



Unit 35. Pratiśyāya & Allied Nāsā-roga

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Pratiśyāya (coryza/rhinitis), Duṣṭa-pratiśyāya (chronic/foul/complicated rhinitis), Pūya-rakta (bloody-purulent discharge), Nāsāpāka (suppuration), Nāsā-śoṣa (nasal swelling)

Learning objectives

By the end, you should be able to:

1. define and classify Pratiśyāya and allied nāsā-rogas; 2) outline nidāna-samprāpti-lakṣaṇa for each; 3) write doṣa-wise chikitsā (Śodhana/Śamana/Nasya/Kaśāya/Yoga); 4) prescribe pathya-apathya and state prognosis; 5) correlate with common ENT conditions for clinics.

A. Pratiśyāya (Coryza/Rhinitis)

1) Paribhāṣā & Pāṭhabheda (Definition & Types)

Pratiśyāya is an ūrdhva-jatrugata vikāra dominated by **Vāta-Kapha**, characterized by **nāsā-srava**, **kṣavathu (sneezing)**, **ghrāṇoparodha** etc. Suśruta enumerates **five types: Vātaja, Pittaja, Kaphaja, Raktaja, Sannipātaja**, and also describes allied nasal disorders under nāsā-gata roga. (Suśruta Saṃhitā, Uttara-tantra 22-24).

Śloka to remember (nidāna clue, Vāgbhaṭa):

अवश्यायानिलरजोभाष्यातिस्वप्नजागरैः ।
नीचाल्युच्चोपधानैः पीतेनान्येन वारिणा ॥
क्रुद्धा वातोल्बणा दोषा नासायां स्त्यानतां गताः ।
जनयन्ति प्रतिश्यायं वर्धमानं क्षयप्रदम् ॥
A.H. Uttara-sthāna 19 (Nāsā-roga-vijñāniya)

2) Nidāna (Common Etiologies)

- **Ati-śīta sparśa/avashyāya**, dust/smoke exposure, **ati-svapna/jāgarāṇa**, improper head-rest (**nīca-atyuccopadhāna**), sudden drinking of very cold water, anger—vitiates **Vāta-Kapha** locally in nāsā-mārga.
- Food errors: guru-śīta āhāra, adhyāśana; in **Pittaja/Raktaja**, uṣṇa-tikṣṇa-amlātyaya.
- **Vyāyāma immediately after snigdha-bhojana**, bathing with cold water during śīta-ṛtu.

3) Pūrva-rūpa & Rūpa (Clinical Features)

Doṣa-wise lakṣaṇa (Aṣṭāṅga Hṛdaya Uttara 19):

- **Vātaja:**
“tatra vātāt pratiśyāye mukha-śoṣaḥ bhṛśaṃ kṣavaḥ; ghrāṇoparodha-nistoda-danta-śaṅkha-śiro-vyathā; kīṭikā iva sarpanṭiḥ manyate parito bhruvau ...”
Key: dry nose & mouth, repeated sneezes, obstruction, prickling pain in teeth/temple/head, creepy sensation around eyebrows, thin cold discharge.
- **Pittaja:**
“pittāt tṛṣṇā-jvara-ghrāṇa-piṭikā-sambhava-bhramāḥ; nāsāgra-pākaḥ rūkṣoṣṇa-tāmra-pīta-kapha-srutih ...”
Key: thirst, mild fever, nasal papules, burning, coppery-yellow discharge, inflamed tip.
- **Kaphaja:**



“kaphāt kāso’rucih śvāso vamathur gātra-gauravam; mādhyam vadane, kaṇḍūḥ, snigdha-śukla-kapha-srutiḥ ...”
Key: cough, anorexia, dyspnoea, heaviness, sweet taste, itching, thick white mucoid discharge.

- **Raktaja**: admixture of blood in discharge, burning.
- **Sannipātaja**: mixed features, more severe and variable.

