**ABSTRACT**

*Tamakshwas* is one of the major diseases of *Pranvaha srotas* in which *Kapha* creates obstruction in *Vata margga* & produces troublesome dyspnea. Present study aimed to evaluate efficacy of *Sauvarchaladi choorna* in management of *Tamakshwas*. Randomized control study in which 60 patients having classical symptoms of *Tamakshwas* were selected and randomly divided into two groups. Trial group 30 patients were treated with *Sauvarchaladi Choorna* and Control group 30 patients were treated with Tab. Theo-asthalin. All patients assessed before and after treatment of full course of 45 days. Patients were assessed by subjective parameters i.e. symptoms of *Tamakshwas* like *Pinasa, Kasa, Kaphasthivan, Shwas veg gati, Asino Labhate Saukhyam* and *Ghurghurkam* (Wheezing). Statistical analysis of score done for each criterion separately as well as overall effect was calculated. Comparison of both groups was done. Results of the study were very promising to prove that *Sauvarchaladi choorna* is more effective than Tab. Theo-asthalin.

**Keywords** – *Sauvarchaladi Choorna, Tamakshwas, Asthma*.

1. **INTRODUCTION:**

   Bronchial Asthma is one of the most common chronic diseases globally and currently affects ~300 million people. There is rising incidence that appears to be associated with increased urbanization. *Tamakshwas* is one of the major diseases of *Pranvaha srotas*. According to Ayurvedic texts, *Tamakshwas* disease arise due to dust, smoke, wind, residing in cold place & using cold water, physical exertion, sexual intercourse, travelling on foot & intake of rough food & irregular meals. When *Vayu* taking severe course reaches (respiratory) passages seizing neck & head & aggravating (Secretion of) *Kapha*, it produces coryza which creates obstruction & troublesome dyspnea. The patient due to severe paroxysms faints, coughs with obstruction, while coughing becomes unconscious frequently, in absence of expectoration becomes too much distressed & after expectoration gets temporary relief.

   Bronchial Asthma is chronic disease and difficult to treat. Modern medicine like Bronchodilators, Corticosteroids and Antihistaminic drugs were routinely used to treat disease in form of tablets, injections and inhalers. In spite of regular medication sometimes disease aggravates and patients suffer from Status Asthmaticus.

   While searching through Ayurvedic literature ‘*Sauverchaladi Churna*’ found to have properties *Agni-Deepana, Kapha vilayan, Vata-Kapha Shamana, Vatanuloman*. Hence it is selected for study.

2. **MATERIAL AND METHODS:**

2.1. **Objectives:**

   ♦ To study the *Samprati* and *Samprapti ghataka* of *Tamakshwas*.
   ♦ To study all ingredients and mode of action of *Sauvarchaladi Choorna*.
   ♦ To study role of *Sauvarchaladi Choorna* in *Tamakshwas*.

2.2. **Ethical Clearance:**

Ethical clearance certificate was taken from the Institutional Ethical Committee of our Institute.

2.3. **Materials:**

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M.D. (Kayachikitsa), Assistant Professor & PG Teacher, Department of Kayachikitsa, PMT’s Ayurved College, Shevgaon, Dist. Ahmednagar, MS, India. Email – suse.sandip@gmail.com.
Sauvarchaladi Churna given to trial group patients has ingredients Sauvarchal, Shunthi, Bharangi each 1 part and Sharkara 2 parts. Control Group patients were given Tab. Theo-Asthalin. Preparation of Sauvarchaladi choorna was made by using standard procedure of Choorna kalpana in Sharangadhar Samhita.

2.4. Methodology:

In this Open Randomized Control Study, Patients were randomly selected attending OPD or IPD department of Kayachikitsa according to following inclusion and exclusion criteria.

2.5. Criteria for selection of the patients

Inclusion criteria:
- Selection according to age - patients in the age group 16 to 60 yr age.
- Patients having cardinal sign & symptoms of Tamakshwas avegavastha were selected.

Exclusion criteria:
- Patients below the age of 16 yrs and above 60 yrs were excluded.
- Patients in Vegavastha (status asthmaticus - very acute asthmatic attack) & having serious complication.
- Shwas patient with hypertension and Hridrogl (Cardiac disorder), Diabetes Mellitus and major systemic diseases.

