



A CLINICAL STUDY TO EVALUATE THE EFFICACY OF SHUNTYADI LEHYA IN VATAJA KASA

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Abstract

In Ayurveda *Kasa* is explained as a separate disease entity with the explanation of specific nidanapanchaka and treatment. *Kasa* is a condition due to *Pranavaha Sroto Dushti* which originates from *Amashaya*. Dhuma and Raja are the main causes of pranavahasroto dushti, which have become unavoidable, making *Kasa* the most commonest disease to the extent of 60% of total diseases being recorded. The *Prana* and *Udana Vayu* are responsible for normal functioning of *Pranavaha Srotas*, which can be altered due to causative factors in turn lead to manifestation of *Kasa*. *Kasa* though it is not life-threatening, it troubles the person as it hinders day-to-day activities. Here, we tried to evaluate the efficacy of shuntyadi lehya in Vataja Kasa. It was a clinical study with a pre and post design in 30 patients who were diagnosed with Vataja Kasa and with absolute eosinophil count >500 cell/mm³. After examination shuntyadi lehya was given for 8 days. The assessment criteria were noted before and during treatment and on follow-up. The formulation has shown highly significant results. All the changes were statistically highly significant. No patient has reported any adverse drug reactions during the treatment and follow-up periods.

Key words : *Vataja kasa*, *Pranavaha sroto dushti*, *Shuntyadi lehya*

Introduction

Ancient Ayurvedic classics are based on the concept of *Tridosha*, *Saptadhatu*, *Trimala*, and the *Srotas* carrying these objects. *Pranavaha srotas* is one among them which conveys the *Pranavayu*. According to *Charaka*, the deranged *Pranavaha srotas* may lead to excess secretion (*Atisrashtam*), discharge of more thick mucus (*Atibaddham*), shortness of breath (*Alpampambheekshnam*), and labored or painful breathing (*Sashabdashoolamuchwasam*). According to *Sushruta*, the impaired *Pranavaha srotas* causes irritability and frustration (*Akroshana*), bending of the body (*Vinamana*), loss of consciousness (*Moha*), giddiness (*Bhramana*), tremors (*Vepana*) and even to the death (*Marana*). All clinical conditions associated with organs of the respiratory system can be considered the same as clinical conditions affecting the *Pranavaha srotas*.¹

Kasa or Cough is one of the commonest complaints in day-to-day practice and is also a symptom of various systemic diseases. *Kasa*, in Ayurveda, is of 5 types. Among them *Vataja Kasa* though it is not life-threatening, it troubles the person as it hinders day-to-day activities. For the same reasons, many treatment modalities have been mentioned in Ayurveda in the context of *Vataja Kasa* to get rid of the problems. The incidence of *Kasa* may occur in any age group, because of continuous exposure of the respiratory system to the external environment affected by industrialization and population explosion and with an influence of modern life style. The prevalence of cough was found to be between 2.4 and 5.6 percent in rural areas and 1.7 to 5.4 percent in urban areas in different centers in India.² *Vataja Kasa* is having symptoms like *Shushka kasa*, *Kapha shushkataa*, *Alpa and kručchra*, *Kapha*, *Hritshoola*, *Parshwashoola*, *Urashoola*, *Shirashoola*, *Swarabheda*, *Shushka ura- kanta- vaktra*, etc. by different acharyas. The symptoms of *Vataja kasa* are found in diseases like Tropical Pulmonary Eosinophilia,³ simple pulmonary eosinophilia⁴, etc. In general, non-productive cough is produced by either viral illness, bronchospasm, allergies, exposure to dust, fumes, chemicals in the environment, etc.⁵ As currently available methods of management of Non-productive respiratory conditions include antitussive alone or in a combination of codeine, antihistamines, decongestants, and expectorants which have their own limitation and adverse effects.⁶ Hence *Shuntyadi leha* which is described in *Chikitsakrama (Bhasha vyakhya sahita)*⁷ and *Sarvaroga chikitsanool*⁸ has been taken for the study.

