CASE REPORT

Effect of Ayurvedic classical medicines in Kaphaja Kasa: A case report.

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ABSTRACT:

Kasa (Cough) is a common problem among patients visiting outdoor patient department (OPD) of Kayachikitsa at Ayurveda Campus and Teaching Hospital (ACTH). In the OPD, the treatment outcome of Kaphaja Kasa (chronic cough) is often less satisfactory. Chronic cough significantly hampers the overall quality of life of patient since it mainly affects the Pranavaha Shrotas (respiratory system). This is a case report of a 42 years old lady presented with Kaphaja Kasa at ACTH and was treated successfully with Classical Ayurvedic medicines.

Keywords: Kaphaja Kasa, Chronic cough, Classical Ayurvedic Medicines

INTRODUCTION

Kasa is manifested during Vata Vimargagamana (wrong route travelling of Vata) and pranavaha shrotodusti (pathogenesis of respiratory system) and there is mainly involvement of vata and kapha dosha. In Ayurveda, Kasa roga is considered as an independent disease. Acharya Charaka had defined Kasa as the release of obstructed vayu resulting in the production of abnormal sound during breathing process, which may be productive or dry.1,2 The nidana (etiology), Poorvarupa (prodormal symptoms), Bheda (types), Lakshana/Rupa (sign and symptoms), Samprapti (pathogenesis), Upadrava (complication) and Chikitsa (treatment) of Kasa-Roga had been described in Ayurveda in details.1,3 In Kaphaja kasa there are symptoms like Madhura (sweet), snigdha (unctuous), ghana (solid) and sweta (whitish) sputum, Kanthe Kandu (Throat itching), Hritshoola (Chest pain), Peenasa (Running nose), Swarabheda (Sore throat), Asya madhurya (Sweetness in mouth).1 The cough which persists for more than eight weeks in adults4 and four weeks in children5 is known as Chronic cough. Similarly in chronic cough, there are symptoms like runny nose, postnasal drip, coughing and sore throat, hoarseness, wheezing or shortness of breath, heartburn or sour taste in a person’s mouth, and in rare cases coughing blood.6 Chronic cough can seriously impair the quality of life when it becomes excessive and persistent causing vomiting, muscle pain, rib fractures, urinary incontinence, tiredness, syncope, depression, embarrassment and negative impact on social interactions7,8. Kasa is one of the most common disease, and may cause serious complications when it is neglected. The prevalence of chronic cough is 2-7% in Asia, 10-15% in Europe and 8-14% in USA.9 Because of similarities in various clinical presentation, Kaphaja kasa can be correlated with Chronic Cough (Chronic Bronchitis).2,10 It is one of the most common health problems for which patients seek medical consultation. There are different conventional treatment options for chronic cough such as expectorants, cough suppressants, mucolytics, bronchodilators, antibiotics and corticosteroids which may exhibit lots of unwanted side-effects during their use. So, Ayurvedic classical medicines having minimal unwanted effects can play significant role in managing this disease without any unwanted/side-effects.

CASE REPORT

A 42 years female lady presented in the OPD of Kayachikitsa at ACTH with the chief complaints of Kasavega (cough), Peenasa (running nose), Nisthivana (mucous expectoration), Nirghosh (abnormal chest sound), Shirasool (headache), Swarabheda (hoarseness of voice), Aruchi (loss of appetite), Angagourava (malaise) for 10 months. She had a past history of pneumonia.
eleven years ago. She had history of *Chhardi* (vomiting) of three episodes one month ago. Due to chronic cough she had complications like urinary incontinence, sleep disturbances, depression, interrupted meals, impaired daily work activities, frustration, etc. Thus, her overall quality of life was found seriously panic. On oropharyngeal examination of the patient, there was congestion in the posterior pharyngeal wall and was also found enlargement of both palatine tonsils. On auscultation of bilateral chest wheezing sound was revealed. However, she was afebrile and her blood tests for total leucocyte count, differential count, haemoglobin level and Erythrocyte Sedimentation Rate (ESR) were within normal limits. She was treated with a combination of Classical herbo-mineral Ayurvedic medicines namely Sitopaladi Churna, Shringarabhra Rasa, and Giloya Satwa in a mixture along with honey twice daily after meals for one month.

**METHODS**

Case report method was used in this study. Verbal consent was taken from patient to report the findings maintaining patient’s privacy.

**INTERVENTION**

A mixture of three classical Ayurvedic medicines was given namely Sitopaladi churna (3 gm), Shringarabhra rasa (250 mg) and Giloya satwa (500 mg). Sitopaladi churna is a herbal based powder, Shringarabhra is herbo-mineral preparation of powder form. Giloya satwa is the cold aqueous extract of dried form. All three medicines were mixed properly and given along with honey twice daily after meals for 1 month.

