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"AYURVEDIC MANAGEMENT OF TAMAKA SHWASA W.S.R TO BRONCHIAL ASTHMA – CASE STUDY"

Ayurveda

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ABSTRACT

Now a day's human gets inevitably exposed to atmospheric pollution. Air pollutants are invisible and they affect the health. It is a truth that man can live without food and water several minutes but can't survive for more than 5 minutes without air. So, there is much more importance of the purity of air and respiration. Respiration is the process of breathing in and out effortlessly, it can be considered as the sign of life. When once bronchial tree of lungs become swollen, clogged and breathing become frighteningly difficult, that the condition will lead to *Shwasa Roga*. There are five types of *Shwasa* explained in the classics of Ayurveda. *Mahashwasa, Udharvshwasa, Tamakshwasa, Chinnashwasa, Kshudrashwasa. Tamakshwasa* is one of the five types of *Shwasa* this is one of the important disease of *Pranavaha Shrotas*. Breathlessness is the cardinal symptom of this disease. Bronchial Asthma is closely resembles with *Tamak Shwasa* in *Ayurveda.* This is the chronic airway disorder which can affect people of all age groups. Nearly 8 to 10 of the total world population suffers from it. It leads to Recurrent Episodes of Wheezing, Breathlessness, Chest Tightness and Coughing, particularly at night or early morning. Etiological factors like exposure to dust, smoke and wind, residing in a cold place and use of cold water and *Kapha are* aggravating factors. This results the Obstruction produced by *Kapha* in the pathway of *Vata and* causes its abnormal movement in upward direction. This will lead to *Tamak Shwasa*. So, Ayurveda has the privilege of offering the best Treatment for Respiratory Disease like Bronchial Asthma.

KEYWORDS

Tamaka Shwasa, Bronchial Asthma, Ayurvedic Treatment.

INTRODUCTION

Now a day *Shwasa* is the most distressing and chronic illness.it is classified into five types. Namely *Mahashwasa, Urdhvashwasa, Chinnashwasa, Tamakashwasa and Kshudrashwasa*. There are several diseases which can kill a Patient but none of these is as deadly as *Shwasa*, that can kill a patient Instantaneously.[1] Bronchial Asthma is a chronic airway disorder which can affect people of all age groups. Nearly 8% to 10% of the total world population suffers from it. In India, the prevalence of Asthma has been found to be around 2% to 7% in majority of surveys done. It leads to Recurrent Episodes of Wheezing, Breathlessness, Chest tightness and Coughing, particularly at night or early morning.[2] The Triggers Factor are cold air, fog, allergens (e.g., Cigarette smoke, perfume, paints), occupational exposure.[3] Bronchial Asthma closely resembles with *Tamak Shwasa* in *Ayurveda.* TAMAS means "DARKNESS", Darkness in Front of eyes is produced during the attack of this type of *Shwasa.* Hence it is called *TAMAKA SHWASA*.[4] *Tamaka Shwasa* is the disease of *Vata* and *Kapha Pradhana Dosas*. Etiological factor of *Tamaka Shwasa* are exposure to dust, smoke and wind, residing in a cold place, use of cold water, intake of curd and *Kapha* aggravating factors etc.[5] The person affected with *Tamak Swasa* will produce the symptoms like *Ghurghuraka (*wheezing sound), choking feeling in the throat due to which he may feel difficulty to speak freely, He does not get sleep while lying down and may get comfort in sitting posture. Patient feel relief from the symptoms for some time soon after the phlegm comes out, the attack gets aggravated when clouds appear in the sky, exposed to water and cold.[6] in this present study *Ayurvedic* treatment was planned in the management of *Tamaka Shwasa.*

AIM AND OBJECTIVE:

To assess the efficacy of *Ayurvedic* treatment in the management of *Tamaka Shwasa.*

MATERIALS AND METHODS: Place of Study – Govt. Auto. *Dhanwantari Ayurvedic* Hospital Ujjain, M.P.

Case Report

20 years old female patient come at OPD of *Kayachikitsa* department of *Dhanwantari Ayurvedic* Hospital Ujjain belong to Indore on 14/12/2019 with chief complaint of difficulty in breathing, cough with sputum, restlessness, sneezing and common cold. Routine Investigation was being done and she diagnosed with *Tamaka Shwasa* (Bronchial Asthma).

