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CONCEPTUAL REVIEW ON CHILD CARE: AN AYURVEDIC PERSPECTIVE

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ABSTRACT

Children are the future pillars of society. A healthy child can only make a society strong and healthy and so the nation also. *Ayurveda* showed the importance of child care many years ago being ancient science by giving *Bala* or *Kaumarbhritya* as a separate branch or *Anga* of *Ayurveda*. Early childhood is a critical period in development, with cognitive and socioemotional domains forming the building blocks of children's later life. Realizing the fact an unhealthy mother can never be able to give birth to a healthy child and so a child not **healthy** at the time of birth will not become a healthy adult. In *Ayurveda Kaumarbhritya* or *Bala, chikitsa* includes *Kumar Bharanm, Dhatree KshirdoshaSanshodhan, Garbhopakram Vigyan, Sutikaupakram, etc.*

Keywords: Ayurveda childcare, Kaumarbhritya, healthy child, Kumar **Bharanm**.

INTRODUCTION

In Ayurveda, perfect health is defined as " a balance between body, mind, spiritual and social wellbeing. This definition perfectly matches when the care of life will be taken from the preconception period up to the adolescent age in the case of pediatric care. In Ayurveda, by seeing the definition of Kaumarbhritya or Balaroga we found the care of the child should be taken from the preconception period up to the adolescent age along with Dhatri Chikitsa for the healthy child. This enormous purpose of Ayurveda is seen in the definition of Kaumarbhritya itself, so there is a necessity to follow the principal of Ayurveda towards child development in today's modern era. India has the highest number of child birth as well as child death for any single nation in the world. By knowing the fact it is necessary to know the role of Ayurveda in pediatric care in today's era by Ayurveda principles of healthy conception, pregnancy, delivery, and child care during intrauterine life and after birth through many activities like Brahmacharya Palan, Punsawan Karma, Garbhini Paricharya by Ahar, Vihar, Masanumasik Upkrama, Sutikagar Nirman, Abhyanga, Snana, Lehan Sanskara, Medhya Dravya, Dhupan, Dhatri Yojana, Dhatri Chikitsa Kridanak and many more for the health of the child. Aim: To study the principal of ayurveda in pediatric from preconception to adolescent age. Objective: To study the conceptually advices of ayurveda towards pediatric care. Materials and methods: Kashyap Samhita, Harit Samhita, Charak Samhita, Sushrut Samhita, Ashtang Hriday/Sangraha read thoroughly, and various research articles related to Bala roga or Kaumarbhritya studied to understand the role of Ayurveda in pediatric care.

Definition:

कौमारभृत्यंनामकुमारभरणधात्रीक्षीरदोषसंशोधनार्थं

दुष्टस्तन्यग्रहसमुत्थानाञ्चव्याधीनामुपशमनार्थम् ॥ सु.सू.1/13 गर्भोपक्रमिवज्ञानं सूितकोपक्रमस्तथा । बालानां रोगशमनी क्रिया बालिचिकित्सितम् ॥ हा.सं.प्रथम स्थान 2/16 'कुमारस्य भरणमिधकृत्य कृतं कौमारभृत्यं । ' च.सु.30/28- चक्र. टीका'कुमाराणां भृतिर्धारणं पोषणं च तस्येदिमिति कौमारभृत्यम् । सुश्रुत टीका चक्रपाणि

The word *Kaumarbhritya* made up from two words कौमार + भृत्य

Kaumar Nirukti: (Monnier Williams, Sanskrit- English Dictionary) 1. कुमार कु+मार -- कु - Deterioration, Deficiency. मार (मृ) Easily dying.

Bhritya Nirukti: 'भृत्य': 'भृञ भरणे' To get / To Carry /To Care / To protect / Nourishment.

Childcare approach in Ayurveda:

- In Asamgotriya Sharir / Atulya Gotriya Sharir Ayurveda talked about marriage out of the same Gotra for the healthy progeny. When conception occurred in parents belonging to the same Gotra, there are chances of suffering the upcoming offspring by different diseases.²
- Brahmacharya Palan's approach is also helpful
 in having good progeny. The conception of the
 proper physical and mental condition of the father
 and mother in at favourable environment is important for a healthy child.

Childcare during intrauterine life:

• Punsawan Karma:

Punsawan Karma adopted for healthy progeny should be done after conception but before the conspicuousness of the organ or up to two months.³

• Garbhini Paricharya (Antenatal care) for healthy progeny:

It includes *Masanumasik Upkrama*, *Garbhopghatak Bhavaa*, and *Garbhasthapak Dravya*'s explanation. *Acharya Charaka* said that the pregnant woman desirous of producing a through (healthy and goodlooking) child should give up a non-congenital diet and mode of life and protect herself by doing good conduct and using a congenital diet as a mode of life.

