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# NIDANA PARIVARJANA CHIKITSA IN TAMAKA SWASA VIS-À-VIS **BRONCHIAL ASTHMA**

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#### **ABSTRACT**

Tamaka Swasa is one among the most prevalent respiratory disorders which requires considerable addressing. It is one among the five types of Swasa rogas, as mentioned in the classical texts of Ayurveda. The science of Ayurveda talks about the concept of Nidana panchaka, i.e., the 5 factors that contribute towards the manifestation of a roga. Among these 5 factors, the first and the most fundamental factor is the Nidana, the etiology. Understanding of the Nidana plays a vital role in diagnosis of the Vyadhi. Once the Vyadhi is diagnosed using the Nidana panchaka, Acharyas mention the treatment protocols among which, Nidana parivarjana (avoidance of exposure to the causative agents) is the primary line of action. In case of *Tamaka Swasa*, too, avoiding exposure to the causative factors plays a pivotal role in the process of both remedying as well as in avoiding the recurrence and also in reducing the risk of further aggravation. In the current lifestyle and environmental factors, there is a greater level of exposure to the Nidanas of tamka Swasa such as Raja-dhooma, megha-ambu-sheeta- pragVata etc and hence, doing the Samprapti Vighatana at the very initial stage, by adopting Nidana parivarjana, can help in effective and positive clinical changes, contributing to lesser chances of aggression. Causative factors such as Adhaaraneeya vega Dharana, Rukshakara Ahara Vihara, Kapha vardhaka Ahara Vihara sevana etc., need to be addressed and controlled as a part of the Nidana parivarjana line of treatment. This step towards Nidana parivarjana, can greatly help in the competent and skillful management of *Tamaka Swasa*, vis-à-vis Bronhial asthma.

KEYWORDS: Nidana parivarjana, Tamaka Swasa, Swasaroga, Samprapti Vighatana, Nidana parivarjana in Tamaka Swasa.

#### INTRODUCTION

Acharya Charaka, in the Sutrasthanam 7<sup>th</sup> chapter clearly mentions that, those who do not follow the regimes of good health are prone to various kinds of rogas and hence, healthy individuals need to follow the Pathya and Apathyas as mentioned in the shastras to sustain their swasthyata.<sup>[1]</sup> Also, factors such as avoidance of prajnaparadha, possessing control over the indriyas, having good memory and bearing the awareness about the desha, kala, atma and following the regimes of sadvritta, can help in the prevention of Agantuja vydhis.<sup>[2]</sup> Awareness and assimilation of the prescriptions and instructions by the aptas will help in avoiding the manifestation of the Vyadhis.<sup>[3]</sup> These concepts of Roga anutpattikara Chikitsa form the basic foundation of the practical application of Nidana parivarjana Chikitsa. Nidana refers to the etiological factors of a particular Vyadhi, while parivarjana referes to the avoidance or something that is to be considered unwholesome for usage. Hence, the concept of avoiding exposure to the causative factors of a disease, as a part of the treatment protocol, is called as the Nidana parivarjana Chikitsa.

Tamaka Swasa is one among the uro gata Vyadhis, which afflicts the Pranavaha srotas. The Apathyakara and Vatakara Ahara and Vihara that one gets exposed to, causes the khavaigunya, which inturn causes vitiation and abnormality of the Pranavaha srotas. This leads to the Kapha vikruti which impacts the normalcy of the prana Vata, does avarodha and causes the pratiloma gati of the Vata Dosha and urdhwagamitva of the Swasa, causing Swasa roga. [4] Tamaka Swasa is said to be Kricchra sadhya [5], difficult to cure.

Tamaka Swasa can be correlated to the Bronchial asthma in the Modern medical science, based on the etiology and signs and symptoms. Bronchial asthma is characterized by Paroxysmal attacks of dyspnea with a short inspiratory efforts and prolonged expiration. The cause is a narrowing of the trachea, bronchi and bronchioles which is specially marked during expiration. The GINA 2024 strategy report mentions that "Asthma is a serious global health problem, affecting approximately 300 million people across the world, and causing about 1000 deaths per day. Most of these deaths occur in low and middle-income countries and most of them are preventable". [7]

In this regard, the concept of *Nidana parivarjana* as a part of the prevention protocol and for the purpose of *Chikitsa* is explained.

