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LITERTURE REVIEW ACCORDING TO AYURVEDA ON BALATISARA W.S.R. CHILDHOOD DIARRHOEA

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ABSTRACT

Ayurveda plays critical role with the aid of balancing body elements (Dosha, Dhatu, Mala) in herbal way to cure disease. As in step with ayurveda Atisar can be categorized into seven class; Vataja, Pittaja, Kaphaja, Bhayaja, Tridoshaja, Shokaja and Raktatisara. The Balatisara influences massive number of population world widely and prevalence of diarrhoea now an days deteriorating college overall performance of many youngsters. loss of immunity, susceptibility towards the causative pathogen, low hygienic situation, malnutrition and consumption of contaminated meals gadgets can cause balatisara. Diarrhoea is a not unusual ailment among kids specifically underneath 12 years of age. Diarrhoeal sickness is the second one main cause of demise in youngsters beneath the age of five years, and is answerable for killing around 5,25,000 youngsters every 12 months (WHO may additionally 2017). Majority instances of adolescence diarrhoea are of non-bacterial starting place. Herbs have constitutional effects based

totally upon their taste (Rasa), efficiency (Virya) and put up digestive effect (Vipaka) as well as there are some particular outcomes of plant itself (Prabhava). by the usage of medicinal plant life as medicinal drug, we will save children from terrible effects of antibiotics.

KEYWORDS: Ayurveda, virya, Balatisara, antibiotics, Medicinal Herbs, Childhood diarrhoea.

INTRODUCTION

Consumption of Madhura Aahara or contaminated foods when Kapha predominant then Agnimandhya can occur which further leads disturbance of GIT system. Amatisara is one of the types of diarrhoea in which Picchila occurs with foul smelling while Pakvatisara is another types of diarrhoea which involve feeling of lightness in body. Ayurveda suggested that use of Deepana and Pachana drugs along with Shoshanna therapy can help to relief diarrhoea. These drugs possess anti-diarrhoeal, antibacterial, ulcer healing, antispasmodic and carminative properties thus offer beneficial effects in the management of childhood diarrhoea. The Deepana and Pachana drugs converts Sama mala into Nirama mala due to their Amapachana effect and also correct loosening of motions due to their Grahi karma. It is also recommended to use Rasayana drugs for early recovery from diarrhoea and to combat against malnutrition. [1]

Majority cases of childhood diarrhoea are of non-bacterial origin. Recommendation of antibiotic use even in bacterial GIT infection remains limited to invasive type only. Antibiotics are used unethically in majority of diarrhoeal cases in children. In viral diarrhoea if antibiotics are used it worsens the condition and child may get severely dehydrated. It is important to quote that frequent use of antibiotic is not only hazardous for child's intestinal healthy flora but also causes drug resistance to causative pathogen. Ayurvedic medicines are found very effective for diarrhoea cases in our clinical practice. But this has to be proven on research criteria. In traditional systems of medicine (Ayurveda) many anti-diarrhoeal medicines are available which offer more advanced therapeutic strategies and good level of support. Ayurveda uses the inherent power of natural herbs to improve the body metabolism and digestive disorders. Here Ayurveda plays important role by balancing body elements (Dosha, Dhatu, Mala) in natural way to cure disease. Herbs have constitutional effects based upon their taste (Rasa), Potency (Virya) and Post digestive effect (Vipaka) as well as there are some specific effects of plant itself (Prabhava). [2] By using medicinal plants as medicine, we can save children from adverse effects of antibiotics. In 2012, it was the second most common cause of deaths in children younger than five. Diarrhoea is also a major contributory factor in childhood malnutrition. It not only affects health of children but also considered responsible for infant mortality especially intropical and subtropical countries. WHO estimates that between 90,000 and 1, 53,000 children die from rotavirus infection in India each year.^[3]

DIARRHOEA

Definition of diarrhoea according to WHO, Diarrhoea is defined as the passage of three or more loose or liquid stools or more frequent passage than is normal for that individual (Consistency of stool is more important than frequency). Frequent passage of watery stools, an increase in frequency, of stool through increased bowel movements relative to usual habit of each individual or an increase in frequency and fluidity of stool so that stool take the shape of container. One other definition of diarrhoea is an alteration in a normal bowel movement characterized by an increase in the water content, volume or frequency of stool.^[4]

