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HOMOEOPATHIC MEDICINES AS HOLISTIC APPROACH TO SAM AND MAM CHILDREN: A REVIEW

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Abstract: Future of the any Nation depends upon the future of child. Children are the most integral part of the Nation irrespective of it may be developed, developing or underdeveloped country in the world. Now days, India is taking long leap in the field of science and technology. But on the other hand, Malnutrition is the most burning topic related to children's health in India. Over 33 lakh children in India are malnourished and more than half of them fall in severely malnourished category with Maharashtra and Bihar topping in the list. The Government of India has strongly committed to achieve Sustainable Development Goal 2.2 that is 'End all forms of Malnutrition'. The management of Malnutrition requires a holistic approach. Because apart from diet, it is also important to look other possible causes such as mal-absorption, defective assimilation or defective digestion and underlying illness which causes Malnutrition in children. Many Homoeopathic constitutional medicines are responsible to cure the imperfect assimilation and consequent defective nutrition in children. So this article is a step towards reducing the high persistent burden of Severe and Moderate Acute Malnutrition in children.

Index Terms
Severe Acute Malnutrition, Moderate Acute Malnutrition, Homoeopathic Medicines

Introduction: Malnutrition has been called as "The Silent Medical emergency."[1] It is a leading cause of morbidity and mortality in children aged under five, especially in low and middle-income countries (LMIC). [2] Acute malnutrition (AM) comprises wasting and/or nutritional edema. Wasting is defined by low weight-for-length/height z-score (WLZ/WHZ) and/or low Mid-Upper Arm Circumference (MUAC). AM is often subdivided into severe acute malnutrition (SAM) and moderate acute malnutrition (MAM). SAM and MAM are both social and medical disorders. In 2019, of the 47 million children under five years of age who were acutely malnourished, 32·7 million suffered from MAM. [2]

Based on scientific literature, there are so many causes and risk factors for the development of acute malnutrition in SAM and MAM children such as Inadequate dietary intake, Inappropriate feeding, Fetal growth restriction, Inadequate sanitation, Lack of parental education, Family size, Incomplete vaccination, Poverty, Economic, political, and environmental instability and emergency situations. Maternal nutritional status has a direct relation to the child's nutritional status. [3] An undernourished mother gives birth to a low birth weight baby who grows up with compromised feeding and infections to a stunted child and adolescent and carries this vicious life cycle approach by giving birth to an underweight child. Undernutrition is more common in the lower income groups and even if malnutrition is present in the upper income group, it is limited to the milder forms. Appropriate child feeding behavior goes a long way in preventing and overcoming malnutrition and determining a child's growth. Although the causes are thought to be similar for children suffering with MAM and SAM, still the degree of wasting and other clinical complications are more severe in SAM children than those suffering with MAM.[4]

Moderate Acute Malnutrition[5] – A child with 70-80% of median weight-for- height (Z score of <-3SD to <-2 SD), or a Mid Upper Arm Circumference of 115-125 cms and no edema is classified as a case of Moderate Acute Malnutrition. In addition the child should have appetite, be alert and clinically well. Children with moderate acute malnutrition can be managed in the Outpatients setting where there is a provision for supplementary feeding.

Severe Acute Malnutrition[5] – Severe acute malnutrition is defined by very low weight-for-height/length (Z- score below -3 SD of the median WHO child growth standards), or a mid-upper arm circumference < 115 mm, or by the presence of nutritional edema. Severe Acute Malnutrition is both a medical and social disorder. Lack of exclusive breast feeding, late introduction of complementary feeds, feeding diluted feeds containing less amount of nutrients, repeated enteric and respiratory tract infections, ignorance, and poverty are some of the factors responsible for Severe Acute Malnutrition (SAM). SAM significantly increases the risk of death in children under five years of age. It can be a direct or indirect cause of child death by increasing the case fatality rate in children suffering from such common illnesses as diarrhea, acute respiratory infections, malaria and measles. According to

National Family Health Survey 3 (2005-06), 6.4% of children below 60 months of age or nearly 8 .1 million were estimated as having severe acute malnutrition.

Problem statement[6,7]

In India, according to the National Family Health Survey (NFHS 5) 2019-21, 36% of under 5yrs of children are stunted, 19% are wasted while 32% are under-weighted.
In Maharashtra, according to the NFHS-4 (2015-16), 34% of under 5yrs of children are stunted (too short for their age), 26% are wasted (too thin for their height) while 36% are under-weighted. While according to NFHS-5 (2019-2021), 35% of under 5yrs of children are stunted, 26% are wasted while 36% are under-weighted. The percentage of children who are stunted increased marginally from 34 percent to 35 percent in the 4 years between
NFHS-4 and NFHS-5. The percentage of children who are underweight (36%) or wasted (26%) has not changed since NFHS-4. However, the continuing high levels of under-nutrition is still a major problem in Maharashtra. That means, there is no significant improvement in health and nutritional status across Maharashtra since 2015-2016.

