

## Bala Samvardhana Vikaras With Special Reference To Cerebral Palsy An Ayurvedic View

**Dr.Amit S. Deshmukh**

MD(Dept. of Kaumarabhritya)

J.A.M.C&H. Nagpur.

**Dr.Anil Baghel.**

MD ( Dept. of Rasashtra )

J.A.M.C.&H.Nagpur

The developmental disabilities are not only the challenging medical problems but are also the social problems. And this burning problem cannot be overlooked. The World Health Organization estimates that about 10% of the total world population has one or the other form of disability and about 3.8% is seen in India. Advancement in perinatal and neonatal care has improved the chances of survival of many new-borns who would have otherwise succumbed to such problems. Lack of proper medical care and certain other factors tends to increase the chances of childhood developmental delays such as speech problems, behavioral problems, attention deficit disorders, hyperkinetic disorders and scholastic backwardness etc. which can be considered as SAMVARDHANA VIKARAS, in general.

SAMVARDHANA VIKARAS are characterized by abnormality in the development and shows the clinical features like pangu (lame). jada (mental retardation), mooka (dumb). ashruiti (deaf) etc.

### Factors responsible for Prakritha Samverdhana:

Although many factors influence the proper growth and development, the important of them are,

\* Shareera Vriddhi kara bhavas.

\* 'Bala Vri'ddhi kara bhavas .

### Shareera Vriddhi kara bhaves:

These bhavas not only include factors pertaining to physical growth but those that influence mental growth also. Mainly four factors are identified in this regard as Kala yoga, Swabhava samsiddhi, Ahara saushthava and Avighata which have been highlighted here.

- 1) Kala yoga: The points that need to be considered here are age of the parents during conception, the prenatal period, the ritu of delivery etc.
- 2) Swabhava samsiddhi (Innate potentiality, Genetics): This possibly means the Genetic design for a particular pattern of development which is influenced by doshas of shukra and arthava of the parents during the time of conception. The deeds of previous birth may also be responsible for the pattern of samvardhana of individuals.
- 3) Ahara saustava : Nutritional factor plays an important role growth and development in pre and post natal periods. In the post natal period Sthanya has the major role in nutrition of the baby.
- 4) Avighata: Vighata means either psychic or somatic injury or sometimes both .Avighata is opposite to vighata. The whole gist is that one should avoid injury of any sort to both mother and foetus during pregnancy and during the child birth also.

### Bale Vriddhi kara bhavas:

The factors explained in this context such as balevat deshe janma, kala yoga, sukhasch kala, beeja kshetra guna sampat, ahara sampat shareera sampat, satmya sampat satwa sampat, swabhava samsiddhi, yauvana, karma. samharsha.

Samskaras iike Jatakarma. dolashayana, namakarana, nishkramana, upaveshana etc. also have its own role in prakrita samvardhana.

### Etiopathogenesis of bala samvardhana vikaras.

The nidanas of bala samvardhana vikaras can be divided into

1. Garbhe kalina nidanas-- prenatal.
2. Prasava kalina nidanas --natal.
3. Prasavottara kalina nidanas --post natal.

**Garbha kalina nidanas-- prenatal:**

It includes beeja dushti (genetical or chromosomal abnormalities), atma karma'dushti (idiopathic causes may be because of past deeds), Ashaya dushti (abnormalities of reproductive system), kala dushti (improper age and time), Matur ahara vihara dushti (improper maternal diet and regimens), other than this Dauhrida avamana (suppressing the longings of the mother), Aghata, krimi, dhumapana etc.

**Prasava kalina nidanas:**

It includes vilambita avi (prolonged or weak uterine contraction), akala pravahana (untimely bearing down), moordhna abhighata (head injury).  
**Prasavottara kalina nidanas:**

This includes sthanya dushti e.g Kaphaja sthanya, tridoshaja sthanya, garbhini sthanya resulting in developmental disorders. Effect of grahas like skanda. skandapasmara, the nija agantuja disorders causing vyadhi sambhava phakka.

**Symptomatology of balmardhana Vikara:**  
Since the etiological factors of bala samvardhana vikaras are diverse the symptoms vary accordingly and many in number. The commonly encountered symptoms and as explain in our classics are jadata, mookata gadgada, badhirya, pangulya, phakkatwa, ekanga roga, pakshaghata, akshepaka etc. During delivery and immediately after birth much care should be taken not to have shiromarmabhighata to the baby. Immediate adoption of pranaprtiyagamana is required for the same purpose otherwise may result in disability later.

**Early markers of cerebral palsy:**  
Neurological examination and development assessment by pediatrician can readily identify the following early clinical markers of cerebral palsy. In experienced hand they have a high degree of specificity and sensitivity as a screening tool.

Episodes of inconsolable crying, chewing movements, excessive sensitivity to light or sound etc.

Persistent asymmetric neck tonic posture beyond 4 weeks.

Clenched fists (corticle thumbs) beyond 8 weeks.

Abnormalities in tone (hypertonia in lower limbs and hypotonia in neck and upperlimbs). Persistence of automatic reflexes beyond 4--5 months.

Slow head growth.

Management of samvardhana vikaras: The management includes preventive and Other measures. (medicine)

**Preventive measures:**

once this problem takes the abode it becomes very difficult to manage and there fore preventive measures in prenatal, natal and post natal peroid play an important role. Avoiding sagotra vivaha (consanguineous marriage), following rutucharya, Garbhdhana procedures, avoiding pregnancy in very young and elderly ladies, following proper garbhini paricharya (ANC), avoiding garbhapoghatakara bhavas, madyaa, dhoomapana etc. are important. Education towards bearing down efforts, proper conduction of labour and avoiding moordhabhighata during delivery should be ensured. During neonatal peroid ensuring intime pranapratygamana (resuscitation), conduction of jatakarma, raksha karma, dharana of mani etc. are also important.

**Other measures (medicine):**

It includes the administration of following rasayanas.

Medhyaa rasayana--mandookaparni, guduchi, shankha pushpi, yasti madhu etc. Ghritas: kalyanaka ghrita, bramhi ghrita, panchgavya ghrita, samvardhana ghrita, swarna prasana with medhya dravyas.

Abhyanga, swedana, udwartana, basti, nasya etc are having very significant role.

**Conclusion:**

A number of culture specific tools have been developed to assess neuromotor development and cognition. Bayley scale of Infant development is widely used and has been simplified for use as Baroda development screening test (22 motor items and 31 mental items).

The Stanford Binet intelligence scale and McCarthy scale of children's abilities can be used in older children to assess their intelligence.

**References:**

1. Care of Newborn. 5th Edition Jan 2002. By Dr. Meharban Singh. Sagar publication 72 Janapath, ved mansion. New Delhi.
2. IAP Textbook of Pediatrics vol-3 National publication house Gwalior. Jaypee fifth edition. By

- Dr. A parathasarathy, dr. Piyush gupta, dr.Rohit Agrawal, Dr.Menon,Dr.Nair, Dr.Sukumaran.
3. Kasyap samhita chaukhamba prakashan . Varanasi.
  4. Thesis of dr. S. Rao on Samvardhanavikaras .
  5. Caraka samhita Chaukhamba prakashan ,Varanasi.
  6. Nelson Essentials of Pediatrics. Third edition.Behrman kliegmen 1999.

