International Journal for Multidisciplinary Research (IJFMR)
E-ISSN: 2582-2160 ● Website: www.ijfmr.com ● Email: editor@ijfmr.com

Allergy: A Conceptual Perspective in The Light of Dushivisha and Pratishyaya

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Abstract

Dushivisha is a low potent toxic substance which resides in the body and vitiates *dhatus* when favorable conditions occur. It accumulates over time, weakening the immunity and disrupting the *doshic* balance of the body. Due to *apaki* nature of *Visha* and the *Avarana* caused by *Kapha dosha*, it remains in the body for a prolonged duration [1]. It plays a significant role in aggravating *Vataja Pratishyaya* leading to nasal congestion, sneezing, and other issues. *Dushivisha* impairs *Agni*, leading to the formation of *Ama*, which in turn heightens inflammation and hypersensitivity. Pathophysiology of *Dushivisha* as well as *Vataja Pratishyaya* includes *dhathu dusti, ashaya dusti* due to indulgence in environmental toxins and unwholesome *aharas* and *viharas*. In *Ayurveda Nidana parivarjana*, *shodhana shamana chikitsa* and *Pathyaaharas* are essential in mitigating *Dushivisha'*s impact on *Vataja Pratishyaya* and restoring the *Vyadhikshamatwa* of *shareera*. This paper explores the role of *Dushivisha* in aggravating *Vataja pratishyaya* and its pathophysiology in ayurvedic perspective.

Keywords: Dushi visha, Vataja Pratishyaya, Dhathu dushti, Nasal congestion

INTRODUCTION

Dushivisha refers to a type of toxic that, although originating from either animate or inanimate sources, remains in the body after partial expulsion or after provisional detoxification through anti-poisonous drugs. It is characterized by the absence of *Visha Guna* and is categorized under *Kritrima Visha* in *Agadatantra*. This having lesser potency attains a hidden stage in the body and responsible for the delayed action and cumulative toxicity on the body [2]. *Pratishyaya* is a disease condition described in *Ayurveda,* occurring due to the vitiation of *doshas*. In that *Vataja Pratishyaya* is primarily caused by vitiation of *Vata dosha* typically due to the *Asatmya ahara viharas, kala parinama* and *Dushivisha*, though different in origin showing some relation [3]. *Dushivisha* is a latent toxic that remains in the body without producing acute symptoms but disturb the normalcy of health, vitiates the doshas due to *ruksha, teekshna* and *laghu* qualities. It accumulates in the body and triggered when favourable conditions occur like *Ritu parinama*, *Ahitha ahara viharas* etc. In *uttamanga* it mainly affects the *pranavahasrothas* leading to nasal obstruction, sneezing, nasal discharge-like symptoms. Thus, *Dushivisha* act as a dormant pathogenic factor that can initiate the vitiation of *vata dosha* and cause recurrent and chronic forms of *Vataja Pratishyaya*.

Materials and methods

The references have been collected and compiled from various available *Ayurvedic* scriptures like *Charaka*

Samhita, Susrutha Samhita, Ashtanga Hridaya, Bhela Samhita and various textbooks, research articles, scientific papers.

Dushivisha

The word '*Dushi'* is derived from the root word '*Dusa*' and with the suffix '*Nic*' and '*In*'. The word '*Dushi'* means impure or possessing the property to vitiate [4]. A constant exposure to particular time, place and diet as well as constant and regular day sleep tends to vitiate the dhatus of the body and this toxic is consequently known as the *Dushivisha*. A substance either *sthavara*, *jangama* or *kritrima* whenever not fully eliminated from the body and attenuated by anti-poisonous remedies or gets dried up by *dhavagni, vata*, *atapa* or the natural qualities of toxicity becomes less potent is called as *Dushi visha*. It is an impoverished or weak form of toxin. Due to its low potency, it does not kill the person immediately but persists in the body for many years, being enveloped by *Kapha.*

Nidanas of *Dushivisha*

- 3 types of *Visha* - *Sthavara, Jangama* and *Kritrima*[6]
- *Asatmya* – Things which are unhealthy and cause discomfort to the body is *Asathmya*.
- *Adhyashana* – Consuming large quantity of food even before the previous meal digested constitutes *Adhyashana*[7]
- *Virudhannam* – Any *ahara* or *oushadha* that causes aggravation of doshas but does not expel them completely out of the body is called Virudha. This *ashesha anirgata swabhava* is seen in *dooshi visha* also.[8]
- *Ajeernam* – Even though the food is *satmya, laghu* and intake in its proper time. it does not undergo proper digestion.[9]
- *Vegadharana* – Withholding of natural urges may produce irritation to *amashaya* or *pakvashaya* [10]
- *Roganukkal* & *Anunashakaoushadham* – According to *kriyakoumudhi*, after a long period, germs, microbes and even the medicine used against them may attain *Dooshiviha swabhava* [11]