Causes of diarrhoea- Some causative factors of diarrhoea are Parasites and worms, lactose intolerance due to the absence of lactase enzyme which is essential for metabolizing the lactose, the absence of lactase in infant may cause diarrhoea, intestinal diseases and bowel disorders (bacterial and viral infection), allergy to certain food items, adverse effects of antibiotics and other medications, unhygienic conditions e.g. overcrowding, lack of clean drinking water, trend towards the bottle feeding rather than breastfeeding.^[5]

ATISARA (DIARRHOEA)

Dalhana commentary on Sushruta Samhita stated that passing of watery stool in increased quantity is a characteristic feature of atisara.

BALATISARA (CHILDHOOD DIARRHOEA)

Atisara (diarrhoea) has been dealt in much detail in ayurvedic literature, but not in term of children specially. The detailed description of Atisara in children is not explained in Ayurveda. However, in Kaumarabhritya certain specific disorder in which diarrhoea is major symptom have been mentioned in ayurvedic literature. The term Balatisara is found at first in Harita Samhita in context of treatment. The term balatisara, literary means atisara occurring in children but it has not been mentioned as a separate entity in brihattrayi. Though several scattered references of term balatisara are found in context of treatment ofatisara in children in laghutrayi. [6]

The samprapti of atisara may be the same for both in adult and children but they differ in terms of some added etiological factors (like dantodbheda, balagrahas, ksheeralasaka etc.) and increased morbidity and mortality. Atisara is described as a symptoms in many diseases like dantoddbhedjany atisara, ksheeralasaka, vyadhij fakka, revati, putna etc. balaagraha. Even though separate description of balatisara as a disease is not found in scriptures, but

specific treatment remedies are available there specially for Balatisara(diarrhoea in children). The word "krimi" is an important factor for the atisara, in children considered by Acharya Charaka and Sushruta. These added etiological factors which differentiates balatisara from atisara are restricted to the infancy period only. Dentation diarrhoea, lactose intolerance diarrhoea, rotavirus diarrhoea etc. are some examples of diarrhoea which occurs in infancy period only. Samprapti for rest of atisara occurring in childhood period is same for both in adult and children.

Nidana (Causes of Diarrhoea)

Acharya sushruta mentioned common nidana for all type of atisaar. Intake of guru, atisnigdha, atiruksha, atiushna, atidravya, atisheeta food items. Intake of incompatible food items. Taking of food in ajirna, adhyashna, vishmashana. Drinking of contaminated water or excessive water intake. Taking of excessive alcohol, Suppression of natural urges, Suffering from "krimi". Excessive or inappropriate use of Panchkarma. Urge of fear or shock i.e. psychological factors. Food intake without taking season into consideration, Graha (Infections).^[7]

Samprapti Chakra^[8]

Nidana Sevana



Apdhatu increses



Diminish agni



Goes to pakwashay



Mix with varchya



Increase in quantity cause downward movement



Atidrava mala pravrutti



Samprapti Ghataka

- Dosha –Vata pradhana tridosha
- Dushya Rasa, rakta, mansa, meda, mutra, purisha
- Adhishthana- mahastrotasa
- Srotasa- Annavaha, purishavaha, udakvaha
- Strotodushti-Atipravriti, vimarga gamana

Etiopathogenesis

Three important factors which are responsible for pathogenesis of atisara emerged out fromabove discussion on samanyasamprapti, these are: mandagni (tryodashvidhaagni), jaliyanshprachurta andvatavikriti. After analysing samanyasamprapti- of atisara according to different acharyas, we can understand that asatmyaaaharavihara causes mandagni which leads dhatvagnimandta. An increase in jaliyagundharmisharirikdhatumootra, sweda etc. occur due to mandadhatvagni. These arenormally formed when jatharaagni and dhatvagni are in normal state. Formation of mootra, sweda etc. gets disturbed in mandagni state, followed by excessive fluid secretion into lumen of intestine. Vitiated vatadrags this excessive water content (jaleeyansh) down into large intestine (pakwashay) where it gets mixed withstool and causes downward movement of watery stool called as atisara. [9]

Types

According to Acharya Sushruta there are broadly 6 types of atisara

- a) Vataja,
- b) Pitajja,
- c) Kaphaja,
- d) Sannipataja,
- e) Shokaja
- f) Amajaatisara.

