

Effect of *Sadyo Vamana Karma* using *Kuppameniyadi Swarasa* and *Siritekkudi Kashaya* in *Tamakashwasa* (Bronchial asthma) - A Case Study

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ABSTRACT:

Tamakashwasa is a disease affecting *Pranavaha Srotas* (respiratory tract). In *Tamakashwasa*, *Kapha* and *Vata Dosha* are vitiated. *Tamakashwasa* correlates with bronchial asthma, a chronic inflammation associated with airway hyper-responsiveness leading to recurrent episodes of wheezing, breathlessness, tightness in chest and coughing; particularly at night and early morning. *Vamana Karma* is prescribed as a therapeutic measure in treatment of *Tamakashwasa*. *Vamana Karma* using *Kuppameniyadi Swarasa* (juice of *Acalypha indica*), followed by *Siritekkudi Kashaya* is prescribed in treatment of *Tamakashwasa* (bronchial asthma) in Sri Lanka. A 56-year-old man suffering from *Tamakashwasa* for 26 years was treated for 17 days with *Sadyo Vamana Karma* using *Kuppameniyadi Swarasa* followed by oral administration of *Siritekkudi Kashaya*. After *Vamana Karma*, cough, rhinitis, difficulty in expectorating, dryness of mouth, expectoration of phlegm, tightness in chest and restlessness were completely relieved. Duration of *Shwasa Vega* was changed from less than 30 minutes to no episodes of asthma attacks. The frequency of *Shwasa Vega* was changed from 1-2 attacks per week and 1-2 attacks at night per month to no paroxysm of asthma attacks. After completion of entire treatment, wheezing was completely absent. The peak flow rate increased from 300ml to 350ml. The patient completely stopped using inhaler. It is concluded that selected treatment regimen is a potentially beneficial therapy for *Tamakashwasa* (bronchial asthma)

KEYWORDS: *Acalypha indica*, Bronchial asthma, *Kuppameniyadi Swarasa*, *Siritekkudi Kashaya*, *Tamakashwasa*, *Vamana Karma*.

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INTRODUCTION

Ayurveda describes five types of *Shwasa Roga* and *Tamakashwasa* is one of them. It occurs due to defects in *Pranavaha Srotas* (respiratory tract). *Pranavaha Srotas* gets

obstructed by vitiated *Kapha Dosha*. Then *Vata Dosha* may also become vitiated and moves in upward direction (*Prathilomagathi*), afflicts the neck and the

head, stimulate *Kapha* (phlegm) and produces disease *Tamakashwasa*.^[1]

According to Charaka Samhitha, clinical features of *Tamakashwasa* are *Peenasa* (rhinitis), *Ghurghuraka* (wheezing), *Ati Tivraveganacha* (dyspnoea of exceedingly deep velocity) *Pranapravedaka* (immensely injurious to life), *Pratamyati* (darkness in vision), *Kasajanyapramoha* (fainting while coughing), *Shleshmanyamuchyamane Thu Brushan Bhawathi Dukkitah* (since the phlegm does not come out, patient becomes more restless), *Shleshma Vimokshya Anthe Labate Sukhyam* (relief with expectoration of phlegm), *Kanthodhvasa* (irritation in throat), *Krichchathbhashitam* (difficulty in speaking), *Shayana Shwasapedita Na Chapi Labate Nidra* (difficult to sleep while lying down), *Parshva Avagruhyate* (tightness in chest), *Asinolatathe Saukyam* (patient is relieved from discomfort in sitting posture), *Ushnan Chivabinandathi* (patient desires for warmth), *Uchitah Akshah* (eyes widely open), *Lalatena Swedata* (excessive perspiration appearing on forehead), *Vishushka Asya* (patient's mouth becomes dry frequently) and *Muhuh shwashah Muhuh* (patient gets frequent paroxysms of dyspnoea).^[2]

Tamakashwasa can be correlated with bronchial asthma. Bronchial asthma is a chronic inflammatory disorder of the airways, in which many cells and cellular elements play a role. The chronic inflammation is associated with airway hyper-responsiveness that leads to recurrent episodes of wheezing, breathlessness, tightness in chest and coughing, particularly at night and in the early morning.^[3]

Charaka advises to conduct *Shodhana Karma* (*Vamana* and *Virechana*) in strong patients suffering from *Tamakashwasa* as *Kapha Dosha* is predominant. Some Sri Lankan traditional physicians conduct

