

A REVIEW ON CONCEPT OF BALA GRAHA WITH ITS MODERN ASPECTS

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ABSTRACT

Kaumarbhritya is one of the branches of the “*Ashtanga Ayurveda*”. *Balgraha* is an abstract that is a part of *Kaumarbhritya*. The concept is quite distinctive which portrays the disease caused by the invisible vectors. This idea of *Balgraha* is not very acceptable nowadays due to Modernization of this era. For that reason, an attempt has been made to relate it to the modern era on the basis of the science and clinical application that can be practically applied on the patients. After research, all the required material is collected from the *Ayurvedic* textbooks and it comes to a conclusion that all these obscure vectors are nothing but microbes that produces multi system disorders and cannot be seen by a naked eye. This microbe is etiopathogenesis of various syndrome the *Graha Roga* is same like some syndrome. In this review article we try to correlate its all aspects with modern sciences with its ayurveda and contemporary sciences management.

KEYWORDS: *Kaumarbhritya*, *Balgraha*, *Graha Roga*, *Snana*, neonatal bath, *Navajaata sishu*, *Apasmara*, *Dhupana* etc.

INTRODUCTION

Balgraha is made up of two words Bal and Graha^[4] where Bal means Children and graha means to capture. These *Balgraha* seize or holds the child and causes various disorder They are unidentifiable and invisible. Their progress is very rapid and its pathogenesis is entirely different from the regular diseases.

The description of the *Grahas* are found in various places and historical texts such as firstly in Rig Veda and for instance in *Mahabharat*, *Kaushiksutra*, *Bhaishajya*, *Agnipurana*, *Markandeya purana*, *Brhadaranayaka Upanishada*. In Kashyap, it has been described in *Revati Kalpadhyaya*. These *Grahas* were made by lord *Shiva* and *Parvati* to protect their child *Kartikeya*. For instance, Lord *Shiva* made *Skandagraha*, *Agni* made *SkandaApasmar*, *Parvati* made *Naigmesha* and *Kartikeya* made *Mukhmandika* and *Putrika*.

In modern Era, these *Grahas* can be correlated with microorganisms that are invisible to the eyes but they are responsible for various diseases that can be very fatal. So, these are none other than the bacteria and viruses that causes diseases.

Different Acharyas have numbered different types of *Grahas*. For example, Acharya Charak has considered

the influence of devas to be responsible to cause *Grahas* and he has also considered to be innumerable cause of indifferent etiologies. Acharya Sushruta has considered 9 *Grahas* in number that are, skanda apasmar, skanda shakuni, revti, putna, andhaputna, sheetaputna, *mukhmandika* and *naigmesha*. Acharya Vagbhatta has added 3 more in the *Grahas* given by Sushruta that is swagraha, pitragraha and shushka revati making it a total of 12.

- Type of *Balagraha*
- Charaka: Acharya Charaka^[1] told about the innumerable numbers of *balagraha* Rogas.
- Shushruta^[6]: Acharya Shushruta has shown more importance to *Bala graha* and detail account on this aspect. *Bala graha* are nine in number named as *Shakuni*, *Revati*, *Putana*, *Andhaputana*, *Shitputana*, *Skanda*, *Skandapasmar*, *Mukhmandika* and *Naigamesa*
- Vagbhatta^[2]: Acharya Vagbhatta has told twelve *graha roga*, out of which seven as male *graha roga* and five as female *Graha Roga*. These male and female *Bala Graha Roga* is considered as Gram positive and Gram negative microbes. Male *Graha* are *Skanda*, *Vishakha*, *Mesha*, *Swagraha*, *Ptragraha* while female *grhasa* are *Putana*, *Shitputana*, *Andhaputana*, *Shakuni*, *Revati*, *Shushkrevati* and *Mukhamandika*.