Śloka to memorize (first-line management guidance):

सर्वेषु पीनसेष्वादौ निवातागारगो भजेत् ।
स्नेहन-स्वेद-वमन-धूम-गण्डूष-धारणम् ॥
A.H. Uttara-sthāna 20.1-2

4) Samprāpti (Pathogenesis)

- **Hetu** → **Doṣa vitiation (mainly Vāta-Kapha, or Pitta/Rakta)** → stagnation in **nāsā-mārga** (Udāna-vāyu-srotas) → **śopha & srava**; in pittottha, **pāka**; in kaphottha, **ghanibhūta śleṣma** obstructs airflow; chronicity leads to **duṣṭa-pratiśyāya** with krimi-saṃsarga.

5) Upadrava / Bheda-saṅkara

- **Headache, anosmia/hyposmia**, sinus involvement, **kṣavathu, pūtinasya** (foetor), **nāsā-śoṭha/polypoid growths** (per Suśruta).

6) Chikitsā-sūtra (Doṣanusāra)

General line (A.H. Utt.20): Nivāta-āgāra; **Snehana-Svedana, Vamana** (in kaphaja), **Dhuma, Gandūṣa, Kavala, Nāvana/Pradhmana Nasya**; head-bandage (śiras ghaṇa-pariveṣṭana); **uṣṇa-snigdha** āhāra with light sour-salty taste.

Doṣa-specific:

- **Vātaja**: Sarpir prepared with **Vāta-ghna** dravyas/**Paṭu-pañcaka, sveda, nāsyā** as per Ārdita cikitsā; anu-taila/mūrchita ghṛta nasya in subacute stage.
- **Pittaja/Raktaja**: **Śītala pariśeka-pradeha, Madhura-dravya siddha sarpir pāna, kṣīra-daśaguṇa taila** (dhava, triphalā, śyāmā, śrīparṇī, yaṣṭi, tilvaka, niśā) for **Nāvana**.
- **Kaphaja**: **Laṅghana, Vamana** after **saksāra-ghṛta** or yavakṣāra with ghṛta, **tikṣṇa-pradhmana, gaura-sarṣapa lepa** to śiras.
- **Sannipātaja**: combination—**kaṭu-tikṣṇa nasya**, kavala, and kapha-pitta-vāta balancing sequentially.

Prayoga-yogas (examples; adapt to deśa-kāla-bala):

- **Dhuma**: śatāhvā-tvak-bilva-eraṇḍa-sāragvadha kalkam with vasa/ghṛta; or saktu + ghṛta dhuma.
- **Lepa/Upanāha**: gaura-sarṣapa on śiras in kaphottha.
- **Kaṣāya**: daśamūla kvātha uṣṇa peya in vātaja; **triphala-yaṣṭi** śītala pratiśyaya in pittottha.
- **Rasāyana/Support** (after śamana): pippalī-varḍhamāna in vāta-kapha prakṛti, gudūcī-haridrā for pittānubandha.

Pathya-Apathya (common):

- **Pathya**: uṣṇa-jala; yūṣa of kulattha/mūlaka (light); godhūma-yava preparations; madhura-sāra in pittottha; steam inhalation with vācā/ajājī (mild).
- **Apathya**: śīta-snānā, day-sleep, cold drinks, dust/smoke exposure, curd at night, uncooked salads in śīta-ṛtu.

Prognosis: Sādhyā if treated early; **kṛcchra** in sannipātaja/duṣṭa-pratiśyāya or when associated with nasal polyps/sinus suppuration.



B. Duṣṭa-pratiśyāya (Foul/Complicated Rhinitis)

Lakṣaṇa (key idea): chronicity with **pūti-gandha**, thick tenacious śleṣma, repeated blockage/anosmia, headaches; often **krimi-samsargi**. (Suśruta U.T. 24; A.H. U.T. 20 “Duṣṭa pīnāsa cikitsā”.)

