

Multidimensional Therapeutic Use of 'Talisadichurna': An Ayurvedic Literary Review

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Abstract: Experiment & observation are the primary steps before reaching into any conclusion. There are several ayurvedic formulations of herbal, mineral or herbo-mineral composition which have been used for millennium after millennium towards betterment of mankind. Ayurveda is the oldest science, dealt with prevention & cure has taken those compounds for the treatment of suffering humanity as a part of Indian civilization & culture. Talisadichurna is a very common polyherbal compound has been used successfully by our ancestors in the management of cough-cold, respiratory disorder, mal absorption syndrome, anemia, diarrhea etc. Through the present study it has been tried to gather information regarding the different types of Talisadichurna & to collect the pharmacodynamics of the ingredients which are used as a composition of this medicine. The related references, regarding the therapeutic indication from ancient era to till date mentioned in Charak (2500BC / 1000BC), Vagbhatta (6th century), Bhav Prakash (16th century), Sharangadhar (13th century) have also been tried to furnish here in a methodical manner. This study may encourage the ayurvedic physician as well as research scholar of this field towards their extensive work.

Keywords: Talisadichurna, pharmacodynamics of talisadichurna, Ayurveda & talisadichurna

1. Introduction

Ayurvedic classics have mentioned several herbals, mineral, Herbo-mineral compounds for the treatment of different diseases. It is very much interesting to note that one medicine could play its therapeutic effect over different diseases or may act on several systems. Talisadichurna is such a polyherbal compound which has the therapeutic action over different diseases like *rajyakshma* (pulmonary tuberculosis), *kasa* (cough), *swas* (bronchial asthma), *grahani* (mal absorption syndrome) etc. The reference of Talisadichurna has been revealed first in *charakasamhita* ⁽¹⁾ (2500BC/1000BC) in '*Rajyakshmarogadhikar*' (treatment of pulmonary tuberculosis) along with other indication. Simultaneously in 4th century AD Vagbhatta ⁽²⁾ has referred this medicine as a remedy of '*Grahani*' (mal absorption syndrome) along with other uses. Likewise Acharya Sharangadhar ⁽³⁾ (11th century AD) used this *churna* in the treatment of '*arochak*' besides other effects. Bhaisajya Ratnavali ⁽⁴⁾ the famous ayurvedic pharmacopeial text of 19th century AD have mentioned this medicine in '*kasarogadhikar*' (cough/RTI). Now a days almost all ayurvedist prefer to use this medicine in the condition like unproductive cough, COPD, throat infection, anorexia etc.

The difference of opinion not only seen in special indication of the drug but also found in composition as well as ratio of the ingredients. Almost all ancestor have recommended the common ingredients of Talisadichurna like *talispatra* (Abeswebbiana, Lindl.), *pippali* (Piper longum, Linn.), *marich* (Piper nigrum, Linn.), *sunthi* (Zingiber officinale, Roscoe.), *vamsalochan* (Curcuma angustifolia, Roxb.), *ela* (Elettaria cardamomum, Maton.), *twak* (Cinnamomum zeylanica, Breyn.) & *sita* (sugar). But Vagbhatta has added *chavya* (Piper chaba, Hunter.), *pippalimula* (Piper longum, Linn.), *usher* (Vetiveriazizanoideis, Nash.), *patra* (Cinnamomum tamala, Fr. Nees.), *nagkeshar* (Mesua ferrea,

Linn.). Interestingly Bhaisajya Ratnavali has contributed two⁴ formula of Talisadichurna where the first one is as similar as the common one and the second one is significantly free from *sita* or *sarkara* (sugar) & composed with *Talispatra* (Abeswebbiana, Lindl.), *sunthi* (Zingiber officinale, Roscoe.), *pippali* (Piper longum, Linn.), *marich* (Piper nigrum, Linn.), *karkatsringi* (Pistacia integerrima, Stewart.), *ela* (Elettaria cardamomum, maton.), *bibhitaki* (Terminalia bellerica, Roxb.), *vamsalochan* (Curcuma angustifolia, Roxb.).

The recommended dose of second formula stated in Bhaisajya Ratnavali is quite different & very less in quantity in comparison to the former one whose usual dose is 3gm twice daily in adults. This variation probably due to the more *ushnavirya* (hot potency) property of the preparation & needed to enhance the power of *agnif* of the patient to pacify the *shitaguna* (cold property) of *vata* & *kapha* by the lesser dose of 1/2 *masha* (500mg).

