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ROLE OF PANCHAKARMA IN PRANAVAHA SROTASTHA IN CHILDREN - REVIEW ARTICLE

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ABSTACT

Koumarabhrityam is one among Astangas, which deals with healthy progeny, children care, nutrition and various disorders and treatments. Now a days bronchial asthma, bronchitis and pneumonia are very common in pediatric age group. According to Ayurveda those are coming under Prana vaha srotho vikaras. In modern system of medicine only symptomatic treatment is available and the recurrence rate is high and the patients are getting dependency on oral and inhaled corticosteroids, short acting 62 agonists, theophylline all of which cause significant side effects in long run. In this scenario one can get rid of those diseases permanently from the root by elimination of vitiated doshas with the help of panchakarma therapy by which we can revent undesirable adverse effects of modern medication. Though they are not directly indicated, the panchakarma is explained in various samhithas in different context. So by proper understanding of dosha, dusya, samprapthi etc, we can modify the panchakarma as per

Ayurvedic guidelines. This literature was gathered from *charaka samhitha*, *kasyapa samhitha* and *astanga hridaya*. This article is an attempt to make increase the pediatric panchakarma practices in *pranavaha srotho vikaras*.

KEYWORDS: *Panchakarma*, *prana vaha srothas*, children.

INTRODUCTION

Pranavaha srotas as per Ayurveda

As per Ayurveda pranavaha srotas includes both cardiorespiratory system. According to Caraka acharya mula of pranavaha srotas are Hridaya and Mahasrotas. As per Susrutha hridaya and rasavahi dhamani as mula for pranavaha srotas. By this we can say that the main seat of pranavaha srotas is uraha pradesha which is the main sthana of kapha dosha. Among kapha, mainly Avalambaka, bhodaka, kledhak kapha are related to pranavaha srotas, along with kapha, vata dosha too plays role in manifestation of pranavaha srotho vyadhi, especially prana, udana, samana and vyana. The dushitha prana vyau causes hikka, swasa etc. As in the samprapti of hikka and swasa, caraka has told that both diseases originate from the site of pitta and are caused by simultaneous aggrevation of kapha and vayu. [1]

According to Caraka acharya dhatu kshaya, vegadharana, use of rooksha dravyas, excersise at the time of appetite and any hard work are given as that causes of pranavaha sroto dusti, in which many of them leads to *vata prakopa*. so by this we can say that *vata* plays an important role in pathogenesis of pranavaha sroto dusti. The diseases which come under prana vahasroto dusti are Swasa, kasa, hikka.^[2]

Doshik involvement in different prana vaha sroto vyadhis.

Hikka, swasa - prana vata, kapha (caraka)

Kasa - udana vayu, apana vayu (caraka)

Prana vayu, udana vayu (susrutha)

Pratisyaya - Vata kapha pradana tridoshaja (kashyapa)

As per the involvement of *dosha* one should choose the *panchakarma* procedure.

Modern View

As per modern science, thorax is the main seat of cardiorespiratory diseases in which mainly bronchial asthma, bronchitis and pneumonia are very common in pediatric age group.

Role of Panchakarma

Today there are millions of people suffering from different kinds of respiratory illness that can have a significant effect in the way they live their daily lives. Respiratory illness can vary from being acute to chronic. In acute cases, it is usually easy to treat and is only a short term illness. However the chronic conditions of respiratory illness are difficult to treat and can cause permanent damage to the respiratory system.

In modern system of medicine only symptomatic treatment is available and the recurrence rate is high and the patients are getting dependency on oral and inhaled corticosteroids, short acting 62 agonists, theophylline all of which cause significant side effects in long run.

In this scenario one can get rid of those diseases permanently from the root by elimination of vitiated *doshas* with the help of *panchakarma* therapy by which we can prevent undesirable adverse effects of modern medication. Vitiated exaggerated *doshas*, which are the root cause of the disease are to be eliminated through the nearest outlet of the body. As it is said that the *panchakarma* is done when *doshas* get aggrevated and move out of their own seat to other places like *shaka* etc.

Modulation of panchakarma in the frame work of kaumarabhritya

Snehana and *swedana* are the *poorvakarmas* of *panchakarma* therapy but they have limited application in pediatric age group.

