

A Clinical Study to See the Efficacy of Bala Sidhaksheera Nadi Swedan in Vataja Kasa.

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Abstract:

Background: Vataja kasa a very common disease especially among geriatric age group, Vataja kasa is chronic it again troublesome to treat and person is getting difficulty in voice, talk also.

Objectives: To assess the efficacy of Balasidhaksheerapak nadiswedana in the management of Vatajakasa. To study efficacy of Balasidhaksheera nadi swedan with shaman aushadhi & without shaman aushadhi. **Methodology:** In each group 30 patients were selected having symptoms of Vataja kasa for this clinical study having age 13-80 years, irrespective sex, religion, educational and socio-economic status from OPD of Panchakarma in the hospital. In experimental group, Sitopladi Churna, Kantkari Ghrita, Durlabhadi leha and Balasidhasheera Nadiswedan was given. For control group, Sitopladi Churna, Kantkari Ghrita and Durlabhadi leha was advised to patients for the period of 15 days along with Madha (Honey) as Anupan.

Results & conclusion: In the present study along with above treatment Balasidhasheera Nadiswedan has been observed very effective for the symptoms like Shuska Kasa(Dry Cough), Shool in ura, Parshwashool, Swarbheda, Daurbalya and giving satisfactory relief in the symptoms of Vataja Kasa.

Keywords: Kasa, vataja kasa, Kantakari, Nadisweda, chikitsa

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Introduction:

Ayurveda has stated three Shashwat sutras viz. Hetu, Linga, Aushadh in which entire Ayurveda has been described. Vataj kasa a very common disease especially among geriatric age group, often diagnosis is vague and treatment is half left. The disease Vataja Kasa can be compared to simple tropical pulmonary eosinophilia and it is characterized by dry cough which may be associated with little amount of sputum, paroxysmal cough, headache, feeble voice, generalized weakness, chest pain. It is the most frequent symptom of respiratory disease.¹

In Charaka Samhita kankari is mentioned in Kanthya, Hikkani-grahana, Kasahara, Shothahara, Sheetaprashmana, Angamardaprashmana Dashemani. (Ch.Su.4) and Madhura-Skandha (Ch.Vi. 8) Kankari is available widely but its part used is root. Alongwith this Sitopaladi churna & Duralabhadi yoga is also effective in treatment of Kasa as vataja kasa is chronic it again troublesome to treat and person is getting difficulty in voice, talk also.² It also hampers the quality of life and result into some chronic infection like bronchitis, pulmonary infections, tuberculosis if not treated within time. In Vataja kasa there is severe dryness in throat and naso-pharyngeal root it also leads into hoarseness of voice.³ Acharya Charaka stated that, one should cure the first three types i.e. Vataja, Pittaja and Kaphaja Kasa.⁴ Thereafter Acharya Charaka coated separate Chikitsa for each type of Kasa, which includes Snigdha, Ushna, Anulomana Dravyas for Vataja Kasa, for Pittaja Kasa Madhura,⁵ Tikta, Snigdha,

Sheeta, anulomana, Avidahi Dravyas while for Kaphaja Kasa Laghu, Ruksha, Katu, Anulomana Dravyas.⁶ Upshaya (relieving factors), Anupshaya (non-relieving factors) are helpful in diagnosing the diseases.⁷ In the context of Kasa (cough), Upshaya and Anupshayas are not told by the ancient Acharyas. It can be understood that the Nidana (etiology) of Vataj Kasa which are Rooksha, Sheetata and Laghu - Ahara, Vihara and Aushadha will be Anupshaya and opposite (Snigdha, Ushna and Guru) will be Upshaya for Vataja Kasa.⁸

In the present study experimental group was subjected to Balasidhaksheer Nadi Swedan along with shaman chikitsa as per Charak chikitsa sthan. While control group was given only Shaman Chikitsa viz. Sitopaladi churna, Kankari ghrita & Duralabhadi yoga. Observations and results obtained after trial was presented & statistical analysis done after completion of the therapy.

OBJECTIVES:

- 1) To study in details about Vataja kasa according to Ayurveda & tropical pulmonary eosinophilia according to modern science.
- 2) To assess the efficacy of Balasidhaksheerapak nadiswedana in the management of Vatajakasa.
- 3) To study efficacy of Balasidhaksheera nadi swedan with shaman aushadhi & without shaman aushadhi.

