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SURVEY ON ASTHMA AND ITS PREVENTION AND TREATMENT BY YOGA THERAPY

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ABSTRACT

The objective of the present study is to locate the severity of Asthma in remote area and nearby regions and its treatment buy yoga therapy. Asthma is the commonest chronic disease in children in economically developed countries & is also common in adults. It is increasing prevalence and severity. It is a inflammatory condition in which there is recurrent reversible airways obstruction in response to irritant stimuli that are too weak to affect non-asthmatic subject. The obstruction usually causes wheeze and merits drug treatment, although the natural history of asthma includes spontaneous remissions. Reversibility of airways obstruction in asthma contrasts with Chronic Ophthalmic Pulmonary Disorder. The present study is based on survey,

regarding asthma, counseling questions were asked to different peoples of Boradi regions the data was collected as per regions and age wise Asthma was found to be highest in villages Kodid 9% and samryapada7% regionwise and 16% people affected at age of 30-40 based on data we treat those people by Yoga therapy by using different pranayamas and the successful results were obtained.

KEYWORDS: Asthma Yoga therapy.

INTRODUCTION

Asthma (AZ-ma) is a chronic (long-term) lung disease that inflames and narrows the airways. Asthma causes recurring periods of wheezing (a whistling sound when you breathe), chest tightness, shortness of breath, and coughing. The coughing often occurs at night or early in the morning. Asthma affects people of all ages, but it most often starts in childhood. People who have asthma have inflamed airways. This makes the airways swollen and very sensitive.

They tend to react strongly to certain substances that are breathed in. When the airways react, the muscles around them tighten.^[1] Signs of an asthmatic episode include wheezing, prolonged expiration, a rapid heart rate, and rhonchus lung sounds. During a serious asthma attack, the accessory muscles of respiration may be used, shown as in-drawing of tissues between the ribs and above the sternum and clavicles, and there may be the presence of a paradoxical pulse (a pulse that is weaker during inhalation and stronger during exhalation), and over-inflation of the chest. Though symptoms may be very severe during an acute exacerbation, between attacks a patient may show few or even no signs of the disease.^[2]

Epidemiology of Asthma

The prevalence of childhood asthma has increased since 1980, especially in younger children. Tracking the epidemiology of asthma is confounded by changes in how asthma has been described and defined over the decades. Most epidemiological studies use questionnaires, self-reports of asthma symptoms, and reports of physician diagnosis of asthma. The International Study of Asthma and Allergies in Childhood (ISAAC), a monumental study which involved 155 centers in 56 countries was one of the first to reliably compare the prevalence of asthma worldwide. Surveying nearly half a million children 13–14 years of age, this study found great disparities in asthma prevalence across the world, with a trend toward more developed and westernized countries having higher asthma prevalence. [3] Rote westernization however does not explain the entire difference in asthma prevalence between countries, and the disparities may also be affected by differences in genetic, social and environmental risk factors. Striking increases in asthma prevalence have been observed in populations migrating from a rural environment to an urban one, or from a third-world country to westernized one. [4] The key to understanding why your doctor prescribes certain medications or asks you to do certain things related to asthma is to understand a little about asthma pathophysiology. Asthma pathophysiology can be thought of as the study of the changes like inflammation and bronchoconstriction that occur in the lungs related to asthma.^[5]

MATERIALS AND METHOD

The survey on an Asthma disease was done region wise and age wise. At last data was obtained and information being collected from the survey. The following are the questionnaire were asked to the patients and their canseling were conducted.

Counseling questions

A. More about yourself

- 1. May I know your good name, please?
- 2. Sex
- a) Male
- b) Female
- 3. How old are you Years?

B. Wheeze and tightness in the chest

4. Have you, at any time in the last 12 months, had wheezing or whistling in your chest?

C. Shortness of breath

- 5. Have you, at any time in the last 12 months, had an attack of shortness of breath that came on during the day when you were not doing anything strenuous?
- 6. Have you, at any time in the last 12 months, been woken at night by an attack of shortness of breath?

D. Cough and Phlegm from the chest

- 7. Have you, at any time in the last 12 month, been woken at night by an attack of coughing?
- 8. Do you usually cough first thing in the morning?
- 9. Do you usually bring up phlegm from your chest first thing in the morning?
- 10. Do you have phlegm like this most mornings for as much as 3 months per year

E. Breathing

11. Which of the following statements best check only one?		
I never or only rarely get trouble with my breathing []		
I get repeated trouble with my breathing but it always gets completely better	[]
my breathing is never quite right []		

F. Animals, dust, feathers

- 12. When you are in a dusty part of the house or with animals (for example, dogs, cats or horses) or near feathers (including pillows and quilts) do you ever:
- **a**. Get a feeling of tightness in your chest?
- **b.** Start to feel short of breath? (No) (Yes)

G. Asthma

13. Have you ever had asthma?

- 14. Are you currently taking any medicines (including inhalers, aerosols or tablets) for asthma?
- 15. In the past four weeks, did you feel that your asthma was well controlled?

H. Smoking

- 16. Have you ever smoked for as long as one year?
- 17. Do (did) you usually smoke: Check ones?
- [] Pipe?
- [] Cigars?
- Other (precise please).
- 18. How many cigarettes do (did) you smoke each day, on average?
- 19. For how many years have you smoked (did you smoke).

The statistical data was collected from Boradi area Taluka shirpur Dist Dhule, Maharashtra and The common causes of Asthma were found to be allergies, smoking, cough, stress, environmental factors and liver damage. From the data, it was estimated that the Yoga Therapy having the prime role in redusing the Asthma disease.

RESULT AND DISCUSSION

Table 1: Regions wise of Peoples.