Aims and Objectives

1. To review and analyse the literature of *Vataja kasa*.
2. To evaluate the effect of *shuntyadi leha* in the management of *Vataja kasa*

METHODOLOGY

Method of collection of data

A minimum of 30 patients fulfilling the diagnostic and inclusion criteria of either gender was selected for the clinical study.

Diagnostic criteria:

- Diagnosis will be done strictly based on clinical features of *Vataja Kasa*

Inclusion criteria:

- Patients presenting with *vataja kasa*
- Patients irrespective of sex, religion, socioeconomic status and between the age group of 16-60yrs.
- Absolute Eosinophil count >500cells per microliter of blood.

Exclusion criteria:

- Otherthan vataja kasa.
- *Kasa* as a *anubhanda laxana* in other systemic disease.
- Pregnant ladies & lactating women
- Diabetes mellitus

PROCEDURE AND DESIGN OF THE STUDY**Plan of treatment**

Included patients were treated as follows: The patients were given 2gm of *Shuntyadi lehya*, 6 times per day with *koshna jala* as anupana for 8 days.

Study duration

The total duration of the study was 8 days of active intervention with periodical observations done once in 4 days. Assessment was done on the 0th, 4th and 9th day of the treatment.

Assessment Criteria**Subjective parameter:**

- *Shushka kasa*
- *Prasakta vega*
- *Shirah shoola*
- *Parshwa shoola*
- *Ura shoola*
- *Swarabheda*
- *Mughashushkata*
- *Balakshaya*

Objective parameter: Absolute Eosinophil Count > 500 cells/mm³

Assessment of results

- All the qualitative variables were summarized using frequency and percentages
- The quantitative variables were summarized using mean and standard deviation, median and interquartile range (Q3, Q1)
- Data were analyzed using normal distribution then performing parametric and non-parametric tests
- The assessment was done by paired t-test.

The corresponding p-value was noted and obtained results were interpreted as follows:

- For p value > 0.05 – interpreted as no significant.
- For p value < 0.05 – interpreted as significant.

OBSERVATIONS AND RESULTS

The observations give a detailed descriptive statistical analysis about all the 30 patients suffering from *Vataja Kasa* according to their Age, Sex, Religion, Education, location, habit, Socioeconomic status, Occupation, Duration of illness, *Ahara, Prakrithi*

RESULTS

Statistical analysis of Subjective and Objective parameters

Parameters	Measures			%	
	BT				
<i>Shushka kasa vega</i>	2.00	4 th	1.10	0.90	45.00
		AF	0.00	2.00	100.00
<i>Shirashoola</i>	0.13	4 th Day	0.07	0.07	50.00
		AF	0.00	0.13	100.00
<i>Urah shoola</i>	0.10	4 th	0.03	0.07	66.67
		AF	0.00	0.10	100.00
<i>Parshwashoola</i>	0.30	4 th Day	0.14	0.16	54.02
		AF	0.00	0.30	100.00
<i>Swarabheda</i>	0.83	4 th Day	0.43	0.40	48.57
		AF	0.00	0.83	100.00
<i>Mukha sushkata</i>	1.13	4 th Day	0.61	0.53	46.43
		AF	0.00	1.13	100.00
<i>Balakshaya</i>	0.13	4 th Day	0.00	0.13	100.00
		AF	0.00	0.13	100.00
Absolute Eosinophil Count	637.16	4 th Day	396.67	240.50	37.75
		AF	370.83	266.33	41.80

The overall effect of treatment

Overall effect of treatment		
Grading	Relief in percentage	Relief in patients
No improvement	0%	0
Mild improvement	1-30%	0
Moderate improvement	31-60%	0
Marked improvement	61-99%	0
Complete remission	100%	30