Prakopa karanas [12]

- Environmental factors
  - *Desham – Aanopa: prabhoothaanilaseetavarshah*
  - *Kalam – Seetaniladurdina* and others
  - *Pragvata – Purovata, visheshena roga vardhana* which aggrevates *kaphavrutha visha*
- Physical factors
  - *Divaswapna, adharaneeya vegas* like *ksut, trit* and *Trishna, deha dourbalyam*, *adwanam, atisaram* and *kamavritti*
- Dietary factors
  - *Ajeerna, ahitashana* and *suratilakulathadi anna*
- Psychological factors
  - *Vyasanam, bhayam and kopam*

Dushivisha is a latent form of toxin, when retained in the body disturbs the equilibrium of *doshas* and impairing the various system of the body. It may lead to symptoms like *mandagni, arochaka, vishamajwara, twak vikara* and *manodourbalya*. In the respiratory system it manifests as *peenasa, shirasoola, kantha kandu, nasa kandu,* heaviness of head and loss of smell. These manifestations occur gradually due to chronic vitiation of *doshas* and *dhathus* with episodes of aggravating factors.

Pratishyaya

Nasa is one among the *Panchendriya* and which has direct contact with external environment. Due to this it is exposed to lot of pollutants, microorganisms responsible for allergic conditions. *Pratishyaya* is one among the *Nasagata rogas* mentioned by *Ayurveda acharyas*.

PRATI + SHEYNG GATAU= PRATISHYAYA

PRATISHYAYA word developed from Sanskrit root "*SHEYNG*", Which means "to move". With prefix and suffix the word termed as "constant move". It indicates the recurrent attack and can precipitate even due to minute etiological factors.

In Dalhana commentary of *Sushrutha samhitha*, nidana of *Pratishyaya* split in to two categories, *Sadyojanaka* and *kalanthara janakam*.

- *Sadyojanaka* – In this factor precipitate the disease directly without undergoing *shatkriya kala* (*chaya,prakopa , prasara*). *Shiro abhitapa*, over indulgence in sex, *Dhooma*, *Raja*, *Mutra pureesha vegavarodha* and *Rituvaishamya*
- *Kalanthara janakam* – Due to various etiological factors (*nidanas*) like *Vegavarodha*, Adhyashana, *Anashana, Mithyashana, Avashyaya, Diwaswapna* and *Ratrijagaranam,* the *doshas (Vata, Pitta, and Kapha*) undergo a pathological sequence known as *Shatkriyakala*. If not properly managed in the early stages, the vitiated *doshas* spread towards the *Urdhwagata Bhaga* (upper regions of the body), leading to the precipitation of various diseases *(rogas*).[13]

The aggravated *doshas*, moving continuously through the body, eventually localize in a particular *dhātu*, where they vitiate the residing *doshas* and initiate disease. This stage is known as *Sthāna saṁśraya*, the *kupita mala* will moving throughout the body where there is obstruction due to *sroto vaigunyata*, during which preliminary symptoms manifest such as *Anādhanasa* (loss of smell), *Kṣavathu* (sneezing), *Niṣṭoda in śiras* (pricking pain in the head), *Svaropaghāta* (hoarseness of voice), and *Soṣha* (dryness) of *Gala, Tālu, and Oṣṭha* (throat, palate, and lips)."[14]

In the *Bhela Samhita, Sutrasthana, Janapadodvibhaktiya Adhyaya, Acharya* has mentioned that exposure to unaccustomed or incompatible smells (*Asatmya Gandha*) can cause *Pratishyaya*. Along with this, symptoms like the formation of *pidakas* (boils or pustules) in the regions of the axilla (*Kaksha*) and the root of the thighs (*Urumoola*) are also described.[15]

