

CLINICAL STUDY OF *SHATYADI AVLEHA* IN THE MANAGEMENT OF *KAPHAJ KASA*

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ABSTRACT

In Ayurvedic texts *Kasa* is explained as independent disease. There is *Pranavaha-Strotas dushti* and as described in Ayurvedic texts *Prana Vayu* is related with life. Charak explains whenever foreign body is trapped in respiratory tract, *Prakupit Vayu* tries to evacuate this foreign body at this time when an injury or stimulus is caused in the respiratory tract it produces abnormal sound which resembles that of a broken bronze metal bell is heard, the sound thus produce is *Kasa* and whenever *Kapha Dosha* dominate in making of *Kasa Samprapti* the disease resulted with *Nishtivan* of Sandra *Bahu-Kapha* called as *Kaphaj Kasa*. In modern system of medicine chronic bronchitis is treated with bronchodilators and corticosteroids symptomatically. But

long-term usage of these drugs will show adverse effect like loss of bone mineral density, weakened immune system, dryness of mouth, irritation in throat, loss of appetite, and anxiety. So, there is a serious and urgent need of better management without the adverse effects. Here is a single case study was done on patient of *Kaphaj Kasa* with drug *Shatyadi Avleha* advised twice daily and assessment done before treatment and after treatment. Observations and results obtained during this case were reassuring and assessed on different parameters which are presented in full paper.

KEYWORDS: *Kaphaj Kasa*, Cough, *Shatyadi Avleha*.

INTRODUCTION

Kasa is a disease explained in Ayurveda which involves most of the presentations of a respiratory tract disease. In the pathogenesis of *Kasa Vyadhi*, vitiated *Kapha* obstructs the free flow of *Prana Vayu* in *Kantha* and *Ura*.^[1] Recurrent cough is the common manifestation

of recurrent respiratory tract infections which is more similar to the disease *Kasa* demarcated in Ayurvedic classics. Early intervention is necessary in case of *Kasa* as it is a potential *Nidanarthakara* to produce *Kshaya*.^[2] Charak mentioned whenever foreign body is trapped in respiratory tract, *Prakupit Vayu* tries to evacuate this foreign body at this time when an injury or stimulus is caused in the respiratory tract it produces abnormal sound which resembles that of a broken bronze metal bell is heard, the sound thus produce is *Kasa* and whenever *Kapha Dosha* dominate in making of *Kasa Samprapti* the disease resulted with *Nishtivan* of *Sandra Bahu-Kapha* called as *Kaphaj Kasa*.^[3]

In modern medicine the drugs, which are used in symptomatic treatment of cough are centrally acting drugs for cough suppressants e.g., opioids like codein, dextro-methorphan. Antitussives like diphenhydramine and steroids e.g., prednisolone are the commonest drugs used which provides only symptomatic relief. Ayurveda had not only provided a wide range of drugs but also provided the various preventive measures to be followed while cured the disease.

AIMS AND OBJECTIVES

To access the effect of *Shatyadi Avleha* in management of *Kaphaj-Kasa*.

CASE REPORT

A 46-year-old male patient having following complaints was came in OPD of Kayachikitsa Department, Shree Saptashruni Ayurved College and Hospital, Hirawadi, Nashik.

Chief Complaints

Ati Kasa Vega

Anga-Gaurav

Sandra-Kapha Nishtivan

Hruhallas

since last 3 years

Aggravated in last 7 day

History of Present Illness

Patient was healthy before 3 years. There was gradual increase in above symptoms, but above symptoms were aggravated in last 7 days. So for treatment, patient came to Kayachikitsa OPD for further treatment and management.

Past History

Known case of Hypertension since last 8 years.

Present Medicinal History Tab. Amlorind 5mg (Amlodipine 5mg) 1OD.

Family History: *Matruj Kula: Mrita. Pitruj Kula: Jeevit* H/O HTN.

Vaiyaktik Vrittant: Occupation: Labour; *Vyasana:* Chronic Smoker since last 15 years.

General examination

Temperature	98.6 F
RR	22/ Min
Pulse rate	92 /Min
Blood pressure	140/80 mm of Hg
Height	165 cm
Weight	70 Kgs

Systemic Examination

RS	Mild Wheezes, AEBE
CVS	S1 S2 Normal
CNS	Conscious, oriented
P/A	Soft

Ashtavidha Parikshan

<i>Nadi</i>	92/Min
<i>Mutra</i>	4-5 times a day
<i>Mala</i>	Once a day
<i>Jivha</i>	<i>Ishat Sama</i>
<i>Shabda</i>	<i>Spashta</i>
<i>Sparsha</i>	<i>Samshitoshna</i>
<i>Druk</i>	<i>Prakrita</i>
<i>Akruti</i>	<i>Madhyam</i>

Dashvidh Pariksha:

<i>Prakruti</i>	<i>Kapha-Pittaj</i>
<i>Dosha</i>	<i>Kapha</i>
<i>Dushya</i>	<i>Rasa, Rakta</i>
<i>Sara</i>	<i>Hina</i>
<i>Samhanana</i>	<i>Madhyam</i>
<i>Pramana</i>	(165 cm)
<i>Dehabhara</i>	70 Kgs
<i>Satmya</i>	<i>Madhyama</i>
<i>Satva</i>	<i>Madhyama</i>
<i>Ahara Shakti</i>	<i>Madhyama</i>
<i>Vyayam Shakti</i>	<i>Hina</i>

Investigations

CBC	WNL
RBS	96 mg/dl
Urine routine & microscopic	Normal
Chest X-ray PA view	Changes of COPD
AFB sputum	Negative

