of Pharmacontrol Ressured Transporter Tran

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.453

Volume 13, Issue 7, 1408-1417.

Review Article

ISSN 2277-7105

AN AYURVEDIC PERSPECTIVE: DRUG DOSE IN PAEDIATRICS

Dr. Kavita Gange*¹, Dr. Mahesh Jadhav² and Dr. Jayprakash Khairnar³

¹PG Scolar, Balrog Department, Ashwin Ayurveda College & Hospital, Manchi Hill, Sangamner, Maharashtra.

²Associate Professor, Balrog Department, Ashwin Ayurveda College & Hospital, Manchi Hill, Sangamner, Maharashtra.

³Professor & HOD Balrog Department, Ashwin Ayurveda College & Hospital, Manchi Hill, Sangamner, Maharashtra.

Article Received on 20 February 2024,

Revised on 10 March 2024, Accepted on 30 March 2024

DOI: 10.20959/wjpr20247-31917



*Corresponding Author Dr. Kavita Gange

PG Scolar, Balrog D.
epartment, Ashwin
Ayurveda College &
Hospital, Manchi Hill,
Sangamner, Maharashtra.

ABSTRACT

Ayurveda is an ancient science. Acharyas used various formulations in order to maintain their health. A branch of Ayurveda which deals with the diseases of children and their treatment is Kaumarbhritya. In pediatric patients, dose fixation is a difficult job for both Ayurvedic as well as Allopathic physicians. In Any medical science, success of treatment depends upon diagnosis, selection of drug, fixation of dose and time of administration. The pediatric dosing system has been well explained by Acharya Kashyapa who is the pioneer of Ayurvedic pediatric medicine. In different treaties of Ayurveda, the Matra (Dose) of a drug has been mentioned. In ancient era, the technology was not evolved so the Ayurvedic physicians were using different Matra for different dosage forms and the dose was fixed considering the following factors such as age, Satva, Prakriti, Bala etc. This article is aimed to understand the view of ancient sages related to pediatric drug

doses from different Ayurvedic classics. As a child is born, varioussteps are being taken to prevent him from diseases and making him healthy. Such steps include swarnaprashan, lehan and ingestion of other particular medicine. The drugs are given in some particular doses like amalkasthi, kolasthi, masha, shana etc. Further in this review paper we will try to explain the various dosage forms with their respective doses which are important in child to maintain their health and cure diseases.

Gange et al.

KEYWORDS: dose, formulations, children, pediatric care.

KEYWORDS: Drug dose, pediatrics, balroga.

INTRODUCTION

Patient's treatment methods according to Ayurveda are broadly classified as "Daiva vyapashraya (psychotherapy) and, Yukti vyapashraya (physical interventions). Daiva vyapashraya (Psychotherapy) includes chanting of specific mantra's worshiping specific gods, performing yagya. Second treatment is based on drug therapy. Ayurvedic classics consider drug a very important patient management tool in the hands of physician or a therapist.

This tool needs to be handled judiciously, if not done so it is likely to prove injurious or sometimes fatal to the life of patient who receiving it.

Charkacharya while discussing different aspects of drugs and drug therapy says even a poison is an effective drug if used judiciously, whereas injudicious use of even necter can prove harmful. 'Kashyapa Samhita' is the elementary primer of Ayurveda Pediatrics where prime importance is given to the branch of Kaumarbhritya (Pediatrics) and drug doses are described for children according to age.

Principle of treatment in children according to kashyapa

"Na tveva balasya vishoshanam hitam naivatisamshodhanaraktamokshane |

Snighdhaiha sushitairmadhurairadahibhistatropacharoashanlepsecha naiha || "

(kashyapa sutrasthan 27/66)

