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Case study on *Vata Kaphoulavana Pitta Hina Sannipataj Jwara* w.s.r. to Covid-19 Symptomatology

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ABSTRACT

Covid-19 is a big Pandemic disease nowadays which affected more and more people in second wave. People got affected from cities to villages. In India, the number of people affected daily in the month of April-May 2021 were above 4 lakhs above and death were also around 4 thousand. In this crisis, there was a shortage in medical facilities everywhere and people were getting troubled, then apart from our hospital duty, we also did medical consultation and treat by the *Ayurvedic* drugs to help the people and gave medical benefits to suffered people. *Ayurvedic* treatment result was very impressive in few days and significantly maintained the inflammatory changes and covid like symptoms. Keeping in the mind the infection of new variant of COVID-19. The purpose of this article is to highlight the quick result of *Ayurveda* treatment.

Key words: Covid-19, Pandemic disease, *Vata Kaphoulavana Pitta Hina Sannipataj Jwara*, Case Study

INTRODUCTION

As from Wuhan China city since 2019 COVID-19 has leads to remarkable mortality and affected the whole society and challenged the complete healthcare system. India is one of those countries which get affected significantly. First of all, it was designated as 2019-nCoV and later as COVID-19 by WHO. After first wave it was expected that it will gets eradicated slowly but the second wave of COVID-19 started hitting the Indian society harshly as it was previously observed that a smaller number of peoples were getting serious

condition or specific group was there which required ventilator support, faced multiple organ failure but in second wave in India the initial minor symptoms after administering to hospital within 2 to 3 days lead to acute respiratory distress syndrome.

As in second wave approximately all symptoms were same as first wave, only diarrhea or some gastric problems were added but the sudden strong cytokine storm has shocked the whole scientists and doctor's fraternity as it leads to lot of mortality and damaged the lungs up to 50 to 100 percent. Till now no specific treatment after lot of researches in field of medical science has been found, but the efforts by the whole healthcare system or doctors, nurses, ward boys etc. has tried lot to overcome through it.

According to *Ayurveda* perspective it has been found as *Vata-Kaphaj Sannipataj Jwara*, with mild *Pitta* involvement. But before directly going to use the drug against *Vata-Kaphaj Sannipataj Jwara*, we should go for proper diagnosis through *Roga Rogi Pariksha*^[1] which involves patients *Dosha, Dushya, Agni, Prakriti, Bala Kala* and *Roga Avastha* i.e.. *Dosha, Dushya* which are involved and the level of involvement has been there.^[2] So, we should diagnose the *Shatkriyakala*

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Avastha properly and after that we can manage the case very easily and treat it as mild or moderate or whether the case going serious. One lacuna which has been found in mind of various researchers, doctors that they are still focusing on virus and its strains but the *Ayurvedic* Physician and research scholars should focus on *Roga* along with host or *Rogi*. Because in *Ayurved* the virus will come under *Agantuja Nidan* and then *Dosha Dushya* gets vitiated and leads to different kind of stages of disease according to the patients *Prakriti* (body constituent), *Vyadhikshamtva Bala* (Immunity power), *Desha* (country) and *Kala* (season).

CASE REPORTS

Case 1

A 16 years old female approached through telephonic consultation during severe covid-19 pandemic infection due lack of lack of proper medical consultation in small city. According to the patient she was suffering from Fever with Chills and body ache, productive cough with chest pain for 8 days, as fever was relapsing inspite of taking modern medicine, so it gets subside only due to PCM, but no significant relief was seen, she has also complained of Vomiting after food ingestion and vertigo for 4 days was reported. On the observation the Body temperature was found =101°F, pulse rate =78/min, spo2 = 98% on room air. Her laboratory investigations revealed CRP= 11.8 mg/L, HB= 12.1 gm/dl, RBC= 3.48 10⁶/ul, TLC= 5.43 10³/ul, N= 54%, L= 34%, M=10, E=02, B=00, PLT= 69 10³ / ul and ESR= 30 mm/hour.

Case 2

A 38 years old female, k/c/o of Asthma for 2 years and migraine since 6yrs, has complained of Fever, cough, chest pain, headache, body ache for 7 days and significant breathlessness for 3 days. On the observation the Body temperature was found =101°F, pulse rate =80/min, spo2 = 97% on room air. Her laboratory investigations revealed CRP= 32.2 mg/L, HB= 12.1 gm/dl, RBC= 4.09 10⁶/ul, TLC= 4.03 10³/ul, N= 63%, L= 32%, M=04, E=01, B=00, PLT= 99 10³ / ul and ESR= 62 mm/hour.

