



## Panchakarma in Pediatrics of Current Scenario

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### Introduction:

*Panchakarma* is an integral part of Chikitsa; its practice was on full swing at the time when other medical sciences even not on the germination. As per our classics it is the only method to cure the disease from its roots. *Panchakarma* process has efficiency to make equilibrium of Dosha which leads to inefficiency to get relapse again<sup>[1]</sup>.

Charaka quoted that Vasti process is the management of half of the *Kayachikitsa*<sup>[2]</sup>. Sushruta also defined that *Rakta Mokshana*<sup>[3]</sup> process of management can cure half of the disease of *Kayachikitsa*. Vasti and *Raktamokshana* is a part of the *Panchakarma* procedure, by analyzing this quotation we can say that if only these two procedure claim for half of *Kayachikitsa* means there is all procedure having certainty to cure the diseases completely without any confusion. *Panchakarma* is a complete cure of so many diseases because it made the equilibrium of Dosha which responsible for health as per Sushruta told *Sama Dosha Samagani* is basic necessity for health<sup>[4]</sup>.

This therapy now days not more in practice or few portion of *Panchakarma* has to be practiced due to time consuming and inconvenient to the patient. In this era person has shortage of time and want fast relief in any way; this situation leads to decrease of immunity weakness and ultimately decrease in life span. Only chronic diseased person or rich and high status society prefers the *Panchakarma* procedure.

*Panchakarma* not only meant for diseased person but it also helpful in healthy persons. In recent era by understanding of importance of *Panchakarma* in life, the public is showing interest towards it and majorly practiced in adult patient.

As *Panchakarma* is an inseparable part of Ayurvedic management. So it is unavoidable in pediatrics cases. Due to the lack of practical knowledge it practiced rarely in some part of India.

*Acharya Kashyapa* told that Vasti is Amritam<sup>[5]</sup> for the children. He wrote *Kashyapa Samhita* to defining the *Kaumarbhritya* to the Ayurvedic physician because it is very difficult Vasti procedure in children<sup>[6]</sup>. He has given full description of diseases and management along with the *Panchakarma* in pediatrics.

When baby takes first breath *Acharya* advised that baby should be undergone the process of *Garbhodaka Vamanam*<sup>[7a&b]</sup> by the use of Saindhava and Ghritam. In other contest he told that those baby are vomiting the milk after breast feed, never suffers with the disease due to expulsion of excessive *Kapha Dosha*<sup>[7c]</sup>.

It proves importance of *Panchakarma* from pediatrics to geriatrics. This fact is well known to every *Ayurvedic* physician but due to lack of practical knowledge along with literature related to the pediatric *Panchakarma*; it seems to be very difficult practice of *Panchakarma* in pediatrics.

### Deference of Panchakarma procedure in adult and children:

Children are not a small adult, they has great deference in body structure and physiology to. Charaka told that children are delicate, inability to tolerate heavy work, ill developed sexual character etc<sup>[8]</sup>.

Babies are always Snigdha in nature due to the habitual of sweet (*Madhura*), *Snigdha* diet as milk, ghee, butter etc. so the *Snehana* is not needed in all pediatrics cases as compare to adult *Panchakarma* procedure [9].

Children are not co-operative as adult. Children's skin has under developed sweat gland and delicate soft in nature, so during *Swedana* procedure it should be taken in mind. They have immature kidney and liver. Babies has chance to easily collapse due to large intestine in compare to body surface area, to the adult; so complication of *Panchakarma* procedures of *Vamana*, *Virechana* and *Vasti* should be keep in mind.

All *Panchakarma* procedure can't be used in pediatrics cases as routine process in adult, according to the need procedure should be taken.

### **Panchakarma in children:**

The *Panchakarma* defined by all Acharya, but specification to the pediatric age for *Panchakarma* procedure and as *Amrita* for babies told by Kashyapa [10]. Procedure followed before *Panchakarma* is *Purvakarma* and after is known as *paschata* karma.

### **Purvakarma in pediatrics:**

#### ***Deepana Pachana:***

The process of improving Agni, has great importance in the normalizing the body physiology. Agni is responsible for *Bala*, *Varna* and *Ayu* [11]. In pediatric cases we can use *Musta*, *Ativisha*, *Trikatu* etc medicine for the *Deepana Pachana* process.

#### ***Snehana:***

*Snehana* is very important for the making of *Dosha* in soluble state and by which they easily get fluidity, made easy removal of *Dosha* from natural orifices [12]. In pediatrics cases the *Abhyangam* has great importance to make the baby *Snigdha* as it helps myelination of the nervous tissue because they are under the process of myelination. Internal *Snehana* is not needed in every case because they are already *Snigdha* due to their diet habit as milk, milk product and sweet items [13]. If internal *Snehana* is compulsion then *Snehana Pravicharana* should be used.

#### ***Swedana:***

*Swedana* procedure alleviates the stiffness of body, relieves sense of heaviness, and cures feeling of cold is known as *Swedana* [14]. It is of two type *sagni* and *niragni*. In pediatrics cases, during *Swedana* process proper care should be taken due to soft, delicate and ill developed sweat gland.

