INTERNATIONAL JOURNAL OF MULTIDISCIPLINARY HEALTH SCIENCES
ISSN: 2394 9406

ROLE OF PANCHAKARMA IN BALA-ROGA: A REVIEW

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ABSTRACT:

Panchakarma, an integral part of *Kaumarbhritya* in Ayurveda, plays a significant role in the prevention and management of *Bala-Roga.* While most research emphasizes adult applications, classical *Ayurvedic* texts describe modifications of *Panchakarma*—such as *Purvakarma, Pradhankarma, and Paschatkarma*—suitable for paediatric care. Procedures like *Snehana, Swedana, Vamana, Virechana, Basti, Nasya*, and *Raktamokshana* are mentioned with age-specific guidelines to ensure safety in children. Proper expertise is essential, as children's physiological delicacy (*Soukumaryata*) and incomplete development (*Aparipakwa Dhatu*) require gentler approaches. Classical references such as *Kaumarbhritya (Chaukhambha,* p.29) and *Charaka Samhita (Sharira Sthana* 9/117) support the rationale for *Panchakarma* in child health. Integrating these principles in modern paediatric practice

Keywords: *Kaumarbhritya, Panchakarma, Ayurveda, Bala-Roga*

INTRODUCTION

One of the oldest systems of holistic medicine, Ayurveda, or the study of life, emphasises prevention and seeks to establish and preserve balance among the body, mind, and awareness. Ayurveda includes herbal remedies, yoga, dietary and lifestyle recommendations, and other forms of therapy. In Ayurveda, ailments are treated with *Shamana* (pacificatory) and *Shodhana* (purificatory; cleaning or detoxification). An essential component of Ayurveda, *panchakarma* treatments boost the body's immunity and serve as both preventative and therapeutic measures. One of the peculiarities of *Kayachikitsa* is *Panchakarma,* which consists of several supporting procedures in addition to the five main therapeutic processes of bodily cleaning and detoxification. As a complete remedy for a variety of paediatric ailments, *panchakarma* may really be applied effectively in all branches of *Astang-Ayurveda* and in *Kaumarbhritya.* The purpose of this review was to examine the notion of *Panchakarma* in children as well as its variations and relevance in *Bala-Roga.*

MATERIALS & METHODS

The literature on *Panchakarma* in children was gathered from a variety of traditional *Ayurvedic* textbooks, online research articles, earlier studies, and compilations. A thorough study was conducted on the concept of *panchakarma* in children.

Description of Panchakarma in Kaumarbhritya

Pradhanakarma, Paschatkarma, and *Purvakarma* are all parts of the purifying process known as panchakarma. *Deepana* and *Pachana* (administrating oral medications to aid digestion in order to boost Agni), *Snehana* (oleation), and *Swedana* (fomentation) are all part of *Purvakarma* (pre-Panchakarma treatments). To remove harmful things from the body from the closest tract, *Panchakarma Pradhankarma* (main procedures), Vamana (therapeutic emesis), *Virechana* (therapeutic purgation), *Basti* (enemas), *Nasya* (nasal administration), and *Raktamokshana* (bloodletting) are done. To achieve the desired outcomes and return the patient's body to a regular lifestyle, precautions and a food plan are recommended as part of *Pashchatkarma* (Post-*Panchakarma* therapies). Providing appropriate prenatal and postnatal care is part of *Kaumarbhritya's* scope. 1 The years of childhood are a time of physical, mental, and social growth and development. The majority of classical writings have stated the age, or *Balya-kala*, up to 16 years, notwithstanding significant variances. There have been

references in the classics to the changes in *Panchakarma* concerning paediatric practice. *Deepana and Pachana:* Before beginning the first *Panchakarma* treatment, it is advised to enhance Agni and achieve *Niramavastha* of *Doshas.* Paediatric patients may benefit from water that has been boiled with either *Dhanyak* (dry coriander) or *Shunthi* (dry ginger). Initially, it is administered in modest amounts and warm.

