spray, were administered twice daily (4-6 drops/nostril). The medicated oil acts as a *Kapha- Soshana* and *Sroto Shodhaka* agent, liquefying mucus and clearing sinus ostia. In later follow-ups, IAFA *Nasayoga Grutham* (lukewarm) was used to nourish mucosal tissue, pacify *Vata-Kapha*, and restore epithelial tissue. Ghee-based nasal instillation enhances drug absorption through the olfactory mucosa and exerts mucolytic, anti-inflammatory, and antioxidant effects.

# **Internal Therapy**

Oral Ayurvedic medicines were administered to address systemic *Kapha-Vata* imbalance and prevent recurrence.

Table 1: Formulation used as oral therapy with dosage and frequency

| Formulation                      | Dosage         | Frequency   | Time of Administration | Mode of action  |
|----------------------------------|----------------|-------------|------------------------|---|
| Aahar Amrutham Ras               | 30 ml of water | Twice daily | 1 h after a meal       | Kapha-Vata Shamana, mucolytic, anti-inflammatory              |
| IAFA Pitpapra Capsule            | 1 capsule      | Twice daily | Empty stomach          | Pitta-Kapha Shamana, anti-<br>histaminic,<br>immunomodulatory |
| IAFA Respiratory Detox<br>Tablet | 2 tablets      | Twice daily | After meals            | Anti-allergic, bronchodilator                                 |
| Sitopaladhi Tablet               | 2 tablets      | Twice daily | After meals            | Expectorant, demulcent  |
| IAFA Respiro Detox<br>Formula    | 3 g with honey | Twice daily | After meals            | Rasayana (rejuvenator),<br>mucolytic, immune-<br>enhancing    |
| Haridrakhandam                   | 1 teaspoon     | Twice daily | With warm water        | Anti-inflammatory, anti-<br>histaminic                        |

Table 2: Phased Avurvedic Treatment and Clinical Outcomes

| Phase         | Dates/<br>Duration | Intervention planned | Formulations   | Clinical Outcomes Observed                     |
|---------------|--------------------|----------------------|--|--|
|               | 28 May             | Srotoshodhana        | External: IAFA<br>Nasal All Clear X<br>Drops, IAFA Nasal |  |
| Shamana phase |                    | blockage and frontal | <u> </u>   | <ul> <li>Improved nasal airflow and</li> </ul> |

| •  |   | headache.  | Internal: Aahar Amrutham Ras, IAFA Pitpapra Capsules, IAFA Respiratory Detox Tablets, Sitopaladi Tablets, IAFA Respiro Detox Formula              | reduced mucous viscosity.  Relief in heaviness of head and eye discomfort.  Sleep quality improved, and snoring frequency reduced.   |
|--|---|--|---|--|
| Phase II -<br>Regeneration<br>and <i>Vata-</i><br><i>Shamana</i> Phase | 28 May -<br>30 June<br>2022 (4<br>weeks)              | Transition to regenerative and stabilizing formulations to restore mucosal integrity and prevent recurrence. | Same treatment continued.   | <ul> <li>Resolution of nasal obstruction and headache by the end of week 8.</li> <li>Disappearance of snoring and postnasal drip.</li> <li>Improved sense of smell and taste.</li> <li>No recurrence after exposure to cold or allergens.</li> </ul> |
| Phase III -<br>Stabilization<br>and<br>Maintenance<br>Phase            | 30 June –<br>30 July<br>2022<br>(follow-<br>up phase) | Continuation of nourishing and immunomodulatory therapy to sustain clinical benefits.                        | External: IAFA Nasa Yoga Grutham, Internal: Aahar Amrutham Ras, Haridrakhanda, Respiratory Detox Tablet, Sitopaladi Tablet, Respiro Detox Formula | <ul> <li>Sustained symptom-free state.</li> <li>No recurrence after cold exposure.</li> <li>Patient reported lightness of head, restful sleep, and improved digestion.</li> </ul>  |

