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THE THERAPEUTIC FUME: A CRITICAL REVIEW OF *SHAMAN DHUMAPANA* IN TOBACCO SMOKING DE-ADDICTION

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ABSTRACT

Tobacco smoking remains a major public health concern and is associated with numerous chronic diseases, including cardiovascular disorders, respiratory illnesses, and cancer. Despite the availability of various smoking cessation therapies, relapse rates remain high, highlighting the need for innovative and accessible interventions.This article explores the concept of therapeutic fume as a novel approach for tobacco smoking de-addiction. Therapeutic fumes are generated from medicinal herbs and natural bioactive compounds that may help reduce nicotine cravings, alleviate withdrawal symptoms, and provide psychological relaxation during the cessation process. *Dhumapana*, the Ayurvedic practice of therapeutic inhalation of medicated smoke, encompasses several forms, among which *Shaman Dhumapana* is particularly emphasized for its pacifying and curative properties. The proposed therapy aims to mimic the sensory experience of smoking while delivering non-addictive, health-promoting constituents.

Keywords: *Shaman*, *Dhumapana*, Addiction, Nicotine, *Dushi visha,* Herbal , Tobacco smoke

INTRODUCTION

In today's fast-paced and stressful lifestyle, many people turn to substances or activities for relief, which sometimes leads to addiction. This condition affects millions of individuals and is considered both a medical and social issue. Addiction is a chronic disorder characterized by compulsive engagement in substances or behaviours despite harmful consequences. It has become one of the major public health concerns of the modern world. They tend to show the three Cs : Craving for the object of addiction which can be mild to intense , loss of Control and Continued engagement in spite of adverse consequences. One of the most common forms of substance addiction is Tobacco smoking. Unlike many other addictive drugs, Tobacco is legal and widely available making it one of the leading causes of preventable disease and death worldwide.[1] The addictive power of tobacco comes from nicotine, a chemical that alters brain activity and creates dependence. Despite the well known health risks, millions of people continue to smoke, depicting how powerful and difficult to overcome this addiction can be.

While the physiological addiction to nicotine is a primary hurdle, the psychological dependency on the "ritual" of smoking—the hand-to-mouth action and the sensory experience of inhaling smoke—often leads to high relapse rates in conventional cessation programs. Modern interventions, such as Nicotine Replacement Therapy (NRT)[2] and Varenicline, address the chemical dependency but frequently fail to satisfy the habitual sensory craving, leaving a therapeutic gap that Ayurveda can uniquely fill.

NICOTINE AS *DUSHI VISHA*

According to the classics (*Sushruta Samhita*), a poison becomes *Dushi Visha*[3] when it loses its acute lethal potency but remains inside the tissues (*Dhatus*) because of :

- **Low Potency (*Alpa-virya*):** Nicotine in a single cigarette doesn't kill instantly, but it accumulates.

- **Envelopment (*Kapha-avrita*):** It gets "masked" or stored in the body's fatty tissues and channels (*Srotas*).
- **Environmental Triggers:** *Dushi Visha* gets aggravated by factors like cold weather, indigestion, or physical exertion—similar to how a smoker's cough or cravings worsen under stress or seasonal changes.

When tobacco is consumed over a long period, nicotine acts as a chronic irritant:

- **Accumulation in *Dhatus*:** It primarily vitiates the *Rakta* (blood) and *Mamsa* (muscle) *dhatus,* leading to long-term discoloration and vascular damage.
- **Depletion of *Ojas*:** Nicotine possesses qualities opposite to *Ojas* (the body's essence). It is *Ruksha* (dry), *Tikshna* (sharp), and *Vishada* (penetrating), which gradually dries up the body's natural immunity and vitality.
- **Mental Vitiation:** It affects the *Manovaha Srotas* (channels of the mind), shifting the mental state toward *Rajas* (restlessness) and *Tamas* (lethargy/dependence)

CLASSICAL DESCRIPTION OF *DHUMAPANA*

Dhumapana[4] refers to the inhalation of medicated fumes through the nasal or oral route, followed by expulsion through the mouth, traditionally practiced as part of *Dinacharya*(daily regimen) with help of a medicated wick (varti) containing medicinal herbs.