Malnutrition is an hidden disease in the society. Many children in India suffer from poor growth which leads to children affected with chronic severe illness, such children shows poor mental abilities, so they can't achieve higher qualifications. Such children are threat for the developing countries like India. So this article is useful to reduce the burden of malnutrition in the country and also useful to understand the effectiveness of Homoeopathic Medicines as holistic approach in improving the growth standard of malnourished children.

Indian Government had announced many projects under the National Health Scheme such as ICDS (Integrated Child Development Scheme), Mid-Day Meal Program, National Nutrition Supplementation Program and many more such Program. In 2018, Indian government launched POSHAN ABHIYAN with the objective to reduce stunting across districts with the highest malnutrition burden by improving utilization of key Aanganwadi Services and improving the quality of Aanganwadi Services delivery. However after assessing the impact and potential of the program, the Government has decided to integrate various programs with similar objectives such as Supplementary Nutrition Program and Poshan Abhiyan under the one umbrella known as Mission Poshan 2.0.[8]
At present, along with nutritious diet there is need of holistic and integrated approach to really assess and treat the root cause of Malnutrition.

Homoeopathy as a Holistic approach[9]

Homoeopathic system is based on cardinal principles and the selection of similimum is done using the totality of symptoms along with constitutional basis. In Aphorism no. 5 Dr Hahnemann had mentioned to consider the physical constitution of patient, especially when the disease is chronic. A child whether he is thin, obese, stunted or wasted is determined by genetic code along with his nutritional status. Hence physical constitution should never be neglected while selecting the similimum. Height, weight, distribution of fat, progress of emaciation and eating habits are important to determine the physical constitution of child. In addition with the physical make up or physical constitution, the mental makeup of child is essential for the understanding of constitution and it is indirectly helps to select the similimum. Many Homoeopathic medicines are responsible to cure the imperfect assimilation and consequent defective nutrition in children.

Homoeopathy is a complete rational system of medicine with its **holistic, individualistic & dynamic** approach to life, health, disease, and cure. Dr Samuel Hahnemann was the first who introduce this concept of **individualization** in treating diseases. Every individual is characterized by some unique features which serve to denote that particular individual is different from other. Individualization is the key to homeopathic prescribing. The individualization is applicable in acute as well as chronic prescribing. Homeopathy does not treat the disease, it treat the patient. Diseases which are nothing but abnormally altered life, the suffering of the "dynamics" , that makes itself known only by perceptible signs & symptoms, the totality of which, for all practical purposes constitutes the disease. The totality of symptoms constitutes the true & only conceivable portrait of the disease & help in individualizing the patient as well as remedy.

Homoeopathic Medicines[10, 11,12,13]

Homoeopathy is based on individualization of the patient. The totality of symptoms in the mental and physical plane and peculiar characteristic symptoms help in finding the similimum. In Aphorism 153 Dr. Hahnemann described about characteristics symptom. He had given more importance to the characteristics symptoms as they are more striking, singular, uncommon and peculiar symptoms which help in finding out a similimum. As mentioned in aphorism 5, we have to consider the physical constitution of a patient, especially when the disease is chronic for the selection of similimum. Some Homoeopathic medicines which are important for improving the growth standard are mentioned below

1. For Emaciated children(especially downwards):

Calcarea carbonica - All Calcareas are valuable in marasmus with scrofulous tendencies. Improper assimilation of calcium give rise to defective nutrition of glands (cervical and mesentric in children). Emaciated children with big head and big belly. There are sour stools and vomiting of milk. There is sweat on scalp, head and face, the feet are damp and cold. Enlargement of the glands and voracious appetite. The appetite may be morbid, craving indigestible articles. Best suited to children with impaired nutrition, who grow fat, with large belly and a large head, pale skin, chalky look. Children craves eggs, eat dirt and other indigestible things and are prone to diarrhea. Forgetful, confused low spirited.

Calcarea Phosphorica - Anemic children who are peevish, flabby, have cold extremities and feeble digestion. Forgetfulness, great hunger with thirst, easy vomiting in children. Involuntary sighing. Sunken and flabby abdomen. Unable to support head.