Snehana:

The practice of oleating the body by applying medicinal oils and ghee both orally and topically is known as *snehana.* It is the most crucial practice for children's healthy growth and development. Of the four Snehana *Dravya* (substances), *Majja, Vasa, Tala, and Ghrita, Ghrita* has been given higher weight for *Snehana* in children. The majority of *Acharyas* have written on how *Snehana* is used with kids. In the *Navjaat Paricharya Adhyaya* and *Kashyapa Lehaadhyaya,* when *Madhu Ghrita* is recommended for usage, the significance of Sneha is emphasised. Soon after birth, a kid should begin *Snehana (Abhyanjana* with *Bala Taila*).[2] During a newborn's first four days of eating, *ghrita* plays a crucial function.[3]*Snehana* is recommended for *Purvakarma* (prior to cleaning therapy), *Vata rogas, Rukshata* (roughness of the body), *Hikka* (hiccough), and *Krisha Balaka* (distended infant).[4].*Kshirad Avastha* (breast-feeding infants), *Chardi* (vomiting), *Kaphaja Vikaras uchas Sthoulya* (obesity), *Raktapitta* (bleeding disorders), *Atisara* (diarrhoea), *Jvara* (fever), and *Galamaya* (throat problem) are in cases when *snehana* is prohibited.[5] *Sneha* is contraindicated in *Talu Sosha* and *Grah Pidit,* according to *Charak.* Despite being the greatest kind of *Snehana, Achcha Sneha* is sometimes difficult to deliver to youngsters; instead, *Sneha Bicharna* is used. *Susruta* has indicated that youngsters of different ages, including *Ksirada, Ksirannada,* and *Annada,* utilise different medicated *Ghrita* throughout the summer[6] *Ksirada's Snehana* has been curtailed by *Kashyapa.* [7] *Charak* has suggested that youngsters should take a little dose of Sneha. [8] *Ghrita* preparations9 such as *Ashwagandha Ghrita, Kumar Kalyan Ghrita, Samvardhana Ghrita, Abhaya Ghrita, Panchagavya Ghrita, Ashtang Ghrita, Shishu Kalyanaka Ghrita, Brahmi Ghrita, Shodhana Ghrita, and Ashtamangala Ghrita* can be used for *Snehana.* The following are also utilised: *Bala Taila, Mashaadi Taila, Lakshadi Taila, Mahanarayana Taila, and Narayana Taila.* In *Navajat Paricharya* during *Prana Pratyagamana* (neonatal resuscitation), *Acharya Vagbhatta*

explained *Abhyanga* with *Bala Taila*.

Swedana:

Swedana is the process that causes sweating, or sudation. It alleviates the body's coldness, stiffness, and weight. *Swedana Karma* has been described in detail by Kashyapa.[10] *Staimitya* (rigidity), *Kathorata* (hardness), *Malabandha* (constipation), *Anaha, Vani Nigraha* (voice suppression), *Hrillasa* (nausea), Aruchi (anorexia), *Alasaka* (tympanitis), and *Kampana* (cramping) are among the conditions for which it is employed. Depending on whatever body areas are exposed, *Swedana* might have a mild, moderate, or powerful character.[11]

The eight varieties of *Swedana*[12]: *Parisheka, Sankar, Upnaha, Avgaha, Pradeha, Nadi*, and *Prastara*. According to the reference, *Hastha Sweda* and *Pata Sweda* are beneficial for newborns and infants, particularly when it comes to stomach colic. It is advised that *Krisha*, who is slender and of middling strength, do conditional Swedana[13] Up to 4 months of age, *Hasta Sweda* is advised. Other forms of *Prasthara, Sankara, Praveha, Upanaha, Avagaha, Parisheka*, and *Nadi Sweda* are also realistically relevant to children. *Shashtika Shali Pinda Sweda* is the generic *Swedana* approach that is frequently utilised with paediatric kids who have neuromuscular abnormalities. *Purvakarma, Vasta* Rogas (hemiplegia, cerebral palsy), *Jadya, Kathinya*, and *Ruksha Sharira* (heaviness, stiffness, and dryness of body), *Shwasa* (asthma), *Kasa* (cough), *Pratishyaya*, rheumatic and degenerative disorders, congestion of Mala (stool), *Mutra* (urine), and *Shukra* (semen) are among the ailments for which *Swedana* is advised.

