# Pharmacocitical Research

# WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.084

Volume 13, Issue 3, 1524-1530.

Review Article

ISSN 2277-7105

# A AYURVEDIC REVIEW ON KARSHYA AND ITS MANAGEMENT

Dr. Pranali Suryawanshi<sup>1</sup>\*, Dr. Jyotsna Ahir<sup>2</sup> and Dr. Masaudaalam Mujwar<sup>3</sup>

<sup>1</sup>PG Scholar, Department of Kaumarbhritya, LRP Ayurvedic Medical College Islampur, Sangali, Maharashtra, India.

<sup>2</sup>Head of Department, Department of Kaumarbhritya, LRP Ayurvedic Medical College Islampur, Sangali, Maharashtra, India.

<sup>3</sup>Associate Professor, Department of Kaumarbhritya, LRP Ayurvedic Medical College Islampur, Sangali, Maharashtra, India.

Article Received on 19 December 2023,

Revised on 09 Jan. 2024, Accepted on 29 Jan. 2024

DOI: 10.20959/wjpr20243-31263



\*Corresponding Author
Dr. Pranali Suryawanshi
PG Scholar, Department of
Kaumarbhritya, LRP
Ayurvedic Medical College
Islampur, Sangali,
Maharashtra, India.

#### **ABSTRACT**

Under nutrition is a condition in which there is inadequate consumption, poor absorption or excessive loss of nutrients. Sometimes malnutrition and protein energy malnutrition are used interchangeably with under nutrition. The term protein energy malnutrition applies to a group of related disorders that include marasmus and kwashiorkor. Food is significant as a nutritional source, as well as having therapeutic value, and it plays a crucial part in regaining strength lost due to the disease's detrimental effects throughout the post-treatment phase. Ayurvedic scriptures haphazardly explain nutritional issues. Karshya is a childhood malnutrition like illness. Similarly, diseases described by diverse Ayurvedic authors as Parigarbhika, Phakka, Balashosha, and Shuska Revati might be linked to undernutrition based on clinical symptoms. These illnesses were linked to one another. Childhood malnutrition is thought to be the cause of 35% of all fatalities in children under the age of five, as well

as 21% of total worldwide disability-adjusted life years lost in children under the age of five. The Ayurvedic perspective on dietary disorders such as protein-energy deficiency is highlighted in this article.

**KEYWORDS-** Karshya, Balashosha, Shushka, under nutrition, Protein-energy childhood malnutrition.

#### INTRODUCTION

Aahara is one of the three sub-pillars of life as per Ayurvedic classics. Indian traditional medicine has incorporated various explanations regarding this vital pillar of life. The transforming unit from 'food' into nutrition is termed as 'Agni' or digestive fire, which forms the edifice upon which the Ayurvedic system is built.<sup>[1]</sup> Various explanations for this crucial pillar of life have been included in Indian traditional medicine. The 'Agni' or digestive fire, which forms the architecture upon which the Ayurvedic system is founded, is the converting unit from 'food' into nutrition. According to Acharya Charaka, over lean (Atikrushya) people, as well as overfat (Medasvi) people, are classified as eight vile people (Ashtau-ninditiya Purusha).<sup>[2]</sup>

Undernutrition occurs when nutrients are consumed insufficiently, absorbed poorly, or lost excessively. Childhood malnutrition is a phrase that encompasses both under and over nutrition. Childhood malnutrition and protein-energy childhood malnutrition (PEM) are terms that are occasionally used interchangeably with undernutrition1. Children who are still growing are the ones who are most affected. Their nutritional condition is as ensitive indicator of the health and nutrition of their community. [3] Ahara is one of life's three sub-pillars. Growth and development are physiological processes that occur when all of the components that influence it are in good health. When these components are missing, failure to flourish or being undersized for age occurs, which is referred to as Karshya in Ayurveda. [4] Deficiencies, excesses, or imbalances in a person's intake of energy and/or nutrients are referred to as malnutrition. Malnutrition refers to two major categories of diseases. One is "undernutrition," which encompasses micronutrient deficiencies or insufficiencies as well as stunting (low height for age), wasting (low weight for height), and underweight (low weight for age) (a lack of important vitamins and minerals). The other is noncommunicable illnesses linked to overweight, obesity, and food (such as heart disease, stroke, diabetes, and cancer). [5]

