



SHODHAN KARMA : ROLE IN TAMAKA SHWASA

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Abstract-

INTRODUCTION: Bronchial asthma is a hypersensitivity disorder which is being rapidly increases in present world, especially in developed countries. Whereas in Ayurveda, Tamaka Shwasa is a disease that shows close resemblance with bronchial asthma on the basis of clinical features. There is no cure for asthma in the conventional medical science. Since, no adequate therapy is made available by modern medicine for its terminal and long lasting cure, complementary and alternative system of medicines are looked up for possibility by patients as well as physicians. Ayurvedic treatment can be a potential and effective alternative for the treatment against the bronchial asthma. Shodhana (purification and detoxification) and Shaman Chikitsa (Ayurvedic medicines) are used for the treatment of

diseases globally, so that people all over the world can keep faith on it, on the basis of scientific evidences. So, this study was designed to analyse the role of Shodhana Karma (Vamana and Virechana) in Tamaka Shwasa.

METHODOLOGY: 60 patients, aged between 16 to 55 years, suffering from Tamaka Shwasa were taken from Shri Ashutosh Maharaj Ayurvedic Treatment Centre, Nurmahal, All the patients were assessed for wheezing (Ghurghuraka), breathlessness (Shwasa prapidkam), chest congestion (Paswagraha) and cough (Kasa). Patients were then divided equally into two groups i.e. Group A and Group B, having 30 patients in each group. The patients in Group A were treated with herbals whereas group B were treated with Shodhana Karma (Vamana and Virechana) along with herbals. Patients were re-assessed, after the completion of treatment, i.e. 2months.

RESULTS: The data analysis revealed that there was significant improvement in all the parameters of group B as compared to group A.

CONCLUSION: It has been concluded that both the treatments were effective in tamak shawsa but patients treated with Shodhana Karma shows considerable improvement in tamaka shwasa when compared to the patients treated with herbals only.

Key Words: Shodhana Karma, Tamaka Shwasa.

INTRODUCTION

Asthma is the most common chronic lower respiratory disease in childhood throughout the world and Ayurveda address it as “Tamaka Shwasa.”^{1,2} The features of bronchial asthma is quite comparable with the disease “tamak-shwasa” described in Ayurveda. In fact, shwasa is a major clinical condition according to Ayurveda that includes classes & sub-classes in it, carries symptoms can closely resembles with chronic obstructive pulmonary disease situation. Ayurveda describes etiology & pathogenesis of all classes of shwasa including tamak-shwasa (bronchial asthma) almost similar with just little difference.

However, the treatment modalities described are specific with class to class & sub-class.³ In today’s world, little is known about the Ayurvedic management on Tamaka-Shwasa i. e. Bronchial Asthma, especially in shodhan karma. So, an effort was made to find out the efficacy of shoadhan karma on the patients suffering from Tamaka-Shwasa.

METHODOLOGY-

60 male patients, aged between 16 to 55 years, from last 1- 5 years, suffering from Tamaka Shwasa (Asthma), at Shri Ashutosh Maharaj Ayurvedic Centre, Nurmahal, Punjab, , were included in the study whereas the patients suffered from chronic illness like hypertension, diabetes, HIV/AIDS and

mentally ill patients were excluded from the study. All the patients were assessed for wheezing (ghurghuraka), breathlessness (shwasa prapidkam), chest congestion (paswagraha), cough (kasa), opethotonus (asinolabhatesaukhyamushnam), tachypnoea (muhuswasomuhuschaivadhmyte), sleep apnea (chapidralabhateshayanahswapiditah) and difficulty in speaking (krichhachhankotibhashitum). After that patients were divided into two groups, Group A and Group B. The patients allocated in Group A were treated with herbals which include samana chikitsa, kantkari ghrita 10ml BD with lukewarm water, kankasava 3 TSF BD with equal amount of water, swasajivikayog churna 2gm BD with honey (mixture of abhrak bhasm, suddh tankad, mulethi, kakadasingi, som, pippli and shwasarilavana) whereas the patients allocated in group B were treated with herbals along with shodhana chikitsa (vamana and virechana) which includes the following:-

- I- deepana pachana with chitrakadi vati for 5 days.
- II- abhyantera snehana with kantkari ghrita for 7days
- III- on 13th day give abhyanga⁴ with dasmool oil and swedana⁵.