Advice: Patient was advised to avoid dust, smoke, cold and spicy foods including banana, curds, frozen items which may increase *Kapha dosha*.

**RESULT**

After one month of treatment, the patient was completely recovered from all the signs and symptoms like *Kasavega* (cough), *Peenas* (running nose), *Nisthivana* (mucous expectoration), *Nirghosh* (abnormal chest sound), *Shirashool* (headache), *Swarabheda* (hoarseness of voice), *Aruchi* (loss of appetite), *Angagourava* (malaise).

The lab investigations report before treatment show:

- Haemoglobin level: 14 mg/dl, Total W.B.C. Count: 3500/ Cu.mm
- Differential count: Neutrophils: 62%, Lymphocytes: 37%, Eosinophils: 04%, Monocytes: 0%, Basophils: 0%, E.S.R.: 13

The lab investigations report after treatment shows:

- Haemoglobin level: 13.5 mg/dl, Total W.B.C. Count: 9800/ Cu.mm
- Differential count: Neutrophils: 59%, Lymphocytes: 36%, Eosinophils: 3%, Monocytes: 2%, Basophils: 0%, E.S.R.: 18

**DISCUSSION**

Respiratory diseases are increasing rapidly due to pollutants liberated from the industries, vehicles, household pollution, smoke, dust, etc. The atmospheric air is polluted and fresh air for breathing is going to be limited day by day which results deteriorating the quality of life on earth. This pollution and urbanization also are responsible for the disease of pranavaha shrotas (respiratory system) like *Kaphaja kasa*. One of the study revealed that 31.82% of patients of *Kasa* were male and 68.18% were female, and the prevalence of chronic cough is 2-7% in Asia. Persistent cough causes 10-30% referral cases of the disease visiting pulmonologists. Causing significant morbidity, chronic cough seems to be a global, however, is poorly recognized condition. According to American lung Association (ALA), women are more likely to present with chronic cough and some evidence of a heightened cough reflex sensitivity when compared with men. Women have chronic bronchitis at double the rate of men. The risk also increases with age. Modern medical care facilities are not accessible and affordable to a large proportion of Nepalese citizens. Majority of population in Nepal still depend on traditional system of medicine for primary care. The treatment options available for chronic bronchitis in modern medical system has lots of side effects like dizziness, constipation, sedation, nausea, headache, gastro-intestinal disturbances, intoxication, drug addictions, etc. Therefore, Ayurveda is one of the best option for developing very safe and effective Ayurvedic treatment for chronic cough. In Ayurvedic classical texts, there are different treatment modalities for *Kaphaja kasa*. Among them one is *Shamana therapy*, in which various herbo-mineral medicines are prescribed. In *Kaphaja kasa*, *Kapha dosha* obstructs the normal movement of *Vata dosha* causing *Vata* to move in abnormal path. Hence, during management of disease, *Kapha Niriharana* and normalization of *Vata gati* should be considered. Charaka had described *ausadha dravya* having kaphanashaka, *katu*, rooksha and *ushna* guna in *Kaphaja kasa*. According to a study of *Sitopaladi Churna*, it has claimed to have an anti-histaminic effect. Another study of *Sitopaladi Churna* was found to be effective in the treatment of *Kasa*. *Sitopaladi churna* is effective in curing disorders like *Swasa*, *Ksha*, *Mandagni*, *Parshwashoola*, *Aruchi* and *Jwara*. Among the ingredients of *Sitopaladi churna*, Charak had mentioned pippali in *kasahara* and kanthya gana. Pippali has laghu, snigdha, tikshna, *katu*-rasa, madhura-vipaka, vata-kaphahara, swasa-kasahara properties. *Twak* (Dalchini) has tikshna, ushna, *rukshya*, pittpaprapokap, pachana, deepana properties and *Elä* (sukmel) has laghu, *rukshya*, *katu*, kaphanisharaka properties. All the ingredients have kapha and vata shamaka properties. Thus *Sitopaladi Churna* can be used as an anti-tussive, analgesic and antipyretic medicine.
**CONCLUSION**

This case shows that the unique combination of classical ayurvedic herbo-mineral medicine including *Sitopaladi churna*, *Shringarabhra rasa* and Giloya satwa is significantly effective in management of *Kaphaja Kasa* (Chronic Bronchitis). Since the availability of chemical drugs in the market for *Kaphaja Kasa* (Chronic Bronchitis) is limited and exhibits side-effects, the unique combination of classical ayurvedic herbo-mineral medicines like *Sitopaladi churna*, *Shringarabhra rasa* and Giloya satwa can be prescribed for the management of *Kaphaja Kasa*.

**ABBREVIATIONS:** Not Applicable

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