



MANAGEMENT OF POST COVID ACUTE COUGH THROUGH AYURVEDA: ILLUSTRATING AYURVEDIC TREATMENT PRINCIPLES THROUGH PRACTICE

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ABSTRACT A case of post-Covid Acute Cough that was treated with a variety of allopathic medications over the course of fifteen days but did not react, was treated extremely successfully with a basic ayurvedic cure composed of a common formulation chosen according to ayurveda pathophysiology and management principles. This instance may serve as a wake-up call for concurrent ayurvedic clinical practise, encouraging ayurveda practitioners to keep to their own illness management guidelines in order to achieve better results.

KEYWORDS : Acute cough, Covid , ayurvedic treatment, Kanakasav,

INTRODUCTION

A case of post Covid acute cough is presented here, where none of these recommended treatments offered relief and an initial symptomatic therapy from Ayurveda also could not offer much. Finally a meticulously planned but extremely simple ayurvedic remedy composed of a common Shastroky formulation on the lines of ayurvedic principles of disease diagnosis and management has given complete cure to the patient within a very short time. This case report is presented here with a view that chronic and intractable clinical conditions should be reviewed thoroughly from ayurvedic perspective before arriving at any quick treatment plan. This reviewing at the case and also at the treatment principles may give us a hidden clue which may lead to success as it happened in the present case.

CASE REPORT

A healthy male of approximately 38 year age reported with acute, incapacitating dry cough for over fifteen days. The cough was annoying, recurrent and was too frequent that the patient was not able to complete a sentence without a bout of cough. The patient was working as an executive in a professional organization. He was not substantially exposed to damp, cold, smoke, dust or pollution. His nutritional status was well with approximately 71 kg weight for a height of approximately 5ft 9 inches. He was non smoker and otherwise not addicted to any substance. He was a strict vegetarian. Upon clinical examination, there were no specific chest findings. There were no other associated illnesses. The patient was non hypertensive, non diabetic and was otherwise healthy besides the symptom of cough. It was reported by the patient that he had covid positive and found negative few days before which subsided in few days with symptomatic treatment. He developed cough since then. Much kind of remedies have been tried by the patient to get a cure from cough. This included a course of antibiotics, anti allergic, anti histaminic and antitussive therapy from modern medicine and symptomatic therapy as well. Unfortunately, nothing worked well for the cough. He tried many home remedies like drinking hot water, drinking decoctions of ginger, piper etc., dried peel of orange was also tried as a home remedy on recommendation of some body. For this whole period of approximately two month he consistently avoided cold edibles and drinks at his own in order to get a relief from cough. The cough started in a milder frequency and gradually increased in frequency as well as in intensity. It was dry all the time. Any hot water gargle or anything which would have increased the moistness in throat would have offered the relief but only transiently. Soon the moisture is over; the bout of cough would have recurred. This was highly embarrassing and annoying to the patient as he was not able to perform his duties as an executive. He was not able to speak publically as any effort of speaking would have been interrupted by so many bouts of cough in between. This was causing a social embarrassment also because he was not able to attend public function on account of his symptoms. During the course of his treatment, he was investigated thoroughly for any associated cause of the cough but nothing could be revealed through chest X Ray, routine biochemical and hematological investigations. Initially he was suggested for a course of macrolides for five days along with some antihistaminic syrup. This did not give much relief. Then he was recommended for anti tussive syrup containing codein. This also did not help much.

At this stage of despair, he arrived at Aayu Care Ayurveda and Panchakarma Clinic, Raipur for having a pure ayurvedic consultation. Upon arrival, the patient was taken a detailed history of his illness and also the details of the treatment already taken. He was specially inquired for nature and presentation of his cough episodes which came out to be dry, irritating, frequent and interruptive to speech. There was a dry feeling in the throat which was irritating and for this he felt comfortable drinking something or even ingesting saliva.

His prakriti was found to be vata pitta type with all visible signs of excess pitta like premature graying and falling of hair, increased number of moles and feeling of increased warmth. He was also having dominant symptoms of vata like instability, timidity, quick approval and quick disapproval and disturbed sleep. The symptoms of cough presented in the case were comparable to kaas of ayurveda. As the patient was of vata pitta prakriti, it was a difficult to treat condition as per the ayurvedic principles of prognosis. Upon ayurvedic pathological elaboration, it was considered as a dushti of prana vayu (a derangement of prana vayu) and hence the treatment plan was adopted accordingly. Dryness being the specific property of vata, an opposite treatment was planned with substances containing wet property.

Taking into the account of clinical presentation, the patient was prescribed for Kanakasav alone with Ushna Jala thrice a day.

The treatment was recommended on muhurmuhur (frequently repeated) basis counting for the dushti of prana vayu. The drug was available in a asav form and the patient was advised to keep a Asav of approximate 20ml with equal quantity of Ushna jala. He was recommended to have continued till the complete relief. The cough intensity reduced from the first day of therapy and the symptoms completely relieved in a period of seven day. The patient is completely asymptomatic since than for over 10 days.

