

## TO STUDY THE EFFICACY OF LAWANGADI SAMASHRKARA CHOORNA IN KAPHAJ KASA

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### ABSTRACT

Management of kasa is a repeated part in opd & Ipd.variety of drugs has been used such as talisadi choorna, lawangadi vati, 'Lawangadi samashrkara choorna' has not been tried so far, so I decided to try *Lawangadi samashrkara choorna* on *kapaj kasa*.As the kasa is *Aamashya Samudhbhava Vyadhi*, So here I am going to study and treat *kapaj kasa* by concentrating on *Aam Pachan & Strotovibhndhanasha in Aamashaya*. The present case study is successful Ayurvedic management of a case of *kaphaj kasa*. A 46 year old male patient came to us with chief compliant of *Kasa Vega, Kaphaj Shtivan, Shirogawravata, Pinas, Kshudhamandya, and Angamarda*. Which get relief within 7 days with *Lawangadi Samashrkara Choorna*.

**KEY WORD:** *Lawangadi Samashrkara Choorna, kaphaj kasa.*

### INTRODUCTION:

Ayurveda is a stream of medicine which exists time memorial.it has stood the test of time. If one goes through the Ayurvedic literature, one gets impressed with the knowledge. Ayurvedic Vaidys had, Right from anatomy to the research in various sections of medicine. The Ayurveda has not only has curative drug but have described prevention of diseases and have advised importance of promotive heath.

Modern science cough is the most frequent of all respiratory symptoms. But in all Ayurvedic texts Kasa is explained as independent disease. *Lawangadi Samashrkara Choorna is Kalpa Mention in Vangasen Smahita*. Which have all *Aam Pachak drvaya*. With concept of *Aam Pachana* it destroy *Strotorodha* and give relief in *kaphaj kasa*.

**A case report as follow :** The present case study is successful Ayurvedic management of a case of *kaphaj kasa*.

A 46 year old male patient came to us with chief compliant of –

1. *Kasa Vega*
2. *Kaphaj Shtivan*
3. *Shirogawravata*
4. *Pinas*
5. *Kshudhamandya*
6. *Angamarda*

Patient had above complaint since last **15 days**.

**History of personal illness:** The patient was normal **15 days** back. Since then patient have been suffering from *Kasa Vega, Kaphaj Shtivan, Shirogawravata, Pinas, Kshudhamandya, Angamarda*<sup>1</sup>. He had tried cough syrup and tablets, but nothing provided relief from his problem, then he

came to our hospital – Seth Sakharam Nemchand Jain Ayurvedic Rugnalaya in Kaychikitsa department OPD for Ayurvedic treatment.

**On Examination :**

Nadi (pulse) = 80/min., Mala (stool) = Vibandha, Mutra (urine) = Normal, Jeeva (tounge) = Eshatha saam, Agni = Kshudhamandya, Koshta = Madhyama, Prakriti

**Aushadhi Yoga: “LAWANGADI SAMASHARKARA CHOORNA<sup>2</sup>”.**

= kaph-pittaj. Shabda (speech) = Normal, Druka (eyes) = Normal, Akriti = Madhyama, Bala = Madhyama.

Raktadaaba (B.P) = 110/80 mm/Hg., Addiction = tobacco, Job = Pujari in Mandir.

**MATERIAL AND METHOD:**

**Material:** Management involve medications –

Sr. No.	Dravya	Latin Name	Useful Parts	Form	Quantity
1]	Lawanga	Syzygium aromaticum	Pushpakalika	Choorna	1 Part
2]	Jatifala	Myristica Fragrans	Beej	Choorna	1 Part
3]	Pipali	Piper Longum	Phal	Choorna	1 Part
4]	Marich	Piper Nigrum	Phal	Choorna	½ part
5]	Shunthi	Zingibar Officinale	Kanda	Choorna	16 part
6]	Mishari	---	Ekshuvikara	Choorna	Equal to quant. Of above Combination

