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EFFECT OF VIRECHANA (PURGATION THERAPY) IN TAMAKA SHWASA (BRONCHIAL ASTHMA)

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ABSTRACT

Ayurveda emphases on three types of therapeutic management of the diseases viz; Samshodhana (purification), Samshamana (pacification) and Nidana Parivarjana (avoiding causative factors). Panchakarma is the therapeutic technology of Samsodhana. Panchakarma consists of five main purification procedures namely, Vamana (emesis), Virechana (purgation), Basti (administration of drug through rectum/ urethra/vagina), Raktamokashana (bloodletting) and Nasya (administration of drug through nasal route). Tamaka Shwasa is a disease described in Ayurvedic texts that shows close resemblance with bronchial asthma on the basis of clinical manifestations. Due to exhausting and prolonged conventional treatment majority of asthmatic patients prefer to take Ayurvedic treatment for better results, and maximum (especially those who take treatment at early stage) get significant relief. Managing Bronchial asthma on Ayurvedic line of treatment is totally different from that of conventional management. Clinical validation of a therapy further required scientific explanation and justification for its global acceptance. Thus in this paper an attempt is made to search the probable scientific reasons for the action of purgation therapy in Tamaka Shwasa (Bronchial asthma).

KEYWORDS: Virechan, Purification, Bronchial asthma, Samshodhana.

INTRO DUCTION

Bronchial asthma is a major disabling respiratory tract disease. Patient get distressed due to chocking of airways and become restless due to lack of proper oxygenation.[1-2] If this condition is not treated with time then definitely it becomes serious problem. Majority of patient suffering from this dreaded disease come in shelter of Ayurveda for proper management. In Ayurvedic system of medicine purification therapy get more importance than palliative therapy.[3] Though terminology of disease are different in modern and Ayurvedic system of medicine, but on the basis of clinical manifestations they can be correlated. Tamaka Shwasa is a disease, described in Ayurvedic texts shows similar clinical manifestation with bronchial asthma. So Ayurvedic physician use to treat asthmatic patients according to the same line of treatment of Tamaka Shwasa. According to Ayurvedic texts Tamaka Shwasa is originated from Annavisha[4] (food toxins) .So firstly it is necessary to remove this toxin from body before any kind of treatment. The procedure which is use for elimination of toxins from alimentary tract through rectum is known as Virechana (purgation).[5] Acharya charaka told regarding the use of Virechana for the treatment of Tamaka Shwasa.[6] This seems very amazing that a disease of respiratory tract gets cured by purgation therapy. From decades it is well proved that clinically patient gets benefit by Virechana. In this paper we try to explore the scientific explanation for the probable mode of action of Virechana (purgation therapy) in Tamaka Shwasa.

PROBABLE MODE OF ACTION OF SNEHANA AND SWEDANA BEFORE VIRECHANA

Oleation (Snehana) and Sudation (Swedana) prior to Virechana helps in dissolving the intracellular toxins and expel them into exterior of cell from where they are thrown outside the body**.** Scientific explanation for this whole procedure can be summarized as:

- Passive diffusion is the most important mechanism for majority of drug transport.
- Lipid soluble drugs diffuse by dissolving in the lipoidal matrix of the membrane, the rate of transport being proportional to lipid: water partition coefficient of the drug. A more lipid soluble drug attains higher concentration in the membrane and diffuses quickly.[7]
- As temperatures increases, (externally by sudation) both the cell membrane and the proteins can be affected. The fatty acid of the phospholipid bilayer can "melt" at high temperatures meaning that they become more fluid, and allow more movement means the permeability of the cell which increases.[7-8] Diaphoresis or sweating which is one of the Six Hygienic Purification Methods of Greek Medicine.

It cleanses the blood by releasing toxins via the sweat.

MECHANISM OF ACTION OF VIRECHANA DRAVYA

According to modern science:[8] Laxatives modify the fluid dynamics of mucosal cell and may cause fluid accumulation in gut lumen by one or following ways:

- Inhibiting Na + K+ ATPase of villous cells – impairing electrolyte and water absorption.
- Stimulating adenylyl cyclase in crypts cells- increasing water and electrolyte secretion.
- Enhancing PG synthesis in mucosa which increases secretion. Structural injury to the absorbing intestinal mucosal cells.

