2

- 3 Ayurvedic Management of Multiple Food allergies with Associated Allergic Rhinitis:
- 4 A Gut-Immune Axis Case Report

5

6 Abstract

- 7 Aim: To evaluate the therapeutic efficacy of Ayurvedic interventions in a patient with
- 8 chronic multiple food allergies and nasal hypersensitivity.
- 9 Objective: To observe the effect of Srotoshodhana, Agni Deepana, and AamaPachana-
- based management on clinical outcomes of food and nasal allergy.
- 11 Material and Methods: A 29-year-old woman with lifelong nasal allergy, eye itching,
- 12 throat irritation and multiple food intolerances was treated using a standardized
- 13 Ayurvedic protocol by managing digestive detoxification and airway therapy. Diagnostic
- 14 impression: AaharAsatmyata (multiple food intolerance) with Vata-
- 15 KaphajaPratishyaya(allergic rhinitis). The regimen included Pratimarsha Nasya (Nasa
- 16 Yoga Ghrutam), topical ocular Akshi Tarpan, and internal agents targeting gut
- detoxification and immunomodulation (Aahar Amrutham Ras, IAFA Respiratory Detox

- 18 Tablet, Haridrakhandam, AnthramMithram Gulika, Kutaj Ghanvati, and IAFA Res Chai-
- 7). Diet and lifestyle optimization and pranayama were advised.
- 20 Results: Assessments of cases are done and documented. Within one month, marked
- 21 reduction in nasal congestion, throat itching, and food allergy was seen, with 70 %
- 22 symptomatic improvement and no relapse during follow-up.
- 23 Conclusion: Ayurvedic therapy targeting gut- immune balance offers a safe, effective
- 24 approach in chronic food and nasal allergies.
- 25 **Keywords:** Multiple Food Allergy, Multiple food intolerance, Aahar Asatmyata, Allergic
- 26 rhinitis, Nasya, gut-immune axis, IAFA Ayurveda.

1. Introduction

- 28 Allergic disorders, especially those involving food and airway hypersensitivity represent
- 29 a major global health challenge.
- 30 Food allergies and food-related hypersensitivities are heterogeneous conditions ranging
- from IgE-mediated immediate reactions to delayed non- IgE immune-mediated disorders
- e.g., FPIES, FPIAP. IgE-mediated food allergy affects an estimated 3–10% of adults and
- up to 8% of children in many populations, non-IgE disorders are increasingly recognized
- and can present primarily with gastrointestinal or systemic symptoms. Contemporary

research highlights the gut-immune axis and microbiome as critical modulators of food 35 allergy risk and tolerance development. Early oral exposure to allergens and microbiome 36 composition are associated with altered risk of developing IgE-mediated allergy. Modern 37 treatment mainly provides symptomatic relief. Ayurveda interprets these as 38 SrotasamAtipravritti (hyperactivity of body channels) resulting from AaharaAsatmyata 39 and Ama accumulation. Vata-KaphajaPratishyaya parallels allergic rhinitis, while 40 AaharaAsatmyata corresponds to food intolerance or various food allergies. This study 41 presents a structured Ayurvedic management protocol that produced significant 42 improvement in a chronic case. Ayurvedic procedures such as Nasya (nasal 43 administration of medicated oils) and internal Deepana- Pachana (digestive-stimulant and 44 detoxifying) therapies aim to reestablish digestive fire, clear Ama, and restore Strotas 45 patency. A number of clinical reports and small trials suggest benefit of Nasya and 46 Panchakarma approaches in allergic rhinitis, though high-quality randomized trials are 47 limited. 48

This case report documents a patient with chronic allergic manifestations i.e. airway and multiple food allergy treated with an integrative Ayurvedic protocol targeted at gut—immune restoration and local airway therapy.

2. Case Presentation

A 29-year-old female presented on 30 June 2022 with lifelong nasal allergies, recurrent eye itching and watering, throat itching and chest congestion, and reproducible adverse reactions to multiple foods like tamarind, lemon, ice-cream, yogurt, packaged or processed items, high-sugar foods, and additives. Past history included recurrent pneumonia in childhood, prior management comprised intermittent allopathic antihistamines and episodic antibiotics. No baseline immunologic testing like specific IgE, total IgE, eosinophil count was available.

