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AYURVEDIC MANAGEMENT OF TAMAK SHWAS: A CASE STUDY

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ABSTRACT

The obvious aspect of life that Prana Vayu does is breathing. This one and only indicator of life is impacted by Tamaka Shwasa, a condition that hinders respiratory function. The word "shwasa" denotes a respiratory condition that is both diseased and physiological. Under the several categories of Shwasa roga, Tamaka Shwasa has been referenced in Ayurvedic writings. Illness Based on its characteristics and etiopathogenesis, Tamaka Shwasa can be associated with Bronchial Asthma. Tamaka Shwasa is considered as Yapya (palliable) because this type of Shwasa roga is not only difficult to treat but also has a repetitive nature. Bronchial Asthma calls the attention of Medical world due to significant burden in terms of healthcare costs as well as lost productivity and reduced participation in family life.

KEYWORDS: *Tamak Swas, Ayurved, Balrog.*

INTRODUCTION

Tamakshwasa is a life-threatening disease, as mentioned by Charakacharya.[1] He also explained it as Pranahar, Ashukari and Ghora vyadhi.[2] In modern Tamakshwasa is corelated with Bronchial Asthma. Bronchial Asthma is mainly a chronic inflammatory disease, affecting the air tubes leading to labored breathing. The main cause of inflammation is chronic irritation due to hyper-reactivity of lung immune system induced by different kinds of external and internal allergens. In Ayurveda the vitiated Vata reaches head – neck region.

It increases the regional Kapha and these secretions obstructs the airway passage thereby producing Ghurgur Shabda or wheezing sound. In Modern science it is compared with Bronchial Asthma. Bronchial asthma is a chronic inflammatory disease of the airways, characterized by bronchial hyper reactivity and variable degree of airway obstruction[3] and manifesting as periodic attacks of coughing, wheezing, breathlessn.ess, and shortness of breath typically occurring at night or in the early morning hours. Prevalence of Bronchial Asthma is increasing alarmingly due to excessive pollution, overcrowding, occupational conditions, stress and poor hygiene etc. These etiological factors act as aggrevating factors in developing acute attacks of Asthma mostly in atopic individuals. Therefore, Nidana Parivarjana[4] has got a significant role to play in the management of the disease Tamakashwasa. Also, various principles of Ayurveda and many a formulations can be used according to Roga And Rogi Bala, during Vegavastha.[5] Avegavastha and as per palatability of the patient for free flow of PranaVayu so that Strothorodhan[6] is removed and free flow of Pranavayu may occur there by curing the attack of disease Tamakashwasa.

CASE REPORT

A 9 year old male patient came with the chief complaints of difficulty in breathing aggravated since 7 days associated with intermittent fever, coughs with whitish coloured sputum, and generalized weakness.

History of Present illness

Patient was apparently healthy 8 years back. One fine day suddenly he got fever and difficulty in breathing, for these complaints he visited a local physician and took medication (details not known)

Respiratory System

O/E: Inspection: Inspection of the chest –bilateral symmetrical. Accessory muscle used for respiration is present i.e. sternocleidomastoid muscle. Type of breathing -abdomino thoracic, No any chest deformities, No any scars. Respiratory rate: 18/min. ▪Palpation: Tenderness -absent, position of the trachea is centrally placed. Transverse diameter-33cm. movement of chest bilaterally symmetrical, Inspiration-89cms, expiration-85cms.vocal fremitus -bilaterally symmetrical.

Percussion: Resonant all over the lung field. Hepatic and cardiac dullness noted

Auscultation: Polyphonic wheeze was observed bilaterally (more in right lung compared to left). Vocal resonance is bilaterally symmetrical. CVS-nothing abnormality is detected.

Ashtasthanagata Pariksha Nadi(pulse) –74b/min Vataja Nadi, Mala(stool) –once in a day, Mootra (urine)-3-4 times a day, Jihwa(tongue) –Alipta, Shabda(speech) –Krichatbhashitum, Sparsha(touch) -Abhyanga with BrihatSaindavadi Tailam(chest and back) once in a day, Druk (eyes)-Doosara Varna, Akruti(built)-moderate

Treatment given

Vasa +kantakari +madhuyashti churna each 250 mg with goghreta BD for 3 months

OBSERVATION

SN	Signs and symptoms	BT (before treatment)	AF (after treatment)	Result in %
1.	Night awakening	3	1	60%
2.	Morning worsening of asthma symptoms	2	0	70%
3.	Limitation of activity	2	1	60%
4.	Shortness of breath	2	0	70%
5.	Wheezing	3	1	60%
6.	Use of bronchodilator (Bharangi arka nebulization) each day	1	0	80%

DISCUSSION

Vasa (Adhatoda vasica) It is kapha-pitta pacifying, acts as a bronchodilator[7], expectorant, anti allergic[8], antitussive[9] and anti Inflammatory[10].

Kantakari (Solanum xanthocarpum) It is kapha vata pacifying, anti inflammatory, carminative, and expectorant, anti-asthmatic.[11]

Madhuyashti (Glycyrrhiza glabra) It is vata-pitta pacifying, has cortisone like activity, good demulcent, antiasthmatic[12], anti allergic[13,14] expectorant[15], anti-inflammatory[16], antitussive and immunomodulator.

Do’s (Pathya): Godhuma (wheat), Old rice, Mudga (green gram), Kulattha (Horse gram), Yava (barley), Patola (snake gourd), Use of Garlic, Turmeric, Ginger, Black pepper, Luke warm water, Goat milk, Honey, Respiratory exercise, Pranayama, Yoga.

Don’ts (Apathya): Heavy, cold diet, Masha (black gram), Deep fried items, Mustard leaves, Fish Exposure to Cold & Humid atmosphere, Sweets, Chilled water, Stored food items, Curd, Suppression of natural urges, Excessive physical exertion, Exposure to Smoke, Dust and fumes, Pollutants and Pollens.

CONCLUSION

In pediatric age group Tamakshwas commonly get observed. Ayurveda described tamakshwas from both the corners curative as well as preventive. In comparison to modern pediatrics this pediatric disorder has been emphasized much by Ayurvedic Aacharya. It is one type of disease which is troblesome to the life of the patient. It hampers the growth and development, day by day activity and school performens of the child. Prevalence of Bronchial Asthma is increasing alarmingly due to excessive pollution, overcrowding, occupational conditions, stress and poor hygiene etc. These etiological factors acts as aggravating factors in developing acute attacks of asthma mostly in atopic individuals. Therefore, Nidana parivarjana has got a significant role to play in the management of the disease Tamaka Shwasa. Also, various principles of Ayurveda and many a formulations can be used according to Roga & Rogi bala, during Vegavastha & Avegavastha and as per palatability of the patient for free flow of prana vayu so that srothorodha is removed and free flow of prana vayu may occur thereby curing the attack of disease Tamaka Shwasa.

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