ACTION OF VIRECHANA[9-10]

- Decreased intra-abdominal pressure due to ascitis etc. thus helpful in dyspnea.
- Depress respiratory center and prevent hyperventilation
- Remove undigested food material and prevent stimulation of inflammatory mediators
- Decreased water and electrolyte absorption deplete extracellular fluid to lesser extent there by decreasing blood pressure.

DRUGS USED FOR VIRECHANA

1. Trivrit (Operculina Turpethum)

Operculina turpethum is having Anthraquinone glycoside also known as emodin. Unabsorbed in the small intestine, they are passed to the colon where bacteria liberates the active antiroll form , which either act locally or absorbed into circulation –excreted in bile to act on small intestine. The active principle is believed to work on myenteric plexus to increase peristalsis and decrease segmentation. Water extract of the plant causes mild to moderate relaxation of the isolated guinea-pig ileum and also counteract Acetylcholine.[11-12]

2. Amaltas (Cassia Fistula)

Cassia fistula's laxative actions come from a group of well documented compounds called anthraquinones that are found in all Cassia and Senna plants in varying degrees.

Its main property is that a mild laxative is more suitable for children and pregnant women.

It is also used as a purgative due to the wax aloin and a tonic and has been reported to treat many other intestinal disorders like healing ulcers etc.

The plant has a high therapeutic value and it exerts an antipyretic and analgesic effect. Besides, it has been found to exhibit anti inflammatory and hypoglycaemic activity.[13-15]

3. Haritaki (Terminalia Chebula)

It shows antibacterial and antifungal propertieswhich help in preventing bacterial overgrowth in gut and also It has potent action against E.Coli, H.Pylori.

It is having anti-allergic action which prevent mast cell degranulation and release of histamine.It has anti-oxidant effect because it is found to inhibit the lipid peroxidation and reduce the production of Anion superoxide. It act as prokinetic drug and found to be very effective in Diabetic Nephropathy.[16,17,19]

4. Erandi taila (Castor Oil)

It is one of oldest purgatives and mainly contains triglyceride of ricinoleic acid which is polar long chain fatty acid. It is hydrolysed in the ileum by lipase to ricinoleic acid and glycerol.

It is believed to irritate the mucosa and stimulate intestinal contractions. The primary action is supposed to be decreased intestinal absorption of water and electrolyte and enhanced secretion by a detergent like action on mucosa.[18-20]

5. Sanaya (Cassia Angustifolia)

Sanaya is having two type of sennoside A & B which is consider mainly as purgative elements. So due to presence of these elements it acts as a purgative.[21-22]

DISCUSSION

The sign and symptoms of tamak swash can be correlated with bronchial asthama.In this case patient presented the sneezing, running nose and difficulty during respiration. Acharya charka explains very well symptoms and treatment of tamak shwasa in shwas roga adhaya. Acharya charka says "tamketu virechanam" for the treatment of tamak shwasa. In this course of treatment,firstly dipan pachan(for digestion) was given with agnitundi vati and hingwastak churna.afterwards, abhyantra snehan by dashmuladi ghritam**,** and abhyang and sweadan by ghavya ghrita with sandhav lavana and nadi swedan respectively. Then finally virechan was given to the patient and advised to follow the sansarjana. In this text,acharya explains haritaki, aragwadh ,trivrit and eranda tailam for virechan. All darvya's are capable to do virechan and helpful for vata anulomana. The assessment of the patient before and after treatment was taken which showed improvements in the clinical symptoms.After completing the treatment patient got good relief.

CONCLUSION

- Virechana here signifies Vatanuloman which can be done either with Mutravirechaniya dravya as in case of Cardiac related Dyspnea or with Malavirachaniya dravya as in respiratory and metabolic related Dyspnea.
- Here Malavirechana refers to Kosthsudhi/ Malasudhi i.e. regular use of mridu anulomaka virechana.
- Malavirechana should be done with mild laxatives and drastic purgative should be avoided. Virechana after proper Snehana and Swedana should be done in healthy individuals having no cardiac involvement.

- In this study it is concluded that virechan is very effective in tamak shwasa.and patient got symptomatically relief.

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