



Role of Ayurvedic Principle of Brihana in The Mangement of karshya –Review Article

Name-vd.Sheetal M Bansode, Associate Professor(PhD scholar) in swasthavritta & yoga department at R.A Podar Ayurvedic Medical College & hospital Worli-18 Mumbai,

Abstract-

Karshya means mamasahinta or mamsakshya. Lack of insufficient food intake leads condition like nutritional deficiency termed as malnutrition. It can also mean over nutrition, meaning intake of excess of what the body uses. However under nutrition affects more than one third of world's children, and nearly 30% of people of all ages in the developing world, making this the most damaging form of malnutrition worldwide. In Ayurveda, based on severity and aetiology they may be considered as karshya. Ayurveda provides relevancy of the medicines and several herbal preparation in the management of karshya. Nutritional principle of Ayurveda suitable to the current era is essential for management of malnutrition in children. The World Bank estimates that India is ranked 2nd in the world of the number of children suffering from malnutrition, after Bangladesh (in 1998), where 47% of the children exhibit a degree of malnutrition. Adolescents are nutritionally very vulnerable due to their increased nutritional requirements for growth, eating patterns and their susceptibility to behavioral and environmental influences. Imbalance in nutrition in the adolescent age group can potentially affect the growth pattern and sexual maturation. In adulthood Karshya being a vata pradhavyadhi. Pharmacotherapies like Brihana, Rasayana, have been advocated in the classics for the management, So here is an effort made to see the efficacy of Brihana principal in the management of Karshya.

Key Words-Karshya, Ayurvedic principle of Brihana

Introduction-In swasthavritta prime importance is given for a personal health and the health of a person is depend on Ahar and vihar(4). Ahar (food) is one of the three sub-pillars of life as per Ayurveda. The Ahar converted into nutrition through process of Agni and these all makes building blocks of growing body especially in early ages. Karshya is most wide-spreading health and nutritional problem in developing countries. According to Dalhan Karshya means mamasahinta or mamsakshya. Lack of insufficient food intake leads condition like nutritional deficiency termed as malnutrition. It can also mean over nutrition, meaning intake of excess of what the body uses. However under nutrition affects more than one third of world's children, and nearly 30% of people of all ages in the developing world, making this the most damaging form of malnutrition worldwide.

In Ayurveda, based on severity and aetiology they may be considered as karshya. Ayurveda provides relevancy of the medicines and several herbal preparation in the management of karshya. Nutritional principle of Ayurveda suitable to the current era is essential for management of malnutrition in children. Karshya and Atikarshya show all forms of Malnutrition i.e. moderate and severe. The World Bank estimates that India is ranked 2nd in the world of the number of children suffering from malnutrition, after Bangladesh (in 1998), where 47% of the children exhibit a degree of malnutrition

The Global burden of malnutrition has serious and long term developmental, economic, social, and medical consequences for individuals. In most developing countries, most of the studies are concerned with the nutritional status of under-five children and mother thus neglecting adolescents and adult population. Also it is observed that many of the nutrition

initiatives have been focusing on children and women, thus neglecting adolescents and adult age groups. Addressing the nutrition needs of adolescents could be a very important step towards breaking the vicious cycle of intergenerational malnutrition. An additional 165 million (29.0%) children will have stunted length/height secondary to poor nutrition. Currently, more than half of young children in South Asia have PEM, which is 6.5 times the prevalence in the western hemisphere. In sub-Saharan Africa, 30% of children have PEM

Adolescents are nutritionally very vulnerable due to their increased nutritional requirements for growth, eating patterns and their susceptibility to behavioral and environmental influences. Imbalance in nutrition in the adolescent age group can potentially affect the growth pattern and sexual maturation. Inadequate nutrition also subjected the adolescent age group at high risk of chronic disease although the detrimental effects might appear after a long time in adulthood Karshya being a vata pradhaVyadhi. Pharmacotherapies like Brihana, Rasayana, have been advocated in the classics for the management

So here is an effort made to see the efficacy of Brihana principal in the management of Karshya. Children due to maximum demand for more nutrition in the growing period to achieve faster rate of growth and development So I inspired to do research on karshya and according to our Ayurvedic texts, I choose Brihana the principle to nourish children for betterment of their health.

