

A Comparative Clinical Study of Anutaila Nasya and Gunja Taila Nasya in Suryavarta with Special Reference to Frontal Sinusitis

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ABSTRACT

Suryavarta, a type of Shiroroga described in Ayurveda, presents with pain in the frontal region of the head that intensifies as the sun ascends and subsides by evening. The clinical picture resembles frontal sinusitis in modern medicine. The aim of present study was “To evaluate and compare the efficacy of Anutaila Nasya and Gunja Taila Nasya in the management of Suryavarta (Frontal Sinusitis)”

A comparative clinical study was conducted with selected patients diagnosed with Suryavarta. Participants were divided into two groups: Group A received Anutaila Nasya and Group B received Gunja Taila Nasya for a fixed duration. Assessment was done based on subjective and objective parameters such as intensity, duration, and frequency of headache, nasal blockage, tenderness, and associated symptoms.

Both groups showed statistically significant improvement in signs and symptoms of Suryavarta. However, Gunja Taila Nasya exhibited slightly better efficacy in reducing headache severity and nasal congestion compared to Anutaila Nasya.

Both Anutaila Nasya and Gunja Taila Nasya were effective in the management of Suryavarta, with Gunja Taila Nasya showing marginally superior results. The study supports the classical indication of Nasya Karma in Urdhwajatrugata Vikara and demonstrates its potential as a safe and effective therapy for sinus-related headaches.

KEYWORDS: *Suryavarta, Frontal Sinusitis, Anutaila Nasya, Gunja Taila Nasya, Shiroroga, Ayurveda.*

INTRODUCTION

Suryavarta is described as a Vata-Pitta predominant Shiroroga characterized by pain in the frontal region, which increases with the progression of the sun. The symptoms resemble those of frontal sinusitis, involving inflammation of the frontal sinus with headache, heaviness, and nasal blockage. Modern treatments often provide temporary relief with possible recurrence, prompting interest in safe, long-term Ayurvedic approaches. Nasya Karma, one of the Panchakarma therapies, is indicated for Urdhwajatrugata Vikara (diseases above the clavicle). Anutaila, described in Ashtanga Hridaya, possesses Vata-Kapha Shamana and Shirovirechana properties, while Gunja Taila, mentioned in Bhaishajya

Ratnavali, has Shothahara (anti-inflammatory), Vedanasthapana (analgesic), and Kaphahara properties. Hence, this study aimed to evaluate their comparative efficacy in Suryavarta.

Materials and Methods

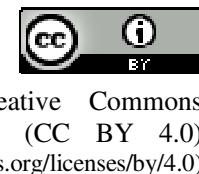
Source of Data

- **Literary source:** All classical, modern literature and contemporary texts including the journals and website about the disease, Dravyas and procedures was reviewed and documented for the study.
- **Drug source :** The Dravyas was collected from the local market after proper identification and all

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the required tailas were prepared in department of Rasashastra and Bhaishajyakalpana of BMJAMC, Hospital and PG Center Gajendragadha.

➤ **Sample source:** Patients were Randomly Selected from OPD and IPD of BMJAMC, Hospital and PG Center Gajendragadha and Special medical camps and other referrals.

Study Design:

Single-blind comparative clinical study.

Sample Size:

30 patients diagnosed with Suryavarta (15 in each group).

Diagnostic Criteria

Primary Criteria:

Based on signs of Suryavarta i.e Frontal sinusitis

- Positive Sinus tenderness
- Positive transillumination

Secondary Criteria:

- Shirashoola Dinavridha VivardhateInclusion Criteria
- Lalataruk
- Akshiruk
- Bhruruk
- Shankharuk
- Spandhanavat Vedana

Inclusion criteria

1. Patients having signs and symptoms of Suryavarta were selected.
2. Patients of either sex between the age group of 16-60 years were selected.
3. Both the acute and acute on chronic cases were selected.

Exclusion Criteria:

1. Patients suffering from any systemic disorders which interfere with course of disease and treatment.
2. Patients who are not fit for shodhana karma

Intervention:

Group A: Anutaila Nasya – 8 drops per nostril daily for 7 days.

Group B: Gunja Taila Nasya – same procedure and duration.

Posology

Group-A

Anutaila - For Nasya

Dose - 6 drops in each nostril

Duration - 7 days

Follow up - 7th & 15th day

Group-B

Ganja Taila - For Nasya

Dose - 6 drops in each nostril

Duration - 7 days

Follow up - 7th & 15th day

Assesment Criteria

Assessment was based on the following parameters

Subjective Parameters

Sl. No.	Assesment Criteria
1	Shiroshoola 0-Absent 1-Mild 2-Moderate 3- Severe
2	Lalataruk 0-Absent 1-Mild 2-Moderate 3- Severe
3	Akshiruk 0-Absent 1-Mild 2-Moderate 3- Severe
4	Bhruruk 0-Absent 1-Mild 2-Moderate 3- Severe
5	Shankharuk 0-Absent 1-Mild 2-Moderate 3- Severe
6	Spandanavat Vedana 0-Absent 1-Mild 2-Moderate 3- Severe

Objective Parameters

1	X-ray, (PNS view), Haziness / fluid levels 0 – Absent 1 - Present
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Statistical Analysis: Paired and unpaired t-tests were applied for intra- and intergroup comparisons.

Results

Overall Analysis

Within-Group Effects

➤ In Group A (Anutaila Nasya), significant reductions were seen in Shiroshoola, Lalataruk, Akshiruk, Bhruruk, Shankharuk, and Spandanavat Vedana. The percentage relief at AT ranged between 36–46%, and further increased to 76–88% at FU, showing a sustained long-term effect.

- In Group B (Gunja Taila Nasya), improvements were also highly significant across all symptoms. The percentage relief at AT ranged between 41–51%, slightly higher than Group A. At FU, relief values ranged from 81–86%, which were again very close to Group A results.

Between-Group Comparison

When comparing Group A and Group B, no statistically significant differences were observed in mean changes at either AT or FU for any symptom. This suggests that both Anutaila and Gunja Taila Nasya were equally effective in alleviating the symptoms of Suryavarta.

- At the AT stage, Group B showed marginally better relief percentages across most symptoms (especially Shiroshoola and Akshiruk).
- At the FU stage, both groups maintained almost identical outcomes, with Group A showing slightly higher relief in Bhruruk and Akshiruk, while Group B showed slightly better results in Shiroshoola and Spandanavat Vedana.

The result support to accept the hypothesis H_3 : There is equal effect of Anutaila Nasya and Gunja Taila Nasya in the management of Suryavarta

Discussion

The mode of action of Nasya Karma is through the Nasa hi Shiraso Dwaram concept, facilitating direct drug delivery to the head region. Anutaila exerts Vata-Kapha Shamana effects, reducing obstruction and promoting lubrication, while Gunja Taila acts on inflammatory and mucolytic pathways, aiding sinus drainage. The synergistic actions of both formulations support sinus clearance and alleviate pain. The study highlights the scope of Nasya Karma in managing sinus-related headaches without systemic side effects.

Conclusion

Nasya Karma with Anutaila and Gunja Taila is effective in managing Suryavarta. Both Anutaila Nasya and Gunja Taila Nasya produced highly significant relief in all symptoms of Suryavarta. Follow-up/post-treatment outcomes showed a slight edge in favour of Gunja Taila, while Anutaila showed sustained relief during follow-up in certain symptoms. Between the two, Gunja Taila Nasya demonstrated slightly superior efficacy in reducing headache and nasal symptoms. These findings

validate classical references and provide a safe alternative for managing frontal sinusitis.

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