The ingredients which are commonly present in Talisadichurna are possessing the action over dosha i.e. *vata-kaphashamak* (pacifying *vata* & *kapha* humors) and other action like *Deepak*, *pachak* (enhancing the power of metabolic fire). *Sita* & *sarkara* performs the role of balancing *pitta* and by the use of such preparation *tridosha* may come in to a balanced condition. In the composition of Talisadichurna the term '*subha*' has been used by Charak as an ingredient, regarding the identification of '*subha*' some controversies have also been noticed, where some said '*subha*' denotes '*vamsalochan*' but others opined that '*subha*' is an adjective used for *pippali* meant by healthy or genuine *pippali*.

In present study the above-mentioned facts have been tried to bring forward & which have been submitted in a methodical manner for better understanding of the readers.

As Ayurveda gives importance to maintain homeostasis of the body⁽⁵⁾ through *samadosh* (equilibrium of humors) *samaagni* (maintenance of digestive fire) *samadhatu* (normalcy of bodily components) & proper expulsion of digestive, metabolic & excretory waste, so it has been tried to established here that definitely the components of poly herbal medicine *Talisadichurna* has the action over those aforesaid conditions.

2. Materials & Methods

Material

In present study materials is the texts of ancient era like *Charak Samhita*, *Astanga Hriday*, *Sharangadhar*, *Bhaisajya Ratnavali*, various texts of *Nighantu* (ayurvedic pharmacopoeial text), journals etc. which have been reviewed thoroughly.

Method

Through review of the ancient text & journals have been carried out vividly with chronological order & furnishing of the same in table and chart. At last discussion followed by conclusion done.

Method of preparation of medicine (*Talisadichurna*)

Talisadichurna is prepared as per *churna Kalpana* i.e., all the ingredients are taken as mentioned in compendium & make fine powder of them then mix thoroughly.

Dose: 6gm in divided dose daily for the common preparation 500mg daily for special preparation (formulation no 2) stated by *Bhaisajya Ratnavali*

Anupana: Honey or luke warm water

3. Result & Observation

Table 1 showing various composition of *Talisadichurna* as stated by different ancient classics

INGREDIENTS	CHARAKA ⁽¹⁾	ASTANGA HRIDAY ⁽²⁾	BHAISHAJYA RATNABALI ⁽³⁾	SHARANGADHAR ⁽⁴⁾
<i>Talispatra</i>	+	+	+	+
<i>Pippali</i>	+	+	+	+
<i>Sunthi</i>	+	+	+	+
<i>Marich</i>	+	+	+	+
<i>Pippalimula</i>	-	+	-	-
<i>Ela</i>	+	+	+	+
<i>Twak</i>	+	+	+	+
<i>Vamsalochan</i>	+	-	+	+
<i>Ushir</i>	-	+	-	-
<i>Chavya</i>	-	+	-	-
<i>Sita</i>	+	+	+	+
<i>Patra</i>	-	+	-	-
<i>Nagkesar</i>	-	+	-	-

Table 2 showing the pharmacodynamics (*rasa, guna, virya, vipak & dosha karma*) of the ingredients of *Talisadichurna* as mentioned in various *nighantu* (ayurvedic pharmacopoeial text)