Aims of *Garbhini Paricharya:* Nourishment of *Garbha*, to avoid the *Garbhavyapada* and *Sukhaprasava* are the basic aim of *Garbhini Paricharya*. Specific decoction (water) for pregnant woman's bath ⁶ Acharya Vagbhata has given use of a cold de-

coction of the pulp of Bilva, Karpasa, Phamohana,

(petals of rose), *Pichumanda*, *Agnimantha*, *Jatamansi*, and *Eranda Patra* or the water prepared with *Sarvagandha* (all fragrant) drugs should be used for bathing by the pregnant woman.

Garbhini Dwara Mani-Dharan (Amulet for pregnant woman) ⁷: The pregnant woman should wear the amulet made of '*Trivritta*' at her waist.

Month-wise regimen (Ahar, Vihar, and Aushadhi) for pregnant woman: Acharyas described specific month-wise management for a pregnant woman to fulfill her requirements and of the growing fetus also. The requirements of the developing embryo are different in different months so acharya mentions Paricharya according to the need of the embryo or foetus.

Clinical Importance of *Garbhini Paricharya* : First Trimester

Embryogenesis takes place in the first trimester hence an increased amount of energy is required during this period. All these energies will be provided by *Kshira*, *Ghirta*, *Krusara*, *Payasa*, *and Kshira* medicated with *Madhur ausadhi*. During the first trimester of pregnancy, most women experience nausea and vomiting, and thus cannot take proper diet which results in dehydration and loss of nutrients. The use of a cold and sweet liquid diet and milk will prevent dehydration and supply the required nourishment. Drugs of the *Madhura* group being anabolic will help in the maintenance of proper health of the mother and foetus.

Second Trimester

Fourth month onwards muscular tissue of the foetus grows sufficiently requiring more protein which is supplied from animal sources such as meat, milk, cheese, butter, etc. Milk provides nourishment and stability to the foetus. Cooked *Sasti* rice advised in *Garbhini Paricharya* is rich in carbohydrate and provide energy to the body. Meat provides nourishment to the foetus and helps in the muscular growth of the foetus. By the end of the second trimester, most women suffer from edema of feet and other complications of water retension.so *Ghrita* medicated with *Gokshura* is used which is a good diuretic that will

prevent the retention of water as well as its complications.

Third Trimester

Ghirt medicated with Prithakparnayadi group of drugs are diuretic, anabolic, relieve emaciation, and suppress Pitta and Kapha. Their regular use in the seventh month might help in maintaining the health of the mother and foetus. Yavagu consumption in eight months which is Balya and Brimhana provides nourishment to the mother and foetus. Most women suffer from constipation in late pregnancy, Asthapana Basti administered during eight months which is best for vata Anulomana relieves constipation. besides this may also affect the autonomous nervous system governing myometrium and help in regulating their function during labour. The tampon of oil in the vagina provides lubrication of the cervix, vaginal canal, and perineum thus helping in normal labour. This may destroy pathogenic bacteria in the vaginal canal and prevent puerperal sepsis. Regular use of tampons might influence autonomic fibers governing myometrium and regulating their functions. Milk and drugs of the Madhura group have been advised for the entire pregnancy period. Milk is the complete food and the drugs of the Madhura group are anabolic, thus use of these will help in the maintenance of proper health of the mother and the growth and development of the foetus.⁸ Aacharya says that by following the Garbhini Paricharya from the first to ninth month her Garbhadharini (fetal membrane or vaginal canal), Kukshi (abdomen), sacral region, flanks, and back become soft, Vayu moves into its right path or direction; faeces, urine, and placenta are excreted easily by their respective passages; skin and nail become soft, woman gain strength and complexion; she delivers a desired, excellent, healthy child possessing all the qualities and long life.⁹

Childcare after delivery in Ayurveda:

The Different Steps of Navajata Shishu Paricharya Mentioned by Acharya's Vagbhata: 10

Ulvaparimarjana (Cleaning of Vernix caseosa), Pranapratyagamana (resuscitation of newborn, Nalachhedan (umbilical cord cutting), Snana (bathing), Pichudharana (Maintain temperature), Suvarnaprashana (Ayurvedic immunization), Garbhodakavamana (Stomach wash), Jatakarma. The first minutes after birth are critical to reducing neonatal mortality. The measures of new born care describe in our ancient texts indicate their wisdom regarding resuscitation, prevention of hypothermia; maintaining hygiene for the prevention of infection and normal breathing, etc. The concept of immunization by explaining Suvarn Lehan and Medhya Dravya can help in child care in a great sense in today's modern era.

