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Research Article

A COMPARATIVE CLINICAL STUDY IN THE MANAGEMENT OF VATAJA KASA W.S.R. TO TROPICAL PULMONARY EOSINOPHILIA BY SHRINGARABHRA RASA AND SHWASAKASA CHINTAMANI ALONG WITH MRIDU VIRECHANA

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ABSTRACT

Background and objectives

Vataja kasa vis-à-vis T.P.E is a disease of *Swasanavaha samsthana*, is one of the commonest problem in tropical countries like India. India being a tropical country the prevalence of TPE is remarkable. *Vatajakasa* presents with symptoms like *Shuska kasa*, *Prasakta vega*, *Uraha shoola*, *Ksheena bala*, *Ksheena oja*, *Kshamana* etc. In Ayurveda, researches have been done and *Vataja kasa* can be compared with TPE. TPE symptoms such as repeated bouts of dry cough, chest pain, weight loss, and Malaise etc may continue for weeks or months with remission and reoccurrence.

Methods: Classical signs and symptoms of *Vataja kasa* and raised esinophil count >500cells/cumm and 30 patients were selected and randomly allocated in two groups. Firstly, *Shunti churna* with hot water was given for *Amapachana*, later patients were given *Kantakari ghrita* for *Snehapana* prior to *Virechana* with *Eranda taila* in both the groups followed by *Shringarabhra rasa* in Group A and *Shwasa kasa chintamani* in Group B for 21 days with follow up of 1 month.

Results: Both Group A and Group B provided highly significant results in all parameters of assessment but group B showed better improvement in the symptoms of the disease *Vataja kasa* in the present study.

Interpretation and Conclusion: 15 subjects (50%) got marked relief, 5 subjects (16.66%) got moderate relief in subjective parameters; 20 subjects (66.66%) got mild relief and 5 (16.66%) subjects got moderate relief in objective parameter. Hence, the modalities of our treatment can be recommended to all the patients of *Vataja kasa* without any hesitation.

INTRODUCTION

Kasa seems to be a very simple disease, if neglected or mismanaged; it may result in disease with poor prognostic condition. In Ayurveda *Kasa* is considered as an independent disease unlike in modern science. It may also occur as a *Lakshana* or an *Upadrava* in other diseases.

Though, *Kasa* has remained only as a minor and neglected common problem in this era, it is related with one's immunity. Thus, it is a major setback for the affected persons, which has become major hurdle in day-to-day activities of a person.

The vitiated *Prana vata* along with *Udana vata* which further gets aggravated, takes an abnormal course through throat and mouth in association with other *Doshas* and expelled out abruptly with a 'coughing sound' malingering the broken-bronze vessel.^[1]

The clinical features of *Vataja kasa* has been described in our classics as *Shushka kasa*, *Prasakta manta*, *Shushka alpa kapha nishtivana*, *Swarabedha*, *Shushka ura kantha vaktrata*, *Dourbalya* etc.^[2,3]

Vataja kasa is often compared to Tropical Pulmonary Eosinophilia (TPE) because of similarities of signs and symptoms.

TPE is a syndrome resulting from immunological hyper responsiveness to human filarial parasites *Wuchereria bancrofti* and *Brugia malayi*. The filaria are transmitted to humans by mosquitoes and adult worms eventually reside in lymphatics. There they release microfilariae, which travel to the lungs and create an intense inflammatory reaction.^[4]

TPE is an occult form of filariasis and is characterized by dry cough, dyspnoea, nocturnal wheezing etc, and marked peripheral blood eosinophilia. This affects males and females at a ratio of 4:1 often during the 3rd decade of life^[5].

India being one of the tropical countries, the prevalence of TPE (*Vataja kasa*) is remarkably high. In India, it is endemic in Maharashtra, Goa, Karnataka, Kerala, coastal areas, Andhra Pradesh, Orissa, Bengal and Bihar^[6].

Excellent results have been obtained with a short course of diethyl carbamazine. A dosage of 8-12mg-1kg/day in three divided doses was given for 21 days. With this treatment there is rapid drop in the eosinophil count, the pulmonary features disappear and patients' general health improves rapidly. Residual features of TPE may persist after three weeks of therapy simultaneously with development of chronic interstitial disorders. Relapse following treatment occurs in 20% of patients and therefore repeated monthly courses of D.E.C. at 2-3 monthly intervals for a period of 1-2 years is recommended^[7] which is difficult for the patients to follow. The desired mode of management should not evoke dependence or adverse drug effects, which are the major concern in the medical field.

