

A LITERARY REVIEW OF *NAVAJAT KAMALA*\*<sup>1</sup>Dr. Ganesh Patil, <sup>2</sup>Dr. Sandip Daberao, <sup>3</sup>Dr. Deepak Khawale

<sup>1</sup>M.D. Scholar, Department of Kaumarbhritya, Dr. D. Y. Patil College of Ayurved and Research Center, Pimpri Pune.

<sup>2</sup>Professor, Department of Kaumarbhritya, Dr. D. Y. Patil College of Ayurved and Research Center, Pimpri Pune.

<sup>3</sup>HOD and Professor, Department of Kaumarbhritya, Ph.D Guide Dr. D. Y. Patil College of Ayurved and Research Center, Pimpri Pune.

Article Received on 04 June 2026,  
Article Revised on 25 June 2026,  
Article Published on 01 July 2026,

<https://doi.org/10.5281/zenodo.21025992>

## \*Corresponding Author

Dr. Ganesh Patil

M.D. Scholar, Department of  
Kaumarbhritya, Dr. D. Y. Patil  
College of Ayurved and Research  
Center, Pimpri Pune.



**How to cite this Article:** \*<sup>1</sup>Dr. Ganesh Patil, <sup>2</sup>Dr. Sandip Daberao, <sup>3</sup>Dr. Deepak Khawale. (2026). A Literary Review Of Navajat Kamala. World Journal of Pharmaceutical Research, 15(13), 412-419.

This work is licensed under Creative Commons Attribution 4.0 International license.

## ABSTRACT

**Background:** Neonatal hyperbilirubinemia is a frequent clinical finding in the first week of life, observed in 60% of full-term babies. The majority of instances of newborn hyperbilirubinemia are physiological, but kernicterus and irreversible brain damage may result if the condition lasts for a long period and the bilirubin level is noticeably raised. Physiological polycythemia, a shortened fetal red blood cell lifetime, and restricted hepatic absorption, conjugation, and elimination of bilirubin are the causes. **Aim:** To study the neonatal jaundice (*Navjaat Kamala*) in *Ayurveda*. **Materials And Methods:** Various samhita's, research journals and articles. **Discussion:** This could be considered much like the traits of *Kamala* defined by means of *Kasyapa Acharya* in *Kasyapa Samhita*. The signs and signs of *Kamala* associated with *Shishu* are defined in *Vedana Adhyaya, Sutrasthana,*

*Kashyapa Samhita*, that's considered the special textual content of *Ayurvedic* pediatrics.

## INTRODUCTION

A playful child is the pride of the home. Angel is a synonym for him. Many diseases cloud this happiness by destroying the child's health. One of them is *Kamala*. "*Kama*" means desire; the desire to do something is suppressed in *kamala*.<sup>[1]</sup> Yellowish discoloration of the

skin and sclera of newborns due to hyperbilirubinemia. Bilirubin is a yellow pigment produced in the body at some point of the regular recycling of vintage crimson blood cells. The everyday stage of serum bilirubin in adults is less than 1 mg/dL. Adults appear jaundiced when the serum bilirubin stage is greater than 2 mg/dL, and neonates seem jaundiced when it's miles extra than 5 mg/dL.<sup>[2]</sup> Neonatal hyperbilirubinemia is as a result of immoderate destruction of purple blood cells. Ayurveda taken into consideration *pitta* to be *mala rakta* and accumulation of *mala* can lead to *kamala*. So it is able to be correlated with *Bahupitta Kamala* from *Ayurvedic* texts.<sup>[3]</sup> symptoms of *Kamala* in newborns defined by using *Acharya Kashyapa*.<sup>[4]</sup> The sensitivity of the newborn duration truly forms the premise of human lifestyles, because it's miles the most inclined duration of lifestyles. Newborns have unique fitness issues and challenges because of the structural and practical immaturity of various body organs relying on their gestational age and birth weight.<sup>[5]</sup>

## MATERIALS AND METHODS

- *Charak Samhita* with *Ayurved Dipika Commentary* by *Chakrapani*.
- *Sushruta Samhita* with *Nibandhsangraha* commentary of *Shri Dalhanacharya* and *Nyayachandrika Panjika* of *Shri Gayadasachary*.
- *Ashtang Hriday* with commentaries *Sarvangasundara* of *Arundatta* and *Ayurved rasayana* of *Hemadri*.
- Relevant articles published in various national and international journals.
- Harrison's principles of internal medicines.