#### AIMS AND OBJECTIVES

- 1. To understand the Nidanas of Tamaka Swasa and corresponding etiological factors of Bronchial asthma.
- 2. To understand the *Nidana panchakas* of *Tamaka Swasa*.
- 3. To understand the common *Nidana parivarjana Chikitsa* protocols *Nidana parivarjana* and *Roga anutpattikara Chikitsa*.
- 4. To assess the Nidana parivarjana protocols as a part of the Samprapti Vighatana Chikitsa.
- 5. To analyse the role of *Nidana parivarjana* for the prevention of *Tamaka Swasa* vis-à-vis Bronchial asthma.
- 6. Yoga and Pranayama for Nidana parivarjana in Tamaka swasa.

# NIDANAS OF TAMAKA SWASA<sup>[8]</sup> AND BRONCHIAL ASTHMA

The etiological factors for the manifestation of *Tamaka Swasa* vis-à-vis Bronchial asthma is essentially important to understand the factors that are to be avoided as a part of *Nidana parivarjana*.

1. *Ahara*ja *Nidana*: the kind of foods, which when consumed in excess and for a long period of time, that can cause *Tamaka Swasa* due to *Dosha* vaishamya are:

- i. Vidahi foods that may cause burning sensation
- ii. Guru foods that are heavy for digestion
- iii. Vishtambhi foods that may cause indigestion
- iv. Ruksha extremely dry foods without any sneha amsha
- v. Abhishyandi foods that increase the Kapha Dosha and its attributes
- 2. Viharaja Nidanas the activities, which when indulged in inappropriate manner, quantity and way for a long period of time, that can cause the manifestation of Tamaka Swasa are:
- i. Sheeta pana ashana snaana consumption and exposure to cold foods and weather conditions.
- ii. Rajo dhooma atapa anala excessive and prolonged exposure to dust, fumes, extreme Sunlight and winds
- iii. Vyayama karma excessive, inappropriate exercising
- iv. Bhara adhwa carrying heavy loads and walking long distances
- v. Vega Dharana suppressing of Adhaaraneeya vegas
- vi. Aghata injury
- vii. Apatarpana excessive fasting or starvation.

Etiological factors for the manifestation of Bronchial asthma<sup>[9]</sup>:

- 1. Infections
- 2. Cigarette smoke
- 3. Allergens in the form of dust, pollen, odor, feathers
- 4. Ingestants such as milk, eggs, nuts, chocolates, fish etc.
- 5. Induced by gastro-oesophageal reflux.
- 6. Cough variant asthma.

#### NIDANA PANCHAKA OF TAMAKA SWASA

# Purvarupa<sup>[10,11]</sup>

The prodromal symptoms of Tamaka Swasa include:

- 1. Anaha distention.
- 2. Parshwa shoola pain in the flanks.
- 3. *Hridpeeda* chest tightness
- 4. *Pranasya vilomatva* impaired respiratory rate and rhythm.
- 5. Vaktra vairasya anorexia
- 6. Shankha nistoda pricking pain in the temple region of the shiras

# $Pradhana\ rupa^{[12,13]}$

- 1. Tamah pravesha blackout
- 2. Swasa kricchrata difficulty in breathing causing impairment in the normaly rate and rhythm of breathing.
- 3. *Trishna* extreme thirst
- 4. Kasa cough
- 5. Swarabheda hoarseness of voice
- 6. Shayane Swasa peedane escalation of symptoms when in lying down position
- 7. Aseeno labhate Saukhyam relief from symptoms to a certain extent when in sitting position.

The typical and significant clinical features of Bronchial asthma<sup>[14]</sup> include:

- 1. Recurrent episodes of wheezing.
- 2. Chest tightness.
- 3. Breathlessness.
- 4. Cough
- 5. Usually diurnal pattern symptoms and lung functions are worse in the early morning.
- 6. Nocturnal asthma sough and wheeze disturb the night sleep.

# SAMPRAPTI GHATAKA<sup>[15]</sup>

The Samprapti ghataka. i.e., the pathology of Tamaka Swasa can be understood as follows:

Dosha - Kapha pradhana Vata Dosha.

