



SOUVENIR



KAUMARCON- 2019 INTER NATIONAL CONFERENCE ON

Mother And Child Healthcare Through Ayurveda

Dated 1-3 February 2019

JOINTLY ORGANIZED BY

PG Departments of Kaumarbhritya and Prasuti Tantra & Stree Roga

University College of Ayurved

Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur

In Collaboration With

Global Ayurveda Conferences, USA

Association of Ayurvedic Professionals of North America (AAPNA)

SOLO EVENT PARTNER



Svarnaprashana Gains Wide Popularity in Jodhpur City



Hon'ble MLA, Jodhpur Giving Svarnaprashana Dose



Hon'ble Mayor, Jodhpur Giving Svarnaprashana Dose



Hon'ble VC Sir Giving Svarnaprashana Dose



District Collector, Jodhpur Giving Svarnaprashana Dose



AIIMS Jodhpur Director Giving Svarnaprashana Dose in AIIMS OPD



HoD, PG Dept. of Koumarbhritya Giving Svarnaprashana Dose



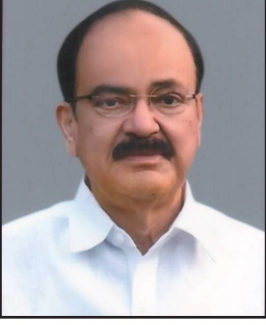
Jodhpur City Public During Svarnaprashana Campaign



Jodhpur City Public During Svarnaprashana Campaign

Second Convocation of University in The Auspicious Presence of Hon'ble Chancellor & Governor of Rajasthan Shri Kalyan Singh Ji





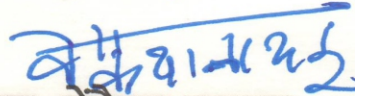
सत्यमेव जयते

भारत के उपराष्ट्रपति
VICE-PRESIDENT OF INDIA
संदेश

मुझे यह जानकर अत्यंत हर्ष हुआ है कि डॉ. सर्वपल्ली राधाकृष्णन राजस्थान आयुर्वेद द्वारा 01-03 फरवरी, 2019 तक मातृ एवं शिशु स्वास्थ्य विषयक अंतरराष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। आयुर्वेद विश्व का प्राचीनतम जीवनविज्ञान है, जो युगों-युगों से मानव स्वास्थ्य को संरक्षित एवं संवर्द्धित करने में महत्वपूर्ण योगदान निभा रहा है। भारतवर्ष के घर-घर में दैनिक दिनचर्या में, खान-पान में, सांस्कृतिक परंपराओं एवं पर्वों में आयुर्वेदोक्त स्वास्थ्य संरक्षण की वैज्ञानिक पृष्ठभूमि दिग्दर्शित होती है।

जननी के रूप में माता और शिशु मानव-सृष्टि एवं सभ्यता के चिरन्तन प्रवाह के स्तम्भ हैं। स्वस्थ माता एवं शिशु चहुँमुखी समृद्धि का आधार है एवं माता और शिशु के स्वास्थ्य संरक्षण में आयुर्वेद की सार्वकालिक सामाजिक स्वीकृति के फलस्वरूप दादी-नानी के नुस्खों के रूप में इस प्राचीनतम स्वास्थ्यमूलक विज्ञान की अजस्रधारा निर्बाध गति से भारतीय परंपराओं में प्रवाहित हो रही है एवं वर्तमान परिप्रेक्ष्य में इसकी वैज्ञानिकता एवं उपादेयता सम्पूर्ण विश्व में स्वीकार की जा रही है। स्वास्थ्य के संदर्भ में विशेषकर माता एवं शिशु के विषय में आयुर्वेद के समग्र योगदान को देखते हुए, इस विषय की महत्वपूर्ण भूमिका के वैश्विक पटल पर व्यापक प्रचार-प्रसार हेतु विश्वविद्यालय द्वारा "कौमारकोन 2019" अंतरराष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। इस अंतरराष्ट्रीय संगोष्ठी में महिला एवं बाल स्वास्थ्य पर आयुर्वेदीय प्रबंधन पर हो रहे शोध कार्यों को प्रस्तुत करने का सुअवसर उपस्थित हुआ है, जो महिला एवं बाल स्वास्थ्य के प्रबंधन एवं नीति-निर्माण में महत्वपूर्ण सिद्ध होगा।

मैं मातृ एवं शिशु विषयक आयोज्यमान अंतरराष्ट्रीय संगोष्ठी की सफलता हेतु अपनी सदाकांक्षाएँ और शुभकामनाएँ संप्रेषित करता हूँ।


(एम. वेकेया नायडु)

नई दिल्ली
29 जनवरी, 2019



सत्यमेव जयते

प्रधान मंत्री
Prime Minister

MESSAGE

I am happy to learn that Dr. S.R Rajasthan Ayurved University Jodhpur is organising “KAUMARCON” – the first-ever international conference on mother and child healthcare at Jodhpur from 01-03 February, 2019.

Our Government attaches top priority to healthcare, as the health of the nation depends upon the health of its citizens. The health of women, in particular, is of crucial importance, as good health of women will lead to better health of children – the citizens of the future. We have implemented initiatives like National Nutrition Mission and Pradhan Mantri Surakshit Matritva Abhiyan.

The initiative to hold the first-ever international conference on mother and child healthcare is an appreciable one. The health of mother and children has a direct co-relation and is of critical for the family, as well as the nation. I am sure that the participants at the conference will discuss practical measures to ensure that quality healthcare is made available to all, particularly of mother and children. Latest technological innovations can go a long way in achieving this objective. The best international practices and experiences can be replicated, keeping in mind regional variations.

Best wishes for successful deliberations at “KAUMARCON”.

(Narendra Modi)

New Delhi
31 January, 2019

Prof. (Dr.) Radhey Shyam Sharma
Vice Chancellor
Dr. Sarvepalli Radhakrishnan Rajasthan
Ayurved University, Jodhpur
Rajasthan – 342037

कल्याण सिंह
राज्यपाल, राजस्थान



राजभवन
जयपुर - 302006

संदेश

मुझे यह जानकर प्रसन्नता हुई है कि डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान आयुर्वेद विश्वविद्यालय द्वारा दिनांक 01.02.2019 से 03.02.2019 तक मातृ एवं शिशु स्वास्थ्य विषयक अन्तर्राष्ट्रीय संगोष्ठी का आयोजन होने जा रहा है।

आयुर्वेद विश्व का प्राचीनतम जीवनविज्ञान है, जो युगों-युगों से मानव स्वास्थ्य को संरक्षित एवं संवर्द्धित करने में महत्त्वपूर्ण योगदान निभा रहा है।

आयोजन के लिए शुभकामनाएँ।

(कल्याण सिंह)



मुख्य मंत्री
राजस्थान

अ.शा.पत्र / मुम. / ओएसडीएफ / 2019
जयपुर, जनवरी, 2019

संदेश

मुझे यह जानकर प्रसन्नता है कि डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान आयुर्वेद विश्वविद्यालय, जोधपुर द्वारा 1 से 3 फरवरी, 2019 तक मातृ एवं शिशु स्वास्थ्य विषयक अन्तर्राष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है।

आयुर्वेद विश्व का प्राचीनतम जीवन विज्ञान है, जिसका मानव स्वास्थ्य को संरक्षित एवं संवर्द्धित करने में महत्वपूर्ण योगदान रहा है। हमारी दिनचर्या, खान-पान, सांस्कृतिक परम्पराओं एवं पर्वों में आयुर्वेद युक्त स्वास्थ्य संरक्षण की वैज्ञानिक पृष्ठभूमि दिग्दर्शित होती है।

स्वस्थ माता एवं शिशु चहुँमुखी समृद्धि का आधार है एवं इनके स्वास्थ्य संरक्षण में आयुर्वेद की सार्वकालिक सामाजिक स्वीकृति रही है। दादी-नानी के नुस्खों के रूप में इस प्राचीनतम स्वास्थ्यमूलक विज्ञान की अजस्रधारा अनवरत भारतीय परम्पराओं में प्रवाहित हो रही है। वर्तमान परिप्रेक्ष्य में इसकी वैज्ञानिकता एवं उपादेयता सम्पूर्ण विश्व में स्वीकार की जा रही है।

माता एवं शिशु के विषय में आयुर्वेद के समग्र योगदान को देखते हुए वैश्विक पटल पर व्यापक प्रचार-प्रसार की दृष्टि से विश्वविद्यालय द्वारा "कौमारकोन 2019" अन्तर्राष्ट्रीय संगोष्ठी का आयोजन अपने आप में महत्वपूर्ण है। आशा है अन्तर्राष्ट्रीय संगोष्ठी में महिला एवं बाल स्वास्थ्य पर आयुर्वेदीय प्रबंधन पर हो रहे शोध कार्यों से महिला एवं बाल स्वास्थ्य के प्रबंधन एवं नीति-निर्माण को गति मिल सकेगी।

मैं मातृ एवं शिशु विषयक इस अन्तर्राष्ट्रीय संगोष्ठी के सफल आयोजन के लिये अपनी शुभकामनाएं प्रेषित करता हूँ।

(अशोक गहलोत)

प्रो. डॉ. राधेश्याम शर्मा
कुलपति, डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान
आयुर्वेद विश्वविद्यालय, जोधपुर

गजेन्द्र सिंह शेखावत
GAJENDRA SINGH SHEKHAWAT



कृषि एवं किसान कल्याण राज्य मंत्री
भारत सरकार

MINISTER OF STATE FOR AGRICULTURE
& FARMERS WELFARE
GOVERNMENT OF INDIA

Jodhpur; 25th January, 2019

शुभकामना संदेश

अत्यंत हर्ष का विषय है कि डा. सर्वपल्ली राधाकृष्णन राजस्थान आयुर्वेद विश्वविद्यालय, ग्लोबल आयुर्वेद कांफ्रेंसिंग और एसोसिएशन ऑफ आयुर्वेदिक प्रोफेशनल्स ऑफ नार्थ अमेरिका के संयुक्त तत्वाधान में दिनांक 01.02.19 से 03.02.2019 तक इन्टरनेशनल कांफ्रेंस ऑफ “मदर एंड चाइल्ड हेल्थकेयर थ्रु आयुर्वेदा” का आयोजन होने जा रहा है। विश्व की प्राचीनतम चिकित्सा पद्धति आयुर्वेद जिसका मुख्य उद्देश्य स्वस्थ व्यक्ति के स्वास्थ्य की रक्षा करने के साथ-साथ रोगी मनुष्य के रोगों का उन्मूलन करना है, जिसका दृष्टान्त भारतवर्ष के प्रत्येक घर-घर में दिखाई देता है जैसे-दैनिक दिनचर्या, खान-पान, सांस्कृतिक परम्पराएं एवं पर्वों का में आयुर्वेदोक्त स्वास्थ्य संरक्षण।

भारतवर्ष में माता एवं पुत्र का संबंध अत्यन्त पावन एवं पवित्र होता है जहाँ पर माता सदैव अपने पुत्र के संरक्षण एवं स्वास्थ्य के प्रति चिंतित रहती है। जिस घर में माता एवं बच्चे स्वस्थ रहते हैं वह घर खुशहाल एवं समृद्ध रहता है। आयुर्वेद की सार्वकालिक सामाजिक स्वीकृति के फलस्वरूप दाढ़ी-नानी के नुस्खों के रूप में इस प्राचीनतम स्वास्थ्यमूलक विज्ञान की अजस्रधारा निर्बाध गति से भारतीय परम्पराओं में प्रवाहित हो रही है एवं वर्तमान परिपेक्ष्य में इसकी वैज्ञानिकता एवं उपादेयता सम्पूर्ण विश्व में स्वीकार की जा रही है। स्वास्थ्य के सन्दर्भ में विशेषकर माता एवं शिशु के विह्वल में आयुर्वेद के समग्र योगदान को देखते हुए, इस विह्वल की महत्वपूर्ण भूमिका के वैश्विक पटल पर व्यापक प्रचार-प्रसार हेतु विश्वविद्यालय द्वारा कौमारकोन 2019 अन्तर्राष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। इस अन्तर्राष्ट्रीय संगोष्ठी में महिला एवं बाल स्वास्थ्य पर आयुर्वेदीय प्रबंधन पर हो रहे शोध कार्यों को प्रस्तुत करने का सुअवसर उपस्थित हुआ है, जो महिला एवं बाल स्वास्थ्य के प्रबंधन एवं नीति-निर्माण में महत्वपूर्ण सिद्ध होगा।

मातृ एवं शिशु विषयक आयोज्य अन्तर्राष्ट्रीय संगोष्ठी के सफल आयोजन के लिये मैं अपनी शुभकामनाएं प्रेषित करता हूँ।

आपही का,

(गजेन्द्र सिंह शेखावत)



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Residence: 22, Mother Teresa Crescent Road, New Delhi-110011, # +91-11-23017125, 23017126 (Telefax)
Jodhpur Office: Atal Seva Kendra, Collectrate Campus, Paota Jodhpur-342001, #0291-2512772
e-mail: g.shekhawat@sansad.nic.in | gssmpjodhpur@gmail.com



सत्यमेव जयते

डॉ. रघु शर्मा
मंत्री,

चिकित्सा एवं स्वास्थ्य,
आयुर्वेद एवं भारतीय चिकित्सा,
चिकित्सा एवं स्वास्थ्य सेवाएं (ईएसआई) एवं
सूचना व जनसम्पर्क विभाग, राजस्थान सरकार।

कार्यालय : 5101, मुख्य भवन, शासन सचिवालय।
निवास : 18, सिविल लाईन्स, जयपुर।
दूरभाष : 0141-2227473, 2220655 (0)

पत्र क्रमांक : 361

दिनांक : 28 जनवरी, 2019.

संदेश

डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान आयुर्वेद विश्वविद्यालय, जोधपुर द्वारा दिनांक 01 से 03 फरवरी, 2019 तक मातृ एवं शिशु स्वास्थ्य विषयक अन्तर्राष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। आयुर्वेद विश्व का प्रचीनतम जीवन विज्ञान है, जो युगो-युगो से मानव स्वास्थ्य को संरक्षित एवं संवर्द्धित करने में महत्वपूर्ण योगदान निभा रहा है।

जननी के रूप में माता और शिशु मानव सृष्टि एवं सभ्यता के चिरन्तन प्रवाह के स्तम्भ हैं। स्वस्थ माता एवं शिशु चहुँमुखी समृद्धि का आधार हैं। स्वास्थ्य के संदर्भ में विशेषकर माता एवं शिशु के विषय में आयुर्वेद के समग्र योगदान को देखते हुए, इस विषय की महत्वपूर्ण भूमिका के वैश्विक पटल पर व्यापक प्रचार-प्रसार हेतु विश्वविद्यालय द्वारा "कौमारकॉन-2019" अन्तर्राष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। इस अन्तर्राष्ट्रीय संगोष्ठी में महिला एवं बाल स्वास्थ्य पर आयुर्वेदीय प्रबन्धन पर हो रहे शोध कार्यों को प्रस्तुत करने का सुअवसर उपस्थित हुआ है, जो महिला एवं बाल स्वास्थ्य के प्रबन्धन एवं नीति निर्माण में महत्वपूर्ण सिद्ध होगा।

मातृ एवं शिशु विषयक आयोज्य अन्तर्राष्ट्रीय संगोष्ठी के सफल आयोजन के लिए मैं अपनी शुभकामनाएं प्रेषित करता हूँ।

(डॉ. रघु शर्मा)

मंत्री

प्रो.राधेश्याम शर्मा
कुलपति
डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान आयुर्वेद विश्वविद्यालय
जोधपुर



क्रमांक : 196/2019

दिनांक : 26.01.2019

It gives me immense pleasure to learn that, the first ever International Conference on Mother and Child Healthcare through Ayurveda “KAUMARCON-2019” is being held at Jodhpur under the aegis of Dr. SR Rajasthan Ayurved University, Jodhpur in collaboration with Global Ayurveda Conference USA and Association of Ayurvedic Professionals of North America. The critical role the health of mother and child play in the well being of the household and societies and nations at large, is undeniable and requires pivotal focus and attention. A well looked after, healthy mother and child is the basis of a progressive, happy and developing society; and India since time immemorial has believed in the benefits of Ayurveda.



They say the great thing about Ayurveda is that its treatments always yield side benefits and never side effects, and propagation and promulgation of this ancient science of Ayurveda for protection and promotion of mother and child is the noblest cause and much needed in today's times.

We must whole-heartedly support such a great initiative taken by the visionaries of Dr. SR Rajasthan Ayurved University, Jodhpur. It is also a matter of immense pride that we have leading organizations Global Ayurveda Conference USA and Association of Ayurvedic Professionals of North America supporting this coming together of a great science, luminaries and being put into effect in the right manner as us societies progress.

On this auspicious occasion, dedicated to such a noble cause, I extend my greetings and felicitations to all those associated with the “KAUMARCON -2019” and wish the International Conference being organized by Dr. SR Rajasthan Ayurved University, a resounding and grand success.

Thanks.

Your 's



Mahendra Bishnoi



सत्यमेव जयते

वैद्य राजेश कोटेचा
Vaidya Rajesh Kotecha



सचिव

भारत सरकार

आयुर्वेद, योग व प्राकृतिक चिकित्सा
यूनानी, सिद्ध, सोवा रिग्पा एवं होम्योपैथी (आयुष) मंत्रालय
आयुष भवन, 'बी' ब्लॉक, जी.पी.ओ. कॉम्प्लेक्स,
आई.एन.ए, नई दिल्ली-110023

SECRETARY

GOVERNMENT OF INDIA

MINISTRY OF AYURVEDA, YOGA & NATUROPATHY
UNANI, SIDDHA, SOWA-RIGPA AND HOMOEOPATHY (AYUSH
AYUSH BHAWAN, B-BLOCK, GPO COMPLEX
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संदेश

अत्यन्त प्रसन्नता का विषय है कि डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान आयुर्वेद विश्वविद्यालय द्वारा दिनांक 01.02.2019 से 03.02.2019 तक मातृ एवं शिशु स्वास्थ्य विषयक अन्तर्राष्ट्रीय संगोष्ठी का आयोजन होने जा रहा है। आयुर्वेद विश्व का प्राचीनतम जीवनविज्ञान है, जो युगों-युगों से मानव स्वास्थ्य को संरक्षित एवं संवर्द्धित करने में महत्त्वपूर्ण योगदान निभा रहा है। भारतवर्ष के घर-घर में दैनिक दिनचर्या में, खान-पान में, सांस्कृतिक परम्पराओं एवं पर्वों में आयुर्वेदोक्त स्वास्थ्य संरक्षण की वैज्ञानिक पृष्ठभूमि दिग्दर्शित होती है।

जननी के रूप में माता और शिशु मानव-सृष्टि एवं सभ्यता के चिरन्तन प्रवाह के स्तम्भ हैं। स्वस्थ माता एवं शिशु चहुँमुखी समृद्धि का आधार है एवं माता और शिशु के स्वास्थ्य संरक्षण में आयुर्वेद की सर्वकालिक सामाजिक स्वीकृति के फलस्वरूप इस प्राचीनतम स्वास्थ्यमूलक विज्ञान की अजस्रधारा निर्बाध गति से भारतीय परम्पराओं में प्रवाहित हो रही है एवं वर्तमान परिप्रेक्ष्य में इसकी वैज्ञानिकता एवं उपादेयता सम्पूर्ण विश्व में स्वीकार की जा रही है। स्वास्थ्य के सन्दर्भ में विशेषकर माता एवं शिशु के विषय में आयुर्वेद के समग्र योगदान को देखते हुए, इस विषय की महत्त्वपूर्ण भूमिका के वैश्विक पटल पर व्यापक प्रचार-प्रसार हेतु विश्वविद्यालय द्वारा "कौमारकोन 2019" अन्तर्राष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। इस अन्तर्राष्ट्रीय संगोष्ठी में महिला एवं बाल स्वास्थ्य पर आयुर्वेदीय प्रबंधन पर हो रहे शोध कार्यों को प्रस्तुत करने का सुअवसर उपस्थित हुआ है, जो महिला एवं बाल स्वास्थ्य के प्रबंधन एवं नीति-निर्माण में महत्त्वपूर्ण सिद्ध होगा।

मातृ एवं शिशु विषयक आयोज्य अन्तर्राष्ट्रीय संगोष्ठी के सफल आयोजन के लिये मैं अपनी शुभकामनाएँ प्रेषित करता हूँ।

(राजेश कोटेचा)

दिनांक : 24.01.2019



Ashwini Bhagat

I.A.S.

Pr. Secretary AYUSH
Government of Rajasthan

Message

It gives me immense pleasure to know that PG departments of Kaumarbhritya and Prasuti evam Stri Roga, Dr. S.R. Rajasthan Ayurved University, Jodhpur are organizing Kaumarcon-2019 International Conference on Mother and Child Healthcare Through Ayurveda on 01-03 February 2019, in which dignitaries from India and abroad are participating to disseminate their vast experience and knowledge in the field of Mother & Child healthcare.

World's most ancient health science i.e. Ayurveda has a unique approach to protect and promote health as well as to treat diseases of variety since long back, therefore Ayurveda provides a hope to contribute a lot management of health problems of Mother and child.

I hope that **Kaumarcon-2019** will indeed fulfill the mandate of this International Conference. I welcome dignitaries from India and abroad participating in Kaumarcon-2019 and congratulate organizers to take up this unique endeavour.

I extend my warm wishes for the success of this KAUMARCON-2019.


(Ashwini Bhagat)



डा. मनोज नेसरी
DR. MANOJ NESARI

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भारत सरकार
GOVERNMENT OF INDIA
आयुर्वेद, योग व प्राकृतिक चिकित्सा,
यूनानी, सिद्ध एवं होम्योपैथी (आयुष) मंत्रालय
MINISTRY OF AYURVEDA, YOGA & NATUROPATHY
UNANI, SIDDHA AND HOMOEOPATHY (AYUSH)
आयुष भवन, बी ब्लॉक, जी पी ओ कॉम्प्लेक्स,
आई एन ए, नई दिल्ली - 110023
AYUSH Bhawan, 'B' Block, GPO Complex,
INA, New Delhi - 110023

MESSAGE



Progress and bright future of any country depends upon health status of children. Mother and child health is a very vital subject of National importance especially when India has a high maternal and child mortality rate. The country represents about one quarter of the global burden of infant and under five deaths. In the ancient time, the Indian culture and Ayurveda having understood the importance of subject, had paid lot of attention to take care of would be as well as expectant mothers and also to the health and nutrition of children. Many of the simple interventions were being followed as part of custom/rituals and traditions including highly nutritious diet containing calcium, proteins etc. In the history of modern India, MCH was first initiated in the early 1900s. Madras state was the first to establish a separate Maternal Welfare section in the Office of Director of Health Services in 1931. India in the year 1974, established a National Policy for Children and a Children's Board. The National Health Policy 2017 has given more emphasis on integration of Ayurveda and other AYUSH systems in health care including MCH. The Sustainable Development Goals 2 and 3 have also lot of focus on reducing MMR and IMR. AYUSH has been identified as one of collaborating Ministry along with Ministry of Health and FW. Ministry of AYUSH has taken many initiatives in this direction including AYUSH intervention in 'PoshanAbhiyan', developing Ayurvedic guidelines for *GarbhiniParicharya*, Yoga protocol for pregnancy etc.

At this juncture, I Congratulate the Rajasthan Ayurveda University and team for taking great efforts in organizing this International Conference on Mother and Child Health Care through Ayurveda. Topics discussed in this conference would definitely help the new generation to understand recent developments in the subject. I wish the organisers for a very successful Conference.


Vaidya Manoj Nesari

New Delhi
29th January, 2019

Gram : "AYUSH"



प्रो. वैद्य के. एस. धीमान

महानिदेशक

Prof. Vd. K.S. Dhiman

Director General



केन्द्रीय आयुर्वेदीय विज्ञान अनुसंधान परिषद्
आयुष मंत्रालय

CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES

Ministry of AYUSH, Govt. of India

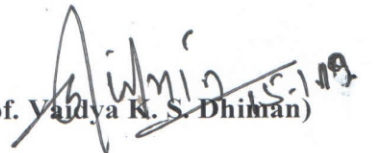
Message

The health of mother and child is a key indicator of general health of a society. It is a well known fact that a healthy mother is much more likely to have a healthy child. Both mothers and children constitute a large group of population of a country which is a vulnerable or high risk group. Pregnant women, infants, and small children are more susceptible to have infections and many other causes of illness as compare to others. Hence, they are in a need of special health care and attention than the other groups.

It is a matter of great pleasure that Dr. Sarvapalli Radhakrishnan Rajasthan Ayurveda University, Jodhpur is going to organize the first ever International Conference on Mother and Child Healthcare through Ayurveda – "KAUMARCON-2019" in collaboration with Global Ayurveda Conference USA and Association of Ayurvedic Professionals of North America (AAPNA) on 1-3 February, 2019 wherein the luminaries of Ayurveda will evolve effective and applied strategy for protection and promotion of mother and child health and for prevention and management of various disorders thereof.

The WHO has recognized and accepted the significance of Ayurveda and has given the directives to incorporate Ayurveda in the mainstream of healthcare system globally considering its efficacy to treat the variety of disorders as well as its potential to enhance the immunity level of individuals. The commonly observed life style disorders of mother and child can effectively managed through Ayurveda. The contribution of Ayurveda to health care system of the country may reduce the maternal, neonatal and child under-five mortality and morbidity and may enhance the quality of life, by promoting the reproductive health of families and individual women, children and adolescents.

I hope that this conference will achieve the goal for which it is being organized and wish the successful completion of this conference.


(Prof. Vaidya K. S. Dhiman)

जवाहर लाल नेहरू भारतीय चिकित्सा एवं होम्योपैथी अनुसंधान भवन
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डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान आयुर्वेद विश्वविद्यालय
Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University

जोधपुर - 342 037 / Jodhpur-342 037

Prof. (Dr.) Radhey Shyam Sharma

Vice-Chancellor

Message

It is a moment of immense pleasure for me to greet the organizing departments to dream and enact accordingly to make it happen so as to organize this event in glorious way this precious opportunity to create a global knowledge disseminating platform by transgressing geographical borders thereby transforming every participant should get the essence of the great eternal health science i.e. Ayurved with special reference to Mother and Child Health Care on the theme of Acharya Charak *TADVIDHYA SAMBHASHA PARISHAD*" by igniting the "holistic approach" in their minds and acts, finally met morphing them into excellent Ayurved practitioners. To serve the mandate of acharyas this coming event is being organized to make a platform to discuss the current challenges with the aim of increasing understanding i.e. *(to be added originally of quotation... viman 15/15 with translation)*.

This conference enriched by distinguished International faculty and experts of the field of MCH to exchange the experiences and treasure of academic knowledge which will expose International environment of academic advancement and to evolve applied strategy to contribute a lot in the field of mother and child health care with the active involvement of manpower, technology and wisdom of ayurveda because quality mother and child health care still remains a problem for most families in developing countries like India.

I welcome and greet both the organizing departments for this great event for every young aspirant of Ayurved, inquisitive mind and dreamer who will experience the thrill of soaring high and even higher in this coming workshop. I welcome all dignitaries and delegates from India and abroad to the historic conference. At the same time I cordially thank Ministry of AYUSH, Govt. of India and Department of Ayurveda and Indian Medicine, Govt. of Rajasthan for their active cooperation. I extend my warm wishes for the success of this KAUMARCON-2019.



Prof. (Dr.) Radhey Shyam Sharma
Vice Chancellor

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उत्तराखण्ड आयुर्वेद विश्वविद्यालय

UTTARAKHAND AYURVEDA UNIVERSITY

(उत्तराखण्ड सरकार का स्वायत्तशासी निकाय; विश्वविद्यालय अनुदान अधिनियम, 1956 की धारा 2(एफ) के अन्तर्गत मान्यता प्राप्त; सदस्य, भारतीय विश्वविद्यालय संघ
(An Autonomous body of Uttarakhand Government; registered u/s 2(f) of UGC Act, 1956; Member, Association of Indian Universities)

प्रो (डॉ) अभिमन्यु कुमार
PROF (Dr) ABHIMANYU KUMAR
कुलपति / Vice-Chancellor



Dated: 22nd January, 2019

MESSAGE

It's matter of pleasure for me to know that DSR Rajasthan Ayurved University, Jodhpur is organising an International Conference KAUMARCON-19 on '*Mother and Child Health Care through Ayurveda*' in collaboration with Global Ayurveda Conference & Association of Ayurvedic Professionals of North America, USA on 1-3 February, 2019.

Mother and Child health refers to the health of mothers, infants, children, and adolescents; which constitutes a major population of the community. Though much of the advancement in maternal and child health has been made but still lacking to achieve the desired goal. An important challenge for Mother and Child Health Care as a profession is to promote change outside the traditional boundaries of MCH in order to improve the health of mothers, infants, children, and adolescents. Ayurveda very well deals with preventive, promotive and curative aspect for the care of this specific group of population and can be explored through clinical experience, research and interaction among stakeholders.

The seminar will provide an opportunity to the experts to share their views and could suggest strategy for more focussed approach on improvement of mother and child health care through. I congratulate Organising Committee for this commendable effort along with Prof Radhey Shyam Sharma, Vice-Chancellor DSR Rajasthan Ayurved University, Jodhpur for his superb leadership.

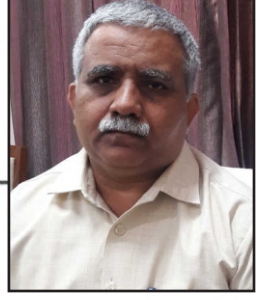
(ProfAbhimanyuKumar)

श्री कृष्णा आयुष विश्वविद्यालय कुरुक्षेत्र

(Estb. By Haryana Act No. 25 of 2017)

उमरी रोड, सैक्टर-8, कुरुक्षेत्र, हरियाणा-136118

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शुभकामना संदेश

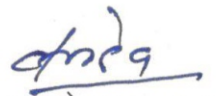
अत्यन्त प्रसन्नता का विषय है कि डॉ. सर्वपल्ली राधाकृष्णन् राजस्थान आयुर्वेद विश्वविद्यालय द्वारा दिनांक 01.02.2019 से 03.02.2019 तक मातृ एवं शिशु स्वास्थ्य विषयक अन्तर्राष्ट्रीय संगोष्ठी का आयोजन होने जा रहा है। देश का भविष्य मातृ एवं शिशु स्वास्थ्य पर ही निर्भर है, जो समाज की संकल्पना का आधार है।

आयुर्वेद विश्व का प्राचीनतम जीवनविज्ञान है, जो युगों-युगों से मानव स्वास्थ्य को संरक्षित एवं सर्वोत्थित करने में महत्त्वपूर्ण योगदान निभा रहा है। भारतवर्ष के घर-घर में दैनिक दिनचर्या, खान-पान, सांस्कृतिक परम्पराओं एवं पर्वों में आयुर्वेदोक्त स्वास्थ्य संरक्षण की वैज्ञानिक पृष्ठभूमि दिग्दर्शित होती है।

जननी के रूप में माता और शिशु मानव-सृष्टि के निरन्तर प्रवाह के स्तम्भ हैं। स्वस्थ माता व शिशु चहुँमुखी समृद्धि का आधार है। माता और शिशु के स्वास्थ्य संरक्षण में आयुर्वेद की सार्वकालिक सामाजिक स्वीकृति के फलस्वरूप दादी-नानी के नुस्खों के रूप में इस प्राचीनतम स्वास्थ्यमूलक विज्ञान की अजस्रधारा निर्बाध गति से भारतीय परम्पराओं में प्रवाहित हो रही है एवं वर्तमान परिप्रेक्ष्य में इसकी वैज्ञानिकता एवं उपादेयता सम्पूर्ण विश्व में स्वीकार की जा रही है। स्वास्थ्य के सन्दर्भ में विशेषकर माता एवं शिशु के विषय में आयुर्वेद के समग्र योगदान को देखते हुए, इस विषय की महत्त्वपूर्ण भूमिका के वैश्विक पटल पर व्यापक प्रचार-प्रसार हेतु विश्वविद्यालय द्वारा "कौमारकोन 2019" अन्तर्राष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। इस अन्तर्राष्ट्रीय संगोष्ठी में महिला एवं बाल स्वास्थ्य पर आयुर्वेदीय प्रबंधन पर हो रहे शोध कार्यों को प्रस्तुत करने का सुअवसर उपस्थित हुआ है, जो महिला एवं बाल स्वास्थ्य के प्रबंधन, संवर्धन एवं नीति-निर्माण में महत्त्वपूर्ण सिद्ध होगा।

मातृ एवं शिशु विषयक अन्तर्राष्ट्रीय संगोष्ठी के सफल आयोजन के लिये मैं अपनी शुभकामनाएँ प्रेषित करता हूँ।

दिनांक:- 24.01.2019


डा० बलदेव कुमार,
कुलपति,
श्री कृष्णा आयुष विश्वविद्यालय, कुरुक्षेत्र।



अखिल भारतीय आयुर्वेद संस्थान ALL INDIA INSTITUTE OF AYURVEDA

(आयुष मंत्रालय, भारत सरकार के अंतर्गत स्वायत्त संस्थान)
(An Autonomous Organization under the Ministry of AYUSH, Govt. of India)

प्रो. (डॉ.) तनुजा मनोज नेसरी

Prof. (Dr.) Tanuja Manoj Nesari

एम. डी. (द्रव्यगुण), पीएचडी. (आयुर्वेद द्रव्यगुण)

MD (Dravyaguna), PhD (Ayurveda Dravyaguna)



शुभकामना सन्देश

अत्यंत प्रसन्नता का विषय है कि डॉ. सर्वपल्ली राधाकृष्णनन राजस्थान आयुर्वेद विश्वविद्यालय द्वारा दिनांक 01.02.2019 से 03.02.2019 तक मातृ एवं शिशु स्वास्थ्य विषयक अंतर्राष्ट्रीय संगोष्ठी का आयोजन होने जा रहा है। आयुर्वेद विश्व का प्राचीनतम जीवनविज्ञान है, जो युगों- युगों से मानव स्वास्थ्य को संरक्षित एवं करने में महत्वपूर्ण योगदान निभा रहा है। भारतवर्ष के घर-घर में दैनिक दिनचर्या में, खान-पान में, सांस्कृतिक परम्पराओं एवं पर्वों का में आयुर्वेदोक्त स्वास्थ्य संरक्षण की वैज्ञानिक पृष्ठभूमि दिग्दर्शित होती है।

जननी के रूप में माता और शिशु मानव-सृष्टि एवं सभ्यता के चिरन्तन प्रवाह के स्तम्भ हैं। स्वस्थ माता एवं शिशु चहुँमुखी समृद्धि का आधार है एवं माता और शिशु के स्वास्थ्य संरक्षण में आयुर्वेद की सार्वकालिक सामाजिक स्वीकृति के फलस्वरूप दादी-नानी के नुस्खों के रूप में इस प्राचीनतम स्वास्थ्यमूलक विज्ञान की अजस्रधारा निर्बाध गति से भारतीय परम्पराओं में प्रवाहित हो रही हैं एवं वर्तमान परिप्रेक्ष्य में इसकी वैज्ञानिकता एवं उपादेयता सम्पूर्ण विश्व में स्वीकार की जा रही है। स्वास्थ्य के संदर्भ में विशेषकर माता एवं शिशु के विषय में आयुर्वेद ले समग्र योगदान को देखते हुए, इस विषय की महत्वपूर्ण भूमिका के वैश्विक पटल पर व्यापक प्रचार- प्रसार हेतु द्वारा "कौमारकोन 2019" अंतर्राष्ट्रीय संगोष्ठी का आयोजन किया जा रहा है। इस अंतर्राष्ट्रीय संगोष्ठी में महिला एवं बाल स्वास्थ्य पर आयुर्वेदीय प्रबंधन पर हो रहे शोध कार्यों को प्रस्तुत करने का सुअवसर उपस्थित हुआ है, जो महिला एवं बाल स्वास्थ्य के प्रबंधन एवं नीति- निर्माण में महत्वपूर्ण सिद्ध होगा।

मातृ एवं शिशु विषयक आयोज्य अंतर्राष्ट्रीय संगोष्ठी के सफल आयोजन के लिए मैं अपनी शुभकामनाएँ प्रेषित करती हूँ।

(प्रो. तनुजा मनोज नेसरी)

निदेशक

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Message

I am extremely delighted to know that Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur is organising its first ever International Conference on Mother and Child Healthcare through Ayurveda - "KAUMARCON-2019". This important conference is scheduled to be held on 1st to 3rd Feb, 2019 in University campus and is being organised in collaboration with Global Ayurveda Conference USA and Association of Ayurvedic Professionals of North America (AAPNA).

