



Research Article

“CRITICAL REVIEW ON TAMAKA SHWASA - AN AYURVEDIC VIEW”

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ABSTRACT

Now a days Shwas (Asthma) is one of the major disease that causes more medical emergencies. There are many risk factors which triggers this disease. It is also caused by combination of genetic and environmental factors. *Charakacharya* while mentioning *Chikitsa* of *Tamakshwas* has pulled on attention all over vyadhis by quoting that among all the diseases how *Shwas Vyadhi* can be fatal, if not treated in appropriate time. The fatality of *shwas* has been explained by comparing its severity with Snake Venom. Among thousands of diseases mentioned in *ayurvedic* literature, *Shwas*, *Hikka* are the fatal one and are explained to be *Sadya pranahar*. *Ayurvedic* texts have mentioned various types of *Shwasa*. On the basis of clinical features, *Tamaka Shwasa*, a subtype of *Shwasa Roga* is considered as *Yapya* (palliative). This type is not only difficult to treat but also has a repetitive nature. Therefore, it is necessary to understand pathophysiology for proper management of *Tamaka Shwasa*. Present paper highlights various etiological factors, pathogenesis, and symptoms of *Tamaka Shwasa*.

Keywords : *Shwasa, Tamaka Shwasa.*

INTRODUCTION

Acharya Charaka emphasizes the role of *Vayu* in physiological functioning of the bodily elements and pathological manifestations of diseases as well¹. If *Vayu* maintains its equilibrium, health will be maintained and, if it gets vitiated, diseases gets established. *Shwasa* is one of such diseases, which manifests in *Pranavaha Srotas* with the derangement of *Prana Vayu*. In *Shabdakalpadruma* and *Vachaspatyam*, *Shwasa*² = ‘*Shwas*’ *Dhatu* by applying ‘*Ghanj*’ *Pratyaya* It has two meanings, *Vayu Vyapara* i.e. as a physiological phenomenon and *Roga Bheda* i.e. as a pathological manifestation.

Shwasa may appear as an individual disease termed as *Swatantra Vyadhi* in *Ayurveda* or sometimes it may appear as a symptom of other diseases and as long as it exists secondary, it is termed as *Paratantra Vyadhi*. If *Vata*, predominantly associated with *Kapha*, obstructs the channels of circulation and circulates all over the body, then being itself obstructed in the circulatory use this aggravated *Vayu* causes *Shwasa*³. On the basis of clinical features⁴ *Shwasa* can be classified into five types viz.

- *Maha Shwasa*,
- *Urdhva Shwasa*,
- *Chinna Shwasa*,
- *Tamaka Shwasa* and



- *Kshudra Shwasa.*

AIMS AND OBJECTIVES

- To review *Tamak Shwasa* from available various *samhitas*, various texts, journals and its allied modern literature.

MATERIAL AND METHOD:

Various Ayurveda *samhitas* with their commentaries by different authors, various text books, journals, dissertations, web search and peer reviewed journals were revised to acquire the present knowledge of this topic. All Compiled matter is reorganized and critically analysed for the discussion and attempt has been made to draw some fruitful conclusions.

LITERATURE REVIEW:

DERIVATION OF TAMAKA:-

1. This word is derived from the *dhatu* 'Tam glanou' which means sadness (Panini)
2. The word Tamaka is derived from the root 'Tam' means oppression of chest (Monier Williams)
3. The Sanskrit English dictionary by Vidyadhar Vamana (1926) shows the different meanings of Tam i.e., to choke, to be suffocated, to be exhausted, to be unease, to be distressed.

ETYMOLOGY OF TAMAKA SHWASA:-

Tamaka etymologically means,

- (a) *Tamyati iti Tama* – feeling of darkness.
- (b) *Adarsha Hindu Shabdakosh* by Pandit Ram Chandra Pathaka has given the following meanings for *Tamak* - *Udvega*, *Tivrata*, *Krodha*, *Tosha* and a type of *Shwasa Roga*.