Dushya – Aharajanita rasa

Agni – Jatharagni

Ama – Jataragni mandya janya ama

Srotas – Pranavaha

Srotodushti – Sanga and vimarga gamana

Roga utpatti sthana – Amashaya

Adhishtana – Phuppusa

Vyadhi swarupa – Ashikari

#### NIDANA PARIVARJANA AS A PART OF SAMPRAPTI VIGHATANA

### 1. Nidana parivarjana in the state of Purvarupa

Sl. No.	Purvarupa lakshana	Nidana parivarjana
1.	Anaha	Snigdha, laghu bhojana, Saindhava lavana, Pippali,
		• Use of <i>Deepana pachana dravys</i> for <i>Ahara</i> .
		• Avoid vega Dharana, especially kshudha, purisha, trishna, chardi, mutra.
2.	Parshwashoola	• Pranayama and breathing exercises such as Suryabhedana pranayama,
		Antarkumbhaka and bahirkumbhaka.
		Ushna jala paana.
		• Abhyanga and mild swedana over the lungs and flanks.
		Avoid vega Dharana, especially kshudha, purisha, trishna.
		• Sip water mixed with <i>khanda sharkara</i> and <i>karpoora</i> .
3.	Hritpeeda	Ushna jala paana.
		• <i>Pranayama</i> and simple meditation.
		Snigdha, usha bhojana.
		Avoidance of cold food items.
		Avoid ati vyayama.
		Avoid vega Dharana, especially kasa, shrama, trishna.
4.	Pranasya vilomatva	Pavanamuktasana, Antarkumbhaka and bahirkumbhaka.
		• Avoid <i>Bhara</i> (Lifting heavy weights), <i>chalana</i> (excessive, long distance
		walking and running), Sheetala pavana (exposure to cold winds), traveling
		long distances.
		• Avoid vega Dharana, especially kshudha, purisha, trishna, shrama, kasa.
5.	Vaktra vairasya	Avoid vega Dharana especially chardi, purisha and kshudha.
6.	Shankha Nistoda	• Avoid exposure to sheetala Vata (cold winds) and excessive Aatapa
		(sunlight).
		• Avoid too much talking, laughing and crying and exposure to electronic
		media and loud music.

#### 2. Nidana parivarjana in the state of Pradhana Lakshana

Sl. No.	Pradhana Lakshana	Nidana parivarjana
1.	Tamah pravesha.	Avoid ruksha, teekshna, guru and vidahi Ahara.
		<ul> <li>Avoid exposure to extreme weather conditions.</li> </ul>
		Keep the body protected.
2.	Swasa kricchrata.	<ul> <li>Avoid exposure to <i>dhooma</i>, atapa, raja, sheetala Vata, smoke, open air and traveling.</li> <li>Avoid madhyapana, smoking cigarettes, maithuna and vega Dharana.</li> <li>Avoid using high speed fans and air conditioners.</li> <li>Avoid usage of curds, cold buttermilk, buffalo milk and ice creams.</li> </ul>
3.	Trishna.	Avoid use of <i>sheetala jala</i> .
3.	Trisme.	<ul> <li>Avoid trishna vega Dharana and udawarta vega Dharana.</li> <li>Avoid vidahi, teekshna, laghu ahaara such as dried, spice marinated and roasted dishes.</li> <li>Sip water mixed with khanda sharkara.</li> </ul>
4.	Kasa.	Avoid kasa vega Dharana.
		Avoid over indulgence and exercising.
		Avoid running and jogging.
		• Avoid <i>maithuna</i> and <i>upavasa</i> .
5.	Swarabheda.	<ul> <li>Consume warm water or water mixed with <i>khanda sharkara</i>.</li> <li>External application of <i>Narikela taila</i> mixed with <i>karpoora</i> or <i>karpooradi taila</i> or <i>tila taila</i> mixed with <i>saindhava lavana</i>.</li> <li>Practice of <i>Ujjayi pranayama</i> and <i>Bhramari pranayama</i>.</li> </ul>
6.	Shayane Swasa peedane.	<ul> <li>Sleep on the back with elevated shoulders and neck with 2, 3 or more pillow to open the <i>prana vaha srotas</i> passage.</li> <li>Lie on left side with a pillow between the legs to avoid gastroesophageal reflux.</li> <li>Lie on the back with head elevated and knees bent with a pillow under the knees.</li> <li>Avoid sleeping on the right side.</li> <li>Avoid sleeping on the stomach.</li> </ul>
7.	Aseeno labhate saukhyam.	<ul> <li>Sit up straight with calm mind.</li> <li>Practice Sukhasana – sitting mountain pose.</li> </ul>

#### 3. Nidana parivarjana in the state of Chikitsa

Nidana parivarjana plays an important role during the course of Chikitsa. This is in relation with the Samprapti Vighatana, where the fundamental, initiation factor is Nidana. Since the aushadhas work towards the curbing of the aggravated Doshas, further exposure to Nidanas will only cause excessive aggravation and disturbed prognosis. Absence of Nidana parivarjana during the course of treatment can either cause nil effect of the Chikitsa being given or cause aggravation of the symptoms or cause complications. Hence, following Pathya and apthya with reference to Ahara and Vihara is extremely important.

