ROLE OF PANCHAKARMA IN SEQUENTIAL MANAGEMENT OF PRANAVAHA SROTASTHA VYADHI IN CHILDREN

Dr. Vivek Kumar Mishra*¹ and Dr. Neha Mishra²

¹Assistant Professor, Department of Swasthavritta, Bharat Ayurveda Medical College, Muzaffarnagar.
²Assistant Professor, Department of Kaya Chikitsa, Bharat Ayurveda Medical College, Muzaffarnagar.

Pranavaha srotas as per Ayurveda

As per Ayurveda pranavaha srotas includes both cardiorespiratory system. According to caraka mula of pranavaha srotas are Hridaya and Mahasrotas. As per susrutha hridaya and rasavahi dhamani as mula for pranavaha srotas. By this we can say that the main seat of pranavaha srotas is uraha pradesha which is the main sthana of kapha dosha. Among kapha, mainly Avalambaka, bhodaka, kledhak kapha are related to pranavaha srotas, along with kapha, vata dosha too plays role in manifestation of pranavaha srotho vyadhi, especially prana, udana, samana and vyana.

This sloka states that dushitha prana vyau causes hikka,swasa etc. As in the sampraphti of hikka and swasa, caraka has told that both diseases originate from the site of pitta and are caused by simultaneous aggravation of kapha and vayu.

In caraka vimana 5th chapter dhatu kshaya, vegadharana, use of rooksha dravyas, excersise at the time of appetite and any hard work are given as that causes of pranavaha sroto dusti, in which many of them leads to vata prakopa.so by this we can say that vata plays an important role in pathogenesis of pranavaha sroto dusti. The diseases which come under prana vahasroto dusti are Swasa, kasa, hikka.
Doshik involvement in different prana vaha sroto vyadhis
Hikka,swasa - prana vata, kapha (caraka)
Kasa - udana vayu, apana vayu (caraka)
Prana vayu, udana vayu (susrutha)
Pratisyaya - Vata kapha pradana tridoshaja (kashyapa)

As per the involvement of dosha one should choose the panchakarma procedure.

Modern
As per modern science, thorax is the main seat of cardiorespiratory diseases in which mainly bronchial asthma, bronchitis and pneumonia are very common in pediatric age group.

Role of Panchakarma
Today there are millions of people suffering from different kinds of respiratory illness that can have a significant effect in the way they live their daily lives. Respiratory illness can vary from being acute to chronic. In acute cases, it is usually easy to treat and is only a short term illness. However the chronic conditions of respiratory illness are difficult to treat and can cause permanent damage to the respiratory system.

In modern system of medicine only symptomatic treatment is available and the recurrence rate is high and the patients are getting dependency on oral and inhaled corticosteroids, short acting β2 agonists, theophylline all of which cause significant side effects in long run.

In this scenario one can get rid of those diseases permanently from the root by elimination of vitiated doshas with the help of panchakarma therapy by which we can prevent undesirable adverse effects of modern medication. Vitiated exaggerated doshas, which are the root cause of the disease are to be eliminated through the nearest outlet of the body. As it is said that the panchakarma is done when doshas get aggrevated and move out of their own seat to other places like shaka etc.

Modulation of panchakarma in the frame work of kaumarabhritya
Snehana and swedan are the poorvakarmas of panchakarma therapy but they have limited application in pediatric age group.
Snehana

कश्यप ने कहा कि, घृतसेवन में प्रमाणीय स्त्रियों को और अभिलेखियों को भी न िचाही गृहगुरुणी कारणों से अविचारित किया जाए।

Kashyapa told that oleation therapy is contraindicated to the pregnant women, delivered women, infant on milk diet, having received burn.

स्निग्धा एव सदा बाला घृतक्षीरसनिष्काषणात्
सद्यस्तानं वर्मनं तस्मात् पाथशेत नमोऽधृतिमानम् मृदुः।| A.H.U.2/31-32

There is no necessity for snehana as the child is always snigdha by the intake of milk and ghee especially in the first two years of life. By these references we can say that additional and formal snehana vidhi is not required in children especially up to the 2ys of age.

