

AYURVEDIC MANAGEMENT OF COVID-19 /SARS-COV-2: A CASE REPORT**Deepika Dave^{1*} and Shweta Mishra²**

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Article Received on
18 April 2021,

Revised on 08 May 2021,
Accepted on 28 May 2021

DOI: 10.20959/wjpr20216-20669

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ABSTRACT

The respiratory illness outburst has been the result of novel corona virus SARS-CoV-2 in December 2019, globally, as of 5:33pm CEST, 17 may 2021, there have been 162,773,940 confirmed cases of COVID-19 in whole world, including 3,375,573 deaths, reported to WHO. In India there are 25,228,996 confirmed COVID cases with 278,751 deaths till 17 may 2021. All the medicines which are being used as treatment protocol is still under trial, so no specific medicine is present for its treatment. However, the long-established recognition of ayurvedic science is definitely capable and proving its potentiality in this pandemic era. Here is a case report of middle-aged female patient with CO-RADS 5 with the symptoms of severe breathlessness and coughing. Examining the patient and her reports she was prescribed

Swaskaas Chintamani 1-tab bd, *Mahalaxmivilas rasa* 1-tab bd, *Mahasudarshan ghanvati* 2-tab bd, *Sanjeevani vati* 2-tab bd, a combination of *Talishadi churna* 2gm, *Sahasra abhrak* 20mg, *Shuddh tankan* 500mg twice a day with honey and other daily routine for a period of 15 days. The patient started feeling better from third day of medication and was very much relieved with 8 days of treatment and on 15th day she went for RT-PCR, and HRCT thorax Scan in which she was given a negative report of COVID and better imaging of HRCT as compared with former report.

KEYWORDS: COVID, *janapadoudhwansa*, *pranavaha sroto dushti*.

INTRODUCTION

SARS-CoV-2, the deadly virus that caused an infectious pandemic disease primarily target the respiratory system of human beings. This deadly virus has caused 3,375,573 deaths, 162,773,940 confirmed cases in whole world till 17 may 2021 as per the report of WHO.^[1] Though COVID-19 is new challenge for the world right now but the word '*janpadoudhwansa*' itself constitutes the pandemics like it. The vitiated *vayu*, *jala*, *desha*, *kala* causes the common cardinal features that appears in *janpada*.^[2] Cough, breathlessness, vomiting, fever, headache are the symptoms of vitiated *vayu* (virus, bacteria, etc.) at any place that correlates to COVID. Also the same symptoms occurs in *Pranavaha sroto dushti lakshana* like that of *atishristam*(prolonged breathing), *atibaddham*(restricted breathing), *kupitam* (agitated breaths), *alpalam*(shallow breaths), *atikshinam* (frequent breaths), *sashabdham*(stretor breathing), *sashoola*(painful breathing).^[3] COVID-19 can also be considered as *aagantuj jwara* and its spread can be justified because of its *aupsargika* nature.^[4] As it has been given that any *aagantuja vyadhi* gets converted to *nija vyadhi* in time period of seven days^[5] which resembles the incubation period of COVID virus. Here is a case report of 45 years old female patient with severe symptoms of cough, breathlessness, pain in chest, low grade fever, loss of appetite and a report of HRCT Scan for thorax approached vaidyaa for her ayurvedic treatment. She was prescribed ayurvedic medicines for 15 days along with 5 days course of modern medicines that were prescribed earlier by a clinician. After the completion of 15 days of treatment she was feeling perfectly healthy with a negative report of COVID and better imaging of HRCT as compared with former report which is attached as figure 1 and 2.

CASE REPORT

A 45 years old female patient started experiencing dry coughing and mild fever with mild pain in chest on 15th April 2021, which kept aggravating day by day and patient finally went for antigen test and RT-PCR test on 20th April 2021 which came negative. The patient was relieved mentally that she is ok but the symptoms deteriorated with profound dry coughing and heaviness in chest in next ten days in which she was taking general modern medicines for controlling her symptoms. Finally, on prescription of local doctor she went for HRCT Thorax on 1st may 2021 which suggested scattered areas of opacities with interstitial thickening in bilateral lungs and level of suspicion of COVID as CO-RADS 5 and CT SEVERITY SCORE as 16/25. The %spO2 was 77, pulse rate was 120/min, temperature 101 Fahrenheit. Due to personal reason she didn't went for RT-PCR Test. There was no significant previous medical

history. On the basis of HRCT Reporting she was prescribed ZADY-500 (azithromycin), bilastine tablets (antihistaminic), predniwel-8 (methylprednisolone), Immu C-Plus (vitamin C, vitamin D2, Zinc chewable tablets) twice a day, HEALTH OK (multivitamin) once in a day for next 5 days and was asked to again contact the doctor after 5 days.

