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Evaluation of effect of Krishnadi choorna in management of Tamak shwas W.S.R. to bronchial asthma

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In the current study, 60 patients of *Tamak Shwas* have been selected randomly divided in two groups. The patients showing classical symptoms of *Tamak Shwas* such as *Shwaskruchhrata* (dyspnoea), *Kasa* (cough), *Ghur-Ghurak Shabda* (wheezing or rhonchi) during night, *Kasten Shleshma Moksha* (difficult in expectoration), *Kasten Bhashya* (difficult in expectoration), *Anidra* (insomnia) etc., were included in this study. For the present study we were given Krishnadi Choorna orally. It reduces respiratory rate effectively and increases expansion of chest, breath-holding time and peak expiratory flow rate and sustained maximal inspiration which was highly significant statistically as compared with tab. Deriphyllin. Out of 30 patients included in group A none patients showed total relief in symptoms, 7 patients was markedly improved (50 to 75%), 21 patients were improved (25 to 50%), 2 patients were unchanged (less than 25%). Out of 30 patients included in group B none patient showed total relief in symptom, 3 patients were markedly improved (50 to 75%), 26 patients were improved (25 to 50%), 1 patients were unchanged (less than 25%). At the end of the study, it was found that *Krishnadi Choorna* in group A is more effective than in group B.

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