AIMS & OBJECTIVES

Aims-

TO Study the Role of Ayurvedic Principle of Brihana in The Mangement of karshya

Objective-

- TO Review Ayurvedic Literature Related to Karshya.
- To Study the correlation of karshya & malnutrition.
- To review the detailed literature on Brihana Principal.

CONCEPT OF KARSHYA AS A SEPARATE DISEASE(87)

Acharya Charaka observes that in cases where lakshana of disease manifest independently, then they are considered as a separate disease. Likewise when the lakshana appears as a part of disease then they are not called as an independent disease. It may be said that a lean and thin looking person having no other complaint may be taken as Karshya. But if it persists for a longer period it may lead into Balshosha and Parigarbhika when Karshya occurs at early infancy. If Karshya occurs at later childhood and persist for a longer period than it may lead to Atikarshya. It is clear from mentioned references that Karshya presents a Mild form of Malnutrition while others represent severe degree of malnutrition. According to Shushtra Rasa, masa, and medo dhatus are the main dushya responsible for krishta. Due to rasa, rakta, mamsadi dhatu Kshya and also sharir bala decreases that result into alpaprana Shakti. In karshya avstha dosha vata, pitta, kapha with sapta dhatu, malas and agni not in proper. Disturbing normal functions of dehadhatubala, mala, agni that result normal healthy harmony state because of these reasons Karshya is considered as vyadhi. In the present study Karshya not a complication of any disease condition or has not a cause of any diseased condition has been taken into consideration. A condition or disease in which the body of a person becomes emaciated, having less Quantity of Rasa Dhatu causing further a status of Mamsahinata or Mamsakshaya. On this basis, Karshya or Krishta is a lakshana of a person who is emaciated or lean. Dalhana in his commentary says which clearly tells that karshya shows Dhatu kshya as the main event and thus this fall Karshya under the heading of Apatarpanatmaka diseases. In our Samhitas there is no direct reference available regarding the disease Karshya in children but after a gross outlook of the Samhitas, we can say that Karshya has been described as a prestige of other diseases in many Samhita

KARSHYA DOSHA LAKSHAN :-

Acharya Charaka mentioned in sthoully as well as in karshya

1) Pipassasahatve:- Normal thirst cannot tolerated in karshya, due to increase dryness (rukshya guna) in the body of krich person he cannot tolerate thirst, and also due to disturbances of Agnibala he cannot tolerate trupti

2) Kshudhaasahatva:- Due to emaciation of Dhatus, the power of the body is not stored in the body of krish persons, so he cannot tolerate hunger. Intake of food in few amount repeatedly, due disturbance of Agni bala he cannot tolerate Atitrupti.

3) Sheetushnaasahatva:- Karshya purush having Avara bala and satva he cannot tolerate sheet or ushana or gets easily affected by seasonal variation. The person having good body strength tolerates all type of misery but krish person does not stand misery.

4) Vyayamaaushadhaasahatva:- Due to less vyadhiutpratibandhkatva , vyadhibalavirodhitva and vyadisheenatva from any disease ,due to that karshya purush are easily susceptible for many diseases and Avara bala of karshya purush is incapable of digesting medicine or intolerance to digest medication

5) Atisouhityaasahatva:- Karshya purusha intolerance to easy full satisfied meal

6) Maithunaasahatva:- When the person having good prakrit bala , he can do all type of works . There is well nourished masadhatu in samapraamaan and all the Indriya are functioning properly. According to Acharya Sushruta Krisha person cannot tolerate load bearing capacity (16). In krish person vata dosha are prominent so he suffering from vatvyadhi .Due to dhatuksheenatva the dhatusararupa prakrit oja in prakrit pramana is not formed in karshya. Acharya sushruta considered Oja as bala. Oja is cause for effective bala. Mamsa ,Raktadi dhatus are basis of bala . These sharir bhava, dhatus reduced in karshya ,so bala of karshya person is alpabala. Due to the deficiency of all dhatus the production of Shukra Dhatu are decreases by this reason he does not stand sexual act

7) Vyamaasahatva:- The body strength decreases because of Rasa, Raktadi Dhatu are emaciated. So krisha person get exhausted after few physical activity .so an excessively emaciated person does not stand physical exercise.