For children neither desiccation nor excessive cleansing measures and bloodletting is beneficial. They should be treated only by oral medications, ointments and irrigation with those drugs which are snigdha (unctuous), shita (cold), madhoora (sweet) and adahi (do not produce burning sensation). Acharya's (Ancient Ayurveda physicians) have given a general guideline regarding the dose of *Churna* (herbal powder), *Kalka* (paste), *Kashaya* (decoction), Ghrita (Butter oil) etc. In pediatric age group most physicians find intricacy while prescribing medicine. In ancient era two different methods of measuring the objects were in use called Magadha Mana (Ayurvedic metric system) and Kalinga Mana (Ayurvedic metric system). To fix on Matra (dose) the proportion of different substances like *Amalaki* (Gooseberry),

ola (jujube fruit), Vidanga (false black paper), Anjali (handfull), Anguli (Phalanges) etc was in practice. As the period progressed, those Mana's (Measurements) were replaced by milligrams, grams and milliliter etc. It took a long period from ancient era to modern era for getting these dose transformed into current metric system. In clinical practice sometimes it is found that, though the medicine was selected properly according to condition but still physician do not get expected result in particular cases. The main reason behind it may be due to negligence towards classical dose and its proper understanding. This article is aimed to understand the view of ancient sages related to pediatric drug doses from different Ayurveda classics.

Review of Literature

Matra (Dose)

Matra is the full measure of anything or Measure of any kind of quantity, size, duration, number, degree etc. Posology is the branch of pharmacology and therapeutics concerned with a determination of the doses of remedies.

Drug is a "Natural or synthetic substance which when taken by a human being affects its functioning or structure, and is used in the diagnosis, mitigation, treatment or prevention of a disease or relief of discomfort is called legal drug or medicine. Dose is the quantity of medicine prescribed to be taken at one time. As the dose varies with age, weight, surface area, nature of disease process and functional maturity of child. Modern medicines are given in the form of syrup, injections, drops, tablets etc for the easy administration, palatability and efficacy of drug.^[1]

Similarly in *Ayurveda*, *Panchavidha* (5types), *Shadvidha* (6 types), *Saptavidha* (7 types) *Kashaya Kalpanas* (Drug preparation methods) are described in the section of different dosage forms and these different dosage forms are prearranged to adjust the dose and to solve the issues of palatability and potency.

Acharaya charaka^[2] was very much conscious about the palatability and potency of drug so while describing the dose of child he said that the medicine which we are going to use for child should be *madhoor rasatmaka* medicated in the form of *kashaya* (decoction) and given with milk. These *kalpanas* are enlisted below:-

Kalpana according to different Acharya.

Sr. No.	Acharya	Kalpana (Form of medicine)	
1	Sharangadhara	Swarasa (juice), Kalka (paste), Kwatha (decoctions), Hima	
		(cold infusion), <i>Phanta</i> (hot infusion)	
2	2 Charaka	Swarasa, Kalka, Shrita (decoctions), Shita (cold infusion),	
2		Phanta	
2	Cualomita	Swarasa, Kalka, Kwatha, Hima, Phanta, Kshirapaka (milk	
3	Sushruta	boiled with the drugs)	
4	Kashyapa	Churna, Shitakashaya (cold infusion), Swarasa, Abhishava	
		(fermented drinks), Phanta, Kalka, Kwatha	

Dose According to Kashyapa Samhita

Among the entire *Ayurveda* treatise, *Kashyapa Samhita* is first which placed the *Kaumarbhritya* (Pediatric) as First branch in eight branches of *Ayurveda*. According to *Acharya Kashyapa*, disease is the root cause of troubles and medicine is cause of pleasure. The medicines when used properly it becomes nectar and improperly used drug acts like a poison so, every physician should have the knowledge of disease, drugs as well as dose. *Acharya Kashyapa* also described specific doses in different *Kalpana* for different pediatric age group.

Specific dose for different kalpana according to Kashyapa Samhita^[2]

- Ghrita

Sr. No.	Age	Dose
1	Immediately after	Badariphala Beejatulya (Size equivalent to the seed of
1.	birth	Jujube fruit)
2.	5–10 days	Slightly increased
3.	10–20 days	Equal to half <i>Badariphala</i> (Jujube fruit)
4.	1 month	Equal to one <i>Badariphala</i>
5.	1–2 months	One and half <i>Badariphala</i>
6.	3 months	Three Badariphala
7.	4 months	Equal to dry Amalaki (Indian gooseberry) fruit
8.	5–6 months	Equal to wet Amalaki fruit
9.	7–8 months	More than Amalaki

- Churna

Sr. No.	Churna (Powder)	Matra (Dose)	
1.	Deepaniya Churna	Agraparvanguli grahya (The quantity of drug held	
1.	(Appetizer powder)	between fore phalanges of fingers of hand)	
2.	Jeevaniya (Longevity		
	enhancer)	Double of Deepaniya Churna Matra	
	and Sanshamaniya churna		
	(Pacifying powder)		
3.	Vanama (Emetic) and	Churna Half of Deepaniya Churna	
	Virechana (Purgative)	Matra	

