



Review Article

ALLERGIC RHINITIS: AN AYURVEDIC REVIEW

Gayatri

Assistant Professor, Department of Shalaky Tantra, Saint Sahara Ayurvedic Medical College and Hospital, Kot Shamir, Punjab India.

Article info

Article History:

Received: 15-04-2026

Accepted: 16-05-2026

Published: 08-07-2026

KEYWORDS:

Allergic Rhinitis,
Pratishyaya,
Nasagata Roga.

ABSTRACT

The ancient medical science of Ayurveda places equal focus on prevention and treatment. Due to environmental pollution, global warming, and life style issues, a very prevalent ailment, *Pratishyaya*/rhinitis arises much more commonly than before. According to Ayurveda, air pollutants like *Raja* and *Dhooma* cause respiratory conditions such *Shwasa* (allergic bronchitis), *Pratishyaya* (allergic rhinitis), *Kasa* (cough), and *Hikka* (hiccough). In *Uttartantra*, Acharya Sushruta has identified *Pratishyaya* as a distinct clinical ailment. The *Vataja Pratishyaya* and allergic rhinitis share comparable signs and symptoms. Sneezing, itching, watery nasal discharge, and nasal blockage are the symptoms of allergic rhinitis, an inflammation of the nasal membranes. Modern medicine has indicated a number of treatments, including corticosteroids, anti-histamines, inhalers, etc. None of these treatments fully cure allergic rhinitis or stop it from happening again.

INTRODUCTION

One of the *Nasagata roga*, *Pratishyaya* is a complicated illness with a variety of symptoms and pathophysiologies. It is one of the prevalent childhood illnesses that is recognized for its chronicity and recurrence. If left untreated, it may result in problems including *Kasa*, *Shwasa*, and *Kshaya*. Over the past ten years, allergic rhinitis has become a major global health concern, impacting 10% to 25% of the world's population^[1], and its frequency is rising daily. *Ashtanga Ayurveda's Kaumarabhritya* (pediatrics) branch addresses child care starting from conception. In school-age children, the overall frequency of rhinitis was 26.1%.

According to Ayurveda, *Pratishyaya* is a condition in which the vitiation of *Vata* and *Kapha* at the root of the nose causes a secretion that flows down through the nose against inspired air.^[2]

Acharya Sushrut has discussed *Pratishyaya* in great length, outlining five different kinds of *Pratishyaya* among the 31 *Nasaroga*. Many contemporary disease entities fall under the category of *Pratishyaya* (rhinitis). The primary clinical characteristic of *Pratishyaya* (rhinitis) is a flowing nose.^[3]

Pratishyaya is described as a *Purvarupa* and *Lakshana* of *Yakshma* in the eighth chapter, *Rajyakshma chikitsadhyaya* of *Charak Chikitsa Sthana*. This chapter describes *Samprapti* and the overall treatment of *Pinas (Pratishyaya)*. *Trimarmiya Chikitsaadhyaya*, *Nidana*, and *Pathya* of *Pratishyaya* are given in Chapter 26. Numerous issues, such as *Badhira*, *Andhata*, *Gandhanasha*, *Kasa*, etc., might result from poor management or carelessness. Patients may develop *Dushta Pratishyaya* if they ignore all forms of *Pratishyaya*. The contemporary medical system explains many treatment options, such as corticosteroids, antiallergics, inhalers, antihistamines, etc., but none of them are completely successful in both healing the illness and avoiding its return.

Access this article online

Quick Response Code



<https://doi.org/10.47070/ayushdhara.v13i3.2784>

Published by Mahadev Publications (Regd.)
publication licensed under a Creative Commons
Attribution-NonCommercial-ShareAlike 4.0
International (CC BY-NC-SA 4.0)

Etymology

The Sanskrit terms "Prati" (against) and "Shyaya" (flowing) are the source of the phrase *Pratishyaya*, which describes aberrant nasal discharge that flows against the normal direction of respiration. Ayurveda states that *Pratishyaya* is caused by the vitiation of *Doshas*, mainly *Vata* and *Kapha*, which affects the head and nasal passages.

वातं प्रति अभिमुखं श्यायो गमनं कफादीनां यत्र स प्रतिशायः ॥
(सु. उ. २४/१-२)

Pratishyaya = *Prati* + *Shyeng* + *Gatav* "*Shyeng*" *Dhatu*, which means "move," is the root of the word *Pratishyaya*. When this *Dhatu* is prefixed with "Prati" and suffixed with "*Gatav*," the word *Pratishyaya* is formed.

Definition: "*Prati*" and "*Shyaya*" are the roots of the word *Pratishyaya*.

Prati: In opposition to the direction

Shyaya: flowing or in motion.