- Kashyapa^[15]: In kashyapa Samhita, *Bala Graha* references are scattered at many places namely first reference is in *Sutra sthana* where monk described the vitiation of breast milk of wet nurse by *Graha* like *Putana*, *Shakuni*, *Skanda* and *Shasthi* which is the only contribution of *Kashyapa* but the description is incomplete due to extinction of manuscript.
- These *Grahas* are classified into male and female categories. Males can be correlated with the Gram positive bacteria and females as Gram negative bacteria.
- Male^[5]-
 - ✓ *Skanda*
 - ✓ *Skanda Apasmara*
 - ✓ *Shavgraha*
 - ✓ *Pitra Graha*
 - ✓ *Naigmesha*
- Female^[7]
 - ✓ *Shakuni*
 - ✓ *Revati*
 - ✓ *Putna*
 - ✓ *Andha Putna*
 - ✓ *Sheetaputna*
 - ✓ *Mukhmandika*
 - ✓ *Shushka Revti*
- As per Acharya vagbhata in the ancient texts, there are 3 main etiology behind *grahabadha* i.e.
 1. *Hinsa* (victimize) means This is pathogenic in nature and causes disease e.g. DIC, bleeding disorder, Sepsis.
 2. *Rati* (worshipped) means This illustrate microbes reproduce and increase their progeny in host (child), complete their life cycle and produces diseases e.g. Typhoid, Malaria etc
 3. *Archana* (sexual demand) means The host are exploited by microbes for their nutrition. e.g. Worm.

Hence, the hygiene in terms of shuchi and shuddhi play a major role to prevent and cure the *Graha* rogas.

- But as in Sushrut Samhita, these are the reason behind *Graha* attack i.e.
 - ✓ Faulty code of conduct by mother /Dhatri
- Clinical Features of **Skanda Graha** and **Quadriplegia**

SKANDA GRAHA	QUADRIPLEGIA
<i>Kshataja Gandhi/vasa Asrk Gandhi</i> [odour of blood/flesh]	Improper neck holding, nuchal rigidity
Tearing from one eye	Spastic limbs due to hypertonicity
Frequent shaking of head, head banging	Difficulty in speech (dysphasia) due to laryngeal muscle paresis
Weakness in one half of body along with stiffness	Cortical thumb
Upward fixed Gaze, infrequent spasm in one eye	Scissoring at the level of knee / ankle
Grinding of teeth, clenching of fist	Higher mental function may be hampered/ preserved
Deviation of face, drooling of saliva	Quality of life disturbed

- Management In Ayurvedic Text.
 - ✓ *Cikitsa for sannipata stanya dusti*

- ✓ unhygienic condition
- ✓ misbelief in worshipping god
- ✓ Not adhered to religious customs
- ✓ loss of control over excessive joy or sorrow.
- ✓ Prodromal symptoms of *Grahavesha*.
- ✓ fever
- ✓ excessive crying.

➤ **Sadhya-Asadhyatwa**

Graha Roga occurred due to

- ✓ *Himsa* – incurable [*asadhya*]
- ✓ *Rati* – difficult to cure [*krchhrasadhya*]
- ✓ *Archana* – easily curable [*Sadhya*]

➤ **AIMS AND OBJECTIVES**

- ✓ To review *Graha Roga* with the available ancient literatures/Ayurvedic texts.
- ✓ To Analyse the probable etiopathogenesis of different *Graha Roga*.
- ✓ To discuss scientific correlation of *Graha Roga* in present era of advancement.

➤ **Graha Roga with their modern aspect.**

- **Skandha graha**:- Skanda is the commander-in-chief of army of *Devataas* and pierced with his weapon through the heart of *Raakshas Krouncha* with a single shot. He has an effulgent red body decked with garlands and red flowers. His body is smeared with red sandal paste and he receives all the energies produced by austerities. Skanda Graha is having Teja, Swastha Shareera, Putra of Mahadeva, Agni & Ganga may be suggesting a pathogen which is very potent having complete cell structures, survive in aquatic medium and resistant to heat and cold (Susruta Samhita)

- **Quadriplegia**:- Cerebral palsy (CP) is defined as a nonprogressive neuromotor disorder of cerebral origin. It includes heterogeneous clinical states of variable etiology and severity ranging from minor incapacitation to total handicap. Most of the cases have multiple neurological deficits and variable mental handicap. The term does not include progressive, degenerative or metabolic disorders of the nervous system. spastic quadriplegia is most common among them.

