



Ayurvedic Management of Childhood Pneumonia: A Case Report

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Abstract

Background: Childhood pneumonia is one of the leading causes of morbidity and mortality among children worldwide, particularly in developing countries. In Ayurveda, although pneumonia is not described as a separate disease entity, its clinical manifestations can be correlated with *Kasa*, *Shwasa*, *Jwara*, and disorders of *Pranavaha Srotas*. Ayurvedic management focuses on balancing Doshas, improving Agni, relieving Kapha obstruction, and enhancing immunity.

Aim: To evaluate the effect of Ayurvedic management in a case of childhood pneumonia.

Case Presentation: A 5-year-old male child presented to the Ayurvedic OPD with complaints of fever, productive cough, breathing difficulty, loss of appetite, and generalized weakness. Clinical examination revealed bilateral crepitations, mild chest retraction, and increased respiratory effort. Chest X-ray showed patchy infiltrates in left parahilar, left retrocardiac region. The condition was assessed as Kapha-Vata predominant *Pranavaha Srotodushti* associated with *Mandagni*.

Intervention: The patient was treated with *Sitopaladi Churna*, *Talisadi Churna*, *Vasavaleha*, *Godanti Bhasma*, and *Tulsi Swarasa* along with steam inhalation, warm fomentation, dietary regulation, and lifestyle modifications for 15 days.

Results: Significant clinical improvement was observed after treatment. Fever and breathlessness subsided completely, cough reduced markedly, appetite improved, and weakness decreased. The patient showed gradual recovery without complications.

Conclusion: This case report suggests that Ayurvedic management can be beneficial in the supportive care of childhood pneumonia by reducing respiratory symptoms and improving overall recovery. Early Ayurvedic intervention focusing on Dosh balance, Agni correction, and respiratory support may provide favourable outcomes in pediatric respiratory disorders.

Keywords: Childhood pneumonia, Ayurveda, Kasa, Shwasa, Pranavaha Srotas, Pediatric respiratory disorder.

I. INTRODUCTION

Pneumonia is one of the most common lower respiratory tract infections affecting children worldwide and remains a major cause of pediatric morbidity and mortality, especially in developing countries. According to the World Health Organization (WHO), pneumonia accounts for a significant proportion of deaths among children under five years of age. It is characterized clinically by fever, cough, tachypnea, chest indrawing, respiratory distress, and pulmonary infiltrates on radiological examination. Bacterial, viral, and fungal pathogens are commonly implicated in the etiology of childhood pneumonia. Despite advances in antimicrobial therapy and vaccination programs, recurrent respiratory infections and complications continue to pose a substantial healthcare burden.⁽¹⁾

In Ayurveda, although pneumonia is not described as a separate disease entity, its clinical manifestations resemble conditions such as *Kasa* (cough), *Shwasa* (dyspnea), *Jwara* (fever), and disorders of *Pranavaha Srotas*. The pathogenesis mainly involves vitiation of *Kapha Dosha* associated with *Vata Dosha*, resulting in obstruction of respiratory channels, impaired *Agni*, and accumulation of mucus within the respiratory tract.⁽²⁾ Ayurvedic classics emphasize the importance of maintaining equilibrium of Doshas and proper functioning of respiratory channels for preserving respiratory health.

Ayurveda emphasizes:

- Dosha balancing
- Improvement of Agni
- Removal of Kapha obstruction
- Enhancement of Bala (immunity)⁽³⁾

Aim and Objective

- To evaluate the effect of Ayurvedic management in a case of childhood pneumonia.

Case Presentation

A 5-year-old male child, visited the Ayurvedic OPD on 22 December 2024 with Chief Complaints of

- Fever for 5 days
- Productive cough for 5 days
- Difficulty in breathing for 3 days
- Loss of appetite for 4 days



- General weakness

History of Present Illness

The child was apparently normal 5 days before presentation, after which he developed:

- Moderate-grade fever
- Productive cough with whitish sputum
- Nasal congestion
- Breathing difficulty aggravated at night
- Reduced appetite and lethargy

The symptoms gradually worsened, and the patient was brought to the Ayurvedic OPD for treatment.

Past History

- Recurrent upper respiratory tract infections
- No history of tuberculosis
- No known allergies

Birth and Developmental History

- Full-term normal delivery
- Immunization complete
- Developmental milestones normal

Family History

- No significant family history of asthma or tuberculosis.