Pratishyaya was divided into five categories by *Acharya Sushruta*:⁴

1. *Pratishyaya-Vataja*
2. *Pratishyaya Pittaja*
3. *Pratishyaya Kaphaja*
4. *Pratishyaya Raktaja*
5. *Pratishyaya Sannipataja*

The two that most closely resemble allergic rhinitis are *Vataj* & *Vata-Kaphaja Pratishyaya*.

Ayurvedic Concept of *Pratishaya*

चयं गता मूर्धनि मारुतादयः पृथक् समस्ताश्च तथैव शोणितम् ।
प्रकोप्यमाणा विविधैः प्रकोपणैर्नृणां प्रतिश्यायकरा भवन्ति हि
॥४॥ (सु. उ. २४/४)

Pratishyaya is prioritized in the explanation of *Nasa rogas* since it is one of the major causes of all other nasal cavity diseases.

Since *Pratishyaya* is the only illness described in *Shalakyata* that develops complications even before signs and symptoms appear, additional pathology can be prevented if treatment is started as soon as *Purvaroops* are observed.

Nidan of *Pratishyaya*^[5]

नारीप्रसङ्गः शिरसोऽभितापो धूमो रजः शीतमतिप्रतापः ।
सन्धारणं मूत्रपुरीषयोश्च सद्यः प्रतिश्यायनिदानमुक्तम् ॥३॥ (सु.
उ. २४/४)

- *Sadyojanak nidaan*
- *Kalantarajanak nidan*

Aharaja Nidana- Mandagni, Vishmashana, Ajeerna, Atijalapan after meal, *Ati guru Madhura sheeta ruksha Anna sevan, Atisheetambupaan*
Viharaja Nidana- Vega sandharana, Rajahdhumarasevan Atisambhasanam Rituvaishmya Shirasoabhitapam Divasyanam atapa sevan, Snan in Ajirna

Manasik - Atikrodh

अवश्यायानिलरजोभाष्यातिस्वप्नजागरैः।

नीचात्युच्चोपधानेन पीतेनान्येन वारिणा॥१॥

अत्यम्बुपानरमणच्छर्दिबाष्पग्रहादिभिः।

क्रुद्धा वातोल्बणा दोषा नासायां स्त्यानतां गताः॥२॥

जनयन्ति प्रतिश्यायं वर्धमानं क्षयप्रदम्॥ (अ.ह. उ. १९/१,२)

Etiological Similarities Between *Vataja Pratishyaya* and Allergic Rhinitis

The etiological variables of *Vataja Pratishyaya* and allergic rhinitis are strikingly similar when compared. According to contemporary medicine, breathing in airborne allergens such dust mites, pollen grains, fungal spores, and other environmental particles frequently cause allergic rhinitis. Similar causal factors are described by Ayurveda under the term *Rajah Sevana* (dust exposure), which is regarded as a crucial *Nidana* for the development of *Pratishyaya*. Similarly, *Vishamashana* and excessive consumption of *Guru* (heavy), *Sheeta* (cold), and *Madhura* (sweet) substances described in Ayurvedic texts can be linked to the consumption of certain allergenic foods, such as chocolates, citrus fruits, strawberries, eggs, and other foods capable of causing hypersensitivity reactions.

Environmental factors exhibit similarities as well. *Ati Jala Krida*, which is said to aggravate *Vata* and *Kapha Doshas*, is similar to taking a cold-water bath, which is known to trigger allergic rhinitis in those who are vulnerable. *Anila Sevana*, or excessive contact with a chilly breeze, is associated with exposure to cold winds, whereas *Avashyaya*, or exposure to dew, is associated with humid weather and moist surroundings. *Dhooma Sevana* (smoke exposure) is the Ayurvedic equivalent of air pollution, one of the main causes of the rising incidence of allergic rhinitis globally. *Ritu Vaishmya*, an Ayurvedic condition of seasonal irregularity, is comparable to seasonal variations and sudden weather changes that frequently cause allergy reactions.

In addition to these well-known causes, Ayurveda lists a number of other etiological factors

that could make a person more susceptible to *Pratishyaya*. These include excessive sleep (*Atiswapna*), which encourages the accumulation of *Kapha*; prolonged wakefulness (*Atijagarana*), which aggravates *Vata Dosha*; consumption of water from unknown sources (*Anya Vari Pana*), which causes *Asatmya* or incompatibility; excessive water intake (*Atyambupana*), which disrupts normal digestive and metabolic processes; and excessive speaking (*Atibhashya*), which aggravates *Vata*. When taken as a whole, these elements upset the physiological balance of *Doshas*, especially *Vata* and *Kapha*, which makes it easier for *Pratishyaya* to develop and recur. The association between allergic rhinitis and *Vataja* or *Vata-Kaphaja Pratishyaya* as reported in Ayurvedic literature is supported by the striking similarities in etiological variables.