Swedana

Swedana is mainly done for softening and dilatation of srotas by which the doshas can be reached to kosta from shaka. The following are the references regarding indication of swedana in children as per age.

जन्मप्रभृति वालानां स्वेदमण्डितं भिषक
प्रयुक्तं यथाकालं रोगदेहव्यपत्ति ॥| ka.su.23/25

Kashyapa told that eight types of swedana to the children from birth onwards considering the time period and state of the disease and strength of body.

वालानां कृशमध्ययानां स्वेद आवश्यिको हितः
शीतव्याधिशरीरीग्नां वालानां च विशेषः।| ka.su.23/8

The avasthik swedana is beneficial to the initiated and medium built children, especially to the children whose body is seized with the disease of cold. It means where ever generalized swedana is indicated in adults, there we have to do local sudation.
Swedana should be increased gradually as the child gets endurance in place of delicacy and appearance of toughness, the swedana of these children should be increased.

Jātasthy chaṭhūro māsan dhastastvēnd pravṛjyeyat
Apramādī nivātasyān vijnāmāyugamūryaṁ ṣāńe: २७
ka.su.23/27

From birth to four months, the hand swedana should be used very carefully, sitting in a wind protected place, warming the hand gradually over the fire devoid of smoke.

पड्वर्षप्रभुतीनां तु पवस्वेदाः प्रशास्यते
-Ka.si.3/17

From six years onwards children can be given pata sweda.

हिकाध्यासार्दिति सिग्ध्यारादि स्त्रेदेशपाचरित
आत्म लवणतेलेन नाकोप्रस्तरसकरे: ७१
Ca.Ci.17/71

While explaining the treatment of hikka and swasa, caraka told that after anointing the body with sneha mixed with salt, unctuous fomentation therapies should be done like nadi sweda, prasthara sweda and sankara sweda.

Swedana liquifies kapha and srotas are made mridu, by these two actions together direct the vata in its right path which is known as anulomana. Well regulated pinda sweda with sastika Sali dasamoola ksheera is well tolerated by children. It gives both benefits of snehana and swedana.

Swedana should be cautiously monitored in case of children since the loss of water can lead to serious consequences as the water content of the children is in greater proportion. So very mild swedana is to be done.

So above principles should be kept in mind, when ever modulated poorva karma is to be done prior to sodhana chikitsa in children.

**Panchakarma procedure specific to pranavaha srotas**

In swastha and atura avastha role of dosha is present. In general panchakarma is contraindicated by the other disciplines in bala, vridha and garbhini but it is not an absolute contraindication.
Just by sodhana of mother is not suffic
cure the disease of the child as accumulated dosas
in the body of the child will not cleansed till they are not let out by vamana.

When the physician applies proper cleansing measures to both mother and child, the healthy
state comes very fast to the child.

The panchakarma or shodana has to be done where ever the disease status modify
appropriately to the children. But however where ever the situation demands for
panchakarma that should be tailored to the status of the children.

**Vamana**

Vamana is a best procedure for eliminating kapha dosha. It is well indicated in pediatric age
group right from birth and also a very helpful procedure in elimination of doshas especially
kapha from amasaya and urasa.

After vomiting, the secretions accumulated in the trachea due to contraction of respiratory
muscles comes out lucidly in the form of expectorant.

Any left over fluid or mucous present in the oral cavity can be let out by giving ghee & rock
salt for inducing vomiting.

In children vamana procedure should be done immediately with out poorva karma with
mridhu oushadhi. In ksheerapa and ksheernadda, vamana should be done after child being
sufficiently fed by breast milk. In annada, to be done after giving thanu peya mixed with ghee.

स्वयं छठद्यते यस्तु पीतं पीतं पयः शिशुः
न तं कदाचिद्धान्ते क्षाध्यो देवमानुषा:

The child who himself ejects milk after repeated suckling, to him the daiva and manusi diseases never afflict.

तत्राशु धात्रीं बालं च वमनेनोपपादयेत् A.H.U.2/23

While describing cikista of ksheera alasaka, vaghbata told that vamana should be done to both mother and child. Vamana is also indicated to both in mother and child in kapha dushitha sthanya vyadhi.

