

UNDERSTANDING THE ROLE OF VATSALYA IN LACTATION: CLINICAL INSIGHTS
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ABSTRACT

Stanya (breast milk) is considered the very essence of infant life in Ayurveda, described as “*Jeevanamshishunam*”. Adequate lactation is a key requirement for healthy growth and development of the child. *Stanyakshaya*, or depletion of breast milk, remains a significant challenge in pediatric and gynec practice. While classical texts describe numerous *stanyavardhakadravyas* (galactagogue herbs), the role of maternal emotion – *Vatsalya* (motherly affection and emotional bonding) – is considered primary. Kashyapa highlights “*Snehahstanyasyajanani*” (affection is the true mother of milk). Lactation is a complex physiological and psychological process deeply influenced by maternal health, emotions, and environment. Ayurveda emphasizes *Vatsalya* as the foremost factor for *StanyaUtpatti* (initiation and sustenance of breast milk). *Stanyakshaya* (insufficient lactation) is not merely a physical phenomenon but is often associated with mental stress, lack of confidence, or impaired maternal-infant bonding. This review explores the concept of *Vatsalya* in *stanya* utpatti and the management of *Stanyakshaya*, correlating classical Ayurvedic wisdom with modern psychoneuroendocrine understanding of oxytocin-mediated lactation. It emphasizes that medicines and diet serve as supportive measures, while *Vatsalya* is the fundamental determinant of lactation success.

KEYWORDS: Vatsalya, Stanyakshaya, Stanyavardhana, Ayurveda, Lactation, Oxytocin.

INTRODUCTION

Breastfeeding is universally acknowledged as the cornerstone of infant nutrition. Modern health organizations such as WHO and UNICEF recommend exclusive breastfeeding for the first six months. Ayurveda too proclaims.

“*Stanyamshishunamjivanam*” (Kashyapa Samhita, Khila Sthana)

– Breast milk is life itself for the infant.

Despite this, many mothers experience *Stanyakshaya* (depletion or insufficiency of breast milk). The usual approach involves prescribing galactagogues (*Stanyavardhakadravyas*) such as *Shatavari*, *Yashtimadhu*, and *Vidari*. However, Ayurveda emphasizes that beyond diet and drugs, the emotional state of the mother – *Vatsalya* (tender affection for her child) – is the true foundation of successful lactation.

Ayurveda, in its holistic vision, identifies *Vatsalya* (maternal affection, unconditional love) as a crucial determinant of lactation. Kashyapa Samhita places *Sneha* and *Vatsalya* at the center of *StanyaUtpatti*, highlighting that milk secretion is not merely a mechanical process

but an outcome of maternal love, mental calmness, and emotional balance. In modern medicine, this is explained through the neuroendocrine reflex mediated by prolactin and oxytocin, which are strongly influenced by maternal psychological states.

In today's fast-paced world, where maternal stress, anxiety, and lack of family support are common, revisiting the Ayurvedic principle of *Vatsalya* becomes not only relevant but essential. Thus, exploring *Vatsalya* provides a unique bridge between classical Ayurvedic thought and contemporary clinical practice.

The prevalence of *stanyakshaya* (hypogalactia) has been reported to be around 30–40% among mothers in India and other tropical countries. On the other hand, studies in low- and middle-income nations reveal that 60–90% of mothers perceive their breast milk production as insufficient, although such perception does not always correspond to true physiological deficiency.

Definition of Vatsalya

Derived from Vatsa (child) → *Vatsalya* = affection towards the child (matrusneha).

It represents unconditional love, compassion, and emotional nourishment.

Stanya: Definition and Significance

Described as upadhatu of rasa dhatu. Considered the prime postnatal nutrition for the neonate, ensuring growth, development, and immunity. Kashyapa Samhita

highlights Stanya as a determinant of *Bala* (strength), *Varna* (complexion), *Medha* (intellect), and *Ayushya* (longevity) of the infant.

StanyaUtpatti (Physiology of Milk Formation)

Stanya is produced when ahara rasa nourishes rasa dhatu in the mother, subsequently transforming into milk.