Samprapti and Purvarupa of Pratishyaya

शिरोगुरुत्वं क्षवथोः प्रवर्तनं तथाऽङ्गमर्दः परिहृष्टरोमता ।
उपद्रवाश्चाप्यपरे पृथग्विधा नृणां प्रतिश्यायपुरःसराः स्मृताः
॥५॥ (सु. उ. २४/५)

Ayurvedic principles state that the pathogenesis (*Samprapti*) of *Pratishyaya* starts when one or more *Doshas* get aggravated as a result of different endogenous and external etiological factors. When *Atma*, *Mana*, and *Indriyas* work in harmony and *Doshas*, *Agni*, *Dhatu*, and *Malas* are in balance, health is preserved. Any disruption to this physiological equilibrium starts the process of developing a disease. *Doshas*, especially *Vata* and *Kapha*, get vitiated in *Pratishyaya* due to repeated exposure to causative elements such as dust, smoke, cold climates, unsuitable diets, bad lifestyle choices, and psychological stress.^[6] Normal nasal functions are impaired as a result of these aggravated *Doshas*, which progressively build up and localize in the *Urdhvajatrugata* region, particularly in the nose passages and head structures.

According to *Acharya Sushruta*, *Pratishyaya* results from the aggravation and accumulation of *Vata*, *Pitta*, *Kapha*, and *Rakta* in the *Shirah Pradesh* (head region).^[5] Excessive secretion, congestion, sneezing, and other symptoms of the illness result from the vitiated *Doshas* obstructing the nasal cavity's regular pathways and interfering with the nose's physiological processes. Different clinical variants of *Pratishyaya* are developed based on the prevalence of a specific *Dosha*. The illness may develop into chronic phases and cause a number of problems that impact the upper respiratory tract

and sense organs if it is ignored or treated incorrectly.

Certain prodromal symptoms (*Purvarupa*) arise prior to the disease's full presentation, signalling the onset of *Pratishyaya*. These early symptoms were mentioned by *Acharya Sushruta* and later acknowledged by *Madhavakara* in *Madhava Nidana* and *Bhavamishra* in *Bhavaprakasha*.^[5] *Shirogurutva* (heaviness of the head), which indicates the build-up of *Kapha* in the cranial region; *Kshavathu Pravartana* (frequent sneezing), which indicates irritation and early involvement of the nasal passages; *Angamarda* (generalized body ache), which suggests systemic *Dosha* aggravation; and *Parihrishta Romata* (horripilation or gooseflesh sensation), which is mainly linked to *Vata* disturbance. Since prompt action at this stage might halt the advancement of the disease and avoid the development of fully expressed *Pratishyaya*, recognition of these *Purvarupa* is of considerable clinical relevance.

Pratishyaya Classification and Stages^[5,7]

The Ayurvedic classics have a detailed description of *Pratishyaya*, which has been categorized according to the predominance of *Doshas* involved in its pathophysiology. Five varieties of *Pratishyaya* have been identified by *Acharya Sushruta*, *Vagbhata*, *Madhavakara*, *Bhavamishra*, and *Sharangadhara*: *Vataja*, *Pittaja*, *Kaphaja*, *Sannipataja*, and *Raktaja Pratishyaya*. The predominance of the corresponding *Dosha* is reflected in the unique clinical characteristics of each variation. Nevertheless, *Acharya Charaka* and *Acharya Kashyapa* have only identified four types of *Raktaja Pratishyaya* and have not acknowledged it as a separate category. Additionally, *Rasaratna Samuccaya* lists six varieties of *Pratishyaya*, demonstrating the disorder's complexity and wider clinical range.

Two significant phases of *Pratishyaya*, *Amavastha* and *Pakwavastha*, have been detailed by the renowned *Sushruta Samhita* commentator *Acharya Dalhana*. The early stage of the disease, known as *Amavastha*, is marked by the presence of *Ama*, partial *Dosha* digestion, and active pathogenic processes. Heaviness, congestion, and increased secretions are typical acute clinical symptoms during this stage. In contrast, *Pakwavastha* indicates the mature stage where the *Doshas* have changed and the diseased process has advanced. The symptoms worsen and become persistent,

frequently necessitating particular therapeutic measures to get rid of the accumulated *Doshas*.

