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## RESEARCH ARTICLE

### SHWASAHARA DASHEMANI – CLASSICAL SHAMAN YOGA FOR TAMAKA SHWASA

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#### ABSTRACT

*Tamaka Shwasa* is the one among the five types of *Shwasa Roga* explained in Ayurveda classic. *Tamaka Shwasa* shows close similarity with a bronchial asthma. Ayurveda considered *ShwasaRoga* as disease of *Pranavaha*, *Annavaha*, *Udakavaha Srotasa* and therefore *Chikitsa* explained as *Shodhana* and *Shamana Yoga*. Also *Vaigikakalina* and *Avagikakalina Chikitsa*. *Tamaka Shwasa* is *Yapya* disease require long term management even after *Shodhana* therapy. As *Shodhana* is indicated in less cases and *Vega* or attacks occurred in paroxysms, large number of patients comes in *Avega Avastha*. Therefore administration of *Shamana Yoga* is very important step in the management of *Tamaka Shwasa*. Ayurveda classics indicate ample of combination for *Shwasa Roga*. *Shwasahara Dashemani* is one of such combination used as *ShamanaYoga* for *Tamaka Shwasa*. This monograph explained the *Shwasahara* properties of the combination and individual drugs as well in the management of *Tamaka Shwasa*.

**Key words:** *Tamaka shwasa, Shamana chikitsa, Shwasahara dashemani.*

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#### INTRODUCTION

In broad sense diseases can be classified as communicable and non communicable one. Changing life style and environmental conditions has increases the burden of non-communicable diseases (NCD) nowadays. In resource poor settings like India, lack of early diagnosis and management facilities, poverty, overcrowding etc. are additional contributory factors for increase in non communicable diseases. Hypertension, diabetes, bronchial asthma are leading troublesome non communicable diseases. Bronchial asthma is the hyper reactive airway disease (HRAD) causes the inflammation and narrowing of airways leading to breathlessness. Such hypersensitivity reaction is because of many conditions like dust, pollen, cold, food allergens, clouds, air drafts etc. Incidence of bronchial asthma in children is goes on increasing. The reason for increase in childhood asthma is multifactorial like growing age, low immunity, genetic predisposition etc. Today human have complex system of dietetic customs and cultures. Such a complex food produces different hypersensitivity reactions like urticaria, atopic dermatitis. Also environmental factor like dampness, pollens, dust etc. accelerates the hypersensitivity in particular subjects. As hypersensitivity is immune mechanism, major histocompatibility complex (MHC) and genetic predisposition plays very vital role in etiology and pathogenesis of Bronchial asthma.

Apart from being the leading cause of hospitalization for children, it is one of the most important chronic conditions causing elementary school absenteeism (Shah *et al.*, 2000; Gürkan *et al.*, 2000). Childhood Bronchial Asthma has multifactor causation. Geographical location, environmental, racial as well as factors related to behaviors and life-styles are associated with this disease (Shah *et al.*, 2000; Gürkan *et al.*, 2000; WHO, 2005). The disease named *Tamaka Shwasa* explained in Ayurveda goes hand in hand with today's Bronchial asthma. Ayurveda considers *Shwasa Roga* as fatal disease and shows its presence at the time of death. Ayurveda classified the *ShwasaRoga* in to five type's viz. *Mahashwasa*, *Urdhwashwasa*, *Chhinnashwasa*, *Kshudrashwasa*, *Tamaka Shwasa*. *Kshudrashwasa* is self limiting condition, *Mahashwasa*, *Urdhwashwasa*, *Chhinnashwasa* are fatal while *TamakaShwasa* is *Yapya* or chronic manageable situation. Ayurveda explained the treatment of *Tamaka Shwasa* as *Shodhana* and *ShamanaChikitsa*. *Shodhana Chikitsa* is difficult in children, while *Tamaka Shwasa* is *Yapya* condition required multiple *Shodhana*. Therefore *Shamana Chikitsa* is more useful in children as compared with *Shodhana Chikitsa*. Acharya Charaka explained the combination of ten drugs known as *Shwasahara Dashemani* in the treatment of *ShwasaRoga*.

#### Shwasahara dashemani

“The combination of these ten herbs show Antiasthmatic, Antimicrobial, Anti-inflammatory, Analgesic, Mast Cell Stabilizing, Antihistaminic, Carminative, Antispasmodic, Expectorant, Antioxidant, Immunostimulant and

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**Table 1. Shwasahara dashemani**

Sr. No.	Sanskrit Name	Scientific Name	Part Used	Ratio
1	Shathi	<i>Hedychium spicatum</i> . Ham ex smith	Shushka Kanda	1 Part
2	Pushkaramoola	<i>Inula racemosa</i> . Hook.	Moola	1 Part
3	Amlavetasa	<i>Rheum emodi</i> . Wall	Patra	1 Part
4	Ela	<i>Elettaria cardamomum</i> Maton	Phala	1 Part
5	Hingu	<i>Ferula narthex</i> Boiss	Niryasa	1 Part
6	Agaru	<i>Acquilaria agallocha</i> Roxb.	Kashtha	1 Part
7	Surasa	<i>Ocimum sanctum</i> Linn.	Panchanga	1 Part
8	Tamalaki	<i>Phyllanthus niruri</i> Linn.	Panchanga	1 Part
9	Jivanti	<i>Leptadenia reticulata</i> W & R	Panchanga	1 Part
10	Chanda	<i>Angelica glauca</i> Edgw.	Moola	1 Part