The following conditions make *Swedana* contraindicated: *Chhardi* (vomiting), *Trishna* (dehydrated), *Karshya* (emaciated), *Navajwar* (acute fever), *Kamala* (jaundice), *Pittarogi, Madhumehi* (diabetic), *Hridaya Rogas* (cardiac illnesses), *Raktapitta* (bleeding disorders), and *Vishsart* (poisoned). Various items, including as pearls, *Candrakantamani,* and pots filled with cold water, should be kept in constant touch with *Hridaya Pradesh* (the heart area) during the *Swedana* procedure. [14] For ease of use, the mouth should be filled with *Draksha, Karpura* powder, or citrus fruit juice combined with unrefined sugar. [15]

Vamana:

This method involves vomiting in order to get rid of *doshas* through the mouth.[16] Immediately after delivery, the first act of emesis is carried out utilising *Saindhava* and *Ghrita* to get rid of *Garbhodaka.* [17] It has been suggested that *Mridhu Vamana* be taken with full

stomach milk or breast milk and that the mother or doctor should physically stimulate the throat. Typically, children should not vomit for two to three reasons. A decoction of *Apamarga* (Achyranthes aspera), *Pippali* (Piper longum), and *Sirisa* (Albizzia lebbeck) should be administered to the infant with rice to eliminate any leftover *Kapha* if vomiting is not acceptable. Exercising should be avoided for a few hours after vomiting.[18]According to *Acharya Kashyapa*, infants who frequently vomit vitiated milk from their stomachs would never get sick. In cases of dyspepsia (*Ajeerna*), sinusitis (*Peenasa*), diabetes (*Madhumeha*), schizophrenia (*Unmada),* skin disorders *(Kushtha),* coughing (*Kasa*), bronchial asthma (*Shwasa*), and filariasis (*Shlipada*), *Vamana* is recommended. *Bala* (very young children), *Hirroga* (cardiac diseases), *Shranta* (tired), *Pipasita* (thirsty), *Kshudhita* (hungry), and *Atikrisha* (emaciated body) are conditions in which *Vamana* is contraindicated. *Saindhava Churna* and *Vacha (*Acorus calomus) can be administered to perform *Garbhodaka Vamana*. The decoction of *Katphala* (Myricaesculenta), *Nichola* (Barringtoniaacutangula), and *Sirisa* (Albizzia lebbeck) as well as the decoction of *Grahaghni* (Gaur-Sarsapa), *Kritaveda*, and *Madana Phala* (Randia spinosa) seeds have all been used for emesis, according to *Kashyapa*. *Madanaphala* on the breast and areola can be used for *Vamana* in *Ksheerada* children with *Vamana Sadhya* illnesses; however, the dosage of *Madanaphala* should not exceed that. For children under six, *vamana* is often contraindicated. Smaller doses of medications with mild potencies are utilised. In order to facilitate simple *Vamana, Ksheerada* involves applying medication to the mother's breast, which should be cleaned as it dries and the infant prepared for breastfeeding. Administer medications in addition to breast milk in *Ksheerannada.* You can use the decoction of *Katphala* and *Sarsapa* or *Madanaphala*, *Vacha,* and *Saidhava in Annada*.

According to the severity of the illness, the dosage of medications for *Vamana* varies, ranging from 120 mg to 4 gm for *Utakrista matra*, *Madhya matra,* and *Hina matra.* Additionally, according to *Kashyapa,* the recommended dosage for emetics is one *Vidanga,* which is raised by one *Vidanga* each month until the lowest dosage is one *Amalaka.*

Virechana:

Using *Adhomarga* (rectum), it is the method by which vitiated *Doshas* are removed. It is specifically used to

eliminate *Pitta* Dosa.[19] *Virechana* is the greatest treatment for *Pittaja* problems, has been shown to improve the clarity of the *Indriyas* (sensory organs), and is beneficial for a child's growth and development. Regular bowel habits and purification of the *Amashaya* and *Pakwashaya* also improve the child's functional ability. Children shouldn't normally be given *virechana*, but in certain cases, when no other treatment is working to heal the illness, it may be administered as a last resort. Except in cases of emergency, it is best to avoid using *Virechana* on youngsters. Instead, use *Basti*. Care should be used when doing this treatment. If *Virechana* is administered, it should be given after *Vamana* by at least fifteen days, provided that other requirements are met. Mothers in *Ksheerada* get *Virechana Aushadha*, although in *Ksheeranada* and *Annada*, those in need might use *MriduVerechna* with *Trivritta* (Operculina turpethum) and *Chaturangula* (Cassia fistula).