Shwasa- The word shwas is derived from 'shwas' *dhatu* with 'ghanj' *pratyaya*. *Shabda kalpadrum* explains that the word *Shwasa* in noun denotes *vayu* (air) and the verbal form indicates Respiration or *Shwasan kriya*. Hemachandra - In his commentary has used the word 'shwasitam' as synonym for 'prana'. In Halayudh kosha, the word *Shwasa* originated by adding 'lut' *pratyaya* to 'shwas' *dhatu*.

DEFINITION OF SHWAS:-

Shwasa word is used to denote respiration (both inspiratory and expiratory phases) and exchange of air in the body. So, the *Shwas vyadhi* may be defined simply as a disease in which the respiration and exchange of air is disturbed.

- 1) Sushruta has mentioned the detailed definition of *Shwas roga* in *Uttara Tantra*.

“विहाय प्रकृति वायु प्राणो अथ कफसंयुक्ताश्वास्यत्यूऽर्ध्वर्गो भूत्वा तं श्वासं प्रचक्षते॥“ (सु.उ.५१/४)

- 2) According to Dalhana:-

“प्राणो वायुः प्रकृति विहाय विगुणो भूत्वेत्यर्थः उर्ध्वर्गो भूत्वा तथा कफसंयुतः सन् तथा श्वासयति तं बुधा श्वासं परिचक्षते कथयन्ति“

On the basis of above definition it is clear that when the *Prana Vayu* is not performing its normal physiological functions (vitiated) and become defiles (*viguna*); obstructed by *Kapha* and moves upwards i.e., unable to function properly, then the condition is known as *Shwas roga*. This definition seems to be very scientific and describes all the aspects of dyspnoea.

CLASSIFICATION OF SHWASA:-

As per Shushrut Uttarsthana. 51/5 Shwas is classified into five types



1. *Maha Shwas* (Predominantly *Vata*)
2. *Urdhva (Kaphavataj)*
3. *Chinna (Kaphavataj)*
4. *Shudra (Vataj)*
5. *Tamak Shwas (Kaphavataj)*

❖ *Tamak Shwas* has two variants

- A. *Pratamaka*
- B. *Santamaka*

NIDANA:-

Nidana can be categorized in the three types:

Dosha Prakopaka Nidana: various etiological factors appertaining to *Ahara* and *Vihara* have been enumerated in (Table 1 & 2).

Khavaigunya karaka Nidana: these are mainly *Raja*, *Dhuma*, *Abhighata* and due to improper treatment of other disease like *Rajayakshma*.

Vyanjaka Hetu (Aggravating factors): *Vyanjaka Hetu* is stimulating, precipitating or aggravating cause. It also causes aggravation of the symptoms in an already established disease.

Table 1: Etiological factors related to Ahara ^{5,6,7,8,9}

S. No	Ahara	C.S.	S.S / Ma. Ni	A.S	A.H
<i>Vataprakopaka</i>					
1	<i>Rukshanna</i> (fat free diet)	+	+	-	-
2	<i>Vishamashana</i> (irregular diet)	+	+	-	-
3	<i>Shitashana</i> (cold food)	-	+	-	-
4	<i>Anashana</i> (fast)	-	+	-	-
5	<i>Vishasevana</i> (Incompatible)	+	+	-	+
6	<i>Shitaambu</i> (cold water)	+	+	+	+
7	<i>Vishtambhibhojana</i> (slowly digested food)	+	+	-	-
8	<i>Adhyashana</i> (frequent meals)	-	+	-	-
<i>Kaphaprakopa</i>					
9	<i>Masha</i> (black gram)	+	-	-	-
10	<i>Nishpava</i> (beans)	+	-	-	-
11	<i>Pinyaka</i> (tila paste)	+	-	-	-
12	<i>Pishthabhojana</i> (paste preparation)	+	-	-	-
13	<i>Jalajamansa</i> (aquatic fish)	+	-	-	-
14	<i>Gurubhojana</i> (heavy diet)	+	+	-	-
15	<i>Aamkshira</i>	+	-	-	-