## PURVARUPA OF KAMALA

Specific *Poorvarupas* of *Kamala* were not described by *Brihatrayi* or *Laghutrayi*. Since *Acharya Vagbhata* defined *Poorvarupa* as *Alpavaykvtam*, *Roopas* of lesser intensity (*Alpabala*) might be categorized as disease-related *Poorvarupas*, or *kamala Vyadhi*. The characteristics of babies described by *Kashyapa Acharya* in *vedanadhyaya*, such as *nashtagni* (refusal of nourishment) and *nirutsaha* (lack of activity), might be interpreted as negative *varoopa*. While *roopa* can be used for additional functions that have been mentioned.

## ROOPA OF KAMALA

The primary diagnostic tool for the illness is *Roopa*. *Madhav Nidan* says that the stage of illness manifestation is called *Roopa*. Various *Acharyas* mention distinct *lakshanas* of

Kamala. Acharya Kashyapa In the Kashyap Samhita's Sutra Sthana, Acharya Kashyapa detailed Kamala Vyadhi's lakshanas. Chakshu Peet Nakha Peet Mukhatwa Peet Peet Mutrata Rudhirspruha Charaka Samhita The following kamala lakshanas are described by Acharya Charaka in the Chikitsasthana chapter "Pandurog Chikitsopakrama": Netrata Haridra Mukhatwa Haridra Dourbalyam Avipaka Nakhatwak Haridra Bhek Varnata (Mala) Daha Aruchi Haridra Mutrata. Vagbhata Acharya Vagbhata's "Pandu rog - Shoph-Visarpa- Nidan Vyakhasyam" chapter describes the lakshanas of kamala vādhi. Netra Haridra Haridra Mutra Haridra Nakha Twak Haridra Haridra Mukha Daha Bhekvarnata Vipaka Trushna Daurbalya.

### **SAMPRAPTI OF KAMALA**

Due to Nidana sevana Pitta pradhana tridosha gets worsened and thus causes Rakta dhatu (due to Ashrayaashrayi sambandha). Once Rakta dhatu is affected then moola Rakta dhatu i.e. Yakrut and Pleeha are also affected, hence Rakta dhatu is controlled by yakrut by doing karma ranjana which can be compared to good, unbound bilirubin, whether good or much. It can be the combined value of conjugated bilirubin which controls the rakta dhatu of Pleehou compared to premature disintegration of red blood cells). This causes Shihilata Rakta and Mamsa dhatu, hence pitta gets aggravated due to atipravritti and vimargagamana, sthana samshraya tvak is taken in rakta and mamsa dhatu and manifests as Navajata Kamala. Kostha (Mahasrotasa- Yakrit), Shakha (Raktadi and tvacha) Srotas: Rasavaha, Raktavaha, Annavaha, Pureeshavaha.

Srotodushti: Atipravritti, Sanga, Vimargagamana (physiological neonatal hyperbilirubinemia, hyperbilirubinemia, ilirubinemia occurs in physiological neonatal hyperbilirubinemia, atipravritti and vimargagamana can be taken).

### **SADHYAASADHYATA**

At the same time as describing the disease, the Acharyas cited her Sadhya-Asadhjatva, whilst nearly all of the Acharyas noted that carelessness or mismanagement of Kamala ends in headaches. Sadhyasadhyatva (analysis) must be set up before beginning treatment. A ailment is referred to as sadhya while it is effectively controlled i.e. the analysis is right, then again if the ailment isn't doable i.e. the prognosis could be very awful it is known as asadhya. Ayurvedic classics mentioned the subsequent as Asadhya lakshanas from kamala, indicating a awful diagnosis. Charaka Samhita Acharya Charaka noted after Asadhya lakshanas of Kamala in Charaka Samhita; Krishnapeeta mutratvam, Krishnapeeta shakrit, Atishotha, Raktaksita, Raktamukh, Raktachardi, Raktamutra, Tamyati, Daha, Aruchi, Trishna, Anaha,

