Role of Nasya Karma and Dhoomapana Karma in Management of Tamaka Shwasa

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Abstract: Respiration is evident feature of life which is carried out by Prana Vayu. Disease are manifesting due to the Asathmya Ahara and vihara(nidhana). Acharya Charaka has explained after Kasa roga, leads to Swasa condition if its left untreated. Here Prana and Udhana Vayu gets affected due to various reasons leading to difficulty in breathing, heaviness in the chest, here sole sign of life is affected leading to Tamaka Swasa and it can be correlated with the disease Bronchial Asthma on basis of its feature and Etiopathogenesis. If disease is acute origin then condition is curable (sadhya) and in chronic stage its manageable (yapya). Acharya Charaka says according to Shana, Karana and Moolla, Chikitsa to be adopted. Prana vayu stana is ‘murtha’(shiras). Hence Tamaka Swasa can be treated by Nasya Karma followed by Dhoomapana as Nasa (noisrril) is considered as Shiras Dhwara will be effective to reduce symptoms and controlling Prana Vayu.

Keywords: Tamaka Shwasa, Pranavata, Nasya Karma, Dhoomapana

1. Introduction

Human body requires air for the maintenance of healthy, so the Prana Vata plays main role. Nowadays the period of respiratory diseases is still a challenge in front of health care workers. Unlike many diseases which can be attributed to the lifestyle of modern man, Tamaka shwasa (bronchial asthma) is one such condition is life threatening.

Bronchial Asthma calls the attention of medical World due to significant burden in term of health care cost as well as lost productivity in family life. According to recent survey WHO estimation 334 million people suffer from Asthma, India has an estimated 15-20 million asthmatics. Its rough estimates indicate a prevalence of between 10% and 15% in 5-11 year old children. It occurs all over countries regardless of level of development over 80% of Asthma deaths occurs in low &lower-middle income countries.(2)

According to clinical course of disease both kapha and vata seems to be predominant. Vata holds prime importance in management as disease is consider to be yapya therefore proper planning of treatment and implementation of excellent life style is necessary for better quality of life.

Charaka has explained Samshodhana in Tamaka Swasa. Ayurveda panchakarma chikitsa plays important role in managing life style disorders, like by adopting Vamana, Virechana, Nasya, Basti and Rakta mokshana. Nasya and Dhoomapana being less importance in treatment of tamaka swasa, but better effective as atayyika chikitsa, shesha dosha harana and brimbanartha.

Nirukthi of Tamaka Swasa:
Swasa means dyspnoea-difficulty in breathing. The word Tamo means ‘Andakara’, during acute attack the patient of Tamaka Swasa feels as if they entering in darkness and other opinion of Tama mean Tamoguna.

Vishesha Nidana of Tamaka Swasa
In Tamaka Swasa mainly 2 varieties of Nidana were explained (3) i.e

Sannikrutura Nidana: vata-kapha prakopaka ahara Due to intake of ruksha, sheeta food items. Using sheeta jala and guruahara like marshy meat curd, unboiled milk

Viprakrutha Nidana: Inhalation of dust, smoke, sheeta ruti, varsha ruti, prataha kala. Leading to channel blocking obstruction in throat and chest leading to Kaphavardha.

Samprapti
“Pratilomam yadha srotamsi pratipadhyate”(4)

According to Charakacharya in Tamaka Swasa, their will be obstruction path way of Prana Vayu in Pranavaha Srotas, leading to its Vimagra gamana reaching to, Grievva and Shira Pradesha due to Sleshma Samudiratha then Vayu starts moving upwards by making ‘Gurgurak’ sound causing Swasa Roga.

