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CLINICAL STUDY TO EVALUATE THE EFFICACY OF *LAVANGADI SAMSHARKARA CHURNA* IN THE MANAGEMENT OF *KAPHAJA KASA*: A CASE SERIES

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ABSTRACT

Kaphaja Kasa is a *Kapha*-dominant disorder of *Pranavaha Strotas* characterized by productive cough, thick expectoration, *Peenasa*, *Aruchi* and *Agnimandya*, clinically resembling conditions such as productive cough and chronic bronchitis. The present clinical study was undertaken to evaluate the efficacy of *Lavangadi Samsharkara Churna* in the management of *Kaphaja Kasa*. The study was conducted at SSNJ Hospital, Solapur, and patients aged 18–70 years fulfilling the diagnostic criteria were selected. The formulation was administered in a dose of 2 gm thrice daily in *Pashchatbhakta Kala* for 15 days, and assessment was done on the 7th and 15th day based on subjective grading of *Kasa Vega*, *Kaphanisthivana*, *Peenasa*, *Aruchi* and *Agnimandya*. After completion of therapy, marked improvement was observed in all parameters, with 95% relief in symptoms and no adverse effects during treatment or follow-up. The therapeutic efficacy of *Lavangadi Samsharkara Churna* can be attributed to its *Deepana*, *Pachana*, *Kapha Vilayana*, *Shothahara* and bronchodilatory actions, which correct *Agnimandya*, liquefy and expel *Kapha*, reduce airway inflammation and improve respiratory function. The study concludes that *Lavangadi Samsharkara Churna* is a safe, economical and effective formulation in the management of *Kaphaja Kasa*.

KEYWORDS: *Kaphaja Kasa; Lavangadi Samsharkara Churna*; Productive cough; *Kapha Vilayana; Deepana-Pachana; Pranavaha Strotas; Agnimandya; Ayurvedic* management.

INTRODUCTION

Ayurveda emphasizes the preservation of health in healthy individuals and the management of disease in the afflicted. Rooted in ancient Vedic literature, it encompasses a holistic understanding of life, body, mind, and spirit.[1] In today's fast-paced and competitive world, unhealthy dietary habits, excessive intake of oily and spicy foods, irregular lifestyles, environmental pollution, occupational exposure, and psychological stress have significantly contributed to respiratory ailments. The respiratory system is particularly vulnerable to inhaled toxins, allergens, and pollutants, which may act through direct toxicity or immune-mediated mechanisms, leading to conditions such as ***Kasa***.[2]

Breathing is the fundamental activity of *Pranavaha Strotas*, and forceful expulsion of air from the throat is termed *Kasa*. In *Ayurveda*, *Kasa* is considered both an independent disease and a symptom, with distinct pathogenesis, clinical features, classifications, and treatment principles. It is classified into five types—*Vataja, Pittaja, Kaphaja, Kshataja,* and *Kshayaja*—among which ***Kaphaja Kasa*** is commonly encountered in clinical practice.[3] It is characterized by profuse, thick, sweet, and unctuous expectoration along with symptoms such as *Mandagni, Aruchi, Peenasa, Utklesha,* and *Gaurava*.[4]

Kaphaja Kasa, a type of *Ardra Kasa* (productive cough), predominantly involves *Kapha* and *Vata dosha*. Though not immediately life-threatening, untreated *Kasa* may progress to complications such as *Shwasa, Shosha, Rajayakshama*, and *Raktapitta*.[5] The management principles include *Agni Deepana*, *Kapha Nissarana*, *Strotoshodhana*, and *Vatanulomana*, along with properties that facilitate expectoration, reduce inflammation, relieve bronchial congestion, and improve respiratory function.

Clinically, the features of *Kaphaja Kasa* resemble chronic bronchitis, a common respiratory disorder with considerable global prevalence. Conventional long-term therapies such as corticosteroids and bronchodilators are associated with adverse effects, highlighting the need for safer and effective management strategies.[6] In this context, Ayurvedic interventions offer a holistic and potentially safer therapeutic approach for managing *Kaphaja Kasa*.

MATERIALS AND METHODS

AIM AND OBJECTIVES

To Evaluate the efficacy of *Lavangadi Samsharkara Churna* in the management of *Kaphaja Kasa*.

Centre of study: SSNJ hospital Solapur.

Diagnostic criteria

1. Kasa vega(bouts of cough)

2. Kapha Nishtivana (Sputum)

3. Aruchi (Tastelessness)

4. Peenasa (Cold)

5. Agnimandya (loss of appetite).

Inclusion Criteria

1. Participants with signs and symptoms of *Kaphaja Kasa* i.e. *Kasa, Kapha Nishteevana, Aruchi, Mandagni* and *Peenasa.*

2. Participants between age group of 18 to 70 years irrespective of religion, socio economic status and occupation will be selected.

