

A REVIEW ARTICLE ON TAMAKA SWASA (BRONCHIAL ASTHMA)

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ABSTRACT

Our ancient acharyas have recommended the thorough structural scientific knowledge of the life. The knowledge of Rachana Sharir is necessary for the students of any system of medicine. Acharya Sushruta is called to be the father of surgery, as in Sushrut Samhita, description is available regarding methodology for learning of anatomy, dissection on cadaver, *dhamani*, *sira*, *marma* etc. He has given more emphasis on the practical knowledge. Sushrut Samhita is the bestone for study of rachana sharir. In Sushrut Samhita we get distinguish description among *sira*, *dhamani*, *srotas* We get detail description of *sira* in Sushrut Samhita Sharirasthan adhyay seven. But regarding *sira* there is scattered dicription. In one place *sira* means blood vessels while in one place *sira* means nerve. so it becomes very difficult to know clear meaning like modern anatomy. so my aim for this literature review article is to study and correlate the tem *sira*. According to sharir rachana vityan the circulation of *rasa-rakta* in the body depends upon *sira*, *dhamani* and *lasika*. While vatavaha *sira* carry *vayu* i.e. nerve. We can correlate them with the help of modern anatomy and should understand the text and its importance so we can study the structure and function of *siras* by correlating our ayurvedic text and modern text. In conclusion we can say that *sira* which flow from origin can be called as artery, *sira* flow towards origin can be called as vein, *sira* which join artery with vein can be called as capillary, *sira* carrying lymph(*rasa*) can be called as lymph vessels, *sira* (*vatavaha*) carrying *vayu* can be called as nerve.

KEYWORDS: *Sira*, *Dhosha*, *Dhamani*, *Lasika*, *nerve*.**INTRODUCTION**

Asthma a disease that increasing massively in India due to pollution. Asthma is a disease of Airways that is characterized by hyper responsiveness of the Tracheobronchial tree to a variety of stimuli resulting in widespread Spasmodic Narrowing of the airway. Asthma is an episodic disease manifested clinically by paroxysms of dyspnoea, chest tightness with wheezing sound and coughing particularly at night or early morning. Asthma is associated with mast cells, eosinophils and T-Lymphocytes. And According to Ayurveda "Tamaka Swasa." There are five classes of Swasa: Kshudra, Tamaka, Chhinna, Maha and Urdhava. Tamaka Swasa is a type of Swasa Roga affecting the Pranavaha Srotas and characterized by prolonged expiration, wheeze, dyspnoea of exceedingly deep velocity, which is immensely injurious to life. Vata moving in the reverse order pervades the channels (of vital breath), afflicts the neck and head, and stimulates Kapha (phlegm) to cause Margavarodha (blockage of respiratory passage) by producing broncho constriction. Tamaka Swasa classified as Vata Pradhana and Kapha Pradhana. Signs and symptoms of Tamaka Swasa are very much similar

to that of bronchial asthma. Partamaka Shwas & Satamaka Swasa are the two types of Tamaka Swasa.

AIMS AND OBJECTIVE

To highlight the key messages that is common to many of the existing guidelines. Critically reviewing and commenting on any differences, and to assess the effectiveness of internal i.e. herbal and herbo-minerals drugs (*Shamana Chikista*) and procedure based *Panchakarma* therapy (*Shodhana Chikista*) for the treatment of *Tamaka-Swasa*.

MATERIALS AND METHODS

This review was done by compiling the classical Ayurvedic literature, modern literature, Pharmacology (*Dravyaguna*) and *Rasashastra* books, magazines and research journals as well as Pubmed, medicine database. Based on the collected information, logical interpretation done to review efficacy and mode of action of *Vamana*, *Virechana*, herbal and herbo-minerals drug in the management of *Tamaka swasa*.

Epidemiology

Prevalence of asthma varies considerably within countries & between countries. It is more prevalent in developed countries than developing ones, more in children 15% than adults 10% to 12% more in urban than rural areas, reasons of which are not fully understood. Nearly 8% to 10% of the total population suffers from it. In India, the prevalence of asthma has been found to be around 7% in the majority of surveys done. However, it has been reported to vary from 2% to 17% in different study populations, the disease can start at any age, but in a majority it starts before 10 years of age. It is twice as common among boys as girls, whereas in adults the male to female ratio is usually equal.

Tamaka Swasa

Tamak swasa is a Pitasathanasamudhawa.