The *Chikitsa Sutra* of *Vataja Kasa* explains "*Kasamadau Snehairupacharet*" meaning to start the treatment with *Snehana*^[8]. The line of management described by our Acharyas is *Shodhana* mainly *Basti* and *Sneha virechana* and many *Shamanoushadhis*. *Virechana*^[9] along with *Shringarabhra rasa*^[10] in one group and *Shwasakasa chintamani*^[11] in other.

Hence, this study is to evaluate the comparative study of efficiency in similar cases has been taken up.

The work on evaluation and comparison of both *Shringarabhra rasa* and *Shwasakasa chintamani* along with *Sneha virechana* had not been taken up which formed the platform for the synopsis of the present study.

In the present study, the scholar has taken pulmonary eosinophilia on line with *Vataja kasa*. Here

an attempt has been made to compare the efficacy of *Shringarabhra rasa* and *Shwasakasa chintamani* along with *Sneha virechana* as prescribed by our Acharyas.

Patients were selected on the basis of classical features of *Vataja kasa*. From this prospect the study of comparison of efficacy of *Shringarabhra rasa* and *Shwasakasachintamani* along with *Sneha virechana* in near equal group relating to *Vataja kasa* symptoms and AEC have been taken into account.

OBJECTIVES OF THE STUDY

1. To study in detail about *Vataja kasa*, according to Ayurveda and TPE according to modern Science.
2. To assess the efficacy of *Shringarabhra Rasa* in the management of *Vataja Kasa* (TPE).
3. To assess the efficacy of *Shwasakasa chintamani* in the management of *Vataja Kasa* (TPE).
4. To compare the efficacies of *Shringarabhra Rasa* and *Shwasakasa chintamani* in *Vataja Kasa*.

MATERIALS AND METHODS

Materials

The present study titled A Comparative Clinical Study in the Management of *Vataja Kasa* w.s.r. to Tropical Pulmonary Eosinophilia by *Shringarabhra Rasa* and *Shwasakasa Chintamani* along with *Mridu Virechana* was done with following materials.

1. *Shunti choorna*^[12]
2. *Kantakari ghrita*^[13]
3. *Karpooradya taila*^[14]
4. *Eranda taila*^[15]
5. *Shringarabhra rasa*^[16]
6. *Shwasakasa chintamani*^[17]

Sample

The subjects were selected incidentally and randomly placed into two groups.

Sample Size

Total 30 subjects were placed into two groups, 15 subjects in each.

Group A: *Mridu virechana* followed by *Shringarabhra Rasa* internally for 21 days.

Group B: *Mridu virechana* followed by *Shwasakasa chintamani* internally for 21 days.

Study Design: A Comparative Clinical Trial Study.

Inclusion Criteria

1. Subjects presenting with classical clinical features of *Vataja kasa* (Tropical pulmonary eosinophilia).
2. Subjects of either sex between the age group of 20-50 years.
3. Subjects with chronicity of more than 6 months and less than 5 years.
4. Subjects having increased AEC in the peripheral blood smear.

5. Subjects fit for *Virechana*.

Exclusion Criteria

1. Subjects with other systemic disorders like CHD, diabetes, hepatorenal complication etc.
2. Subjects with bronchial asthma, pneumonia, bronchitis, pulmonary tuberculosis.

Diagnostic Criteria

After detailed examination, the diagnosis was made based on the signs and symptoms of *Vataja kasa* explained in Ayurvedic classics along with AEC and ESR

Investigations

Blood: Hb%, TC, DC, ESR, AEC, RBS

Urine: Albumin Sugar, Micro analysis

Radiological investigation: Chest X-Ray PA-view if required.

Parameters of Study

Parameters of assessment were totally based on the subsidence in the clinical features of *Vataja Kasa* (TPE). Parameters of study is categorised into two groups as subjective and objective parameters.

Shushka kasa

Grade 0- No cough

Grade 1- Mild irritant dry cough but does not disturb the night sleep.

