

REVIEW ARTICLE

An Ayurvedic Review on *Tamaka shwasa*Jaiprakash Ram^{1*} Kuntal Ghosh²

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ABSTRACT

Shwasa as a disease has been considered an important pathological entity by our *Acharyas*. *Shwasa* has been mentioned as a main disease and also as a symptom of other pathological conditions. *Ayurvedic* texts have mentioned various types of *Shwasa*. On the basis of clinical features, *TamakaShwasa*, a subtype of *ShwasaRoga* is considered as *Yapya* (palliable). This type is not only difficult to treat but also has a repetitive nature. Therefore it is necessary to understand patho-physiology for proper management of *TamakaShwasa*. Present paper highlights various etiological factors, pathogenesis, and symptoms of *TamakaShwasa*. Principles of management have also been enumerated.

Key words: *Shwasa, Yapya, TamakaShwasa.*

INTRODUCTION

AcharyaCharaka emphasizes the role of *Vayu* in physiological functioning of the bodily elements and pathological manifestations of diseases as well [1]. If *Vayu* maintains its equilibrium, health will be maintained and, if it gets vitiated, diseases gets established. *Shwasa* is one of such diseases, which manifests in *PranavahaSrotas* with the derangement of *PranaVayu*. In *Sabdakalpadruma* and *Vacaspatyam*, *Shwasa* [2] = '*Shwas*' *Dhatu* by applying '*Ghanj*' *Pratyaya*. It has two meanings, *VayuVyaparai*. e. as a physiological phenomena and *RogaBhedai*. e. as a pathological manifestation.

Shwasa may appear as an individual disease termed as *SwatantraVyadhi* in *Ayurveda* or sometimes it may appear as a symptom of other diseases and as long as it exists secondary, it is termed as *ParatantraVyadhi*. If *Vata*, predominantly associated with *Kapha*, obstructs the channels of circulation and circulates all over the body, then being itself obstructed in the circulatory use this aggravated *Vayu* causes *Shwasa* [3].

On the basis of clinical features ⁴*Shwasa* can be classified into five types viz. *UrdhvaShwasa*, *MahaShwasa*, *ChinnaShwasa*, *TamakaShwasa* and *KsudraShwasa*. On the basis of

prognosis, it is of three⁵ types viz. *Sadhya* (curable) i.e. *Kshudra shwasa*, *Krichra sadhya* / *Yapya* (Palliable) i.e. *Tamaka shwasa* and *Asadhya* (Incurable) i.e. *Maha shwasa*, *Urdhva shwasa* and *Chinna shwasa*.

TamakaShwasa

Definition: The *Shwasa* in which attacks of breathlessness get worsened at *Tamakala* i.e. night and patient feels darkness in front of eyes during attack.

***Nidana* :** *Nidana* can be categorized in the three types :

- *Dosha Prakopaka Nidana* : *Aharaja*, *Viharaja*
- *Khaivaigunyakaraka*
- *Vyanjaka*- (Aggravating factors)

***Dosha Prakopaka Nidana* :** various etiological factors pertaining to *Ahara* and *Vihara* have been enumerated in (Table 1 & 2).

***Khavaigunyakaraka Nidana* :** these are mainly *Raja*, *Dhuma*, *Abhighata* and due to improper treatment of other disease like *Rajayakshma*.

