

**AYURVEDIC APPROACH FOR KAPHAJ KAS –CaseStudy**

Dr.Satyam Navneet kadbane

(PostGraduatescholar,Departmentofkaumarbhritya,AnnasahebDangeAyurveda Medical College , Ashta , Tal. Walwa , Dist. Sangli, Maharashtra.)

Dr.Deepika Patil

(Reader,Departmentofkaumarbhritya,AnnasahebDangeAyurvedaMedical College , Ashta , Tal. Walwa , Dist. Sangli, Maharashtra.)

**Corresponding Author:** Dr.Satyam Navneet kadbane

**ABSTRACT** –Cough is the second most common symptom in the primary care practice in India. According to Ayurveda, Kasa(cough) is not only a symptom (paratantravyadhi) but also a separate disease entity which is having its own pathogenesis (swatantravyadhi).<sup>(1)</sup>According to Ayurveda, Kasa is disease of pranvahaShrotas. Kasa occurs due to dushti of prana, udana& Apana vayu. There are mainly five types of Kasa Out of these five types, Kaphaj Kasa is commonly seen in Pediatric age group because there is kapha dosha pradhanya in balyavastha<sup>(2)</sup>. 12 yr old school going child presenting with complaint of kas(cough) and kapha stivan with Swarabhed, Shiradhool, Aruchi diagnosed as kaphaj kas on examination child having crepitation on right lower lob Patient was treated with pathy dichurnawith approach of ayurveda. kaphaj kas disturb the child and may hamper the growth and development. Appreciable results were observed in the form of reduction in of kas(cough) and kapha stivan with Swarabhed, Shiradhool, Aruchi and on examination crepitation were significantly reduced According to Ayurveda, Kasa is independent disease & Hridaya and Maha strotas are mulasthanas of PranvahaStrotas. Kasa have it's own pathogenesis signs, symptoms, types, and treatment. While the modern science explain

Kasa as symptom in various diseases. If Kasa vyadhi is not cured it can give rise to various diseases like Shwasa, Shosh, Rajyakshma, Urakshata & Raktapitta etc<sup>(3)</sup>. So, to avoid above complications we must have to get relief from Kasa vyadhi. Ayurved Samhita having miraculous therapeutic effect, but in case of Kasa vyadhi is yet to be explored. So there is need to bring out a permanent remedy which is cheap, effective, safe & easily palatable in management of pediatric cough. So, I selected Pathyadi Churna from Sushruta Samhita.

**KEYWORDS** – kaphajkas, Pranavahasrotas, Ayurveda, cough, Balyavastha

**INTRODUCTION** – Ayurveda is most ancient health science in the world having history of 5000 years. Aim of Ayurveda is prevention along with cure of diseases. Respiratory disease will afflict every human being at some time in their lives. Whether it is a cough associated with common cold or respiratory distress with allergies or asthma. Respiratory challenges are the constant source of irritation and misery for the patient. Here we are going to discuss about *pranavahashrotasa* from *Ayurveda* classics.

As per the Ayurveda, *Kasa* occurs when *Apana vata* is obstructed resulting in an increase in upward motion. Vitiation of *Udanavayu* propels the air upwards and out of the body<sup>(4)</sup>. Now a days we have to face pollution, allergens, smoke from vehicles, weather changes which are responsible for respiratory system disturbances and children are more susceptible to respiratory problems than adults<sup>(5)</sup>. In modern science antibiotics, antitussive & expectorant is the major line of treatment but they have side effects like tremors, muscle cramp, nausea & drowsiness. Non-judicious use of antibiotics & corticosteroid leads to suppression of immunity & birth of multidrug resistant traits of pathogens<sup>(6)</sup>.

### CASE STUDY

- **Chief complaints:** -kas 4-5 veg per day since 1 day, kapha stivan (yellow sputum)
- **Associated complaints:** -shirashool, Aruchi, swarabhed
- **History of present illness:** -patient came with above mentioned complaints in dhanvantari hospital under balrog department to take further treatment
- **Past History:** -no any
- **Social History:** -No any
- **Medicinal History:** -No any
-

- **Family History:-**No any
- **Appreciate:-**decreased

**General Examination:-**

- **Pulse:-**70/min
- **Stool:-**3-4 time per day
- **Urine :-** 5-7 time per day
- **RR:-**18/min
- **Bp-**100/60mm of Hg
- **Temperature:-**Afebrile

**Systemic Examination:-**

**Respiratory System:-**Right side crept lower zone

**Cardiovascular system:-**S1S2 Normal

**Central nervous system:-**Concious and well oriented

**Invetsigation:-**

Before treatment

After treatment

Hb- 11.4 gm%  
Hb:-11.5 gm

WBC:-7800/cumm

WBC:-7200/cumm

Platelet count:-300000/cumm

Platelet count:-310000/cumm

CRP:-12

CRP:-4.2

**Treatment:-**Pathyadichurna 3.5 gm BD along with guda

## Subjective Criteria :-

Grading	0	1	2	3
Kas	No complaint	Intermitte cough	Constant cough	Worsene cough
<i>kapha stivan.(sputum)</i>	No consistency of sputum	After lot of coughing little sputum	Moderately thick white in color	Thick large amount yellow in color
Swarbheda	None	mild	moderate	Severe
Aruchi	Normal desire and normal taste of food	Desire to take food but dislike taste	No desire no taste	Nausea and hates food
Shirshul	No	Occasionall y	On and off	Continues all day