Through the six stages of disease creation known as *Shat Kriyakala*, *Pratishyaya* is developed in accordance with the basic principles of Ayurvedic pathogenesis. *Doshas* first experience *Sanchaya* (accumulation) as a result of ongoing exposure to causal stimuli. The collected *Doshas* get much more vitiated during *Prakopa* (aggravation), which comes next. The exacerbated *Doshas* disperse throughout the body during the *Prasara* stage and then localize in vulnerable areas during *Sthanasamshraya*. The skull and nasal passageways are the main locations of localization in *Pratishyaya*. During the *Vyakta* stage, distinctive symptoms emerge as the diseased process progresses, resulting in the disease's clinical appearance. The condition advances to the *Bheda* stage, which causes chronicity, repeated episodes, and other consequences, if prompt treatment is not started. The chronic inflammatory process seen in allergic rhinitis, where recurrent exposure to allergens and ongoing inflammation contribute to disease persistence and recurrence, is quite similar to this sequential progression.

Comparative Clinical Characteristics of *Vataja Pratishyaya* and Allergic Rhinitis

Clinical signs of allergic rhinitis are very similar to those reported in Ayurvedic literature for *Vataja Pratishyaya*. This commonality serves as the foundation for the correlation between *Vataja Pratishyaya* and allergic rhinitis. The symptoms of these illnesses, which mostly impact the nasal passages, are caused by the vitiation of the *Vata* and *Kapha Doshas*, which disrupts the normal physiological processes of the nose and upper respiratory tract.

Itching of the nose is one of the main signs of allergic rhinitis, and it is related to the *Pihita Nasa* mentioned in *Vataja Pratishyaya*. *Anaddha Nasa*, in which the nasal passages get obstructed due to *Dosha* accumulation, is similar to nasal obstruction, a typical ailment brought on by mucosal edema and profuse secretions in allergic rhinitis. *Kshavathu*, a significant symptom of *Pratishyaya*, closely resembles recurrent or paroxysmal sneezing, a hallmark of allergic rhinitis brought on by allergens irritating the nasal mucosa.

Another common sign of allergic rhinitis is rhinorrhea, or watery nasal discharge, which is similar to *Tanu Strava Pravartana*, the flow of thin, watery nasal secretions mentioned in *Vataja Pratishyaya*. Due to postnasal drip and concomitant

throat discomfort, patients with allergic rhinitis may also have hoarseness or altered voice, which is related to *Swaropaghata* stated in Ayurvedic scriptures. In addition, a lot of people with allergic rhinitis report having frontal or temporal headaches as a result of sinus pressure and nasal congestion. This symptom resembles *Shankha Nistoda*, a temporal piercing pain that falls under the category of *Vataja* diseases.

The Ayurvedic understanding of allergic rhinitis as a *Vata*-predominant illness with *Kapha* involvement is supported by the striking similarity between the clinical characteristics of allergic rhinitis and *Vataja Pratishyaya*. Adopting Ayurvedic therapeutic principles for the treatment of allergic rhinitis is justified by the shared symptomatology, which also reinforces the conceptual correlation between the two disorders.

Management of *Pratishyaya*

नवं प्रतिश्यायमपास्य सर्वमुपाचरेत् सर्पिष एव पानैः ।
स्वेदैर्विचित्रैर्मनैश्च युक्तैः कालोपपन्नैरवपीडनैश्च ॥१८॥ (सु. उ. २४/१८)

The Ayurvedic classics provide a detailed account of the treatment of *Pratishyaya*, especially *Acharya Sushruta*, who stressed a holistic therapeutic approach that included dietary control, *Shamana* (palliative measures), *Shodhana* (purification therapies), and various local treatment modalities.⁸ In addition to reducing symptoms, the main goals of treatment are to eliminate the underlying pathological factors and stop recurrence. Since *Dosha* vitiation is the cause of *Pratishyaya*, correcting the disrupted *Dosha* equilibrium and bolstering the body's resilience to illness are necessary for effective care.

Nidana Parivarjana, the first and most crucial treatment principle, entails identifying and avoiding the causes of disease manifestation. Preventing additional aggravation of *Doshas* and promoting healing can be achieved by avoiding dust, smoke, cold exposure, incompatible eating habits, and other aggravating factors. Internal drugs are equally important to address systemic pathology, promote digestion and metabolism, clear accumulated *Doshas*, and boost immunity because Ayurveda acknowledges that local remedies alone are insufficient for full care.^[9]

To enhance digestive fire and break down stored *Ama*, *Acharya Sushruta* suggests *Langhana* (lightening therapy) in addition to *Deepana* and *Pachana* medications. Except in recently exhibited

cases of *Pratishyaya*, these measures are followed by therapeutic procedures including *Swedana* (sudation), *Vamana* (therapeutic emesis), *Avapeedana Nasya* (nasal administration of medicated preparations), and *Ghrita Pana* (internal administration of medicated ghee). By removing vitiated *Doshas* and reestablishing physiological balance, *panchakarma* treatments have both therapeutic and preventative advantages.