16	<i>Dadhi</i>	+	-	-	-
17	<i>Anupapishita</i>	+	-	-	-
18	<i>Tila taila</i>	+	-	-	-
19	<i>Abhishyandi anna</i>	+	+	-	-
20	<i>Shleshmal dravya</i>	+	-	-	-
21	<i>Utkledi ahara</i>	-	-	+	+

Table 2: Etiological factors related to Vihara

S. No	Ahara	C.S.	S.S / Ma. Ni	A.S	A.H
<i>Vataprakopaka</i>					
1	<i>Rajas</i>	+	+	+	+
2	<i>Dhuma</i>	+	+	+	+
3	<i>Vata</i>	+	+	+	+
4	<i>Ahita sthana sevana</i>	+	+	-	-
5	<i>Shitambu</i>	+	+	+	+
6	<i>Vyayama</i>	+	+	-	-
7	<i>Gramyasevana</i>	+	+	-	-
8	<i>Ati Apatarpana</i>	+	-	-	-
9	<i>Marmaghata</i>	+	+	-	+
10	<i>Bharavahan</i>	-	+	-	-
11	<i>Vegavidharana</i>	+	+	-	+
12	<i>Shuddhi atiyoga</i>	+	+	+	+
13	<i>Kantha pratighat</i>	+	-	-	-
14	<i>Urah pratighata</i>	+	-	-	-
15	<i>Aayasa</i>	-	-	-	+
16	<i>Jagaran</i>	-	-	-	+
<i>Kaphaprakopa</i>					
17	<i>Abhishyandaupachara</i>	+	-	-	-
18	<i>divaswapa</i>	-	-	-	+

PURVARUPA (Prodromal Symptoms):-

When the vitiated *Doshas* begin to localize and affecting a particular organ or system, certain prodromal symptoms will start observe to before the full-fledged manifestation of the disease, which are noted in (Table 3)

Table 3: Prodromal Symptoms of *Tamaka shwasa* ^{10,11,12,13}

Sr no	Symptoms	C.S.	S.S	A.H	Ma. Ni
1	<i>Anaha</i>	+	+	+	+
2	<i>Adhmana</i>	-	-	-	+

3	<i>Arati</i>	-	+	-	-
4	<i>Bhakta dwesha</i>	-	+	-	-
5	<i>Vadanasya vairasya</i>	-	+	-	-
6	<i>Parsvasula</i>	+	+	+	+
7	<i>Pidanam Hrdayasya</i>	+	+	+	+
8	<i>Pranasya Vilomata</i>	-	-	+	+
9	<i>Sankha Nistoda</i>	-	-	+	+

RUPA (clinical features): -

Rupa means signs and symptoms of the disease. It appears in the 4th *Kriyakala* i.e. *Vyaktavastha* in which signs and symptoms of a disease are completely manifested. All the symptoms of *Tamaka Shwasa* described in Ayurvedic texts have been shown in the (Table 4).

Table 4: Clinical Features of *Tamaka Shwasa*^{14,15,16,17}

Sr no	Symptoms	C.S.	S.S	A.H	Ma. Ni
1	<i>Peenas</i>	+	-	+	+
2	<i>Tivra Vega Shwasa</i>	+	-	+	+
3	<i>Prana Prapeedaka Shwasa</i>	+	-	+	+
4	<i>Kaasa</i>	+	+	+	+
5	<i>Muhurmuhu Shwasa</i>	+	-	+	+
6	<i>Ruddha Shwasa</i>	+	-	-	+
7	<i>Ghurghuratwam</i>	+	+	-	+
8	<i>Kasati Vegatah Pratamyati</i>	+	-	-	+
9	<i>Kasate Sanniruddhyate</i>	+	-	-	+
10	<i>Kasate Muhu-Muhu Pramohanam</i>	+	-	+	+
11	<i>Shleshma Vimokshante Muhurtam Sukham</i>	+	-	+	+
12	<i>Shleshma Amuchyamane Bhrisama Bhavati Dukhitam</i>	+	-	-	+
13	<i>Kanthoadhvasanama</i>	+	-	-	+
14	<i>Greeva Shiraso Sangrahanama</i>	+	-	+	+
15	<i>Kricchata Bhasitam</i>	+	-	-	+
16	<i>Shayante Shwaspiditam</i>	+	+	+	+
17	<i>Shayante Parshva Graha</i>	+	-	-	+
18	<i>Mahat Ghoshavan Shwasa</i>	-	+	-	+
19	<i>Sakapha Shwasa</i>	-	+	-	-
20	<i>Kaphe HineShamyati</i>	-	+	-	-
21	<i>Urah Pida</i>	-	-	+	+
22	<i>Parshva Pida</i>	-	-	+	-
23	<i>Trit</i>	-	+	+	-
24	<i>Sweda</i>	-	+	+	-

