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ASSESSMENT OF RISK FACTORS RELATED WITH PRANAVAHA SROTAS IN CHRONIC OBSTRUCTIVE PULMONARY DISEASES

Ayurveda

Dr Vandana A* Associate Professor, Dept Of Roganidana, Ashtamgam Ayurveda Chikitsalayam & Vidyapeedham, Kerala *Corresponding Author

Dr S Gopakumar Professor, Dept Of Roganidana, Govt Ayurveda College, Kannur, Kerala

ABSTRACT

Chronic Obstructive Pulmonary Disease (COPD) includes group of respiratory diseases characterised by airway limitation that is not fully reversible. Its main symptomatology - cough with sputum production and dyspnea are the manifestations of viguna Prana vaha srotas.A vyadhi manifests in a srotas where there is vaigunya. This clearly shows the involvement of the Prana vaha srotas in the pathogenesis of COPD.The incidence of COPD is increasing day by day, owing to the changed life style and increased environmental pollution. This indicates that the hethus causing Pranavaha sroto vaigunya has altered or has increased. So the assessment of risk factors related to Pranavaha srotas in COPD will give a clear idea about the dushti karana of the srotas in the current era.

KEYWORDS

COPD, Prana vaha srotas

INTRODUCTION

COPD is a type of obstructive lung disease which includes Chronic bronchitis, Emphysema and Small air way disease. It is a major health problem in the current world. The main symptoms of COPD include shortness of breath and cough with sputum production. COPD typically worsens over time. Though COPD cannot be associated directly to any single disease mentioned in Ayurvedic texts, it is clear that the manifestations of COPD are the lakshanas of viguna Pranavaha srotas. Prana vaha srotas is most important srotas in the body carrying out the vitalfunction of respiration. COPD has no cure yet. So the importance lies in the prevention of the disease by avoiding the etiological factors. Tobacco smoking is the most important etiological factor of COPD. But the statistics says that only a minority of smokers develop COPD. This implies that there are some associated factors that work along with smoking in the etiopathogenesis of COPD. So it is important to assess these risk factors that are related with Pranavaha srotas which will help in its management and prevention. Pranavaha sroto dushti kaaranaas are kshayam, vega sandharanam, rooksha nidanas,daruna karmas etc.

METHODS

Study design was a hospital based case control study.50 diagnosed cases of COPD and 100 matching controls fulfilling the criteria were selected for the study from IPD&OPD of GAVC Kannur and ACME Pariyaram,Kannur. Clinical proforma was used to assess the risk factors and a scoring system was designed for the assessment of nidanas. The data was analysed using Chi-square test and the significance was drawn accordingly.

RESULTS

Among 50 cases of COPD,30% patients were of Chronic bronchitis predominant type 68% were Emphysema predominant type and 2% had small airway disease. The highest frequency of cases were seen in the age group 61-70 years(48%).

Among the nidanas of Pranavaha srotas-kshayam, vega sandharanam, rooksha aahaara vihaaraas(smoking and exposure to dust) and athyadhwaana were found in COPD patients. Among the vegadharana, kshuth vega dharana is the most important vega seen asa risk factor. Increased affinity to katu rasa was found to be a risk factor.Increased intake of black tea was found to be a risk factor. Among rooksha ahara, dry fish consumption was also found to be as a risk factor. Other nidanas like suppression of hunger, excess physical exertion were found as risk factors which are not explained for COPD.

DISCUSSION

Vata in the prathilomavastha for long duration may become thiryak gata and this account for the vibandha swasa in COPD.When doshas are thiryak sthitha, the patient continues to be afflicted with the disease for along time. It has been stated that thiryaksthitha dosha leads to chira klesatha-ie. long lasting misery– which is evident in COPD patients.

COPD may have multifactorial causes, but all the nidanas are ultimately leading to vata vridhi. Though smoking is the most important risk factor, along with it, associated factors like vyadhikshamatwa, status of Pranavaha srotas and other nidanas may have a role in the causation of COPD. Smoking may act as pradhanika hethu and cause the disease independently.The association of other factors determines the severity and prognosis of the vyadhi. Kshuth vega dharana may lead to rasa kshayam and during the progression of the disease, oja kshayam and bala kshayam may occur. Exposure to dust is found to be a risk factor in the causation of COPD. Inhalation of dust particles may vitiate the pranavaha srotas and urasthitha kapha. Katu rasa pradhana aharas result in vata vridhi which is the main dosha involved in the pathogenesis of COPD. All the risk factors found are mainly vata prakopaka and vata prathilomatha is seen as the main pathological state.

CONCLUSIONS

A significant statistical association has been observed between etiological factors of pranavaha srotas and COPD. So it can be concluded prana vaha sroto dushti karanas have role as risk factors in COPD.

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