Table 3: Evaluation Parameters and Observed Outcomes

| Parameter                      | Frequency of Evaluation    | Observed Clinical Outcome              |
|--------------------------------|----------------------------|--|
| Frontal headache severity      | Baseline, 4 weeks, 8 weeks | Complete relief by week 8              |
| Nasal obstruction score        | Baseline, 4 weeks, 8 weeks | Reduced by >90% by week 8              |
| Mucus discharge                | Baseline, 4 weeks, 8 weeks | Normalized consistency, minimal volume |
| Snoring frequency              | Baseline, 8 weeks          | Absent by week 8                       |
| Sleep quality                  | Baseline, 8 weeks          | Restored, sound sleep                  |
| Recurrence after cold exposure | Follow-up                  | None reported                          |

## **Dietary and Lifestyle Monitoring**

Dietary and behavioral modifications (*Pathya-Apathya*) were prescribed throughout the treatment.

# Pathya (To follow)

- Warm, freshly cooked, easily digestible meals.
- Frequent sipping of lukewarm water.
- Old rice, barley, millet, moong dal, Ragi, buckwheat.
- Green vegetables, pomegranate, amla, and bael fruit.
- Spices such as cumin, fennel, coriander, and curry leaves aid *Agni* and digestion.
- Light yoga like Ustrasana, Dhanurasana, Baddha Konasana, and Nadi Shodhana Pranayama twice daily.

## Apathya (To Avoid)

- Cold, oily, heavy, or fermented foods, leftover meals.
- High-lactose and high-fat dairy (cream, butter, cheese).
- Alcoholic beverages and carbonated drinks.
- Refined sugar, artificial sweeteners, and processed snacks.
- Night awakenings, day-sleep, or exposure to cold wind and air-conditioning.

### RESULT

**Table 4: Changes in Major Symptoms During Treatment** 

| Date (Time of visitation)                                  | Main Symptoms Reported   | Symptom Severity (0-5 scale*)  | Progress Summary   |
|--|--|--|--|
| 26 April 2022<br>(Baseline /<br>Start of<br>Therapy)       | <ul> <li>Frontal headache (Rt &gt; Lt)</li> <li>Nasal obstruction and congestion</li> <li>Thick, viscid mucus discharge</li> <li>Snoring and disturbed sleep</li> <li>Post-nasal drip, burning of the eyes after mango intake</li> </ul> | Headache-5<br>Nasal obstruction-5<br>Mucus discharge-4<br>Snoring-4<br>Post-nasal drip-3         | Severe <i>Kaphaja</i> features are reported by case. Patient reports daily frontal pain, heavy head, difficulty breathing through the nose, and dependence on nasal drops. Baseline score indicates chronic sinus inflammation with <i>Kapha-Vata</i> dominance. |
| 28 May 2022<br>(After 4 weeks-<br>Phase I<br>completion)   | <ul> <li>Occasional mild headache only on cold exposure</li> <li>Intermittent nasal obstruction</li> <li>Mucus thinner, less quantity</li> <li>Snoring reduced markedly</li> <li>No eye burning</li> </ul>                               | Headache-2<br>Nasal obstruction-2<br>Mucus discharge-2<br>Snoring-1<br>Post-nasal drip-1         | Significant clinical improvement after <i>Pratimarsha Nasya</i> with All Clear X Drops and internal <i>Kapha-Shamaka</i> therapy. Approximately 70–80 % relief in nasal symptoms and headache. Sleep pattern and energy improved                                 |
| 30 June 2022<br>(After 8 weeks-<br>Phase II<br>completion) | <ul> <li>No frontal headache</li> <li>Free nasal breathing</li> <li>No snoring or post-nasal drip</li> <li>Normal smell and taste sensation</li> <li>Digestive fire and sleep are normal</li> </ul>                                      | Headache-0 Nasal obstruction-0 Mucus discharge- 0 (occasional clear) Snoring-0 Post-nasal drip-0 | Clinical remission was achieved. No recurrence of symptoms despite cold exposure. Patient reported lightness of head and restful sleep.  |
| 30 July 2022<br>(Follow-up-<br>Phase III<br>Maintenance)   | <ul> <li>No headache or nasal symptoms</li> <li>Sustained energy, improved digestion</li> <li>Normal sleep and sense of smell</li> </ul>   | All parameters-0   | Sustained symptom-free state on continuation of maintenance. No recurrence or adverse events.  |

\*Severity scale: 5 = Severe, 4 = Moderate-Severe, 3 = Moderate, 2 = Mild, 1 = Minimal, 0 = Absent.

