



Applied therapeutic principles in Kaumarbhritya

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ABSTRACT : Kaumarbhritya is one of the prime branches of Ashtanga Ayurveda dealing with the rules and regimes regarding nurturing a child in all aspects. Ayurveda has mentioned the importance of a healthy progeny which renders the nation a better future. But children are also considered as the most vulnerable class of society as they are unable to express themselves, dependent on caretaker. Thus children need a special attention and nursing. As children are in a rapid continuous process of growth and development physically as well as intellectually the diseases occurring in children, their manifestations are far more different than that of adults. The drug dose formats, modes of drug delivery are important aspects of therapeutics in children. Consequently there arises a need to understand applied therapeutic principles to obey for approaching a sick child. This paper illustrates general as well as panchakarma related applied therapeutic principles.

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1. Introduction

Out of the eight branches of Ayurveda two of them are states of life i.e balyavastha, and vriddhavastha [1]. This separate consideration of child and its disorders signifies the importance of kaumarbhritya in Ashtanga Ayurveda. Acharya Kashyapa mentions that a healthy adulthood is reflection of a healthy childhood [2]. The treatment modalities of diseases in children are far more different than that of adults. Pediatric age group is the most vulnerable class of our society due to their tender nature (saukumaryatva), lower body mass indexes (alpakayatva). They cannot consume all types of foods (sarva anna anupasevantva). All dhatu are immature in nature. Also quality and quantity of doshas and dushyas is less. The equilibrium of functional and structural entities like Prana, Dosha, Dhatu, Bala, and Ojas is unstable. Secondary sexual characters are not yet fully developed. Status of Agni in children is unstable as they are not acclimatized with different types of foods. Also, cannot properly express their demands and perform all kinds of activities like as an adult [3]. Considering all these differences Ayurvedic texts have mentioned the applied therapeutic principles in Kaumarbhritya. General principles are scattered among all ayurvediya texts which have been collectively arranged as per age classification.

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2. Garbha, balya, kaumara, youvan avastha

Acharyas has considered the Garbhaavastha (intrauterine period) into age classification [4]. This signifies the role of a pediatrician starts from the very moment of conception. Balyavastha [5] (from birth of a child till 1 year of age) is the period of transitions of food habits changing from exclusive breast milk to the regular adult food materials. Kaumaravastha [6] (from 1 year to 16 years of age) is the widest period of childhood as toddler, pre-school, school age, and early adolescent period. Yauvana avastha [7] (16 years to 34 years) covers adolescent period where puberty approaches resulting in psycho-somatic changes.

3. General principles

1. As structural and functional development of organs in childhood is not properly completed, we should carefully think about their medication. In Ayurveda, basic principles of treatment are according to Rasapanchaka i.e Rasa, Guna, Veerya, Vipaka, and Prabhava. Although five basic elements which are Prithivi, Aap, Agni, Vayu, Akaash constitute each and every drug in universe, basically children are in possession of Prithvi and Aap mahabhutadhikya. These two are responsible for structural growth in Balyavastha. Second important thing is that the stability of different organs in body is completely dependent on these two mahabhutas. So whenever we want to stabilize and improve the functionality of organs in pediatric practices, we should always keep in mind, the role played by these two mahabhutas. Thus considering this fact, we should use Madhura rasa preferably. Afterwhile, Vipaka is a biotransformation of rasa. Drugs with Katu Vipaka excrete baddhakosthata (constipation) which is not expected in pediatric practice. So, Madhura Vipaki drugs should be used preferably as they are mild laxative in nature (srushtavinmutra). As we have seen earlier that Pediatric age group is the most vulnerable class of our society due to their tender nature (saukumaryatva), so this saukumaryatva should be always kept in mind, whenever we are going to treat the pediatric patients. For this purpose the most important thing to be taken in to consideration, is the concept of veerya. Thinking upon veerya concept, ushna veerya drugs are considered more of a catabolic in nature. In children mild drugs which are anabolic in nature, should be prescribed. Concluding, the general principle of line of treatment in children should be focused upon rasapanchaka of drugs, thus selection of drugs will preferably done considering Madhura rasa, sheeta veerya and Madhura vipaka.
2. The symptoms of diseases are Avyakata (not fully expressed) in children. Thus a delay in treatment leads to more complications. According to Acharya Charaka a sick child should be treated in the Purvaroopavastha [8] only (state of appearance of prodromal symptoms) which will prevent complications.
3. Before commencement of treatment a physician must examine the sick child by considering following points as prakriti (nature of child and disease), hetu (cause), purvaroopas (prodromal symptoms), lakshanas (actual signs and symptoms), and upashaya (relief) [9].
4. A child must be advised diet (ahara), daily routine (vihara), opposite to place (Desha), time (Kala), and nature of disease [10].