Snehana

Kashyapa told that oleation therapy is contraindicated to the pregnant women, delivered women, infant on milk diet, having received burn. ^[3] There is no necessity for *snehana* as the child is always *snigdha* by the intake of milk and ghee especially in the first two years of life. By these references we can say that additional and formal *snehana vidhi* is not required in children especially up to the 2ys of age. ^[4]

Swedana

Swedana is mainly done for softening and dilatation of *srotas* by which the *doshas* can be reached to *kosta* from *shaka*. The following are the references regarding indication of *swedana* in children as per age. *Kashyapa* told that eight types of *swedana* to the children from birth onwards considering the time period and state of the disease and strength of body. The *avasthik swedana* is beneficial to the initiated and medium built children, especially to the children whose body is seized with the disease of cold. It means where ever generalized *swedana* is indicated in adults, there we have to do local sudation. Swedana should be increased gradually as the child gets endurance in place of delicacy and appearance of toughness, the *swedana* of these children should be increased. From birth to four months, the *Hasta swedana* should be used very carefully, sitting in a wind protected place, warming the hand gradually over the fire devoid of smoke. From six years onwards children can be given *pata sweda*. While explaining the treatment of *hikka* and *swasa*, *caraka* told that after

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anointing the body with *sneha* mixed with salt, unctuous fomentation therapies should be done like *nadi sweda*, *prasthara sweda* and *sankara sweda*.^[10]

Swedana liquifies kapha and srotas are made mridu, by these two actions together direct the vata in its right path which is known as anulomana. Well-regulated pinda sweda with sastika sali dasamoola ksheera is well tolerated by children. It gives both benefits of snehana and swedana. Swedana should be cautiously monitored in case of children since the loss of water can lead to serious consequences as the water content of the children is in greater proportion. So very mild swedana is to be done.

So above principles should be kept in mind, whenever modulated *poorva karma* is to be done prior to *sodhana chikitsa* in children.

Panchakarma procedure specific to pranavaha srotas

In *swastha* and *atura avastha* role of *dosha* is present. In general, *panchakarma* is contraindicated by the other disciplines in *bala*, *vridha* and *garbhini* but it is not an absolute contraindication.

Just by *sodhana* of mother is not suffice to cure the disease of the child as accumulated *doshas* in the body of the child will not cleansed till they are not let out by *vamana*. When the physician applies proper cleansing measures to both mother and child, the healthy state comes very fast to the child.^[11] The *panchakarma* or *shodana* has to be done where ever the disease status modify appropriately to the children. But, however where ever the situation demands for *panchakarma* that should be tailored to the status of the children.

Vamana

Vamana is a best procedure for eliminating kapha dosha. It is well indicated in pediatric age group right from birth and also a very helpful procedure in elimination of doshas especially kapha from amasaya and urasa. After vomiting, the secretions accumulated in the trachea due to contraction of respiratory muscles comes out lucidly in the form of expectorant. Any leftover fluid or mucous present in the oral cavity can be let out by giving ghee & rock salt for inducing vomiting. [12]

In children *vamana* procedure should be done immediately without *poorva karma* with *mridhu oushadhi*. In *ksheerapa* and *ksheerannada*, vamana should be done after child being sufficiently fed by breast milk. In *annada*, to be done after giving *thanu peya* mixed with

ghee. [13] The child who himself ejects milk after repeated suckling, to him the daiva and manusi diseases never afflict. While describing chikista of ksheera alasaka, vaghbata told that vamana should be done to both mother and child. Vamana is also indicated to both in mother and child in kapha dushitha sthanya vyadhi. [14]

In kapha dushitha stanya, vamana is done by the mixture of ghrita with yasti and saindhav. Madanaphala puspa kalka with madhu is to be applied over the nipple and areola of mother's breast and on the lips of child. This decides the route of administration and the dosage of vamana drug in children is either by applying over the lips of child or by applying over the nipple and areola of mother's breast. Caraka told that baby suffers with swasa, kasa and tamaka swasa due to intake of kapha vitiated breast milk which comes under pranavaha sroto vyadhis. As already discussed, that vamana is indicated in kapha dushitha sthanya. While describing the treatment of swasa & hikka, caraka has told that when kapha is in samvridhi state, vamana karma should be done with pippali, saindhav and madhu which should not vitiate *vata*.^[15]

If pittaja kasa is associated with kapha, vamana should be done by vamana dravya sidha ghrita. Lastly we can say that Vamana is not contraindicated in children, but to be given in mild form. Vamana is the widely indicated shodhana procedures in children even in ksheerada apart from mother in a modified manner as described above. [16]

Virechana

In pitta dosha treatment of choice is virechana. In children, mridu virechana is indicated by acharyas in many diseases related to pranavaha srotas. This states that any panchakarma procedure to be done in children should be of mild form. We can say that mridu virechana is to be done in children by aruna trivrit mula. [17]

In Chaturanguna kalpa adhyaya of Caraka, mridhu virechana by aragvadha is advised in children of age group between 4 to 12 years. [18] Samsrana by eranda and shankini acts as a best rasayana.[19]

In kashyapa vamana virechana siddhi adhyaya, vridha kashyapa said that drugs which are to be given to the child of 4th or 8th month for vamana and virechana, should be mixed with sugar. In kashyapa phakka cikitsa it is said that snehana in children should be done with kalyanaka ghrit or shatphal ghrit or amrita ghrit for 7days followed by shodhana with trivrit ksheera.^[20]

By the above references we can say that *mridhu virechana* is indicated in children. As already *vridha vaghbata* said that in case of *pitta sthanya dusti, sthanya rasa* gets changed into *katu anu rasa* which causes diseases of *pranavaha srotas* like *kasa* and *swasa*.