Methods:

Preparation of drug:-

Contents of 'Sitopaladi Churna, Kankari Ghrita, Duralabhadi leha and Balasidhasheera was selected as per the

qualities mentioned in books of Rasashastra & Bhaisyajakalpana was prepared in the department of Rasashastra and Bhaisajakalpana.

Selection of patients :-

In each group 30 patients were selected having symptoms of Vataj kasa for this clinical study having age 13-80 years, irrespective sex, religion, educational and socio-economic status from OPD of Panchakarma in the hospital.

Group of patients :-

All the selected patients were randomly categorized into two groups such as experimental group and control group.

In experimental group, Sitopladi Churna, Kantkari Ghrita, Durlabhadi leha and Balasidhasheera Nadiswedan was given. For control group, Sitopladi Churna, Kantkari Ghrita and Durlabhadi leha was advised to patients for the period of 15 days along with Madha(Honey) as Anupan. After that status of patients was examined as per assessment criteria before start of the treatment and data was named as "Before Treatment" (BT). Treatment was started and weekly follow-up of patients was taken. During this period patients were closely observed for progress in symptom score. After completion of treatment patients were assessed again and the data was termed as "After Treatment" (AT).

General Observation:

Gender :

In this study, totally 37 [61.67%] were male & 23 [38.33%] were female while more male was recruited in experimental group it may be due random selection of patients.

Habitat :

In experimental group out of 30 patients, 22 [73.33%] were from rural area and 08[26.67%] were from urban area, while in control group 23[76.67%] were from rural area and 07[23.33%] were from urban area. Totally out of 60 patients, 45[75%] were from rural area and 15[30%] were from urban area.

Diet :

Out of 60 patients, 38[63.33%] were having mixed type of diet and 22[36.67%] purely vegetarian.

Vihar :

In this study out of 60 patients 20[33.33%] were indulging sedentary type of work, 24[40%] were having active type of work while 16[26.67%] were having medium type of work.

Vyasan

In this study, out of 60 patients 06[10%] were having vyasan of Tobacco, 27[45%] having vyasan of tea, 11[18.33%] were having vyasan of alcohol while 16[26.67%] were having no any vyasan.

Agni Parikshan:-

In this study totally 25[41.67%] patients having manda agni, 27[45%] were madhyam and 08[13.33%] were having visham type of agni.

Koshtha parikshan:

Most of patients 47[78.33%] were having manda koshtha while 13[21.67%] were having krur type of koshtha.

Prakruti :

Out of 60 patients in 24[40%] were belong to Vata-pittaj prakruti, 20[33.33%] were of Vata-kaphaj prakruti followed by 16[26.67%] patients were Pitta-kaphaj prakruti.

Table No.1 Percentage of Relief (Subjective Criteria) in Each Symptom of 60 Patients of Vataja Kasa

Sr. No.	Symptoms	Experimental Group				Control Group			
		BT	AT	Diff	% of Relief	BT	AT	Diff	% of Relief
1	Shuska Kasa	59	09	50	84.74	59	39	20	33.88
2	Shool in ura & hritpradesh	64	14	50	78.12	78	57	21	26.92
3	Parshwashool	60	13	47	78.33	75	49	26	34.66
4	Swarbheda	33	04	29	87.87	32	18	14	43.75
5	Daurbalya	38	08	31	79.48	42	23	18	42.85

Percentage of Relief in Symptoms Score:

In experimental group percentage of relief was obtained as follows:-

In Shuska Kasa(Dry Cough), before treatment (BT) score was 59 and reduced after treatment (AT) to 09 so the percentage of relief was 84.74%. In Shool in ura & hritpradesh, before treatment (BT) score was 64 and reduced after treatment (AT) to 14 so the percentage of relief was 78.12%. In other symptoms like Parshwashool, Swarbheda & Daurbalya the percentage of relief was noted as 78.33%, 87.87 % and 79.48% respectively.

