

## 1      Gold Standard Diagnostic Analysis And Management Of Shwasa Roga In 2      Different Pathological Conditions

3      **Abstract-** *Shwasa roga* is multi-factorial respiratory diseases, with increasing global burden due  
4      to death and co morbidities. In india, due to increasing civilization and urbanization with  
5      poverty, as well as increasing medical expenses in a middle and lower class family, creating a  
6      mental and social pressure over the population. This study is analyzing a proper diagnosis and  
7      management of *Shwasa roga* in different pathological conditions and providing a cost specific  
8      *Ayurvedic* management in a very scientific and in very systemic way.

9      **Introduction-** *Shwasa roga* is respiratory disorder which includes mild to severe symptoms of  
10     dysnea and cough which ultimately leads to death in severity of the diseases. This is having  
11     multi-factorial direct respiratory and extra-respiratory causes and risk factors. In present, the  
12     most of the respiratory illnesses are difficulty curable; some are palliative and other few rare and  
13     chronic disorders in their severity become incurable.

14     Due to the increasing environmental changes and faulty life style, the burden of respiratory  
15     diseases in form of asthma, is increasing in present population. WHO estimates show that 300  
16     million people currently suffer from asthma. Asthma deaths will increase in the next 10 years if  
17     urgent action is not taken. [1] Increasing the respiratory illness burden and increasing poverty,  
18     and increasing patient's dependency on the medication, need to find out the reliable management  
19     of *Shwasa Roga*, which is cheaper in price and easily available to the all the patients.

20     Present study is looking in to account all those long standing difficulty curable causative factors  
21     and try to find out the simplest management protocol as mono-therapy (single formulation) or bi-  
22     therapy (dual formulation) to the *Shwasa roga*. Here we are discussing about most of the factors  
23     causing these respiratory illness and their management.

### 24     Material and methods-

25     Ayurvedic textbooks- *Charak samhita*, *Bhaisajya Ratnawali*, and Research papers.

26     We tried to explore all the formulation from text book of *Bhaisajya Ratnawali*, *Charak Samhita*  
27     and already published research work in peer review journals, related to each causative factor of  
28     the *Shwasa roga* and their role in the management of *Shwasa roga*.

### 29     Results and observation-

30     There are so many factors which are responsible to cause dyspnea which are described in Charak  
31     Samhita. [2]

- 32        i. **Environmental factors:** Dust, smoke and wind, residing in cold place, use of cold water.
- 33        ii. **Physical stress:** Excessive exercise, excessive sexual intercourse, excess walking,
- 34        iii. **Food habits:** Intake of dry food, *vishamashana* (food in excessive or less quantity at  
35                  irregular time)
- 36        iv. **Various diseases and condition causing Shwasa Roga :** Accumulation of *ama*,  
37                  *anaha* (constipation associated with flatulence), dryness in the body, excessive depletion  
38                  (*apatarpana*), weakness, injury to *marmas* (vital points), rapid change in exposure to heat

- 39 and cold, diarrhea, fever, vomiting,  
 40 rhinitis, *kshata* (injury), *kshaya* (wasting), *raktapitta* (bleeding  
 41 disorder), *udavarta* (upward movement of *vata*), *visuchika* (enteritis), *alasaka* (sluggish  
 42 bowel), *pandu* (anemia) and intake of poisons can result in *hikka* and *shwasa*.
- 43 v. **Quality of food:** Regular intake of *nishpava* (beans), *masha* (black gram), *pinyaka* (oil  
 44 cake), *tila taila* (sesame oil), *pishta* (cakes and pastry), *shaluka* (lotus stem), *vishtambhi*  
 45 *anna* (food aggravating *vata*), *vidahi* (food causing burning sensations), heavy to digest  
 46 food, flesh of aquatic and marshy animals, curd, raw milk, *abhishyandhi* (ingredients  
 47 leading to obstruction of channels), food aggravating *kapha*
- 48 vi. **Injury:** Injury to throat and chest.
- 49 vii. **Others:** Various types of *vibandha* (obstructions)

50 According to the causative factors, various formulations are indicated for Shwasa Roga in  
 51 Bhaishjya Ratnawali and Charak Samhita