25	<i>Vamathu</i>	-	+		-
26	<i>Moha</i>	-	-	+	-
27	<i>Lalate Sweda</i>	+	-	+	+
28	<i>Vishushkasyata</i>	+	-	+	+
29	<i>Ucchritaksha</i>	+		+	+
30	<i>Pratamyate</i>	+	-	-	+
31	<i>Bhrisham Aratimana</i>	+	-	-	+
32	<i>Annadvesha</i>	-	+	-	-

SAMPRAPTI (pathogenesis)^{18,19,20,21:} -

In *Shwas roga*, the basic pathogenesis is initiated by the diets and habits which provoke *Kapha*. *Mithya aahar* and *vihar* leads to *agnimandya* which causes production of *Aam*. Vitiated *Kapha* in the *Pittasthana* (Lower part of the *amashaya*) circulate in the body as *Aam*. *Aam Dosha* can also circulate in the body following certain diseases like *Jwara*, *Vamathu*, *Amatisara* and *Visuchika*. On the other hand, aggravation of the *Vata* either by the diet and habits or by the systemic diseases like *kshaya*, *urakshata*, *pandu* or *pratishyaya* also make the triggering effect for the *pranavaha sroto vaigunya*. This *Aam* combines with the *Vata* vitiated by *Nidan sevan* and creates *aavarana* in *strotas* obstructing *Dhatu-abhivahan*. The Airway inflammation in asthma may be due to this *Sama Vata*, which creates *shopha* in the *strotas*.

This *Sama Vata* agitates the *sthanik kapha dosha* in the *uras*, so causing *Aashayapkarshan* of *Kapha* from the other parts of the body, dries it up within the channel forming *sanga-mucus* plug causing the obstruction. The *aavarana* of *Kapha* produces *nihshwas ucchvasa sangrah* which is *Pratyatma linga* of *Tamakshwas*. Whether *Sama Kapha* obstructs the *prakrut gati* of *Vata* causing vitiation of *Vata* (*Margavarodhjanya samprapti-shleshmapradhan*) or vitiated *Vata* causing *Kapha upshoshan* and *Aashayapkarshan* of *Kapha* (*Kshayjanya samprapti-vatapradhan*), pathophysiology results in *pranavaha srotodushti*. On the other hand due to improper formation of *rasa dhatu*, further *dhatus* are not formed in their *prakrut avastha*. In this process *rakta dhatu* also undergo *vikrutavastha*. *Stroto vaigunya* can also directly result from suppression of natural urges like *udgara*, *adhovata*, *kapha* and *chardi*. Physical exertion can also contribute to the *Pranavaha Sroto vaigunya*. The functional derangement of *Pranavaha srotas* will be accentuated to a full-fledged *sroto dusti* by the interaction of any of the precipitating causes like dust, smoke, wind, *marmaghata* and use of excessive cold water. Once the *Srotodusti* is occurred the *Prana vayu* gets abnormal by the *sanga* and *Vimargagamana* which results in *pranavaha srotodushti lakshan*. This in turn is manifested as *Shwas roga*. In *shwas vyadhi* there is *Pranavaha*, *Udakavaha* and *Annavaha srotodushti* and *Kapha* and *Vata prakopa*. *Prakupita Vayu* enters *Pranavaha srotas* and it causes *sthanbhransh* of *Urastha Kapha* which disturbs the *mrudutva*, *snigdhatva* and *sthiratva guna* of *prakrut kapha*. Due to vitiated *vayu* there is *Rukshata*, *kathinya* and *sankoch* of *Pranavaha strotas*. *Prakupit Urastha Vayu* dries up *kapha* in *Pranavaha srotas* which leads to *Margavroth*. The *Aam kapha* formed in *aamashaya* further moves to *Pranavaha srotas* due to *Aashayapkarshan*. This *Aam kapha* further causes *Margavroth* or *Bronchoconstriction* in *Dushit Pranavaha Srotas*. This resists the normal flow of *Prana vayu* i.e *Adhogami*, *Prana vayu* becomes *Vimargagami* i.e *Urdhvagami*. The Function of *Pranavaha srotas* of gaining external air, O₂-CO₂ exchange and nurturing the cells is hampered. The *Dushti* of *Aamashayastha Kledak Kapha* is the main cause of *Shwas Vyadhi* as due to vitiated *Kledaka kapha*, the *avalambak kapha* in *Urah* is vitiated which leads to *shwas vyadhi*. Hence *Aamashay is Udbhavasthana and Urah is Adishthan of shwas vyadhi*. The entire *Pranavaha Srotas* is affected in *Shwas vyadhi* so it is *Sanchar kshetra* of *Shwasvyadhi* and *Hrudaya*, *Kantha*, *Shir*, *Nasa*, *Mahastrotas* are *vyaktisthana* of *Shwas Vyadhi*.