Sadyo Vamana Karma using *Kuppameniyadi Swarasa* in treatment of *Tamakashwasa* (bronchial asthma) with effective results. *Siritekkudi Kashaya* is used at Ayurveda Teaching Hospital to treat *Tamakashwasa* (bronchial asthma). So far, no known scientific study has been carried out to evaluate the effects of these treatments. Therefore, present study was carried out to evaluate the effects of these treatments

CASE STUDY:

A 56-year old man who attended the Outdoor Patients' Department (OPD) at Ayurveda Teaching Hospital, Borella, Sri Lanka, suffering from *Tamakashwasa* (bronchial asthma) was selected. He complained of having *Kasa* (cough) and *Ghurghurakam* (wheezing) intermittently for 26 years. Further, he complained of *Peenasa* (rhinitis), *Shleshmani Amuchiyamanetu Dhukhitam* (difficulty in expectorating), *Vishushka Asyata* (dryness of mouth), *Kaphanisteevana* (expectoration of phlegm), *Parshve Avagruhyate* (tightness in chest) and restlessness. The selected patient was thoroughly examined and investigations such as Total White Blood Cells and Differential Count, Haemoglobin level, Red Blood Cells Count, Blood Urea, and Serum Creatinine level in blood were carried out before and after treatment. Severity of the clinical features were recorded using a specially prepared grading scale used in previously published research papers.^[4] Therapeutic effects were evaluated through symptomatic relief. Grading scale is given below.

Kasa (Cough)

Nil	0	No cough
Mild	1	Coughing for 2-5 min, Freq. 1-2 time/day without pain
Moderate	2	Coughing for >10 min, Freq. > 5-10 times/day with pain

Severe 3 Coughing for >15 min,
Freq. >5-10 times/day without pain

Very severe 4 Frequent coughing due
to which patient becomes unconscious

Ghurghurakam (Wheezing)

Nil 0 No wheezing

Mild 1 Wheezing only in early
morning or during physical exertion

Moderate 2 Intermittent wheezing
present only during attack

Severe 3 Constant wheezing
throughout day

Very severe 4 Constant wheezing along
with other added respiratory sounds

Peenasa (Running nose)

Nil 0 No running nose

Mild 1 Running nose present
before attack and subsides 1-2 days after
the attack

Moderate 2 Running nose before
attack and persist more than a week after
the attack

Severe 3 Running nose present
often even without attack

Very severe 4 Running nose always
persisting

Shleshmani Amuchiyamanetu Dhukhitam
(Difficulty in expectorating)

Nil 0 No difficulty in
expectorating

Mild 1 Sometimes difficulty in
expectorating during attack

Moderate 2 Difficulty in expectorating
during attack

Severe 3 Often difficulty in
expectorating during attack

Very severe 4 Severe difficulty in
expectorating during attack

Vishushka Asyata (Dryness of mouth)

Nil 0 No dryness of mouth

Mild 1 Mild Dryness of Mouth
which subsides on taking water

Moderate 2 Cracks on lips appear and
patient drinks more water to moisten the
mouth

Severe 3 Dryness of mouth not
subsiding after drinking water

Very severe 4 Patient consumes
excessive water but always feel thirsty

Kaphanisteevana (Expectoration of phlegm)

Nil 0 No expectoration of
phlegm

Mild 1 White in colour, not more
than 2-5ml/day

Moderate 2 Yellowish White in colour,
more than 20ml/day

Severe 3 Deep yellow in colour,
more than 50ml/day

Very severe 4 Blood stained sputum

Parshve Avagruhyate (Tightness in chest)

Nil 0 No tightness in chest

Mild 1 Tightness in chest during
attack

Moderate 2 Tightness in chest often
without attack but
relieved by local *Snehana*
and *Swedana*

Severe 3 Tightness in chest very
often without attack but
not relieved by local
Snehana and *Swedana*

Very severe 4 Persistent chest pain

Restlessness

Nil 0 No restlessness

Mild 1 Occasional restlessness

Moderate 2 Intermittent restlessness

Severe 3 Frequent restlessness

Very severe 4 Always restless

Duration of *Shwasa Vega* (Asthma attack)

Nil 0 No episodes of attack

Mild 1 Attack lasting for 15
min-30 min

Moderate 2 Attack lasting for 30 min-1 hour
Severe 3 Attack lasting for \geq 1hour

Very severe 4 Continuous attack

Frequency of *Shwasa Vega* (asthma attack)

Nil 0 No paroxysm of attack

Mild 1 1-2 attacks/week and 1-2 attacks in night/month, No symptoms between attacks

Moderate 2 One attack/day, 1-2 attacks in night/week, attack affects the activity.

