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Review Article on Kaphaj Kasa and it's Management

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Abstract

Kasa is one of the most comman aliments afflicting the Pranavaha strotas. Kaphaja Kasa dominated by kapha & Vata dusti. Ayurveda texts explains the nidana, Samprati & Treatment of kaphaja kasa in detail in many contexts. Cigarette smoking, environmental pollution, unaccustomed occupational surrounding are major causes of chronic bronchitis. Kaphaja kasa can be best compare with chornic bronchitis. The mucoilds, expectorants and cough suppressants are failing to relive the chronic bronchitis so there is a major role of ayurveda in treatment of kaphaja kasa. In kaphaja kasa where kasa with prabhuta, Ghana, snigdha, bahala kapha is present corresponds either to acute bronchitis or chornic obstructive bronchitis but in this review article critical analysis done on kaphaja kasa(chronic bronchitis).

Keywords: Kaphaja kasa, chronic bronchitis, cough, Pranvaha strotas.

Introduction

In recent years, there has been an extra ordinary increase of incidence related to Respiratary system kaphaja kasa is comman upper respiratory tract aliment prevent nowadays & it is increcasingly annoying & irritating the individual in the routine acitivity. Kasa is one of pathological conditions explains in many contexts of ayurveda texts.Kasa may develop as an independent disease may be a lakshana associative to other disease, sometimes may develop as upadrava of a disease. Kasa is broadly calssified as Ardrakasa & Shushka kasa. Shamanoushadi ,Shodhana are diffrentn modes of treatments. In contemporay medicines system mucolytics expertorantas & antibiotis are the choice of treatments in chronic bronchitis as disease is chronic patient has to there medication for long duration due to disease modification from time to time has createl resistance to which medication so ayurveda have major responsibility to treat this conditions.

Disease Review

Kaphaja kasa consists of two words "kapha" & "Kasa". The word kapha is desired the root of Ke,meaning "shirasi kena Jalena va palathi" that which is productive in shiras & nourished by jala acharya charaka has difined kasa as "shushaka vas a kapho va api kasanath kasaha" means release of obstract vata resulting in the production at abnormal sound the process which may be productive or dry.

NIDANA

Samanya and Vishesha nidana are been explained for Kaphaja Kasa, where both play a major role in the manifestation of disease Kaphaja Kasa. Where both play a major role in the manifestation of disease Kaphaja kasa can be categorized into Khavaigunyotpadaka, Vataprakopaka, Kaphaprakopaka.

Khavaigunyotpadaka Nidana

The Nidanas which cause sroto dushti resulting in the susceptibility of srotas for the manifestation of disease. There are 2 causes for Sroto dushti mentioned in Charaka Samhita.

- Ahara and Vihara possessing the similar qualities to that of doshas and aggravates the doshas.
- Ahara and Vihara which vitiates the dhatus.

The etiological Factors like raja and Dhuma comes under second category and these etiological factors have direct contact with pranavaha strotas leading to the Khavaigunyata in pranavaha srotas ie., damages the epithelium of respiratory tract.

2. Vata prakopaka Nidana

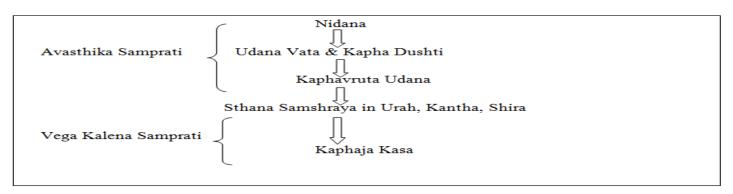
The etiological factors responsible for aggravation of vata are rukshanna bojana, ratri jagarana, vega udeerana, veg dharana,vyayama. For all types of kasa to occur,vata is the Samavayi Karana i.e. main dosha involved for the manifestation of disease. Vata prakopa occur either by Dhatu Kshaya or Avarana.Hence Nidanas mentioned by vagbhata for kasa are either of the two above. Aggravated vata moves all over the body, lodges in pranavaha strotas which has been affected by the Khavaigunya utpadaka nidana like Dhuma ,Raja.