Grade 2- Moderate irritant dry cough which disturbs the night sleep but subside after medication.

Grade 3- Severe irritant dry cough not relieved by any measures and keeps patient awake.

Alpha Kapha Nishtivana (Expectoration)

Grade 0 - Absence

Grade 1 - Occasional expectoration

Grade 2 - Expectoration with persistence of dry cough.

Shushka Urakanthavaktrata (Dryness)

Grade 0 - Absence

Grade 1 - Mild

Grade 2- Moderate which relieved by home remedies

Grade 3 - Severe is constant dryness of oral cavity

Shoola Hrita/Ura/Parshwa/Udara/Shira/Shakha

Grade 0- Absent

Grade 1- Mild and occasional pain during cough

Grade 2- Moderate pain during cough

Grade 3- Constant pain

Dourbalya (General weakness)

Grade 0- Absence

Grade 1- Mild weakness but doesn't hamper day to day activities.

Grade 2- Moderate weakness which alters the routine, but subside by rest.

Grade 3- Severe weakness

Swarabedha (Change in Voice)

Grade 0- Absent

Grade 1- Present

Nirghosha

Grade 0- Absent

Grade 1- Present

Assessment Criteria

The data, which are obtained by the clinical trial was statistically analysed by applying student 't' test.

Statistical Tests

The analysis of the effects of therapy was based on Student's "t-test" applications. The efficacy of *Snehapana*, *Mridu virechana* along with *Shringarabhra rasa* and *Shwasakasa chintamani* internally were compared. The significance is discussed on the basis of mean scores, percentages, SD, SE, 't' and 'p'-values.

Interventions

Group - A

***Amapachana*:** The subjects were given *Shunti Churna* 5gm /day in 3 divided doses half an hour before food with *Ushnodaka* as *Anupana* for *Amapachana* till *Nirama lakshanas* were seen.

***Snehana*:** *Sadya snehapana* By *Kantakari ghrita*.

On the first day patients were given *Hrisiyasi matra* of *Sneha* i.e., 30ml and based on the duration taken for digestion, the dose was calculated for 24hrs and given on second day as *Sadya snehapana*.

***Anupana*:** *Ushnodaka*

***Abhyanga*:** *Abhyanga* with *Karpooradi taila* was done after *Snehapana* for 2 days.

***Swedana*:** After *Snehana* they were subjected to *Sarvanga bashpa sweda Sweda* prior to *Virechana*

***Virechana*:** The subjects were given/administered *Eranda taila* (dose depends on the type of *Koshta*) for *Virechana* B/W 8.30am-9.30am

***Samsarjana krama*:** Based on the *Shuddhi samsarjana krama* was advised.

***Shamanoushadhi*:** Internally *Shringarabhra Rasa* (250mg, 1 TID) tablet was administered with *Ushnodaka* as *Anupana*, thrice daily after food for 21 days.

Duration: 28 days

Follow Up: 1 month

Group B

***Amapachana*:** The subjects were given *Shunti Churna* 5gm/day in 3 divided doses half an hour before food with *Ushnodaka* as *Anupana* for *Amapachana* till *Nirama lakshanas* were seen.

***Snehana*:** *Sadya snehapana* By *Kantakari ghrita*.

On the first day patients were given *Hrisiyasi matra* of *Sneha* i.e., 30ml and based on the duration taken for digestion, the dose was calculated for 24hrs and given on second day as *Sadya snehapana*.

Anupana: *Ushnodaka*

Abhyanga: *Abhyanga* with *Karpooradi taila* was done after *Snehapana* for 2 days.

Swedana: After *Snehana* they were subjected to *Sarvanga bashpa sweda Sweda* prior to *Virechana*.

Virechana: The subjects were given/administered *Eranda taila* (dose depends on the type of *Koshta*) for *Virechana* B/W 8.30am-9.30am

Samsarjana krama: Based on the *Shuddhi samsarjana krama* was advised.

Shamanoushadhi: Internally *Shwasakasa chintamani* (125mg, 1 TID)

Tablet was administered with *Ushnodaka* as *Anupana*, 1 thrice daily after food for 21 days.