Role of *Agni* in *Dushivisha* and *Pratishyaya*

The manifestation of *Dushivisha* and *Pratishyaya* begins from *agnimandhya* due to multiple *nidanas* like *Vega dharana, Mithyashana, Swapna viparyaya* etc. this will cause *Mandagni* and leads to the formation of *Ama*. In *Dushi visha* this *ama* acts as *Amavisha* equivalent to mild poison, with mild potency supressed by immune response or partially neutralized by other factors which lodged in the tissues. This accumulates in the body and periodically precipitates by social and environmental stressors. In *Pratishyaya*, *Ama* vitiates *vata dosha* which carry *kapha*, *pitta* and *rakta* towards *urdwabhaga* and expels from *Nasa pradesha*. Here *agnimandhya* obstructs *srothas* especially *pranavaha srohtas*. If *dushita ama* is present in the body, which can trigger due to *Sadhyojanaka* and *Kalanthara janaka* factors. So *Dushivisha* might be an allergen or irritant which became dormant in the body waited for a favourable condition.

In the view of *Vyadhikshamatwa,*[16] natural immune system of the body which resist all ill effects of the body guards against external allergens and internal vitiation of doshas. In *Dushivisha* – a person with *prabhuta vyadhi kshamatwa* illness remains dormant without manifesting symptoms. But in *hina vyadhikshamatwa* even minor provocations like *rituviparyaya, mithyashana* also can flare up the

symptoms. So, in weak stage of *vyadhikshamatwa* where *dushi visha* in recessive stage *Prathishaya* occurs frequently, takes a chronic form or easily gets aggravated by even mild factors like mist, dust, food etc. On exposure to the favourable factors *visha* produces dysfunction of metabolism and manifested symptoms of disease.

Relavance of *Vyanjaka hetu* in *Pratishyaya* and *Dushivisha*

In *Madhava nidana*, *Vyanjaka hetu* means the cause which stimulates the existing disease. Unlike *nidana hetu*, *Vyanjaka hetu* act as triggering agents that bring forth clinical expression.[17] *Acharya* while describing various *roga nidanas*, emphasizes that certain conditions remain latent or subclinical until the patient is exposed to such *Vyanjaka hetu*. In *dushivisha* which remains in the body in a subclinical state for years covered by *kapha* in masked form due to low potency. When the right *Vyanjaka hetu* act in this, it becomes evident in the form of disorders like *Prathishyaya*. *Dushivisha* represents the background immune burden and chronic dysregulation, while *Pratishyaya* reflects its acute hypersensitive expression, both depending on compromised *Vyadhikshamatva.*

Pathophysiology

An allergy is an exaggerated immune response triggered by allergens, which stimulate B lymphocytes to produce allergen specific antibodies on the first exposure. This antibody binds to the mast cells causing degranulation and release of mediators like histamine, leukotrienes and prostaglandins. These mediators lead to vasodilatation, smooth muscle contraction, mucus secretion and nerve stimulation producing various symptoms. In later phase eosinophils and cytokinin's are involved causing sustained inflammation and tissue damage.[18]

In the case of *Dushivisha*, low grade latent infectious agents that remains in the body without causing immediate symptoms. This leading to their deposition in tissues and inducing chronic, subclinical inflammation and oxidative stress. It acts as a persistent antigen, periodically triggering immune hypersensitivity, metabolic derangements and tissue damage when host immunity is compromised or precipitating factors arise. *Dushivisha* creates an internal environment primed for exaggerated responses to minor environmental triggers, culminating in recurrent nasal mucosal inflammation that is *Pratishyaya.*

Mechanism	***Dushivisha* effect**	***Pratishyaya* effect**
Chronic inflammation	Systemic pro inflammatory state created by persistent cytokines	Heightens nasal mucosal sensitivity to minor irritants and allergens
Immune dysregulation	Imbalance in T cells	Predispose to allergic reaction and type 1 hypersensitivity
Oxidative stress	Toxin induced reactive oxygen species damage mucosal barriers	Increase nasal mucosal permeability to irritants
Gut respiratory axis	This induces gut dysbiosis and leads to translocating endotoxins to circulation	Contributes systemic and upper airway inflammation
Mucosal immunity	Suppresses secretory IgA levels and innate antimicrobial peptides in mucosa	Reduces defence against allergens and infections causing recurrent *Pratishyaya*

DISCUSSION

Classical *Ayurvedic* texts like *Charaka Samhita, Susruta samhitha* and *Bhela Samhita* describes *Dushivisha* as a mild form of *Visha* that does not kill immediately but becomes active later especially when *agni* is weak or the body is exposed to aggravating factors. It may be compared to chronic low grade toxin accumulation, immune dysregulation, persistent antigen exposure where the body develops a delayed immune response. This mirrors the nature of allergic diseases, where the immune system is hypersensitive to non-toxic substances.