While describing the pathogenesis of hikka and swasa, caraka has given role of pitta dosha.

This *hikka* and *swasa* originates from *pitha sthana*.^[21] In *tamaka swasa*, *virechana* is to be done with *vatakapha hara* drugs.^[22] In *pitta dushitha sthanya cikitsa*, *vaghbhata* advised *virechana karma* to both *dathri* and *kumara*.^[23] When *tanu kapha* is associated with *pithaja kasa*, *tiktha virechana dravya* mixed with *madhura dravya* to be given.^[24]

Now definitely to the person having received methodicial *snehana*, *swedana* and then proper sleep in the previous night and after digestion of previously taken meals.one *karsa* or half *pala* dose of available drugs amongst *danti*, *syama*, *kampillaka*, *neelika*, saptala, *vacha and vishnika* as mentioned earlier should be decocted with one *prasta* or two *prasta* water till $1/4^{th}$ remains mixed with cow's urine, not excessively thin, hot or cold should be given for drinking, considering the time strength, age and status of the disease to the child, it should be given for drinking daily with the help of *aduka* (specific vessel) or else for licking with butter or thick supernant part of milk, two, three, four bouts of purgation are said to be inferior, medium and best bouts, according to quantity inferior, medium and best are one, two and three *prasthas*. More than this is said to be the excess use of purgation.

Usually *virechana* seems to be inappropriate procedure in *pranavaha sroto vyadhi* but as explained earlier *pitta dushita stanya vyadhi* leading to *swasa kasa* in child where *virechana* is the choice of *sodhana chikitsa* in *pranavaha sroto vyadhi*. Hence *virechana* can be considered as *sodhana chikitsa* in *prana vaha sroto vyadhi*, where ever *pitta dosha* is predominant.

Nasya

According to *kashyapa*, *nasya karma* is indicated in *kapha* and *vata* dominant diseases which are also the main cause of *prana vaha sroto dusti*. In breast fed babies, *nasya* is to be done by *ghrita* mixed with *saindhava* or *katu taila*. This results in clearing the *sleshma* and makes the child free from *kaphaja vikaras*, because *kapha* is the main causative factor for

urdhvajathrugata roga and pranavaha sroto dustha vyadhis. Kumara taila is said to be the best taila for samana purpose in case of nasya upadrava. Nasya with lasuna, palandu, grujanaka (carrot) swarasa is indicated in hikka and swasa or nasya of nariksheera mixed with chandana can also be used. While describing the indication of nasya karma caraka told that nasya can be given in the following diseases like pinasa, galasaluka, greevaroga, nasa soola, swarabhedha, vakgraha, nasa vikara etc. [26]

Vasti

Vasti is said to be best treatment in vata vikaras and is considered as ardha chikitsa. The movements of Pitta, kapha, mala and dhatu are not possible without vata, hence we can say that vata is involved in pathogenesis of any disease. For children and adults, vasti is just like a nectar.

According to *kashyapa* the age of *vasti* procedure, when the child is lowered (walks on grounds), eats cereals.^[27] Vaghbata told use of *vasti karma* in the treatment of *vata dushita sthanya*.^[28] In *vataja kasa, vasti* should be given in *badha vidavata* stage.^[29] In *vataja pinasa, sneha* followed by *asthapana vasti* is to be done.^[30]Vasti, oral use of oleaginous substances, sedation and rubbing of unguents specially in children seized with disease of *vata*.^[31]

In any of the diseases if *vata dosha* is dominant in the pathogenesis of the diseases or diseases in chronic state there we can give *vasti* treatment.

CONCLUSION

It is prevalent among Ayurvedic community that *panchakarma* in *kaumarabhritya* is generally contraindicated. After an over view of the *panchakarma* in *kaumarabhritya* is not an absolute contra indication but appraisally special condition of child in relation to psyche and physic the *panchakarma* can be modified and executed in children as well without any comprehension. The chapter is limited to actual *panchakarma* procedures to be undertaken in *prana vaha sroto vyadhi* due to fear of voluminous extension of subject. However all the general principles of *panchakarma* like indications, contraindication, complications, management are to be considered in *shodhana chikitsa* of *pranavaha sroto vyadhi* too.

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