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MANAGEMENT OF TAMAKA SHWASA: A CASE STUDY

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ABSTRACT

Tamaka Shwasa is one of the Pranavaha Sroto Vikara which is generally described as YapyaVyadhi or Krichra Sadhya. However, the patient has Pravara Bala, recent origin of disease or both said to be Sadhya. Therefore, proper line of treatment and proper lifestyle is required for this disease. It is analogous to Bronchial Asthma which is prevalent in 13.1% of population all over the world. This is a single case study of a 51-year-old male patient came with C/O Cough with yellowish sputum since 5months . He also complaints of sour belching & burning sensation in chest region, dust allergy,weakness,pain and heaviness of head. According to patient, he was apparently well before 6 month and gradually he developed cough. It was treated by internal Ayurvedic medicines and got significant improvement. Present case study emphasizes the effect of Vyadhihara Chikitsa like Tab ShwasaKutura Rasa, Tab Amlant, Cap Grab,Dhanyakahima,Ksharabala, Syrp Tulsi Kantakari and external medications like Sarvanga Udvartana, SarvangaParisheka with DMQ, GudaNagara Nasya,Nebulisation with Bharangi Arka and Shodhana by means of SadhyoVirechana for its effect on expelling out the vitiated pitta dosha and Pranayama for providing symptomatic relief in TamakaShwasa.

KEY WORDS: *Tamaka Shwasa, Bronchial Asthma, Vyadhihara Chikitsa, Shodhana, SadhyoVirechana.*

INTRODUCTION

Tamaka Shwasa is one among the *Pancha Vidha Shwasa*. The word *Tamaka* is derived from *Dhatu* Tamalganou which means sadness. *Tamaka Shwasa* is *Kapha Vataja Vikara* and site of origin is *Pitta Sthana*.The main *Lakshanas* of *Tamaka Shwasa* are *Ghurguraka Shabda*, *Peenasa*, *Shiro Gurutwa*, *Aaseene Labhate Sukham*. *Shayanaha Shwasa Peeditha*. Its analogues with bronchial asthma where remarkable features are wheezing, breathlessness and cough. Bronchial asthma is one of the most distressing diseases and it is quite common among all socio-economic status people, in all age groups. That's an insightful perspective from Ayurveda on the pathogenesis of *Tamaka Shwasa*.

The concept of *Agni* plays a crucial role in Ayurveda and when it is weakened due to faulty food habits, it can lead to various health issues including respiratory problems like *Tamaka Shwasa*. In this context, *Annanaha Srotodushti* refers to the imbalance or impairment of the channels responsible for digestion and metabolism due to improper food habits. This disturbance in the digestive process leads to the accumulation of toxins (*Ama)* and aggravation of *Doshas* particularly *Pitta* and *Kapha*. *Tamaka Shwasa* is believed to originate primarily from the *Pitta Sthana* and then localizes in the *Kapha Sthana*. This condition is characterized by an imbalance of both *Kapha* and *Vata* Doshas with *Kapha* dominating. According to Ayurvedic principles, when there is an imbalance in these *Doshas* particularly aggravated *Kapha* and *Vata*, it leads to respiratory issues like asthma. The vitiation of *Kapha* and *Vata* ultimately affects the *Pitta Sthana*, contributing to the manifestation of *Tamaka Shwasa*.

Ayurveda offers holistic approaches to manage such conditions, focusing on balancing the *Doshas* through lifestyle modifications, dietary changes, herbal remedies, and practices like *Yoga* and *Pranayama* to strengthen the respiratory system and improve overall health. The treatment of *Shwasa Roga* emphasizes the importance of medicines and dietary regimens that have the properties of *Ushna* which helps to balance *Kapha* and *Vata Doshas.* These remedies should also possess. *Vatanulomana* properties to effectively manage the condition. In Ayurveda, treatment approaches are categorized into different levels based on their intensity and purpose. *Brhumana*, which refers to nourishing and strengthening therapies is considered the foremost and most effective level of treatment. These therapies aim to build up the body's strength and immunity which is crucial in managing chronic conditions like *Tamaka Shwasa*, While modern medications may provide temporary symptomatic relief, they often fall short in providing long-term relief without dependency. Ayurveda on the other hand, offers a comprehensive approach that not only addresses the symptoms but also focuses on restoring balance to the body's systems. By incorporating *Shodhana* treatments alongside internal medications, Ayurveda aims to detoxify the body, provide essential nutrition, and enhance the the patient's immunity.