SAMPRAPTI OF KARSHYA- The indulgence in the aetiological factors results in the vitiation of Vata Dosha by virtue of its Rruksha Guna.Vata Agni and Rasa are inter related .Vitiation of Vata leads to Agni dushti or Agni dushti may lead to Vata Prakopa.At this juncture either of them depreciates the quantity and unctuousness of the nourishing Rasa Dhatu which in turn adversely affects the circulation of Rasa dhatu in the body. This hampers the proper nourishment of the remaining

PROBABLE COMPARISION OF AYURVEDIC AND MODERN VIEWS OF MALNUTRITION AND KARSHYA:

Concept of Karshya and Atikarshya:

An apparently lean and thin looking person may be known as Krisha. To understand this precisely, the word like sthula, Atisthula, Krisha, Atikrisha should be considered. According to the Sushruta,the human body can be divided into three groups based on its looking viz-Sthula, Madhyama and Krisha. There are some places in the body where generally fat deposits and these are—Sphika (hips), Udar (abdomen) and Griva (neck).Apparently a normal looking person having more bulk of fat at these places may be taken as sthula, on other hand when they have less fat at these places.Then termed as krisha and person with apparently well knitted body having requisite amount of fat at the above places may be termed as madhyama.In this way sthula and krisha may be considered as apparently abnormal. However they are prone to turn into the stages of Atisthula and Atikrisha respectively, which are definitely diseased entities and Ayurveda has included the under AshtauNinditaPurusha i.e. eight types of undesired person. By the definition stated before, it may be said that a thin person having no other complaint may be taken as Krisha but when this condition persist for a longer period and on indulging in the aetiological factors then turn into Atikrisha. While discussing about Atikrisha

So here one can say that the word Krisha and Atikrisha show 2degrees of malnutrition, i.e. .moderate and severe respectively. The description of Atikrisha by Sushruta in Sutra Sthana 15 nearly equals to that of severe Malnutrition where **Shosha** denotes the muscular **wasting** and loss of subcutaneous fat over buttocks and in the extremities, then **lowered strength** of the body has been suggested by the word **Alpaprana** and BharadaneshuAsahishnuta. Also **shwasa**, **Kasa** like disease are due to the **lowered immunity** status .**Plihodara** indicates distended abdomen and involvement of liver and spleen as in **Kwashiorkor** and by the word Mumamupayati it has been suggested that the undernourishment is so extreme that it threatens ones existence directly. Summing up we can say that Karshya is the prestige which is to be treated with proper care which otherwise leads to other diseases depends upon the age at which it occurs. If Karshya occurs at early infancy it may lead to either Balshosha or Parigarbhika, if it occurs in later Child hood or onward and persists for a longer period it may leads to Atikarshya. There is no direct reference available regarding the symptomatology of karshya. Hence in the present study the sign and symptoms of Atikarshya has been considered as the sign and symptoms of Karshya They may appear in minor degree in Karshya.

Karshya and underweight: In our samhitas there is no direct reference available regarding the symptoms of Karshya. Hence sign and symptoms of Atikarshya can be considered as sign and symptoms of karshya .They may appear in minor degree in karshya.

According to Dalhan acharya

- ❖ **Atikarshya and Marasmus:** So a person having lean and thin body personality but doesn't have any other complaints is Krisha. Krisha patients can be correlated with underweight child to some extent. The definition of underweight child is "A child is malnourished but doesn't have any feature of marasmus and Kwashiorkor and his weight for age is 60-80% is underweight child". so Krishata is equal to Underweight to some extent.
- ❖ **Parigarbhika and Kwashiorkor:** According to Acharya Vagabhatta- The causes of parigarbhika are quite similar with the causes of kwashiorkor. According to Prof. Cicely Williams this (Kwashiorkor) was the disease of first child when second was on the way displacing the first child from the breast. The clinical features of Parigarbhika are also equal to the clinical features of Kwashiorkor. For clinical features of Kwashiorkor refer the book named "Nutrition and child development". From the above description we can conclude that Parigarbhika is a severe form of Malnutrition equal to the Kwashiorkor.
- ❖ **Balshosha and marasmic kwashiorkor:** Balshosha is also a nutrition deficiency disorder mentioned in our classics. Acharya Vagabhatta says. The causes of Balshosha are qualitative deficiency of breast milk to the child (A.s.u.2/46-54). And the clinical manifestation of balshosha can be compared with Marasmic kwashiorkor. In Marasmic Kwashiorkor, the marasmic child shows the symptom of oedema. So here also Balshosha is an extreme form of malnutrition quite similar with Marasmic Kwashiorkor. Atikarshya has been described in our classics. The clinical features of Atikarshya are equal to Marasmus. According to Acharya charaka symptoms of Atikarshya—

