



A Review on The Efficacy of *Shringyadi Churna* In The Management of Tamaka Shwasa (Bronchial Asthma)

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Abstract

Bronchial asthma is a chronic inflammatory disease of respiratory system. It includes symptoms like breathlessness, wheezing, tightness of chest, which mainly appears at night or early morning. Inflammation of lungs causes due to hyper-reactivity of immune system of lungs to the different allergens. In *Ayurveda* bronchial asthma can be correlate with the *Tamaka shwasa*. *Tamakashwasa* mainly cause by the aggravated *Kaphadosa* along with *vatadosa*. *Acharya charaka* has considered *Tamaka shwasa* as *yapyaroga* means patient have to depend on medicines for lifetime. There is no cure for asthma as per modern science, But many researches has proven that the herbal medicines are useful for disease control in asthmatic patients. The present is a review to show the efficacy of *Shringyadi churna* in the management of Tamaka shwasa (bronchial asthma).

Keywords: Tamaka shwasa, Shringyadi churna, bronchial asthma

Introduction

Bronchial asthma has become alarming disease for the present era. Increase in pollution, population, poor hygiene, alter food habits, change in life style are the major factors responsible for the increase in prevalence rate of asthma. About 300 million people are diagnosed with asthma globally and current prevalence study suggest that this number may increase by addition of 100 million patients by 2025^[1].

The word 'asthma' is derived from the Greek meaning 'panting' or 'labored breathing'. Bronchial asthma is a chronic inflammatory disease of respiratory system. It is characterized by the chronic inflammation of lungs and obstruction in air flow. Inflammation of lungs causes due to hyper-reactivity of immune system of lungs to the different allergens. Bronchospasm and air way inflammation are recognisable component of the diseases^[2].

In *ayurvedaachryas* has addressed bronchial asthma as “*Tamaka shwasa*”.The meaning of *Tamaka shwasa* is ‘burying into darkness due to shortness of breathes’.The chief *dosas* involved in the pathogenesis of this disease are *Kapha* and *Vatadosas* due to which *Pranavayu* get vitiated cause difficulty in breathing.

Tamaka shwasa is *yapyaroga* in which patient has to depend on prolonged intake of medicine. Modern medicine is providing short term of relief and long term use of these medicine may increase dose dependency and leads to other various adverse effects. In *Ayurveda shodhana* and *shaman* therapies are given for the treatment of *Tamaka shwasa* in *samhitas*. *Shodhan* therapies helps to detoxify the body and provides nutrition which helps to improve natural immunity of body. Whereas *shaman* therapies helps to maintain this immunity and reduced the recurrence of diseases. The present study shows efficacy of one of the formulation used in *shaman chikitsa* i. e. *Shringyadi chruna* for the management of *Tamaka shwasa*.

Sringyadi churna contains *Shringi*, *Shunthi*, *Pippali*, *Musta*, *Pushjkarmoola*, *Shati* and *Maricha*. All the drugs in *Sringyadi churna* mainly possess *Katu*, *Tikta* and *Kashaya rasa*, *Katuvipaka*, *Ushnaveerya* and *laghu*, *rukshaguna*. *Kapha* is main *dosa* responsible for *srotovibandha* and *katurasa* by showing *deepen*, *pachana karma* reduces the obstruction in *srotasa*. *Tikta rasa* is useful in *amapachana*. With the help of *Ushnaveerya* these drug are useful for alleviation of *kapha-vatadosa* .All these drugs also shows the pharmacological activity such as anti-inflammatory, anti- microbial, anti- oxidance, bronchodilator which helps to break the pathogenesis of *Tamaka shwasa*.

Aim & Objectives:

- To evaluate the effect of *Shringyadi churna* in *Tamaka shwasa*.
- To study the review of literature through *Ayurvedic* text.

Material and Method:

The present study is based on ancient *Ayurvedic samhita grantha*, research journals and various websites.

Bronchial asthma

Bronchial asthma can be characterized by bronchial hyperactivity which results into the recurrent episodes of wheezing, coughing and breathlessness particularly at night or early morning. The word 'asthma' is derived from the Greek meaning 'panting' or 'labored breathing'.

There is obstruction of airflow within lungs which is a hyperactive response to the different allergens and can be reversible with proper treatment^[3]. Causative factors for the inflammation in the lower airway are genetic factors or environmental exposure (dust, pollen grain etc.). The airway inflammation is characterized by increase in the number of eosinophiles, type 2 T cells and mast cells in airway mucosa. Which results into narrowing of airway epithelium and fibro genesis of smooth muscles.^[4]

Due to increase in airway resistance there is reduction of expiratory flow and the expiration become an active process. Lungs hyperinflation leads to the diaphragmatic flattening, which again worsen the condition. Hence there is increase in total lung volumes and both forced vital capacity and forced expiratory volume are decreases.^[5]

Tamaka Shwasa (Ayurvedic Aspect)

In *ayurved aachryas* has addressed bronchial asthma as "*Tamaka shwasa*". It is one of the five types of *Shwasa vyadhi*. The meaning of *Tamaka shwasa* is 'burying into darkness due to shortness of breathes'. Patient experiences other symptoms such as respiratory distress extreme weakness, fatigue and mental glooming. Meaning of *Tamaka shwasa* explained that during attack of the disease patients feels entering into the darkness (*Tama pravesha*) due to severe difficulty in breathing, mostly during night and in the early morning. The chief *dosas* involved in the pathogenesis of this disease are *Kapha* and *Vatadosas* due to which *Pranavayu* get vitiated cause difficulty in breathing. The condition of *shwasa* can be produced due to the secondary effect of diseases like *jwara*, *pandu*, *kasa* etc.