Classical injunction (quote):

यक्ष्म-कृमिक्रमं कुर्वन् यापयेद् दुष्टपीनसम् ॥
... अश्व-विट्-द्रस-मूत्राभ्यां हस्ति-मूत्रेण चैकतः ।
क्षौमगर्भं कृतां वर्ति धूमं घ्राणास्यतः पिबेत् ॥
A.H. Uttara-sthāna 20 (Duṣṭa pīnāsa cikitsā)

Chikitsā

- Treat on lines of **Yakṣmā** and **Krimi** (internal **dīpana-pācana, krimighna**): vidanga, pippalī, harītakī, guḍūcī; longer course.
- **Dhuma** with medicated wick (vyōṣa etc.) as per verse; **Pradhmana** with tikṣṇa dravyas; **Vamana** if kaphoththa; **Avapīḍa-nasya** with kaṭu-tikṣṇa-uṣṇa oils.
- **Doṣa-anusāra śamana** identical to Pratiśyāya; attend to **ṛtu-caryā** and nidāna-parivarjana strictly.
- Think of **sinus involvement** (ENT correlation: chronic rhinosinusitis).

C. Pūya-rakta (Bloody-Purulent Nasal Discharge)

Paribhāṣā

Suśruta describes **Pūya-rakta** as discharge of **bloody pus** through the nostrils due to trauma to the forehead region or **uṣṇībhūta rakta-pitta-kapha** in the nose. (Suśruta Saṃhitā, U.T. 22: Nāsa-pāka, Rakta-pitta & Pūya-rakta lakṣaṇa; also U.T. 24 for management trends.)

Nidāna/Samprāpti: pitta-rakta doṣa with kapha admixture → **pāka** in nāsā-mārga → **pūya**; trauma/heat aggravation → **rakta-srava**.

Lakṣaṇa: **pūya-rakta srava**, foetor, burning, local tenderness, possible fever.

Chikitsā-sūtra

- Control **pitta-rakta: śītala pariśeka-pradeha, madhura-tikta dravyas**, ghr̥ta-pāna (madhura-dravya-siddha).
- If thick kapha predominates, **avapīḍa-nasya** with tikṣṇa dravyas after mild **snehana-svedana**; avoid strong vamaṇa when active bleeding.
- **Rakta-pitta** measures if overt bleeding (coolants; rakta-prasādana like drākṣā, yaṣṭi, udumbara-patrādi in lepa).
- ENT correlation: **bacterial rhinosinusitis with epistaxis**.

Prognosis: **Sādhya/kṛcchra-sādhya** depending on chronicity and tissue involvement.

D. Nāsāpāka (Suppurative Inflammation)

Definition

Described as **purulent inflammatory state** in the nostrils with **piṭikā/aruṣa** and foul odour due to **pitta** vitiation (Suśruta U.T. 22). Vāgbhaṭa mentions variants like **Nāsāgra-pāka**.

Lakṣaṇa (A.H. Utt.19): burning, **pāka** at nasal tip, coppery-yellow discharge in pittottha.

Management point (A.H. Utt.20):



“pāke dīptau ca pitta-ghnaṃ; tikṣṇaṃ nasyādi saṃsrutau” — use **pitta-śāmaka** when burning/inflammation is dominant; if there is profuse srava, **tikṣṇa nasya/pradhamana** to clear kapha.

Chikitsā

- **Śītala** measures (śatadhauta ghr̥ta lepa locally), **triphala-yaṣṭi** parisheka, **navana-taila** prepared with **madhura-tikta** dravyas (as cited under Pratiśyāya pittottha).
- Internal: **madhura dravya-siddha sarpir**, **gudūci-nīmbādi** in pittānubandha, **daśamūla kvātha** if pain/edema.