Total 60 patients fulfilling selection criteria were selected for the study with fully informed consent. Patients then randomly divided into two groups. Details were given in the Table No 1.

2.6. Criteria for Assessment:

Subjective parameters:

Cardinal sign and symptoms of the disease were noted and were used for assessment of the effect of treatments. Gradation of the symptoms were explained in Table No 3.

2.7. Overall Assessment of Therapy:

The effect of Therapy was assessed as follows:
- Mild Improvement - 25 to 50%
- No relief - below 25%

3. OBSERVATIONS AND RESULTS:

Wilcoxon Matched Pairs Signed Ranks Test” was applied to symptoms score. Effect of the Sauvarchaladi choorn (Trial Group) and Tab. Theo-Asthalin (Control Group) on symptoms observed in Tamakshwas is statistically found to be significant.

On Comparison between two groups done by applying “Mann - Whitney U test”, there was significant difference found between two groups for the symptoms Kasa veg, Kapha Sthivan, Shwas Veg gati, Asino Labhate Saukhyam; Trial Group is more effective than Control Group in relieving above symptoms. No significant difference found between two groups for the symptoms Pinasa and Ghurghurakam. That means both groups are equally effective in relieving these symptoms. (Table No. 4)

4. DISCUSSION:

4.1. General Observations

Out of 30 patients in Trial group, 15 patients were highly improved, 14 patients were having moderate relief and 1 patient was mildly improved. In Control group, 6 patients were highly improved, 18 patients were having moderate relief and 6 patients were mildly improved. No aggravations of symptoms were observed in any patient & all patients have above 25% relief. (Table No. 5)

4.2. Statistical Analysis

Comparison between two groups with respect to symptom score was statistically evaluated. Trial Group is found more effective than Control Group in relieving symptoms Kasa veg, Kapha Sthivan, Shwas Veg gati, Asino Labhate Saukhyam. No significant difference found for the symptoms Pinasa and Ghurghurakam.

4.3. Mode of action of Sauvarchaladi Churna:

Sauvarchaladi Choorna contains four ingredients namely Sauvarchal, Bharangi, Shunthi in equal proportions and Sharkara 2 parts. It has properties of Katu, Tikta & Madhur rasa, Katu vipaka, ushna vriya and Laghu guna which are having potent Kaphaghna & Vataghna properties.
yan and Vatanuloman.\(^3\)

Aqueous extract of leaves of Bharangi (Clerodendrum serratum) possess bronchodilator property. Icosahydropicenic acid (IHPA), a new pentacyclic triterpenoid saponin was first time isolated from the roots of Bharangi. IHPA, at the dose of 100mg/kg, showed significant protection of mast cell degeneration. The compound also revealed significant inhibitory activity on histamine – induced gout tracheal chain preparation. Bharangi also possesses anti-inflammatory, anti-allergic and anti-bacterial property\(^4\).

Shunthi having Katu rasa, ushna veerya, Laghu and Snigdha guna acts Pachan, Aamnashak, Vibandhahara and Kaphavaat shamak.\(^5\)

Shwas vyadhi is caused by Pran Vayu and Kledak Kapha dushti, which vitiates Rasa dhatu and Ama dhatu. There is also Pranvaha, Annavaha and Udakvaha Srotodushti. As ‘Shwas’ is a result of ‘Kapha dushti’, ‘Aamotpatti’, ‘Pran vaha srotorodha’, ‘Vata gati avarodh’ the treatment given should be ‘Kapha-Valaghna’, ‘Ushna’ and ‘Vatanuloman’\(^6\).

With properties of Katu, Tikta, Madhur Rasa, Katu Vipaka & Ushna Veerya, ‘Sauverchaladi Churna’ promotes Agni-Deepana, Kapha vilayan, Vata-Kapha Shamana, Vatanuloman actions. These all actions finally lead to Shwasahara effect.

5. CONCLUSION:

Sauverchaladi Churna is an effective treatment of Tamakshwas. It not only relieves all symptoms of Shwas but also improves the pulmonary functions. There is no adverse effect observed in any patient therefore Sauverchaladi choorna is safe treatment for Asthama.