Factors influencing stanya

Aharaja (dietary factors)	Viharaja (lifestyle factors)	Manasika (psychological factors)
Intake of stanyajananadravyas (Shatavari, Vidari, Ikshu, Draksha).	Rest, stress-free environment, adequate sleep.	Vatsalya, Sneha, Ananda, Shanti.
Vatsalya bhava is described as the main stimulant for natural stanya flow.		

Stanyakshaya (Insufficient Lactation)

Defined in classical texts as decrease or absence of breast milk.

Lakshanas (clinical features)

Stanyaalpata – scanty secretion.

Stanyadaurbalya – poor quality of milk.

Restlessness and crying in infant due to hunger.

Maternal anxiety, irritability, or dryness of breast tissue.

Nidanas (etiological factors)

Improper *ahara vihara*.

Psychological disturbances (*krodha, shoka, chinta*).

Absence of affectionate bonding (*avatsalya*).

Vatsalya as Stanyavardhaka

Vatsalya functions as an internal, non-pharmacological galactagogue.

Mechanisms in Ayurveda.

Harmonizes *rasadhatu* circulation.



Enhances *ojas* and emotional stability.



Encourages *snehapravritti* (nourishing tendency).



Eliminates *manasikadoshas* (anger, fear, grief).

Stanyakshaya in Classical Texts

CharakaSamhita (ShariraSthana)

“*Stanyamśoka-bhaya-krodha-śramajamhiyate*”

→ Milk decreases with grief, fear, anger, or exhaustion.

KashyapaSamhita (KhilaSthana)

“*Snehaḥstanyasyajanani*”

→ Affection (*sneha, vatsalya*) is the mother of milk itself.

Sushruta Samhita (Sharirasthana)

Notes that Stanya is derived from Rasa Dhatu, which is directly influenced by emotional state.

Thus, Ayurveda clearly states that disturbances in *manasika bhavas* (mental emotions) cause *Stanyakshaya*, while *Vatsalya* promotes *stanyotpatti* (milk formation). Now, we will see the modern perspective –

Neuroendocrine Mechanisms

Prolactin: secreted from anterior pituitary → stimulates milk synthesis.

Oxytocin: released from posterior pituitary → causes milk ejection (“**let-down reflex**”).

Both are directly influenced by maternal psychology and emotional states.

Role of Emotions in Lactation

Positive emotions (love, affection, bonding) → stimulate oxytocin release → improved let-down.

Negative emotions (stress, fear, anxiety) → inhibit oxytocin release → *stanyakshaya*.

Skin-to-skin contact, eye contact, affectionate touch → strongly enhance oxytocin activity.

Effect of Stress → Cortisol and adrenaline inhibit oxytocin release. This validates Charaka’s statement that grief, fear, and anger reduce stanya.

Modern Clinical Evidence

Studies show that maternal counseling, relaxation, and affectionate bonding practices increase milk volume. Practices such as Kangaroo Mother Care and early initiation of breastfeeding align with *Vatsalya* principle. Thus, modern science validates the Ayurvedic emphasis on maternal affection. Modern lactation support (kangaroo mother care, breastfeeding counseling) echoes this Ayurvedic principle.

Integrative Clinical Approach

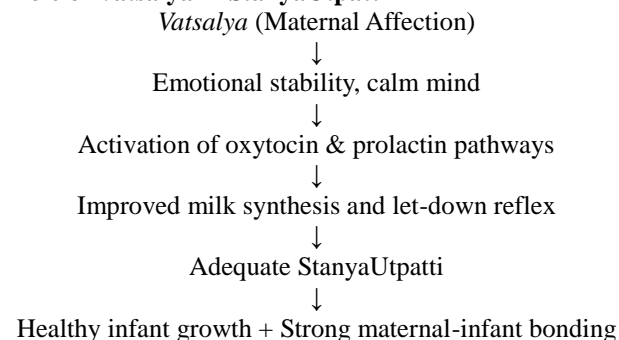
Ayurvedic Protocols – Use of *Stanyajananadravyas* (Shatavari, Vidari, Yashtimadhu, Jeevaneeyagana), *Mansikachikitsa* (reassurance, encouragement, nurturing maternal affection), *Dinacharya & Sadvritta* (ensuring rest, nutrition, positive environment)

Modern Supportive Measures – Lactation counseling. Kangaroo Mother Care (KMC). Breastfeeding techniques and positioning. Maternal psychological support, group counseling, peer support.