Ayurvedic treatment given

Patient reached out to *vaidyaa* through telecommunication on 1st may 2021 with her reports and severe symptoms. On the basis of *dashvidha pariksha* which is given in table 1. Patient was prescribed *Swaskaas Chintamani rasa* 60mg, *Mahalaxmivilas rasa* 60mg, *Mahasudarshan ghanvati* 250mg, *Sanjeevani vati* 250mg twice a day, a combination of *Talishadi churna* 2gm, *Sahasra Abhrak* 20mg, *Shuddh tankan* 500mg twice a day with honey, in addition to drugs the patient was advised to do gargling with *Saindhav lavana* in *ushna jala* twice a day, once in morning time and once in the evening time. Also, to do *swedana* with a warm mixture of *ghrit*, *karpura*, *saindhav lavana* all over chest and neck region and back for two times a day. Patient was forbidden from fruits, green leafy vegetables, milk dairy products, day time sleep, and was told to live in other room. This whole regimen was followed for next 15 days. However, patient also took modern medication as per earlier prescription for 1st 5 days while methylprednisolone was tapered and was stopped in 5 days.

Treatment outcome

The patient started to feel better in first two days with the chest heaviness and breathlessness, the dry cough started changing to productive cough, the %spO₂ was 80 however she kept panicking out of fear, so she was asked for doing *Vishnu sahasranaam* as *satvavajay chikitsa*. On 4th day productive cough was controlled and the interval between coughing increased making much relief to the patient while chest heaviness, breathlessness and pain in chest were totally absent while the %spO₂ was 85. On 8th day she had headache which was relieved after doing *katu tail shiroabhyanga*, %spO₂ was 89. On 11th day she was able to walk for half an hour without any breathlessness, %spO₂ was 93. All the symptoms were totally subsided and the patient was feeling light and healthy, %spO₂ was 98 till 15th day. Patient went for RT-PCR and HRCT on 15th may 2021 in which RT-PCR was reported negative and the CT SEVERITY SCORE was decreased to 14/25 while patient was totally free from symptoms. The %spO₂ improvement is listed in table 2.

In the follow up patient has been given the same combination for next 15 days adding

ashwagandha and shatavari churna 5gm with milk after the breakfast.

DISCUSSION

Though the patient was tested negative on first attempt but the researchers and doctors all over the country came across an increasing number of cases where the patients test negative in RT-PCR but their HRCT reveals significant infection in lungs.^[6] A notification was issued for this rising problem stating “in cases where RT-PCR is negative but the findings in HRCT and lab investigations are suggestive of viral aetiology, the claim should be treated as that of COVID”.^[7] So this patient was also considered to be COVID infected. In Ayurveda the best correlation that fits with COVID pandemic is *pranava sroto dushti*. *Samprapti ghataka* includes *agnimandya*, *srotoavarodh*, *vata kapha as dosha*, so the *chikitsa* included *deepana paachana*, *srotoshodhana*, *katu ruksha ushna prayog*, *vata kaphahara chikitsa*^[8]. *Swaskaaschintamani rasa*^[9] is *tridosha hara* especially *kapha-vatahara* with *deepana*, *sroto vivarana* and *lekhana karma*. *Mahalaxmivilasa rasa*^[10] has its dominancy over *vata kaphaj vyadhis* including *sannipataj jwara* as well as aids in strengthening of *pranava srotas*.

Mahasudarshan ghanvati has antipyretic effect in nearly all types of fever whether viral, bacterial, microbial. *Sanjeevani vati* does *agni vardhana* by balancing *pitta* and pacifying *vata kapha* and thus *amapaachana*, along with this, it does *swedajanan karma* thus relieving fever. *Talishadi churna*, *tankan bhasma* is together used in soothing coughs and *sahasra abhrak* is added for its anti-inflammatory, anti-biotic property and it also increases the potency of other drugs because of its *yogavahi* nature. So the combination of *talishadi*, *tankan* and *sahasra abhrak*^[10] thins and loosens rheum deposits within chest and nasal cavities and chest and hence eases breathing and facilitates the body to get rid of mucus. Application of *ghrita karpura saindhava lavana* is done for *swedana* purpose so that the *kapha* which gets lodged in *srotas* can be easily removed. The salt water gargling was prescribed for *urdhwajatrugat* delodging of *kapha*.