2.1 Patient Details

• **Age/Sex:** 29/ F

60

- Address: India
- Date of first consultation: 30 June 2022

64 **2.2 Chief Complaints:**

- At the time of first consultation, the patient reported:
- Persistent nasal congestion, sneezing, and nasal discharge since childhood
- Throat itching and intermittent chest tightness or congestion
- Eye itching, redness, and watery discharge, exacerbated by dust or weather change

- Recurrent adverse reactions after ingestion of multiple foods, described as bloating, throat irritation, and heaviness
- History of frequent cough and cold episodes since childhood
- Episodes were accompanied by nasal blockage, post-nasal drip, throat irritation, and general fatigue.
- 74 **Duration of illness:** Since childhood.
- 2.3 Diagnosis: Aahar Asatmyata (multiple food allergy or multiple food hypersensitivity,
- multiple food intolerance) and Vata-KaphajaPratishyaya (allergic rhinitis).

2.4 Triggers and Exacerbating Factors

- 78 Symptoms were aggravated by consumption of tamarind, lemon, ice cream, sauces,
- carbonated drinks, yogurt, chips, refrigerated and packaged foods, sugar-based items, and
- 80 foods containing preservatives, colorants, or artificial sweeteners.

3. Methods

81

3.1 Intervention Protocol:

- 83 Management was planned according to Ayurvedic principles of Agni Deepana i.e.
- 84 enhancement of digestive metabolism, Amapachanai.e. detoxification of undigested
- metabolites, and Srotoshodhanai.e. restoration of channel patency. The approach

- simultaneously manages gastrointestinal dysregulation i.e. AharaAsatmyata and airway
- 87 hypersensitivity i.e. Vata-KaphajaPratisyaya.
- 88 Monitoring: Structured monthly follow-up visits, i.e., from June 2022 to
- November 2022, with clinical assessment is done.

90 3.2 Ayurvedic treatment protocol:

- 91 Therapeutic plan:
- 92 External: Pratimarsha Nasya with Nasa Yoga Ghrutam (4–6 drops bilaterally, twice
- 93 daily), IAFA Nasal All Clear X Drops (4–6 drops bilaterally twice daily), Akshi Tarpan (1
- 94 drop each eye nightly).
- 95 Internal: Aahar Amrutham Ras 30 ml twice daily after meals, IAFA Respiratory Detox
- Tablet 2 tablets twice daily, Haridrakhandam 1 tsp twice daily, Anthram Mithram Gulika
- and Kutaj Ghanvati each 1 tablet twice daily, IAFA Res Chai-7 (tea) twice daily.
- 98 Diet/lifestyle: Alkaline, low-histamine, non-fermented, avoidance of dairy, processed,
- 99 sugary items.Pranayama like Nadi-Shodhanaand Yoga Ustrasana, Dhanurasana,
- 100 BaddhaKonasana is recommended.

101 Treatment Protocol

3.3 Ayurvedic Treatment Protocol for different follow-ups

102

103

104

Table 1- Formulations used along with their dosage, frequency, route, time of administration and duration

Formulation	Dosage and	Route and Time of	Duration
	Frequency	Administration	
Nasa Yoga	4-6 drops in each	Intranasal (early morning &	June- Nov 2022
Ghrutam	nostril twice	bedtime) and 2-4 drop in naval	
(Pratimarsha	daily	area twicw a day	
Nasya)			
IAFA Nasal	4-6 drops in each	Intranasal (late morning & early	June- Nov 2022
All Clear X	nostril twice	evening)	
Drops	daily		
Akshi Tarpan	1 drop in each	Topical ocular route	June- Nov 2022
Ghrutam	eye once daily at		
	bedtime		
Aahar	30 ml twice	Oral	June- Nov 2022
Amrutham	daily after meals		
Ras	with equal water		
IAFA	2 tablets twice	Oral	June- Nov 2022
Respiratory	daily, 15 min		
Detox Tablet	after meals		

