A REVIEW ON COMPARATIVE EVALUATION OF ORAL AYURVEDIC FORMULATION AND BASTI PROCEDURE IN KARSHYA W.S.R. TO MALNUTRITION

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ABSTRACT

India is home to 40 percent of the world’s malnourished children and 35 percent of the developing world’s low-birth-weight infants live in India; every year 2.5 million children die in India, accounting to one in five deaths in the world. More than half of these deaths could be prevented if children were well nourished. India has a very slow progress in the reduction of of-of child malnutrition. The prevalence of child malnutrition in India deviates further from the expected level at the country’s per capita income than in any other developing country. In the field of pediatrics, there are so many diseases which have no or limited answers in the contemporary medical science. Growth and development is a physiological process provided all factors influencing them are healthy. Failure to thrive or small age is resulting when these factors are deficient, and in Ayurveda, it is addressed as Karshya. Ayurveda, Brimhana, and Rasayana therapies have been advocated as a line of treatment in Karshya. The present review work has been done to find out the more beneficial approach to oral medication alone and along with procedures, especially Basti. For this purpose, three research works conducted in the department of Kaurmarbhritya are reviewed for the assessment of comparative efficacy. Aims and Objectives: The study was designed with the objectives: To study the role of Basti procedure in Karshya. To reviews, the clinical research works on Basti procedure in Karshya (malnutrition) in IPGT & RA, Jamnagar and reach a final conclusion.

KEYWORDS: Kaurmarbhritya, Karshya, pediatrics, Basti.

Introduction
Malnutrition is a term which has two subsets one is undernutrition and another on is overnutrition. People are malnourished if their diet does not provide adequate calories and protein for growth and maintenance or they are incapable of food utilization due to an illness. A child can suffer from malnutrition by the intake of inadequate diet and repeated infections. The basic need for a human is food, house, and health care and the growth of cellular system and tissues is completely dependent on quality and quantity of food. It indicates that malnutrition is an outcome of excessive hunger and inadequate food supply to a child which creates a risk factor for disease and can increase the risk of morbidity and mortality. Good nutrition creates an environment for children to survive, grow, develop, learn, play, participate and contribute their full potential for country although malnutrition robs their future and leaves a young life hanging in the balance. Stunting is the reason behind the devastating of the result of malnutrition in-utero and early childhood. By the suffering from Stunting a child can never attain his full possible height and their intellectual may never develop to their full cognitive potential. Globally, approximately 151 million children under 5 suffer from stunting. A disease or poor nutrient intake can cause Wasting in children which are the life-threatening situation. Weak immunity and susceptibility towards long-term developmental delay are the possible outcomes from wasting even child can face an increased risk of death, when wasting is severe. The possible
treatment of these children is treatment and better observational care. In 2017, nearly 51 million children under 5 were wasted and 16 million were severely wasted. The learning difficulties in school, less earning as an adult and barriers to participation in their communities are also the possible effects of this situational defect. In diagnostic purpose, ‘failure to thrive’ (FTT) is a term used to describe infants and young children whose weight is persistently below the 3rd percentile for age on an appropriate standardized growth chart or less than 60-80% of ideal weight for age. (1) In the terms of Ayurveda sciences, the term undernutrition has very much resemblance to Karshyay which means lean and thin. Karshyais derived from the root word ‘KrushTanukarne’ which means emaciation of the body by the disease or condition. According to Acharya Charaka, the prime factor in the pathophysiology of Karshyais food intake in less quantity or inappropriate quantity. TwagastiShesho, (a remnant of skin and bone), Atikrusha (over lean) and ShoolParva (thick nodes). (2) are the main symptoms. According to Sushruta, lean and fattiness of body depends upon Rasa-Dhatu even a human being is made by his Rasa Dhatu, she should be cautious about his Rasa Dhatu. (3) Basti in Ayurveda is a unique procedure which express its function according to Veerya (potency) and Prabhava (astonishing effect), these are beyond our thoughts and measurements. By definition itself, it is clear that assumption of the mode of action of Basti is more complicated. Among three Doshas, Vata is prime Dosa which has the capacity to move from one place to another. This Vata is responsible for moving Pitta and Kapha from one place to other. As per the Ayurveda science, Basti is considered as the best treatment for Vata and it actively works on ShakhagataVata, MarmagataVata, KosthagataVataas well as Urdhwagata, Adhogata, Sarva-Avayaygata. So Basti is considered as Chikitsardha. (4,6) Role of ShariraVriddhikarBhava in growth & development according to Acharya Charaka, there are four factors which are responsible for the growth & development of the body and they are as under1. Kalayoga (Favourable disposition of time) 2. Svabhava (Nature) 3. Aharasaustattava (Excellence of the properties of food) 4. Avighata (Absence of inhibiting factors). Among the four ShariraVriddhikarbhas, Aharasaustattava plays an important role than the others. Because it is more responsible for the growth & development of the body. Acharya Charaka has mentioned Aharasaustattava (AharaSampat) as a Balavriddhikarbha in ShariraSthana. According to Acharya Charaka, one should regularly take such foods which are responsible for the maintenance of good health and prevention of the diseases. He has also mentioned that food is the only responsible factor which promotes the growth and development of the body. (7,8) Proper growth of the body and prevention of the diseases are the contributions of the wholesome diet. The wholesome diet is SanritpKarak, balakarak as well as Dehadharak and Poshek. Ayu, Varna, Smriti, Oja, and Agni are increased by taking the wholesome diet. (9–10) A proper quantity of food increases Jathragni, just like the small amount of fuel increases fire. According to Kashyap, food is the excellent drug which keeps the body healthy. Acharya Bhel has considered a Mahausdhda. (11–12) Acharya Kashyap also has offered some esteemed position to the Ahara. Ahara confers immediate strength to the body. Food having only one Ras leads to weakness in the body and provokes the doshas while the food having all the six Rasas attributes growth, strength, and development of the body. Hence regular intake of food containing all the Shadaras gives good support to the body. (13)