Lycopodium - Patient is thin, withered, full of gas and dry. Lacks vital heat; has poor circulation, cold extremities. Pains come and go suddenly. Sensitive to noise and odors. Intolerant of cold drinks; craves everything warm. Dyspepsia due to farinaceous and fermentable food, cabbage, beans, etc. Excessive hunger. Aversion to bread, Desire for sweet things. Food tastes sour. Sour eructations. Great weakness of digestion. After eating, pressure in stomach, with bitter taste in mouth. Eating ever so little creates fullness. Cannot eat oysters. Wakes at night feeling hungry. Incomplete burning eructations rise only to pharynx there burn for hours. Likes to take food and drink hot. Head strong and haughty when sick. Loss of self-confidence. Hurried when eating.

Natrum muriaticum -It is a grand remedy for marasmus. Marked emaciation; descending, of neck or abdomen. Appetite is ravenous, but child grows thin. Great emaciation, loosing flesh while living well. Throat and neck of child emaciate rapidly during summer complaint. Awkward, hasty, drops things from nervous weakness. Skin is scurfy and may develop oozing eruption. Appetite is ravenous, but patient grows thin. Child is thin thirsty poorly nourished on account of digestive disturbances with distended abdomen. Mouth and throat are dry, constipation. Great debility; maximum weakness is felt in the morning, in bed. Dropsy, edema, anemia. Sweats while eating, craves for extra salt.

Psorinum - Secretions have a filthy smell. Profuse sweating. Skin symptoms very prominent. Often gives immunity from cold-catching. Easy perspiration when walking. Offensive discharges. Wants warm clothing even in summer. Very hungry always; must have something to eat in the middle of the night**.**

Sanicula aqua - Useful remedy for marasmus. Sweating of head at night which wets the pillow. Offensive foot sweat, dirty and greasy. Body smells like old cheese. Child kicks off covers at night; wants to lie on something hard. Progressive emaciation. Dread of downward motion. Does not want to be touched. Restless desire to go from place to place. Skin wrinkled about neck and hands in folds. Mentally obstinate and head-strong.

Silicia terra - Useful remedy for defective nutrition especially in children; due to imperfect assimilation. Scrofulous, rachitic children, with large head, open fontanelles and sutures; distended hot and hard abdomen, slow in walking, and wasted in body especially legs, slow in walking. Patient is cold, chilly, worse in winter. Swelling of glands. Constipated baby. Skin is pale, waxy, cracks at the end of fingers, crippled nails. Eruptions on chin, yellow hands and blue nails. Felons, abscesses, boils, eruptions itch only during daytime and evening.

Iodium - Weak children with rapidly loosing flesh, even with a good appetite. Emaciation with glandular enlargement.. skin dirty yellow, great debility and prostration. Great weakness and loss of breath on going upstairs. Ravenous hunger with much thirst. Best suited to children of scrofulous diathesis, with dark or black hair and eyes.

2. Emaciation spreading upwards

Abrotanum - Very useful remedy for marasmus in children especially of lower extremities only, yet with good appetite. Emaciation begins in the lower limbs and gradually spreads upward. In infants also cures bleeding from navel. Neck so weak, can't hold the head. Falling out of hair. Skin looks flabby and loose. Stomach feels as if swimming in water. Rheumatism following checked diarrhea. Food passes undigested. Best suited to weak children who are emaciated, wrinkled, pale, blue rings around dull looking eyes, gnawing hunger and whining and bloated abdomen. Cross, irritable, anxious depressed.

Argentum nitricum - Emaciation of extremities. Great craving for sweets. Lack of co-ordination of muscles. Weak digestion. Diarrhea immediately after eating and drinking.

3.Intolerance of milk

Aethusa cynapium - Best suited to children who lack the power to hold their heads up, with no particular ailment, sometimes they can't even stand or bear any weight on their limbs. Restless anxious crying child. Inability to think to fix the attention. Idiocy may alternate with furor and irritability. Photophobia, rolling of eyes on falling asleep. Intolerance of milk in children. Undigested thin, greenish stool preceded by colic with tenesmus followed by exhaustion and drowsiness. Cholera infantum: child cold, clammy, stupid, with staring eyes and dilated pupils.

Cinchona officinalis - Debility from exhausting discharges, from loss of vital fluids. Apathetic, indifferent, disobedient, taciturn and despondent children. Hungry without appetite, slow digestion, severe flatulent colic. Liver and spleen swollen. Anasarca and erysipelas.

Arsenicum album - Inability to bear the smell and sight of food. Extreme thirst, though the child cannot drink more than a small quantity of water at once. Indigestion on consuming acidic food, ice cream or drinking ice cold water. Best suited to child who feel tired after the slightest activity.

