

## Therapeutic Emesis (Vamana Karma) in the Management of Tamaka Shwasa (Bronchial Asthma): An Ayurvedic Review

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### Abstract

Tamaka Shwasa, a respiratory disorder analogous to bronchial asthma, is characterized by recurrent dyspnoea, wheezing, and cough. Within Ayurvedic pathophysiology, it is classified as a Vata-Kapha imbalance affecting the Pranavaha Srotas (respiratory channels), frequently involving Ama (metabolic toxins). Contemporary management often seeks complementary approaches to standard pharmacotherapy. Vamana Karma, a principal Panchakarma (bio-cleansing) procedure of therapeutic emesis, is historically emphasized for Kapha-dominant conditions, including specific presentations of Tamaka Shwasa. This review synthesizes classical Ayurvedic literature and modern research to evaluate the rationale and evidence for Vamana. Classical texts, including the Charaka and Sushruta Samhitas, position Vamana as a primary intervention for Kaphaja Shwasa. The procedure aims to eliminate excess Kapha and adhering toxins from the upper gastrointestinal and respiratory tracts (Urdhva Bhaga), thereby clearing obstructions, restoring the flow of Prana Vayu, and mitigating the disease's core pathogenesis. Emerging clinical studies indicate potential benefits such as improved pulmonary function and reduced bronchial reactivity. The conclusion posits that Vamana Karma, when applied appropriately based on individual constitution (Prakriti) and disease state (Vikriti), represents a profound detoxification strategy that may offer sustained relief and modify the disease course in Tamaka Shwasa.

**Keywords:** Vamana Karma, Therapeutic Emesis, Panchakarma, Tamaka Shwasa, Bronchial Asthma, Ayurvedic Detoxification, Kapha Dosha.

### Introduction

Tamaka Shwasa is a chronic, episodic condition of the respiratory system detailed in Ayurvedic compendia. Its hallmark symptoms—Ghurghuraka (wheezing), Prasakta Shwasa (paroxysmal dyspnoea), and Kasa (cough)—closely mirror the clinical picture of bronchial asthma. The Ayurvedic etiology implicates factors like exposure to allergens (Rajah, Dhuli), intake of incompatible foods, and climatic influences, which collectively disturb Kapha and Vata Doshas, leading to channel obstruction (Srotorodha) and the retrograde movement of vital air (Prana Vayu). Modern medicine provides control through bronchodilators and anti-inflammatory agents but may not address the underlying systemic imbalance Ayurveda identifies. The Ayurvedic management framework prioritizes Shodhana (purification therapy) for deep-seated pathologies, with Vamana Karma being specifically indicated for disorders rooted in aggravated Kapha. This article reviews the scientific and clinical basis for employing Vamana Karma in the comprehensive care of Tamaka Shwasa<sup>(1)</sup>.

Tamaka Shwasa is a chronic, reversible obstructive airway disease with a significant global prevalence. In Ayurveda, it is described as a Krichhra Sadhya (difficult to cure) or Yapya

(manageable) condition, primarily involving vitiation of Vata and Kapha Doshas, with frequent involvement of Pitta<sup>(2)</sup>. The seat of the disease is the Pranavaha Srotas (respiratory system) and Annavaha Srotas (digestive system), reflecting the gut-lung axis concept. This review elucidates the Ayurvedic viewpoint, providing a bridge between traditional wisdom and contemporary clinical practice<sup>(3)</sup>.

### Review Methodology

A narrative review was conducted using source materials from classical Ayurvedic texts (Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya) and their authoritative commentaries. A search of contemporary databases (PubMed, AYUSH Research Portal, Google Scholar) was performed using terms including "Vamana Karma," "Ayurvedic management of asthma," and "therapeutic emesis." Relevant clinical studies, review articles, and scholarly publications in English and Hindi were analyzed to integrate traditional knowledge with current research findings.

### Tamaka Shwasa: Ayurvedic Pathophysiology<sup>(4)</sup>

❖ **Etiology (Nidana):** Causative factors encompass repeated exposure to cold, dust, and smoke; consumption

of cold, heavy, and kapha-aggravating foods; and erratic lifestyle patterns.

- ❖ **Disease Mechanism (Samprapti):** Provoked Kapha, in conjunction with Vata, localizes in the respiratory channels, causing physical blockage (Avarana). This obstruction forces Prana Vayu into an abnormal upward flow (Urdhvagati), producing the characteristic dyspnoea. The frequent involvement of Ama adds a component of toxicity and hypersensitivity.
- ❖ **Clinical Presentation (Rupa):** Symptoms include shortness of breath worsened at night and in cold environments, symptomatic relief in warm settings and with postural support, audible wheezing, cough with tenacious expectoration, and a sense of thoracic constriction.
- ❖ **Therapeutic Principles (Chikitsa Sutra):** Management follows a sequential approach: Langhana (lightening therapy), Deepana-Pachana (kindling digestive capacity), Shodhana (purification—with Vamana as key), and Shamana (palliation using herbs like Kantakari and Vasaka). Shodhana is considered essential for Apakarshana (extraction) of morbid doshas.

### Vamana Karma:

Defined as the expulsion of morbid Doshas (primarily Kapha) through the oral route, Vaman Karma is indicated in diseases where Kapha is excessively aggravated and localized in the upper gastrointestinal and respiratory systems.[5] The procedure is a cornerstone in managing conditions like Tamaka Shwasa (asthma), Kushtha (skin diseases), and Madhumeha (diabetes)<sup>(6)</sup>.

