

**KAPHAVRUTA VYANA VAYU: A CASE REPORT****Dr. Tanvi Singh\***

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**ABSTRACT**

Hence its normal gati is hampered or vitiated thus vata becomes avrita. Vyan vayu is responsible for all gati, prasarana, aakunchana, utshepa, avakshepa, nimesha unmesha adi kriya. Whenever avarana of vyan vayu takes place sanga or restriction of sarvanga gatra occurs & daha, santapa are the samanya lakshana of vridha pitta while guruta adi are samanya lakshana of vridha kapha.

**KEYWORDS:** Vyana, Gati.**INTRODUCTION**

Avarana literally means obstruction or to cover. Vata generally possesses the quality of chala which is responsible for all function. If vata gets obstructed then, its function gets hampered and results into vata vyadhi. Many scattered references about Avarana are available in classics apart from vata vyadhi chapter. Either vruddhi or kshaya of certain dosha, dhatu can produce Avarana.<sup>[1,2]</sup>

Pitta also may get obstructed by kapha and produce disorders like shakhashrita kamala.<sup>[3]</sup> Ayurveda believes in pancha mahabhuta concepts as basic principles to understand the physiology as well as pathology. tridosha theory is the simplified form of the same. Collaborated vayu and akasha are considered as vata. Agni is considered as pitta and prithvi along with jala is considered as kapha. Vata dosha is lightest among all. Pitta is lighter and kapha is heavy by nature. Vata possesses chala guna, pitta possesses sara guna and kapha possesses sthira guna. As kapha is heavier compared to other two, it naturally tends to obstruct vata and pitta. Pitta is heavier than vata due to its drava guna, it can obstruct vata. So vata is the only dosha which tends to get obstructed easily most of the time. Different varieties of vata move in different directions due to which a particular variety of vata may get

obstructed by each another. Prana and udana naturally moves upwards. Samana moves in lateral direction, apana moves downwards and tendency of vyana is to move in all directions. Though prana and udana as well as samana and apana work in co ordination it may obstruct each other due to minor variation in path.

Whereas, a smaller vehicle like motor bike can move from far behind till front in smaller passages through available space but will get obstructed finally. Similar pathology can be understood in anya avarana. Where as in traffic signal two or multiple vehicles moving in different direction violating traffic rules, lands in collision and ends in disasters. Similar pathogenesis occurs in anyonya avarana. Anubandha of a dosha is mere collaborative effect of both dosha where symptoms of both the dosha are clearly evident. Whereas, in an avarana two or more entities obstruct each other and results in disease. For understanding the concept of avarana it is mandatory to understand avaraka and avrutta. When dosha or dhatu obstructs a particular dosha then, it will give rise to increased signs and symptoms related to the function of that particular dosha or dhatu which has obstructed.<sup>[4]</sup> The entity which get obstructed will show less signs and symptoms related to its normal functions. For instance, if pitta obstructs vata then person will suffer with daha, trushna, shula bhrama, tama, vidaha and sheeta kamata which are symptoms of pitta and karmahani is observed which is a vata symptoms.<sup>[5]</sup>

This variety of anya avarana is easiest avarana to understand,<sup>[6]</sup> Different dhatu or mala can also obstruct specific variety of vata. For instance, in pittavruta prana vata, murcha, daha, bhrama, shula, vidaha, sheeta kamita and chardhana are the presenting symptoms.<sup>[7]</sup> In kaphavruta vyana vata, gati sanga may be observed.<sup>[8]</sup> In anyonya avarana the symptoms and signs observed are related to two different variety of vata. For instance in pranavruta vyana vata sarvendriya shunyatvam, smruti bala kshyam are observed.<sup>[9]</sup> So the permutation and combinations of the avarana are many. Acharya have explained many avarana and its signs and symptoms in detail. Further it is indicated that if unknown avarana is suspected then, observation of signs and symptoms will give clue to the diagnosis of avarana. The increased signs and symptoms will suggest the avaraka and decreased signs and symptoms suggest avrutta.<sup>[10]</sup> Once the case is diagnosed then the treatment is predictable. Faulty treatments protocol may leads to failure.