Therapeutic Purpose: It is primarily indicated for *srotoshodhana* (cleansing of channels), *dosha shamana* (pacification), and as a *paschat karma* following *sodhana* procedures to eliminate residual *doshas*.

Doṣhic Action: It predominantly mitigates *kapha* and *vata dosha*.

Indications: Classical indications include *sirogaurava* (head heaviness), *sirah sula* (headache), *pinasa* (rhinitis), *kasa* (cough), *svasa* (dyspnea/asthma), and other disorders of the head and neck region.

When we examine *sirogaurava* (head heaviness) and *sirah sula* (headache), they mirror the common complaints of "brain fog" and tension headaches often triggered by nicotine-induced vasoconstriction and carbon monoxide-related oxygen deprivation. The persistent inflammation of the nasal passages in smokers, often dismissed as "sinus issues," is precisely what the texts call *pinasa* (rhinitis).

Furthermore, the hallmark of a smoker's life—the chronic, phlegm-heavy "smoker's cough"—is the literal embodiment of *kasa*, while the progressive shortness of breath or "windedness" during minor exertion directly aligns with *svasa* (dyspnea). Collectively, these indications highlight how smoking targets the "head and neck region," creating a state of chronic congestion and pressure that ancient practitioners sought to clear through targeted, purifying interventions.

Table 1. Drugs Commonly Used in *Shaman Dhumapana*[5]

Drugs	Latin Name	Family
Shallaki	*Boswellia serrata*	Bursuraceae
Laksha	*Laccifer lacca*	Lacciferidae
Prithvika (Bruhat Ela)	*Amomum subulatum*	Zingiberaceae
Kamal	*Nelumbo nucifera*	Nelumbonaceae
Utpala	*Nymphaea alba*	Nymphaeaceae
Nyagrodh	*Ficus benghalensis*	Moraceae
Udumbar	*Ficus racemosa*	Moraceae
Aswatha	*Ficus religiosa*	Moraceae
Plaksha	*Ficus lacor*	Moraceae
Lodhra	*Symplocos racemosa*	Symplocaceae
Yastimadhu	*Glycyrrhiza glabra*	Fabaceae
Suvarntwak (Amaltas)	*Cassia fistula*	Caesalpinoideae
Padmak	*Prunus cerasoides*	Rosaceae
Raktyashtika (Manjistha)	*Rubia cordifolia*	Rubiaceae

Table 2. *Guna–Karma* Profile of Drugs Used in *Shaman Dhumapana*[6]

Category / Herb Group	*Rasa* (Taste)	*Guṇa* (Properties)	*Virya* (Potency)	*Karma* (Therapeutic Action)
Aromatic Resins/Seeds(*Shallaki , Prithvika)*	*Katu, Kashaya, tikta*	*Laghu , ruksha*	*Ushna*	*Srotoshodhana* (channel cleansing); *Lekhana* (reduces excess *kapha*)
Panchavalkala Group *(Nyagrodha, Udumbara, Aśvattha, Plakṣha, Lodhra)*	*Kashaya*	*Guru, ruksha*	*Sheet*	*Grahi(*absorptive); *Vranasodhana* (mucosal healing); *Stambhana*

				(checks secretions/bleeding)
Medhya (Nootropic) Herbs (*Yastimadhu*)	*Madhur*	*Guru , snigdha*	*Sheet*	*Medhya* (cognitive support)

Table 3. Probable Phytotherapeutic Mode Of Action Of Drugs On Tobacco Smoking De- Addiction

Action Of Drug	Drug
Anti-inflammatory	*Shallaki, Laksha, Kamal , Utpala, Suvarntwak , Plaksha , Raktayashtika*
Nootropic	*Yastimadhu*
Anti-microbial	*Prithvika , Nyagrodh , Suvarntwak*
Anti-oxidant	*Prithvika , Kamal , Nyagrodh , Udumbar , Plaksha , Yastimadhu, Padmak*
Anxiolytic (anti-anxiety)	*Prithvika , Yastimadhu , Ashwath*

Table 4. Procedure of *Dhumapana*[7]