- **Dose:** 1gm x Twice a Day,  
**Anupan:** Madhu,  
**Aushadhi Sevan Kala :** Aadhobhakta.  
**Route of Administration;** Oral

**METHODS**

**Center of Study:** Seth Sakharam Nemchand Jain Ayurved Rugnalaya Solapur

**Method of sampling& study design:** Simple randomized single case study.

**Result:** Clinical examination of the patients revealed regression of Kasa Vega, Kaphaj Shtivan, Shirogawravata, Pinas,

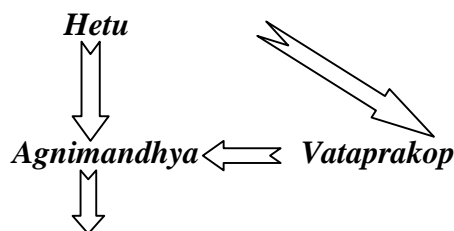
Kshudhamandya, and Angamarda **within 7 days.**

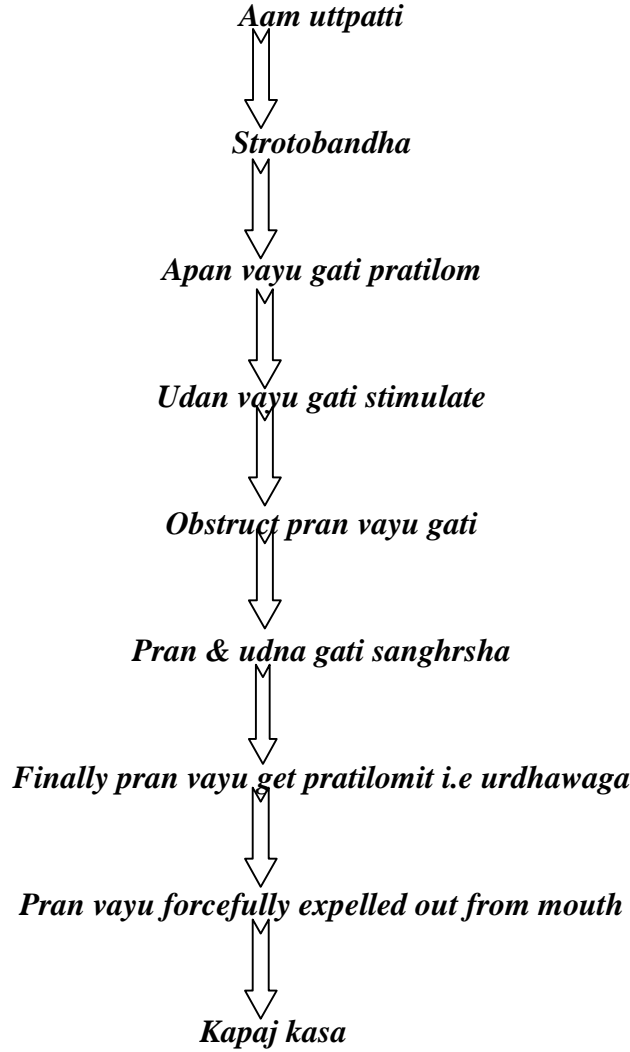
**DISCUSSION:**The patient has job of pujari in Mandir so most of time he have to seat with that he do *Diwaswap* (sleeping in day)<sup>3</sup>,this leads to *Hetu* of *kaphaj kasa* as -

- 1) *Ahar-* improper and irregular diet, Oily, spicy, sweet, fatty food causes the disturbance of tri-doshas.
- 2) *Vihar-* *Diwaswap* immediately after meal.
- 3) *Manasika Nidan-* *chinta, shoka, bhaya, santapa* and *udveg.*

