

**ROLE OF PATHYA-APATHYA IN THE MANAGEMENT OF TAMKA SHWASA W.S.R
to C.O.P.D.****Vd. Harshad Uttamrao Kandalkar*¹, Vd. Ratna A. Gadgil², Vd. Vinodini Payghan³, Vd. Sneha Tiwari⁴ and
Vd. Suryakant Dwivedi⁵**¹Assistant Professor Samhita Department Shri Gurudev Ayurved College Mozari.²Associate Professor Roga Nidan Department B.M.A.C Ayurved College Nagpur.³Assistant Professor Roga Nidan Department B.M.A.C Ayurved College Nagpur.⁴Associate Professor Kayachikitsa Department Shri K.R Pandav Ayurved College Nagpur.⁵Associate Professor Stri Prasuti Department OM Ayurved College Betul.***Corresponding Author: Vd Harshad Uttamrao Kandalkar**

Assistant Professor Samhita Department Shri Gurudev Ayurved College Mozari.

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ABSTRACT

In Ayurvedic texts Shwasa Roga has been described having symptomatology close to COPD. Chronic Obstructive Pulmonary Disease. COPD damages the airways in lungs and leads to shortness of breath, impacting patient's work, exercise, sleep and other everyday activities. More than 11 million people in the U.S. suffer from COPD and its prevalence has been increasing steadily over the past 20 years. It causes serious long-term disability and early death. COPD includes both chronic bronchitis and emphysema. Risk factor includes exposure to air pollution, second-hand smoke and occupational dusts and chemicals, smoking, cold weather etc. which are also mentioned in Ayurvedic classics. Identification, reduction and control of risk factors to prevent the onset of COPD are important steps towards developing strategies for prevention of COPD. The aims and objectives of Ayurveda are to maintain the health of a healthy person and to cure the diseases of the patients. It signifies that "prevention is better than cure." To maintain the health, Ayurveda laid many basic principles like Ritucharya (seasonal regime), Dincharya (diurnal regime) etc. The Yogic procedures and the concept of Pathya (wholesome) and Apathya (unwholesome) is the peculiarity of Ayurveda for the management of COPD and the treatment module includes- Panchakarma (Vamana, Virechana, Dhmapana and Nasya), external therapies (Lepas, Dhara, Sthanika Abhayanga and Swedana) and internal medications are very effective in COPD.

KEYWORDS: COPD, Panchakarma, Pathya, Apathya.**INTRODUCTION**

Chronic Obstructive Pulmonary Disease (COPD) is 4th leading cause of death and its prevalence is increasing steadily due to lifestyle changes and unhealthy habits. COPD includes Chronic Bronchitis and Emphysema, it is 2nd most common lung disorder after Pulmonary TB. According to Ayurveda, clinical features of COPD can be correlated with disorders of Pranava Strotas dusti and occurs usually in prolonged conditions of Tamak Shwasa. Etiological factors include smoking, cold weather, dust, air pollution, chemicals etc which are also mentioned in Tamak Shwasa hetu-"Rajasa Dhoomvatabhyam Shitathanambusevanam Rukshanna Vishamashana". Identification, Treatment, Prevention and Control of COPD are important steps to be taken along with lifestyle modifications which are well

Aetiopathology

The main risk factors for COPD are tobacco smoking but other environmental exposures such as biomass fuel

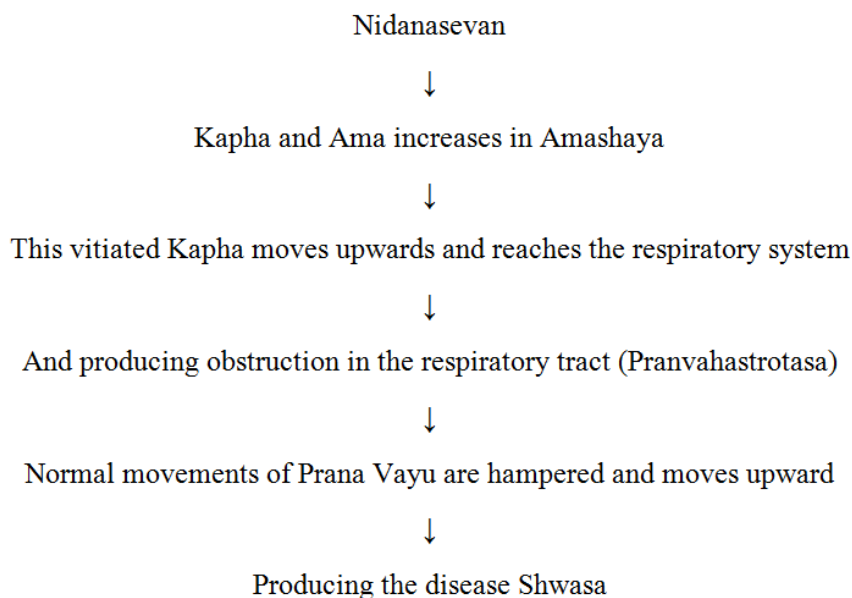
exposure and air pollution may contribute. Besides exposures, host factors predispose individuals to develop COPD. These include genetic abnormalities, abnormal lung development and accelerated aging. Smoking has traditionally been known to be the most important cause for COPD amounting to almost 85% of the COPD cases, the rest being classified as non-smoking COPD (in developed countries). In the developing countries, the most important risk factor for COPD could be indoor-air pollution arising from the use of biomass fuel, such as wood, cow dung and crop residues leads to release of air pollutants like SO₂, CO, NO₂, formaldehyde and particulate matters smaller than 10 micron in size in the ambient indoor air. Chronic exposure to these pollutants has been shown.

