



ORIGINAL RESEARCH PAPER

Ayurveda

LITERATURE REVIEW OF PIPPALYADI AGAD IN DUSHIVISHAJANYA SHWASA.

KEY WORDS: Dushivisha, Tamak Shwasa, Pippalyadi Agad.

Dr. Anuja Vasant Nagrare

MD. Agadanttra - Assisstant Prof. – Jupiter Ayurved College, Nagpur.

Dr. Varsharani S. Patil

Associate Prof – Agadanttra - VPAMCSangli.

Dr. Pavan Lekurwale

Associate Prof – Kayachikitsa - LN Ayurved College, Bhopal.

ABSTRACT

Poison is a substance which when administered, inhaled or ingested is capable of acting deleteriously on the human body. Poison can act on body by disturbing dhatusamyas and producing various diseases. In the same way dushivisha is acting on the body by vitiating dhatus. Dushivisha has less potency, though not fatal it remains inside the body for variable period. Factors responsible for vitiating dhatus such as dushit desha, kala, food, diwaswap etc. are considered as dushivisha and also these are triggering factors for the both dushivisha and shwasa. Pippalyadi agad Drug exhibiting quick control over vitiating vata and kapha, While permanent relief is attainable through implementation of drugs having action agni and pittastana along with vatakapghnata

INTRODUCTION

Ayurveda is science of life. Its main aim is maintaining dhatusamyas of body. One who follows the rules of dincharya, rutucharya and ahar vihar able to live healthy life or otherwise face many diseases. Long life is depending on continuous and regular respiration as shwasa jiwane.¹

Poison is a substance which when administered, inhaled or ingested is capable of acting deleteriously on the human body. Poison can act on body by disturbing dhatusamyas and producing various diseases.

In the same way dushivisha is acting on the body by vitiating dhatus. Dushivisha has less potency, though not fatal it remains inside the body for variable period. Factors responsible for vitiating dhatus such as dushit desha, kala, food, diwaswap etc. are considered as dushivisha and also these are triggering factors for the both dushivisha and shwasa.

So many poison mentioned in the Ayurvedic classics are not available on the earth. In the same way today so many poisons are identified but not included as poison in Ayurvedic texts. Newly identified poisons which have less potency, tendency to remain inside the body and vitiate dhatus, they can be correlated with dushivisha. E.g. preservatives in food, different pesticides, germicides, different adulterants, (Adulteration of non edible oil into edible oil, small stone in rice etc.) harmful gases released by vehicles, polluted water and fumes discharged by industry etc.

Dushivisha produces sign and symptoms in the body. Shwasa is one of them which is clearly mentioned by Madhav Nidan and Bhava prakasha also kaphasthangata visha lakshanas by Charak and visha updrava by Vagbhata. We had taken Tamakashwasa as others are fatal and Ksrudra does not require treatment.

Dushivishajanya tamakswasa can be correlated with allergic bronchial asthma which is defined as a disorder characterized by chronic airway inflammation and increased airway responsiveness to variety of stimuli resulting in symptoms of paroxysm dyspnoea, wheezing, cough and chest tightness. The causes of asthma are not completely understood. However, risk factors for developing asthma include inhaling asthma “triggers”, such as allergens,

tobacco smoke and chemical irritants.

The other risk factors for developing asthma are inhaled substances and particles that may provoke allergic reactions or irritate the airways.

About 235 million people currently suffer from asthma. India has an estimated 15-20 million asthmatics

The incidence of Tamaka shwasa which may be considered as Bronchial Asthma has a high incidence as 5-10% of the population with irrespective of age, sex, occupation and socioeconomic status etc in the present day. Even though with the best possible measures for the management of Tamaka shwasa; the incidence of the disease is markedly increasing. Hence it is the need of the time to ascertain an effective management of Tamaka shwasa.

Asthma is common disorder of airway obstruction labeled as localized anaphylactic type-I hypersensitivity reaction that occurs when person is exposed to such allergen which is already sensitive to that. In asthma different inflammatory actions occur in the bronchi when no serious infection, toxins or other inhaled threat to the body exists. Inflammation is caused due to hyperactive immune response, eosinophil recruitment, airway oedema and cell mediators such as histamine, bradykinin, leukotrienes, C D E prostaglandins etc.

Tamakshwasa is produced due to defect in metabolism at cellular level (Aam visha). Defective cellular metabolism (Hyperactive immunity) leads to production of rasagata kapha which obstructs the channels and produces vitiation of vata, leads to Tamakshwasa.

Dushivisha is intrinsic cause of altered immune response (Ojodusti). Dushivisha can generate harmful effects similar to that of hypersensitivity reaction.

DEFINITION:

Visha which express its toxic effect in the body after long period.

