

## **An Overview of *Pratishyaya* and its Ayurvedic Management**

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### **Abstract**

*Pratishyaya* is commonest problem among *Nasagata roga*. In present era, the era of industrialization and modernization, there are some diseases which need to be given attention. *Pratishyaya* is one of them as respiratory system is in continuous contact with the external environment since birth and considered as prime site of hyper sensitization. Due to continuous changing in life style, urbanization, increased pollution, resistance to antibiotics becomes a big challenge to treat *Pratishyaya*. Negligence of acute stage or improper management and repeated attacks leads the disease to chronic phase i.e., *Dusht Pratishyaya*.

**Keywords:** Ayurveda, *Pratishyaya*, *Nasagata roga*, *Dusht Pratishyaya*

### **Introduction**

The word "*Pratishyaya*" is derived from "*Shyeng Gatau*" *Dhatu* and "*Prati*" *Upsarg* which means continuous movement of doshas. Many *Acharyas* have elaborately described the disease *Pratishyaya* in various *Ayurvedic* texts like *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridayam*. Characteristic features of *Pratishyaya* is *Nasashrava* (running nose), *Ghranauparodha* (nasal obstruction or congestion), *Shirashoola* (headache), *Shiroguravam* (heaviness of head), *Jwara* (fever), *Kasa* (cough), *Kaphotklesh* (phlegm), *Swarbheda* (hoarseness of voice), *Aruchi* (anorexia), *Klama* (tiredness), *Indriyanamasamarthyam* (altered functions of sense organs) <sup>[1]</sup>. If *Pratishyaya* is being left untreated, it has enough potential to develop many conditions like *Kasa* (cough), *Swasa* (dyspnea), *Gandhaanjnana* (anosmia), *Badhira* (deafness) and *Rajyakshma* (form of disease with multisystem involvement) <sup>[2]</sup>. In modern science it can be compared with respiratory tract infection.

**Table 1- Disease Review**

<b>Samhita</b>	<b>Sthana</b>	<b>Chapter</b>	<b>Description</b>
<b>Charaka Samhita</b>	<i>Sutra</i> <i>Sthana</i>	7 (Navegandharniya)	<i>Vaspa Vegdharana as a cause of Pratishyaya</i>
	<i>Nidana</i> <i>Sthana</i>	6 ( <i>shosha nidan</i> )	<i>Pratishyaya as a Lakshan of Sahasjanya, Dhaturkshyaja and Vishamashanaj Sosha.</i>
	<i>Chikitsa Sthana</i>	8 (Rajyakshama Chikitsa Adhyaya)	<i>Pratishyaya is given as a Lakshana of Yakshma and also described Samprapti as well as general treatment of Pinasa (Pratishyaya).</i>
	<i>Chikitsa Sthana</i>	26 (Trimarmiya Chikitsa Adhyaya)	<i>Symptoms as well as treatment of specific type of Pratishyaya i.e. vataja, pittaja, Kaphaja, tridoshaja Pratishyaya. Pathya is also given this chapter</i>
Sushruta Samhita	<i>Uttara Tantra</i>	22 (Nasagata Rogavigyana)	<i>Description of five types of Pratishyaya is given</i>
	<i>Uttara Tantra</i>	24 (Pratishyaya Pratishedhopkrama)	<i>Description about Hetu, Purvarupa, Lakshana, Chikitsa, Pathyapathya etc., with pakwa and apakwa Pratishyaya is given.</i>

Madhava nidana	<i>Second Part</i>	58 (Nasarognidana)	<i>description of Pratishyaya</i>
Sharangdhara Samhita	<i>Prathama Khanda</i>	In Nasarog Prakarana of Rogagananadhyaya	<i>description of Pratishyaya</i>
Bhava Prakasha Nighantu	<i>Chikitsa Prakaran</i>	56 (Nasarogadhikar)	<i>description of Pratishyaya</i>
Chakra Dutta		58 (Nasaroga Chikitsa)	<i>description of Chikitsa of Pratishyaya and description of Nava and Jeerna Pratishyaya</i>

Table 2 – Nidana of Pratishyaya are described by many Acharyas in different Samhitas

