

MANAGEMENT OF CHILDHOOD BRONCHIAL ASTHMA (*TAMAK SHWASA*) WITH AYURVEDIC MEDICINES -A CASE STUDY

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ABSTRACT

Tamak Shwasa (Bronchial Asthma) is one of the most common diseases of childhood, which can have a negative effect on psychological and social well-being in childhood. It can disrupt sleep, play and other activities. It can also hamper school activities. The etiopathogenesis, signs, and symptoms of *Tamaka Shwasa* may be correlated with Bronchial Asthma. Children with asthma presents with cough wheeze shortness of breath and experience chest tightness. Bronchodilators and Corticosteroids are the most effective class of medication currently available for the treatment of Asthma. These medicines can effectively relieve bronchospasm, but do not treat the underlying airway inflammation and causes side effects. *Ayurvedic* medicines are helpful to decrease the recurrence and improve immunity. This article mentions a case treated with *Ayurvedic* medicines at D.Y. Patil Ayurved Hospital, Nerul, Navi Mumbai. The patient was taking inhaled bronchodilators and corticosteroids for last 1 yr before starting with *Ayurvedic* medicines. The effect of *Ayurvedic* treatment on the patient within 6 months has been significant and patient has stopped taking inhaled bronchodilators and corticosteroids.

Keywords: *Tamakshwasa*, Bronchial Asthma, *Ayurvedic* Management

INTRODUCTION

Bronchial Asthma (*Tamak Shwasa*) is the most common chronic allergic disorder in childhood and third leading cause of hospitalization under the age of 5 years. It affects school attendance and school performance. It can also disrupt sleep, play and other activities and growth of the

child[1]. The signs, symptoms, and etiopathogenesis of Bronchial Asthma explained in modern science have lot of similarities with the disease *Tamaka Shwasa* in *Ayurved*. Bronchial Asthma is a chronic inflammatory condi-

tion of the lung airways resulting in episodic airflow obstruction[2].

REVIEW OF THE DISEASE-

The word *Shwasa* is used for both Physiological and Pathological states.

Tamaka Shwasa comprises of two words i.e. *Tamaka* and *Shwasa*

Tamakashwasa literally means 'burying into darkness due to shortness of breathes'.

Both *Ayurveda* and modern medical Science agree regarding the *Nidana* of the disease as host factors (*Nija Hetus* – *Doshadushti* and *Ama*) and Environmental factors (*Agantuja Hetus* – *Raja, Dhuma, Pragvata*, etc). According to *Ayurveda* the vitiated *Pranvayu* combines with deranged *kapha dosha* in the lungs causing obstruction in the *Pranavaha Srotasa* (Respiratory System). This results in gasping, labored breathing and respiratory distress. This condition is called *Shwasa Roga*

Hence *Nidana Parivarjanam* plays a key role in the management strategy in both sciences. Asthma seems to be more common in boys than in girls in early childhood [3,4]

CASE STUDY

- Patient- 6 years boy from Christian community
- Weight- 20 Kg
- Height-118 cm
- **History of Present illness** -
- **Duration**
- *Kasa* (Cough with sputum) - on and off since 2 yrs
- Shortness of breath - on and off since 2 yrs
- Night Awakening - on and off since 2 yrs

- **Physical Examination** -
- Increased RR-36/mins - Temp-97 F
- Wheezing all over the chest - Heart rate -124/min

Diseased History-

- Recurrent URTI with the symptoms of cough with sputum, shortness of breath, and sleep disturbances since last 2 yrs. He is on inhaled Asthalin and Budecort since last 1 year.
- No Associated conditions like Eczema.
- Occasional episodes of Asthma, requires emergency medical treatment.

