

An ayurvedic management of Tamakshwasa with special reference to bronchial asthma: A case study

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Abstract

Bronchial asthma is a chronic inflammatory disease of respiratory tract with airway hyper responsiveness producing symptoms such as wheezing, cough and dyspnea. Exposure to the dust, smoke, respiratory infections, new dietetic preparation, stress and change in climate are some of the causative factors of Bronchial Asthma. In Modern medicine there is no permanent cure for asthma, only symptoms can be. If it is left untreated or not treated in time, it is fatal in nature. Although various studies have been performed across the globe in last few decades and some good drugs are discovered. Due to changes in life style and change in environment, mainly pollution, study shows clear indication that the prevalence of *Shwasa* (Bronchial Asthma) has increased significantly in all age groups. *Tamakshwasa* is of 5 types of *Shwasa*, which is said to be *Kashtasadhya* or *Yapya* by *Madhavanidan*. Presently, nebulization is the fastest way of relieving the symptom of *Shwaskashtata* in Bronchial Asthma, for which bronchodilator and steroidal preparations are widely used. But they have some ill effects when used for prolonged period. A 40-year-old female having increase in symptoms of Shortness of breath, Expiratory wheezes, Chest pressure sensation, Patient had taken allopathic medicine for 1 month, but she had no satisfactory relief. *Shaman* and *Shodhan* as *ApunarbhavChikitsa* is given. Significant improvement observed in subjective and objective parameters.

Keywords: Tamakshwasa; Shaman Chikitsa; Bronchial Asthma; Shwaskashtata; Wheezes

1. Introduction

Tamakshwasais a life-threatening disease, as mentioned by *Charakacharya*¹. He also explained it as *Pranahar*, *Ashukari* and *Ghora vyadhi*². In modern *Tamakshwasa* is correlated with Bronchial Asthma. Bronchial Asthma is mainly a chronic inflammatory disease, affecting the air tubes leading to labored breathing. The main cause of inflammation is chronic irritation due to hyper-reactivity of lung immune system induced by different kinds of external and internal allergens. In *Ayurveda* the vitiated *Vata* reaches head – neck region. It increases the regional *Kapha* and these secretions obstructs the airway passage thereby producing *Ghurgur Shabda* or wheezing sound². In Modern science it is compared with Bronchial Asthma. Bronchial asthma is a chronic inflammatory disease of the airways, characterized by bronchial hyper reactivity and variable degree of airway obstruction³ and manifesting as periodic attacks of coughing, wheezing, breathlessness, and shortness of breath typically occurring at night or in the early morning hours. Prevalence of Bronchial Asthma is increasing alarmingly due to excessive pollution, overcrowding, occupational conditions, stress and poor hygiene etc. These etiological factors act as aggravating factors in developing acute attacks of Asthma mostly in atopic individuals. Therefore, *Nidana Parivarjana*⁴ has got a significant role to play in the management of the disease *Tamakshwasa*. Also, various principles of *Ayurveda* and many a formulations can be used according to *Roga* And *Rogi Bala*, during *Vegavastha*⁵ *Avegavastha* and as per palatability of the patient for free flow of *PranaVayu* so that *Strothorodhan*⁶ is removed and free flow of *Pranavayu* may occur there by curing the attack of disease *Tamakshwasa*. The current management of *Tamakshwasa* by modern medicine is only providing short term symptomatic relief, but

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does not provide the long-term relief to the patient on the other hand prolonged use of these drugs are not safe, as it has many adverse effects of with systemic manifestation and as the chronicity increases drug dose dependency increases and dilated the lung tissues to such an extent that lead to respiratory failure. In such scenario *Ayurveda* is best way to effectively and safely manage the condition without inducing a drug dependency where use of various *Shodhana* ⁷ procedures and use of the internal medication not only detoxifies the body but also provide nutrition and increases the elasticity of lung tissue and develop natural immunity of the body. Thus, decreasing episodes recurrence of the disease and providing long term relief to patient. In *Ayurveda* Bronchial asthma is co-related with *Tamakshwasa*. Here we managed a case of *Tamakshwasa* by *Ayurvedic* management.

2. Case report

A 40-year-old female having increase in symptoms of shortness of breath, Expiratory wheezes, chest pressure sensation. Patient had taken allopathic medicine for 1 month, she had no satisfactory relief . So Patient came to *Kaychikitsa* O.P.D

Table 1 History of past illness

Past medical history	K/C/O HTN since 5 years, Bronchial asthma since 2 years No H/o DM, fall of trauma No any surgical history .
Personal history	Diet : Mixed, No addiction Sleep :Irregular Occupation : housewife
Family history	Not Significant
Drug History	Anti-hypertensive medicines since 5 years Tab deriphylline 150 mg BD since 2 years.

Table 2 On Examination

p	76/Min
BP	130/90 mm of Hg
RS	B/L Wheezes
CVS	S1S2 Normal
SPO2	96% @ R.A

3. Samprpti (pathogenesis)

It is mechanism in which the vitiated *Doshas* proceed to the target site to finally manifest the disease with its symptoms. while considering *Vyadhi Ghataka Ama* is the most factor in the list. This *Ama* nothing but intermediate compound formed inside the *Amashaya*. due to improper digestion of *Rasa Dhatu*. Improper food habit, *Agnimandya* are the precipitating factor for the production of *Ama*. This *Ama* combines with *Vata* vitiated by *Nidan Sevana* and create *Aavarna* in *Strotasa* obstructing *dhatu vahan*. The airway inflammation in asthma may be due to *Sama Vata*, which creates *Shopha* in *Strotasa*. This *Sama Vata* agitates the *Sthanik Kapha dosha* in the *Ras*, so causing *Sang*. Mucus plug causing the obstruction. The *Avarna* of *Kapha* produces which is *Pratyatma Linga* of *Tamakshwasa*.