Tandra, Moha, Nashtagni, Nashta Sangya. Madhava Nidana the subsequent Asadhya lakshans<sup>[6]</sup> are described in Madhav Nidan: Krishnapeeta mutratvam, Krishnapeeta shakrit, Atishotha, Raktaksita, Raktamukha, Raktachardi, Raktamutra, Tamyati, Daha, Aruchi, Trishna, Anaha, Tandra, Moha, Nasht. In Madhava Nidadna Asadhya lakshnas of Kumbhakamala he additionally described:<sup>[7]</sup> Chardi, Arochaka, Jwara, Hrullasa, Klama, Shwasa, Kasa. Kumba Kamala rogi will not survive in combination with the above lakshanas.

### **UPADRAVA**

Upadrava signifies difficulties. Upadrava is nothing more than a secondary condition brought on by the main ailment. In situations where upadrava exhibits a pathology more severe or aggressive than the primary illness, immediate and proper therapy should be administered. The following were identified by Acharya Charaka as Upadras of Kamala: Kumbhakamala, Kalantarath, and Kharibhoota. Acharya Sushruta specified the Updrava of Kamala, i.e. Agnimandhya, Pipasa, chardi, Jwara, Kanta sophia, Daurbalya, Murcha, Klaam, Hridayaavapeedan, aruchi, which is comparable to that of Pandu roga.<sup>8</sup> In Kosht, Acharya Vagbhata was mentioned.

### **DISCUSSION**

#### **CHIKITSA**

there may be no direct reference of Navajata Kamala chikitsa in Ayurveda, however, as the nidana for navajata kamala is taken into consideration to be pittaja stanya dushti, that is consumed via the baby, pittaja stanya dushti chikitsa is taken as the road of treatment. usually, correction of vitiated milk brings forth normalcy within the toddler in moderate times. In immoderate cases, the child can be administering the medicine relying at the vitiated dosha. Sushruta in chikitsa sthana advocates induction of vomiting to the mom regardless of the vitiated dosha in milk. Charaka though advocates induction of both vomiting and purging in chikitsa sthana 30th bankruptcy, advises one or more of the 4 technique of commingling i.e., of Vamana, Virechana, Asthapana and Anuvāsana, depending at the doshas vitiated.<sup>[9,10]</sup> for that reason, the principles of treatment of vitiated milk disease may be classified as follows:

#### **In mother ultra-modern measures**

Extirpation of the vitiated humor Acharya Sushruta counseled induction of vomiting irrespective of the Dosha with oral use of the decoction of Nimba with honey and Pippali. Agnivesha recommended decoction of Vacha, Priyangu, Yashtimadhu, Madanaphala and

sarshapa with salt to be taken for inducing vama. Pathya Bhojana After extirpation of vitiated doshas, a strict regimen of eating regimen is followed so as to keep the doshas in a balanced state. The weight loss plan need to encompass Yava, Godhuma, Saali or Shastika dhaanya with Mudga, Masoora and Kulattha made inside the shape of Yusha where in Trikatu and Saindhava are added. The vegetables that may be taken are- twigs of Nimba, Vaartaka, Amalaki and so on.<sup>[11]</sup> internal treatment to the mother consists of aggregate of numerous pills decided on from some of the businesses of: Dosha shaman drugs, defined as Vatahara, Pittahara and Kaphahara gana. Drugs classified as Stanya vishodhana include Patha, Shunthi, Devadaru, Musta, Moorva, Guduchi, Sariva, and Katuki.

Drugs by Stanya Vardhana: It is stated that the roots of plants like Veerana, Saali, Shashtika, Kusha, Kaasa, Darbha, etc. have a galactogenic effect, promote uterine involution, and help with Pradara roga as well. If those capsules are vitiated by Kapha, they should be taken with honey; if vitiated by Pitta and Vata, they should be taken with ghrita, either in powder or kwatha form particular measures.<sup>[12]</sup>

