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DRUGLESS AYURVEDIC APPROACH FOR PROMOTION AND PRESERVATION OF HEALTH W.S.R. TO GRAHANI DOSHA IN PEDIATRIC PRACTICE

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ABSTRACT-

In today's pediatric practice we come across number of patients having complaints associated to G.I.T. In this vast problem, symptoms like loss of appetite, chronic abdominal pain, chronic G.I.T. disturbances, chronic flatulence, indigestibility, constipation, diarrheas are very common. Parents are very conscious about these problems and seek doctor's opinion.

If such conditions are remain unnoticed or untreated they lead to malnutrition and it's related problems. According to surveys conducted by UN, nearly 500 million people in this world are suffering from malnutrition, the condition is even vast in India too, according to available evidences around 50 million children are malnourished and require intervention.

So, there is a great need to look to this matter with an Ayurvedic view. Although the mentioned features cannot be catagorised under a particular disease according to Ayurved but putting them under the headings like Aruchi, Udershool etc is not satisfactory. To resolve this dispute we have to go back to basics, concentrating on the basic principles of the science and few scattered references we can draw a concept which will be accepted and well supported by the classics too, under the heading Grahani dosha.

To treat this kind of problems every medical stream have number of medications but what is seen very commonly is that these symptoms reappear as the treatment is stopped. Concentrating on this problem, a survey is carried out of 100 children having recurrent complaints related to G.I.T. So, it is thought as need of the hour to find out the etiological factors confined to these problems and by applying them as Nidana Parivarjan and managing the disease without the use of any drug.



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Keywords: G.I.T; Grahani, udarshool, Nidana Parivarjan.

CONCEPT OF GRAHANI DOSHA-

Disease Review :

Direct references of Grahani-dosha as disease is not available but there are good number of references available to highlight the point in scattered form like - Ch.Ch. 15/3, Ch.Ch. 15/67, As.Hr.Ch. 10/3, As.Hr.Ch. 10/3, Chakradatta, various commentaries.

Probable Mode of Samprapti :

Grahani and Agni have Adhar and Adhey Sambandha so, proper functioning of one will ultimately boost the proper functioning of other and vice a versa. Concentrating on Samprapti, it can be delt with 2 ways. First, disturbed function of Grahani is followed by Agnidusti and leading to Grahani dosha while on the other side doshas concerned with Grahani get vitiated first followed by Agnidusti and ultimately disturbing the proper functioning of Grahani and manifesting the condition as Grahani dosha.

Clinical Features :

As already mentioned, no separate description is found regarding the disease Grahani dosha but, concentrating an few

references like Ch. Ch. 15, As.Hr.Ni. 10 few features can be drawn like 'Asamyak Pachan' Prasek, Udarshool, Aruchi, Gaurav, Mala Vikriti (Abbadha Mala / Vibandhata) etc. with the type of these references it can be said that the dusti or vitiation is localised.

The disease can be very well differentiated from other related disorders like Ajirna, Atisara, Visuchika and Pravahika. Here differentiation of Grahani Dosha from Grahani Roga has been given emphasis.

Differentiation :

	Grahani Dosha	Grahani Roga
Vrikriti	Limited	Not limited
Dosha Avastha	Accumulated	Distributed
Degree of Vrikriti	Abaddha, Apakva, Sashleshma Mala Pravriti	Sanna Mala Pravriti
Lakshanas	Localised	Severe



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Survey :

The principle of Aahara Vidhi Vishesha Yatanani is applied in pediatric practice to know their role in the production of the disease when they are not followed. For the same evaluation, few alterations have been made and a special research proforma is prepared under four main headings (i) Aahara Prakriti, (ii) Aahara Samyoga, (iii) Kala and (iv) Method of Consumptions. In Aahara prakriti, few very common examples of child preferred food articles like biscuits, chocolates etc were selected and their consumptions were evaluated for a week. In Aahara Samyoga very commonly used combinations were evaluated for their consumptions for a week. Timings of dinner and lunch and number of feeds were evaluated in Aahara kala. Habits of food consumptions were assessed by asking various questions regarding the daily habits. With this proforma a survey of 100 children suffering from recurrent G.I.T. disturbances is carried out and various conclusions are drawn.

INSTRUCTIONS :

General :

1. Child should be taught the importance of healthy food.
2. Child should be well informed about the benefits of healthy food and hazards of the others.

3. Child should be instructed to maintain cleanness.
4. Child's hands should be washed before each food and his/her nails should be cut regularly.
5. Child should be prevented from eating mud and products kept in open.
6. Parents should keep an example before children by following all these rules which are helpful for child, in their daily routine.