Depending on the disease's stage, different treatment strategies are used. Therapies that promote digestion and liquefaction of *Doshas* are preferable in *Apakva Pratishyaya*, when the diseased process is still in its early stages and the *Doshas* have not yet matured. It is advised to utilize sugarcane-derived preparations like *Gud and Phanita*, consume warm foods and drinks, administer milk processed with fresh ginger, and use sour preparations like *Kanji* and other *Amla* items.^[10] These actions aid in stimulating *Agni*, liquefying *Kapha*, and halting the disease's progression.

Stronger elimination therapy are required in *Pakva Pratishyaya*, where the disease has progressed to a mature state. Techniques like *Asthapana Basti*, *Tikshna Shirovirechana*, *Dhoomapana*, *Kavala*, *Nasya*, and *Haritaki* administration are recommended.^[11] These treatments lessen nasal blockage, aid in the removal of accumulated *Doshas* from the head and neck area, and restore the nasal passages' normal physiological function.

The main goal of *Vataja Pratishyaya* treatment is to calm agitated *Vata Dosha* with nutritious and luxurious treatments.^[12] It is advised to provide medicinal ghee preparations like *Vidarigandhadi Gana Siddha Ghrita* and *Panchalavana Siddha Ghrita* internally. Since *Nasya Karma* directly affects the afflicted area, it plays a crucial part in treatment. *Shirobasti*, *Nasya*, *Dhoomapana*, *Upanaha*, *Sneha*, *Nadi Swedana*, *Ksheera Taila Pana*, and *Abhyanga* are among the other therapeutic techniques mentioned under the management of *Ardita* that are helpful in reducing *Vata*-related symptoms.

The goal of *Pittaja* and *Raktaja Pratishyaya* treatment is to calm and cool the agitated *Pitta* and *Rakta*. Treatments include *Nasya*, *Virechana* (therapeutic purgation), *Pradeha* (application of medicated pastes), *Parisheka* (pouring of medicated liquids), and *Ghrita Pana* are recommended. These treatments assist restore normal tissue function while reducing irritation, congestion, burning

sensations, and inflammation linked to *Pitta* predominance.^[13]

The therapeutic concepts outlined for *Pratishyaya* show how Ayurvedic treatment is comprehensive and customized based on the patient's constitution, disease stage, and *Dosha* predominance. By addressing the underlying cause of the illness in addition to providing symptomatic relief, this strategy lowers the chance of recurrence and enhances respiratory health in general.

Specific Therapeutic Approaches in Different Types of *Pratishyaya*

Cooling, calming, and *Pitta*-pacifying therapies are highly valued in *Pittaja* and *Raktaja Pratishyaya*. It is advised to take *Kakolyadi Gana Siddha Ghrita* internally due to its revitalizing and nourishing properties. Additionally recommended are a number of formulations made from medications such *Shreeveshtaka*, *Sarjarasa*, *Priyangu*, *Madhu*, *Sharkara*, *Draksha*, *Madhulika*, *Gojihva*, *Gambhari*, and *Madhuka* combined with ghee. When *Pitta* and *Rakta* are inflamed, these remedies assist reduce burning, inflammation, and irritation. *Sheeta Dravyas* are used in external cooling therapies like *Parisheka* and *Pradeha* to minimize local inflammation and relieve symptoms. The main purifying treatment is *Virechana*, which removes vitiated *Pitta* from the body using gentle, pleasant (*Madhura*) medications. *Nasya* made from *Dhava Twak*, *Triphala*, *Shyama*, *Tilvaka*, *Madhuka*, *Shreeparni*, and *Haridra* and processed with water, milk, and sesame oil is advised for local treatment in order to cleanse the nasal passages and restore normal nasal function.

Eliminating and calming exacerbated *Kapha Dosha* is the main goal of *Kaphaja Pratishyaya* therapy. It is recommended to use therapies like *Ghrita Pana*, *Yavaghu Pana*, *Vamana*, *Kaphaghna Karma*, *Nasya*, and *Dhoomapana*. *Yavaghu* made from *Tila* and *Masha* is thought to help with better digestion and less accumulation of *Kapha*. To relieve nasal obstruction and reduce excessive secretions, nasal administration of formulations containing *Bala*, *Atibala*, *Laghu Kantakari*, *Brihati*, *Vidanga*, *Gokshura*, *Shweta Moola*, *Gambhari*, and *Punarnava* processed with sesame oil is advised. Similar to this, *Dhoomapana*, which is made from medications like *Sarla*, *Devadaru*, *Nikumbha*, and *Hingota*, improves nasal patency and respiratory function by clearing stored *Kapha* from the upper respiratory tract.^[14]