These treatments not only alleviate the symptoms but also improve the elasticity of lung tissues, contributing to long-term relief and well-being. Ayurveda's holistic approach to managing

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Tamaka Shwasa can offer patients a safe and effective alternative, reducing the need for drug dependency and promoting overall health and vitality. Hence Ayurveda treatment by *Vyadhihara Chikitsa* and *Shodhana Karmas* needs to be evaluated. So, in this particular case *Vyadhihara Chikitsa* like *Shwasakutahararasa,Tab.Amlant*, *Cap.Grab*, *Dhanyakahima*, *Cap.Ksheerabala*, *Syrp.Tulsi Kantakari* were advised and external medications like *Sarvanga Udvartana*, *SarvangaParisheka* with *Dashamoola Kwatha*, *Guda Nagara Nasya*,Nebulisation with *Bharangi Arka*, *Ksheera Bala Taila* for *Pada Abhyanga* (Twice Daily) and *Sadhyo Virechana* given as *Shodhana Chikitsa*.

CASE STUDY

A 51-year-old male was reported to fever and respiratory outpatient department of Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital. Hassan on 9 March 2026 with complaints of Cough with yellowish sputum, sour belching & burning sensation in chest region, dust allergy, weakness, pain and heaviness of head since 6months.

HISTORY OF PRESENT ILLNESS

Patient was apparently healthy 6months back. He had an acute onset of Cough with yellowish sputum associated with sour belching & burning sensation in chest region, dust allergy, weakness, pain and heaviness of head for which patient took allopathic medication and symptoms get reduced temporarily. He used to suffer on and off with same complaints and get temporary relief on medications. As the reocurrence of symptoms, he consulted SDM Ayurveda hospital Hassan on 3rd March 2026 and patient was advised to undergo admission for treatments.

PAST HISTORY

N/K/C/O DM and Hypertension.

PERSONAL HISTORY

Appetite: Reduced
Bowel: 1-2 times per day
Micturition: Regular
Habits: Nothing Specific
Sleep: Disturbed

FAMILY HISTORY

Nothing specific

LOCAL EXAMINATION

1.External nose
Inspection: No visible scar, swelling
Palpation: No tenderness
Nasal septum: No deviation Vestibule: No fissure and crusting
2.Anterior Rhinoscopy
Nasal passage: Narrow on tight nose
Floor: No defects
Roof: Not visible
Lateral wall: Inflammed
3.Respiratory system
Inspection: Chest- Bilateral symmetrical
No any chest deformities
Respiratory rate-18 per min
No any scars
4.Palpation:
Auscultation: Normal
Sinus Examination
Maxillary sinus: Tenderness present
Ethmoid sinus: Tenderness present
Frontal sinus: Tenderness present

ASHTASTHANA PAREEKSHA

Nadi: 75bpm
Mutra: 3-4 times per day
Mala: 1-2 times in a day
Jihva: Alipta
Shabda: Madhyama
Sparsha: Anushna sheeta
Druk: Madhyama
Aakruti: Madhyama

DASHAVIDHA PAREEKSHA

Prakruti: Pitta Kapha
Vikruti: Dosha-Prana Vata, Avalambaka Kapha
Dushya: Rasa,Rakta
Samhanana:Madhyama
Saara: Madhyama
Pramana:
Height-5.6feet
Weight- 82kg
BMI-29.2
Satwa: Avara
Satmya: Sarva rasa satmya
Aahara sakthi: Madhyama
Vyayama sakthi: Madhyama
Vaya: Madhya

MATERIALS AND METHODS

Patient suffering from *Tamaka shwasa* is selected from IPD of SDMCAH, Hassan
Source of data
IP No: IP089638 , Ward: 089638 special ward R.NO-220
Study design
A single case study

TREATMENT

Vyadhihara Chikitsa

1. *Dhanyaka Hima* 50ML OD before food
2. *Tab Shwasa Kutara Rasa* 1 TID after food
3. *Cap Ksheera bala* 1 TID after food
4. *Syrp.Tulsi Kantakari* 2tsp TID after food
5. Cap. Grab 1BD after food
6. Tab. Amlant 1 BD after food
7. *Bharangi Arka* Nebulisation BD

Shodhna Chikitsa

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1. *Sarvanga Udvartana + Sarvanga Parisheka with Dashamoola Kwatha*
2. *Sadhvo Virechana with Avipattikara churna* 20gm + *Triphala Kashaya* 100ml
3. *Guda Nagara Nasya*
4. *Ksheera Bala Taila* for *Pada Abhyanga* (Twice Daily)

On the day of *Virechana*, after assessing the vitals and bowel movements, patient was explained about the procedure. *Virechana* was given using *Avipattikara churna* 20gm + *Triphala Kashaya* 100ml and 12 *Vegas* were observed. *Ganji* were given as post treatment regimen. Patient was advised not to do *Divaswapna*, *Sheeta Vata Sevana*, *Vegadharana* and to take *Ushna Jala Pana* and *Laghu Ahara* in the afternoon and evening.