General Examination

| Parameter | Findings |
|------------------|----------|
| Temperature | 101°F |
| Pulse Rate | 104/min |
| Respiratory Rate | 30/min |
| Weight | 18 kg |
| Pallor | Absent |
| Cyanosis | Absent |

Systemic Examination

Respiratory System

- Bilateral crepitations
- Productive cough
- Mild chest retraction
- Increased respiratory effort

Investigations

Chest X-ray - Patchy infiltrates in left parahilar, left retrocardiac region.

Ayurvedic Assessment

Dosha - Predominantly Kapha-Vata vitiation

Dushya - Rasa and Rakta

Agni - Mandagni

Srotas Involved - Pranavaha Srotas

Samprapti - Kapha aggravation associated with impaired Agni resulted in mucus accumulation and obstruction of Pranavaha Srotas, leading to cough, fever, and breathing difficulty.

Treatment Plan

| Medicine | Dose | Duration |
|------------------------------|-----------|----------|
| Sitopaladi Churna with honey | 1 g BD | 7 days |
| Talisadi Churna | 1 g TDS | 7 days |
| Vasavaleha | 1 g BD | 7 days |
| Godanti Bhasma | 125 mg BD | 5 days |
| Tulsi Swarasa | 5 ml BD | 7 days |

External Therapies

- Mild steam inhalation
- Warm chest fomentation

Dietary Advice

- Warm liquid diet
- Moong dal soup
- Avoid cold foods and ice cream
- Adequate hydration

Lifestyle Advice

- Adequate rest
- Avoid exposure to dust and cold air

Observation and Results

| Symptom | Before Treatment | After 7 Days |
|----------------|------------------|--------------|
| Fever | Moderate | Absent |
| Cough | Severe | Mild |
| Breathlessness | Moderate | Absent |
| Appetite | Poor | Improved |
| Weakness | Present | Reduced |



Treatment continued for next 7 days and advised chest x ray after 7 days.

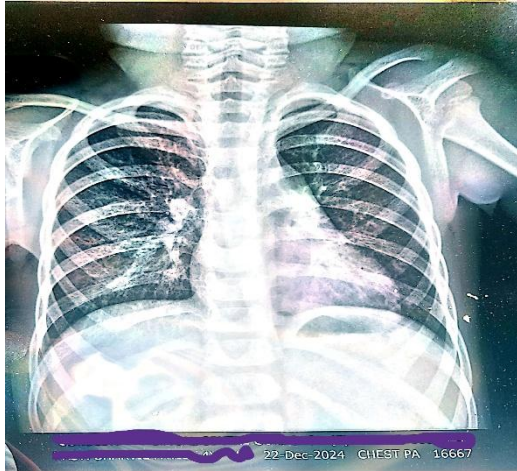


Fig 1: Showing X-ray –PA View before treatment and after treatment

The patient showed gradual clinical improvement without complications.

II. Discussion

Pneumonia in children involves inflammation and mucus accumulation in the respiratory tract. Ayurveda considers this condition under disorders of *Pranavaha Srotas* with predominance of Kapha and Vata Dosha.

The selected formulations acted through:

- **Kapha Shamana**
- **Agni Deepana**
- **Kasa-Shwasa Hara**
- **Rasayana effect**

Sitopaladi Churna and **Talisadi Churna** helped reduce cough and mucus accumulation. **Vasavaleha** acted as an expectorant and respiratory tonic. **Tulsi Swarasa** improved respiratory function and immunity.

Ayurvedic approaches in pediatric respiratory disorders such as chronic bronchitis and Tamaka Shwasa have demonstrated positive outcomes in published case studies. The holistic management including medicine, diet, and lifestyle modification contributed to recovery and improved respiratory health.^(4,5)

III. Conclusion

The present case report suggests that Ayurvedic management is beneficial in the supportive care of childhood pneumonia by reducing symptoms, improving appetite, and enhancing recovery. Early diagnosis and appropriate Ayurvedic interventions focusing on Dosha balance and respiratory support can provide favourable outcomes in pediatric respiratory disorders.

Further clinical studies with larger sample sizes are needed to validate the efficacy of Ayurvedic treatment in childhood pneumonia.

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