Sr. no.	Causative factors	Treatment
<b>Respiratory causes</b>		
1.	<i>Rajas/ dhoom yukta vayu</i>	<i>Sameerpannage rasa</i> [3] <i>Haridrakhand</i> [4] <i>Shirishadi kwath compound nasal imtilation</i> [5]
2.	<i>Gramya dharma</i> (excessive sexual intercourse)	<i>Chyawan prash</i> [6]
3.	<i>Marma aghat</i> (injury to vital organs)	<i>Abharak bhasma</i> [7]
4.	<i>Dwandwa</i> (rapid change in exposure to heat and cold,)	<i>Sameerpannag rasa</i> [8]
5.	<i>Pratishayay</i> (rhinitis)	<i>Laxmivilas rasa</i> [9]
6.	<i>Kshata</i> (injury) and <i>kshat-ksheena</i>	<i>Vasaawaleha</i> [10] <i>Eladi gutika</i> , [11] <i>nagbala-rasayan, mulethi rasayan</i> [12]
7.	<i>Visha</i> (poison intake)	<i>Shishiradhrista</i> [13]
8.	<i>Kanth urash pratighatat</i> (mechanical or pathological injury to the throat and chest)	<i>Nagarjun abhra rasa</i> [14]  <i>Vyaghri haritaki awaleha</i> , [15]
9.	<i>Kasa</i> (bronchitis)	<i>Adraka swaras</i> 5-10 ml + <i>Madhu</i> [16] <i>Chandramrit rasa</i> 1 gm (without kajjali formulation) with <i>pippali churna</i> 1gm or <i>adraka swarsa</i> 5-10ml + <i>Madhu</i> 5-10 ml followed by <i>vasa kantkari guduchi nagarmotha bharngi kwath</i> 60 ml [17]
10.	<i>Rajyakshma</i> (tuberculosis)	<i>Vasa awaleha</i> [18] <i>Sitopladi churna</i> [19] <i>Talishadi churna</i> [20] <i>Lavangadi churna</i> [21]
<b>Extra-respiratory causes</b>		
<b>GIT Causes</b>		

<b>11.</b>	<b><i>Amapradosha</i> (indigestion)</b>	<i>Shankh vati no. 3</i> [22]
<b>12.</b>	<b><i>Anaha</i> (distention of abdomen)</b>	<i>Hingwadi churna</i> [23]
<b>13.</b>	<b><i>Aptarpan</i> (excessive emaciating works)</b>	<i>Vyoshadhat saktu</i> [24] <i>Ashwagandha churna</i> [25]
<b>14.</b>	<b><i>Udavarta</i> (GERD)</b>	<i>Dwi- uttar-Hingwadi churna</i> [26]
<b>15.</b>	<b><i>Visuchika</i> (AGE)</b>	<i>Sankha vati</i> [27]
<b>16.</b>	<b><i>Alsaka</i> (obstructive gastrum)</b>	<i>Ushna saindhavodak vaman followed by phala guda varti and deepan pachana by hingwastaka churna</i> [28]
<b>17.</b>	<b><i>Atisar</i> (diarrhea)</b>	<i>Sootshekara rasa</i> , [29] <i>Panchmooli baladi kasaya</i> [30]
<b>18.</b>	<b><i>Amalpitta</i> (GERD)</b>	<i>Sootshekhar rasa with madhu</i> [31]
<b>19.</b>	<b><i>Jalodara</i> (Ascites)</b>	<i>Punarnavastak kwath or punarnavadi kwath</i> [32] <i>Jalodarari rasa 1 or 2 with takra</i> [33] <i>Pippali vardhman prayoga</i> [34]
<b>20.</b>	<b><i>Chhardi</i> (vomiting)</b>	<i>Tamlaki swaras</i> [35,36]
<b>21.</b>	<b><i>Vibandha</i> (obstructive bowel)</b>	<i>Lawanbhaskar churna</i> [37] <i>Vaishwanar churna</i> , [38]
<b>Cardiac causes</b>		
<b>22.</b>	<b><i>Hrid roga</i> (Cardiac disorder)</b>	<i>Dashmoola kwath + saidhav + yavakshar</i> [39] <i>Lawanbhaskar churna</i> [40] <i>Puskar moola churna + madhu</i> [41] <i>Chintamani rasa, Vishveshvar rasa</i> <i>Shankar vati, Kalyansundar rasa,</i> <i>Ratnakar rasa</i> [42] <i>Agatsya haritaki awaleha</i> [43]
<b>23.</b>	<b><i>Rakta gata yata</i> (hypertensive disorder)</b>	<i>Nagarjun abhra rasa, vishveshwar rasa</i> [44] <i>Arjun ksheer paka</i> [45]
<b>24.</b>	<b><i>Urahstoya a/w raktasthivan/raktapitta</i> (Pleural effusion associated with bleeding from lungs due to heart failure)  <i>Jwara janya varidosha</i> (pleurisy)</b>	<i>Kalyan sundar rasa (with gold) baidyanath pharma</i> [46]  <i>Sudarshana churna</i> [47]
<b>Hepato-biliary causes</b>		
<b>25.</b>	<b><i>Kamla</i> (jaundice)</b>	<i>Navayas lauha</i> [48] <i>Chandraprabha vati no. 2 (karpur yukta )with narikel jala</i> [49] <i>Shilajatu vatak</i> [50]
<b>Urinary causes</b>		
<b>26.</b>	<b><i>Mutrakriccha</i> (urinary tract infection)</b>	<i>Chandraprabha vati no. 2 (karpur yukta )with narikel jala</i> [51]
<b>Hematological causes</b>		
<b>27.</b>	<b><i>Raktapitta</i> (coagulating disorder)</b>	<i>Aatrushaadi kwath (Vasa patra + Mridwika + Haritaki )=kwath with madhu</i> [52]

