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A LITERARY STUDY ON NIDAN OF APASMARA VYADHI IN PAEDIATRIC AGE GROUP

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ABSTRACT:

In all branches of Ayurveda, Kaumarbhritya tantra deals with nutrition of child (Kumar bharan), Purification and bettering of mother's milk (Ksheer dosha shodhan kriya of Dhatri), also cures the diseases peculiar to Neonatal and Paediatric age group due to influence of malignant stars and spirits.[1] Apasmara (Epilepsy) has been depicted with incredible subtleties in numerous samhitas. In most of the Samhitas, Nidan (Etiological factors) is explained keeping adult as the core of the discussion. The need is to focus on Adibalapravruttha vyadhi and Janmabalapravruttha vyadhi; in case of paediatric age group Matruja and Pitruja factors in Adibalapravruttha vyadhi; and Rasakruta and Dauhridapacharkruta vyadhi belonging to Janmabalapravruttha vyadhi are very important areas, apart from some other factors to look forward for the nidan in paediatric age group, for the ailment like Apasmara. The present study deals with Nidan (Etiological factors) of Apasmara particularly related to Paediatric age group as mentioned in various samhitas.

KEYWORDS: Apasmara, Nidan, Adibalapravruttha vyadhi, Janmabalapravruttha vyadhi

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INTRODUCTION:

The first exclusive textbook on Kaumarbhryta (Paediatrics) is Kashyap Samhita that illustrate general paediatric medicine thoroughly, however unfortunately Kashyap Samhita is not available completely. Additionally, Brihat-aatrey i.e., Acharya Charaka, Sushrut and Vagbhata mentioned the Kaumarbhryta as one of the significant branches of Ashtang – Ayurveda and furthermore depict the basic concepts of newborn care, perinatal care, paediatric care, their disease conditions accompanied by respective chikitsa and drug dosage in children. Apasmara has been mentioned in various samhitas like Charak Samhita [2], Sushrut Samhita [3] etc. In children, most of the diseases come under Graha roga. Still, Acharya Charak and many different Acharyas report Apasmara as a distinct clinical entity and deal with Graha rogas separately. Acharya Charak traces the birth of this disease to *Daksha Yajanya*. It is contemplated as one of the eight Adyotthana diseases (Firstly engendered disease) at the time of *Daksha Yajanya*. Acharya Charak explains that once the Yajnya of Daksha Prajapati was destroyed, all the living beings became distressed and commenced running haywire in fear of their lives. Throughout this commotion some of them touched insanitary objects and creatures. Throughout this act; people who were contaminated suffered from *Apasmara*.^[4] India is home to almost 10 million individuals experiencing Apasmara (Epilepsy) [Prevalence of around 1%]⁷. The incidence is lower in metropolitan part of India (0.6%) furthermore, is higher in country part of India (1.9%)⁵⁻⁶. The information referenced itself underlines the significance of Nidan of Apasmara in paediatric age group [Etiological background]. Along these lines, the causative variables are recognized and preventive measures are taken to limit the rate of this feared sickness.

MATERIALS AND METHODS:

The Charaka Samhita, Sushruta Samhita, Ashtang Hridaya, Kashyap Samhita, Madhavnidanam were studied thoroughly with special reference to Nidan of Apasmara.

AIM AND OBJECTIVES: To derive the Nidan of Apasmara in pediatric age group.

APASMARA VYADHI: Apasmara is manas vyadhi described in Charaka Samhita Chikitsasthana in detailed with respective to its scientific principles i.e. Nidanpanchak and its Chikitsa (Treatment). Apasmara is characterized by transient departure of memory and unconsciousness associated with loathsome appearance due to derangement of intellect and mind⁷.

Acharya Charaka describes etiology and pathology as, in those who perverted mind and abundant morbidity due to unclean and unwholesome food intake, infliction of mind with Rajas and Tamas. The Doshas carried to by vessels to the heart afflict it and patient suffers from stupefied wandering mind. Patient sees non existing thing, falls down, gets twitching in tongue, eyes, eyebrows, excessive salivation and abnormal movement of limbs neck and other bodyparts⁷.