On basis of etiology and presenting complaints of patient the *Doshas* are predominant *Vata* and *Pitta*

cause *Jwara Shaitya* (Fever with Chills), *Vata* and *Kapha* cause *Ruja* (Body ache and chest pain), *Shwas* (Difficulty in breathing), *Kaasa* (cough), *Tandra* (Laziness), *Chhardi* (Vomitting) and *Bhrma* (Vertigo).^[3] *Vata Pitta* and *Kapha Dosha* are also predominance in *Shotha* (inflammatory) pathogenesis in our body.^[4] These can be responsible for increasing the level of CRP and ESR. The aim was to handle the symptoms of COVID-19 which were not diagnosed positive RTPCR or RAT but CRP, ESR, CBC and symptoms of the patients were found to be the typical of COVID-19 and it was aim to stop the symptoms to spread their level from mild or moderate to severe and considering of etiopathogenesis and predominance of *Doshas* treatment planned and focus on *Vata-Kapha Shamana chikitsa* for 10 days and all modern medicines were stopped after starting *Ayurved* medicines and table below shows the management and followed Investigations.

Table 1: Medicine given for treatment for 10 days of Case 1

SN	Treatment	Dosage and Anupana
1.	Tab <i>Mahasudarshan Ghanwati</i>	2 tab Twice a day with low luke warm water
2.	Tab <i>Fifatrol</i>	2 tab Twice a day with normal water
3.	Tab <i>Platenza</i>	2 tab Twice a day with normal water
4.	Tab <i>Abhralauh</i>	2 tab Twice a day with <i>Madhu</i>
5.	<i>Sitopladi Choorna</i> 2gm + <i>Mulethi Choorn</i> 2gm+ <i>Takan Bhasma</i> 250 mg + <i>Godanthe Bhasm</i> 250 mg	Combination of drugs divided in equal parts and took twice a day with <i>Madhu</i>
6.	<i>Dashmoolarishta</i>	15ml Twice a day mix with equal amount of water

Table 2: Laboratory Investigations before and after treatment of Case 1

Test	Component	Before Treatment	After Treatment
CBC	TLC	5.43 10 ³ /ul	4.38 10 ³ /ul

	HB	12.1 gm/dl	11.9 gm/dl
	RBC	3.48 10 ⁶ /ul	3.47 10 ⁶ /ul
	Neutrophils	54%	46%
	Lymphocytes	34%	45%
	Monocytes	10	06
	Eosinophils	02	03
	Basophils	00	00
	Platelets	69 10 ³ / ul	108 10 ³ / ul
	ESR	30 mm/hour	27 mm/hour
Serology	CRP	11.8 mg/L	0.7 mg/L

Table 3: Medicine given for treatment for 10 days of Case 2

SN	Treatment	Dosage and Anupana
1.	Tab Mahasudarshan Ghanwati	2 tab Twice a day with low luke warm water
2.	Tab Fifatrol	2 tab Twice a day with normal water
3.	Tab Platenza	2 tab Twice a day with normal water
4.	Tab Abhralauh	2 tab Twice a day with Madhu
5.	Tab Shwaskuthar Rasa	250 mg Twice a day with luke warm water
6.	Sitopladi Choorna 2gm + Mulethi Choorn 2gm+ Tankan Bhasm 250 mg + Godanthi Bhasm 250 mg + Abhrahk Bhasm 250 mg	Combination of drugs divided in equal parts and took twice a day with Madhu
7.	Dashmoolarisht	15ml Twice a day mix with equal amount of water
8.	Kankasava	10 ml Twice a day mix with equal amount of water

Table 4: Laboratory Investigations before and after treatment of Case 2

Test	Component	Investigation Value	
		Before Treatment	After Treatment
CBC	TLC	4.03 10 ³ /ul	5.77 10 ³ /ul
	HB	12.0 gm/dl	12.0 gm/dl

	RBC	4.09 10 ⁶ /ul	4.21 10 ⁶ /ul
	Neutrophils	63%	58%
	Lymphocytes	34%	34%
	Monocytes	02	05
	Eosinophils	01	03
	Basophils	00	00
	Platelets	99 10 ³ / ul	155 10 ³ / ul
	ESR	62 mm/hour	66 mm/hour
Serology	CRP	32.2 mg/L	2.5 mg/L

RESULT

Table no. 2 shows Very impressive result after 3rd day, as report were done again on 3rd day and Platelet level rises to 1 lakh 6 thousand CRP significantly comes to 0.7mg/l and ESR to 27 mm in 1st hour. Patient was relieved from fever, vomiting, body ache and chest pain within 3 days, little cough was there, cough was reduced too significantly and treatment continued for 10 day. Old medication was not needed patient gets relieving in every symptom with no casualty condition.