Diet History-

- Diet- Taking milk at bed time.
- Fried, chilly, too cold, sour, heavy preparations
- Rukshanna particularly Toast, Popcorn etc.
- Mansa, Dadhi, Bread, Burger, Pizza, Cheeze, Paneer etc
- Treatment given –
- *Snehan* with Til Taila with lavan followed by *Nadi Swedan of Dashmool Bharad on Urah pradesh* (Application of the oil over the chest followed by sudation).
- *Sitopaladi choorna* + *Yashtimadhu choorna* 1gm twice daily with honey
- *Swadishta Virechan Choorna* 500 mg at night with warm water
- Syp Septilline 5ml twice daily
- Syp Pachnam 5ml twice daily before meals
- Proper *Pathya* - *Apathya* is advised to follow
- After three month treatment patient getting much relief in the symptoms
- Then following treatment is added
- *Vardhman Pippali Rasayana*(Charaka Samhita Chikitsa Sthana 1.3/36-40)

- *Chyavanprasha Avleha* -2.5 gms in the morning

After completion of the 6 months treatment patient observed for subjective and objective parameters and assessment was done before and after treatment

ASSESSMENT AND RESULT – SCORE FOR THE ASSESSMENT OF ASTHMA

Symptoms /Score	0	1(Mild)	2(Moderate)	3(Severe)
Kasa (cough)	Nil	<2days/week	>2days/week	Daily
Shwasakrichhrata (Shortness of Breath)	Nil	On Exertion	On regular activities	Throughout the day, at rest also
Frequency of Shwasa vega	Nil	<2days/week	>2days/week	Daily
Nighttime awakning	Nil	<1day/month	>2days/week	often
Need of SABA	Nil	<1day/week	>2days/week	Daily
RR and	20-30	30-34/min	35-40/min	>40/min
Pulse Rate	100-110	110-120/min	120-130/min	130-150 /min
Wheezing	Absent	Mild only expiratory	Loud throughout exhalation	Loud throughout inhalation and exhalation
PEFR (Peak Expiratory Flow Rate)	predicted	>80% predicted	>50%but <80% predicted	<50% Predicted

SHOWING THE RESULT OF ASSESSMENT

Symptoms and signs/Score	Before Treatment	After treatment
<i>Kasa</i>	3	0
<i>Shwasakrichhrata</i> (Shortness of Breath)	2	0
Frequency of <i>Shwasa Vega</i>	3	1
Nighttime awakening	2	0
RR	2	0
Pulse Rate	2	0
Wheezing	2	1
PEF	2	0
Total Score	18	2

DISCUSSION

In *Tamak-Shwas* the imbalanced status of *Vata* & *Kapha Dosha* remains in *Lina - Awastha*. *Bahya Snehana on Uras by Til Taila with lavan*, as an initial course of action followed by *Swedana Karma* helps for liquefaction of the *Grathita Kapha*. Vitiation of all these *Dosha* depends on the status of *Agni*, so *Syp Pachanam* (Millenium Pharma) is used for *Deepana – Paachana*. *Swadishta virechan choorna* is used for the *Vatanuloman and Mrudu Virechana*. The site of origin of *Shwasa*

roga is “*Pitta Sthana Samudhbhava*.” And this *Pitta Sthana* is described by *Chakrapani* as *Adho Amashya*. At this place the main pathology of *Shwasa Roga* takes place and the predominant *dosha pitta* is present here. And to purify the site of origin *Virechana* is advocated. [3, 4] (Ch. Su.20/18)

Sitopaladi choorna with its expectorant and lubricating action helps to clear congestion (*Kapha*) and soothe the delicate membranes of the lungs and throat. Owing to its sweet taste it is easily accepted by children. [5]

Ayurvedic literature describes *Yashtimadhu* as a *Rasayana* (Rejuvenating) herb. It is mainly used as an Expectorant, Antitussive and Anti-inflammatory. [6]

Chyavanprasha Avaleha is one of the *Rasayana* (Rejuvenating) *kalpa* especially for the diseases of *Pranavaha Strotas*. It has Antioxidant and Immuno modulatory action. [7]

Vardhaman Pippali Rasayana- Pippali Vardhamana Ksheerapaka i.e. Pippali is taken along with milk by gradually increasing the fruits of Pippali's to 1 per day. After 10 days, this is gradually decreased. It has mast cell Stabilization property Immunomodulatory, Anti- Asthmatic action.[8]

CONCLUSION

Ayurvedic medicines are useful in increasing the duration between two asthmatic attacks and reducing the requirement of bronchodilator puffs & improving PEF.

Thus by taking all these facts into consideration it can be said that there is major advantage of these classical formulations as they decreased the frequency and severity of Asthmatic attacks and allow the patients to continue their day-to-day activities. *Ayurvedic* medicine may help to decrease the recurrence, improve immunity, and check symptoms naturally. These medicines are free from the hazardous side-effects and do not develop the resistance.

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