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# Therapeutic efficacy of *Kantakari Ghrita* in *Tamaka Shwasa*

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## ABSTRACT

**Background:** *Ghrta Kalpana* has a major role in clinical practise, because of its unique property of *Samskarasya Anuvartanam*. *Tamaka Shwasa* a *Pranavaha Srothovikara*, may be correlated to Bronchial Asthma, where in remissions and exacerbations are the typical features. The management of this acute respiratory condition is the long quest in the medical fraternity of all types. Hence, the present study was aimed to evaluate the role of *Shamana* therapy in the form of *Kantakari Ghrita*<sup>3</sup> in *Tamaka Shwasa* patients. **Objectives:** To evaluate the effect of *Kantakari Ghrita* in *Tamaka Shwasa*. **Methods:** A total number of 30 patients were administered with 24 mgs of '*Kantakari Ghrita*' once daily in the morning on empty stomach with *Ushna Jala* as *Anupana*. It was a single blind study with pre and post-test design. The effect was assessed by standard scoring assessment criteria followed by statistical analyses. **Results:** There was marked improvement in signs and symptoms and all were statistically significant.

**Key words:** *Snehakalpana*, *Ghruta*, *Kantakari Ghrita*, *Tamaka Shwasa*, *Bronchial Asthma*.

## INTRODUCTION

*Tamaka Shwasa*,<sup>[1]</sup> a *Pranavaha Srotho Vikara*, which is known by the name Bronchial Asthma in modern parlance keeps the patient in disturbed conditions. According to W.H.O, 100-150 million of global population is suffering from Bronchial Asthma, out of which 1/10<sup>th</sup> of Indian population and the prevalence of Asthma is increasing day by day.

*Ghrta Kalpana*,<sup>[2]</sup> one among the *Sneha Kalpanas* is

predominantly used for oral administration. Here, '*Sneha*' that pacifies *Tridosha*, has the capacity to reach each and every *Srotas*. It stimulates the *Dhatu* and is capable of removing the obstruction.

When it is processed with suitable medicinal drugs and formulated as a medicated *Sneha*, like done in *Kantakari Ghrita*, it attains more potency in selected disease conditions. Hence, the *Kantakari Ghrita*,<sup>[3]</sup> is taken here for the study to evaluate its therapeutic efficacy in *Tamaka Shwasa*.

## MATERIALS AND METHODS

### Pharmaceutical Study

#### *Kantakari Ghrita*

<i>Sneha Dravya</i>	<i>Goghrta</i> (1 part)
<i>Drava Dravya</i>	<i>Kantakari Swarasa</i> (4 parts)
<i>Kalka Dravya</i>	<i>Bala</i> , <i>Vyosha</i> , <i>Vidanga</i> , <i>Sati</i> , <i>Chitraka</i> , <i>Souvarchala Lavana</i> , <i>Yavakshara</i> , <i>Pippalimoola</i> , <i>Pushkara</i> , <i>Vrischeera</i> , <i>Bruhathi</i> , <i>Pathya</i> , <i>Yavani</i> , <i>Dadima</i> ,

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	<i>Riddhi, Drakshapunanava, Chavya, Duralabha, Amlavethas, Shringi, Amalaki, Bargi, Rasna, Gokshura.</i>  (Total kalka- quarter part of <i>Sneha Dravya</i> )
Method of preparation	Specified ratio of all the above essential ingredients were processed as per classical reference. After appreciation of all the ' <i>Sneha Siddha Lakshanas</i> ', the medicated ghee i.e. ' <i>Kantakari Ghrita</i> ' was filtered and stored in suitable airtight containers for dispensing to the selected patients.

### Sources of Data

#### Drug source

The drugs were collected from S.D.M. Pharmacy, Udupi, Karnataka. Pharmaceutical study was done in the practical hall of Department of Rasashastra and Bhaishajya Kalpana, S.D.M. College of Ayurveda, Udupi, Karnataka.

#### Patient source

A minimum of 30 patients diagnosed with *Tamaka Shwasa* were selected from the OPD and IPD of SDM Ayurveda Hospital, Udupi, Karnataka.

#### Method of data collection

#### Study Design

It is a single blind study with pre and post-test design where in 30 patients suffering from *Tamaka Shwasa* of either sex between the age group of 16 and 60.

A special Proforma was prepared with all points of history taking, physical signs and laboratory investigations to confirm the diagnosis.

The patients were treated with *Kantakari Ghrita* by oral administration for a period of 28 days.

#### Inclusion Criteria

- Patients with *Pratyatma Lakshana* of *Tamaka Shwasa*.
- Age group between 16 and 60 years.
- Patients having the history more than 6 months.