***VyanjakaHetu* (Aggravating factors)**

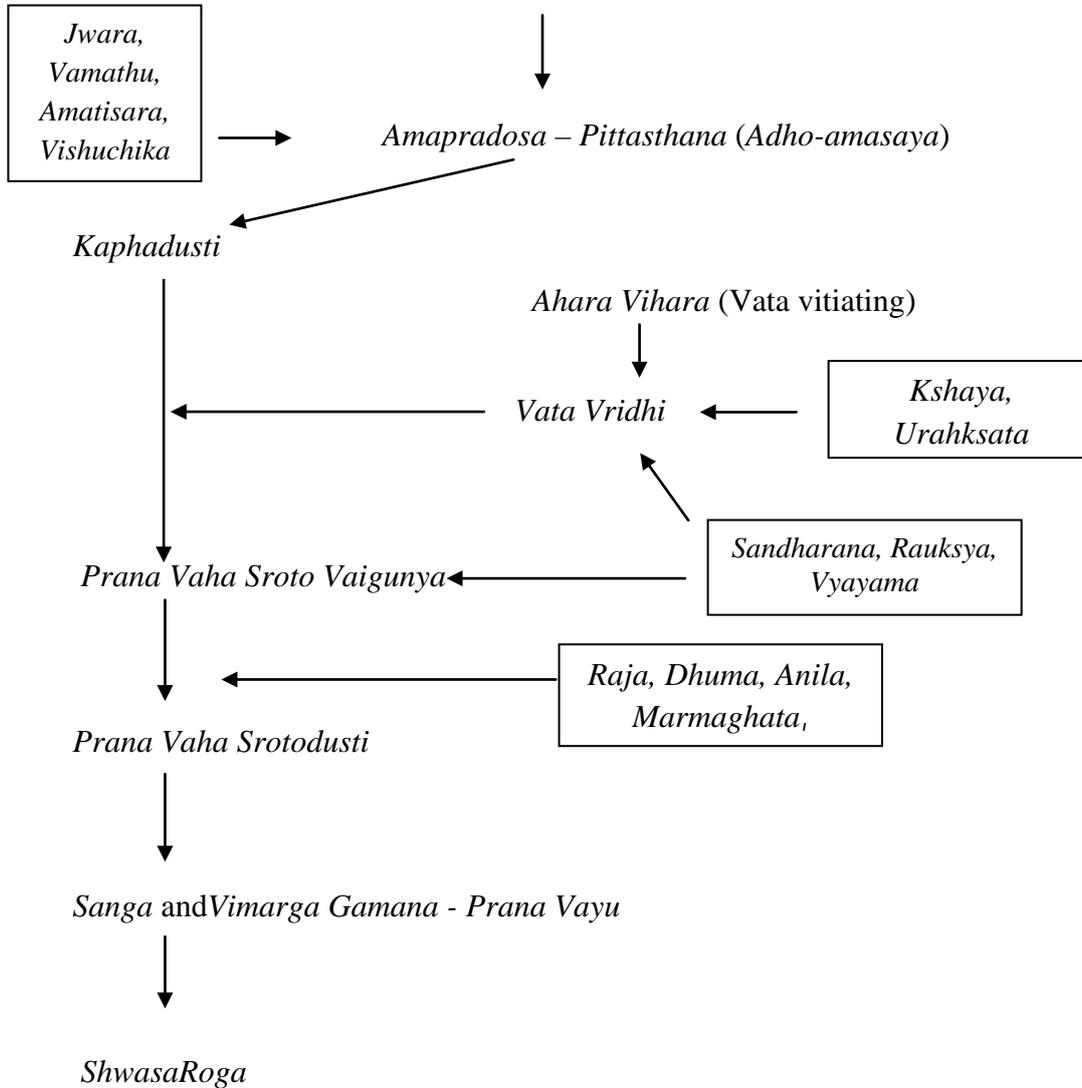
VyanjakaHetu is stimulating, precipitating or aggravating cause. It also causes aggravation of the symptoms in an already established disease.

The knowledge of these *Hetus* is useful in preventing the actual formation of disease by taking care to avoid such factors. Various precipitating factors of *TamakaShwasa* have been enlisted in (Table 3).

TamakaShwasa can also be an outcome or complication of other diseases as well. (Table 4) shows a list of such diseases as per *Ayurveda* that can precipitate *TamakaShwasa*.

Samprapti (Pathogenesis)

Schematic representation of Samprapti AharaVihara (KaphaVitating)



SampraptiGhataka

1. Dosa – Kapha (*Kledaka* and *Avalambaka*) and *Vata* (*PranaVayu*)
2. *Dusya* – *RasaDhatu*, *Udaka*, *Rakta*
3. *Agni* – *Mandagni*, *Vishamagni*
4. *Srotas*
 - *Prana*, *Anna* and *UdakaVahaSrotas*
5. Type of *Srotodusti* : -
 - *Sanga*, *VimargaGamana* and *Atipravitti*
6. *Adhisthana* – *UrahPradesha* (*Phuphusa*)
7. *UdbhavaSthana* – *Amasaya* (*Vagbhata*)
Pittasthana (*charaka*)
8. *RogaMarga* – *Abhyantara*

Purvarupa (Prodromal Symptoms)

When the vitiated *Dosas* begin to localize and affecting a particular organ or system, certain prodromal symptoms will start observe to before the full-fledged manifestation of the disease, which are noted in (Table 5). It is obvious from the table that the three *PurvaRupavizParsva Sula*, *PidanamHridayasya* and *Anaha* have been described in all the major *Ayurvedic* texts.