4.Fat intolerance

Pulsatilla - It is pre-eminently a female remedy, especially for mild, gentle, yielding disposition. Sad, crying readily; weeps when talking; changeable, contradictory. The patient seeks the open air; always feels better there, even though he is chilly. Discharges thick, bland, and yellowish-green. Symptoms ever changing. Thirstlessness with dry mouth, with nearly all complaints, peevish, and chilly. Averse to fat food, warm food, and drink. Eructations; taste of food remains a long time; after ices, fruits, pasty. Bitter taste, diminished taste of all food. Dislikes butter. Heartburn. Dyspepsia, with great tightness after a meal; must loosen clothing. Vomiting of food eaten long before. Pain in stomach an hour after eating. **Mind.--**Weeps easily. Timid, irresolute. Fears in evening to be alone, dark, ghost. Likes sympathy.

Natrum Phos - Gastric derangement with symptoms of acidity; sour eructations, sour vomiting, sour diarrhea. Yellow, creamy coating at the back of the roof of mouth and tongue. Colic, with symptoms of worms. child is disturbed by butter, cold drinks, fats, fruit, MILK, sour things and vinegar. The appetite is increased, ravenous or wanting. Aversion to food, to meat, to milk, to bread and butter. Desires alcoholic drinks, beer, pungent food, eggs, fried fish, cold drinks. The stomach is disordered by fat and milk. Emptiness, aggravated after eating. Eructation after eating, empty, sour water brash. Fullness after eating. Heartburn, heaviness and pressure. Heat in the stomach. Nausea in the morning, evening, during cough, and during headache. Pain in the stomach; after eating; two hours after eating; cramping; gastralgia, several attacks every day with vomiting sour fluids; over-secretion of lactic acid. Gnawing in the stomach. Pressing after eating. Extreme thirst.

Other Homoeopathic Medicines for Malnutrition

Acetic acidum - Grand remedy for kwashiorkor. Emaciation of extremities. Edema of feet and legs. Skin pale, waxen, edematous. Good remedy for wasting and debility with too much Irritability. Best suited to pale, lean children, with lax, flabby muscles. Eyes sunken surrounded dark rings. Ascites, extremities emaciated edema of feet and legs. Intense burning thirst.

Baryta carbonica - Children with retarded mental and physical growth. Dwarfish mentally and physically. Emaciation with glandular swelling. Children are late coming into usefulness, to take on their responsibilities and do their work. Best suited to children who are lazy, pot-bellied, and who suffer from great physical and mental debility. The child wants to eat all the time. Does not like sweet things or fruit and a little food satisfies.

Iodium - Weak children with rapidly loosing flesh, even with a good appetite. Emaciation with glandular enlargement.. skin dirty yellow, great debility and prostration. Great weakness and loss of breath on going upstairs. Ravenous hunger with much thirst. Best suited to children of scrofulous diathesis, with dark or black hair and eyes.

Sulphur - Suits old looking children who have much heat about the head and cold feet. Children cannot bear to be washed or bathed; emaciated big-bellied; restless, hot, kick off the clothes at night. A hard, distended abdomen and a dirty, sallow, shrivelled skin. Skin hangs in folds; the fingers are emaciated, almost resembling knitting needles. Discharges excoriating and offensive. Very thirsty and hungry but when comes to table, he loathes the food, drinks much and eats little. There is emptiness in stomach and excessive hunger at 11 A. M. The skin is unhealthy and apt to be covered with various eruptions, eczema predominating.

Tuberculinum - It is a inter current remedy. When there is tubercular family history it is suited. It is given when symptoms are constantly changing and well selected remedy fail to improve. Rapid and pronounced emaciation, while he eats well loses flesh rapidly. Takes cold easily, without knowing when or where. Diarrhea in children running for weeks, extreme wasting, bluish pallor face. Patient is lean, thin, tall. Sensitive to music. Fits of violent temper; wants to fight, throws anything at any one; even without a cause.

Conclusion

SAM and MAM is a worldwide problem especially in the developing countries. There are various consequences of Acute Malnutrition which leads to bad impact on child's health and consequently on the health of nation. Proper counselling regarding diet for mother and infant/child is needed so as to prevent progression of complication along with Homoeopathic medicines. Counselling and raising awareness to avail the various health programs and schemes by the government can improve nutritional diet of the child. Homoeopathy offers an indivualized as well as holistic approach for the treatment of the various manifestations of Acute Malnutrition. Homeopathic medicines on the basis of constitutional approach when the body is unable to use the available nutrients or when there is defect in the assimilation of food, we can improve the health of the children with the holistic approach of Homoeopathic constitutional medicines.

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