Duration: 28 days

Follow Up: 1 month

RESULTS

Effect of therapies on Subjective Parameters:

1. *Shushka kasa*
2. *Alpa kapha nishtivana*
3. *Shushka urah kantha* and *Vaktra*

Table 1: Showing the effect of *Snehapana* on *Shushka kasa*

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A	2.3	1.6	31.42%	0.59	0.15	4.78	<0.0010	H.S
Group B	2.4	1.53	36.11%	0.35	0.09	9.53	<0.001	H.S

Table 2: Showing the effect of *Virechan* on *Shushka kasa*

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A	2.3	1.2	48.57%	0.35	0.09	12.47	<0.001	H.S
Group B	2.4	1.13	52.77%	0.45	0.11	10.71	<0.001	H.S

Table 3: Showing the effect of therapy after *Shamanoushadi* on *Shushka kasa*

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A	2.3	0.4	80%	0.74	0.19	9.72	<0.001	H.S
Group B	2.4	0.3	86.11%	0.45	0.11	17.48	<0.001	H.S

Table 4: Showing the effect of *Snehapana* on *Alpa kapha nishtivana*

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A (n=9)	0.8	0.73	15.38%	0.35	0.09	1.46	>0.10	N.S
Group B (n=10)	0.8	0.73	15.38%	0.35	0.09	1.46	>0.10	N.S

Table 5: Showing the effect of *Virechan* on *Alpa kapha nishtivana*

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A (n=9)	0.8	0.6	30.76%	0.45	0.11	2.25	>0.05	N.S
Group B (n=10)	0.8	0.46	46.15%	0.5	0.13	3.05	>0.01	S

Table 6: Showing the effect of therapy on *Alpa kapha nishtivana*

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A (n=9)	0.8	0.33	61.53%	0.51	0.13	4	<0.01	H.S
Group B (n=10)	0.8	0.26	69.23%	0.63	0.16	3.67	<0.01	H.S

Table 7: Showing the effect of *Snehapana* on *Shushka urah kantha* and *Vaktra*

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A (n=13)	1.4	0.53	61.90%	0.51	0.13	6.5	<0.001	H.S
Group B (n=14)	1.7	0.8	53.84%	0.25	0.06	14	<0.001	H.S

Table 8: Showing the effect of Virechan on Shushka urah kantha and Vaktra

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A (n=13)	1.4	0.4	66.66	0.45	0.11	7.89	<0.001	H.S
Group B (n=14)	1.7	0.53	69.23	0.56	0.14	8.29	<0.001	H.S

Table 9: Showing the effect of therapy on Shushka urah kantha and Vaktra

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A (n=13)	1.4	0.26	80.95	0.63	0.16	6.85	<0.001	H.S
Group B (n=14)	1.7	0.33	80.76	0.63	0.16	8.57	<0.001	H.S

Table 10: Effect of Therapy on other subjective parameters w.r.t. no. of subjects before and after treatment

General Symptoms	Group A				Group B		
	B.T	A.T	%Relief	N	B.T	A.T	% Relief
Shoola	6	2	66.6%		6	2	66.6%
Dourbalya	5	4	20%		6	2	66.6%
Swarabheda	6	1	83.3%		6	0	100%
Nirghosha	3	0	100%		3	0	100%

OBJECTIVE PARAMETER

Table 11: Showing the effect of therapy on AEC

Groups	BT mean	AT mean	% of Relief	SD	SE	't'	P	Remarks
Group A	623.33	373.3	40.1%	179.28	46.29	5.40	<0.001	H.S
Group B	610	356.66	41.53%	126.01	32.53	7.78	<0.001	H.S

Effect of therapy on E S R

Comparative Efficacy of the Therapies In Group A and Group B

Table 12: Showing the Comparative efficacy of Snehapana on Subjective Parameters in Group A and Group B

Sl.no	Parameters of assessment	No.of pts	SD	SE	't'	P	Remarks
1	Shushka kasa	30	0.005	5.31	0.02	>0.10	N.S
2	Alpa kapha nishtivana	19	0.2	0.09	0	>0.10	N.S
3	Shushka urah kantha and Vaktra	27	0.17	0.02	3.5	<0.01	H.S

Table 13: Showing the Comparative efficacy of Virechan on Subjective Parameters in Group A and Group B

