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Ayurvedic Management of Persistant Diarrehoea (Bala Atisara): A Case Study

Dr. Amandeep[1], Dr. Premprakash vyas[2]
[1]*Assistant Professor, Dept. of Kaumarbhritya, Punjab Ayurved Medical College & Hospital, Morjhand Khari, Sriganganagar*
[2]*Principal & Head, Dept. of Kaumarbhritya, Mahatma Jyotiba Fule Ayurveda Mahavidyalaya, Chomu, Jaipur*

Abstract: ***There is a global disparity in the prevalence of diarrhea among children under five. Children in developing nations are especially likely to experience diarrhea. It's estimated that 7% of the lower-level governmental entities on the continent are responsible for more than half of all pediatric diarrhea-related deaths[i]. Environmental factors were implicated in over 1.6 million deaths of children under five in 2016, accounting for over 75% of the disease categories tracked by the Global Health Observatory. The total diseases in the environment, 22% are caused by diarrheal illnesses, whereas 12% are caused by parasitic and vector-borne illnesses.***

Keywords: Diarrhea, Morbidity, Prevalence

I. INTRODUCTION

Children's diarrhea[ii], or balatisara[iii], is a disease characterized primarily by irregular bowel movements. If d Atisar is divided into seven categories according to ayurveda: Vataja, Pittaja, Kaphaja, Bhayaja, Tridoshaja, Shokaja, and Raktatisara. The prevalence of diarrhea these days is negatively affecting the academic performance of many children, and the Balatisara affects a sizable portion of the global population. Balatisara can be brought on by a lack of immunity, sensitivity to the causing pathogen, poor hygiene, malnutrition, and ingestion of contaminated food. Common symptoms of Balatisara include increased frequency of bowel movements, imbalanced electrolyte levels, thirst, weakness, gas formation, and cramping in the abdomen. Atisara is the ultimate result of Koshta shoonata increasing Dravata in Pureesha in Pakwashaya and Nidana Sevana vitiating Vata leading to the Mandagni. The Doshas condition must be taken into account when choosing a therapeutic measure.

A. Case Report

A 9 month old male child was brought by his parents to O.P.D. of Kaumarbhritya/Balroga, at Punjab Ayurved Medical College and Hospital, Morjhand khari, Sriganganagar. The child was presented with following complaints.

- Loose Stool- more than 15 freqency/day – 20-25 days
- Irritable behaviour-10 days

B. H/o Present Illness

According to parents he is fine before one month. His appetite, stool pattern, urineoutput is normal. They went a tour for 5 days after that child starts loose watery stool. They took allopathic medicine for for 15 days but didn’t get relief. Day by day fequency increases. He is passing 15-20 time very loose watery stool.

C. Previous Medication History

Allpathy Medicines like Lactose enyme drops, Dompridone syrup, Rifixime syrup, Walmycin Suspension and ORS given to patient.

D. H/o Past Illness

No any past history

E. Birth History

3.5kg weight, LSCS, Normal routine care given to the child.

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F. Immunization History

Attaining As per Govt. schedule.

G. Dietary history/ Personal History

Exclusive breast feed for 6 month. After that weaning at 6 month, Rice, roti with milk, Raagi, Cerelac, mashed fruits given by parents. Parents are given good qunatity of liquid fluid such as ORS etc. to maintain Hydration.

H. General Examination

The head-shape and size appeared normal with anterior fontanele at level, Normal Hair, Ears, Nose and no any facial dysmorphism. Dentition was normal (2 lower and 2 Upper cantral Incisor present). Neck, Skin, Limbs, Chest, Spine, Abdomen and Genitalia were normal.

Vital signs and Anthropometry were within normal limits.

Weight: 10 kg

Heartrate: 110/Min

Temprature: 97.9 F

Pallor: Absent

Icterus: Absent

Genral Appearance: Looking Well, Active, No sign of dehydration

I. Ashtasthana Pareeksha

1) Nadi: Vata-Pitta
2) Mootram: Prakrutam(Normal quantity and normal color)
3) Malam: Atidravum (Loose Watery Stool)
4) Jihwa: Normal, Anupaliptam
5) Sabdam: Neither gurunor sphutam (speech not attained)
6) Sparsham: Ardram
7) Drik: Jalardram
8) Akriti: Vata-Paittika

J. Systemic Examination

No abnormalities were detected in examinations of Respiratory, Cardiovascular, Gastro-intestinal, Urogenital systems, Central Nervous System

Milestones-

Normally attaining as per age.

