

**REVIEW OF TAMAKA SHVASA****<sup>1</sup>Dr. Mangesh T. Ballal and <sup>2</sup>Dr. Apurva C. Vichare**

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**ABSTRACT**

Tamaka Shvasa is a very broad term which includes many more diseases where dyspnoea is predominant symptom. The disease is called Tamaka as attack of the disease precipitate during night and during the state of attack Dyspnoea becomes so severe that patient feels entering into the darkness. Due to Vataprakopa Aahara and Vihara Vayu leaves its normal path, takes a reverse course & it reaches Pranavaha Srotasa, obstructs the neck and head, increases the secretion of mucus (Kapha) produces coryza, this excess bronchial secretion obstructs the air passage leading to dyspnoea with wheezing sound. Tamaka Shvasa is mentioned as Kashtasadya or Yaapya.

**KEYWORDS:** Tamaka Shvasa, Shvasa Krichhata, Dyspnoea.

**INTRODUCTION**

Tamaka Shwasa is a type of Shvasa Roga (respiratory disease) affecting the Pranavaha Srotas and characterized by Pratiloma Vayu (prolonged expiration, Ghurghuraka (wheeze), (prolonged expiration), Ghurghuraka (wheeze), ativa tivra shvasa vegam pranaprapidakam (dyspnoea of exceedingly deep velocity, which was immensely injurious to life) and so on.

The name of Tamaka Shvasa is due to the fact that, the symptoms or attack of this disease precipitates at night and also during the time of attack, the breathing difficulty is so severe that patient feels entering into the darkness (Tama Pravesha). Both the Vata and Kapha have been considered to be the chief Doshas involved in the pathogenesis of Tamaka Shvasa. Among the five types of Sharira Vayu - prana Vayu get vitiated during this disease. When Vata is obstructed by vitiated Kapha, it get reverses and affect the Prana vaha Srotas and producing Dyspnea associated with wheezing sound, Cough, labored breathing etc.

Tamaka Shvasa, in Ayurvedic classics seems to be identical with the description of bronchial asthma in modern medicine.<sup>[1]</sup> Bronchial asthma is a major global health problem, which can affect the population irrespective of age, sex, economical status, etc. At present, asthma is reported in 1.2 – 6.3 % adults in most countries. About 300 million people worldwide suffering from asthma and the number has risen by around 50 % in the last decade.

## EPIDEMIOLOGY<sup>[2]</sup>

Prevalence of asthma varies considerably within countries & between countries. It is more prevalent in developed countries than developing ones, more in children 15% than adults 10% to 12% more in urban than rural areas, reasons of which are not fully understood. Nearly 8% to 10% of the total population suffers from it. In India, the prevalence of asthma has been found to be around 7% in the majority of surveys done. However, it has been reported to vary from 2% to 17% in different study populations, the disease can start at any age, but in a majority it starts before 10 years of age. It is twice as common among boys as girls, whereas in adults the male to female ratio is usually equal. There are only a few studies from India on epidemiology of asthma. Overall burden of asthma in India is estimated to be more than 15 million patients. Five percent of children under 11 years have asthma in India.

According to modern medical science Bronchial Asthma is mainly a chronic inflammatory disease, affecting the air tubes leading to labored breathing. The main cause of inflammation is chronic irritation due to hyper-reactivity of lung immune system induced by different kinds of external and internal allergens. Tamak Shvasa is a type of Shvasa in which patient feels excessive difficulty and drowning in dark known as Tamak Shvasa. Tamak Shvasa is a disease in which patient experience severe symptoms of respiratory distress with extreme weakness, fatigue and mental glooming.

Due to constant coughing patient become unconscious, greatly distressed and feels comfort for a while when the sputum being expectorated. Throat of the patient is severely affected, and speaks hardly. He feels discomfort in lying down position, so unable to get a sleep. He feels comfort in sitting or in propped up posture. He likes to take hot things only. His eyes are protruded, forehead is covered with sweat and he feels a great distress all the times. His mouth becomes dry. These symptoms are intensified by cloudy, humid and cold weather, easterly winds, foul smelling and by taking Kapha increasing thing.

**TAMAKA SHVASA<sup>[3]</sup>**

Tamak swasa is a Pitasathanasamudhawa. It is two types.

1. Partamak Shvasa.
2. Santamak Shvasa

**Santamaka Shvasa**

Shvasa is aggravated in the night and patient feels relief with cold in contrary to Tamaka Shvasa, as the later is aggravated with cold and usually the attacks precipitate early in the morning. The patient feels to be drowning in the sea of darkness, so it is known as Santamaka Shvasa. Sheetopachara is fruitful because of the presence of Pitta dosa in this disease.

**Pratamaka Shvasa**

In this clinical status a patient is overwhelmed by fever and fainting in addition to other symptoms of Tamaka Shvasa. It is caused by Udavarta, dust, indigestion, old age and due to suppression of urge. According to Chakrapani though the Kapha and Vata are predominant Dosas in Tamaka Shvasa, Pitta is equally vitiated in this allied condition which is responsible for the above symptoms.

**ETIOLOGICAL FACTOR IN TAMAK SHVASA<sup>[4]</sup>**

1. Vidahi Guru and Vishtambhi Ahar
2. Ruksha and Shit Ahar- Vihar
3. Atimargagman
4. Ativayayama And Atimaithun
5. Visamahar
6. Pragvat and Varsha-Shishir Ritu

**MANAGEMENT OF TAMAKA SWASA**

1. Nidan Privarjanm
2. Shaman chikitsa
3. Shodhan chikitsa
4. Pathya and Apathya
5. Pranayam and Yogasan

Also management is classified into

Vegakalina (During the asthmatic attack) and Avegakalina (In the absence of attack), Vegakalina Chikitsa to removes the block due to obstruction of Kapha Dosha and relieves the spasmodic constriction in bronchial lumen to maintain the respiration and to stable the patient vitally. Avegakalina Chikitsa to prevent recurrent episodes and improvement in body strength, immunity and quality of life i.e. Rasayana

## CONCLUSION

Tamaka Shvasa (Bronchial Asthma) is Yasya and is curable if it is of recent origin. All herbal drugs and herbo-mineral compound have anti-inflammatory and immune-modulator properties. These properties of drugs help reduce inflammation in bronchial lumen and increase strength of respiratory system. Herb and Herbo-minerals compound pacifies Dushita Vata, Pitta and Kapha Dosha and control asthmatic problems and improves immunity. Healthy lifestyle, breathing exercise like Yoga, pranayama and meditation play important role to reduce the symptoms and improve the lung function.

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