E. Nāsā-śopha (Nasal Swelling)

Enumeration

Suśruta enlists **four kinds of local śopha** in the nose (doṣa-bheda: vāta, pitta, kapha, sannipāta) (U.T. 22). Can overlap with **arśas** (polypoid growths) and **arbudas** (tumours).

Lakṣaṇa

- **Vātaja śopha**: śūla, rūkṣatā, alpa-srava.
- **Pittaja**: daha, raga, pīta-tāmra srava.
- **Kaphaja**: gaurava, śveta-snigdha śoṭha with manda-vedanā; **ghrāṇoparodha**.
- **Sannipātaja**: mixed features, often chronic.

Chikitsā

- As per **Śopha-vijñāna** principles & local nāsā-roga protocols: doṣa-anusāra **lepa**, **sirāvedha** in raktottha congestion, **nāsya** (tikṣṇa in kapha; śamana in pitta), **upanāha**; treat nidāna (allergens/irritants) and gut **āma** if present.
- ENT correlation: **acute nasal cellulitis/vestibulitis**, early **polypoid mucosal edema**.

F. Samānya Pathya-Apathya (for entire cluster)

Do

Don't

Warm room, protect from wind (**nivāta-āgāra**). Cold baths, day sleep, late nights.
Uṣṇa-snigdha diet; light sour-salty if vātaja/kapha. Ice-cold drinks, curd at night, heavy/fried in kapha states.
Steam/dhuma with mild agents; kavala/gandūṣa. Dust/smoke exposure, perfumes/irritant sprays.
Gentle svedana; doṣa-suited nasyas. Untimely vama during bleeding/pitta flare.

G. Prognosis (Sādhya-Asādhya Lakṣaṇa)

- **Acute doṣaja Pratiśyāya**: **sādhya**.
- **Duṣṭa-pratiśyāya**, **Sannipātaja**, polyps/tumours: **kṛcchra-sādhya/yāpya**.
- **Pūya-rakta** with deeper sinus disease: guarded until pāka & rakta-pitta settle.

H. Viva/Clinic Pearls

- **Repeated sneezing + watery discharge + obstruction** → think **Vātaja/Kaphaja Pratiśyāya**; **yellow-burning** → **Pittaja/Nāsāpāka**.
- **Foul smell** suggests **Pūti-nāsya/Duṣṭa-pratiśyāya**; **bloody-purulent** → **Pūya-rakta**.



- Start with **nidāna-parivarjana**, then **doṣa-anusāra śodhana/śamana**—**this alone converts many “recurrent colds” to responsive states.**
- **A.H. Utt.20.1-2** is the ready-made opening prescription logic for **Pratiśyāya**.

I. Authentic Ślokas to Quote in Exams

1. General line of management (all Pratiśyāya):

सर्वेषु पीनसेष्वादौ निवातागारगो भजेत् ।
स्नेहन-स्वेद-वमन-धूम-गण्डूष-धारणम् ॥
Aṣṭāṅga Hṛdaya, Uttara-sthāna 20.1-2

2. Duṣṭa-pīnāsa (Duṣṭa-pratiśyāya) principle:

यक्ष्मकृमिक्रमं कुर्वन् यापयेद्दुष्टपीनसम् ॥
Aṣṭāṅga Hṛdaya, Uttara-sthāna 20 (Duṣṭa-pīnāsa cikitsā)

(Use these verbatim; they fetch direct “śloka marks.”)

Self-check (quick)

- Which doṣa pattern shows **mukha-śoṣa + kṣavathu + nistoda**?
- In which subtype do you prefer **laṅghana + vamaṇa + tikṣṇa-pradhamana**?
- What differentiates **Nāsāpāka** from **Pūya-rakta** clinically?

Assessment

Long Essays (10 marks each)

1. Discuss Pratiśyāya—nidāna, samprāpti, bheda, and doṣānusāra cikitsā. Add suitable ślokas.
2. Write an essay on Duṣṭa-pratiśyāya: definition, pathogenesis, clinical features, and management including dhūma-nāsya protocols. Mention differential diagnosis with chronic rhinosinusitis.