- ✓ *Vatahara* leaves sprinkling (*Asna*, *Eranda*)
- ✓ *Snana* at crossed road, chanting of *gayatri*

- ✓ *Mantra* for 3 consecutive nights
- ✓ Offering red garlands and red sandalwood (*Rakta Chandan* ralepa to God)
- ✓ Ghee prepared by *Devdaru*, *Asana* with milk for drinking
- ✓ *Dhoopan* with *Sarsapa*, *Vacha*, Sloughs of snake and hairs of animals.
- ✓ *Daiva Vyapasray Cikitsa*
- Management in modern view.
- ✓ Physiotherapy
- ✓ occupational therapy
- ✓ anticonvulsants
- ✓ symptomatic Management.
- **Skandha - apasmara:-** it is termed as *visakha* by acharyas. in texts it is described as involuntary movement of limbs and features of upward gaze, frothy salivation, tightness of limbs, vacant look etc which point towards seizure disorder.

➤ Clinical features of *Skandha apasmar and Infantile seizure/ spasm*

<i>Skandha-apasmara</i>	Infantile seizure/spasm
Upward eye movement	Up rolling eye balls
Sudden unconscious and regaining sense after a short interval	Altered consciousness/ unconscious for an interval
Abnormal body movements	Generalized/tonic/clonic/myoclonic/atypical/absent seizure pattern
Tightening of limbs	Limb tightening
Frothing of saliva	Salivation
Tongue bite	Tongue bite
Infrequent passing of urine and stool during spasm	Urine/stool incontinence
Post ictal drowsiness	Cyanosis may develop, mental retardation

- Management in Ayurvedic Classics.
- ✓ Pariseka by *bilva*, *sirish*, *golomi*, *surasa kwatha*
- ✓ *Snana* in road where crossing of 4 roads
- ✓ *Panchagavya*, *Mahatiktaka*, *kalyanaka Ghrita*
- Management in Modern View-
- ✓ Anti-convulsant specially use of benzodiazepine group of drugs
- ✓ fluid and electrolytes correction
- ✓ fever control
- ✓ dietary modification
- **Naigamesha:-** it is associated with fever having seizure activity, with upward eye movements, vomiting, clenched fist and typical odour of smell of bladder of goat which can be correlated with meningitis.
- **Bacterial meningitis:-** Acute bacterial meningitis, a major cause of morbidity and mortality in young children, occurs both in epidemic and sporadic pattern. Acute bacterial meningitis is commoner in neonates and infants than in older children because of poorer immunity. Organisms in neonates are *Escherichia coli*, *Streptococcus pneumoniae*, *Salmonella* species, *Pseudomonas aeruginosa*, *Streptococcus fecalis* and *Staphylococcus aureus*.

- **Infantile seizure/spasm:-** Seizures (convulsions, fits) are caused by abnormal electrical discharges from the brain resulting in abnormal involuntary, paroxysmal, motor, sensory, autonomic or sensorial activity. About 5 percent children experience convulsions during the first five years of life.

Neonatal seizures often present with twitching of the limbs, fluttering of the eyelids, sucking movements and conjugatedeviation of the eyes. These should be distinguished from jitteriness, tremors, startle response to stimuli, sudden jerks on awakening.

Epilepsy is characterized by recurrent, episodic, paroxysmal, involuntary clinical events associated with abnormal electrical activity from the neurons. The patient may present with motor, sensory or psychomotor phenomena, often with alteration in sensorium. Epileptic encephalopathy include West Syndrome and Lennox-Gastaut Syndrome should also be kept in mind.

Three months to 3 yr, the infection is most often due to *Haemophiles influenzae*, *S. pneumoniae* and meningococci (*Neisseria meningitidis*). Beyond 3 yr, the two most common organisms are *S. pneumoniae* and *N. meningitidis*. Host. Patients with diminished host resistance (complement, immunoglobulin or neutrophil function defects), malignancies, on immunosuppressive drugs are more susceptible to develop meningitis, by fungi, *Listeria* and *Mycoplasma*. The infection spreads hematogenously to meninges from distant foci, e.g. pneumonia, empyema, pyoderma and osteomyelitis. Purulent meningitis may follow head injury. Rarely, the infection may extend from contiguous septic foci, e.g. infected paranasal sinuses, mastoiditis, osteomyelitis and fracture of the base of skull. Recurrent meningitis may be associated with pilonidal sinus, CSF rhinorrhea, traumatic lesions of the cribriform plate and ethmoidal sinus or congenital fistulae, besides immune deficiency disorders.

