



Case Study

AYURVEDIC MANAGEMENT OF EPISTAXIS WITH AVAPEEDAKA NASYA

Remya Vijayan¹, Nimisha George^{2*}

¹Associate Professor, ²PG Scholar, Department of Panchakarma, Government Ayurveda College, Tripunithura, Ernakulam, Kerala, India.

Article info

Article History:

Received: 12-02-2026

Accepted: 10-03-2026

Published: 06-05-2026

KEYWORDS:

Avapeedana Nasya, Vipareetha Lajjalu Swarasa, Epistaxis, Nasagata Raktapitta.

ABSTRACT


Raktapitta is described as a bleeding disorder in which blood aggravated by *Pitta* is expelled through various bodily orifices. The condition can become life-threatening depending on the volume and frequency of blood loss. Acharya Charaka has included *Raktapitta* among the *Ashta Mahagadas*. *Nasagata Raktapitta*, a subtype of *Urdhvaga Raktapitta* involving bleeding from the upper pathways, can be clinically correlated with epistaxis. Although commonly encountered across all age groups, it can occasionally manifest as an emergency. Classical Ayurvedic texts recommend therapies such as *Avapeedana Nasya, Parisechana*, and *Ghritapana* for its management. This article reports the case of a 52-year-old woman who presented to the Panchakarma outpatient department with recurrent episodes of nasal bleeding for five days. She was diagnosed with *Nasagata Raktapitta*. As an emergency intervention, *Avapeedana Nasya* using *Vipareetha Lajjalu Swarasa* was administered, along with oral *Pravala Bhasma capsules* and *Drakshadi Kashaya*. Ayurveda provides a safe, gentle, and non-invasive approach to the management of epistaxis. By correcting the underlying *Pitta-Rakta* imbalance, it not only controls acute bleeding but also helps prevent recurrence. The use of natural haemostatic formulations effectively arrests bleeding without adverse effects. These therapies are well tolerated, cost-effective, and easily accessible, making them particularly suitable for patients in resource-constrained settings.

INTRODUCTION

Epistaxis is defined as bleeding from the nose caused by rupture of small blood vessels in the nasal mucosa at any part of the nasal cavity.^[1] It is one of the most common otolaryngological emergencies, though the true prevalence is difficult to estimate because most episodes are self-limiting and only about 6% require medical management. Around 60% of individuals experience at least one episode of epistaxis in their lifetime.^[2] It can occur at any age but is more frequent in adolescents and young adults, with a higher incidence in males. Based on the site of origin, epistaxis is classified into anterior and posterior types.^[3]

Anterior epistaxis usually arises from the Kiesselbach plexus in the anterior nasal septum, whereas posterior epistaxis originates from the Woodruff plexus in the posterior nasal cavity. The causes may be local or systemic. Local factors include inflammation, infection, trauma, climatic influences, tumors, and foreign bodies whereas systemic causes include bleeding disorders, hypertension, valvular heart disease, liver and kidney diseases, and the use of anticoagulant drugs.

In Ayurveda, bleeding disorders are described under *Raktapitta* and epistaxis can be correlated with *Nasagata Raktapitta*, a type of *Urdhvaga Raktapitta*.^[4] The disease develops due to vitiation of *Pitta* following excessive exposure to causative factors. The aggravated *Vidagdha* and *Drava* qualities of *Pitta* weakens the *Mamsadi dhatu's*, leading to oozing of blood.^[5] *Rakta* and *Pitta* share *Ashrayashraya bhava*, where aggravation of one factor causes aggravation of the next. Thus, *Pitta kopa* further increases fluidity, enhancing the quantity of *Rakta* and increases properties like *Abhisyanda* (congestion) and *Gurutwa* (heaviness), resulting in channel obstruction and

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Raktadushti. Treatment of *Nasagata Raktapitta* include *Langhana*, *Pathyakalpana*, *Shamana aushadha*, *Virechana*, and *Nasya* aimed at correcting the vitiated *Doshas*.^[6] Drug administration through the nasal route is termed as *Nasya Karma*, and it is specifically mentioned for *Urdwajatruja vikaras*.^[7]

Avapeedaka Nasya is a type of *Nasya* where medicines in the form of *Kalka* is undergone *Peedana*, i.e. squeezing to obtain *Swarasa*, which is then used for the nasal instillation.^[8] Chakrapani described three types of *Avapeedaka Nasya*: *Shodhana*, *Sthambana*, and *Shamana*.^[9] When epistaxis is caused mainly by local factors, *Sthambana Avapeedaka Nasya* is useful for immediate control of bleeding. *Biophytum sensitivum* (Oxalidaceae), known as *Vipareetha Lajjala* in Ayurveda, has reported anti-inflammatory, antimicrobial, wound-healing, and haemostatic properties due to its phytochemical constituents.^[10] In the present case, a combination of *Vipareetha Lajjala Swarasa* with *Madhu* was selected to control nasal

Clinical Findings

bleeding along with *Shamana* medicines like *Pravala Bhasma* and *Drakshadi Kashaya*.