3. Cough persisting for more than 5 days.

Exclusion Criteria

1. Cough persisting for more than 15 days.

2. Pregnant women and lactating mothers will be excluded.

3. Patients with the complication of Kasa like Tuberculosis, Emphysema, Pneumonia etc.

Criteria of assessment

Subjective criteria[7]

Kasa vega(Bouts of cough)

Peenasa (cold)

Aruchi (tastelessness)

Kaphanisthivana (sputum)

Agnimandya (loss of appetite)

Sr. no./Parameters	Grade 0	Grade 1	Grade 2	Grade 3
Kasa vega(Bouts of cough)	No Coughing	Coughing 1 to 3 times in 24 hrs.	Coughing 4 to 6 times in 24 hrs.	Coughing more than 6 times in 24

				hrs.
Peenasa (cold)	Absent	Present	-	-
Aruchi (tastelessness)	Absent	Present	-	-
Kaphanisthivana (sputum)	No sputum	Sputum early in the morning	Sputum 2 -3 times daily	Sputum with each coughing
Agnimandya (loss of appetite)	Absent	Present	-	-

CHIKITSA

Lavangadi samsharkara Churna

लवङ्गजातीफलपिप्पलीनां भागान् प्रकल्प्याक्षसमान-मीषाम् ।

कर्षार्धमेकं मरिचस्य दद्यात्पलानि चत्वारि महौषधस्य ॥

सितासमं चूर्णमिदं प्रसह्य रोगानिमांस्तु प्रवलान्निहन्ति।

कासज्वरारोचकमेहगुल्मश्वासाग्निमांध्यग्रहणीगदेषु ॥

वंगसेन कास रोगाधिकर 57,58

Sr. no.	Dravya	Latin Name	Useful parts	Quantity	Swarupa
1.	*Lavanga*	*Syzgium aromaticum Linn.*	*Pushpakalika*	102 mg	*Churna*
2.	*Jatiphala*	*Myristica fragrans. Houtt*	*Phala*	102 mg	*Churna*
3.	*Pippali*	*Piper longum*	*Phala*	102 mg	*Churna*
4.	*Maricha*	*Piper nigrum Linn.*	*Phala*	61 mg	*Churna*
5.	*Shunti*	*Zingibare officinale. Roxb.*	*Kanda*	1.633 gm	*Churna*
6.	*Mishri*	-		2 gm	

***Dravya* and it's properties**

Sr.no.	Dravya	Rasa	Veerya	Vipaka	Guna
1.	*Lavanga*[8]	*Tikta, katu*	*Sheeta*	*Katu*	*Laghu, snigdha teekshna*
2.	*Jatiphala*[9]	*Tikta, katu*	*Ushna*	*Katu*	*Laghu, teekshana, snigdha*
3.	*Pippali*[10]	*Katu*	*Anushna*	*Madhura*	*Laghu, snigdha, teekshna*
4.	*Maricha*[11]	*Katu*	*Ushna*	*Katu*	*Laghu, teekshna*
5.	*Shunti*[12]	*Katu*	*Ushna*	*Madhura*	*Laghu, snigdha*
6.	*Mishri*[13]	*Madhura*	*Sheeta*	*Madhura*	*snigdha*
7.	*Madhu*[14]	*Madhura, kashaya*	*Sheeta*	*Katu*	*Guru, Ruksha, Picchila, Mrudu, sukshma, vishada, yogavahi*

Drug Administration details

Dose: 2 gms of churna thrice a day

Aushadhi Sevan Kala: *Pashchatbhakta (Vyan Udan Kala)*

Route of Administration: oral

Duration: 15 days

Follow up: 7th and 15th day.

Follow up and outcome

After completion of treatment there was marked improvement in signs and symptoms i.e. in *Kasa vega*(Bouts of cough), *Peenasa* (cold), *Aruchi* (tastelessness), *Kaphanisthivana* (sputum), *Agnimandya* (loss of appetite). No any *Vyapada* (complications) during full course of treatment and during follow up was seen. On follow up after 15 days, patients were satisfied with the management. There was 95% relief in the previous symptoms.

Lakshana	**Patient 1**		**Patient 2**		**Patient 3**		**Patient 4**		**Patient 5**	
	BT	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**
Kasa vega(Bouts of cough)	2	0	2	0	3	0	3	0	2	0
Peenasa (cold)	1	0	1	0	1	0	1	0	1	0
Aruchi (tastelessness)	1	0	1	0	1	0	1	0	1	0
Kaphanisthivana (sputum)	3	0	2	0	2	0	3	0	3	0
Agnimandya (loss of appetite)	1	0	0	0	0	0	1	0	1	0

DISCUSSION

Kaphaja Kasa is predominantly a *Kapha-pradhana vyadhi* with associated *Vata* involvement, characterized by *guru, manda, snigdha* and *picchila* qualities of Kapha leading to obstruction in *Pranavaha Strotas*. In the present study, *Lavangadi Samsharkara Churna* was selected based on its *Kapha-Vatahara, Deepana-Pachana, Shothahara* and *Kasahara* properties as described in *Vangasena Samhita*.[15] The formulation is indicated in *Kasa, Jwara, Arochaka, Shwasa* and *Agnimandya*, which directly correlates with the symptom complex observed in *Kaphaja Kasa*.