➤ Clinical Features of *Naigamesha* And **Bacterial Meningitis**

NAIGAMESHA	Bacterial Meningitis
Frothing with vomitus	Projectile vomiting
smells of bladder of goat (<i>basta gandhatwa</i>)	having Odour of urine
Depressed anterior fontanelle	Tense bulging anterior fontanelle
Irritability	poor feeding shrill cry
Febrile episode.	Fever
altered sense	lethargy

- Management in Ayurvedic Texts.
- ✓ Sprinkling of water prepared by *bilva*, *agnimantha*, *putikaranja*.
- ✓ *Snana* near banyan tree
- ✓ Offering sacrifice near *nyagrodh* tree to God.
- Management in Modern View.
- ✓ Empirical broad spectrum antibiotic coverage
- ✓ Cerebral diuretics use to reduce intra cranial pressure
- ✓ Symptomatic treatment i.e antipyretics.
- **Swagraha**:- it is defined as tremor, horripilation, excess cry, tongue bite, abnormal bending of body etc and typical odour of stool/faeces which points toward Rabies/hydrophobia.

- **Rabies/Hydrophobia**:- Rabies is a zoonotic disease transmitted to human usually by bite and scratch by an infected animal, mainly dogs, cats, cattle, pigs, mongoose and jackals. Licks on broken skin or intact mucous membrane may transmit rabies. Rare causes include aerosol, transmission in bats infested caves and human to human transmission by organ/tissue transplant (corneal transplant). Rabies virus is a neurotropic, single stranded RNA virus of genus *Lyssa virus* & family *Rhabdoviridae*. Incubation period: Highly variable, 5 days -6 years (average 4-6 weeks)

➤ Clinical features of *swagraha* and **Rabies/Hydrophobia**

Swagraha	Rabies/Hydrophobia
Tremor, rigor/chill	3 stages= prodromal, excitatory and paralytic phase
Opisthotonos bending of body	Painful spasm of body Lock jaw
Tongue bite	Fever Agitation Excess salivation
Fearful running	Fear of seeing or touching water, which provoked by any stimulus
Smell of faece [<i>vid Gandhi</i>]	Respiratory failure and death

- Management in Ayurvedic Classics.
- ✓ Use of Medicated oil prepared by *Satabari*, *Sariva*
- Management in Modern Classics.
- ✓ Prevention by anti rabies vaccination, rabies immunoglobulin
- ✓ Symptomatic Management
- **Pitrigraha**:-findings mentioned in texts are sudden fear, sudden crying, horripilation, fever coughing, discolouration of body/cyanosis etc and typical odour of dead body/cadaver. We can correlate to pneumonia in neonates.
- **Pneumonia**:- Pneumonia may be classified anatomically as lobar or lobular pneumonia, bronchopneumonia and interstitial pneumonia. Pathologically, there is a consolidation of alveoli or infiltration of the interstitial tissue with inflammatory cells or both. Viral pneumonia caused by respiratory syncytial virus, influenza, parainfluenza or adenovirus may be responsible for about 40% of the cases. In over two-thirds of the cases, common bacteria cause pneumonia. In the first 2 months, the common agents include gram-negative bacteria such as *Klebsiella*, *E. coli* and gram-positive organisms like pneumococci and

staphylococci. Between 3months to 3 yrs- *H. influenzae* and staphylococci. After 3 yr of age, common bacterial pathogens include pneumococci and staphylococci. Gram-negative organisms cause pneumonia in early infancy, severe malnutrition and immunocompromised children. Atypical organisms including *Chlamydia* and *Mycoplasma* spp. may cause community acquired pneumonia in adults and children. *Pneumocystis jiroveci*, histoplasmosis and coccidioidomycosis may cause pneumonia in immunocompromised children. Other causes of pneumonia include ascari, aspiration of food, oily nose drops, liquid paraffin and kerosene poisoning. The etiology remains unknown in one-third of cases of pneumonia.