Management

Shatyadi Leha^{[4][5]}

Drug	B.N	Rasa	Guna	Virya	Vipaka	Doshagnata
Shati	<i>Hedychium spicatum</i>	Katu, Tikta, Kashaya	Laghu, Tikshna	Ushna	Katu	Kapha vatashamaka
Choraka	<i>Angelica glauca</i>	Katu, Tikta	Laghu, Tikshna	Ushna	Katu	Kapha vatashamaka
Jivanti	<i>Leptadenia reticulata</i>	Madhur	Laghu, Snigdha	Sheeta	Madhur	Vata pittashamaka
Twak	<i>Cinnamomum zeylanicum</i>	Katu, Madhur	Laghu, Ruksha, Tikshna	Ushna	Madhur	Kapha vatashamaka
Mustak	<i>Cyperus rotundus</i>	Tikta, Katu, Kashaya	Laghu, Ruksha	Sheeta	Katu	Kapha vatashamaka
Pushkarmoola	<i>Inula racemosa</i>	Tikta, Katu	Laghu, Tikshna	Ushna	Katu	Kapha vatashamaka
Tulsi	<i>Ocimum sanctum</i>	Katu, Tikta	Laghu, Ruksha	Ushna	Katu	Kapha vatashamaka
Bhumyamalaki	<i>Phyllanthus urinari</i>	Tikta, Kashaya, Madhur	Laghu, Ruksha	Sheeta	Madhur	Kapha pittashamaka
Ela	<i>Elettaria cardamomum</i>	Katu, Madhur	Laghu, Ruksha	Sheeta	Madhur	Kapha vataghna
Pippali	<i>Piper longum</i>	Katu	Laghu, Tikshna, Snigdha	Anushnasheeta	Madhur	Kapha vataghna
Agaru	<i>Aqualaria agallocha</i>	Katu, Tikta	Laghu, Tikshna	Ushna	Katu	Vata kaphahara
Shunthi	<i>Zingiber officinale</i>	Katu	Laghu, Snigdha	Ushna	Madhur	Vata kaphahara

Name of Drug: Shatyadi Leha

Route of Administration: Oral (Abhyantar)

Dose: 3gm QID with Koshna Jala

Time: Before meal [Pragbhakta]

Duration: 30 days

Observation and results^[6]

Symptoms	Gradation	Grad	BT	AT
Kasa Vega	0: No complaints	0	3	1
	Grade 1: 3-4 times/day	1		
	Grade 2: 6-8 times/day	2		
	Grade 3: Continuous in day and night	3		
Anga-Gaurav	Grade 0: Absent	0	3	1
	Grade 1: In morning after awaken	1		

Sandra Kapha Nishtivan	Grade 2: Irrespective kaphakala	2	3	1
	Grade 3: All the time	3		
	No productive cough	0		
	Serous expectoration with traces of thick Sputum and 1-3 bouts of kasa every hour	1		
	Moderately thick white in color and 4-5bouts of kasa every No pain at all	2		
	Thick large quantity of solid white Sputum continuous and present after every bouts.	3		

DISCUSSION

It was observed that in *Shatyadi-Leha* most of the *Dravya* are having predominance of *Katu*, *Tikta Rasa*, *Laghu*, *Tikshna Guna*, *Ushna Veerya*, *Katu* and *Madhur Vipaka* and *Kapha Vatashamaka Karma* are present in maximum *Dravyas*. All these *Guna* helps in Vitiating of *Dhatwagni*, by enhancing the basal metabolic rate. These also help in *Pachana* of undigested matter and their abolition. *Tikshna Guna* due to predominance of *Agni Mahabhuta* acts on *Avruddha Strotas* and removes *Avarodha* by pacifying the *Kapha*. *Ruksha Guna* helps in absorption of excessive secretion and thereby helps in removing obstruction caused by thick mucus plug. *Laghu* and *Ruksha Guna* are mainly *Kaphahara*.

The probable mode of action of all drugs in *Shatyadi Avleha* as follows.

- 1. Deepan-Pachana Dravyas:** *Choraka, Bhumiamalaki, Tulsi, Pippali, Musta, Ela, Twak*. (These drugs help at the level of *Agni* in *Samprapti Vighatana*.)
- 2. Srotoshodhaka Dravyas:** *Shunthi, Jivanti, Tulsi, Ela, Twak*. (These drugs clean the various channels of *Pranavaha Strotas* which leads to *Anuloma Gati of Vata* in this manner these *Srotoshodhaka* drugs help in *Samprapti Vighatana*.)
- 3. Rasagata Kaphanashaka Dravyas:** *Shunthi, Pippali, Tvak*. (*Ama* is the one of the important milestones in the *Samprapti* of *Kaphaj Kasa* hence these drugs help in *Samprapti Vighatana*.)
- 4. Vata Kapha Nashaka Dravyas:** *Shati, Choraka, Twak, Mustak, Pushkarmula, Tulsi, Ela, Pippali, Agar, Shunti*.
- 5. Shwasa-Kasahara action:** All most all the drugs of *Shatyadi Avleha* are having *Shwasa-Kasa-hara* action.^[7]

These drugs act on *Pranavaha Strotas* thereby pacifying the *Doshas* and thereby relieves the symptoms in this patient of *Kaphaj Kasa*.

CONCLUSION

Kaphaj Kasa is a very troublesome disease affecting the *Pranavaha Strotas* and producing respiratory discomfort. It was observed that the symptoms relapse when treatment is withdrawn in patients of COPD. *Shamana Chikitsa* in the form of *Shatyadi Avleha* played an important role in the management of *Kaphaj Kasa*. Therapy was well tolerated by patient and no adverse effects were seen in patient. there is reduction in symptoms specifically in *Ati Kasa Vega*, *Anga-Gaurav*, *Sandra-Kapha-Stivan*. This concept taking in mind the study should be carried out on large sample for serving the happiness to the mankind.

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