- Patients irrespective of sex, religion, occupation etc.

#### Exclusion Criteria

- Patients with complications of *Tamaka Shwasa*.
- Severe attack of *Tamaka Shwasa*.
- Patients suffering from other systemic disorders

#### Intervention

The patients were treated with '*Kantakari Ghrita*' by Oral administration for a period of 28 days.

**Follow up Period:** 1 month

#### Assessment Criteria

Adopting the scoring method, symptoms of the illness like breathlessness, cough, sputum, etc. and physical signs like respiratory rate, heart rate, expansion of chest as well as Spirometric parameters were taken as assessment criteria for this study.

#### Severity of *Tamaka Shwasa*

Severity	Grade
Mild intermittent	1
Mild persistent	2
Moderate persistent	3
Severe persistent	4

#### Breathlessness

Severity	Grade
Mild - Breathlessness with activity	1
Moderate - With talking	2
Severe - At rest	3
Impending respiratory failure - Breathlessness at rest	4

#### Speech

Severity	Grade
Mild - Sentences	1
Moderate - Phrases	2
Severe - Words	3

Impending Respiratory failure - Mute	4
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▪ **Cough**

Severity	Grade
Morning bouts or after exercise - Do not disturb work.	1
Continuous cough during day and morning - Disturbing work.	2
Continuous day morning and night cough - Disturbs activity.	3
Continuous, day, night and sleep and activity disturbed	4

▪ **Sputum**

Severity	Grade
Less than 2.5ml/day.	1
2.5ml to 15 ml/day	2
15 to 25 ml/day	3
> 5ml/day	4

▪ **Body position**

Severity	Grade
Mild - Able to recline	1
Moderate - Prefers sitting.	2
Severe - Unable to recline.	3
Impending Respiratory Failure - Unable to recline	4

▪ **Respiratory Rate**

Severity	Grade
Mild - >10/min	1
Moderate - >20/min	2
Severe - After >30/min	3
Impending Respiratory Rate	4

▪ **Laboured Breathing**

Severity	Grade
Mild - no use of accessory muscles	1

Moderate - commonly use of accessory muscles	2
Severe - usually use of accessory muscles	3
Impending Respiratory Failure - Paradoxical thoraco-abdominal movement	4

▪ **Breath Sounds**

Severity	Grade
Mild - Moderate wheezing	1
Moderate - loud wheezing	2
Severe - loud inspiration and expiration	3
Impending Respiratory Failure - little air movement	4

▪ **Heart Rate**

Severity	Grade
Mild - 100/min	1
Moderate - 100-120/min	2
Severe - >120/min	3
Impending Respiratory Failure - relative brachycardia	4

▪ **Mental Status**

Severity	Grade
Mild - May be agitated	1
Moderate - Usually agitated	2
Severe - Always agitated	3
Impending Respiratory Failure - Confused or drowsy	4

**RESULTS**

Though, there was no change in symptoms of 'Tamaka Shwasa' in 10% selected and treated patients, 40% of them had moderate relief; and the

50% of the patients got average relief in a period of 28 days.

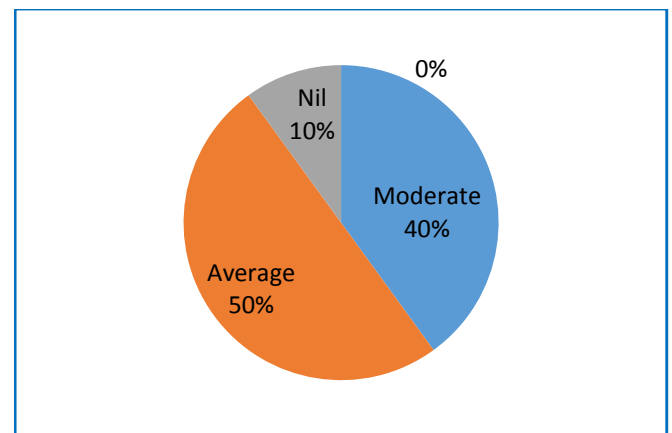
Considering statistical significance, it may be inferred that *Kantakari Ghrita* is relatively effective in the management of ‘*Tamaka Shwasa*’.