Kashaya

Sr. No.	Kashaya (Decoction)	Matra (Dose)
1	Dosha Nashaka Kashaya (Vata, Pitta, Kapha	2 Prasrita (16
1.	eradicating Decoctions)	<i>Tola</i> =192 ml)
2.	Vamaka and Virechaka Kashaya	1 Prasrita (96 ml)
3.	Deepaniya and Sanshamaniya Kashaya (192 ml)	2 Prasrita

Kalka

Sr. No.	Kalka (Paste)	Matra (Dose)
1.	Deepaniya Kalka	1 Karsh (12 grams)
2.	Jeevaniya and Sanshamaniya Kalka	2 Karsh (24 grams)
3.	Vamaka and Virechaka	Half Karsh (6 grams)

Samanya aushadhi matra according to Kashyapa Samhita

For *Navajata Shishu* (newborn) *Matra* of *Ghrita* (ghee) is told as *Vidangaphalatulya* (equivalent to the size of false black pepper fruit), afterwards the dose is gradually increased. The dose of Ghrita can be increased up to *Amalakiphala* (size of fruit of Gooseberry) but not more than that.

Dose According to Sushruta Samhita

In the context of classification of age, *Acharya Sushruta* has classified the age as *Balya* (young age), *Madhya* (adult) and *Vriddha* (old age) and the group *Balya* has been further divided into *Kshirada* (child dependent only on milk), *Kshirannada* (child dependent upon milk and cereals) and *Annada* (depending upon cereals). *Acharya Sushruta* has given dose for *Kshirada*, *Kshirannada* and *Annada Avastha* which are enlisted below.

Age specific different drug doses according to Sushruta samhita^[3]

Sr. No.	Different age group	Matra (Dose)
	Kshirada (up to 1 year)	Anguliparvadvaya grahya (The quantity of
		medicine which adheres in between the apex
1.		of thumb and index
		finger. Honey or ghee should be used as
		Anupana.)
	Kshirannada (1–2 year)	Kolasthi (Medicines in the form of paste shall
2.		be given in an amount of size of seed of a
		kernel of a jujube fruit
3.	Annada (2–16 years)	Kola Matra (Equal to jujube fruit)

Dose According to Sharangadhara and Yoga Ratnakara

Sharangadhara Samhita (13th AD) is one of the authentic book of Ayurveda where Mana (science of measurement) is discussed in detail. The classic has established the dose from

minimal to maximum i.e. from *Paramanu* (atom) to Tula (100 pala). The dose is given in simplified measures as a ratti and Masha which can be easily converted into current metric system. This is the great contribution of *sharangdhara Samhita* ⁴ in Ayurveda posology E.g. *1 Ratti* = 125mg.

Dose according to *sharangdhara* and *Yogaratnakara* ⁵ is given below.

Dose According to Sharangadhara and Yogaratnakara

Sr. No.	Age	Dose
1	1 month	1 Ratti = 125 mg (Churna, Kalka, Avaleha formulation with
		ghee, honey, milk, sugar as Anupana)
2	2 months–1 year	increase by 1 <i>Ratti</i> every month up to 12 months
3	1 year–16 years	increase by 1 Masha (1.5 gm) every year (1 Masha–16
		Masha=1.5 gm-12.5 gms)
4	For Kwatha (Decoction)	It should be given four times of above calculated dose as per
		age Eg. Dose of <i>Phalatrikadi Kashaya</i> for 1 year old child will
		be 6gm (6ml)

Drug doses mentioned in different classics of *Ayurveda* are given with respect to ancient systems of *Mana* (Measurement). In ancient era the technology was not evolved, so the framework of measurement was experience based and objects in custom employ were taken as measure of weight eg. *Badariphalatulya*, *Amalakiphalatulya*, *Vidangaphalatulya* etc. Most of the *Ayurveda* scholars are amazed regarding these *Manas*. The biggest query is arises in mind of physician that weight of *Vidanga/Amalaki* should be taken into account or medicine should be taken same as the shape of fruit of *Vidanga/Amalaki* etc. The exact weight cannot be assumed because *Amalaki*, Kola etc fruits have different varieties and also the weight varies with different regions and also all the fruits do not carry same weight. This is the situation these days because of wide genetically modified variants available in the market. In olden days this was not the case. May be *Kola* has remained the same even in current times., the only standard they had was to take it in the dosage of common fruits available in every region. So only approximation could be expected with the ancient dosing system and not accuracy and with the help of own logic physician should manage doses for different patient. [6]