Stage	Key Details	Important Note
Purva karma	Assessment of patient suitability; patient seated comfortably in erect posture; explanation of procedure; informed consent obtained; baseline vitals recorded.	Ensure proper posture and mental relaxation
Pradhan karma	The eligible person should be made to sit straight. From the tip of modified *shaman dhumvarti,* the person inhales the smoke from one nostril at a time, keeping the other one closed. And emit out the smoke through the mouth to prevent the risk of disorders of vision.	Classical guideline: 3 bouts of inhalation. (1 bout = 3 puffs) Therefore, total 9 puffs in a seating.
Pashchat karma	Patient is observed for *samyak dhumapana lakṣhaṇa* (proper signs); vitals reassessed.	Exhalation through nose is contraindicated due to potential adverse effects

Time of administration (*Kala*) of *Shaman Dhumapana*[8] -

In case of *Urdhva-jatrugata* (upper clavicular) diseases wherein *vata* and *kapha doshas* are predominant, times of administration has been prescribed by *Acharya* for *Shaman Dhumapana* as a daily routine –

1. At Night (*Nishante*),
2. After Urination (*Mutrante*),
3. After Defecation (*Shakrutante)*,
4. After Brushing Teeth (*Danta Dhavanante*),
5. After Yawning(*Jrimbha*),
6. After Taking Nasal Drops (*Nasyante*),
7. After The Meal (*Aaharante*),
8. After The Surgical Procedure (*Shastra Karmante*)

PROBABLE THERAPEUTIC ACTION

When the therapeutic herbs in a medicated cigarette (*Dhoomvarti*) are burned, they release potent volatile oils. These aerosolized plant compounds are inhaled deep into the nasal passages and sinuses, where they deliver

direct antibacterial, antifungal, and antiviral benefits. This process helps break down excess mucus, soothe inflammation, and fight off local infections.

Beyond the respiratory benefits, these airborne compounds stimulate the olfactory nerves in the nose. This trigger sends signals directly to the limbic system—the area of the brain responsible for managing emotions. By activating this pathway, the treatment helps induce a sense of calm, stabilize mood, and ease the anxiety and irritability commonly experienced during substance withdrawal.

Because the herbs selected for *Dhumapana* possess *Ruksha* (dry) and *Ushna* (hot) properties which encourage blood vessels to dilate, clear out congestion, and effectively purge excess mucus from the respiratory system. The therapy is also thought to lower cortisol production and regulate the hypothalamic-pituitary-adrenal (HPA) axis, which aids in emotional and psychological grounding.

DISCUSSION

The use of ***Shaman Dhumapana*** (therapeutic medicated smoking) as an intervention for tobacco de-addiction presents a compelling paradox: using the act of smoking to quit smoking. This approach, rooted in Ayurvedic principles, addresses the physiological, psychological, and behavioral layers of nicotine dependence.

“The Mechanism of "Similia Similibus Curentur” [9]

In Ayurveda, the habit of tobacco smoking is often categorized as a *Vata-Kapha* imbalance. *Shaman Dhumapana* utilizes a "like treats like" philosophy—not by providing nicotine, but by mimicking the ritualistic delivery system that the brain associates with relief.

Substitution Therapy: Unlike nicotine patches or gums, *Dhumapana* satisfies the "hand-to-mouth" oral fixation and the sensory experience of inhaling smoke.

Cleansing the Respiratory Channels

Tobacco smoke leaves a residue of "Tar" and toxins (*Dushi Visha*) in the lungs. Traditional *Shaman Dhumapana* acts as an expectorant.

CONCLUSION

Shaman Dhumapana offers a holistic alternative to conventional Nicotine Replacement Therapy (NRT). By addressing the behavioral ritual while simultaneously treating the physical cravings with non-addictive herbal fumes, it provides a bridge towards total abstinence.

However, its integration into contemporary healthcare requires a shift from traditional empirical use toward rigorous scientific validation. Standardization of formulations, safety profiling, and high-quality clinical evidence are essential prerequisites. With appropriate research and technological adaptation, *Dhumapana* may evolve into a structured, non-invasive adjunct in respiratory care. Nevertheless, its current use should remain cautious, individualized, and guided by both classical principles and emerging scientific evidence.

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