- IV- performed vamana karma⁶ with vaman yog (phanta of madanaphala pippli in mulethi kwatha, saindhava lavana, honey).
- V- given dhoompan⁷ after 45 minutes of vamana karma.
- VI- seven days sansarjana karma⁸ from the day of vamana karma.
- VII- on 9th,10th and 11th day of vamana karma ghritpana was given.
- VIII- on 12th & 13th day abhyanga and swedana given, whereas virechana karma⁹ was performed on 14th day after abhyanga and swedana.

RESULTS & ANALYSIS:

There was a significant improvement in all parameters i.e. wheezing (ghurghuraka), breathlessness, shwasa (prapidkam), chest congestion (paswagraha), cough (kasa), osteopenia (asinolabhatesaukhyamushnam), tachypnoea (muhuswasomuhuschaivadhmyte) sleep apnea (na chapinidralabhateshayanahswapiditah) and difficulty in speaking (krichhachhankotibhashitum) in the patients treated with herbals along with shodhna karma.

DISCUSSION:

The improvement in Group B is because of the components present in shodhna karma. The chitrakadi vati¹⁰ act as aama pachaka and agni deepaka (i.e. they are good appetizer), kantkari ghrit¹¹ as kapha shamaka and shwasa-kashara, dasmool oil¹² serve as vata-hara, kapha-roghanasaka and shotha-hara, abhyanga¹³ serve as vata-kaphanasaka, swedana karma¹⁴ act as vata-kapha hara. In vamana karma¹⁵, madanphaladi yog is used in which contain madanaphala, mulethi, saindhawa lawana and honey and can be used in all types of kaphaja rogas. Mulethi¹⁶ act as kaph nihsaraka (i.e. cough expectorant) kanthya, madanaphala¹⁷ is used in pratishyaya, kasa and shwasa. Saindhava lawana¹⁸ is snigdha, ushna and teekshna that subside vata and kapha and act as a good agni deepaka (good appetizer). Honey¹⁹ is tridosh nashaka and effective in hikka, shwasa, kasa. Virechana karma²⁰ act as pitta shamaka and beneficial in kapha-vata which is associated with pitta. Kankasava²¹ is beneficial in shwasa-kasa. Shwas jivika yog churna is a mixture of abhrak bhasma, suddha tankad, mulethi, kakadasingi, som ,pippli and swasarilavan. Pippali²² serve as kapha-vata shamak and

effective in kasa, shwasa and hikka. Kakadashringi²³ is beneficial in pratishyaya, kasa, shwasa, hikka and swara bheda. Swasari lawana²⁴ is combination of arka phala, saindhava lavana and cow ghrita which is a good expectorant and effective in kapha rogas and shwasa. Tankad shuddha²⁵ act as deepana, kaph nihsaraka, kapha-vatahar and effective in kasa shwasa. Abhrak bhasma²⁶ act as agni deepaka, tridosha hara, balya and rasayana, used in kasa shwasa. Cow ghrit²⁷ act as tridosha shamaka.

CONCLUSION:

As Ayurveda is a broad spectrum and effective in various disease and disorder. The present research also shows the affirmative aspect of Ayurveda in tamak shwasa whereas conventional medicine is not in foremost approach to completely treat the tamak shwasa . In the above study, the group treated with only herbals also showed the improvement in wheezing and breathlessness but shodhna karma in addition to herbals marks a significant effect in tamak shwasa. So, our study contributed the theme that shodhna karma should be delivered in regular practice for the effective treatment of tamak shwasa.

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