

**REVIEW ARTICLE ON ROLE OF VIRECHANA KARMA IN THE MANAGEMENT OF
TAMAK SWASA W.S.R. TO BRONCHIAL ASTHMA****Dr. Prakash A. Rathod*¹, Dr. Harshal Mangesh Bari²**^{1,2}Assistant Professor, Kayachikitsa Dept. Chaitanya Ayurved Mahavidyalaya, Sakegaon, Ta.Bhusawal, Dist. Jalgaon.***Corresponding Author: Prakash Rathod**

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ABSTRACT

Tamaka Swasa is one of the five types of Swasa roga mentioned in ayurveda. Tamaka Swasa is a "Swatantra" Vyadhi having its own etiology, pathogenesis and management. The cardinal features of Tamaka Swasa includes, Swasa Krichhrata (difficulty in breathing)¹, Kasa (cough), Pinasa(rhinitis), Ghurghurkam, Parshvashula. According to Ayurveda Swasa roga is a Kapha-Vata Pradhana disease which originates in Pitta Sthana. Whenever there is obstruction of Pranavayu by Kapha Dosha, the vitiated Vayu gets Pratiloma Gati (reverse movement) to produce Swasa Roga. Bronchial Asthma is the chronic inflammatory disorder of the airway which is associated with airway hyper responsiveness, recurrent episode of wheezing, shortness of breath, chest tightness and coughing particularly at night and early morning. The global prevalence of Asthma is more than 300 million individuals and about a tenth of those are living in India. Acharaya Caraka and Vagbhata have described Virechana Karma in the management of Swasa Roga. In Tamaka Swasa, Kapha obstructs the passage of Vayu. due to this the obstructed Vayu takes the Pratiloma Gati. Virecana drugs having the quality of Vata Anulomana, Usnaguna, Kaphavataghna property are more beneficial in the condition of Swasa. Virecana removes mainly vitiated Kapha and Pitta Dosha and makes Vata in Anuloma Gati. Thus, this conceptual study was under taken to study the concepts of Tamaka Swasa and role of Virechana Karmain Tamaka Swasa.

KEYWORDS: Tamaka Swasa, Virechana Karma, Kapha Dosha.**INTRODUCTION**

Tamaka Swasa is mentioned as one among five types of Swasa in Ayurveda. Among them Kshudra Swasa is present when strenuous work or exercise done and it does not require any treatment. whereas Maha Swasa, Urdhva Swasa and Chinna Swasa are present in the terminal stages of various diseases. Tamaka Swasa is a 'Swatantra' Vyadhi having its own etiology, pathogenesis and management. It is mentioned as Yaapya Vyadhi (controllable but not curable) i.e., chronic in nature having predominant symptoms like Shvasakrichhrata¹, Ghurghurkam, Pinasa, Kasa, Parshvashula. According to Ayurveda Swasa roga,² is a Kapha-Vataja disease which originates in Pittasthana. Whenever there is obstruction of Pranavayu by Kapha Dosha, the vitiated Vayu gets Pratilomagati (reverse movement) to produce Swasa Roga. Asthma is defined as a chronic inflammatory disorder of the airways in which many cells play role in its pathogenesis, particularly mast cells, eosinophils & T lymphocytes.³ The susceptible individuals experience the recurrent episodes of wheezing, breathlessness, chest tightness & cough particularly at night or in the early morning and difficult in expectoration, due to this inflammation. These

symptoms are usually associated with wide spread but variable air flow limitation that is partly reversible either spontaneously or with treatment. To a variety of stimuli, the associated airways responsiveness is increased due to inflammation. The burden of asthma is immense because more than 300 million individuals currently suffering from asthma worldwide, about a tenth of those living in India. The prevalence of asthma has been estimated to range 3-38% in children and 2-12% in adults.⁴ Among Shodhana, Vamana & Virechana are indicated in Tamaka Swasa. Tamaka Swasa is manifested by aggravated Prana Vayu due to obstruction of Kapha. Especially Virechana Karma with drugs having Vata Kaphahara property is indicated in the management Tamaka Swasa.

AIMS AND OBJECTIVES

1. To study in details about concept of Tamaka Swasa.
2. To study the role of Virechana Karma in the management of Tamaka Swasa.