**Table 2. Rasapanchaka**

Sr. No.	Sanskrit Name	Rasa	Veepaka	Virya	Guna	Doshghnata
1	Shathi	Tikta, Kashaya	Katu	Anushna	Laghu, Tikshna, Grahi	Vata-Kaphahara
2	Pushkaramoola	Katu, Tikta	Katu	Ushna	Laghu, Ruksha	Vata-Kaphahara
3	Amlavetasa	Atyamla	Amla	Ushna	Laghu, Ruksha, Bhedana, Dipana	Vata-Kaphahara, Pittakara
4	Ela	Katu, Tikta	Katu	Sheeta	Laghu, Ruksha, Dipana	Vata-Kaphahara
5	Hingu	Katu, Tikta	Katu	Ushna	Laghu, Tikshna, Ruksha	Vata-Kaphahara
6	Agaru	Katu, Tikta	Katu	Ushna	Laghu, Tikshna, Ruksha	Vata-Kaphahara, Pittakara
7	Surasa	Katu, Tikta	Katu	Ushna	Laghu, Tikshna, Ruksha	Vata-Kaphahara, Pittakara
8	Tamalaki	Tikta, Kashya	Madhura	Sheeta	Laghu, Ruksha, Sheeta	Kapha-Pittahara, Vatakara
9	Jivanti	Tikta, Madhura	Madhura	Sheeta	Snigdha, Laghu, Grahi, Rasayani	Tridosahara
10	Chanda (Choraka)	Katu, Tikta, Madhura	Katu	Sheeta	Laghu, Ruksha, Tikshna	Vata-Kaphahara

**Table 3. Shwasahara dashemani – Pharmacological properties**

Sr. No.	Sanskrit Name	Pharmacological properties
1	Shathi	Expectorant, Antiasthmatic, Antihistaminic, Anti-inflammatory, Antimicrobial, Mast cell stabilizer, Anti spasmodic
2	Pushkaramoola	Antihistaminic, Expectorant, Anti spasmodic, Mast cell stabilizer, Immuno-stimulant
3	Amlavetasa	Astringent, Cooling, Cardiotonic, Antimicrobial
4	Ela	Antiasthmatic, Antimicrobial, Anti-septic, Anti spasmodic, Carminative
5	Hingu	Expectorant, Anti spasmodic, Laxative, Carminative, Sedative, Antioxidant
6	Agaru	Antiasthmatic, Astringent, Carminative
7	Surasa	Anti-inflammatory, Antiviral, Anti-septic, Bacteriostatic, Carminative
8	Tamalaki	Antipyretic, Anti spasmodic, Antiviral, Diuretic, Bactericidal
9	Jivanti	Antimicrobial, Antihistaminic, Mast cell stabilizer
10	Chanda (Choraka)	Antiasthmatic, Antimicrobial, Anti-inflammatory

## 1. Shathi

**Picture 1. Shathi plant – *Hedychium spicatum*. Ham ex smith**

## 2. Pushkaramoola

**Picture 2. Pushkaramoola plant – *Inula racemosa*. Hook**

## Amlavetasa



Picture 3. Amlavetasa plant – *Garcinia pedunculata*

## Ela



Picture 4. Ela plant – *Elettaria cardamomum*. Maton

## Hingu



Picture 5. Hingu plant – *ferula narthex*. Boiss

## Aguru



Picture 6. Aguru plant - *Aquilaria agallocha* Roxb

**Surasa**

Picture 7. Surasa plant - *Ocimum sanctum* Linn.

**Tamalaki**

Picture 8. Tamalaki plant - *Phyllanthus niruri* Linn.

**Jeevanti**

Picture 9. Jeevanti plant - *Leptadenia reticulata* W & R

**Chanda**

Picture 10. Chanda - *Angelica glauca* Edgw.

*Immunomodulator properties. Therefore Shwasahara Dashemani with Bhavana of Kashaya prepared with the same ten drugs is useful in the treatment of Tamaka Shwasa (Bronchial asthma) of children.”*

## REFERENCES

- Ahmad, O.B., Lopez, A.D., Inoue, M. 2000. The decline in child mortality: a reappraisal, *Bull World Health Organ.*, 78:1175-91.
- Gakidou E, Oza S, Fuertes CV, Lee DK, Sousa A, Hogan MC, et al. 2007. *Improving child survival through environmental and nutritional interventions: the importance of targeting interventions toward the poor.* *JAMA*, 298:1876-87.
- Gürkan, F., Ece, A., Haspolat, K., Derman, O., Bosnak, M. 2000. *Predictors for multiple hospital admissions in children with Bronchial Asthma, Can Respir J.*, 7:163–6.
- Shah, J.R., Amdeka, Y.K., Mathur, R.S. 2000. *Nationwide variation in prevalence of bronchial asthma – (part of the international study of Bronchial Asthma and allergies in childhood (ISAAC).* *Indian J Med Sci.*, 54:213
- WHO *Bronchial Asthma: scope of the problem*, Available from: <http://www.who.int>. [Last cited on 2005 Aug 23].

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