"In Marasmus affected children exhibit extreme wasting and have An old man appearance with just skin and bones". Summing up we can say the Atikarshya is quite similar with Marasmus. The above mentioned aetiological factors cause Vata Prakopa which leads to Dhatukshya specially Mamsa and Medakshaya and manifest the Karshya Roga.

Upadravas of Karshya(33,54)

When karshya is becoming jeerna rog and not treated in proper normal stage then it may lead to other serious disorders called as an updrave are as follows. Kasa, swasa, kshya are due to pranava and rasavaha strotodushti .Sedavaha, udakavaha, and annavaha strotodushti result into udar and pleeharog, due to mandagni gulma, arsha and grahani. According to sushruta has mentioned Agnisad and Raktapitta as updrave of karshya 31 Here upadravas of Karshya mentioned according to various Acharyas

Sadhasadhyata of Karshya(53) -According to Charaka Samhita 32

That means the Krisha person is supposed to be easier to treat than sthula person Karshya Roga Brimhana therapy is usually implemented. It increases Meda Dhatu thus it is easier to treat and it said Sukha Sadhya. The Krisha afflicted with all complications With Dosha and Dushya involving all Margas and is of longer duration is considered as Asadhyata or incurable

PRINCIPLES OF MANGEMENT OF KARSHYA-

- According to definition which is sustained in the body is called Dhatus. Any pathology in these is called disease (58).
- The objects of this science is the maintains of the equilibrium of Dhatus, which maintains equilibrium of Dhatus is known as chikista(34).
- For this equilibrium of Dhatu , Acharyas has given treatment for keeping in mind of Dosha –Dushya Agni ,Vyadhi bala ,Sharir bala etc. Karshya being a Vata Pradhan Vyadhi, mainly occurring due to Dhatu kshaya. So as general line of treatment i.e. Vata Upakrama can be adopted.
- As specific line of treatment all the Acharyas observed importance of Brimhana therapy. According to Acharya Charaka Brimhana therapy should be Laghu Santarpana in nature. Because in Krisha patient Agni, Sharira bala and other related aspects are functioning poorly.
- In karshya light and nourishing diets are required. Such diet being light, work as stimulant to digestive power and bring about nourishment due to their nourishing property (31). The principle of management of karshya should be in following manner-

BRIHANA-

DEFINITION: Which means Brimhana is a therapy in which Rasadi Dhatus are being nourished and developed. The term Brimhana refers to an increase in the bulk of the body, largely due to accumulation of Mamsa and Meda Dhatus. As per both charaka and vagbhatta it increases the bulk of the body. Dalhana although corroborated same meaning given by charaka and Vagabhatta to brimhana he gives special emphasis here to the increase of mamsa

dhatu. In Padarth Chandrika Teeka Hemadri says - Brimhana therapy by nourishing the dhatus give Strength to the body. It is not antagonist to lekha, as lekha is nothing but the decreasing the meda Dhatu where as brimhana has no effect on the meda dhatu but it promotes mainly the growth of Mamsa Dhatu.