MATERIALS AND METHODS

- Different references regarding Tamaka Swasa and Virechana Karma were collected from Ayurvedic

Samhita Granthas, various textbooks and previous studies and compilation done.

- Concept of Tamaka Swasa and Virechana Karma in Tamaka Swasa was studied.
- Collection of all the references was done and correlation between the data was done logically i.e., by using Yukti Pramana (Logical inferences).

DISEASE REVIEW

Nidana (etiology)

Acharaya Charaka says that, "A single etiological factor may produce a single disease or many factors together may produce single disease and "vice versa".^[5] This holds true in Tamaka Swasa as one or more etiological factors are responsible in development of Tamaka Swasa. In Ayurveda Nidana of Tamaka Shvasa are not described separately, but the Nidana of Swasaroga in general are given. various causes are responsible for development of Tamaka Swasa. Nidana of Tamaka Swasa can be categorized mainly of two types: 1. Bahya (Extrinsic factors)– like Dhuma, Raja, Vata, etc. 2. Abhyantra (Intrinsic factors)– Kapha & Vata Dosha vitiation. The Bahya Nidana acts through following three factors: Asatmendriyartham Samyoga, Pradnyaparadha, Parinama. For Swasa Roga to occur, Asatmendriyartham Samyoga plays important role. Mainly Ghranendriya, Sparsanendriya and Rasanendriya and their Asatmyartham Samyoga may precipitate Tamaka Swasa. e.g., exposure of the Ghranendriya to pollens, dusts etc. may evoke an Asatmyaindriya Artham Samyoga. Pradnyaparadha is a conscious or unconscious indulgence in harmful activities. It is again of two types. A. Saririka pradnyaparadha, e.g., Excessive indulgence in sex, excessive working and other similar activities. B. Manasika Pradnyaparadha are fear, sorrow, anger, anxiety, excitement etc. Parinama means Kala i.e., the effect on body due to change in climatic condition. it is observed that paroxysmal attacks of Swasaroga occurs during specific times and seasons such as, cloudy climates, winter, rainy season and at nights. Sometimes, Nidanarthakara Rogas are also important factor, i.e., Tamaka Swasa can be produced secondarily to some disease e.g., Jwara, Kasa, Pandu, etc. Acharaya Vagbhata has clearly mentioned that the neglected cases of Kasa may lead to Swasa.

As already stated before, the etiology of Swasa may also be considered as the etiology of Tamaka Swasa. And these etiological factors have been divided according to Ahara, Vihara and Nidanarthakara Roga. Ahara Nidana are Visamasana (irregular diet), Sitasana (cold food), Ruksana (dry food), Anasana (fast), Vistambhi bhojana (foods causing constipation), Adhyasana (frequent meals), Visa Sevana (toxins), Sitaambu sevana (intake of cold water). Kapha Prapokapa ahara like Masa (black gram, Nispava (beans), Pinyaka (tila paste) Anupapisita, Jalaja Mamsa (aquatic fish), Guru Bhojan (heavy diet), Ama Kshira (unboiled milk), Dadhi (curd), Abhisyandi Anna, Slesmala Dravya, Kantapratighata (throat trauma), Urahpratighata (chest trauma). Nidana related to

Vihara Vataprakopaka Vihara includes Vata (wind), Rajas (Dust), Dhuma (Smoke), Vyayama (exercise), Sita Sthana Sevana (to reside in cold place), Gramyasevana (over indulgence in sex), Bharavahan (excessive weight lifting), Marmaghata (trauma over vital organ), Vega Vidharana (suppression of urges), Jagarana, Karmahata (exhausted). While Kaphaprakopaka Vihara includes Divaswapna (day sleep) and Abhisyandy upacharas. Ayurveda also advocates about the Nidanarthakara Roga,^[6] like Amapradosa, Apatarpana, Vibandha (constipation), Anaha (distension of abdomen) Dhatuksaya (emaciation), Pratisyaya (coryza), Chardi (vomiting), Jwara (fever), Atisara (diarrhoea), Daurbalya (weakness), Urahksata (Trauma in chest), Pandu roga (anaemia), Visucika (Acute gastro enteritis), Kasa (cough), as important causative factors for Tamaka Swasa. Vyanjaka Hetu is stimulating, precipitating or aggravating cause. that is aggravation of symptoms occurs in an already generated disease or those causing the precipitation of the samprapti (pathogenesis) of a disease. The prior knowledge of these Hetu are useful in preventing the actual formation of diseases by preventing such factors. These includes Sleshma Vardhaka things (Kapha increasing matters), Ambu (water), Seeta (cold), Megha (clouds).