1. **Dosha** – *Kapha* –*kledaka* and *Avalabaka Kapha*.

Vata – especially prana vayu, then Udana, Apana, Samana and Vyana are also affected in their due course.

2. Dushya – Rasa Dhatus

3. Srotas – Pranavaha Srotas, Annavaha Srota, Udaravaha Srotas

4. Type of Srotodusti – Sanga, vimarga gamana

5. Adhisthana – Urah Pradesha (phuphusa)

6. Udbhava sthana – Amashaya (Vagbhata), Adho Aamashay (Chakrapani), Pittasthana (Charak)

7. Roga Marga – Abhyantara

8. Agni - Mandagni, Vishamagni, Aam- Rasa dhatvagnimandya.

CHIKITSA (treatment): -

In the classical texts of *Ayurveda*, the approach of treatment has been made in the following way. *Chikitsa* of *Shwasa* depends upon the *Dosha* involved and physical state of patient. On the basis of *Dosha* status and physical state, the patients can be classified as follows:

1. **Samsodhana**²²: Acharya Charaka emphasized that patient of strong built and with the dominance of *Kapha* should be treated with *Samsodhana* therapy, i.e. *Vamana* and *Virecana* as per the case.
2. **Samshamana**²³: Acharya Charaka emphasized that not strong built, children, old patient of and with the dominance of *Vata* should be treated with *Samshamana* therapy. The scope of *Samshamana* therapy in this disease is more wide and practical, which is applicable in all stages. For the patients, who are not eligible for *Samsodhana* karma (*Durbala*), *Samshamana* therapy should be adopted. *Samshamana* therapy in this case includes *Dipana*, *Pacana*, *Kapha-Vata Shamaka* drugs and regimen along with drugs that purify *Pranavaha Srotas*. Children and old subjects are also managed with *Samsamana* therapy.
3. **Nidana Parivarajan**²⁴: In all the four types of patients for the treatment, *Nidana Parivarajan* or avoidance of all types of precipitating or predisposing factors are to be strictly followed. If the precipitating or predisposing factors are not avoided, the *Doshas* involved in the pathogenesis will further be aggravated and the prognosis will be worse.