Ingredients	RASAPANCHAK	DHWANANTARI NIGHANTU ⁽⁶⁾	RAJ NIGHANTU ⁽⁷⁾	MADANPAL NIGHANTU ⁽⁸⁾	KAIYODEV NIGHANTU ⁽⁹⁾
<i>Talispatra</i> (<i>Abeswebbiana</i>)	RASA	-	Tikta	-	Tikta & katu
	GUNA	-	-	Laghu, tikshna	-
	VIRYA	-	Ushna	Ushna	-
	VIPAK	-	katu	-	-
	DOSHA KARMA	<i>Kapha pitta jita</i>	<i>Kaphavatanuta</i>	<i>Kaphavata hara</i>	<i>Kaphavata hara</i>
<i>Marich</i> (<i>Piper nigrum</i>)	RASA	<i>Katu, tikta</i>	<i>Katu, tikta</i>	<i>Katu</i>	<i>Katu</i>
	GUNA	-	<i>Snigdha, ushna</i>	<i>Tikshna, ruksha</i>	<i>Laghu, tikshna, ruksha</i>
	VIRYA	<i>Ushna</i>	<i>Anushna</i>	<i>Ushna</i>	<i>Ushna</i>
	VIPAK	-	<i>Madhur</i>	<i>Katu</i>	<i>katu</i>
	DOSHA KARMA	<i>Kaphavata shamak, pitta vardhak</i>	<i>Vatakapha hara</i>	<i>Kaphavata hara</i>	<i>Vatakapha shamak</i>
<i>Pippali</i> (<i>Piper longum</i>)	RASA	<i>Katu</i>	<i>Katu, tikta</i>	<i>Katu</i>	<i>Katu</i>
	GUNA	<i>Snigdha</i>	<i>Snigdha</i>	<i>Snigdha, laghu</i>	<i>Laghu, snigdha</i>
	VIRYA	<i>Shita</i>	<i>Ushna</i>	<i>Atyushna</i>	<i>Anushna</i>
	VIPAK	<i>Madhur</i>	-	<i>Madhur</i>	<i>Madhur</i>
	DOSHA KARMA	<i>Tridosha hara</i>	<i>Vatakapha hara</i>	<i>Kaphavata hara</i>	<i>Kaphavata hara</i>
<i>Sunthi</i> (<i>Zingiber officinale</i>)	RASA	<i>katu</i>	<i>katu</i>	<i>katu</i>	<i>katu</i>
	GUNA	<i>Snigdha</i>	<i>Snigdha</i>	<i>Snigdha, laghu</i>	<i>Snigdha, laghu</i>
	VIRYA	<i>Ushna</i>	<i>Ushna</i>	<i>Ushna</i>	<i>Ushna</i>
	VIPAK	-	-	<i>katu</i>	<i>madhur</i>
	DOSHA KARMA	<i>Kaphavata shamak</i>	<i>Kaphavata shamak</i>	<i>Kaphavata shamak</i>	<i>Kaphavata shamak</i>
<i>Twak</i> (<i>Cinnamomum zeylanica</i>)	RASA	-	<i>Katu</i>	<i>Katu, Madhur</i>	<i>Katu</i>
	GUNA	<i>Laghu, tikshna</i>	<i>Laghu</i>	<i>Laghu</i>	<i>Laghu</i>
	VIRYA	<i>Ushna</i>	<i>Shita</i>	<i>Ushna</i>	-
	VIPAK	-	-	<i>Katu</i>	-
	DOSHA KARMA	<i>Kaphavata shamak</i>	<i>Kapha shamak</i>	<i>Pitta vardhak</i>	-

Ela (Elettaria cardamomum)	RASA	Madhur	Tikta	-	Katu
	GUNA	-	Shita	-	Laghu
	VIRYA	Shita	Shita	-	Shita
	VIPAK	-	-	-	-
	DOSHA KARMA	-	Pitta kapha hara	Kapha hara	Vatakapha hara
Vamsalochan (Curcuma angustifolia)	RASA	Kasaya, tikta, katu	Madhur	Madhur, kasaya	Madhur, kasaya
	GUNA	-	Shita	Shita, ruksha	-
	VIRYA	Shita	Shita	Shita	Shita
	VIPAK	-	-	Madhur	-
	DOSHA KARMA	Pittahara	Daha pitta nuta	Rakta pitta hara	Kapha pitta hara

Table 3 showing various action as well as therapeutic indication of Talisadichurna at par opinion of Ayurvedic ancestors

Samhita	Therapeutic Indication
Charaka Samhita ⁽¹⁾ (Rajyakshmarogadhikar)	Kasa (cough-cold), Swas (bronchial asthma), Aruchi (anorexia), Pandu (anemia), Grahani (mal absorption syndrome), Sossa (consumption), Pleeha (spleen disorder), Jwar (fever), Atisar (diarrhea), Shula (abdominal pain)
Astangahridaya ⁽²⁾ (Grahanirogadhikar)	Chordi (vomiting), Grahani (mal absorption syndrome), Parswaruja (pain in flanks), Hridruja (cardiac disorder), Jwar (fever), Swyathu (dropsy), Swas (bronchial asthma), Kasa (cough-cold), Gulma (abdominal lump), Panatyaya (alcoholic intoxication), Arsha (piles), pinasa (rhinitis)
BhaisajyaRatnavali ⁽⁴⁾ (kasarogadhikar)	Kasa (cough & cold), Swas (bronchial asthma), Aruchi (anorexia), Pandu (anemia), Grahani (mal absorption syndrome), Sossa (consumption), Pleeha (spleen disorder), Jwar (fever), Atisar (diarrhea), Shula (abdominal pain), Raktapitta (bleeding disorder) Gala amay (throat disease)
Sharangadhar ⁽³⁾ (Arochakrogadhikar)	Adhmana (flatulence), Chord (vomiting), Grahani (mal absorption syndrome), Kasa (cough & cold), Swas (bronchial asthma), Aruchi (anorexia), Pandu (anemia)