DISCUSSION

Discussion on disease

Kasa is one of the common complaints for which patients seek medical attention. As a result *raja* and *dhooma*, the main cause of *Pranavaha srotodushti*, has become unavoidable, making *Kasa* the most common disease. Acharya Bhela tells that, due to *nidana sevana*, the vitiation of Vata takes place and moves to the *Hrudaya*. In *Hrudaya*, it creates *Hrudgraha* and reaches *Urdhwa dhamanees* thereby producing *Vataja Kasa*. It is characterized by *lakshanas* like *Shuska Gala*, *Shuska kasa* with *Shuska-Alpa-Kapha*, *Swarbheda*, *Parshvashoola*, *Shirashoola*, *Urashoola*, *Dourbalya* etc. According to *Sushruta*⁹ description of *samprapti* of *kasa* is that, due to the *nidana sevana* vitiation of *prana vayu* takes place and this get mixed with *udana vayu* causes abnormal, forceful expulsion of *vayu* from the mouth creating peculiar sound which is similar to that of sound produced by broken bronze vessel. According to *Charaka*^{10,11} & *Vagbhata*¹², the *kasa* that is manifested by single *dosha* is a *Sadhya*. In case of aged person, it will be *yapya*. Acharya *Charaka* suggested, as there is *rookshata* in *Vataja Kasa*, *sneha* is the first line of treatment. *Acharya* also states that *sneha dravya*, *lehya*, *dhooma* prepared by using drugs that are having *vataghna* properties act excellently in curing the disease. Depending upon the condition *Acharya Charaka* has indicated *basti*, *sneha virechana*. In case of constipation (*baddha vit vata*) *basti* is indicated and in *sakapha* condition *sneha virechana* acts superbly. Depending upon the condition *abhyanga* and *parisheka* are also indicated.

Discussion on result

In the Overall effect of treatment in *Vataja Kasa*, 30 patient got cure. The overall effect of the treatment was 100%. The obtained results were to be considered as insignificant if $P > 0.05$, significant if $P < 0.05$.

Probable mode of action

The treatment was decided on the basis of the predominance of *Dosha* and *Dhatu* involvement. The symptoms indicated vitiation of *Vata dosha* in *Pranavaha srotas*. Treatment was planned according to the treatment principles of *Vataja Kasa*, in which *acharya* has mentioned the usage of *lehya* preparation. *Shuntyadi lehya* which consists of ingredients like *shunti* has *vatakaphaghna* property by its *Ushnaveerya* and *Madhura vipaka*. *Acharya* mentioned *Sthanantara dosha chikitsa*, where he explains that the *dosha* that has established itself in another *dosha*'s site should be treated first in accordance with the seat when *Agantu doshas* are weak; when the *Agantu dosha* is commanding it is treated according to its own nature. When the *Agantu* and *Sthanika dosha* are of equal strength, then the *Agantu dosha* should be pacified after treating the *Sthanika dosha*, or else to say both have to be given importance in mitigation.¹³ In *Vataja kasa*, *Vata* have been vitiated in *Kapha sthana*. Hence property of *Shunti* contributes to the reduction of symptoms of *Vataja kasa*. *Yashtimadhu* has the *Tridoshagna* effect because by its *Guru*, *Snighda guna*, *Madhurarasa*, due to *Madhura vipaka* it is *Vatashamaka*, due to *Madhura* and *Sheeta* it is *Pittashamaka* And due to *Tikta rasa*(*kinchit*) it is *Kaphashamaka*. *Tila* is *Vatagna dravya* by its *Guru guna*, *Ushna veerya*, *Madhura vipaka*¹⁴. Using preheated *Tila* enhanced the *Vataghna property*, as by preheating *tila* the oil content in it had got faster processing time.¹⁵ *Guda* is having *Vata pittaghna* property due to its *Madhura rasa* and *Snighda guna*.¹⁶ Thus by the action of this formulation, the symptoms of *Vataja kasa* remarkably have been reduced along with Absolute eosinophil count.

CONCLUSION

At the end of the study, the following conclusions were drawn based on observations made, results achieved and after thorough discussions in the present context, *Shuntyadi lehya* is having more effect on *Vataja Kasa* and shows the long-lasting result. In the Overall effect of treatment in *Vataja kasa*, 30 patient got cured. The overall effect of the treatment was 100%. Thus, the alternate hypothesis H1 is accepted i.e. There was a significant effect of *Shuntyadi lehya* with *koshna jala* as *anupana* in *Vataja Kasa*

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