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"ROLE OF MURVADI AGAD IN GARAVISHA JANYA TAMAK SHWASA: A SINGLE CASE STUDY"

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Abstract:

Tamaka Shwasa is a chronic respiratory disorder predominantly involving Vata and Kapha Dosha and closely resembles Bronchial Asthma in contemporary medicine. Increasing exposure to environmental pollutants, industrial chemicals, cosmetic products, incompatible dietary habits, and synthetic substances contributes to chronic respiratory ailments. Ayurveda describes the cumulative harmful effects of such exposures under the concept of Garavisha. Management directed towards eliminating Garavisha and correcting the underlying pathology may offer better therapeutic outcomes.

Aim-To evaluate the efficacy of Murvadi Agad in the management of Garavisha Janya Tamaka Shwasa.Case PresentationA 42-year-old female beautician presented with recurrent breathlessness, wheezing, dry cough, chest heaviness, and sleep disturbance. Long-term occupational exposure to cosmetic chemicals, perfumes, aerosols, dust, and pollution was identified as the probable Garavisha Nidana.Intervention-Murvadi Agad 2.5 g twice daily with lukewarm water after meals for 30 days.ResultsSignificant improvement was observed in both subjective and objective parameters. PEFR increased from 250 L/min to 380 L/min, while Absolute Eosinophil Count reduced from 620 cells/mm³ to 340 cells/mm³. Marked reduction in breathlessness, wheezing, cough, nocturnal symptoms, and frequency of attacks was observed.

Conclusion

INTRODUCTION

Tamaka Shwasa is one of the important diseases of the Pranavaha Srotas and has been well described in Ayurvedic classics. It is characterized by recurrent episodes of Ghurghuraka (wheezing), Shwasa Kashtata (dyspnea), Kasa (cough), chest tightness, and difficulty in comfortably lying down. Vata and Kapha Dosha primarily cause Tamaka Shwasa leading to obstruction of Pranavaha Srotas, annavaha Srotas and impaired movement of Prana Vayu. Due to its chronic, recurrent, and inflammatory nature, Tamaka Shwasa closely resembles Bronchial Asthma described in modern medicin.

Agadtantra is a specialized branch of Ayurveda which deals with Visha(poisons) and its treatment. (1) Ayurveda mentioned two types of visha viz, sthavar and jangama.Also , two types of visha are mentiones as dushi visha and gara visha.Garvisha is defined as the visha prepared by savisah Avisha or hinvirya substances. (2) Recenlty rapid industrialization, environmental pollution, and increased exposure to chemical irritants have significantly increased the burden of chronic respiratory disorders. Continuous exposure to aerosols, cosmetic chemicals, fumes from industries food preservatives, pesticides, and incompatible dietary practices adversely affects respiratory health. Ayurveda explains the harmful cumulative effects of such low-grade toxic exposures through the concept of Garavisha.

Garavisha is an artificial or cumulative poison produced from incompatible substances and repeated exposure to toxic materials. Unlike acute poisons, Garavisha acts slowly and produces chronic manifestations by causing Agnimandya, Ama formation, Dosha Vaishamya, and Srotorodha. When these pathological changes affect the Pranavaha Srotas, respiratory disorders such as Tamaka Shwasa may develop or worsen. As per chakrapani , the commentator of charak Samhita opines that garavisha is a combination arising out of savisha and nirvisha dravyas and is Chirkari and Roga janakakari. (3)

Murvadi Agad is a classical formulation described in Agad Tantra possessing Vishaghna, Deepana, Pachana, Kapha-Vata Shamaka, and Srotoshodhaka properties. By neutralizing toxic effects, digesting Ama, restoring Agni, and clearing respiratory channels, Murvadi Agad may provide a unique therapeutic approach in the management of Garavisha Janya Tamaka Shwasa. Therefore, the present case study was undertaken to

evaluate its clinical efficacy. Murvadi Agad is mentioned by Acharya vagbhatta in uttarshthana for the treatment for the treatment specifically for the diseases produced due to Garavisha. (4)

MODE OF ACTION OF MURVADI AGAD

1. Garavisha Hara Karma

Murvadi Agad possesses Vishaghna properties that help neutralize and eliminate accumulated Garavisha responsible for chronic respiratory irritation and hypersensitivity.

2. Deepana-Pachana Action

Long-term exposure to toxins causes Agnimandya and Ama formation. Murvadi Agad stimulates Agni and facilitates Ama Pachana, thereby breaking the disease process at its root.

3. Kapha Shoshana and Kapha Vilayana

Excessive Kapha obstructs Pranavaha Srotas resulting in wheezing and airway narrowing. Murvadi Agad liquefies and removes accumulated Kapha, improving airway patency.

4. Vata Anulomana

Obstruction of Vata by Kapha produces Shwasa Kashtata. By regulating the normal movement of Vata, Murvadi Agad relieves dyspnea and respiratory distress.

5. Srotoshodhana

The formulation clears Pranavaha Srotas by removing Ama, Kapha, and toxic metabolites, thereby restoring normal respiratory function.

6. Shothahara (Anti-inflammatory Action)

Reduction of Dosha-induced inflammation decreases bronchial irritation, wheezing, and airway hyperreactivity.

7. Rasayana Effect

Murvadi Agad improves Vyadhikshamatva (disease resistance), reduces recurrence, and enhances respiratory health.

AIM AND OBJECTIVES-

Aim

To check how effective Murvadi Agad is in managing Garavisha Janya Tamak Shwasa.