Bhayaja atisara (told by Acharya Charaka and Vagbhata)^[10], in place of Amaja atisara, is included in Vataja atisara. Rakta atisara is included in pittaja atisara. Acharya Charaka has included Amaja atisara in Sannipataja atisara. Madhav nidana mentioned 7 types of atisara, 6

types told by Acharya Sushruta and oneraktaja. [11] Acharya Sharangdhar also mentioned 7 types of atisara, 6 types told by Acharya Sushruta and onebhayaja. [12] Harita Samhita mentioned only one type as jwara atisara. [14] Acharya Charaka mentioned 36 types of atisara in sidhisthana.^[15]

Poorvaroop

Pricking type sensation in hridaya, nabhi, payu, udar and kukshi Pradesh, Gatraayasada (General malaise), Vitsanga (Constipation), Anilsannirodha (non-elimination of vata), Adhman (Abdominal distension), Avipaka (Indigestion).

Roop[16]

Discoloration of body, Uneasiness in mouth, Fatigue, Insomnia, Absence of functions of Vaayu or flatus.

Vishista lakshana

Sign and symptoms mentioned in Madhav Nidana. [17,18]

Vataja atisara

Passing of blackish, frothy, rough, Ama and small amount of stool, abdominal pain during passing of stool.^[19]

Pittaja atisara

Passing of yellowish, greenish, blackish, foul smell stool with burning sensation frequently, thirst, sweating, fainting.^[20]

Kaphaja atisara

Passing of unctuous, white, slimy, thready and heavy foul smell stool with mucus. Horripilation, nausea and tenesmus.

Sannipataja atisara

Passing of stool (yellow, green, bluish or reddish in color, fatty in texture), passing of stool with or without pain. Symptoms of all three types of Atisara are present in this type and it is difficulty to cure.

Shokaja atisara

According to Acharya Charaka and Vagbhata, its signs and symptoms are similar to Vataja atisara.

Aamaja atisara

Passing of stool frequently of various colors, abdominal pain are the main featuers of amajaatisara.

Mala pariksha (Stool Examination)

Pariksha mainly include srotopariksha and malapariksha. Srotopariksha: The dominant Strotas involved in atisara is pureeshavahasrotas. It plays a vital role in detecting abnormal constituents such as ama, rakta, kapha, krimi, and puya, etc. in stool, assists in differentiating ama mala and pakwa mala. According to Acharya Chakradutta and Ashtanga Sangraha, stool is in ama awastha, if it sinks in water whereas nirama if floats inwater except in condition of excess liquidity, compactness, coldness and presence of mucus. The ama stool has foul smell with painful flatulence, Distressing constipation and abnormal salivation. Nirama mala will be free from these associated symptoms. [21]

Ayurvedic Perspective of Dehydration

Severe pipasa lakshana mentioned in kashyap Samhita can be considered as the symptomatology correlated to the signs of dehydration in Ayurveda. These are: Dryness of palate, lips, tongue and throat, unable to perceive by eyes and ears, lethargy, altered sensorium and orientation, no appetite, general weakness, protruding tongue. [22]

MANAGEMENT

The basic treatment of Atisara is same as that of adults. First assessment should be done whether the stool is saam or nirama. If stool is in Saam condition, langhana is advised. But too much langhana therapy is not advocated. If stool is nirama, Sangrahana therapy (bowel binding therapies) should be adopted. It must not be stopped by constipative medicine. If the diarrhoea is associated with gripping pain (difficulty in voiding), then Haritaki is given as mild laxative. If the doshas are moderately aggravated, then Pramathya having Deepan and Pachana properties should be given. If the doshas are only slightly aggravated, then langhana is very useful. Exogenous Diarrhoea that is Bhayaja and Shokaja should be treated by vayu alleviating drugs and therapies. The patient suffering from diarrhoea caused by fear is exhilarated and the patient suffering from diarrhoea caused by shoka is consoled. [23]

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Vamana

Amatisara with Shoola and Adhamana can be control by Vamana Karma using Pippali Saindhava Jala. However Vamana is not recommended in common condition of diarrhea.