Rupa (clinical features): *Rupa* means signs and symptoms of the disease. It appears in the 4th *Kriyakalai*. e. *Vyaktavastha* in which signs and symptoms of a disease are completely manifested.

All the symptoms of TamakaShwasa described in Ayurvedic texts have been shown in the (Table 6).

Types of Tamaka Shwasa⁶: AcharyaCharaka mentions two types of Tamaka Shwasa-

- Santamaka
- Prathamaka

Prathamaka : Pittanubadhata in Tamaka Shwasaleads to appearance of symptoms like Jwara, Murchha in Prathamaka. Intake of cold things produces relief in signs and symptoms of Tamaka Shwasa. Udavarta, Rajo, Ajirna, Vega Vidarana and Vriddha aggravate the attacks of Shwasa.

Santamaka : Patients get relief after hot intake.

Principles of Treatment: In the classical texts of Ayurveda, the approach of treatment has been made in the following way. Chikitsa of Shwasa depends upon the Dosha involved and physical state of patient. On the basis of Doshicstatus and physical state, the patients can be classified as follows:

Doshic Status	Physical Status
A. Kaphadhika	A. Balavan
B. Vatadhika	B. Durbala

1.Samsodhana^[7]:

Charakaemphasized that patient of strong built and with the dominance of Kapha should be treated with Samsodhanatherapy, i.e. Vamana and Virecana as per the case.

2.Samshamana^[8]:

Charaka emphasized that not strong built, children, old patient of and with the dominance of Vata should be treated with Samshamana therapy. The scope of Samshamana therapy in this disease is more wide and practical, which is applicable in all stages. For the patients, who are not eligible for Samsodhana karma (Durbala), Samshamana therapy should be adopted. Samshamana therapy in this case

includes Dipana, Pacana, KaphaVataShamaka drugs and regimen along with drugs that purify PranavahaSrotas. Children and old subjects are also managed with Samsamana therapy.

3. Nidana Parivarajan^[9]:

In all the four types of patients for the treatment, NidanaParivarajan or avoidance of all types of precipitating or predisposing factors are to be strictly followed. If the precipitating or predisposing factors are not avoided, the Dosas involved in the pathogenesis will further be aggravated and the prognosis will be worse.

Pathyapathya :

Pathya Varga^[10]: PuranaShastik, RaktaShalidhanya, Godhuma, Yava, Mudga, Meat of Shashaka, Peacock, Lava, Kukkutaetc, Kantakari, Jeevantisaka, Bimbiphala, Truti (sukshmaEla), Marica,Shunthi, Draksha, Lashun, Puranaghrita, Ajadugdha, Ajaghrita, Gomutra, Sura,Udaka(hot water),Madhu, etc.

ApathyaVarga^[11] :Masha, Anupamamsa (fish), MandaShaka (potato) Mustard,Masha, Dugdha, Dadhi, Tail, etc as Ahara. Suppression of Mutravega, long journey, lifting heavy weight, Cintaetc as Vihara.

- EkaDravya (mono herbal): Pushkaramula, Shathi, Amlavetasa, Ela, Yastimadhu, Shirisha etc.
- EkadhikaDravya (Poly herbal): Talisadicurna, BharangiGuda, Haridracurna, Pippalyadyalauha, Kanakasava, Shirisharishta etc.
- Compound Medicine (mixed with herbs, minerals and animal products) : Srinyadicurna, Bharangisarkara, Vijayavati, Shwasakutara rasa Shwasabhairav rasa, Shwasacintamani rasa, Hinsradyagharta, Suryavarta rasa etc