Haridrakhand	1 teaspoon twice	Oral	June- Nov 2022
am	daily		
AnthramMith	1 tablet twice	Oral	June- Nov 2022
ram Gulika	daily, 1 hour post) '
	meals		
Kutaj	1 tablet twice	Oral	June- Nov 2022
Ghanvati	daily		
IAFA Res	2.5 g twice daily	Oral (tea)	June- Nov 2022
Chai-7	as herbal		
	infusion		
Extra virgin	Twice a day	Over affected area	Nov- Dec 2022
coconut oil			
333 creams	Twice a day	Over affected area	Nov- Dec 2022
Lacto	Before going out	Over affected area	Nov- Dec 2022
calamine			
lotion as a			
sunscreen			
Brahmi	2 capsules once		Nov- Dec 2022
capsule	a day a bedtime		

Table 2- Ayurvedic Treatment Phases along with their Clinical Outcome and objectives

Phase / Date	Clinical Outcome	Scientific Validation
Phase I – Initiation	Approximately 40 %	Detoxification and
(30 Jun – 15 Jul 2022)	reduction in nasal	Restoration: Initiation with
	congestion, improved	Pratimarsha Nasya (Nasa
	appetite, decreased throat	Yoga Ghrutam), IAFA Nasal
	irritation	All Clear X Drops, Akshi
		Tarpan Ghrutam, and
		internal formulations (Aahar
		Amrutham Ras,
		Haridrakhandam, IAFA
		Respiratory Detox Tablet,
		etc.). Objective: Increase
.0-		Agni, reduce Ama, clear
		Pranavaha Strotas. Key
		herbs (Yashtimadhu,
		Haridra, Shigru, Neem)
		provide anti-inflammatory
		and immunomodulatory

		actions.
Phase II – Stabilization	Approximately 70 % overall	Mucosal Repair and
(16 Jul – 2 Aug 2022)	relief. Eye itching resolved,	Digestive Support: Same
	nasal discharge minimal,	internal medicines with
	tolerance to mild trigger	Pathya- Apathya counselling
	foods achieved.	and Nadi Shodhana
	8	Pranayama. Objective:
		Enhance mucosal recovery,
		normalize digestion–
		absorption, and stabilize
		immune response.
Phase III – Maintenance	Condition stable. No relapse	Sustain Remission and
(Aug – Sept 2022)	despite mild cold exposure,	Prevent Relapse: Tapered
	energy and digestion	Nasya to once daily.
	improved.	Continued internal therapy
4		and IAFA Res Chai-7.
		Objective: maintain
		respiratory immunity and
		prevent seasonal
		exacerbation.
Phase IV – Relapse	Mild recurrence after	Adaptogenic Support:
Management (Oct 2022)	sweets, symptoms subsided	Objective: Strengthen

	within 10 days, no systemic	adaptogenic and hormonal
	reaction.	balance mechanisms,
		modulate immune reactivity.
Phase V – Topical Care	>80 % relief in all systemic	Neuro-Immuno-Dermal
(Nov 2022)	symptoms, skin comfort and	Stabilization: Brahmi
	tolerance improved, no	capsules (2 caps HS) for
	relapse.	stress-axis regulation, Lacto
		Calamine lotion, 333 cream,
		and extra virgin coconut oil
		applied topically to restore
		epithelial barrier and prevent
		dryness. Objective: Enhance
	.0~`	neuromodulation, cutaneous
		immunity, and long-term
		tolerance induction.

Table 3: Monitoring Parameters

Domain	Assessment Method	Frequency	Outcome
Symptom scoring	0–5 visual analogue	Every visit	80 % overall
	scale for nasal,		reduction from
	throat, eye, and food		baseline

	reactions		
Digestive status	Appetite, stool	Weekly	Normalized by week
	regularity, bloating		3
Allergen tolerance	Gradual supervised	Month 3 onward	Partial tolerance
	re-exposure to small		achieved, no
	quantities of		anaphylaxis
	previously offending	. 10.	
	foods		
Adverse effects	Tele-consultation	Continuous	None reported
	and patient diary	////	

3.4 Dietary and Lifestyle Monitoring

- 114 Pathya: Soft, freshly cooked, non-fermented foods; inclusion of Jeeraka Jala (cumin
- water) and curry leaves daily. Fresh apples and pomegranate along with other fruits are
- encouraged to be taken.
- 117 Apathya: Milk products, fried items, fermented foods, packaged snacks, artificial colors
- and flavors strictly avoided.
- Lifestyle: Early sleep, daily 20-minute yoga and Pranayama. Avoidance of cold exposure
- and late meals.