#### **DISCUSSION**

Chronic sinusitis represents a persistent inflammatory condition of the paranasal sinuses, characterized by mucosal edema, mucus retention, and microbial colonization.

### Pathophysiology (Samprapti) Correlation

As per Ayurveda, *Kaphaja Pratishyaya* arises when an individual with *Kapha-Pradhana Prakriti* or exposed repeatedly to *Kapha-Vardhaka Nidana*, such as cold, damp climate, daytime sleep, heavy unctuous food, and irregular routines, then experiences excessive accumulation of *Kapha Dosha* in the *Urdhva Jatru Pradesha*. This aggravated *Kapha* obstructs the free movement of *Vata Dosha* within the *Pranavaha Strotas*. The resulting *Sanga* (stagnation) and *Avarana* produce a state of functional congestion that manifests

as nasal obstruction, heaviness of the head, and dull frontal pain. Over time, the mixture of *Kapha* and *Vata* leads to the formation of thick, viscous mucus and mucosal oedema seen in chronic rhinosinusitis. The primary stage of Samprapati, i.e., Dosha Parkopa, is triggered by exposure to cold wind and a heavy diet, which initiates mucosal irritation in modern pathology. In the next stage, Dosha Sanga and Srotorodha occur when the aggravated Kapha physically blocks the minute channels of the nasal mucosa, and this is the obstruction of sinus ostia and ciliary dysfunction that traps mucus within the sinuses. The resulting stagnation creates a humid, nutrient-rich environment for microbial growth, which corresponds to the Ama Sanchya (accumulation of toxic metabolites) described in Ayurveda. Ama behaves like Kapha and precipitating local inflammation. As Vata Dosha becomes confined by Kapha Avarana, it loses its normal Pravritti (mobility), producing sensations of pressure, throbbing headache, and variable airflow caused by negative sinus ventilation. The disturbed Vata also contributes to disturbed sleep, which corresponds to the neurogenic component of chronic sinus pain and snoring. Progression from the acute to the chronic phase involves Strotodushti of the Sanga type structural blockage that prevents free drainage, leading to persistent mucus retention and potential formation of Nasa Arsha (nasal polyp). Therapeutic intervention in this case reversed an inflammatory exudate that contains oxidized proteins and microbial toxins, further aggravating each pathological step through Samprapti Vighatana.

## **Phased Ayurvedic Treatment**

The treatment of sinusitis (*Kaphaja Pratishaya*) in this case was systematically planned through four therapeutic phases, each of which works on the specific stage of *Samprapti* and restores balance within the *Pranavaha Strotas*.