Personal History – Name- xyz, Age/sex- 20y/f, Marital status- unmarried, Occupation- student, *Bala-madhyama*, Sleep- less, Addiction- none, Appetite- less, Dietary habits- spicy food, cold drinks, sometimes taking fast food.

Past History- she was suffering from Bronchial Asthma last 4years. But in 1 month the symptoms got aggravated.

Family History- Maternal history- No history of Bronchial Asthma.

Paternal history- Father has Bronchial Asthma.

History of Present Illness- According to the patient she was suffering from shortness of breath in the last 4 years which is mild in nature and aggravated in rainy and cold weather, after some time patient felt chest tightness, trouble in sleeping (orthopnea), cough with thick sputum, and recurrent attack of sneezing occurs specially in the morning. For above complaints she took Allopathic medicine in the last 4 years but not get relief in symptoms and recurrence the attack of Asthma is persist. For the better management she came to *Kaya Chikitsa* OPD Room No.18 Govt. *Dhanwantari* Ayurvedic Hospital Ujjain M.P.

On General Examination-
Pallor- absent
Icterus- absent
Cyanosis- absent
Clubbing- absent
Lymph node- absent
Oedema- absent
B.P- 110/70
Pulse- 76/min
R.R- 24/min
Temp.- 98.6 F

Systemic Examination-
CVS: S1, S2 heard, no abnormality detected.
Liver, Kidney, Spleen- Not palpable
Digestive System- Appetite- poor, Bowel- clear

Respiratory system
Inspection – Normal Size, Shape and Movement of Chest, Not found any Abnormalities.

Palpation- No any tenderness present, Trachea situated in central, Apex beat also found in normally 5th intercostal space mid clavicular line. Bilateral equal lungs expansion found. Tactile vocal fremitus normal felt.
Auscultation- Bilateral Wheezing sound present in upper and mild lobe of the lungs.
Percussion- Normal resonance sound present except, liver and heart.

Astavidh Pariksa-

Nadi- 76/min Vattkaphaj
Mala- 1 time/day
Mootra- 7-8 time/day
Jihwa- Niram
Drik- Samanya
Shabda – Krichatbhashitum
Akriti – Krash
Sparsh- Kamashitoshma

Samprapti[7]

↓

Vata, kapha prakopak ahara, vihara sevan

↓

Vayu moving in reverse order in pranavaha channels

↓

The head and neck become tight

↓

Excessive secration of mucus cause rhinitis

↓

This Vayu Thus Obstructed by Kapha

↓

Produce wheezing sound

↓

Tamaka Swasa

Samprapti Ghatak[8]**-**
Dosha- kapha, vata
Dushya- pranavayu, ras
Adhisthana- amashaya, pranvahasrotas
Srotas- pranavaha
Srotodushti- sang, vimarggaman
Swabhava- chirakari
Agnidushti- agnimandh
Sadhyaasadhyata- krachsadhya

Chikitsa Siddhanta[9]**-** in *Shwasa rogi* firstly we apply *Til taila* mixed with one pinch of *Sendhav lavana* and a gentle massaged is done followed by *Pottali Sweda.* This process will dissolve the *Kapha* in the channel of circulation. Hence the *Sang* (obstruction*)* in the channel get removed, and *Vatanuloman* occurs.by this patient gets symptomatic relief.

Table 1: Treatment Protocol

Drug	Dose	Anupana
Til tail with *Sendhav Lavana*	10 ml	Applying back region behind chest
Castor oil	20ml	With 100 ml milk, after 3 hr of meal, at night/15 days
Talisadhi Churna *Srngyadi Churna*	3gm 3gm	BD empty stomach with lukewarm water
Kanakasav	20ml	BD mix with 5ml hot water, after meal
Vasavleha	5gm	BD empty stomach

Pathya Apathya
Pathya- Intake of such items as rice, dolichols bean, wheat, barley, heavy food, cold items, goat milk, *Ghrta* of goat, honey, brinjal, garlic, date fruits, hot water.

Apathya- Facing easterly wind, excessive walking, lifting heavy items, facing dust, taking milk and *Ghrta* of sheep, *Urada* beans, eating fishes, vegetable leaves of *kanda*.

RESULT

After three month of *Ayurvedic* Treatment it was observed that patient had relieved in severity of symptoms. Patient gradually recovered with the Treatment, there was significant improvement in symptoms like breathlessness, coughing, wheezing and sneezing.