## Subjective Criteria :-

Grading	0	1	2	3
Kas	No complaint	Intermitte cough	Constant cough	Worsene cough
<i>kapha stivan.(sputum)</i>	After lot of coughing little sputum	After lot of coughing little sputum	Moderately thick white in color	Thick large amount yellow in color
Swarbheda	None	mild	moderate	Severe
Aruchi	Normal desire and normal taste of food	Desire to take food but dislike taste	No desire no taste	Nausea and hates food
Shirshul	No	Occasionall y	On and off	Continues all day

**Obesrvation**

Sr. no	Symptoms	Day 3 <sup>rd</sup>	Day 5 <sup>th</sup>	day7 <sup>th</sup>
1.	Kasa	Constant cough	Intermitte cough	No complaint
2.	Kapha stivan (Sputum)	Moderately thick white in color	After lot of coughing little sputum	After lot of coughing little sputum
3.	Swarbhed	mild	Normal	Normal
4.	Aruchi	No desire no taste	Desire to take food but dislike taste	Normal desire and normal taste of food
5.	Shirshool	Occasionall y	No	No

**DISCUSSION**

Katu rasa has kaphahara karma and tikta rasa has rukshaguna by which it provides kantavishodhana karma and has special indications in aruchi and utkleshaBoth katu and tikta rasa helps in kledasoshanaUshnavirya and katuvipaka helps to pacify the increased kapha in the srotas and thus helps in the sampraptivighatana of the disease.<sup>(7)</sup> The drug is also having deepana, pachana, amadoshanasaka, kasahara, kanthya, swasahara, jvaraghna, krimighna, sothahara and vedanasthapanapropert<sup>(8)</sup>Pathyadichurna is taken from Sushrutsamhita . pathyidichurna is made up of fiveingredients. These drugs have Katu ,tikta , Kashay in rasa and Ushna in virya , So these drugs have kasaghna and kaphaghna properties<sup>(9)</sup> . Due to Kaphaghna and kasaghnproperties , Kaph gel liquefied and expels out . Antitussive and expectorant action helps in that . These drugs has Laghu guna which would help to prevent allergic atmosphere to throat by its quick action<sup>(10)</sup>

**CONCLUSION:-**

Kasa is the very common disease attending general balrog departments. Ayurveda considers Kasa as a symptom of many diseases (paratantravyadhi) and also as a separate disease entity (swatantravyadhi). Many formulations are mentioned in classics for kasa chikitsa. Selecting appropriate medicine according to the avastha of the patient depends upon the yukti of the physician. Managing the condition with appropriate and minimum medication is very essential. In kaphajakasa, Acharya mention to use the drugs having katu, ruksha, ushnaguna and kaphaghna in action. Pathyadichurna has a specific action in pranavahasrotus and in urahpradesha. So the drug itself can be given in choorna form with guda as a suitable anupana.

**REFERENCES**

1. Chung KF, Pavord. Prevalence, pathogenesis, and causes of chronic cough. Lancet.2008; 371:1364-1374. [pubmed][google scholar].
2. Agnivesa. Carakasamhita.( Sharma R K, Bhagwandash.trance). Varanasi:Chowkhambha Sanskrit series office; reprint 2014;vol 4, chapter 18, p.156-157.
3. Vagbhata. AshtangahridayaNidanasthana. (Srikanthamurthy KR, trance English). Varanasi:Chowkhambakrishnadasacademy;reprint 2012;Vol 2;p.33
4. Joshi ,Vd.Y.G.*charak samhita (uttarardha)*. 6th .sadashiv peth pune : vaidyamitra prakashan, 2014. pg no.541,544.
5. Joshi ,Vd.Y.G. *charak samhita(uttarardha)*. 6th . sadashiv peth pune : vaidyamitra prakashan, 2014. page no544.
6. Tripathi K.D.*essintial of medical pharmacology*. 7th. new delhi : jaypee brother medical publishers Ltd, 2013. page no 236.
7. www.ijam.co.in/index.php/ijam/article/view/274
8. Sastry JLN. Dravyagunavijnana. Reprint. Varanasi: Chowkhambaorientalia; 2010.vol 2.p.369
9. Deepshikha, Singh B.M, Upadhyay P.S. Evaluation of Vyaghriharitaki in management of kasashwasa of children: World journal of pharmaceutical research.2015:4(5);p.1395- 1426. Available from www.wjpr.net.
10. Accessed on 20 th April 2021. 17. Agnivesa. Carakasamhita.( Sharma R K, 10. Bhagwandash.trance). Varanasi:Chowkhambha Sanskrit series office; reprint 2014;vol 1, chapter 4/16, p.97