# NIDANA PARIVARJANA FOR THE PREVENTION OF TAMAKA SWASA VIS-À-VIS BRONCHIAL ASTHMA

Level 1: At home.

Level 2: At school and higher educational institutions.

Level 3: At primary health centers and hospital level.

Level 4: At social gatherings.

Level 5: At administrative levels.

#### Level 1: At home

Maintaining the cleanliness of the house and dusting the house regularly is one of the most preliminary and fundamental steps in the avoidance of causative factors for *Tamaka Swasa* or bronchial asthma. In conditions where there is chronic exposure to dust and dirt, overcoming of the diseased condition gets prolonged and hence, *Nidana parivarjana* from home is essential. Also, following of the *dinAcharya* and *ritucharya* from childhood, in correspondence with the *daihika prakruti* is equally essential. Also, use of natural fumigators or air fresheners such as *Guggulu dhoopa*, use of air diffusers with *Nimba taila*, eucalyptus oil, *Karpooradi taila*, *Tulasi taila* etc., can replace chemical infused fresheners, thereby avoiding the trigger factors. Sealing broken cabinets or wooden furnitures, avoiding pets and using allergen proof mattresses and pillows are also important as a part of *Nidana parivarjana*.

#### Level 2: At school and higher educational institutions

Schools and higher educational institutes must be looked out for cleanliness and in improving the physical stamina, strength and resistance by conducting regular health analysis and introducing tools such as *Yoga* and *pranayama*, especially to avoid manifestation of bronchial asthma. Maintaining greener environment and regular fumigation and sterilization of the infrastructure, can help students in getting a healthier study environment. This is essential in the perspective of *Nidana parivarjana* because, students tend to spend majority of their time in the schools and educational institutes and hence, improvising them can bring in a great deal of contribution in avoiding the disease.

#### Level 3: At primary health centers and hospital level

People from the labor class are extensively involved in tasks that require them to expose to loads of dust, cement residues, mud, wind, heavy sunlight and poor wages. Hence, it is important to address this group by regular free camps for health check by PHCs and Private hospitals, monitor their lung functions through simple procedures such as spirometry and provide them with aids such as masks, simple use of *Ayurvedic* procedues and medicines such as *Anutaila nasya* or simple coconut oil *nasya* to help them combat the harsh conditions that they might be exposed to. For the general public, creating awareness about the *Tamaka Swasa*, its causes, signs and symptoms and possible treatment options must be done so that, timely intervention of treatment will be possible. Educating the public through health camps, awareness programs and use of electronic and digital media such as advertisements, social media platforms, pamphlets etc., can help in cautioning them and in taking precautionary steps in the form of *Nidana parivarjana*, to avoid the manifestation of *Tamaka Swasa* or in avoiding the recurrence of the same.

#### Level 4: At social gatherings

Maintenance of hygiene, use of non-chemical, natural room fresheners and properly cleaned fans and Air conditioners is very essential. Air fresheners can trigger asthma, especially in people sensitive to fragrances. Providing proper ventilation in the rooms is very important. Avoiding use of chemical fragrances, scented candles and pinecones and using unscented, battery operated candles can also be of great importance in avoiding the trigger of asthma. Using sanitizers can help in avoiding the spreading of viruses and bacteria that may be responsible for the manifestation of asthma. Maintaining *shaucha* is utmost important to avoid any new manifestation or trigger of the disease condition.