Suvarna Prashana:

सुवर्णप्राशनं ह्येतन्मेधाग्निबलवर्धनम् । आयुष्यं मङ्गलं पुण्यं वृष्यं वर्ण्यं ग्रहापहम् ॥ मासात् परममेधावी व्याधिभिनं च धृष्यते । षड्भिर्मासैः श्रुतधरः सुवर्णप्राशनाद्भवेत् ॥ का. सं. सू. लेहनाध्याय

The Suvarna Lehana Sanskara is described in Kashyapa Samhita. Metallic purified Gold is rubbed on a clean rubbing stone with water and is mixed with

Medhya Rasayana Dravya, Ghrita, and honey is given to the newborn. Acharya Kashyapa described that Suvarna Lehan increases Medha, Agni, and Bala.

Benefits: Improves intellect, digestion, metabolism, immunity, and physical strength. Increase life span, aphrodisiac, it improves colour and complexion and also protects from micro-organisms.

Suvarna Prashana given for 1 month makes the child Parama Medhavi (highly intelligent), Suvarna prashana for 6 months, the child becomes Shrutadhara (able to remember the things which are just heard.)

Mode of action of Ayurvedic Immunization ¹² Majority of drugs works in multiple areas which helps in the achievement of *Vyadhikshamatva*, through its *Dipana, Pachana, Medhya*, and nonspecific immune booster properties.

Pharmacological action of some drugs ^{12,13} Table No 01

Drugs	Proved Pharmacological Actions
Yashtimadhu (Glycyrrhiza Glabra)	Enhance the macrophage membrane function.
Guduchi (Tinospora cordifolia)	Inhibit lipid peroxidation and superoxide and hydroxyl radicals in vitro.
Amlaki (Emblica officinalis)	Strengthen the defense mechanism. against free radical damage induced during stress.
Haritaki	In immune-modulation studies, humoral immunity was enhanced where T-cell counts
(Terminalia Chebula)	remained unaffected in the animals, but the cell-mediated immune response was stimu-
	lated.

Kumar Aagar Varnana (pediatric ward), Kumar Dharan (caretaker of the child), and Kridanaka (Toys of the child) also play a role in childcare.

Childcare according to Balayavastha:

During Kshirad, Annad, Kshira Annad Avstha different treatment principles are given where for the health of the child medication is mentioned for the child as well as the mother also. Matru Stanya acharya had given Dhatri Yojana thousands of years ago and throughly described how should Dhatri be by considering the child's health.

Nowadays human milk bank is established but our acharya explains the need for *Dhatri* and *Dhatri Yojana* thousands of years ago.

Consequences of impaired child growth in modern science description:¹⁴

Maternal and child undernutrition are the underlying cause of 3-5 million deaths annually and account for 35% of the disease burden in children younger than 5 yr. Several major disorders of later life, including coronary heart disease, hypertension, and type 2 diabetes, originate from impaired intrauterine growth and development. These diseases may be consequences of 'programming, whereby a stimulus or insult at a critical, sensitive period of early life has permanent effects on structure, physiology, and metabolism. The 'fetal origins' hypothesis (Barker hypothesis) proposes that alterations in fetal nutrition and endocrine status result in developmental adaptations that permanently change the structure, physiolo-

gy, and metabolism, thereby predisposing individuals to cardiovascular, metabolic, and endocrine diseases in adult life.

DISCUSSION

In Ayurveda pediatric care starts from the preconception like Asamgotriya Matru pitru Niyojan, Brahmacharya rules, During pregnancy (intrauterine care) by Punsawan Karma, Garbhini Paricharya by Masanumasik Upkrama, Garbhopghatka Bhavaa explanation, Garbhasthapakdravya Dravya, etc. After delivery by Navajata Shishu Paricharya, by different Sanskaran like Suvarna Lehan, Medhya Dravya, Balyavsthanurup Chikitsa, Dhatri Yojana, Kumar Aagar, Kumar Dharan, Kridanak description, etc.

CONCLUSION

In *Ayurveda*, eminent thinking for pediatric care is found by knowing the care taken from preconception up to the adolescent age by different *Karma*, *Ahara*, and *Vihar Aushadhi Yojana* for having healthy children. As we have seen in modern science gives consequences of impaired growth are due to impaired intrauterine growth and development the childcare should as explained in Ayurveda should take from precenception up to the adolescent age as explained by Acharya by different *Sanskara* and *Karma* is a need of today's modern era.

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