Aggravated *kaphadosa* obstruct the normal circulation (*gati*) of *vatadosa* and *prakrutgati* of *pranavayu* get reverse which also affect the *Pranavaha Strotas*. Patient suffer from this condition experience cough, dyspnea, with wheezing sound, shortness of breathing and patient may become unconscious. When the sputum being expectorated patients feels relief after so much of coughing. Patient feels comfortable after intake of hot things and in sitting position rather than lying down position. Other symptoms include *anaha* (*gud-gug* sound in abdomen), *parshvashoola* (pain in the lateral sides or in robes), *hritpeeda* (pain in chest), *pranavilomata*, *bhaktadweshha* (dislike towards food) along with the dryness of mouth, protruded eyes, unable to get sleep, speak hardly, sweating over forehead. These symptoms intensified in humid, rainy, cloudy and cold season, also by taking things which aggravated *Kaphadosa*.^[6]

Acharya charaka has considered *Tamaka shwasa* as *yapyaroga* means patient have to depend on medicines for lifetime. But it is curable if treated in early stage. *Acharya charaka* has also explained other two types of *Tamaka Shwasa* that are *Santamakashwasa* and *Pratamaka Shwasa*. *Santamaka shwasa* is opposite of *Tamaka shwasa* in which patient get relief with cold (*sheetopachara*). *Pratamaka shwasa* is associated with fever and fainting along with the other symptoms of *Tamaka shwasa*.^[7]

Shringyadi Churna^[8]

शृंगीमहौषधकणाघनपुष्कराणांचूर्णशटीमरिचशर्करयासमेतम्।

क्वाथेनपीतममृतावृषपंचमूल्याःश्वासंत्र्यहेणशमयेदतिदोषमुग्रम्॥ □□. र .

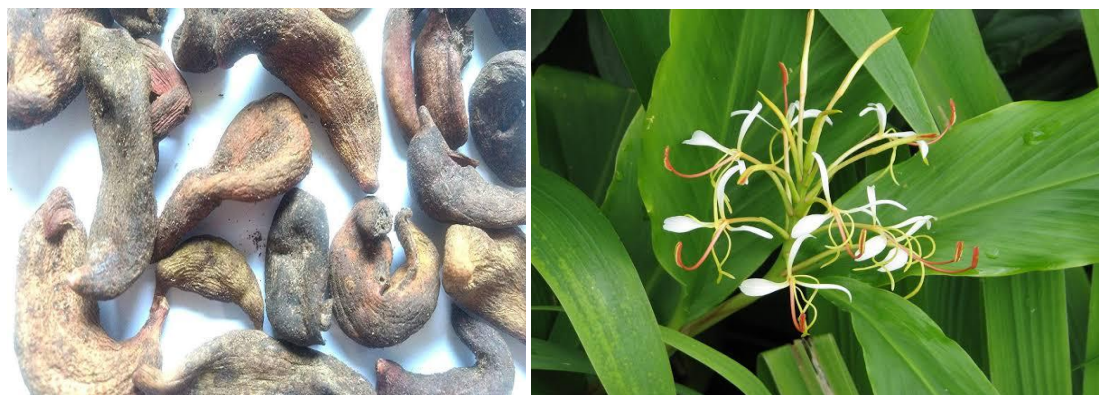
Shringyadi churna contains Shringi, Mahaushadha (Shunthi), Kana (Pippali), Ghana (Musta), Pushkarmoola, Shatiand Maricha. All these ingredient taken in the form of dry powder and equal amount of Sharkara is added.

Dose- 2 to 3 grams, two or three times in a day.

Anupana–Ghrita/ Ushnodaka/ decoction of Amruta(Guduchi), Vasa and Panchmoola.

