



MANAGEMENT OF CHRONIC ASTHMA(TAMAKA SHAWASA)WITH THE HELP OF INDIGENOUS HERBAL COMPOUND DRUGS AND LIFESTYLE MODIFICATIONS :A CASE STUDY

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ABSTRACT Due to the devastating and terrible era of air pollution, respiratory diseases started appearing quite commonly. The diseases of respiratory system is fatal. Asthma is one of the chronic inflammatory respiratory illnesses throughout the world and is characterised by breathlessness, chest tightness, wheeze and cough. It occurs as a result of hypersensitivity reaction mainly due to allergens. Asthma is the most commonly encountered disease among respiratory problems in recent years. In allopathic science, various treatment modalities are already there. With the advancement in diagnostic technologies, drug sector, treatment methodologies, it can't control the mortality & morbidity related to the chronic forms of diseases. So in order to delay its progression, Ayurvedic drugs can be the potential and effective alternative for the treatment against the bronchial asthma. The present case study is about 38 yr female patient having complain of intermittent chest pain, coughing with purulent sputum for 3 months. She has also repeated attacks of breathlessness for 3 years. She was assessed under subjective and objective parameters setup by considering the symptoms of patient. Its management was opted through Ayurvedic approach which includes Shodhan chikitsa, shaman chikitsa and life style modifications with Yogic practice. Good symptomatic relief have been drawn by following the Treatment protocol in this case study.

KEYWORDS : Tamaka shwasa, Bronchial Asthma, Virechana, Som Churna, Shwaskasachintamani Rasa

Introduction

Deadly gases from industries, toxic fumes from rising vehicles and uncontrolled pollution have raised the prevalence of respiratory illness. In Respiratory diseases Asthma is the most encountered diseases in health centres in recent decades. Globally asthma is ranked 16th among the leading causes of years lived with disability and 28th among the leading causes of burden of disease¹. The recent global burden of disease (1990-2019) estimated the total burden of asthma in India as 34.3 million, accounting for 13.09% of the global burden². Asthma is a disease of airway inflammation and variable airflow obstruction characterised by intermittent symptoms including wheezing, chest tightness, shortness of breath (dyspnea), and cough, together with demonstrable bronchial hyper responsiveness³. It is of two types; first one is atopic and another is non atopic. There is a wide range of inter individual variations in triggers. These can be irritating gases, cold air, various allergens, various drugs etc. In *Ayurveda*, bronchial Asthma is well correlated as *Tamaka Shwasa* on the basis of symptoms. It comes under the *pranavaha srotas vyadhi*. Respiratory diseases occurs due to increase in kasa⁴ (coughing). The *Samprapiti* (pathogenesis) of *Tamaka Shwasa* involves the abnormal interactions of *vata* and *kapha*. The movement of *vata* is disturbed by the abnormally by *kapha*, *vata* begins to move in all directions. This disturbs the *Srotas* (Channels) of *prana* (Respiration), *Anna* (food) and *udaka* (water) located in the chest and produces *Shwasa*. According to Acharya Charak, it is *Yappa vyadhi*. According to modern, many treatment modalities and pharmacological strategies are there for symptomatic relief but it can't check the mortality and morbidity related to chronic forms of chronic Asthma. Ayurvedic treatment principles can be used as a potential and effective alternative with least or nil side effects.

Case Report

A 36 years female patient named Sanju Devi with Regn no 2884 and Cr.No.A13482 came to OPD of *kayachikitsa department, Govt Ayurved College, Patna* with chief complaint of intermittent chest pain and cough with purulent sputum through out the day for past 3 months. She has also repeated attacks of difficulty in breathing for 3 years. She took primary treatment from local health centres and got symptomatically relief but after few days, the symptoms got relapsed. She has no history of any tuberculosis, DM2, Thyroid, HTN. She has no family history regarding respiratory illness. On auscultation of lungs; B/l wheezing were there through out the lung.

