



Review Article

## CONCEPT OF AVAPEEDA NASYA IN SHALAKYA TANTRA

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### ABSTRACT

Avapeeda nasya is a special procedure described to treat *Urdhwajatrugata vikaras* in Ayurveda. In this procedure fresh juice (*Swarasa*) is obtained by squeezing paste of herbs or decoction is used to instil in nostril. *Shalakyta* is special branch of Ayurveda which deals with the diseases above clavicle (*Jatru*). Aiming for *Vyadhi-parimokshana* treatment can be done by *Sanshamana* or *Sanshodhan* methods. *Panchakarma* is *Shodhana* type in which *Nasya* is a procedure. *Acharyas* mentioned *Nasa hi shirso dwaram*, meaning it is the portal to head (for drug administration). To critically appraise and understand the standard *Avapeeda Nasya* is the focus of my presentation. Procedure of *Avapeeda Nasya*, its difference from *Sneha nasya*, mode of action and other norms are discussed in the paper.

*Avapeeda Nasya* acts as *Shodhana* and *Shamana*. When abundance of *Doshas* are present *Tikshna dravyas* are used to clear the channels (*Sroto-Shodhana*), when *Doshas* are mild or moderate *Shamana dravyas* are used. To expel *Doshas* from upper body, *Nasa* is the portal to *Shiras*. The active principle of the medicine used in *Nasya* reaches *Shringataka marma* (*Sira marma*) and is distributed to *Moordha- Netra - Shrotra - Kantha* and thereby expel morbid *Doshas*. Drug reaches the target area by crossing nasal mucosa, thereafter transported via nerve tract, systemic circulation or by lymphatics. Intra-nasally administered drug has higher bioavailability as it avoid first pass mechanism at liver and evade BBB.

### INTRODUCTION

*Avapeeda nasya* is a procedure described to treat *Urdhwajatrugata vikaras* in Ayurveda. In this procedure, fresh juice (*Swarasa*) is obtained by squeezing paste of herbs or decoction is used as *Nasya*. *Shalakyta* is special branch of Ayurveda dealing with the diseases above clavicle (*Jatru*). Ayurveda is a science of life in which *Swasthya* and *Vyadhita* are two conditions either of them are present. *Swasthawastha* is to be maintained. Aiming for *Vyadhi-parimokshana* treatment can be done by *Sanshamana* or *Sanshodhan* methods. *Panchakarma* is *Shodhana* type. It has 5 *Karmas* viz., *Vamana*, *Virechana*, *Basti*, *Nasya*, *Raktamokshana*.

Some *Acharyas* (*Acharya Charaka*) included *Asthapana* and *Anuvasana Basti* instead of *Raktamokshana*. *Nasya karma* is a procedure in which morbid *Doshas* are expelled out by nasal route. *Acharyas* mentioned *Nasa hi shirso dwaram*, meaning it is the portal to head, it is a promising route if specifically *Shiras* is targeted for drug administration. However *Nasya* itself is of many types and act as *Shodhana* and *Shamana* both. Like for *Prabhoota dosha* conditions *Sneh-virechana nasya* or *Avapeeda nasya* or *Pradhamana nasya* or *Dhooma nasya* can be given depending upon the then present conditions. For *Brimhana* or *Shamana* process *Sneha nasya* or *Marsha nasya* or *Pratimarsha nasya* etc is given. To critically appraise and understand the standard *Avapeeda Nasya* is the focus of this paper.

### METHOD

Classical texts like *Charaka samhita*, *Sushruta samhita*, *Ashtanga Hridayama*, *Harita samhita* and contemporary books like *Kriya kalpa* by Prof. Dhiman were read to have keen understanding regarding

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*Avapeeda nasya*. Articles and literature available were critically analysed and appraised for the paper.

### Definitions

1. **Shalaky** [1]- One of the eight branches of Ayurveda dealing with diseases of ear, eye, oral cavity, nose and in supraclavicular region (*Jatru-urdhwa*).

2. **Nasya**[2]-Drug or medicated *Sneha*, when administered through nose is known as *Nasya*.