3. Kapha Prakopaka Nidana

The etiological factors responsible for kapha prakopa are guru, snigdha,utkedi,vijjala ahara,diwaswapna. These Nidhana aggravate Kapha in uras causing obstruction to downward movement of Vata in pranavasha strotas. This leads to the pratiloma gati of vata which manifests Kasa with Kapha Shteevana.

Samprati

Samprati of Kaphaja Kasa can be divided as Avasthika samprathi and veg kalen samprathi. The causes have tendency to vitiate both vata and kapha.Udana vatadusti and kaphadusti is initial stage of samprati. Function of udana vata will be obstructed by kaphaand these dosha will take stanasamshraya in Uraha, Kantha and Shiras. At Vegakala Vyajaka hetu like Raja, Dhuma,Shithambu will precipitate the Samprapti leading to Aadraj Kaphaja Kasa Vega, where Kasa is associated with Nishtivana.



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Table no:1: Showing the Samprapti ghataka's of Kaphaja Kasa

| Dosha | Kapha, Vata | | |
|----------------|-----------------------------|--|--|
| Dushya | Rasa | | |
| Agni | Jatharagni mandya | | |
| Ama | Jatharagni mandya janya ama | | |
| Strotas | Pranavaha & Rasavaha | | |
| Sroto dusthi | Sanga | | |
| Udbhavasthana | Amashya | | |
| Sancharasthana | Rasayani(Srotas) | | |
| Adhishtana | Urah pradesha | | |
| Vyaktasthana | Kantha, Mukha | | |
| Rogamarga | Abhyantara | | |

Table no:2:Showing Visisthta lakshanas of Kaphaja Kasa:

| 1. | Kasa (Cough) |
|-----|---|
| 2. | Bahala, Snigda, Sweta Nishteevana (Expectoration) |
| 3. | Aruchi (Tastelessness) |
| 4. | Gourava (Heaviness) |
| 5. | Sira soola(Headache) |
| 6. | Mandagni (Loss of apetite) |
| 7. | Peenasa (Running nose) |
| 8. | Utklesa (Excitation) |
| 9. | Kantha Kandu (Itching sensation in throat) |
| 10. | Swarabhedha (Hoarseness of voice) |

Table no: 3: Showing interrelation between lakshana,Dosha ,Dushya,Srotas & Sthana in Kaphaja kasa

| Lakshanas | Dosha | Dushya | Srotas | Sthana |
|--------------------------------------|-------|--------|--------|--------|
| Kasa | K,V | R | P,Ra | Mukha |
| Bahala, Snigda,Sweta Shteevana | K | R | Р | Uras |

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| Aruchi | K | R | A,Ra | Mukha | |
|--------------|---|---|------|-----------|--|
| Gourava | K | R | R | Sarvataha | |
| Sira soola | V | R | А | Siras | |
| Swarabhedha | V | R | Ra,A | Mukha | |
| Peenasa | K | R | Р | Nasa | |
| Kanthe kandu | K | R | Р | Kantha | |
| Utklesa | K | R | Α | Amashaya | |
| Mandagni | K | R | Ra | Amashaya | |

NOTE: V= Vata ; K= Kapha ; R=Rasa ; P= Pranavaha ; A= Annavaha ; Ra= Rasavaha

Chikitsa

In treatment of kaphaja kasa there is a need of different mode of approaches at different stages. Most of time multi treatment protocol has to be adopted

Nidana Parivarjana

It is most important aspect of treatment. Person with Kaphaja Kasa has to avoid triggering factors like smoking, dust inhalation etc. some time person has to make some modification in his occupations to avoid these Nidana like mask wearing; avoiding Air Conditioned environment etc.patient should be more conscious during cold/winter seasons and during travel to cold atmosphere.

Samshamana

There are many single drugs, Kastoushadhi and Rashushadis are indicated for Kaphaja Kasa. These have Katu, Ushna, Tikshna, Sukshma, chedana, kaphanissaraka, kasagna guna. Trikatu,Pippali, Kantakari Avaheha, Agastya Haritaki Avaleha are beneficial in Kaphaja Kasa. Pippali and Agasthya Haritaki Yoga can be used as Rasayana in kaphaja kasa.