Specific :

1. Biscuits and bakery item should not be given every day.
2. Child should be given food of different tests, excessive sweet food items should not be given daily.
3. Child preferred food like Biscuits and Bakery items, chocklets, Curd, ice-creams and various Fast foods can be given once in a week, but not regularly.
4. Foods of different nature should not be mixed and if at all, child demands them, they should be given, once in week.
5. Whole family should take their Lunch before 02 pm. Preferably between 12 noon to 01 pm.
6. Dinner time too, should be before 09 pm preferably between 07 pm. to 08 pm.



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7. Daily feed should not be more than 05 , the daily schedule should be divided in 03 to 04 feeds.
8. Child should be given freshly cooked food.
9. Child should be given Fresh food articles.
10. Child should be trained to eat with routine time, neither too fast nor too slow.
11. Child should be trained, not to eat too much at a time.
12. Child should be taught not to talk while eating.
13. Child should be trained to seat at a place while eating.
14. Child should be prohibited from enjoying TV/Radio while eating.
15. Preferably child should be allowed to eat himself.

16. Child should be taught or train, not to drink water before or after food.

17. Child should be given food, at his or her own demand and not to force him/her according to the time schedule.

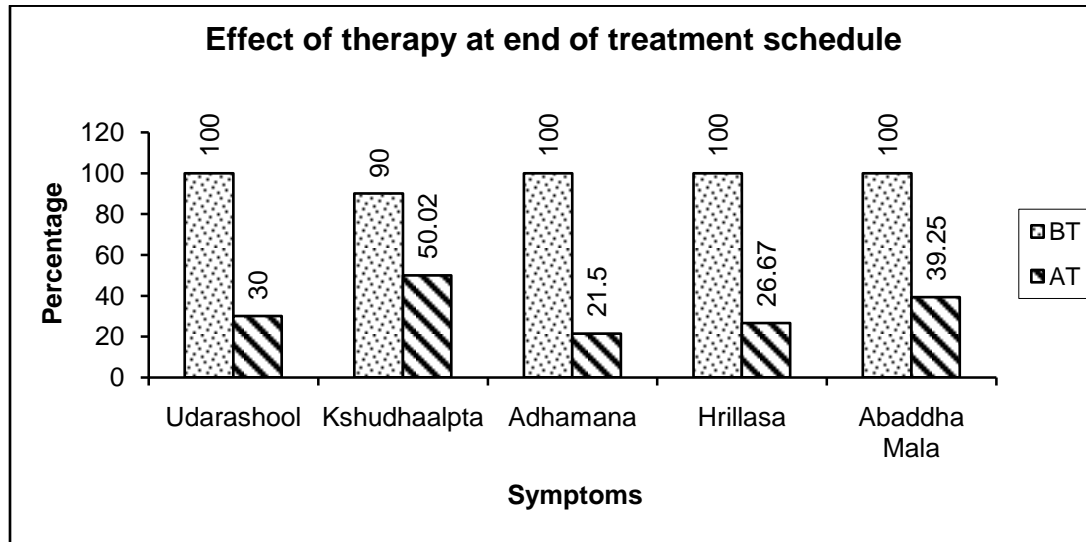
CLINICAL STUDY :

Total 17 patients were administered with a placebo or three weeks along with the above mentioned instructions which were given to the child as well as to the parents. Out of which 10 patients have completed the treatment while 7 had left treatment against medical advice. The dose was decided with the help of a general formula. The effect of therapy was evaluated on following symptoms (i) Udarashoola (ii) Aadhamana (iii) Hrillasa (iv) Kshudhalpta (v) Abaddha or Grathita Mala Pravritti.

EFFECT OF THERAPY :



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CONCLUSIONS :

1. Vary commonly observed complaints in children like chronic abdominal pain, indigestibility, flatulence, Diarrhoea, failure to thrive etc can be grouped under the concept of Grahani Dosha.
2. The disease is not separately mentioned but its clinical features and differentiations from other related diseases can be understood very well.
3. After the administration of the placebo along with the instructions and parental advises to 10 patients the symptom of Grahani Dosha have shown relief like Udarashoola by 70%, Kshudhaalpta by 39.98%, Adhmana by 78.50%, Hrillasa by 73.37% and Abaddha Mala by 60.75%.

4. The overall effect has shown marked improvement with 72.43% of relief.

5. The study was pointed out the role of healthy food and proper habits regarding food consumptions and it has also stress the important of parental care in this regard.

6. So, it can be concluded that such drugless Ayurvedic approaches would be very beneficial for promotion and preservation of health regarding Grahani Dosha in pediatric practice.

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