#### Level 5: At administration level

Public health sectors and Public health administration departments, must work towards reducing the cases of *Tamaka Swasa*, by encouraging and implementing the concept of *Nidana parivarjana*. Creating awareness, regular screening and census studies in at every level of public health administration, right from the constituency to zonal to taluk to

district to state to national levels in the urban areas and panchayat levels in villages, can help in understanding the existing cases, understanding the degree of severity in different afflicted groups, understanding the groups that are prone to get manifested with *Tamaka Swasa* and work accordingly in dealing and combating the disease. Providing self-help kits containing ayurvedic fumigation tools such as *guggulu dhoopa* and *Nimba taila*, regular *nasya* with *Narikela taila* or *anutaila*, inhalation medicines such as eucalyptus oil or *karpooradi taila*, providing reusable and washable masks, encouraging the use of *Ishad Ushna jala* i.e., warm water. Establishing health camps for screening and monitoring using diagnostic tools such as spirometry and auscultation tests can help in assessing the degree of severity and hence in taking early and timely measures to avoid its aggravation by referring to hospitals for medical aid.

# $NIDANA\ PARIVARJANA\ AND\ ROGA\ ANUTPATTIKARA\ CHIKITSA^{[16]}$

The concept of *roga* anutpattikara *Chikitsa* is explained by *Acharya Charaka* in the 7<sup>th</sup> chapter of the *Sutrasthanam*m. The factors that do not allow the diseases to get manifested are called *roga anutpattikara* bhavas. Avoidance of *Prajnaparadha* (intellectual or conscious mistakes), indriyopashamana (restriction of sense organs to its normal functioning capacity), *smriti* (good memory) and knowledge of *desha* (place), *kala* (time), *atma* (self) and following *sadvritta* (good conducts of life) helps in preventing the *agantuja* types of diseases.

The person who is indulging in only *Hita Ahara* and *Vihara*, who is not desirous of materialistic world, honest and acts comply with the prescriptions of *apta* is considered to be devoid of ill health.<sup>[17]</sup>

Also, use of *Rasayana Chikitsa* as a part of rejuvenation can also help in avoiding the recurrence of the *Vyadhi*, provided, the fundamentals of *Nidana parivarjana* are followed.

#### Yoga and Pranayama for Nidana parivarjana in Tamaka Swasa

The science of Yoga and pranayama, have always concentrated and based their practices on the principles of control over the breath and respiratory system. Regular, conscious and systematic practice of yoga and Pranayama contribute widely in strengthening the respiratory system, the immune responses to the diseases, in combating the *Vyadhi* with more efficacy and also in avoiding the recurrence. Practicing Pranayama and yoga since the age of 5 years, has known to be extremely essential and beneficial in leading a disease free and more productive life.

Tamka Swasa, being predominantly a pranavaha sroto roga, having the sthana samshraya in the Urah pradesha, seeks deeper help from Yoga and pranayama.

The various *yogasanas*, pranayama and breathing exercises for the prevention and management of *Tamaka Swasa* and also as a part of *Nidana parivarjana* and *atma samyama* are:

Sl. No.	Yogasanas and Pranayama	Uses
1.	Bhujangasana – cobra pose	Expands the chest and improves lung capacity.
2.	Setubandhasana – Bridge pose	Opens up chest and ease breathing, helps deeper breathing and clears
۷.		air passage.
3.	Sukhasana	Focuses on breath and controls stress.
4.	Padahasthasana	Stretches back muscles, helps in deep breathing and calming of the
4.		mind.
5	Seated spinal twist.	Calms and targets the diaphragm, intercoastal muscles and abdominal
5.		and neck muscles, and hence advantageous in parshwashoola.
6.	Ujjayi pranayama.	Improves lung capacity, strengthens thoracic muscles, and improves
		oxygenation. Also helps in relaxation of the mind and pacifying
		swarabheda.

7.	Nadi shodhana pranayama.	Improves inhalation and exhalation process, clears airways, improves lung capacity, and relieves <i>hritpeeda</i> and <i>Swasakricchrata</i> .
8.	Kapala bhati	Expels dust and dirt from the nasal cavity. Improves lung capacity and lung functions and clears the upper respiratory tract.

#### CONCLUSION

Tamaka Swasa, being one of the most common Swasa rogas, correlated widely to the Bronchial asthma from the modern medical science, has affected millions of the world population and hence, abiding to the principles of both Ayurveda and the modern medical science, i.e., "Swasthasya swasthya rakshanam Aturasya vikara prashamanam" and Prevention is better than cure, respectively, this review article focuses on the most basis, yet extremely vital components in the perspective of both prevention and treatment. This concept is of Nidana parivarjana, which not only helps the affected groups but also benefits the whole lot of population in avoiding the occurrence of Tamaka Swasa, by keeping avoidance from the Nidanas. This not only helps in building a healthy infrastructure of the human society, but also in being aware about oneself.

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