Investigation- Hb%, TLC, DLC, ESR, AEC, PEFR

Table 2: Investigation before and after treatment

	BT	AT		BT	AT
HB%	11.8	12	DLC-N%	58	56
TLC	6.58	6.52	B%	00	00
ESR	35	20	E%	03	02
AEC	410	360	M%	03	03
PEFR	210	400	L%	38	36

Table 3: Subjective Parameters

Sign and Symptoms		Grade
Shortness of breath	None	00
	Mild	01
	Moderate	02
	Severe	03
Cough with Sputum	No cough	00
	Occasional	01
	4-5 times/ day	02
	Always	03
Restlessness and Sleeplessness	No such feeling	00
	During attack	01
	Very Often	02
	Always	03
Cold & Sneezing	No cold	00
	Sneezing & Cold along with the attack	01
	Very Often, even without attack	02
	Always persisting	03
Wheezing	No wheezing	00
	Wheezing only during attack	01
	Very often wheezing sound	02
	Wheezing throughout the day	03

Table 4: Effect of Treatment on Subjective Parameters

Sign and Symptoms	BT	AT
Shortness of breath	02	01
Cough with sputum	01	00
Restlessness & Sleeplessness	01	00
Cold & Sneezing	02	01
Wheezing	01	00

DISCUSSION

Tamaka Shwasa is predominantly caused by *Pranavaha Shroto Dusthi* and it produced when *Kapha* obstructs the path of *Vata*. So, the vitiated *vata* move in the upward direction. *Tamak Shwasa* is having *Kapha, Vata* predominance. Therefore, it is necessary to use such linctus which can purify *Pranavaha srotos* by liquefying kapha[10] and those diet and drugs which are having *Kapha vataghna*, *Ushna* and *Vatanulomana* properties*. Acharya Charaka* mentioned two types of *Chikitsha* in the management of *Tamak shwasa* i.e., *Shamana* and *Shodhana*.

Shodhana Chikitsha- Acc. To *Acharya Charak Virechan* Therapy should be given, which contains *Vata Kapha Nashak Aushadi*[11]. According to *Acharya Susrutha* Castor oil has *Srotovishodhan* and *Vata Kaphahar properties*.[12] Castor oil can easily remove the obstruction of Kapha in the path of Vata and it is also having *Vatanulomak* property, due to its *Sukshma* and *Srothoshodhana Gunas*. In *Shamana Chikitsha-* Alleviation Therapies for Asthmatic patient are free from any Adverse effects.[13] So we can Administer *Ayurvedic* Preparations like *'Vasavleha'* which is very effective in chronic bronchial Asthma. It subsides the inflammation of Bronchioles and eliminates the accumulated phlegm from Lungs by this it will Strengthen the Lungs.[14] '*Talisadi churna* is beneficial for *Shwasa* and *Kasa.* Its most of the *Dravyas* like *Talispatra, Dalchini, Shunthi*, *Marich, Pipali* etc. are having the property of *Vata Kapha Shamakatva*. *Marich* reduce Inflammation due to an Infection, *Pipali* act on the Immune system to modulate Immunity. In *Srngyadi Churna* most of the contents are having dominance of *Katu Tikta Rasa*, *Tikshna Laghu Guna, Ushna Virya, Madhura Vipaka* and *Vata Kapha Shamak* properties. '*Kanakasav*' is very effective in Asthma, its contents like *Dhatura* reduces the secretion of Phlegm and it act as a Bronchodilator. *Bharangi* is having Antihistaminic and Antiallergic properties so that it is effective against Asthma. All the *yoga's (Aushadhi*) used were having mainly *Vata Kapha Shamak* and *Shwasahara* Action.

CONCLUSION

In India the Prevalence of Bronchial Asthma has been found to be around 2% to7%. All disease is going to kill but not as quickly *as Shwasa. Tamaka Shwasa* is produced when *Kapha* obstructs the path of *Vata.* Here the vitiated *Vata* move in the upward direction. Hence *Vatanulomana* is the prior thing that has to be done in *Tamaka Shwasa.* For that we have to do *Srothoshodhana* to clean the Srothas and remove the obstruction created by *Kapha*. The drugs which are *Vatakaphasamaka* as well as Bronchodilator in nature have to be given to cure the symptoms of *Tamaka Swasa*. By this study we can conclude

that *Tamaka Swasa* can be successfully manage by *Ayurvedic* treatment.

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