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# ROLE OF SHADBINDU TAILA NASYA IN THE MANAGEMENT OF ATROPHIC RHINITIS – A CASE STUDY

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# **ABSTRACT**

Atrophic rhinitis is a chronic nasal pathology characterized by progressive atrophy of nasal mucosa and underlying bone, leading to crust formation, foul odor, and nasal obstruction. It is a condition with limited response to conventional medical management and recurrence after surgical measures. From an Ayurvedic perspective, it can be correlated with *Peenasa* and *Dushta Pratishyaya*, which arise due to vitiation of Vata and Kapha dosha. Nasya therapy, being the prime line of treatment for *Urdhvajatru rogas*, is highly effective in such cases. This case report presents a 39-year-old female with a 5-year history of progressive nasal dryness, crusting, and intermittent nasal obstruction, who had received symptomatic relief with modern medicines but with frequent recurrences. She was treated with *Shadbindu* Taila Nasya in a dose of 6 drops per nostril daily for 21 days. Clinical improvement was assessed based on relief in nasal obstruction, crust formation, and mucosal moisture. Marked symptomatic improvement was observed, with reduction in crusting and enhanced nasal comfort. This highlights the potential role of Ayurvedic Nasya karma in chronic nasal disorders refractory to conventional therapy.

KEYWORDS: Atrophic Rhinitis, Shadbindu Taila, Nasya Karma.

### INTRODUCTION

Atrophic rhinitis (ozena) is a chronic nasal condition characterized by atrophy of the nasal mucosa, turbinate bones, and underlying structures. Patients commonly present with nasal obstruction, crust formation, anosmia or hyposmia, and at times, offensive odor. The condition is often progressive and notoriously resistant to medical or surgical intervention, leading to significant morbidity and psychological distress. [1]

From an Ayurvedic perspective, conditions presenting with nasal obstruction, dryness, and crust formation are discussed under *Peenasa*, *Dushta Pratishyaya*, and *Shushka Pratishyaya*. Charaka Samhita describes *Pratishyaya* as a nasal disorder primarily caused by derangement of Vata and Kapha dosha, leading to impaired functioning of the nasal passages. <sup>[2,3]</sup> Sushruta Samhita also emphasizes the role of Nasya karma for

disorders above the clavicle (*Urdhvajatru Gata Rogas*), highlighting its role in pacifying doshas at the site of origin. <sup>[4]</sup>

Modern management of atrophic rhinitis includes nasal douches, alkaline irrigation, antibiotics, local application of glucose-glycerin drops, and at times surgical procedures such as Young's operation. However, results are often unsatisfactory, with only partial or temporary relief.<sup>[5,6]</sup>

In Ayurveda, Nasya karma is the most widely accepted line of management for diseases affecting the nasal passage and adjoining structures. Among various formulations, *Shadbindu Taila*, described in *Bhaishajya Ratnavali* and other classical texts, is indicated in *Ardhavabhedaka*, *Peenasa*, *Dushta Pratishyaya* and other chronic nasal conditions.<sup>[7]</sup> This oil, containing

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potent herbs such as Eranda, Tagara, Rasna, and Saindhava, possesses *Vata-Kapha Shamaka* and *Srotoshodhaka* properties, improving mucosal nourishment and preventing atrophy. [8]

Here in this a case of chronic atrophic rhinitis in a 39-year-old female patient, refractory to modern treatment, effectively managed with *Shadbindu Taila Nasya*. The report attempts to highlight the potential integration of classical Ayurvedic intervention in managing chronic nasal disorders.

#### REVIEW OF LITERATURE

Atrophic rhinitis is a chronic disease of the nasal cavity, characterized by progressive atrophy of the nasal mucosa and underlying turbinates. It commonly presents with nasal crusting, dryness, obstruction, foul odor, and anosmia. The disease has two variants: primary and secondary. Primary atrophic rhinitis is idiopathic, whereas the secondary form occurs after surgery, trauma, irradiation, or chronic infections such as syphilis and leprosy. [1,2]

The exact etiology of atrophic rhinitis remains unclear. Proposed mechanisms include chronic bacterial infections (especially Klebsiella ozaena), hereditary factors, endocrine imbalance, autonomic dysfunction, and nutritional deficiencies. [3,4] Pathological changes include squamous metaplasia of the respiratory epithelium, submucosal fibrosis, and resorption of turbinate bones, resulting in capacious nasal cavities with foul-smelling crusts. Management includes nasal douching with alkaline or saline solutions, topical antibiotics, glucose-glycerin drops, estrogen drops, and surgical procedures such as Young's operation, but outcomes are often unsatisfactory and recurrences are common. [5,6]