Bridging Both Systems – Ayurveda emphasizes *Vatsalya bhava*, modern science emphasizes oxytocin-mediated

maternal bonding. Both converge on the principle that emotional health is central to successful lactation.

Role of Vatsalya in StanyaUtpatti



Practical Applications of Vatsalya in Clinical Practice

Antenatal Counseling – Educating expectant mothers about importance of emotional bonding. Encouraging visualization of breastfeeding and positive affirmations. Explaining Ayurvedic principles of *Vatsalya* and *StanyaUtpatti*.

Postnatal Support – Early skin-to-skin contact (Kangaroo mother care) immediately after birth. Rooming-in practices to maintain constant mother-infant proximity. Encouraging unrestricted demand feeding to strengthen bonding.

Emotional Support Interventions – Daily affectionate touch, cuddling, and talking to the baby. Music therapy (gitasevana) to relax the mother. Guided meditation or yoga nidra to reduce anxiety.

Ayurvedic Practices Supporting Vatsalya– Rasayana for lactating mothers (*Shatavari*, *Vidari*, *Yashtimadhu with ghr̥ta*), *Snehana* & *Abhyanga* (Oil massage to reduce vataja stress and promote calmness), *Acharya Rasayana* (*Satvavajayachikitsa*: counseling, positivity, avoiding negative emotions).

Family & Social Role – Supportive husband and family members promote emotional stability. Social reassurance reduces guilt and self-blame in mothers with low lactation.

Clinical Case Applications – In *Stanyakshaya*, before prescribing galactagogues, reinforce *Vatsalya* through counseling. Combine herbal galactagogues (*Shatavarikalpa*, *Vidari*, etc.) with psychological support for better results. Evaluate infant weight gain as outcome of both nutritional and emotional interventions.

Proposed Clinical Protocol

1. Assess → History + Examination (mother + infant).
2. Counsel → *Vatsalya* reinforcement (bonding, affection).
3. Support → Ahara + Vihara + Skin-to-skin contact.
4. Strengthen → *Aushadhachikitsa* (*Shatavari*, *Vidari*, *ghr̥ta*).

5. Heal → *Satvavajayachikitsa* (stress management, positivity).
6. Integrate → Modern breastfeeding practices (latch, demand feeding).
7. Monitor → Infant growth + maternal wellbeing.
8. Escalate → Refer if underlying pathology suspected.

DISCUSSION

The management of *Stanyakshaya* should not be limited to pharmacological galactagogues. While herbs like *Shatavari* and *Vidari* strengthen *Rasa dhatu*, their efficacy is incomplete without maternal affection. Ayurveda recognizes the psychosomatic basis of lactation, placing *Vatsalya* above dravya-based interventions.

Modern science validates this ancient wisdom: oxytocin, the “love hormone,” governs milk ejection, and is directly linked to emotional bonding. Hence, *Vatsalya* serves as an emotional Rasayana—a therapeutic force nourishing both mother and child.

By revisiting *Vatsalya*, Ayurveda offers a holistic framework for lactation care, integrating diet, medicine, and emotional counseling.

CONCLUSION

Vatsalya is the fundamental stanyavardhaka in Ayurveda. It is not merely an emotion but a therapeutic factor, harmonizing psychological, physiological, and spiritual dimensions of motherhood. In *Stanyakshaya*, reinforcing *Vatsalya* through maternal counseling, family support, and affectionate bonding with the infant must be considered the first line of management, with herbal galactagogues as supportive measures.

Thus, “Where there is *Vatsalya*, there will always be *Stanya* – and where there is *Stanya*, there is life.”

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