Swasa Purvaroopa
Tamaka Swasa is also called as Pranaprapedaka as it causes increased respiration along with palpitation, Anaha and pain in shanka region. (5)

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Tamaka Swasa Samanaya Lakshana
When going through the lakshanas of Tamaka Shwasa in our Ayurvedic literature our Acharayas has told vyayu taking sever course reaches respiratory passages seizing neck and head and aggravating phlegm it produces coryza which creates obstruction and troublesome dyspnoea, Garghurkam (audible wheezing), Pinasa(coryza), Shirogaurava (heaviness in head region), kriechat bhashitum (difficulty in speaking) etc. all the Lakshnas showing Kapha predominance. (6)

Bedha:

Tamaka Swasa are of 2 types according to their clinical presentations. (7)

Pratamaka swasa: when Tamaka Swasa having all lakshanas along with jawara and murcha. Usually this verity of Swasa will be arising as nidanartha roga to udavarta, rajakana, ardita and vega dharana. By sheeta dravya upachara this will subsides.

Santamaka swasa: Where condition still aggravates in darkness and the condition usually subsides by sheeta dravya upachara. Patient of santamaka swasa feels the he falling into darkness (Tamaha Praveshata), mainly its having Manasika dosha involvement along with Sharirika.

Sadhya Asadhyata
Swasa Roga having involvement of both Kapha,Vata dosha and its Uthpattistana is Pittastana(adho amashaya) cause hridaya and rasadi dhatu shoshana,hence swasa in samanaya roopa also will become difficulty to cure.

In acute stage (nutana avasta) it is sadhya, in chronic (jeeravastava) becomes krichra sadhya iyappa. (8)

Tamaka swasa is not manifested with all lakshanas then according to avastanusara can be treated. If all lakshanas are manifested then condition turns into prana nashaka, as this usually seen in mrityukalaka.

Samanya Chikitsa of Tamaka Swasa
First and foremost important Chikitsa is nidhana parivarjana.Dravya which should have properties of kapha vata hara,ushna veerya,which does vatanulomana.Aushada, Anna and Pana also to be posses same properties, which does kapha nashaka and vata vardhaka or visarsa. Then in acute stage to be managed by adopting snidgha sweda in form of Nadi, Prastara or Sankara Sweda methods after person is massaged with salted oil. (9)

Avastanusara Sneha and Sweda to be done, by this Kapha Uthkleshana taking place, then person given with emesis and puration therapy with Pippali, Saindava and madhiu.Special attention to be given that dravya should not cause vata vriddhi. (10)

Nasya Karma and Dhoomapana In Tamaka Swasa

Nasya Karma
“Tama andhakara tamoguna aushadham, aushadha sidham sneham vaa nasikabhyam diyate iti nasyam” Any Aushadha/aushada sidda sneha which use to administer through nostrils /nasamarga called as nasya karma. (11)

Nasya is one among panchakarma therapy as it s used for the treatment of Urdhwa jatugata rogas. Nasya not only beneficial for Urdhwa jatugata roga but also for some systemic diseases, in that Swasa is one such disease.

Type of Nasya used in Tamaka Swasa
1) Navana (snidgha nasya)
2) Rechaka nasya

1) As Preventive aspect in Tamaka Swasa after Shodanadi Karma for Shumanartha or in Alpa Kapha condition one should go for some Snigha Nasya administration. The drug administered through nose as Nasya reaches the brain and eliminates only the morbid dosha responsible for producing the disease.
   a) Nasya can be given with equal quantity of Guda and Shunti.
   b) Nasya can be given with Stree Dugdha with Chandana or Sukoshna with Ghriti Manda. Here in this case Ushna then Sheeta Dugdha Prayoga to be adopted. This will help to remove Alpa Kapha or Shesha Kapha from the lipta srotas. (12)

2) As a Curative Nasya can be administered anytime with Palandu Swaras in acute/emergency conditions or frequently administration of drugs recommended to relive the respiratory distress.

Dhoomapana
Intake of medicated fumes through nostrils is Dhoomapana Vidhi.

Dhoomapana is told in Dinacharya (Daily Regimen) and also in Treatments. It is smoking, which helps to maintain good health and also to cure Respiratory diseases.

As a promotive aspect Madhya type of dhoomapana is used, as a Pashat karma to vamana dhooma and nasya karma for shesha dosha vinashharta. As Tamaka Swasa is predominant of kapha-vata dosha, hence according to Vaghdhatra Acharyar, madhyama type doomapana helpful in treating vata-kapha alignments.