➤ Clinical features of **pitrigraha** and **pneumonia**.

Pitrigraha	Pneumonia
Smell of cadaver [<i>swa Gandhi</i>]	Poor breast feeding/refusal to feed
Anxiety, severe cry	Grunting Visible retraction of chest Nasal flaring
Acute fever	Fever with or without chill
Discoloration of face	Cyanosis
Poor growth and physique	Tachycardia Tachypnea Failure to thrive

- Management As Per Ayurvedic View.
 ✓ Sprinkling of water prepared by *kshirivriksha* *kashay* drugs.

- Management As Per Modern Protocol.
 ✓ Moist oxygen inhalation
 ✓ empirical broad-spectrum antibiotic
 ✓ antihistaminic drugs
 ✓ antipyretics
 ✓ nutritional correction etc.

- **Sakuni**:- The word *Shakuni* in Ayurveda means bird. The typical body odour emitted from the body of a child suffering from *Shakuni Graha* is name as *Vihanga/ Shakuni Gandha* (odour similar to bird). The disease, Impetigo is a highly contagious bacterial disorder in children with similar presentation of *Shakuni Graha*. This *graha roga* occurs due to vitiated breast milk by *katu, tikta rasa*.

- **Impetigo**:-The primary sites affected with blisters are face, neck, hands and perianal region. Any area

can be affected other than these also. There are 2 types of Impetigo -Bullous and non bullous. But most common type in younger children is bullous impetigo where small vesicles are seen which turn to blisters. The content of the blister is generally clear which become purulent later. The blisters later rupture forming a wet, shiny and itchy area which forms scales. In Impetigo the early lesions are vesicles that rupture quickly leaving red wet erosions or dry to form gummatous lesions, golden yellow/ reddish brown crusts. The crusts eventually separate and leave erythematic that fades without scarring. The lesions are scattered, discrete 1 to 3 cm in diameter, round or oval and show central healing area. The predisposing factors of Impetigo are poor hygiene, close contact with children suffering from similar condition, sharing clothes/towels of others and also immunocompromised. The age group who are at risk is from 2 to 5 years.

➤ clinical features of **Sakuni** and **Impetigo**.

Sakuni	Impetigo
Smell of birds specially vulture [<i>sakuni Gandhi/ bihanga Gandhi</i>]	Crust formation
Multiple ulcer with pus discharge	Sore on chancre formation
Blisters with burning sensation	Bullae/blisters formation
Ulceration mainly in oral and anal region	Itching, painful lesion with systemic features like fever etc

- Management As Per Ayurvedic View.
 ✓ *Stanya Dusti Cikitsa*
 ✓ Sprinkling of water made by *Vetasa, Amra, Kapittha*.
 ✓ Offering of *karanja* to God
 ✓ *Rakta, Pitta Saman Cikitsa*
 ✓ *Vrana Sodhan and Vrana Ropana Cikitsa*.

- ✓ Broad spectrum antibiotic
 ✓ Antifungal drugs
 ✓ Maintain hygiene

- **Putana**:-This *balgraha* described as laxity of body, day sleep but night awakening, loose stool, odour of crow like smell(*kaktulya Gandhi*), vomiting, dehydrated, thirsty etc.this *graha roga* occurs due to vitiation of breast milk by *Madhur, katu rasa*

- Management as Per Modern View.

➤ Clinical Feature of **Putana** and **Diarrhea**.

Putana	Diarrhea
Day sleep but night awakening	Disturbed sleep
Profuse loose stool, vomiting, thirst	Loose stool with change in consistency and frequency
Oliguria or retention of urine, general weakness	Sign of dehydration has to be assessed

- Management As In Ayurveda Classics.
- ✓ Sprinkling With *Kakolyadi Gana* Drugs
- ✓ Chanting Of *Raksha Mantra* By Wearing Clean, White Dress
- ✓ Offering oblations to God in vacant house(*sunya griha bali*)
- MANAGEMENT as per modern view.
- ✓ Correction of dehydration if any by iv fluid
- ✓ ORS or increase oral intake
- ✓ Broad spectrum antibiotic
- ✓ Antisecretory drugs
- ✓ Improvement in hygiene and nutrition.

