

CRITICAL REVIEW ON PRANVAHA STROTAS DUSHTI LAXANAS**Dr. Hemant Sheshrao Narwade*¹, Dr. Sapna Raoji Singhade² and Dr. Utsav jiwan shende³**Associate Professor¹, Assistant Professor², BAMS MPH³
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ABSTRACT

Srotas are channels which transport different bhavapadartha through body. Pranvaha srotas is one of the important physiological unit of the body which can be correlated with respiratory system. Pranvaha srotas dushti can occur due to various reasons, amongst those, strotansi Anyaishch Darunai is important. Acharya charaka had described 'Pranvaha srotas dushti laxanas' in 'Viman Sthana' Chapter. The laxanas so mentioned reflects various types of respiratory arrhythmias. Acharya charaka had also described clinical syndrome of five types of respiratory arrhythmias viz. Mahashwas, Urdhwa shwas, Chinna Shwas, Tamak Shwas, Kshudrashwas. Pranvaha srotodushti occurs when other srotas has severe dushti.

KEYWORDS: Pranvaha srotodushti, Dyspnoea, shwas.**INTRODUCTION**

As the lungs are in direct contact with external environment through respiration, the various environmental pollutants, droplet infections and allergens are affecting the lungs in various ways increasing the morbidity and mortality due to lung diseases. Breathlessness is the primary feature in many of these lung conditions. As per Ayurveda, breathlessness manifests in peculiar ways. On the basis of change of respiratory rhythm, Ayurveda classified the breathing pattern into five types viz. Mahashwas, urdhwas, china shwas, Tamak shwas and kshudrashwas. The changes in respiratory rhythm have also been mentioned in 'Pranvaha Strotas dushti laxanas'.

MATERIAL AND METHOD**Symptoms of Pranvaha Strotas Vitiation**Ati Srushtam Ati Baddham Kupitam Alapa Alpam
Abhikshanam Wa Sashabdham Uchhawasantam Drushtwa
Pranwahanasya Strotansi Pradushtani Eti Vidyat.^[1]

- ✓ Ati Srushtam/ Deergham [Prolonged respiration]
- ✓ Ati Baddha Shwasan [Obstructed breathing]
- ✓ Kupitam [Abnormal respiration]
- ✓ Alapa Alpam [Shallow respiration]
- ✓ Abhikshanam [Frequent respiration]
- ✓ Sashabdham Shwasan [Noisy breathing]

1. Ati Srushtam/ Deergham [Prolonged respiration]
It could be either prolonged inspiration or expiration.

Causes of deep inspiration

Maha shwas, Majjagat jwara, Gambhir jwara, Hepatic coma, Uremia, Aspirin poisoning, Upper respiratory tract obstruction, Anxiety, Hysteria, Laryngeal diphtheria, cerebral space occupying lesions.

Causes of deep expiration

Urdhwa-shwas, Asadhya Rajyakshma, Tamak shwas, chronic Bronchitis, Emphysema.

2. Ati Baddha shwasan [Obstructed breathing/
Breathlessness]

Causes:

Bronchial Asthma, Chronic bronchitis, Tuberculosis, Pneumonia, Pleural effusion, pulmonary edema, pulmonary embolism, Lung abscess, Lung fibrosis, Hydro-pneumothorax, Congestive cardiac failure

Respiratory disease can cause breathlessness within minutes to hours or slowly over days, weeks or months as follows:

- a) Sudden Breathlessness
Pneumothorax, pulmonary Embolism, Inhaled foreign body
- b) Intermittent Breathlessness
Pulmonary edema, Asthama
- c) Breathlessness over few hours
Pulmonary edema, Asthama, Pneumonia, Extrinsic Allergic Alveolitis
- d) Breathlessness over few Days or weeks:
Pleural Effusion, Heart failure, pneumonia, ARDS

E) Breathlessness over Months

Chronic Bronchitis, Lung fibrosis, Hyperthyroidism, Anemia, Emphysema

F) Breathlessness over years

Muscular weakness, COPD, Pulmonary Carcinoma

Current gradation of breathlessness

Grade 1 – No breathlessness

Grade 2 - Breathlessness on severe exertion

Grade 3- Breathlessness on mild exertion

Grade 4- Breathlessness at rest

Relation of breathlessness at rest

Increased breathlessness in lying down position is generally observed in dyspnea of cardiac origin whereas increased breathlessness in sitting position is generally observed in dyspnoea of respiratory origin except for bronchial asthma.

3. Kupitam [Abnormal Respiration]

Causes:

1. Mahashwas [Kussmaul type respiration]
2. Majjagat jwara [cerebrospinal fever]
3. Gambhir jwara [Fatal fever]
4. Chinna shwasa [Chyene strokes respiration]
5. Tamak shwasa [Bronchial Asthma]
6. Urdhwa Shwasa [Labrous Breathing]

4. Alapa Alpam [Shallow respiration]

a) Muhurmuhu Alpakalam [Rapid and Shallow]

Causes: Tamak shwas, pneumonia, Pleurisy, Central brainstem dysfunction

b) Alpashwasanam Alpakalam [Slow and shallow]

Causes: Chinnashwas, peritonitis, painful conditions of chest and lungs

c) Alpa shwas prashwas [Bradyapnoea]