**Synonyms of Nasya-** *Nasta prachhardana, Nasta karma, Navana, Shirovirechana, Murdha virechana.*

### Classification

According to *Acharya Charaka*

• 3 types on the basis of mode of action [3]

1) *Rechana*, 2) *Tarpana (Brimhan)*, 3) *Shamana*

• 5 types on the basis of method of administration[4]

1) *Navana*, 2) *Avapeeda* 3) *Dhmapana* 4) *Dhooma*  
5) *Pratimarsha*

• On the basis of parts used in the making of *Nasya*

7 types (*Twaka, Patra, Pushpa, Moola, Phala, kanda, niryasa*)

According to *Acharya Sushruta*[5]

S. No	Type of Nasya	Hraswa matra	Madhyama matra	Pravara matra
1	<i>Snehana nasya</i> [13]	8 Bindu	16 Bindu ( <i>Shukti matra</i> )	32 Bindu ( <i>Pani-shukti</i> )
2	<i>Shodhana/Shirovirechana nasya</i> [14]	4 Bindu	6 Bindu	8 Bindu
3	<i>Marsha nasya</i> [15]	6 Bindu	8 Bindu	10 Bindu
4	<i>Pratimarsha nasya</i> [16]	2 Bindu	2 Bindu	2 Bindu
5	<i>Avapida nasya</i> [17]	4 Bindu	6 Bindu	8 Bindu

1 *Bindu*[18] = 10 drops= 0.5ml (here one *Bindu* means quantity of liquid which falls after dipping two phalanges of *Pradeshini* i.e., index finger)

### Time of administration of Nasya/Kaala

✓ According to *Doshas*[19]

*Kapha* – At morning/*Poorvahne*

*Pitta* – Mid day/*Madhyahne*

*Vaata* –Evening/*Aparahne*

✓ According to *Ritu/season*[20]

*Sharada, Basanta* – *Poorvahne*

*Hemanta, Shishira* –*Madhyahne*

*Grishma* – *Aparahne*

*Varsha* – *Saatape/sunny day*

✓ According to Diseases: A.S.

*Vata dosha, Aptanaka, Swarabheda, Hidhma, Ayaama, Manyasthambha - Pratah / saayam*

*Lala Srava, Supti, Pralapa, Pooti-mukha, Karna-nada, Ardita, Trishna - Ratri*

1) *Nasya* 2) *Shirovirechana* 3) *Pratimarsha* 4) *Avapeeda* 5) *Pradhmana*

According to *Acharya Vagbhata*[6]

1. *Virechana* 2. *Brimhana* 3. *Shamana*

According to *Acharya Kashyapa* [7]

1. *Shodhana* 2. *Poorana*

According to *Acharya Sharangadhara*[8]

1. *Rechana* 2. *Snehana*

According to *Bhoja*

1. *Prayogika* 2. *Snehika*

• **Eligible Age:** According to *Ashtanga Hridayam*[9]  
7 years- 80 years, 8-80 years (*Sharangdhara*)

• **Avadhi/Duration:** According to *Ashtanga hridayam* Seven days [10], not more than 7 days (*Arundatta*), 5,7,9 days (*A.S*)[11]

• **Antar/gap**[12]: *Nasya* can be repeated after 1, 2, 7, 21 days (*Sushruta*), 1, 2, 3, 5, 7 days (*Sharangadhara*).

• **Types of Nasya and Matra:** Following table describes the *Matra* mentioned in texts.

### Concept of Avapeeda Nasya

The word *Avapeeda* indicates process where *Avapidana* is required to acquire drug for nasal instillation. This drug can be prepared out of *Swarasa, Shrita (Kwath), Sheeta kalpana*[21] or collecting the *Aushadha swarasa* by making paste (*Kalka*) (*Sharangdhar 8/12-13*)

It is used mostly for *Shirovirechan*, but according to texts:

**Avapeeda nasya is of two types**[22]

1. *Shodhana*

2. *Stambhana (Shamana)*

To remove the morbid *Doshas Shodhan Avapeeda* is used, and to stop any nasal secretion which may turn into harmful situation the *Stambhana* is used like in *Raktapitta, Mastulunga kshaya* etc.

**Indications**[23]: *Abhishyanda, Sarpa danshtra, Visangya, Manas-vikara, Sannipata, Vishamjwar,*

*Atinidra, Mada-moorchha, Unmada, Apasmara, Krimija-shiroroga, Ksheena, Raktapitta* etc

**Contraindications**<sup>[24]</sup>: *Ajirna, Bhukta bhakta, Peeta-sneha, Madya-toya patukama, Snata shirah, Kshut-trishna-shramarta, Navajwara, Murchhita, Vyavaya-vyayama-paana klanta, Virikta, Anuvasita, Nava-pratishyaya, Durdina* etc and those activities where *Vata dosha* gets vitiated.