Severe 3 1-2 attacks/ day, 1-2 attacks in night/week, attack affects the activity.

Very severe 4 Attacks present throughout day and night, and affect routine activities.

Therapeutic Intervention:

The patient was treated for 17 days. On Day 1, *Sadyo Vamana Karma* was performed by giving *Kuppameniyadi Swarasa* (juice of fresh leaves of *Acalypha indica*) and *Samsarjana Karma* followed for three consequent days. From Day 4 to Day 17 the patient was given 120ml of *Siritekkudi Kashaya* orally, twice a day.

Preparation of *Vamana Aushadha* (emetic drug)

50g of fresh leaves of *Acalypha indica* (Sinhala name: *Kuppameniya*) (Figure 1) were taken, pounded and mixed with 100ml of water. Then the fresh juice was extracted by squeezing. The final volume of the extracted juice was 120ml. 120ml of cow's milk was mixed with 120ml of extracted fresh juice of *Acalypha indica*. The resultant

mixture was used as the *Vamana Aushadha* (emetic drug) which is called *Kuppameniyadi Swarasa*.

Preparation of *Siritekkudi Kashaya*

30g of each of dried entire plant *Clerodendrum serratum* (Sinhala name: *Siritekkudi*) and fresh rhizome of *Zingiber officinale* (Sinhala name: *Inguru*) were taken, mixed with 1920ml of water and boiled down to 240ml to prepare the decoction.

Procedure of *Sadyo Vamana*

Sadyo Vamana was carried out according to the Sri Lankan traditional method. It is to be noted that the patient was not subjected to *Purva Karma* (*Snehapana* and *Sweda Karma*) as per classical Ayurveda practices. On the day of *Sadyo Vamana Karma*, before administering *Vamana Aushadha*, sesame oil was applied on the chest and *Swedana* (fomentation) was carried out by using medicated boluses prepared with leaves of *Vitex negundo* (Sinhala name: *Nika*). Then *Vamana Aushadha* (emetic drug) was administered to the patient on an empty stomach. When the *Vamana Vega* (urge to vomit) arises, water was given to facilitate vomiting as *Vamanopaga Dravya*. Then *Pashchat Karma* (post-operative procedures) such as *Gandusha* and *Dhumapana* was carried out. *Gandusha* was done with lukewarm water mixed with common salt. *Dhumapana* was carried out using a smouldering pellet prepared with powdered turmeric and ghee. The patient was then made to follow *Samsarjana Karma* for 3 days and light, easily digestible food was given as in Table 1. Further, he was advised not to take bath, avoid consuming cold water and foods and avoid exposure to cold breeze and sun.

Table 1 : Dietic Protocol (*Samsarjana Krama*) after *Vamana Karma*

Day	Morning	Lunch	Evening
Day1	None	None	Salted rice gruel (<i>Lunu Kenda</i>)
Day2	Salted rice gruel (<i>Lunu Kenda</i>)	Over cooked rice (<i>Beri Bath</i>) and <i>Thambum Hodi</i> (spicy soup like <i>Rasam</i>)	Salted rice gruel (<i>Lunu Kenda</i>)
Day3	Salted rice gruel (<i>Lunu Kenda</i>)	Rice and Curry	Normal diet

Table 2. Reduction of clinical symptoms

Symptoms	Before treatment	After <i>VamanaKarma</i>		At the end of the whole treatment	
	Grade	Grade	Percentage of relief	Grade	Percentage of relief
<i>Kasa</i> (cough)	Grade 1	Grade 0	100%	Grade 0	100%
<i>Ghurghurakam</i> (wheezing)	Grade 2	Grade 1	50%	Grade 0	100%
<i>Peenasa</i> (rhinitis)	Grade 2	Grade 0	100%	Grade 0	100%
<i>Shleshma Amuchiyamane Dhukhitam</i> (difficulty in expectorating)	Grade 2	Grade 0	100%	Grade 0	100%
<i>Vishushka Asyata</i> (dryness of mouth)	Grade 1	Grade 0	100%	Grade 0	100%
<i>Kaphanistheevana</i> (expectoration of phlegm)	Grade 2	Grade 0	100%	Grade 0	100%
<i>Parsve Avagruhyate</i> (tightness in chest)	Grade 1	Grade 0	100%	Grade 0	100%
Restlessness	Grade 1	Grade 0	100%	Grade 0	100%
Duration of <i>Shwasa Vega</i> (asthma attack)	Grade 1	Grade 0	100%	Grade 0	100%
Frequency of <i>Shwasa Vega</i> (asthma attack)	Grade 1	Grade 0	100%	Grade 0	100%