Table 1: Etiological factors related to Ahara

S. No	Ahara	C.S.	S.S/Ma. Ni	A.S	A.H
Vataprakopaka					
1	Ruksanna (fat free diet)	+	+	-	-
2	Visamasana (irregular diet)	+	+	-	-
3	Sitasana (cold food)	-	+	-	-
4	Anasana (fast)	-	+	-	-
5	Visasevana (Incompatible)	+	+	-	+
6	Sitaambu (cold water)	+	+	+	+
7	Vistambhibhojan (slowly digested food)	+	+	-	-
8	Adhyasana (frequent meals)	-	+	-	-
9	Dvandvalayoga (mutually antagonistic)	+	-	-	-
Kaphaprakopaka					
1	Masa (black gram)	+	-	-	-
2	Nispava (beans)	+	-	-	-

3	Pinyaka (tila paste)	+	-	-	-
4	Pistabhojan (paste preparation)	+	-	-	-
5	Jalajamamsa (aquatic fish)	+	-	-	-
6	Gurubhojan (heavy diet)	+	+	-	-
7	AmaKshira (unboiled milk)	+	-	-	-
8	Dadhi (curd)	+	-	-	-
9	Anupapisita	+	-	-	-
10	Tilataila	+	-	-	-
11	AbhisyandiAnna	+	+	-	-
12	SlesmalaDravya	+	-	-	-
13	Saluka (lotus rhizome)	+	-	-	-
14	UtklediAhara	-	-	+	+

Table 2: Etiological factors related to Vihara

S. No	Vihara	C.S	S.S/ Ma. Ni	A.S	A.H
Vataprakopaka					
1	Rajas (Dust)	+	+	+	+
2	Dhuma (Smoke)	+	+	+	+
3	Vata (wind)	+	+	+	+
4	Sita-Sthanasevana (residing in cold place)	+	+	-	-
5	Sitaambu (Cold Water)	+	+	+	+
6	Vyayama (exercise)	+	+	-	-
7	Gramyasevana (over indulgence in sex)	+	+	-	-
8	Atyapatarana (malnutrition)	+	-	-	-
9	Marmaghata (trauma over vital organ)	+	+	-	+
10	Bharavahan (excessive weight lifting)	-	+	-	-
11	Vegavidharana (suppression of urges)	+	+	-	+
12	Suddhiatityoga (excessive purification)	+	+	+	+
13	Kantapratighata (throat trauma)	+	-	-	-
14	Urahpratighata (chest trauma)	+	-	-	-
15	Karmahata (exhausted)	+	+	-	-
16	Ayasa	-	-	-	+
17	Jagarana	-	-	-	+
KaphaPrakopaka					
1	Abhisyandyupacaras	+	-	-	-
2	Divaswapna	-	-	-	+

C. S : CharakSamhitaChikitsaSthana 17/11-16; S. S.: Sushruta Samhita Uttar Tantra 50/3-5

Ma.Ni. : Madhav Nidana 12/1-3, A. S.: AstangaSangraha Nidana Sthana 4/6, A.H.: Astanga Hridaya Nidana Sthana 4/1-2

Table 3: Precipitating factors of Tamaka shwasa

VyanjakaHetu	C.S	S.S	A.H
Megha (clouds)	+	-	+
Ambu (water)	+	-	+
Seeta (cold)	+	-	+
SleshmaVardhaka (Kapha increasing issues)	+	-	+
Pragvata	+	-	+
Udavart	+	-	-
Ajirna	+	-	-

Table 4: Nidanarthakarogas

S. No	NidanarthakaraRoga	Caraka	Susruta	A.H.	A.S.
VatajaRogas					
1	Anaha	+	-	-	-
2	Daurbalya	+	-	-	-
3	Atisara	+	-	-	-
4	Ksaya	-	+	-	-
5	Ksataksaya	+	-	-	-
6	Udavarta	+	-	-	-
7	Visucika	+	-	-	-
8	Panduroga	+	-	+	+
9	Visa Sevana	+	-	+	+
10	Vibandha	+	-	-	-
11	Avarana	-	-	-	+
12	DhatuKsaya	+	-	-	-
PittajaRogas					
13	Rakta Pitta	+	-	-	-
14	Jvara	+	-	-	-
KaphajaRogas					
15	Kasa	-	-	+	+
16	Amapradosa	-	+	-	-
17	Chardi	+	-	+	+
18	Pratisyaya	+	-	-	-
19	Amatisara	-	-	+	+

