Acute Rhinosinusitis With Special Reference To Vataj Pratishyaya
– A Comparative View

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Abstract
The signs symptoms, etiology of acute Rhinosinusitis described in allopathy are similar with vataj pratishyay described by Ayurveda.

Introduction definition etiology, types are discussed and correlated with vataj pratishyay.

Introduction
Acute rhinosinusitis is an inflammation of the paranasal sinuses and the nasal cavity together. It does not lasting no longer than 4 weeks in uncomplicated cases. It can range from acute viral rhinitis (the common cold) to acute bacterial rhinosinusitis. It’s incidence lower case than 5% cold are followed by bacterial rhinosinusitis.

Acute rhinosinusitis cause may be viral, bacterial allergic or less frequently of other etiology. Bacterial rhinosinusitis get quick relief by administration of antibiotics.

Thus acute rhinosinusitis now a days becoming more common now a days as mucous membranes are continuous of nasal cavity and sinuses so simple cold and other symptoms if they are not rerated in time or become complicated ultimately land into Rhinosinusitis.

According to Ayurveda symptoms of Vataj pratishyay can be correlated with acute Rhinosinusitis so here both entities studied together for inference. Rhinosinusitis is the most common condition for which patient seeks medical care.

Types-
1) Acute.
2) Subacute.
3) Recurrent acute.
4) Chronic.

Most of the acute rhinosinusitis are caused by viral infection. According to Ayurveda, it can be correlated with Vataj pratishyaya.

According to Sushruta.

That means pricking pain in Shankha, Nasa, Danta, feeling of insect crawling around, cool nasal secretion, dryness in throat, palate, fullness sensation at forehead, change of voice, these are symptoms of quoted by Ayurved Samhitas on vataj Pratishayaya correlated with acute rhinitis and rhinosinusitis. Rhinosinusitis is specifically defined in the current European position paper on sinusitis and nasal polyps (EPOS 2012) because rhinitis and sinusitis coexists together so the
Corrected and accepted terminology is now Rhinosinusitis. Most cases of acute Rhinosinusitis are caused by viral infection associated with common cold. So it is very commonly seen around in community.

Symptomatic treatment with analgesic, decongestant and saline nasal irrigation is appropriate in patient who present with non severe symptom narrow spectrum antibiotics like amoxicillin are the 1st line of treatment if symptom are not improving rapidly. If limited improvement it then use of intranasal corticosteroids is recommended in acute Rhinosinusitis.

Definition

Inflammation of sinuses rarely occurs without concurrent inflammation of the nasal mucosa. Therefore Rhinosinusitis is a more accurate term for what is commonly called Rhinosinusitis. The American academy of otolaryngology-head and neck surgery defines it.

Etiology

Mass cases of acute rhinosinusitis are caused by viral infection associated with the common cold mucosal edema leads to obstruction of sinus ostia. In addition viral and bacterial infections impair the cilia transporting the mucous. The obstruction and slow transportation of mucous causes stagnation of secretion and oxygen tension within the sinuses is lowered. Most common causing bacteria and viruses are Staphylococcus streptococcus pneumoniae, hemophilus influenza, influenza virus, parainfluenza virus.

Following features are necessary for a diagnosis of acute rhinosinusitis (ARS) in adult.

- Sudden onset of 2 or more symptoms and one of which must include nasal blockage obstruction/congestion or anterior/posterior nasal discharge.
- Facial pain/pressure.
- Reduction of loss of small for less than 12 weeks.

This differs in children that they should have sudden onset of two or more of the following symptoms.

- Nasal blockage obstruction/congestion.
- Or discoloured discharge.

(In adenitis or adenoidal enlargement same symptoms but more than 12 weeks)

Imaging:

Radiographic imaging is not recommended for evaluation of uncomplicated acute Rhinosinusitis.

Management:

According to Ayurveda Vataj pratishyaya is a condition of amavastha i.e acute stage where snehapana is prohibited instead of Ghritpana other kriyakalp like snehan, swedan, vanama, dhumpana, kaval, gandush is given. Internal medicine such as Vyoshadi vati, Guduchi yoga, Talisadi vati, Sitophaladi churana are recommended. Pathya-apathy also view suggested koshn jal, madhu etc. according to modern view analgesic, decongestant and saline nasal irrigation is appropriate if not improved then accordingly antibiotic like amoxicilline or further intranasal corticosteroids added.

Overall discussion is now-a-days Rhinitis is concurrent with sinusitis. Hence, the term is now more accurate Rhinosinusitis is still can be correlated with Ayurvedic literature mentioned as Vataj Pratishyay having same sign and symptoms as that of viral rhinitis.
Conclusion

Signs and symptoms, etiology and overall appearance of acute Rhinosinusitis by allopathic view and Vataj Pratishyay by Ayurvedic point of view seems to be nearly equal. Both are treated by their relevant pathies so if they can be studied together the treatment would be more successful and recurrence rate and its complications can be overcome.

Further study required for better co relation between acute Rhinosinusitis and vataj pratishyay.

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