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IMMUNOMODULATORY HERBS IN RECURRENT KASA–SHWASA DISORDERS: AN AYURVEDIC AND CONTEMPORARY REVIEW

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ABSTRACT

Background: Recurrent respiratory disorders such as recurrent cough, allergic asthma, chronic bronchitis, wheezing disorders, and repeated upper respiratory tract infections constitute a major global health burden. Chronic inflammation, immune dysregulation, and increased susceptibility to infections contribute significantly to disease recurrence. Ayurveda offers a holistic perspective emphasizing enhancement of host resistance through Rasayana therapy and immunomodulation. **Aim:** To review the Ayurvedic concepts of recurrent Kasa and Shwasa disorders and evaluate the role of Ayurvedic immunomodulatory herbs in preventing recurrence and improving respiratory health through contemporary scientific evidence. **Materials and Methods:** Classical Ayurvedic texts including Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya, and relevant contemporary scientific literature were reviewed. Ayurvedic concepts of Vyadhikshamatva, Ojas, Bala, Agni, Ama, and Pranavaha Srotas were analyzed alongside modern pharmacological and immunological evidence regarding selected medicinal plants.

Results: Several Ayurvedic herbs including Guduchi (Tinospora cordifolia), Ashwagandha (Withania somnifera), Yashtimadhu (Glycyrrhiza glabra), Tulsi (Ocimum sanctum), Pippali (Piper longum), Vasa (Adhatoda vasica), Kantakari (Solanum xanthocarpum), and Shunthi (Zingiber officinale) exhibit significant immunomodulatory, anti-inflammatory, antioxidant, bronchodilatory, and mucoregulatory properties. These herbs help improve respiratory immunity and reduce recurrence of respiratory illnesses. **Conclusion:** Ayurvedic immunomodulatory herbs offer a comprehensive therapeutic approach for enhancing Vyadhikshamatva, restoring respiratory health, reducing airway inflammation, and preventing recurrent Kasa-Shwasa episodes. Further clinical trials and translational research are required to establish standardized integrative treatment protocols.

KEYWORDS: Kasa, Shwasa, Vyadhikshamatva, Rasayana, Immunomodulation, Respiratory Disorders, Ayurveda.

INTRODUCTION

Respiratory disorders remain among the most common causes of morbidity worldwide. Recurrent respiratory tract infections, allergic asthma, chronic bronchitis, recurrent cough, and wheezing disorders significantly affect quality of life and impose substantial healthcare costs. Conventional treatment strategies mainly focus on controlling symptoms through bronchodilators, corticosteroids, antihistamines, and antimicrobial agents. Although effective in acute management, these interventions often fail to address the underlying susceptibility responsible for disease recurrence.

Modern immunology increasingly recognizes the importance of host immune regulation in preventing recurrent respiratory illnesses. Strengthening innate and adaptive immunity has emerged as a promising preventive strategy.

Ayurveda conceptualizes respiratory health through the integrity of Pranavaha Srotas and maintenance of Vyadhikshamatva. Recurrent Kasa (cough) and Shwasa (dyspnea/asthma) are considered manifestations of systemic imbalance involving impaired Agni, accumulation of Ama, Dosha aggravation, and depletion of Ojas. Rasayana therapy aims to restore physiological balance, enhance immune competence, and improve resistance against disease recurrence.

This review explores Ayurvedic concepts and scientific evidence supporting

immunomodulatory herbs used in recurrent Kasa-Shwasa disorders.

MATERIALS AND METHODS

Study Design

Narrative review of classical Ayurvedic literature and contemporary biomedical research. Sources of Data.

Ayurvedic Sources

- Charaka Samhita
- Sushruta Samhita
- Ashtanga Hridaya
- Bhavaprakasha Nighantu
- Dhanvantari Nighantu

Modern Sources

- PubMed
- Google Scholar
- Scopus-indexed journals
- Research articles on immunomodulatory medicinal plants

Inclusion Criteria

- Studies involving immunomodulatory Ayurvedic herbs
- Research related to respiratory disorders
- Experimental and clinical studies
- Classical Ayurvedic references concerning Kasa, Shwasa, Rasayana, and Vyadhikshamatva.

METHODOLOGY

Relevant Ayurvedic concepts were reviewed and correlated with modern immunological mechanisms. Pharmacological actions and clinical applications of selected herbs were analyzed and synthesized.

RESULTS

Ayurvedic Understanding of Recurrent Kasa-Shwasa Nidana (Etiological Factors)

Common causative factors include.

- Sheeta Ahara and Vihara

- Exposure to dust and smoke
- Allergens
- Excessive exertion
- Rooksha Ahara
- Abhishyandi Ahara
- Seasonal variations

These factors primarily aggravate Vata and Kapha Dosha. Role of Agni and Ama.

