

AN APPROACH TOWARD KUPOSHANJANYA VYADHIES IN CHILDREN W.S.R. TO
PHAKKA ROGAKaram Singh^{*1} and Rakesh Sharma²¹Assistant Professor, ²ProfessorP. G. Department of Kaumarbhritya, Rajiv Gandhi Government Post Graduate Ayurvedic College Paprola, Kangra,
Himachal Pradesh.***Corresponding Author: Karam Singh**Assistant Professor P. G. Department of Kaumarbhritya, Rajiv Gandhi Government Post Graduate Ayurvedic College Paprola, Kangra,
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ABSTRACT

Nutritional practices play a pivotal role in determining optimal health and development of children. Various widespread health problems can be prevented through nutritious diet. Malnutrition has left a profound impact on India's child population, leaving them vulnerable to all sorts of infectious diseases. In Ayurveda texts, Kuposhanjanya Vyadhies (Nutritional disorders) are described by acharyas. Kuposhanjanya Vyadhies are the diseases similar to Protein Energy Malnutrition (PEM). PEM is a type of malnutrition resulting from deficiency of proteins and calories in food over a long period of time. Acharya Kashyapa discussed the phakka roga in detail in chikitsasthan Phakkachikitsit adhyaya. The literary meaning of Phakka is phakkati nechayere gachatti eti phakka- it means run down condition of the body.

KEYWORDS: Malnutrition, Kuposhanjanya Vyadhies, Phakka Roga, PEM.**INTRODUCTION**

Nutrition is one critical factor which modulates the immune response, hence playing a crucial role in determining the outcome of an infectious illness. Appropriate nutritional practices play a pivotal role in determining optimal health and development of children. Various widespread health problems can be prevented through nutritious diet.

In Ayurveda texts, Kuposhanjanya Vyadhies (Nutritional disorders) are described by acharyas. Kuposhanjanya Vyadhies are the diseases similar to PEM (protein energy malnutrition). PEM is a type of malnutrition resulting from deficiency of proteins and calories in food over a long period of time. WHO defined PEM as a range of pathological conditions arising from coincidental lack of varying proportions of proteins and calories, occurring most frequently in infants and young children and commonly associated with infection. The PEM is most common in under five year children, maximum incidence between 6 months to 3 years.^[1] In the early stages, there is failure to maintain weight according to age, but as it becomes progressive, child lose weight, subcutaneous fat and muscle mass with dysfunction of many organs which results to a variety of clinical features. If child not get timely treatment leads to infections, shock and death. The children suffering from PEM manifest as pre-kwashiorkor, kwashiorkor, marasmus, marasmic kwashiorkor and nutritional dwarfism.^[1]

Incidence

Malnutrition has left a profound impact on India's child population, leaving them vulnerable to all sorts of infectious diseases. There are multiple dimensions of malnutrition in India that include calorific deficiency, protein hunger and micronutrient deficiency. Studies have shown that poor nourishment in children can weaken their immune system and increase morbidity due to various infectious diseases. According to the Global Nutrition Report 2020, India is among 88 countries that are likely to miss global nutrition targets by 2025. Underweight rates: Between 2000 and 2016, these rates have decreased from 66.0% to 58.1% for boys and 54.2% to 50.1% in girls. Stunting: 37.9% of children under five are stunted and 20.8% are wasted. India is identified as among the three worst countries, along with Nigeria and Indonesia, for steep within-country disparities on stunting.

Ayurvedic Acharyas described diseases related to nutritional deficiency disorders such as karsya, Phakka roga, Parigarbhika, Balashosha etc. in respective Samhita. Acharya Charaka described krishata among Ashtauninditiya topic (undesireable persons) (Charak samhita sutrasthana 21/3).^[2] Sushruta described atikrishata (malnutrition) with its pathogenesis (Sushruta Samhita sutrasthana 15/39).^[3]

Phakka roga

Acharya Kashyapa exclusively described the Phakka Roga in Chikitsasthan Phakkachikitsait Adhyaya. The literary meaning of Phakka is 'phakkati nechayere gachatti eti phakka'- it means run down condition of the body. If the child remains incapable of walking independently even after attaining one year of age, that is called Phakka Roga.^[4]

Etiology and pathogenesis

Child whose mother is pregnant, orphan child (No proper care giver), who is suffering from grahni roga (duodenum and intestinal disorders), bahubhojina (often eat too much). Due to weak digestive fire (mandhagni), vitiated rasa dhatu not provide essential nutrition to body and further dhatu formation hampered results to emaciation and child pass excessive urine and faeces (because of impaired digestion and absorption).^[5]