Any poison which is sthavara, jangam or krutrim is not properly expelled out from the body or neutralized by anti poisonous medicine or suppressed by environmental factor

or is of less potency by nature. (i.e. devoid of any qualities of visha) it get deposited in tissue and assume the form of dushivisha. Because of kaphavrutta and less potency it will not produce any type of symptoms and may remain in latent phase for years. It is called as dushivisha.

Visha which is on constant exposure to a particular Time (i.e. cloudy, windy day or rainy season) Place (i.e. Anup desh or cold place), Diet (madya, sesamum, kulatha, pulses) and Day sleep causes vitiation of dhatus is called as dushivisha.

The visha which gets exposure to eastern wind, cold, due to indigestion, day time sleep and on taking unwholesome food gets vitiated and deranges dhatu is known as Dushivisha.

According to Dalhana dushivisha means any poison that is devoid of natural properties of visha, incapable of producing acute symptoms of poisoning.

Sharangdhar and Bhavamishra mentioned dushivisha as a type of krutrim visha. Other acharyas have not included dushivisha in any type of classification.

By studying above all the definitions dushivisha can be defined as, it is a transformatal state or latent state which any type of poison can attain and it deranges the tissue (dhatu) on aggravation in favorable condition.

HETU: (CAUSATIVE FACTORS)

1. Sthavara visha
2. Jangam visha
3. Krutrim visha
4. Viruddha Ahara
5. Vegavrodha
6. Ajeerna
7. Manas bhava.

PURVARUPA:

Excessive sleep, Heaviness, Yawning, Joint stiffness, Horipulation, bodyache, Anna mada, Avipak, Arochaka, Mandal (Allergic) and Kotha (Allergic manifestation) etc.

CHIKITSA:

In dushivisha venesection and five evacuative measures should be applied. If it is situated in pitta sthana then ghee, madhu and water should be advised along with avgaha and parishek.

If it is situated in pakvashaya then dushivishari agad with dadhi and madhu should be advised.

Sudha is indicated for shodhan in patient suffering from dushivisha.

Patient suffering from dushivisha should be evacuated by vamaana, then advice dushivishari agad for daily purpose.

DUSHIVISHARI AGAD:

Pippali, Katruna, Jatamaunshi, Shavar Lodra, Suvarchika, Sukshma ela, Kanak gairika.

DEFINITION:

When the prana vayu get vitiated and becomes defiles (viguna); obstructed by kapha and moves upwards, it means unable to perform function properly then the condition is known as Shwasa roga.

SAMPRAPTI:

SAMPRAPTI GHATAK:

- Dosha - Vata-Prana, Vyan.
- Pitta - Pachak.
- Kapha - Kledak, Avlambaka.
- Dusya - Rasa, Rakta.
- Agni - Mandya.

- Srotasa - Prana, Anna, Udak, Rasa, Rakta vaha.
- Srotodushti - Sanga, Vimargamana.
- Roga marga - Abhyantar.
- Adhithana - Sharir.

Charakacharya has correlated shwasa with visha which is fatal. This indicates that hetus are predominantly important factors in this diseases.

Another cause which is internal cause may create another disease as vyadhi sankar. Because there are so many other disases which can be converted to ekarthkar or ubhyarthkar roga as explained by Charak.

So in this way hetus are pradhanik like gara visha are very important because according to Charak⁵³ there are some diseases which can create such type of Samprapti in the body which further creates Shwasa roga as roopa or as updrava.

We can explain that particular disease as a nija visha/ nija garavisha/ nija internal generating poison.

Acharya Chakarapani has shown that immunity is directly related to ojas or destruction of negative changes in the immune system or the power of dhatu dushti. Gara visha or dushivisha is also having same importance as other allergen or hetus. Example of ashivisha clearly indicates that agad is also required as an antitoxic treatment.

PIPPALYADI AGAD: REF:

(Kaviraj Atridev Gupta, "Astangsangraha," Hindi Comm entary", vol.2, Uttarstana 47/6.P.P.381.)

Pippali	Piper longum	1 part
Hingu(Ghrut Bharjit)	Ferula narthex	1 part
Saindhav	Rock salt	1 part
Kapitha(Phal majja)	Ferronia elephantum	1 part
Mishri	Sita	1 part

MANAGEMENT OF DUSHIVISHAJANYA TAMAK SHWASA:

1. Correcting Agnimandya:
2. Ama pachana
3. Increasing immunity: (Vyadhikshamatva)
4. Kaphaghna and Vataghana chikitsa
5. Shothahar chikitsa
6. Rasayan chikitsa
7. Manas chikitsa
8. Nidan Parivarjana
9. Vishaghna chikitsa

HYPOTHETICAL EXPLANATION OF DRUG ACTION

Pharmacological action of Pippalyadi agad can be explained hypothetically in following ways.