6. REFERENCES:


5. Bhavprakash Nighantu of Bhavamishra, Commentary by K.C. Chunekar, Edited by Late Dr. G.S. Pandey, Chaukhamba Bharti Academy, Reprint year 2013, Haritakyadi varga/45


7. TABLES:

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name of Drug</th>
<th>Rasa</th>
<th>Virya</th>
<th>Vipaka</th>
<th>Guna</th>
<th>Karma</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Sauvarchal</td>
<td>Tikta</td>
<td>Sheeta</td>
<td>Katu</td>
<td>Laghu</td>
<td>Kapha-Pitta shamaka</td>
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<tr>
<td></td>
<td>Kashaya</td>
<td>Kashaya</td>
<td></td>
<td></td>
<td>Ruksha</td>
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<td>2</td>
<td>Shunthi</td>
<td>Tikta</td>
<td>Ushna</td>
<td>Madhur</td>
<td>Laghu</td>
<td>Tridosha shamak</td>
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<td></td>
<td>Kashaya Katu</td>
<td>Kashaya</td>
<td></td>
<td></td>
<td>Snigdha</td>
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<tr>
<td>3</td>
<td>Bharangi</td>
<td>Tikta</td>
<td>Ushna</td>
<td>Katu</td>
<td>Laghu</td>
<td>Kapha-Pitta shamaka</td>
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<td>4</td>
<td>Sharkara</td>
<td>Tikta</td>
<td>Sheeta</td>
<td>Katu</td>
<td>Laghu</td>
<td>Pitta-Kapha shamaka</td>
</tr>
</tbody>
</table>

Table No. 1: Contents and therapeutic properties of Sauverchaladi Choorna
Sr. No. | Details | Group A | Group B
--- | --- | --- | ---
1. | Number of Patients | 30 | 30
2. | Drug Name | Sauvarchaladi Churna | Tab. Theo-Asthalin
3. | Route of Administration | Oral | Oral
4. | Dose | 3gm | 1 tab. BD
5. | Aushadh-sevan Kala | Adhobhakta | After meal
6. | Anupana | Koshnajala | Water
7. | Duration of Treatment | 45 days | 45 days
8. | Follow-ups | 15th, 30th, 45th day | 15th, 30th, 45th day

Table No. 2: Details of Administration of drugs.

Sr. No. | Symptom | Description | Grade
--- | --- | --- | ---
1. | Pinasa | No Pinasa
Only along with attack
Very often, Even without attack
Persistent | 0
1
2
3
2. | Kasa veg (Ativegat Kasate) | No Kasa
Sometimes, Not troublesome
with pain, not disturbing the sleep
Very troublesome, does not allow to sleep | 0
1
2
3
3. | Kaphasthevan (Quantity of sputum) | 10 ml/day
20 ml/day
30 ml/day
40 ml/day or more | 0
1
2
3
4. | Shwas veg gati (Respiratory rate) | 18/min
24/min
30/min
40/min or more | 0
1
2
3
5. | Asino labhate Saukhya | Relief in lying down position & can sleep
No coughing in sitting posture & can sleep
Intermittent coughing in sitting posture but can sleep
In sitting posture pt can’t sleep | 0
1
2
3
6. | Ghurghurakam (Wheezing) | No wheezing
Wheezing only during attack
Very often wheezing sound
Wheezing throughout the day | 0
1
2
3

Table No. 3: Gradations of symptoms.

Sr. No. | Symptom | Grp. | Mean | SD | U | P | Significance | Result
--- | --- | --- | --- | --- | --- | --- | --- | ---
1. | Pinasa | A | 1.533 | 0.628 | 372 | 0.243 | Not Significant | A≈B
 | B | 1.3 | 0.535
2. | Kasa veg (Ativegat Kasate) | A | 1.933 | 0.449 | 309 | 0.0035 | Significant | A>B
 | B | 1.6 | 0.674
Table No. 4: Statistical analysis between the groups by Mann Whitney’s U Test

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Improvement</th>
<th>Criteria</th>
<th>No of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Trial Grp.</td>
<td>Control Grp.</td>
</tr>
<tr>
<td>1</td>
<td>High Improvement</td>
<td>75% to 100%</td>
<td>15</td>
</tr>
<tr>
<td>2</td>
<td>Moderate Improvement</td>
<td>50% to 75%</td>
<td>14</td>
</tr>
<tr>
<td>3</td>
<td>Mild Improvement</td>
<td>25% to 50%</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>No Relief</td>
<td>00% to 25%</td>
<td>0</td>
</tr>
</tbody>
</table>

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