Theme of the conference is very relevant and is the need of the day to bring forward the Ayurvedic concepts of Mother and Child Healthcare. The discussions and deliberations in this conference will not only influence delegates from the country but will also have global impact in the management of health issues related to mother and child. It is matter of pride and worth appreciating that Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University; Jodhpur has taken a lead in this direction and proposed conference will prove a mile stone. I congratulate the organisers for this unique effort.

I am sure that this conference will provide an opportunity to all the participants from various parts of the country and abroad to learn and share their knowledge and experiences and will have never ending impact. I take this opportunity to convey my heartiest congratulations and best wishes on this occasion and wish the Conference a grand success.

Prof. Sanjeev Sharma

Director, NIA



Institute for Post Graduate Teaching & Research in Ayurveda

(Financed by Ministry of AYUSH, Govt. of India, New Delhi)
Gujarat Ayurved University (Accredited Grade "A" by NAAC (CGPA – 3.28))
Opp. B - Division Police Station, Gurudwara Road, Jamnagar - 361 008

IPGT & RA

Prof. Dr. Anup Thakar
Director

23rd January, 2019

Message

Even though there is decline in mortality rates of both mother and child, India is still lagging behind in achieving the desired goal. Ayurveda can very well contribute in achieving this goal as preservation of health is its fundamental aim. To achieve this it introduces certain important and exclusive concepts like pre-conceptional care for health of both the mother and child. Ayurveda comprehensively deals with mother and child health throughout. It gives lucid yet detailed regimes right from conception of the idea of motherhood thus taking utmost care not only by decreasing the mortality but giving the highest level of health to both mother and child.

I congratulate the organizers of "KAUMARCON-2019" International Conference on Mother and Child health care to address such an important issue. I hope this conference will throw light on various aspects of mother and child health and also propagate importance and uniqueness of Ayurveda in this regard globally.

I convey my best wishes to the conference for its grand success.




(Prof. Dr. Anup B. Thakar)
Director

No. : Dean/FAY/2018-19/337

Dated: 14-1-19



Message

I am happy to note that SR Rajasthan Ayurved University, Jodhpur is organizing International conference on mother and Child health care KAUMARCON-2019 for the 1st time to target mothers and child, the major part of society which constitutes about 34% of the total population. I congratulate Prof RS Sharma ji, the renowned Ayurvedic physician and an able administrator with great vision to use AYUSH system for bringing wellness in the society by early diagnosis and preventive measures. The theme of the conference is the need of the hour, as females in general need special attention for health care. It is not only to focus the mother but also to adolescent girls, who are potential candidate to be mother. The holistic approach of Ayurveda, by using “Shad-Kriya-kal” can significantly contribute to prevention of a disease and cure of patient. The main stake for achieving this goal is the balanced diet, homemade medicinal supplements and awareness towards proper hygiene. The efforts should be made to develop the user’s friendly modules to sensitize the society to learn these techniques by using common spices, local herbs, seasonal fruits and vegetables instead of using commercially available medicines, which are always expensive. Prevention of communicable diseases and training of man power from AYUSH sector, to deliver these services, especially in villages, is the need of the country.

Another aspect is to develop scientific basis behind ancient knowledge of various procedures and medicines of Ayurveda. Designing the observational studies and good publications are essential to develop evidence based Ayurveda for its globalization. I am sure the participants would have panel discussion with learned subject experts from India and abroad, to develop hypothesis for setting objectives for future research in this field.

The recommendations of this academic exercise would be a landmark in this field and pave a path for future research and clinical practices. I wish the conference a great success.

YB Tripathi

(Prof Yamini Bhusan Tripathi)
Dean,



Dr. Shekhar Annambhotla

BAMS, MD (Ayu), LMT, ERYT, RAD

Founder - Ojas, LLC - Ayurveda Wellness Center

Founder - AAPNA - Association of Ayurvedic Professionals of North America, Inc.

Founder - Global Ayurveda Conferences, LLC

Director - Global Ayurveda Academy, USA

Founder - Dosha Botanicals, LLC

567 Thomas Street, Coopersburg, Pennsylvania, USA

Phone: +1-484-347-6110

We are delighted that the International Conference "Mother & Child Health Care Through Ayurveda" is organized by Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur, Rajasthan, India from 1st to 3rd, February 2019 in alliance with the Association of Ayurvedic Professionals of North America (AAPNA), Global Ayurveda Conferences (GAC), USA.

Baala Chikitsa (Kaumarabritya) (Mother and Child Health Care), is one of the branches of Ashtanga Ayurveda, which has not been well practiced in the modern era. The wealth of knowledge postulated in the ancient textbook Kashyapa Samhita has enumerated in detail on prenatal, intranatal and postnatal care. It is important to consider the parental influence and environmental factors also in determining the future health of the child. The present conference will bring forward practical and scientific applications of various health concerns in the field of mother and child health care through Ayurveda. The conference will illuminate several simple and cost-effective remedies for various disorders.

Wishing you all success,

Dr. Shekhar Annambhotla

January 5, 2019



KAUMARCON-2019, International conference on *Mother & child health care through Ayurveda*'

It's always high to think of a healthy society from healthy childhood in to the shape of any nation for its pride with the prosperity & growth. Irrespective of variations in life style and health needs & associations, it is very common to think from basic or fundamental level of changes occurring from pre natal to postnatal care of pregnancy and even before to prepare for the good progeny according to Ayurveda.

Considering above the hour of time to rewind our clocks to dig out the glories of child health on an international scenario is much appreciable for this event to unfold. I wish from my heart to congratulate the organising committee and academics behind this global event for its success. Looking forward to participate in above gala event, in glorious weather and its beauty of Rajasthan, & Jodhpur, my own country.

With regards and best wishes from

Dr. Venkata N joshi MD PhD Ayurveda

74 warren road, Croydon, London. CR0 6PF.

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ayurjoshi@yahoo.co.in

00 44 7986603951.

From the desk of organizing secretary.....

Children are the future of society and their mothers are guardians of that future. Mothers are much more than caregivers and homemakers, undervalued as these roles often are. They transmit the cultural history of families and communities along with social norms and traditions. Mothers influence early behavior and establish lifestyle patterns that not only determine their children's future development and capacity for health, but shape societies. Because of this, society values the health of its mothers and children for its own sake and not merely as a contribution to the wealth of the nation. Present health scenario of Mother and Child Health is now a central point of concern globally. Ayurveda has a great role in this regard as all aspects of Mother and Child Health have been taken care of in Ayurveda since a long back.



Ayurveda has advocated certain regimens to make mother healthy in every state of life including , Garbhini Paricharya to get better progeny, various Sanskaras are described to protect the baby, to evaluate congenital defect if any to assess both health and illness to boost immunity and growth and development. Daily model regimens and dietary regimens & protocol etc are advised by ancient Acharyas for positive health of mother and child equally. Swarnaprashan is a logical tool to cure variety of illness, brain retardation and is a immune modulator. All these may help reduce mortality and morbidity of mother and child as well. Plenty of references are available in Brihatrayee and Laghutrayee to treat series of illness of mother and child. In the city of Jodhpur, University's PG department of Kaumarbhritya had launched Swarnaprashan program on first national Ayurved day on 28 October 2016 with the support of Dabur India Ltd under the kind guidance of Hon'ble vice chancellor Prof. Radhey Shyam Sharma and same is regularly organized on every pushya nakshatra day every month and more than 40,000 doses of Swarnaprashan were given to participating children till now. It has shown charismatic results on positive health of a child in terms of alleviating recurrence of respiratory infections, malnutrition, anemia, mental retardation, diarrhea etc. **Jodhpur model of Swarnaprashan** has become now a source of inspiration for Ayurveda professionals to spread the goodness and benefits of Swaranaprashan across the country.

Ayurveda is the only health service which has treasure of immune modulator herbs and herbo-mineral compounds. As we know that only natural compounds can easily be adapted by the body to provide rasayana effect for a long duration.

I express my humble gratitude to **Honorable Vice-Chancellor Prof. (Dr.) Radhey Shyam Sharma** for his blessing and patronage for organizing to this international conference. He has encouraged and guided us at every step to make this small initiative a memorable and successful event. I welcome all dignitaries of Ayurveda, Kaumarbhritya and Prasuti Tantra evam Stree Roga faculties in particular, from India and abroad for their prompt and enthusiastic response to participate in **KAUMARCON 2019**.

Moreover I thank Dr. Shekhar Annambhotla, president global Ayurved conference, USA and Dabur India Ltd for being conference partners. I am very thankful to my university faculty administration, staff and scholars to be an active part of this organizing team of the conference.

A handwritten signature in blue ink, appearing to be 'Dr. Prem Prakash Vyas'. The signature is stylized and written in a cursive-like font.

(Dr. Prem Prakash Vyas)
National Organizing Secretary & Chief Coordinator
KAUMARCON 2019

Distinguished Guests of the Inaugural Function

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Hon'ble Minister, Medical Health & AYUSH,
Government of Rajasthan

Padma Shri Vaidya Rajesh R. Kotecha

Secretary to Govt. of India, Ministry of AYUSH

Shri. Ashwini Bhagat ^{IAS}

Principal Secretary, Department of AYUSH, Govt. of Rajasthan

Dr. K.S.Dheeman

DG, CCRAS, New Delhi

Dr. Manoj Nesari

Advisor, Ministry of AYUSH, Govt of India

Dr. Shekhar Annambhotla

President, Global Ayurveda Conferences, USA

Prof. (Dr.) Abhimanyu Kumar

Hon'ble Vice Chancellor, UAU, Dehradun, UK

Prof. (Dr.) Tanuja Nesari

Director, All India Institute of Ayurveda, New Delhi

Dr. Inamura Hiroe Sharma

Vice President, Ayurveda Society of Japan, Osaka

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Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University
Jodhpur, Rajasthan
KAUMARCON-2019
THREE DAYS INTERNATIONAL CONFERENCE
ON
Mother And Child Health Care Through Ayurveda
Dated 1-3 February 2019

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A BRIEF INTRODUCTION OF UNIVERSITY

Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University was established by the Government of Rajasthan vide Rajasthan Ayurved University Act, 2002 (which received the assent of His Excellency, the Governor of Rajasthan on 25th September 2002) to develop & incorporate an affiliating University for the purpose of ensuring, efficient and systematic instruction, teaching, training, research and development in Ayurved, Unani, Naturopathy, Homoeopathy, Siddha and Yoga systems of Medicine. It is the second Ayurved University in India after Gujarat Ayurved University, Jamnagar. Prof. Ram Harsh Singh an eminent scholar (then Dean, Faculty of Ayurved at BHU) was appointed as the first Vice-chancellor of the University.

The University was provided the land at Karwar village at Nagaur Road (National Highway 65) on 30th of November 2002 by the Govt. of Rajasthan.

The foundation stone of the University was laid down by the then Chief Minister of Rajasthan, Shri Ashok Gehlot on 10 of March 2003 (Phalguna Shukla Saptami, Vikrami Samvat 2059) in the gracious presence of the then Hon'ble State Minister of Ayurved Sri Radhey Shyam Ganganagar, the then CCIM President Vaidya Sri Ram Sharma, Vice-chancellor Prof. Ram Harsh Singh, local MLAs Sri Bhanwar Lal Balai and Shri Jugal Kabra, Secretary Ayurved Sri Ashok Shekhar and other dignitaries.

Initially the University started its functioning in modest area provided at 82, Income Tax Colony, Paota C Road, Jodhpur but the space available was not enough for proper functioning of the University. Later on after the sanction of constituent University College of Ayurved and University Ayurved Nursing Training Centre a new campus at Jhalamand was provided by Dept. of Health and Family Welfare. In 2007, University had been shifted to its own campus at Karwar, Nagaur Road, Jodhpur.

Jodhpur, the biggest city of Rajasthan after Jaipur is emerging rapidly as an educational hub. Jai Narain Vyas University, National Law University and Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur National University, Indian Institute of Technology Rajasthan, All India Institute of Medical Sciences, Desert Medicine Research Centre (DMRC), National Institute of Fashion & Technology, National Institute of Footwear Design, Arid Forest Research Institute (AFRI), Defence Laboratory of DRDO, State Remote Sensing Centre, Central Arid Zone Research Institute (CAZRI), Agriculture University and Sardar Patel Police University, Jodhpur etc. all these are situated here. High Court of Rajasthan is also situated in Jodhpur. Thus a number of Educational Colleges of national repute are situated in Jodhpur.

Jodhpur is famous for its history & culture. A number of national and international tourists visit its historical places like Mehrangarh Fort, Jaswant Thara, Balasamand Lake, Ummed Palace, Mandore Garden, Girdikot, Panchkunda Cinetophs etc. Jodhpur is also well known for the Red Jodhpur Stone known as Chittar Stone.

Infrastructure

Presently University Has Following Constituent Units Working Under Its Ambit

University College of Ayurved, Kadwad Campus

University College of Ayurved was established in 2004 in Dr. S.R. Rajasthan Ayurved University Campus. The college was established as a role model for the affiliated colleges as an exemplary University for teaching, research and overall development of Ayurved Education.

College has fourteen departments, a full fledged hospital, departmental laboratories furnished with the latest equipments and a library. Efficient and hardworking Ayurved Faculty from all over India is fully devoted for the upliftment of the Ayurved Science as well as the college and University.

University Unani Medical College And Hospital, Tonk

This College is running in Charai village near Tonk city. 50 students are admitted for Bums course each year in this college. The college has 60 Bedded Hospital well equipped with all the necessary equipments and providing Unani medical health services by esteemed Unani specialists.

University Ayurved Nursing Training Centre, Kadwad Campus

This centre was also established in 2004 as a role model for the affiliated Nursing Colleges. This was aimed to provide the quality Ayurved Nursing Education and providing quality para medical professional in the field of Ayurved.

University Kaniram Salagram Tak Ayurved Nursing Training Centre, Magara Punjala, Jodhpur

This is another Ayurved Nursing Training centre of University which is running at Magara Punjala, Jodhpur and imparting Ayurved Nursing Education.

Hospital & Patient Care Services Available in University Hospital in University's Kadwad Campus

At present University College of Ayurved has its own Hospital with OPD and IPD facilities & a well equipped laboratory within DSRRAU main campus at Kadwad, Jodhpur. The specialized OPD services in Kayachikitsa, Panchkarma, Shalya, Shalakyas, Stri-Prasuti, Bala Roga with Swarnaprashna Unit and Vaccination Unit, Swasthya Rakshan, Nasha Mukti Unit, Cancer Unit, Diabetes Clinic and emergency are available in this hospital. Presently Indoor Patient Services are available with 220 beds in the hospital. The university hospital has a well developed Shalya-karmagar (O.T.) and Panchkarma-karmagar where a large number of patients are getting treatment every day.

COURSES AVAILABLE IN UNIVERSITY

	Courses	Duration (in years)	Eligibility (Academic Qualification)
1	Ph.D(Ayurved)	2-6 Years	M.S. / MD (Ayurveda) Passed
2	M.D.(Ayurved) / M.S.(Ayurved)	03 Years	B.A.M.S. Passed
3	M.D.(Homeopathy)	03 Years	B.H.M.S. Passed
4	Bachelor of Ayurvedic Medicine and Surgery(B.A.M.S.)	5 ½ Years	10+2 passed in Science Biology (50 % marks are compulsory in Physics/Chemistry/Biology)
5	Bachelor of Homeopathy Medicine and Surgery(B.H.M.S.)	5 ½ Years	10+2 passed with Science Biology
6	Bachelor of Unani Medicine and Surgery(B.U.M.S.)	5 ½ Years	10+2 passed with Science Biology (50 % marks are compulsory in Physics/Chemistry/Biology) & Urdu as additional subject in Secondary / Hr. Secondary level.
7	Bachelor of Naturopathy & Yoga Science (B.N.Y.S.)	5 ½ Years	10+2 passed with Science Biology
8	B.Sc. Nursing (Ayurveda)	04 Years	10+2 in any discipline
9	Diploma in AYUSH Nursing and Pharmacy(DAN & P)	03 Years	10+2 passed in any discipline
10	D. Pharma(Ayurveda)	02 Years	10+2 in any discipline
11	Certificate Course in Yoga & Naturopathy	01 Years	10+2 passed in any discipline
12	Certificate Course in Pancha Karma Technical Assistant	01 Years	10+2 passed in any discipline
13	Certificate Course in Panch Karma	03 Months	B.A.M.S. Passed
14	Certificate Course in Kshar Sutra	03 Months	B.A.M.S. Passed
15	PG Certificate Course in Geriatrics	03 Months	B.A.M.S. Passed
16	Certificate Course in Osteopathy & Marmachikitsa	01 Years	10+2 in any discipline

Chronology of Vice Chancellors Tenure

1. Prof. Ram Harsh Singh	First Vice Chancellor	17-02-2003 to 16-02-2006
2. Shri BL Arya	Acting Vice Chancellor	17-02-2006 to 26-03-2006
3. Prof. Banwari Lal Gaur	Vice Chancellor	27-03-2006 to 16-03-2011
4. Shri Ramesh Kumar Jain	Acting Vice Chancellor	17-03-2011 to 24-05-2011
5. Prof. Radhey Shyam Sharma	Vice Chancellor	26-05-2011 to 16-09-2015
6. Shri Sanjay Dixit	Acting Vice Chancellor	17-09-2015 to 19-02-2016
7. Prof. Radhey Shyam Sharma	Vice Chancellor	19-09-2016 till date

Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur

KAUMARCON- 2019
INTERNATIONAL CONFERENCE
ON

Mother And Child Health Care Through Ayurveda

Dated 1-3 February 2019

PROGRAMME SCHEDULE

DAY-1 / 01-02-2019 / FRIDAY

8.30 - 10.00am	Registration Breakfast	University College of Ayurveda Dining Hall
10.00 - 11.30am	Plenary session -1st Chairperson- Prof. (Dr) Radhey Shyam Sharma Hon'ble VC Coordinator- Prof. Sanjeev Sharma, Prof. O. P. Dave Prof. Mahesh Dixit Lead speakers- 1. Prof. Abhimanyu Kumar Hon'ble VC, UAU 2. Prof. Ena Sharma, Paprola, HP 3. Prof. Ved Prakash Sharma , Jaipur 4. Prof. Surekha Dewaikar, Mumbai 5. Dr. J.L.N Shastry, Dabur India Ltd.	Programme Hall, University College of Ayurveda
11.30 - 1.00 pm	Inaugural Session- Welcome Ceremony 1. Welcome Speech By Hon'ble Vice chancellor 2. Introductory Speech- Organizing secretary 3. Speech By Guests of Honour 4. Speech by Chief Guest 5. Speech By Chairperson 6. Vote of Thanks	Programme Hall, University College of Ayurveda
1.00 - 2.00pm	Lunch	Dining Hall
2.00 - 3.00pm	1st - Parallel Sessions In Three Halls 1. Kashyap Hall- Ground Floor 2. Sushruta Hall – First Floor 3. Jeevaka Hall - First Floor	University College of Ayurveda
3.00-3.15pm	Tea break	
3.15- 4.15pm	2nd Parallel Sessions In Three Halls 1. Kashyap Hall- Ground Floor 2. Sushruta Hall – First Floor 3. Jeevaka Hall - First Floor	University College of Ayurveda
4.15 - 5.15 pm	3rd - Parallel Sessions In Three Halls 11. Kashyap Hall- Ground Floor 2. Sushruta Hall – First Floor 3. Jeevaka Hall - First Floor	University College of Ayurveda
5.15 - 5.30 pm	Tea break	
5.30 - 6.30 pm	Quiz	Programme Hall, University College of Ayurveda
6.30 - 8.00 pm	Cultural Programme	Programme Hall, University College of Ayurveda
8.00 - 9.00 pm	Dinner	Dining Hall

Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur

KAUMARCON- 2019
INTERNATIONAL CONFERENCE
ON

Mother And Child Health Care Through Ayurveda

Dated 1-3 February 2019

PROGRAMME SCHEDULE

DAY -2 / 02-02-2019 / SATURDAY

8.30 - 9.45 am	Breakfast	Dining Hall
9.45 -11.00 am	Chairperson- Prof. (Dr) R.V.S. Roy Coordinator- Dr. P.P.Vyas Plenary session -2nd 1 Dr. Binod Joshi, Uttarakhand 2. Prof B.M.Singh, BHU, Varanasi 3. Prof. Neelam BHU, Varanasi	Programme Hall, University College of Ayurveda
11.00 -12.00 Noon	4th - Parallel Sessions In Three Halls 1. Kashyap Hall- Ground Floor 2. Sushruta Hall – First Floor 3. Jeevaka Hall - First Floor Poster Presentation – First Floor	University College of Ayurveda
12.00 - 12.15pm	Tea	
12.15 - 1.15pm	Chairperson- Prof. (Dr) S.K.Khandel Coordinator- Dr. A. Neelima Reddy Plenary session -3rd 1. Prof. L.P.Dei, IPGTR&A, Jamnagar 2.Dr. Inamura Hiroe Sharma, Japan 3. Prof. Pooja Bhardwaj, BHU 4. Dr. Rajgopal S, AIIA	Programme Hall, University College of Ayurveda
1.15 - 2.15pm	5th Parallel Sessions In Three Halls 1. Kashyap Hall- Ground Floor 2. Sushruta Hall – First Floor 3. Jeevaka Hall - First Floor	University College of Ayurveda
2.15 - 3.15pm	Lunch	Dining Hall
3.15 pm-9.00 pm	Departure for sight seen & Dinner	By Bus

Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur

KAUMARCON- 2019
INTERNATIONAL CONFERENCE
ON

Mother And Child Health Care Through Ayurveda

Dated 1-3 February 2019

PROGRAMME SCHEDULE

DAY -3 / 03-02-2019 / SUNDAY

8.30 - 9.45 am	Breakfast	Dining Hall
9.45 - 11.00 am	Chairperson- Prof. (Dr) Ved Prakash Sharma Coordinator-Dr. Harish Kumar Singhal Plenary session -4th 1. Prof. Shailaja U, Hassan, Karanataka 2. Dr. Venkata Narayana Joshi , London 3. Prof. D.N. Mishra, Lucknow, UP	Programme Hall, University College of Ayurveda
11.00 - 12.00 Noon	6th - Parallel Sessions In Three Halls 1. Kashyap Hall- Ground Floor 2. Sushruta Hall First Floor 3. Jeevaka Hall - First Floor	University College of Ayurveda
12.00 - 12.15pm	Tea	
12.15 - 1.15pm	Chairperson- Prof. (Dr) K.P.Vyas Coordinator- Dr. Rashmi Sharma Plenary session -5th 1. Prof K.S.Patel.IPGT&RA, Jamnagar 2. Prof. Sujata Kadam, AIIA, Delhi	Programme Hall, University College of Ayurveda
01.15 - 2.15pm	7th - Parallel Sessions In Three Halls 1. Kashyap Hall- Ground Floor 2. Sushruta Hall – First Floor 3. Jeevaka Hall - First Floor	University College of Ayurveda
02.15 - 3.00pm	Lunch	Dining Hall
3.00 - 4.00pm	Valedictory programme	Programme Hall, University College of Ayurveda

Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur, Rajasthan

KAUMARCON- 2019

INTERNATIONAL CONFERENCE ON

Mother And Child Health Care Through Ayurveda

Dated 1-3 February 2019

DAY-1

PARALLEL SESSION – FIRST

DATED - 01/02/2019

KASHYAP HALL

TIME –2.00 PM TO 3.00 PM

S. No.	Author	Topics
	Chair person	Prof. O.P Dave
	Resource Person	Dr. Bhagwan Sahay Sharma, New Delhi
	Co chair person	Ms.Nicole Fish, San Francisco, USA
	Coordinator (1)	Dr. Devendera Chahar
	Coordinator (2)	Dr. Monika Verma
	Rapporteur (1)	Dr. Asha Devi Prasad Singh
	Rapporteur (2)	Dr. Himanshu Chouhan
1.	Dr. Bhagwan Sahay Sharma	Ayurvedic Management Of Dengue Fever
2.	Dr. Rajesh Gupta	Garbhashyapatan (LSCS) in Sushruta Samhita
3.	Dr. Meetajhala	Effect of ArkaKshar and JatyadiTailaPichu in Cervical Erosion
4.	Dr. Anukriti Gaur	Study of Prevalence of iron Deficiency Anemia in a adolescent girls & efficacy of Vajra Vatak Mandoor in its management
5.	Dr. Priyanka Hajare	Role Of Bala Taila Matra Basti And Yoni Pichu In Sukh Prasava
6.	Dr. Vishwanath Singh Tekam	Role of Ayurveda in promoting maternal and child health care
7.	Dr. Laxmi Gupta	Garbhini Paricharya (Antenatal Care) : An Ayurvedic Review
8.	Dr Rama Pal	Breast disorder during pregnancy & lactation
9.	Dr Manavi Sharma	Exclusive breast feeding important for mother & child
10.	Dr. Vijay Kumar Jatoliya	Efficacy And Mode Of Action Of “Samvardhan Ghrita”
11.	Dr. Anita Lalwani	Ayurvedic And Modern Approach To Umbilical Cord Care
12.	Dr. Anjali Meena	Ayurvedic and modern approach navajata shishu paricharya care

PARALLEL SESSION – FIRST

DATED - 01/02/2019

SUSHRUTA HALL

TIME - – 2.00 PM TO 3.00 PM

S. No.	Author	Topics
	Chair person	Prof. Govind Sahay Shukla
	Resource Person	Prof. Bharti K NIA Jaipur
	Co chair person	Prof. Pradeep Bhardwaj BHU
	Coordinator (1)	Dr. Dinesh Chandra Sharma
	Coordinator (2)	Dr. Jitendera Swami
	Rapporteur (1)	Dr. Vivek Tiwari
	Rapporteur (2)	Dr. Usha Damor

1.	Prof. Bharti K	Standardization of Sthanika Chikitsa
2.	Dr. Krishna Bahadur Singh	Relevance of Swarnaprashana Usage in Children at Present Time: A Critical Review
3.	Dr. Meemansa	Concept of Pre-Conceptional Care and Garbhini paricharya in Ayurveda
4.	Dr. Isha Jain	Ayurvedic Insight In Tonsillitis : A Comprehensive Review
5.	Dr. Neetu Singh	A Review On Sutika Paricharya And Its Importance
6.	Dr. Sanju Rao	Relevance of Masanumasik chikitsa of Garbhasrava
7.	Dr. Durgawati Devi	Preconception regimen for better progeny
8.	Dr. Anju Baberwal	Congenital Deformity described in Vrahtrayee with special reference to the Cleft lip and cleft palate
9.	Dr. Pankaj potalia	Preview Of Congenital Hernia
10.	Dr. Dashrath singh bhati	Review Of Ayurvedic Approach Of “Jal -Sirsh” Wrs To Hydrocephalus
11.	Dr. Tarun Meena	Purview Of Appendicitis In Childhood
12.	Dr Archana Meena	Ayurvedic Approach on the Management of Juvenile Rheumatoid Arthritis

PARALLEL SESSION – FIRST

DATED - 01/02/2019

JEEVAKA HALL

TIME - 2.00 PM TO 3.00 PM

S. No.	Author	Topics
	Chair person	Prof. C. M Jain
	Resource Person	Dr. Pushpalatha.B
	Co chair person	Dr. Raja Ram Aggrawal
	Coordinator (1)	Dr. Vinod Gautama
	Coordinator (2)	Dr. Rahul Parasar
	Rapporteur (1)	Dr. Murl Manohar Anuragi
	Rapporteur (2)	Dr. Nisha Sharma
1.	Dr. Pushpalatha.B	Clinical Evaluation of efficacy of Madhura Aushadha Sidda taila Matravasti and Yonipichu in sukhaprasava
2.	Dr.Rajaram Agarwal	Effect And Mode Of Action Of Krimi Mudgar Rasa On Krimi Roga
3.	Dr. Surendra Soni	The importance of “Lehana” in children- A scientific Approach
4.	Dr. Usha Kumari	Antenatal care in Ayurveda through Masanumasik Paricharya- A Review
5.	Dr. Khushboo Jha	Role of Ayurveda in promoting Safe Motherhood
6.	Dr. Moushami Kulhare	Review on Research works on Garbhini Pandu at N.I.A. Jaipur
7.	Dr. Richa Tiwari	A Clinical Study of Apamarga kshar in the Management of Cervical Erosion :A case series
8.	Dr. Monika	Garbhini pricharya : as a preventive measure for maternal Health care
9.	Dr. Jyoti	Gharbhini chardi : management through ayurveda
10.	Dr. Susheela choudhary	Role of Pathya-Apathya in Poly cystic ovarian syndrome
11.	Dr. Pinky Chauhan	Clinical study of palashadi varti in the management of Pichchhila yoni w.s.r. abnormal vaginal discharge

PARALLEL SESSION – SECOND

DATED - 01/02/2019

KASHYAP HALL

TIME – 3.15 PM TO 4.15 PM

S. No.	Author	Topics
	Chair person	Prof. Mahendra Sharma
	Resource Person	Prof Rakesh Kumar Sharma Paprola
	Co chair person	Dr. Vandana Kumari AIIMS, Delhi
	Coordinator (1)	Dr. Manoj Adlakha
	Coordinator (2)	Dr. Narendra Singh Rajpurohit
	Rapporteur (1)	Dr. Hemant Kumar
	Rapporteur (2)	Dr. Seema
1.	Prof Rakesh Kumar Sharma	Learning Disabilities in Children-A prevailing Challenge in 21 st century -in the parallel session
2.	Dr. Manoj Adlakha	Ayurvedic Medicinal Plants for Boosting Immunity in Children
3.	Dr. Ajay Kushwaha	Emerging trends in the management of cerebral palsy in Children –Research updates in Ayurveda
4.	Dr. Priyanka Kumari	Scope of Lehana in Children :Research Update from Ayurveda
5.	Dr. Pooja Arora	Understanding Of Ulbaka Roga In Neonates With Special Reference To Meconium Aspiration Syndrome And Its Multisystem Complications
6.	Dr. Vinod Gandharva	Ayurvedic Management Of Neonatal Jaundice
7.	Dr. Preeti Prajapat	Ayurvedic Management of Bronchial Asthma in Children
8.	Dr. Manisha Choudhary	Ayurvedic Mangement Of Juvenile Rheumatoid Arthritis
9.	Dr. Suraj Choudhary	Importance of Snehana Karma in Bal Roga
10.	Dr Varsha	Literary Review: Role Of Triphala Kwath In Yoniprakshalan
11.	Dr Renu Bala Swami	Utility Of Garbhadhan Sanskar In Ayurved
12.	Dr Ankita Sharma	Ayurvedic Approach Of Post- Natal Care (Sutika Paricharya)

PARALLEL SESSION – SECOND

DATED - 01/02/2019

SUSHRUTA HALL

TIME -- 3.15 PM TO 4.15 PM

S. No.	Author	Topics
	Chair person	Prof K.P.Vyas
	Resource Person	Prof. Ramveer Sharma Udaipur
	Co chair person	Prof. Sangeeta Gehlot, BHU
	Coordinator (1)	Dr. Brahmanand Sharma
	Coordinator (2)	Dr. Anamika Soni
	Rapporteur (1)	Dr. Manavi Sharma
	Rapporteur (2)	Dr. Neetu Singh Siyog
1.	Prof. Ramveer Sharma	Vandhayatva (PCOD)
2.	Dr. Sanjay Srivastava	Maternal and Child healthcare: A staggering challenge
3.	Dr. Anamika Soni	The importance of “Lehana” in children- A scientific Approach
4.	Dr. Devendra Kumar	Role Of Panchakarma In Duchenne Muscular Dystrophy In Children
5.	Dr. Nitu Sinha	Clinical Study of Sishu Kalyanaka Ghrita & Kala Basti in the management of cerebral Palsy in children

6.	Dr.Kailash Chandra Kataria	Critical Analysis Of Different Panchkarma Procedures Used In Childhood Bronchial Asthma
7.	Dr. Shipra Gupta	Various Doses And Formulations Used In Pediatric Care
8.	Dr. Rachana Sharma	Efficacy And Mode Of Action Of Phal Ghrit
9.	Dr. Himanshu Chouhan	Holistic Approach in management of childhood obesity
10.	Dr. Seema	Contribution of Ayurveda in Care of Newborn
11.	Dr. Morey Akshay Anand	Panchakarma procedures Used in Disorders of Children
12.	Dr. More Mayur Mothabhau	Scope of lehan Immunomodulation in children

PARALLEL SESSION – SECOND

DATED - 01/02/2019

JEEVAKA HALL

TIME – 3.15 PM TO 4.15 PM

S. No.	Author	Topics
	Chair person	Dr. Rajesh Kumar Sharma
	Resource person	Prof. Bhagyashree Rot, Osmanabad
	Co chair person	Dr. Reetesh Verama
	Coordinator (1)	Dr. Vishnu Dutta Sharma (Shalya)
	Coordinator (2)	Dr. Vijaypal Tyagi
	Rapporteur (1)	Dr. Rama Pal
	Rapporteur (2)	Dr. Anjali Meena
1.	Prof. Bhagyashree Rot	A clinical Study to evaluate the efficacy of Satpuspa Tail Uttarbasti in the treatment of Anovulatory cycle
2.	Dr. Parmanand Upadhyaya	Psychological disorders in children & their management through Ayurveda
3.	Dr Jyoti Jain	Episiotomy wound care in ayurveda: A single case study
4.	Dr Reetesh verma	A Critical Review Of Swarnprashan As Boon For Children "
5.	Dr. Usha singh	Essential factors in conception as per ayurveda classicals
6.	Dr. Ankita Sharma	Myopia In Children: An Ayurvedic Review
7.	Dr. Gourav Kumar Rathor	Clinical Understanding Of Phakka Roga In The Present Ayurvedic Paediatrics Practice
8.	Dr Hemant Kumar	Physiology of parturition w.s.r. to Ayurveda
9.	Dr Megha Shukla	Physiology of Stress during Pregnancy and its Management w.s.r. to Ayurveda
10.	Dr Sangeeta Singh	Physiological Aspect of "GARBHOSHAN" in Ayurveda
11.	Dr.Noori Aara	Scope Of Lehan In Immunomodulation In Children
12.	Dr. Madhu Parihar	Alcohol Abuse In Pregnant Women And It's Effect On Child
13.	Dr. AnjnaKumari	Promotionof Lactation and Management of Lactation Disorders
14.	Dr. Vineet Kumar Verma	"To evaluate the effect of Kumarabharana Rasa in the management of Tundikeri (Chronic Tonsillitis)
15.	Dr. Chavan Laxman Naryan	Antenatal, Perinatal and Postnatal care of Mother & Child