In control group marginally not observed much percentage relief

comparatively experimental group. In Shuska Kasa(Dry Cough), before treatment (BT) score was 59 and reduced after treatment (AT) to 39 so the percentage of relief was only 33.88%. In Shool in ura & hritpradesh, before treatment (BT) score was 78 and reduced after treatment (AT) up to 57 so the percentage of relief was 26.92% only. In other symptoms like Parshwashool, Swarbheda & Daurbalya the percentage of relief was noted as 34.66%, 43.75 % and 42.85% respectively which was much less compare to experimental group in this study.

Table No.2 Showing Wilcoxon Signed Rank Test of Symptom score of Vataja Kasa of Experimental Group:

No	Symptoms	Mean ± SD		±S Ed		Sum of +Ranks (T ₊)	P Value
		BT	AT	BT	AT		
1	Shuska Kasa	1.96 ± 0.88	0.30 ± 0.46	0.16	0.08	465	<0.001
2	Shool in ura	2.13 ± 0.68	0.46 ± 0.50	0.12	0.09	465	<0.001
3	Parshwashool	2.0 ± 0.52	0.43 ± 0.56	0.09	0.10	435	<0.001
4	Swarbheda	1.10 ± 0.60	0.13 ± 0.34	0.11	0.06	325	<0.001

5	Daurbalya	1.30 ± 0.53	0.26 ± 0.44	0.09	0.08	378	<0.001
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Table No.3 Showing Wilcoxon Signed Rank Test of Symptom score of Vataja Kasa of Control Group:

No	Symptoms	Mean ± SD		±S Ed		Sum of +Ranks (T ₊)	P Value
		BT	AT	BT	AT		
1	Shuska Kasa	1.96 ± 0.88	1.30 ± 0.79	0.16	0.14	190	<0.001
2	Shool in ura	2.60 ± 0.67	1.90 ± 0.54	0.12	0.10	210	<0.001
3	Parshwashool	2.50 ± 0.50	1.63 ± 0.61	0.09	0.11	351	<0.001
4	Swarbheda	1.06 ± 0.69	0.60 ± 0.56	0.12	0.10	91 (13pair)	<0.001
5	Daurbalya	1.40 ± 0.72	0.76 ± 0.56	0.13	0.10	136(16pair)	<0.001

Table No.4 Showing Comparison between Two Group w.r.t Symptoms of 60 Patients of Vataja Kasa by Mann-Whitney 'U' Test

No	Symptoms	Mean ± SD		Statistics		S Ed	P Value
		Exp. Group	Control Group	U'	U		
1	Shuska Kasa	1.66 ± 1.71	0.66 ± 0.54	754	146	0.10	<0.01
2	Shool in ura	1.66 ± 0.47	0.70 ± 0.53	785	115	0.08	<0.001
3	Parshwashool	1.56 ± 0.56	0.86 ± 0.34	729	171	0.08	<0.001
4	Swarbheda	0.96 ± 0.55	0.46 ± 0.57	643	256	0.10	<0.05
5	Daurbalya	1.03 ± 0.49	0.60 ± 0.67	619.5	280.5	0.08	<0.01

Discussion:

Effect of Therapy on Symptoms of Vataja Kasa in Experimental Group Statistically:-

In Experimental Group, symptom Shuska Kasa(Dry Cough) the Mean ± SD value obtained Before Treatment (BT) was 1.96 ± 0.88 and After Treatment(AT) it was obtained as 0.30 ± 0.46 which was statistically considerably extremely significant (p<0.001).

In symptom Shool in ura, the Mean ± SD value obtained Before Treatment (BT) was 2.13 ± 0.68 and After Treatment(AT) it was obtained as 0.46 ±

0.50 which was statistically considerably extremely significant (p<0.001).

In symptom Parshwashool, the Mean ± SD value obtained Before Treatment (BT) was 2.0 ± 0.52 and After Treatment(AT) it was obtained as 0.43 ± 0.56 which was statistically considerably extremely significant (p<0.001).

In symptom Swarbheda, the Mean ± SD value obtained Before Treatment (BT) was 1.10 ± 0.60 and After Treatment(AT) it was obtained as 0.13 ± 0.34 which was statistically considerably extremely significant (p<0.001).