112

4. Results

122 **Table 4-**

Date	Major symptoms	Symptom Severity	Clinical
		(0 = none - 5 = severe)	Interpretation
30 June 2022	Nasal blockage,	Nasal 5 / Throat 4 /	Severe allergic state,
	sneezing, throat	Food Intolerance 5	AaharaAsatmyata,
	itching, multiple		Vata-
	food reactions, eye		KaphajaPratishyaya
	itching		diagnosed
15 July 2022 (Mid-	Reduced nasal	Nasal 3 / Throat 2 /	Agni Deepana
therapy)	discharge, improved	Food 4	initiated, airway
	digestion, mild		clearance evident
	tolerance to some		
	foods		
2 August 2022	Sneezing rare,	Nasal 1 / Throat 1 /	Approximately 70
(Follow-up 1)	minimal congestion,	Food 2	% relief, Kapha-
	no eye itching,		Vata Shamana
	digestion normal.		achieved
Nov 2022	No major relapse,	Nasal 0–1 / Throat 0	Sustained remission
	patient continues	/ Food 1–2	

ragiman	
regimen	

Outcome

123

124

129

130

131

- By November 2022, the patient achieved:
- Approximately 80 % improvement in nasal and throat symptoms
- Complete relief from eye itching and watering
- 60–70 % improvement in food intolerance or multiple food allergy
 - Marked enhancement in digestion, vitality, and quality of life
 - No drug-related or allergic adverse events

Table 5. Symptom improvement summary

Symptom	On starting of treatment (Scoring: 0–5)	On last follow up (Scoring: 0–5)	% improvement
Nasal congestion &	5	1	80%
sneezing			
Throat itching / chest	4	1	75%
heaviness			
Eye itching/watering	4	0	100%
Food-trigger severity	5	2	60%

Tolerance and	poor	improved	Qualitative
general digestion			improvement

132

133

137

141

142

5. Discussion

The present case demonstrates a systematic Ayurvedic management approach for a 134 chronic multiple food allergyand respiratory condition involvement. The treatment was 135 planned in five sequential phases from June to November 2022, each addressing a distinct 136 pathological layer beginning with systemic detoxification, followed by stabilization, remission maintenance, relapse control, and finally, long-term neuro-immuno-dermal 138 stabilization. The results indicate that precise phase-wise therapy rooted in Ama-139 Nirharana, Agni-dipana, and Rasayana principles can effectively correct both local and 140 systemic hypersensitivity responses.

1. Pathophysiological Understanding

From an Ayurvedic view, the clinical presentation reflected a combined derangement of 143 Kapha and Vata in the PranavahaSrotas, secondary to Ama accumulation due to impaired 144 Jatharagni. The chronicity and relapsing nature signified deep-seated Dosha–Dushya 145 Sammurcchana involving Rasa and Rakta Dhatu. The therapeutic goal, therefore, was 146 twofold i.e. Ama-Pachana and Agni- Deepana to restore metabolic efficiency, 147

- and Srotoshodhana and Rasayana support to normalize immune response and mucosal integrity. The initial phase focused on Pratimarsha Nasya i.e. Nasa Yoga Ghrutam, IAFA Nasal All Clear X Drops and internal formulations such as Aahar Amrutham Ras, Haridrakhandam, and IAFA Respiratory Detox Tablet, etc. Together, these addressed both
- Sodhana (purificatory) and Shamana (pacifying) needs without burdening the system.