Apasmara is of 4 types: 1. Vataja 2. Pittaja 3. Kaphaja 4. Sannipataja

APASMARA NIDANA AND IT'S IMPORTANCE:

In Ayurvedic classic each issue is described by Nidan panchak; which involves Nidan [Etiological Factors], Purvarupa [Prodromal Signs], Rupa [Signs furthermore, Symptoms], Upashaya [Amelioration] furthermore, Samprapti [Pathogenesis]. Nidan Panchak has been depicted to help doctors to grasp the vyadhi and to treat it successfully. Out of the multitude of five parts of Nidan Panchak: Nidan is of gigantic importance. In each illness, the pathology starts with Nidan. Assuming doctor is well overall knowledgeable with the Nidan of a specific

infection he can design his line of treatment accordingly. Exhaustive information on causative factors helps in regarding the sickness as well as additionally helps in forestalling it. The entire supportive of cess of appearance of sickness starts with Nidan. Nidan Parivarjana is thusly regarded as the best type of treatment by Acharyas. This conversation ought to feature the significance of understanding Nidan of Apasmara in Pediatric age group. After going through the various Nidan mentioned in few samhitas, it becomes clear that during the description; acharyas have kept a full-grown man as a centre of their attention. There are such countless actiological variables in the list, which sometimes fall short for the pediatric age group. For instance, having an intercourse with a bleeding female causes Apasmara. Likewise, a youngster having Apasmara in carly period of life or since birth can't become guilty party because of affront to God and older individuals as well as a result of significant pain. Anger, passion etc. In early life mother's milk forms the major portion of infant's diet. So, impure, dirty, incompatible food etc, doesn't suit this age group. For this reason, to understand the Nidan in paediatric age group, focus must be towards Antenatal, natal and post-natal periods.

TYPES OF VYADHI: While depicting Vyadhi, Acharya Sushruta has referenced seven types⁸. These seven types are partitioned into two kinds each. Out of all the previously mentioned types: Adibalapravrutta and Janmabalapravrutta are the two kinds which are connected with this subject.

ADIBALAPRAVRUTTA VYADHI: These kinds of disorders are of two types, i.e., Matruja (Maternal) and Pitruja (Paternal), which are acquired from the incarnation of Shukara and Shonita⁹. Since, Shukra and Shonita are the essential variables for the production of Garbha, any irregularity in them prompts the arrangement of Adibalapravrutta Vyadhi.

Shukra Dosha appears due to disturbances of Tridosha. While describing the abnormalities that might emerge in the Garbha due to such Dushta Shukara, Acharya Charak firmly states as, male having Dushta Shukra become impotent and his life span decreases. Since, his Shukra is dushta his youngsters are at risk to many disorders¹⁰. In state of Apasmara, where family ancestry is vital, cause like this should be dominated out. Thus, vitiation of Shukra because of Tridosha is one of the main drivers of Apasmara. The Dushta Shonita also isn't considered fit for origination. Shukara and Shonita are the fundamental parts of the Garbha. Hence any anomaly in them is reflected in the Garbha. Assuming Shukra is Dushta, the representative of the Pitruja Organ in it gets vitiated creating natural or obsessive abnormality in that Pitruja Organ of Garbha. This peculiarity is additionally applied to Shonita. In this way, on the off chance that the Shonita is vitiated the Matruja organ framed in the Garbha physically or potentially obsessively gets hampered¹¹. This explains, how Apasmara passes from age to future. On the off chance that one of the parents have Apasmara or both the parents have Apasmara; their Shukra or Shonita or the two gets vitiated, which produces Apasmara in the progeny. As indicated by new examination and research on chromosomes. Very intrigue results are found. There are 400 different chromosomal disproportions depicted with seizures or EEG irregularities. Out of these, eight chromosomal abnormalities have a high relationship with epilepsy; like Wolf-Hirschhorns (4p-) Syndrome, Miller-Dieker Syndrome; etc¹². Such, findings further underline the importance of Adibalapravrutta Vyadhi.

JANMABALAPRAVRUTTA VYADHI: The another significant nidan is the Janmabalapravrutta Vyadhi. This entire segment of infections is due to the dietic,

conduct changes and mental condition of mother. Since, the Garbha is absolutely subject to its mother; any unfriendly change in Mothers mental or physical state influences the child causing illness¹³. They are of two kinds *Rasakruta* and *Dauhrid- apacharkruta*.