Case no. 2 Patient gets complete relief from fever and body ache in 2 days, cough in 3days and chest pain and breathlessness were eradicated in 8 days completely. New 7th day report shows very impressive changes in Platelets, 1 lakh 55 thousand and reduced CRP 2.5mg/ml Infection was under control (Table no. 2), no any symptoms were reported by patient. Medicines continued to 10 days these medicines were only to eradicate her asthma problem and migraine and within 7 days she completely feels normal.

DISCUSSION

As there is no COVID-19 or coronavirus word has been mentioned in our *Samhitas*. but we know the *Janpadodhwans* as told by our *Acharya*.^[5] As we recognized the COVID-19 as *Vata-Kapha Pradhan Mand* or *Heen Pitta Sannipataj Jwara* or we can call it *Shwasanak Sannipataj Jwara*. As 13 types of *Sannipataj Jwara* mentioned by *Acharya Charak*,^[6] more types can also show different conditions of COVID19. So, the *Jwara* mentioned as *Sama Sannipataj Jwara* describes

all symptoms which happens during COVID-19 infection from mild to severe.^[7]

In all cases the *Roga Rogi Pariksha* were given the first priority i.e., identification of *Dosha* and *Dushya* involved, *Agni, Prakriti, Bala* of patient. It was aim to stop or limit the propagating virus or infection inside the body which was causing different kind of symptoms, that it eradicated in its mild stage or moderate and don't achieve its severity.

In Case 1, here the patient was diagnosed in *Vata-Kaphaj Pradhan Jwara*. She has already taken modern medicine but no significant relief was there in fever, cough and body ache. The digestion was not proper, *Mandagni* along with *Aruchi* was there, platelet count was very less, So first of all *Masudarshan Ghanwati* which clears the *Ama Dosha* and subsided frequency of *Jwara*.^[8] Tab Fifatrol was administered as along with Poly herbal drugs which act as antibiotic, anti-inflammatory in case of bacterial and viral upper respiratory infections and *Jwarnashaka*,^[9] it also contains *Sanjeevani Vati* which acts effectively on *Ama, Jeerna Jwara* and even *Sannipataj Jwara, Tribhuvankirti Ras* which is very effective on *Vata-Kaphaj Jwara*^[10] and *Mritunjaya Rasa* which acts on respiratory system too and precautionary to stop the ongoing infection rapidly and beneficial for thromboembolism like conditions.^[11] Tablet Platenza which contains *Papaya* and *Guduchi* as main content which have proven effectively in increasing platelets count in researches, and *Abhra Lauh* which is indicated for *Pandu, Daurbalya* and *Jeerna Jwara* and it is very useful for low platelet count and modulating the erythropoietic system, then combination of *Sitopladi Choorna 3gm + Mulethi Choorna 2gm + Takan Bhasma 250 mg + Godanti Bhasma 250 mg* along with *Madhu* was prescribed for expectoration, clearing respiratory tract as *Sitopladi Choorna* and *Mulethi Choorna* and *Takan* acts as very good mucolytics, Soothing the upper respiratory tract and bronchodilators too and *Godanti* act on *Vata-Kaphaj* involvement, *Shiroroga* and *Jwarahara*.^[12] *Dashmoolarisht* was given which reduced chest pain, *Vata Anulomana, Shothhara* and stop the chances of dyspnea like conditions.^[13] Tablet *Shwaskuthar Rasa* and *Kankasava* both drugs added

separately in case 2 due to history of Asthma. These drugs are very effective respiratory disorder and maintain respiratory function specially in *Tamaka Shwasa*.^[14] In Patient it was amazing to see such quick response in every symptom within 3 days and the after-treatment reports also showed very wonderful results after medication and this *Jwara* case was wonderfully managed within 3 days and medicines were continued to 10 days and after 6 days no symptoms were reported by patient.

CONCLUSION

Only 2 cases have been reported here, we should study *Ayurveda* medicine with proper following the *Chikitsa Siddhant* in large sample and as we know *Vishado Hi Rogvardhanam*, So, it is important to look towards physical and mental, both status of patient. Proper management protocol is required along with modern technological support, because oxygen support, ventilation ICU has their own importance. We are lucky to have this much of medicines mentioned in *Ayurveda texts*, but we should remember "*Taam Taam Yuktimaratham Ch Taam Taam Abhiprayet. Yukti* is very necessary because we are handling the diseases caused by *Pragyaapradha*. More pandemics may come but we need to explore our *Shashtra* in scientific way and establish it in proper management protocol of government. So, more sample study is still needed with proper *Chikitsa Siddhant* and *Roga Rogi Pariksha*.

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