

AYURVEDIC RATIONAL OF COLOSTRUM - A REVIEW

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ABSTRACT

A thin white opalescent fluid, the first milk secreted at the termination of pregnancy is called colostrums.^[1] It is differ from the milk secreted later as it contains more lactalbumin and lactoprotein. Colostrum is secreted by the breast in the first 3 to 6 days. It is yellowish in color, transparent and contains more protein and minerals but less sugar and fat than mature milk.^[2] The modern science says with complete assurance that colostrum is vitally important for the future health of a baby. Thus they advise exclusively breast feeding from the very first day to new born baby. It is very easy and safe way to get natural immunity to newborn as reticuloendothelial system of neonates is inactive for first three months. But science of *Ayurveda* has different opinion about it. In *Ayurveda* there is *piyush* term for colostrum. Formation of *piyush* starts in antenatal phase. Thus when it starts secreting from breasts after delivery it is said to be *kaldushta*. Also it is *guru* (heavy to digest), thus becomes *swabhavdushta*. Thus chances of *dushtstanyapanjanya rogas* increases in babies who had been breast fed on very first day. *Acharya Kashyapa* says to avoid *piyush* as it causes *jwara* due to *strotorodha* because of its *guru*, *picchil* and *Sandra gunas*.^[3]

Keywords: Colostrum, *piyush*, *stanya*

INTRODUCTION

According to modern medicine, breast feeding the newborn immediately after the birth is very essential. However, Ayurveda denies it as the first milk i.e colostrum is very hard to digest for newborn. Charak *Samhita* does not talk about colostrum feeding but it talk about giving honey with *ghrita* before feeding, which should be with right breast.^[4] Sushrut Samhita has different opinion about it. It suggests avoiding breast feeding for the first 3 to 4 days. Instead it suggest to give honey, *ghrita* and *ananta churna* on the first day, *lakshmana siddha ghrita* on second and

third day, and newborn fist full honey and *ghrita* on fourth day and from that evening start breast feeding.^[5] Colostrum is the word of modern science. So first we will see modern science aspect of this subject then we will discuss its *Ayurvedic* references. Whether they knew this concept? What term they used? What is their opinion about it?

Definition of colostrum-

It is sort of watery, sticky, transparent milk, produced in the first few days after birth or delivery and

contains large amounts of lactoglobulin and immunoglobulin A (IgA).

Contains of colostrum-

It is rich in protein, minerals, vit. A, E, & B12 and has less fat and sugar than later milk.

Benefits of colostrum-

The protein fraction of colostrum contains large number of antibodies. The same ones that are present in the later milk but many more of them, these give the newborn baby resistance to infection at a time when he would otherwise be particularly susceptible. The antibodies also coat the gut lining which not only prevents organisms from entering the blood stream but also block the allergic responses.

The low fat content of colostrum is advantageous to newborn baby because he secretes little lipase of his own and would have difficulty in digesting larger amount of fat in the first day and so.^[6]

An antitrypsin factor in colostrum (also present in mature milk) helps to prevent digestion of antibodies by trypsin in the gut. Antibodies as we have seen are proteins and the gut trypsin breaks down proteins under normal circumstances to ensure that these life saving antibodies are not destroyed, colostrums contains this special anti-trypsin enzyme.

Colostrums are produced in fairly small amount. It is meant to this way and even very small volumes are worth their weight in good to the baby. So valuable is colostrums in protecting the new born baby against infections that some experts believe that every bottle fed baby should receive a 'colostrum cocktail'. Farmers have been giving this to their valuable cattle's for years.^[7]

Ayurvedic aspect of colostrum-

Breast secretions immediately following *prasuti* (delivery) are termed as *piyush*. *Piyush* till it attains desired clarity is termed as *morata*.

Due to their above mentioned properties *piyush* and *morat* prove extremely beneficial to those having intense gastric fire and those who were suffering

from insomnia such is not the case of newborn. His bodily functions having yet to reach an optimum level do not permit him to digest these extremely guru substances, and nor does he suffer from insomnia.