Materials and Methods
The clinical observations and results of research studies, which were carried out in a pediatric age group in the Department of Kaumarbhriitya at I.P.G.T. &R.A., Jamnagar.
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MALNUTRITION

Causes

Aharaja
Rukshaannapana, Vatikaannapana, Kashaya, Katu, Tikta Rasa Sevana, Alpashana, Pramitashana, Anashana, Langhana, Upavasa

Early cessation of breast feeding,

Viharaja
Sharirika-Kriyatiyoga, Ativyayam, Malamutradinigraha, Rukshasnana, Rukshaudvaratan, Atiadhyayana, Vatasevana, Atapasevana, Kaphaativartana, Shonitaativartana, Malaativartana, Dukhasayya, Dukhaasana, Balavatanigraha, Atibhargamana

Mansika-Atibhaya, Atishoka, Atichinta, Atikrodha, Atibha

Others
Vatikaparakriti, Bhutabhishata, Grishmaritu, Nityarogi

PIE CHART OF MALNUTRITION AND DISEASES

Fig No.1 Prevalence of malnutrition in Rural Area
Discussion & Results
A study carried out with Yapana Basti and Shiva Modaka had also shown the good result individually and combine effect in grade III and grade IV malnourished children. The study was also carried out in infants with Matrustanya Basti and AshwagandhaKshir Basti in children, in infants through the sample size was small it had shown the highly significant result. In next two studies, Basti had shown the better result than oral formulations as Basti have the Vatahara property and with Madura, Snigdha, Shita Dravyas it leads to Brimhana. The outcome of the research represents that Basti procedure shows a better result then internal medicine in karshya with the same drug due to YogvahiGuna of Tailam and VataharaGuna in Basti. The controlled gain over Vata leads to the Vighatana of SampraptiGhatakaof disease Karshya.Basti showed a better anabolic effect by the increase musculature and deposition of fat. In all four studies, there was a significant result in subjective parameters like Dhamanijaldarshana, Appetite, Appearance, Daurbalya, Krodha, Shoka, Harsha, Bhaya.

Conclusion
So the results are showing that the Ayurvedic medicine whether the classical formulation or the formulation based on the concept of Dipana, Rasayana, Balya, Strotoshodhakaproperties etc. are effective in the management of Karshya in all age group and grade III and grade IV malnutrition also. Basti procedure shows a better result than internal medicine in karshya with the same drug due to Yogvahi Guna of Tailam and Vatahara Guna in Basti.

References