#### Method of Administration

- **Poorva karma**:<sup>[25]</sup> *Snehana* and *Swedana* is done in *Tyakta mootra puresha* patient in *Vyabhra kaal* (clear sky).
- **Pradhana karma**:<sup>[26]</sup> In supine position with *Pralambita shiras* (extended head), extract is instilled with right hand in one nostril (preferably Rt) keeping the other nostril closed. Process is repeated with other side. Mild massage is given over soles, palm, shoulders, ears, forehead, scalp, neck region. Patient is asked not to swallow the *Nasya dravya* with *Doshas* which are coming in mouth. He is asked to spit it.
- **Pashchata karma**: *Avapeeda nasya* is *Shodhana* in quality so *Acharyas* has suggested using *Ghrita /Madhura aushadha siddha ghrita/ Sneha* after *Avapeeda Nasya*. Then *Gandusha* and *Dhoomapana* can be done accordingly<sup>[27]</sup>. But *Sharangdhara* clearly said not to use *Kavala* and *Dhoomapana* after *Virechanika nasya*<sup>[28]</sup>.

**Sushruta**<sup>[29]</sup> – In *Sushruta Samhita* it is mentioned that *Sarpi nasya* or *Nasya* with *Madhura aushadha siddha sarpi* should be given at the end of *Avapeeda nasya*.

**Ashtanga Hridayam** <sup>[30]</sup>– In the text it is mentioned that *Sneha nasya* should be given at the end of *Virechana nasya* according to *Dosha bala*.

**Chakradatta**<sup>[31]</sup>– He suggested to use *Sneha nasya* after *Virechanika nasya* according to *Doshas* involved but he introduced a different method to give *Sneha nasya*. He advocated to give *Sneha nasya* after three days of *Virechana nasya* then to repeat *Virechana nasya* for next three days. Thus one week is obtained.

#### **Samyak-heena-atiyoga** <sup>[32]</sup>

- **Samyak yoga**- Lightness in head, cleansed sense organs and *Srotoshuddhi*, relieve in symptoms, *Manas* and *Indriyas* working properly.
- **Heena yoga**- Itching in body, heaviness, feeling of being coated by something, *Kapha srava* from mouth and nose etc are *Lakshana* of *Heena yoga*.
- **Atiyoga**- *Mastulungagamey, Vatvridhi, Indriya vibhrama*, emptiness in head, are *Lakshana* of *Atiyoga*.

#### Indications of Avapeeda nasya in diseases from various texts

- *Shirish beeja – Moola avapeeda – Ardhavbhedaka - Su. U. 26/31*
- *Vanshmoola – Karpoor avapeeda – Ardhavbhedaka - Su. U. 26/32*
- *Vacha– Magadhika avapeeda – Ardhavbhedaka -Su. U. 26/32*
- *Guda nagar nasya – Nasa roga -A. S. U. 24/39*
- *Hingu, Trikatu, Vatsaka etc – Putinasa -Su. U 23/45*
- *Shunthi guda swaras – All Shiroroga - Vangasena Shiroroga /64*
- *Shunthi swaras pippali, vacha –Suryavarata - Vangasena Shiroroga /13*
- *Kalinga, Hingu, Maricha, Laksha – Peenasa -Yoga Ratnakar, Nasa roga/1 Katphal, Saindhava etc*
- *Acharya Harita* <sup>[33]</sup> mentioned 5 types of *Nasa roga* and he formulated only 5 combinations to treat them – Four are *Avapeeda nasya*, and the fifth One is *Raktamokshan*.

#### Mode of action

##### ➤ Ayurvedic Concept

- *Aushadh* given as *Nasya* reaches *Shiras/brain* via *Nasa*, as *Acharyas* has mentioned *Nasa* is portal to head<sup>[34]</sup>. Medicines get distributed to the targets and scratches out the morbid *Doshas*.
- **Shringatak marma** (*Sira marma*) is the conjugation of *Siras* of *Netra-Nasa-Kantha-Shrotra*, thus the medicines reaches *Shringataka marma* via *Nasa marga* and gets distributed to *Netra-shrotra-kanthadi siramukha*. From here all morbid *Doshas* gets removed like *Ishika* from *Munja*<sup>[35]</sup>.

##### ➤ Modern Concept<sup>[36]</sup>

Intra-nasal drug – It represents an administration route of active pharmaceutical ingredients for local-systemic-CNS actions.

Modern science is now considering this route as a potent parenteral route for brain targeting as it bypass Blood Brain Barrier.

**BBB** is tight junctions with very high electrical resistance thus creating a barrier.

**BCB** presence of double layered membrane (Arachnoid membrane) acts as barrier for movement between blood and CSF.

Drug transport occurs by three pathways -1) Lymphatic 2) Vascular 3) Neural pathway.

