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Case Study

MEDICATED CIGARETTE *(DHOOMVARTI)*: AN AYURVEDIC ALTERNATIVE FOR SMOKING DE-ADDICTION

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ABSTRACT

Chronic smoking remains a major public health challenge, often leading to irreversible morbidity despite cessation efforts. Conventional de-addiction treatment frequently fall short in addressing both the physiological dependence and the behavioral rituals associated with smoking. This case study presents the use of specially formulated Ayurvedic Medicated *Dhoomvarti* (herbal smoking cigarette) in a bit altered form as a Nicotine-free alternative for cigarette smokers aiming to quit, based on the classical Ayurvedic principle of *Dhoompana*, this altered medicated cigarette (*Dhoomvarti*) offers both behavioural and therapeutic support in managing nicotine dependence. In addition, the patient received oral administration of *Vachadi Ghrita*, a classical formulation with *Medhya* (cognitive-enhancing) and neuromodulatory properties, to support withdrawal management and mental clarity. The Intervention demonstrated progressive reduction in cigarette use, improved respiratory parameters, and resolution of withdrawal symptoms, suggesting that the use of this medicated cigarette may offer an effective complementary pathway in smoking de-addiction.

INTRODUCTION

Tobacco use in all forms- most commonly chronic tobacco smoking- is a global health crisis, it has become one of the leading causes of preventable death.[1,2] The chemical addiction to nicotine, combined With the behavioral aspect of smoking, makes cessation a complex task.[3] Despite public awareness and numerous de-addiction campaigns quitting smoking remains a challenge due to its strong physical, psychological and behavioral Dependence.

In this context, Ayurveda offers a times-tested unique perspective through *Dhoompana*– a specialized form of therapeutic smoking that may help manage this multidimensional dependence.

In classical Ayurvedic texts like *Charaka Samhita* and *Sushruta Samhita, Dhoompana* is prescribed as part of the daily regimen (*Dinacharya*) and as a treatment for diseases of the head, neck, respiratory tract, and skin.

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It is believed to cleanse the respiratory channels and balance *Vata and Kapha doshas,* especially in the upper body.[4,5] Unlike tobacco-based smoking, medicated *Dhoompana* is non-addictive and used for therapeutic purposes.

To complement the effects of *Dhoompana, Vachadi Ghrita*- a classical Ayurvedic formulation described in *Ashtanga Hridaya* - was incorporated into the de-addiction regimen. It contains- *Vacha (Acorus calamus), Guduchi (Tinospora cordifolia), Kachura (Curcuma zedoaria), Haritaki (Terminalia chebula), Shankhini (Boerhavia diffusa), Vidanga (Embelia ribes), Shunthi (Zingiber officinale), and Apamarga (Achyranthes aspera),* all processed in *ghee*. These herbs support *Smriti* (memory), *Medha* (intellect), and Agnivardhana (enhancement of digestive fire).[6] The formulation is particularly beneficial for managing withdrawal symptoms like mental fog, low motivation, and digestive imbalance- commonly seen during nicotine tapering.

In response to this growing public health concern, we have developed a unique Ayurveda based herbal cigarette (medicated *Dhoomvarti)*. It is designed to satisfy the habitual urge for smoking, while delivering therapeutic benefits that support a gradual reduction in nicotine dependence and help alleviate

common withdrawal symptoms such as irritability, restlessness, and mental fog.

Case Profile

A 48-year-old male, visited the *Panchakarma* OPD at Pt. K.L.S. Hospital with a longstanding history of chronic cigarette smoking, consuming 4–5 cigarettes daily for the past 17 years. He has also been regularly consuming alcohol for the last 12 years. His medical history includes mild urticaria, occasional abdominal pain, and chronic constipation. Despite multiple attempts to quit smoking and alcohol, including the use of nicotine gums and undergoing counseling sessions on two occasions, he has been unable to maintain abstinence. His visit to the OPD was accompanied by family members who are concerned about his health and are supportive of his efforts to quit. The patient himself is motivated to overcome his addictions due to growing concerns about potential future health complications. He now seeks assistance through *Ayurvedic* interventions to support his de-addiction process.