2. Phase-wise Therapeutic

154 **Phase I (Initiation):**

This phase targeted detoxification and digestive correction. Herbs like Haridra (Curcuma 155 longa), Shigru (Moringa oleifera), and Neem (Azadirachta indica), etc. in formulations 156 are established anti-inflammatory and antimicrobial agents, validated for mast-cell 157 cytokine modulation (IL-6, TNF- α). Herbs in formulations stabilization and 158 also contributed to mucosal protection and corticosteroid-sparing effects. The result 159 approximately 40% symptomatic reduction within two weeks reflects the classical 160 Ayurvedic aim of restoring Agni and clearing Ama before proceeding to deeper Rasayana 161 therapy. 162

163

164

153

Phase II (Stabilization):

- 165 Treatment along with dietary regulation (Pathya-Apathya) and Pranayama were
- integrated and maintain mucosal recovery and regulate the Prana-Udana-Apana axis.
- 167 The use of Akshi Tarpan Gheutam provided ocular comfort and indirectly balanced
- Alochaka Pitta and Tarpaka Kapha, explaining the resolution of eye-related symptoms.

Phase III (Maintenance):

169

179

- 170 Once symptomatic stability was achieved, internal medicines were continued with
- 171 reduced Nasya frequency. The sustained remission, despite environmental triggers,
- indicates effective restoration of mucosal barrier and improved local immunity, a modern
- 173 correlation of VyadhiKshamatva.

174 Phase IV (Relapse Management):

- A minor relapse following dietary indiscretion was quickly controlled in this phase with
- 176 herbs possessing strong adaptogenic and antioxidant profiles, improving endocrine-
- immune resilience. Ojas-supportive Rasayana principles, ensuring rapid recovery without
- the need for steroidal rescue medication.

Phase V (Taper and Topical Care):

- During the tapering stage, focus shifted to neuro-immuno-dermal stabilization. Brahmi
- 181 (Bacopa monnieri) was administered for hypothalamic-pituitary-adrenal axis modulation

and anxiety regulation addressing the psychosomatic link in allergic pathology. Topical agents such as Lacto Calamine lotion, 333 cream, and extra virgin coconut oil served as cutaneous protectants, maintaining epithelial barrier function and preventing residual dryness or pruritus. This reflects an integrate strategy targeting both central and peripheral inflammatory pathways.

3. Pharmacological Correlation

Table 6- Ayurvedic Formulations, Key Herbs, and Pharmacological Correlation

Formulation	Key Herbs	Prin	nary Ayurvedic	Pharmacological
	0	Acti	on	Correlation
				(Modern
				Mechanism)
Nasa Yoga	Yashtimadhu (Glycyrrhiza	Snel	nana and Shodhana of	Anti-inflammatory,
Ghrutam (Nasya)	glabra), Go-Ghrita	Urdl	nva Jatru Pradesha,	demulcent, mucosal
		redu	ces Kapha and	healing. Reduces
		lubri	icates nasal mucosa	histamine-mediated
				nasal congestion.
IAFA Nasal All	Jyotishmati (Celastrus		Srotoshodhana and	Anti-allergic,
Clear X Drops	paniculatus), Maricha (Pipe	er	Kapha-Nissarana,	antimicrobial,

	nigrum), Pippali (Piper		clears nasal and	bronchodilatory,
	longum), Haridra (Curcuma		respiratory channels	mucoregulating. It
	longa), Nagarmotha (Cyperus		Tospitutory cruminals	inhibits
	rotundus), Bruhati (Solanum			eosinophilic
	indicum), Sariva (Hemidesmus			inflammation, etc.
	indicus), Til Taila	ilis		inframmation, etc.
Akshi Tarpan	Neem (Azadirachta	Netr	a-tarpana and Rakta-	Anti-inflammatory,
Ghrutam	indica), Punarnava	prasadana. It reduces		anti-histaminic,
	(Boerhaviadiffusa),	ocul	ar Pitta-Kapha	antioxidant and it
	Mulethi (Glycyrrhiza	vitia	tion.	restores tear film
	glabra), Daruharidra			and ocular surface
	(Berberis aristata), Jivanti			integrity.
	(Leptadenia reticulata),			
	Shigru (Moringa oleifera)			
Aahar Amrutham	Choti Dudhi (Euphorbia	Ama	a Pacana,	Hepato-
Ras	thymifolia), Nirgundi	Agn	ideepana,	gastroprotective,
	(Vitex	Srot	oshodhana, stabilizes	antimicrobial, gut
	negundo),Bilva(Aegle	gut-	immune axis	flora modulating,
	marmelos), Phyllanthus			enhances digestive
	niruri, Boerhaviadiffusa			enzymes and bile
				secretion.
IAFA Respiratory	Hingu (Ferulaasafoetida),	Kap	ha-Vata hara, Svasa-	Anti-inflammatory,

