



AN AYURVEDIC VIEW ON GUDA SHAREERAM- A REVIEW ARTICLE

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ABSTRACT

Bronchial asthma is a disease involving the diffuse inflammation of the airways presented with complaints of breathlessness, cough, chest tightness, and wheezing. It has influenced the lives of children physically, emotionally, and socially. The prevalence of Bronchial Asthma is increasing alarmingly nowadays due to excessive pollution, overcrowding, occupational conditions, stress, poor hygiene, etc. In *Ayurveda*, it can be manifested as *Tamaka Shwasa* due to similarities in signs, & symptoms.

Ayurveda describes five types of *Shwasa Roga*; *Tamaka Shwasa* is one of them. *Tamaka Shwasa* is a “Swatantra” *Vyadhi*. It is a disorder of *Pranavaha Srotas*, while other *Srotas* are also vitiated. As per Acharya Charaka, both the *Vata* and *Kapha Doshas* have been considered to be the chief *Doshas* involved in the pathogenesis of *Tamaka Shwasa*. Those *Aushadha*, *Ahara*, and *Vihara* are *Kapha-Vata Shamaka*, *Ushna*, and *Vatanulomaka* should be used in *Shwasa Chikitsa*.

Aims and objective: Key findings to reveal the efficacy of *Ayurvedic* formulations in *Tamaka shwasa* addressing underlying imbalances in the body's *Doshas* (biological energies).

Material and methods: A six-year-old boy presented in the Outdoor patient department of Kaumarbhritya, Rishikul Campus (UAU) Haridwar Uttarakhand, on 16/03/2024 with complaints of – Recurrent cold and cough with sputum, difficulty in breathing during climbing upstairs and on exertion since 1-1½ years & tend increasing symptoms on seasonal variation.

Result: It was observed that the intervention of ayurvedic formulation showed significant results in *Tamaka shwasa* patients.

Keywords: *Swatantra, Pranavaha Srotas, Ushna, Vatanulomaka*

INTRODUCTION

Tamaka shwasa is a disease of the respiratory tract that mainly affects the air passages. It is characterized by inflammation and narrowing of the airways. In modern medicine, it resembles bronchial asthma.

According to *Acharya Charaka*, due to *Nidana sevana*, the vitiated *Vata* enters the *pranavaha* srotas (Respiratory Channels) and provokes the *Urastha Kapha* (Kapha staging in the chest). This provoked *Kapha* to obstruct the *Pranavaha srotas* (Respiratory Channels), giving rise to five types of *Hikka* and *Shwasa*⁽¹⁾. In *Shwasa Roga*, the diets and habits that provoke *Kapha* initiate the basic pathogenesis. *Vitiated Kapha* in the *Pitta sthana* circulates in the body as *Ama*. On the contrary, the aggravation of the *vata*, either by diet or habits, triggers the *Pranavaha Sroto Vaigunya* along with *Vitiated Kapha* or *Ama*. This leads to *Rasavaha Sroto Dushti*. Once the *Srotodushti* occurs, the *Prana Vayu* gets abnormally influenced by the *Sanga* and *Vimargagamana*. This, in turn, is manifested as *Shwasa Roga*⁽²⁾.

According to the *Samprapti* of *Tamaka Shwasa*, drugs should have *Kapha Vata Shamaka, Ushna*, and *Vatanulomaka* properties for *Shamana* treatment of *Tamaka shwasa*.

Ayurveda is the best way to effectively and safely manage the condition without inducing any drug dependency. Various *Shodhana* procedures and the use of internal medication (*Shamana*) not only detoxify the body but also provide nutrition, increase the elasticity of lung tissue, and develop the body's natural immunity, thus decreasing the episodic recurrence of the disease and providing long-term relief to the patient.

CASE HISTORY:

Chief Complaints: A 6-year-old male patient with his father was brought to the outpatient department of *Kaumarbhritya, Rishikul Campus Haridwar*, with the complaint of –

- Recurrent cold and cough with sputum, difficulty breathing during climbing upstairs and on exertion for 1-1½ years & tend to increase symptoms on seasonal variation.

History of presenting complaints: According to the Patient's father, he was asymptomatic before 1-1 ½ years. He had complaints about recurrent colds and cough with sputum. He also complained of difficulty breathing while climbing upstairs or on exertion. These symptoms get aggravated by seasonal variation. He was suffering from these complaints over 1-1 ½ years. For these complaints, the patient went to an allopathic hospital, where proper investigations were carried out, and the patient was diagnosed with bronchial asthma. He took some NSAIDs internally, along with the regular use of a mouth inhaler for 3 months and got symptomatic relief. But the recurrence of symptoms is still there. So, the Patient came to *Rishikul Campus* on 16th March 2024 for further betterment.

Past Medical & Surgical History: No significant history was noted.

Family History: No significant history was noted.

Treatment History: He has been on a *Foracort 200* (*Formoterol Fumarate* and *budesonide*) inhaler for the past 3 months.