Childhood malnutrition is thought to be the cause of 35% of all fatalities in children under the age of five, as well as 21% of total worldwide disability-adjusted life years lost in children under the age of five. [6] India's population's health and nutritional condition have not significantly improved, according to the National Family Health Survey (NFHS) 2019–21, the fifth in the series. Because of the unclean food consumption after 4-6 months of age, the proportion of undernourished children begins to rise, leading to an increase in the risk of childhood malnutrition.<sup>[7]</sup>

## Etiology<sup>[8]</sup>

- Ruksha Annapana Sevana (Indulgence in rough food and drinks)
- Langhana (Fasting),
- Pramitashana (Little diet),
- Kriyatiyoga (Excessive subjection to evacuative therapy),
- Shoka (Grief), Chinta (Worries),
- Bhaya (fear),
- Shrama (excessive physical and mental activity),
- Rukshaudvartan(Excess non unctuous anointing to the persons),
- Snanaabhyasa (indulgence in bath), Prakruti(Constitution)
- Beejadosha (heredity),
- jwara (old age),
- Vikar Anushaya (continued disorder)
- Krodha (Anger) make a person underweight.

#### Nidana Of Karshya

Excessive exposure to evacuative therapy), Shoka (Grief), Chinta (Worries), Bhaya (Fear), Shrama (excessive physical and mental activity), Vega- Nidra-Trusha –Kshudha - nigraha (Suppression of natural urges, such as sleep thirst and hunger), Atishrama, Ati maithuna, Atisnana abhyasa (Excessive Physical exertion, over-saturation, hunger, thirst sickness, and narcotics, as well as excessive cold, heat, and sexual intercourse, are not tolerated by the slim person.

#### Lakshana Of Karshva

Shushka-sphic, under, greeva (dried up buttocks, abdomen, neck), Dhamanijala santataha (prominent vascular network), Twagasthi shesho, Ati krusha (remnant of skin and bone), Sthoola Parva (thick joints), Vyayam Atisauhityam (the over lean does not tolerate the physical exercise, over saturation).<sup>[9]</sup>

#### Samprapti (Pathogenesis of disease)

Those who indulge in Vata promoting diet, physical exercise, excessive sexual intercourse, strenuous study, anxiety, wakefulness in night, thirst, hunger, taking of astringents, partial starvation etc., circulating Rasa being reduced in quantity fail to nourish the tissue due to insufficiency; hence extreme Karshya (leanness/emaciation) occurs.<sup>[10]</sup>

### **Description According To Samhita**<sup>[11]</sup>

#### Karshya

Karshya is under nutrition condition due to reduced food intake of baby resulting from less intake, if mother use Vatavardhak Ahara- Vihara and baby take Vatadushistanya. Ultimately, baby become malnourished.

#### Balshosha

The causes of of Balshosha are Arochaka (reduced digestive capcity), Pratishyaya (running nose), Jwara (fever) and Kasa (cough), and at last baby may lead to Shosha (emaciation).

#### Parigarbhika

If any baby is on breast milk of pregnant women then Parigarbhika Roga can occur and that milk have poor nutriment. Signs and symptoms of Parigarbhika Roga are cough, impaired digestive capacity, vomiting, fever and anotexia.

#### Phakkaroga

In Phakkaroga, Ksheeraj Phakka, Garbhaj Phakka and Vyadhija Phakka are described, Ksheeraj Phakka is due to intake of Shlaishmika Dughdha. Vyadhija Phakka is malnutrition condition resultant of any diseases as Graharoga etc.