These are explained by the soft tissue around the breast, the different types of milk affected and internal medicine. If the milk tastes bad, the mother drinks a glass of Draksha, Madhooka, Sariva and Ksheerakakoli in water. Cream made from Panchakola and Kulattha is applied to the breast and after drying it is rinsed and the mother breast is emptied using a breast pump. After discharge, the milk becomes clear and can be fed to the child. Foamy milk can be purified by the mother taking Patha, Naagara and Moorva in water. After applying the paste of Anjanam, Shunthi, Devadaru and Priyangu to the mammary glands, extract the available milk from both the breasts. Alternatively Kirata, Guduchi, Shunthi can be used internally as decoction and pastes of Yava, Godhuma, Sarshapa can be used for external use. Unctuous milk can be fixed by applying a poultice made from Panchamoola and Jeevaneeya medication, decocting Stanyashodhaka pills based on availability, and administering it to the mother. As usual, the poultice is removed and the milk is retrieved while it dries. Additionally, the milk that builds up gets pure enough to feed the child. When the mother's milk becomes discolored due to Pitta, she is given a poultice of Draksha and Yashti to apply on her mammary glands and is given a paste made of Yashtimadhu, Draksha, Payasya, and Sindhuvara to drink in cold water.

After the cream dries, the milk is removed and washed at the same time, thus allowing the milk to show its normal colour. Removal of foul odour in milk is done by oral application of

Vishanika, Ajashringi, Triphala, Rajani and Vacha pastes in water or similarly using Manjishtha, Shleshmataka and Chandana for the breast or Abhaya and Trikatu powder in Usheera to loosen the milk and remove the foul odour. Excessive accumulation can be removed by oral application of Daru, Musta and Patha pastes of Saindhava. Thick milk can be prepared by oral application of Takrarishta or Abhaya, Vacha, Musta, Shunthi and Patha. In both cases, the milk is removed by applying ointment products of Vidari, Bilva and Yashti to the mammary gland. Thick milk can be reduced by oral administration of decoctions of Trayamana, Amrita, Nimba, Patola and Triphala or pastes of Pippalimoola, Chavya, Chitraka and Shunthi. Bala, Shunthi and Moorvaor of Prishnaparni and Payasya prepare a poultice which is applied to the breasts, dried and washed to lighten the milk.<sup>[13]</sup> In toddler Sushruta and Agnivesha no longer advise treating children in mild instances, as there is typically no need for medication when the child drinks tainted milk. The mother's cure alone will lead to the disorder's correction. However, Vagbhata provides a description of therapy for the youngster, which has to be followed as the humors get more vitiated. The kid is fed the powder or ghee made of Rasna, Ajamoda, Sarala, and Devadaru, to which sugar may be added, as milk will become vitiated with Vayu.<sup>[14]</sup>

The mother and child may be given the infusion of Amrita, Abheeru, Patola, Nimba, Chandana, and Sariva in cases with Pittaja milk problem. When a child has milk vitiation due to Kaphadosha, the paste of Raathapushpa is applied on the nipple and areola, and the child is then made to suck it without being cleaned. Acharyas have also extensively referenced the Chikitsa Sutra for Kamala.

Samanya Chikitsa Sutra explained via one of a kind Acharyas is as follows:

In Charaka Acharya Charaka, i.e., Snehapana, Tikta dravya, Mrudu Virechan, accompanied via Pathyapathya, explains the Samhita Chikitsa sutra of Kamala. It is recommended by Acharya Vagbhata to follow Pittahara Chikitsa, which is not hostile to Pandu. He also mentioned something about Anjana Chikitsa.<sup>[15]</sup> Since Pandu Roga and Kamala are synonyms according to Acharya Sushruta, Kamala can be compared to Pandu Chikitsa sutra.

Line of treatment of Kamala includes Deepan Pachan Snehapana Virechana Deepan and Pachana Prior to the first line of therapy in kamala Vyadhi, Deepana and Pachana Dravyas are advised to exercise prudence. Kamala Vyadhi is connected to Agnimadhya. Thus, such dravyas of deepana-pachana are beneficial.

Several Acharyas offer explanations of Snehapana as poorva karma. Vagbhata restricted the

usage of Snehapana to small doses and said that Virechana should be performed solely for the purpose of bringing about Snigdghata.

Acharya Charaka referred to following ghrita for snehapana: Kalyanak Ghrita Panchagavya Ghrita Mahatikta ghrita.

