# Effect of Siddha Medicine and *Yogam* in *Swasakasam* (Bronchial Asthma) Patient – A Case Report

Mirunaleni P\*, Elavarasan K, Manickavasagam R<sup>1</sup>, Kanakavalli K<sup>2</sup>

AYUSH Wellness Clinic, President's Estate, Rastrapathi Bhawan, New Delhi –110001. <sup>1</sup>Siddha Clinical Research Unit, Ayurveda & Unani Tibbia College, Karol Bagh, New Delhi –110005. <sup>2</sup>Central Council for Research in Siddha, Chennai-106, India.

\*Correspondence: mirunalenibsms@gmail.com

### **ABSTRACT**

The prevalence of bronchial asthma and allergic rhinitis is on the rise in India. In the Siddha text, *Pothu maruthuvam*, bronchial asthma is referred to *Swasakasam*. Among the different modalities of treatment, poly-herbal combinations, *yoga* practice and *pranayamam* are said to be well-accepted, safe and effective in treating *Swasakasam*. 39-year-old old male, IT professional was referred to *Siddha* wing at Integrated AYUSH OPD, All India Institute of Ayurveda, for the management of bronchial asthma and allergic rhinitis. He was treated with *Siddha* medicines, *Yogam* and pranayamam practice for 3 months. He showed significant improvement in control of asthma, reduction in taking salbutamol puff, anti - histamine drugs and his quality of life improved.

# **KEYWORDS**

Bronchial Asthma, Siddha, Pranayamam, Swasakasam, Yogam.

# 1. INTRODUCTION

Bronchial asthma is chronic inflammatory disorder of the airway and the most common distressing disease affecting 3-5% of the total population.<sup>[1]</sup> The prevalence of bronchial asthma and allergic rhinitis is on the In Siddha text, Pothu maruthuvam, bronchial asthma referred to as Swasakasam. It contributes several modalities of the treatment for Swasakasam. [2] Among all modalities of treatment, poly-herbal combinations, and pranayamam practice are said to be wellaccepted, safe and effective in asthma. The word "Yogam" means union, joining or to link together as a whole. Yogam is a physical method which uses the breath to link the various parts of the body and the mind and to allow them to behave as one functional unit which helps in the control of Asthma. *Pranayamam* breathing is used to increase respiratory stamina, relax the chest muscles, expand the lungs, raise energy levels, and calm the body.<sup>[3]</sup>

# 2. Case description:

A 39-year-old old male IT professional was referred to *Siddha* department at Integrated OPD, All India Institute of Ayurveda, for management of bronchial asthma and allergic rhinitis. He had h/o of episodic breathlessness accompanied with a wheeze and aggravated during early morning and nighttime for 18 years. These episodes were associated with sneezing and nasal itching.

Physical examination revealed no pallor, clubbing or cyanosis. He was tachypneic with a respiratory rate of 26/min. On auscultation, vesicular breath sounds of equal

intensity were audible bilaterally along with brhonchi. On investigation, hemoglobin and white blood count recorded was 12.07g/dl and 8900mu/l, eosinophil was 9%. The radiology findings were normal.

The patient was on inhaled Salbutamol puff for the last 8 years and he also takes a frequent dose of anti-histamines to control his allergy. The history of the patient was suggestive of uncontrolled bronchial asthma with allergic rhinitis. It can be correlated to Swasakasam in Siddha text. The name, dosage, vehicle and therapeutic properties of the prescribed drugs are mentioned in Table 1. Suggested Yogam and pranayamam practice are given in Table

2.<sup>[3]</sup> The patient attended *Yogam* training on yogic posture and pranayamam. Then, he was supervised and advised to practice daily for 50 minutes at home. Patient visited twice a week to receive medicine and to practice yoga. After 3 months the overall assessment of results was made with the help of the subjective parameters [10] (Table 3).

Symptoms were categorized into three types - cough, wheezing, and dyspnoea and scored as mild, moderate, and severe. Any reduction in these symptoms from moderate to mild or mild to absence was considered as improvement in the disease severity.

Table 1. Name, Dosage, Vehicle and Therapeutic Properties of the Prescribed Drugs

SN	Name of the given Siddha	Dosage and vehicle
	Formulation	
1	Thalisathi chooranam(2 g) +	BD with honey
	Sivanar amirtham(200mg)	
2	Swasakudori pills	2 pills (100mg each) BD with betel leaf
3	Thippili rasayanam	6g BD

Table 2. Yogam and Pranayamam Practices			
SN	Yogam and Pranayamam		
1	Integrated yogic practice:		
	Initial warm up activity with relaxed breathing technique with stretching exercise breathing		
	exercise (5minutes).		
	Loosening exercise (5 minutes) yoga practice to loosen various joints.		
2	Yogic Postures:		
	General physical postures (10 minutes) like Bhujangasanam: Dhanurasanam,		
	Gomukhasanam, Ardhamatsyendrasanam which are simple easy physical postures in		
	standing and sitting along with specific slow breathing were done.[3]		
	Savasanam (10 minutes).		
	Deep relaxation practice (10 minutes) to consciously relax muscles followed by conscious		
	slowing of breathing and calming of the mind.		
3	Pranayamam:		
	It is performed with easy comfortable and slow deep breathing without voluntary breath		
	holding (10 minutes). Deep breathing (deep inspiration and deep expiration): subjects sit		
	in sukhasanam and perform deep inspiration and expiration through both nostrils.		