List of ingredients and their properties:^[9]

Sr.No	Dravya	Botanical Name	Rasa	Vipaka	Veerya	Guna
1	Shringi	<i>Pistaciaintegerrima</i>	Kashya, Tikta	Katu	Ushna	Laghu, Ruksha
2	Shunthi	<i>Zingiberofficinale</i>	Katu	Madhura	Ushna	Guru, Ruksha, Tikshna
3	Pippali	<i>Piper longum</i>	Katu	Madhura	Ushna	Laghu, Ruksha
4	Musta	<i>Cyperusrotundus</i>	Tikta, Katu, Kashaya	Katu	sheeta	Laghu, Ruksha
5	Pushjkarmoola	<i>Inularacemosa</i>	Tikta , Katu	Katu	Ushna	Laghu, Ruksha
6	Shati	<i>Hedychiumsapicatum</i>	Katu, Tikta, Kashaya	Katu	Ushna	Laghu, Tikshna
7	Maricha	<i>Piper nigram</i>	Katu	Katu	Ushna	Laghu, Tikshna



Shringi(*Pistaciaintegerrima*)Shati (*Hedychiumsapicatum*)



Pushkarmoola (*Inularacemosa*)

Musta (*Cyperusrotundus*)



Maricha (Piper nigrum) Shunthi (Zingiber officinale)



Pippali (Piper longum)

Discussion

The vitiated *Kapha* and *vata* dosas are responsible for producing symptoms of *Tamakashwasa* then the treatment must include the therapies which alleviates both *Kapha* and *Vata*. Patient suffering from *tamaka shwasa* required prolong medication as *acharya* consider it as *yapyaroga*, so the *shaman chikitsa* is mostly recommended due to its less or no side effects. In *Tamaka shwasa pranavaha*, *udakavaha* and *Annavaha srotas* are affected so the recommended *shaman yoga* is expected to work on these *srotasa*.

Sringyadi churna contains *Shringi*, *Shunthi*, *Pippali*, *Musta*, *Pushkarmoola*, *Shati* and *Maricha*. All the drugs in *Sringyadi churna* mainly possess *Katu*, *Tikta* and *Kashaya rasa*, *Katuvipaka*, *Ushnaveerya* and *laghu*, *rukshaguna*. *Kapha* is main *dosa* responsible for *srotovibandha* and *katu rasa* by showing *deepen*, *pachana karma* reduces the obstruction in *srotasa*. *Tikta rasa* is useful in *amapachana*, which is main factor in *samprapti* of *Tamaka shwasa* and *tikta rasa* also shows *lekhaniya* properties which again reduces the *srotoavrodha*. Most of the drugs possess *laghu*, *ruksha* and *tikshnaguna* which shows *kaphaghna* and *vataghna* properties and reduces the aggravate *dosas*. With the help of *Ushnaveerya* these drug are useful for alleviation of *kapha-vatadosa* as *ushnaveerya* is responsible for *sheetguna* of both *dosas* and hence drugs in *Sringyadi churna* is useful in breaking pathogenesis of *Tamaka shwasa*.^[10]

Shringi possess *kapha-vatahara* and *deepana* properties. It also shows anti-allergic and expectorant action which helps to remove excess mucus from respiratory tract. It relaxes the respiratory passages and shows action bronchitis. *Shunthi*, *pippali*, *marich*, *shati*, *poshkarmoola* having properties of *kaph-vatashamaka*. *Pushkarmoola* is useful for *deepana*, *pachana* and *vatanulonama*. With these properties all these drugs shows their action on *pranavaha*, *udakavaha* and *annavahasrotasa* and helps in breaking *Samprapti* of *Tamakashwasa*. *Marich*, *pippali*, *shunthi* having *agnivardhaka* property are useful for the digestion of *ama* and which removes the obstruction in *srotasa*. *Pushkarmoola* shows *vatanulomana* action to alleviate *vatadosa* to its *samyaka* state. *Sharkara* is *balya* and *poshaka* due to its *madhura rasa* and *sheet veerya*.^[11]

The pharmacological studies also observed that *Shunthi* has anti-viral, anti-microbial, anti-inflammatory, hypolipidemic properties^[12]. *Maricha* has anti-inflammatory, anti-asthmatic, Hepato-protective, and antimicrobial, digestive, anti-oxidant properties^[13]. *Pippali* has anti-bacterial, anti-inflammatory, antidepressant, immune modulatory, and analgesic, anti-oxidative and anti-asthmatic activity^[14]. A study conducted by A. Sai Prasad and team in which they showed the action of *pushkarmooladi churna* in the management of *Tamaka shwasa*, they observed that *pushkarmola* act as a bronchodilator and *shati* acts as anti-inflammatory drug.^[15]

Conclusion

The aggravated *kapha-vatadosas* are main responsible for the pathogenesis of *Tamakashwasa*. *Tamaka shwasa* is *yaoyaroga* which required continuation of medication, hence *shaman* therapy is recommended. *Shrinvyadichurna* included the drugs having predominance of *Katu*, *tikta*, *Kashya rasa*, *katuvipaka*, *ushnaveerya* and *Laghu*, *Rukshaguna* shows *action* of *Kapha-vatahara* along with the other properties like *deepana*, *pachana*, *vatanulomana* and *kaphanisara* which is useful in breaking of pathogenesis of *Tamaka shwasa*. All these drugs also shows the pharmacological activity such as anti-inflammatory, anti- microbial, antioxidant, bronchodilator. Hence from the present review it is concluded that the *shringyadi chrurna* is useful formation of *Ayurveda* for the management of *Tamaka Shwasa* (bronchial asthma)

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