**SAMPRATI**

**SAMPRAPTI OF KASA VYADHI<sup>4</sup>**





<b>Samprapti Ghatak</b>	<b>Details of Samprapti Ghatak</b>
<b>Dosha</b>	<i>Vata - Prana, Udana, Samana, Apana Pitta – pachak, Kapha - Kledaka Kapha, Avalambaka</i>
<b>Dushya</b>	<i>Rasa</i>
<b>Srotasa</b>	<i>Pranvaha, Annavaha, Rasavaha, Raktavaha.</i>
<b>Srotodushti prakara</b>	<i>Sanga, Margavarodha</i>
<b>Agni</b>	<i>Jatharagni, dhatwagni</i>
<b>Ama</b>	<i>Pachakapitta-dushtijanya &amp; Rasadhatwagnijanya</i>
<b>Udbhavastana</b>	<i>Amashaya</i>
<b>Sanchara sthana</b>	<i>Rasayani and Pranavaha srotas</i>
<b>Adhishtana</b>	<i>Pranavaha srotas (Urat and Kantha)</i>
<b>Rogmarga</b>	<i>Abhyantara and Madhyama</i>
<b>Swabhava</b>	<i>Ashukari and Chirakari</i>

The *hetu* of this disease produces *Aam* (i.e undigested food) which causes *Agnimandya*. This *Aam* also cause *Strotobandha* in *Aamashya*, producing *Aapan Vayu Dushti*. Generally *Aapan Vayu* has *Adhogati* but due to *Strotobandha* it has to go *udhawa gati*. The *Apana* adds to

**Samprati-Bhanga :**

the power of *urdhawa gati* of *udaana* .At this stage *udana* and *apana* jointly resist the regular *adho gati* of *prana*, and this produces *kasa*. In short i feel that the aetiology of *kasa* start from *Aamashya* and further extend to the respiratory track.

<i>Name</i>	<i>Rasa</i>	<i>Veerya</i>	<i>Vipak</i>	<i>Guna</i>	<i>Doshagnata</i>	<i>Karmukata</i>
<b>LAWANGA</b> <sup>5</sup> ( <i>Syzygium Aromaticum</i> )	<i>Tikta-katu</i>	<i>Sheet</i>	<i>Katu</i>	<i>Laghu, Snigdha, tikshana</i>	<i>Kapha-pit-taghna</i>	<i>Dipana, Pachna, Kasahar, Kaphapittashamak, Ruchya</i>
<b>JATIFALA</b> <sup>6</sup> ( <i>Myristica Fragrans</i> )	<i>Katu, Tikta</i>	<i>Ushna</i>	<i>Katu</i>	<i>Laghu, tikshna, ushana</i>	<i>Va-takaphanasak</i>	<i>Mukhavairasyahar Maladrugandhaha Krushnatahar, Grahi, Swarya</i>
<b>PIPLAI</b> <sup>7</sup> ( <i>Piper Longum</i> )	<i>Katu</i>	<i>Anushna</i>	<i>Madhur</i>	<i>Laghu, Snighatikshana</i>	<i>kapha-Vata shamak</i>	<i>Deepan, Mrudu virechana, Vatanulomana</i>
<b>MARICH</b> <sup>8</sup> ( <i>Piper Nigrum</i> )	<i>Katu</i>	<i>Ushna</i>	<i>Katu</i>	<i>Laghu, tikshna, ushana</i>	<i>Va-takaphanasak Pittavardhak</i>	<i>Deepan</i>
<b>SHUNTHI</b> <sup>9</sup> ( <i>Zingibar Officinale</i> )	<i>Katu</i>	<i>Ushana</i>	<i>Madhur</i>	<i>Laghu, Singdha</i>	<i>Va-takaphaphasha mak</i>	<i>Deepan, Pachan</i>
<b>SEETA</b> <sup>10</sup> ( <i>Sugar</i> )	<i>Madhur</i>	<i>sheet</i>	<i>Madhur</i>	<i>Singdha, Guru, Sheet, Sara</i>	<i>Rkata-pit-taghna</i>	<i>Vrusha, dahahara, chardhighn, shinshtghna, Prasadini.</i>

**CONCLUSION**

Since the Available medicine in market for *kaphaj kasa* has limitation in other pathies like mild to mod sedation etc, the unique

combination of simple Ayurvedic herbs- *Lawangadi Samashrkara Choorna* can be effective in *kaphaj kasa*.

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