MEANING:

The term Brimhana is derived from the root “Brih” which means to grow or to increase or to be thick. Being derived from this root the word Brimhana means

- 1 Nourishing
- 2 To grow great or strong
- 3 Imparting heaviness to the body

INDICATION FOR BRIMHANA THERAPY: Bala Sutika and Garbhini need more nutrition. In a person having Vata Prakriti, Krishna, Durbal are main sin vitiated stage due to which the body becomes more & more Ruksha resulting Dhatu kshayaavastha, so these people need Brimhana. In certain pathological condition of the body like Bhesajakar shita Kshatakshina etc Vata become vitiated resulting dhatu kshaya and balhani, which needs Brimhana therapy

Different regimens intended for Brimhana therapy

- **Aahara:** Nava anna Nava madya, Mamsarasa, Mamsa, Dadhi, Ghrita, Kshira, Ikshu, Salidhanya, Udada, Godhuma, Yava.
- **Vihara:** Nidra, Sukhasayya, Nityaharsha, Snana, Brahmacharya, Manasika, vishrama, Chinta Shokadi Vivarjanama.
- **Anyas:** Nitya Abhyanga, Snigdha Madhura Basti, Rasayana and Vrisya Aushadha sevana.

Diseased condition. Some of them like Bala, Vridha is the physiological conditions, where Brimhana therapy is advocated. Either due to various diseases or due to excessive indulgence in Karshyakara Nidanas, pathological changes occur. Intern manifestation of sign and symptoms of Karshya takes place where Brimhana therapy is indicated as principle line of treatment.

BRIMHANAVIS A -VIS SANTARPANA:

It can be observed in our classics that some confusion is created regarding the existence of similarity between the Brimhana and Santarpana. In fact some scholars like Vagabhatta classified the total Chikitsa broadly in to two categories, Santarpana and Apatarpana. In which Santarpana is synonymously treated with Brimhana. But Charka is very clear cut in his observation. In the case of Brimhana, Charka made it clear that it is a method of treatment which is intended to impart qualitative and quantitative improvement to the bodily elements like Dosha, Dhatu and Mala. Hemadri while commenting on the Guru Guna elaborates it as the quality which imparts Brimhana to the body from which it can be constructed that Brimhana possess predominantly of Guru Guna. It is also bolstered by Charka by attributing Guru Guna to Brimhana dravya. But in stark contrast to this santarpana may contain Laghu Guna also which can be corroborated by the in the instances given by the Charka in the treatment of Karshya. He advised laghu and Santarpana treatment in combating the Karshya.

Santarpana is depicted by Chakrapani as a method of therapy which renders a sort of method which realize a sense of well being to the patient, which could have either Laghu Guna or Guru Guna or Snigdha guna or Ruksha guna which might be or might not be associated with qualitative increase of bodily elements e.g. Saktu despit of its Ruksha Guna acts as Santarpana but it does not act as Brimhana as Ruksha Guna could not attribute Brimhana to the body. Thus from the above evidence it may be summarised that Santarpana is a broader term which encompasses Brimhana in its arena, and Brimhana is a specific therapy intended for the qualitative and quantitative increase of bodily elements i.e. Dosha, Dhatu and Mala.

DISCUSSION-

The principle management of karshya (malnutrition) Santarpana is depicted by Chakrapani as a method of therapy which renders a sort of method which realize a sense of well being to the patient, which could have either Laghu Guna or Guru Guna or Snigdha guna or Ruksha guna which might be or might not be associated with qualitative increase of bodily elements. Ayurvedic principle is consisting Brimhanan therapy, having the property of Srotoshodhana, Vatanulomana, Rasayana, and Jivaniya which helps in maintaining equilibrium of Dosha Dhatu and Malas therapy having a property of Vata Shamaka. The Srotoshodhaka property helps in clearance of channels and improves the circulation of Dhatus and indirectly helps in nourishment of Dhatus means responsible for Uttarottar Dhatu Poshana. Vatanulomaka property of yoga helps in balance and maintenance of Agni and ultimately causes Samyaka Aharpaka. Vrishya property helps in triglyceride synthesis which is Dehavridhikara Bhava. On the other hand Guru Shita Snigdha and Mridu Gunas are directly responsible for Brimhana effect in body. Rasayana property improves general health and immunity. Jivaniya property maintains equilibrium of Dosha, Dhatu and Malas..