Case History

A 52-year-old female patient of lean stature working as a pharmacist came to the Panchakarma OPD with complaints of spontaneous onset of nasal bleeding for the past 5 days. She also complained of swelling of the face, especially over the maxillary region and headache for 1 week. On the first day, she experienced two episodes of nasal bleeding, and she sought consultation with an ENT surgeon. A CT scan of the brain was advised, and it was found to be normal. She was prescribed a course of antibiotics and a nasal spray for one week.

Despite undergoing the medicine, she experienced bleeding from the nose, and the symptoms did not subside after finishing the course of antibiotics. So, she came to the OPD of Panchakarma for an alternative management.

Table 1: Clinical Findings on Physical Examination





External nose	Normal appearance
Facial examination	Bilateral swelling in the maxillary area of the face.
Nasal cavity	Normal
Discharge	Fresh blood at the time of episode.
Structural abnormalities	No abnormality detected
Anterior rhinoscopy	No active bleeding spots, but traces of dried blood were seen. Nasal mucosa appears congested. The nasal passages were clear, with no signs of obstruction.

Investigations

Table 2: Investigations Done

Investigation	Report
CT Brain Plain (24/12/2024)	No obvious brain abnormality detected.
Blood parameters (28/12/2024)	Hb 11.8 gm% Total WBC 5,000/cumm DC: Polymorph 60% Lymphocytes 32% Eosinophil 8% ESR 22mm/hr Platelet count 2.0 lakh/cumm Normal limits, and no evidence of coagulopathy or thrombocytopenia was noted.

Timeline

 23/12/2024	 24/12/2024	 28/12/2024	 28/12/2024 to 30/12/2024
Patient had episode of nasal bleeding along with swelling over maxillary area and headache.	Patient consulted an ENT surgeon. CT Brain taken and found to be normal. She was advised to take a course of antibiotics for 3 days and nasal spray for 1 week.	Symptoms did not subside after finishing the course of antibiotics so she came for a consultation to the OPD of Panchakarma. It was diagnosed as <i>Nasagata raktapitta</i>	<i>Avapeedaka Nasya</i> with <i>Vipareethalajjala swarasa</i> added with <i>Madhu</i> (3 times a day), <i>Pravala Bhasma</i> cap 1-0-1 after food and <i>Drakshadi Kashaya</i> 15ml kashyam along with 45ml lukewarm water twice daily before food was given.

Treatment Done**Table 3: Kriyakrama**

Treatment Done	Medicine	Dose	Rationale and Observation
<i>Avapeedaka nasya</i>	A combination of the freshly prepared juice of <i>Vipareethalajjala</i> and <i>Madhu</i> .	4 drops to each nostril three times daily for 3 days.	<i>Raktha sthambhana</i> variety of <i>Avapeedakanasya</i> was selected.

Table 4: Internal Medication

Medication	Dose	
<i>Pravalabhasmam</i> cap 200mg	1-0-1 After food	According to Rasatarangini, it is <i>Kshara</i> , <i>Madhura</i> , <i>Laghu</i> , <i>Sitala</i> , <i>Deepana</i> , <i>Pachana</i> , <i>Balya</i> , <i>Tridoshasamana</i> , <i>Visaghna</i> , <i>Virya</i> and <i>Varna vardhana</i> . Its indications include <i>Raktapitta</i> , <i>Kshaya</i> , <i>Netraroga</i> etc.
<i>Drakshadi Kashaya</i>	15ml <i>Kashaya</i> along with 45ml lukewarm water before food.	<i>Anila Pittajith</i> and specific indication in <i>Urdwaga Raktapitta</i> .

Table 5: Observations

Intervention	Time Point	Outcome
<i>Avapeeda Nasya</i> with <i>vipareethalajjala swarasa</i> added with honey (3 times a day). <i>Pravala Bhasma</i> cap 1-0-1 <i>Drakshadi Kashaya</i> 60ml bd	Day 1	No bleeding, swelling persists, with mild relief from headache. Expectoration of sputum was present, which ensures a mucosal clearance.
	Day 2	No bleeding, headache partially relieved, swelling reducing.
	Day 3	Improvement sustained
Follow Up	After 7 days	No episode of epistaxis.

DISCUSSION**On Procedure**

Nasya is a *Panchakarma* procedure, wherein the medicaments are administered to the nose to get the desired effects. Depending upon the medicine used for *Nasya* its therapeutic benefit may vary. The procedure can be utilized to treat the local causes as well as systemic diseases. It has various forms of therapeutic applications, such as *Choorna*, *Kalka*, *Swarasa*, *Taila* etc., which are used based on the

Rogabala and *Rogibala*. *Nasya* therapy also helps in enhancing the absorption of administered medicines. According to Charaka, nose serves as the gateway to the head (*Siras*)^[11]. When a drug is administered through the nose via *Nasya*, it reaches the brain and acts on the vitiated *Doshas* responsible for the disorder. According to the *Aṣṭanga Saṁgraha*, the nose serves as the gateway to the head, allowing the medicine to pass through the nasal channels and reach

Srngataka, the junction of the vascular openings connected to the eyes, ears, and throat. This process helps remove harmful *Doshas* in the *Uttamanga* and expel them from the upper body.^[12]

Avapeedaka is a type of *Nasya* mentioned by Acharyas where medicines in the form of *Kalka* is undergone *Peedana*, i.e., squeezing to obtain *Swarasa*, which is then used for the nasal instillation. The action of the *Avapeedaka* may differ depending upon the drug used, as it may act as *Sodhana* or *Sthambhana*.