In symptom Daurbalya the Mean ± SD value obtained Before Treatment (BT)

was 1.30 ± 0.53 and After Treatment(AT) it was obtained as 0.26 ± 0.44 which was statistically considerably extremely significant ($p < 0.001$).

Effect of Therapy on Symptoms of Vataja Kasa in Control Group Statistically:-

In Control Group, symptom Shuska Kasa(Dry Cough) the Mean \pm SD value obtained Before Treatment (BT) was 1.96 ± 0.88 and After Treatment(AT) it was obtained as 1.30 ± 0.79 which was statistically considerably extremely significant ($p < 0.001$).

In symptom Shool in ura, the Mean \pm SD value obtained Before Treatment (BT) was 2.60 ± 0.67 and After Treatment(AT) it was obtained as 1.90 ± 0.54 which was statistically considerably extremely significant ($p < 0.001$).

In symptom Parshwashool, the Mean \pm SD value obtained Before Treatment (BT) was 2.50 ± 0.50 and After Treatment(AT) it was obtained as 1.63 ± 0.61 which was statistically considerably extremely significant ($p < 0.001$).

In symptom Swarbhedha, the Mean \pm SD value obtained Before Treatment (BT) was 1.06 ± 0.69 and After Treatment(AT) it was obtained as 0.60 ± 0.56 which was statistically considerably extremely significant ($p < 0.001$). While calculating 17 pair were excluded because both values were equals.

In symptom Daurbalya the Mean \pm SD value obtained Before Treatment (BT) was 1.40 ± 0.72 and After Treatment(AT) it was obtained as 0.76 ± 0.56 which was statistically considerably extremely significant ($p < 0.001$). While calculating

14 pairs were excluded because both values were equals.

Comparison by Mann Whitney Test :

The Difference between before treatment and after treatment score of both group compared by 'Mann-Whitney U-Test'. It was found that the sum of rank of experimental group for the symptom Shuska Kasa (Dry Cough) U' statistics was 754, Test statistic (U) was 146, where the test statistic U was between Population Mean ± 1.96 SD which was extremely significant at 5% level of significance. ($P < 0.005$) Therefore the difference between Symptom Score of Shuska Kasa (Dry Cough) of Experimental group is statistically significant, so therefore we can conclude that in the symptom Shuska Kasa (Dry Cough), trial drug has effective as it significant extremely statistically. In symptoms like Shool in ura U' statistics was 785 and the test statistics U was 115 which was between Population Mean ± 1.96 SD which was very significant at 5% level of significance as $p < 0.005$.

Total Effect of Therapy:

In Experimental group, 9 patients got markedly improved, 20 were moderately improved while 1 patient got mild improvement.

In control group, no patients got markedly improved, 8 patients were moderately improved, 17 were mild improvement while 05 patients got no improvements.

Totally 9 patients got markedly improved, 28 were moderately, 18 patient got mild improvement while 05 were had no improvements.

Overall, it was observed that Percentage of Relief in Each Patient of 60

Patients of Vataja Kasa in experimental group was 82.27 in subjective 63.33 in objective, while 33.44 % and 42.77% in subjective and objective control group respectively. On average in both group 55.43 % relief got in each patient of Vataja Kasa.

Conclusion:

Vata- Khapha dominant dosha are involved in the Samprapti of Vataja Kasa. Vataj kasa is somewhat troublesome disease for patients as well as normal individual because it leads to some complication like bronchitis, eosinophilia, tuberculosis etc. Sitopladi Churna, Kantkari Ghrita, Durlabhadi leha are easily available in the market & it's cost effective. In the present study along with above treatment Balasidhasheera Nadiswedan has been observed very effective for the symptoms like Shuska Kasa(Dry Cough), Shool in ura, Parshwashool, Swarbheda, Daurbalya and giving satisfactory relief in the symptoms of Vataja Kasa. After comparison of both groups there was significant result was noted in experimental group comparatively control group as p value is significant in all subjective criteria of Vataj kasa. Overall, it was observed that Percentage of Relief in Each Patient of 60 Patients of Vataja Kasa in experimental group was 82.27 in subjective 63.33 in objective, while 33.44 % and 42.77% in subjective and objective control group respectively. On average in both group 55.43 % relief got in each patient of Vataja Kasa.

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