Pathyapathy

1. **Pathya Varga**²⁵: *Purana Shastik*, *Rakta Shali dhanya*, *Godhuma*, *Yava*, *Mudga*, *Meat of Shashaka*, *Peacock*, *Lava*, *Kukkuta* etc, *Kantakari*, *Jeevantisaka*, *Bimbiphala*, *Truti (sukshma Ela)*, *Marica*, *Shunthi*, *Draksha*, *Lashun*, *Puranaghrita*, *Ajadugdha*, *Ajaghrita*, *Gomutra*, *Sura*, *Udaka* (hot water), *Madhu*, etc.
2. **Apathya Varga**²⁶: *Masha*, *Anupa mamsa* (fish), *Manda Shaka* (potato), *Masha*, *Dugdha*, *Dadhi*, *Tail*, etc. as *Ahara*. Suppression of *Mutra vega*, long journey, lifting heavy weight, *Chinta* etc as *Vihara*.

CONCLUSION :

Survey of available literature points out that, vitiation of *Vata*, *Kapha Dosha* along with *Pranavaha*, *Udaravaha*, *Annavaha* and *Rasavaha Srotas* are the responsible factors in the manifestation of disease – *Tamaka Shwasa*. The disease *Shwasa* has its root in the *Pitta Sthana* endorsed by *Amashayodhabhavaja Vikara*. Despite having same vitiated *Samprapati Ghataka*, genesis of disease *Shwasa* occurs through various steps termed as *Samprapati*, depending upon aetiology, vitiation of *Doshas* and status of *Agni* etc. The pathogenesis of *Shwasa* primarily involves vitiation of *Vata Dosha* in all over body. This vitiated *Vata* which is located in *Urahasthana* ultimately creates *Rukshta*, *Sankocha* and *Kharata* in *Pranavaha Srotas*. Then this vitiated *Vata* interferes with the normal *Kapha* in *Urahasthana* which leads to *Vilomata* of *Pranavayu* through obstruction to its natural movement by *Kapha*. Many times *Kapha* gets vitiated independently or through *Rasa Dhatwagni Mandya* its *Mala* i.e. *Kapha* get



located in *Urahsthana* and cause obstruction to normal movement of *Vayu* which end up with *Vilomata* of *Vayu*. In another type, both *Vata* and *Kapha* get vitiated independently along with production of *Amavisha*. This contributes to the origination of *Shwasa*. These three pathways of *Samprapti* results in *Shwasa* with slight variation in signs and symptoms. *Acharyas* have advised the use of *Vatakaphaghna*, *Ushna*, *Vatanulomaka* drugs as a first line of treatment in *Tamaka Shwasa*. But adoption of certain specification is always required for the breakdown of these three pathways of *Samprapti*. Also drugs exhibiting quick control over vitiated *Vata* and *Kapha* are required during *Vegavastha*, while having action on *Agni* or *Pittasthana* along with *Vatakaphaghna*. Hence, logically, the drug administered for the treatment of *Tamaka Shwasa*, should be able to overcome *Vata* and *Kapha* for immediate and symptomatic relief but should also pacify the *Pitta* for relief.

REFERENCES

1. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Sutra Sthan, 12th Chapter, Verse 8, Volume 1st, 1st Sedition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 189.
2. Raja Radhakantadev Bahadur, Shabdakalpadruma, Volume 5, Third Edition 1967, The Chaukhambha Sanskrit Series Office, Varanasi, Pg. No. 178.
3. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 45, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 452
4. Dr. Anantram Sharma, Sushrut Samhita Edited With Sushrutvimarshini Hindi Commentary, Uttartantra, 51st Chapter, Verse 5, Chaukhamba Surbharati Prakasan, Varanasi, Pg. No. 424
5. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 11-16, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 446.
6. Dr. Anantram Sharma, Editor, Sushrut Samhita Edited With Sushrutvimarshini Hindi Commentary, Uttartantra, 50th Chapter, Verse 3-5, Chaukhamba Surbharati Prakasan, Varanasi, Pg. No. 416
7. Dr. Bramhanada Tripathi, Madhavanidana Roga vinichyaya of Shri Madhavakara with the Sanskrit commentary Madhukosha by Vijayarakshita and kanthadatta, Volume 1st, Chapter 12th, Verse 1-3, Chaukhamba Surbharati Prakashan, Varanasi, Pg. No. 374-375
8. Dr. Shivprasad Sharma, Ashtangasamgraha of Vriddhavagbhata with Sashilekha Sanskrit commentary by Indu, prologue in Sanskrit and English by prof. Jyotir Mitra, Nidana Sthana, chapter 4th, verse 6, 2nd edition 2008, Chaukhamba Sanskrit Series office, Varanasi, Pg. No. 371
9. Dr. Brahmanand Tripathi, Editor.Astang Hridayam, Nirmala Hindi Commentary, Nidana Sthana, 4th Chapter, Verse 1-2, Varanasi Chaukhambha Sanskrit Prathistan, Reprinted On 2013, Pg. No. 454.
10. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 11-16, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 446.
11. Dr. Anantram Sharma, Sushrut Samhita Edited With Sushrutvimarshini Hindi Commentary, Uttartantra, 51st Chapter, Verse 6, Chaukhamba Surbharati Prakasan, Varanasi, Pg. No. 424