Discharge Medicines (For 15 days)

1. *Shwasa Kuthara Rasa* 1-1-1 A/F
2. Syrp.*Tulsi Kantakari* 2tsp 1-1-1 A/F
3. Cap.Grab 1-0-1 A/F
4. Tab.Amlant 1-0-1 A/F
5. *Ksheera Bala Taila for Pada Abhyanga* (Twice Daily)

RESULTS AND DISCUSSION

CLINICAL ASSESSMENT

Assessement Criteria:

Subjective Parameters

The symptoms are graded as 0 to 3, 0 being absence of the clinical features and 3being severe.

Objective Parameters

Symptoms	Before Treatment	After Treatment
Heaviness in head	3	1
Difficulty inbreathing on excertion	2	1
Cough with expectorant	3	1
Gastritis	3	1
Sour Regurgitation	3	1
Body Pain Tiredness	3	1
Sleep Disturbance	3	1
Sinus Tenderness	3	1
Nasal Inflammation	2	1

Syrup Tulasi Kantakari: *Tulsi Kantakari* Syrup is a polyherbal Ayurvedic formulation composed of *Tulsi*,*Kantakari*,*Vasa*, *Yashtimadhu*,*Pippali*,*Shunthi*,*Bharangi*,and *Madhu*. It is primarily indicated in *Shwasa* and *Kasa* and exhibits *Kaphahara* and *Vata-Kaphahara* properties. The formulation acts as *Shwasahara* and *Kasahara*, along with *Deepana–Pachana* effects that improve *Agni*. It works on the *Pranavaha Srotas*, helping to liquefy and expel *Kapha*, reduce inflammation in the respiratory tract, and relieve *Srotorodha*.Due to its expectorant, bronchodilatory actions,it effectively alleviates symptoms like cough, breathlessness, wheezing**.**

Shwasa Kutara Rasa: A herbomineral formulation used in *Tamaka Shwasa*.Contains *Parada*, *Gandhaka*, *Tankana*, *Manahshila*, *Vatsanabha*, *Pippali*, *Maricha*, and *Shunti*. It possesses *Ushna Veerya* and *Vala-Kaphahara* properties. Helps in relieving symptoms by acting on *Pranavaha Srotas* and breaking *Kapha*-dominant *Samprapti.*

Cap Grab: Contains *Vranapahari Rasa*, *Triphala Guggulu*, *Gandaka Rasayana*, *Arogyavardhini Rasa*, *Guduchi*, and *Manjishta*. Helps control infections, reduces respiratory stress, and enhances immunity.

Tab Amlant: A natural antacid and anti-ulcer tablet containing *Shunthi*, *Pippali*, *Haritaki*, *Swetha Parpati*, and *Mulethi*, Balances *Pitta Dosha*, reduces inflammation, and improves digestion.

Bharangi Arka Nebulization: Prepared from *Bharangi* (Clerodendrum serratum). Used in respiratory disorders like *Shwasa* and *Kasa*. Its *Katu*, *Tikta Rasa* and *Ushna Veerya* help alleviate *Kapha* disorders.

Cap Ksheerbala: Contains *Bala* (Sida cordifolia), *Ksheera*, and *Taila*. Known for *Vata-shamaka* and *Balya* properties.Supports symptomatic improvement in Vata-related conditions.

CONCLUSION

Sarvanga Udvartana& Sarvanga Parisheka with Dashamoola Kwatha Sadhvo Virechana with Avipattikara churna &Triphala Kashaya,Guda Nagara Nasya,Ksheera Bala Taila for *Pada Abhyanga* (Twice Daily), *Dhanyaka Hima ,Tab Shwasa Kutara Rasa,Cap Ksheera bala,Syrp.Tulsi Kantakari*, Cap.Grab, Tab.Amlant ,*Bharangi Arka* Nebulisation are effective in management of *Tamaka shwasa.*

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