Table 5: Prodromal Symptoms of *Tamaka shwasa*

Symptoms	C.S	S.S.	A.H.	Ma. Ni.
Anaha	+	+	+	+
Adhamana	-	-	-	+
Arati	-	+	-	-
BhaktaDvesa	-	+	-	-
VadanasyaVairasya	-	+	-	-
Parsvasula	+	+	+	+
PidanamHrdayasya	+	+	+	+
PranasyaVilomata	-	-	+	+
SankhaNistoda	-	-	+	+

C.S. :CharakChikitsa 17 / 20; S.S. :Sushruta Uttar 51 / 6; A.H. :AstangaHridayaNidana 4 / 4 -5; Ma.Ni. :MadhavNidana 12 / 16

Table 6: Clinical Features of *TamakaShwasa*

Symptoms	C.Sa.	Su. Sa.	A.H.	A.S.
AtivegatanaMurhurmuhuKasa	+	-	-	-
Aruci	-	-	+	+
Ghughurakam	+	+	+	+
GrivaParigraha	-	-	+	+
Kasa	+	+	+	-
KasatPramohonam	+	-	+	+
KaphahineSamyate	-	-	-	-
KrcchraBhasitam	+	-	-	-
LalatSveda	+	-	-	-
MuhurmuhuShwasa	+	-	-	-
Pinasam	+	-	+	+
PranaprapidakaShwasa	+	-	-	+
RuddhaShwasa	+	-	-	-
SakampaKasa	-	-	-	-
SayanatParsyaghraham	+	-	-	-
SiraParigraha	-	-	+	+
TivravegatahShwasa	+	-	+	+
Ucchritaksah	+	-	+	+
UrahaParigraha	-	-	+	+
Visuskasya	+	-	+	+

C.S.: CharakaChikitsa17 / 55 – 62; S.S.:Sushruta Uttar 51/8 – 10; Ma. Ni.:Madhava Nidana 12 / 27 – 34; A.S.: Astanga Sangraha Nidana 4 / 6; A.H.:Astanga Hridaya Nidana 4 / 6 -10

CONCLUSION

Survey of available literature points out that, vitiation of *Vata*, *KaphaDosh* along with *Prana*, *Udaka* and *AnnaVaha* and *RasaDhatuSrotas* are the responsible factors in the manifestation of disease - *TamakaShwasa*. The disease *Shwasa* has its root in the *Pitta Sthana* endorsed by *AmashayodhabhavajaVikara*. Despite having same vitiated *SamprapatiGhataka*, genesis of disease *Shwasa* occurs through various steps termed as *Samprapati*, depending upon etiology, vitiation of *Doshas* and status of *Agni* etc.

The pathogenesis of *Shwasa* primarily involves vitiation of *VataDosh* in all over body. This vitiated *Vata* which is located in *Urahasthana* ultimately creates *Rukshta*, *Sankocha* and *Kharata* in *PranavahaSrotas*. Then this vitiated *Vata* interferes with the normal *Kapha* in *Urahasthana* which leads to *Vilomata* of *Pranavayu* through obstruction to its natural movement by *Kapha*. Many times *Kapha* gets vitiated independently or through *RasaDhatwagniMandyait*s *Mala* i.e. *Kapha* get located in *Urahasthana* and cause obstruction to normal movement of *Vayu* which end up with *Vilomata* of *Vayu*. In another type, both *Vata* and *Kapha* get vitiated independently along with production of *Amavisha*. This

contributes to the origination of *Shwasa*. These three pathways of *Samprapti* results in *Shwasa* with slight variation in signs and symptoms.

Acharyas have advised the use of *Vatakaphaghna*, *Ushna*, *Vatanulomaka* drugs as a first line of treatment in *TamakaShwasa*. But adoption of certain specification is always required for the breakdown of these three pathways of *Samprapti*. Also drugs exhibiting quick control over vitiated *Vata* and *Kapha* are required during *Vegavastha*, while having action on *Agni* or *Pittasthana* along with *Vatakaphaghna*.

Hence, logically, the drug administered for the treatment of *TamakaShwasa*, should be able to overcome *Vata* and *Kapha* for immediate and symptomatic relief but should also pacify the *Pitta* for relief.

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