



Semblance Of Ayurveda In Cerebral Palsy

Dr Megha Dixit 1 Dr Sushil Kumar Jangid 2

1. Assistant Professor, Kaychikitsa Department, Dhanwantari Ayurved College, Mathura, UP
2. Assistant Professor, Agadtantra Department, Shekhawati Ayurved College, Pilani, Rajasthan

Article received on- 17 oct
 Article send to reviewer- 18 oct.
 Article send back to author- 24 oct.
 Article again received after correction- 30 oct.

Corresponding author- **Megha Dixit**, Assistant Professor, Kaychikitsa Department, Dhanwantari Ayurved College, Mathura, UP

Abstract-

Cerebral palsy is one among the most common childhood disabilities, which cripple and hamper the development of a child. It is ubiquitous and it occurs all around the world, causing considerable hardship to affected individuals and their families. It is not a single disease but a name given to wide variety of static neuromotor impairments syndrome occurring secondary to a lesion in the developing brain. Cerebral Palsy is not curable. Several advances in its management and research are going in various parts of world with goal to improve the physical and functional status of the CP child. Cerebral palsy cannot be co-related with any single disease or condition in *Ayurveda* as it is a multifactorial condition. All most all major neurological disorders are identified with *Vatadosha*. So, considering the classification and their respective

features, Cerebral Palsy can be compared to *Vatavyadhi* or *Vikara*, which may manifest itself in any form like *Pakshaghata*, *Ekgavata*, *Pangu*, *Sarvangavata*, *Kampavata* etc., and diagnosis is based on the *lakshanas*. Cerebral palsy may also be considered as *Shiromarmabhighatajavatavyadhi* as *caraka* while describing *Shiromarmabhighataja* has mentioned *vatavikaras* like *Chestanasa* (loss of motor activities),

Hanugraha, Mukatva(dumbness), *Gadgadatva, Lalasrava, Svarahani*(aphasia)etc., and *marmaaghata* is one of the causes of *vatavikara*.¹

The main causative factor is *vata* and all the *acharyas* including *Kashyapa* have mentioned *vasti karma* as the best line of treatment in alleviating vitiated *vata*. *Vasti* provides strength, particularly in children and aged people. *Vasti* is very important, as it radically expires the morbid *vata*, the sole *dosh* responsible for the movements of all *doshas, dhatu* and *mala* within the body. Charaka aptly highlighted *Vasti* - as *Vastivataharanamshreshtha*.² *Vasti* indeed is the half of the entire management of diseases. *Vasti* increases *Agni, Medha,* and *Varna* etc. In Cerebral palsy, as the main etiology is damage to the brain, so along with *shodanachikitsa* a group of *Medhya* drugs, *vataharadrugs* are used. *AcharyaKashyapa* had mentioned many *Medhyarasayan* among which *Yastimadhu, Vacha, Brahmi, Ashwagandha*.³

Key words- Cerebral palsy, *vasti*, *medhya* drugs.

INTRODUCTION:-

Cerebral palsy is one among the most common childhood disabilities, which cripple and hamper the development of a child. It is ubiquitous and it occurs all around the world, causing considerable hardship to affected individuals and their families.

Cerebral palsy cannot be co-related with any single disease or condition in *Ayurveda* as it is multifactorial condition. All most all major neurological disorders are identified with *Vata dosha*. So, considering the classification and their respective features, Cerebral Palsy can be compared to *Vata vyadhi* or *Vikara*, which may manifest itself in any form like *Pakshaghata, Ekanga vata, Pangu, Sarvanga vata, Kampa vata* etc., and diagnosis is based on the *lakshanas*.

Cerebral palsy may also be considered as *Shiromarmabhighataja vata vyadhi* as *carakawhile* describing *Shiromarmabhighataja* has mentioned *vata vikaras* like *Chestanasa* (loss of motor activities), *Hanugraha, Mukatva*(dumbness), *Gadgadatva* (lulling speech), *Lalasarava* (excessive salivation), *Svarahani*(aphasia)etc., and *marma aghata* is one of the causes of *vata vikara*. The main causative factor is *vata* and all the *acharyas* including *Kashyapa* have mentioned *vasti karma* as the best line of treatment in alleviating vitiated *vata*. *Vasti* increases *Agni, Medha,* and *Varna* etc.

