

“AUTISM IN CHILDREN – A CASE REPORT”***¹Dr. Chetan Pandurang Landkar**¹Assistant Professor, Dept. of Kaumarbhritya, GAM Patur, Akola, Maharashtra.Article Received on
07 May 2025Revised on 27 May 2025
Accepted on 16 June 2025

DOI: 10.20959/wjpr202513-37190

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Akola, Maharashtra.**ABSTRACT**

Ayurveda is the science of life, which mentioned various principles for prevention and treatment of diseases. Immunity is one of the important aspect for maintaining health. *Ayurveda* described various principles and modalities like *Dinacharya*, *Ritucharya*. It helps people to stay healthy which means to stay away from diseases. *Kaumarbhritya* is an important branch which deals with Child health and its prevention & management of diseases. It also helps to increase Childs immune system and helps to maintain proper Health. *Acharya Kashyapa* explains the Ayurvedic perspectives of Paediatric illnesses and their symptoms & management. Autism is one of the developmental disorder found commonly in children. Most of its causes are idiopathic. In this case study it was treated through the help of *Ayurveda*.

KEYWORDS: Autism, Case study, *Ayurveda*.**INTRODUCTION**

Autism is characterized by a qualitative impairment in verbal and nonverbal communication, in imaginative activity and in reciprocal social interaction. Incidence of low intelligence, epilepsy, self-injurious behaviour and fragile X syndrome (in families) is high.^[1]

Autism is a neurologic disorder characterized by - (1) qualitative impairments in social interaction; (2) qualitative impairments in communication; and (3) restricted repetitive and stereotyped patterns of behaviour, interests, and activities.

Autism is currently grouped under the Pervasive Developmental Disorders in the DSM-IV with Asperger Disorder, Pervasive Developmental Disorder Not Otherwise Specified, Childhood Disintegrative Disorder, and Rett Syndrome. Asperger disorder is characterized by impairment in social interaction and restricted interest/repetitive behaviours. Individuals with

Asperger disorder should not have significant delays in cognitive, language, or self-help skills. Pervasive developmental disorder not otherwise specified is characterized by impairment in reciprocal social interaction along with impairment in communication skills, or restricted interest or repetitive behaviours. Children with pervasive developmental disorder not otherwise specified do not meet full criteria for autism due to mild or atypical symptoms.

Childhood disintegrative disorder is characterized by typical development for at least 2 years followed by a regression in at least two of the following three areas: social interaction, communication, and behaviour (characterized by restricted interests or repetitive behaviours.) Rett syndrome is a genetic syndrome caused by a mutation on the X chromosome that is characterized by regression in skills in the first year of life.

Autism spectrum disorders are relatively common, occurring in approximately 1 in 150 children. Males are overrepresented 3–4:1, with reports as high as 9.5:1 (especially when higher functioning individuals are included). No known aetiology can be found in 80–90% of cases. A genetic syndrome such as fragile X syndrome or chromosome 15q duplication is found in 10–20% of cases. There is a strong familial component. Parents of one child with autism of unknown aetiology have a 2–9% chance of having a second child with autism. The concordance rate among monozygotic twins is high, and there is an increased incidence of speech, language, reading, attention, and affective disorders in family members of children with autism.^[2,3]

Its diagnosis can be made through 2 steps; first includes developmental skills of child specially in 18 months & 24 months. And 2nd step by through psychologists.

ASD is characterized by lifelong marked impairment in social interaction and social communication in addition to RRPBs. Approximately 20% of parents report relatively normal development until 1-2 years of age, followed by a steady or sudden decline. In infants with ASD there is delayed or absent social smiling. The young child may spend hours in solitary play and be socially withdrawn with indifference to attempts at communication. Patients with autism often are not able to understand nonverbal communication (e.g., eye contact, facial expressions) and do not interact with people as significantly different from objects.

Communication and speech often are delayed and, when present, may be marked by echolalia (repetition of language of others), perseveration (prolonged repetition of words or behaviours

of others), pronoun reversal, nonsense rhyming, and other abnormalities. Intense absorbing interests, ritualistic behaviour, and compulsive routines are characteristic, and their disruption may invoke behavioural dysregulation. Self-injurious behaviours (head banging, biting), repetitive motor mannerisms (rocking, lining up objects, simple motor stereotypies), and hyperreactivity/hyporeactivity to their environment (diminished response to pain, adverse reactions to sounds/textures, or unusual visual inspection of objects) may be noted.^[4]

OBJECTIVES

To study the role of Ayurveda in the management of Autism disorder in children.

METHODOLOGY

Case Study

Age of children – 2 ½ years of male baby.

Name – ABC

Gender – male

Chief complaints – Irritability, stay lonely, no attention on anything.

History of present illness

2 ½ years old male child was started above complaints and then came to Hospital for the further treatment.

Past history

No any past history. No any maternal or paternal history.

On examination

Nadi = 72/min

Shabda = *Spashta*

Mala = *Mala Asamyaka*

Sparsha = *Anushna*

Mutra = *Samyaka*

Druka = *Prakruta*

Jivha = *Alpa Sama*

Akruti = *Madhyam*

Management

Management of *Autism* is done by the help of *Ayurveda* which is given as follows ;

A] *Ashwasana Chikitsa*^[5]

B] *Sravanga Abhyanga with Bala Taila*^[6]

B] *Shamana Chikitsa* –

Drug	Matra	Kala	Anupana	Duration
<i>Kalyanaka Avaleha</i> ^[7] + <i>Suvarna Brahmi Vati</i> ^[8]	2 gm [BD]	<i>Pragabhakta</i> ⁷	<i>Madhu</i>	1 month
<i>Sarasvatarishta</i> ^[9] [With <i>Suvarna</i>]	5 ml [BD]	<i>Pragabhakta</i> ⁷	<i>Jala</i>	1 month

OBSERVATIONS AND RESULTS

The effect of treatment on Autism is as follows ;

Symptoms	Before treatment	After treatment
Irritability	Present	Absent
Stay lonely	Present	Absent
No attention on anything	Present	Absent

Above treatment was given for about 30 days and patient was examined on 10th, 20th & 30th day. During this treatment there is no any side effects observed and also significant effect on *Autism*.

DISCUSSION

In this *Autism* case study, patient has given all *Ayurveda* treatment for about 30 days. *Ashwasana Chikitsa* helps to boost self-esteem, confidence, immune power in children, also *Kalyanaka Avaleha*, *Brahmi Vati* and *Sarswatarishta* has properties of Medhya, removes vitiation of *Manasa Doshas*, *Vata Prakopa* etc and helps to cure Autism.

CONCLUSION

Here in this case study, *Shamana Chikitsa* for Autism helps to reduces symptoms in patient. In conclusion, *Ayurveda* management was found significantly effective in the management of Autism followed by proper *Pathya* and *Apathya*.

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