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# A Clinical Study to evaluate the effect of *Kshirbala Taila Basti* in the management of *Karshya* in school going children

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## ABSTRACT

In India around  $\frac{3}{4}$ <sup>th</sup> of our paediatric population is suffering from one or other nutritional deficiencies which can be termed as *Karshya*. About 75-80% of hospitalized children suffer from some degree or type of malnutrition. Lots of attempts have been made to minimize this at National level. For this the immunization plans and milk distribution or midday meal to school going children alone will not be sufficient. Ayurveda can play major role in providing health to children. In Ayurveda, *Balya* and *Brumhana Chikitsa* for undernourished children is an interesting area in the field of *Kaumarbhritya* and since the prevalence of this disease in present scenario is more.

**Key words:** *Karshya*, *Matra Basti*, *Kshira Bala Taila*, *Under Nutrition*, *Agni Dushti*.

## INTRODUCTION

*Karshya*<sup>[1-4]</sup> is the disease comparable with under nutrition which can be a *Swatantra Vyadhi* or it can also manifest along with other diseases as a prestige symptom of complication. It is an *Apatarpana Janya Vyadhi* where *Vatadosha* plays a very important role in the pathogenesis. Malnutrition results from the interaction of poor-quality diets and poor-quality health and care environments and behaviours. In today's busy era people are not able to follow proper diet and life-style, so are their children leading to disturbed gastrointestinal and metabolic functions.

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So, according to Ayurveda fundamentals not giving thought to *Pathya-Apathya* leads to *Agni-Dushti* at all levels leading to improper nourishment of the *Dhatus* resulting in manifestation of *Karshya*. In India around  $\frac{3}{4}$ <sup>th</sup> of our paediatric population is suffering from one or other nutritional deficiencies which can be termed as *Karshya*. About 75-80% of hospitalized children suffer from some degree or type of malnutrition. Under-nutrition jeopardizes children's survival, growth and development, and it slows national progress towards achieving development goals. Although great improvements have been made within the past few years, there still remains a great number of malnutrition related illnesses that are still present in the country and remains a major public health issue. The Rapid Survey on Children (RSOC) a survey performed between the year 2013 and 2014 reports that 38.7% are considered stunted ( low height for age), 29.4% are considered underweight (low weight for age), 15% are considered wasted (low weight for height). According to NFHS-4, in India, 38.4% children under the age of five years are stunted; 35.7% children under five are underweight; and nearly 21% children under five are wasted out of which 7.5% are severely wasted or suffer from severe acute

malnutrition (SAM). India contributes to one-third of severely wasted children under five in the world. The 2015 Global Hunger Index (GHI) report ranked India 20<sup>th</sup> amongst leading countries with a serious hunger situation. Amongst south Asian nations, it ranks third behind only Afghanistan and Pakistan with a GHI score of 29.0 ("serious situation"). In India, 60% of children with SAM fewer than five years live in 6 states: Uttar Pradesh, Madhya Pradesh, Bihar, Rajasthan, Maharashtra and Tamil Nadu. In this study, *Balya* and *Brumhana Chikitsa* in the form of *Ksheerbala Taila Matra*<sup>[5]</sup> Basti was given to 20 children fulfilling the criteria of *Karshya* and has given promising results after 21 days of administration of Basti with both local and systemic effects resulting in weight gain in non-weight gaining type cases.

### AIMS AND OBJECTIVES

To study the clinical efficacy of *Kshirbala Taila Basti* in the management of *Karshya*.

### MATERIALS AND METHODS

Study was carried out on 20 patients in Rajiv Gandhi Govt. Post Graduate Ayurvedic College Paprola, Himachal Pradesh.

#### Inclusion criteria

3 to 16 Years children irrespective of sex, education and socio-economic status with poor weight gain, poor growth, lean and thin body as per IAP and Children fulfilling the description of *Karshya* described in our texts like *Sushkaspika*, *Sushkaudara*, *Sushkagriva*, *Dhamani Jala Darshanam* etc.

#### Exclusion criteria

Children with any physical disability or, infectious diseases like TB, congenital and hereditary problems, malignancies and below or above the mentioned age group.