In Cerebral palsy, as the main etiology is damage to the brain, so along with *shodanachikitsa* a group of *Medhya* drugs, *vataharadrugs* are used. *AcharyaKashyapa* had mentioned many *Medhyarasayan*

among which *Yastimadhu, Vacha, Brahmi, Ashwagandha*.

PREVALANCE:-

This condition was described by an orthopedician Ian Little 150 years ago. Unfortunately its incidence has not come down in spite of recent advances in neonatology and imaging technology. Instead it is increased with the survival of premature babies. Its incidence is 2 – 2.5 cases per 1000 live births. There are about 25 Lakhs of CP children in India.

NIDANA:-

Cerebral Palsy can occur during pregnancy (about 75%), during childbirth (about 5%) or after birth (about 15%) up to about age three. The causes of Cerebral Palsy remain unclear. Some causes of Cerebral Palsy are asphyxia, hypoxia of the brain, birth trauma, premature birth, and certain infections in the mother during and before birth such as central nervous system infections, trauma, consecutive hematomas, abruptio placenta and multiple births. In *Ayurveda* it can be interpreted as follows:

1. **GARBHAPOORVANIDANA**
2. **GARBHAKALEENANIDANA**
3. **PRASAVAKALEENANIDANA**

4. PRASAVOTTARANIDANA.

1. **Garbhapoorvanidana:-**

TulyaGotraVivaha,beeja dusti,ashaya dusti, kala dusti

2. **Garbhakaleenanidana:-Improper**

Garbhini PariCarya, Asatmya and Ahitkara Ahara Sevana, Ahitkara Vihara, dauhridya-apachara, Jataharinis,abhighatas,dhumapana , vataprakopa.

3. **PrasavaKaleenaNidana:-**

VilambitaAvi,AkalaPravahana, MoordhAbhighata

4. **PrasavottaraKaleenaNidanas:- Delayed**

Prana Pratyagamana, Effect of Grahas, Effect of Nija and Agantuja disorders.

SAMPRAPTI:-

The *Ahara* and *Vihara* of the parents causing *Vikruti* of *Vata* is likely to affect *Artava* or *Shukra*, which may lead to the vitiation in *PanchtanMatras* leading to *Khavaigunya* or *Sroto dushti* of *Mastulunga majja*. This in turn results in *Khavaigunya* or *dushti* of *Mastulunga majja* of the foetus or *garbha*. This may also occur due to *Atma Karma* of the past life of developing *Garbha*.

Another possibility of vitiation of *Garbha mastulunga majja* is by *nidas* like *DauhrudaAvamana*, *Garbopaghatakara AharaVihara*, *Dhumpana*, and *Madyapana* etc., of the mother during her pregnancy. These can affect *Poshaka Rasa*, which in turn affect the developing *Mastulunga Majja* of the foetus. The third possibility of *Mastulunga Majja* of *Shishu* getting afflicted in *Vilambita Avi*, *Akala Pravahana*, and *Murdhabhigatha* during *Prasavakala*. *Dushta Stanya Pana* and *Jvarain Grahas* like *Skanda* etc. may act as precipitating causes which trigger the site of *Khavaigunya* for an early onset of *Shiromarmabhighatajanya Vata-vikara*.

Lakshanas:- Pakshavadha:- When aggravated *Vayu* causes *Abhighata* to *Indriyas* of one side *Mastulunga Majja* either on right or left, paralysis the contra lateral side of the body by causing *Karma hani*.⁴

Pangutva:- *Pangutva* means paralysis or *karmahani* of both the lower limbs after vitiating part of *Mastulunga Majja Vayu* takes seat in *Katipradesh* and constricts *Sira*, *Snayu* etc and paralyses the legs. Here again *Prana Vayu* causes damage to the *Karmendriyam* (Legs).