MATERIALS & METHODS

Formulation Details

- *Twak*– *Cinnamomum zeylanicum*– Stimulates, improves digestion, and reduces inflammation; adds aroma to reduce craving. [7]
- *Patra*– *Cinnamomum tamala*– Clears respiratory channels, calms nerves, and balances *Vata-Kapha*.
- *Ela*– *Elettaria cardamomum*– Soothes throat, freshens breath, and reduces irritation. [7]
- *Guggulu*– *Commiphora mukul*– Provides anti-inflammatory and detoxifying effects, easing restlessness and systemic stress. [7]
- *Jatamansi*– *Nardostachys jatamansi*– Acts as a nervine sedative and anxiolytic, relieving anxiety, irritability, and insomnia. [7]
- *Musta*– *Cyperus rotundus*– Regulates digestive upset often associated with withdrawal.
- *Madhuk*– *Glycyrrhiza glabra*– Heals respiratory mucosa, reduces anxiety, and soothes cravings.
- *Madhook*– *Madhuca indica*– Mild sedative; calms restlessness and improves sleep.
- *Kapikakshu*– *Mucuna pruriens*– Rich in L-Dopa[8], it restores dopamine levels and counters anhedonia, low mood, and craving.
- *Ashwagandha*– *Withania somnifera*– Acts as adaptogen and nervine tonic, reduces cortisol levels, alleviates stress and anxiety,
- *Aaragwadh*– *Cassia fistula*– A mild detoxifier supporting systemic cleansing during nicotine clearance.[7]
- *Guda* (Jaggery)

Proposed by Author- Cigarette filter, cigarette roll paper.

Method of Preparation

Step 1: Select therapeutic herbs
↓
Step 2: Clean & shade-Dry herbs
↓
Step 3: Grind to fine powder
↓
Step 4: Make powder burnable by mixing with burning agents:
(Licorice powder (15%), honey/jaggery, *Guggulu* resin)
↓
Step 5: Filling
↓
Take a Rolling Paper
↓
Place filter tip &
spread powder evenly
↓
Roll and seal
↓
Let dry again (24–48 hrs if honey/moisture used)
↓
Step 6: Store in airtight container in dry, dark place.

Instructions for Use

- Take the medicated cigarette and light it gently.
- Inhale softly– take three puffs one after another– this count as one bout.
- After one bout, take a short break.
- Repeat for a total of three bouts per session– making nine puffs in total.
- Use this cigarette two to three times a day, especially whenever tobacco craving arises.
- As days progress, gradually reduce the frequency of use, aiming to minimize dependency over time.
- Continue this practice for a total of thirty days.
- In addition, take *Vachadi Ghrita*[6]– one teaspoon twice daily with lukewarm water– once in the morning and once in the evening.
- Follow a light and easily digestible diet during the course.
- Practice *Pranayama* daily– preferably in the morning– to support mental clarity, calmness, and ease of withdrawal.

OBSERVATION

- During the 30-day Ayurvedic intervention, progressive clinical improvement was recorded in behavioral, respiratory, and psychological parameters.
- On day 1, the patient reported smoking 4–5 cigarettes daily with a craving intensity of 8 (on a 0–

10 scale). By day 10, cigarette use reduced to 2–3 per day and craving decreased to 5. By day 30, the patient reported complete abstinence and a craving score of 0.

- Peak Respiratory Flow Rate (PRFR) improved from 290 L/min at baseline to 330 L/min by day 10 and reached 400 L/min by day 30.
- Sleep quality was poor on day 1 but improved to good by day 10 and remained consistent.
- Withdrawal symptoms were mild during the first 10 days and became absent by day 30.
- Stress levels, initially described as frequent, were reported as occasional by day 10 and minimal by day 30. (Tab.1)

Table 1: Clinical Observations During the 30-Day Intervention

Parameter	Day 1	Day 10	Day 30
Cigarette smoked/day	4-5	2-3	0
Craving Intensity (0-10)	8	5	0
PRFR (L/min)	290	330	400
Sleep Quality	Poor	Good	Good
Withdrawal symptoms	Mild	Mild	Absent
Stress level	Frequent	Occasional	Minimal

Probable mode of action

The medicated herbs used in medicated cigarette *(Dhoomvarti)* release volatile oils upon combustion, which act as antibacterial, antifungal, and antiviral agents.[9] These aerosolized phytocompounds reach deep into the nasal and paranasal mucosa, aiding in mucolytic, anti-inflammatory, and anti-infective actions. Additionally, these compounds stimulate the olfactory nerve which in turn activates the limbic system- the brain's emotional center- thereby promoting calmness, mood balance, and emotional regulation, especially helpful during withdrawal phases marked by irritability and restlessness.