General examination

Table no :-01

Entities	Findings
Appetite	Low
Bowel	Not clear
Blood pressure	110/80 mmHg
Respiratory rate	22/min
Temperature	98
Pallor	Mild
Icterus	Absent
Lymphadenopathy	Not palpable

Dashvidha pareeksha

Table no :-02

Prakriti	Vatapittaja
Vikruti	Vatakaphaja
Saar	Twaka Saar
Samhanan	Pravar
Pramana	Madhyam
Satamya	Madhyam
Satva	Madhyam
Aahar pareeksha	Madhyam
Vyayam pareeksha	Madhyam
Vyay pareeksha	Madhyam

Systemic Examination

Table no :-03

Cardiovascular system	Respiratory system	Gastrointestinal system	Nervous system
NAD	B/l wheezing through out the lung	On P/A abdomen soft and non tender.	NAD

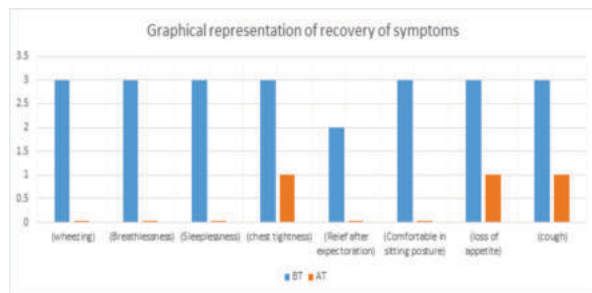
Materials and Methods

Sources of data :- Patient having symptoms of Tamaka Shwasa is selected from the OPD of kayachikitsa department, Govt Ayurved College, Patna with OPD registration no 2884.

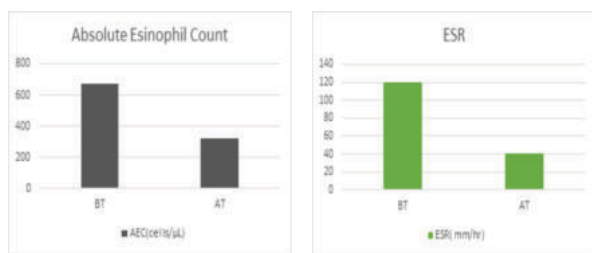
Study design :- Single case study.

Consent was obtained from patient prior to the treatment. Patient was assessed on subjective and objective parameters before treatment and on every follow up.

ailments for its general tonic, anti periodic, antispasmodic, antiinflammatory, antiarthritic, antiallergic and anti diabetic properties. It is extensively used in *Ayurveda* due to its potential in improving the immune system and the body resistance against infections. ⁸,*Shwas kasa Chintamani Ras*⁹ balances *vata* and *kapha* ;indicated in the diseases of *pranavaha srotas*.*Tab Bresol* is an ayurvedic poly herbal drug which contains *Tulsi* (Holy Basil),posses antihistaminic properties,which protects against pollen induced bronchospasms. *Vasa*(Malabar nut) is widely used as mucolytic ,dilutes mucus sputum and alleviates cough.Turmeric (*Haridra*)contains curcumin a chemical constituent which blocks NF kappa ,a protein that is linked to allergy and asthma¹⁰ .*Dashamool kashayam*¹¹ pacifies mainly *vata* dosha and also normalises *kapha* dosha functions . Cap stresscom contains *Ashwagandha* as a main ingredient which enhances the body's resilience to stress.*Ashwagandha* improves the body's defence against disease by improving the cell mediated Immunity¹².It also possess potent antioxidant properties hence protects the cellular damage by free radicals.*Vyagrahi haritki*¹³ ,*Shwas kuthar rasa*¹⁴,*Kankasava*¹⁵ are taken from *Bhaisajya Ratnavali* .*Kantkari* decoction ;*Kantkari* (*Solanum xanthocarpum*) contains glucoalkaloids,solanocarpine,solanine-s ,solasodine,solasonine solamargine and sterols and is reported to have significant late suppression of induced immunological oedema,indicating suppression of cell mediated immunity¹⁶ . It act as bronchodilator thus relives in SOB.Abide to internal medications making some changes in life style like early rising ,some yogic practices like *pranayam* ,*Anulom -vilom* , *ushnaambu pan* ,*laghu Annasevan* , Avoiding *Divaswaap* and *Ratrijagrana* ,miraculously has played an important role in reducing the symptoms.Yoga is said to reduce the stress level and improve efficiency of lungs by strengthening it.Overall the patients health quality has improved significantly.



Graph :-01



Graph :-02

Graph :-03



Graph :-04

Graph :-05

CONCLUSIONS

The diagnosis of disease was done on the basis of symptoms patient was complaining which reflects the Lakshanas as stated by Acharya Charak. mentions tamke tu Virechanam as the line of treatment in Tamaka Shwasa 14 . In this case study ,Virechana along with samshaman aushadhis with some life style modifications gives a significant result in Tamaka shwasa .Thus ,the classical approach of Ayurveda in the treatment of Tamaka Shwasa gave impressive results.

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Conflicts of interest

There are no conflicts of interest

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