Acharya Charak advised three main types of treatment for tamakshwasa, bruhana, shaman and shodhana. Shamana has priority over rest of two¹. In shaman chikitsa vatakaphaghna ushna and vatanulomana drugs should be used.

As explained in Ayurvedic review pathogenesis of dushivish hajanya tamakshwasa, dushivisha plays an important role in pathogenesis of tamakshwasa. Acharyas has advised vatakaphaghana, ushna, vatanulomana drugs as a first line of treatment of tamakshwasa.

Drug exhibiting quick control over vitiating vata and kapha, While permanent relief is attainable through implementation of drugs having action agni and pittastana along with vatakaphghnata. So the drug administered for the treatment of Shawsa should have action on pitta. For that we have selected Pippalyadi agad. Pippalyadi agad has used as not only shwasaghna but also vishaghna in dushivishajanya tamakshwasa.

Pippali: It is swadu, hrudya, shwasghna, rasayani, vatanul omani and pittanashani.³ As mentioned in Raja, Bhav prakash, Dravyaguna, Kaidev, Madanpal nighantu that Pippali is shwasanashak, so Pippali is directly vyadhipratyanik.

Hingu: Asafoetida is recommended for the treatment of snake bite and scorpion bite. It is used as antidote to poison⁴.

Kapitha: Kapitha has madhura, amla, kashaya rasa act as mucolytic and expectorant. Katu vipak enhances jatharagni, dhataavagni and normalize the metabolic process. It reduces the kapha and it has properties shwasaghna as well as vishaghna. Pulp with honey and Pippali is given for hiccup and difficulty in breathing.⁵

Saindhav: Saindhav makes drug to act as a kaphashamak and anvisha doshahar.⁶

Sita: It is Vatapittahar and gives soothing effect and relieving congestion and spasm of pranavaha strotas.⁷

Madhu: Madhu has Madhur (Kashaya) rasa, Kaphapitta shamak, pacifying kapha and expulsion of kapha.⁸

In this agad Pippali and Hingu have properties like katu rasa, anushna and ushna virya, Kapitha have madhura, amla, kashaya rasa, vipak katu and vishahar karma. Katu rasa has ushna, lekhana guna and secretogenic effect in diluting thick mucus plug and bring out easy expulsion.⁹

Deepana, pachana, ruchikara and kaphghna katu rasa which is present in drug helps for deepana karma i.e. jatharagni and dhatvagni and Pachana karma i.e. Ama pachan. Ama is the main cause of samprapti. In this way, deepana and pachana help in samprapti vighatana. Prasaryati strotansi means katu rasa is bronchodilataion and also it is kaphaghna. So it again helps in samprapti vighatana.

According to Ayurveda ushna virya helps in pacifying kapha and vata, helps in fast destruction of cell debries and clearing micro channels.¹⁰ It also helps in removing the dushivisha from various dhatus.

REFERENCES

1. Acharya Vidyadhar Shukla, Prof. Ravi Dutt Tripathi, "Charak Samhita", Vaidya Manorama Hindi Commentary, Chikitsa sthan 17/149. P.P.436.
2. Acharya Vidyadhar Shukla, Prof. Ravi Dutt Tripathi, "Charak Samhita", Vaidya Manorama Hindi Commentary, Chikitsa sthan 17/ 147. P.P.435.
3. Pandit Sri Bhima Shankar Mishra, "Bhav Prakash Nighantu" 1/55-56. P.P.15.
4. K. R. Kirtikar and B. D. Basu, "Indian Medicinal Plants" Vol. 1 edition 1993. P.P. 497.
5. A. K. Nadkarni, "Indian Materia Medica", Edition 1995, vol. 2, P.P. 536.
6. Vd. Harish Chandra Singh kushwaha, "Charak Samhita", 'Ayushi' Hindi Commentary, Edition 2009. Sutra sthan 27/300. P.P.455.
7. Vaidya Laxmipati Shashtri, "Yogratnakar", "Vidyotini" Hindi commentary, Edition 2012, P.P.111.
8. Vd. Harish Chandra Singh kushwaha, "Charak Samhita", 'Ayushi' Hindi Commentary, Edition 2009. Sutra sthan 27/245-246. P.P.445.
9. Vd. Harish Chandra Singh kushwaha, "Charak Samhita", 'Ayushi' Hindi Commentary, Edition 2009. Sutra sthan 26/43-(4). P.P.386.
10. Kaviraj Atridev Gupta, "Astangsangraha," Hindi Commentary", vol.1, Sutra 17/16. P.P.1422.