A DIFFERENT APPROACH FOR ADMINISTRATION OF MARSHA NASYA BY ASHTANGA SANGRAHA: A REVIEW ARTICLE

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ABSTRACT

Nasya, one of the five panchakarma acts on brain by route of nasa. Nasya administration is one of most important things in panchakarma practice. In Charaka, Sushruta and Ashtanghridaya, methodology of nasya including its types with their different dosage are well explained, but how to administer dose in details is not explained. So following this in routine nasya practice, calculated or prescribed dose is administered in one stroke. Routinely bindu is considered as drop, which actually is lesser in quantity than the actual quantity of bindu. If we go by texts, the dosages are explained in bindu pramana which becomes huge if tried to give in one stroke. So, Ashtang Sangraha had suggested to administer the prescribed dose in three divided doses. So in the present review article, the methodology by Ashtang sangraha is discussed in detail.

Keywords: Nasya administration, bindu, asthanga sangraha

Introduction: Nasya karma is one of the five panchakarma. It is the process where the medicines are administered through the nostrils in a specific manner to cure systemic disorders. Nasa (Nose) is told to be the ‘dwara of shirah (gateway of brain/head)”1. This suggests that Nasya may have the direct entry into the brain and have the ability to improve the disoriented brain functions. Nasya firstly acts on nasa i.e. nose which is one of the sensory organs. Nasya mainly works on jatrudhwa organs (organs situated above neck) which includes like of ears (karmendriya), nose (ghranendriya), head / brain (shira), eyes (netra), which are mostly dnyanendriyas. So nasya is one of the prime treatment modalities for treatment of the diseases of these organs.

In routine nasya practice, calculated or prescribed dose is administered at once. This practice is contrary to the methodology advised by Ashtang Sangrakar Vagbhata where he suggested to administer prescribed dose in three divided doses.

MATERIAL AND METHODS

Acharya Charaka divided nasya in five groups viz navana, avapida, dhmapan, dhooma, pratimarsha2. These five types categorised in three types on the basis of its action like rechana i.e. nasya which expels out dosha from body, tarpana i.e. nasya which increases dosha in body and shamana i.e. nasya which pacifies doshas in body3. Further on the basis of matra or dosing nasya is divided in marsha nasya and pritimasha nasya4. Nasya doses i.e. matra is mentioned in bindu pramana. Dose of pratimarsha nasya is 2 bindu. Sneha nasya matra in each nostrils for hina, madhayama, uttama matra are 8, 16, 32 bindu5. For shodhana, sneha nasya matra in hina, madhayama, uttama matra are 4, 6, 8 bindu respectively6 while ashtanag sangraha mentioned marsha.
nasya doses of 6, 8, 10 bindu and 4, 6, 8 bindu of kwatha for hina, madhyama, uttama matra respectively.7

Bindu is considered as drop in routine practice, which is a word to word translation of Sanskrit to English. When two parva (proximal two phalanges) of pradeshini anguli (index finger) are dipped into the oil and the oil slipping from the same is collected and counted it is defined as ‘bindu’. A research study has shown that quantity of one Bindu is approximately 0.44 ml (14.34 ml / 32Bindu). Shaarangadhara10 has stated that, 8 Bindu are equal to one Shana and further the dose of Marsa Nasya is explained in multiples of Shana itself, as 8 Shana, 4 Shana and 2 Shana for Mukhya, Madhya and Antya matra11.

So, 1 Shana = 4 Maasha.
4 Maasha = 4 gm = 4 ml (Ayurveda Formulary of India).
Thus, 8 Bindu = 1 Shana = 4 ml.
1 Bindu = 0.5 ml.

Above calculation shows difference in dosing by bindu method and drop method. By drop method, administering nasya dose by dropper is given in drop by drop method which is contrary to the method advised by texts. Nasya should be given in continuous stream i.e. avichchhinna dhara12. So, one should advocate this method.

Ashtang sangraha suggests the administration of the nasya dose in three divided dosages.13 If the whole nasya dose is poured in one stroke, it may push the sneha in the upward direction (Utsnehana), may create various head and brain related disorders (shiroroga), rhinitis (pratishyaya), accumulation of secretions in nostrils (ghraana kleda), obstruction in breathing (Anoochhvasoparodha).14 So, to avoid this, administration of whole dose in three equal divided doses is advised. After administration of each divided dose, repeated swedana (fomentation) is suggested till the expulsion of medicine through spit or sneeze. After finishing all the three dosages, pashchatkarma is to be followed.15

Steps of procedure of nasya karma:-
1. Marsha Nasya Vidhi-
Nasya vidhi is divided in 3 steps i.e. preoperative (Poorakarma), operative (Pradhanakarma) and postoperative (Pashchatkarma).