1.RASAKRUTA VYADHI: Acharya Sushruta has referenced four essential parts for the origination¹⁴. They are *Rutu*, *Kshetra*, *Ambu* and *Beeja*. Out of these four variables, *Ambu* represents Aahara rasa of mother. Thus, any vitiation in *Ambu* will be most certainly thought about Garbha. Whenever the foetus is in the womb, it is absolutely reliable upon its mom for the stock of food, oxygen and every one of the necessities for its endurance and development. *Rasa* is the first and standard dhatu in the body to be framed from Aahararasa. All the leftover Dhatus are shaped by a chain wise sustenance strategy, beginning from *Rasadhatu*¹⁵. Acharya Vagbhata has given clear instruction that, in the event that one dhatu is vitiated, it would influence the following dhatu by antagonistically expanding or on the other hand diminishing its quality.¹⁶ This plainly implies, assuming that *Rasadhatu* is vitiated, the entirety chain rising up out of it will be impacted, pre-cipitating many issues. The fundamental function of *Rasa dhatu* is *Preenana*¹⁷. It implies giving sustenance to *Manas*. This is very imperative, as *Manas* is the leader of all ten *indriyas*. Whenever *Rasadhatu* is in satisfactory quantity and having ideal quality, *Manas* and *indriyas* are appropriately fed. Agreeing to Acharya Charaka, when mother's Aahara Rasa is vitiated, the *Manas* of Garbha doesn't get satisfactory sustenance. Due to this, insanity of Satva, Raja and Tama happens in *Manas*, bringing about numerous *Manas* infirmities¹⁸. So, the concentrate of this conversation is that, assuming mother's Aahara rasa is vitiated due to inappropriate dietic propensities, vitiated *Rasa dhatu* is formed in

Garbha. This vitiated *Rasa* structures inappropriate subsequent dhatu, resulting in numerous physical illnesses. Vitiated *Rasadhatu* doesn't support *Manas* and *Indriyas* enough; leading to a large number of mental disorders. As *Apasmara* includes both physical as well as mental elements, etiological foundation like vitiated *Rasadhatu* conveys significance.

2.DAUHRIDA APACHARKRUTA VYADHI: Before going to the point, it is important to grasp the significance of *Dauhrida*. This, in a real sense implies two hearts. Acharya Charak states that Garbha begins doing its exercises in the third month of foetal life. As all the *Indriyas* are arranged in *Hridaya*, it begins working in third month.¹⁹ All the interest of Garbha and its emotional status is generally communicated by means of mother's *Hridaya*. Our Acharyas have given colossal significance to this period of pregnancy. According to acharya Sushruta, in the event that mother's requests are not satisfied she would convey a child experiencing numerous sicknesses like *Jadata* (Mental Retardation), *Dwarfism* and so on. He further makes sense of, pregnant female at this period of pregnancy ought to accept incredible consideration as to satisfy her desires. Each wish of garbha is communicated by means of one of the *Indriyas* of mother's body. On the off chance that mother's any wish isn't fulfilled, the *Indriya* through which it is ex-squeezed stays unsatisfied. This reflects as an insanity in Garbha's comparing *indriya*.²⁰ This insanity in *Indriya* may encourage in the kid as *Apasmara*. Thus, the above conversation proposes that this stage is extremely significant for the legitimate development of Garbha as well concerning the mother.

OTHER IMPORTANT NIDAN OF APASMAR IN PEDIATRIC AGE GROUP

1.GARBHOPAGHATAKAR BHAVA: Acharya Charak plainly expresses that if a pregnant female has factious nature and she

continuously will in general include in actual contentions; she might convey a kid experiencing Apasmara.²¹ Quarrels initiates pressure in pregnant female. Stress as a potential or actual danger forces various changes in the human way of behaving, which are accomplished through the adjustment of neuronal capacity associated with various parts of hormonal what's more, brain reactions.²² Exposure to stretch during pregnancy might be adequate to induce long-lasting adjustments in emotionality, comprehension, neuroendocrine reaction and behavior.²³ Physical attacks on the midsection of a pregnant female might result in intrauterine discharge or a genuine physical issue to child's imperative organs. Any injury on mother's body might get contamination which might represent a danger to the kid. Such injury or contamination may make seizure in kid due different entanglements. Along these lines, this Garbhopa-ghatakar bhava is firmly connected with the incidence of Apasmara in kids.