Sl.no	Parameters of assessment	No.of pts	SD	SE	't'	P	Remarks
1	Shushka kasa	30	0.14	0.14	0.92	>0.10	N.S
2	Alpa kapha nishtivana	19	0.22	0.1	1.4	>0.10	N.S
3	Shushka urah kantha and Vaktra	27	0.2	0.02	13.5	<0.001	H.S

Table 14: Showing the Comparative efficacy of Therapy on Subjective Parameters in Group A and Group B

Sl.no	Parameters of assessment	No.of pts	SD	SE	't'	P	Remarks
1	Shushka kasa	30	0.06	0.06	3.33	<0.01	H.S
2	Alpa kapha nishtivana	19	0.24	0.11	0.7	>0.10	N.S
3	Shushka urah kantha and vaktra	27	0.22	0.03	9	<0.001	H.S

Table 15: Showing the Comparative efficacy of Therapy in Group A and Group B by using unpaired 't' test.

Sl.no	Parameters of assessment	No.of pts	SD	SE	't'	P	Remarks
1	A.E.C	30	3.30	1.20	2.77	<0.01	H.S

Table 16: Showing overall effect of therapy on Subjective parameters

Assessment criteria	Group A	Group B
0- 25% no relief	2	3
26 -50% mild relief	4	1
51- 75% moderate relief	2	3
Above 75% marked relief	7	8

Table 17: Showing overall effect of therapy on Objective parameters

Assessment criteria	A.E.C	
	Group A	Group B
0- 25% no relief	2	3
26 -50% mild relief	12	8
51- 75% moderate relief	1	4
Above 75% marked relief	0	0

DISCUSSION

Deha Prakruti

In this study the effect of treatment was assessed on the basis of changes observed after the treatment in subjective and objective parameters. The results are discussed based on subjective and objective parameters as follows.

Shushka kasa

Effect of snehapana

The severity of *Shushka kasa* was markedly decreased upto 31.42% in group A and 36.11% in group B just after *Snehapana* and the result was statistically highly significant in both the Groups ($p < 0.001$).

The effect of *Snehapana* on *Shushka kasa* was statistically insignificant when the result was compared in between the groups ($P > 0.10$). As the same *Ghritha* was used in both the groups there was no much difference in the effect of *Snehapana* in both the groups.

Effect of Virechana

The severity of *Shushka kasa* was markedly decreased upto 48.57% in group A and 52.77% in group B after *Virechana* and result was statistically highly significant in both the Groups ($p < 0.001$).

The comparative efficacy of Group A with Group B showed statistically insignificant result ($P > 0.10$).

After completion of therapy

The severity of *Shushka kasa* was markedly decreased upto 80% in group A and 86.11% in group B after the *Shamanoushadi* for 21 days. And result was statistically significant in both the groups ($p < 0.001$).

When the effects of total therapy are compared, group B showed statistically significant

improvement in *Shushka kasa* when compared with group A, with p value ($p < 0.01$).

This means that the *Shamanoushadis*, *Shringarabhra rasa* and *Shwasakasa chintamani* are effective in reducing *Shushka kasa*.

Alpa kapha nishtivana

The total number of subjects having *Alpa kapha nishtivana* were 09 subjects in group A and 10 subjects in group B.

Effect of Snehapana

The effect of *Snehapana* was statistically insignificant in both the groups on the parameter *Alpa kapha Nishthivana*. Both the group showed 15.38% relief with P value > 0.10 .

The comparative efficacy of Group A with Group B showed statistically insignificant result ($P > 0.10$). This shows that *Sadyasnehapana* is not effective in reducing *Alpa kapha nishthivana*.

Effect of Virechana

The severity of *Alpa kapha nishtivana* markedly decreased upto 30.76% in group A and 46.15% in group B after *Virechana* and result was statistically not significant in group A with $P > 0.05$ and statistically significant in group B with P value < 0.01 .

The comparative efficacy of Group A with Group B showed statistically insignificant result ($P > 0.10$).

After completion of therapy

The severity of *Alpa kapha nishtivana* was markedly decreased upto 61.53% in group A and 69.23% in group B after the *Shamanoushadi* for 21 days. And result was statistically significant in both the Groups ($p < 0.01$).

The comparative efficacy of Group A with Group B showed statistically insignificant result ($P>0.10$). This is because of the difference in the sample size. Even though the comparative efficacy of therapies was statistically not significant, the percentage relief was more in Group B.