Mandagni results in incomplete digestion and formation of Ama. Ama acts as a pathological substrate causing.

- Systemic inflammation
- Srotorodha
- Impaired immunity
- Tissue dysfunction

Pranavaha Srotodushti

Ama combines with aggravated Kapha and obstructs Pranavaha Srotas causing:

- Sanga
- Vimargagamana
- Airway obstruction
- Cough and wheezing Vyadhikshamatva

Acharya Charaka describes Vyadhikshamatva as the body's capacity to.

1. Resist disease occurrence (Vyadhi-Utpada Pratibandhatva)
2. Resist disease progression (Vyadhi Bala Virodhitva) Ojas and Bala

Healthy Ojas supports

- Immune competence
- Respiratory resilience
- Disease resistance

Ojo-Kshaya predisposes individuals to recurrent respiratory illnesses.

Major Immunomodulatory Herbs

Clinical Applications

Herb	Botanical Name	Ayurvedic Action	Modern Pharmacological Action
Guduchi	Tinospora cordifolia	Rasayana, Tridoshaghna	Immunomodulatory, antioxidant, anti-inflammatory
Ashwagandha	Withania somnifera	Balya, Rasayana	Adaptogenic, immune enhancing
Yashtimadhu	Glycyrrhiza glabra	Kasa-Shwasahara	Anti-inflammatory, antiviral
Tulsi	Ocimum sanctum	Kapha-Vatahara	Immunomodulatory, antimicrobial
ippali	Piper longum	Deepana, Rasayana	Bioavailability enhancer, bronchodilator
Vasa	Adhatoda vasica	Shwasahara	Bronchodilator, expectorant
Kantakari	Solanum xanthocarpum	Kaphahara	Anti-asthmatic, anti-inflammatory
Shunthi	Zingiber officinale	Deepana, Pachana	Antioxidant, anti-inflammatory

Recurrent Upper Respiratory Tract Infections

- Improved immune surveillance
- Reduced infection frequency
- Enhanced mucosal defense

Pediatric Respiratory Vulnerability

- Supports Bala and Ojas
- Improves resistance against recurrent infections

Allergic Asthma

- Cytokine regulation
- Mast cell stabilization
- Reduced airway hyper-responsiveness

Chronic Bronchitis

- Mucolytic action
- Anti-inflammatory effects
- Improved airway clearance

Post-Viral Cough

- Accelerated tissue healing
- Reduced residual inflammation

DISCUSSION

Ayurveda emphasizes enhancement of host defense rather than solely targeting pathogens. The concept of Vyadhikshamatva closely parallels modern concepts of innate and adaptive immunity.

Impaired Agni and Ama formation may be interpreted through contemporary understanding as metabolic dysfunction, chronic inflammation, and immune imbalance. Pranavaha Srotodushti correlates with airway inflammation, mucus hypersecretion, and bronchial obstruction observed in chronic respiratory diseases.

Several Ayurvedic herbs demonstrate immunomodulatory activities through diverse mechanisms.

- Modulation of cytokine production
- Enhancement of macrophage activity
- Antioxidant protection
- Mast cell stabilization
- Bronchodilation
- Regulation of inflammatory pathways

Guduchi enhances macrophage function and adaptive immune responses. Ashwagandha acts as an adaptogen, reducing stress-induced immune suppression. Yashtimadhu exhibits antiviral and anti-inflammatory activities beneficial in respiratory infections. Tulsi contributes antimicrobial and immunomodulatory effects, while Pippali improves respiratory function and drug bioavailability.

The integration of these herbs within Rasayana protocols may provide sustainable preventive strategies for recurrent respiratory disorders. However, large-scale randomized clinical trials remain necessary for validation.

CONCLUSION

Recurrent Kasa-Shwasa disorders arise from complex interactions involving Dosha imbalance, impaired Agni, Ama accumulation, Pranavaha Srotodushti, and diminished Vyadhikshamatva. Ayurvedic immunomodulatory herbs provide a multidimensional therapeutic approach that addresses both disease manifestations and underlying susceptibility. Botanicals such as Guduchi, Ashwagandha, Yashtimadhu, Tulsi, Pippali, Vasa, Kantakari, and Shunthi possess substantial traditional and scientific evidence supporting their role in

respiratory immunomodulation. These herbs may reduce disease recurrence, improve respiratory function, and enhance overall health.

Future evidence-based research integrating Ayurvedic principles with modern immunological frameworks may facilitate the development of standardized preventive and therapeutic protocols for recurrent respiratory diseases.

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