The secretion which oozes out of the breast of the mother in the first 3-4 days are not fit enough to be termed as *stanya* (human milk) because it is devoid of the properties and functions of *stanya*. Any *dravya* (*substance*) is an insurable association of its properties (attributes) and functions. If it cannot perform the desired functions, expected functions then it cannot be the same substance.^[8]

The mother who was fed on the only one third of the normal *ahara rasa*, other third being utilized to nourish the *garbha* (fetus) and the remaining one third being used for the development of *stanya* (human milk). A fully grown woman, maintained on one third of her normal requirement of nourishment, her *dhatu*s have to become lax and expand in order to accommodate the daily growing *garbha* and *stana*. The women also take a lot of exertion on the part of mother as the *garbha* has to pass through a narrow, hardly yielding bony canal, the exertion is tremendous and the resultant exhaustion is also considerable for the mother as well as the child. Extreme exertion in a body which was denied its normal nourishment and the *dhatu*s has lost their *samhanana* and has become loose. The *jatharagni* is at its lowest functional level; hence *panch-kola yavagu katurasa* has a very beneficial effect on *koshtagni*. *ghrita* is *jivaniya* and *ojaskara* and can recoup the seven *dhatu*s very fast when it is administered with *katurasa*, the chances of it remaining undigested are much less.¹

This *katu-rasa sidhha ghrita panna* paves the way for establishing the normal *jatharagni* activity in the mother.

Rasa which is formed is now available in double the amount (two third) hence she can recoup faster and the separation of *stanya* from *rasa* becomes apparent from the third or fourth day. This time is reasonable, as we see in the chapter dealing with *snehana*, a

mrdu kosthi would exhibit the signs of *samyak snigdhavastha* in three days time.

Hence the mother after delivery, after having the *katurasa sidhaa ghruta* and *sthanika sneha-sveda* becomes *samyak snigdha* and exhibits *samyak snigdha lakshane*.^[9]

This *vatanulomya* ensures the proper flow of *garbhashayagata shesha dosa*, proper *mala mutra visarjana* and a proper *stanya* flow. Till this is achieved no proper breast milk can be obtained. This is stated by *Susruta*.^[10]

Hence it would be only logical to refer that anything emerging out of the breast for 3-4 days cannot be *stanya*. It is either *piyush* or *morata* as we have seen before.

Stanya sampat lakshane- (characteristics of pure milk) -

The *stanya* should be of normal milky white color normal milky odor normal taste- sweet, normal feel, cold, sticky, little oily, when it is extracted in a pan containing water, it should flow easily, mixed with water freely, and become of a homogenous color consistency. It should not exhibit threads or any other abnormality. Then and only then it is normal and it can be of any help to the baby.^[11]

Examination of *styanam* (human milk)

The breast milk should be tested in water as both derived their origin from *aapmahabhuta*. It should positively exhibit coldness, clarity, fluidity and inherent milky whiteness which resemble a conch. Similarly when it is put in water it should mixed freely at the same time it should not exhibit the following. Frothing on extraction it should not have strands in it, it should not float on water neither should it drown in water without mixing.^[12]

Whose milk should not be administered?

A woman who is hungry grief-stricken, exhausted, having vitiated *dhatu*s, pregnant, having fever, weak, obese, to ease suffering from *vidagdhajirna* or who has *virudhhaahara* should not feed the child as it can have disastrous results.^[13]

Stanyapan vidhi –

Immediately following *prasuti* on the first day the baby is to be fed *ghrita*.

On the second day *lakshmana siddha sarpis* is to be administered. On the third day also the same regimen.

After that on third or fourth day the baby should be fed with a dose of *panitala* (the amount which would fill the palm of the baby) of *madhusarpi*, twice a day to a child who was kept away from the mother's breast milk.

Then, after examining the breast milk for its *sampatlakshane*, the child should be taken for breast feeding.^[14]

If this precaution is not taken, then the chances of the child developing *rasa*, *shvasa*, *vami* etc are greater due to its capacity of blocking the child's *strotansi*.^[15]

DISCUSSION

Colostrum is the first secretion of the mammary gland immediately after child birth, lasting for few days and consists of serum, WBC and antibodies. The absorption of antibodies *I_gA*, *I_gM*, *I_gG* via gut from colostrum and milk probably protects the respiratory tract from infection. Therefore, modern medicine stresses on breast feeding to newborn immediately after the birth. Colostrum is produced in fairly small amount. It is meant to this way and even very small volumes are worth their weight in good to the baby. The low fat content of colostrum makes it easy for newborn to digest it, because newborn secretes little amount of lipase enzyme which makes it difficult for him to digest the larger amount of fat for first day or so. Colostrum is the product of hormonal changes in the breast during the period from conception to delivery of foetus. Similar description is seen in Ayurveda, from the conception to the delivery of the foetus all the *Sapta dhatu*'s undergoes in *pachana* and their *sarbhaga* get accumulates in *sthanas*, which is secreted after *prasuti*. It is significant to note that the child is deliberately kept away from mother's breast till her *jatharagni* attains a

normal optimum intensity and is capable of separating *stanya* from *rasa*. When the breast secretions are fit enough to be called *stanya* then only the child is allowed to suckle the breast. Until then it is maintain on *suvarna*, *lakshamana*, *ananta*, etc for first three days with honey and *ghurta* which are *yogavahi*. These combinations ensure the proper *jatharagni* function. The first *dosa avasthapakaja nirmiti* is proper, the subsequent *dhatu pushti parampara* is initiated on a proper note and the resultant *dosha samya* helps the child in maintaining its health and proper growth.