On Medicine

As internal medication, *Pravala Bhasma* and *Drakshadi Kashaya* was chosen. *Pravala Bhasma* is mentioned in *Rasa Tarangini* and is known for its *Madhura vipaka* and *Seeta virya*. In this case its *Raktasthambhaka* nature directly supports blood coagulation and manages bleeding disorders. *Sheeta* nature of it reduces excess heat (*Pitta*) in the body that can cause blood vessels in the nose to break and as a processed coral, it is rich in calcium, which is vital for blood clotting. *Drakshadi Kashyam* is a formulation mentioned in *Ashtanga Hrdaya Jwara Chikitsa* and is specifically indicated in *Urdwaka raktapitta*.

Here, the medicine used for *Nasya* was *Swarasa* of *Vipareethalajjalu* (*Bryophyllum sensitivum*) added with honey.

Table 6: Properties of *Vipareetalajjaalu*^[13]

<i>Rasa</i>	<i>Tikta, Madhura, Kashaya</i>
<i>Guna</i>	<i>Laghu</i>
<i>Veerya</i>	<i>Sheeta</i>
<i>Vipaka</i>	<i>Katu</i>
<i>Doshakarma</i>	<i>Kapha Pitta Shamana, Vata Anulomana</i>

Table 7: Properties of *Madhu*

<i>Rasa</i>	<i>Madhura, Kashaya anurasa</i>
<i>Guna</i>	<i>Rooksham, Medognam</i>
<i>Dosakarma</i>	<i>Pittakaphahara, Vatala</i>
<i>Amayika Prayoga</i>	<i>Visha, Kusta, Krimi, Vranasodana, Ropana, Sookshmamarganusari</i>

Biophytum sensitivum (Oxalidaceae family), often used in traditional medicine, has been extensively studied and confirmed to have anti-inflammatory, antipyretic, antimicrobial, anti-obesity, antioxidant, anti-diabetic, anti-fungal, anti-cancer, larvicidal, anti-obesity, anti-hypertensive, anti-epileptic, wound healing and anti-fertility activity for various pharmacological activities.^[14]

The drug is widely known for its wound-healing properties. The wound healing and haemostatic properties of it can be attributed to its

rich phytochemical composition and biological activities. It is rich in secondary metabolites, including flavonoids, tannins, and alkaloids, which are known for their wound-healing properties. These compounds exhibit antioxidant and anti-inflammatory activities, essential for promoting tissue regeneration and reducing inflammation at the wound site. Its extract has been shown to enhance collagen synthesis and fibroblast proliferation, critical for wound healing. Studies also demonstrate that the application of its extracts leads to increased wound contraction rates and reduced epithelialization periods in animal models. The plant's traditional use in medicine aligns with modern findings, suggesting its potential as a natural remedy for haemostatic purposes and wound management. Conversely, while it is a promising drug, the variability in individual responses to herbal treatments and the need for standardised dosages highlight the importance of further clinical studies to validate its efficacy and safety in wound healing applications.^[14-18]

CONCLUSION

The present case study showed that *Vipareethalajjalu Swarasa Nasya*, along with *Pravala Bhasma* cap and *Drakshadikashayam* as oral medications, has been effective in the management of epistaxis. There was significant improvement in bleeding from the nostril from the first instillation of medicine, along with significant improvement in the associated symptoms of headache. The procedure, along with the *Gunas* of *Dravya* used, has acted in exhibiting the result. Thus, *Avapeedaka nasya* is a potent therapeutic procedure even though it follows a simple, non-invasive route of administration with a simple method of preparation of medicine and administration. A study with a larger sample size is needed to further validate the effectiveness of *Avadeepaka Nasya* in the management of *Nāsagata Raktapitta*.

Acknowledgement

The authors would like to thank the Panchakarma Department for their assistance in data collection and other aspects of this work.

Patient Perspective

The patient and her family expressed satisfaction with the treatment, evaluation, and follow-up process, as she experienced relief from her initial symptoms and the episodes of nasal bleeding.

Informed Consent

The authors confirm that informed consent was obtained from the patient for reporting this case in the journal. The patient understands that her name and initials will remain confidential and that efforts

will be made to maintain her privacy, although complete anonymity cannot be fully guaranteed.

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Cite this article as:

Remya Vijayan, Nimisha George. Ayurvedic Management of Epistaxis with Avapeedaka Nasya. AYUSHDHARA, 2026;13(2):171-175.

<https://doi.org/10.47070/ayushdhara.v13i2.2568>

Source of support: Nil, Conflict of interest: None Declared

*Address for correspondence

Dr. Nimisha George

PG Scholar,

Department of Panchakarma

Government Ayurveda College

Tripunithura, Ernakulam Kerala.

Email: drnimishageorge@gmail.com

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