I know this limited study has not covered all the aspects of the problem, but clinical trials show very encouraging result. More study is

CONCLUSION-

- Pre-School going children are more prone to Karshya caused exposure to sunlight, and infectious diseases, unhealthy food habits, lack of personal attention, and physical strain due to playing.
- Poor and middle class people cannot afford nutritious food and they are more prone to malnutrition.
- Educated Parents are more aware to good health of their child. The percentage of children affected by Karshya brought to hospital by educated parents is higher than uneducated parents.
- Bad food habits, lack of nourishment and environmental pollution are caused the disturbance in physiological and psychological aspect of children leading to Karshya.
- Chief complaints like Bharakshaya, karshya and Angamarda described in Samhitas directly correlate with present findings.
- Worm infestation, RTI and diarrhoea were common among the patients due to lack of nutritious food and unhygienic condition.
- It can be concluded in this study that Doshbala Pravrita factor is mainly responsible for disease. Most of the patients were delivered normally and their growth and development were also

REFERENCES-

- Charaka Samhita of Agnivesha ,edited by Dr. Bramhanand Trpathi with Charaka Chndrika, Hindi commentary, Chaukhamba Sanskrit Prakashana, Varnasi vol I & vol II.,reprint 2004.
- Charaka Samhita of Agnivesha with English translation edited by Prof.Priyavat Sharma, Chaukhamba Orientalia,Varanasi,1st edition 1981.
- SushrutaSamhita of Maharshi Sushruta,edited with Ayurveda Tatva-Sandipika,Hindi commentary ,by Kaviraj Ambikadutta Shastri ,Chaukhamba Sankrit Prakashana,Varanasi, vol I & vol II.,reprint 2010.
- ASHTANG SANGRAHA - Edited by Kaviraj Atridev Gupta, Krushnadas Acadamy, Varanasi.Chaukhamba press Edition 2002.
- ASHTANG HRIDAY – Ashtang Hridayam, of Shrimad Vagbhata, edited by Dr. Ganesh Krshna Garde, Chaukhamba Sanskrit Prakashana, Varanasi reprint 2014.
- ASHTANGA SAMGRAHA- of Vagbhata,English translation,Translated by Prof.K.R.Shrikantha Murthy ,Chaukhamba Orientalia,Varanasi,2nd edition 1998.
- MADHAV NIDAN- of Madhvakara, with the „Madhukosha“ Comentary of Shri Vijayarakshit & Shrikantadutta, with Vidyotini Hindi Commentary by shri Sudarshana Shastri, Chaukhamba Sanskrit sansthan ,18 th edition,1989
- BHAVAPRAKASH SAMHITA – Sarth Bhavaprakash by Ayurvedacharya , Purushottam GaneshNanal, Rajesh Prakashan, Reprint 2007
- YOGARATNAKAR – Yog Ratnakar with Vidyotini,Hindi commentry by Vaidya Shri Laxmipati Shastri, edited by Bhisagratna Bhrahmasankar Shastri, Chaukhamba Sanskrit Prakashana,Varanasi, edition 5th1993.
- BHAISHAJYA RATNAWALI- Bhaishajya Ratnawali of Shri Govindadas Sen edited with Chandraprabha Commentary by Jaideva written by Pandit Lalchandji Vaidya. Reprint 2012.
- NIGHANTU: Kaidev Nighantu, Edited by Acharya Priyavata Sharma. Chaukhamba Orientalia, first ed. 1976.
- Bhavprakash Nighantu, by Dr.Gangasahay Pandey,Dr Krishnachandra chunekar, Chaukhamba Bharati Acadamy,Varanasi,Patna, edition 9th 1993.
- Abhinav Bhaishajya Kalpana Vidhyana by Acharya Siddhinandan Mishra, Chaukhamba Surabharati Prakashan, Varanasi,reprint 2012
- Ayurvediya Panchakarma Vidyana by Vaidya H.S Kasture. Baidyanath Publication.6 th edition.
- Database on Medicinal Plants used in Ayurveda by P.C. Sharma, M.B. Yelne, T. J. Dennis, publication and information directorate, CCRAS ,New Delhi,vol 3, 2001
- Indian Materia Medica, Nadkarni, 3rd ed. 1954.
- Text Book of Swastavritta by Dr. Vijay Pathrikar 5th Ed. April 2014.
- IAP Textbook of pediatrics, A Parthasarthi, 3 RD edition 2006.
- Essential Paedriatics 7th by O.P.Ghai, edition reprint 2010.
- Preventive and social Medicine. K Park.22th edition.