		<i>Vasa swaras + tallish churna + madhu [53]</i> <i>Eladi gutika [54]</i> <i>Vasa awaleha [55]</i> <i>Sitopladi churna according to sharangdhar [56]</i> <i>Kushmanda khand avaleha[57]</i>	
28.	<b>Pandu roga (anemia)</b>	<i>Dhatri arista, [58]</i> <i>Lohasava [59]</i> <i>Shilajatu vatak [60]</i>	
<b>Infectious causes</b>			
29.	<b>Jwara (fever)</b> With pleurisy	<i>Sudarshana churna [61]</i> <i>kapha ketu rasa with ardraka swaras for nava jwara [62]</i> <i>Visham jwarantak lauha no. 1,2,3,4 [63]</i> <i>Trilokya-chintamani rasa by rasendra sara sangrah [64]</i>	
<b>Metabolic causes</b>			
30.	<b>Kshya (dhatu kshya) loss of body tissues</b>	<i>Mrigank vati [65]</i>	
31.	<b>Sthaulaya (Obesity)</b>	<i>Vyoshadi shaktu [66]</i> <i>Staulaya hari peya [67]</i> <i>Shilajeet with Agnimantha Kwath [68]</i> <i>Vidangadi lauha with milk [69]</i> <i>Navak guggulu [70]</i>	
32.	<b>Madhumeha (diabetes)</b>	<i>Chandraprabha vati (with karpur) [71]</i> <i>Brihat Vangeshwar rasa no. 4 [72]</i>	
<b>Autoimmune causes</b>			
33.	<b>Amavata (autoimmune disorder)</b>	<i>Singhnaad guggulu with punarnavadrhista [73]</i> <i>Singhnaad guggulu no. 1, &amp; 2 [74]</i> <i>Shankar vati [75]</i>	
<b>Endo-crinological cause</b>			
34.	<b>Galagand (goitre)</b>	<i>Chandraprabha vati with kanchnar chhal kwath and gomutra [76]</i> <i>Kanchnaar guggulu [77]</i>	

52

53 **Discussion-** Here, we have discussed 34 causative factors causing the *Shwasa roga* as respiratory illness. All these factors cause the respiratory illness as *Shwasa roga* directly or indirectly. These indirect causes are due to other systemic disorders rather than the respiratory system as a symptom or as complication. So, we tried to evaluate the specific systemic disorder in relation to *Shwasa roga* and found some specific formulations which work for the management of particular diseases as well as for the management of *Shwasa roga*.

59 We have classified all these causes in to two categories respiratory and extra respiratory causes.  
 60 All these cause have some specific mode of action to develop the *Shwasa* as a symptom. The

61 direct respiratory causes affect the respiratory system due to some allergens present in the  
62 environment like dust, smoke, very cold and hot environmental changes, mechanical injury/  
63 pathological injury by any contagious infection to the respiratory system, upper respiratory  
64 system pathology of nose and throat. All these causes develop either inflammation or mechanical  
65 blockage in the respiratory tract; cause the difficulty in gaseous transportation, increases the  
66 respiratory tissues injuries and ultimately the development of *Shwasa Rog*a.

67 The other systemic illnesses also play an important role in development of *Shwasa roga* as a  
68 symptom or as a complication. The GIT systemic illnesses play a very important role in  
69 development of *Shwasa* as a symptom or complication. As the *Aama* is main factor develops first  
70 in *Aamashya* (gastrointestinal tract) which causes the *Sanga (Marga-avarodha)* in *Anna-vaha-*  
71 *strotas* and leads to the *Vimag-gaman* of the *Dosha*. This *Vimag-gaman* leads to the increasing  
72 abdominal pressure over the diaphragm and make the respiration difficult.

73 Over or diminished cardiac activity both causes the diminished cardiac output, leading to the reduced  
74 oxygen transportation of oxygen by blood, compensatory respiratory efforts increase, and which  
75 ultimately develops *Shwasa roga*.

76 **Conclusion-** After discussion, we can conclude, the only treating the *Shwasa roga* as a symptom  
77 is not beneficial in permanent management of the *Shwasa roga*. Analyzing the causes followed  
78 by deciding a particular drug can help to eliminate the risk factors and causes responsible for the  
79 development or prolongation of any diseases. This study will help to every scholars for the better  
80 understanding in the management of *Shwasa roga* and will help to add new formulation in  
81 respect of their causes.

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