

# Study of Clinical Efficacy of Mahavalkala In Tamaka Shwasa

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## Abstract

Ayurveda is a scientific discipline that aids in maintaining the body's healthy state and treating illnesses. Numerous branches of the ancient science of Ayurveda exist, including Dravyaguna, Kriya sharir, Rachana sharir, Rasashastra, Kayachikitsa, and panchakarma. One kind of shwasa is tamaka shwasa. It results in partiloma vayu and affects Pranavaha srotas. It manifests as an increase in Sashabda shool, Urahshool, Kasa, Shwasa tivarta, and Shwasa vega. Contemporary science has linked it to bronchial asthma. It is a serious issue for world health. The rise in industry has resulted in a sharp rise in pollution levels. In addition, poor lifestyle choices, eating junk food, stress, and tension are contributing factors. It is challenging to treat. Acharya Vagbhata's Sursadi Gana mentions the drug Mahavalkala. Shwasa and Kasa Vyadhi are lessened by drugs in Sursadi Gana. Thus, the goal of the current study is to investigate the therapeutic effectiveness of Mahavalkala churna in tamaka shwasa.

**Keywords:** Ayurveda, Tamaka, Shwasa, Mahavalkala

## Introduction:

Our ancient Acharyas in the Samhitas have classified medicinal drugs in different ways based on the features of morphology, pharmacological action, and on the basis of therapeutic effect in clinical conditions. Acharya Charaka has classified with groups of ten drugs having same therapeutic action.<sup>1</sup> Acharya Sushruta and Acharya Vagbhata have classified with many drugs in one group having similar therapeutic function.<sup>2</sup> Ayurveda has a vast collection of many useful medicinal drugs. They have different origin, namely vegetable, animal, and mineral kingdom. The treatise of Ayurveda has mentioned a number of drugs useful for promotion and preservation of healthy

condition of the body in the form of Rasayana drugs and also other drugs for alleviation purpose of a wide range of clinical conditions. Additionally, all of these medication groups can be used, or some of them can be removed or added with significant therapeutic benefits that will improve the clinical conditions. Mahavalkala is listed in Sursadi gana by Acharya Vagbhata. It is believed to have Shwasahara and Kasahara properties.<sup>3</sup>

Shwasa roga is becoming more common these days as a result of many factors including changed eating habits, environmental pollution, stress, tension, and unhealthy lifestyle choices. Most people believe that Shwasa roga will disappear only once Shwasa (prana) disappears. Shwasa is regarded as a difficult-to-cure Kruchcha Sadhya Vyadhi. In Shwasa, obstruction in Pranavaha srotas due to vitiated Kapha dosha disrupts Vata's movement. This causes Vata to become agitated

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and causes pratilomgati, which leads to shwasakashtata. This indicates that the three srotas associated with Shwasa are Pranavaha, Annavaha, and Udakavaha. Contemporary science has linked it to bronchial Asthama. As they are referred to as Shwasakasahara, the drugs listed in Sursadi Gana ameliorate sickness and reverse the pathology of Shwasa. The clinical significance of Mahavalkala churna in Shwasa was determined by this study's assessment of its efficacy.

### Aims

To observe the efficacy of Mahavalkala Churna in Tamaka Shwasa.

### Objectives:

1. To study the Ayurvedic Literature of Tamaka Shwasa according to Ayurvedic Samhitas.
2. To study Mahavalkala.
3. To study the effect of Mahavalkala Churna in Tamaka Shwasa.

### Material and Methods:

Literature review is done through all available Ayurvedic Samhitas, texts, various research papers available in Journals and online data available.

### Review of Literature:

The fruit of it is pungent (katu), which is why katu phala; its pungent taste (katu rasa) masks other tastes (rasa). Literature explains it in this way.

### Vernacular Names<sup>4</sup>–

Arabic - Azuri, Audul, Quandol  
Assamese - Naga-tenga.  
Bengali - Kaiphala, Satsarila.  
Chinese - Yang Mei.  
English - Box myrtle.  
Gujarati - Kariphala, Kaiphala.

Himachali (Pahadi) - Kaphal, Kaphalu.

Hindi - Kaiphala

Kannada - Kirishivani.

Khasi - Soh-phi.

Kumaon - Kaphal.

Lushai - Keifang.

Malayalam - Maruta, Maroosa.

Marathi - Kayaphala.

Nepali - Kobusi.

Persian - Dareshisham kandul.

Punjabi - Kaiphala, Kahela, Kahi.

Sindhi - Kaiphala.

Tamil - Marudam.

Telugu - Kaidaryamu.

Urdu - Kaiphala.

### Taxonomic position –

Kingdom - Plant

Division - Spermatophyta

Sub-division - Angiospermeae

Class - Dicotyledonae

Sub-class - Monochlamydeae (Incompletae or Apetalae)

Series - Unisexuale

Family - Myricaceae

Genus - Myrica

Species - esculenta Buch – Ham

### Habitat<sup>5</sup> –

An evergreen, dioeciously tree with an aromatic scent that grows between 900 and 2100 meters in elevation in the subtropical Himalaya from the Ravi eastward. Additionally, it can be found in the Khasia Mountains near Sylhet, as well as in Singapore and the Malay islands. In China and Japan, this tree is widely grown.

