

A REVIEW ON NON -COMMUNICABLE DISEASE WSR TO TAMAKA SHWASA

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ABSTRACT

Ayurveda is the major system of indigenous medicine and which is known as science of life. Non communicable or chronic disease are disease of long duration, generally slow progression and not contagious or transferable from person to person. Respiration is the process from the first breath of new born till the last breath is sign of life. Any disturbance in this process leads to Shwasaroga. There are several deadly diseases which can kill a patient, but none of these are as asthma and hiccup that can kill a patient instantaneously. As per Ayurveda, Shwasa is mainly caused by the Vata and Kapha doshas. Due to excessive intake of Kapha aggravating food and regimen the Kapha along with Vata gets vitiated into Pitta sthana and causes Shwasa. Tamaka Shwasa can be correlated with the disease Bronchial Asthma on the basis of its features and etiopathogenesis. India has an estimated 15-20 million Asthmatics. Bronchial asthma is a chronic inflammatory disorder of the airways.

KEYWORDS: Ayurveda, Asthma, Tamaka Shwasa, Non Communicable Disease

INTRODUCTION

A Non Communicable disease (NCD)¹ is a medical condition or disease that is by definition non-infectious and non-transmissible among person. Currently, NCDs are the leading causes of death and disease are universal problem. Respiration is the process from the first breath of new born till the last breath is sign of life any disturbance in this process lead to Shwasa Roga. Brochial Asthma² is a chronic inflammatory disorder of the airways characterized by increased responsiveness of the trachea and bronchi to various stimuli resulting in narrowing of the airway due to

bronchial spasm and oedema in bronchial mucous membrane. Bronchial asthma is similar to disease entity Tamaka Shwasa described in Ayurveda. Tamaka Shwas³ is a condition in which difficulty breathing occurred due to the obstruction to Pranavayu due to vitiated kapha. According to Ayurveda main cause of Tamaka Shawas are unwholesome diet (vidahi, guru, ruksa, abhisyadi diet) exposure to allergen (cold air dust smoke etc.) excessive excretion etc. which are very close to etiology of bronchial asthma. The prevalence of asthma in India has an estimated 15-20 million. However the incidence is dependent on environmental condition, occupational patterns, genetic

configuration and dietary pattern of life style.

Etiology

The causes of Asthma are divided into two types.

1) Predisposing factors⁴

- Genetic factors
- Obesity
- Psychological factors -Anxiety, Frustration Fatigue, Over exertion , Sleeplessness
- History of urticaria, infantile eczema or migraine.
- Endocrine cause –in women particularly before menstruation and premenopausal period.

2) Triggering factors⁵

- Can aggravate symptoms in a patient who is having Asthma.
- Inhalation of Allergens: House dust, pollen, mold, animal dander.
- Environment: Cold and dry climate, cooking gas fumes, passive cigarette smoking,
- Paints, sprays.
- Infections: Upper Respiratory Tract infections.
- Drugs: Aspirin, Pain killers (NSAIDs).
- Food: Colouring agents of food, food preservatives, and ice creams.
- Exercise: Vigorous exercise particularly on cold and dry day.
- Psychological factor: Stress.
- Occupation: Wood and cotton dust, chemicals.

As per Ayurveda the causes of Tamaka Shwasa are as follows⁶

- Vata prakopak ahara vihara.
- Kapha prakopak ahara vihara.
- Endogenous cause like ama, constipation, vikriti in pranvaha srotases etc.

- Exogenous cause like injury or trauma over chest, residing in smoky places.
- Local cause like abnormalities in structure of respiratory organs other disease which may cause dyspnea like anemia, raktpitta, visha (poisoning) etc.

Pathogenesis

Thus Vagbhata acharya has described Tamak Shwasa, as aamashayodbhava disease. That means shwas is produced by the doshas staying in amashaya.⁷

Charaka acharya also says that shwas is produced by the vat and kapha staying pitta-sthan i.e. amashaya.⁸ Thus considering both the sutras together, it can be said that shwasa is produced by kapha and vat doshas.

According to Ayurveda Acharyas the vitiated Pranvayu combines with deranged kapha dosha in the lungs causing obstruction in the prana vaha srotasa (respiratory tract). This results in gasping, labored breathing and respiratory distress. This condition is called Swasa Roga.

TYPES⁹

There are two types of Tamaka Shwasa-

- i) Pratamaka- If this condition is associated with fever and unconsciousness is called as pratamaka.
- ii) Santamaka- If above condition is associated with darkness in front of the eyes and subsides quickly by cold thing is called santamaka.