Villages	Normal	Affected	Total
Nandarde	11	5	16
Kodid	14	9	23
Samryapada	16	7	23
Dhabadevi	8	1	9
Boradi.	4	2	6
New boradi	6	2	8
Other	13	4	17

The surveyed in various states like **Nandarde**, **Kodid**, **Samryapada**, **Dhabadevi Boradi**. **New boradi**. The data estimated in table shows that the prevalence of disease Asthma was found to be highest in villages Kodid and samryapada The prime reason behind above condition are the environmental risk factors in these areas and unawareness of Yoga therapy. The insanitary conditions mainly contributes to this. The main cause of asthma in urban areas, peoples having more stress. As per the data collected from peoples visited the number of peoples affected amongst total peoples visited was estimated in above table a. The data

reveals the general distribution of peoples with Asthma in different states in north India. The table indicates that the peoples of **Kodid** had maximum prevalence of condition Asthma.

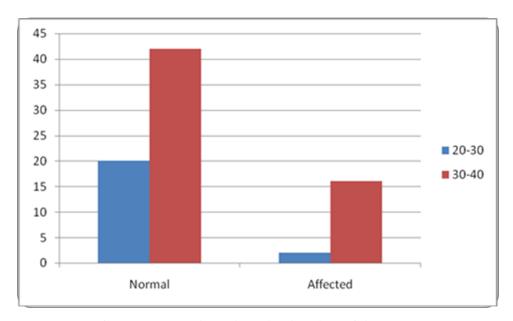
2. The Agewise Distribution of Asthma.

There is a significant relationship between age and condition of suffering from Asthma. The persons between the ranges of age 20-30 years are 9% Asthma affected. In between the range 30-40 are 27% affected & above the age 40 years are 60% affected. Hence the infection are seen more in the middle age people that ranges between age group of 30 to 40 means the adults than compare with the child and the older peoples seen the lower consequences.

Table 2: The Agewise Distribution of Asthma.

Age	Normal	Affected	Total
20-30	20	2	22
30-40	42	16	58
Above 40	8	12	20

The estimations were made on above mentioned parameter; It having strong basis of the age wise distribution is main pharmacy primary compliances. It having the information of distribution of Asthma, the life style and environmental condition summarized them. The collected statistical data detailed in following mentioned table the age group between 30-40 shows the greater percentile of the infected persons. It is mostly come under adult group.



Graph 1: The Agewise Distribution of Asthma.

The result and the age distribution show the more percentile in age group 30-40 years. The clinical studies and pharmacy compliances and post statistical studies come on the result that

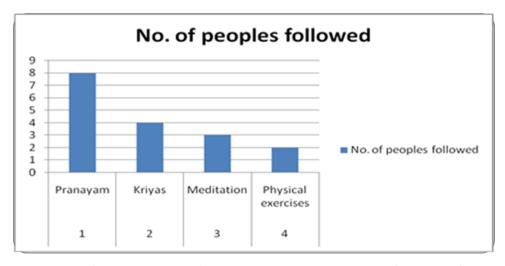
the mainly age group belonging to adult class were affected mostly. The children shows low percentile because the care taking environment around them maintained by their parents. The children are prohibited to face the unhygienic condition in their primary health caring systems. The adult including male and females are having less attention over there health due to their busy life schedules. The other reasons belonging to the conditions for Smoking which is the one of the cause of Respiratory disease. The person as the age progresses it reduce with their immunity capacity hence prone more susceptible to getting the Asthma.

Yoga is prominent amongst the new principles and techniques available for treating such problems on a holistic basis. Although yoga has been used in India over centuries for treating diseases, it is gaining recognition in the modern medical field as a special line of treatment. ^[6] Now, there is scientific evidence for the beneficial effects of Yogic practices for some stress induced disease like high blood pressure and bronchial asthma. Prana is the inner vital life entity and Pranayama is to gain control over Prana. ^[7] While simple breathing practices help to normalize the shallow, haphazard breathing. Pranayama uses certain slow breathing Pranayama rhythms and pattern to tranquil the mind and to reduce the metabolic rate and strengthen the respiratory and nervous systems.

Table 3: Effect of Yoga on Asthma.

Sr. No.	Yoga types	No. of peoples followed
1	Pranayam	8
2	Kriyas	4
3	Meditation	3
4	Physical exercises	2

An appropriate combination of these practices provides a simple and effective tool to solve ones own psychological conflicts and attenuate the emotional upsurges. Thus, the deep rooted subconscious stresses causing ill-effects on the some are erased.



Graph 2: The graphical representation shows that the number of peoples followed Yoga therapy, they did not suffered from the disease Asthma.

CONCLUSION

Asthma is a chronic (long-term) lung disease that inflames and narrows the airways. Asthma causes recurring periods of wheezing (a whistling sound when you breathe), chest tightness, shortness of breath, and coughing. Asthma is caused by allergies, tobacco smoking, environmental factors, obesity, stress, genes etc. The main reason for increased prevalence of Asthma in India due to having no knowledge about the Yoga therapy, increased poverty in slummy and urban area. Yoga is prominent amongst the new principles and techniques available for treating such problems on a holistic basis. There is scientific evidence for the beneficial effects of Yogic practices for stress induced disease bronchial asthma. Yoga therapy has the main importance in reducing the Asthma symptoms, simple breathing practices help to normalize the shallow, haphazard breathing. Pranayama uses certain slow breathing Pranayama rhythms and pattern to tranquil the mind and to reduce the metabolic rate and strengthen the respiratory and nervous systems. Kriyas are techniques developed in Yoga to cleanse the interior of the body like nasal passages, alimentary tract etc. They also activate and revitalize the internal organs.

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