Treatment for *Sannipataja Pratishyaya*, which involves all three *Doshas*, must be all-encompassing in order to restore overall *Dosha* equilibrium. *Ghritha Pana*, *Tikshna Dhoomapana*, *Katu Aushadhi*, *Nasya*, *Kavala*, and *Shirovirechana* are all part of the treatment plan. For local administration, *Nasya* formulations made from *Rasanjana*, *Ativisha*, *Musta*, and *Devadaru* combined with sesame oil and water are recommended. Additionally, due to their *Tridosha*-balancing qualities, preparations comprising *Jangala Mamsa Rasa*, *Dashamoola*, *Vidarigandhadi Gana Dravyas*, and *Eladi Gana* cooked with ghee are advised. When made as medical oil, *Kavala*, which uses decoctions of *Musta*, *Tejovati*, *Patha*, *Katphala*, *Katuki*, *Vacha*, *Sarshapa*, *Pippalimoola*, *Pippali*, *Saindhava*, *Chitraka*, *Karanja*, and *Devadaru*, acts as a type of *Shirovirechana* and aids in the cleansing of the oral and nasopharyngeal region.^[15]

In certain instances of *Pratishyaya*, *Acharya Sushruta* has also emphasized the significance of *Krimighna Chikitsa*. When the involvement of microbial or parasitic causes is suspected, *Vidangadi* formulations such as *Nasya* and other anti-parasitic treatment approaches are advised. This illustrates the through comprehension of illness etiology and treatment outlined in Ayurvedic literature.

Pathya and Preventive Actions

In the treatment of *Pratishyaya*, Ayurveda emphasizes lifestyle changes and preventive measures in addition to medication. Because these elements irritate *Vata* and *Kapha Doshas* and cause recurrent attacks, patients are recommended to stay away from chilly winds, dust, smoke, and polluted settings. It is advised to cover the nose and face with an appropriate mask or protective cloth to reduce contact with allergens, pollutants,

Avoiding exposure to very cool or artificially conditioned air is advised because it may exacerbate symptoms by causing excessive dryness and irritation of the nasal mucosa. Maintaining nasal hygiene, eliminating collected secretions, and preventing crust formation are all aided by routinely cleaning the nasal passages with saline water. Additionally, regular *Nasya Karma* practice is highly recommended as a preventive and therapeutic treatment. *Nasya* improves local immunity, keeps the upper respiratory tract healthy, and lessens the incidence of repeated bouts of *Pratishyaya* by nourishing and shielding the nasal mucosa. In order to achieve long-term illness control and enhance general respiratory health, these preventative

measures are essential in addition to pharmaceutical treatment.

DISCUSSION

One of the most common chronic respiratory conditions in the modern era, allergic rhinitis affects people of all ages and severely lowers quality of life. Recurrent sneezing, rhinorrhea, nasal blockage, and itching are the condition's hallmarks, and they closely reflect the clinical symptoms listed under *Pratishyaya* in Ayurvedic literature. Even if antihistamines, corticosteroids, and other pharmaceuticals provide symptomatic relief, full recovery and recurrence prevention are still difficult. This emphasizes the importance of investigating Ayurvedic ideas and treatment modalities for a more thorough comprehension and treatment of the illness.

The Ayurvedic concept of *Dosha* vitiation provides a useful framework for understanding the etiopathogenesis of allergic rhinitis. Because of its strong *Sheeta Guna*, *Avashyaya* (exposure to dew and wetness) is one of the many causal causes for *Pratishyaya* that aggravates *Vata Dosha*. In a similar vein, airborne allergens like dust mites and ambient particulate matter that cause allergic reactions can be linked to *Rajah Sevana*, or excessive dust exposure. Dust's *Sukshma* and *Chala* properties help aggravate *Vata* and irritate nasal passages, which starts the illness process. Because of its *Sheeta* and *Chala* qualities, exposure to a cool breeze (*Anila Sevana*) exacerbates *Vata*, causing nasal discomfort, sneezing, and watery discharge.

Ayurvedic lifestyle variables also seem to be very important when it comes to allergic rhinitis. While *Atiswapna* and sedentary lifestyles foster *Kapha* accumulation, *Atijagarana* (excessive wakefulness) increases *Ruksha* and *Chala* characteristics, which aggravates *Vata*. Consuming water from unknown sources, or *Anyava Pana*, can be explained in terms of *Asatmya*, or incompatibility, which causes disruptions in the body's balance and heightened vulnerability to illness. Similarly, excessive water consumption, or *Atyambupana*, can disrupt normal circulatory and metabolic functions, especially those associated with *Rasa* and *Rakta Dhatus*, leading to pathological alterations. The *Sheeta* quality is further enhanced by frequent exposure to cold water and excessive aquatic activities (*Ati Jala Krida*), which also puts people at risk for upper respiratory tract *Vata-Kapha* diseases.