Nidan

In COPD, inhalation of toxic substances- particularly inhalation of tobacco smoke etc. causes inflammation of lung tissue. The inflammation results into tissue damage;

if the normal protective and/ or repair mechanisms are overwhelmed or defective. The results of the lung tissue damage are mucus hyper secretion, airway narrowing and fibrosis, destruction of the parenchyma and vascular changes. These pathological changes lead to airflow limitation and the other physiological abnormalities

resulting into clinical features of COPD.^[3,4,17] In classics also pathogenesis of Pranavaha Srotodusti described in regards of Kasa and Shvasa resembles the above mention description and can be summarized as.^[7,17]



Diagnosis

COPD should be considered in any patient who has dyspnea, chronic cough or sputum production, and /or a history of exposure to risk factors for the disease. Spirometry is required to make the diagnosis; the presence of a postbronchodilator FEV1/FVC <0.70 confirms the presence of persistent airflow limitation. The degree of airflow obstruction is an important prognosis factor in COPD and is the basis for the Global Initiative for Lung Disease (GOLD) severity classification.

Pharmacotherapy: for COPD is used to reduce symptoms, reduce the frequency and severity of exacerbations, and improve exercise tolerance and health status. The classes of medications commonly used to treat COPD are Bronchodilators, Antimuscarinic drugs, Methylxanthines, Combination bronchodilator therapy, Anti-inflammatory agents, Inhaled corticosteroids, Oral glucocorticoids, PDE4 inhibitors, Antibiotics, Mucolytics/ antioxidants etc. Other treatments are Pulmonary rehabilitation, Oxygen therapy, Ventilatory support, Lung volume reduction surgery, Bullectomy, Lung transplantation, Bronchoscopic interventions.^[5,8]

Pathya-Apathya and Yogic procedures

Medications alone won't be enough, however, to completely control COPD symptoms. Effective COPD treatment is required to take several lung healthy steps. Most importantly you must stop smoking if you currently smoke, because smoking is the single greatest cause of COPD and other respiratory problems. Life style changes

can help people with COPD reduce their risk of getting infections. This is very important because infections are the most common cause of acute exacerbations, which are also called COPD flare-ups. Flare-ups happen when COPD symptoms suddenly get much worse, and cannot be relieved with the patient's regular medications or other therapies. During a pulmonary rehabilitation program, patients learn about several kinds of lifestyle changes that can help them to avoid infections and flare-ups. Some of these changes include quitting smoking, avoiding allergens and irritants, vaccinations, practicing good hygiene.^[1] Allergens and irritants are tiny particles in the air, and breathing them in can make COPD symptoms worse and increase the risk of flare-ups. Common allergens include pollen, dust and dust mites, pet dander, and mold etc. Not every COPD patient will be sensitive to allergens or to every type of allergen. But for those who are sensitive to certain allergens, being exposed to them can worsen COPD symptoms. Common irritants like dirty or wet rugs/ carpets can gather dust, dirt and mold, tobacco smoke, pesticides, chemicals in strong cleaning products, paint fumes, Air pollution outdoors, Burning fuel indoors (such as coal, wood, oil, gas or kerosene), asbestos, radon and carbon monoxide, Strongly scented soaps or fragrances. There are many steps that COPD patients can take to reduce the amount of allergens and irritants that they breathe in the home, the workplace and outdoors. This can help them control their symptoms and improve their quality of life. For people with COPD, respiratory infections such as the flu and pneumonia can be dangerous. These kinds of infections can cause severe COPD flare-ups and may

even be life-threatening. For this reason patients with COPD should get vaccinations for the flu and pneumonia. Vaccines are a safe and effective way for COPD patients to strongly reduce their risk of getting these illnesses. Practicing good hygiene is a simple but effective way for COPD patients to reduce their risk of getting infections. During a pulmonary rehabilitation program, patients learn about good hygiene practices.^[13] The management strategy for COPD should be predominantly based on the individualized assessment of symptoms and future risk of exacerbations. All individuals who smoke should be strongly encouraged and supported to quit. The main treatment goals are reduction of symptoms and future risk of exacerbations. Management strategies are not limited to pharmacological treatments, and should be complemented by appropriate non pharmacological interventions.