Ekanga roga:- Aggravated *Vata* may cause injury to the part of *Mastulunga Majja* and cause constriction of *Sira*, *Snayu* with contractures of either one leg or one hand or may produce such conditions like *Viswachi* and *Avabhauka*.

Sarvanga roga:- This condition is due to severe and extensive injury to the *Moolasthanas* of *indriyas* in 'siras' by causing constriction of the vessels and ligament. The contractures occur in all the four limbs and the morbidity pervades entire body.

Kampa Vata:- Generalized involuntary movements of all parts of the body are called *Kampa Vata* and may be produced due to injury to subcortical neurons that is *Shiromarmas*; Hence, based on the etiopathogenesis and clinical features cerebral palsy can be correlated with *Shiromarmabhighata Vata vyadhi*.

Chikitsa:-

As such perfect or definite cure is not there for this condition so preventive measures play important role in the management, "Prevention is better than cure" proverb holds good for cerebral palsy condition. As cerebral palsy is due to many etiological factors starting from the time of conception to first 2-3 years of life *Ayurveda* holds a high position in explaining in detail

the now so called Preventive pediatrics or the do's and dont's. It can be considered in two ways:

- a) Preventive measures
- b) Special measures

Preventive measures:-

Preventive Measures can be subdivided into following heads:

- a. Before conception
- b. During Pregnancy
- c. During Labor
- d. During Neonatal period

a. Before Conception:

- By avoiding consanguineous marriages the congenital anomalies can be minimized. Both *Caraka* & *Sushruta* stressed over this point. *Acharya Bhela* had clearly mentioned that to prevent diseases related to *Medha*, the consanguineous marriages should be avoided.
- By following the rules & regulations during *ritukala* as laid down in texts And the male by observing *Brahmacharya* and eating *masha* etc as described in texts. The object is to keep both sperm and ovum *Shuddha*.
- By avoiding pregnancy in very young and elderly women as stated earlier.
- **During Pregnancy:-** By Following the principles of Antenatal Care

(*GarbhinipariCarya*) i.e., *MasanumasikaPathya*, this may further lead to the timely delivery of an excellent healthy child possessing all the qualities with expected long life without complications.

- Avoiding of *Garbhopaghatakara bhavas* as stated earlier.
- Honoring of *Dauhrida* (desires of pregnant lady):- If the longings happen to be harmful, then it can be modified by neutralizing their injurious effects through processing or by adding wholesome substances.
- Avoiding *Madya, Dhumapana* etc as prescribed in the texts of *Ayurveda*. All texts ancient and modern advocate that no medicine whatever it may be should be given to a pregnant lady during the first trimester.

During Labour:

- The education regarding bearing down efforts is very much important, because undue straining by woman may exhaust her. So in absence of labor pains she should not bear down and during labour pain she should bear down properly.
- By avoiding any *MoordhAbhigata* (Cranial Injury) & infections during labor.

b. During Neonatal Period:

- **Prana Prathyagamana** - By ensuring timely *Prana Prathyagamana* (resuscitation) to the neonate. All resuscitative methods should be followed quickly, which prevent birth asphyxia, which is one of the most important causes of cerebral palsy by providing sufficient amount of *Ambarapeeyusha* to the neonate. One should even avoid excess oxygenation also to prevent ICH.
- **Jatakarma** – *Jatakarma* is a *Samskara*. It should be performed after establishment of respiration to a neonate. During this *Samskara*, a blend made of *Madhu* and *Ghrita* is administered to the neonate while chanting *Vedic Mantras*. This is said to promote the *Medha* and *Bala* in the new born.
- **Rakshakarma** - To prevent from infections certain *Raksha Karma* are prescribed in the texts and should be followed. Broadly by using *Rakshoghna dravyas* and by ensuring perfectly washed and sterile clothes.
- **Dhupanakarma** - *Rakshoghna dravyas* are prescribed to be burnt in the room and *dhupana* is done over the linen used for the baby. *Agni* is lit in one corner of the room continuously.