Causes: Vataj Madatyay, Vataj Apasmar, Narcotic Poisoning, Brain tumours, peritonitis

d) Abhikshanam/ Varamvaram [Frequent respiration]

Causes

Tamak shwas, Gambhir jwara, Kshataj kasa, Rajyakshma, Pandu Samanya laxan, Hridrog samany laxan, Swaraghna, Asadhya Atisar, Raktapitap Upadrava, Vataj prameha upadrava, Urdhwashwas, Aayas udbhawaha, Exceitment, Pneumonias, Anoxemia and Acidosis.

e) Sashabda Shwasan [Noisy breathing]

Causes

- ✓ Tamak shwas (Asthma)
- ✓ Kshataj kasa [Bronchitis]
- ✓ Apatantrak [Hysteria]
- ✓ Mahashwas [kussnaul's respiration]
- ✓ Nasal obstruction [Sniffing sound]
- ✓ Soft Palate paralysis [Snoring sound]
- ✓ Laryngeal obstruction [Inspiratory Stridor]
- ✓ Tracheal Obstruction [Rattling noise]
- ✓ Bronchial obstruction [Wheezing]

Ayurvedokta Respiratory Arrhythmias

1. Mahashwas (kussmaul's type breathlessness)

Quick and deep sighing breaths with altered consciousness and is fatal.^[2]

Causes: Majjagat jwara [Encephalitic fever]^[3] Hepatic coma, Diabetic ketoacidotic coma, Uremic coma, Brain coma.

2. Urdhwahshwas [Laborous / stertorous type breathlessness]

It is characterized by prolonged expiration due to air flow limitation with pallor and altered consciousness.^[4]

Causes: Rajyakshma Asadhya Laxanas,^[5] lung fibrosis, CA Lungs, Severe Anaemia, Bronchiactasis, pneumonic consolidation.

3. Chhina shwasa (cheyne stroke type breathing)

It is characterized by rhythmical alteration of apnea and hyperapnea due to anoxemia. Associated with abdominal distension, sweating and altered consciousness.^[6]

Chhinashwasa resembles chyene strokes and biot's type respiration.

Causes: Hriday marmachhed ruk,^[7] shir marmachhed ruk, Basti marmachhed ruk, heart failure, brain respiratory centre depression.

4. Tamak shwas (Asthmatic Breathlessness):^[8]

Characterized by rapid respiration with audible wheez and frequent coughing. Patient feel better in sitting position and in hot environment.

Precipitating causes

1. Sheet pan (consumption of cold drinks)
2. Sheet sthan (cold environment)
3. Abhishyandi bhojanahi (consumption of mucoid food stuff like curd)
4. Rajo Dhoom Nasadi praweshanat (Dust inhalation)
5. Megha – Ambu vivardhate (cloudy and rainy environment)
6. Shleshmalaihi vivardhate (Consumption of kapha aggravating food stuff)
7. Prak vataihi vivardhate (early morning wind)^[9]

5. Kshudra shwasa [Exertional Breathlessness]

Commonly noticed breathlessness precipitated by heavy exertion.

DISCUSSION AND CONCLUSION

Acharya charaka had mentioned that 'Urdhwa-shwas' can occur in incurable stage of 'Rajyakshma' Acharya sushruta had mentioned that 'Mahashwas' can occur in 'Majjagat jwara'. Acharya chakrapani refers majja to tha Mastulunga. As per the Shrikantha dutta, the 'Marmachhed Ruk' pain refers to the 'Hriday Chhed Eva Vedana' which is nothing but the anginal pain of myocardial infarction which may lead to heart failure

giving rise to 'Chhina –Shwasa'. 'Shiro Chhed Eva Vedana' may indicate towards terminal medullary failiure which in turn may give rise to Chhina-shwasa. The syndrome of 'Tamak shwasa' is the most obvious and commonly found respiratory arrhythmia.

REFERENCES

1. Charak samhita viman sthana, chapter 5, verse 8-22, vidyotini Hindi Commentary by K.N.Shastrri and G.N.Chaturvedi, 16th edi, Chaukhambha Bharti Academy, 1989.
2. Shukla V, editor, charak, samhita chikitsasthan, 17/46-48, Delhi, choukhamba Sanskrit pratishthan, Reprint, 2002.
3. Murthy KR, editor. Madhav Nidana, Amlapitta Nidana 2/53. Varanasi, India: Chaukhamba Orientalia, 1986.
4. Shukla V, editor, charak, samhita chikitsasthan, 17/49-51, Delhi, choukhamba Sanskrit pratishthan, Reprint, 2002.
5. Murthy KR, editor. Madhav Nidana, Amlapitta Nidana 10/12 Varanasi, India: Chaukhamba Orientalia, 1986.
6. Shukla V, editor, charak, samhita chikitsasthan, 17/52-54, Delhi, choukhamba Sanskrit pratishthan, Reprint, 2002
7. Murthy KR, editor. Madhav Nidana, Amlapitta Nidana 12/24-26. Varanasi, India: Chaukhamba Orientalia, 1986.
8. Shukla V, editor, charak, samhita chikitsasthan, 17/56-62, Delhi, choukhamba Sanskrit pratishthan, Reprint, 2002.
9. Shukla V, editor, charak, samhita chikitsasthan, 17/62, Delhi, choukhamba Sanskrit pratishthan, Reprint, 2002.