➤ **WHO guideline for dehydration assessment.**

Parameter	No dehydration	some dehydration	Severe dehydration
Sensorium	Well alert	Irritable	lethargic
Eyes	Normal shiny	Shunken	Very shunken
Tears	Present	Absent	absent
Oral mucosa	Moist	Dry	very dry
Thirst	normal	Drinks eagerly	Not able to drink
Skin turgor	Goes back immediate	Goes back slowly	Goes back very slow
Urine output	Normal	Oliguria	anuria

➤ **Clinical Features Of *Sitaputana* And Diarrhea With Dehydration.**

<i>Sitaputana</i>	Diarrhea with dehydration
One side of body become warm while other side cold	Fever if associated with secondary infection
Irritability	Sensorium is alert/excess cry/irritable/lethargic in severe case
Profuse watery loose stool with foul smell, intestinal gurgling	Loose/watery stool, mix with blood/mucus, dryness of oral mucosa, oliguria or anuria, skin turgor Diminished
Ocular complications	Shrunken eyes, tear may be absent

- Management as per Ayurvedic texts:-
- ✓ Sprinkling of medicated water made by *kapittha, vimbi, bilva*
- ✓ Fumigation with stool of animals
- ✓ Offering wine, blood to God.(*sura sonita payini*)
- Management as per modern view:-
- ✓ Promote breast feeding properly
- ✓ In case of severe dehydration=Dehydration correction by iv fluid only.[ringer lactate, dextrose, normal saline]
- ✓ Antibiotic coverage
- ✓ Antisecretory agents,
- ✓ Electrolyte balance maintain.
- *Andhaputana*:-it is described as aversion to breast milk, loose stool, cough, vomiting, fever, discolouration of body, often lies with prone position, odour of sour substances from body(*amla Gandhi*).

➤ **Clinical Features Of *Andhaputana* And Chronic Diarrhea**

<i>Andhaputana</i>	Chronic diarrhea
✓ Aversion to breast milk, malnourished, loose stool	✓ Early introduction of cow milk is a major cause of chronic diarrhea[<i>cow milk protein allergy</i>]
✓ Fever, vomiting, cough, sleep disturbance, visible oedema	✓ Failure to thrive with oedema
✓ Constant lying down in prone position, ✓ trachoma in eyes[<i>pothaki</i>]	✓ loose stool with more than 2 weeks is defined as chronic diarrhea [etiology-Tb, celiacdisease, immunocompromised, IBD etc]

- Management as per Ayurvedic classics.
- ✓ Bathing in water prepared by *tikta* drugs
- ✓ Fumigation with stool, nails, hairs of gallinaceous birds
- ✓ Chanting of mantra wearing astringent colour dress(*kashay ambara vasini*).

- Management as per modern view.
- ✓ Cause should be evaluated at first and specific treatment should be given
- ✓ Nutritional demand should be meet up
- **Mukhamandika**:-it is defined as affected by graha having features like apparently well looking physique, voracious hunger, venous prominence over abdomen, bad odour cow urine/urine from body etc.
- **Juvenile onset diabetes**:- Type 1 diabetes (T1D), formerly known as juvenile diabetes, is an autoimmune disease that originates when cells that make insulin (beta cells) are destroyed by the immune system. Insulin is a hormone required for the cells to use blood sugar for energy and it helps regulate glucose levels in the bloodstream. Before

treatment this results in high blood sugar levels in the body. The common symptoms of this elevated blood sugar are frequent urination, increased thirst, increased hunger, weight loss, and other serious complications. Additional symptoms may include blurry vision, tiredness, and slow wound healing. Symptoms typically develop over a short period of time, often a matter of weeks. The cause of type 1 diabetes is unknown, but it is believed to involve a combination of genetic and environmental factors. The underlying mechanism involves an autoimmune destruction of the insulin-producing beta cells in the pancreas. Diabetes is diagnosed by testing the level of sugar or glycated hemoglobin (HbA1C) in the blood. Type 1 diabetes can be distinguished from type 2 by testing for the presence of autoantibodies.