Figure 1 : *Acalypha indica* (*Kuppameniya*)

RESULTS:

After *Vamana Karma*, *Kasa* (cough), *Peenasa* (rhinitis), *Ghurghurakam* (wheezing), *Shleshmani Amuchiyamanetu Dhukhitam* (difficulty in expectorating), *Vishushka Asyata* (dryness of mouth), *Kaphanisteevana* (expectoration of phlegm), *Parshve Avagruhyate* (tightness in chest) and restlessness were completely relieved by 100%. Duration of *Shwasa Vega* (asthma attack) reduced from less than 30 minutes to no episodes of attack. The frequency of *Shwasa Vega* (asthma attack)-changed from 1-2 asthma attacks per week and 1-2 asthma attack in night per month to no paroxysm of attacks. After completion of entire treatment, *Ghurghurakam* (wheezing) was completely absent. Results are tabulated in Table 2. The peak flow rate increased from 300ml to 350ml. The patient completely stopped using inhaler.

DISCUSSION:

Tamakashwasa is a disease occurred by vitiation of *Kapha* and *Vata Dosha*.^[1] *Vamana Karma* (emesis) is described as one of the therapeutic measures in treatment of *Tamakashwasa* in authentic Ayurveda texts.^[5] *Vamana Karma* eliminates vitiated *Dosha* accumulated in the body, especially *Kapha Dosha*. Hence *Vamana Karma* is effective in treatment of *Tamakashwasa*. Consuming 5ml of leaf extract of *Acalypha indica* twice a day for bronchial asthma is

also an ethnomedical practice in India. ^[6] Conduction of *Sadyo Vamana Karma* using *Kuppameniyadi Swarasa* in treatment of *Tamakashwasa* (bronchial asthma) is a traditional practice in Sri Lanka. Ayurveda pharmacological properties of *Acalypha indica* (*Kuppameniya*) are *Katu* and *Tikta Rasa*, *Laghu* and *Rooksha Guna*, *Ushna Veerya* and *Katu Vipaka*.^[7] Due to these properties it pacifies vitiated *Vata* and *Kapha Dosha*. Therefore, conduction of *Vamana Karma* using *Kuppameniyadi Swarsa* is beneficial in treatment of *Tamakashwasa*.

Ingredients of *Sirithekkuadi Kashaya* possess Ayurveda pharmacological properties such as *Katu* and *Tikta Rasa*, *Snigdha* and *Laghu Guna*, *Ushna Veerya* and *Katu* and *Madhura Vipaka*.^[8] Because of these properties *Sirithekkuadi Kashaya* pacifies vitiated *Vata* and *Kapha Dosha*. Hence, *Sirithekkuadi Kashaya* is beneficial in management of *Tamakashwasa*.

Anti-inflammatory, anti-microbial, anti-allergic, anti-histaminic, broncho dilatation and bronchial hyperreactivity effects of *Acalypha indica* (*Kuppameniya*) are scientifically proven. ^[9] Anti-inflammatory, anti-microbial, anti-allergic, anti-histaminic, anti-asthmatic effects of ingredients of *Sirithekkuadi Kashaya* that is *Clerodendrum serratum* (*Sirithekku*) and *Zingiber officinale* (*Inguru*)^[10, 11] are also scientifically proven. Due to these properties *Acalypha indica*,

Clerodendrum serratum and *Zingiber officinale* are beneficial in treatment of *Tamakashwasa*.

CONCLUSION:

Based on this single case study, it can be concluded that conduction of *Vamana Karma* (emesis) using *Kuppameniyadi Swarasa* followed by oral administration of *Siritekkudi Kashaya* is beneficial in treatment of *Tamakashwasa* (Bronchial asthma).

LIMITATION OF STUDY:

This is a single case study and this research should be carried out with a larger sample which will make results more acceptable

PATIENT CONSENT:

The patient gave the informed consent for reporting of the case study in the journal.

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