CONCLUSION

It is not advisable to administer colostrum to the neonate. The contents may be in interpreted differently depending upon the scientific upbringing of the individual practitioner. It has to be clearly understood here that there can exist a view point about a substance which can be diagonally opposite to the prevalent notion observation. But the logic is that the later view point has to be understood in the proper perspective. The set of rules, the philosophy of any science has to be given due consideration in order to understand and appreciate fully the tenets it wants to propound. One has to be objective in doing this. Then the resultant inference will receive its validation. If one is initiated in chemistry he may look it from its chemical behavior, if one is initiated in medicine he may look at it from its medical applications. Similarly if one is initiated in *Ayurveda* he thought to interpret everything in a format of Ayurvedic fundamentals.

The purpose of this is not casting aspersions on any system or individual but to communicate to the scientific community in particular and the public in general the *Ayurvedic*.

REFERENCES

1. Stedman's Medical Dictionary, 21st edition, Page No. 346.

2. Dr. Mudaliar A. L & Dr. Menon Krishna. M. K, Published by Universities Press, India, Mudaliar & Menon's Clinical Obstetrics, 12th edition-2015.
3. Vrudhhajivak, Vatsayan, Kashyap, Kashayapsamhita, Khilsthana, Bhojankalpaniya Adhyaya, edited by Shri Satyapala Bhisagacharya, Chaukhamba Sansthana, Varanasi, 2015.
4. Agnivesha, Charak, Dridhabala, Charak Samhita, Sharirsthana, Adhyaya 8/46 edited by Vaidya Yadavaji Trikamaji Acharya, Chaukhamba Sansthana, Varanasi 1990.
5. Sushruta, Nimi, Sushruta Samhita, Sharir Sthana, Garbhiniyakaran Adhyaya, 10/15, edited by Kaviraj Ambikadutta Shastri, Chaukhamba Sansthana, Varanasi 2011.
6. William edited by Mc Graw Hill education Publisher, William's Obstetrics, 24th edition-2014
7. Dr. Mudaliar A. L & Dr. Menon Krishna. M. K, Published by Universities Press, India, Mudaliar & Menon's Clinical Obstetrics, 12th edition-2015.
8. Agnivesha, Charak, Dridhabala, Charak Samhita, Sutrasthana, Adhyaya, 27/235, edited by Vaidya Yadavaji Trikamaji Acharya, Chaukhamba Sansthana, Varanasi 1990.
9. Agnivesha, Charak, Dridhabala, Charak Samhita, Sutrasthana, Adhyaya, 27, edited by Vaidya Yadavaji Trikamaji Acharya, Chaukhamba Sansthana, Varanasi 1990.
10. Sushruta, Nimi, Sushruta Samhita, Sharir Sthana, Garbhiniyakaran Adhyaya, 10/14, edited by Kaviraj Ambikadutta Shastri, Chaukhamba Sansthana, Varanasi 2011.
11. Agnivesha, Charak, Dridhabala, Charak Samhita, Sharirsthana, Adhyaya, 8/54, edited by Vaidya Yadavaji Trikamaji Acharya, Chaukhamba Sansthana, Varanasi 1990.
12. Sushruta, Nimi, Sushruta Samhita, Sharir Sthana, Garbhiniyakaran Adhyaya, 10/35, edited by Kaviraj Ambikadutta Shastri, Chaukhamba Sansthana, Varanasi 2011.
13. Sushruta, Nimi, Sushruta Samhita, Sharir Sthana, Garbhiniyakaran Adhyaya, 10/31, edited by Kaviraj Ambikadutta Shastri, Chaukhamba Sansthana, Varanasi 2011.
14. Sushruta, Nimi, Sushruta Samhita, Sharir Sthana, Garbhiniyakaran Adhyaya, 15/16, edited by Kaviraj

Ambikadutta Shastri, Chaukhamba Sansthana, Varanasi 2011.

15. Vrudhhajivak, Vatsayan, Kashyap, Kashayapsamhita, Khilsthana, Bhojankalpaniya Adhyaya, edited by Shri Satyapala Bhisagacharya, Chaukhamba Sansthana, Varanasi, 2015.
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