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A Conceptual Study On Shatyadichurna In The Management Of Tamakshwasa

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Abstract

The prevalence of Bronchial Asthma has increased over time and is increasing rapidly due to increasing environmental pollution produced by vehicles and industries. There are numbers of drugs in modern medicine to control the episode of attack symptomatically but still are unable to cure the Asthma and moreover they have many adverse effects. Ayurveda has described Tamak Shwasa which closely resembles with Bronchial Asthma and has described variety of herbal formulations to treat Tamak Shwasa without any adverse effect. The principle of Tamak Shwasa is based on Vata-Kaphahara treatment. Shatyadi Churna mentioned by Acharya Charaka for Shwasa Chikitsa, is adopted for the treatment of BronchialAsthma.

Key words: Asthma, Bronchial Asthma, Tamak Shwasa, Shwasa, Shatyadi Churna

Introduction

The Disease emerges from highly complex interaction between factors intrinsic to the patient and environment. In today's environment there is so much pollution, which cannot be avoided because it is mostly produced by vehicles and industries. This environmental interaction is leading to many respiratory disorders among which one of the major distressing disease is Asthma which has been described in Ayurveda as Shwasa.

According to Ayurveda vitiated Pranavayu combines with deranged Kaphadosha in Strotas causing obstruction. This result gasping, labored breathing and respiratory distress. This condition is called as Shwasroga¹.

Tamak Shwasa is mentioned as one among five types of Shwasa. Acharyas stated that, Tamak Shwasa is Sadhya in the initial phase, and becomes Yapya in chronic condition or if not treated in earlycondition.

Bronchial Asthma mentioned in modern medicine closely resembles with Tamak Shwasa, is a major chronic airway disorder. It is characterized by inflammation of the airways, breathlessness, bronchoconstriction, wheezing, difficulty in expectoration and feeling little comfort in erect posture etc.

Need of study

- The global prevalence of Asthma is anticipated to be approximately 4.5 percent. There are about 334 million patients with Asthma affecting all age groups, across the world.India has an estimated 15-20 millionasthmatics.
- The prevalence of Asthma has increased over time and an additional 100 million people worldwide will be expected to develop Asthma by the year 2025.

In contemporary medical science, management of Bronchial Asthma is carried out with usage of bronchodilator, leukotriene antagonist, mast cell stabilizers and corticosteroids. Long lasting usage produces adverseeffects and also reduces the effectiveness of therapy. So by this, contemporary medical science can only control the episode of attack.

 Ayurvedahasdescribedsomanyherbalformulation stotreat Tamak Shwasa effectively without any adverseeffect.

Aim

• To evaluate the efficacy of Shatyadi Churna in the management of Tamak Shwasa.

Disease Review

Etymology

Tamak Shwasa consists of two words viz. Tamak and Shwasa.

Tamak means Tamyati Tama – feeling of darkness **Shwasa** means Inhalation and exhalation of air is Shwasa.(HemaChandra)

VOL- VI ISSUE-IX SEPTEMBER 2019 PEER REVIEW IMPACT FACTOR ISSN e-JOURNAL 5.707 2349-638x

The Word Shwasa is used for both physiological and pathological states. Shwasa word is used to denote respiration and exchange of air in the body, physiologically. While pathologically Shwasa Roga may be defined simply as a disease in which the respiration and the exchange of air is disturbed.

In the Ayurvedic literature, Shwasa is classified into five major types. Out of these five; Maha Shwasa, Urdhva Shwasa and Chhinna Shwasa are described as Asadhya. Fourth type, Kshudra Shwasa is Sadhya which can be corrected even without medication. The remaining type 'Tamak Shwasa' is Sadhya initially and Yapya in chroniccondition.

Causative Factors

The Nidana are mainly of two types.

1. **The Bahya Nidana** (Extrinsic factors) are Aagantuja Nidana that cause irritation in the body e.g. Raja, Dhuma etc. These are the environmental factors responsible for causation of the disease.

The Abhyantara Nidana or Nija Hetus are the intrinsic factors within the body. These are called the host factors. These can be taken also as Pradhana Karana like Doshas. In Tamak Shwasa, Kapha and Vata are the mainDoshas. Etiological factors also have been divided according to Ahara, Vihara and Nidanarthakara Roga.

Aharaj

Vataprakopaka: Ruksana (fat free diet), Visamasana (irregular diet), Sitasana (cold food), Visha Sevana (toxins), Sita Ambu (cold water), Vistambhi Bhojan (slowly digested food), etc.

Kaphaprakopaka: Masa (black gram), Nispava (beans), Pinyaka (tila paste), Pistabhojan (paste preparation), Jalajamansa (aquatic fish), Guru Bhojan (heavy diet), Ama Kshira (unboiled milk), Dadhi (curd), Anupa Pisita, Tila Taila (sesame oil), Abhisyandi Anna, Slesmala Dravyaetc.

Viharaj: Raja (Dust), Dhuma (Smoke), Vata (wind), SitaSthana Sevana (to reside in cold place), Vyayama (exercise), Gramyadharma Sevana (over indulgence

in sex), Atyapatarpana (malnutrition), Marmaghata (trauma over vital organ), Suddhi Atiyoga (excessive purification), etc.

Nidanarthakara Roga: Apatarpana (under nutrition), Amapradosa (mal digestion), Anaha (distension of abdomen), Dhatuksaya (emaciation), Pratisyaya (coryza), Chardi (vomiting), Jwara (fever), Atisara (Diarrhoea), Pandu Roga (anaemia), Daurbalya (weakness) etc diseases may cause the TamakShwasa.