PARALLEL SESSION – THIRD

DATED - 01/02/2019

KASHYAP HALL

TIME – 4.15 PM TO 5.15 PM

S. No.	Author	Topics
	Chair person	Dr. Govind Gupta
	Resource Person	Dr. Nisha Ojha, NIA jaipur
	Co chair person	Dr. Rajbir Singh
	Coordinator (1)	Dr. Sanjay Srivastava
	Coordinator (2)	Dr. Dinesh Kumar Rai
	Rapporteur (1)	Dr. Rajesh Soni
	Rapporteur (2)	Dr. Rahul Kumar
1.	Dr. Nisha Ojha	Ayurveda For Preventive Health
2.	Dr. Sunita Godara	Fast food consumption in children –A life style disorder
3.	Dr. Vaibhav Jaisawal	Start Right: Annaprashan Samskara
4.	Dr. Monika	Evaluation of Knowledge Attitude Practices (KAP) Questionnaire on Pandu Roga (Iron Deficiency Anaemia) in Adolescent Girls -A Survey Study
5.	Dr. Jyoti Mishra	Panchakarma skills in Bal -Roga
6.	Dr. Suman Gihar	Bala Rasayana As Immunization In Public Health: Rewards And Challenges
7.	Dr. Chitra Devi Sharma	Role of Balchaturbhadra churna and yastimadhu churna in dantobhed-janya roga w.s.r. Dentition disorder
8.	Dr Preeti Verma	Role of Ayurveda in management of rickets
9.	Dr. Suman Bishnoi	Role Of Ayurvedic Drugs In The Management Of Scabies
10.	Dr. Diksha Trivedi	Garbhini Paricharya And Its Clinical Importance
11.	DrMunni Yadav	Role Of Ayurveda In The Management Of Gudabhramsia W.S.R. To Prolapse Rectum
12.	Dr Pooja Sharad Rajguru	
13.	Dr Murlī Manohar Anuragi	Role Of Panchkarma And Rasayana In Balrog
14.	Dr Sarita Meena	Specific Therapeutic Panchakarma Procedure In Pediatric Patients: A Classical Review

PARALLEL SESSION – THIRD

Dated - 01/02/19

SUSHRUTA HALL

TIME – 4.15 PM TO 5.15 PM

S. No.	Author	Topics
	Chair person	Dr. P.P.Vyas
	Resource Person	Dr. S.N Doranala, Delhi
	Co chair person	Dr. Devendra Chahar
	Coordinator (1)	Dr. Rakesh Gaur
	Coordinator (2)	Dr. Gyan Prakash Sharma
	Rapporteur (1)	Dr. Poonam Rathore
	Rapporteur (2)	Dr. Jyoti Yadav

1.	Dr. S.N Doranala	Scope of Panchakarma In Chronic Childhood disorders- Experiential insights
2.	Dr. Devendra S. Chahar	Kaumarbhritya in Charka Samhita
3.	Dr. Vinod Kumar	Effect Of Tiktadighrita In Management Of Dushta Vrana (Mild To Moderate Infected Wound)
4.	Dr Harsha Singh	A Clinical study on effect of Vatankura Nasya in the management of high risk pregnancies-A preventive protocol
5.	Dr. Rajeev Kumar Srivastava	Role of play in the development of holistic health of the children
6.	Dr. Bimal Kumar Panda	Ayurvedic Approach Of Obesity In Pediatrics
7.	Dr. Akanksha Soni	Prevention of Anaemia during pregnancy through ayurveda
8.	Dr. Rampal Somani	Study of some specific sub-therapeutic pediatric Ayurvedic formulations available in market and their misuse
9.	Dr. Masooda	Lehana Karma in Children
10.	Dr. Stuti Sharma	Garbhadhan Samskara : An inimitable Ayurvedic approach for better progeny
11.	Dr. Nida Qamar	Ayurvedic approach on Lactational failure
12.	Dr. Anita	Role of Yonidhoopan in Female Genital Health
13.	Dr. Santosh Choudhary	Importance of panchakarma procedures in bal roga

PARALLEL SESSION – THIRD

Dated - 01/02/2019

JEEVAKA HALL

TIME – 4.15 PM TO 5.15 PM

S. No.	Author	Topics
	Chair person	Dr. Parmanand Upadhyaya
	Resource Person	Dr. Amit Kataria
	Co chair person	Dr. Vishnu Dutta Sharma (Roga Vigyan)
	Coordinator (1)	Dr. Shyoram Sharma
	Coordinator (2)	Dr. Upasana Sharma
	Rapporteur (1)	Dr. Aanchal
	Rapporteur (2)	Dr. Shalini Upadhyaya
1.	Dr. Amit Kataria	Malnutrition – A National Shame
2.	Dr. Mahesh Sharma	Sishunam- Ashishunam Cha Bastkarma Amritam
3.	Mr. Saurabh Khichi	Theoretical aspects of physicochemical characterization & analytical specification of Swaranaprashan an approach to its standardization
4.	Dr. Harinee.S	Role of nasya in bala roga
5.	Dr. Surabhi Nemiwal	Importance of virechana karma in bal roga
6.	Dr. Rekha Kanwar	Role Of Swedana In Bal Roga
7.	Dr. Tambal Ram Juiya	Role Of Panchakarma And Rasayana In Balroga
8.	Dr. Ankita	Life Style Modification Is The First Line Treatment In Pcos
9.	Dr. Narendra Kumar Meena	Evaluation Of Effect Of Dhanyak Churan In Upper G.I.T. Disorders In Pregnancy W.S.R To Garbhaj Chhardi & Quot;
10.	Dr. Veena Shrimali	Role of Satavari in management of lactation insufficiency-A case study
11.	Dr. Renu rani	Efficacy of Nasya in the management of C.P. : A clinical study
12.	Dr. Ram Shankar Gautam	Effect of some Herbomineral drugs on Pama(Scabies)
13.	Dr. Rajesh Kumar soni	Scrotal pathology in children
14.	Dr. Ritu Kumari	Uttarbasti-A Sustainable Procedure Described For Gynecological Disorders

DAY-2
FOURTH PARALLEL SESSION
Dated - 02/02/2019
KASHYAP HALL
TIME – 11.00 AM TO 12.00 NOON

S. No.	Author	Topics
	Chair person	Prof V.P.Vy as (Ujjain)
	Resource Person	Prof.GP Garg, Haridwar
	Co chair person	Dr. Rakesh Kumar Sharma
	Coordinator (1)	Dr. Arun Dadhich
	Coordinator (2)	Dr. Vishnu Dutta Sharma (Roga Vigyan)
	Rapporteur (1)	Dr. Monika Goel
	Rapporteur (2)	Dr. Jay Prakash Gupta
1.	Prof.GP Garg	Applied Aspect of Kasyap Samhita
2.	Dr. Rakesh Kumar Sharma	Pumsvana Sanskara- A Critical Review
3.	Dr. Brahmanad Sharma	Role Of Panchkarma In Cerebral Palsy: A Critical Review
4.	Dr. Arun Dadhich	Ethical issues During Ayurveda Prescription Writing in Children
5.	Dr. Gadge Indrajeet Shankerrao	Garbhadhan Related Sanskar for better Progeny
6.	Vd.Shrutika A. Kamble	Importance of yoga during pregnancy for better progeny
7.	Dr.Vidya Uddhavrao Pashte	To study the efficacy of jyotishmati Ghrita on Intelligent Quotient (IQ) & memory of school going age children
8.	Dr. munesh kumari	Ayurvedic Concept Of Vyadhikshamatva (Immunity)
9.	Dr.Preeti Chorotiya	Role Of Tankyadi Yoga In Malnutrition (Karshya)
10.	Dr.Anjana Dhakar	Role Of Herbal Medicine In Prevention Of Nabhi Paka (Umbilical Sepsis) In Neo Nates
11.	Dr Sumitra jajra	An Ayurvedic Approach In Management Of PIH
12.	Dr. Laxmi Choudhary	Conceptual Study On Garbhini Pandu W.S.R. To Anaemia In Pregnancy

FOURTH PARALLEL SESSION
Dated - 02/02/2019
SUSHRUTA HALL
TIME -- 11.00 AM TO 12.00 NOON

S. No.	Author	Topics
	Chair person	Dr. Pramod Kumar Mishra
	Resource person	Dr. Kamini Dheeman, AIIA, Delhi
	Co chair person	Dr. Ram Kumar Bhamu, Udaipur
	Coordinator (1)	Dr. Meeta Jhala
	Coordinator (2)	Dr. Manisha Goel
	Rapporteur (1)	Dr. Ekta Shrama
	Rapporteur (2)	Dr. Noori Aara
1.	Dr. Kamini Dheeman	Ayurvedic Approach in Various Gynecological Disorders
2.	Dr. Jaya Kachchwaha	Role of Brahmi(Bacopa monnieri) for Attention-Deficit/Hyperactivity Disorder (ADHD) in Children:
3.	Dr Aanchal	Panchakarma Management Of Cerebral Palsy in Children : A Single Case Study

4.	Dr. Monika Goel	Concept Of Pathya In Preconceptional Care
5.	Dr. Shalini Upadhyaya	A Review Of Management Of Karshya (Malnutrition) In Children
6.	Dr.Usha Jangir	Sutika Jwara Prevention & Management
7.	Dr.Arun Abasaheb Shinde	Role of Parnabeej in the management of infected caesarean Section Wound- A case study
8.	Dr.Amrita Mishra	Role Of Punarnavadi Kwath In The Management Of Pregnancy Induced Hypertension
9.	Dr. Shubha Pareek	Role of Lehana enhancing child immunity
10.	Dr. Nitin Sharma	Supportive Ayurveda Management For Attention Deficit Hyperactivity Disorder In Children
11.	Dr.Usha Damor	Contribution of Ayurveda in management of neonatal jaundice

FOURTH PARALLEL SESSION

Dated - 02/02/2019

JEEVAKA HALL

TIME - 11.00 AM TO 12.00 NOON

S. No.	Author	Topics
	Chair person	Dr. Dharmendra Kumar Sharma, Indore
	Resource person	Dr Ajay Kumar Sharma
	Co chair person	Dr. Rampal Somani
	Coordinator (1)	Dr. Rashmi Sharma
	Coordinator (2)	Dr. Sunita Godara
	Rapporteur (1)	Dr. Adil Ansari
	Rapporteur (2)	Dr. Ravi Sharma
1.	Dr Ajay Kumar Sharma	Role of Ayurveda In childhood obesity - A literally Review
2.	Dr Vinod Kumar Gautam	Role of herbal formulation in the management of shewta pradara (leucorrhoea)
3.	Dr. Sharma Sujata	Management Of Cow Milk Protein Allergy – An Ayurvedic View
4.	Mrunal sunil Bole	Development Of Mobile Application And Webpage “ Balaayu Poshana” For Nutrition Education And Counselling For Primipara.
5.	Dr. Aarti Semwal	Management of respiratory disorder in children
6.	Dr. Avdesh Dangwal	Management Of Sever’s Disease In Children (Calcaneal Apophysis) – An Ayurvedic View
7.	Dr. Deepika Nagar	Roll Of Abhyanga And Matra Basti In Manament Of Down Syndrome
8.	Dr. Sunita Bola	Role Of Abhyanga And Shirodhara In Management Of Attention Deficit Hyperactivity Disorder (ADHD)
9.	Dr. Richa Parmar	Ayurvedic panchakarma procedures used in children with cerebral palsy
10.	Dr.Reshu Garg	Lifestyle Disorders In Children And Its Management In Ayurveda
11.	Dr. Jyoti Yadav	Worm Infestation in Children : An Ayurvedic Approach and Management
12.	Dr. prem prakash	Ayurvedic Management Of Childhood Bronchial Asthama

**Poster Presentation
Jury Board
Dated – 02/02/2019 Saturday
Time- 11.00 AM TO 12.00 NOON**

- | | |
|------------------------------------|------------------------|
| 1. Prof. D.N. Mishra – Chairperson | 5. Prof. O.P Dave |
| 2. Dr. V.P.Vyas (Ujjain) | 6. Dr. Rajesh Sharma |
| 3. Prof. Govind Sahay Shukla | 7. Dr. Nisha Ojha |
| 4. Prof. Mahendra Sharma | 8. Dr. Ram Kumar Bhamu |

S.NO.	Name	Title of Poster
1.	Dr. Meena Kumar Sethi	Safety And Efficiently Health Of Mother And Child Through Alternative Therapy (Yoga And Naturopathy)
2.	Shubhada Dadasaheb Hake	Prenatal Yoga - yoga for the 2!!
3.	Dr.Pradnya Baburao Palekar	Garbha Sanskar -effective answer for fetomaternal well-being
4.	Bhanu Pratap palke	Resuscitation of new born
5.	Dr. Tagu	Researches done and to be done on Garbhashaya Arbuda(Uterine Fibroid)

FIFTH PARALLEL SESSION

Dated - 02/02/2019

KASHYAP HALL

TIME – 1.15 PM TO 2.15 PM

S. No.	Author	Topics
	Chair person	Dr. Manoj Kumar Sharma
	Resource Person	Prof. Sushila Sharma, NIA, Jaipur
	Co chair person	Dr. Rajesh Gupta
	Coordinator (1)	Dr. Manoj Kulshreshth
	Coordinator (2)	Dr. Kavita Sharma
	Rapporteur (1)	Dr. Sharda Kanwar Chouhan
	Rapporteur (2)	Dr. Harsh Sharma
1.	Prof. Sushila Sharma	Women Healthcare through Ayurveda
2.	Dr. Dinesh Chandra Sharma	Role of Rasa Dhatu in Stanya Uttapati (Formation of Mother Milk) with special
3.	Dr. Govind Prasad Gupta & Dr Vishnu Dutt Sharma	Ayurvedic system of medicine concept and approach a good mother health
4.	Dr. Divya	Role Of Swarna Prashan To Boost Immunity In Children
5.	Dr. D.B.Chavan, and Others	An Open Label, Retrospective, Controlled Study To Evaluate Efficacy Of Daruharidra Kashaya (An Herbal Preparation) In Management Of Bahupitta Kamala With Special Reference To Neonatal Jaundice.

6.	Dr. Anop Singh	Applied Aspect of Ligation of Umbilical Cord
7.	Dr. Sukriti Shastri	Study Of Dauhridaya Avavmanana W.S.R. To Teratology
8.	Dr.Suljeet	Ayurvedic Review of Sutika Paricharya
9.	Dr. Nitika Sharma	Sutika Swasthawritta – A Rejuvenation Therapy
10.	Dr.Rakesh Gaur	Evaluation of Impact of RASA Sindoor and Arogya Vardhini Vati in Cases of Acute Pancreatitis : A Case Study
11.	Dr. Sakshi Sharma	Role Of " Social Obstetrics" And "Social Pediatrics " In Mother Child Health
12.	Dr Zahida Khan	Role of Rajayapana Basti in the management of Duchene Muscular Dystrophy (DMD)

FIFTH PARALLEL SESSION
Dated - 02/02/2019
SUSHRUTA HALL
TIME - - 1.15 PM TO 2.15 PM

S. No.	Author	Topics
	Chair person	Dr. A. Neelima Reddy
	Resource Person	Dr. Snehlata Dornala, Khurja, UP
	Co chair person	Dr.Rashmi Sharma
	Coordinator (1)	Dr. Brij Bihari Mishra
	Coordinator (2)	Dr. Shyoram Sharma
	Rapporteur (1)	Dr. Preeti Chorotiya
	Rapporteur (2)	Dr. Anjana Dhakar
1.	Dr. Snehlata Dornala	Nutritional Error And Disorders Scope Of Ayurvedic Dietetics
2.	Dr. Chandan Singh	Medicinal plants in Ayurveda w.s.r to Balrog
3.	Dr. Rashmi Sharma	Importance of Yoga in Post Partum Period
4.	Dr. Rahul Parashar	Control the A.D.H.D. by chanting the OMKAR
5.	Dr Asha Devi Prasad Singh	Ayurvedic and Modern approach of Hydrocephalus w.s.r.to Upshirshak Roga
6.	Dr. Rekha Rani	A Conceptual Review Of Kaphaja Yoni Vyapad (Non Specific Valvo Vaginitis)
7.	Dr. Pratima K. Hiwale	Neonatal care through Ayurveda w.s.r to kaumarbhritya
8.	Dr.JyotiKaushik	Immunomodulation in children through lehana
9.	Dr.Brahm Dutt Sharma	Clinical Study To Assess The Effect Of Amalaki Syrup On Recurrent Respiratory Tract Infections
10.	Dr Rohit Singh	Use of Snehan in Common childhood disorders
11.	Dr.Vijay Bhushan Sharma	Role of brahmi for attention deficit hyperactivity disorder (adhd) in children.
12.	Dr. Yashpal Singh	Counseling Psychology For Behavior Disorders
13.	Dr. Trapti Agrawal	Sutika Paricharya: Desired need of present era

FIFTH PARALLEL SESSION**Dated - 02/02/2019****JEEVAKA HALL****TIME - 1.15 PM TO 2.15 PM**

S. No.	Author	Topics
	Chair person	Prof. Shambhu Dayal Sharma
	Resource person	Prof. Reena Pandey, Haridwar
	Co chair person	Dr. Neetu
	Coordinator (1)	Dr. Harish Kumar Singhal
	Coordinator (2)	Dr. Mahesh Indra
	Rapporteur (1)	Dr. Sumitra Jajhra
	Rapporteur (2)	Dr. Savita P K
1.	Prof. Reena Pandey	Children with Emotional & Behavioural Disorders
2.	Dr Ritu Kapoor	Effects of Lead toxicity in children
3.	Dr. Meenakshi Sharma & Dr. GyanPrakash Sharma	Pain Managment Through Panchakarma Janubasti With Nirgundi Tail In Sandhigata Vata W.S.R. Knee Oa
4.	Dr. Prashant Kumar Gupta	Digital Nutrition
5.	Dr. Preeti Chouhan	An Approach to Garbha Sanskara practices: An Ayurvedic Pont of View
6.	Dr.Savitri Katariya	Child Health Care Through Resuscitation (Prana Pratyagaman) in Ayurveda.
7.	Dr. Choudhary Kuldeep	Ayurveda Way Of Promoting Child Health Care
8.	Dr. Jyoti Singh	Lehan As Immunomodulation In Children
9.	Dr. Neha roat	Role Of The Panchkarma In Down Syndrome [Trisomy 21]
10.	Dr.Sunitakumari	Role Of Shirodhara In Autism Spectrum Disorder (ASD)
11.	Dr. Divya sharma	Preconceptional care in Ayurveda for Shreyashi praja (Classical Review)
12.	Dr. Manish choudhary	Applied Aspect of Karnvedana Ceremony in today Prespective
13.	Dr Abhilasha	Review Of Grabhini Paricharya (Anti Natal Care)In Ayurveda

DAY-3
SIXTH PARALLEL SESSION
Dated - 03/02/2019
KASHYAP HALL
TIME – 11.00 AM TO 12.00 NOON

S. No.	Author	Topics
	Chair person	Prof. Kalpana S Patel, Jamnagar
	Resource Person	Dr. Pratibha Singh AIIMS Jodhpur
	Co chair person	Dr. Dinesh Chandra Sharma
	Coordinator (1)	Dr. Ritu Kapoor
	Coordinator (2)	Dr. Preeti Swami
	Rapporteur (1)	Dr. Rekha Rani
	Rapporteur (2)	Dr. Nikita Panwar
1.	Dr. Pratibha Singh	Stem Cells
2.	Dr. Harish Kumar Singhal	Applied Aspect On Importance Of Abhyanaga (Massage) In Infantile Period
3.	Dr. Savitri	Childhood Obesity
4.	Dr. Jaidev Gehija	Prevalance Of Karshya In Aanganwadis Of Jamnagar City W.S.R. To Malnutrition - A Crossectional Study
5.	Dr. Vikash Kaushik	Promotion of lactation & management of lactation disorders
6.	Dr. Praveen Kumar Sharma	Ayurvedic Management Of Guillain-Barre Syndrome: A Pediatric Case Report
7.	Dr. Abhishek Rajpurohit	Application Of Pancha Mahabhoota's Concept Of Naturopathy At The Age Of Infant And Toddler W.S.R. To Ksheerap, Ksheerannad And Annad Vaya
8.	Dr. Arif Khan Goran	Efficacy of yoga in pregnancy and postpartum phase
9.	Dr. Harsh Sharma	Importance of Stanya w.s.r. to Breastfeeding
10.	Dr Meenakshi Meena	Effect of Artava w.s.r. to Garbhadhan
11.	Dr. Nisha sharma	Importance of kashyap's Vedna -Adhyay In Diagnosis Of Pediatric Disorder
12.	Dr. Sheela darangi	Behavior Disorder : ADHD [Attention Deficit Hyperactivity Disorder

SIXTH PARALLEL SESSION
Dated - 03/02/2019
SUSHRUTA HALL
TIME -- 11.00 AM TO 12.00 NOON

S. No.	Author	Topics
	Chair person	Dr. G.P.Garg
	Resource person	Dr. V.K.Kori, Jamnagar
	Co chair person	Dr. Govind Gupta
	Coordinator (1)	Dr. Arun Dadhich
	Coordinator (2)	Dr. Rajendra Purvia
	Rapporteur (1)	Dr. Usha Jangir
	Rapporteur (2)	Dr. Punam Kumari
1.	Dr. V.K.Kori	A Review of Various Ayurvedic treatment modalities in the management of Cerebral Palsy
2.	Dr. Manisha goyal	Review of swarna (gold) in different dosage forms with pediatric perspective.

3.	Dr. Upasana sharma	Impact of garbh sanskar (ANC) on a healthy progeny
4.	Dr. Mahesh Kumar	Importance of Yoga in Postpartum recovery
5.	Dr. Neetu Singh Siyag	Role of Ayurveda In The Management Of Cerebral Palsy In Children.
6.	Dr Nidhi Awasthi	Present scenario of kumarbhritya in rajasthan
7.	Dr. Sharda Kanwar Chauhan	Ayurvedic Management Of Diarrhoea In Children
8.	Dr. Ekta Sharma	Ayurvedic Approach Towards Protein Energy Malnutrition (Pem)
9.	Dr. Jyoti Kaushal	Childhood Obesity :As a lifestyle problem and its Management through Ayurveda
10.	Dr. Ankit Kumar Garg	Role Of Stanyadoshaharadravya In Improving The Quality Of Stanya –A Critical Review
11.	Dr.Vinod Kumar Swami	Management of Rickets in Children through Ayurveda
12.	Dr. Amisha P. Pate	Garbhadhan Related Sanskar For Better Progeny- A Conceptual Review

SIXTH PARALLEL SESSION

Dated - 03/02/2019

JEEVAKA HALL

TIME - 11.00 AM TO 12.00 NOON

S. No.	Author	Topics
	Chair person	Prof. Lakshmeesh Upadhyaya, Mysore
	Resource Person	Prof Kuldeep Singh AIIMS Jodhpur
	Co chair person	Dr. Arun Mahapatra
	Coordinator (1)	Dr. Chandrabhan Sharma
	Coordinator (2)	Dr. An amika Soni
	Rapporteur (1)	Dr. Abhishek Rajpurohit
	Rapporteur (2)	Dr. Sakshi Sharma
1.	Prof Kuldeep Singh	Pediatric Emergencies
2.	Dr. Mahapatra Arun Kumar	A systematic Review of Pediatric Quality of Life (QOL) Scales
3.	Dr. Monika Verma	A review on human healthcare related Parasites (Krm) according to ancient scriptures
4.	Dr. Koushik Baishya	Lifestyle Disorders In Children and Its Management Through <i>Ayurveda</i>
5.	Dr. Ankush Kumar	A review on nutritional disorders in children
6.	Dr Marnmayee sanjay girase	A review literature of navjata shishu parichrya in ayurveda
7.	Vd. Ekta Tomar	Garbhadhan Sanskar
8.	Dr. Rahul Kumar	Management Of Niruddha Prakash W.S.R. To Phimosi
9.	Dr.Savitha p k	Intellectual Enhancing Drugs and Recipes In Learning Disabilities
10.	Dr.Sunita Bijarniya	Accidental Poisoning In Children
11.	Dr.Savita Saini	Promotion Of Lactation And Management Of Lactation Disorders
12.	Dr.Aakanksha Sharma	Application of Ayurvedic daily regimen at the age of infant and toddler W.S.R. to Ksheerap and Ksheerannad vya

SEVENTH PARALLEL SESSION**Dated - 03/02/2019****KASHYAP HALL****TIME – 1.15 PM TO 2.15 PM**

S. No.	Author	Topics
	Chair person	Dr. Chandan Singh
	Resource person	Dr. Rajesh Sharma
	Co chair person	Dr. Rajveer singh
	Coordinator (1)	Dr. Anita Sharma
	Coordinator (2)	Dr. Rahul Parasar
	Rapporteur (1)	Dr. Anita Lalwani
	Rapporteur (2)	Dr. Ritu Kumari
1.	Dr. Rajesh Sharma	Role of Panchmahabhuta & Matrijadi Bhavas in formation of fetus Prakriti
2.	Dr. Laxmi Narayan Tiwari	Effect of swarnamritaprash leha in neonatal jaundice- A prospective study
3.	Dr. Jugal Kishore	Topic : Evaluation Of Antipyretic Effect Of Amrutottara Kashaya In Fever In Children-A Case Series
4.	Dr. Maitri Purohit	Management Of Tamakaswash In Children Through Ayurveda: A Literary Study
5.	Dr. Kumari Nikita	Ayurveda Basic Principle In Management Of Childhood Illness : A Literary Study
6.	Dr. Sarla Gwala	Shashtika Shali Pinda Sveda In Pediatric Diseases
7.	Dr. Hemant Kumar	Garbhini Paricharya (antenatal care) through Ayurveda and Modern
8.	Dr. Harsha Grewal	Sutika Paricharya And Its Clinical Importance
9.	Dr. Punam Kumari	Physiology And Management Of Normal Puerperium Through Ayurveda
10.	Dr Jyoti Gaur	Role Of Ayurveda In Perinatal Care And Management
11.	Dr. Sunita prajapat	Role Of Basti In Balroga

SEVENTH PARALLEL SESSION**Dated - 03/02/2019****SUSHRUTA HALL****TIME -- 1.15 PM TO 2.15 PM**

S. No.	Author	Topics
	Chair person	Dr. Mahesh Kumar Sharma
	Resource Person	Dr. Dharmendra Sharma Indore
	Co chair person	Dr. Vijay Pal Tyagi
	Coordinator (1)	Dr. Manoj Kulsherta
	Coordinator (2)	Dr. Pradyumn Singh
	Rapporteur (1)	Dr. Harsha Grewal
	Rapporteur (2)	Dr. Madhu Parihar
1.	Dr. Dharmendra Sharma	Fight Against malnutrition wsr to preventive Aspects
2.	Dr Sushma Shankar	Promotion of lactation
3.	Dr. Kumari Vandana	Concept of developmental genetics in ayurveda
4.	Dr. Saurabh Agrawal	Prevention of Ante Natal and Post Partum Depression by Yoga and Sadvritta

5.	Dr.Archana	Panchakarma In Pediatrics W.S.R. To Basti
6.	Dr. Asha KP	Critical analysis of Sutika paricharya based on desha
7.	Dr. Shweta Raturi	Antenatal and Postnatal care of Women through Ayurveda
8.	Dr Mukesh Saini	Role of Stanya Dosha in Child Health
9.	Dr. Vishnu Choudhary	“Scope of Lehan as Immunomodulation in Children
10.	Dr.Shardaswaroop Chouhan	An Ayurvedic Review Of Breast Milk
11.	Dr.Vivek kumar tiwari	Management of cleft lipw.s.r. to AusthaSandhan
12.	Dr. Poonam Rathore	Ashtavidhashastra karma (Eight surgical principals): Application in Gynecology and obstetrics

SEVENTH PARALLEL SESSION

Dated - 03/02/2019

JEEVAKA HALL

TIME - 1.15 PM TO 2.15 PM

S. No.	Author	Topics
	Chair person	Prof. Nav Prabhat Lal
	Resource Person	Dr. P.P.Vyas
	Co chair person	Dr. Jitesh Verma
	Coordinator (1)	Dr. Harish Kumar Singhal
	Coordinator (2)	Dr. Seema Kachwaha
	Rapporteur (1)	Dr. Laxmi Choudhary
	Rapporteur (2)	Dr. Nidhi Awasthi
1.	Dr. P.P.Vyas	Swaranaprashan- Miraculous effect on Immunity
2.	Dr. Jitesh Verma	Management Of Neuromyelitis Optica Through Ayurveda:- A Case Report
3.	Dr. Anamika	Ayurvedic Approach To The Management Of Karnasrava W.S.R. To Chronic Suppurative Otitis Media
4.	Dr Sheeni Sharma	Scientific Analysis Of Nutritional Qualities Of Food Indicated In Garbhini Paricharya (Pre-Natal Care)
5.	Dr Priyanka Shrimali	Dysmenorrhoea (Kashtartava) : An Ayurveda Perspective
6.	Dr. Suman Choudhary	Ayurvedic Approach To Anemia In Pregnancy A Review Of Literature.
7.	Dr. Jay Prakash Gupta	Ayurvedic Nutritional Supplement In Form Of Cookies
8.	Dr. Archana Jaiswal	Dosage Forms In Children
9.	Dr. Ravi Sharma	Efficacy and mode of action of kumar kalyan rasa
10.	Dr.Renu Sharma	Role of BalchaturbhadraChurna In Management of Infantile Diarrhoea(Balaatisar)
11.	Dr.Mohd. Adil Ansari	Role Of Ayurveda In Management Of Pneumonia In Children
12.	Dr.Vikash Gajraj	Administration Of Swarna Therapy In Children

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सुरक्षित एवं गुणवत्ता युक्त उत्कृष्ट तैल





सुरक्षित एवं गुणवत्ता युक्त उत्कृष्ट चूर्ण



RECENT ADVANCES ON KOUMARA BHRITYA AS PRACTISED IN UK

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Among eight branches of Ayurveda, being much priority goes to the strength of good progeny for stronger & healthier generation in any society been sought. For such aim and objectives to fulfil through broader application of vast knowledge is parted among students of learning in UK & Europe to integrative health care as practised in the west. Application of such measures been validated for their role in one important recognised body known under 'gentle birth methods' been popular among. Areas of application through applied aspects of parental cleanse who wish to consume, through panchakarma and advices becoming much popular among. Techniques of baby massages, care for post natal depression, prevention of cot death, baby feeding and weaning foods, home birth and birth pools, assisted labour and role of husband, measures for sukha prasava etc. are applied as necessary along with prenatal intensive care as early as from 34-36 weeks is assessed through proper counselling. Few of important aspects about above vast knowledge is highlighted as practised at www.gentlebirthmethod.com Author is assigned to give advices and counselling in above set up since more than a decade based in UK.

Key words: Kati Dhara, Sukha prasava kara yoga, Abhyanga, basti, nasya.

LEARNING DISABILITIES IN CHILDREN - A PREVAILING CHALLENGE IN 21ST CENTURY

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“Children are the future of the society and nation & the progress of the nation depends upon the development of their children.” -UNICEF (1991)

A child is a dynamic, ever changing being who undergoes an orderly and predictable sequence of neurodevelopment and physical growth.. This sequence is influenced continuously by intrinsic and extrinsic factors that produce individual variations. Development typically refers to an increase in complexity (a change from simple to more complex) involves a progression along a continuing pathway on which child acquires more refined knowledge, behavior and skills. Learning disability is a discrepancy between child's apparent capacity to learn and his level of achievement. Children with learning disability (LD) experience serious difficulties with learning even in the basic skills, such as reading, writing and doing math, despite having a normal intelligence. Behaviors exhibited by these children generally extend beyond the academic areas to socio-emotional areas too. The prevalence among school children is reported as 9.87% and in the selected families, it is 28.32.

According to Ayurveda, any disturbance in these Tridosha(Vata, Pitta and Kapha)and Triguna(Satva, Raja and Tama)will cause disordered functioning of Indriya, Mana and Buddhi leading to impaired learning. Ayurvedic drugs with a holistic approach to health can help in the management of learning disabilities by maintaining a well balanced state in these Tridosha and Triguna. Drugs like Brahmi, Mandukaparni, Yasthimadu, Guduchi, Shankpushpi etc. mentioned in Ayurvedic classics have memory and intellect enhancing properties that improves the dhi (intellect), dhriti (retention power) and smriti (memory) of the mind. So these Medhya (intellect promoting) drugs can be provided to improve the learning ability in these children. Key words- Ayurveda, Medhya, Tridosha and Triguna.

AYURVEDIC MANAGEMENT OF DENGUE FEVER

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Dengue has become a global problem since the Second World War and is common in more than 110 countries. Each year between 50 and 528 million people are infected and approximately 10,000 to 20,000 die.

It is a mosquito-borne tropical disease caused by the dengue virus. The virus has five types. It is spread by several species of mosquito of the Aedes type, principally Aedes aegypti. Symptoms typically begin three to fourteen days after infection. This may include a high fever, headache, vomiting, muscle and joint pains, and a characteristic skin rash. The alternative name for dengue is "break bone fever". Recovery generally takes two to seven days. In a small proportion of cases, the disease develops into the life-threatening **dengue hemorrhagic fever**, resulting in bleeding, low levels of blood platelets and blood plasma leakage, or into **dengue shock syndrome**, where dangerously low blood pressure occurs.

Signs and symptoms :Typically, people infected with dengue virus are asymptomatic (80%) or have only mild symptoms such as an uncomplicated fever. Others have more severe illness (5%), and in a small proportion it is life-threatening. Therefore, travelers returning from endemic areas are unlikely to have dengue if fever or other symptoms start more than 14 days after arriving home

Children often experience symptoms similar to those of the common cold and gastroenteritis and have a greater risk of severe complications, though initial symptoms are generally mild but include high fever.

Clinical course :The characteristic symptoms of dengue are sudden-onset fever, headache (typically located behind the eyes), muscle and joint pains, and a rash. comes from the associated muscle and joint pains. The course of infection is divided into three phases: **febrile, critical, and recovery**.

The febrile phase involves high fever, potentially over 40 °C (104 °F), and is associated with generalized pain and a headache; this usually lasts two to seven days. Nausea and vomiting may also occur. A rash occurs in 50–80% of those with symptoms in the first or second day of symptoms as flushed skin, or later in the course of illness (days 4–7), as a measles-like rash. A rash described as "islands of white in a sea of red" has also been observed. Some petechiae (small red spots that do not disappear when the skin is pressed, which are caused by broken capillaries) can appear at this point, as may some mild bleeding from the mucous membranes of the mouth and nose. The fever itself is classically biphasic or saddleback in nature, breaking and then returning for one or two days.