**Table 1: Showing the effect of *Kantakari Ghrita* on 30 patients of *Tamaka Shwasa*.**

Parameter	BT	AT	SD	S.E. M	t	p
Severity	2.26 ±0.106	1.100 ±0.055	0.648	0.118	9.866	<0.001
Breathlessness	2.33 ±0.099	1.167 ±0.069	0.461	0.842	13.857	<0.001
Speech	2.033 ±0.033	1.00 ±0.107	0.556	0.102	10.179	<0.001
Cough	2.033 ±0.058	0.93 ±0.117	0.607	0.111	9.919	<0.001
Sputum	1.96 ±0.058	0.96 ±0.102	0.455	0.083	12.042	<0.001
Body Position	1.86 ±0.036	0.83 ±0.102	0.556	0.102	10.179	<0.001
Respiratory Rate	2.06 ±0.046	0.86 ±0.104	0.610	0.111	10.770	<0.001
Expansion Of Chest	2.50 ±0.092	2.94 ±0.112	0.352	0.064	6.880	<0.001
Laboured Breathing	1.83 ±0.069	0.70 ±0.102	0.571	0.104	10.865	<0.001

Breath Sounds	1.93 ±0.046	0.73 ±0.117	0.664	0.121	9.893	<0.001
Heart Rate	0.86 ±0.0631	0.30 ±0.085	0.504	0.092	6.158	<0.001
Mental Status	1.40 ±0.091	0.43 ±0.115	0.414	0.075	12.794	<0.001
P.E.F Value	193.33 ±6.558	300.0 ±9.362	33.43	6.104	17.474	<0.001

**Figure 1: Relief in the symptoms of *Tamaka Swasa* after 28 days of treatment with *Kantakari Ghrita*.**



**DISCUSSION**

*Tamaka Shwasa* has to be treated by the drugs that possess ‘*Ushna Veerya*’; that have *Vatanuloma*, *Vat-Kapha Shamana* property. *Ghrita* is a known *Vataharadravya*. It also mitigates *Kapha* by virtue of its unique feature called ‘*Samskarasya Anuvartanaam*’, when processed with appropriate medicinal drugs.

*Kantakari*, the prime ingredient of this herbal combination may lessen the production of ‘*Malaroopikapha*’ in conditions of ‘*Tamaka Shwasa*’. It also possesses qualities like *Shwasa Haratwa* and *Kasaghnatha*.

The ingredients like ‘*Souvarchala Lavana*’ and ‘*Yavakshara*’, by virtue of their ‘*Teekshnatwa*’ help in

*Kaphavilayana* and *Srotho-Mardhavakarana*. There by, they clear the air passages in '*Pranavaha Srotas*' (respiratory system).

Expected actions like '*Kaphanissarana*' and '*Kasagnatha*' is due to the action exerted by '*Pushkaramoola*' and '*Pippalimoola*', which are also the significant ingredients of '*Kantakari Ghrita*'.

The other drugs, '*Hareetaki*' and '*Bala*' help in the accomplishment of '*Vata anulomagati*' i.e. relief from flatulence.

In the long run, '*Tamaka Shwasa*' leads to '*Rasaadi Dhatusoshana*' (body emaciation) and this ill effect of the disorder can be removed by the base drug of the current preparation i.e. '*Ghrita*'.

Hence, we can conclude that the '*Kantakari Ghrita*' removes the airway resistance, which is prominently produced by '*Kapha*' and '*Vata Dosha*', leading to relief in the symptoms.

## CONCLUSION

*Tamaka Shwasa* is a '*Pitta Sthana Samudbhava Vyadhi*'. In this '*Avarudhamarga*' of '*Pranavayu*' is obstructed due to *Kapha Dosha*. This happens to be the principle pathology involved here. The use of *Kapha-Vatahara* and *Anulomana Dravyas* having *Ushna Veerya* will serve the purpose in treating the disease called '*Tamaka Swasa*'. After the present study, it may be concluded that '*Kantakari Ghrita*' is

reasonably effective in the management of '*Tamaka Shwasa*'. The *Kapha-Vatahara* drugs used in the study showed good effect on the disease symptoms. The *Kaphanissaraka*, *Srotho-Mardhavakartwa*, *Kasagna*, *Kapha-Vilayana*, *Vatanulomana* - all these properties of the ingredients, will help in addressing the prominent symptoms in the selected disease.

## REFERENCES

1. Agnivesha, Charaka Samhita, Yadavaji Trikamji Acharya, Chikitsa Sthana 17<sup>th</sup> chapter, 5<sup>th</sup> Edition, Chaukambha Sanskrit Sansthan, Varanasi, pp738,page 533.
2. Sharma Sadanand Acharya, Pandit Parashurama Shastry, Sharangadhara Samhita, Madhyama Khanda; 5th chapter, 6<sup>th</sup> Edition, Chaukambha Orientalia, Varanasi, pp398,page 173.
3. Agnivesha, Charaka Samhita, Yadavaji Trikamji Acharya, Chikitsa Sthana 17<sup>th</sup> chapter, 5th Edition, Chaukambha Sanskrit Sansthan, Varanasi, pp738,page 541.

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