Detox Tablet	Surasa (Ocimum sanctum),	Kasa Prashamana,	expectorant,
	Jivanti (<i>Leptadenia</i>	Rasayana	bronchodilator. It
	reticulata), Bhumi Amla		modulates airway
	(Phyllanthus niruri),	. 13"	immune response
	Kanthakari (Solanum		
	xanthocarpum), Agaru,		
	Pushkarmula, Ustakhadus		
Haridrakhandam	Haridra (Curcuma longa),	Rasayana, Kaphahara,	Potent anti-allergic,
	Trivrit, Mustaka, Chitraka,	Vatanulomaka	antioxidant, mast-
	Tvakpatra, Vidanga,	7	cell stabilizer,
	Guduchi, etc.		enhances mucosal
			immunity.
AnthramMithram	Giloy Satva (Tinospora	Deepana, Pachana,	Immunostimulant,
Gulika	cordifolia), Suvarna	Grahani-sthirikarana	anti-inflammatory,
	Parpati, Godanti Bhasma,		gut mucosal repair;
	Shankh Bhasma, Suvarna		improves nutrient
	Parpati, Vijaya Parpati,		absorption
	etc.		
Kutaj Ghanvati	Holarrhenaantidysenterica	Atisarahara, Grahani-	Antimicrobial, anti-
	extract., etc.	sthirikaraka	diarrheal, gut
			barrier protective. It
			balances intestinal

			flora
IAFA Res Chai-7	Tulsi (Ocimum	Vata-Kapha Shamaka,	Respiratory tonic,
	tenuiflorum), Coleus	PraavahaStrotasShodhana,	antioxidant,
	aromaticus, Yashtimadhu,	Rasayana	immunomodulatory,
	Changeri (Oxalis		reduces oxidative
	corniculata), Chamomile		stress and airway
	(Matricaria chamomilla),	, N	inflammation.
	Talisa patra (Abies		
	webbiana), Cinnamomum		
	zeylanicum, Elettaria	7	
	cardamomum, etc.		

4. Integrative Perspective

The steady improvement,i.e. ≥80% symptomatic relief by November 2022 without relapses, corticosteroids, or antihistamines indicates successful immunological reprogramming or deep-rooted treatment rather than mere suppression of symptoms. From an integrative standpoint, the treatment restored homeostasis via multi-level regulation gut-lung axis correction, stress-axis modulation, and mucosal immunity reinforcement.

6. Conclusion

This case shows that Ayurvedic treatment can successfully manage complex conditions 199 like multiple food allergies and nasal hypersensitivity by correcting the root imbalance in 200 digestion, immunity, and metabolism. The gradual, stage-wise approach from 201 detoxification and digestive correction to Rasayana (rejuvenation) helped restore normal 202 tolerance to foods and reduce allergic symptoms without side effects. The coordinated 203 use of classical formulations, diet regulation, and lifestyle correction improved Agni 204 (digestive power), reduced Ama (metabolic toxins), and enhanced VyadhiKshamatva 205 (disease resistance). This outcome highlights that Ayurvedic principles, when applied 206 systematically, can complement modern understanding of gut-immune and mucosal 207 health, offering a safe, holistic path in chronic allergic disorders. 208

209

210

Refrences

- Agnivesha, Charaka, Dridhabala. In: *Charaka Samhita*, ed. Vaidya Jadavaji Trikamji Aacharya, editor. Varanasi: Chaukhamba Sanskrit Sansthan; 2009.
- Sushruta. In: *Sushruta Samhita, Sutra Sthana*, ed. Vaidya Jadavji Trikamji Acharya, editor. Varanasi: Choukhambha Orientalia; 2005.
- Vagbhata. In: *Ashtanga Hrudaya*, 9th ed. Anna Moreshwar Kunte, Krishnashastri Navarre, Harishastri, editors. Varanasi: Choukhambha Orientalia; 2005.