Acharya's were clear in their ways. It is to be taken in the size or weight of the particular drug and not Amla or vidanga as such. The word "tulya" (equivalent) is being used in quotation, so it becomes more specific to consider shape/ proportion of the particular object rather than weight. Still this opinion can vary from person to person; so a wise physician

should use *Yukti* (logic) in such cases. For *Churna matra*, *Acharya Kashyapa* has used *Anguli pramana*. For this, the *pramana* of recipient child should be considered and not the mother or guardian. This is clarified by Acharya *Kashyapa* which comments whenever *Mana* (measurement) like *Prakunch* needs to be referred in drug administration then the *Pramana* (Anthropometrical measurements) of the person who is going to consume the medicine should be considered. Also, dose can be minimized in *Alpa Bala* (less body strength) and *Alpa Satva* (less mental strength) child.

Sharangadhara and Yogaratnakara guidelines are more comprehensible and acceptable as the dose mentioned in these Samhita can be easily converted into current metric system. The dose is given considering the compound formulation and commonly used Kalpana (formulation) are discussed with their age specific dose. This helps to counteract the uncertainty about pediatric drug doses especially for Ayurveda formulation.

Sharangadhara Samhita dose fixation guideline is widely accepted in Ayurveda dosing system. When adult dose is not defined, the general guidelines given by Acharya's considering the contents of the drug and other parameters such as Dosha, Desha, Kala, Vaya, Agnibala etc. physician has to calculate the dose. Some of the adult doses of different Kalpana are shown below.

Dose of different Kalpana (doses form) according to Sharangadhara Samhita.

Sr.No.	Kalpana	Dose
1	Churna (herbal powder)	1 Karsha (12 grams)
2	Vati (pills)	1Karsha (12 grams)
3	Svarasa (juice) 6.7.	Fresh ½ pala -2 Tola (27 ml.), Extracted after boiling-1 Pala (48ml)
4	Avaleha (Confections)	1 Pala
5	Kwatha (Decoction)	2 Pala
6	Ghrita/Taila (oil)	1 <i>Pala</i> (48 ml)
7	Asava Arishta (Fermented liquids)	2 <i>Pala</i> (96ml)

Ayurveda system of medicine, some specifics are given for drug administration in children. In Kshirada Avastha (up to 1 year) medicine should be given to mother as child is totally dependent upon mother for nourishment so drug given by mother indirectly reach up to neonates. Now, it is the wise duty of every pediatrician to look after the nature of disease with its etiology, signs, symptoms and severity. When the disease seems to be originated from Dushta Stanya (vitiated breast milk) or improper dietary habits of mother, medicine should be given to mother following adult dose. Eg. In Kaphadushta Stanya (vitiated milk

due to body humour), *Deepana* (Appetizer), *Pachana* (digestive), *stanyashodhana* (Milk purifier) medicine given to mother gives relief in child's disease. In Some diseases only medicine should be given to child as they having absolute severity and the diseases which need prompt treatment to child only such as *Ulbaka Vyadhi* (equivalent to Pneumonia), Hyperpyrexia etc. In kshirannada *Avastha* (1 to 2 years) children can eat some semisolid food and also depend on mother for nutrition. So, medicine should be given to both children and mother. In *Annada Avastha* (2 year to 16 years) weaning of breast milk has been done and child is capable of taking their own food so there is no need to give medicine to mother & so medicine should be given only to the child. *Acharya Sushruta* has specifically mentioned honey or ghee as *Anupana* (substance which taken with drug or medicine). From this, it is clear that *Acharya's* were concerned about the palatability, absorption of drug and rapid action of drug. They also described the *patthya* for children .According to *acharya Vagbhata ksheer* is *ptthya* for *sheerad avastha ksheer* and *anna* for *ksheerannad avstha* and only *anna* for *annad avstha*, whereas *Yogaratnakra* said that the *patthya apatthya* described in *jwaradi roga* should be follows for children also.

For the treatment purpose Ayurveda Classics has mentioned various factors to be considered in treatment for successful clinical practice and these factors are very important in dose fixation.