The critical phase In some people, the disease proceeds to a critical phase as fever resolves. During this period, there is leakage of plasma from the blood vessels, typically lasting one to two days. This may result in fluid accumulation in the chest and abdominal cavity as well as depletion of fluid from the circulation and decreased blood supply to vital organs. There may also be organ dysfunction and severe bleeding, typically from the gastrointestinal tract. Shock (dengue shock syndrome) and hemorrhage (dengue hemorrhagic fever) occur in less than 5% of all cases of dengue; however those who have previously been infected with other serotypes of dengue virus ("secondary infection") are at an increased risk. This critical phase, while rare, occurs relatively more commonly in children and young adults.

The recovery phase occurs next, with resorption of the leaked fluid into the bloodstream. This usually lasts two to three days. The improvement is often striking, and can be accompanied with severe itching and a slow heart rate. Another rash may occur with either a maculopapular or a vasculitic appearance, which is followed by peeling of the skin.. During this stage, a fluid overload state may occur; if it affects the brain, it may cause a reduced level of consciousness or seizures. A feeling of fatigue may last for weeks in adults.

Ayurvedic aspect: In Ayurveda, dengue is known as Dandaka jvara. Although there is no specific treatment for disease. As per my opinion it should be considered under **Pitta dominant Vat Paittik jwara** as described by Acharya Charaka

Management-

1st visit – Tab. Maha Sudarshan Ghan Vati. **Anupan** – Giloy + shunthi kwatha

§ *In case of high grade fever Anupana Shadang paniyam/ Giloya kwatha*

§ *AVOID-- ushna teekshna diet/ med like Sanjivani vati , trikatu, tulasi*

§ *Advise --- Rx blood CBC*

2nd visit –

- § Platelets count – normal - - continue the same
- § Platelets count –decreasing –
- § as above + Put Pakva Visham Jvarantak Loha
- § maintain hydration by plenty of liquids
- § keep the patient in keen observation
- § repeat platelets 12 hrly

3rd visit

- § If rash or sign of hemorrhage manifest–
- § above + Mukta Pisti
- § Maintain hydration by above + coconut water +Goat Milk
- § keep the patient in keen observation for DSS
- § IF sign of DSS ----- hospitalization mandatory
- § Pathya-
- § Daliya, moong dal ,chapati,
- § vegetables - Parval , Gheeya ,Torai, Papaya
- § Luke warm water or Shadang Paneeyam
- § fruits – Anar, Munakka, Papaya

MALNUTRITION : A NATIONAL SHAME

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India's “unacceptably high” levels of child malnutrition are a “national shame”, as mentioned by former Prime Minister of India, adding that almost half the children in the country were still under-weight despite two decades of rapid economic growth. The Global Hunger Index (GHI) now in its 13th year, ranks countries based on four indicators – undernourishment, child mortality, child wasting and child stunting. In the GHI, India ranks 103rd out of 119 qualifying countries categorized as “serious”. With a score of 31.1, India suffers from a level of hunger that is serious. According to the report, prepared by Welthungerhilfe and concern worldwide, India is among the 45 countries that have “serious level of hunger”. At least one in five Indian children under the age of five is wasted, which means they have extremely low weight for their height, reflecting acute under-nutrition, according to the Global Hunger Index 2018. Globally, the level of hunger still falls into the “serious” category, despite improvement over the last two decades. The index projects that at the current rate of progress, 50 countries will fail to reach the “low” hunger category by 2030. This puts the UN's sustainable development Goal 2, which aims to end hunger by 2030, in jeopardy.

It is said that “Eat right, it helps you to think straight”. In Ayurveda, food is considered as one among the three upstambha (sub pillars) which supports the three main stambha (Pillars) of the body viz. tridoshas that's why ayurveda gives prime importance to food as it nourishes all tissues from macroscopic to microscopic level of the body. To attain this, ayurveda mainly concentrates on various rules and regulations. Dietetic rule is one among that.Perhaps this is the reason Acharya Kashyapa declared food as a Mahabhaishajya (the great medicine) ie preventive medicine. Think what will happen to the condition of body of the baby if proper food/ diet is not provided to him or her. If the dietetic rules are followed properly, it helps to increase health and enhance the physical as well as mental development of the child. The healthy body as well as the disease is nothing but the outcome of ahara. Food taken in proper manner help in the proper growth of the body on contrary if taken in improper manner leads to various diseases. Thus diet plays a significant task in both causing and curing of the diseases.While international agencies have been pushing for packaged foods to help children with malnutrition, many institutes have shown that

almost a third of children with malnutrition recover with just nutritional counseling of parents. Modern science has particularly described aahara according to nutritional value of its component. They have not described about hita ahita, pathya apathya and dietetic related conduct rules for each individual. Quantity of food ie how much food should be taken by an individual is dependent on the digestion power of the individual. Therefore the knowledge about quantity and quality of food with its effect on the body becomes essential. In this paper, aahara vidhana and dwadasha ashana vichara are discussed as ideal code and conducts for taking diet considering physiological and functional aspects. By considering all these factors of Ayurvedic fundamentals we may curb the speed of malnutrition in pediatric population.

DRUG DOSE IN AYURVEDIC PEDIATRIC PRACTICE

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Ayurveda have eight branches as *Kayachikitsa, Shalya, Shalakaya, Vishatantra, Kaumarbhritya, BhutaVidhya, Rasayantantra* and *Vajikarana*. In these *Kaumarbhritya* which is especially deal to care and treatment of children right from birth to sixteen years. Child is very delicate and need lots of attention with gentle care. Their good health brings happiness and smiles on their parents and caretakers while their illness creates a scratch mark on their faces. They become uncomfortable and begin to search effective and untoward free medicine to their children through best paediatrician. Here is a better option in the form of *Ayurveda* which is not only cure disease of their children but also strong them against disease in future. In *Ayurveda* Paediatric field is very vast and provide a good option of treatment and care. In *Ayurveda* it assumed that all *Dosha, Dhusyay, Malas*, disease and treatment are similar to that of Adult but all these are weaker in their field so children are required delicate management of their disease. But success of treatment depends on dosage, time and proper administration (*Yukti*). Every wise physician gives importance to these two factors like quantity & timings where quantity of any medicine is a prime issue. Medicine used in appropriate quantity not only cure the disease but also not shows untoward effect on body but inappropriate dose can harm body or even can't capable to cure the disease. In *Ayurveda* the quantity of medicine depends on various factors like *Dosha, Agni, Bala, Vaya, Vyadhi, Dravya, Bala, Satva, Desha* and *Kosha etc.* To take maximum benefit of medicine we should have to consider all above of these during treating child which can be correlated parameters like age, weight, surface area, and enzymatic action etc in modern pharmacology. By eliciting these we can decide what will the amount in which *dosha* are vitiated and what will the correct dose of medicine to bring normalize these. Details of this topic will be presented as full paper at time of paper presentation.

IMPACT OF MOTHER'S LIFE STYLE ON FETUS

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Fundamental philosophy of *Ayurveda* is 'Svasthanya Svasthya rakshanam' i.e. protection of health of an healthy, the treatment of ailing i.e. 'Aturasya vikaraprashamanam' is the second step. With this philosophy in mind, mode of life and dietetics prescribed for entire reproductive life are aimed at having normal healthy child capable of active, productive, healthy and long life a healthy mother and to prevent birth of child either abnormal or susceptible to suffer at a later life. Creation is utmost essential for the continuity of generation and happiness. Fetus is completely dependent on the mother for nutrition, growth & development. Health Status of Fetus reflects mother's life style. Life style includes nutrition, physical fitness, hygiene, sleep, stress management, cultural and personal choice, and social adjustment. Life style is the way a person lives. Lifestyle diseases include atherosclerosis, heart

disease, and stroke; obesity, Type 2 diabetes, alzheimer's disease, asthma, cancer, chronic liver disease or cirrhosis, chronic obstructive pulmonary disease and diseases associated with smoking, alcohol and drug abuse. Details will be presented during conference.

FIGHT AGAINST MALNUTRITION W.S.R. TO PREVENTIVE ASPECT

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According to WHO, “malnutrition” is a **global problem**, having adverse effects on the survival, health performance and progress of population groups. Nowadays nutritional deficiencies constitute a major public health problem in India and other countries. In India, gross malnutrition is said to kill around 5,00,000 of our infants and children every year. Around $\frac{3}{4}$ of our pediatric population is suffering from nutritional deficiency. About 75 to 80% of the hospitalised children in our experience suffer from some degree or type of malnutrition. Around 25% of the pediatric beds are occupied by patients whose major problem is malnutrition. We will discuss about causes of nutritional deficiency, assessment of nutritional status, basic awareness and preventive steps of nutritional deficiency.

Key words: - Malnutrition, Global Problem, Pediatric, Assessment, Preventive Steps.

AYURVEDIC DRUGS AND DOSAGE IN CHILDREN: AN APPRAISAL

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Dosage or 'Matra' is a measure of any kind, quantity, size, duration, number, degree etc. The proper quantity (dosage) for intake of food (ahara) as well as ayurvedic drugs (aushadh) has been of prime importance, as mentioned in the works of ancient acharyas. Particularly, in the case of children, the significance of appropriate dosage of drugs is vital since the quantity less than the requisite would not be able to cure the disease. On the other hand, quantity higher than required may be hazardous to the life of children. The dosage can be increased or decreased depending on the factors such as dosha, agni, bala, vayah, vyadhi, or kosta. In addition to this, ancient texts of ayurveda give importance to aushadh sevana kaal and provide varying opinions regarding its number. In this work, comprehensive review of the ancient texts and opinions of acharyas regarding the dosage of ayurvedic drugs has been performed and their major findings have been summarized. The modifications according to the need of the present era have been incorporated and suggested. It can be concluded that many other parameters depicted by the ancient seers such as condition of the child, severity of disease, natural tolerance, and acquired tolerance influence the dosage of any drug to the children are far better than those proposed in modern medical science. Therefore, a pediatrician should be able to decide the suitable dosage based on the condition of the patient and his own understanding.

A HERBAL AND SATVAVAJAYA APPROACH IN THE MANAGEMENT OF SHAIYYAMUTRA (BED-WETTING)

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Enuresis is such a common pediatric problem which is a potential cause of embarrassment to the child as well as the parents. Enuresis occurs in about $\frac{1}{4}$ of children and the prevalence is 15% of children between ages of 5-10 year are known to be enuretic (Ghai O.P.).

In older enuretic children the main cause is stress & anxiety. Those children with ADHD are more

commonly enuretic. In Ayurveda the shaiyyamutrata (enuresis) was firstly mentioned by Vangasena & it has been also mentioned in 13th century by Sharangdhara.

Shayyamutra is a disease of neuro – psycho - somatic origin. Hence satvavajaya chikitsa is thought to be the choice of treatment as it is a unique approach in the management of disorders with mental derangement.

To treat the enuresis considering the ayurvedic principle one should look for vyana, samana, Apanavayu, Mutravaha shrotodusti and Manasdosha. According to modern medicine its management includes antidepressant & anti diuretic hormone. But these are associated with many adverse effect & relapse rate up on discontinuation is very high. In ayurveda the child is given herbal drugs for strengthen nervous system as well as urinary system.

This herbal drugs & satvavajaya chikitsa are used for an appropriate duration there may help the child to get over the problem. The scope and various aspects of herbal drugs withsatvavajaya chikitsa and their practical utility will be discussed in full paper.

SCOPE OF PANCHAKARMA IN CHRONIC CHILDHOOD DISORDERS "EXPERIENTIAL INSIGHTS"

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Over the last century, the burden of disease in children and young people has shifted from infectious diseases towards chronic conditions. The special themed issue of *JAMA* (June 2007) is devoted to chronic childhood illness, defined it as any debilitating illness that lasts a year or more past diagnosis. Children with chronic illnesses may be ill or well at any given time, but they are always living with their condition.

Primarily chronic childhood disorders are from four classes of common chronic conditions: asthma, obesity, mental health conditions, and neurodevelopmental disorders. Other examples of chronic conditions include (but are not limited to): Atopic dermatitis, AIDS, Communication disorders, Cerebral palsy, Cystic fibrosis, Cancer, congenital heart problems, Diabetes, Epilepsy, Intellectual disabilities, Ichthyosis, Learning disabilities, Sickle cell anemia, Spina bifida.

The prevalence of all of these conditions grew substantially in the 1980s and 1990s, although rates of obesity and asthma may have stabilized since the turn of the twenty-first century. For other conditions, such as attention deficit hyperactivity disorder (ADHD) and autism spectrum disorders, rates of diagnosis continue to increase as a result of better awareness of the conditions rather than actual growth in their prevalence. Much development has been taken place in diagnosis, assessment of severity of the condition and non-pharmacological interventions in Communication disorders, Cerebral palsy, Intellectual disabilities, Learning disabilities, ASD and ADHD.

In my practice of dealing such cases with different medicines of various dosage forms and application of different procedures of panchakarma mainly shirodhara (Ghrita/Taila/both) with respect to the condition, has led me to an accurate and deep understanding of managing cases of chronic childhood disorders such as Uncontrolled Seizures, Delayed milestones, Gross developmental delay, ASD, ADHD, Communication disorders, Cerebral palsy, Intellectual disabilities, Celiac disease, Down's syndrome, Learning disabilities, Atopic dermatitis and Ichthyosis.

CONCEPT OF GARBHA SANSKAR AND IT'S UTILITY FOR THE FORMATION OF SUPRAJA

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Garbha means foetus and Sanskar means Educating the mind, thus, Garbha Sanskar means educating the womb. Garbha Sanskar helps in child's mental and behavioural development, alongwith maintenance of health of both mother and foetus. Thus, Garbha Sanskar are the most crucial and important occasions in one's life. It's the way

of nurturing oneself and assessing growth & development; which is right of every individual. Foetus's personality shapes in womb. Foetus is influenced by mother and father's state of mind, other close relatives and surrounding, during pregnancy. So, healthy parents, surrounding, positive atmosphere, helps in bringing up physically, mentally, spiritually strong foetus. Thus, Garbha Sanskar's helps to beget a better progeny, hence, a better society, and thus, a better world to live in. So, Garbha Sanskar's have been detailed in Ayurveda and must be meticulously followed for a better, fuller & happier life.

A BRIEF REVIEW ON AYURVEDIC CONCEPT OF IMMUNITY AND IMMUNIZATION

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Ayurvedic system of medicine not only deals with treating the diseases but also aims to prevention the disease. Vyadhikshamatva (Immunity) is described in Ayurveda and this concept is considered equivalent to immunity. The word immunity means the state of protection from infectious disease. The immune system evolved as defense system to protect human from invading microorganisms and malignant disorders. Immunity of child is very important thing in maintaining the health of the growing child. If one can keep immune system good he will be absolutely fine without any outside interventions like medicines.

Child attending pediatric OPD with presentations of immune deficiency is quite common in India. Vaccines are disease specific and therefore lots of vaccines are required to prevent diseases as new bugs are concurrently emerging. Therefore this is the high time for a nation to encourage the traditional system of medicine which provides a potential mechanism for development of immunity in children. Ayurveda, the traditional system of medicine in India provides lots of Lehana drugs which are supposed to build up the immunity and strength in children. Hence an attempt has been made to present Ayurvedic concepts of immunity and immunization with Lehana.

THE EFFECT OF INDIGENOUS CLASSICAL COMPOUND PREPARATION “SHATYADI CHOORNA” IN THE MANAGEMENT OF ' SHWASA' WITH SPECIAL REFERENCE TO BRONCHIAL ASTHMA IN CHILDREN- A CLINICAL STUDY

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Background: Asthma is a chronic lung disease with airway obstruction, airway inflammation and airway hyperactivity to various stimuli. If not treated properly some persistent asthmatics end up in irreversible state due to airway remodelling.

Childhood Asthma is a major health concern globally and causes a great burden on the family and society and interferes with academic achievements and social interaction due to school absenteeism. Asthma is the third leading cause of hospitalisation among children under the age of 15 years.

Child exhaling warm air is said to be suffering from Shwasa Roga as per Vedanadhyaya of Kashyapa Samhita. In Khila Sthana he has mentioned about the disease Tamaka Shwasa, the features of which resembles Bronchial Asthma. Shwasa Roga is a disorder of respiration where Prana Vayu is vitiated and obstructed by Kapha, moves upwards and because of airway obstruction inspired air fails to reach the lungs causing difficulty in breathing.

The mortality and hospitalisation have decreased and prevalence of the disease stabilized due to better level of management through different system of medicines. A lot of work has been carried out in the medical science without any satisfactory result as all antiasthmatic drugs used in the management of Asthma have got only a temporary symptomatic effect. Hence there is need of safe, cost effective drug for long term use.

Shatyadi Choorna is a herbal combination said to be administered in the treatment of Shwasa Roga mentioned in the text, Yoga Ratnakara of 16th century AD. It is the mixture of equal quantity of Shati, Bharngi, Vacha, Vyosha, Pathya, Ruchaka, Katphala, Tejhova, Pushkara, Shringi indicated along with honey as adjunct. The ingredients of the compound has been proven safe and effective in the treatment of various respiratory problems including Bronchial Asthma and Cough of varied aetiology.

Aims and Objective: To evaluate the efficacy of Shatyadi Choorna in Bronchial Asthma of Children.

Materials and Methods: Study is conducted in 30 children from the age group of 5 to 15 years attending OPD of JSS Ayurveda Hospital, Mysuru with the clinical picture of recurrent episodes of wheezing and coughs either dry or productive, breathlessness, chest tightness, pallor exaution, restless, chest pain and sweating. The children satisfying the clinical conditions of mild recurrent childhood Asthma were selected and graded for the severity. Peak Expiratory Flow Rate and pathological investigations like Hb, TLC, DLC, ESR and AEC were considered as objective parameters.

The selected children were subjected to the administration of Shatyadi Choorna in the dosage of 8gms per day for age group of 5 to 9 years and 10gms for the age group of 10 to 15 years in four divided doses along with honey irrespective of food for four weeks. Children were advised to avoid cold, oily, dry and heavy foods. Avoid heavy exercises, day sleep, exposure to extremes of climate and also intake of fish, meat, blackgram, curd and fermented foods.

Response of therapy was assessed on 7th, 14th, 21st & 28th day and during the follow up period 45th & 60th day.

Observation and Result: The trial drug compound was proved to be effective in managing Bronchial Asthma in children within the duration of 28 days. The wheezing, breathlessness, cough, chest pain, chest tightness and ronchi were drastically relieved in stipulated period of the study which shows encouraging result. Study also showed animprovement in PEFr score, reduction in ESR and AEC.

Conclusion: The drug Shatyadi Choorna was proved to be effective statistically with the probability <.001 which was highly significant. From the clinical observation it can be concluded that the indigenous said drug compound is effective in relieving Bronchial Asthma in children. Katu and Tikta Rasa, Ruksha Ushna and Teekshna Guna, Madhura Vipaka, Ushna Veerya and Vata Kapha Shamana properties may be helpful for the Samprapti Vighatana of Tamaka Shwasa.

Keywords: Bronchial Asthma, Tamaka Shwasa, Shwasa Roga, Shatyadi Choorna.

APPLIED ROLE OF AYURVEDA IN THE MANAGEMENT OF PAEDIATRIC BEHAVIOURAL DISORDERS

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The perfect balance of mind, body and soul is considered as complete health in Ayurveda. Ayurveda has its own identity as most ancient and traditional system of medicine in India. According to world health organization, mental disorders are to increase by 50% in 2020, become on the international level one of the main cause of morbidity in children. Children constitute about 40% of our population and in India studies the reported rate of psychopathology among children is 5-15% Mental disease has been recognized throughout history in every civilization of the world through its significance is understood and its treatment has evolved in significantly different directions. Psychological and mental disorders involve physiological and / or genetic components in children but the etiology of some psychological disorders in children's is unknown. Mental retardation, learning disorder, communication skills disorder and pervasive developmental disorders (such as autistic disorder) etc. come under this category. The treatment of psychological and mental disorders requires special attention. Ayurveda involve various treatment components as part of Kaumarabhritya for such conditions like; herbs, yoga, panchkarma and use of various traditional formulation like; Medhya Rasayanas. Ayurveda enhances mental ability, learning

disorder, behavioral therapy through natural techniques etc. This articles shares some traditional approach of treating mental disorders in children.

REVIEW OF VARIOUS AYURVEDIC TREATMENT MODALITIES IN THE MANAGEMENT OF CEREBRAL PALSY

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Introduction: Cerebral Palsy is a group of non progressive, non contagious condition that causes motor impairment syndrome characterized by abnormalities of movement, muscle control, muscle co-ordination, muscle tone, reflex, posture and balance. Cerebral Palsy is the most common form of childhood disability. The global incidence of cerebral palsy is 2-3:1000. The incidence is higher in males than in females; the surveillance of Cerebral Palsy in Europe (SCPE) reports an M: F ratio of 1.33:1. In the causation of CP, many etiological factors are considered. But mainly it is caused by the damage to one or more specific areas of brain, usually occurring during fetal development; before, during or shortly after birth; during infancy; or during early childhood.

Cerebral Palsy has no complete cure in any science of Medicine. But, its treatment includes multiple alternatives i.e. Medication, Physiotherapy, Speech therapy, Occupational therapy and Surgery. Multisystem involvement in CP makes its management different than symptomatic treatment while treating it. Therefore multidisciplinary approach is desired for the management of CP.

NUTRITIONAL ERRORS AND DISORDERS IN CHILDREN – SCOPE OF AYURVEDIC DIETETICS

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Introduction: Nutrition is acknowledged as one of the most effective entry points for human development, poverty reduction and economic development, with high economic returns. Nutrition status of the most vulnerable age group of children is also a sensitive proxy indicator of human development and of the effectiveness of national socio-economic development strategies. India is home to the largest number of children in the world. Nearly every fifth young child in the world lives in India. It is estimated that there are about 43 crore children in the age group of 0-18 years.

WOMEN'S HEALTH CARE THROUGH AYURVEDA

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Ayurveda is sensitive to women's special health needs. Woman takes most important part for the fulfillment of biological cycle, that's why *nari* is said as “*apatyamula* Ayurveda has best natural health supplements and products to manage the changes in the body from puberty to menopause. Production of good offspring highly depends on the woman's reproductive health

Benefits that can be achieved through ayurveda are-Menstrual, Reproductive and Sexual Wellbeing, Soaring Energy Levels, Hormonal Balance, Healthy Metabolism, Improved Fitness and Stamina, Intelligent Mind with Better Cognitive Health and Emotional Wellbeing. Concerning maturation, menstruation, reproduction and menopause, there are mainly three epochs with dominance of dosha. They are Bala – kapha pradhanya, Rajahswala – Pitta pradhanya and Vriddha – Vata pradhanya. Again we can divide this as: - Puberty & adolescent, Reproductive age and menopause. During puberty and adolescent indications for menstrual care given in form of “ Ritumati

charya". The reproductive care is divided in preconceptional counseling, (गर्भ धारण विधी), Antnatel care (गर्भिणी परिचर्या), management of labor (प्रसव परिचर्या), and postnatal care (सूतिका परिचर्या). Traditionally Ayurveda has been giving special attention to the problems that affect women in every stage of their lives. There are numerous classical Ayurvedic healthcare instructions, herbs as well as formulations for every single health problem right from infancy to old age.

The holistic healing wisdom of Ayurveda lays great emphasis on the natural wellness of a woman, taking in to consideration both her outer as well as her inner beauty. Ayurveda gives guide lines to lifestyle adaptation for women health and fitness, following small modification in diet, exercise and sleep would keep her going steadily.

“A CLINICAL STUDY TO EVALUATE THE EFFICACY OF SHATAPUSHPA TAIL UTTARBASTI & RASONADI TAIL UTTARBASTI WITH PUSHPADHANVA RASA IN THE TREATMENT OF AN OVULATORY CYCLE”

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Incidence of infertility is on rise due to life style changes. It affects the mental and physical health of women and disturbs her family.

Among many causes of infertility, ovarian dysfunction contributes about 40% which includes anovulation. Majority of these cases could be treated either hormonal therapy or surgical intervention. This study will emphasize on careful holistic approach in management of anovulatory cycles.

60 patients were completed clinical trial. 30 patients in Group A treated with Shatapushpa tail Uttarbasti and 30 patient Group in B with Rasonadi Tail Uttar basti for three months with Pushpadhanva Rasa. The subjective and objective parameter were measured before and after treatment in each group. Group A showed better improvement in compare to Group B.

Keyword- Shatapushpa tail, Rasonadi Taila, Uttarbasti, Pushpadhanvarasa, Anovulatory cycle.

CHILDREN WITH EMOTIONAL AND BEHAVIOURAL DISORDERS

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Raising children is difficult, and raising difficult children can be life disrupting. One of the biggest challenges parents face is managing difficult or defiant behaviour on the part of children. All kids misbehave sometimes but rates of behavioural disorders in young people are rising.

All infants and young children will display some degree of emotional or behavioural disturbance at various stages in their development, and these relatively transient perturbations are an ordinary part of growing up. Behaviour disorder are more serious. These disorders frequently begin in childhood and are often a source of considerable distress and lost opportunities for the children involved, their families or both. Much is now known about cost-effective prevention and early intervention in the development of emotional and behavioural problems, in order to support a healthier developmental path. The challenge is to develop and implement coordinated and effective primary and secondary preventive initiatives on a widespread and equitable basis, at a time when resource constraints have led to significant reductions in spending on early intervention in the public sector.

Behaviour disorder itself require complex, careful and long- term treatment and methods usually involve a combination of an Ayurvedic medication and yoga, meditation.

Keywords : Children, Behaviour Disorder, Challenges, Parents, Yoga.

Dr. Rakesh Kumar Sharma

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Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur.

Sex Determination in a conceived baby is decided with the formation of Zygote which is the conjugation of two gametes Sperm & Ovum. The sex chromosomes X & Y are the only factors which are responsible for the determination of gender of a new born. Soon after formation the very first development in the Zygote is to prepare the genotype of the baby. Genotype is a chain of actions happening between the gametes with similar sets or pattern of autosomes and sex chromosomes. This chain of actions ultimately decides the actual genotype or final layout including the gender determination of the upcoming baby. And later on after the formation of genotype the actual development of the baby starts as per the design set by that genotype. Ayurved too mentions the same.

शुक्रशोणितं गर्भाशयस्थमात्मप्रकृतिविकारसम्मूर्च्छितं गर्भ इत्युच्यते । (आचार्य सुश्रुत)

This excerpt clearly relates to the conception and formation of genotype.

तं चेतनावस्थितं वायुर्विभजति, तेजः एनं पचति, आपः क्लेदयन्ति, पृथिवी संहन्ति आकाशं विवर्धयति। एवं विवर्धितः सः यदा हस्तपादजिह्वाघ्राणकर्णनितम्बादिभिरंगैरुपेतः तदा शरीर इति संज्ञां लभते । (आचार्य सुश्रुत)

This excerpt clearly explains the further development of Zygote in the formation of various organs and systems as per this genotype. In this development process if X & X Chromosomes of both the gametes join each other then female progeny is developed and if X & Y Chromosomes of the both the gametes join each other then male progeny is developed. Ayurveda too explains the same theory:

शुक्रबाहुल्यात् पुमान् आर्तवबाहुल्यात् स्त्री ।।

But in addition Ayurved explains another extraordinary theory of Pumsavana Samskara also. It means that by implying certain medication a female baby can be changed into the male gender.

Acharya says that

द्वितीये शीतोष्मानिलैरभिपच्यमानः महाभूतानां संघातो घनः संजायते, यदि पिण्डः पुमान्, स्त्री चेत् पेशी, नपुसकं चेद्वर्द्धमिति । (आचार्य सुश्रुत)

This excerpt specifies that the gender appearance of a baby is formulated in the second month of pregnancy. It creates the controversy regarding gender determination theory of modern science. One thing is very clear that there is no challenge to the theories established in Ayurved Samhitas as these are named as Aaptopadesha (Universal facts). Pumsavana theory is also one of the Aaptopadeshas mentioned in Ayurveda. Pumsavana word means पुमान् सूयते अनेन इति पुसवन i.e. change of the the gender from female to male baby. If we accept Pumsavana Samskara then we have to believe that genotype can be manipulated as a result of this. What should be understood by this manipulation? How is this possible? Is this a type of genetic engineering? Can this open a window for the other issues of genetic manipulations? If it is so then can it open a new possibility in the production of better progeny? This Pumsavana Karma theory raises such type of many questions. I would try to focus these issues in my full paper.

EMERGING TRENDS IN THE MANAGEMENT OF CEREBRAL PALSY IN CHILDREN:

RESEARCH UPDATES FROM AYURVEDA

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Background: Cerebral palsy (CP) is a static, non-progressive, neurological disorder caused by brain insult or injury in the prenatal, perinatal, and postnatal period. CP is the leading cause of childhood disability affecting cognitive function and development. Population based studies around the world show that prevalence of CP worldwide ranges from 1.5 to more than 4 per 1000 live births. Nearly 20% of children today are also handicapped because of CP and are not able to live their life independently. There are lifelong consequences and co morbidities related to

physical, mental and behavioral issue. Methods: Various studies published related to Ayurveda management of cerebral palsy has been reviewed. Result and Discussion: Currently there is no specific treatment in conventional system for the brain insults leading to motor dysfunction in CP. Recent trends in the management of CP are disease oriented like treatment through physiotherapy, speech therapy, vocational training, surgical interventions etc. In spite of these advances there is a long list of sufferings to the patient. Ayurveda principle of management for CP employs Panchakama therapy like Sarvang/ Ekang Snehan, Shasthi-Shali pinda Sweda, Shiro Dhara, Shiro Pichu, Basti and Medhya Rasayana. Previous researches with Ayurveda management had shown encouraging results. Present paper presents evidence based management of cerebral palsy in children through ayurveda treatment protocol. Conclusion: Studies document that management of cerebral palsy with ayurveda treatment provides a better and promising result in improving the activities of daily living in children.

Key Words: Cerebral Palsy, Ayurveda, Pancha Karma, Medhya Rasayan.

PROMOTION OF LACTATION AND MANAGEMENT OF LACTATION DISORDERS

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Lactation described as the secretion of milk from the mammary glands and the time period that a mother lactates to feed her young one. The process always occurs with all post pregnancy female mammals, although it predates mammals. In humans, the process of feeding milk is also called breastfeeding or nursing. Lactation promotion refers to coordinated activities and policies to promote health among women, newborns and infants through breastfeeding. The WHO recommends that infants should be exclusively breastfeed for the first six months of life to achieve optimal health and development. Several common problems that may arise during the breast feeding period such as breast engorgement, plugged milk duct, breast infection and insufficient milk supply originate from conditions that lead the mother to inadequately empty the breasts. Incorrect techniques, infrequent breastfeeding and breastfeeding not on scheduled time, pacifiers and food suppliers are important risk factors that can predispose to lactation problem. The adequate management of those conditions is fundamental. Besides the emotional support and action that yield more comfort to the lactating mother cannot be neglected. There is very wide description available in *Ayurvedic* texts about mother milk, impure mother milk and the breast feeding disorders. The management of all those disorders is also given for each type of problem separately. Hence we should apply the fundamentals of *Ayurveda* regarding mother milk and vitiation of mother milk along with management.

Keywords – Lactation, disorders and *Ayurveda*.

TO EVALUATE THE EFFECT OF KUMARABHARANA RASA IN THE MANAGEMENT OF TUNDIKERI (CHRONIC TONSILLITIS)

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Tonsillitis is very common in our country especially in Pediatric population due to overcrowding, poor socioeconomic status, poor nutrition and hygiene. Signs and symptoms of Tonsillitis are very well correlated with Tundikeri, a Kapha-Rakta predominant disorder of Gala. Selected 30 patients of Tundikeri were taken for clinical trial. The patients were randomly divided into two groups namely study group (n= 15) and placebo group (n= 15). Study group: (group A)-In this 15 patients of Tundikeri were treated with Kumarabharana rasa and dose of 3-4 mg/kg once daily for 7 days orally with madhu and Placebo (group B)- 15 patients were treated with Godhuma vati and dose of 100 mg tablet once daily for 7 days orally with madhu. Kumarabharana Rasa has Anti pyretic, Analgesic and Anti microbial action. Though, Tonsillitis is not considered as fatal, chronic infection made children susceptible to decreased school performance, school absenteeism made them further malnourished. Kumarabharan

rasa has importance in respiratory diseases as they are mostly due to exposure towards various infections, we need to improve the immunity(vyadhikshamatva) of the children . Bhasmas of swarna, rajat and praval possesses rasayan and ojavardhak action which helps to improve the immunity. The drugs like Vacha, shunti, pippali, Ashwagandha, Amalaki and Haritiki are having rasayana property along with ushna virya . Tundikeri is caused by the involvement of sheeta guna of vata and kapha which requires Ushna guna to remove the samprapti . Yasthimadhu is having swarya and kanthya property. hence gives smoothening effect to the throat where the tonsil develops Moreover , among the three drugs used for bhavana , Guduchi and Brahmi posses Rasayana property .Pippali, shunti, Ashwagandha , Amalaki , and Bramhi and tulsii are Vatakaphagna in action which exactly correlates with with doshic configuration of tundikeri .Researches show that the effect of kumarabharana rasa on various symptoms of Tundikeri i.e . Enlargement of tonsils, hypermia , dysphagia , halitosis ,enlargement of iymph nodes and fever is highly significant both clinically and statistically and their p value is less than 0.001 . Out of total 15 patients, 7 patients (46.6%) showed complete improvement,6 patients (40%) were having good improvement , 1 patient (6.5 %) was having fair improvement and 1 patient (6.5 %) was having poor improvement . Details about the study will be discussed in full paper presentation.

Key words: Tundikeri, Tonsillitis, Vyadhikshamatva ,Kumarabharana rasa ,Rasayana.

ROLE OF YONIDHOOPAN IN FEMALE GENITAL HEALTH

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Woman the bearer of new life, root of family has to punctuate many functions like conception, child birth and motherhood. These physiological and mental changes makes her more prone to pathological disorders, so reproductive health is an important aspect of her life.In Ayurvedic texts Brihatrayi and Kashyapa samhita, dhoopan is recommended for both Swasthya rakshan and Chikitsa. Dhoopan is mentioned for Yonivyapada, Sutika, New born and Vranas.Yonidhoopan is the therapeutic procedure in which fumigation of female genital part is done with medicinal herbs, deposited on fire to create antiseptic fumes. It helps in disinfection of uterine cavity, vagina, vulva, reduces pH and laxity of pubic muscles. It dilates blood vessels and helps in oxidation of blood that leads to adequate tissue perfusion and oxygenation thus prevent infection. Dhoopan drugs like guggulu, agru, haridra etc contain volatile oils which have antimicrobial, anti-inflammatory and analgesic effect. Dravayas are laghu, ruksha, katu, ushna therefore have vrana shodhan, ropana and kledashoshak properties .So yonidhoopan is an economical and ecofriendly sthanik chikitsa to promote genital health and to prevent puerperal complications arising due to infections.

Key words : Female Reproductive Health, Guggulu, Sthanik Chikitsa, Sutika, Yonidhoopan.