*Acharya Kashyapa* told two specific sudation processes *Hasta* and *Pata Sweda*. By using this process we can save the baby from complication as burn, fainting, black reddish patch on skin, *Trishna*, *Jwara* etc [15]. In children up to four month *Sweda* by hand applicable and after six year *Sweda* by cloth is applicable. Children above one year the *Nadi Sweda*, *Pinda Sweda* *Avagaha Sweda* can be used.

### ***Pradhana karma:***

#### ***Vamana:***

*Vamana* is indicated in pediatrics just after birth as *Garbhodaka Vamana* by using *Vacha* (*Acorus calomus*) and *Saindhava Churna*.

In *ksheerad* baby *Vamana Sadhya* diseseses *Vamana* done by the apply *Madanaphala* on nipple along with areola i.e. dose of *Madanaphala* should not be more than that. Indication of *Vamana* is in baby above the age of five year. *Kabala* is more advisable in children as an alternative method of *Vamana*.

Children especially *Ksheerada* vomits spontaneously even in the presence of small *Doshdusti* hence they require no forced vomiting.

The number of *Vamana Vega* for expelling *Dosha* in *Kanistha* 2-3 , *Madhyama* 4-5, *Uttama* 6-7 for children in place of 4,6,8 in adult respectively <sup>[16]</sup>. The number and quantity is pediatric cases only has literally value, *Lakshana* of *Samyaka Vamana* is more important.

#### **Virechana:**

Generally *Virechana* contraindicated in children, if needed used as a last resort; all other measure failing to cure the disease. This procedure should be administered with extreme caution as there lays a potent danger of dehydration which the children more prone to *mridu verechnoushadha* as *trvritta*, *chaturangula* can be logistically used.

The *Vega* of *Virechana* is 2, 3, and 4, in place of 10, 20, and 30 for adult *Kanistha*, *Madhyama*, and *Uttama* respectively <sup>[17]</sup>.

*Vasti* can be used as alternative of *Virechana* <sup>[18]</sup>

#### **Vasti:**

In general of all *Shodhana Chikitsa*, *Vasti* is supreme as *Amritama*. The age of administer of *Vasti* about one year baby. It is very effective in development of baby as it developed paraneuron (gastro endopancreatic endocrinal system) which stimulate the nervous system for better thriving, now days it is known as gut brain. It is also proved in many research work found to be statistical significant improvement in case of cerebral palsy.

The *Niruha vasti* can cause the *Karshana* in child which leads to the poor development so the Acharya Kashyapa told the *Anuvasana vasti* or *vasti* in which oil more than quantity of kashaya should be used. To prevent complication of *Vasti Chaturbhadra kalpa* <sup>[19]</sup> should be require. The addition of *Gomutra* in *Vasti* leads to the early emulsification oil in water and *Srotoshodhana* which led to better effect in children as per my experience.

#### **General method preparation of Vasti for children:**

This procedure and amount and quantity decided after critical study of literature and practiced about 10 year without any complication in case of cerebral palsy *Pesigatavata*, *Arditavata*, *Pakshaghata*, *Amavata* etc.

**Table No. 1 Quantity of drugs in preparation of Vasti**

S/No	Total quantity (ml)	Oil	Kashaya	Gomutra (m.l.)	Saindhava (gram)	Mishreya (gram)	Madhu (gram)
1	200	100	80	10	2	2	6
2	150	75	60	7.5	1.5	1.5	4.5
3	120	60	48	6	1.2	1.2	3.6
4	100	50	40	5	1	1	3
5	60	30	20	2.5	0.6	0.6	1.8

**Table No 2 quantity with respect to age of children:**

S/No	Age in year	Vasti Matra
1	1-3	100 ml
2	3-5	120 ml
3	5-8	250 ml
5	8-12	350 ml

### **Nasyama:**

Administration of medicine through nasal route is known as *Nasya*. “*Nasa hi shirasho dwara*” so all the disease related to head is best treated by this procedure. Kashyapa told *nasyama* two types *Shodhana* and *Purana*. The indication of *Nasyama* is 8 to 80 year<sup>[20]</sup>.

Pratimarsha *Nasya* can be used from the birth and ideal for the children on regular basis it is traditionally practiced by mother during massage with oil to the baby. Its *matra* is 2 drops.

### **Raktamokshana:**

Sushruta told that *Shira vyadha* is half of *Chikitsa of surgery*<sup>[21]</sup>. In our Shastra the methods of Rakta Mokshana as *shriga, jaluka, alabu* and *shira vyadha* mentioned. Children have *aparipakwa* Dhatu so in first step this procedure not indicated. If disease is not cured by *Shamana* and other method then *Rakta Mokshana* is indicated as in *Gudakutta, ajagallika*<sup>[21]</sup>, *neelika, mukhapaka, charmadala*.

The *jalauka* is the only mean for *Raktavasechana* in pediatrics cases.

### **Conclusion:**

*Panchakarma* is part of Ayurvedic management, it can't be ignore in pediatric cases. In Ayurvedic literature full description of *Panchakarma* in pediatrics is available it is not practiced due lack of practical exposure along with improper understanding of principles of *Panchakarma* in pediatrics.

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