Ayurvedic scriptures also highlight some less frequently discussed variables, like the use of pillows that are too high or low (*Ati-Uchcha* and *Ati-Neecha Upadhana*), which may disrupt the regular movement of *Vata* in the head and neck area. Such disruptions may lead to nasal channel dysfunction and poor secretion drainage. The fast start, erratic course, and repeated nature of allergic rhinitis can be explained by the *Vata Dosha*, which is characterized by speed (*Ashukari*) and variability (*Muhushchari*).

The association between *Pratishyaya* and allergic rhinitis is further reinforced by a comparison of symptomatology. Both diseases are frequently characterized by sneezing (*Kshavathu*), watery nasal discharge (*Tanu Srava*), nasal blockage (*Anaddha Nasa*), headache (*Shankha Nistoda*), and voice alterations (*Swaropaghata*). The fluctuating nature of *Vata Dosha* is reflected in the recurrent episodes of allergic rhinitis, which are frequently brought on by environmental causes and are interspersed with periods of remission. The participation of *Kapha Dosha* is also indicated by excessive mucus production and nasal congestion. Thus, it is possible to think of allergic rhinitis as a condition that primarily affects *Vata* and *Kapha*.

Sannipataja Pratishyaya and allergic rhinitis may, however, share some traits due to the frequent bouts, inconsistent presentation, and sporadic involvement of multiple systemic signs. It is impossible to totally rule out the involvement of all three *Doshas* in chronic and recurrent cases. However, allergic rhinitis is best associated with *Vataja Pratishyaya* or *Vata-Kapha Pratishyaya*, according to the Ayurvedic theory of *Vyapadesha Tu Bhuyasa Nyaya*, which states that an illness is termed according to the predominant *Dosha*. Adopting Ayurvedic therapeutic techniques like *Nidana Parivarjana*, *Nasya Karma*, *Panchakarma*, and *Rasayana Chikitsa* for the efficient treatment and prevention of recurrence in allergic rhinitis is logically supported by this correlation.

CONCLUSION

While not life-threatening, allergic rhinitis is a very common chronic inflammatory disease of the upper respiratory tract that has a major impact on a person's quality of life, everyday functioning, academic achievement, and productivity at work. Other allergy and respiratory conditions include asthma, sinusitis, otitis media, Eustachian tube dysfunction, nasal polyps, allergic conjunctivitis, and atopic dermatitis are often linked to this illness.

Persistent symptoms can also lead to behavioral issues, poor focus, sleep disruptions, and a general decline in wellbeing.

The etiology, pathophysiology, and clinical symptoms of allergic rhinitis and *Vataja Pratishyaya* are similar, according to a critical examination of Ayurvedic literature. The causes of *Pratishyaya*, which include exposure to dust, smoke, chilly breezes, climate fluctuations, and unhealthy eating and lifestyle habits, closely resemble the known causes of allergic rhinitis. Similarly, there is a strong clinical association between the two illnesses and symptoms like sneezing, watery nasal discharge, nasal blockage, headache, and voice changes. Thus, the Ayurvedic framework of *Vata-Kapha Pratishyaya* can be used to properly understand and treat allergic rhinitis, with a focus on *Vata Dosha's* primary role.

Even though contemporary pharmaceutical treatments often alleviate symptoms, long-term drug reliance and the potential for side effects continue to be significant concerns. Ayurveda, on the other hand, provides a comprehensive and customized strategy that aims to improve host immunity, rectify *Dosha* imbalance, address the underlying cause of the ailment, and prevent recurrence. Ayurvedic treatment for allergic rhinitis should involve a multifaceted approach that includes dietary and lifestyle changes, *Shodhana* and *Shamana treatments*, and *Nidana Parivarjana* (avoidance of causative factors).

Long-term treatment may be linked to symptom recurrence and possible side effects, even if contemporary medicine offers effective symptomatic relief through a variety of pharmaceutical medications. Ayurveda provides a comprehensive, patient-centered approach that emphasizes treating the underlying cause of the illness and strengthening the body's defenses against it in addition to managing symptoms. A successful Ayurvedic treatment plan for allergic rhinitis should include immunomodulatory or *Rasayana* therapies to improve *Vyadhikshamatva* (immunity) and prevent recurrence, as well as local therapies like *Snehana Nasya* to preserve nasal health and lessen mucosal irritation and the use of blood-purifying herbal formulations to control inflammatory processes. Patients with allergic rhinitis may have long-lasting comfort and better long-term results with such an all-encompassing treatment.