It is two types –

1. Partamak Swasa.
2. Santamak Swasa.

Etiological factor in Tamak Swasa

1. *Vidahi Guru And Vishtmbhi Ahar*
2. *Ruksha and Shit Ahar- Vihar*
3. *Atimargagman*
4. *Ativayayama And Atimehun*
5. *Visamahar*
6. *Pragvat and Varsha-Shishir Ritu*

Signs and Symptoms

- 1) Patients develops special liking for hot things;
- 2) Dyspnoea of exceedingly deep velocity which is immensely injurious to life.
- 3) Too much of sweating appears in his forehead and he becomes restless;
- 4) Patient throats is choked because of which he is unable to speak freely
- 5) The attack gets aggravated when clouds appear in the sky, when he is exposed to water (Humidity), and cold when the easterly wind blows, and when he resorts to Kaphaaggravating food and regimens.
- 6) The patient is relieved (of restlessness) for some time soon after the phlegm comes out;
- 7) The patients faints again and again while coughing;
- 8) The patient does not get sleep While lying down (for sleep) he gets (more of) dyspnea because the side of chest in that position get afflicted by Vayu. But he is relieved of this discomfort in sitting posture
- 9) Ghurghuraka (wheezing or murmuring sound).
- 10) The patient eye-balls become prominent (project outside)
- 11) Because of acute spasms, the patient gets tremors and coughs, and becomes motionless.
- 12) The patients' mouth becomes dry frequently;
- 13) The patients get frequent paroxysms of dyspnoea.
- 14) Since the phlegm does not come out, he becomes more restless.

Samprapti chakara

- *Nidan Sewan*

- *Kafaadhikya*
- *Kafa margaavarodha*
- *Vataparkop*
- *Vata Vimaargagman*
- *Tamak Swasa.*

Management of Tamaka Swasa-

1. *Nidan Privarjanm*
2. *Shaman chikitsa*
3. *Shodhan chikitsa*
4. *Pathya and Apathya*
5. *Pranayam and Yogasan*

Again management is classified into Vegakalina (During the asthmatic attack) and Avegakalina (In the absence of attack), Vegakalina Chikitsa to removes the block due to obstruction of Kapha Dosha and relieves the spasmodic constriction in bronchial lumen to maintain the respiration and to stable the patient vitally.

Avegakalina Chikitsa to prevent recurrent episodes and improvement in body strength, immunity and quality of life i.e. Rasayana

Principles of treatment

The physician should treat the patient afflicted Asthma in the beginning, with unctuous fomentation therapies. Like Nadi - Sveda, Prastara- Sveda and Sankara - Sveda after anointing the body with oil (unctuous substance) mixed with rock salt. The fomentation therapy renders the adhered Kapha dissolved in the channel of circulation and softened there by. These therapies also cause downward movement of Vayu (Vatanulomana). The stable Kapha in the body get dissolved on account of the heat generated by these formation therapies.

Shodhana Chikitsa

According to Charaka Shodhana chikitsa is Vamana and Virechana. If Swasa patients complain with Kasa and Swarabheda then manage with Vamana and Vata-kaphanashaka medicine along with Virechana used in Tamaka swasa.

Vegakalina Chikitsa

The disease Tamaka Swasa needs immediate management in the Vegakalina-avastha like Sadhyo-Vamana, Abhyanga, Swedana and Dhoomapana or Shamana Aushadhi. It should aim at both preventive and curative aspect.

1. Abhyanga- Til oil and Lavan on chest region.
2. Swedana – Nadi, Prastara, Sankara.
3. Sadhyo-Vamana- Salt water, sugarcane juice, decoction of Yastimadhu. Dhoomapana - Ardraka Arka.
4. Muhurmuhar Prayoga of Pushkarmulasava.
5. Nebulization by 'Amritdhara'-A mixture of Menthol, Thymol and Camphor used as an aerosol.
6. Shamana Aushadhi- herbal and herbo-minerals compounds.

Rasayana Chikista

Rasayana Chikista: Increase in the strength of Pranavaha Strotas following medication should be used.

- 1) Chyavanprashsa-It alleviates cough, asthma, and bronchospasm of seasonal and non- seasonal origin, smooth functioning of the tracheobronchial tree, maintain the adequate hydration of respiratory system, increasing the strength of respiratory system.
- 2) Vardhaman Pippali-Gives strength to the Pranavahasrotas. Used in Vata type asthma, chronic cough and bronchitis.
- 3) Chausashta Prahari Pippali- Improves lung health. It helps in detoxifying lung.

Intervention / Approaches in Tamaka Swasa

Asthmatic patients complain various sign and symptoms, following special treatment shall be use.

1. In case of excessive cough and breathlessness: Kantakari Kwatha- 30 ml thrice a day either alone or with honey
2. In case of excessive cough with fever patients of bronchial asthma:
 1. Shrisha Twakkwatha- 30 ml thrice a day for 6 weeks.
 2. Naradiya Laxmivilasa Rasa 500mg and Godanti Bhasma 1 gm TDS for 6 weeks
 3. Swasa -Kesari Tablet (Kantakari+Godanti Bhasma) - 1.5 gm for 6 weeks.
4. In case chronic asthma associated with severe breathlessness, chest congestion and cough not responding to conservative treatment.
 1. Pippli Vardhamana Ksheerapaka with 250 mg Samira Pannaga Rasa thrice in daily for 6 weeks.
 2. Shodhana Chikista: Snehana, Swedana, Vamana, Virechana.

