

THE ROLE OF AYURVEDIC THERAPY IN BRONCHIAL ASTHAMA (TAMAK SHWASA)

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ABSTRACT

Tamak shwasa is hampering day to day life of many patients. Many of them are steroid dependent leading to serious orthopedic symptoms. Hence here is an attempt to prevent attacks of tamak shwasa with ayurvedic formulation like Bharangyadi Kwatha and Shwasakuthar Rasa in 72 patients. Objective criteria of PFT is implied for the same. 29 person patients received poor response whereas majority showed improvement in objective parameters. Thus Tamaka Shwasa with Ayurvedic formulations covers preventive, therapeutic, cost effective and with no side effect remedies.

KEYWORDS

Tamak Shwasa, Bronchial Asthama, Bharangyadi Kwatha, Shwasakuthar Rasa, PFT

INTRODUCTION

Tamaka Shwasa (Bronchial Asthama) disturbs the daily activities by producing kasa and shwasa krucchrata. Bronchial Asthma to which Tamaka shwasa is compared is a chronic inflammatory condition of the airways that causes breathlessness, wheezing and cough. As this condition exacerbates, the routine work is

hampered more and may cause even death if the attack is severe and not attended immediately.¹

So it's the time to revalidate the efficacy of the Ayurvedic medicines against modern parameters and thereby upgrading our knowledge for better management of Tamaka Shwasa. Hence there is need to find out an effective management of Tamaka Shwasa with Ayurvedic

formulations that covers preventive, therapeutic, cost effective and with no side effect remedies.

AIM

To evaluate the efficacy of ayurvedic therapy in bronchial asthma (Tamak Shwasa)

OBJECTIVES

To evaluate the efficacy of Bharangyadi Kwatha and Shwasakuthara Rasa in Bronchial Asthama

MATERIALS AND METHODS

Inclusion Criteria:

- Difficulty in breathing
- Wheezing sounds
- Less expectoration
- Relief after expectoration
- Age group 12 to 70 years

Exclusion Criteria:

- Diabetes mellitus
- Tuberculosis
- Chronic Obstructive Pulmonary Disease
- Emphysema
- Diabetes mellitus with Tuberculosis

Study Setting:

OPD and IPD of Kayachikitsa Dept. of Shree Saptashrunji Ayurved Mahavidyalaya, Nashik.

Drug and Doses:

- Bharangyadi Kwatha² – 30ml BD before meal.

- Shwasakuthar Rasa³ - 500mg BD Before meal.

Criteria for Assessment of Results:

➤ Subjective Criteria

- Discontinuation of modern medicine.
- Decrease or complete eradication in frequency of attacks.
- Decrease or complete eradication of acute exacerbation in particular season.
- Relief in symptoms - hyperventilation, suffocation, wheezing sound, difficult expectoration, cough, dyspnoea, insomnia.

➤ Objective Criteria

- Pulmonary function tests

DEMOGRAPHY

Male-Female Ratio	38:34
Mean Age (Years)	40.50
Mean duration of symptoms (yrs)	4.05

DISCUSSION AND RESULTS

Total **111** patients were enrolled as per inclusion criteria.

29 patients dropped out irrespective of any cause.

10 excluded as per exclusion criteria was not fulfilled after few days.

72 patients were analyzed.

Results:

Marked Relief (36.11%)	26 Patients
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Intermediate Relief 19 Patients
(26.38%)

No Relief 27 Patients
(37.50%)

CONCLUSIONS

- Objective relief (PFT improvement) in **27** patients out of **72**.
- Patient with mild Asthma responded better (**22** out of about **27** patients had Infrequent Episodic Asthma {mild Asthma} and in **5** patients that was their first attack).

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- However, **8** out of these **27** patients with marked relief also required allopathic treatment with ayurvedic treatment (i.e.**33%**).
- **20** non responders (i.e.**7** Intermediate relief category and **13** no relief category) were put on inhalers and they all had symptomatic and objective improvement.
- Out of **101** patients, **29** patients (29%) dropped out, which could be an indication of a poor response.