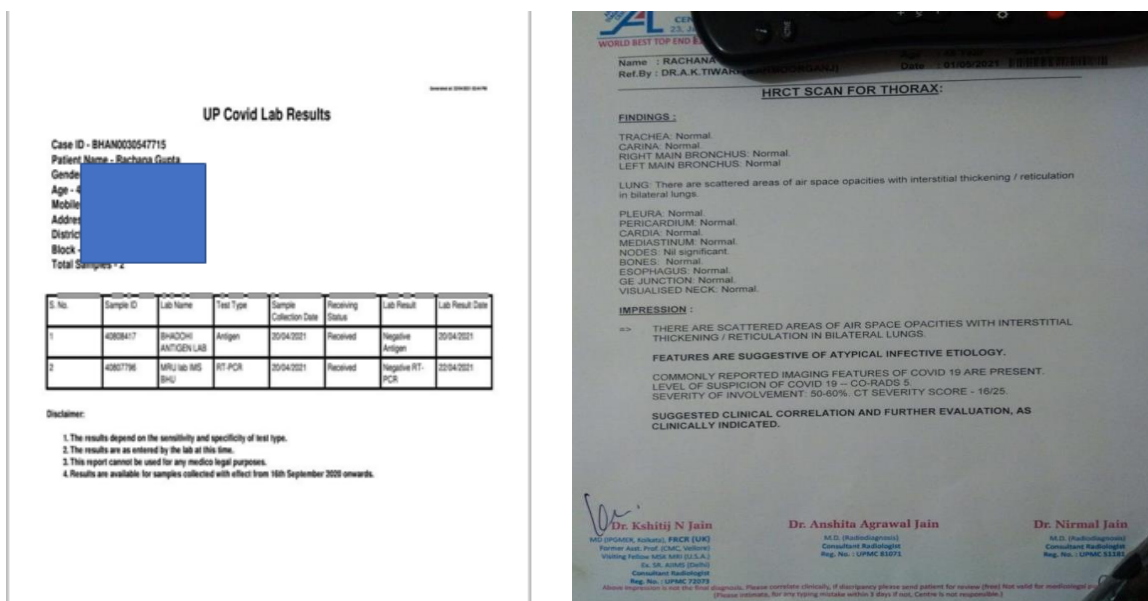


Figure 1: Before treatment RT-PCR (20/4/2021), HRCT THORAX (1/05/2021).

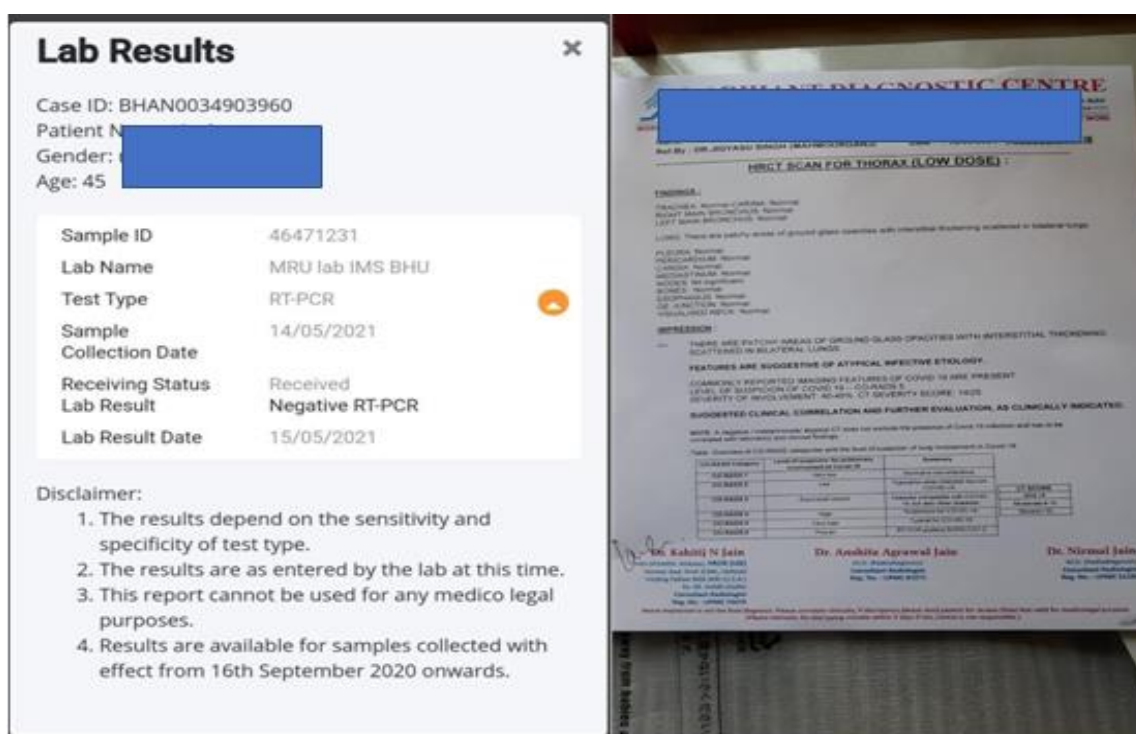


Figure 2: After treatment RT-PCR (14/05/2021), HRCT THORAX (14/05/2021).

Table 1. dashvidha pariksha.

Prakriti	Vikriti	Sara	Sanhanan	Pramana	Satmya	Satva	Aahar Shakti	Vyayama Shakti	Vaya
Vata kaphaj	Vata kaphaj Vikara	Twak sara	Madhyama	Madhyama	Sarvarasa satyma	Heensatva	Madhyama	Madhyama	Madhyama

Table 2: Improvement chart of %spO₂.

%spO ₂ on day 0	77
%spO ₂ on day 2	80
%spO ₂ on day 4	85
%spO ₂ on day 8	89
%spO ₂ on day 11	93
%spO ₂ on day 14	98

CONCLUSION

This pandemic is proving to be a global threat to human population. In Ayurveda a detailed description is available for the nidana and chikitsa of such pandemics. The whole world is trying to fight it with contemporary medicine but the results are unsatisfactory so it should be marked for sure to move towards ayurvedic medicine because of its limitless power to attain health. And this case report will be helpful in proving that Ayurveda is not only immunity enhancer but the whole big science with proved factors for any diseases including this type of pandemics.

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