- store.iafaforallergy.com/products/aahara-amrutham-ras?srsltid=AfmBOoqE7 7Uy327HSsRsxfxXFoggwezpePsAUI0Uoq4O6lSry3LN74c
- https://store.iafaforallergy.com/products/respiratory-care-x-drops?variant=40601052774574
- https://store.iafaforallergy.com/collections/chest-nasal allergy/products/haridrakhanda-choorna?variant=40594485510318
- https://www.iafaforallergy.com
- Wang, J. (2010). Management of the Patient with Multiple Food Allergies. Current Allergy and Asthma Reports, 10 (4), 271. https://doi.org/10.1007/s11882-010-0116-0
- Mata S, Rajput S, Tuli IP, Mundada P, Gupta B, Srikanth N, Acharya R. Ayurveda
 Management of Allergic Rhinitis: Protocol for a Randomized Controlled Trial. JMIR
 Res Protoc. 2024 Sep 25; 13: e56063. doi: 10. 2196/56063. PMID: 39321461;
 PMCID: PMC-11464932.
- Warren CM, Aktas ON, Manalo LJ, Bartell TR, Gupta RS. The epidemiology of multifood allergy in the United States: A population-based study. Ann Allergy Asthma Immunol. 2023 May; 130 (5): 637- 648. e5. doi: 10. 1016/ j. anai. 2022. 12. 031. Epub 2022 Dec 31. PMID: 3659- 6337; PMCID: PMC10217773.

- Toche P, Salinas J, Bastías C. 423 Multiple Manifestations of Food Allergy in a Patient with a Change of Eating Habits. World Allergy Organ J. 2012 Feb 17; 5 (Suppl 2): S152. doi: 10. 1097/01. WOX. 0000412186. 25382. 27. PMCID: PMC-3512613.
- Kamdar TA, Peterson S, Lau CH, Saltoun CA, Gupta RS, Bryce PJ. Prevalence and characteristics of adult-onset food allergy. J Allergy Clin Immunol Pract. 2015 Jan-Feb; 3 (1): 114- 5. e1. doi: 10. 1016/ j. jaip. 2014. 07. 007. Epub 2014 Aug 29. PMID: 2557- 7631; PMCID: PMC- 4578642.
- Nur Husna SM, Tan HT, Md Shukri N, Mohd Ashari NS, Wong KK. Allergic Rhinitis: A Clinical and Pathophysiological Overview. Front Med (Lausanne). 2022
 Apr 7; 9: 874114. doi: 10. 3389/ fmed. 2022. 874114. PMID: 35463011; PMCID: PMC9021509.
- Sharma K, Akre S, Chakole S, Wanjari MB. Allergic Rhinitis and Treatment Modalities: A Review of Literature. Cureus. 2022 Aug 28; 14 (8): e28501. doi: 10. 7759/ cureus. 28501. PMID: 36185919; PMCID: PMC9514154.
- Baragi UC, Vyas MK. Evaluation of diet and lifestyle in the etiopathogenesis of UrdhwagaAmlapitta (non-ulcer dyspepsia). Ayu. 2013 Oct; 34 (4): 352- 5. doi: 10.
 4103/0974-8520.127705. PMID: 24695749; PMCID: PMC3968695.

 Payyappallimana U, Venkatasubramanian P. Exploring Ayurvedic Knowledge on Food and Health for Providing Innovative Solutions to Contemporary Healthcare. Front Public Health. 2016 Mar 31; 4: 57. doi: 10. 3389/ fpubh. 2016. 00057. PMID: 27066472; PMCID: PMC 4815005.

• Karthik KP, Dileep A, Rajagopala S, Arun Kumar M, Dharmarajan P, Vellela J. Ayurvedic clinical decision-making methods to predict, prevent and manage childhood allergic disorders. J Ayurveda Integr Med. 2024 Jan- Feb; 15 (1): 100857. doi: 10. 1016/ j. jaim. 2023. 100857. Epub 2024 Jan 18. PMID: 38237455; PMCID: PMC- 10828817.