Virechana

When Atisara possesses conditions of Vibhanda, Shoola, Raktatisra and Bahudosha then Virechana can be done using Abhaya, Vidanga, Triphala and Pippali etc.

Basti

When Vata get aggravated then Basti can be used to restore Bala, specifically Niruha and Anuvasana Basti are choice of treatment in childhood diarrhea. When Pakvastha, Vibanda and Bahudosha then Niruha Basti prepared from Ksheera, Madhu and Ghrita, etc. should be used. When Atisara occurs with Shoola, Pravahana and Mutraghata then AnuvasanaBasti of Madhura Amla Dravyas or Bilwa, Shati and Vacha etc.

Specific Management^[24]

Specific Management of Vatatisara

Langhana is best approach at initial stage of Vatatisara to reduce effect of Ama. Vamana & Virechana are also advised when Praseka and Vibandha condition respectively.

Specific Management of Pittatisara

Langhana along with use of Pachana drugs advised in case of Pittatisara. Ajaksheera, Masarasa and Picchabasti can also employ to treat Pittatisara.

Specific Management of Kaphatisara

Langhana, Pachana and use of Kaphagna Dravya also recommended in case of Kaphatisara.

Specific Management of Sannipataja Atisara

As per Charaka in such case Vata Dosha should treat first there after Pitta and Kapha Dosha, while Sushruta mentioned that Pitta Dosha need to correct first in Sannipataja Atisara.

Specific Management of Raktatisara

Picchabasti, Shatavari, Mamsarasa and Chandana can offer benefits in Raktatisara.

Specific Management of Shoka and Bhaya Atisara

Vataharakriya, Avshwasana and Harshana should be used as treatment protocol for such condition.

Pathyapathya

Pathya

Fruits, cereals, hot water are considered as pathya. According to Yogaratnakara, sleep, langhana, goat milk, cow milk, ghee, butter extracted from goat or cow milk, curd, buttermilk are considered as pathya. Diet should be restricted to light food like soup of Mudga siddha with Shunthi, kanji, yayagu, tarpana, etc.

Apathya

In Kashyapa Samhita, intake of garlic, unctuous substance, meat soup and sudation are considered as apthya. According to Yogaratnakara, waking during night, heavy foods and drink are considered as apathya.

DISCUSSION

Factors which are responsible for pathogenesis of atisara emerged out from above discussion are: mandagni (tryodashvidhaagni), jaliyanshprachurta and vatavikriti. hence we need a aggregate of ingredients which acts on all the pathological elements of atisara in children. remedy of amatisar is amapachan first, even as in pakwatisar stambhan is the first line of remedy. In case of children applicability of classical amapachan remedy i.e langhan, use of drugs having katu, ushna, tikshna, residences isn't possible because children are sensitive in nature. whilst explaining the not unusual remedy precept in child aacharya charak instructed that we should not use drug that have homes like katu, tikshna, ushna in kids. also due to delicate frame and much less development of tissues, the sickness will become intense in no time in children. So here we can't wait for the duration from amavastha to niramavastha. In present scenario there is a need of an formulation that can be beneficial in both stages of diarrhoea either amavastha or pakkvavastha. In ayurvedic classics like sharangdhar, yogratnakar, vangsen and chakradatta there are references of such formulations, which are specially mentioned for the childhood diarrhoea (balatisara).

CONCLUSION

After analysing many literature we come to the conclusion that in kaumarabhritya literatures Atisara is described as a symptoms in many diseases like dantoddbhedjanyatisara, ksheeralasaka, vyadhij fakka, revati, putna etc. balaagraha. even though separate description of balatisara as a disease is not discovered in scriptures, however specific treatment remedies are to be had there particularly for Balatisara (diarrhoea in youngsters). No acharya have said to observe langhan in case of children or deal with them according to amatisara or pakkwatisara. In classics, also our acharyas have cited single remedy for balatisara, not on the idea of dosha dominancy or levels of balaatisara. By all above analysis we can easily understand that combination of ingredients that are having deepana, pachana, grahi and stambhan properties would be beneficial in childhood diarrhoea.

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