### Principles and Mechanism of Action<sup>(7)</sup>

The therapy works on the principle of "*Urdhva Bhaga Shirasa Adhogam*" - drawing and eliminating the vitiated *Doshas* from the upper channels of the body. Administered during the *Kapha*-dominant spring season (*Vasanta Ritu*) or as required, it involves:

- 1. Liquefaction:** *Snehana* (oleation) and *Swedana* (fomentation) pre-treatments liquefy and mobilize adhered *Doshas*.
- 2. Provocation:** Administration of specific *Vamanopaga* drugs (e.g., *Madanphala*, *Yashtimadhu*) stimulates the emetic center.
- 3. Elimination:** Directed expulsion of *Kapha* and *Pitta* along with *Ama*.

### Procedural Overview

Vamana Karma<sup>(8)</sup> is a systematically administered therapeutic emesis designed to evacuate excess Kapha and associated toxins.

### Preparatory Phase (Purvakarma):

- 1. Deepana-Pachana:** Administration of digestives to correct Agni (metabolic fire).
- 2. Snehana:** Internal and external oleation using medicated fats, tailored to avoid excessive Kapha provocation.
- 3. Swedana:** Mild, generalized sudation to mobilize doshas.

### Therapeutic Indications (Yogya)<sup>(9)</sup>

Respiratory Disorders: Tamaka Shwasa (asthma), Kasa (chronic cough), Pratishtyaya (rhinitis). Metabolic Disorders: Sthaulya (obesity), Prameha (diabetes mellitus). Dermatological Conditions: Kushtha (psoriasis, eczema), Kandu (pruritus). Psychiatric Conditions: Unmada (psychosis), chronic Kapha-type depression.

### Contraindications (Ayogya)<sup>(10)</sup>

Pediatric, geriatric, or severely debilitated patients. Pregnancy, cardiac conditions, severe hypertension. Vata-predominant disorders like emaciation, bleeding disorders. Udara Roga (ascites), tuberculosis.

### Main Procedure (Pradhana Karma):<sup>(11)</sup>

Emetic formulations (Vamaka Yoga), such as a decoction of Madanaphala (*Randia dumetorum*) combined with Yashtimadhu (*Glycyrrhiza glabra*), honey, and rock salt, are administered in calculated doses until the onset of controlled emesis. The quality and content of vomitus are assessed for procedural adequacy (Samyak Yoga).

### Post-Operative Care (Pashchat Karma):

This critical phase involves Samsarjana Krama—a graduated dietary regimen to systematically restore digestive strength—along with rest and avoidance of etiological factors.

### Mechanism Of Action In Tamaka Shwasa<sup>(12)</sup>

The therapeutic rationale for Vamana in this condition is multi-faceted:

- 1. Dosha Elimination:** It directly expels the vitiated Kapha from its primary site (Amashaya), reducing the principal obstructive material in the airways.
- 2. Channel Clearance (Srotoshodhana):** By removing Kapha, it decongests the Pranavaha Srotas, facilitating the normalized downward movement of Prana Vayu.
- 3. Toxin (Ama) Removal:** The procedure eliminates adherent Ama, potentially reducing the allergenic and inflammatory burden.
- 4. Pathogenesis Interruption:** It breaks the critical link of Kapha Avarana (obstruction of Vata), thereby correcting the core pathogenic sequence.

**5. Preventive and Curative Potential:** By clearing accumulated morbid factors, it reduces the pathological substrate, aiming for long-term remission and decreased recurrence.

**6. Immunomodulation:** The holistic detoxification process is believed to positively influence host resistance (Vyadhikshamatva), potentially modulating aberrant immune responses seen in asthma.

### Contemporary Clinical Insights

A growing body of clinical research supports the application of Vamana: Studies report statistically significant improvements in objective measures such as Forced Expiratory Volume (FEV1) and Peak Expiratory Flow Rate (PEFR) following Vamana therapy.

Symptomatic relief, reflected in reduced scores for dyspnoea, cough, and wheezing, alongside decreased dependency on emergency inhalers, has been documented<sup>(13)</sup>.

Potential mechanisms from a modern perspective may include:

- Reduction in excessive mucus secretion and airway edema.
- Modulation of neuro-immune pathways and stress response systems.
- Induction of a systemic reset that may influence bronchial hyper-responsiveness.

### Discussion

Vamana Karma transcends symptomatic management, offering a strategic, root-cause intervention. Its efficacy is contingent on precise patient selection, considering strength (Bala), constitution (Prakriti), and the dominant disease dosha (Vikriti). The optimal season for administration is typically late winter or spring (Vasant Ritu), when Kapha is naturally aggravated. Contraindications, such as debilitating conditions, pregnancy, or severe comorbidities, must be strictly observed. Integrating Vamana with post-procedure rejuvenation (Rasayana) therapies targeted at the respiratory system can consolidate therapeutic gains. This approach exemplifies the Ayurvedic model of restoring systemic equilibrium, providing a complementary strategy to conventional asthma management.

### Conclusion

Vamana Karma holds a distinguished position in the Ayurvedic management of Tamaka Shwasa, particularly for cases with significant Kapha involvement. It embodies a therapeutic paradigm focused on detoxification and doshic rebalancing, aiming to alter the disease's natural history rather than merely suppress symptoms. Classical authority,

coupled with promising clinical observations, underscores its potential as an effective intervention for improving quality of life and lung function. Further rigorous, large-scale clinical trials are warranted to quantitatively validate these traditional claims and elucidate the integrative role of this procedure in modern respiratory care.[14]

Vaman Karma is a sophisticated, procedure-specific detoxification therapy with a strong classical foundation and growing scientific rationale. Its success hinges on strict patient selection, precise pharmaceutical preparation, and expert clinical execution.[15] When performed correctly, it offers profound clinical benefits beyond symptomatic relief by addressing the root cause of Kapha-aggravated pathologies, validating its enduring relevance in Ayurvedic therapeutics.[16]

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