K. Rogi pareeksha

1) Dosha: Vata-Kapha pradhana Tridosha, Rajasand Tamas
2) Dooshya: Rasa
3) Desha: Deha-Sarvadeha; Bhumi-Sadharana
4) Balam: Roga balam-Pravaram; Rogi balam-Avaram
5) Kalam: Kshanadi-Sarva rtu; Vyadhyavastha- Nootan
6) Agni: Madhyamam
7) Prakruti: Vata-Kapha
8) Vaya: Baala
9) Satwa: Avara
10) Satmya: Madhyama
11) Ahara: Abhyavaharana-Madhyam; Jarana-Madhyama

II. TREATMENT PLAN

1) Bilwadi churna[iv]- 250 mg, Twice a day

Contents of Bilwadi churna

Bael (Aegle marmelos)[v]	1 Part
Mochras (Bombax malabaricum)[vi]	1 Part
Sonth/ Ginger (Zingiber officinalis)[vii]	1 Part
Dhania (Coriandrum sativum)[viii]	1 Part
Hing (Asafoetida)[ix]	1 Part
Saunf (Fennel) (Foeniculum vulgare)[x]	4 Part

2) Baalchatubhadra Syrup- 1 ml, Twice a day

Contents of Baalchatubhadra syrup (Per 5 ml Contains)

Musta (Cyperus rotanus)[xi]	62.5 Mg
Pippali (Piper longum)[xii]	62.5 Mg
Ativisha (Aconitum heterophyllum)[xiii]	62.5 Mg
Karktashrungi (Pistacia integerrima)[xiv]	62.5 Mg
Sharkara	2750 Mg
Madhu	550 Mg

3) Mother is also advice to take light warm fresh food, as child is also feed mothers milk so for deepan and pachana Aushadi such as Chitrakadi gutika - 2 BD advice to mother. Avoid Fast junk food for stanya sudhi.
4) Maintain Fluid intake
5) Hygine Mantaince

III. RESULT

Balaatisara Chikitsa's treatment plan includes deepana-pachana (drug therapy to maintain Agni, the digestive fire, in normalcy), sroto-sodhana (cleaning the body's channels to facilitate proper drug and dietary absorption). After 15 days of treatment (follow up after 5 days) patient bowel habit retained normal with 2 or less than 2 per day, Patients appetite also improved and no any adverse event were noted.

IV. DISCUSSION

Although the precise etiology of this condition is thought to be unknown, Ayurveda proposes a highly relevant etiology complex. This case study serves only as an illustration of how the etiopathology of infantile diarrhoea, as described in the classic Ayurvedic texts, can be thoroughly explained to inform the development of an appropriate treatment plan. The thorough medical history in addition to tests such as the Ashta Sthana, Dasavidha, and Systemic examination of the patient. Bilwadi Churna is intrinsically sanctified with the following healing properties:Astringent, Digestive stimulant, Antiflatulent, Carminative, Antimicrobial, Antibacterial, Antidiarrheal, Antispasmodic, Antihemmorrhagic several Ayurvedic scriptures of Charaka Samhita, Raj Nighantu and Sarangadhar Samhita, strongly affirm this digestive tonic as a remedy for the Deepana (enhances stomach fire), Pachana (helps in digestion), Anaha (bloating), Shothahara (reduces inflammation), Amahara (treats indigestion), Kupachan (prevents indigestion), Rochana (stimulates appetite), Amahara (treats indigestion), Krimihara (relieves intestinal worms). Bilwadi Churna appeases all the Tridoshas. It broadly detoxifies Pitta Dosha, normalises Vata Dosha and diminishes Kapha Dosha.

Baalchaturbadra Syrup has following healing properties such as Antipyretic, Grahi (astringent), Antidiarrheal, Antiflatulent, Carminative, Antispasmodic, Antitussive, Mucolytic, Antibacterial, Antiviral, Anti-inflammatory and helpful in Fever Diarrhea, Vomiting, Indigestion, Abdominal distension or bloating, Infantile colic and abdominal pain, Common cold, Cough, Problems occurring during teething.