- Clinical Features Of **Mukhamandika** And **Juvenile Onset Diabetes**.

Mukhamandika	Juvenile Onset Diabetes
✓ Lusturous body	✓ Apparently healthy looking but failure to thrive
✓ Smooth hands, leg, face	✓ Unexplained loss of weight
✓ Prominent veins over abdomen	✓ Fatigue, opportunistic infections
✓ Voracious eater	✓ Polyuria
✓ Smell of cow urine from body[<i>gomutra Gandhi</i>]	✓ polydipsia
	✓ polyphagia
	✓ Acetone/fruity smell from breathe[Diabetic keto acidosis]

- Management In Ayurvedic texts.
- ✓ Vata alleviating therapy
- ✓ Sprinkling of water made by *kapittha*, *bilva*, *tarkari* drugs
- ✓ Bathing near shelters for cows[*goshala*]
- ✓ Chanting Raksha mantra wearing ornaments, garlands, anointing.
- Management As Per Modern View.
- ✓ Control hyperglycemia by insulin therapy
- ✓ Prevent dehydration, correct electrolyte imbalance
- ✓ Prevent diabetic keto acidosis
- ✓ Protection of vital organs from complication
- ✓ Dietary modification
- **Revti**:- it is defined as facial redness, greenish loose stool, fever, ulceration in mouth/body, odour of foul clay from body etc.
- **Pernicious anemia**:- Pernicious anemia is a disease in which insufficient RBCs are produced due to a deficiency of vitamin B12. Those often have a gradual onset. The most common initial symptoms

are feeling tired and weakness. Other symptoms of anemia may include shortness of breath, lightheadedness, headaches, tachycardia[hemic murmur], sore tongue, cold hands and feet, pale or yellow skin, chest pain. The disturbed GI tract giving symptoms that can include nausea and vomiting, heartburn, upset stomach, varying colour stool and loss of appetite. Symptoms of vitamin B12 deficiency may include decreased ability to think, numbness in the hands and feet, memory problems, blurred vision, muscle weakness, decreased smell and taste, poor reflexes, clumsiness, depression, and confusion. Without treatment, some of these problems may become permanent. Pernicious anemia refers to a type of vitamin B12 deficiency anemia that results from lack of intrinsic factor. Lack of intrinsic factor is most commonly due to an autoimmune attack on the cells that create it in the stomach. It can also occur following the surgical removal of all or part of the stomach or small intestine; from an inherited disorder or illnesses that damage the stomach lining.

- Clinical Features Of **Revati** And **Pernicious anemia**.

Revati	Pernicious Anemia
✓ Redness in face	✓ Palpitation, fatigue, irritability, pallor, opportunistic infections
✓ Frequent rubbing of face by child	✓ Mouth ulcers[glossitis, cheilosis, stomatitis]
✓ Fever, fatigue, diffuse ulceration/blisters over body	✓ Sudden diarrhea, anorexia, vertigo
✓ Greenish loose stool	✓ Brittle nails
✓ Smell of mud/foul clay[<i>panka Gandhi</i>]	

- Management As In Ayurvedic Texts.
- ✓ Bathing near meeting point of river.
- ✓ Sprinkle by *Aswagandha*, *Sringi*.
- ✓ Chanting of Raksha mantra by wearing garlands anointment.
- Management As Per Modern View.
- ✓ Vitamin B12 supplements
- ✓ Folic acid supplements
- ✓ High protein diet
- ✓ Symptomatic treatment and prevent complications
- **Shuska revti^[14]**:- it is defined as gradual consumption of body, falling of hair, anorexia,

➤ Clinical Features of *Suska Revati* And **Abdominal Tuberculosis**.