Table 3 Assessment Criteria

Sr.No.	Assessment Criteria	0	1	2	3
1	<i>Kasa</i> (Cough)	Absent	Morning bouts	Continuous cough	Continuous cough with disturbing activity
2	<i>Pratishaya</i> (Coryza)	Absent	During episodes and subsides after 1-2 days	During episodes and persists for a week	Often, without episode
3	<i>Nidra</i> (Sleep)	Normal	Difficulty in sleep	Disturbed 1-2 times innight	Disturbed frequently
4	<i>Ghurghurka</i> (Audible respiratory sound)	Absent	Feeling to patient only at night	Feeling to patient at day and night.	

Table 4 Treatment plan

Sr no	Drugs	Content	Dose
1	<i>Gokshuradi Guggul</i> ⁸	<i>Gokshur, Guggul, Triphala ,Trikatu, Musta</i>	250 mg BD
2	<i>Shwas Kasa Chintamani</i>	<i>Parad Suvarnamakshik, Suvarna Bhasma, Moti Bhasma, Gandhak, Abhrak, Loha Bhasma</i>	250 mg BD
3	<i>Patoladi Kwath</i> ⁹	<i>Patol ,Yava, Shunthi, Pippali</i>	20 ml BD
4	<i>Madhumalini Vasant</i>	<i>Hingul Priyangu Kachur Safed Marich Dadima</i>	250 mg BD
5	<i>Shwaskuthar Rasa</i>	<i>Parad, Gandhak, Tankan, Vatsanabha, Trikatu, Manashila.</i>	250 mg BD

Table 5 Assessment of Symptoms of Tamakshwas Before and After Treatment

Sr.No.	Lakshana	Before Treatment	After Treatment
1.	<i>Kasa</i> (Cough)	2	0
2.	<i>Pratishaya</i> (Coryza)	1	0
3.	<i>Nidra</i> (Sleep)	3	0
4.	<i>Ghurghurka</i> (Audible respiratory sound)	1	0

4. Result and discussion

Asthma is a well-documented disease in Ayurveda which is comparable with modern disease bronchial asthma on the parameters of risk factors, etiopathology, clinical manifestations and treatment principles. Ayurveda strives for boosting host defence mechanism by employing Panchkarma, life style modifications including Yoga and Rasayan medicines. The treatment was administered in accordance with *Shodhan chikitsa shaman Aushadhis* and *SthanicChikitsa*. *Nidan Parivarjana* is strictly instructed in order to avoid stimulation to internal pathology of the disease. The classical management helps and relieving the symptoms as well as lower the recurrence of breathing difficulty attacks. Regular counselling and practice of pranayama boosting and refreshing mind. this Ayurvedic management helps and achieving the positive output with complete stoppage of use of inhaler. Charaka advised *Sanshodhana Chikitsa* in Tamakshwas

specifically *Virechan Karma* (purgation therapy). Here Patient Bal was Alpa hence we 1st started Shaman Chikitsa followed by *Shodhan Chikitsa*. *Gokshuradi guggul* acts as Pramehghna, and specifically increases Bal and Mansa. *Madhumalini Vasant* act as Balya, Rasayan, Rakt, Mansa, *Asthi Balvardhak*. *Patoladi Kwath* is having Vatanulomak¹⁰ and Kaphaghna¹¹, Kapha Vilayana¹² effect, so useful in Shwasa, Kasa, Shool The effects of these herbs and Herbo-minerals drugs are to liquefy the thick bronchial secretion and help in cough expectoration. They are *Vatta*, *Pitta* and *Kapha* pacifying properties and are used in Kasa and Tamakashwasa. The sum total properties of herbal and herbo-minerals are Tikta Katu Rasa, light and penetrating properties, Ushnavirya (hot potency) and decrease *Vata* and *Kapha Dosha*. The Gunas of the drug are Laghu, Tikshna which are antagonistic to the Gunas of whereas that of *Vata* is Sheeta Guna (cold in character). All the drugs have the quality to normalize or suppress the vitiated *Vata dosha* by *Ushna Virya* (hot potency). *Agni Mandya* (diminished digestion power) is corrected by *Pippali*. *Strotas* vitiated are Pranavahasrotas, which are corrected all the drugs as they, Reduce Expiratory dyspnea and decrease cough. *Strotodushti* (The mechanism of manifestation of diseases) is *Sanga* (occlusion), which relieved *Kapha Dosha*, there by normalizing *Kapha Dosha*. The *Virya* (potency) of this drug is Ushna (hot), by the *Ushna* (hot) properties of the drug and *Shwasahara* properties. They help in Reducing inflammation of the bronchioles. These drugs also useful in recurrent rhinitis, chronic cough and reducing the cough and relieving chest pain. The benefits of these herbs and Herbo-minerals drugs are highly praised in Ayurvedic classical and Rasashatra looks for conditions like breathlessness, cough and cold.

5. Conclusion

This case report gives effective and safe treatment for “*Tamakashwasa*” with the help of clinical principles of *Ayurveda*. *Ayurvedic* medicine specially *Rasaushadhi* with non-pharmacological therapy like diet, lifestyle, *Yoga* are also highly effective in Bronchial Asthma and are having no or very little complication. If complication may arise then they can be treating safely and successfully in comparisons to modern science.

Compliance with ethical standards

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Disclosure of conflict of interest

This work is not published anywhere. The authors declare no conflict of interest.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study

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