Pictures:



4. Discussion

Through the review of the Ayurvedic literature from ancient era to till date it has been found that Talisadichurna possesses therapeutic actions like swasnashan (respiratory stimulant), pachan (enhance digestion), vatanuloman (carminative), aruchinashan (anti anorexiogenic), hridaya (cardiogenic) & it has the effect over several diseases like swas (bronchial asthma), kasa (cough), grahani (mal absorption syndrome), atisar (diarrhoea), shula (abdominal pain) etc. The ingredients present in Talisadichurna are possessing the properties like usha (hot), tikshna (sharp), sukshma (subtle), laghu (light) which are known to act as analogous to vayu & kapha by enhancing the power of agni.

Regarding the pathogenesis of swasroga Madhav kar⁽¹⁰⁾ stated that “vata associated with kapha obstructs the passage (inside the lungs) & begins to move in all direction producing the disease swas”. as Talisadichurnais vata-kaphashamak so it could prevent or break the pathway of formation of swasroga. Moreover, the sukshma (subtle), tikshna (sharp), ushna (hot), sara (movable) gunas of the medicine are able to clean the srota by expelling out the accumulated kapha or other waste of pranavahasrota. Simultaneously he also stated that injudicious use of dietary regimen and performance of undisciplined work causes aggravation of doshas (vata, pitta & kapha) & grahani (duodenum) become affected by those doshas either individually or in combination cause expulsion of food

digested or undigested, mix with foul smelling faeces sometime solid and sometime liquid accompanied with pain in the abdomen. In such pathogenic way *agni* (digestive fire) definitely become deranged & correction of *agni* should be the mode of treatment. As almost all ancestors claimed that *grahani* (mal absorption syndrome), *aruchi* (anorexia), *atisar* (diarrhoea), *shula* (pain abdomen) are manifest due to the derangement of *agniso Talisadichurna* could be able to provide relief from such problem through *deepan* & *pachan* action by enhancing *agni*. In addition to this *deepan-pachan* action this medicine could enter into the obstructed channel by its *sukhma*, *tikshna*, *ushna* properties & become able to clear the channel from all sorts of obstruction made by *ama* (metabolic waste). In ayurveda the term '*chikitsa*' (treatment) denotes an act by which breaking of pathogenic way happens. Thus, in the treatment of *swas*, *kasa*, *grahani*, *atisar*, *shula*, *aruchi* *Talisadichurna* could be able to break the way of pathogenesis. Through this literary work it has been tried to make a justification between the properties and action of *Talisadichurna* as a whole & swell as each ingredient of this composition.

5. Conclusion

From above discussion it could be concluded that *Talisadichurna* has several references regarding its beneficial effect over *swas*, *kasa*, *grahani*, *atisara* & *aruchi*. *Talisadichurna* itself may pacify *vata* & *kapha* by enhancing the *agni*. It is a good agent towards cleaning the channel as well as maintenance of homeostasis of *pranvahasrota* (respiratory tract) and *annavahasrota* (gastro intestinal tract).

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References

- [1] *Charaka Samhita, Chikitsasthana*, 8th chapter, Verse no. (145-147)
- [2] *AstangaHridaya, Chikitsasthana*, 10th chapter, Verse no. (16-19)
- [3] *Sharangadhar Samhita, Madhyam khanda*, 6th chapter, Verse no. (132-135)
- [4] *BhaisajyaRatnavali*, 15th chapter, verse no. (36-40) & (41-42)
- [5] Dr. Kewal Krishna Thakral, 2017, *Sushrut Samhita, Sutra sthana*, 15th Chapter, verse no. (48)
- [6] Prof. P. V. Sharma, 2012, *Dhanvantari Nighantu*, P-79, 85, 83, 85, 79, 77, 80
- [7] Dr. Satish Chandra Sankhyadhar, 2012, *Raj Nighantu*, P-257, 202, 197, 200, 252, 222, 259
- [8] Dr. J. L. N. Sastry, 2017, *Madanpala Nighantu*, P-393, 306, 308, 301, 385, 383, 342
- [9] Prof. P. V. Sharma & Dr. Guruprasad Sharma, 2016, *Kaiyadeva Nighantu*, P-256, 214, 215, 213, 250, 248, 44
- [10] *Madhab Nidan*, 12th chapter, verse no. (17)