Purvarupa (Prodromal Symptoms)

The Purvarupa,^[7] mentioned by Acharyas in Brihat Trayi,^[8] and in Madhava Nidhana are Adhmana (flatulence), Bhaktadvesa (aversion to food), Arati (restlessness), Vairasya (bad taste in mouth), Hridpeda (pericardial pain), Parsvasula (pain in the side of chest), Pratilomatva (Short and shallow breathing), Anaha.^[9]

Rupa (Clinical Features/ Symptoms)

The important symptoms of Tamaka Swasa described in Brihatrayi which are helpful in diagnosis are as follows: Ativatvavega,^[10] swasa, Asinolabhatesaukhyam (patient feels comfortable while sitting), Lalatesweda (sweating on forehead), Meghambupragvatevridhi (symptoms get worse in rainy and winter season), Ghuraghurakam (wheezing), Ativatvavega Pranapidaka Swasa (having severe bouts of dyspnoea), Kasate Sanni Rudhyate- (inactive due to coughing), Slesmani Amuchamana Bhrusham Dukhitaha (inability to expectorate, he feels greatly distressed), Slesmani Vimokshante Muhuratam Sukhum (after expectoration gets temporary relief), Kanthodhvansa (pain in the throat), Anindra (insomnia), Sayanaha Swasa Pidita (aggravated in lying posture), Ushnabhinandati (desires hot things), Visuskasyata (dryness of mouth), Vamathu (vomiting), Meghachhanna Swasa Vridhi (aggravated by cloudy weather), Sitakale Vridhi (aggravated by cold weather), Prasvedaha (perspiration), Abala (weak), Vepathu (tremor), Sakasa (accompanied with cough), Bhakta Dwesha (anorexia), Aruchi, Moha (fainting).

Samprapti (Pathogenesis)

While describing Samanya Samprapti of swas, Acharya Charaka describes, Vitiated Vata enters The Pranvaha

Shrotas and aggravates the Urastra Kapha. This Vikruta Kapha obstructs the normal flow of Pranavayu & produces five types of Swasa & Hikka which endangers the life. Acharya Shushruta explains that the Prana Vayu when leaves its normal physiological functions and when interacts with the Kapha,^[11] it moves with Pratiloma gati and leads to development of Swasa roga. Regarding specific pathogenesis Acharya Charaka explains that when Kapha obstructs the flow of Prana Vayu in the Pranavaha Shrotas, Prana Vayu moves in Pratiloma Gati and surrounds the neck and head and causes excess secretion of Dusta Kapha which results Pinasa (Coryza). Due to this excessive mucus discharge in Pranavaha Shrotas and there is obstruction of Prana vayu which produces characteristic sound Ghurghurkam (wheezing). This situation is aggravated when there is congestion, Sotha (inflammation) or irritation. This further increases the secretion in the tracts which causes coughing and patient tries to expel the thick, sticky sputum. If he or she is unable to expectorate than the respiration rate increases and constriction of air tracts occurs. As a result, the expiration becomes prolonged and the inspiration shortens. This condition causes Dyspnoea. Thus, the exchange of Vishnupadamrutama (oxygen) is not proper. Due to this other systemic symptoms like pain, giddiness, dryness of mouth, desire for hot objects and disturbed sleep occurs.

Chikitsa (Treatment)

Overall management of Tamaka Shvasa can be divided into: Nidana Parivarjana (avoiding etiological factors), Shodhana (elimination of vitiated dosha from body), Avastika Chikitsa & Shamanoushadhi (oral medication). The medicines and the dietetic regimen which controls the Kapha and Vata due to their Ushna Guna and are Vata- Anulomaka in action should be used in the treatment of Swasa Roga. Acharya Charaka explains that the patient with Kapha,^[12] and Vata dominance and of strong build should be given Samshodhana therapy i.e., Vamana & Virechana.

