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Review on Undernutrition with Special Reference to Karshya in the Age Group of under 5 Years Children's

Narawade V.¹, Navane K.², Kumbhar V.³

1. PG Scholar Department of Kaumarbhritya Yashwant Ayurvedic College Pg Training & Research Centre, Kodoli, Kolhapur.
2. Guide & Associate Professor Department of Kaumarbhritya Yashwant Ayurvedic College Pg Training & Research Centre, Kodoli, Kolhapur.
3. Assistant Professor Department of Kaumarbhritya Yashwant Ayurvedic College Pg Training & Research Centre, Kodoli, Kolhapur.

ABSTRACT: Children's right to have access to safe diet and adequate nutrition is essential to attain the highest standard of health. Children's age under 5 years is the critical period for rapid physical growth as well as overall child development. Children suffer from various forms of under nutrition if the Nutritional requirement is compromised. Under nutrition among children is a significant contributor to the global disease burden and a leading cause of child mortality worldwide. Severe acute malnutrition (SAM) refers to the condition that is identified by the Mid Upper Arm Circumference (MUAC) measurement of less than 115 mm. Classification of mild, moderate, or severe under nutrition. Is based on anthropometric measurements. **Background :** Ayurveda prefers preventive aspect rather than curative. Aahara is the main source of energy and nutrition and the most important during post treatment period to regain the strength of body. Aahara not only nourishes the body but also nurtures the mind and soul, hence it is called as Poornabramha .Aahara sevana (eating food) considered as a ritual in Ayurveda. Aahara (food) plays very important role to maintain health of a person as it is one of the three sub pillars (Tri-upastambha) of Ayurveda. **Malnutrition**-People are malnourished if their diet does not provide adequate nutrients for growth and maintenance or they are unable to fully utilize the food they eat due to illness (under nutrition). **KEYWORDS:** Malnutrition, Mid upper arm Circumference, Under nutrition , Under five children

CORRESPONDING AUTHOR:

Dr. Vaibhav Rohidas Narawade

PG Scholar Department of Kaumarbhritya
Yashwant Ayurvedic College PG Training & Research Centre,
Kodoli, Kolhapur.
Email: vaibhavnarawade5407@gmail.com

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INTRODUCTION:

Malnourishment, particularly under nutrition is becoming one of the major public health problems in all the developing countries including India. Under nutrition severely affects child survival, growth and development, and it even decreases the national growth in the long run. It is widespread among children and women, and is on verge of becoming acute and even alarming.

Indicators of Under nutrition :**Stunting:**

Low height for age

Indicates chronic malnutrition

Prolonged food deprivation or disease/illness

Wasting:

Low weight for height

Indicates acute malnutrition

More recent food deficit or illness

Underweight:

Low weight for age

Combined acute and chronic malnutrition

Aims :

This study aims to characterise child malnutrition among under-five children.

Objectives :

To assess the factors associated with malnutrition among children <5 years.

METHODOLOGY :**Material and Methods:**

Children were selected from the OPD of the Institute. Every child who displayed the signs of under nutrition, reduced hunger, disturbed sleep was selected.

Sample Size:

70 Children selected.

Inclusion Criteria :

1. Children aged under 5 years of both sexes who had poor growth and underdevelopment and no chronic illnesses were chosen from our college hospital's outpatient department (OPD) for the under nutrition study.
2. Able and willing to take part in the research.

Exclusion Criteria :

1. Patients more than 5 years were not included.
2. Before being included in this study, patients who were diagnosed with Krimi & Grahanidosha symptoms received medical treatment.
3. Patients with neurological conditions, endocrine diseases, congenital abnormalities, systemic disorders, structural malformations, etc., were not included.

Withdrawal Criteria:

1. Patients not receiving routine follow-up .
3. Patients are unwilling to participate in clinical trials.

Assessment Criteria :

The patients' improvement will be measured by giving the main symptoms and signs as a severity rating. Non probability convenient sampling technique was used to select 70 under five children who fulfilled the inclusion criteria. The data collection tools included Socio-demographic profile and Anthropometric assessment of the children. Data was analyzed using WHO guidelines.