<i>Atiguru, Madhur, Sheeta, Ruksha Sevan</i>					+
<i>Atijalapana after meals</i>					+
<i>Atisheetambupanam</i>	+				
<b>Viharaaj (behavioural)</b>	<b>C.S.</b>	<b>S.S.</b>	<b>A.S.</b>	<b>K.S.</b>	
<i>Vega sandharana</i>	+	+	+		+
<i>Rajahdhumrasevan</i>	+	+	+		
<i>Shirasoabhitapam</i>	+	+			
<i>Rituvaishamya</i>	+				
<i>Atisambhasanam</i>	+		+		

<i>Prajagratiswapnam</i>	+		+	
<i>Atinariprasang</i>	+	+		
<i>Diwasayanam</i>		+		
<i>Apavitramukhashayanam</i>				+
<i>Snana in Ajirna</i>				+
<i>Tapa Sevana</i>		+		
<b>Mansik Hetus</b>	<b>C.S.</b>	<b>S.S.</b>	<b>A.S.</b>	<b>K.S.</b>
<i>Atikrodha</i>	+			

#### Samprapti ghataka of *Pratishyaya*

1. *Nidan – Vata Kapha Prakopak Ahara Vihara e.t.c.*
2. *Dosha – Kapha Vata Pradhana, Alpa Pitta, Rakta.*
3. *Dushya – Rasa and Rakta.*
4. *Agni – Jatharagni, Rasadhatwagni.*
5. *Srotas – Pranavaha, Rasavaha, Raktavaha.*
6. *Srotodushti - Sanga, Vimargagamana, Atipravruithi.*
7. *Adhithana – Nasa, Shiras.*

According to *Acharya Charaka*, consumption of etiological factors leading to aggravation of *Vatadosha* in head and produce *Pratishyaya*<sup>7</sup>.

*Acharya Sushruta* describes the manifestation of disease as vitiated *Vata* and other doshas individually or collectively associated with or without *Rakta* accumulate in head and produce *Pratishyaya*<sup>8</sup>.

*Acharya Vagbhatta* describes as vitiation of *Vata Dosha* in nasal cavity leads to *pratishyaya*. **Stages of *Pratishyaya*:**

**Amavastha:** symptoms includes: *Aruchi, Vaktra Virasam, Nasashrava, Rooja, Shirogurutavama, Kshavathu, Jwara* etc.

**Pakwavastha:** symptoms include: *Tanutawama Ama Linganama, Shirolaghuta, Nasalaghuta, Ghanapinkaphatwa* etc.

**Purvarupa of Pratishyaya:** *Acharya Sushruta* has described the symptoms of *Pratishyaya* as *Shirogurutwama, Kshawathu, Angamarda, and Parihristromta*<sup>10</sup>.

**Samanya Lakshana:** General symptoms of *Pratishyaya* are only mentioned by *Acharya Charaka* and *Maharishi Kashyapa* are as follows:

**Samanya Lakshana by Acharya Charaka:** *Shirahshoola, Shirogaurav, Ghranviplava, Jwara, Kasa, Kaphotklesha, Swarabheda, Indriya Asamarthatva*<sup>11</sup>

**Samanya lakshana by Maharishi Kashyapa:** *Daugandhta, Parikledita* etc<sup>12</sup>.

**Classification of Pratishyaya:** *Acharya Sushruta, Vagbhatta, Madhavakara, Bhava Mishra, Sharangadhara* have described five types of *Pratishyaya* i.e. *Vataja, Pittaja, Kaphaja, Raktaja, Sannipataja*. *Acharya Charaka* gives four types of *Pratishyaya* i.e *Vataja, Pittaja, Kaphaja and Sannipataja*, and also described *Dushta Pratishyaya* as advanced stage of *Pratishyaya*. *Maharishi Kashyapa* also described four types of *Pratishyaya*. *Rasa Ratana Samuchyaya* gives six types of *Pratishyaya*. *Ras Vagbhatta* described *Malasanchyajanya Pratishyaya*.