Due to *Sukshma Guna* of *Dravyas* used for *Dhumapana*; the medicated smoke effectively penetrates even minutest bodily channels, while the *Ruksha* (dry) and *Ushna* (hot) properties promote vasodilation, decongestion, and mucus clearance from the respiratory tract.[10] Certain herbs in the formulation enhance cognitive function, memory, and concentration by increasing acetylcholine availability in the brain, which is critical for learning and focus.

Furthermore, the intervention is believed to reduce cortisol levels and modulate the hypothalamic-pituitary-adrenal (HPA) axis, promoting psychological stability.[11] It also balances *Vata dosha*, which is associated with symptoms such as fear, anxiety, and mental instability, and improves blood circulation and oxygenation to the cerebral cortex, supporting brain health and clarity.

DISCUSSION

Nicotine addiction primarily acts through the dopaminergic reward system, where prolonged use leads to reinforcement of compulsive behavior. Sudden cessation disrupts this neurochemical balance, and results in dopaminergic deficits causing symptoms like anhedonia, irritability, anxiety, sleep disturbances and craving.[12] Abrupt withdrawal often fails due to the intensity of these symptoms.

Ayurveda recognizes tobacco's *Visha*-like properties (characterized by *Tikta* (bitter), *Katu* (pungent), *Ushna* (hot), and *Tikshna* (sharp) qualities. Hence, classical texts recommend *Padanshik Krama* (gradual withdrawal) to avoid shock to the system.[13] *Medicated Dhoomapana*, as employed in this study, provides a transitional therapeutic strategy that aligns with this principle.

The behavioral mimicry of smoking through Medicated Cigarette *(Dhoomvarti)* helps satisfy oral and sensory craving, while the medicated herbs simultaneously address withdrawal symptoms (both physiological and psychological). Herbs such as *Jatamansi* and *Guggulu* exert a stabilizing effect on the nervous system,[14] while *Kapikacchu* actively promotes dopamine restoration, and *Vachadi Ghrita* strengthens memory, intellect (*Medha*), and digestion (*Agni*), which are often compromised during withdrawal.

The integrated intervention also demonstrated improvements in PRFR, sleep, craving control, and stress, suggesting that a holistic, multi-targeted Ayurvedic approach can offer significant support in nicotine de-addiction, with better compliance and fewer relapse risks compared to abrupt cessation.

CONCLUSION

In this single-patient case study, the use of a *Medicated Cigarette (Dhoomvarti*) formulation-prepared with Ayurvedic herbs including *Kapikachchu, Jatamansi, guggulu* etc. Along with support of oral intake of *Vachadi ghrita,* dietary regulation*,* and *Pranayama*- was evaluated over a 30-day intervention period as part of a *Prayogik Dhoomapana*- based de-addiction protocol.

The treatment not only addressed the physical dependency on nicotine but also helped alleviate psychological withdrawal symptoms such as craving, stress, irritability, and poor sleep.

The synergistic action of ingredients targeted both neurochemical imbalance (e.g., *Kapikachchu's* L-Dopa effect on dopamine restoration) and somatic symptoms (e.g., *Jatamansi's* calming effect, *Guggulu's* detoxification, *Musta's* gastrointestinal support). By maintaining the behavioral mimicry of smoking in a controlled, medicated format, the patient experienced both psychological and physiological relief without further nicotine exposure.

This case suggests that Ayurveda- based *Dhoomapana* (medicated cigarette) may serve as an effective adjunct tool for gradual tobacco de-addiction, especially in individuals who struggle with abrupt cessation. Further clinical studies on larger sample size are warranted to collect the clinical data for further research.

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