Result:

Criteria	No of Children's
Withdrawal Criteria	10
Mild wasting	7
Moderate wasting	8
Severe wasting	5
Mild Stunting	10
Moderate Stunting	5
Severe Stunting	5
Moderately Underweight	10
Severely Underweight	10
Total Number of Patients	70

DISCUSSION:

The present study was undertaken to assess the nutritional status of under-five children attending the OPD of our institute, with a specific focus on identifying the magnitude and severity of malnutrition using

anthropometric indicators. Out of the 70 children enrolled, a significant proportion presented with varying grades of undernutrition, highlighting the seriousness of the issue in this vulnerable age group.

Prevalence of Malnutrition

Findings revealed that wasting (acute malnutrition) was present in 20 children (28.6%), of which 5 (7.1%) were severely wasted. Stunting (chronic malnutrition) was seen in 20 children (28.6%), with 5 (7.1%) severely stunted. Underweight (a composite indicator) was found in 20 children (28.6%), with half of them severely underweight. These figures indicate that nearly one-third of the study population suffered from some form of malnutrition, consistent with national surveys such as NFHS-5, which also report high prevalence rates of undernutrition among Indian children.

Implications

Stunting reflects prolonged nutritional deprivation, often starting in utero and continuing into early childhood. The presence of stunting in almost one-third of children in our study suggests chronic dietary inadequacy and recurrent infections. Wasting, on the other hand, indicates acute malnutrition, which may have been precipitated by recent illness, poor feeding practices, or food scarcity. Underweight as a combined measure shows the cumulative impact of both acute and chronic factors.

These findings highlight that both immediate interventions (nutritional supplementation, infection control, dietary counseling) and long-term preventive strategies (maternal nutrition, health education, poverty alleviation, sanitation improvement) are urgently needed.

Comparison with Other Studies

Previous studies conducted in India and other developing countries have reported similar patterns of malnutrition, with stunting being the most common, followed by underweight

and wasting. However, in our study, the proportions of wasting and stunting were nearly equal, which may indicate a higher burden of acute nutritional stress in this region. The role of socio-economic conditions, feeding practices, and awareness of mothers about child nutrition needs further exploration.

Ayurvedic Perspective

Ayurveda emphasizes Ahara (diet) as one of the three sub-pillars (Tri-upastambha) of life, playing a central role in growth, immunity, and development. Improper or inadequate ahara sevana leads to dhatu kshaya and impaired bala (immunity), manifesting as conditions like Karshya (underweight) and Balashosha (childhood malnutrition). This aligns with the clinical picture observed in our study. Thus, adopting Ayurvedic dietary guidelines, use of balya and brimhana dravyas (nutritive formulations), and promoting healthy weaning practices could be beneficial in managing and preventing undernutrition in children.

Strengths and Limitations

The strength of this study lies in its focus on OPD-based clinical assessment of under-five children, providing real-world data on malnutrition prevalence. However, the **sample size (70 children)** was limited, and socio-economic or maternal factors were not deeply analyzed, which could have provided more comprehensive insights.

CONCLUSION:

- Maternal education should be encouraged, particularly on the nutrients that should be made available for children under five.
- People in the poor and middle classes are more likely to suffer from malnutrition because they cannot afford wholesome meals;
- Parents with higher levels of education are more concerned about their children's health;

- Children who attend school are more susceptible to under nutrition due to exposure to sunlight, infectious infections, poor eating habits, a lack of one-on-one time, and physical strain from playing.
- Children with under nutrition are more likely to be admitted to the hospital if their parents have more education than if they don't.
- Poor eating habits, malnutrition, and environmental contamination can disrupt children's physiological and psychological features, potentially leading to under nutrition.

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Website: www.ijim.co.in **Email:** ijimjournal1@gmail.com