Short Essays (5 marks each)

1. Nāsāpāka—lakṣaṇa and treatment.
2. Pūya-rakta—samprāpti and management.
3. Enumerate nāsā-śoṣa types and outline general line of treatment.
4. Role of **Avapīḍa-Nasya** and **Pradhamana** in kapha-dominant nāsā-rogas.
5. Pathya-apathya in Pratiśyāya (any five each).

Short Answers (2 marks each)

- Define **Kṣavathu**.
- Two nidānas aggravating kapha in nāsā.
- Mention one **pitta-śāmaka Nāvana taila** formulation base.
- “Nāsāgra-pāka”—write two features.
- Two **krimighna** dravyas used in duṣṭa-pratiśyāya.



MCQs (circle one; 1 mark × 5)

1. Thick white, snigdha discharge with gātra-gaurava is typical of:
a) Vātaja b) Pittaja c) **Kaphaja** d) Raktaja
2. “Nivāta-āgāra” is first advised in:
a) **All Pratiśyāya** b) Only Vātaja c) Only Pittaja d) Only Kaphaja
3. Bloody-purulent nasal discharge is termed:
a) Nāsāpāka b) **Pūya-rakta** c) Pūtinasya d) Nāsā-śoṣa
4. Dhava + Triphalā + Yaṣṭi etc. in kṣīra-daśaguṇa taila is indicated in:
a) Vātaja b) **Pittaja/Raktaja** c) Kaphaja d) Sannipātaja
5. “Yakṣma-krimi-krama” in treatment indicates:
a) Acute rhinitis b) **Duṣṭa-pratiśyāya** c) Nāsā-śoṣa d) Kṣavathu

MCQ Key: 1-c, 2-a, 3-b, 4-b, 5-b.

References

Classical

- **Suśruta Saṃhitā**, Uttara-tantra:
 - **Adhyāya 22:** Nāsā-gata-roga-vijñānīya (causes, classification; includes Nāsāpāka, Pūya-rakta, Nāsā-śoṣa, Kṣavathu, etc.).
 - **Adhyāya 24:** Pratiśyāya—lakṣaṇa & cikitsā (doṣa-wise, śodhana/śamana, dhūma-nāsyā).
- **Aṣṭāṅga Hṛdaya**, Uttara-sthāna:
 - **Adhyāya 19:** Nāsā-roga-vijñānīya (doṣa-wise signs of Pratiśyāya).
 - **Adhyāya 20:** Nāsā-roga-pratiśedha (comprehensive treatment of Pratiśyāya, Duṣṭa-pīnāsa, Kṣavathu/Putaka, Nāsā-śoṣa, Nāsānāha, Pūtinasya, Pūya-rakta, Arśas/Arbuda).

Modern (for correlation & clinics)

- Logan Turner’s **Diseases of the Nose, Throat and Ear** (latest ed.): chapters on acute/chronic rhinitis and rhinosinusitis.
- Dhingra & Dhingra, **Diseases of Ear, Nose and Throat & Head-Neck Surgery:** rhinitis/rhinosinusitis, nasal vestibulitis.
- Shenoy & Shenoy, **Manipal Manual of Surgery** (for general principles of swellings, abscess, cellulitis—correlative reading).

Quick 3-line recap

- **Pratiśyāya** = doṣaja coryza; start with **nivāta-āgāra + snehana-svedana-nasya/vamana (kaphaja)**, tailor to doṣa.
- **Duṣṭa-pratiśyāya** = chronic/foul; add **krimi-yakṣma** approach, **tikṣṇa dhūma/pradhamana**, strong nidāna-parivarjana.
- **Pūya-rakta/Nāsāpāka/Nāsā-śoṣa** = pitta/kapha-led complications; coolants + appropriate **nāsyā** and local measures, watch for sinus disease.