GARBHINI PRICHARYA : AS A PREVENTIVE MEASURE FOR MATERNAL HEALTH CARE

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Ayurveda , the oldest system of medicine has lead enormous importance on safe motherhood. Women's, being the precious creation of the world is the only source for new creation. Pregnancy although being physiological phenomena still it may be a risk to face any complication at any stage due to altered mechanism of the body. To assure a safe motherhood as well as a safe child, special antenatal care should be done by the great sages before many centuries ago. In *Ayurveda* classics antenatal care has been give prime importance and elaborated as *garbhini paricharya*. According to WHO report it suggests that every day approximately 834 die from preventable cause related to pregnancy and child birth. *Acharya Harita* has given emphasis upon *garbhini paricharya* and has

collected special dietary and behavior regimen in context to growth and development of fetus which will be elaborated and presented at the time of presentation of paper.

Keywords : *Aahara*, Antenatal Care/ Preventive Care Of *Garbhini*, Behavioral Regimen Described By *Harita*.

**ROLE OF *BALCHATURBHADRACHURNA*
IN MANAGEMENT OF INFANTILE DIARRHOEA (*BALAAATISAR*)**
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Ayurveda is a holistic way of living to human being. Infantile Diarrhoea is probably the commonest and biggest problem in infants. According to *Ayurveda Vata Pradhan Tridosha* is the main *Dosha* involved in infantile Diarrhoea. In a recent multisite study found that rotavirus is the most common cause of moderate to severe Diarrhoea in children 0-23 months of age, and shigellosis for the age group 24-59 months of age. Infantile diarrhoea is a one of the common diseases among the developing country and second common cause of death in children worldwide.

In modern science, there is so many medicines available like antibiotics, electrolyte fluids etc. for the treatment of diarrhoea but these drugs having so many side effects and found costly to the patients. So, there is a hope in Ayurveda for the safe and cost effective treatment of diarrhoea. Infantile diarrhoea can be correlated with *Balatisar*. In ayurvedic texts various herbal and herbo- mineral medicines are available to treat the *balatisar*. *Bhaisajyaratnavali* has mentioned about *Balchaturbhadrachurna* in *Balaatisar Chikitsa* and other drugs are also capable to treat this disease entity.

All details regarding to topic will be presented in full paper at the time of presentation.

Key word: *Balaatisar*, *Balchaturbhadra Churna*, *Ayurveda Dosha*.

ROLE OF AYURVEDA IN MANAGEMENT OF PNEUMONIA IN CHILDREN

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Pneumonia is an illness, usually caused by infection, in which the lungs become inflamed and congested, reducing oxygen exchange and leading to cough and breathlessness. Inflamed air sacs may fill with fluids, pus (purulent material) causing cough with phlegm or pus, fever, chills and difficulty in breathing. A variety of organism, including bacteria, virus and fungi can cause pneumonia. It affects individuals of all ages but occurs most frequently in children. Among children pneumonia is the most common cause of death worldwide. According to the World Health Organization (WHO), pneumonia claims the life of a child every 20 seconds and accounts for 16 % of all deaths of children under age 5.

In modern science, there are treatments available for pneumonia as antibiotics and other preventive and curative measures like vaccination and good hygiene but typical antibiotics are not beneficial in viral pneumonia and these have many sides' affects so there is a hope in Ayurveda to manage pneumonia safely. In Ayurveda, pneumonia can be correlate with *Ufullika* or *Shwasnak Jwar* and there are so many affective remedies are described in Ayurveda text for this disease entity as like *Vata Kaphashamaka Vatalunomak* herbs, *Rasayan* drugs and immunomodulators herbs, which will be dealt in full paper at the time of presentation. In this paper an effort has been made to describe about pneumonia and its ayurvedic management.

Keywords: Ayurveda, Pneumonia, Utfullika, ShwasanakaJwara, Rasayan, Immunity.

STUDY TO EVALUATE EFFICACY OF VAJRAVATAKMANDURA IN IRON DEFICIENCYANEMIA IN ADOLESCENT GIRLS - A RANDOMIZED CONTROLLED TRIAL

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Introduction:- Anemia in adolescent girls possess greatest burden on their health as it leads to poor cognitive development, poor reproductive health. Although, Government of India has taken much initiative to distribute iron and folic acid tablets to children and adolescents, but the picture shows little change. The cause may be taste and certain adverse effects like gastric irritation, constipation etc. leading to poor compliance. Looking at the magnitude of the problem an *Ayurveda* drug *Vajravatakmandura* has been selected for the study and present study was undertaken to evaluate the efficacy of trial drug in iron deficiency anemia in adolescent girls. **Material and methods:-** 100 subjects were randomly divided in two groups. In group A, *Vajravatakmandura* and in group B, IFA tablets were given for 2 month of duration. **Result and Discussion:-** Both group showed extremely significant result over subjective parameters. However, the *Vajravatakmandura* was found more effective over the subjective parameters-weakness, palpitation, pallor with percentage gain of 39.77%, 39.39%, 39.17% respectively. On, statistical analysis between before and after treatment findings of objective parameters, extremely significant ($P < 0.0001$) improvement was found in both groups in all parameters, except for RBC count in group A, which was significant. **Conclusion:-** The trial drug *Vajravatakmandura* is effective, safe and palatable for the management of iron deficiency anemia in adolescent girls.

Keywords:- Iron deficiency anemia, Vajravatak mandura, Adolescent girls, Ayurveda

CLINICAL STUDY ON SHISHUKALYANGHRITA AND KALA BASTI IN THE MANAGEMENT OF CHILDREN WITH CEREBRAL PALSY

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Introduction: Cerebral Palsy is a diagnostic term used to describe a group of permanent disorders of movement and posture causing activity limitation that are attributed to non-progressive disturbances in the developing fetal or infant brain. Centers for Disease Control and Prevention (CDC) indicate that the incidence of CP is 3.6 per 1000 live births with a male: female ratio of 1.4:1. **Material and methods:** For the study, diagnosed 30 cases of cerebral palsy of the age group of 1 to 12 years of either sex were selected after evaluating them clinically and divided randomly into 3 groups. In Group A, Trial Drug (*ShishukalyanGhrita*) + *Panchakarma* procedure (*AbhyangawithDashmoolTaila&ShashtishaliPindaSweda*), in Group B, *Kala basti* (*AnuvasanaBasti: Dhanvantartaila* and *AsthapanaBasti: DashmoolKwath*) + *Panchkarma* procedure (*AbhyangawithDashmoolaTaila&Shashtishalipindasweda*) and in Group C, Physiotherapy (Control group) were administered. **Result and Discussion:** Group A showed very significant results almost all assessment criteria except CDC grading for Standing and MRC Power Grading in lower limbs, Group B shows very significant improvement in GMFCS, Ashworth scale for spasticity in Left upper and lower limbs, MRC power grading in upper limbs and in Barthel score for ADL, while Group C, has shown very significant results in CDC grading for standing, Ashworth scale for spasticity and MRC power grading in lower limbs and moderate improvement (in terms of percentage change) in ADL. In intergroup comparison, Group A is statistically significant gain over Group C in almost all parameters. **Conclusion:** Ayurveda management with *Shishukalyan Ghrita* and *Panchkarma* procedures including *Abhyanga* with *Dashmoolataila* and *Shashtishali Pinda Sweda* have proved to be a better, safe and cost effective

treatment modality for managing and improving the quality of life in patients with Cerebral palsy.
Keywords: Cerebral palsy, *Shishukalyan Ghrita, Kala Basti, Shashtishali Pinda Sweda, Ayurveda.*

EFFECT OF SOME HERBOMINERAL DRUGS ON PAMA (SCABIES)

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Skin diseases are very common in children. Pama is a Kapha Pitta predominant disorder presenting in ayurvedic clinical practice, which may be considered as “Scabies” in modern science. It is highly infectious and may spread in a group of population within short period, it is also known as kachchhu. The incidence of this disease is very high in children. This disease is caused by an arthropod called “Sarcoptes Scabie”. According to ayurveda Pama is caused by vitiation of Kapha dosha and Pitta dosha. It usually spreads by physical contact and is characterized by intense itching, worse at night, the presence of excoriated lesions, pustules and burrows on the wrists, between the fingers, on the axillary folds, inguinal regions, face as well as the soles and inner aspects of feet, nipple and umbilicus parts are also involved. Many herbomineral drugs in ayurveda classics are very much effective in this condition among which krimighna, kandughna, kusthghna properties of drugs like khadir triphala, nimba, haridra, sphatika, tankana, Rasmanikya are very much found effective with local application of mahamarichyadi taila. These herbomineral drugs purify the blood and bring out the toxins from the blood stream and pacify the symptoms like itching and blisters. Some preventive measures as Bathing with few leaves of neem in the hot water, maintain the personal hygiene. Clothes, bed linen, towels should be boiled and changed frequently can also lead to pacify the symptoms. I have been found good results by use of both external and internal medications in the management of Pama. The Details of the case will be explained in full paper presentation.

BREAST DISORDER DURING PREGNANCY AND LACTATION

Dr. Rama Pal

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Women can be considered mothers by virtue of having given birth, by raising their children. Childbirth is usually a joyous time for a new mother, but childbirth is also a time for incredible and drastic changes to a woman's body and mind. Not all of these changes are welcome ones, and that sometimes manifests in a form of changing hormones (in particular, estrogen and progesterone) lead to tired, fatigued, and metabolic disorders, postpartal breast discomfort. Out of the above pregnancy is a time of unique change to breast tissue due to higher circulating levels of hormones, there is more ductal and lobular growth, increased vascularity and a reduction in stroma and this is susceptible to numerous benign and malignant conditions. According to ayurvedic classics the channels of the female reproductive system are called the Artava Vaha Srotas. They include all the reproductive tissue, breasts and all secretions including breast milk. The changes which take place in breast are referred to as stanaroga and are mainly due to rakata and mansadhatudushti. A pregnancy-related breast disorder is defined as a diagnosis made during pregnancy, within one year post-partum or during lactation. These conditions almost always present as a palpable mass. The main differential diagnoses for palpable breast masses in pregnant or lactating women include: fibroadenoma, lactational adenoma, mastitis with or without abscess formation, galactocele. Their common clinical symptoms include painful, tender, overdistended breast with visible dilated veins, enlarged axillary lymph nodes (may be), pyrexia etc.

Keywords: -Rakta, mansadhatudushti, galactocele, breast abscess.

SCOPE OF LEHAN IN CHILDREN: RESEARCH UPDATES FROM AYURVEDA

***Dr. Priyanka Kumari**Dr. Nisha K.Ojha**



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Dabur
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Natural Way to Immunity



ELEVATES
body's resistance to infections

DOSAGE:

Children: ½-1 teaspoonful (2.5-5ml),
twice a day

Adults: 1-2 teaspoonful (5-10ml),
twice a day





सुरक्षित एवं गुणवत्ता युक्त उत्कृष्ट आसव-अरिष्ट



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Introduction: Lehana is an unique and sole contribution of Ayurveda in the field of child health care. It has been mentioned that the health and wellness of a child depends on lehana. Review of indications of lehana refers that it is supplementary feed for proper growth and development of a child and it also provide resistance to various diseases. Modern medical science has achieved much success in improvement of childhood under nutrition and vaccination has led to protect from most of the dreaded childhood infections and ultimately improved in the area of child health care. Recurrent illness and poor growth and development are the two most important health issues related to children. But despite much advancement in the medical field these two areas pose greatest challenge to child health care till date. Use of or practice of lehana in children may help in combating both of these challenges. Kashyapa, the renowned scholar of Kaumarbhritya(child health care) has beautifully documented the efficacy and use of lehana in pediatric practice, but due to lack of evidences, the knowledge remained unused. Kashyapa states that the child after birth should be given lehana regularly for his/her optimum growth and development as well as protection from disease. **Material And Methods:** Classical texts of Ayurveda along with various articles and research papers published in journals are reviewed for the present review. **Result And Discussion:** Present paper reveals that practice of lehana in children is very important and is the need of the present era for disease free and optimum and growth and development in children.

NEONATAL CARE THROUGH AYURVEDA W.S.R TO KAUMARBRITYA

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Neonatal period is the most delicate age group of life. The care taken in the neonatal period decides the nature of upcoming human being. Jatmatraparicharya plays a key role in neonatal care which is an ornament of Ayurveda in paediatrics. Childhood is considered as the most important phase in life which determines the quality of health, well- being, learning and behaviour across the lifespan this may be the reason for giving the foremost position for balachikitsa among Ashtangas of Ayurveda by Acharya Kashyapa. Kaumarbhritya deals with healthy upbringing of infants, maternal care and cure for diseases of infants. Acharya Hareeta included antenatal care and postnatal care in this field. Early childhood is a critical period in development, as rapid gain in physical, cognitive and socio emotional domain constitutes the building blocks of childrens later growth. The agenda of child mortality due to pneumonia, neonatal infections, preterm birth complications, diarrhoea, malnutrition, birth asphyxia. To prevent these complications neonatal care through Ayurveda is important because kaumarbhritya a branch of Ashtang Ayurveda suggests various ways of well beings of child as well as mother.

KEYWORDS: Kaumarbhritya, Balachikitsa, Ahstangayurved, Jatmatraparicharya, Antenatal care, Postnatal care.

ROLE OF AYURVEDA IN PERINATAL CARE AND MANAGEMENT

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Perinatal care is the care of women and newborn given before, during, and after delivery from the 28th week of gestation through the 7th day after delivery. Ayurveda mentioned lots of regulation which are indicated in perinatal period for getting good health of mother and the progeny Ayurveda explains preparation of sutikagara(perinatal care unit), different signs and symptoms of mother during perinatal period like prajayini, asanna prasawa, parivartan of garabha, management of prakrrut prasawa , aprapatan and newborn care etc in different text. Here is an attempt made

to explain the importance of Ayurvedic concepts in perinatal care & its management.

Keywords: Perinatal care, Sutikagara, Prasawa, Aprapatan, newborn care.

ROLE OF BASTI IN BALROGA

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Basti is the most important among panchkarma due to its multiple effect pit and cough are dependent on vata as it governs their function. Basti is not only best for vata disorders it is also equally effective in correcting the morbid pitta cough and rakta. Charak has considered basti therapy is half of the treatment of all disease while some authors consider it is the complete remedy for all the elements. In modern medicine is given to remove the feces from large intestine while in Ayurveda is given as route of administration of drugs for multiple action which acts locally on large intestine as well as systematically on the body tissue. The basti is effective treating the disease of all srotas and especially vatavahsrot.

- Use of ksheer basti in. Low birth weight
- Use of nihruh basti in inguinal hernia
- Piccha basti in raktarsh
- Piccha basti in prvarhika
- Treatment of atisar by basti
- Basti mention in vigrathit purish treatment
- Mention basti in krishta nivaran
- Use of basti in parikartika treatment
- Basti mentioned for treatment vata vikar pnguta, pakshvadh, aadhman, manyagrha, hanugrha, moodgarbh, ashmari shool etc.....
- Importance of basti in raktkshya describe by charak.

A REVIEW ON NUTRITIONAL DISORDERS IN CHILDREN

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Childhood period is considered as the foundation of better future life. Every incidence has influence on overall growth and development of children. Malnutrition is an enduring problem in developing countries. Malnutrition is a physical condition or process that results from the interaction between inadequate diet, infection and characterized by poor infant growth, reduced cognitive development, anemia and blindness. It causes more than half of the nearly 11 million deaths each year among children under age five. The most common cause of death in malnourished children is infectious diseases and poor immune function. Nutrition deficiency disorders are viewed under *Apatarpanajanya vyadhis*. Ancient *Acharyas* explained diseases related to nutritional deficiency such as *Karshya, Phakka, Parigarbhika, Bala shosha, Sushk revati* etc. in different *Samhitas*. The ancient system of medicine of India has described these diseases with their etiology, clinical features and treatment. Prevention and Management of *Karshaya* in *Ayurveda* include improving the immune power of child through proper nutritious diet (food management) and use of herbal medications.

Keywords: Malnutrition, *Apatarpanajanya vyadhis, Karshya*.

UNDERSTANDING OF *ULBAKA ROGA* IN NEONATES WITH SPECIAL REFERENCE TO MECONIUM ASPIRATION SYNDROME AND ITS MULTISYSTEM COMPLICATIONS

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Every child birth has been considered as an emergency and *Kashyapa* too highlight the same by quoting that during delivery one leg of the pregnant lady will be in earth and other in the *Yamalokha*. This explains the knowledge and awareness of possible morality of the mother and child during the early neonatal life.

Meconium Aspiration cause of Asphyxia leading to Syndrome is most common Respiratory distress and other multisystem complications are resulting in long term physical and psychological disabilities in the child. Its prevalence rate is in 10-15% of deliveries. Approximately 5 % of babies born through MSAF develop meconium aspiration syndrome. This pathological condition not only delays the spontaneous respiration of the baby but also affects the neurological, immunological, gastro intestinal, urinary, circulatory system leading to multi system manifestation.

Ayurveda also explains a similar pathological condition by name *Ulbaka*, which has been also called as *Ambu Poorana* or *Sahaja Vyadhi*. Pathological sequence of *Ulbaka* clearly shows the cardio pulmonary involvement which delays the hemodynamic adjustments immediately after birth. Further symptomatology is suggestive of multisystem involvement similar to Meconium Aspiration Syndrome. Critical analysis of Disease *Ulbaka* with Meconium Aspiration Syndrome with regards to its all facets will be explained in full paper presentation.

Keywords - Meconium Aspiration Syndrome, *Ulbaka Roga*, Respiratory distress, Multi system involvement.

ETHICAL ISSUES DURING AYURVEDA PRESCRIPTION WRITING IN CHILDREN

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In Ayurveda there are four pillars of chikitasa as chikitasa chatuspada viz Vaidya (Physician), Ausadha (Medicine), Paricharaka (attendant) and Rogi (Patient). Homeostasis is very essential among these four to achieve qualitative and effective management of disease in affecting patient. When physician see a patient and prescribe medicine to that patient on a paper entitled as prescription which contain lot of information regarding patient name, age, sex, date, address, diagnosis, name of the drug, strength of the drug along with vehicle, quantity of the drug, directions for use, and brief details of the practitioner. These include the legal obligations as well as convenience of patient and the practitioner. But today's practice Ayurveda physician are writing lengthy prescription which contain number of drug ingredient which can cause overdosing in patient. Some of these combinations may contain drugs from Schedule E-1 of Drugs and Cosmetics Act – 1940, which may lead to certain unwanted effects or Adverse Drug Reactions (ADRs) in patients. All of these are very fatal in case of pediatric practice which can loss the patient too. Ayurveda is unique science which has its principles in diagnosis and treatment of which warrants an altered way of prescription writing in many aspects in comparison with conventional prescriptions. There are lot of factors of examination considers like *Desha, Dhushya, Bala, Kala, Prakruti, Vaya, Ahara, Vihara*, etc in examination of patient and that determine role of particular drug for that patient. Drug can vary from patient to patient. So lot of things should kept in brain before writing a prescription to child. Details will be presented as Full paper at the time of presentation.

EFFECTS OF LEAD TOXICITY IN CHILDREN

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Lead is amongst the top ten of toxic compounds of major public health concern. It has devastating health consequences on human health and particularly our children. There is no known safe level of lead exposure. Even low levels of lead exposure may cause lifelong health problems. Lead is toxic to multiple body systems, including the central nervous system and brain, the reproductive system, the kidneys, the cardiovascular system, the blood and the immune system. Lead is especially dangerous to children's developing brains, and can cause reduced intelligence quotient (IQ) and attention span, impaired learning ability, and increased risk of behavioral problems. An important source of lead exposure is paint. Lead is added to some paints as colored pigments, to speed up drying and to prevent corrosion. As lead paint ages, it flakes and crumbles, creating lead contaminated dust and soil. When used in homes, schools, and playgrounds, it can be a source of lead exposure to children, who easily ingest dust, soil or paint chips by putting their hands in their mouths. Our children are the future and will ensure our prosperity. So it is now time to massively strengthen our effort and take action to eliminate lead paint. WHO is also urging all countries to place law and regulations and mandatory standards to prohibit use of lead paints. Details of this toxicity and it's management would be discussed in full paper.

Keywords: Lead, paint, children's developing brains.

SUTIKA PARICHARYA AND ITS CLINICAL IMPORTANCE

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The transformation of female, from a woman to mother is the happiest lifetime event. After delivery of baby, after the placenta is expelled then woman is term as sutika and the care is termed as sutika paricharya. But after delivery mother become extremely debilitated physically and mentally. Acharya said about sutika is shunyasharira. In this stage mother should be educated to take care of herself and the new born baby. The mode of paricharya includes important therapies, nutritional diet and swasthavrihapalana. Ayurveda prescribes numerous herbs to establish healthy status of the woman after delivery.

Key words: - Sutika, Sutika Paricharya, Post Natal Care.

PHYSIOLOGY AND MANAGEMENT OF NORMAL PUERPERIUM THROUGH AYURVEDA

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Ayurveda give importance for the care of mother at every phase of her life especially when it comes to postnatal care. A puerperal period begins immediately after the separation of placenta and extending up to 6 weeks. Remarkable changes take place during the puerperium, which enable the women's body to revert to the nonpregnant state. In Ayurvedic classics it correlated with "Sutika Paricharya", as during this period she restores her health and strength. In this stage mother should be educated to take care of herself and the new born baby. Therefore she needs special and proper care during puerperium. Acharyas have described Aahara (Normal diet in puerperium) and Vihara, Ashwasana (Psychological Reassurance) in Sutika Paricharya. Ayurveda also prescribes numerous herbs to establish healthy status of the women after delivery.

Key words : Ayurveda, Puerperial physiology, Sutika paricharya.

EVALUATION OF EFFECT OF DHANYAK CHURAN IN UPPER G.I.T. DISORDERS IN PREGNANCY W.S.R TO GARBHAJ CHHARDI

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Motherhood is a greatest gift to women which is presented by good to see becomes a mother of a healthy child women, who goes through motherhood experience that is a cause of proud being a mother. The pregnancy is a state of so many physiological changes by which the pregnant women may suffer so many problems out of which the G.I.T. Tract problems like nausea, Vomiting, Headache, Heart burn, constipation etc are more effective etiological treats to disturb the health of mother and child. The aim of this research work is to assess the efficacy of *Dhanyaka Churn* in upper GIT disorders w.s.r. *Gharbhaj Chhardi*. Ayurveda is a treasure of herbal drugs. India recently increased research on traditional Ayurvedic herbal medicines after observation. Study design-The study was single grouped, which contains 20 female patients selected from OPD/ IPD of M.M.M Govt. Ayurveda college& Hospital, Udaipur (Rajasthan). Drugs containing (Dhanyaka churana+Sarak) with tandulodak. Tandulodaka use as a anupana with sangrahaka .Drugs. Dose 2gm bd. The regimen followed for 45 days with follow up every 15 days. Base line assessment was done of selected patients.

Result:-The study result suggests that The Dhanyaka churna with Tandulodak is effective in Headache Loss of appetite, Nausea, Vomiting and Giddiness during pregnancy.

Keywords- Pregnancy ,Nausea, Vomiting, Dhanyak, Tandulodak.

ROLE OF SATAVARI IN MANAGEMENT OF LACTATION INSUFFICIENCY- A CASE STUDY

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Lactation is beneficial to mother's health as well as provides specific nourishments, growth, and development to the baby. however, lactation insufficiency is one of the explanations mentioned most often by women throughout the world for the early discontinuation of breastfeeding and/or for the introduction of supplementary bottles. Globally, lactation insufficiency is a public health concern, as the use of breast milk substitute's increases the risk of morbidity and mortality among infants in developing countries, and these supplements are the most common cause of malnutrition. The incidence has been estimated to range from 23% to 63% during the first 4 months after delivery. satavary granules was used for the treatment of lactation insufficiency very good result were obseved within 15 days tretment.

Keywords : Lactation insufficiency, lactation, , breast-feeding.

IMMUNOMODULATION IN CHILDREN THROUGH LEHANA

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“Children are the world's most valuable resource and its best hope for the future.” -John F. Kennedy

The childhood period is the foundation of the life and it is here only the seeds for healthy life should be laid down. Children are more susceptible to various infections because of underdeveloped immune system as compared to adults. Strengthening the immune system is a natural way to help the body fight against the disease causing pathogens and immunomodulators can play a major role in this context.

An immunomodulator can be defined as a substance, which can influence any constituent or function of the immune system in a specific or non-specific manner including both innate and adaptive arms of the immune response. In *Ayurvedic* texts various *Acharyas* described countless useful *dravyas*, formulations (*yogas*) for children to enhance immunity. *Acharya Kashyapa* described a special formulation by the name of “*lehana*” for this

purpose. The concept of *lehana* has a multi-factorial and multi-dimensional approach by bringing about optimum physical and mental growth, prevention of nutritional status as well as strengthening the immune status of a child. Therefore *lehana* can be administered in all children as prophylactic as it possess immunomodulator, intellect promoting and nutritional properties.

Keywords: Immunomodulator, *Lehana*, *Ayurveda*.

LIFESTYLE DISORDERS IN CHILDREN AND ITS MANAGEMENT THROUGH *AYURVEDA*

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Lifestyle” means a pattern of individual practices and personal behavioural choices that are related to elevated or reduced health risk. In recent times, these lifestyle patterns have modified significantly which has led to increase in both physical and mental diseases in the world population. Most common diseases – both physical as well as psychological – are the result of leading a wrong lifestyle. This had been a common finding among adults for a long time now. However, we must now wake up to the sad reality that children are suffering from lifestyle diseases as well. Sedentary lifestyle, poor eating habits, lack of exercise, substance abuse, technology etc. are the leading factors for lifestyle diseases in children. These factors account for a voluminous number of non-communicable diseases that have near life threatening effects, but can be prevented by changes in diet, environment and way of life.

As *Ayurveda* is recognized as foremost life science and describes ways to prevent and manage lifestyle disorders; the world is being attracted towards its potential. *Ayurveda* provides better solution in the forms of proper dietary management, lifestyle advises, *Panchakarma* like detoxification and bio-purification procedures, medicaments, and rejuvenation therapies. The holistic approach of *Ayurveda*, treating the patient as a whole, meaning intervention targeted toward complete physical, psychological, and spiritual well-being makes this science a wonderful option in lifestyle disorders.

Keywords: Lifestyle, Non-Communicable Diseases, *Ayurveda*

STUDY OF SOME SPECIFIC SUB-THERAPEUTIC PEDIATRIC AYURVEDIC FORMULATIONS AVAILABLE IN MARKET AND THEIR MISUSE

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Pediatrics is the branch of medicines that involve the medical care of infants, children and adolescents. History of pediatric medicines, starts during Sixth century BC, from an ancient Ayurvedic text, Sushrut Sahnghita, and also form Kashyapa Sahimta. The Dosage for the Pediatric medications requires small size compared to the adult dose depending upon the size and weight of the child. Pediatric medications, requires special care, due to the difference in physiological conditions and adaptability of child as compared to an adult. An Ayurvedic text Vaidhyak Chikitsasar, written by Vaidhya Shri Gopalji Kunwar Thakkur of Karachi, in two volumes, containing about 1000 effective and time tested classical formulations with full confidence against various diseases and disorders. Its second volume (Uttarardh), contains about 38 effective pediatric formulation, such as Jaharmohra Bhasma (against debility and rickets), Ras Pipri (against fever, cough and diarrhea), Kesar Vati (for General weakness with Tonsils, stomatitis etc). Some of the Sub-therapeutic formulations are also available in market, which are prepared from references like Mugdha Ras (of Ras Tarangini, as reference text) and another Example is Shankpushpika Sharbat/Syrup (of Ayurved Sar Sanghrah as reference text). Mugdha Ras is used as medication for

pediatric abdominal disorders but are some manufacturers are deviating from standard procedures and these are misused as anti-parasitic agent during storage of Cereals like Wheat, maize, rice etc. Shankpushpika Sharbat/Syrup is used as Memory buster and in insomnia but contains very low active contents making it sub-therapeutic formulation. These types of malpractices should be checked by the regulatory agencies through trained and qualified personals.

PROMOTION OF LACTATION AND MANAGEMENT OF LACTATION DISORDERS

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Proper breast feeding practices are effective ways for reducing childhood morbidity and mortality. However, many mothers understand the importance of breast feeding, others are less knowledgeable on the benefits of breast feeding and weaning. Adequate nutrition during infancy and early childhood is essential to ensure the growth, health and development of children to their full potential. Breast feeding is beneficial for both mother and child, as breast milk is considered the best source for nutrition for an infant. WHO recommends that infants be exclusively breast feed for the first six months, followed by breast feeding along with complementary foods for up to two years of age or beyond? Despite the fact that 60.6% of mother initiates breast feeding and 26% of mothers are found to breast feed up to two years. Factors found to influence infant feeding practices are type of delivery, parity, alcohol consumption, occupation education and breast problems.

Keywords : Breast Feeding, Complimentary Feeding, Weaning, Infant.

ANTENATAL CARE BY AYURVEDIC AND MODERN ASPECT

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Maternal and child health services are the foremost priorities of community health programme. According to Indian culture mother is the foundation of family and children are the future of the country. The maternal and child health unit (MCH) has its root in the early community health services that provided health care to pregnant women and their children. Ayurvedic literature has described Garbhini Paricharya (Antenatal care) including Monthwise dietary regimen for pregnant woman and it's effect, Dietetics and mode of life to be avoided by pregnant woman, Effect of the use of contraindicated things by pregnant woman and Garbhashtapaka drugs or the drugs beneficial for maintenance of pregnancy. Antenatal care helps to decrease risks during pregnancy and increases the chance of a safe and healthy delivery. Regular prenatal visits can help your doctor to monitor your pregnancy and identify any problems or complications before they become serious will be discussed in detail.

Keywords- MCH Unit, Garbhini, Paricharya, Diet, Garbhashtapaka drug.

PANCHKARMA PROCEDURE IN PAEDIATRICS

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Ayurveda is a science in which the treatment is chiefly divided into two forms namely; Shamanchikitsa and Shodhanchikitsa. In shamanchikitsa we control and manage dosha in body itself which includes Deepan, Pachan etc. and in Shodhanchikitsa is mainly for cleansing the body toxins i.e. cleansing the prakopit doshas which mainly included Panchkarma therapy. Ayurveda considered that the purification of

body is important before the commencement of any other therapy. If we think about panchkarma procedure in paediatric practise it is equally effective as they are in adult patient. In present situation Panchkarma therapy looks difficult in paediatric practise because lack of knowledge about doses, their methodology and complication. Acharya Kashyap explained all the panchkarma procedure in detail. This pioneer approaches gives utility of specific therapeutic panchkarma procedure and their methodology in paediatrics patient to strengthening immune system, restoring balance and well being. Panchkarma includes: Vaman Virechan Anuvasan Niruh Nasya.

Keywords: Shamanchikitsa, Shodhanchikitsa, Deepan, Pachan, Prakopit Doshas.

ROLE OF PANCHKARMA IN CHILD CEREBRAL PALSY: A CRITICAL REVIEW

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Cerebral palsy (CP) is the leading cause of childhood disability. According to WHO approximation, in India estimated incidence of Cerebral Palsy is around 3 per 1000 live births. CP is defined as a non-progressive neuromotor disorder of cerebral origin. Motor disorders of CP are accompanied by disturbances of sensation, perception, cognition, communication and behaviour. It cannot be correlated with any single disease or condition in Ayurveda, it can be taken as *Vata Vyadhi* as far as its etiology and symptomatology are concerned. Various *Panchakarma* procedures like *Udwartana*, *Sarvaangaabhyanga*, *BaashpaSweda*, *NaadiSweda*, *Shastik-ShaliPindaSweda*, *Shirodhara* and *Vasti* etc are found to be beneficial in the management of CP in children. *Udwartana* opens the minute channels and improves blood as well as lymphatic circulation. *Udwartana* is Kapha, Vatahara and removes *Aavarana* or *Srotorodha*. It provides a platform for further procedures like *Abhyanga*, *Swedana* and *Vasti*. *ShastikaShaliPindaSwedana* provide heat, nutrition and strength to the pain afflicted joints, muscles or body parts. *SarvangaAbhyanga*, *Baashpa&NaadiSweda* reduce spasticity (especially scissoring phenomenon), improves flexibility of joints, improves circulation and reduces pain. *Vasti* is the major treatment for CP and it improves gross as well as fine motor functions, provides nourishment, improves overall general condition and quality of life in children with CP.

Keywords: *Panchakarma; Ayurveda; Cerebral palsy; Vasti; Sweda; Nasya.*

AYURVEDIC MEDICINAL PLANTS FOR BOOSTING IMMUNITY IN CHILDREN

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A healthy immune system is vital for children as they are exposed to a plethora of germs. Immunity is the state of having sufficient biological defences to avoid infection, disease, or other unwanted biological invasion. It is the capability of the body to resist harmful microbes from entering it. Immunomodulator influence any constituent or function of the immune system in a specific or nonspecific manner. In Ayurveda, the objective of immune enhancement is achieved through the use of the Rasayana (an Immunomodulators). Rasayana increases longevity of life, memory, intellect, lustrous complexion, voice, strength of the body functions, strength of all senses and provides the resistance to disease, improves glow and power. There is wide range of herbal immunomodulators mentioned in Ayurveda. Especially for paediatric age group Amalki, Guduchi, Yashtimadhu, Tulasi, Haridra, Pippali, Shatavari, Ashwagandha, Rason, Nimba etc. are evident as an important herbal immunomodulators. Detail will be discussed at the time of presentation.

Key words: immunity, immunomodulator, rasayan.

SHASHTIKA SHALI PINDA SVEDA IN PEDIATRIC DISEASES

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Many childhood diseases occur due to the vitiation of Doshas and panchkarma therapy help to pacify these Doshas vitiation and thus relief many disorders. Pinda sveda is a good treatment in all age groups of children with a precaution that pinda should not be very hot .Inducing perspiration by using heated round packs of rice is referred as shashtika shali pinda sveda. The whole body below the neck or a portion of the body is subjected to the svedana therapy , and this belongs to the category of agnisveda, as well as snigdha sveda. This treatment helps in augmenting the microcirculation , in improving the tone and power of muscles with multifaceted physiotherapeutic and rehabilitative effect. This is an easy and effective procedure of svedana and is ideal in healthy persons, In children and also in clients suffering from illness due to morbid vata dosha. Usually shashtika shali pinda sveda is performed in a course . this may be conducted continuously for 7 days, 14 days, 21 days, or upto 28 days according to the condition of the patient . All child patients of myopathies specially pseudo-hypertrophy muscular dystrophy , balavvata (Poliomyelitis), pakshaghata (post polio residual paralysis) and all vata roga associated with dhatukshaya like cerebral palsy etc. are treated by shashtika shali pinda sveda.

Key words:- shashtikashali pinda sveda , svedana , vata dosha .

GARBHINI PARICHARYA (ANTENATAL CARE) THROUGH AYURVEDA AND MODERN

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India's wisdom of Ayurveda complements modern obstetrics, offering advice for a healthy pregnancy, smooth delivery and a blissful, healthy baby. In order to support each developmental phase of the baby, Ayurvedic doctors devised certain herbs and foods to be taken each month of pregnancy. This regime is named as “Masanumasik Paricharya of Garbhini”. Importance of this specific Regime prevents any deformity in the baby, ensures proper growth of baby, health of mother, softens & lubricates the mother's body tissues and normal unobstructed delivery. Antenatal care according to modern a planned program of observation, education, and medical management of pregnant women directed toward making pregnancy and delivery a safe and satisfying experience. Goals of antenatal care are reduce maternal and perinatal mortality and morbidity rates, improve the physical and mental health of women and children and prepare the women for labor, lactation, and care of her infant. Key Word-Ayurveda, Garbhini Paricharya, Antenatal care. healthy progeny.