**1. Lymphatic pathway**- CSF drains through *Cribriform plate* into nasal lymphatic which are free of valves.



**2. Vascular pathway-** Nasal cavity has rich blood supply and greater surface area provided by three turbinates on either side to absorb the administered medicine into blood. Medicine gets retained in venous supply (facial and ophthalmic vein) and communicates with cavernous sinus (can be correlated to *Shringataka marma*). Lowered head, raised level of legs favours the blood circulation to head and the *Swedan karma* adds to it.

**3. Neural pathway-** The terminal nerves running along Olfactory nerve are connected with limbic system of brain. Also drug from olfactory region is carried along olfactory neurons to CSF & CNS tissue, and from nasal cavity along with branches of trigeminal nerve to PONS.

Drug transport across olfactory epithelium occur by -

- Intracellular method- For lipophilic drug transport.
- Paracellular method- For hydrophilic drug transportation.
- Olfactory nerve pathway- The dendrite of olfactory neurons are connected to mucous layer over olfactory epithelium, and the axon enters cribriform plate of ethmoid. It passes through subarachnoid space comprising CSF.

Drug follow trigeminal nerve path as the nerve passes through olfactory and respiratory epithelium of nose, then reaches CNS thereby PONS. Cranial nerve 5,6,7,8 originates from ventral part of pontine nucleus, thus delivering the medicines from nasal cavity to pons and brain tissue.

#### Advantages of Intra nasal drug Administration modern view

- Non-invasive method
- Easy self administration
- Bypassing Blood Brain Barrier
- Can cross Blood-CSF- barrier
- Rapid absorption
- No hepatic first pass metabolism
- Increases brain exposure at similar dosage than oral.

#### RESULT

*Avapeeda nasya* is widely used in *Shalaky tantra* usually for removing morbid *Doshas* out of the *Uttamanga (Shiras)*. It is indicated in *Pratishyaya-Shiroroga-karnaroga- Nasaroga- Gala roga- Manas roga- visha* etc. It is mainly used to open the blocked channels (*Srotoshodhaka*).

In comparison to other branches of Ayurveda, *Shalaky* has described *Avapeeda Nasya* with great compassion along with other types of *Nasya*.

#### DISCUSSION

*Avapeeda nasya* is a type of *Nasya* where process called *Avapeedan* is done i.e., making paste and expressing out juice or by using *Kwath*.

The drugs are usually of *Teekshna guna* as *Avapeeda nasya* is expected to expel out the *Dushta doshas* by *Shiro-virechana*. The instilled medicine shows local effect as getting into contact to the local tissue, systemic effect by getting into vascular system, and effect on CNS by passing via nasal lymphatics, rich nasal blood supply, and nerve like olfactory nerve & trigeminal nerve.

The vascular transport of drugs can be correlated to the *Shringataka marma* to cavernous sinus. *Shringataka marma* is a *Siramarma* thus carry blood, and the venous blood pooled gets transferred (some) to artery and reaches the target brain tissue thus showing results on different parts of interest in *Shalaky tantra*.

The brain tissue targeting is also possible by this method as the medicine by intracellular or paracellular pathway or olfactory nerve pathway. But *Avapeeda nasya* being water based drug to probable route will be paracellular pathway as it is hydrophilic in nature, however it also depends upon the affinity of the active principle of the administered drug and its nature (either lipophilic or hydrophilic).

This way the targeted medicine reaches the Pons, which is the region where major cranial nerves related to head originates and thus *Nasya* which is given by *Nasa marga* shows it's effect in *Kantha-karnaghrana-mukha-shiro roga* and *Avapeeda nasya* removes out the morbid *Doshas* by its *Teekshna* etc *Guna*. But how to use *Snehana nasya* after *Avapeeda nasya* gives a scope for clinical research, also when to use *Dhoomapana* is also to be evaluated. The *Sneha nasya* indicated after *Avapeeda nasya* is given to pacify any *Dosha* if starts getting vitiated. It is followed by usual *Gandusha* and *Dhooma-pana* as *Pashchat karma* according to *Dosha* conditions.

#### CONCLUSION

Ayurvedic classical texts and also one of the concept of treatment in Ayurveda mentions removal of morbid *Doshas* plays an important role in completely getting rid of any disease, rather than pacifying them. *Avapeeda Nasya* is very effective in removal of morbid *Doshas* from *Uttamanga* thus has very important place in *Shalaky tantra*. Its procedure is also somewhat different than *Snehika nasya* in terms of *Pashchata karma*. Route of transportation of intranasal drug is same for *Snehika* and *Virechanika nasya* but participating cells are probably different in lipophilic and hydrophilic drugs.