**Table 3 – Classification of Pratishyaya**

PRATISHYAY	C.S	S.S	A.H
A			
VATAJA	<i>Ghranatoda, Kshavathu, Jalabhsrava, Swarabheda</i> <sup>13</sup> .	<i>Anadhyapihita Nasa, Tanu Nasa Srava, Galtaluosthashosa, Nistoda Shankha, Swaropghata</i> <sup>14</sup> .	<i>Mukhashosha, Kshavathu, Ghranoprodha, Shishirkaphasruti, Nistoda Shankha, Shirahshoola,</i>

			<i>Kitika</i> <i>Eva</i> <i>Sarpanti,</i> <i>Chirapaki</i> <sup>15</sup> .
<b>PITTAJA</b>	<i>Nasagrapaka,</i> <i>Jwara,</i> <i>Vaktrashosha,</i> <i>Ushnapittasrava</i>	<i>Krishata, Panduta,</i> <i>Trishna Nipidita etc</i>	<i>Nasagrapaka,</i> <i>Ushnatamrapittasrava</i> <i>, Trishna,</i> <i>Bhrama, Ghranapidika</i>
	6.		8.
<b>KAPHAJA</b>	<i>Kasa,</i> <i>Aruchi,</i> <i>Ghanasrava,</i> <i>Kandu.</i>	<i>Sheetashuklasrava,</i> <i>Gurushiromukhata,</i> <i>Shirogalosthatalukandu</i> <i>etc.</i>	<i>Shwasa, Vamana,</i> <i>Gatragaurava,</i> <i>Mukhamadhurya,</i> <i>Aruchi,</i> <i>Kandu,</i> <i>Shuklakaphasrut.</i>
<b>RAKTAJA</b>		<i>Tamrakshi,</i> <i>Daugandhyaswasavada</i> <i>n,</i> <i>Gandhat</i> <i>anaveti, Krimipatana,</i> <i>Uroghata.</i>	<i>Nasakandu and other</i> <i>symptoms of Raktaja</i> <i>Pratishyaya is similar</i> <i>to that of Pittaja</i> <i>Pratishyaya.</i>
<b>SANNIPATAJA</b>	<i>Sarvanirupani,</i> <i>Tivra Ruja,</i> <i>Dukhadayee</i>	<i>Sarvani Rupani, Akasmat</i> <i>Vridhhi and Shanthi</i>	<i>Sarvaja</i> <i>Lakshana,</i> <i>Akasmat</i> <i>Vridhishanti.</i>

**Dusht Pratishyaya**

*Acharya Charaka* has described symptoms of *Dusht Pratishayaya* as *Avarodha, Abhighata, Srava, Gandhatnaveti, Bahuprakopi*.

*Acharya Vagbhatta* have described symptoms of *Dusht Pratishayaya* as *Sarvendriya Santapa, Agnimandya, Jwara, Kasa, Urahaparshwashoola, Mukhadaurgandhya, Nasa Kledata* and *shushkata, Anahyata* and *Vivriyata*.

Treatment:

Samanya Chikitsa:

- Ama Peenasa Chikitsa: Langhana, Deepana, Pachana, Swedan, Ikshu Vikara.*
- Pakwa Peenasa Chikitsa: Shirovirechana, Kavalgraha, Dhoompana, Snehpana, Vamana, Virechana, Asthapanam, Shaman Aushadha.*

*Samanya Chikitsa* according *Acharya Chakradutta: Panchamula Siddha Ghrita, Chitraka Hareetaki, Sarpiguda, Shadanga Yusha, Vyoshadi Churna, Nasya by Pathadi Taila* and *Shadbindu Taila*.