SCOPE OF LEHANA IN IMMUNOMODULATION IN CHILDREN

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Healthy and brilliant child is every mother's dreams in the world, for achieving to this mom did anything for her child. From ancient world we have formula of being good health which is primarily explained by Acharya Kashyapa in their sutrasthan “Lehana Adhyaya” i.e. Suvarnaprashan. Suvarnaprashan has been traditionally practiced all over India since ancient times. It is said to boost immunity and improve mental and metabolic well being of children. This paper is aimed at establishing safety and efficacy of Suvarnaprashana in children and studies its effects on children upto 5 years. In ayurveda lehana is mostly important for mental and physical health of children. The properties of ghrita and suvarna on mental health are very beneficial and also ghrita is supplies the great power elements to body as the physical health is also maintained. Lehana is mostly effective in boosting the

brain activities of childrens.

Keywords: Suvarnaprashana, Lehana, Immunity, Ghrit, Madhu, Suvarna.

AN AYURVEDIC VIEW OF GARBHAADHAN RELATED SANSKARAS FOR BETTER PROGENY

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Every parent expects that their kid should be healthy, beautiful and intelligent but they are not awake of taking special care before the conception. Ayurvedic literature was written under monarchism, wherein birth and proper brought up of a son (kumara), rutukala (optimum period for fertilization), garbhotpattikar bhavas (factors essential for conception), the days of coitus for having male or female child and specific acts for achieving conception. Acharya Sushruta has also described the age for conception and qualities of marriageable girl and boy which is essential for better progeny under the garbhadhana vidhi. The paper aimed to discuss advantages of garbhaadhan related sanskaras to have a baby with good body built, Intellect and talent.

Keywords:- Garbhaadhana Vidhi , Sanskaras, Healthy Baby, Better Progeny ,Conception.

INTELLECTUAL ENHANCING DRUGS AND RECIPES IN LEARNING DISABILITIES

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Learning disabilities occurs as a result of neurological problems in the human being (especially brain).Children are the most affected with mental disabilities and it interferes in their learning capabilities like reading and writing. There are few commonly occurring mental disabilities like Dyslexia, Attention Deficit Hyperactive disorder, Language processing disorder ,Non verbal learning disabilities and Visual perceptual and Visual motor deficit. The causes of such diseases can be hereditary, chromosomal abnormalities or lifestyles, There are mounting evidences regarding the drugs and compounds which indicated in various domains of cognitive disorder There are Medhya rasayanas like Aindra rasayanas, Achararasayana etc & drugs like Mandukaparni, Shankupushpi, Madhuyashti & Guluchi are especially mentioned in intellectual enhancing drug. There are also certain medicines described in apasmara and unmada have to be used. Also external therapies like Sirovasti, Sirodhara, Sirolepa, Vasti, etc are to be used with specific drugs. Unfortunately modern medicine based psychoactive or intellectual enhancing drugs have met with limited success in treatment of various disabilities.

Keywords: Intellectual enhancing drugs, learning disabilities, Medhya rasayana, Dyslexia.

ACCIDENTAL POISONING IN CHILDREN

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Children are curious and want to explore their world with all senses including taste. As a result, the home & it's surroundings can be dangerous place if poisonous substance ingested. It is prone to young children < 3 yrs, adolescents especially boys and lower economic status. Substances that can cause poisoning are like medications – paracetamol, cough syrup, mouthwashes, antiseptics, detergents, cosmetics, cigrrate, pesticides, poisonous plants like foxglove, oleander. These cause symptoms like nausea, vomiting, abdominal pain ,burns , coma, semi coma and convulsions. If poisoning happened call helpline-1800116117 (NPIC), 131126 (PIC). Make vomit to child if

allowed by NPIC expect in particular cases like kerosene, corrosive, haemolytic poisoning & approach to hospital for further treatment with that container from which poison ingested .Preventive methods are like- child proof containers,Pills in blister packs & foil strips, keep poisons out of reach of children, read labels of medication given to children, discard old medication ,batteries, poisons. Never put poisons in drinking bottles. Avoid growing poisonous plants near home.

Keywords: Curious, NPIC, Child-Proof.

IMPORTANCE OF YOGA DURING PREGNANCY FOR BETTER PROGENY

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The health is defined by WHO is a state of complete physical, mental and social well being and not merely absence of disease or deformity . But the truth is that there can't be a healthy body without mind and spiritual i.e, spirituality. During pregnancy body goes through many changes physically and mentally . Yoga focuses on poses for pregnant women which are comfortable for her. There are many benefits of yoga during pregnancy such as improving sleep, reducing stress , increasing strength and flexibility. It decreases lower back pain , lowered the risk of intrauterine growth restrictions. Physical exercise can be helpful in the management of stress and other associated conditions accompanying pregnancy. Empirical evidence is needed to create guidelines outlining postures that are safe for pregnant women across the trimesters . There are various yoga according to trimesters as

1st trimester :- Bhujangasan , Badhhakonasana , Veerbhadraasan, Tadaasan .

2nd trimester :- Veerbhadraasan, Trikonaasan, Konaasan, Adhomukhswanaasan, kanthsanchalaan

3rd trimester :- Ardha titali aasan , poorn titali aasan , Supt udarkarshaasan , Tadaasan

Conclusion :- Overall it is evident that yoga is well tolerated and effective in the management of pregnancy. This budding body work suggests that improvements we're observed on psychology domains during pregnancy and labour and on birth variable.

Key word :- Yoga . Pregnancy, Trimester, Stress, Intrauterine growth.

TO STUDY THE EFFICACY OF JYOTISHMATIGHRITA ON INTELLIGENCE QUOTIENT & MEMORY OF SCHOOL GOING AGE CHILDREN

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Ayurveda represents an ancient system of traditional medicine prevalent in India about 5000 years old. *Medhya* is an Ayurvedic concept that implies intellect. *Budhi* (intellectual power of brain) is a powerful entity which retains the specific knowledge or the essence of the texts gained by reading, listening or repeating it. Learning disability means the difference that is noticed between the kids learning capacity & their real learning ability. This neurological condition is due to the kids brain that finds it hard to understand specific signals & does not permit the kid from executing the information linked with those signals. Learning disability & Ayurveda focuses on drugs that motivate the nervous system & these stimulant drugs in turn the release of norepinephrine & dopamine in the brain & thus the transmission power get activated. Unfortunately, modern medicine based psychoactive drugs have met with limited success in treatment of various neurological problems. Ayurvedic herbal medicines engender & summon intelligence, memory & mental perception. These drugs promote the Intellect (*Dhi*), Retention power (*Dhriti*), Memory (*Smriti*). Out of which *Jyotishmati* (*Celastrus paniculatus* Wild) plant is one of the cognition enhancer. This review discusses about the effect of *Jyotishmati Ghrita* on IQ & Memory of school going age children.

Keywords:-IQ, *Medhya*, Memory, Learning Disabilities, *Jyotishmati Ghrita*.

SPECIFIC THERAPEUTIC PANCHAKARMA PROCEDURE IN PEDIATRIC PATIENTS A CLASSICAL REVIEW

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The childhood is very crucial period where the most of mental and physical development take places. The abundant of dosh, dushya and mala are less in children body as compared to adult which make them more susceptible towards disease. Kaumarabhrityaka, Kaumarabhritya, Kumara Tantra or Kaumarabhritya encompasses information regarding pediatric diseases (BalaRoga). Ayurveda is the science of life in which treatment is branched into two wings namely; Shodhanachikitsa (detoxification therapy) and Shaman chikitsa (curative therapy). Shaman therapy includes deepan (appetizer), pachana (digestive) etc. and Shodhana therapy includes Panchakarma. Shodhanais advised to remove the vitiated doshas and to bring the doshas to normal condition. Kashyapa being Kaumarabhritya physician explained panchakarma can be done in balastarting from infancy and advised vamana, virechana, basti, niruha or yapanabastis and anuvasanabasti. such as; cerebral palsy, pranavahasrotastha and tamakashwasa. In pediatric practice also these therapies are helpful provided administered with due consideration in stage of the diseases, dosage of medicines, proper method, vaya and Bala of the children. Literature survey revealed that bala panchakarma play significant role towards the management of various childhood diseases; this article emphasizes role of panchakarma therapy in the management of bala-roga.

Keywords: Deepana, Panchakarma, Shaman chikitsa, Shodhanachikitsa.

IMPORTANCE OF PANCHAKARMA PROCEDURES IN BAL ROG

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Panchakarma therapy and certain related therapeutic procedures have useful scope in bal roga. However, the children, being very soft, tender & fast growing and developing individuals any therapeutic intervention need to be considered with due caution and proper adoption taking into account the soft, tender nature and fast growing phenomenon in the organism. All intense & vigorous therapies should be avoided.

In ayurvedic text age of the child is must considerable for all panchakarma therapies such age-

- Hasta Sweda is recommended up to 4 month of age.
- Vamana is contraindicated in <6yr of age.
- In children generally Mridu virechana are recommended.
- **Vastiyogya Ayu-** There are some controversies between Acharyas

Gargya: Just after birth

Mather: After 1 month

Atreya: After 4 month

Parasar: After 3 year

Bhel: on 6th year

Kashyapa: Annada

Nasya is not recommended in child <7yrs of age.

These panchakarma therapies can be apply in bal roga such as- snehan, swedan, vaman, virechan, nasya, basti & other procedures like- shiroabhyang, shiro-parishek, shirobasti, shirodhara, shashtik shali pinda swedan, etc

Keywords- Panchakarma therapies, bal roga, abhyang, swedan, basti, nasya.

A REVIEW OF MANAGEMENT OF KARSHYA (MALNUTRITION) IN CHILDREN

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Childhood period is considered as the foundation of better future life and every incidence has influence on further life. The childhood malnutrition is a major problem in developing countries. Malnutrition is a physical condition or process that result from the interaction between inadequate diet and infection and characterized by poor infant growth, reduced cognitive development, anemia, blindness. According to UNICEF nearly half of all deaths in children under 5 are undernutrition. The most common deaths in malnutrition children is infectious diseases and poor immune function. Malnutrition may be correlated to KARSHYA disease in Ayurveda. Diseases such as Parigarbhika, phakka, balashosha, sushka revati describe clinical feature in different ayurvedic texts. Prevention and management of Karshyain Ayurveda by improve immune power of child through proper nutrition, diet, (food management) and use of herbal medications.

Keywords:- Karshya, Malnutrition, Ayurveda, Immunity, Panchkarama, Rasayana.

SUTIKA JWARA PREVENTION & MANAGEMENT

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A Woman can be termed *Sutika* only after the complete expulsion of placenta. It is a state of immune suppression, where there is an alteration in the physiological, physical and nutritional bond. Due to *Garbhavridhi* there will be *sarvadhātu Shithila* and due to *aavi and pravahana* during delivery there will be *dhatu, agni* and *balakshaya* which leads to vitiation of *vata* causing various *Sutikaroga's*. Among which *Sutika Jwara* is considered important and prevention of the same can be attained by following proper *Sutika Pricharya*. Points that can be considered under *Sutika Paricharya* are *Sutikagara, Ashwasana, Abhantaraupakrama, Bahyaupakrama*, local wound care and breast care. Various line of management has been mentioned for *Nija* and *Agantuja Sutika Jwara* in our classics. In this context the quote "Prevention is better than cure" holds good.

Keywords :-Sutika, Sutika Jwara, Sutika Paricharya, Vata.

ROLE OF LEHANA IN ENHANCING CHILD IMMUNITY

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The concept of *Vyadhiksamatva (Immunity)* is of tremendous importance in the daily wellness of human beings; for prevention and recovery from *diseases*. In Ayurveda, the essence of all Dhatus is called "*Ojas*" and it is responsible for the defence of human body against *diseases*. When etiological factors come in contact with the body they try to produce *disease*. At the same time the body tries to resist the *disease*. This power of the body, which prevents the development of *diseases* or resists a developed *disease*, is called *Immunity*.

Immunity is the balanced state of multicellular organisms having adequate biological defenses to fight infection, disease, or other unwanted biological invasion, while having adequate tolerance to avoid allergy, and autoimmune diseases.

In Ayurvedic literature, for increasing the *immunity* Acharya Sushruta, Vagbhata and Kashyapa described *Lehana* for this purpose which ultimately enhances *immunity*. *Lehana Karma* enhances growth and development by providing sufficient nutrition and promoting health with improving intellect and speech.

Key words: *Vyadhiksamatva, Immunity, Lehana, Ojas.*

EFFICACY OF NASYA IN THE MANAGEMENT OF CEREBRAL PALSY- A CLINICAL STUDY

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INTRODUCTION- Cerebral palsy is the most common motor disability found in children. It comprises a group of non-progressive but often changing motor impairment

syndromes secondary to lesions or anomalies of brain arising in early stages of its development. Population based studies from around the world report prevalence estimates of Cerebral palsy ranging from 1.5 to 4 per 1000 live births. AIM- To assess the efficacy of Panchendriyavivardhana Taila Pratimarsha Nasya along with Udvartana and Abhyanga in the management of Cerebral Palsy. MATERIALS AND METHODS: In this study, total 06 patients were treated with oral medication along with Panchakarma procedure. Treatment was carried out in three courses of 18 days protocol with time span of 16 days between each course. 1.5 gm Medhya Churna was given orally for 86 days along with Udvartana for 5days, Abhyanga followed by Nadi Swedana for 5 days and Pratimarsha Nasya for 8 days in each course. RESULT: Overall assessment was done by using Ashworth scale, MRC scale, MACS scale and CDC grading. Overall 50% mild and moderate improvement was found in growth parameters, developmental milestones and fine motor milestones. CONCLUSION: Cerebral Palsy is explained incurable in different records but the quality of life can be improved with the help of Ayurvedic management protocol.

Keywords- Abhyanga, Ayurveda, Cerebral Palsy, Nasya, Panchendriyavivardhna Taila.

ROLE OF PARNABEEJA IN THE MANAGEMENT OF INFECTED CESEREAN SECTION WOUND A CASE STUDY

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Cesarean delivery (C-section) is a surgical procedure used to deliver a baby through incisions in the abdomen and uterus. C-Section is one of the most common operative performed currently in Obstetric Practice. Post Caesarean section wound infection ranges from 3-16%. It can result in discharge from suture line, wound gaping and resulting in burst abdomen. For such an infected post C-Section wound (i.e *Dushtavrana*), we used a *Swarasa* of *Parnabeeja* herb (*Bryophyllum pinnatum*) for cleaning of wound and after that *pooran* of a *parnabeeja kalka* within that gaped site.

The present case report shows 32 years' female operated for Cesarean section & then wound get infected with pus discharge, huge gapping & foul smelling of discharge. After treatment & Re-suturing of that wound, she gets a complete relief & get discharge from hospital.

Keywords: - Infected Wound, *Parnabeeja*, *Swarasa*, *Kalka*, *pooran*.

PANCHKARMA MANAGEMENT OF CEREBRAL PALSY IN CHILDREN: A SINGLE CASE STUDY

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Introduction: Cerebral Palsy is a neurological disorder that affect's a child's movement, motor skill and muscle tone. Cerebral palsy occurs in about 2.1 per 1000 live births .It can be taken as Vatavyadhi as far as its etiology and

symptoms are concerned. According to Ayurved, it is classified in the disease categories of Sahaja (hereditary) and Garbhaja (congenital) and Jataja (psychosomatic) type of disease.

Material and method: A case study where a 4 year old male child patient with spastic diplegic cerebral palsy, Global (predominantly Gross motor) delay and GMFCS level iv in the context of being born at term with history of perinatal asphyxia and HIE treated with panchkarma. Patient was clinically examined as per various grades of severity of illness and investigated for baseline biostatus to evaluate therapeutic outcome.

Result: Panchkarma ensured marked improvement in all parameter ie. Head holding, Sitting, GMFCS level without any disease related complications.

Conclusion: Cerebral Palsy has no cure in modern medicine but cases diagnosed at early age and treated with panchkarma achieve marked clinical improvement.

Keywords: Cerebral Palsy, Panchkarma, Garbhaja, Quality of Life.

ROLE OF PANCHKARMA AND RASAYANA IN BALROG

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The childhood diseases described as Bal-Rog in ancient Ayurveda science, this is the state of mental and physical development. Ayurveda consider DhatriStanyaDushti as causative factor of diseases in KsheeradaAvastha. The physiological participation of Dosh, Mala and Dushysa are different in children as compared to adult therefore the type and prevalence of diseases are also different in children and thus pediatric care needed utilization of various approaches for the management of Bal-Rog such as herbal remedies, discipline life style, Rasayana and Panchkarma. This article described role of Rasayana and Panchkarma in the management of some Bal-Rog. Panchakarma may be done from the age of seven years and as per requirement Rasayana therapy may be used in early age but with great precautionary measurement.

This pioneer approaches gives utility of specific therapeutic panchakarma procedure and their methodology in paediatric patients to strengthening immune system, restoring balance and wellbeing.

Literature survey revealed that bala panchakarma play significant role towards the management of various childhood diseases; this article emphasizes role of panchakarma therapy and Rasayana in the management of Bal-roga such as; cerebral palsy, pranavahasrotastha and tamakashwasa.

Keywords: Ayurveda, Bal Rog, Rasayana, Panchkarma.

ROLE OF AYURVED IN CHILDHOOD OBESITY- A LITERARY REVIEW

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Childhood obesity is an issue of serious medical and social concern. In developing countries including India, it is a phenomenon seen in higher socioeconomic strata due to the adoption of a western lifestyle. Consumption of high calorie food, lack of physical activity and increased screen time are major risk factors for childhood obesity apart from other genetic, prenatal factors and socio-cultural practices. Obese children and adolescents are at increased risk of medical and psychological complications. Insulin resistance is commonly present especially in those with central obesity and manifests as dyslipidemia, type 2 diabetes mellitus, impaired glucose tolerance, hypertension, polycystic ovarian syndrome and metabolic syndrome. Obese

children and adolescents often present to general physicians for management. The latter play a key role in prevention and treatment of obesity as it involves lifestyle modification of the entire family. Acharya Charaka has described Ashtounindatiya Purusha which include Atisthoulya, Atideergha, Atihraswa etc. The sign & symptoms of Sthoulya are almost similar to the symptomatology of obesity; There are a no. of treatments described for Sthoulya in Ayurveda classics specially by Maharshi Charaka & Sushruta which are very effective & cheaper also.

LIFE STYLE MODIFICATION IS THE FIRST LINE TREATMENT IN PCOS

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PCOS is the most common cause of anovulatory infertility. It is defined as a syndrome of ovarian dysfunction associated with hyperandrogenism and Polycystic ovary morphology. In Ayurvedic classics, there is not any definite description for PCOS. However description of *Pushpghanijatharini, Nashtartava* can be correlated with symptoms of PCOS. Diet recommended in PCOS-High fibre food. It combats insulin resistance by slowing down digestion and reducing the impact of sugar on blood. This includes cruciferous vegetables. Diet which is not recommended-food high in refined carbohydrates. Life style changes towards managing PCOS include exercises and daily physical movement and weight loss, healthy eating habits include low sugar intake. Exercises can help to reduce the insulin resistance. Yoga has positive effect in relieving stress. The soothing and calming effect of Yoga helps to alleviate stress and reduces the level of stress hormone in body. Yoga promotes calorie burn in the body by pumping up the metabolism. Yoga also improves gastrointestinal balance by providing massage to the digestive organs and improves their function. Useful Yogasana for treatment of PCOS are Mandookasana, Naukasana, Butterfly Pose, Shashankasana, Ardhamatsyendrasana, Pawanmuktasana, Bhujangasana, Paschimottanasana.

ROLE OF PUNARNAVADI KWATH IN THE MANAGEMENT OF PREGNANCY INDUCED HYPERTENSION

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Edema in pregnancy is a common symptom in late pregnancy as reported to be 50-80 % in third trimester (1). It is caused mainly due to subcutaneous fluid retention and by the pressure of the expanding uterus on the vessels supplying the lower extremities. (1) Early detection and appropriate treatment is the need of the hour to reduce the symptoms such as hypertension, preeclampsia, renal disorder etc.

This case study mainly aims for suggesting a safe, effective and easy available answer for the management of Pregnancy induced hypertension and associated symptoms and related fetomaternal complications.

In Ayurveda, Shoth in pregnancy is described as Garbhini Vyadhi. Punarnavadi Kwath has Shothhara properties (2). In "Bhaishyajaratnavali," Udarrog chapter 43-44, Punarnavadi Kwath is mainly indicated in Sarvang Shoth. (3.) Therefore, the administration of this drug is beneficial in edema in pregnancy. The present case report shows markedly reduced pedal edema, urine albumin and reduced hypertension after giving Punarnavadi Kwath. It is evident that further studies in this regard will emphasize the affectivity of Punarnavadi Kwath in the management of Pregnancy induced hypertension and prevention of possible complications

Keywords:-Punarnavadi Kwath, edema, Pregnancy, Garbhini, Hypertension.



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Dabur
Rheumatil
Natural Pain Reliever

DOSAGE:

Tablet: 2 tablets, two-three times a day

Gel: For local application



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and Weakness of muscles & nerves.

Dabur
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DOSAGE:

1-2 tablets (125-250mg),
two times a day





सुरक्षित एवं गुणवत्ता युक्त उत्कृष्ट अवलेह पाक



AN AYURVEDIC REVIEW OF BREAST MILK

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Stanyapanmeans breastfeeding is nectar for newborn infants as well as for mothers. Breast milk provides nourishment to infant that is essential for optimal nutrition, cognitive performance and neurological development and immunity. Breast milk promotes growth and development and acts as a tonic for all the tissues. Breast milk is optimal food for almost all infants in the first year of life. Ayurvedic text describes the Ksheerap stage of child; in this the children up to one year of age have their main diet as milk. Ayurvedic and modern texts both describes breast milk in detail. Ayurvedic scholars have praised breast milk and mentioned many benefits of it .As per modern aspect, the 1st breast milk called as colostrome should be fed to baby as it contains the antibodies which protects baby from many diseases. In ayurvedic texts, stanya nirmiti (formation of breast milk), causes of stanya pravritti (breast milk ejection), stanyasampat (merits of breast milk), stanyakarya (functions of breast milk), stanya mahattva (importance of breast milk), stanya vikruti (disorders of breast milk), stanyavidhhi dravyas (drugs increasing quantity of milk) etc. are discussed in detail.

Keywords: Breast milk, Stanya nirmiti, Stanya pravritti, Stanyasampat, Stanyakarya, Stanya mahattva, Stanya vikruti, Stanyavidhhi dravyas.

AYURVEDIC APPROACH OF OBESITY IN PEDIATRICS

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Since a last few decades there has been a lot of discussion on life style disorder, though the change of life style is as old as the man kind. It is being possible due to gradual increase of health awareness among the public.

Identification of obesity and over weight in children may be an important aspect of preventive pediatrics with implication for the promotion of physical social and emotional health for children that may have effect on adulthood. Obesity may be defined when BMI units is more than 95 percentile. In Ayurveda it is stated as MEDA ROGA or STHOULYA. It is a condition of excessive accumulation of fat (Meda) in the fat depots of body caused by the vitiation of Kafa predominant tridosha. Meda vaha srotos are fully affected by Amarasa. It may evident of any age but frequently seen in first year of life, 5-6 years as and during adolescence. Female children obesity is more predominant than male.

AYURVEDIC AND MODERN APPROACH OF HYDROCEPHALUS W.S.R.TO UPSHIRSHAK ROGA

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Hydrocephalus, increased cerebrospinal fluid within the skull , is the most common neurosurgical problem seen in paediatric field .It may develop due to various causes such as congenital anomalies ,tumour ,infection ,intracranial haemorrhage ,trauma and idiopathic disorder.Hydrocephalus can be inherited genetically or may be associated with developmental disorder including spina bifida.Hydrocephalus is making one of the most common developmental disabilities in children. It is the leading cause of brain surgery for children .Lack of treatment or delays in treatment can lead to permanent brain damage .Appropriate therapy can prevent the occurrence of this complication in most cases and ventriculo-peritoneal (VP) shunt is often used to treat this disease As per Ayurveda acharya vagabhatta described about "upshirshak roga " which is similar to hydrocephalus. The present paper leads with the ayurvedic preview and approach to understand and manage it.This challenging neurosurgical disorder. The contribution and line of

management are very beneficial for the palliation of the disease in the form of minimize the clinical effect and to prevent the complication. The details will be presented full paper on the base of guidelines narrated by our ancient acharya.

Keywords- Hydrocephalus, Upshirshak, ventriculo- peritoneal shunt

MANAGEMENT OF CLEFT LIPW.S.R. TO AUSTHASANDHAN

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Acharya Sushruta, The father of surgery has mentioned cosmetic surgery by describing Karna, Nasa, and Austhasandhan in sutrasthan 21 chapter. The plastic Surgery of the 19th century was stimulated by the example of Indian methods. Acharya Vagbhata also mentioned cleft lip as khandaustha due to vataprakopa and describe its management as Sandhankarma. Cleft lip is a congenital abnormalities of lip. Acharya Sushruta have already described. Its as birth abnormality in sushrutasamhita. Cleft lip occurs early in pregnancy when the side of the lip do not fuse together as they should. Cleft lip is more common in boys. The exact cause of cleft lip is not known. Cleft lip is caused by multiple genes inherited from both parents, as well as environmental factors. It can be considered as kulaj/ Sahaja/Kulodbhavyadhi to Ayurvedic Acharya. In the un parallel and unique contribution in the Medical science that is cosmetic and plastic surgery is not only principally but in the applied way is fully followed by modern surgery to treat the disease cleft lip, in full paper I will present their golden principle of plastic surgery and its steps of management as well as prophylaxis directions.

Keywords- Cleft lip, Austhasandhan, Kulajroga.

MARM CHIKITSA IN MATERNAL NEUROMUSCULOPATHIES

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While selecting medicines and pain management methods for maternal neuromusculopathies, marm chikitsa is the most appropriate approach to get rid of these ailments. During maternity period, maximum mothers put on weight which causes pain and damage to cartilaginous matrix of weight bearing joints. Repeated breast feeding leaning posture results in cervical spondylosis and continuous sitting causes low backache, lumbar spondylosis and prolapsed intervertebral disc. Chances of developing Tennis elbow are there on lifting the child. In marm chikitsa, patient's own vital areas are selected for treatment purposes. These marmas come into operation only when the indicated marma is stimulated by applying pressure (vimlapan, peedan), Agnikarm and puncture at specific points. These methods provide quick and satisfactory relief in neuromusculopathies developed due to day to day wear and tear along with pre and post natal vatic changes.

Key words: Maternal Neuromusculopathies, Marm Chikitsa, Pain Management.

ROLE OF BALA TAILA MATRA BASTI AND YONI PICHU IN SUKH PRASAVA

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In a woman's life, motherhood is a crowning act. Every woman tries to enter in this new world of mother with minimum pain, operative aids and complications. As child bearing and delivery are physiological phenomenon and any abnormality in courses of labour can affect women health not only for that time being but also through her life. That's why for good health of mother and baby Sukhprasava is important.

Acharya Caraka has mentioned the concept of Anuvasana Basti and Yoni Pichu in navama masa. Acharya Caraka described Bala under Madhura skandha, Prajasthapana mahakashaya and brmhaniya. Bala is madhura rasa,

madhura vipaka, snigdha guna, balya. It is also mentioned as a rejuvenative (rasayana). As Bala taila Matra Basti favours vatanulomana, particularly apanavayu, which performs garbha nishkramana and Yoni Pichu favours snigdhatta to muscles and ligaments of garbhashaya, hence the expulsion of foetus is not much difficult. These also reduces the rate of Caesarean section and harmful effect of use of Oxytocic drugs

WORM INFESTATION IN CHILDREN: AN AYURVEDIC APPROACH AND MANAGEMENT

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The worm infection helminthiasis is one of the most common problem in developing countries due to the poor hygiene. The common parasitic infection in children is *Ascaris Lumbricoides* (Roundworm), *Enterobiasis vermicularis* (Pinworm), *Ancylostoma duodenale* (Hookworm), *Echinococcus granulosus* (Hydatid diseases) and *Cystercos* is Most common worm infection in children is *Ascaris Lumbricoides*. Helminthiasis has been found to result in poor birth outcome poor cognitive development, poor school and work performance, poor socio-economic development and poverty. Chronic illness, malnutrition, and anemia are further examples of secondary effects of helminthiasis.

The Ayurveda described worm infestation as *krimiroga*. Excessive intake of *madhura, amlarasa* rich diet, eating during indigestion, avoid exercise and resorting to day sleep are main etiology in ayurveda. Main symptoms of *krimi roga* are *Jwara* (fever) *Vivarnata* (discoloration of skin) *Sula* (Pain) *Hridayaroga* (Heart trouble) *Sadanam* (lassitude) *Bhaktadveso* (Anorexia) *Atisara* (Diarrhea) *Vamana* (Vomiting). Ayurveda puts three basic approaches for the treatment of helminthic disease such as *apakarsana* (Removal of visible worm from the body), *prakritivighata* (to create unfavourable environment by means of diet and medicine) and *nidanaparivarjana* (Avoid etiological factor).

All details regarding to topic should be presented in full paper at the time of presentation.

Keywords: Worm infestation, Helminthiasis, Krimi Roga, Vidanga ghrita.

AYURVEDIC MANAGEMENT OF CHILDHOOD BRONCHIAL ASTHAMA

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Bronchial asthma is a disease characterized by an increased responsiveness of the trachea and bronchi to various stimuli. It manifests by wide spread narrowing of the airways causing paroxysmal dyspnea wheezing or cough. In India prevalence of asthma in school going children has been reported between 4-20% in different geographic regions. The prevalence has increased by two folds in last two decades. Asthma is the commonest chronic illness during childhood. It is responsible for significant social, economic and psychological impact on the family. Acute asthma leads to disturbed sleep restriction in day to day activities and absenteeism. Childhood Bronchial Asthma has multifactor causation. Geographical location, environmental, racial, as well as factors related to behaviors and lifestyles are associated with the disease.

Tamaka Shwasa is a disease described in Ayurvedic texts that shows close resemblance with bronchial asthma on the basis of clinical manifestations. Ayurvedic medicines can be a potential and effective alternative for the treatment against the bronchial asthma. The present study was a review on the management of Tamaka-Shwasa (Childhood bronchial asthma) who were being managed through Ayurvedic approach that includes a combination

of ShodhanaChikista, Ayurvedic drugs, lifestyle management and wholesome diet. Ayurvedic drugs include the respiratory tonics and naturally occurring bronchodilator and immune-modulator. Thus, study result concluded that the Shodhana, Shaman, herbal and herbo-minerals compound drug has got significant anti asthmatic properties.

Keywords :Asthama, Tamakaswasa, Ayurvedic medicines.

ROLE OF BRAHMI (BACOPAMONNIERI) FOR ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) IN CHILDREN:

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Attention deficit Hyperactivity disorder is a neuro developmental type of brain disorder, specially involving dopamine and nor epinephrine neurotransmitter which govern a variety of cognitive process, directly responsible for the control of behavior, motivation and motor function. It is characterized by hyperactivity, impulsiveness and inattention. ADHD is more common in boys than girls (male to female ratio 4:1 for hyperactivity type and 2:1 for inattentive type). ADHD affects children and teens and can continue into adulthood. Children with ADHD have been found to have cognitive deficits, lower IQ, impaired social relationships with in the family and with peers as well as poor study skills and lower academic achievement. In Ayurveda it occurs due to vitiation of dhee (rational thinking), dhriti (intellect / retaining power of the mind), smriti (memory) which results into improper contact of the senses with their objectives and give rise to inattention, hyperactivity and impulsivity. In Ayurvedic texts MedhyaRasayanare described which are used as Shaman chikitsa for these types of disorders because Medhya drugs improve coordination, cognition and concentration capacity of the brain. Chark described 4 drugs in medhyaRasayan. BRAHMI chemical constituents show good effects on ADHD. ADHD is on the rise globally so the brahmi (Bacopa) is a natural substance that has the ability to significantly help ADHD without all the scary side effects of psycho-stimulants.

Keywords: ADHD, medhyarasayan BRAHMI.

CLINICAL UNDERSTANDING OF PHAKKA ROGA IN THE PRESENT AYURVEDIC PAEDIATRICS PRACTICE

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Kaurmarbrithya deals with *Kumarbharana*. *Bharana* implies the growth and development of the child while *Poshana* target for fulfilment of nutritional demands of the growing child. Both are directly related to each other and improper management will lead to failure to thrive.

Kumarabharana ensure proper nutrition, parental care, love, sympathy, opportunities, social exposure, reinforcing environmental factors, to facilitate proper growth. Meanwhile certain congenital, chromosomal, endocranial, nutritional, physical and psychological disabilities, threatens the growth and development as well as nutrition of the child, resulting in Failure to thrive (FTT) which accounts for 3-5 % of all hospital admissions for children under two years of age. Clinical presentations, mimicking the pathological consequences of FTT has been mentioned in *Kashyap Samhita* while explaining the *Phakka Roga*. *Phakka* is of three types which highlights three important causes of Failure to Thrive. In clinical practice, *Phakka* reflects a symptomatic clinical presentation which can be seen in various disorders ultimately ending up as a failure to thrive. Details of critical analysis of *Phakka Roga* with clinical consequences of Failure to thrive will be discussed in full paper presentation.

Keywords – *Bharana*, *Poshana*, *Phakka*, Failure to Thrive.

AYURVEDIC APPROACH TO ANEMIA IN PREGNANCY AREVIEW OF LITERATURE

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Motherhood is the birthright of every woman. Pregnancy is a state in which all the physiological functions are hyper stimulated in order to meet the demands of foetus. The incidence of anemia in pregnancy ranges widely from 40-80% in the tropics compared to 10-20% in the developed countries. Anemia is responsible for 20% of maternal death in the third world countries. Pregnancy induced anemia is very common condition in which involves the fall in the haemoglobin concentration and expansion in plasma volume. According to WHO, anemia in pregnancy is present when the haemoglobin concentration in the peripheral blood is 10gm/100ml or less. In Ayurveda this condition studied under GARBHINI PANDU. In Garbhini, saar of all dhatus is lost due to garbhaposhana, hence the dhatus become nissar. This ultimately results in oja-kshaya. It results in decreased work productivity, increased child mortality, increased maternal mortality, slowed child development and mild to moderate anemia may increase susceptibility to infectious disease.