REFERENCES

1. Aggarwal AN, Chaudhry K, Chhabra SK, D Souza GA, Gupta D, et al. (2006) Asthma Epidemiology Study Group. Prevalence and risk factors for bronchial asthma in India adults: a multicentre study. India J Chest Dis Allied Sci.
2. Bousquet J, Van Cauwenberge P, Khaltaev N, Aria Workshop Group, World Health Organization (2001) Allergic rhinitis and its impact on asthma. J Allergy Clin Immunol 108 (5 Suppl): S147-334.
3. Sharma RK and Dash B (2001). Agnivesa's Charaka Samhita (Text with English translation & critical. Exposition based on Cakrapani Dutta's Ayurveda Dipika) 2nd Edition, Varanasi, India, Chaukhambha Sanskrit Series Office.
4. Kaviraj Ambikadatta Shastry Sushruta samhita of Uttaratantra chapter 24th Ayurveda tatvasandipika vyakyana 11th edition, Varanasi; Chowkamba Sanskrit Sansthana Vol-2, 1997, P.N.119.
5. Kaviraj Ambikadatta Shastry Sushrutasamhita of Uttaratantra chapter 24th Ayurveda tatvasandipika vyakyana 11th edition, Varanasi; Chowkamba Sanskrit Sansthana Vol-2, 1997, P.N.118.
6. Brahmanand Tripathi Vagbhata, Asthangahridaya Uttarasthana 19th chapter 1-2 verse, New Delhi; Chowkamba Sanskrit Sansthana Reprint 2003. P.N.1013.
7. Kashinath shastry, Vaidya Yadavatrikanaji Achar, Agnivesh Charaksamhita Charkrapanidatta virachita Ayurvedadipika vyakhyana hindi chikitsasthana 26th chapter 105th 106th verse 1st edition Varanasi; Chowkamba Sanskrit samsthana 1970 P.No.654
8. Sushruta Samhita, commentaries by Shastri, Kaviraja Ambikadatta 'Ayurveda Tattva Sandipika' Chaukhambha Sanskrit Sansthan, Varanasi, India, Reprinted in 2013, Uttar Stana 24/18, p. 155.
9. Sharma I, Sharma A. Shitapitta (Urticaria)-A Case Series Showing Efficacy of Virechana Therapy. Research & Reviews: A Journal of Pharmacognosy. 2017; 4(2): 7-11p.
10. Sushruta Samhita, commentaries by Shastri, Kaviraja Ambikadatta 'Ayurveda Tattva Sandipika' Chaukhambha Sanskrit Sansthan, Varanasi, India, Reprinted in 2013, Uttar Stana 24/19, p. 155.
11. Sushruta Samhita, with Nibandha Sangraha commentary of Shree Dalhanacharya and the Nyayachandrika Panjika of Shri Gayadasacharya on Nidanasthana, edited by Keval krishan Thakral, Chaukhambha Orientalia, Varanasi Reprinted in 2019, Uttar Stana 24/20-21, p. 167
12. Sushruta Samhita, commentaries by Shastri, Kaviraja Ambikadatta 'Ayurveda Tattva Sandipika' Chaukhambha Sanskrit Sansthan, Varanasi, India, Reprinted in 2013, Uttar Stana 24/25, p. 156.
13. Sushruta Samhita, commentaries by Shastri, Kaviraja Ambikadatta 'Ayurveda Tattva Sandipika' Chaukhambha Sanskrit Sansthan, Varanasi, India, Reprinted in 2013, Uttar Stana 24/26-29, pp. 156-157.
14. Sushruta Samhita, commentaries by Shastri, Kaviraja Ambikadatta 'Ayurveda Tattva Sandipika' Chaukhambha Sanskrit Sansthan, Varanasi, India, Reprinted in 2013, Uttar Stana 24/30-33, p. 157.
15. Sushruta Samhita, commentaries by Shastri, Kaviraja Ambikadatta 'Ayurveda Tattva Sandipika' Chaukhambha Sanskrit Sansthan, Varanasi, India, Reprinted in 2013, Uttar Stana 24/34-41, pp. 157-158.

Cite this article as:

Gayatri. Allergic Rhinitis: An Ayurvedic Review. AYUSHDHARA, 2026;13(3):279-286.

<https://doi.org/10.47070/ayushdhara.v13i3.2784>

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

*Address for correspondence

Dr. Gayatri

Assistant Professor, Department of Shalakyta Tantra, Saint Sahara Ayurvedic Medical College and Hospital, Kot Shamir, Punjab, India.
Email: Gayatrichittor17@gmail.com

Disclaimer: AYUSHDHARA is solely owned by Mahadev Publications - A non-profit publications, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. AYUSHDHARA cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of AYUSHDHARA editor or editorial board members.