VIRECHANA REVIEW

Sodhana Karma is prerequisite in managing the condition of Tamaka Swasa, particularly in patients with sufficient strength, because the disease is manifested by the aggravated Prana Vayu by the obstruction of Kapha¹³. Virecana Karma is appropriate as the origin of the pathogenesis is said to be started from Pittasthana. Virechana is the prime treatment for Pitta Dosha & also effectively manages the Kapha & Vata Dosha. It pacifies the Pitta Dosha by Adhobhagarana. So Virechana has its specific action on Pitta & Kapha Dosha which are expelled from Amashya, Grahani & Pakvasya through Adhomarga. Acharya Charaka defined Virechana,^[14] as the process of eliminating of Dosha through the Adhobhaga (Anal route). Detailed description of Virechana is present in all most all the Ayurveda text. The various references of Virechana in Ayurveda classics are, Charak Samhita Sutrasthan Chap.-1, 2, 4, 15, Chikitsasthana, Kalpsthana- Chap. 7th to 12th,

Siddhisthana- Chap.1, 2, 6 Sushruta SamhitaSutrasthan- Chap 39, 41, 44, Chikitsasthana-33, 34,. Astangsamgraha Sutrasthan- Chapter 27. Astang Hridaya Sutrasthan- Chap.18, Kalpsthana Chap. 3,Sharangdhar Samhita Purva Khand- Chapter4, Uttarkhanda- Chapter 4 Chakradatta Chapter-71 Bhav Prakash Purvakhand.

Tamketu Virechana^[15]

Acharya charak has clearly mentioned about the indication of Virechana Karma in Tamaka Swasa. And he further emphasizes that the Vatanulomana & regular cleaning of the Srotas of the Vayu should be done. In classical Ayurveda texts Swasa Roga is said to be originated from the Pittasthana and the site of its expression is Uraha Pradesh. The main Dosha involvement here is of Kapha & Vata, and the Gati of Vata is Pratiloma. The Pratiloma Gati of Vayu must be brought to Anulomana. The Pittasthana disturbance leads to indigestion & production of Aama Dosha which is the cause of production of Vikrut Kapha Dosha. So, it is important is to treat the root cause of Swasa Roga i.e., Pittasthana. So this pathogenesis is broken by Kapha Vataghana and Ushnaguna Ausadha, drinks & diet. And to achieve this, Virechan Karma is the process which does the Vataanulomna and is Kapha- Vataghana. Secondly, Dusti of Pitta Sthana is the root cause of this disease and for removal of this Dusta Pitta Virechan Karma is the best procedure. The patient of Tamaka Swasa is mostly weak and in chronic stage, Hridya as the Mula of Pranavaha Shrotas is also involved. In this condition Vamana is very difficult and complicated procedure. On the other hand, the Virechana is easier to do.

DISCUSSION

Ayurveda considers Swasa Roga as disease of Pranavaha, Udakavaha and Annavaha Srotas. Acharya Charaka explains that when in the Pranavaha Shrotas, Kapha obstructs the flow of Prana Vayu, the Vayu moves in Pratilomagati and surrounds the neck and head and causes excess secretion of Dusta Kapha which produces various symptoms of swasa roga. Pinasa (Coryza). And the important symptoms of Tamaka Swasa which are helpful in diagnosis are as follows: Ativatiravega Swasa, Ghurghurkam, Kasa, Asinolabhatesaukhyam, Mhur- mhurswasa Lalatesweda Meghambupragvatevridhi. Shvasa Roga originates from the Pittasthana and the site of its expression is Uraha Pradesh. Dosha involvement are Kapha & Vata. The Pratilomagati of Vayu must be brought to Anulomana by virechana. The Pittasthana disturbance leads to indigestion & production of Aama Dosha which is the cause of production of Vikrut Kapha Dosha. So, it is of prime importance to treat the root cause of Swasa Roga i.e., Pittasthana. Hence Virechana is the main treatment to eliminate the Dusta kapha and also for Vata Anulaomana.

CONCLUSION

Tamaka Swasa is a type of Swasa Roga affecting the Pranavaha Srotas, which is significantly distressing and a fatal disorder of the present-day-life. Tamaka Swasa has been described in various Ayurvedic classics and seems to be identical to bronchial asthma. It appears that Shodhana Chikitsa is more effective than Shamana Chikitsa in Tamaka Swasa. On the basis of the review from classical ayurvedic textbooks, it can be concluded that Virechana Karma, a purification therapy is the potential procedure for the treatment of Tamaka Swasa.

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