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Role of Shwasahara Dashemani in the Management of *Tamakashwasa* (bronchial asthma) - A single case study

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Abstract

Ayurveda descried five types of *Shwasa Roga* and among these, *Tamaka Shwasa* is one. *Tamaka Shwasa* is a "*Swantarta*" *Vyadhi* i.e. independent disease entity and having its own etiologic, pathophysiology and management. The parallel disease entity in contemporary medical science to this disorder is Bronchial Asthma. The present effort is intended to study the efficacy of such formulations in reducing the sign and symptoms of childhood asthma. A case of 10yr old male patient who presented features of *Tamaka Shwasa* (Bronchial asthma) was treated by internal *Ayurvedic* Medicine, *Shwasahara Dashemani Avaleha* showed marked improvement in cardinal feature such as breathlessness, cough, Night awaking etc. and some hematological Parameters, discussed here.

Key Words – Bronchial asthma, Shwasahara dashemani, Tamaka shwasa

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Introduction:

Tamaka Shwasa is basically a disorder of Pranavaha Srotasa while other Srotasa are also vitiated. In this condition Vaavu gets vitiated form its normalcy due to obstruction made by Kapha. This vitiation leads to severe episodes of breathlessness. TheTamaka shwasa entity in modern medical science to this disorder is Bronchial Asthma. Bronchial Asthma is a chronic inflammatory condition of the lung airways resulting in episodic airflow obstruction. [2] The prevalence of Bronchial Asthma has increased continuously since the 1970s, and now affects an estimated 4 to 7% of the people worldwide. [3] Childhood Bronchial Asthma has multifactor causation. Geographical location, environmental, racial as well as factors related to behaviors and life-styles are associated with the disease. [4-

Case Presentation:

A10 years old male patients from Jamnagar came in OPD of Kaumarbhritya department IPGT & RA with complains of common cold since one month, cough since 15 days and breathlessness since 2 days. He has

difficulty in breathing due to the coughing, most of time in night, Patient has history of recurrent common cold since age of 3 and 1/2 Years. Breathlessness is found since the age of 5 years. Immunity is very low because get very easily infected with URTI as any seasonal changes, cold, weather or in winter season. Patient has family history (Paternal) of disease.

On examine the Inspiration was shallow, and expiration was prolong, chest was found congested, Air entry bilaterally equal, wheezing and crepitation sound was found. X-ray chest shows no any structural abnormality

Treatment Given

Internal – Shwasahara Dashemani Avaleha 27 gm in divided 3 doses (Dose calculated according to Sharangadhara Samhita) for 42 weeks and patient was advice not consume any food or drink at least for 15 minutes after taking medicine.

Table- 1: Ingredients of Shwasahara Dashemani Avaleha

Sr. No.	Drug name	Scientific name	Part used/Shushka	Ratio
1	Shati	Hedychium spicatum. Ham exsmith	Shushka kand	1 part
2	Pushkara mool	Inula racemosa. Hook. F	Moola	1 part
3	Amlavetasa	Rheum emodi. Wall	Patra , Bija	1 part
4	Ela	Elettaria cardamomum Maton	Phala	1 part

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5	Hingu	Ferula narthex Boiss	Niryasa	1 part
6	Agaru	Acquilaria agallocha Roxb.	Kashtha	1 part
7	Sursa	Ocimum sanctum Linn.	Panchanga	1 part
8	Tamalaki	Phylenthus niruri Linn.	Panchanga	1 part
9	Jivanti	Laptidinia reticulate W & R	Panchanga	1 part
10	Chanda	Angelica glauca Edgw.	Moola	1 part
11	Ghrit			q.s
12	Sharkara			q.s

[#] Madhu was added as Prakshepa

Table-2: Effect of therapy on Subjective Parameters:

Parameter	Before Treatment	After treatment
Breathlessness	Grade 3	Grade 1
Paroxysm of breathlessness	Grade 2	Grade 1
Cough	Grade 3	Grade 1
Awaking in night	Grade 1	Grade 0
Breath holding time	36 sec	55 sec