General Examination:

General Condition: Average

Build & Nutrition: good

Pallor: Not present

Cyanosis: Not present

Clubbing: Not present

Lymph Node: Not Enlarged

Hairs: Dry, thin hair

Scalp: Normal

Nails: Pinkish white

Skin: Dry

Table no. 1

Anthropometry	Vitals
Weight: 17.35kg (Expected Wt. :20 kg)	Temperature: 98.10 F
Height: 114cm (Expected Ht. :113cm)	Pulse Rate: 86/min
Head Circumference: 52 cm	Respiratory Rate: 28/min
Chest Circumference: 56 cm	SpO2: 95%
Mid-upper arm circumference: 17 cm (Rt.), 17cm (Lt.)	Blood pressure: 100/70 mm Hg

Immunisation history- Immunization has been completed as per age.

History of allergy- The patient does not have any allergies.

Dietary History - Vegetarian diet

Qualitative- *Rice, dal, chapati*, vegetables, fruits.

Quantitative – Breakfast: - 1chapati with ½ bowl veg

Lunch: 1½ bowl Dal with rice

Dinner: 1½ *chapati*, 1/2 bowl of veg

Appetite- Reduced

Bowel- Regular (Consistency- well formed with Frequency 1 time/day).

Micturition – Normal (Frequency 5-6 times/day)

Thirst- 1- 1½ glass/day

Physical Activity – Less

Sleep - Sound sleep (approx. 7-8 hours a day)

Ashtavidha Pariksha:

<i>Nadi: Kapha pradhana Vataja</i>	<i>Shabda: Spashta</i>
<i>Mala: Nirama</i>	<i>Sparsha: Snigdha, Samsheetoshana</i>
<i>Mutra: Samanya Pravritti, Peetabha Varna</i>	<i>Drikka: Samanya</i>
<i>Jihwa: Alipta</i>	<i>Aakriti: Samanya</i>

Samprapti Ghataka:

<i>Dosha: Vata Kapha Pradhana and Pitta Apradhana</i>	<i>Udbhavasthana: Pitta sthana</i>
<i>Dushya: Rasa</i>	<i>Vyaktasthana: Ura pradesha</i>
<i>Srotasa: Pranavaha, Rasavaha Srotas</i>	<i>Roga marga: Bahya & Abhyantara</i>
<i>Srotodushti: Sanga, Vimargagamana</i>	<i>Agni: Jataragnimandhya, Rasa Dhatwagni mandya</i>
<i>Roga Marga: Abhyantara</i>	<i>Vyadhi Swabhava: Chirakari, Yapya</i>

Treatment Protocol: After a thorough interrogation with the patient and his father regarding the diet, lifestyle and habits of the child and the history of present illness and after a proper evaluation regarding the present condition of the child, the treatment was planned with internal medications along with *Yoga & Marma* therapy.

Duration of the treatment: 6 months

Period of assessment: The patient was assessed at each interval of 10 days.

OPD Visit	Medication	Duration
First Visit	1. <i>Swashkasachintamani Rasa</i> - 65mg <i>Praval Bhasma</i> -65mg <i>Ashwgandha Churna</i> -250mg <i>Haridra Khanda</i> -250mg <i>Brahmi Vati</i> - 65mg <i>Shunti churna</i> -250mg <hr/> 1*3 with honey (empty stomach) 2. <i>Amastha Avaleha</i> – ½ tsf tid 3. Syp Bresol- 10ml bid 4. <i>M-Balarasayana</i> -1gm with <i>Guda</i> at night	10 days
Second visit	1. <i>Shwasakasachintamani Rasa</i> - 65mg <i>Pravala Bhasma</i> -65mg <i>Ashwagandha Churna</i> -250mg <i>Haridra Khanda</i> -250mg <i>Brahmi Vati</i> - 65mg <i>Shunti churna</i> -250mg <i>Giloy Satva</i> -65mg <hr/> 1*3 with honey (empty stomach) 2. <i>Amastha Avaleha</i> – ½ tsf tid 3. Syp Bresol- 10ml bid 4. <i>M-Balarasayana</i> -1gm with <i>Guda</i> at night	10 days
Third visit	1. <i>Shishu Bharan Rasa</i> - 65mg <i>Pravala Bhasma</i> -65mg <i>Ashwagandha Churna</i> -250mg <i>Haridra Khanda</i> -250mg <i>Brahmi Vati</i> - 65mg <i>Shunti churna</i> -250mg <i>Giloy Satva</i> -65mg <hr/> 1*3 with honey (empty stomach) 2. <i>Amastha Avaleha</i> – ½ tsf tid 3. Syp Bresol- 10ml bid 4. <i>M-Balarasayana</i> -1gm with <i>Guda</i> at night	10 days
Fourth Visit	1. <i>Sitopaladi Churna</i> -1gm <i>Madhuyashti churna</i> -500mg <i>Sudh. Tankana Bhasma</i> -125mg <i>Godanti Bhasma</i> -125mg <i>Pravala Panchamrita Rasa</i> -65mg <i>Giloy Satva</i> -125mg <hr/> 1*2 with honey 2. Syp Septillin -10ml bid 3. Syp Koflet Ex- 10ml tid	10 days
Fifth Visit	1. <i>Sitopaladi Churna</i> -1gm <i>Madhuyashti churna</i> -500mg <i>Sudh. Tankana Bhasma</i> -125mg <i>Godanti Bhasma</i> -125mg <i>Pravala Panchamrita Rasa</i> -65mg	10 days