Shushka ura kantha and Vaktrata

The total number of subjects having *Alpa kapha nishtivana* were 13 subjects in group A and 14 subjects in group B.

Effect of Snehapana

The severity of *Shushka ura kantha* and *Vaktrata* was markedly decreased upto 61.90% in group A and 53.84% in group B just after *Snehapana* and the result was statistically highly significant in both the Groups ($p<0.001$). The comparative efficacy of Group A with Group B showed statistically significant result ($P<0.01$).

Effect of Virechana

The severity of *Shushka ura kantha vaktrata* was markedly decreased upto 66.66% in group A and 69.23% in group B after *Virechana* and result was statistically highly significant in both the Groups ($p<0.001$).

When the effects of *Virechana* was compared, group B showed statistically significant improvement than group A, with p value ($p<0.001$)

After completion of therapy:

The severity of *Shushka ura kantha vaktrata* was markedly decreased upto 80.95% in group A and 80.96% in group B after the *Shamanoushadi* for 21 days and result was statistically significant in both the Groups ($P<0.001$).

The comparative efficacy of Group A with Group B showed statistically highly significant result ($P<0.001$).

Even though there is no significant difference in percentage relief the comparative efficacy showed statistically significant result, this may be due to the unequal sample size.

Other subjective symptoms

As there were less subjects recorded in the remaining subjective parameters like *Shoola in Ura/ Udara/ Parshwa/ Shira/ Shanka & Hrit Pradesha*, *Dourbalya*, *Swarabheda*, *Nirghosha* the efficacy was not statistically analysed. They were assessed in terms of number of subjects present before and after the treatment and percentage relief. It is discussed as follows.

Shoola in Ura/ Udara/ Parshwa/ Shira/ Shanka & Hrit Pradesha

There were 6 subjects with *Shoola in Ura/ Udara/ Parshwa/ Shira/ Shanka & Hrit pradesha* before treatment and it was reduced to 2 subjects after treatment with 66.6% relief in both the groups.

Dourbalya

There were 5 subjects with *Dourbalya* before treatment and it was reduced to 4 subjects after treatment with 20% relief in group A.

There were 6 subjects with *Dourbalya* before treatment and it was reduced to 2 subjects after treatment with 66.6% relief in group B.

Swarabheda

There were 6 subjects with *Swarabheda* before treatment and it was reduced to 1 subject after treatment with 83.3% relief in group A.

There were 6 subjects with *Swarabheda* before treatment and all the subjects were relieved of *Swarabheda* after treatment with 100% relief in group B.

Nirghosha

There were 3 subjects in each group before treatment and 100% result was observed in this parameter.

Objective Parameters

Effect on Absolute Eosinophil Count after completion of therapy

40.1% improvement was observed in Group A while in Group B 41.53% improvement was observed. The results of these groups were statistically highly significant, with p value ($p<0.001$).

While comparing the two groups by unpaired 't' test, both the group showed statistically significant improvement in the reduction of A.E.C values when compared with p value ($p<0.01$).

This shows that both the groups were effective in reduction of A.E.C.

Total Effect of Therapies in the Study

Mild Relief 0 (26- 50%) was seen in 4 subjects in group A and 1 subject in group B.

Moderate Relief (51 – 75%): was seen in 02 subjects in Group A, 03 subjects in Group B.

Above 75% relief was seen in 07 subjects in group A and 08 subjects in group B.

Even though the comparative effect of therapies in between the groups were statistically not significant in most of the parameters the average subject wise improvement was more in Group B. It could be said that both the modalities of treatment have beneficial effects on all the parameters.

CONCLUSION

Vataja kasa can be compared to Tropical Pulmonary Eosinophilia of modern science purely based on similarities in *Nidana panchaka* and *Chikitsa*. It is found that the relief was highly significant in both the groups after *Sadya snehapana* and *Mridu Virechana*. The therapy was highly significant on *Shushka kasa* and *Shushka urah kantha vaktra* in both the groups. The effect of therapy on A.E.C is highly significant in both the groups but however it was found non-significant in ESR values in both the groups. The therapy is more effective in group B as compared to group A in both subjective and objective parameters.

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