In certain condition it can be given as Pradana Karma as curative also, like where in Sharirka Kapha Prakopa seen in Alpavasta where Vamana is not indicated then one can adopt Tiksha type of dhoomapana.
Drugs used in dhoomapana (13)

1) Haridropatra, eranda mula, laksha, devadaru, manashila, haratala and jatamansi(vari) for shesha dosha vinashhtara.
2) Dhooma to be given one should take dhooma with barely grains mixed with ghee.
3) As a pradhana karma nasya can be given with powder of haratala.

Procedure

8-10 inches long tube which is specially made for Dhoomapa is selected. The drugs which are to be used for smoking are roughly powdered and filled in tube. The patient is advised to smoke; the smoke should be inhaled from the mouth and also exhaled from the mouth.

Time duration for administration of dhoomapana

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Mode of Action of Nasya and Dhooomapana

Drugs used for Nasya Karma which helps in stimulation of vasodilator nerves which are spread out on the superficial surface of Urdhwanga, this increases the blood circulation to the brain. These drugs are considered as Bronchodilators dilates the bronchial tubes that are constricted due to muscular spasm. These drugs act upon the bronchial tubes and dilate them thus making the breathing easy.

When the head is kept in lower position, it aids retention of medicine in nasopharynx and help in providing sufficient time for local drug absorption.

This medication is meant for expelling the mucous and other allergic materials from the lungs, bronchi, and trachea. Commonly we can term it as expectorant, which promotes drainage of mucus from the lungs by thinning the mucus and also lubricates the irritated respiratory tract. When the Nasya Dravya are administered through the nasal cavity, the drug gets absorbed by the passive process across the cell wall directly through the cell membrane as lipid soluble medicine has greater passive absorption.

Then the later transverse may be carried through capillaries and veins which stimulate Olfactory nerve which is connected with the higher centres of the brain like Limbic system, Basic ganglia and Hypothalamus which in turn stimulates endocrine and nervous system.

Here Dhooma is given as Paschath Karma to Nasya Karma which does the Shesha dosha nirharana. The smoke of these drugs reaches lungs, bronchi and alveoli. Due to Teeksha property of drug, the tenacious sputum get liquefy and comes out easily giving comfort to the patient. These drugs act as expectorants.

The drugs used in Dhooomapana posses’ teeksha properties, so that they help in Chedana of Kapha situated in lungs, the drugs used for dhooomapana act by liquefying the thick and tenacious sputum situated in lungs and facilitate its removal by coughing which gives comfort to the patient.

2. Discussion

1) The first step to be taken is to find out the causative factor for Tamaka Swasa and its stages, then according to that treatment adopted.
2) Here in Swasa Roga main doshas involved are vata and kapha. so the treatment should be mainly be emphasised on vatahara and kaphakruth or kaphahara and vatakruth.
3) Navana type of nasya(snigdha and shodhana) type is described to be best in acute conation to pacify vata and clear srotas which is occluded by kapha.
4) Drugs used for Nasya Karma which helps in stimulation of vasodilator nerves which are spread out on the superficial surface of Urdhwanga, this increases the blood circulation to the brain. These drugs are considered as bronchodilators dilate the bronchial tubes that are constricted due to occlusion by sputum.
5) Dhoomapana act as bronchodilators and expectorants in Tamaka Swasa, the drugs used in dhooomapana possess teeksha properties, so that they help in Chedana of Kapha situated in lungs.

3. Conclusion

As described in ancient literature, Swasa is one such disease which takes Prana in less time and it’s also mainly seen at time of last breath of patient, hence its need to be treated/managed as early as possible (Athyayika Chikita). Nasya and Dhoomapa gives promising result in managing this condition by breaking pathophysiology and alleviating Kapha dosha and doing Vatanulomana. Also the treatment acts as stimulant along with expectorant. Hence, there is vast scope for further research in this context.

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