In case of *Pratishyaya*, the *samprapthi* begins with vitiation of *Kapha* as a *sthanika dosha* and *Vata* due to exposure of cold, dust or improper *ahara viharas*.[19] The stagnation of *doshas* in the nasal passages leads to *srotorodha* and shows the *roopa* of illness. When it is superimposed to *Dushivisha* it became chronic and frequently recurring, this mimicking the typical allergic symptoms. The *nidanas* includes *Asathmya Gandha*, *Ritu sandhi*, which are now to be understood major triggering factors for Allergic rhinitis. Modern studies also support the fact that seasonal variations significantly influence the expression of allergic conditions, aligning with the *Ayurvedic* view of *Ritu kala* as an aggravating factor for *Dushivisha* and *doshic* vitiation.

A compromised *Agni* results in *Ama* formation which further deranges immunity and favours the activation of latent doshas and toxins. Deranged *Vyadhikhamatva* also makes the body more prone to hypersensitive responses and allows mild toxins or allergens to produce severe symptoms. In this way *dosha dhathu mala samyata* has been impaired leading to acute disturbances. These acute conditions tend to become sub-acute and chronic and continue as such. Thus, they retained in the body, impeding the restoration of the *samyata* or normal equilibrium of the *doshas, dhathus* and *malas* leading to various functional and organic disturbances.[20] Modern understanding supported by this where, immune regulation, gut permeability and microbiome imbalance are considered in the pathogenesis of allergic conditions.

Integrative management

- Life style correction addressing *Nidana parivajana* can act as a preventive strategy.
- In *Dushivisha Visha nirharana, Dosha shamana, Agni Deepana* and *Rasayana* therapies can be applicable
- *Dosha Shamana, Srotoshodana* including *Shiovirechana* are applicable for *Pratishayaya* management
- *Shamana* and *Shodhana chikitsa*, *Agni Deepana* and *Ama pachana, Rasayana chikitsa*, *Ritu anusara chikitsa* are commonly can apply in both conditions.
- In contemporary science treatment modalities widely using are Detoxification, restoring digestive fire, immunomodulation, dietary regulation, local treatments like corticosteroids, antihistamines, external therapies like cold compresses, irrigation and long-term management.

Limitations

- Molecular-level evidence is lacking to support the conceptual correlation between *Dūṣhīviṣha* and allergy; the correlation is currently supported only by classical texts and clinical observations.
- Seasonal and regional variations in symptom patterns were not explored
- Diagnostic overlap between *Dushivisha* and other conditions may lead to subjective interpretation
- Instrumental assessments and long term follow up studies are lagging.

Future scope

- Future studies can include biochemical and immunological markers like (Ige, eosinophil count) to objectively validate the correlation.
- Standardized diagnostic protocols can be developed to differentiate *Dushivisha* related conditions from other chronic inflammatory or allergic diseases
- Future studies can investigate the influence if Ritu and Desha in *Dushivisha* activation and allergic flare ups
- Include objective tools (nasal endoscopy, skin prick test) for better clinical corelation

CONCLUSION

There is a remarkable similarity between *Dushivisha* and *Pratishyaya*, both in terms of their underlying pathology and clinical presentation. Modern science describes allergic rhinitis as a Ige mediated immune hypersensitivity, whereas in ayurvedic view it as a manifestation of latent toxicity, *Agnimandhya*, impaired *Vyadhikshamatwa*. Both conditions tend to follow a chronic, relapsing course often triggered by seasonal changes or diet factors. Ayurvedic treatment emphasizes a proper *Shodhana*, *Shamana, Rasayana* modalities. Understanding allergic disorders through the lens of *Dushivisha* opens new avenues for preventive, curative and immunomodulatory strategies in *Ayurveda.* This integrative perspective can enhance clinical outcomes and offer sustainable management in conditions like *Pratishyaya*. Furthermore, *Nidana parivarjana, Aharaviharas* and *Ritucharya* play a crucial role in preventing recurrence. Such an approach not only improves system control but also enhances the individual's overall health and resilience against mild toxins and allergens. Thus, ayurvedic management targets both the systemic imbalance and environmental sensitivity aiming long-term health and prevention of illness.

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