## REFERENCES

1. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1.sutra sthana 1/10, pg-05
2. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/21, pg-224
3. Charaka samhita, by Dr. Brahmananda Tripathi. Chaukhamba surbharti prakashana, Varanasi. Edition: reprint; 2011, vol2, Siddhi sthana 9/92, ph-1293
4. Charaka samhita, by Dr. Brahmananda Tripathi. Chaukhamba surbharti prakashana, Varanasi. Edition: reprint; 2011, vol2, Siddhi sthana 9/88, ph-1293.
5. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/21, pg-224.
6. Ashtanga hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/2, pg-224
7. Kashyap samhita by Nepal rajguru Pt. Hemaraja Sharma. Chaukhamba sanskrit series, Banaras. Edition: reprinted; 1953. Siddhi sthana 3/3, pg-159.
8. Sharangdhara samhita by Dr. Shailja Shrivastava. Chaukhamba orientalia, edition: reprint; 2017. Uttrakhand 8/2, pg-394
9. Ashtanga hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/30, ph-249
10. Ashtanga hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/16, ph-246
11. Ashtanga sangriha, Chaukhamba sanskrita pratishthana, Delhi. sutra sthana 29/17
12. Shalakyta tantra-kriya kalpa vigyan by Prof K. S. Dhiman. Chaukhamba vishwabharati, edt: reprint; 2020, pg-152
13. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/28, pg-226
14. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/36, pg-226
15. Ashtanga sangriha by Dr.D.V.Pandit Rao and Vaidhya Ayodhya Pandey. Published by :CCRAS, 1991.Page-358
16. Ashtanga hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/29, pg-248
17. Sharangdhara samhita by Dr. Shailja Shrivastava. Chaukhamba orientalia, edition: reprint; 2017. Uttrakhand 8/8, pg-392
18. Yogeshwar R Chippa, Sachin S Chandaliya, Varsha N Sane, Pournima Daware, Mayura Jadhav. Standardization of Bindu for Nasya. International Journal of Advanced Research (2016), Volume 4, Issue 4, 895-901
19. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/24, pg-225
20. Ashtanga Hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/13-16, pg-246
21. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/21, pg-224
22. Charaka samhita, by Dr. Brahmananda Tripathi. Chaukhamba surbharti prakashana, Varanasi. Edition: reprint; 2011, vol 2, Siddhi sthana 9/90, pg-1293
23. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/44, pg-227
24. Charaka samhita, by Dr. Brahmananda Tripathi. Chaukhamba surbharti prakashana, Varanasi. Edition: reprint; 2011, vol2, Siddhi sthana 2/20, pg-1186
25. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/25, pg-225.
26. Shalakyta tantra-kriya kalpa vigyan by Prof K. S. Dhiman. Chaukhamba vishwabharati, edt: reprint; 2020, pg-166.
27. Ashtanga hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/22-23, pg-247.
28. Sharangdhara samhita by Dr. Shailja Shrivastava. Chaukhamba orientalia, edition: reprint; 2017. Uttrakhand 8/56, pg-409

29. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, Vol 2, Uttara tantra 26/34, pg-179
30. Ashtanga Hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/20-23, pg-247-248.
31. Chakradatta by Shri Imdradeva Tripathi, Chaukhamba sanskrit sansthan, Varanasi. Edition: first 1991.chakradatta 74/19.Page-687.
32. Sushruta Samhita, by Kaviraja Ambikdutta Shastri. Chaukhamba sanskrit sansthana Varanasi. Edition: reprint; 2010, vol 1, Chikitsa sthana 40/38, pg-227
33. Sugandha Rawat, Ch.Ramadevi, & K.Anasuya. (2023). Contribution of Harita in Shalaky Tantra. International Journal of Ayurveda and Pharma Research, 11(7), 96-101. <https://doi.org/10.47070/ijapr.v11i7.2882>
34. Ashtanga hridayam by Dr. Brahmananda Tripathi. Chaukhamba sanskrita pratishthana, Delhi. Edition: reprinted; 2012, Sutra sthana 20/1, pg-244.
35. Charaka samhita, by Dr. Brahmananda Tripathi. Chaukhamba surbharti prakashana, Varanasi. Edition: reprint; 2011, vol 2, Siddhi sthana 2/22, pg-1187.
36. Erdo F, Bors LA, Farkas D, Bajza A, Gizurarson S. Evaluation of intranasal delivery route of drug administration for brain targeting. Brain Res Bull. 2018 Oct;143:155-170. doi: 10.1016/j.brainresbull. 2018.10.009. Epub 2018 Oct 25. PMID: 30449731.

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