

Study of Clinical Efficacy of Dhatri Avaleha In Tamak Shwasa In Children

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Abstract

Asthma, a prevalent lower respiratory tract disorder, leads to numerous physician visits worldwide. It affects individuals of all ages, races, and geographical backgrounds. Among these, children are particularly vulnerable due to specific anatomical and physiological factors, as well as an immature immune response. Consequently, children experience higher incidence and recurrence rates compared to adults. Modern medical science draws parallels between bronchial asthma and a condition described in ancient texts as “Tamaka Shvasa.” Bronchial asthma, a chronic airway disorder, poses a significant health challenge for children across the globe. It can manifest at any age and, in severe cases, may even be fatal. One traditional remedy mentioned in the ancient Indian text, Charak Samhita, is Dhatri Avaleha. In our present study, we aim to explore the clinical efficacy of Dhatri Avaleha in managing Tamak Shwasa (asthma) specifically in children.

Keywords: Asthama, Tamak, Shwasa, Dhatri

Introduction:

Ayurveda, the most ancient scientifically codified system of medicine, has been guiding humanity since its inception. It imparts knowledge about the art of living, the science of health, and the philosophy of life. Ayurveda perceives humans in relation to the universe, recognizing that man embodies the essence of the cosmos¹. According to this holistic perspective, all entities in the universe, from energy particles to celestial bodies, share a common elemental origin. The fundamental role of physicians lies in maintaining the equilibrium of physical and biological elements within the

body—the milieu interior. Ayurveda, believed to have transitioned from celestial to terrestrial realms, manifests through either the Trisutra (Hetu, Ling, and Aushadha) or the Ashtanga (eight branches) approach. These branches serve practical purposes, addressing various aspects of health and well-being. Among them, Kaumarbhritya—the branch dedicated to child care—holds particular significance. Acharya Kashyapa extensively covers child health within this specialty.

Pediatric patients often struggle with the palatability of traditional dosage forms like Kwatha. To enhance acceptability, Ayurvedic medicines are ingeniously administered in Avaleha form. Avaleha, a drug delivery system, facilitates absorption directly from the oral cavity through licking. Its pleasant taste and broad therapeutic

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applicability have made it a staple since ancient times. One such remedy, Dhatri Avaleha, finds mention in Charak Samhita². Our present study aims to evaluate the efficacy of Pippaladi leha in managing Tamak shwasa (asthma) specifically in children.

Review of Literature:

Dhatri Avaleha:

- Vanshalochana: 2 pala
- Sunth : 2 pala
- Madhuyashthi : 2 pala
- Pippali: 1 Prastha
- Draksha: 1 Prastha
- Sugar: 0.5 tola
- Amalaki swaras:1 Drona
- Honey: 1 Prastha

Method of Preparation :

First of all Yavakuta of all the constituents of Dhatri Avaleha was prepared. Kwatha of the Yavakuta drugs was prepared according to the instructions given in Shaarangadhara Samhita. The drugs in Yavakuta form was boiled with 16 times of water under low heat and reduced to 1/8th and then filtered. Sugar by weight was added to the decoction and again boiled. The process was continued until the Avaleha become two – Taari. Again it was filtered.. Honey was added after cooling of Avaleha.

Material and Methods:

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

Study Design: Open Randomized Controlled Clinical Trial

Inclusion Criteria

1. Classical symptoms of Tamaka Shwasa with emphasis to symptoms of Childhood Bronchial

Asthma like wheezing, shortness of breath, tightness in the chest and cough.

2. Age group between 3 yrs and 15 years.

Exclusion Criteria:

1. Severe cases of Asthma with complications like suspected infection, large airway lesions, heart disease etc.
2. Cardiac Complaints, other chronic debilitating diseases like TB, AIDS etc or other systemic and endocrine complaints associated with any degree of Asthma.

Diagnostic criteria:

10 patients of age group 3-15 years with the classical symptoms of Tamaka shwasa matching with the mild to moderate symptoms of Bronchial Asthma as defined by World Asthma Council and Global Initiative in Asthma attended the IPD and OPD of our hospital were taken as the study samples.

Intervention:

Treatment

Dose	♦ 1 to 5 years: 3 gm ♦ 5 to 10 years: 4 – 6 gm ♦ 10 to 15 years : 7 – 9 gm
Time	Twice in a day
Anupana	Milk
Patient	10 Patients
Drug	Dhatri Avaleha
Duration	45 days
Route	Oral
Follow up (In between treatment)	on 0 th day, 45 th day

Parameters for Assessment:**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

Shwasa Tivarta :

Sign	Grade
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

Kasa :

Sign	Grade
No kasa	0
Sometime kasa during shwasa attacks	1
Very often kasa	2
Always kasa	3

Urahashool :

Sign	Grade
No urahashool	0
Sometime urahashool	1
Often urahashool	2
Continuous Urahashool	3

Observation and Results :

The response of treatment was observed and recorded on a case paper and data collection by clinical study.

Sr. No.	Assessment criteria	Shwasa vega	Shwasa tivrata	Kasa	Urahashool	
1.	Case 1	BT	3	4	3	3
		AT	0	1	0	1
2.	Case 2	BT	3	3	2	2
		AT	1	2	1	0
3.	Case 3	BT	2	1	0	2
		AT	1	0	0	1
4.	Case 4	BT	0	1	2	2
		AT	0	0	1	1
5.	Case 5	BT	1	1	2	0
		AT	0	1	1	0
6.	Case 6	BT	0	2	3	2
		AT	0	0	1	1
7.	Case 7	BT	2	3	2	1
		AT	0	1	1	0
8.	Case 8	BT	2	2	3	3
		AT	1	1	2	1
9.	Case 9	BT	3	2	2	2
		AT	1	1	1	1
10.	Case 10	BT	0	2	0	2
		AT	0	0	0	0

(BT- Before Treatment, AT- After Treatment)

Results:

Effect of Dhatri Avaleha on cardinal symptoms of Tamaka shwasa is as follows

Cardinal Symptoms	N	Mean BT	Mean AT	S.D.	S.E.	't'	P value	Result
Shwasa vega	10	1.4	0.4	0.667	0.211	4.7393	P<0.001	H.S.
Shwasa tivrata	10	1.9	0.6	0.455	0.143	9.09	P<0.001	H.S.
Kasa	10	1.8	0.9	0.322	0.101	8.91	P<0.001	H.S.
Urahashool	10	1.8	0.5	0.455	0.143	9.09	P<0.001	H.S.

(N - number of patients, BT- Before treatment, AT- After treatment, S.D- Standard Deviation, S.E.- Standard Error of mean).

Discussion and Conclusion

- In Ayurvedic texts, Tamak Shwasa is distinctly associated with the Pranavaha srotas (respiratory channels). Prognostically, it falls under the category of yapya roga (treatable disease). Symptomatically, Tamak Shwasa aligns with what we recognize as Bronchial Asthma in modern medicine.
- Interestingly, Ayurvedic literature lacks specific references to Childhood Asthma. Consequently, the symptoms, etiopathogenesis, and management strategies for pediatric cases closely mirror those applied to adults. Notably, Dhatri Avaleha, a traditional remedy mentioned in Charak Samhita, has shown statistical significance in alleviating symptoms of Tamak Shwasa in children.

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