References are available regarding the avarana as pathology in different disorders. Medasavruta vata also known as adhya vata or vatarakta is one such condition.<sup>[11]</sup>

Kaphadhika vatarakta mimics the features of medasavrutta vata. More over urusthambha also been considered as medasavruta vata.<sup>[12]</sup> Pathogenesis of kasa is also due to the avarana between prana vata and udana vata.<sup>[13]</sup> Prameha is also another disorder in which Avarana is a variety of pathology apart from dhatu kshaya.<sup>[14]</sup> Similarly many disorders are produced as a result of avarana. More than one entity also can create avarana to the other dosha. So identification of avarana becomes very essential. In pathogenesis of avarana, ati pravrutti leads to sanga and it in turns leads to vimarga gamitva. So it may produce grave complications like Hridroga, vidraddhi, pleeha, gulma, and atisara if unnoticed and treated improperly.<sup>[15]</sup> So stupendous skill are required to the Ayurvedic physician to diagnose and treat the avarana successfully.

### **Treatment Principles of Avarana**

The treatment of avarana should aim towards cleansing the strotas with different medicaments which possess anabhishyandhitva, snigdha, kapha pitta aviruddham and vatanulomana property.<sup>[16]</sup> Administration of yavana basti, sramsana chikitsa and Rasayana dravya may be considered after analyzing the bala of patient and stage of the disease.<sup>[17]</sup> Anya avarana can be treated successfully after adapting these treatment modalities, whereas treatment of anyonya avarana is not simple.

In anyonya avarana, different varieties of vata should be directed in their respective direction. Udana vata should be directed up; samana vata should be directed towards the lateral direction; apana vata should be put back in downward direction where as vyana vata should be put back in its normal direction. Prana vata should be protected with due respect, which ever treatment is been planned.<sup>[18]</sup> Different varieties of panchakarma treatments are planned in order to remove the obstruction and put the specific variety of vata in its own path.

### **CASE REPORT**

Male patient aged 55 years, native of sadharan pradesh was said to be free from complaints 18 months back. One day patient started experiencing imbalance while he was walking and did fall due to imbalance. Gradually he developed slowness in the movements and performing daily activities. Simultaneously he developed increased urination, difficulty in speech, occasional loss of memory and behavioral changes.

Patient didn't complain of Pain, Fever, Vomiting, and Vertigo. No previous History of HTN, Type II DM, Veneral Diseases, Trauma, or any other disease. He was government servant by profession and weighing about 50 kg.

Patient consuming mixed diet but mostly vidahi, ushna, teekshna, abhishyandi and guru. Patient is addicted to ganja since 20 years and consumes alcohol since 30 years.

### Other Details of The Patient As Below

Prakruti: Vata-kaphaja

Vikruti: Avarana by shlema, vata-vyana prakopa

Sara: mamsa

Satva: avara

Samhanana: Madhyama

Satmya: Madhyama

Ahara shakti: Madhyama

Abhyavaharana: Madhyama

Vyayama shakti: Avara

Vaya: Madhyama

Pramana: Madhyama

### Hematological investigations before treatment

(Date: 23/December/2011)

Sr.No.	Hematological	Value
1.	Hb	12.1 gm%
2.	FBS	104mg%
3.	ESR	16mm/1 <sup>st</sup> hour
4.	BLOOD UREA	14mg/Dl
5.	SERUM CREATININE	0.6mg/dL

### MRI REPORT

MRI Brain– 31/12/2011

- Multiple Lacunar ischaemic areas of microvascular disease areas in bilateral frontoparietal lobe, white matter, corona radiata, centrum semiovale & both lobes of cerebellum.
- Periventricular white matter ischaemia.
- Mild cerebral atrophy.

- Few lacunar old ischaemic areas in the bilateral ganglio-capsular regions, Thalami & Pons.

### Treatment

The treatment was carried out with following panchakarma procedures along with other supporting medicines for 8 days.