Objectives

- To see if the symptoms of Tamak Shwasa get better
- To look at changes in lab tests
- To study the role of Agad Tantra in breathing issues caused by harmful substances

CASE PRESENTATION-

Patient Information

Age and Sex: 42 years, female

Occupation: Beautician

Chief Complaints

- Difficulty in breathing for 3 years
- Wheezing happens often
- Dry cough for 1 year
- Chest feels heavy
- Trouble sleeping due to breathing issues

History of Present Illness

- Recurrent breathlessness got worse when around:
- Perfumes
- Cosmetic chemicals
- Closed spaces
- Seasonal changes
- Sometimes got relief with inhalers.
- Attacks became more frequent and severe in the last 10 days.

Etiological Factors (Garavisha Nidana)

- Constant exposure to cosmetic chemicals
- Frequent use of perfumes and sprays
- Irregular eating habits
- Eating junk food
- Exposure to dust and pollution

Past History- No history of DM/HTN/TB

Personal History

- Appetite: Low
- Bowel: Constipation
- Sleep: Poor
- Addiction: None

Ashtavidha Pariksha-

Nadi : Kapha-Vata

Mutra : Samyaka

Mala : Malabadhata

Jivha : Saam

Shabda : Wheezing

Sparsha : Anushna

Drik : Prakrita

Akruti : Madhyama

Systemic Examination

Respiratory System- Wheezing on both sides

Central Nervous System- Patient is conscious and aware

INVESTIGATION-

PEFR: Day 1- 250, Day 15- 310, Day 30- 380.

DIAGNOSIS- Garavishajanya Tamaka Shwasa

TREATMENT PROTOCOL

Murvadi Agad

- Dose: 2.5 grams twice a day for 30 days
- With lukewarm water
- Taken After meals

Diet and Lifestyle

- Warm water
- Light, easy-to-digest food
- Avoiding chemical exposure

RESULT-

Table 1: Objective Parameters Before and After Treatment

Parameter	**Before Treatment (Day 1)**	**After Treatment (Day 30)**
PEFR (L/min)	250	380
AEC (cells/mm^3)	720	450
TLC (/mm^3)	9200	9400
ESR (mm/hr)	60	28

PEFR: Peak Expiratory Flow Rate; AEC: Absolute Eosinophil Count; TLC: Total Leucocyte Count; ESR: Erythrocyte Sedimentation Rate

A graded scoring system was used for subjective parameters as below**:**

Severity score	**Interpretation**
0	Absent
1	Mild
2	Moderate
3	Severe

Table 2: Subjective Parameters Before and After Treatment

Parameter	**Before Treatment (Day 1)**	**After Treatment (Day 30)**
Shwasa Kruchhata (Breathlessness)	3	1
Kasa (Cough)	2	0
Shwasa Vega (Frequency of Respiratory Distress)	3	1
Anidra (Sleep Disturbance)	3	0
Parshwashoola (Chest Pain/Tightness)	2	0
Vak Kruchchata (Difficulty in Speech During Attack)	2	0

Subjective Improvement

- Breathing becomes easier
- Wheezing lessens
- Chest feels lighter
- Better sleep
- Fewer breathing attacks

Objective Improvement

- PEFR rises from 250 to 380

DISCUSSION

Garavisha Janya Tamaka Shwasa represents a chronic respiratory condition resulting from prolonged exposure to environmental toxins, synthetic chemicals, pollutants, and incompatible dietary practices. In the present case, occupational exposure to cosmetic chemicals, perfumes, aerosols, and environmental pollutants acted as major Garavisha Nidana. Repeated exposure to these factors likely produced Agnimandya, Ama formation, Kapha accumulation, and Vata aggravation.

The resulting Srotorodha in Pranavaha Srotas impaired the normal movement of Prana Vayu, leading to symptoms such as

breathlessness, wheezing, cough, chest heaviness, and disturbed sleep. This Ayurvedic pathogenesis shows a close resemblance to chronic airway inflammation, mucus hypersecretion, and bronchial hyperresponsiveness observed in Bronchial Asthma.

Murvadi Agad was selected because of its established Vishaghna, Deepana, Pachana, and Srotoshodhaka properties. The formulation appears to have acted by neutralizing Garavisha, digesting Ama, correcting Agnimandya, reducing Kapha accumulation, and restoring the normal movement of Vata. Its anti-inflammatory and channel-cleansing actions may have contributed to improved respiratory function and reduced airway obstruction.

The patient showed marked improvement in both subjective and objective parameters. Breathlessness, wheezing, cough, nocturnal symptoms, and frequency of attacks were significantly reduced. PEFR increased from 250 L/min to 380 L/min, indicating improved airway function and reduced bronchial obstruction. The reduction in eosinophil count from 620 cells/mm³ to 340 cells/mm³ further suggests decreased airway inflammation and hypersensitivity. These findings support the concept that management directed towards Garavisha elimination and correction of underlying pathogenesis can provide substantial clinical benefit in chronic respiratory disorders. The present case highlights the therapeutic potential of Agad Tantra beyond classical poisoning conditions and demonstrates the utility of Murvadi Agad in environmentally induced respiratory diseases.

CONCLUSION

Murvadi Agad demonstrated significant clinical efficacy in the management of Garavisha Janya Tamaka Shwasa. The formulation effectively reduced respiratory symptoms, improved pulmonary function, decreased eosinophilic inflammation, and enhanced overall quality of life. The findings suggest that Agad Tantra-based interventions may offer a promising and holistic therapeutic approach for respiratory disorders associated with chronic toxic exposure. Further clinical studies involving larger sample sizes are recommended to establish its efficacy and therapeutic scope.

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