#### Vyadhi Sambhavaja Phakka

Starvation state caused by a chronic ailment. On the whole, Vyadhija Phakka refers to severe forms of childhood malnutrition, where the childsuffers from fever, endogenous and exogenous disease, and his flesh, strength, and lustre deteriorate. Shuska Sphik andShuska Bahu (wasting of buttocks and upper limb), Shuska Uru (wasting of thigh), Mahaudara (abdomen becomes protuberant), Mahoshiara (comparatively skull, the face becomes more Kaya Nischeshta Adho (lower body part is emaciated, weak), discharges too much urine daily, the lower body becomes inert or crawls with hand and knee, the lower body has less activity owing to weakness, and the lower body is overpowered by flies, insects, and worms, resulting in sickness. This marasmic has dry, erect, and stiff body hair, large nails, bad Odour, dirty, irritable, dyspneic, feels as if entering the dark, passes copious faeces, urine, and abnormal thick nasal discharge. [12,13]

#### Shuska Revati

Graha (devil) that affects children and reflects the sickness spectrum that results from Sarvangakshya (infection) (emaciation). Even when the child eats a variety of foods, he or she grows underweight and has shrunken eyes. When a youngster experiences hair loss, dislike to eating, a feeble voice, Vivarnata (Discolouration/loss of lustres), Nanavidhashakrita (variegated colour stool), Udara granthi (abdominal nodular enlargement), depression in the centre of the tongue, and the palate turns black. At the start of the clinical disease, which might be abdominal tuberculosis, the child displays gradual emaciation. [14]

#### **Prevention of Malnutrition**

- Mothers should be advised to initiate breast feeding within one hour of delivery.
- Importance of exclusive breast feeding for the first 6 months of baby's life and proper weaning thereafter should be properly explained to mother.
- Nutritional education has to be imparted to the people regarding consumption of cost effective nutritious diet.
- Special efforts have to be made to improve acceptance of family planning methods for limiting the family and to give adequate spacing between children.
- Environmental sanitation has to be promoted in reducing infection and breaking the vicious cycle of infection leading to under nutrition.
- Socio-economic development among the rural masses needs to be ensured which is the important factor to tackle malnutrition, mainly undernutrition.
- Government should allot more money in health sector for integrated health packages and should ensure proper functioning of health programs.<sup>[15]</sup>

#### **Guidelines for prevention of Malnutrition**

Care of nutritional needs is required at three stages; Nutrition during pregnancy, nutrition in infancy and nutrition in childhood. Fetal nutrition is totally dependent on maternal nutrition. In fact, intra uterine growth retardation (IUGR) may be due to maternal deprivation and or diseases in pregnancy. Infant nutrition should be through exclusive breast feeding up to 6 months, to meet the nutritional demands and to prevent morbidity.<sup>[16]</sup>

#### DISCUSSION

In the Ayurveda Samhita, Karshya is classified as Rasaprodoshaja vikara, which might be linked to malnutrition in modern science. It might be a primary cause of a variety of disorders. Karshya is a discrete illness entity, as well as a causative cause, premonitory symptoms, characteristic, and consequence, as well as an unfavorable prognosis indicator, according to Ayurveda (Arishta). Sthaulya and karshya, according to Acharya Sushruta, are both dependent on Rasa dhatu, but Ahara and Nidra are dependent on the Trayoupsthambha, according to Acharya Charaka. It's difficult to tell the difference between Karshya and Shosha and Kshaya. Rasa dhatu vikriti and Vata vitiation cause Karshya, whereas Kshaya and Shosha are Tridoshaja. World Health Organization (WHO) has described malnutrition as a "global problem", having adverse effects on the survival health performance and progress of population groups. The effects are of the highest order in the developing countries. Care of nutritional needs is required at three stages; Nutrition during pregnancy, nutrition in infancy and nutrition in childhood. Fetal nutrition is totally dependent on maternal nutrition. The most significant in the preventive measures for this disease is "nutrition education" which including good antenatal care, encouragement to the mothers to breastfeed the infants, complementary feeding, supplements should be combination of cereals, protein rich foods and fruits, National Nutrition Programs etc.