Keywords:-Anemia in Pregnancy, Garbhini Pandu, Saar of Dhatus, Garbha Poshana

ROLE OF RAJAYAPANA BASTI

IN THE MANAGEMENT OF DUCHENNE MUSCULAR DYSTROPHY (DMD)

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Duchenne muscular dystrophy is one among the most common muscular disorder. The incidence is 1: 3600 live born infant boys worldwide. DMD is a genetic disorder characterized by progressive muscle degeneration and weakness. In DMD involves mutations in the dystrophin gene. Dystrophin is one of the large structural proteins in the cell membrane and absence of Dystrophin leads integrity of all muscle cells. DMD cannot be directly correlated with any single disease in Ayurveda. All most all major neuromuscular disorder are identified with vata dosha. In Ayurveda this pathogenesis can be clearly understood by the concept of Adhi Bala pravritta vyadhi. No any specified treatment schedule in any medical field related to Duchenne muscular dystrophy. Therapeutic approach of muscle dystrophy is represents on corticosteroid, physical therapy, gene therapy and muscle transduction. The Ayurvedic treatments relevant to Rajayapana group of herbal -mineral medicines and specified Panchkarma therapies have definite protective influence and long survival on dhatu kshaya according to ayurvedic classics. There is no other excellent treatment of vata vyadhi such as basti therapy. Rajayapana basti is a type of niruha basti. It described in charak Shamita. Rajayapana basti having Sandhya balajanna (increased strength), rasayan (rejuvenation) properties and can be used for all the cause of vitiation of vata viz Dhatukshaya (decrease in various tissues) and avarana. In this review article an effort has been made to explore the function of Rajayapana basti for treating Duchenne muscular dystrophy

Keywords- Rajayapana basti, Panchkarma, Duchenne muscular dystrophy, Adhi Bala pravritta vyadhi

CONCEPTUAL STUDY ON GARBHINI PANDU W.S.R. TO ANAEMIA IN PREGNANCY

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Anaemia in pregnancy is a global health issue facing in developing countries. It is a condition where hemoglobin concentration in venous blood is below 11 g/dl defined by WHO. Most of woman from rural areas and low socio-economic group could not get proper nutritious diet during pregnancy which cause deficiency of iron in the pregnancy. That's why anemia become very serious problem in India. In ayurveda, direct reference regarding Garbhini Pandu is not available. Vivarnata can be correlate with Garbhini Pandu. Garbhini pandu need to be

treated like shaman yoga of pandu chikitsa (eg. Dadimadi ghrit, Navaysha lauha, Punarnava mandur etc.). These formulations help to cure anaemia without having any side effects on mother and fetal well being.

Keyword: Garbhini Pandu, Vivarnata, Anaemia in pregnancy, shaman chikitsa.

ROLE OF SHIRODHARA IN AUTISM SPECTRUM DISORDER (ASD)

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Autism spectrum disorder is a range of neurodevelopmental disorders that includes autism and related conditions. Individuals on the spectrum present with two types of symptoms: problems in social communication and social interaction, and restricted, repetitive patterns of behaviour, interests or activities. Symptoms are typically recognized between one and two years age. Its etiology is still obscure in modern science while based on ayurvedicetiopathogenetic, we can say it may occur due to vitiation of *Dhee*, *Dhriti* and *Smriti* that causes imbalance of *Kala* and *Karma*, which results into improper contact of the senses with their objectives i.e. *Asatmendriyarthasamyoga*. The current medications used in the treatment of mental disorders in children include Antipsychotic, Antidepressants, Antianxiety drugs Stimulants and Mood stabilising groups. Although these drugs are the first choice medication, but these agents produce various unacceptable side effects, which is one of their greatest demerits. Supportive *Panchakarmatherapy* (*Shirodhara*) can be done that calms down aggravated symptoms. *Shirodharabring*s changes in the electric potentials of the brain compartments that lead to regularization of the neurotransmitter mechanism, which is proved very potent to control inattention, hyperactivity, impulsivity and distractibility.

Keywords :-Autism spectrum disorder, Dhee, Dhriti, Smriti, Shirodhara

ROLE OF STANYADOSHADRAVYA IN IMPROVING THE QUALITY OF STANYA A CRITICAL REVIEW

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Introduction- Lactation and its health benefits to infants are very much specified & well documented in ayurvedic classics. Lactation is promotive & most superior source of nutrition & overall health associated with new born till infancy. As described in Ayurveda text consumption of vitiated breast milk causes *Vikara* like *Balasosha*, *Fakkaroga*, *Kheeraalsak*, *Kukunaka* etc. and consistently ill health & recurrent infection in the infants, resulting in inadequate growth & development. It also states that rational use of *Stanayadoshahara* (lactodepurant) drugs to prevent vitiation and improve quality of *Stanya*.

Aim- The present review is undertaken to critically analyze the role of drug included *StanyaDoshahardravya* of *VagabhatSamhita* in enhancing the qualities of breast milk (*Stanya*).

Discussion- *Acharya vaghghat* has mentioned drugs like *Patha*, *Shunthi*, *Amrita*, *Tikta*, *Devadaru*, *Sariva*, *Kiratatikta*, *Musta*, *Murva*, *Inderyava* for *Stanayadoshahara*. Recent study reveals their nutritional, antioxidant, antimicrobial, immunomodulatory properties & other health benefits like increase in immunity to fight infectious disease.

Conclusion- Drugs of *Doshahardravya* can be used either single or may be combined with other drugs to enhance the qualities of breast milk & prevent the disease due to vitiated breast milk.

Key Word- *Stanya*, *Stanyakshaya* & *Stanyavridhi*, *Stanyadushti*, *Stanya doshhardravya*.

AYURVEDIC APPROACH ON THE MANAGEMENT OF JUVENILE RHEUMATOID ARTHRITIS

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Juvenile rheumatoid arthritis is also known as idiopathic arthritis refers to condition with no define causes. JRA is the common form of arthritis in children and adolescents. It is a autoimmune non infective inflammatory joints disease of more than 6 weeks duration in children and less than 16 years. Most commonly it affects age group of 7-12 years but it can be seen in older children as old as 15 years of age. Symptoms of JRA are often non specific initially and include lethargy reduce physical activities and poor appetite cardinal clinical features is persistent swelling of the affected joints such as knee, ankle, wrist and small joints of hands and feet. Childrens with JRA cause significant growth retardation joint as well as other body systems. International prevalence range from 8-150 per one lakh. As per clinical feature JRA can be correlated with Amavata in Ayurved. Here vitiated vata associated with ama (undigested toxic substance) and produce many constitutional specific symptoms affecting the bony joints by involving multiple body system. In modern medicine there is no effective and curable treatment for JRA. Allopathic medicines used in JRA harm so many side effects and much costly so there is a hope in ayurveda to manage the JRA very effectively and safely. The line of treatment can be summarised under two main captions i.e. to bring agni (digestive power) to normal stage to digest ama and eliminate and vitiated vata and ama. Some herbo mineral drug like simhanadaguggulu is drug of choice in amavata gomutra haritaki ajmodadichurna rasnasaptakkwath chitrakadivati etc and some shodhanand shaman chikitsa are available to need JRA.

In this paper and effort has been made to describe JRA and its ayurvedic management all details regarding this topic should be presented at the time of full paper presentation.

KEYWORDS-Amavata, ama.

PRESENT SCENARIO OF KAUMARBHRITYA IN RAJASTHAN

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India is known as one of the richest country in cultural values, spirituality and traditional health care sciences like ayurveda, yoga, sidhha, naturopathy any many more. Ayurveda is one of the oldest n popular health science, it is further devided into astha angas (8 parts), kaumarbhritya (ancient term for pediatrics) is one of them. Among all the states of India, Rajasthan is known for its vibrant colours, spirit and unique combination of modern and traditional values. Government of Rajasthan is always been cherishing Ayurveda. There are approximately 3698 government ayurvedic hospitals are running by 4491 ayurvedic medical officers. The academic history of ayurveda in Rajasthan, is started by National Institute of Ayurveda (NIA) on 7th February, 1976, in the capital of Rajasthan, Jaipur. Not only that, but India's 2nd ayurved university started on 24th may, 2003 in jodhpur. There are huge number of patients coming every year for seeking Ayurvedic treatment, in which approximately 20% are children. According to the department of ayurveda, children are mainly coming with complaints of cerebral palsy, childhood asthma, childhood obesity, ADHD, malnutrition, recurrent cough, cold and other infections. Ayurveda offers the solution for all such problems in the form of preventive (swarn prashan, principales of swathyavritta, yoga etc) and curative (panch karna, various modulation of vasti, swedan, like pps, shashthi shaali, piddichhil etc) and various herbal, mineral, herbo-mineral medicines for physical as well as mental well-being. Details will be discussed at the time of paper presentation.

EFFICACY AND MODE OF ACTION OF "KUMAR KALYAN RASA"

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Childhood is an important age of human being and growth & development mainly occurs in this age. Balanced diet and well nutritional foods are necessary for growth and development. In Ayurveda this stage is called kapha dominant period of life. Rasa shastra is vedic alchemy of an ancient ayurveda. The word rasa shastra means the “science of mercury.” It is a specialized branch of ayurveda dealing mainly with Rasa Dravyas. Hence it is a very important sub discipline of ayurveda. A number of herbo-mineral or metallic formulations are found in practice for prevention as well as for the treatment of pediatric disorders. Efficacy of herbo-mineral or metallic formulations in ayurvedic therapeutics is subject of great concern in present era. Kumar kalyan rasa is also a herbo-mineral formulation. In this abstract I will try to summarize the unique preparation and mode of action of kumar kalyan rasa in children's development. It is used in the treatment of pediatric complaints such as fever, cough, diarrhea, jaundice, asthma, vomiting, emaciation and indigestion.

Key words – Kumar Kalyan Ras, Rasa Shastra, Herbo Mineral, Pediatric Disorders, Efficacy, Mode Of Action.

ROLE OF THE PANCHKARMA IN DOWN SYNDROME [TRISOMY 21]

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Down syndrome is most common chromosomal abnormality. Down syndrome is a genetic disorder caused by the presence of extra genetic material from chromosome #21 in some or all of individual's cell. Incidence 1:700-800 live births. According to ayurveda down syndrome occurs due to vata dosh predominance and also due to beej, beejabhaga dosha and beejabhaga avayava abnormality. Down syndrome is found in newborn with clinical features like poor motor reflex and in children with hypotonia mental retardation. Treatment is useful in down syndrome cases in shiropichu with medicated oil, sarvaang Abhanga (full body massage with medicated oil) matra vasti (oil and decoction enema). Improve flexibility of joints improve circulation. Vasti improves gross as well as fine motor function provides nourishment, improve overall general conditions.

Keywords: Vata dosh predominance, beej, beejbhaga, beejbhaga avayava, hypotonia, mental retardation, panchkarma, abhanga.

APPLICATION OF AYURVEDIC DAILY REGIMEN

AT THE AGE OF INFANT AND TODDLER W.S.R. TO KSHEERAP AND KSHEERANNAD VAYA

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Our country is home to the largest child population in the world. We know that generally, a child who enjoys a better state of health during childhood will become a healthy adult. So we need a more concrete and compassionate road map to ensure that every child is safe and protected.

Ayurvedic daily regimen (Dincharya) is one of the most powerful preventive measure to ensure a long and healthy life for humans. Dincharya is a gift for the people to live healthy and longer than and as well as for children. In the assimilation of Ayurvedic daily regimen (Dincharya) in the life of child (Ksheerap and Ksheerannad) their mother can play an important role. A mother can greatly influence child's growth and development by applying all regimen on her child like Abhyanga (oil massage), Anjan (collyrium) Snaana (bath), Pratimarsha-Nasya (nasal drop) etc. But at the age of child some modification should be accepted because of day to day life style changes in

modern era. Further details about the concept will be provided at the time of paper presentation.

Keywords: Ayurvedic daily regimen, Dincharya, Khseerap, Ksheerannad, Abhyanga, Anjan, Pratimarsha-nasya.

AYURVEDIC PANCHAKARMA PROCEDURES USED IN CHILDREN WITH CEREBRAL PALSY

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Cerebral palsy (CP), a static, non-progressive disorder caused by brain insult or injury in the prenatal, and postnatal time period, is the major developmental motor functions and it has the potential to have an effect on the overall development of a child. The disease is not curable but early intervention with counselling, appropriate medication and physiotherapy along with *Panchakarma* procedures will help to improve their quality of life and give active and selfsupporting happy life. In *Ayurveda*, there is no single condition/disease which exactly show similarity with CP. Most of the authors considered CP as *vatavyadhi*. Various *Panchakarma* procedures like *Udwartana* (medicated powder massage), *Sarvaanga abhyanga* (full body massage with medicated oil), *Baashpasweda&Naadisweda* (steam bath) and *Vasti*(oil and decoction enemas) etc are found to be beneficial in the management of CP in children. *Udwartana* opens the minute channels and improves blood as well as lymphatic circulation. *Udwartana* is *kapha,vatahara* and removes *aavarana* or *srotorodha*. It provides a platform for further procedures like *abhyanga*, *swedana* and *vasti*. *Sarvanga abhyanga*, *baashpa&naadisweda* reduce spasticity (especially scissoring phenomenon), improves flexibility of joints, improves circulation and reduces pain. *Vasti* is the major treatment for CP and it improves gross as well as fine motor functions, provides nourishment, improves overall general condition and quality of life in children with CP.

Keywords: Panchakarma, Cerebral palsy, Vatavyadhi, Abhyanga, Swedan.

PRECONCEPTIONAL CARE IN AYURVEDA FOR SHREYASHI PRAJA (CLASSICAL REVIEW)

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Preconception care can be defined as the care or advice to couple planning a pregnancy well before the actual conception. Preconception care is one such preventive measure to get (Shreyashi Praja) . It helps in early identification of high risk factor and prevents the adverse affect of that. Incidence of congenital anomalies affects an estimated 1 in 33 infants resulting 3.2 million birth defect every year. In such situation Ayurveda can contribute tremendously with the effective pre-cautionary, dietary and seasonal regimes helps bringing up a healthy offspring. Acharya*s emphasized on Age criteria, Rajaswala charya, Pathya-apathya before conception ,garbhadhan vidhi,contradiction to garbhadhan, various drugs viz. Garbhasthapan , rasayan as a preconceptional measure helps in better outcome of healthy progeny

Keywords: - ayurveda, pre-conceptional care, shreyashi praja

DIGITAL NUTRITION

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Today, we are living in a digital Era. Digital gadgets are integral part of our day to day activities. Be it computer, mobile, laptops, I-pad or any other digital gadget, kids are also not far from these attractive instruments. Use of digital gadgets can effectively improve the learning capacities of a growing kid as using digital board provides better understanding of subject than conventional black board in class rooms. Potential claims about their hazards and long term side effects are regularly aired in newspapers and modern scientific journals. Here this

presentation is aimed to point digital Nutrition (Positive, proactive, mindful, balanced, judicious and realistic use of digital instruments) and preventing problematic internet uses. Mere distancing from such gadgets cannot solve the problems. Hence apart from digital detoxing or de-addiction, we must switch on to digital nourishment.

LEHANA KARMA IN CHILDREN

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The Vedic literature is considered to be the world's oldest literatures, and the description of 'Ashtanga Ayurveda' is found right from these literary works. One of the eight limbs of 'Ashtanga Ayurveda' is Kaumarabhritya. The Kaumarabhritya subject deals with "Child Health and Medicine". The classical book of Kaumarabhritya is Kashyapa Samhita.

The principle of Ayurveda is that 'disease will not occur without Dosha Vaishamy'. In order to maintain equilibrium of Doshas and develop the body's resistance to disease, it advises to do Lehana karma in children. This Lehana Karma is the speciality of Kashyapa Samhita. According to Acharya Kashyapa, "The happiness (health) and sufferings (diseases) of children are dependent on Lehana Karma". Apart from this, Acharya Vagbhata also described Lehana Karma according to Ritu (Seasons).

For Lehana, Kalyanaka Ghrita, Brahmi Ghrita, Panchgavya Ghrita, Samvardhana Ghrita Ashtanga Ghrita, Swarnaprashana etc, are used. Lehana Karma increases the immunity and life longevity as well as improves concentration, memory power and overall intelligence.

There is special significance of Lehana karma in children. So far many research works have been carried out in Lehman Karma, which are on Swarna Prashana, Kalyanaka Ghrita, etc. The Lehana Karma boosts up overall development (physical and mental) of the child, including the immune system against diseases.

The full article contains the detailed explanation and discussion on Lehana Karma and its importance and need in the present era.

Key words: Lehana Karma, Immunity, Children, Ayurveda

AYURVEDIC MANAGEMENT OF GUILLAIN-BARRE SYNDROME: A PEDIATRIC CASE REPORT

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Guillain-Barré syndrome (GBS) is a rare neurological disorder in which the body's immune system mistakenly attacks part of its peripheral nervous system—the network of nerves located outside of the brain and spinal cord. A 14 year old boy attended the Kaumarabhritya OPD of All India Institute of Ayurveda, New Delhi with chief complaints of weakness in all four limbs, unable to stand with support, get up from supine position since 2 years. He was diagnosed with Guillain-Barre Syndrome (GBS) at the age of 12 years. He took modern treatment from IMS, Banaras Hindu University, Varanasi and Medanta hospital, Haryana for several months but no significant relief was observed in the progressive limb weakness. MRI Brain showed features of Posterior Reversible Encephalopathy Syndrome (PRES). EEG showed evidence of mild degree of diffuse non-specific neurophysiological dysfunction. No epileptiform discharges or electrographic seizures were seen. 2D echo was normal. NCCT Brain showed small areas of gliosis in the bilateral posterior parietal region. Rest of the brain parenchyma was normal. On neurological examination, patient was conscious, alert and well oriented. Memory and intelligence intact. Speech was normal. Upper and lower limbs were kept in a state of extension without any

involuntary movements. There was wasting of distal muscles in both upper and lower limbs. Muscle tone was hypotonic in all four limbs. Power was reduced in all four limbs, right upper limb 1/5, left upper limb 1/5, right lower limb 0/5, left lower limb 0/5. Extensors were weaker than flexors in both upper and lower extremities. Both ankles were in a state of extension and could not be flexed. Coordination was intact. Deep tendon reflexes were either absent or sluggish. Sensory functions were intact. Plantar reflex was absent. The patient was admitted in the Kaumarabhritya IPD ward, AIIA and treatment was planned using internal medications as well as Panchakarma based procedures i.e. *Udwartana, shalishastikapindasweda (SSPS), Kala Basti, Nasya, and shirodhara*. Complete motor assessment was done before treatment and after treatment. The patient showed mild improvement in the motor functions after the first session of treatment of 52 days. Complete details will be presented in the full paper. Keywords: GBS, PRES, Panchakarma, SSPS, Kala Basti.

GARBHADHANSAMSKARA AN INIMITABLE AYURVEDIC APPROACH FOR BETTER PROGENY

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Samskara (Sacrament) are rites of passage in a human being's life described in ancient Sanskrit texts as well as a concept in the karma theory of Indian philosophy. It has been defined as a peculiar excellence residing either in the soul or in the body. In Ayurveda, Samskara is 'Gunaantaradhana' which means quality transformation is carried out by incorporating the specific qualities. The number of samskara varies from 16-40 in different Hindu Dharma Granthas, but only 16 are applicable in present time which spreads from Garbhadhan to Antyeshitisamskara. Ayurveda has envisaged the concept of planned pregnancy through Garbhadhansamskara to beget a Suprajai.e, child with optimum physical, psychological, intellectual and spiritual health. Current scenario with lots of GarbhaUpaghatakarBhavas (factors adversely affecting the fetus) in our life style, food habits and environmental pollutants influence the gametes thereby increasing the possibilities of deformities and defects in the fetus. Besides this, Epigenetical factors also affect the fetus. Epigenetics is the branch of science which deals with the heritable phenotype changes that do not involve alterations in the DNA sequence. This samskara helps the body to overcome the impact of these factors along with the diet & lifestyle modifications and to have a better progeny.

Keywords : Epigenetics, Garbhadhan, GarbhaUpaghatakarBhavas, Sacrament, Samskara.

PAIN MANAGEMENT THROUGH PANCHAKARMA JANUBASTI WITH NIRGUNDI TAIL IN SANDHIGATA VATA W.S.R. KNEE OA

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Osteoarthritis is one of the most common degenerative joint disorders characterized mainly by pain, bony swelling and functional restriction of the joint. In Ayurveda, the disease Sandhivata resembles with osteoarthritis. It commonly presents unilaterally in the knee joint, which is the most important weight bearing joint in the body. Osteoarthritis of the knee joint is the most common joint disorder seen in elderly people and obese person. Sandhigata Vata is one among the 80 Nanatmaja Vata Vyadhis. According to Ayurveda, Snehana, Svedana, Dahana and Upanaha are the prime modalities of treatment in the management of Sandhigatavata. These are mostly aimed at Bramhana. Sushruta has mentioned the treatment for Sandhigatavata as Snehana. Janubasti is one of the modalities of treatment commonly adopted in the management of Janusandhigatavata. According to Dhanwantarinighantu Nirgundi Leaves are used therapeutically in Shula, Shophya, Vatavyadhi, Janubasti with Nirgundi tail prepared from leaves has

promising effect in pain in osteoarthritis and as Acharya Charak also has described bahiparimarjanchikista for various diseases. Janubasti (external oleation) is the one type of bahiparimarjanchikista.

Keywords: Nirupstambhitjanusandhigatavata, Nirgundi tail, Janubasti, Bahiparimarjanchikitsa.

CONCEPT OF PATHYA IN PRECONCEPTIONAL CARE

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Preconceptional care can be defined as the care or advice given to a couple planning for a pregnancy well before the actual time of conception. A new WHO report shows that preconception care has a positive impact on maternal and child health outcomes. What you do before is just as important as what you do during pregnancy. To prepare for the best pregnancy possible, preconception planning is essential and may reduce the risk of adverse outcomes. Ayurveda is blessed with unique concept of pathya and apathya sankalpa. Proper observance of pathya right from time of rajaswala kala till garbhadhana kala is the main emphasis in this review. This review will put a light on several wholesome and unwholesome diets, conducts and their mode of action on basis of Ayurveda in relation with preconception care.

Key Words: Preconception, preconceptional care, pathya, apathya

ASHTAVIDHASHASTRAKARMAS (EIGHT SURGICAL PRINCIPALS)

APPLICATION IN GYNAECOLOGY AND OBSTETRICS

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To heal sick has been challenge and obligation of the surgeon throughout the ages. During the centuries he has developed the urge to impart his knowledge to other member of his profession. In this way the Ashtavidhashastrakarma and its extended applicability is still followed all over the world either in the modified way or in a way of superspeciality. This unique contribution of sushrutsamhita is soul of any surgery. Gynaic and obstetric surgery is also obelized in the same manner. All the Ashtavidhashastrakarmas are repeatedly used in either way as a routine and specific way. The present paper is the importance and application of Ashtavidhashastrakarmas in practice of Gynaecology and Obstetrics.

REVIEW OF SWARNA (GOLD) IN DIFFERENT DOSAGE FORMS

WITH PEDIATRIC PERSPECTIVE

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Ayurveda has a great concern for its natural healing and therapeutic system of medicine. Balroga stand at 2nd position in ashtang ayurveda as told by our acharyas. However all branches of ayurveda can't exist without medicine and preparation of drugs is done under the umbrella of rasashastra & bhaishajya kalpana. Herbomineral preparations have its own unique importance in all types of medicine. Their least dose, quick efficacy, tastelessness, effective in incurable diseases also made it useful for all age groups. Our acharyas has been gave great emphasis to use of minerals for the treatments of child diseases. Swarna is a mineral form of medicine. It has been used since last years for prevention and treatment purpose by adults as well as children. Now days it is most popular in different dosage form in our society. Specially swarna used with herbal drugs like vacha, brahmi, kushtha and honey, goghrita in swarn prash form for its immunity modulating action and mental development of children. Different

dosage forms of swarna will be scientifically discussed in the paper.

Key words: - Swarna, children, health, dosage form, prash etc.

PHYSIOLOGY OF PARTURITION W.S.R. TO AYURVEDA

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Parturition or labor is a physiological event involving a subsequential, integrated set of changes within the myometrium, decidua, and uterine cervix that occur gradually over a period of days to weeks. Biochemical connective tissue changes in the uterine cervix appear to precede uterine contraction and cervical dilatation, and all of these events usually occur before rupture of the fetal membranes. In other words, parturition is the process of delivery of the fully grown fetus on the completion of the normal pregnancy period.

तस्मिन्नेकदिवसातिक्रान्तेऽपि नवमं मासमुपादाय प्रसवकालमित्याहुरादशमान्मासात् ॥ (च . शा . - 4/2 5)

In ayurvedic context (in shaarir sthan, acharya charak and sushrut both) explained about the period of delivery (prasav kaal), process of delivery, various symptoms just prior to delivery (prajayani), different stages of labour, concept of involuntary (aavi) and voluntary (pravahan) contractions. Ancient acharyas also explained different methods to induce smooth labour and resolve complication like obstructing labor (garbhasangha). Different physiological aspects of parturition would be explained according to ayurvedic and modern context in detailed presentation.

ROLE OF PATHYA-APATHYA IN POLY CYSTIC OVARIAN SYNDROME

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PCOS is a multifactorial disorder; changing life style has altered normal physiology of the body. PCOS has made great impact on women's physical, psychological and emotional health.

In today's era by consumption of nidanas like sedentary life style, junk food, improper work schedules, stress etc. the incidence of PCOS is increasing.

PCOS is a psychosomatic disorder of uncertain etiology characterized by Obesity, Anovulation associated with Primary or Secondary infertility, Hirsutism, abnormal menstrual pattern, increased incidence of pregnancy loss, and pregnancy related complications

In Ayurveda, there is no direct reference about PCOS but when we go through the Ayurvedic literature there are many references which are nearer to sign and symptoms of PCOS.

Clinical features of PCOS are nearer to Pushpaghni Jataharini. The woman menstruates in regular interval but is unable to conceive is pushpaghni the other symptom is corpulent and hairy cheeks. According to reproductive point of view, the pathogenesis of PCOS is similar to condition of Nashtartava. Vitiation of vata-kapha (↑ estrogenic state) leads to Avarana of artava (inhibition of FSH) leads to Nashtartava (no proper growth of follicles and chronic anovulation).

Pathya and apathya plays a major role while treating PCOS.

Pathya-Apathya Ahara and Vihara are the main measures which keep individual healthy in preventive and curative both purposes.

As in Ayurveda text it is quoted that “If pathya is followed medicine is not needed and if pathya is not followed even medicines are not useful”.

All these lifestyle modification with this concept will surely improve the quality of lifestyle in patients of PCOS and help them to get rid of PCOS.

Materials and methods: Various Ayurveda classics and studies published in journals are reviewed and evidences are analyzed.

Result: Fish, kulattha, kanji, tila, masha, sura, mutra, dadhi, shukta, lahsuna, guda etc. should be used as pathya in diet. Most of them having agni guna that leads to increment of artava. Yoga, asana and proper scheduled dincharya should also be followed by the patient to attain hormonal balance .

Conclusion: Thus main aim of management in PCOS is to adopt life style modifications including diet and physical activity. Because Ayurveda mainly emphasis over holistic and scientific approach based

upon Pathya-apathya Dietary regimen (Aahara) and Life style (Vihara) primarily than Medicines (Aushadha), therefore inspite of expensive hormonal treatment modalities, Indian system of medicine is better one to adopt.

Keywords- PCOS, Pathya-Apathya, Pushapaghi, Nashtartava.

PHYSIOLOGY OF STRESS DURING PREGNANCY AND ITS MANAGEMENT WSR TO AYURVEDA

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Introduction: pregnancy and delivery can be the most rejuvenating experience of women's life, during which every cell of the mothers body can be transformed.a pregnant lady is going through many changes, as her hormones change. The stress hormones which floods the body when pregnant women feel excess stress. Too much stress can cause a pregnant women to have trouble in sleeping, headache, loss of appetite or a tendency to over eat, high blood pressure all of which can be harmful to her and her developing baby.

Methods: Ayurveda texts, journals, published papers, articles, web searches etc are concerned to collect the related information.

Results: Physiological factors which affect the mother can be managed by do and don` t along with various yoga and pranayam, herbs and other herbal preparations, which are quite safe during pregnancy.

Conclusion: Ayurveda offers remarkable results in maternal health cases, which may have arisen from both physical and psychological causes. Both, the mental as well as physical components of the disorder can be addressed using ayurveda treatment. Details will be presented in the form of full paper at the time of presentation.

KEYWORDS: Pregnancy, Maternal Health, Herbal preparations, Physiological factors.

AYURVEDIC MANGEMENT OF JUVENILE RHEUMATOID ARTHRITIS

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Juvenile rheumatoid arthritis also known as idiopathic arthritis idiopathic refers to condition with no define causes. JRA is the common form of arthritis in children and adolescents. It is an autoimmune non infective inflammatory joint disease of more than 6 weeks duration in children and less than 16 years. Most commonly it affects age group of 7 to 12 years but it can be seen in older children as old as 15 years of age. Symptoms of JRA are often nonspecific initially and include lethargy reduced physical activities and poor appetite cardinal clinical features is persistent swelling of the affected joints such as knee, ankle, wrist and small joints of the hands and feet. Children with JRA cause significant growth retardation of joints as well as other body systems. International

prevalence range from 8 to 150 per one lakh. As per clinical features JRA can be correlated with *Amavata* in ayurved. Here vitiated *Vata* associated with *Ama* (undigested toxic substance) and produce many constitutional and specific symptoms affecting the bony joints by involving multiple body system. In modern science treatment of JRA is very long lasting and expensive. So Ayurveda can provide potential and effective treatment. The line of treatment can be summarised under two main captions i.e. to bring *Agni* (digestive power) to normal state to digest *Ama* and eliminate and vitiated *Vata* and *Ama*. Some herbo-mineral drug like *Keshorguggulu*, *Chitrakadivati* *Rasnasatakkwath* etc. and some *Panchakarma* procedure are useful to treat JRA. In this paper and effort has been made to describe JRA and its ayurvedic management. All details regarding this topic should be presented at the time of full paper presentation.

Keywords: Amavata, Vata, Panchkarma.

CHILDHOOD OBESITY AS A LIFESTYLE PROBLEM AND ITS MANAGEMENT THROUGH AYURVEDA

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Childhood obesity is a major health problem. The incidence of childhood obesity has increased rapidly in the last decade. In Ayurveda, *Sthaulya* as a disease which possess symptoms like obesity. It is one of the “medorog” excess fat accumulates in body. Children become overweight and obese for a variety of reason. The most common causes are genetic factors, lack of physical activity, unhealthy eating patterns, screening time activities such as watching T.V., gaming, texting etc. Only in rare cases is being overweight caused by medical condition such as hormonal problem. Ayurveda advocates some principle as *Dincharya*, *Ritucharya* and *Sadvritta*. It may be possible to implicate these principles on children in today's scenario. Ayurveda suggested that conduction of *Ahar-vihar*, use of drugs, yoga, panchkarma therapy can effectively manage child's obesity.

Keywords : *Sthaulya*, Lifestyle, *Ahar-Vihar*, Yoga.

ROLE OF PANCHAKARMA IN DUCHENNE MUSCULAR DYSTROPHY IN CHILDREN

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Duchenne muscular dystrophy (DMD) is one among the most common muscular dystrophy, as well as life threatening condition which shortens patient's life substantially. Disease characterized by progressive symmetrical muscular weakness that affects predominantly the proximal muscles and often accompanied by calf muscle pseudo-hypertrophy. It affects every 1: 3600 live male births due to mutation in dystrophin gene. Until now corticosteroids are the only pharmacological palliative management available for DMD but these drugs are associated with many adverse effects.

Ayurveda, considers the same under *Adibalapravruttavyadhi* due to *Beejabhagadusti* (hereditary) or *Garbhopaghatkarabhavas* (sudden mutation) which lead to *MedomamsaDusti* with vitiation of *Vata*. As disease ultimately leads to *Dhatukshaya* with vitiation of *Vata*. Certain *Panchakarma* procedures can be employed to improve the neuro-muscular status of the child. *Kashyapa* explained *Basti* in children with beneficiary effects in such conditions of *Vata* vitiation. Details with critical analysis and mode of action of *Panchakarma* procedures will be explained in full paper presentation.

KEYWORDS: *Beejabhaga Dushti*, Dystrophin, *Panchakarma*.

AYURVEDIC SYSTEM OF MEDICINE CONCEPT AND APPROACH A GOOD MOTHER HEALTH

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Introduction- Some people use the term traditional, indigenous, unofficial, complementary or alternative medicine as synonym of ayurveda. This is not correct ayurveda does not include only simple home remedies or herbs. it is complex system of healthcare.

Ayurveda means science of life. ayurveda is based certain fundamental they can be enumerated as panchmahabhuta, tridosha, dushya according to ayurveda, life is four dimensional ie. sharir (physical body), indriya (sense), satva (phyche) and atma (soul) and all these are complementary to each another.

According to ayurveda there are two more factors of concern when we are going to treat any person. One is **PATHYA** (diet taken during life or illness) and another is **ANUPANA** (After drinks or drink taken with or after medicine)

Healthy progeny and safe confinement is dream of every mother. which one can have complication free antenatal period safe delivery and healthy puerperium for the achievement of full time healthy baby while planning of diet is done it is necessary that diet should be balanced in term of all essential food factors (calories,minerals,vitamin and others)such as

MONTH WISE DIETETIC REGIMEN-

- The skimmed milk should be boiled with madhuyashti
- Along with sweet, cold and liquid diet milk with kakoli
- Milk with honey specially cooked with rice has got its beneficial value.
- Small amount of butter is advised in fourth month,cooked rice with curd is also beneficial.
- Kheer with sugar should be taken in fifth month of gestation.
- Shatavari, madhuyashti, Gokshuru the powder form taken one teaspoon full twice day or boiled milk gives beneficial results.
- Little amount of ghee heated with madhuyashti and shatavari.
- One should make use of different varieties of cerelac.
- Some important herbs use good mother health is shatavari, shalmali, nagkesar, lodhra, guduchi, japa, kumari, dashmula, chandana, bala, amalaki.

Why Need Of A Good Mother Health : (According To Shushtra)

ध्रुवं चतुर्णां सान्निध्याद् गर्भः स्याद्विधिपूर्वकः । ऋतुक्षेत्रान्बुबीजानां सामग्रयादङ्कुरो यथा ॥(सु.शा.2/35)

PREVENTION OF ANAEMIA DURING PREGNANCY THROUGH AYURVEDA

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In Asia, anaemia (irrespective of the severity) is the second leading cause of maternal death accounting 12.8% independent of deaths due to postpartum haemorrhage. Literature search further adds that about 20% of maternal deaths are caused by anaemia and with this anaemia is additional risk factor in contribution of 50% of all maternal deaths. Common type of anaemia is iron deficiency, this is an nutritional deficiency disorder and the pregnant women are highly vulnerable population particularly with its frequent risks. In Ayurveda we have solutions to tackle it in both mild and severe forms i.e. herbs and Bahamas respectively. By which we can use a form that tackles with GI problems caused by intake of iron. In this paper we are going to discuss these forms and formulations and their effects.

ROLE OF AYURVEDA IN PROMOTING SAFE MOTHERHOOD



**Piles, Bleeding, Anal Itching (Pruritus),
Constipation and pain associated with Piles**

Dabur
PILOchek
Effective Relief from Pain
& Discomfort

DOSAGE:

Tablet: 2 tablets, two times a day

Gel: 1g for local application



**In Constipation, Flatulence and
Incomplete Bowel Movement**

Dabur
Laxirid
Complete Gut Care

DOSAGE:

Syrup:

Adults: 1-2 teaspoonful (5-10ml), once a day

Children (above 6 years of age): ½-1 teaspoonful (2.5-5ml), once a day

Tablet: 1-2 tablets at bedtime





In Dysmenorrhea & Irregular Menstruation

Dabur
Mensta

Natural Solution for DUB

DOSAGE:

Syrup: 2 teaspoons (10ml),
twice daily for three cycles

Tablet: 1-2 tablets (125mg to
250mg), twice daily for three
cycles



In Breathlessness associated with Asthma,
Chronic Cough and Allergic Bronchitis

Dabur
Broncorid

Natural Bronchodilator

DOSAGE:

Adults: 2 teaspoonful (10ml),
two times a day with lukewarm
water

Children (5-12 years): 1 teaspoonful
(5ml), two times a day with
lukewarm water



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Maternal and child healthcare in Ayurveda aims to provide good health for the expectant mother and the infant, ensuring prevention of diseases through wholesome diet and regimen which vary depending upon the season and surrounding environment as well as the digestive power of the expectant mother. For proper ante natal care of expectant mother, balance of *doshas* through proper food (*ahara*) and lifestyle (*vihara*) in different stages of pregnancy in consonance with the digestive power and the development of fetus has been emphasized. The specific regimen to be followed just after birth using various oils and herbs has been laid down giving reasons for various procedures. Breast milk being wholesome, vitalizing and appetizing in nature has been mandated as the most complete and wholesome diet for the infant.