**Table 4 - Vishesha Chikitsa**

TYPE	C.S.	S.S.	A.H.
VATAJA	<i>Ghritapana, Shirovirechana, Snigdha, Dugdhapana, Mamsarasa,</i>	<i>Ghritapana, Shirovirechana, Sankara Sweda.</i>	<i>Ghritapana, Shirovirechana, Sankara Sweda.</i>
	<i>Dhumrapana, Panisweda, Upanaha, Sankara Sweda, Niruha</i>		

	<i>Basti.</i>		
<b>PITTAJA</b>	<i>Ghritapana, Dugdhapana Nasya, Parishechana Lepa (Pradeha), Ghreya (Koshna), Virechana</i>	<i>Ghritapana, Nasya, Parishechana, Lepa (Pradeha), Virechana, Kawala Dharana</i>	<i>Ghritapana, Nasya, Parishechana, Lepa (Pradeha)</i>
<b>KAPHAJA</b>	<i>Ghritapana, Vamana, Nasya, Langhana, Dhumrapana, Shire Ghritalepa, Sweda, Parisheka</i>	<i>Ghritapana Vamana, Nasya, Dhumravarti, Antarika, Aushadhisevana</i>	<i>Ghritapana, Vamana, Nasya, Langhan</i>
<b>SANNIPATAJA</b>		<i>Ghritapana, Dhumrapana, Gutika, Avaleha, Nasya, Shirovirechana</i>	<i>Ghritapana, Shirovirechana, Kawala Dharana</i>

<b>SANNIPATAJA</b>		<i>Ghritapana,</i> <i>Dhumrapana,</i> <i>Gutika, Avaleha,</i> <i>Nasya,</i> <i>Shirovirechana</i>	<i>Ghritapana,</i> <i>Shirovirechana,</i> <i>Kawala Dharana</i>
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**Upadrava:**

According to *Sushruta, Badhira, Andhata, Aghranam, Kasa* etc. are the complications of all types of *Pratishyaya*.

**Discussion:**

*Pratishyaya* is a broad term which covers the all nasal, para nasal sinuses, upper and lower respiratory tract infections. *Pratishyaya* can occur as an independent disease or as a complication of many other diseases or as a symptom of any systemic disease. *Pratishyaya* is Vata Kapha dominant *Tridoshaja Vyadi*. While analyzing all the *nidana's*, *Acharya* have clearly mentioned that the allergic factors like dust, fumes cause paroxysmal sneezing and rhinorrhea, while other factors like head injury, seasonal variations, suppressions of natural urges etc. can be potent to initiate the pathology.

*Acharya Sushruta* has described *Pratishyaya* as a separate chapter in *Uttaratantra* and it shows its importance. *Nidanas* of *Pratishyaya* are classified into *Kalantarajanaka* and *Sadyojanaka* by *Acharya Sushruta*. *Sadyojanaka Nidanas* can be compared with aggravating factors. *Doshas* are vitiated and *Khavegunya* is created due to *Kalatarajanaka Nidanas* and repeated contact with *Sadyojanaka Nidanas* cause recurrent attacks of disease. Stages of *Pratishyaya* are *Amavastha* and *Pakwavastha*, if these stages are being left untreated or mismanagement of these stages leads to severe and more complicated stage i.e. *Dushta Pratishyaya*. Different opinions are available regarding prognosis of *Dusht Pratishyaya* as according to *Acharya Sushruta*, *Dusht Pratishyaya* is *Krichcha Sadhya*, and *Acharya Vagbhatta* said *Dusht Pratishyaya* is *Yapya* while according to *Acharya Charaka* and *Madhavakara* *Dusht Pratishyaya* is *Asadhya Vyadhi*.

**Conclusion**

Treatment of any disease changes according to its *Hetu* and *Samprapti*. So it is necessary to know the causative factor as well as pathogenesis of disease to cure the disease. As

*Pratishyaya Vata Kapha* dominating *Tridoshaja Vyadi* but after analyzing the *Nidanas* and etiopathology of disease it becomes clear that involvement of *Rakta* is also there. *Acharya Sushruta* has described the first line of treatment as *Nidana Parivarjana*. Factors like *Desha, Kala, Vaya* of patient has also taken into consideration while treating the disease. Special attention should be given to different stages like *Amavastha* and *Pakwavastha* while treating the disease as improper treatment will leads to *Dusht Pratishyaya* which is advance stage and more difficult to treat. *Pathya- Apathya* should also be added with the prescribed medicines. Chronic phase of disease puts the patient in immuno- compromised state. After considering all these factors, it can be concluded that treatment approach should be to treat the disease condition as well as promote the immunity, physical and mental health of patient.

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