Table 1

Sr. No.	Avastha	Wholesome
1.	Kasheerapa	Milk
2.	Ksheerannada	Milk and Food
3.	Annada	Food

5. If anything is un-congenial to a child that should be stopped gradually by tapering it off than abruptly discontinuing, because wholesome (satmya), substances may become asatmya (unwholesome) after sometime [11].

6. Vitiated breast milk is the reason of most of the diseases in ksheerapa child[12]. Thus a Shuddha(pure and non vitiated breast milk) breast feeding practices are important.
7. In dentition period digestive format is in the process of transformation which leads to instability thus being a reason for many diseases. Theyare usually less severe, thus one should not interfere much as they are usually self limiting in nature[13].
8. Diseases in children are same as that of adults in terms of doshas, dooshyas but their manifestation and dosage format of drug is different than that of adult[14]. Appropriate selection of drugs and calculation of doses is the most important aspect of treatment children as there is wide difference between doses of a child than that of adult. Dose schedulehas been mentioned in Kashyapa samhita according to advancing age of child. Forghee it extends from a stone of a plumupto the amalakmatra(fresh Indian gooseberry) and should not exceed than this[15].
9. Modes of drug administration in children– Drugs prescribed to a child should preferably of madhura (sweet), in kwatha form (decoction),usually with milk as an anupana, mridu (soft) in nature[16].
10. Medicines and foods which are Ati snigdha(excessively fat containing), Ati ushna (excessively hot in potency), Ati rooksha (excessively dry),Ati amla (too sour)in nature should be avoided[17].
11. Mode of Drug delivery- A sick child who is exclusively breast fed, medicine is to be administered with breast milk or to mother or wet-nurse itself as it eventually gets secreted from breast milk.A child receiving breast milk and food together,medicine should be given to mother as well as to child.A sick child who consumesfood and no more dependent on breast milk then medicine could be directly given to child itself[18]. Also the dosages are mentioned for kasheerapa, ksheerannada and annada child [19].

Table 2

Age	Whom to administer medicine	Dose of drug
Ksheerapa	Mother/wet-nurse	Anguliparva dvaya
Ksheerannada	Mother/wet-nurse + Child	kolasthi
Annada	Child	kolamatra

12. A desired drug in paste format could be applied on breast of mother or wet-nurse and child is allowed to suck. This method signifies the secretion of active principles of drugs into breast milk[20].
13. Acharya Kashyapa has given an indication that it may causestoxicity of drugs when used for longer period under the age of 12 years[21] otherwise child loses his strength and growth gets retarded too.
14. Discontinuation of drug even after the cure of disease is a wrong practice. The drug should be continued until the total recovery[22] which prevent relapse of disease.

4. Principles from panchakarma therapy

Panchakarma therapy is the stronger method of elimination of doshas by removing them out of body. Though it has been mentioned that, stronger medicinal procedures must not be used in children but a modified panchakarma could be definitely used.

1. Snehana (oleation therapy)-Bahya (external application) as well as abhayantar (internal) snehavana has been indicted in children. Small amount of snehana in children acts as an anabolic (brihana) in nature also increases general vitality as well as mental capacity [23].Snehana should be given in very minute quantity to kasheerapa child due to pre-dominance of kapha dosha[24].
2. Swedana(sudation therapy) - Though the swedana has been said contraindicated in children in usual practice, Acharya Kashyapa has mentioned milder forms of swedana as hasta swedana (upto 4 month of age), and pata sweda (upto 6 years of age) [25].

3. Vamana (Emesis) - It is the first most procedure performed in Jatamatra paricharya of newborn [26]. Vamana can be administered easily in children due to kapha dosha dominance,so snehana is also not required.
4. Virechana (Purgation) –Virechana is to be performed only in emergency conditions [27]. Also when virechana is contraindicated basti (enema) could be given as an alternative in case of children.
5. Raktamokshana (Blood letting) – Blood letting is contraindicated in children below 16 years of age [28], because dhatus are in aparipakava avastha (immature state)
6. Nasya (elimination of doshas from nasal pathway) - Pratimarsha nasya could be given in all age groups [29]. But marshy nasya is contraindicated below 7 years of age [30].

Conclusion

Children are different than adults in many aspects. Thus their diseases manifest differently. Symptoms of these diseases are avyakta (not fully expressed) and get complicated fast. Thus general guidelines while approaching a sick child are illustrated. Panchakarma are not fully contraindicated but a modified approach regarding its principles has been put forth. It describes all important aspects and principles collectively for treating a sick child.

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