<i>Suska Revati</i>	Abdominal Tuberculosis
✓ Gradual cachexic/malnourished, anorexia	✓ Loss of body weight
✓ Premature hair fall, hoarseness of voice/feeble voice	✓ Opportunistic infections
✓ Discolouration of body, varying coloured stool, venous prominence/nodule over abdomen	✓ Doughy feeling abdomen, abdominal lump, ascites, abdominal pain, vomiting, absolute constipation / Chronic diarrhea
✓ Smell of vulture from body[<i>gridhvi Gandhi</i>]	✓ Fever, fatigue

- MANAGEMENT as per Ayurvedic classics.
- ✓ Similar to *skanda graha cikitsa*.
- MANAGEMENT as per modern view.
- ✓ Anti tubercular drugs empirical therapy
- ✓ Broad spectrum antibiotics, antispasmodics
- ✓ Symptomatic treatment
- ✓ Surgery if there is perforation or obstruction.

➤ Samanya Cikitsa Of *Graha Roga*.

1. fumigation[*dhupa*].
 - ✓ *Maheswar Dhupa*
 - ✓ *Aagneya Dhupa*
 - ✓ *Dasanga Dhupa*
 - ✓ *Manasiladi Dhuma*
2. medicated *ghrita*.
 - ✓ *Astamangal ghrita*,
 - ✓ *Abhaya ghrita*.
 - ✓ *Purana ghrita*
3. Emesis indication[*vamana Sadhya*].
 - ✓ *Skandha*
 - ✓ *Skandha-Asmara*
 - ✓ *Naigamesha*
 - ✓ *Pitrigraha*.
4. Emesis contraindication [*vamana asadhya*].
 - ✓ *Pundarik*
 - ✓ *Sakuni*
 - ✓ *putana*,
 - ✓ *mukhamandika*.
5. Emesis[*vamana*] and purgation[*virechana*] both contraindicated.
 - ✓ *Revati Graha*
6. *Daiva Vyapasraya Cikitsa*.
 - ✓ *Mantra*

- discolouration of body, varying colour stool, nodular appearance and venous prominence over abdomen, odour of vulture from body.
- **Abdominal tuberculosis**:- The gastrointestinal tract, peritoneum, lymph nodes and/ or solid viscera can be involved in abdominal tuberculosis. The peritoneal involvement is of two types: wet (or ascitic) and dry (or plastic) type. On the other hand, the intestinal involvement may be ulcerative, hypertrophic or ulcerohypertrophic.
 - Etiology are-untreated pulmonary Tb, swallowing infected sputum, consumption of unboiled milk.

- ✓ *Mani*
- ✓ *Bali*
- ✓ *Homa*
- ✓ *Prayascitta*
- ✓ *Japa Etc*

7. cikitsa of *Unmada and Asmara* should be followed. This Is the Ayurvedic Treatment Partfor Graha Roga.

➤ **DISCUSSION**

There was no cuttingedge equipment for diagnosis or treatment in the ancient world. Modern terminology is more precise and causally stated. diseasecausing organism. In order to see germs and classify them as bacteria, viruses, etc., modern science procedures are more advanced. One of the key parts of the Ayurvedic book is the balagraha, which requires a thorough explanation in order to comprehend the balagraha rogas. Therefore, graha rogas may be simply understood and identified with the use of contemporary scientific procedures.

CONCLUSION

The precise relationship between *Graha Roga* and illnesses or germs is unknown because this topic has not yet been thoroughly researched. Though isolation as the primary mode of treatment now seems absurd, the conceptual study of the picornaviredae includes enteroviruses since its subclass resembles the Graha Roga the most in the past. As a result, various non-infectious disorders were also related to the *Graha Roga*. Furthermore, I'm trying to support the *Asadhya* symptoms as well as the common symptoms. By outlining the connections between each *Graha* and them.

It is very obvious that different microbiological infections and *Balagraha* are comparable. Treatment for *Balagraha Roga* might involve both therapeutic and psychiatric treatment. *Balagraha* rogas must be prevented early by maintaining cleanliness and sanitary practises. So, in terms of *Shuchi* and *Shuddhi* (asepsis and antisepsis), cleanliness is crucial to their therapy. In terms of hygiene, several preventive measures recommended for children and puerperal women are effective methods to avoid infections. Pregnant women and children should be fumigated.

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