Drugs for *Teekshna* are not recommended. In cases of *Tamak Shwasa* (bronchial asthma), *Pakshaghat* (hemiplegia), *Madhumeha* (diabetes), *Arbuda* (tumour), *Krimi* (worm infestation), and *Kamala* (jaundice), *Virechana* is suggested. For *Navajwara* (acute fevers), *Krisha* (emaciated patients), *Rajayakshma* (tuberculosis), and *Garbhini* (pregnant women), *Virechana i*s contraindicated. For adult *Hina, Madhyama*, and *Uttama*, the *Vega* of *Virechana* is 2, 3, and 4, rather than 10, 20, and 30. *Kashyapa* has explained the *Vircehana* difficulty.[20]

Basti:

Basti Yantra is the process by which medications are given through the rectum or genitor urinary tract using an enema container or other specialised equipment. Mostly, *Basti Karma* is utilised to eliminate *Vata Dosha* and ailments where *Vata* is linked. *Anuvasana Basti* (Sneha), *Utara Basti* (uterine and urinary), and *Asthapana Basti* (Niruha) are the three varieties of basti. In addition to being safe and beneficial for children, *basti* can be used in situations when *Virechana* is not appropriate. When Babit is a child, she behaves similarly to Amrita (nectar). A one-year-old baby can be given basti. *Acharya Kashyapa* has recommended using *Anuvasana Basti, or Basti* in which the amount of oil exceeds that of *Kashaya,* because *Niruha Basti* can produce *Karshana* in children.

Acharyas in Basti Yogya Ayu are deeply divided on a number of issues.[21]

Basti should be initiated immediately after birth, one month later, four months later, three years later, and six years

later, according to *Gargya, Mathara, Atreya, Parashara, and Bhela*. *Basti* should begin at *Annada*, who is around one year old, according to *Kashyapa*.[22] Basti is recommended for *Amavata* (a kind of juvenile rheumatoid arthritis), *Vata Roga* (hemiplegia, muscular dystrophy), *Rajo nasha* (secondary amenorrhoea), *Jeerna Jwara* (chronic fever), *Ashmari* (bladderstone, kidney stone), *Niram Atisar* (chronic diarrhoea), cerebral palsy, and delayed milestones. When someone has *Amatisara* (acute diarrhoea), *Kasa* (cough), *Shwasa* (asthma), *Chhardi (*vomiting), *Krishna* (emaciated body), *Madhumeha* (diabetes), *Shoona Payu* (inflamed anus), or *Kritahara* (soon after consuming meal), *basti* is contraindicated. *Kashyapa* has stated particular *Basti f*ormulations for youngsters, while other *Acharyas* have described several *Basti* preparations of generic kind that may be utilised for patients of all ages. The causes and symptoms of youngsters receiving too little or too much *Basti* are discussed.

Nasya:

It's the method of giving medication through the nose.[23]It is recommended mostly for elevated and accumulated head and neck *Doshas* (disease-causing factors). By instilling herbal liquids, oils, or powders into the nose, the exacerbated *Kapha Dosha*—which often obstructs the upper respiratory tract—is removed. *Pratimarsha* is a gentle stone that may be given to youngsters, according to *Charaka's* description of the five forms of Nasya.[24] The dosing schedule, administration method, and forms of *Nasya* in children have all been reported by *Kashyapa. Brimhana Nasya* (nourishing) and *Karshana Shodhana* Nasya (cleaning) are two varieties of *Nasya.* According to *Susruta* and *Vagbhatt, Nasya* is not advised for children less than seven years old.[25] According to *Kashyapa,* even breastfed infants might be administered it.[26] Certain childhood conditions including *Trishna, Shiroroga, and Pippasa* can be cured with *Nasya. Nasya* involves the patient sitting or lying down in a comfortable position, followed with mild *Swedana* and a light massage of the face, forehead, and head.