DISCUSSION

Ayurveda provides some very special standards of ailment management. Substances with contrary houses are commonly endorsed for the therapy of a specific dosha. Every dosha is determined to have a few special homes (guna). This is often considered in ayurvedic scientific exercise that when a dosha is vitiated, it is viable that all of its composing guna can also no longer be equally vitiated. Therefore, there can be a fractional vitiation of dosha in reference to a unique guna. If this is the case, per chance figuring out the substance which is contrary to the vitiated guna can also be the most terrific treatment. Unfortunately, there are now not so many supplies recognized in the ayurvedic scientific exercise the place the dosha associated guna are honestly identified. Most of the times, the herbs are introduced with a aggregate of gunas. However, basically if a dosha - guna particular remedy may additionally be initiated, this would be surprisingly considerable in many aspects. Firstly, if would provide a motive particular cure besides having a trial and error technique adoption. The cure in such a case can also be extra precise, high quality and predictable due to the fact the dosha guna casing a disorder is at once treated. Secondly, it would additionally be lowering the price of the remedy with the aid of lowering the quantity of medications limiting to the most precise issue of the therapy hitting the cause. This would additionally decrease the wastage of natural assets by way of the

use of them most judiciously for the gain of the patient. Earlier also, this notion of a guna based totally analysis was once proposed through identification of character prakriti in guna viewpoint of a number doshas. It pleaded that a man or woman having a dominance of a specific dosha may also no longer have an absolute dominance of all the guna factors of that dosha and for this reason he can also be susceptible for solely these factor which are in dominance and no longer the others in spite of of them being related with that dosha as well.

The remedy endorsed in this case and the subsequent effects acquired are an eye opener for remedy processes presently practiced in Ayurveda. Here the dosha involved in the disorder was once predominantly vata and the specific guna of vata which used to be concerned in the sickness was once ruksha (dryness). It used to be this dryness of the top respiratory tract which used to be inflicting steady inflammation and initiation for the cough reflex. A moistening of the throat mucosa was once consequently required to decrease the dryness, in order to decrease the infection and in consequence to furnish time for mucosa to heal by using itself. Any substance with water content material would have furnished moisture in that case however as it happens, upon drinking, solely a transient contact of water with oral mucosa occurs as it rapidly passes down. For such aggravating cough, a extended moistening used to be required which used to be no longer viable thru any oral syrup primarily based formulation. Salt has a very exceptional property of water retention. Ayurveda considers lavana (salt) as one rasa which reduces vata on account of its homes being contrary to vata. Now, any guidance which is composed of salt and used in the shape of pellets to be retained in the moth and allowed to be dissolved regularly in saliva with a gradual deglutition may be the most excellent sort of medicine for the unique case. Even a kaval or gandush (oral gargles) composed of saline water may additionally now not be that wonderful in the case due to the fact they do now not reaches to the indoors of pharynx and larynx. Kanakasva had been an perfect compound and was once reachable in the shape of asav. On its oral use, it used to be cautioned to take it with Ushna jala. This way, the asav dissolved in mouth used to be there in extended contact with infected mucosa in order to furnish consistent moisture to it. Components of the Kanakasav had been additionally digestives and appetizers. As a result, they had been capable to enlarge the salivary secretion which was once once more useful in preserving the moisture. The method for timing of the remedy was once muhurmuhur (frequently repeated method). This technique used to be once more capable to provide a regular contact of asav and saliva with the infected mucosa. This resulted in a rapid recuperation of infected mucosa and resulted in rapid correction of dryness. Most interestingly, this remedy for seven days used to be very price advantageous approx solely one fifty to two hundred rupees which used to be considerably minimal evaluating to the fee of administration approached until now for preceding . An commentary of the affected person at some stage in follow-up for about fifteen days with a non recurrence of the signs was once in a position to exhibit that this therapy method used to be capable to damage the pathogenesis and as a result the sickness did no longer recur even after the stopping of the therapy

CONCLUSION

This case of put up Covid acute cough handled via ayurvedic therapy standards demonstrates these concepts in practice. This additionally argues that concurrent ayurvedic scientific exercise wants a revisit in view of current therapy standards of ayurveda. Sometimes an intractable situation stays intractable solely due to the fact both the disorder or the pathogenesis is now not understood nicely or a therapy is no longer as a result planned. This case demonstrates that a thorough appreciation of the pathogenesis and an fantastic remedy graph can also end result in success with a minimal of expenditure and assets as it passed off in this case.

REFERENCES

1. Charaka Samhita, Charak Chandrika , Hindi commentary by Dr Bramhanand Tripathi Chikitsa Sthan Vol-II Chapter 18,Chaukhamba Surbharti Prakasan, Varanashi; 2008.
2. Madhav Nidana Chapter 11
3. Sushruta Samhita, Ayurved Tatva Sandipika Hindi Commentary By Kaviraj Ambika Dutt Shastri Uttar Tantra Chapter 52, Chaukhambha Sanskrit Sansthan, Varanasi, 2010. .