- **Dharana**- *Dharana* of various drugs like *mani* etc which are said to possess magical effect in protecting from the evil spirits have been mentioned to improve *Ayu, Medha, Smrithi* etc.

Special Measures

a. Use of *Medhya Rasayanas*:

- *Acharya Charaka* mentioned 4 *Medhya rasayanas*. These are *Mandookaparni, Yastimadhu, Guduchi* and *Shankhapuspi*. These *Rasayana* drugs may help in preventing both physical & mental disabilities.
- *Acharya Kashyapa* has described *swarna prasana* and varieties of *Medhya* drugs administration in *Lehanaadhyaya* and described the benefits of its usage. *Medhya* drugs described by *Kashyapa* are *Mandukaparni, Brahmi, Vacha, Triphala, Chitraka, Trivrit, Danti, Nagabala* etc.
- *Lehana* of *Medhya Ghritas*- *Kalyana Ghrita, Brahmi Ghrita, Panchagavya Ghrita, Samvardhana Ghrita* etc., were indicated to improve proper mental and physical growth and thereby preventing and promoting the normal developmental activities.⁵
- *Swarna with Ghrita, Vacha & Kustha*.

- *Matsyakshi, Swarna, Vacha, Ghrita & Madhu.*
- *Shankhapuspi, Ghrita, Swarna, Vacha & Madhu.*
- *Swarna, kaidarya, Shvetadurva, Ghrita & Madhu.*

Administration of any of these *Yogas* quoted above may promote the *Medha, Smriti* & general vigor in a child.

Certain Vatahara Panchakarma

Procedures:

Abhyanga:- *Abhyanga* with *Balataila, Mahamasha tailam, BalaAshwagandhalakshadi Taila* etc. is said to be beneficial. *Rajataila abhyanga* is advised in *Phakka*. *Rajataila* is indicated to cure *Pangu, Jadata* etc. *Abhyanga* is advocated to reduce the effect of vitiated *Vata*.

Swedana:- This helps in relieving the *Stambhana* (stiffness) and *Gaurava*

(heaviness) in limbs and body. This is a good procedure essential in conditions like *Jada, Pangu* etc. *Shastikashali pinda sweda* is one, which does *Brumhana*.

Vasti:- *Vasti* is the best treatment to vitiated *Vayu*; *Vasti* may destroy the seed of all the diseases moving in *Madhyama Marga*. In *Shiromarmabhigata vata vyadhi Vasti* can be administered. In general *Vasti* is said to be administered to a child by one year of child.⁶

Physiotherapy:- *Acharya Kashyapa* is the first among the ancient scholars, who had made the provision for physiotherapy and considered its importance in rehabilitation of crippled child. Practice of walking, should be encouraged with the help of specially prepared tricycle (*Phakkaratha*) – Stand with three wheels. Similarly in Cerebral Palsy we can advocate use of a four wheeler made in a round shape (a walker) to assist and inculcate the faculty of walking

REFERENCES:-

1. *Agnivesha, Charak, Charak Samhita, Sutrasthan 25/40 Hindi Commentary* by Pandit Kashinath Shastri, Dr. Gorakhnath Chaturvedi, Chaukhambha Orientalia Publication Varanashi, 14th edition.

2. Agnivesha, Charak, CharakSamhita, Sutrasthan 25/41 Hindi Commentary by Pandit KashinathShastri, Dr. GorakhnathChaturvedi, ChaukhambhaOrientalia Publication Varanashi, 14th edition.
3. Ashtanga Hridaya Samhita Vagbhatacharya,Sutrasthana 15/2,ChoukhambhaOrientalia 2002, Varanasi .
4. Sushruta Samhita AcharyaJadavji Trikamji,Sutrasthana 21/5, Choukhambha publication 2005 Varanasi
5. Ashtanga Hridaya Samhita Vagbhatacharya,Sutrasthana 12/1-2,ChoukhambhaOrientalia 2002, Varanasi .
6. Sushruta Samhita AcharyaJadavji Trikamji,Nidasthana 1/11-12, Choukhambha publication 2005 Varanasi