V. CONCLUSION

Ayurveda describe agni as vital component which help to regulate body metabolism, and responsible for physiological functioning of the body. Samagni resembles healthy physical and mental status. Stanya dusti and ingestion of dusta stayana (Vitated Breast Milk) also plays a major role in various disease origin. Ayurveda regimen along with healthy ahara vihara and dosha dhatu chikitsa helps to manage the disease.

Conflict of Interest: Author do not have conflict of interest.

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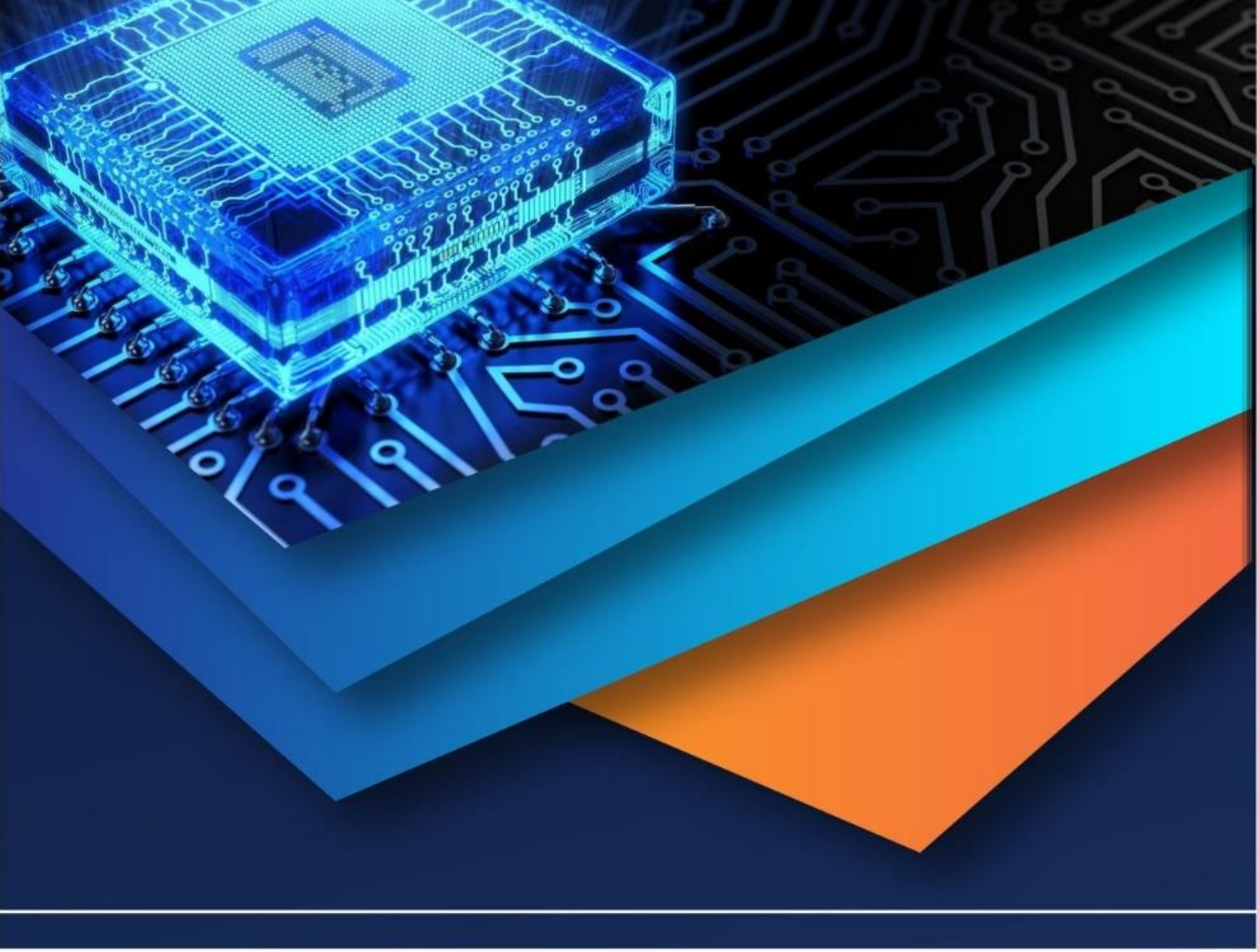

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