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Ayurvedic Approach In The Management Of Vātaja Kāsa – A Clinical Case Study

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ABSTRACT:

Ayurveda, the ancient system of medicine, provides a holistic approach to disease management by balancing the Doshas and addressing the root cause of illness. Vātaja Kāsa, a type of Kasa Roga, primarily involves the vitiation of Vata Dosha, often associated with Kapha. It is characterized by dry, spasmodic cough, pain in the chest, hoarseness of voice, and fatigue. The condition is closely correlated with acute bronchitis in modern medicine, which involves inflammation of the bronchial mucosa leading to persistent coughing. This case study highlights the successful management of Vātaja Kāsa through the administration of Pippali Churna, a classical Ayurvedic formulation described for Kasa Roga. The therapy focused on Vata-Kapha pacification and enhancement of Agni (digestive fire), resulting in marked clinical improvement within 45 days.

KEY WORDS: Vātaja Kāsa, Acute Bronchitis, Pippali Churna, Vata Dosha, Ayurveda

INTRODUCTION:

Respiratory disorders are among the most common conditions affecting global health. Ayurveda classifies cough (Kāsa) as a major disease of the Pranavaha Srotas. Among its five types—Vātaja, Pittaja, Kaphaja, Kṣataj, and Kṣhaya Kāsa—Vātaja Kāsa arises due to vitiation of Vata Dosha. Improper diet, suppression of natural urges, excessive talking, fasting, and exposure to cold air are some causative factors. Clinically, it manifests as a dry, painful cough with chest discomfort, hoarseness, and fatigue. In modern parlance, it correlates with acute bronchitis, a condition characterized by cough with or without sputum, usually following upper respiratory infection.

PATHOPHYSIOLOGY / NIDANA PANCHAKA:

Nidana (Etiological factors): Excessive exposure to cold, dry foods, fasting, excessive talking, suppression of natural urges, and dust inhalation.

Purvarupa (Prodromal symptoms): Throat irritation, dryness of mouth, chest tightness.

Rupa (Symptoms): Dry cough, hoarseness of voice, pain in chest and head during coughing, fatigue.

Samprapti (Pathogenesis): Vitiating Vata Dosha moves upward into the Pranavaha Srotas, dries up the Kapha, and irritates the throat and respiratory passages, resulting in dry spasmodic cough.

Upashaya (Relieving factors): Warm decoctions, sneha (unctuous) therapies, and intake of medicated ghrilas and churna like Pippali Churna.

CLINICAL FEATURES:

- Dry, spasmodic cough
- Pain in the chest and head during coughing
- Hoarseness of voice
- Dryness of throat and mouth
- Fatigue and weakness
- Relief on taking warm liquids or sneha dravyas

CASE REPORT:

Chief Complaint: Recurrent dry cough, throat irritation, and chest discomfort for 2 months.

Associated Complaints: Fatigue and disturbed sleep due to frequent coughing.

History of Present Illness: A 38-year-old male presented with a dry, spasmodic cough, aggravated by cold exposure and talking. He had no history of chronic respiratory disease. The condition was diagnosed as Vātaja Kāsa and managed with Ayurvedic line of treatment.

Past History: No history of DM/HTN/TB.

Addictions: Nil.

Personal History: Vegetarian, irregular meals, and disturbed sleep.

GENERAL EXAMINATION:

Pulse: 80 bpm
RR: 22/min
BP: 120/80 mmHg
Temperature: 98.4°F
Height: 170 cm
Weight: 68 kg

ASTHAVIDHA PARIKSHA:

Nadi – Vatapradhan
Mutra – Prakruta
Mala – Ruksha
Jivha – Shushka
Shabda – Mandaghosha
Sparsha – Anushna
Druka – Prakruta
Akruti – Madhyama

TREATMENT PLAN:

Sr.No. | Name of Medicine | Dose with Anupana | Time of Administration

1. Pippali Churna | 5 gm twice daily with honey | After meals
2. Sitopaladi Churna | 3 gm twice daily with ghee | After meals
3. Yashtimadhu Kwatha | 40 ml twice daily | Before meals

OBSERVATIONS AND RESULTS:

Day 0: Dry cough, chest pain, throat irritation, and fatigue present.
Day 15: Reduction in throat irritation and cough frequency.
Day 30: Relief in chest pain and improved sleep.
Day 45: Almost complete relief in symptoms.

DISCUSSION:

Vātaja Kāsa primarily results from the aggravation of Vata leading to dryness and irritation in the respiratory tract. Pippali Churna, mentioned in classical texts for Kasa management, contains herbs like Vidanga, Pippali, Maricha, and Shunthi, which possess Deepana, Pachana, and Vata-Kapha Shamana properties. These help restore balance in Pranavaha Srotas, reducing spasmodic cough and improving respiratory comfort. Supportive formulations like Sitopaladi Churna and Yashtimadhu Kwatha further aided mucosal healing and voice clarity.

CONCLUSION:

Vātaja Kāsa, if treated early with proper Ayurvedic interventions, can be effectively managed. Pippali Churna proved beneficial in relieving symptoms such as dry cough, chest pain, and throat irritation. The holistic approach of Ayurveda focusing on Dosha balance, diet regulation, and lifestyle modification offers significant relief in acute respiratory disorders like Vātaja Kāsa.

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