#### **CONCLUSION**

Malnutrition is describe in modern medical sciences but is similar to nutritional disorder in Ayurveda like Karshya, Phakka and Balshosha. A systemic study of these conditions provide insight in to hazards of nutritional deficiency and represents different aspects of nutritional deficiency and proper understanding of pathogenesis of condition provide valuable key for the effective management.

#### **REFERENCES**

- 1. Sharma PVAgnivesha, Charaka Samhita., Reprint edition 2011, part 1, Chaukhamba Orientalia Varanasi, Sutrasthana 11/35, page no. 75.
- Charaka Samhita of Agnivesa, Revised by Caraka and Drdhabal with elaborated vidyotini
  Hindi commentary by Pt. SastriKasinatha & ChaturvediGorakhanatha, edited by Pt.
  RajeswaraDatta Sastri, ChaukhambhaBharti Academy, Varanasi, Reprint; 2007. Part II P.
  452-453.
- 3. Rao VG, Yadav R, Dolla CK, Kumar S, Bhondeley, Ukey M. Undernutrition and childhood morbidities among tribal preschool children. Indian J Med Res., 2005; 122.
- 4. Paul VK, ArvindBagga (2013) Ghai Essential Pediatrics. (8th edition), CBS Publishers & Distributors Pvt. Ltd., New Delhi. Nutrition, Page no. 95.

- 5. Sharma PV Agnivesha, Charaka Samhita., Reprint edition 2011, part 1, Chaukhamba Orientalia Varanasi, Sutrasthana 11/35, page no. 75.
- 6. Vinod K paul, ArvindBagga (2013) Ghai Essential Pediatrics. (8th edition), CBS Publishers & Distributors Pvt. Ltd., New Delhi. Nutrition, Page no. 95-96.
- 7. Vijayashree Mathad, ShivprasadS. Malnutrition: A daunting problen for india's spectacular growth. Asian journal of pediatrics practice volume 16, No.1, 2012.
- 8. Brahmanand Tripathi, Charaka Samhitapurvardha, Sutrasthana, Ashtauninditiya 21\3, chaukhambaprakashan edition, 2010.
- 9. Sharma PV Agnivesh, Charaka Samhita., Reprint edition part 1, Sutrasthana 21/13 Chaukhamba Orientalia Varanasi, 2011-pp.145.
- 10. Singhal GD & Colleagues, Sushruta, Sushruta Samhita second edition 2007, Chaukhambha Sanskrit Pratishthan Dehli, Sutrasthana 15/33-page no.138-139.
- 11. Tewari PV, Kashyap Samhita, chikistasthana, 17/4, Chaukhambha Viswabharati Reprint edition, 2008; 242.
- 12. Gupta A, Vagbhata, Ashtanga Sangraha, vol.2, Hindi commentary, Uttara Sthana chapter 1/38 Chaukhambha Krishnadas Academy Varanasi, 2008; 180-181.
- 13. Tewari PV, Kashyap, Kashyap Samhita, Chikistasthana, 17/11 Chaukhambha Viswabharati Reprint edition, 2008; 243.
- 14. Tewari PV, Kashyap Samhita, Chikistasthana, 17/12-20, Chaukhambha Viswabharati Reprint edition, 2008; 243-244.
- 15. Vijayashree Prasad, Shiv Prasad S, malnutrition, Adunting problem for india, spectular growth. asian journal of paediatrics, 2012; 16(1).
- 16. Kulkaarni Reenna, AnInttegrateed Approoach On Child Nutrition, Journal of Ayurveda and Holistic Medicine, 2013 May; 1(2).