Panchakarma procedure includes

1. Matra basti with 70ml of Sahacharadi taila for 8 days.
2. Sarvanga abhyanga with Maha Narayana Taila
3. Madhyama bashpa sweda

### December 2011

Day	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup> 1	7 <sup>th</sup>	8 <sup>th</sup>	6 <sup>th</sup> 1	7 <sup>th</sup>	1
Type of Basti	Matra Basti	Matra Basti	Matra Basti	Matra Basti	Matra Basti	Matra Basti	Matra Basti	Matra Basti	8		8

### Supportive Treatments (Medicines)

Sr. No.	Medicine	Dose	Anupana	Schedule
1.	Cap. Neuron	2 cap.	-	Twice daily
2.	Syp. Zandopa	3 tsp	Warm water	Twice daily
3.	Ashtavarga Kashaya	3 tsp	Warm water	Twice daily
4.	Tab. Seledin	1 tab.	-	Once daily
5.	Dashamularishta	3 tsp	Warm water	Twice daily

### DISCUSSION

Kaphavruta vyana vata is caused when vyana vayu gets obstructed by kapha dosha leading to parva, asthi and vak graham, guruta angeshu (Heaviness in the whole body) along with skalitham cha gatou bhrusham (swaying while walking).

Sarvanga abhyanga with Mahanarayana Taila and Bashpa swedana which increases local blood flow that helps to drain out the inflamed exudates etc. apart from this it gives good nourishment and strengthen the local tissues and corrects the aggravated vata dosha.

Basti is such a unique treatment which can correct local as well as systemic pathology and the best treatment for the correction of vata and the disease of Asthi, Sandhi and Marma, check the disease progress. Matra Basti is specifically indicated for condition like pain in low back, thigh and feet as well as for correction of vitiated vata dosha.<sup>[18]</sup>

The medicines which were used along with Panchakaarma therapy are having Vata-hara, Shothahara, Agnideepana, Anulomana and Rasayana properties, which supported the Panchakarma treatment for the correction of basic pathology.

Basti as a best line of treatment for Vata dosha and vata is the cause for Parva, Asthi, Vaka graham, heaviness in the body and for cramps in the body. Sahacharadi taila matra basti is also indicated in vata vyadhi, kampa, akshepa and urustambha, shosha like conditions.

Neuron capsules consists Dashamula, Lashuna, Eranda which having Ushna veerya and vatahara properties. Bhruhat vata chintamani rasa is one of the major ingredient which helps to pacify vata dosha. Bala provides strength in vat vyadhi. Similarly Sahacharadi taila also indicated in Ayurvedic treatment of Vata diseases, tremors, convulsions, psychosis, and stiffness of thigh, muscle cramps, and muscle wasting. Ashtavarga kashayam in addition consists of Eranda, Nirgundi, Lashuna, Rasna which are considered as best vata-kapha shamaka dravyas.

Dashmularishta containing herbs which are good for health and well being. Dashmularishta is useful in general weakness and provides nourishment. The majority of ingredients are having immunomodulatory, antioxidant, nutritive and restorative properties.

After eight days of treatment patient was discharged. Condition of patient was improved he is able to walk without support and able to sign, cramps are relieved.

## CONCLUSION

Combined therapy of Matra Basti, along with Mahanarayana taila sarvanga abhyanga and Bashpa Sweda supporting with medicinal line of treatment provide excellent improvement in clinical sign and symptoms of Kaphavruta vyana vata.

## REFERENCES

1. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/199.
2. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 29/10.

3. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 16/124.
4. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/217-219.
5. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/61-62.
6. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/70-72.
7. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/221-22.
8. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/228-29.
9. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/202-03.
10. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/248.
11. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/65-66.
12. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 27/14.
13. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 18/6.
14. Sushruta; sushruta samhita, with nibandha sangraha teeka by Dalhana, published by chaukhambha Sanskrit sansthan, Varanasi, Edition reprint nidan sthana, 2010; 6/4.

15. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/236.
16. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/238-40.
17. Agnivesha, charaka samhita, with Ayurveda deepika teeka by chakrapani dutta, published by chaukhambha Sanskrit sansthan, Varanasi, edition reprint, chikitsa sthana, 2004; 28/240-42.
18. Charak Samhita, Agnivesha, Ayurveda Dipika Sanskrit Commentary, Chakrapanidatta, Siddhi Sthana, Prasrityogiya Siddhi Adhyaya,(8:28/560), Chaukhambha Sanskrit Sansthan, Varanasi, 1990.