Prodromal Stage (purvaroop)

Madhavakara listed the following as purvarupas of shwasaroga.¹⁰

- Hritpida
- Parwshula
- Adhmana
- Mukhavairasya
- Shankhatoda

SIGN & SYMPTOMS¹¹ (Roopa)

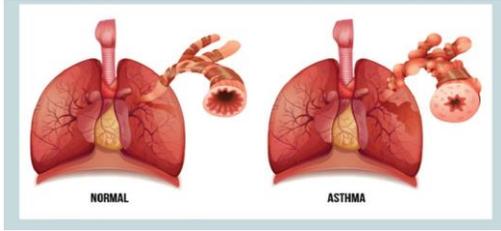


Figure: normal and asthmatic lungs

- Breathlessness along with forcible expiration
- Cough
- Wheezing
- Tightness of chest
- Thick mucus sputum
- Aggravation of above symptoms during night and early morning
- Fainting during the bout of cough.
- Sleeplessness, discomfort increases when lied down on bed
- Gets comfort in sitting posture.
- Sweating on the forehead.

ASSESSMENT OF SEVERITY¹²

Severity of asthma is highly variable. It is assessed on the basis of symptoms, signs and peak expiratory flow -rate. Therapy and dose schedule of the drugs are designed in a step-wise manner, based on the severity of the disease on the basis of severity, asthma is categorized in to intermittent, mild moderate and severe persistent type.

Investigation¹³

1. Complete haemogram
2. X-ray chest (P.A. and lateral view)
3. Absolute eosinophilic count (ACE)
4. Sputum examination
5. Spirometry
6. Serum IgE level
7. Skin allergy test

DIFFERENTIAL DIAGNOSIS¹⁴

- Laryngeal Oedema
- Upper airway obstruction by tumor
- Chronic bronchitis
- Eosinophilic pneumonias
- Pulmonary tuberculosis

PROGNOSIS¹⁵

Tamaka shwasa is generally yapya i.e. Palliable but it is curable in its primary stage.

PREVENTION¹⁶

1. Usage of godhuma (wheat), mudga (green gram), kulattha (horse gram) yava (barley), old rice, patola (snakgourd), hot pungent diet, rasona (garlic), haridra (turmeric), ardraka (ginger), misri (sugar candy), guda (jaggery), tulasi (holy basil), cows urine, shunti(dry ginger).

2. Use of luke warm water.

3. Regular practice of yoga and pranayama.

4. Virechana karma in sharad ritu.

5. Use of Cyavanaprash, Agastyaharitaki.

6. Avoid fish, heavy diet, masha (black gram), fried items, mustard leaves, cool drink, ice cream etc.

7. Avoid banana,lemon, and guava fruit (if allergic to).

8. Avoid exposure to cold and humid atmosphere, smoke, dust, and fumes, chilled water, stored food items, curd and curd preparation.

9. Avoid excessive day sleep/excess exercise.

10. Avoid suppression of natural urges.

11. Avoid use of tobacco in any form.

Not to be Followed¹⁷

i) Over eating and taking milk at bed time.

ii) Fried, chilly, too cold, sour, heavy preparations.

iii) Cold and damp places.

- iv) Fasting for a longer period.
- v) Seating in frosty, smoky and congested places for a longer period.
- vi) Rukshanna particularly Toast, Popcorn etc.
- vii) Jalaja, Anupa, Mansa, Dadhi, Aamaksheera, due to Guru and Abhisyanandi property.
- viii) Bread, Burger, Pizza, Cheezes, Paneer etc is used which are having Srotorodhaka property.
- ix) Contact with those pet animals, which do not suit the individual.
- x) Direct exposure to Prag-vata.

Followed¹⁸

Shali rice, kulathha, yava, godhuma, patola shaka, pakvakapitha, matulunga, ajadugdha, ajaghrita, ushnodaka, madya, jangala mamsa, mutton soup, garlic, honey.

DISCUSSION

Bronchial asthma is a chronic inflammatory disease of airway. It leads to recurrent episodes of wheezing, breathlessness, tightness of chest and cough particularly at night or early morning. In Samhita Acharyas have described etiological factors similar to those described from a modern perspective, while the environmental factors such as dust, smoke, the wind, cold weather are listed. Most of the etiological factors described are due to lifestyle and dietary habits i.e. exercise, walk beyond one's capacity, vitiated metabolism, dryness in the body, improper food combining. Tamaka Shwasa is considered as yapya (palliable) because this type of Shwasa Roga is not only difficult to treat but also has a repetitive nature. However a person stick to preventive strategy right from the beginning can easily prevent or control it.

CONCLUSION

Tamaka shwasa it also known as bronchial asthma and it is an chronic disease resulting in clinically significant morbidity, missed days of work or school, substantial cost for emergency care and hospitalization, and sometimes death. Prevention measures which said above helpful for the prevention of irreversible airway changes in Asthmatic patients.

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