Yoga procedures in the management of COPD.^[11,14,18,20]

Yoga is an excellent form of exercise for anyone with COPD. Yoga practice is made up of two essential parts, physical postures, known as Asanas, and breathing techniques, known as Pranayamas. Meditation and relaxation are also key parts of regular Yoga practice. Breathing techniques: Pranayama breathing techniques can help to manage symptoms of breathlessness by strengthening the respiratory muscles. Relaxation techniques: Yoga encourages deep relaxation through breathing and meditation techniques. This helps to relieve stress and tension.

Yoga Asanas for COPD: (1) standing mountain pose: This straightforward pose requires standing tall to open up the chest. (2) Standing back bend: This pose also helps to open up the muscles of chest. (3) Seated forward bends: These poses help strengthen the respiratory system. (4) Standing side bends: These bends will help strengthen the diaphragm while also improving the flexibility of rib cage. There are many more Asanas that can be modified to help build strength and flexibility, specifically to help in COPD. The Yoga Breathing like Pursed-lip breathing and Diaphragm breathing are two techniques that have roots in Yoga. They are often taught to people with COPD as part of their pulmonary rehabilitation program. Yoga is generally safe, but be sure to take precautions as to avoid certain poses, keep inhalers nearby, stop if have short of breath.

DISCUSSION

COPD may be punctuated by periods of acute worsening of respiratory symptoms, called exacerbations. In most patients, COPD is associated with significant concomitant chronic diseases, which increase its morbidity. Worldwide, the most commonly encountered risk factor for COPD is tobacco smoking. COPD is the result of a complex interplay of long-term cumulative exposure to noxious gases and particles. Faulty diet and life style patterns form the basis of any disease, so

identification, reduction and control of etiological factors of COPD mentioned in classical and modern literature include diet articles, food habits and life style errors, can play a major role in the prevention or progression of COPD. As per Ayurveda for the prevention or management of any disease, there are three broad steps described as Nidanaparivarjana which includes life style modifications and diet pattern, Shamana (pacification treatment) and Shodhana (biopurifactory methods). Considering this the management of COPD can be summarized as.

1. Avoidance of etiological factors: which means best way to stay healthy is to follow all such regimen which is suitable to one and avoid to factors which disturbs homeostasis.

2. Modification of life style which helps to reduce symptoms and improve quality of life like exercising regularly, taking fresh warm diet which is low in saturated fat but rich in fruits, vegetables and whole grain foods and maintaining a normal weight, to be in well ventilated hygienic environment. Waking up early in the at regular time and taking glass of warm water early morning empty stomach and avoiding Irregular and untimely eating of food may help to prevent from COPD.

3. Similarly due to importance diet articles may be done: Use of Katu, Lavana, Ushna, Snigdha, Laghuahara, vegetables including gourd, bottle gourd, Spinach, Methi, garlic, ginger, Karvelaka, Patola, Shigru etc. however, excessive use of tomato, cauliflower, potatoes, preparation of rice flour, sweets, curd, whole milk, black gram, coconut oil, fermented and sour food articles and cold drinks, refrigerated food articles etc. Shall be avoided in the daily diet.

4. Yogasana and Pranayama: Ayurveda understands the role of Pranayama regards to Prana, Tejas, and Ojas and their corresponding effects on the mind, relaxation along with conscious breathing of almost any type improves the functioning of the respiratory system. Yogic practices rehabilitate varies vital organs and make them functionally more competent. Bhujangasana, Savasana, Shalabhasana, Paschimotasana is useful Asana for Pranava Srotasaas it accelerates the blood circulation of the lungs and thus increase the vital capacity of lung.

CONCLUSION

Healthy life style has great role in prevention of diseases and Lifestyle modification (PathyaApathya) has been proved to be successful treatment in various diseases. COPD being a chronic progressive disease with irreversible changes needs early diagnosis and proper management. An extra care of diet, diet pattern modification and life style modification (Patha-Apathya) with Yogic procedures play major role in the prevention and progression of COPD. The Global Initiative for Chronic Obstructive Lung Disease (GOLD) guidelines emphasize that smoking cessation is, "the single most effective and cost-effective way to reduce exposure to COPD risk factors."

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