Shodhana

The first line of Shodhana in Kaphaja Kasa is Vamana. Vamana will expel the Dushita Kapha and relive the Aavarana to Vata giving more and effective result in Kaphaja Kasa. The Virechana can be planned in Vaata, Pittanubandha. Here Vata should be controlled to relive Vedana in Urah and Parshva. Nasya Karma is helpful because the Sthnasamshraya is in Urdhvajatrugata. Virechana and Nasya have minimal role in vegkalenand Bahudoshaja Kaphaja kasa. In Avasthika Kala these can be adopted as per the Yukthi of Physician.

If Bahudosha and Amashyagatha Kaphaja Lakshana are noticed Sadhyavamana can be adopted rather than classical Vamana.

Kavalagraha, Dhumapana are also helful in condition of Kaphaja Kasa. After the Vamana Tikshana Dhumapana will helpful in Kaphaja Kasa.

Conclusion

- > Though cough is considered as just a symptom in modern science but it is considered as diasese in ayurveda.
- Types of the kasa can be understood on the basis of nature of cough and Sputum production. Kaphaja kasa can be correlated to Chronic Bronchitis based on Nidana, samprati and lakshana.

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- First and Foremost Nidana told by our acharyas for the manifestation of kasa is raja and dhuma which initiate the pathological process in pranavaha samprati and even Chronic bronchitis manifests in those who are Chronic smokers and because of continuous exposure to dust at work.
- Nidana Parivarjana, different Shamnoushdhi and different modes of Shodhana will help in treating the Kaphaja kasa. Probably these Shamana drugs act as cough suppressant, expectorants and mucolytic.
- > In future scope there is a need to prove the action of these shamana drugs clinically.

References

[1]. Prof. Dr.Y.G. Joshi, Charak samitha of maharishi Agnivesha with charakdatta commentary, 2nd edition, Pune, Vaidya mitra Prakashan (Acadamy), -2005. Page no- 425.

[2]. Ambikadatta, Sushrutra Samhita of Acharya Sushrut ,Dalhancharaya commentary,19th Edition, Varanasi, Chaukhamba Sanskrit Santhan-2009, Page no-465.

[3]. Dr.Ganesh Krushna Gorade, Sartha Vagbhat of maharshi Vagbhat, Edition-2011 Varanasi. Chaukhamba surbharati(Prakashan)-2011.

[4]. http://en.wikipedia.org/wiki/Chronic_bronchitis.

[5]. Sharma S.K, Chronic obstructive Pulmonary Disease, APItext book of medicine, Edited by Siddharth N.Shah, The Association of physicians of india, Mubai, 8 Edition, 1 Volume2008, P. No. 361-367

[6]. Madhavakara, Kasa chikitsa, Madhava Nidana, Madhukosa commentary, Published by Chaukambha Prakashan Varanasi, Part 1,2010 P.No. 303-314.

[7]. Vagbhata, Sutrasthana Sthana, Ashtanga Hrdaya, Sarvangasundari of Arunadutta and Ayurveda Rasayana commentary of Hemadri commentary , 12th chapter ,Surbharti Prakashan, Varanasi,sixth edition, P.NO-469-472.

[8]. Harrison's Principle's of Internal Medicine-vol.1, 16th McGraw Publication,242th chap. Page No-1547.

[9]. Prof. Dr.Y.G. Joshi, Kayachikitsa, Pune Sahitya Vitaran-2015, chapter 34, page No-315-324.

[10]. Harsh Mohan, Textbook of pathology, jaypee Brothers Medical Publishers,15th ed,2008:485.

[11]. Dr. Krushachandra Chunrkar & Dr. Gangassahay Pandeya,Bhavprakash nighantu of Bhavamishra, 9th Edition ,Varanasi, Chaukhamba Bharati Acadamy 1993.Page No-12-17,216-219.