Various factors affecting drug dose

Dosha (Physical constitution and nature of disease) Dushya (Part vitiated in body)

Bala (Body strength)

Kala (Time of administration) Agni (Appetite/Digestive fire)

Prakriti (Genetic factors and body constitution) Vaya (Age, body weight, surface area)

Vyadhi (Disease) Dravya (Drug)

Koshtha (Biological membrane/distribution) Satva (Emotional quotient)

Satmya (Tolerance) Rogavastha (Pathological state)

Prayoga Marga (Route of administration) Desha (Environment)

Ahara Vyavastha (Diet and dietetic practices) Anupana (Mediator/Catalyst)

Drug Doses According to Modern Science

In Modern science different formulae like Young's Formula.^[7] Dilling's Formula etc. are in use to calculate dose according to age. In order to produce drugs optimal effect, a drug must be present in an appropriate concentration at its site of action .The various steps involved in

the pharmacokinetics are the concentration of the drug at the target site depends upon the dose or amount of drug, Liberation or release of active ingredient from the pharmaceutical formulation Absorption from the site of delivery into blood circulation. Distribution into various fluids compartment and tissues of the body. Transfer of drugs across all membranes largely depends on their dose or concentration, molecular size and shape, solubility at the site of absorption, degree of ionization and relative lipid solubility.

Metabolization of the drug mostly in the liver

The water soluble drug is largely excreted in the urine while ionized lipid soluble agents may be stored in the body tissues.

Drops formulation are preferred in young infant due to small volume of the medicine to be administered. In preschool children, syrup or suspension formulation is usually given. Dispersible tablets or mouth dissolving tablets can be given to children above 2-3yrs of age. Most school going children should be able to swallow tablets or capsules but at times even an adolescent child may refuse to take a tablet. Some children are extremely prone to vomit when a medicine is given to them. There are some formulae to calculate the pediatric doses are given below^[8]

Upto 2yrs - Fried"s Rule

Dose

$$= \frac{\text{Adult dose x Age in month}}{150}$$

Above 2yrs - Clark"s Rule

Dose

$$= \frac{\text{Adult dose x weight in pounds}}{150}$$

Young"s formula =

$$= \frac{\text{Adult dose x age in year}}{Age + 12}$$

CONCLUSION

Acharya Kashyapa quotes that "The drug, which does not destroy the patient"s strength but destroy the disease potency, should be used till complete eradication of disease." In

continuation to this drug should also be selected after observing various factors like *Dosha*, *Agni*, *Bala*, *Vaya*, *Vyadhi*, *Kostha*, *Prakriti*, *Satmya*, *Desha*, *Kala*, etc. Dose of medicine selected for the treatment of disease should not be too excess or too low. So, a wise physician anticipating complete cure of disease should have knowledge about classical dose of medicine according to age. Also some doses mentioned in classics seem to be higher in today"s perspective. The reason behind this may be the *Bala* and *Satva* of children in ancient period was different as compared to today"s generation.

REFERENCES

- Kashyapa samhita By Nepal Rajaguru Pandit Henaraja sarma, Hindi translation of Sanskrit introduction by srisatyapala bhisagacharya. Chaukhamba Sanskrit sansthan, Varanasi.
- 2. Charaka samhita- Edited by Acharya Vidyadhar Shukla and Prof Ravi Dutt Tripathi.
- 3. Sushruta Samhita, Hindi Commentary Ayurvedatatva- Sandeepika by Ambikadutt Shastri, Reprint edition, Chowkhamba Sanskrit Sansthan, Varanasi.
- 4. Sharangadhara Samhita –Bramhanand Tripathi, Chaukhamba Sanskrit Pratishhana, Varanasi, edition, 2013.
- 5. Yogaratnakara with Vidyaprabha Hindi Commentary, Chaukhamba Krishnadas Academy, Varanasi.
- 6. Devendranath Mishra Kaumarbhritya, Chaukhamba Sanskrit Pratisthana, Delhi, 2015.
- 7. K. D. Tripathi Essentials of Medical Pharmacology, Jaypee Brothers Medical Publishers, Delhi, Sixth Edition, 2010.
- 8. Meherban singh, Ashok K Deorari Drug doses in Children, CBS Publishers and Distributors, New Delhi, Ninghth edition, 2015.