Poorvakarma-
1. Before starting snehana and swedana, patient should be asked to get relieved from natural urges like urination, defecation etc and get cleaned the body.16
2. Snehana of jatrurdhwa organs i.e. organs above neck like neck, ears, face, head and scalp should be well oleated and subjected to swedana.17
3. Patients should be given prayogik dhumpana to clear all the strotasas.18
4. Patient should be in niwata room (devoid of flowing air) and is given supine position (uttana shirsh) with slightly leg raised condition (unnata pada) and both the upper and lower limbs spread straight (prasarit kara charana).19
5. Repeated hastasweda should be administered to jatrurdhwa area.20
6. While performing this procedure neck will be partially extended, paricharaka’s (therapist) palm of left hand will stay on forehead of patient, eyes will be covered with pad or clean cloth, tip of nose will be stretched by middle finger and one nasal cavity will be closed by anamika or pradeshini anguli finger.21
7. To be administered calculated dose should be divided in three doses.

Pradhana karma
1. After snehana and swedana and earlier mentioned position, prescribed dose of lukewarm drug should be administered in three equal divided doses.

2. First of the 3 divided doses of lukewarm medicine should be poured in nasal cavity in one stroke without breaking the stream. Same procedure will be done with another nostril.

3. Patient should be advised to avoid sneezing, loose temper, laugh, forceful inhalation (Uchchhindana), excessive talk (vyahara).

4. Then it should be followed by next lukewarm dose and again repeated swedana should be given to jatrurdhwa organ, soles and palms followed till the expulsion of medicines and kapha through spitting (shthiwana).

5. This should be followed by the third set of a lukewarm nasya till the expulsion of medicines.

6. In this way, all the three divided dosage of nasya should be administered one after another with swedana offered in between.

**Paschhata karma :**

1. After administration of the first nasya dose, samwahana i.e. light massage to ears, forehead, scalp, chicks, neck, shoulders, palms and soles should be given. The patient should be asked to exhale forcefully through the nostrils.

2. If administered medicine arrives in oropharangeal cavity, it should be spitted out by turning towards right or left lateral side. This medicine should not be swallowed as it may cause Agnimandya, and increase in dosha.

3. Repeated fomentation (sweda) should be given to organs above clavicles (jatrurdhwa) organs till the medicine and Kapha will be spitted and sneezed out.

4. After this, likewise 2nd and 3rd dose should be administered.

5. After each dose administration, swedana should be carried out.

6. For virechana and avapida nasya, after medicine administration, according to doshbala sneha nasya should be given.

7. After completion of nasya procedure, Patient should be advised to be in lying down position till 100 matra.

8. If there any vitiated or remaining dosha, Vairechanik or suitable dhumpaan and Gandusha with lukewarm water should be carried out.

9. Patient should be advised to follow the rule mentioned in snehapan i.e. patient should be advised to follow rules like to drink lukewarm water, follow Brahmacharya (avoid sex), be Kshapashaya (avoid daysleep and late night sleep), avoid pravaata (direct air), avoid yana (excessive travelling), adhwa (excessive walking), atibhashya (excessive talk), atyasana (sitting on same site for long duration), avoid dhum rajasewana (smoke and dust).

10. Excessive liquid intake should be avoided.

11. Same procedures will be repeated in every 3rd day till samyaka lakshana.

12. Nasya can be administered daily or twice a day in diseases of vata predominance like hidhma, swaropaghata, manyastambha, apatanaka, vataja shirahshoola.

**DISCUSSION**

Charka and Laghu-Vagbhata had advocated nasya procedure in the same manner with the same purva karma and paschhata karma except one change. The change is in putting the whole nasya dose into the nostrils. Vruddha vagbhata seems to be more logical and practical as if one has to put 32 bindus i.e. almost 16 ml into nostrils in one dose. It will be impossible to bear the strength of the medicine if it is
ushna teekshna. So, it will be easier to divide the same into three dosages.

Some points can be discussed in the following way.

Doubts –
1. Whether use of dropper is justified for Nasya, as it doesn’t allow the oil to be dropped in avichhinna manner as suggested by the texts?
2. Why vagbhata have suggested to administer Nasya in three divided doses?

Justification -
1. Administration of nasya dose by dropper will take much more time if given by dropper as compared to be given by Nasya yantra through avichhinna dhara. It may not yield the same effect as that explained by the texts.
2. If tried to give the whole dose at once, it may not be tolerated by the patient. (32 bindu =16 ml or 16 bindu = 8 ml). So, the idea of splitting of dosage must have been arise. It will give the patient enough time to breathe in between and make the patient ready to go for the higher dose.

CONCLUSIONS:
1. Nasya should not be carried out by dropper method. Instead of it Nasya yantra which can allow to pour in a stream manner will be more appropriate.
2. Dose should be given without breaking the stream.
3. Calculated dose should be divided in three equal dosages and then nasya should be administered.

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