Herbal drugs and Herbo-minerals compound

Herbal and Herbo-minerals are used in Tamaka Swasa because of their very good properties. This drug pacifies all the signs symptoms of asthma.

Compound formulation

Many compound formulation are used in Tamaka Swasa, they relieve the signs and symptoms and improve the quality of life. Some of them are-

1. Puskaramuladi Churna
2. Vasa Avaleha
3. Vasa Haritaki Avaleha
4. Bharngyadi Avaleha
5. Kanakasava
6. Swasa-kasa-chintamani Rasa
7. Mahalaxmivilasa Rasa
8. swasa-kuthara Rasa
9. LavanagadiVati
10. Abhraka Bhasma
11. Godanti Bhasma
12. Samirapannaga Rasa
13. Padmapatradi yoga

Lifestyle, Breathing Exercises and Meditation

Staying awake at night, exercising, labour, exposing oneself to the heat of the sun or fire, and anxieties, grief, wrath, and everything that disturbs peace of mind should be healthy lifestyle would have a preventive role. Breathing exercises, particularly Pranayama, reduce the frequency and severity of symptoms, improve exercise tolerance, and enhance lung function. Meditation helps in reducing the stress and may check recurrence. *Sahaja* yoga is an Indian system of meditation based on traditional yogic principles, which may be used for therapeutic purposes. Clinical trials of this therapy in patients with asthma have found evidence of improvement in lung function and reduced frequency of exacerbations.

Pathya: (Wholesome diet and lifestyle)

- 1) Ahara: Laghu and Ushna diet, Red rice(un polished) Mudga, Kulatha, Wheat, Barley, Dates fruit, Cardamom, Goat milk, Honey, Patol, Garlic, Jambira lemon, Matulungalemon, Hot water.
- 2) Vihara: Swedana, Hot water bath, *Atapa* sevana, Lavana, Taila Abhyanga, Pranayama, Warm clothes in winter season.

Apathya: (Unwholesome diet and lifestyle)

- 1) Ahara: Over eating and taking milk at bed time. Fried, too cold, sour, heavy preparations. Fishes, Sheep milk. Sour food, Leaves of mustard, Amla *Phala* [Citrus fruits], Deep fried items such as Samosa, Sheeta-paneeya [cool drinks], Dadhi, Aamaksheera, Bread, Burger, Pizza, Cheese, Paneer etc. is used which are having Srotorodhaka property.
- 2) Vihara: Vegadharana, Facing dust/wind/hot sun, hard exercise, Smoke, Pets, Pollen *Sheeta*, *Ruksha* [Air-Conditioner], cold and damp places. Fasting for a longer period, Seating in frosty, smoky and congested places for a longer period etc. are to be avoided.

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. Vamana liquefied the thicksticky bronchial secretion and help in expectoration (Removal of Sama Kapha Dosha); while Virechana help to remove aggravating factors (Sama Dosha and allergens, toxins). Vamana and Virechana are very good effective management for the Tamaka-swasa Vyadhi and relieve the signs and symptoms of Tamaka-swasa. The effects of these herbs and Hebo-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 Tamaka-Swasa. 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 dosa by ushna virya (hot potency). Agni mandya (diminished digestion power) is corrected by pippali. Srotas vitiated are pranavahasrotas, which are corrected all the drugs as they, Reduce Expiratory dyspnea and decrease cough. Srotodusti (The mechanism of manifestation of diseases) is sanna (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 Swasahara properties. They help in Reducing inflammation of the bronchioles. There durgs 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 books for conditions like breathlessness, cough and cold, which act by making the secretion thin and helps in expectoration, reduce the inflammation of the respiratory system, signs and symptoms of Tamaka-Swasa. All herbal drugs and herbomineral compound having anti-inflammatory and immunomodulator properties. These properties of drugs help in inflammation in bronchial lumen, increase strength of respiratory system. Herb and Herbo-minerals compound pacifies Dushita Vata, Pitta and Kapha Dosha and control asthmatic problems and improves immunity. Healthy lifestyle, breathing exercise like Yoga, pranayama, and meditation is play important role to reduce symptoms and improve the lung function.

CONCLUSION

The trials concluded that Shodhana, Shamana, herbal and herbo-minerals products are important in the treatment of asthma. Shodhana therapy is effective in adult patient but no more evidence regarding in case of adult has been prove, so further research is needed. Drugs doses are adjusted for adult according to weight, age and severity of disease. Herbal and Herbo-minerals products remain popular for asthma. An update of the current evidence is described. trials was.