12. Dr. Brahmanand Tripathi, Editor. Astang Hridayam, Nirmala Hindi Commentary, Nidana Sthana, 4th Chapter, Verse 4-5, Varanasi Chaukhambha Sanskrit Prathistan, Reprinted On 2013, Pg. No. 455.
13. Dr. Bramhanada Tripathi, Madhavanidana Roga vinichyaya of Shri Madhavakara with the Sanskrit commentary Madhukosha by Vijayarakshita and Kanthadatta, Volume 1st, Chapter 12th, Verse 16, Chaukhamba Surbharati Prakashan, Varanasi, Pg. No. 385
14. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 55-62, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 454.
15. Dr. Anantram Sharma, Sushrut Samhita Edited With Sushrutvimarshini Hindi Commentary, Uttartantra, 51st Chapter, Verse 8-10, Chaukhamba Surbharati Prakasan, Varanasi, Pg. No. 424
16. Ma Ni 12/27-34 Dr. Bramhanada Tripathi, Madhavanidana Roga vinichyaya of Shri Madhavakara with the Sanskrit commentary Madhukosha by Vijayarakshita and Kanthadatta, Volume 1st, Chapter 12th, Verse 27-34, Chaukhamba Surbharati Prakashan, Varanasi, Pg. No. 390
17. Dr. Brahmanand Tripathi, Editor. Astang Hridayam, Nirmala Hindi Commentary, Nidana Sthana, 4th Chapter, Verse 6-10, Varanasi Chaukhambha Sanskrit Prathistan, Reprinted On 2013, Pg. No. 455.
18. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 17, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 447.
19. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 8, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 445.
20. Dr. Anantram Sharma, Sushrut Samhita Edited With Sushrutvimarshini Hindi Commentary, Uttartantra, 51st Chapter, Verse 4, Chaukhamba Surbharati Prakasan, Varanasi, Pg. No. 424
21. Dr. Brahmanand Tripathi, Editor. Astang Hridayam, Nirmala Hindi Commentary, Nidana Sthana, 4th Chapter, Verse 3, Varanasi Chaukhambha Sanskrit Prathistan, Reprinted On 2013, Pg. No. 454.
22. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 89, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 460.
23. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 90, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 460.
24. Vd. Harish Chandra Singh Kushwala, Editor-Translator Charak Samhita, Chakrapanidutta, Ayurved Dipika Hindi Commentary, Chikitsa Sthaan 17th Chapter, Verse 138, Volume 2nd, 1st Edition 2009, Varanasi Chaukhambha Orientalia, Pg. No. 467.
25. Vd. Laxmipati Shashtri, Editor, Yogaratnakar, Vidyotani Hindi Commentary, Shwasa Chikitsadhikar, Pathyapathy, Edition 2005, Chaukhamba Sanskrit Sansthan, Varanasi, Pg. No. 435.



26. Vd. Laxmipati Shashtri, Editor, Yogaratnakar, Vidyotani Hindi Commentary, Shwasa Chikitsadhikar, Pathyapathya, Edition 2005, Chaukhamba Sanskrit Sansthan, Varanasi, Pg. No. 435.

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