	<p><i>Giloy Satva</i> -125mg</p> <hr style="width: 50%; margin: auto;"/> <p>1*2 with honey</p> <p>2. <i>Amastha Avaleha</i> – ½ tsf tid</p>	
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Advice: Increase your water intake, avoid junk food, and do regular Yoga: Anuloma—Viloma, Bhramari Pranayama, etc. Marma therapy: Kshipra, Indra basti, Talahridaya, Aani, Urvi—stimulate these Marma for 8 sec or 12 times three times a day.

RESULT:

The patient was instructed to follow up every 10 days. All the signs and symptoms before treatment are likely to be pacified by *shamana chikitsa*. According to his guardians, all symptoms were absent at the last follow-up. Treatment was continued for 6 months to get complete relief with no recurrence, and the patient was advised to follow the *pathya* and *apathya* in his daily schedule.

DISCUSSION & CONCLUSION

Tamaka Shwasa is a *Kapha-Vataja Pradhana Vyadhi*, *Nidana Sevana* leads to the vitiation of *Vata* which in turn vitiates *Kapha* leading to further vitiation of *Rasa* and impeding the function of *Prana vata*. Here, *Vata* is captured by the *Avarana* of *Kapha* in this disease. Due to this *Pranavaha & Rasavaha Srotodushti* occurs, causing symptoms such as *Pinasa* (running nose), *Nasanaha* (nasal blockage), *Gurghuraka* (wheezing), *Kasa* (cough with tenacious sputum), *Shwasa* (breathing discomfort), the presence of *Kantha Uddhwamsa* (hoarseness of voice), *Kricchra Bhashana* (inability to speak)⁽³⁾. The ultimate treatment methods mentioned in the *Ayurveda* classics are *Nidana Parivarjana*, *Samshamana*, and *Samshodhana*⁽⁴⁾.

Shwasakasachintamani Rasa contains *Shuddha Parada*, *Makshika Bhasma*, *Swarna Bhasma*, *Moti Bhasma*, *Shuddha Gandhaka*, *Abhraka Bhasma*, *Loha Bhasma* as the main content, and it also contains *Kantakari Swarasa*, *Aja dugdha*, *Yashtimadhu kwath* as *Bhavana Dravya*. These drugs have *Deepana*, *Pachana*, *Kanthya*, *Balya*, *Yogvahi*, *Ojo Vardhaka* and

Rasayana properties. It also acts as anti-asthmatic, anti-inflammatory (it reduces inflammation of the respiratory tract), antihistaminic (it reduces hypersensitivity of the airway and protects the respiratory tract), and immunomodulatory and also has a potential laxative effect, which helps eliminate *Ama* from the body.

Other drugs selected were *Giloy satva*, which is a potent immunomodulator; *Sitopaladi Churna*, which has *Madhura and Katu Rasa* and balances *Vata & Pitta Doshas* and effectively removes the *Ama doshas*; *Haridra khanda* as its constituent *Haridra* is a potent anti-allergic drug it will subside the allergic symptoms quickly, *Ashwagandha churna* will boost the immune system by increasing the activity of white blood cells, which fight off infections and diseases and also has anti-inflammatory properties, *Shunthi churna* helps in removing the *Ama Avastha* by acting as *Deepana- Pachana*, *Amastha Avaleha* contains *Vasa*, *Kantakari*, *Yashtimadhu*, and *Kharjura* as the fundamental ingredients.

The cumulative effect of these drugs acts as a bronchodilator, helps relieve irritation and bronchial spasm and is also an effective expectorant. They reduce the intensity of cough and also show the mucolytic effect. *Shishu Bharan Rasa* improves *Bala* and *Pushti* of *Balaka* by enhancing *Mansa Pushti* and *Jatharagni Vardhana*. Also, the *Bresol* syrup contains *Tulsi*, *Haridra*, and *Vasaka*, which have bronchodilator, mucolytic, and anti-allergic properties. *Syrup Septillin* acts as an immunomodulatory, Anti-viral, Expectorant & Anti-inflammatory.

Pranayama aids in the strengthening of respiratory muscles, the release of surfactant & prostaglandins, stimulation of stretch receptors, the release of undue tension, adaptation of regulatory mechanisms, and acclimatization of chemoreceptors. It is beneficial for improving lung volumes and capacities in health

and diseased (of restrictive & obstructive respiratory diseases).

Therefore, the results of this study can conclude that if this disease is treated by breaking down doshas, *Nidana Parivarjana* can absolutely get good results. *Shamana chikitsa* is more beneficial in childhood asthma than *Shodhana Chikitsa* because children cannot bear the stress of *Shodhana chikitsa* due to *Alpa Bala*.

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