#### Treatment Schedule

**Duration of intervention** - 1 month (Total 21 *Matrabasti*)

Patients were divided in three classes on the basis of age range,

- 3-5 yr : 30 ml
- 6-9 yr : 45 ml
- 10-16yr : 60 ml

**Follow up** - Weekly and after completion of trial

### OBSERVATIONS AND RESULTS

#### A. Effect of therapy on subjective parameters

1. **Daurbalya:** On this parameter the result showed highly significant ( $p < 0.001$ ) effect with 61.9% improvement. *Kshirabala Taila* having *Brumhana* effect and rectal route helps in evacuating waste product and by increasing synthesis of nutrient.
2. **Kshudha:** The effect on *Kshudha* was highly significant ( $p < 0.001$ ) and the relief was 93.02%. *Basti* of *Kshirabala Taila* having *Agnidipti* property and *Basti* itself cause *Vata Samana* and helps in increasing *Jarana Shakti* which is the main factor for *Agnidushti* in *Karshya Roga*.
3. **Dhamani Jala Darshanam:** *Dhamani Jala Darshana* was reduced by 41.37% which is highly significant ( $p < 0.001$ ).
4. **Sthula Parva:** Showed significant effect ( $p < 0.05$ ) on reducing *Sthula Parva* and the relief in percent was 13.8%.
5. **Nidra:** On this parameter patients showed highly significant result ( $p < 0.001$ ) with 71.42% improvement.
6. **Constipation:** After the therapy highly significant effects ( $p < 0.008$ ) were observed with 100% relief in constipation. Impairments in *Agni* i.e. *Mandagni* is main cause for disturbed bowel habit i.e. constipation and diarrhea. *Basti* by virtue of *Agnidipti* maintains the *Agni* and *Bastidravya* itself causes *Malapaham* i.e. elimination of toxic substance from the body and pacify *Vata* which also ultimately balances *Agni* and helps in regularizing the bowel habit.
7. **Kapola Gata Vasa:** Showed highly significant effect ( $p < 0.001$ ) and improvement in percentage was 35.13%.

### B. Effect of therapy on Objective Parameters

- 1. Weight:** Highly significant weight gain was noticed with the percentage improvement of 9.8%. It might be due to acceleration of the body growth as a result of *Brumhana* therapy which was achieved by correcting *Agnidushti* followed by increasing food intake due to *Deepana Karma*.
- 2. Height:** An increase in height has been observed in the present study, it might be due to their growing period because all the patients belong to the age group of 3-16 year.
- 3. Mid-Arm Circumference:** Increment in mid-arm circumference was 7.1% which was highly significant. The drug has positive effect on formation of all the *Dhatu*s as it potentiates *Agni*, relieves obstruction of *Srotas* and harmonizes *Dhatvagni* functions.
- 4. Chest Circumference:** Chest circumference was increased by 1.2% with significant result. It indicates that anabolic effect has been started in the patient and increase in chest circumference appears to be due to musculature growth only.
- 5. Head Circumference:** The effect on head circumference was insignificant ( $p>0.05$ ) with 0% improvement.
- 6. Mid-Thigh Circumference:** Increment in mid-thigh circumference was 3.7% which was highly significant.
- 7. Mid-Calf Circumference:** Increment in mid-calf circumference was statistically highly significant with percentage improvement of 5.3%.

### Overall Effect of Therapy

Among total 20 patients, 40% patients showed moderate improvement while 30% patients showed mild improvement followed by only 3% patients showed marked improvement with no improvement in rest 3% of patients.

### DISCUSSION

*Karshya* is an *Apatarpana Janya Vyadhi* so, its management is done by *Santarpana (Brumhana)*.<sup>[6-14]</sup>

*Karshya* being a *Vata Pradhana Vyadhi*, mainly occurring due to *Dhatukshaya*. So as general line of treatment i.e. *Vata Upakrama* can be adopted.<sup>[15]</sup> As specific line of treatment all the *Acharyas* observed importance of *Brumhana* therapy. The principle of management of *Karshya* should be in the following manner; *Nidanaparivarjana*, *Samshodhana*, *Samshamana*, *Ahara*, *Vihara*.

In case of management of *Atikarshya*, *Acharya Charaka* rightly advised administration of *Mridu Samshodhana* as per the requirements.

Considering the above mentioned fact *Brumhana* therapy in the form of *Kshirabala Taila Basti* has been administered in the patients of *Karshya*. The *Basti* is given to *Vatasthana* and so it can alleviate the *Vata* at its own site. As the *Vata* is brought under control the disease is itself cured, because without the major causative factor, the disease itself does not have any existence.<sup>[16]</sup>

*Kshirabala Taila* having *Deepana* property helps in *Agnidipti*, *Srotoshodhaka* property maintains integrity of *Srotas*. The *Brumhana* property is directly responsible for *Dhatuabhivardhana*.

*Ksheerbala Taila* while introducing through rectal route '*Bastichikitsa*', also act on distinct part along with local action. Ayurveda mentioned that *Ushna*, *Snigdha*, *Vataghana*, *Balya*, *Brihmana* etc. characteristics of *Ksheerbala Taila* suppress *Vayu*. And on correlation with modern concept fatty oils in *Ksheerbala Taila* enhance the absorption of *Taila* from rectum mucosa which is responsible for efficient cure of *Vatvyadhi Karshya*.

*Ksheerbala Taila* introduced through ano-rectal route reaches the large intestine where it increases the peristalsis of the intestine, thus helping in the removal of waste products from the body resulting in *Mridu Samshodhana*. It also helps in maintaining the intestinal flora providing probiotic effect.

### CONCLUSION

Based on the above findings it can be presumed that though the formulation has the qualities of increasing *Kapha* and *Medas* and decreasing *Vayu*, its action is

only to the extent of alleviating the clinical symptoms of *Krishta* which is the objective of the study and bring the undernourished children to the state of normalcy. All the cases are of non-weight gaining type but not in the state of weight losing. Further weight gain after treating with this formulation can be possible with proper nutrition in the form of food as no any medicine can be a substitute to the food, an essential factor for growth.

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