Anulomana and Mruduvirechana “Kamali tu Virechane” In Kamala vyadhi Virechana is the main treatment. In Pittaja vikara the main principle of treatment is also Virechana. Acharyas have noted that anulomana and Mrudu virechaka tablets of Kamala and Pittaja Vikara can be used for virechana karma. In Balaka Virechana is also taboo like Panchakarma, but Mruduvirechana and Anulamana karma are mentioned. Anjana chikitsa cures Kamala Vyadi. Special care should be taken with these remedies when Pitta Netra, Nasa, Jihwa accumulate and do not return to normal even after Virechana Karma.

## CONCLUSION

In *Ayurveda*, it can be treat as *pittaj vyadhi*, as Charak has mentioned *Virechan* is the best measure among all treatment of *Pitta*. A patient of *Kamala* should be treated initially with mild bitter purgatives (*Kamale tu virechane*). In physiological jaundice basic impurity is indirect bilirubin which cannot remove from body until it had not change in direct bilirubin that can possible only at liver. So drug used for that should have action of *virechan* (Remove out) of bilirubin from liver to gut with changing of indirect to direct form.

## REFERENCE

1. Bramhanand tripathi, charak chandrika Hindi commentary, charak samhita, edition 2012, choukhamba prakashan cha.chi. 16: 596.
2. Nelson, textbook of pediatrics, 17th edition, 2004, Saunders, 593.
3. Priyavat sharma, charak samhita, chaulkhama Sanskrit pratisthan Marathi translation by vd. Vijay kale, chikitsastan 16 adhyaya sholka 38: 394.
4. Pt. hemraj sharma, vidyotani, chaukhambha pub, kashyap samhita, sutras thana, chapter 25, shloka 35: 35.
5. Singh M. Care of Newborn, 8<sup>th</sup> Edition, New Delhi: CBS Publishers & Distributors Pvt. Ltd., 2015; 64: 1.
6. Vagbhata, Ashtanga Hridaya – Nirmala hindi Commentary Edited by Dr. Brahmanand Tripathi, Choukshambha Sanskrit Pratishthan, Delhi, 2011, Nidana

- Sthana 13/17-18. 1295; 521.
7. Sastry CHS, Chavali K, Gayatri A, Chavali V. Chavli's Principles and Practice of Paediatrics in Ayurveda; Varanasi: Chaukhambha Visvabharati, Second revised edition, 2015; 736: 143.
  8. Sastry CHS, Chavali K, Gayatri A, Chavali V. Chavli's Principles and Practice of Paediatrics in Ayurveda; Varanasi: Chaukhambha Visvabharati, Second revised edition, 2015; 736: 143-6.
  9. Disticraj S, Jayaraman P. Pharmacognostical and phytochemical analysis of asparagus racemosus willd, anisomeles malabarica (l). International Journal of Pharmacy and Biological Sciences, Oct-Dec; 5(4): 61-6.
  10. Sastry JLN. Dravya Guna Vijnana; Varanasi: Chaukhambha Orientalia, 2012; 1134, 540.
  11. Sastry CHS, Chavali K, Gayatri A, Chavali V. Chavli's Principles and Practice of Paediatrics in Ayurveda; Varanasi: Chaukhambha Visvabharati, Second revised edition, 2015; 736: 146.
  12. Vagbhata, Ashtanga Hridaya – Nirmala hindi Commentary Edited by Dr. Brahmanand Tripathi, Choukshambha Sanskrit Pratishthan, Delhi, 2011, Uttara Sthana 2/13. 1295: 889.
  13. Agnivesha, Charaka Samhita, Hindi Commentry by Chakrapanidatta, Editor Translator Vaidya Harishchandra Singh Kushwaha, Varanasi: Chaukhambha Orientalia, First Edition 2009, Chikitsa Sthana 16/40. Pp 1172, Page no 430.
  14. Vagbhata, Ashtanga Hridaya – Nirmala hindi Commentary Edited by Dr. Brahmanand Tripathi,, Choukshambha Sanskrit Pratishthan, Delhi, 2011, Chikitsa Sthana 16/44. 1295: 767.
  15. Sushruta, Sushruta Samhita, Edited by Dr. Anant Ram Sharma, Varanasi: Chaukhamba Surabharati Parakashan, 2010; 3: Uttar sthana 44/12. 550: 358-9.