यष्ट्याहवसैन्धवयुं तुमां पाययेद खृतम्
सिन्धुत्थिप्पलीमद्वा विष्टे: क्षांद युतारथ
राठप्पै: स्तूनी सिमर्पिधशोश्च दशनचछदीं
सुखमेवं वमद्वालस्तीक्षेऽधारीं तु वामयेत

In kapha dushitha sthanya, vamana is done by the mixture of ghrita with yasti and saindhav. Madanaphala puspa kalka with madhu is to be applied over the nipple and areola of mother’s breast and on the lips of child. This decides the route of administration and the dosage of vamana drug in children is either by applying over the lips of child or by applying over the nipple and areola of mother’s breast.

Caraka told that baby suffers with swasa, kasa and tamaka swasa due to intake of kapha vitiated breast milk which comes under pranavaha sroto vyadhis. As already discussed that vamana is indicated in kapha dushitha sthanya.

तत: श्लेष्मशि संवृद्धं वमनं पायेतु तत्
पिपलीसैन्धवत्रौधरं वाताविरोधे यत्

Ca.Ci.17/76
While describing the treatment of swasa& hikka, caraka has told that when kapha is in samvridhi state, vamana karma should be done with pippali, saindhav and madhu which should not vitiate vata.

- Ca.Ci.18/83

If pittaja kasa is associated with kapha, vamana should be done by vamana dravya sidha ghrita. Lastly we can say that Vamana is not contraindicated in children, but to be given in mild form. Vamana is the widely indicated shodhana procedures in children even in ksheerada apart from mother in a modified manner as described above.

Virechana

In pitta dosha treatment of choice is virechana. In children, mridu virechan is indicated by acharyas in many diseases related to pranavaha srotas. This states that any panchakarma procedure to be done in children should be of mild form.

- Ca.K.7/8

By this sloka we can say that mridu virechana is to be done in children by aruna trivrit mula.

- Ca.K.8/5

In chaturanguna kalpa adhyaya of caraka, mridhu virechana by aaragvadha is advised in children of age group between 4 to 12years.

- Ka.su.22/9

Samsrana by eranda and shankini acts as a best rasayana.
In kashyapa vamana virechana siddhi adhyaya, vridha kashyapa said that drugs which are to be given to the child of 4th or 8th month for vamana and virechana, should be mixed with sugar.

Ka.Phakka chikitsa
In kashyapa phakka cikitsa it is said that snehana in children should be done with kalyanaka ghrit or shatphal ghrit or amrita ghrit for 7 days followed by shodhana with trivrit ksheera.

By the above references we can say that mridhu virechana is indicated in children. As already vridha vaghbata said that in case of pitta sthanya dusti, sthanya rasa gets changed into katu anu rasa which causes diseases of pranavaha srotas like kasa and swasa.

While describing the pathogenesis of hikka and swasa, caraka has given role of pitta dosha.

This sloka states that hikka and swasa originates from pitha sthana.

In tamaka swasa, virechana is to be done with vatakapha hara drugs.

In pitta dushitha sthanya cikitsa, vaghbhata advised virechana karma to both dathri and kumara.

-Ca.ci.18/85
When tanu kapha is associated with pithaja kasa, thiktha virechana dravya mixed with madhura dravya to be given.

Now definitely to the person having received methodical snehana, swedana and then proper sleep in the previous night and after digestion of previously taken meals……..one karsa or half pala dose of available drugs amongst danti, syama, kampillaka, neelika, saptala, vacha and vishnika as mentioned earlier should be decocted with one prasta or two prasta water till 1/4th remains……..mixed with cow’s urine, not excessively thin, hot or cold should be given for drinking, considering the time strength, age and status of the disease to the child, it should be given for drinking daily with the help of aduka (specific vessel) or else for licking with butter or thick supernatant part of milk, two, three, four (bouts of purgation are said to be inferior, medium and best bouts, according to quantity inferior, medium and best are)………..one, two and three prasthas. More than this is said to be the excess use of purgation.