**Table 3. Clinical Assessment** 

Completeremission	Total disappearance of signs and symptoms.
	No Wheeze.
	No night awakening due to breathlessness.
Major improvement	Nature of symptoms from severe to mild.
	<ul> <li>Frequency of wheeze one to two times for 15 days.</li> </ul>
	No night awakening due to breathlessness.
Minor improvement	Nature of attack severe to moderate.
	<ul> <li>Frequency of wheeze more than two times for 15 days.</li> </ul>
	Night awakening present due to breathlessness

# 3. RESULT

After completion of treatment for 3 months, the patient's showed a reduction in his symptom like breathlessness, tightness of the chest, sneezing, cough and Sleep disturbance due to asthmatic attacks. Overall, he showed major improvement from his symptoms.

The decrease in the number of wheeze (day and night) resulted in the reduction of the use of asthma drugs especially Salbutamol puff and he showed 80% decrement in the use of anti-histamines for the allergic rhinitis in the patient during and after the treatment.

asthma

is

а

chronic

## 4. DISCUSSION

Bronchial

inflammatory disorder and mast cell, eosinophils and T-lymphocytes play an role.<sup>[8]</sup> The ingredients important like thalisapathiri (Taxus buccata), pepper (Piper vellai erukku nigrum), (Calotropis gigantica) may be collectively effective on obstruction and airway hyper by bronchodilator, responsiveness antiinflammatory and antihistaminic properties. [9] The effect of yoga like Bhujangasanam, Dhanurasanam, Gomukhasanam, Ardhamatsyendrasanam in helping the coordination of breath and movement associated with good posturing for best relaxation of breath, muscles help to decrease the number of wheeze (day and night) resulted in the reduction of the use of asthma drugs especially Salbutamol puff.

It also helps in controlling the panic attacks which aggravate individual's further deterioration and shortness of breath by letting a way to control the physical body, the mind (Psychosomatic) and the autonomic nature of breath control <sup>[9]</sup>. This explains the effect of *Yogam* and *Siddha* medicine in the relief of asthma attack and improving quality of life.

There is limited number of well-designed studies exploring beneficial effects of *yoga* on asthma. Hence it is not possible to conclude the long-term efficacy of using yoga to control asthma attack with this single case report. Further studies are required in controlled conditions with large sample size and standardized yoga protocol for confirmation.

## 5. CONCLUSION

The patient showed good response to treatment with marked reduction in his symptoms and quality of life with significant reduction of his regular drugs.

This documentation is an attempt to highlight the importance of *Yogam* and *pranayamam* in treatment of bronchial asthma along with *Siddha* medicine, further largescale studies – RCTS are recommended.

**ACKNOWLEDGMENT** We gratefully acknowledge Dr. Rajaram Mahto, In-charge Integrated AYUSH OPD at AllA for his constant

encouragement and support to carry out this work.

# **REFERENCES**

- McFadden ER. Jr Harrison's principles of Internal medicine In. (ed 1987). McGraw Hill: USA; 2005. p.1511.
- Muthaliar K. Siddha Maruthuvam. Siddha Medical Council: Chennai; 1954.
- 3. Thiyagarajan R. Siddha Maruthuvam Sirappu. Commissionerate of Indian Medicine and Homeopathy: Chennai; 2013.
- 4. Formulary of Siddha Medicines. (ed 1989). Indian Medical Practitioners' Cooperative Pharmacy and Stores Ltd: Adyar; 1972.
- Muthaliar M. Siddha Materia Medica (Vegetable section). (ed 1, Vol I). Siddha Medical Council: Chennai; 1988.

- Muthaliar
   K, Uthamarayan. Siddha Vaithiya Thirattu.
   Directorate of Indian Medicine and Homeopathy: Chennai; 1998.
- 7. Kumar S, Mohan A, Sharma SK. Recent concepts in the pathogenesis of bronchial asthma. Indian J Chest Allied Sci 1997;39:27-45.
- 8. Udwadia ZF. Pulmonary disorders in 21st Century. Indian Pract 2000; 2:38-42.
- 9. Van BI, Rietveld S, Everaerd W. Stressinduced breathlessness in asthma, Psychol Med 1999; 29(6):1359-66.
- Kumar C, Robbins C. Pathological basis of disease. Noida Thomas Press India Limited: Uttar Pradesh; 1999; p.367-80.