# Phase I -Initial Cleansing and *Kapha-Soshana* (26 April - 28 May 2022)

The initial phase focused on clearing accumulated *Kapha* and re-establishing the patency of the nasal passages. The therapeutic principle applied Kapha-Soshana, Strotoshodhana, Pachana. The patient underwent Pratimarsa Nasya with IAFA Nasal All Clear X Drops, which contain seeds and oils of herbs such as Ivotishmati (Celastrus paniculatus), Maricha (Piper nigrum), Pippali (Piper longum), Vidanga (Embelia ribes), Shigru (Moringa oleifera), Haridra (Curcuma longa), Nagarmotha (Cyperus scariosus), Brihati (Solanum indicum), and Sariva (Hemidesmus indicus), and Yashtimadhu (Glycyrrhiza glabra) root extract and Til-thailam (sesame oil) as the vehicle. [12] These ingredients reflect Tikshna (penetrating), Ushna (warm), Srotoshodhaka (channel-clearing) properties, bringing liquidity to thick mucus, promoting drainage, and reducing stagnation. The Nasal All Clear Spray includes herbs such as *Tulsi* (*Ocimum sanctum*), Dronapuspi (Leucas aspera), Chandramulika (Kaempferia galanga), Agnimantha (Premna integrifolia), Vacha (Acorus calamus). Ajaji (Cuminum cyminum), Madhuka (Madhuca longifolia), and Saindhavam (Sodium chloride) in a nasal spray form.[13] These formulations emphasize Laghu (light), Teekshna action, and airflow restoration. Internally, formulations like Aahar Amrutam Ras. IAFA Pitpapra Capsules, Respiratory Detox Tablets, Sitopaladi Tablets, and IAFA Respiro Detox Formula were administered. Together they performed systemic cleansing by

enhancing Aani and reducing accumulation. Aahara Amrutham Ras, with Punarnava, Nirgundi, Shriphala, Bhumi Amalaki, and Chotti Dudhi, acted as a metabolic detoxifier and mucolytic by improving lymphatic and hepatic drainage. Pitpapra (Fumaria indica) reduced allergic inflammation via its antihistaminic alkaloids. Respiratory Detox Tablets and Respiro Detox Formula contained Tulasi, Guduchi. exerted etc.. which bronchodilatory, inflammatory, and expectorant effects. By the end of the first four weeks, there was marked improvement in nasal congestion, mucus thickness, and headache, reduced by nearly 70%. This demonstrated effective Kapha- Shamana and Srotoshodhana through both external and internal measures.

# Phase II- Regeneration and *Vata- Shamana* (28 May - 30 June 2022)

After significant decongestion, therapy was shifted towards restoring mucosal integrity and pacifying aggravated *Vata*. Internally and externally, the same baseline formulations were continued. These therapies provided mucosal nourishment, restored *Prana Vaha Strotas* patency, and normalized nasal function. By the end of eight weeks, all major symptoms, i.e., nasal blockage, snoring, post-nasal drip, and headaches, had resolved. The sense of smell and sleep quality were fully restored, marking the completion of structural regeneration and *Vata–Kapha Shamana*.

# Phase III- Stabilization and *Rasayana* Phase (30 June - 30 July 2022)

Once complete symptomatic remission was achieved, the focus shifted to stabilizing mucosal health and preventing relapses. The principle followed was Rasayana and Dhatu Sansthapana. At this stage, after effective cleansing, therapy shifted to restoring mucosal integrity and preventing recurrence. IAFA Nasayoga Grutham was newly introduced for Nasya karma, marking the regenerative and stabilizing phase. It contains Yashtimadhu (Glycyrrhiza glabra) and Go-The formulation reduces inflammation, ghrita. lubricates the mucosa, and restores ciliary movement. Glycyrrhizin acts as a natural anti-inflammatory and antioxidant agent. External treatment will be the same, along with which Haridra Khandam was added for supportive use that sustained anti-inflammatory and immunomodulatory balance. No recurrence occurred, confirming mucosal regeneration and restoration of Pranavaha Strotas' function.

## CONCLUSION

This case study shows that *Kaphaja Pratishyaya* corresponds to chronic sinusitis and can be successfully managed through a systematic, phasewise Ayurvedic approach focusing on *Kapha-Shamana*,

Vata-Shamana, Srotoshodhana, and Rasayana chikitsa. The treatment strategy began with decongestion and cleansing of the nasal passages, followed by mucosal regeneration and long-term stabilization.

Internal and external therapies like classical Nasya karma, mucolytic and anti-inflammatory herbal formulations, and systemic *Rasayana* support led to symptomatic remission within twelve weeks. The patient exhibited normalized nasal airflow, restored olfactory function, sound sleep, and sustained wellbeing without recurrence. This case highlights Ayurveda's strength in offering a multi-dimensional and sustainable therapeutic model for chronic sinus disorders, with long-term benefits beyond mere symptomatic control.

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