### Properties:<sup>6</sup>

Rasa : katu, Tikta, Kashaya

Guna : Laghu, Tikshna

Veerya : Ushna

Vipaka : katu

Karma : Kaphavatahara, Dahahara,  
Mukharoganashaka, Dhatuvikarjita, Ruchya

### Tamaka shwasa:

When kapha blocks srotas (channels), the flow of prana vayu is reversed. This causes the vayu to become vitiated, encircle the head and neck, and secrete excessive amounts of dusta kapha, which causes pinasa and the ghurghurkam sound. The abrupt onset of dyspnea brought on by this situation suffocates the prana. He feels as though he is going into the dark, grows thirsty, faints, and passes out. Kawasaki attacks can be paroxysmal. Unable to expectorate, he experiences aggravation. He briefly feels relieved when dusta kapha expectorates. There is a development of throat hoarseness and difficulties speaking.<sup>7</sup>

### Material and Methods:

**Source of data-** OPD & IPD patients of Hospital of our college.

**Study Design:** Open Randomized Controlled Clinical Trial

### Inclusion Criteria

This study is carried on 25 patients of tamaka shwasa, the patient who fulfilled the clinical diagnostic criteria of tamak shwasa (Bronchial Asthama) were randomly selected, irrespective of their age, sex, religion, occupation etc. from the OPD & IPD

### Parameters for Assessment:

#### 1. Shwasa vega :

Sign	Grade
No Shwasa vega	0
Mild Shwasas (1 or 2 bouts of shwasas in a week)	1
Moderate Shwasas (3 to 5 bouts of shwasas in a week)	2
Severe Shwasas (6 or more bouts of shwasas in a week)	3

### Exclusion Criteria:

1. Patient having complications like CCF, Corpulmonale, Emphysema, Rajakshama (T.B), Pneumonia, Malignancy etc. are not considered.
2. Patients who are not able to tolerate samshodhana therapy are not taken in shodhana group.

### Diagnostic criteria:

Based on the traditional Ayurvedic and current classic indications and symptoms of the tamak shwasa, a comprehensive performa is developed. Data is gathered when a thorough clinical history and respiratory examination are completed. Each patient's whole medical history, including dasvidha pariksha, nidana panchak, etc., is gathered and entered into the performa. PFR assessment is carried out with the use of the disease's test results. Before and after treatment, a peak flow meter measurement is obtained for assessment, and all vital signs, including blood pressure, pulse, and respiration rate, are recorded.

### Intervention:

Duration of study – 30 Days

Total duration of study – 30 Days

Follow up – at 30th day

Dose: 1500 mg after meal two times in a day

25 patient will be given Mahavalkala bark Churna orally for 30 days

Kal : Paschyat bhakti

**2. Shwasa Tivarta :**

<b>Sign</b>	<b>Grade</b>
No shwasas	0
Mild breathlessness, occasionally comes and goes, do not require any medication	1
Moderate breathlessness, patients have to take rest during attack and require some medication	2
Severe breathlessness, patient feel restlessness during attack and requires strong medication	3

**3. Kasa :**

<b>Sign</b>	<b>Grade</b>
No kasa	0
Sometime kasa during shwasa attacks	1
Very often kasa	2
Always kasa	3

**4. Urahashool :**

<b>Sign</b>	<b>Grade</b>
No uraashool	0
Sometime uraashool	1
Often uraashool	2
Continuous Uraashool	3

**5. Sashabda shwasa :**

<b>Symptoms</b>	<b>Grade</b>
No sound	0
Low pitch sound during attack	1
High pitch sound during attack	2
Always making sound	3

**Results :**

Effect of Mahavalkala Churna on assessment criteria was as follows

Parameter	Mean		Difference in means	Paired 't' test				
	BT	AT		S.D.	S.E.M.	't'	'p' value	Remark
Shwasa vega	2.2	1.13	1.07	0.69	0.126	8.4521	<0.001	S
Shwasa Tivrata	2.13	1.1	1.03	1.1290	0.206	5.0137	<0.001	S
Kasa	2.23	0.96	1.27	0.8683	0.1575	8.042	<0.001	S
Urahshool	2.36	0.93	1.43	0.710	0.1296	11.05	<0.001	S
Sashabdashwasa	2.26	0.63	1.63	0.764	0.1396	12.75	<0.001	S

**Discussion and Conclusion:**

Stress, pollution, excessive junk food consumption, and unhealthy lifestyle choices are the main causes of Tamaka Shwasa. The Kapha dosha is vitiated. It results in Vayu's pratiloma gati. Pranavaha srotas is primarily impacted by this. In Ashtang Hrudya, Acharya Vagbhata mentions the treatment Mahavalkala in Sursadi Gana. While Mahavalkala with katu, tikta, and kashaya rasa reduces vitiated kapha dosha, sursadi gana relieves shwasa and Kasa. It's the anulomana of Vayu, Ushna Veerya. It lowers shwasa vega, shwasa tivrata, kasa, urahashool, and sashabdashwasa in the current study. It turned out to be statistically significant.

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