Raktamokshana:

The procedure of drawing blood from the body to treat illnesses brought on by *Rakta and Pitta* is known as Raktamokshana.[27]*Shringa, Jalauka, Alabu,* and *Shira Vyadha* are the techniques of *Raktamokshana.* This technique is not recommended in the first phase since children have *Aparipakwa Dhatu.* As in *Kukunaka, Ahiputana, Gudakutta, Ajagallika, Mukhapaka*, and *Charmadala, Rakta Mokshana* is

recommended if *Shamana* and other methods fail to heal the illness. In paediatric situations, *Jalauka* is the only treatment for *Raktavasechana* since *Jalauka* is the mildest of all the techniques.

DISCUSSION

Even though children have the same *doshas, dushyas,* and illnesses as adults, it is crucial to manage paediatric problems by taking into account the patient's age, condition, dose, medications, method of administration, time, frequency, and procedure. *Alpakayata* (underdeveloped organ systems), *Vividha Anna Anupan sevanata* (GIT

not suitable to take all sorts of food), and *Soukumaryata* (soft and delicate body structure) are the physical characteristics that distinguish children from adults. Incomplete secondary sexual characteristics are represented by *Ajata Vyanjanam, Aklesha Sahatva* (unable to handle stress of any type), and *Aparipakwa Dhathu* (transformation and growth under progression). *Asampoorna Balam* (weakness) and *Slesma Dhathu Prayam* (significant development and progress). This justifies a smaller/shorter dosage and duration of therapy or operations for the paediatric population. *Madhura and Surabhi* (sweet and pleasant fragrance for enhanced palatability), *Laghu (*easy to absorb and digest), and *Mridu (*low potency) are the best types of medications for youngsters. In *Bala-Roga*, the management strategy is primarily restricted to medication. In many traditional books, the various *Panchakarma* procedures for children with various conditions are discussed in detail. Prior investigations have reached a conclusion about the importance of *Panchakarma* in *Bala Roga*. A review study titled *Panchakarma* in Paediatrics of Current Scenario was published by Tripathi N. and Tiwari28. According to the review, *panchakarma* is an essential component of Ayurvedic treatment and should not be disregarded in paediatric situations. A comprehensive explanation of *Panchakarma in* paediatrics may be found in Ayurvedic literature, but it is not used because of a lack of real-world experience and a poor comprehension of its fundamentals. Fundamentals of *Panchakarma* in Child Health Care is a review paper written by Navane K and Devane Y.[29]

CONCLUSION

Using the traditional references and modern updates and adaptations, children can safely and successfully do *panchakarma.* understanding and expertise in paediatric diseases and *Panchakarma.* The secret to effectively

administering *Panchakarma* to youngsters. *Ayurvedic* hospitals will undoubtedly provide a new hope in the treatment of paediatric illnesses with the increasing and widespread use of *Panchakarma* procedures.

REFERENCES

1.Kaumarabhritya, Chaukhambha Publication / Chaukhambha Sanskrit Pratisthan – p.29, p.659

2.Charaka Samhita, Chaukambha Prakashan – Sutrasthana 13/38–43, 25/40; Kalpa Sthana 1/4; Sharira Sthana 9/117; Siddhi Sthana 3/31

3. Susruta Samhita, Chaukambha Sanskrit Series Publication – Sharira Sthana 10/14, 10/17; Chikitsa Sthana 31/37

4. Kashyapa Samhita, Chaukambha Sanskrita Sansthan – Sutrasthana 22/29, 22/30–31, 23/3–8, 23/8, 23/10–12, 23/25–26; Siddhi Sthana 1, 3, 4

5. Astanga Hridayam of Vagbhata, Chaukambha Sanskrit Pratishthan – Sutrasthana 20/30–32, 11/26

6 Child Health Care in Ayurveda, Sri Satguru Publication – p.161

7. International Journal of Ayurvedic & Herbal Medicine, Vol. 8(5), pp. 3324–3328

8 .Fundamentals of Panchakarma in Child Health Care, ADJIM, Vol. 3(2), pp. 01–03