2.VIVAHA VARJITA KULA: Our Acharyas have set out some fundamental rule in regards to marriage. *Swa gotra* relationships are rigorously prohibited. In like manner, Dasha Kula, i.e., Ten families are precluded to get hitched. Acharyas have included families having history of *Shwitra*, *Kushtha*, *Apasmara* and so forth; in the rundown of restricted families. This plainly indicates that our Acharyas knew about the hereditary inclination of Apasmara.

3.VIVAHA YOGYA AYU: Acharya Sushruta teaches that, the best period of marriage for female is sixteen years.²⁴ According to new explores, the pace of unexpected labor in 11 to 15 years of age mother is higher than that for 16- to 19-year-old moms of tantamount socio affordable status.²³ Maternal age under 18 years is risk factor for difficulties in both mother and newborns, and, surprisingly,

more so in mother aged younger than 15 years.²⁵ In the wake of going through various assessments it can be summed up that, an optimal age for a female to have her most memorable pregnancy is between 16 to 20 years. The gamble of inherent abnormalities increments for maternal age under 16 years. The kid might be presented to the risk of contracting Apasmara in such cases.

4.RAJAHSVALA NIYAMA PALANA: Acharyas have given a few directions about conduct of a female during menstruation. Female shouldn't have sexual contact, to avoid tedious, weighty work, not to dig the dirt, and so on.²⁶ The fundamental head behind these directions is to keep up with the equilibrium of Tridosha of Sharir and Manas. If any female purposely or unwittingly does not keep the rules, her youngster would be responsible to numerous inherent inconsistencies; like madness, Skin illness, leukoderma; and so forth.²⁷

5.BRAHMACHARYA PALANA: Acharya Sushruta has referenced a vital point about intercourse during menstrual cycle. He describes that, assuming sex occurs on the third day of period and female gets pregnant, the kid would have congenital abnormalities and would have short life time.²⁸ Such congenital abnormalities can straightforwardly or in a roundabout way lead to the arrangement of Apasmara.

6.VIKRUTA SAMBHOG ASANA: Acharya Charak plainly educates each couple not to have sex in any unnatural position; as this can influence mother's introduction to the world channel, her uterus, father's Shukra; which thusly deposits numerous irregularities in Garbha. Any of these irregularities might reflect as Apasmara in kid.

DISCUSSION:

Apasmara in pediatric age range is group as a rule. In practically all traditional books of Ayurveda; Apasmara is extravagantly studied, through its etiological foundation,

pathogenesis, treatment, signs and symptoms, and so on. Particularly when Nidan is contemplated, it is seen that some causative variables won't ever suit pediatric age group. At the point when various references from various sources were fundamentally examined, an entirely different idea of Nidan of Apasmara in pediatric age group arose. A ton of consideration must be given to Antenatal and natal period. *Janmabala pravrutta vyadhi* and *Adibalapravrutta vyadhi* holds the key for Nidan in this age range. *Shuddha Shukra*, *Shuddha Aartava*, *Aahara*, *Vihara* of female attractive for origination and after conception are vital variables considering Apasmara. *Manas Swasthya*, *Indriya Tarpan* and *Sharir swasthya* are of prime importance in conveying healthy foetus and newborn.

CONCLUSION:

Form above all discussion, conclusive points can be drawn and presented as follows: Nidan of Apasmara in paediatric age group is,

1. Adibalapravrutta Vyadhi- Matruja and Pitruja acquired from the incarnation of Shukara and Shonita.
2. Janmabalapravrutta Vyadhi- the dietetic, conduct changes and mental condition of mother.
3. Garbhopaghatakar bhava- Quarrels, Stress and Physical attacks.
4. Vivaha Varjita Kula- Swa gotra relationships.
5. Vivaha Yogya Ayu- optimal age for a female to have pregnancy is between 16 to 20 years.
6. Rajahsvala Niyama Palana- conduct of a female during menstruation.
7. Brahmacharya Palana- sex on third day of period and female gets pregnant and baby will have congenital abnormalities.
8. Vikruta Sambhog Asana- having sex in unnatural position.

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