The *samprapti* of *Kaphaja Kasa* involves *Agnimandya* leading to *Ama* formation, which further vitiates *Kapha* and causes *strotorodha* in *Pranavaha Strotas*. The accumulation of thick *Kapha* results in productive cough *(Ardra Kasa), Peenasa, Aruchi* and *Gaurava*. Therefore, the line of treatment should include *Agni Deepana, Ama Pachana, Kapha Vilayana,* and *Vatanulomana*. *Lavangadi Samsharkara Churna* fulfills these therapeutic principles effectively.

Lavanga (Syzygium aromaticum) possesses *Tikta-Katu Rasa* and *Teekshna guna* which help in *Kapha Shoshana* and *Vilayana*. Pharmacologically, clove contains eugenol,[16] which exhibits anti-inflammatory, antimicrobial, bronchodilatory and mild anesthetic actions, thereby reducing throat irritation and bronchial inflammation.

Jatiphala (Myristica fragrans) has *Ushna Veerya* and *Teekshna guna* that aid in *Kapha-Vata shamana*. It contains myristicin and volatile oils that exhibit anti-inflammatory and expectorant activity, reducing mucus viscosity and relieving bronchial congestion.

Pippali (Piper longum) acts as a potent *Deepana-Pachana* and *Rasayana* for *Pranavaha Strotas*. Piperine enhances bioavailability of other drugs and exerts bronchodilatory, mucolytic and immunomodulatory effects. It also improves Agni, thereby correcting the root pathology of *Ama* formation.

Maricha (Piper nigrum),[17] due to its *Ushna Veerya* and *Teekshna guna,* facilitates *Kapha Vilayana* and *Strotoshodhana*. Piperine present in *Maricha* has proven anti-inflammatory and anti-asthmatic potential, improving airway resistance.

Shunthi (Zingiber officinale)[18] plays a central role due to its *Katu Rasa* and *Ushna Veerya*. It is known for its *Shothahara, Kasahara* and *Agnivardhaka* actions. Gingerols and shogaols demonstrate anti-inflammatory, antioxidant and bronchodilatory properties. It reduces bronchial hyperreactivity and improves mucociliary clearance.

Mishri acts as a soothing agent, reducing throat irritation and balancing the *Teekshna* and *Ushna* properties of other drugs.

Madhu,[19] described as *Yogavahi* in *Bhavaprakasha Nighantu*, enhances drug delivery at the cellular level. Its *Lekhana* and *Kapha-shoshana* properties help liquefy thick sputum and facilitate expectoration. Modern research supports its antimicrobial and cough-suppressant properties.

The combined formulation thus works through multiple mechanisms:

1. ***Kapha Vilayana and Nissarana*** – liquefaction and expulsion of thick sputum.
2. ***Deepana-Pachana*** – correction of *Agnimandya* and prevention of further *Ama* production.
3. ***Shothahara action*** – reduction of airway inflammation.
4. **Bronchodilation** – relief from airway constriction.
5. **Bioavailability enhancement** – via piperine and *Madhu (Yogavahi* effect).

Clinically, marked improvement was observed in *Kasa Vega, Kaphanisthivana, Peenasa, Aruchi* and *Agnimandya* within 15 days of treatment. The 95% symptomatic relief without

any *Vyapada* indicates the safety and efficacy of the formulation. The absence of complications during follow-up suggests sustained therapeutic action. The improvement in appetite *(Agnimandya)* highlights correction of the root pathology rather than symptomatic suppression alone.

Compared to long-term conventional therapies such as corticosteroids and bronchodilators, which may cause systemic adverse effects, this Ayurvedic formulation provides a safer, holistic approach addressing both symptom and *samprapti*. The small sample size is a limitation; however, the consistent improvement across all patients indicates promising clinical potential.

CONCLUSION

The present study demonstrates that *Lavangadi Samsharkara Churna* is highly effective in the management of *Kaphaja Kasa*. The formulation acts through *Agni Deepana, Ama Pachana, Kapha Vilayana, Shothahara* and bronchodilatory mechanisms. The significant reduction in cough bouts, sputum production, cold, tastelessness, and loss of appetite within 15 days indicates strong therapeutic efficacy. The absence of adverse effects further establishes its safety profile.

Thus, *Lavangadi Samsharkara Churna* can be considered a safe, economical and effective therapeutic option for *Kaphaja Kasa*, especially in early and uncomplicated cases. Further large-scale randomized clinical trials are recommended to validate these findings scientifically.

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