

A CASE STUDY ON MANAGING REACTIVE AIRWAY DISEASE WITH PIPPALI VARDHAMANA RASAYANA

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ABSTRACT

Reactive Airway Disease (RAD) is general term for conditions involving wheezing and allergic reactions. Till date only Bronchodilators and Corticosteroids are found to be effective in treating symptomatically. Sometimes it requires continuous oxygen inhalation therapy, even though, it is more inconvenient and not the exact treatment.

According to Ayurveda, this Reactive Airway Disease can be related to 'Pranavahasrotodrushti'. In this Pranavahasrotodrushti, the commonest symptom is breathlessness or difficulty to breathe and advised different treatment modalities including Rasayana prayoga.

The Vardhamana Pippali Rasayana is effective Rasayana therapy which is mentioned in the treatment of Pranavahasrotodrushti vikaras. This therapy provided relief in breathlessness and increased SPO₂ (Saturation of Peripheral Oxygen) for longer duration without oxygen inhalation therapy.

Keywords: Reactive Airway Disease (RAD), Vardhamana Pippali Rasayana, Pranavahasrotodrushti, SPO₂

INTRODUCTION

Reactive Airway Disease can be used to describe as history of coughing, wheezing or shortness of breath, triggered by infection, allergy etc.¹ COPD (Chronic Obstructive Pulmonary Diseases) is the name of the group of chronic and slowly progressively respiratory disorders characterized by reduced maximal expiratory flow during forced exhalation. This excludes other causes of chronic airflow obstruction such as Cystic Fibrosis, Bronchiolitis obliterans and Bronchiectasis. Thus Reactive Airway Disease is different from Chronic Obstructive Pulmonary Diseases even though differentiation is challenging. But, generally Reactive Airway Disease is caused by different pathologies of the lungs like Fibrosis and other pathologies like Corpulmonale and RAD can be associated with COPD, Asthma.

Reactive Airway Disease produces symptoms like difficulty to breathe, wheezing, allergic reactions and severe generalized weakness and requires continuous oxygen inhalation therapy, Bronchodilators and corticosteroids. The increased air pollution has resulted in the increased respiratory disorders including Reactive Airway Disease. There is no any rejuvenating (Rasayana) therapy to overcome the disease along with symptomatic treatment.

In Ayurveda, the breathlessness is said to be one of the prime feature of pranavahasrotas². In view of restoration of the prana and rejuvenation of the Pranavahasrotas, the Vardhamana Pippali Rasayana has been recommended. Even though Tridosha are responsible for shwasa (breathlessness), it is vata which gets obstructed by Kapha & Pitta and produces shwasa roga. This is the general understanding of the disease shwasa. Pippali having Katu Madhura rasa, Madhura vipaka, Ushna veerya with vatakapha shamaka guna is advocated in different disorders like shwasa, kasa etc. Hence it is one among the vyadhihara Rasayana and can be administered in shwasa roga. Vardhamana Pippali prayoga has been advocated in ascending & descending order throughout its course along with cow's milk for about 19 days & 10th day being the highest dose.³

A single case study of Reactive Airway Disease with cor pulmonale is reported here.

CASE REPORT

A 50 year old female patient visited Rama Ayurvedic medical college and Hospital on 13.04.2024 with complaints of severe breathlessness since morning and swelling of both lower limbs and was diagnosed for acute exacerbation of Reactive Airway Disease and acute chronic respiratory on home oxygen due to cor pulmonale.

It was treated as sputum negative PTB since July 2023 for 9 months at Primary Health Centre, Kanpur and is a known case of hypertension since 10 years. She was on home oxygen for chronic respiratory failure since 8 months. Patient was admitted on 13.04.2024 and discharged on 17.04.2024 after treating symptomatically with the help of Bronchodilators, corticosteroids, oxygen inhalation therapy. But patient improved only in terms of increased SPO₂ of 97% with continuous Oxygen inhalation and was not satisfied with SPO₂ of room air (drastically reducing to 70%), generalized weakness and general enthusiasm to carry out daily personal routines like bathing etc. Considering this as Pranavahasrotodrushti, started Vardhamana Pippali Rasayana for a short term course, easily available, economical and best suited for shwasa was administered as per the reference in Susrutha Samhitha Chikithsa Sthana.

RESULTS

After 19 days of Rasayana therapy patient was assessed with subjective parameters it was found that satisfactorily improved in general condition, duration of breathing without oxygen supply was improved and SPO2 of 85% in room air for about four hours.

DISCUSSION

Lakshanas which are explained in Pranavahasrotodrushti are closely associated with the features of Reactive Airway Disease. This can be considered as the nearest clinical entity for Reactive Airway Disease. Shwasa Krichrata is due to Pranavaha Sroto Sankocha, Due to Vatacara Nidanas Vata Prakopa takes place in Pranavaha Srotas and being obstructed by Kapha. Thus the vitiated Vayu causes the Pranavaha Sroto Sankocha leading to Shwasa Krichrata, Pippali by its Madhura Vipaka, Sheeta Veerya and Snigdha guna acts mainly on aggravated Vata. Pippali also has Yogavahi property therefore it helps in dilatation of Srotas. Pippali Vardhamana Rasayana has showed maximum improvement in all the subjective parameters undertaken in assessment criteria.

CONCLUSION

Samprapti is having major role in producing diseases but understanding the Samprapti is very difficult, as various exogenous and endogenous factors are responsible for producing Pranavaha Sroto vikara. Shwasa Krichrata is due to Pranavaha Sroto Sankocha. Due to Vatacara Nidanas Vata Prakopa takes place in Pranavaha Srotas and being obstructed by Kapha. Thus the vitiated Vayu causes the Pranavaha Sroto Sankocha leading to Shwasa Krichrata. Pippali Vardhamana Rasayana has showed maximum improvement in all the subjective parameters undertaken in assessment criteria.

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