Purvarupa (Premonitory symptoms)

- In Ayurvedic texts, Purvarupa of Tamak Shwasa are not described separately so the Purvarupa of the Shwasa Roga may be considered as the Purvarupa of TamakShwasa.
- These Purvarupa are HridayaPeeda, Parsva Shula, Anaha and PranaVilomatva.

Rupa (Symptoms)

Some of the important symptoms which are very useful in the diagnosis are AtivaTivravegaShwasa, Ghurghurukam, Kasa, Asinolabhate Saukhyam, Muhurmuhur Shwasa, Lalate Swidyata, Meghambu Sheeta Pragvate Vridhi, Uddhavansate Kantha, Kruchchhat Shaknoti Bhashitum etc.

Samprapti (Pathogenesis)

- When "PranaVayu" is not performing its normal physiological functions (vitiated) and becomes defiles (Viguna), obstructed by Kapha and moves in opposite direction (Pratiloma Gati) i.e. upward and unable to perform normalfunctions this conditionis known as Shwasa Roga.
- It is rendered to explain that the paroxysmal attacks of dyspnoea is due to the spasm in the bronchi or swelling of the mucous membrane, both factors may be partly responsible to predispose Bronchial Asthma. Hence there is a great parlance of pathogenesis between ancient and modern concepts. Here the vitiated Pranvayu produces bronchospasm and the vitiated Kapha makes to swelling of the mucous membrane and excessive secretion of mucous, which takes place in Pranvaha Strotas.

| Name of drug | Botanical name | Part used | Part |
|-------------------------|------------------|-----------|---------------|
| Shati | Curcuma | Moola | 1 part |
| | zedoaria | | |
| Chorak | Angelica glauca | Pushpa | 1 part |
| Jeevanti | Leptadenia | Panchanga | 1 part |
| | reticulate | | |
| Tvak | Cinnamimum | Tvaka | 1 part |
| | zeylanicum | | |
| Musta | Cyperus rotundus | Moola | 1 part |
| Pushkarmool | Inula racemosa | Moola | 1 part |
| Surasa | Ocimum sanctum | Patra | 1 part |
| (Tulasi) | | | |
| Tamalaki | Phyllanthus | Panchanga | 1 part |
| | niruri | Polipina | |
| Ela | Eletteria | Bija | 1 part |
| | cardamomum | | |
| Pippli / | Piper longum | Phala | 1 part |
| Agaru | Aquilaria | Kashtha | 1 part |
| | agallocha | | |
| Nagar / A | Zinziber | Kanda | 1 part |
| | officinale | | 9 |
| Balak | Pavoni aodorata | Moola | 1 part |
| Shark <mark>a</mark> ra | | | 13*8=104 part |

Shatyadi Churna Yo<mark>g</mark>a Treatment In Ayurveda

Chikitsa Sutra: The medicaments, food and drinks which control both Kapha and Vata, having Ushna Virya property and are specially Vatanulomana should be given to Shwasa roga patients.

The predominate Doshas of Tamak Shwasa are Vata-Kapha. The Vata and Kapha are contrary to each other. In the management of Tamak Shwasa it customary to note when Vata is obstructed by Kapha, by increasing Vata automatically Kapha will subside and that allows Vata to move freely in its course. On the other hand, when Vata is aggravated severely and Kapha is in its Linavastha then the treatment to increase Kapha will automatically correct the vitiated Vata by its antagonistic property. Hence it is better to adopt Vata-Kaphaharatreatment.

Discussion

The prevalence of Asthma is increasing day by day due to urbanization, industrialization, air pollution etc. Most of the air pollutants are invisible and they affect the health. ¹⁶ As the Tamak Shwasa is Vata and Kapha dominant disease ¹², it should be treated with the Dravyas with opposite Guna and

Karma. Most of the ingredients of Shatyadi Churna possess Katu, Tikta, and Kashay Rasa; Laghu and Teekshna Guna; Ushna Virya; Deepan-Pachana Karma and Vata-Kaphaghnaeffect.

Mode of action of Shatyadi Churna

Doshghnata: Most of the drugs of Shatyadi Churna Yoga are Vata-Kapha Shamaka. Effect on Strotas: The Shatyadi Churna have a positive effect on involved Pranavaha strotas as it is the recommended in the disease of Pranavaha strotas Shwasa.

By Rasa: Most of the drugs of this Yoga dominated by Katu, Tikta and Kashaya Rasa. Sharkara which is used in this yoga is eight times. So this yoga has Kaphashamak property by Katu-Tikta Rasa and Vatashamak property by Madhur Rasa.

By Guna: Laghu and Tikshna Guna of most of the drugs, decrease the excess of Kapha.

ByVirya:UshnaViryaofthemajorityofthedru gshasa positive effect on vitiated Kapha andVata.

By Karma: With Deepan-Pachana Karma of drugs, correct Agni and removes the Ama. These

VOL- VI ISSUE-IX SEPTEMBER 2019 PEER REVIEW IMPACT FACTOR ISSN e-JOURNAL 5.707 2349-638x

eventually lead to Amapachan and Agnisandhukshan function.

This way, Shatyadi Churna will help to breakdown the Samparpti of Tamak Shwasa.

Conclusion

It is concluded that the disease Bronchial Asthma can be correlated with Tamak Shwasa. Therefore Shatyadi Churna with Katu and Tikta Rasa, Dipana, Pachana, Ushna, and Teekshna Guna, Ushna Virya along with Vata-Kaphagna effect has enough potency to disintegrate the etiopathogenesis of Tamak Shwasa (Bronchial Asthma)

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