Usually virechana seems to be inappropriate procedure in pranavaha sroto vyadhi but as explained earlier pitta dushita stanya vyadhi leading to swasa kasa in child where virechana is the choice of sodhana chikitsa in pranavaha sroto vyadhi. Hence virechana can be considered as sodhana chikitsa in prana vaha sroto vyadhi, where ever pitta dosha is predominant.

Nasya

कफानिलापितक्ते प ---

प्रधमनानि जित्तो वस्त्रपुरुषकायव्धान भवति। चौद्विधिनानि तव पीढः स्वात्। मुख्यासिकौर्त्तं कर्फ विषात्यतीतिः परिणत्तु।-ka.si.4
According to Kashyapa, nasya karma is indicated in kapha and vata dominant diseases which are also the main cause of prana vaha sroto dusti.

\[\text{नस्यकर्मिष्ठि बालानां स्तनपानां विशेषतः कटौतिलं प्रयुक्ते घृतं वा संत्वाबान्वितम्} \quad \text{(Ka.Si.4)}
\]

\[\text{तेनास्य पच्यते श्लेष्मा श्लेष्मणा न च वात्यायते} \quad \text{(ka.si.4)}
\]

In breast fed babies, nasya is to be done by ghrita mixed with saindhava or katu taila. This results in clearing the sleshma and makes the child free from kaphaja vikaras, because kapha is the main causative factor for urdhvajathrugata roga and pranavaha sroto dustha vyadhis.

\[\text{कुमारतेलमेतेषां व्याधिनां शमनं परम् नरस्ये पाने तथा अर्धः पुराणं वृत्तमेव च} \quad \text{(Ka.si.4)}
\]

Kumara taila is said to be the best tail for samana purpouse in case of nasya upadrava.

\[\text{लशुनस्य पताकं दोवां मूलं गुंधनकस्य वा नावंवृत्तन्दनं वाजंपि नारीचैव संयुतम} \quad \text{(ca.ci.17/131)}
\]

Nasya with lasuna, palandu, grujanaka (carrot) swarasa is indicated in hikka and swasa or nasya of nariksheera mixed with chandan can also be used.

While describing the indication of nasya karma, Caraka told that nasya can be given in the following diseases like pinasa, galasaluka, greevaroga, nasa soola, swarabhedha, vakgraha, nasa vikara etc.

**Vasti**

Vasti is said to be best treatment in vata vikaras and is considered as ardha chikitsa.

\[\text{पितं पञ्च कफः पञ्चः पञ्चवो मलधातवः वायुं तत्र नीत्यते तत्र गच्छन्ति मेघवतः} \quad \text{(Sa.pu.5/25)}
\]

The movements of Pitta, kapha, mala and dhatu are not possible without vata, hence we can say that vata is involved in pathogenesis of any disease.
For children and adults, vasti is just like a nectar.

According to Kashyapa, the age of vasti procedure, when the child is lowered (walks on grounds), eats cereals.

Vaghbata told use of vasti karma in the treatment of vata dushita sthanya.

In vataja kasa, vasti should be given in badha vidavata stage.

In vataja pinasa, sneha followed by asthapana vasti is to be done.

vasti, oral use of oleaginous substances, sedation and rubbing of unguents specially in children seized with disease of vata.

In any of the diseases if vata dosha is dominant in the pathogenesis of the diseases or diseases in chronic state there we can give vasti treatment.

CONCLUSION

It is prevalent among Ayurvedic community that panchakarma in kaumarabhritya is generally contraindicated. After an over view of the panchakarma in kaumarabhritya is not an absolute contra indication but appraisaly special condition of child in relation to psyche and physic the
panchakarma can be modified and executed in children as well without any comprehension. The chapter is limited to actual panchakarma procedures to be undertaken in prana vaha srotot vyadhi due to fear of voluminous extension of subject. However all the general principles of panchakarma like indications, contraindication, complications, management are to be considered in shodhana chikitsa of pranavaha srotot vyadhi too.

REFERENCES
1. Charak Sanhita
2. Kashyap Sanhita
3. Astang Hridaya