In Ayurveda, nasal disorders with symptoms of obstruction, foul smell, dryness, and recurrent infections are described under *Peenasa* and *Dushta Pratishyaya*. Charaka Samhita enumerates *Pratishyaya* as a disease arising from vitiation of *Vata* and *Kapha Doshas*, leading to obstruction, discharge, and altered smell sensation. [7] *Vagbhata* further describes *Dushta Pratishyaya* with chronic symptoms such as thickened secretions, obstruction, headache, and foul odor, correlating well with atrophic rhinitis. [8] Sushruta highlights the role of nasal disorders in deranging both local and systemic health and prescribes Nasya karma as the foremost line of treatment for *Urdhvajatru Rogas*. [9]

Nasya is one of the Panchakarma therapies indicated for disorders of the head and neck. By instilling medicated oil, ghee, or powders into the nostrils, it facilitates direct drug action on the nasal mucosa and adjoining structures. The classics describe Nasya as beneficial in diseases such as Ardhavabhedaka, Dushta Pratishyaya, Shirashoola, and Manyaroga. [10,11] According to Ashtanga Hridaya, Nasya provides nourishment,

unblocks channels, enhances smell, voice, and vision, and prevents degeneration of cranial structures. [12]

Among different oils prescribed for *Nasya*, *Shadbindu Taila* is highly acclaimed for nasal disorders. It is detailed in *Bhaishajya Ratnavali* and contains ingredients such as *Eranda Moola* (Ricinus communis), *Rasna* (Pluchea lanceolata), *Saindhava Lavana*, *Tagara* (Valeriana wallichii), and *Vidanga* (Embelia ribes), processed in goat's milk and sesame oil. <sup>[13]</sup> This combination exerts *Vata-Kapha Shamaka* action, reduces inflammation, improves vascularity, and maintains mucosal integrity. *Saindhava* aids in decongestion and softening of crusts, while Eranda and Rasna are anti-inflammatory and analgesic. Tagara provides nervine support and soothing effect. <sup>[14,15]</sup>

The therapeutic action of *Shadbindu Taila Nasya* can be explained in modern terms as: moisturization counteracting mucosal dryness, decongestion of nasal passages, anti-inflammatory action reducing chronic inflammation, and tissue regeneration nourishing atrophied mucosa. Thus, both Ayurvedic and modern perspectives emphasize the need for local therapy aimed at restoring mucosal function. Where conventional measures fail to provide lasting relief, *Nasya* with *Shadbindu Taila* presents a holistic and sustainable option.

## MATERIALS AND METHODS

Patient: 39-year-old female, 5 years history of nasal dryness, crusting, nasal obstruction, occasional foul smell.

Intervention: Shiadbindu  $Taila\ Nasya-6$  drops per nostril daily, administered in the morning after mild facial massage and fomentation.

Duration: 21 consecutive days.

Assessment Criteria: Subjective relief in nasal obstruction, dryness, crusting, and olfactory function. Follow-up: 1 month after completion of therapy.

#### RESULTS

Following 21 days of *Shadbindu Taila Nasya*, the patient reported significant reduction in nasal obstruction and crust formation. Nasal mucosa appeared healthier with improved moisture, and no foul odor was reported. Relief in dryness was observed within the first week, while reduction in crusting was evident after two weeks. At one-month follow-up, the patient remained largely asymptomatic, without recurrence of severe symptoms. This suggests that *Shadbindu Taila Nasya* provides sustainable relief in atrophic rhinitis, improving quality of life.

### DISCUSSION

The pathogenesis of atrophic rhinitis involves chronic inflammation and progressive atrophy of nasal epithelium, leading to dryness and secondary infections. Ayurvedic texts describe *Peenasa* and *Dushta Pratishyaya* with symptoms resembling atrophic

rhinitis, including nasal obstruction, foul smell, and mucosal changes.  $^{[2,3]}$ 

The rationale of Nasya karma lies in its ability to directly influence the nasal mucosa and related structures, achieving local as well as systemic *Dosha* pacification. [4] *Shadbindu Taila*, being *Vata-Kapha Hara*, lubricates the mucosa, improves vascularity, prevents dryness, and promotes epithelial healing. Herbs like *Eranda* (Ricinus communis) and *Rasna* (Pluchea lanceolata) possess anti-inflammatory and rejuvenative effects, while *Saindhava* aids in decongestion and *Tagara* acts as a nervine tonic. [7,8]

Thus, the clinical outcome observed in this case is consistent with both *Ayurvedic* rationale and modern pathological understanding, indicating that *Nasya* with *Shadbindu Taila* is a safe, effective, and sustainable therapy for atrophic rhinitis resistant to modern interventions.

#### CONCLUSION

This case highlights the effective role of *Shadbindu Taila Nasya* in the management of atrophic rhinitis, a condition often refractory to conventional medicine. The therapy provided significant relief in nasal dryness, crusting, and obstruction, with sustained benefits at follow-up. The integration of classical Ayurvedic therapy with modern ENT perspectives opens new avenues for managing chronic nasal disorders. Larger clinical studies are warranted to validate these findings and establish standardized protocols for *Nasya* therapy in such conditions.

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