Table-3: Effect of therapy on Objective Parameters:

Parameter	Before Treatment	After treatment
AEC count	800	300
ESR	06	02
ACQ	8	2
GINA	3	1
ACT	14	18

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Images of Investigations:

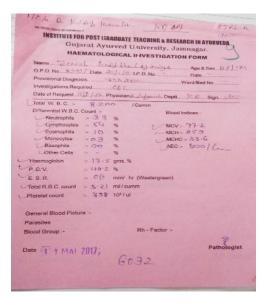


Fig-1: Before Treatment

Discussion:

Asthma is associated with T helper cell type-2 (Th2) immune responses, which are typical of other atopic conditions. Various allergic (e.g., dust mites, cockroach residue, furred animals, moulds, pollens) and nonallergic (e.g., infections, tobacco smoke, cold air, exercise) triggers produce a cascade of immune-mediated events leading to chronic airway inflammation. Elevated levels of Th2 cells in the airways release specific cytokines, including interleukin (IL)-4, IL-5, IL-9 and IL-13, that promote inflammation eosinophilic immunoglobulin E (IgE) production by mast cells. IgE production, in turn, triggers the release of inflammatory mediators, such as histamine and cysteinyl leukotrienes, that cause bronchospasm (contraction of the smooth muscle in the airways), edema

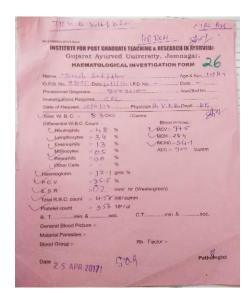


Fig-2: After Treatment

(swelling) and increased mucous secretion (mucous hyper secretion), which lead to the characteristic symptoms of asthma.

In the management of Tamaka ShwasaAcharya says, the main aim is to remove the obstruction made by Kapha and normalized the function of vayu. Acharya charaka mention, there is a two type of chikitsain the management of Tamaka Shwasa i.e. Shamana and Brahmana Chikitsa. Shwasahara dashemani has the property Shamana as well Shodhanabecause themost of drug use in combination have the Rasa as Tikta and katu, Virya – ushna, Vipaka- katu, Guna-Laghu Ruksha and snigdha. These property helps in remove to obstruction (Shodhan) and correct the function of Vayu (Shamana). Thus we can says that it is an herbal combination of medicine which is used in

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the *TamakaShwasa*, is very effective drugs without any adverse reaction. This combination has also antitussive, anti-inflammatory, antihistaminic, Mast cell stabilizer, immunomodulator property. [7] Due to this property *Shwasahara Dashemani* is an ideal drug for Management of *Tamaka Shwasa*.

Mode of action of drug:

The formulation is having the dominance of Katu, Tikta and Kashaya Rasa, Laghu, Ruksha and Tikshna Guna, Ushna Virya followed by Shita Virya, Katu Vipaka and Tridoshahara predominantly Vatakaphahara properties. The formulation acts by removing the obstruction made by Kapha in the Pranavaha Srotas (Anulomana and Srotoshodhana) due to dominance of Katu Rasa, Laghu Guna, Ushna Virya and Katu Vipaka properties and thus leading to Sampraapti Vighatana. the combination brings the normalcy of all Dosha esp. Vata and Kapha.

Hematological Changes:

The drug shows better effect on hematological changes in Neutrophils, Lymphocyte, Eosinophil, ESR and AEC. Eosinophil's count and AEC markedly decrease Comparison to other parameter. Thus we can show this drug combination is very effective and useful to treat the Bronchial Asthma.

Conclusion:

After observation of all data we conclude that the holistic approach of Ayurveda best acts on case study of *Tamaka Shwasa*

(Bronchial asthma) and gives better relief to the patient. There were no adverse effects found during the Ayurvedic medication.

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