Classification

Three types of phakka roga – ksheeraj (due to ingestion of vitiated breast milk), garbhaj (caused due to pregnancy of mother) and vyadhija phakka (due to various diseases and their complication).^[6]

Ksheeraj phakka: Breast milk, vitiated by kapha is called phakka – dugdha. This sort of stanya by obstructing the channels of rasadhatu causes nutritional deficiency to the child and results into sosha. It is the primary state of the disorder. The same nutritional status, if continued, increases the weakness and emaciation reducing the bodily movements. This condition may precipitate the disorders like diarrhea, pneumonia, anemia by which the child further deteriorates and suffers from phakkaroga.^[7]

Garbhaj phakka: A newly delivered woman, if conceived in quick succession suffers from qualitative (nutritional values) and quantitative deficiencies of her breast milk. The child becomes weak if fed by such milk. At that young infancy the baby's agni cannot adjust the weaning and so offering of any hard substances aiming at nutrition, is a waste at that stage and ultimately the baby continues to be nutritional deficiency. thus the subsequent pregnancy of the mother interferes with the protection of the infant which leads to the reduced movements of the child due to emaciation and growth retardation.^[8] The deficiency of nutritive diet itself, or the breast milk deficient of nutrients of the mother due to her subsequent earlier conception would adversely affect the child by resulting this phakka roga.

Vyadhija phakka: The orphan child (anatha) who suffers from fever etc., endogenous and exogenous diseases, results

Kshinmansbaladhuti - Wasting of muscle, decreased strength and lusterless skin, shuskasaphicabahuurru - buttocks, arms and thighs get emaciated,

Mahodar shiromukha - distended Abdomen, Head and face seems large in comparison to body,

Pitachakshu – yellowish eyes - jaundice,

Drisyamanasthipanjarah - mostly made up of Skin and Bone

Pramlanadharkayasch - Lower extremities too weak.

Nityamutrapuriskrit - Increased frequency of micturition and defecation (because of impaired digestion and absorption).

Nischesthadharkayo - Least active lower limbs or weakness in lower half of the body.

Panijanugamoapi - Moves or crawls with support of hand and knees.

Daurbalyanmandchestha - Decreased activity due to weakness.

Makshikakrimikitanam gamyshachasannamrituruk- House fly, worms and bacteria adheres baby due to decrease activity which may invite life threatening secondary infections.

Vishirnrhstroma ch stabdharoma mahanakhah - Scattered and easily pluckable hairs and large nails

Durgandhi malinkrodhi phakka shwasiti tamyati - foully smell, dirty and irritable nature associated with respiratory difficulty.

Ativinmutradusikashinhankmalodbhawa - Increase quantity of urine and stool associated with yellowish thick nasal discharge.^[9]

Treatment

1. **Chikitsa Siddhant:** (a)sodhan to dhatri for kapha stanya (phakkadugdha), (b) baby should be given nutrient food but through light (laghu) substances (if weaning is early), (c)the diseases of nija agantuja, if exists as underlying causes, should be corrected accordingly.
2. **Sanahan and Shodhan karma:** child should be given Snehan for 7 days with Kalyanak ghrita, Shatpal ghrita or Amrita ghrita followed by Purgation (koth sodhan) with Trivrit Ksheer,
3. Brahmi ghrita is indicated to the child after elimination of doshas.
4. Internal use of milk medicated by Rasna, Madhuk, Punarnava, Akaparni, Eranda, Satapushpa, Draksha, Pilu, Trivrit.
5. **Doshanushara Karma:** 1. predominance of kapha - internal use of milk and gomutra (cow urine), 2. In Association of Vata- use of Vasti, Snehan, swedan and udhvartan.

6. **Nutritive therapy (Balya chikitsa):** Mansa rasa, medicated milk with shali rice, medicated oil also beneficial.
7. **To increase muscle bulk and strength:-** Oil massage with Raj taila (having multiple dravyas as eranda, bilwa, anshumati, yava, kola, kulatha, oil, dadhi etc.)
8. **Physiotherapy:** In order to support the practice of walking of the baby, there is special mention of Trichakra rath (Tri cycle), specified to be manufactured by a skilled and technical person.^[10]

CONCLUSION

The overall picture of the Phakka roga indicates the state of progressive malnutrition (Protein energy malnutrition) causing growth retardation and ultimately leading to failure to thrive. Acharya Kashyapa gives detail description of the disease with treatment regime. In the phakka roga etiopathogenesis, agnimandya results in improper dhatu-nirman, so treatment should be aimed at rasa nirmana with the normalacy of agni by mrudu shodhan followed by deepana, pachana, balya and bruhan therapy. By using the treatment schedule, it will be helpful in decreasing malnutrition incidences.

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