Keywords: *Maternal, Child Health Care, Ayurveda.*

EFFECT AND MODE OF ACTION OF KRIMI MUDGAR RASA ON KRIMI ROGA

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In Ayurvedic system of medicine to serve the human well being different types of drugs such as plants , metals , minerals , gem stones and animal origin had been used by acharyas . The discipline of Ayurveda which deals with collection, manufacturing, standardization of medicinal formulations is known as Ras shastra & Bhaishjya kalpana. One of its various formulations krimi mudgar rasa is also a famous formulation which can be used in pediatric care. Its main utility is in krimi roga in which most commonly affected groups are infant , children and adolescents. It contains parada, gandhak, vayvidang which is named as krimighna according to Acharya Charak. These formulations can be administered with various anupanas of which honey is meant to be more effective. In the following paper I will try to enlighten the utility and mode of action of krimi mudgar rasa in pediatric care and krimi roga.

Keywords : Krimi Roga , Pediatric care , Anupana , Mode of action.

GARBHINI PARICHARYA AND ITS CLINICAL IMPORTANCE

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In ayurveda, antenatal care has been given prime importance and elaborated as garbhini paricharya. garbhini paricharya refers to **antenatal care** which recommends ahar (specific dietary regimen), vihar (normal day activities) and vichara (psychological and emotional activities). the care of pregnant women should start from the beginning of conception till birth of child. garbhini paricharya comprises of **masanumasik pathya (month wise dietary regimen), garbhopghatkar bhava and garbhashtapak dravyas**. This ideal & unique configuration is also having prime importance in the field of prevention of most of congenital abnormality. Such as cleft lip, cleft palate, spina bifida. At the same time this paricharya promote the intrauterine fetal nourishment with qualitative beneficial changes in the motor as well as sensory organ. The present paper deals with these highlights & unparalleled contribution to the medical science in the field of desire & disease-free next generation.

Keyword: -Garbhini paricharya, Ayurveda, Regimen, Pregnancy.

ROLE OF AYURVEDA IN THE MANAGEMENT OF GUDABHRAMSA

W.S.R. TO PROLAPSE RECTUM

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Rectal Prolapse in paediatrics has its highest incidence in infancy and is commonly seen in industrialized countries. The prolapse may involve only the mucosa or all layers of the rectum. These circumstances are most common from 3-5 years of age and usually first detected by the child's parents and usually spontaneously reduce. In ancient Ayurveda Acharya Charak & Shushruta has described RECTAL PROLAPSE as a GUDA BHRAMSA that is passing of stool with excess straining (pravahan) in ruksh and durbal purush lead to prolapse of the anus and rectum out of gudavali.

The main object of my paper is to understand the etiopathogenesis this disease and to highlight the principles of treatment for the radical benefit of this common disease in developing countries as well as under developed countries. In present paper I will also re-established the guidelines for the complication free management without any surgical intervention.

Keyword: -Rectal Prolapse, Ayurveda, Management.

A CONCEPTUAL REVIEW OF KAPHAJA YONI VYAPAD (NON SPECIFIC VALVO VAGINITIS)

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A healthy woman is a promise of a healthy life. In different phase of life from puberty to menopause, the concept of healthy yoni has been mentioned in Ayurveda. Vulvovaginitis is one of common gynecological complaints reported by women irrespective of their age and socio economic status. The common type of vaginal infections is vaginal candidiasis (CV), Trichomoniasis (TV) and bacterial vaginosis. In Ayurveda Non Specific Vulvovaginitis can be correlated with Kaphaja yonivyapad. The management of Kaphaja yonivyapad include Sthanik chikitsa (Yoniprakshalan, Yoni Varti, Yonipichu etc), and Shaman chikitsa (Pushyanug churna, Varunadi kwath etc). These procedures and preparation have beneficial effect in treatment of Vulvovaginitis and there is very less chance of recurrence and having no side effect. Therefore, in this study an effort has been put forth to make a conceptual study covering almost all the aspects of Kaphaja yonivyapad as per Ayurveda and modern.

Keywords:- Ayurveda, Kaphaja yonivyapad, Vulvovaginitis, Ayurvedic chikitsa.

GARBHASHYAPATAN (LSCS) IN SUSHRUTA SAMHITA

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In Ayurveda LSCS can be discussed under Mudhgarbha. Concept of Mudhgarbha described in various Ayurvedic classic is very unique and scientific. Acharya Sushruta described surgery of Mudhgarbha in Sushruta samhita. Caesarean section is one of the commonly performed surgical procedures in obstetrics and is certainly one of the oldest operations in surgery. One of the most dramatic features of modern obstetrics is the increase in the caesarean section rate. Acharya Sushruta described as Garbhashyapatan in treatment of Mudhgarbha.

Keywords- Ayurveda, Sushruta, Mudhgarbha, Caesarean section, Garbhashyapatan.

DYSMENORRHOEA (KASHTARTAVA): AN AYURVEDA PERSPECTIVE

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In present day life women are effectively facing challenges encountered by stressful life resulting in Mithya Ahar, Vihar, over exertion & malnutrition this may direct to Vikruti in “Rutuchakra” leading to various vyadhi allied to menstruation. Ayurveda recommends rutucharya and dinacharya, diet modulation and yoga in the form of asamas, pranayam and meditation on a regular basis so as to alleviate dysmenorrhoea effectively. Similarly, Uttabasti, Garbhashaya balyaushadhi, amuvasan or matrabasti can also be administered if necessary.

Keyword: Ayurveda, Kashtartava, Mensuration, Dysmenorrhoea.

MANAGEMENT OF RESPIRATORY DISORDERS IN CHILDREN

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Respiratory infections are the most frequently occurring illness in childhood. It is a leading cause of mortality in children below five years of age. A Preschool aged child has 6 -10 episodes and 10 -15% of school aged child have at least 12 episodes per year. Due to specific anatomical and physiological peculiarities, immunological consideration and immature response, children become more susceptible to respiratory infections. In India about 26% cases of RTI were reported with an incidence rate of 2,173 case per lakh population. Early treatment is necessary because it may hamper the optimum growth and development of child.

Ayurveda pathy gives a safe and effective formulation with fewer side effects. *Pushkarmuladi churna* mentioned in *BHAISHJYA RATNAWALI* under *Bal Rogadhikar*. It contain *Pushkarmul, Ativisha, Karkatshringi, Pippli* and *Dhanvyas*, which acts on Respiratory System by their *Ushan, Laghu guna*.

Keywords – Respiratory disorders, Children mortality, Ayurveda pathy, *Pushkarmuladi churna*.

LEHAN AS IMMUNOMODULATION IN CHILDREN

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Balyavastha has been described in Ayurvedic text as period of minimal relative Bala (physical strength and immunity) and hence children of this period are more prone for various diseases. A considerable decrease in physical strength and immunity are said to be added factor for disease occurrence and severity. Immunity is the balanced state of having adequate biological invasion, while having adequate tolerance to avoid inflammation, allergy and autoimmune diseases. Vyadhikshamatva is the strength to protect the body against diseases. It is also called body resistance. It depends on Bala, Balavardhak bhava, Prakrita kapha and Ojas. Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. In ancient time, there was neither the facility of immunization nor vaccination. Our Acharaya developed their own skill named as Lehan. The concept of Lehan which depicts the administration of various herbal drugs, ghrut preparation and gold as supplementary feeds to increase brain efficiency and body strength of the child. Swarn prashan described in Kashyap Samhita under the concept of Lehan. In Swarn prashan gold along with madhu and goghrit is given to the babies. This enhances intellectual capacity, complexion, longevity of life, metabolic and digestive power and provides protection from disease.

Key word – Vyadhikshamatva, Immunity, Lehan, Swarn prashan

MANAGEMENT OF SEVER'S DISEASE IN CHILDREN (CALCANEAL APOPHYSIS)

AN AYURVEDIC VIEW

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Sever's disease is a common cause of heel pain, particularly in growing children and people who are physically active. It happens when the attachment of the Achilles tendon to the growth plate becomes inflamed and causes pain. Sever's disease or calcaneal apophysis can be corelated with *vatakantaka* in ayurveda. It is explained by *sushruta* in the context of *vatavyadhi* as a painful condition of heel caused by its improper placement of foot on the ground. In this disease *Vata* as *pradhana* dosha along with *anubandhi kapha*. Pain in heel due to vitiated *vata dosha* and *kantaka* refers to thorn which results in pricking pain in heel. Depending on the *vyadhi laxan*, the *dushti* of *vata*, along with *kapha* was considered here and treatment was planned according to that. Therefore to prevent side effects, to save duration of treatment and to make it cost effective an ayurvedic line of treatment must have developed.

Keywords – vatakantaka, vata, anubandhi kapha, vyadhi laxan

AYURVEDIC APPROACH OF POST- NATAL CARE (SUTIKA PARICHARYA)

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Ayurveda has always given importance to care of *stree* (female) at every aspect of life in respect of *Rajaswalaparicharya*, *Garbhiniaparicharya* and *Sutikaparicharya*. After delivery of baby and expulsion of placenta, the woman is termed as “*Sutika*” and the time period extending upto six weeks is termed as “*SUTIKA KAAL*”. The care given during *Sutikakaal* is called *Sutikaparicharya*. *Acharya Kashyapa* described about stage of *Prasava* that one foot of female is situated in this *Loka* and other in *Yamloka*. The woman became extremely debilitated physically and mentally after the delivery so the lady after such a difficult process of *Prasava* must be advised certain mode of life and the regimen that helps the woman to regain the lost vitality and helps her body to revert back to pre- pregnant state. The main achievements through *Sutikaparicharya* are *Garbhashayashuddhi*, *Dhatu-paripurnata*, *Stanyavridhhi* to destabilization of physical, mental and physiological well being.

In this article, an effort has been made to describe about *Sutikaparicharya* by specific *Aahar* (diet), *Vihar* (life style) and *Ausadh* (medicine) which is beneficial for post-natal woman.

Keywords: Sutika, Sutikaparicharya, Post -natal

SCIENTIFIC ANALYSIS OF NUTRITIONAL QUALITIES OF FOOD INDICATED IN GARBHINI PARICHARYA (PRE-NATAL CARE)

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Ayurveda has given great emphasis on *garbhini paricharya* (pre natal care) which has multiple goal of easy parturition, uncomplicated pregnancy, safe mother and healthy progeny. As per recent W.H.O report, it suggests that everyday approximately 830 die from preventable causes related to pregnancy and child birth. To reduce this rate, proper *garbhini paricharya* (antenatal care) is the need of the day. In this paper, we have made an effort to do critical analysis and scientific description on nutritional qualities of diet for pregnant woman as explained in classical *Ayurveda* textbooks. There is specific food regimen prescribed for pregnant woman throughout nine months. The propose to analyze why there is specific food article indicated for the particular month. We are trying to make scientific explanation like chemical composition and properties of foods with specific reference to *garbhini*, e.g. use of *gokshur* (*Tribulus terrestris*) at 6th month, helps to reduce edema and other complication of water accumulation by gravid uterus, because *gokshur* has diuretic and nephroprotective properties. Consumption of adequate milk

during whole pre natal period supplies the required nourishment to mother and fetus, because milk contains all vitamins (except vitamin C), minerals and fat, protein and carbohydrates. In this paper, authors are proposing scientific explanation on all foods which are suggested by acharyas during prenatal regimen.

Keywords: pregnancy, garbhini paricharya, diet and nutrition, pre natal care, *Tribulus terrestris*.

ANTENATAL AND POSTNATAL CARE OF WOMEN THROUGH AYURVEDA

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A healthy world starts with a healthy mother. The health of mother and the in-utero environment can continue to have an influence on her children throughout their lifecourse- well into adulthood. Infact health of mother at the time of fetal development has even been linked to probability of child developing heart disease or diabetes in adulthood. In short healthy mother starts a cycle of intergenerational health. Good antenatal, perinatal and postnatal care, is therefore, important to individual, to society and to future generation. Pregnancy is a happy and joyous time of life for many women, but it can also be a challenging time of life as mother's body goes through numerous changes in order to create and support development of new life. Ayurveda provide support for physical, mental/emotional and spiritual aspect of mother by providing good health for expectant mother through wholesome diet and regimen which vary depending upon season and surrounding environment as well as digestive power of expectant mother. Ayurveda places enormous emphasis on importance of caring mother before, during and after pregnancy. According to Ayurvedic text the care of mother begins even before conception by certain purifying procedure ,after conception by specific routine for each month and stages of pregnancy which constitute aahar(specific dietary regimens) , vihar(daily activities and therapeutic procedure) and modification in psychological behavior. Aahar, vihar which are contraindicated for pregnant women known as garbhopaghatakara bhawas are also mentioned. After delivery general care of prasuta (puerperal women) are mentioned to restore the health of mother.

Keywords-Prasuta, Garbhopaghatakara Bhawas, Conception.

DEVELOPMENT OF MOBILE APPLICATION AND WEBPAGE “ BALAAYU POSHANA” FOR NUTRITION EDUCATION AND COUNSELLING FOR PRIMIPARA

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Introduction: Nutrition education and counselling is a widely used strategy to improve the nutritional status of women and children. Adequate nutrition during infancy is essential for lifelong health and well-being. *Kashyapa* have praised importance of breastfeeding and have mentioned various weaning food recipes. **Aim:** To develop mobile application and webpage “BalaAyu Poshana” for nutrition education and counselling for primipara along with ayurvedic guidelines. **Objective:** The strategy of forming an application and webpage focuses primarily on: - Promoting adequate weight gain through sufficient and balanced protein and energy intake. - Promoting consistent and continued use of micronutrient supplements, food supplements or fortified foods. -This application and webpage will provide an authentic, accessible and friendly guidance to primipara to promote the proper growth and nutrition of her child. **Material:** Smartphone or computer with suitable software. Internet connectivity or network access. **Methods:** The concerned literature from authentic resources is collected and inserted in the application and webpage. Nutrition education and counselling (NEC) is a commonly applied strategy to improve mother and child nutrition. Using a modified Child Health Epidemiology Reference Group method we systematically reviewed the literature. The overall quality of the body of evidence was deemed low for all outcomes due to high heterogeneity, poor study designs and other biases. **Conclusion:** The developed mobile application and webpage will provide

appropriate and authentic guidance for primipara in order to ensure good nutritional status of her child.

Keywords: Child nutrition, Primipara, NEC, Ayurvedic Guidelines.

APPLIED ASPECT OF LIGATION OF UMBILICAL CORD

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Umbilical cord is also called the navel string, birth cord or funniculus umbilicalis. Umbilical cord which connects foetus to placenta contains two arteries and one vein. Vein carries nutrition to the foetus whereas arteries carry waste products from the foetal metabolism. Lymph and venous blood flows upward above the plane of umbilicus and downwards below this plane. Umbilicus is the meeting point of the four (two lateral, one head & one tail) folds of embryonic plate. This is also the meeting point of three systems i. e. Digestive system (Vitello-intestinal), the excretory system (Urachus) and vascular system (Umbilical vessels). Umbilical cord has a greater importance at the time of birth. Various Acharyas have mentioned its cutting as Nabhinal Chedana. According to Acharya Charaka and Sushruta, the cord should be tied tightly with a sterile thread by marking a point at length of around 8 Angulas away from the abdomen of the child. Acharya Vagbhatta advised ligation at 4 Angulas and cutting of it by sharp scalpel or instrument in hygienic environment. If due to any reason infection spreads to the liver, portal vein, peritoneum or even systemic circulation, which becomes foetal for the growing neonatal. Detailed discussion in this regard will be presented as my full paper in the seminar.

Keyword:- Umbilical Cord, Blood, System.

IMPORTANCE OF VIRECHANA KARMA IN BAL ROGA

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The term virechana encompasses both the vaman and virechana according to acharya . This procedure is the most important appraise for elimination of the morbid doshas through the adbhoga . Virechana is less stressful procedure and has least possibility of complications. Hence it is widely used as shodhan therapy. Virechana specially act on vaikranta pitta and subsequent to this all pittaja vikara pacifies completely, as fire of a house quiet down with water.

Reference of virechana karma by acharya kashyapa:

- In gulma chikitsa, eranda tailam for mild virechana after snehana and swedana is prescribed.(ks.chi.gulmachikitsa.29)
- In phakka roga chikitsa, virechana with trivrut ksheera is prescribed, followed by brahmi gritham. (ks.chi.phakka rog)
- Virechana causes frequent relief in pitta dominant sammipatik jwara by mustadi kwath,madhu and sarkara.(ks.kalp.visheshakalp)
- In anaha chikitsa, virechana recommended as the form of phalavarti .(ks.chi.udavarta chikitsa.4)
- In pitta pradhan vishama jwara, virechana is mentioned along with tikta sheeta shaman dravya.(ks.khila.vishamajwar 82)
- In amlapitta ,pakshvashaya gata dosha could be evacuated by virechana by triphala,trayamana,katuki,rohini and trivrut.(ks.khila.16/30,32)
- In niram stage of pittaja jwara, virechana after snehan by tikta gritham is recommended. (ks.khila.14/13)
- In pittaja shoola, peya with virechana properties is useful .(ks.khil . 18/14)

ROLE OF SWEDANA IN BAL ROGA

allowed by NPIC expect in particular cases like kerosene, corrosive, haemolytic poisoning & approach to hospital for further treatment with that container from which poison ingested .Preventive methods are like- child proof containers,Pills in blister packs &foil strips, keep poisons out of reach of children, read labels of medication given to children, discard old medication ,batteries, poisons. Never put poisons in drinking bottles. Avoid growing poisonous plants near home.

Keywords: Curious, NPIC, Child-Proof.

IMPORTANCE OF YOGA DURING PREGNANCY FOR BETTER PROGENY

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The health is defined by WHO is a state of complete physical, mental and social well being and not merely absence of disease or deformity . But the truth is that there can't be a healthy body without mind and spiritual i.e, spirituality. During pregnancy body goes through many changes physically and mentally . Yoga focuses on poses for pregnant women which are comfortable for her. There are many benefits of yoga during pregnancy such as improving sleep, reducing stress , increasing strength and flexibility. It decreases lower back pain , lowered the risk of intrauterine growth restrictions. Physical exercise can be helpful in the management of stress and other associated conditions accompanying pregnancy. Empirical evidence is needed to create guidelines outlining postures that are safe for pregnant women across the trimesters . There are various yoga according to trimesters as

1st trimester :- Bhujangasan , Badhhakonasana , Veerbhadraasan, Tadaasan .

2nd trimester:- Veerbhadraasan, Trikonaasan, Konaasan, Adhomukhswanaasan, kanthsanchalaan

3rd trimester :- Ardha titali aasan , poorn titali aasan , Supt udarkarshaasan , Tadaasan

Conclusion :- Overall it is evident that yoga is well tolerated and effective in the management of pregnancy. This budding body work suggests that improvements we're observed on psychology domains during pregnancy and labour and on birth variable.

Key word :- Yoga . Pregnancy, Trimester, Stress, Intrauterine growth.

TO STUDY THE EFFICACY OF JYOTISHMATIGHRITA ON INTELLIGENCE QUOTIENT & MEMORY OF SCHOOL GOING AGE CHILDREN

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Ayurveda represents an ancient system of traditional medicine prevalent in India about 5000 years old. *Medhya* is an Ayurvedic concept that implies intellect. *Budhi* (intellectual power of brain) is a powerful entity which retains the specific knowledge or the essence of the texts gained by reading, listening or repeating it. Learning disability means the difference that is noticed between the kids learning capacity & their real learning ability. This neurological condition is due to the kids brain that finds it hard to understand specific signals & does not permit the kid from executing the information linked with those signals. Learning disability & Ayurveda focuses on drugs that motivate the nervous system & these stimulant drugs in turn the release of norepinephrine & dopamine in the brain & thus the transmission power get activated. Unfortunately, modern medicine based psychoactive drugs have met with limited success in treatment of various neurological problems. Ayurvedic herbal medicines engender & summon intelligence, memory & mental perception. These drugs promote the Intellect (*Dhi*), Retention power (*Dhriti*), Memory (*Smriti*). Out of which *Jyotishmati* (*Celastrus panniculatus* Wild) plant is one of the cognition enhancer. This review discusses about the effect of *Jyotishmati Ghrita* on IQ & Memory of school going age children.

Keywords:-IQ, *Medhya*, Memory, Learning Disabilities, *Jyotishmati Ghrita*.

SPECIFIC THERAPEUTIC PANCHAKARMA PROCEDURE IN PEDIATRIC PATIENTS A CLASSICAL REVIEW

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The childhood is very crucial period where the most of mental and physical development take places. The abundant of dosh, dushya and mala are less in children body as compared to adult which make them more susceptible towards disease. Kaumarabhrityaka, Kaumarabhritya, Kumara Tantra or Kaumarabhritya encompasses information regarding pediatric diseases (BalaRoga). Ayurveda is the science of life in which treatment is branched into two wings namely; Shodhanachikitsa (detoxification therapy) and Shaman chikitsa (curative therapy). Shaman therapy includes deepan (appetizer), pachana (digestive) etc. and Shodhana therapy includes Panchakarma. Shodhanais advised to remove the vitiated doshas and to bring the doshas to normal condition. Kashyapa being Kaumarabhritya physician explained panchakarma can be done in balastarting from infancy and advised vamana, virechana, basti, niruha or yapanabastis and anuvasanabasti. such as; cerebral palsy, pranavahasrotastha and tamakashwasa. In pediatric practice also these therapies are helpful provided administered with due consideration in stage of the diseases, dosage of medicines, proper method, vaya and Bala of the children. Literature survey revealed that bala panchakarma play significant role towards the management of various childhood diseases; this article emphasizes role of panchakarma therapy in the management of bala-roga.

Keywords: Deepana, Panchakarma, Shaman chikitsa, Shodhanachikitsa.

IMPORTANCE OF PANCHAKARMA PROCEDURES IN BAL ROG

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Panchakarma therapy and certain related therapeutic procedures have useful scope in bal roga. However, the children, being very soft, tender & fast growing and developing individuals any therapeutic intervention need to be considered with due caution and proper adoption taking into account the soft, tender nature and fast growing phenomenon in the organism. All intense & vigorous therapies should be avoided.

In ayurvedic text age of the child is must considerable for all panchakarma therapies such age-

- Hasta Sweda is recommended up to 4 month of age.
- Vamana is contraindicated in <6yr of age.
- In children generally Mridu virechana are recommended.
- **Vastiyogya Ayu-** There are some controversies between Acharyas

Gargya: Just after birth

Mather: After 1 month

Atreya: After 4 month

Parasar: After 3 year

Bhel: on 6th year

Kashyapa: Annada

Nasya is not recommended in child <7yrs of age.

These panchakarma therapies can be apply in bal roga such as- snehan, swedan, vaman, virechan, nasya, basti & other procedures like- shiroabhyang, shiro-parishek, shirobasti, shirodhara, shashtik shali pinda swedan, etc

Keywords- Panchakarma therapies, bal roga, abhyang, swedan, basti, nasya.

A REVIEW OF MANAGEMENT OF KARSHYA (MALNUTRITION) IN CHILDREN

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Childhood period is considered as the foundation of better future life and every incidence has influence on further life. The childhood malnutrition is a major problem in developing countries. Malnutrition is a physical condition or process that result from the interaction between inadequate diet and infection and characterized by poor infant growth, reduced cognitive development, anemia, blindness. According to UNICEF nearly half of all deaths in children under 5 are undernutrition. The most common deaths in malnutrition children is infectious diseases and poor immune function. Malnutrition may be correlated to KARSHYA disease in Ayurveda. Diseases such as Parigarbhika, phakka, balashosha, sushka revati describe clinical feature in different ayurvedic texts. Prevention and management of Karshyain Ayurveda by improve immune power of child through proper nutrition, diet, (food management) and use of herbal medications.

Keywords:- Karshya, Malnutrition, Ayurveda, Immunity, Panchkarama, Rasayana.

SUTIKA JWARA PREVENTION & MANAGEMENT

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A Woman can be termed *Sutika* only after the complete expulsion of placenta. It is a state of immune suppression, where there is an alteration in the physiological, physical and nutritional bond. Due to *Garbhavridhi* there will be *sarvadhātu Shithila* and due to *aavi and pravahana* during delivery there will be *dhatu, agni* and *balakshaya* which leads to vitiation of *vata* causing various *Sutikaroga's*. Among which *Sutika Jwara* is considered important and prevention of the same can be attained by following proper *Sutika Pricharya*. Points that can be considered under *Sutika Paricharya* are *Sutikagara, Ashwasana, Abhantaraupakrama, Bahyaupakrama*, local wound care and breast care. Various line of management has been mentioned for *Nija* and *Agantuja Sutika Jwara* in our classics. In this context the quote "Prevention is better than cure" holds good.

Keywords :-Sutika, Sutika Jwara, Sutika Paricharya, Vata.

ROLE OF LEHANA IN ENHANCING CHILD IMMUNITY

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The concept of *Vyadhiksamatva (Immunity)* is of tremendous importance in the daily wellness of human beings; for prevention and recovery from *diseases*. In Ayurveda, the essence of all Dhatus is called "*Ojas*" and it is responsible for the defence of human body against *diseases*. When etiological factors come in contact with the body they try to produce *disease*. At the same time the body tries to resist the *disease*. This power of the body, which prevents the development of *diseases* or resists a developed *disease*, is called *Immunity*.

Immunity is the balanced state of multicellular organisms having adequate biological defenses to fight infection, disease, or other unwanted biological invasion, while having adequate tolerance to avoid allergy, and autoimmune diseases.

In Ayurvedic literature, for increasing the *immunity* Acharya Sushruta, Vagbhata and Kashyapa described *Lehana* for this purpose which ultimately enhances *immunity*. *Lehana Karma* enhances growth and development by providing sufficient nutrition and promoting health with improving intellect and speech.

Key words: *Vyadhiksamatva, Immunity, Lehana, Ojas.*

EFFICACY OF NASYA IN THE MANAGEMENT OF CEREBRAL PALSY- A CLINICAL STUDY

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INTRODUCTION- Cerebral palsy is the most common motor disability found in children. It comprises a group of non-progressive but often changing motor impairment

syndromes secondary to lesions or anomalies of brain arising in early stages of its development. Population based studies from around the world report prevalence estimates of Cerebral palsy ranging from 1.5 to 4 per 1000 live births. AIM- To assess the efficacy of Panchendriyavivardhana Taila Pratimarsha Nasya along with Udvartana and Abhyanga in the management of Cerebral Palsy. MATERIALS AND METHODS: In this study, total 06 patients were treated with oral medication along with Panchakarma procedure. Treatment was carried out in three courses of 18 days protocol with time span of 16 days between each course. 1.5 gm Medhya Churna was given orally for 86 days along with Udvartana for 5days, Abhyanga followed by Nadi Swedana for 5 days and Pratimarsha Nasya for 8 days in each course. RESULT: Overall assessment was done by using Ashworth scale, MRC scale, MACS scale and CDC grading. Overall 50% mild and moderate improvement was found in growth parameters, developmental milestones and fine motor milestones. CONCLUSION: Cerebral Palsy is explained incurable in different records but the quality of life can be improved with the help of Ayurvedic management protocol.

Keywords- Abhyanga, Ayurveda, Cerebral Palsy, Nasya, Panchendriyavivardhna Taila.

ROLE OF PARNABEEJA IN THE MANAGEMENT OF INFECTED CESEREAN SECTION WOUND A CASE STUDY

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Cesarean delivery (C-section) is a surgical procedure used to deliver a baby through incisions in the abdomen and uterus. C-Section is one of the most common operative performed currently in Obstetric Practice. Post Caesarean section wound infection ranges from 3-16%. It can result in discharge from suture line, wound gaping and resulting in burst abdomen. For such an infected post C-Section wound (i.e *Dushtavrana*), we used a *Swarasa* of *Parnabeeja* herb (*Bryophyllum pinnatum*) for cleaning of wound and after that *pooran* of a *parnabeeja kalka* within that gaped site.

The present case report shows 32 years' female operated for Cesarean section & then wound get infected with pus discharge, huge gapping & foul smelling of discharge. After treatment & Re-suturing of that wound, she gets a complete relief & get discharge from hospital.

Keywords: - Infected Wound, *Parnabeeja*, *Swarasa*, *Kalka*, *pooran*.

PANCHKARMA MANAGEMENT OF CEREBRAL PALSY IN CHILDREN: A SINGLE CASE STUDY

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Introduction: Cerebral Palsy is a neurological disorder that affect's a child's movement, motor skill and muscle tone. Cerebral palsy occurs in about 2.1 per 1000 live births .It can be taken as Vatavyadhi as far as its etiology and

symptoms are concerned. According to Ayurved, it is classified in the disease categories of Sahaja (hereditary) and Garbhaja (congenital) and Jataja (psychosomatic) type of disease.

Material and method: A case study where a 4 year old male child patient with spastic diplegic cerebral palsy, Global (predominantly Gross motor) delay and GMFCS level iv in the context of being born at term with history of perinatal asphyxia and HIE treated with panchkarma. Patient was clinically examined as per various grades of severity of illness and investigated for baseline biostatus to evaluate therapeutic outcome.

Result: Panchkarma ensured marked improvement in all parameter ie. Head holding, Sitting, GMFCS level without any disease related complications.

Conclusion: Cerebral Palsy has no cure in modern medicine but cases diagnosed at early age and treated with panchkarma achieve marked clinical improvement.

Keywords: Cerebral Palsy, Panchkarma, Garbhaja, Quality of Life.

ROLE OF PANCHKARMA AND RASAYANA IN BALROG

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The childhood diseases described as Bal-Rog in ancient Ayurveda science, this is the state of mental and physical development. Ayurveda consider DhatriStanyaDushti as causative factor of diseases in KsheeradaAvastha. The physiological participation of Dosh, Mala and Dushysa are different in children as compared to adult therefore the type and prevalence of diseases are also different in children and thus pediatric care needed utilization of various approaches for the management of Bal-Rog such as herbal remedies, discipline life style, Rasayana and Panchkarma. This article described role of Rasayana and Panchkarma in the management of some Bal-Rog. Panchakarma may be done from the age of seven years and as per requirement Rasayana therapy may be used in early age but with great precautionary measurement.

This pioneer approaches gives utility of specific therapeutic panchakarma procedure and their methodology in paediatric patients to strengthening immune system, restoring balance and wellbeing.

Literature survey revealed that bala panchakarma play significant role towards the management of various childhood diseases; this article emphasizes role of panchakarma therapy and Rasayana in the management of Bal-roga such as; cerebral palsy, pranavahasrotastha and tamakashwasa.

Keywords: Ayurveda, Bal Rog, Rasayana, Panchkarma.

ROLE OF AYURVED IN CHILDHOOD OBESITY- A LITERARY REVIEW

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Childhood obesity is an issue of serious medical and social concern. In developing countries including India, it is a phenomenon seen in higher socioeconomic strata due to the adoption of a western lifestyle. Consumption of high calorie food, lack of physical activity and increased screen time are major risk factors for childhood obesity apart from other genetic, prenatal factors and socio-cultural practices. Obese children and adolescents are at increased risk of medical and psychological complications. Insulin resistance is commonly present especially in those with central obesity and manifests as dyslipidemia, type 2 diabetes mellitus, impaired glucose tolerance, hypertension, polycystic ovarian syndrome and metabolic syndrome. Obese

children and adolescents often present to general physicians for management. The latter play a key role in prevention and treatment of obesity as it involves lifestyle modification of the entire family. Acharya Charaka has described Ashtounindatiya Purusha which include Atisthoulya, Atideergha, Atihraswa etc. The sign & symptoms of Sthoulya are almost similar to the symptomatology of obesity; There are a no. of treatments described for Sthoulya in Ayurveda classics specially by Maharshi Charaka & Sushuruta which are very effective & cheaper also.

LIFE STYLE MODIFICATION IS THE FIRST LINE TREATMENT IN PCOS

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PCOS is the most common cause of anovulatory infertility. It is defined as a syndrome of ovarian dysfunction associated with hyperandrogenism and Polycystic ovary morphology. In *Ayurvedic* classics, there is not any definite description for PCOS. However description of *Pushpghanijatharini, Nashtartava* can be correlated with symptoms of PCOS. Diet recommended in PCOS-High fibre food. It combats insulin resistance by slowing down digestion and reducing the impact of sugar on blood. This includes cruciferous vegetables. Diet which is not recommended-food high in refined carbohydrates. Life style changes towards managing PCOS include exercises and daily physical movement and weight loss, healthy eating habits include low sugar intake. Exercises can help to reduce the insulin resistance. Yoga has positive effect in relieving stress. The soothing and calming effect of Yoga helps to alleviate stress and reduces the level of stress hormone in body. Yoga promotes calorie burn in the body by pumping up the metabolism. Yoga also improves gastrointestinal balance by providing massage to the digestive organs and improves their function. Useful Yogasana for treatment of PCOS are Mandookasana, Naukasana, Butterfly Pose, Shashankasana, Ardhamatsyendrasana, Pawanmuktasana, Bhujangasana, Paschimottanasana.

ROLE OF PUNARNAVADI KWATH IN THE MANAGEMENT OF PREGNANCY INDUCED HYPERTENSION

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Edema in pregnancy is a common symptom in late pregnancy as reported to be 50-80 % in third trimester (1). It is caused mainly due to subcutaneous fluid retention and by the pressure of the expanding uterus on the vessels supplying the lower extremities. (1) Early detection and appropriate treatment is the need of the hour to reduce the symptoms such as hypertension, preeclampsia, renal disorder etc.

This case study mainly aims for suggesting a safe, effective and easy available answer for the management of Pregnancy induced hypertension and associated symptoms and related fetomaternal complications.

In Ayurveda, Shoth in pregnancy is described as Garbhini Vyadhi. Punarnavadi Kwath has Shothhara properties (2). In "Bhaishyajaratnavali," Udarrog chapter 43-44, Punarnavadi Kwath is mainly indicated in Sarvang Shoth. (3.) Therefore, the administration of this drug is beneficial in edema in pregnancy. The present case report shows markedly reduced pedal edema, urine albumin and reduced hypertension after giving Punarnavadi Kwath. It is evident that further studies in this regard will emphasize the affectivity of Punarnavadi Kwath in the management of Pregnancy induced hypertension and prevention of possible complications

Keywords:-Punarnavadi Kwath, edema, Pregnancy, Garbhini, Hypertension.

AN AYURVEDIC REVIEW OF BREAST MILK

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Stanyapanmeans breastfeeding is nectar for newborn infants as well as for mothers. Breast milk provides nourishment to infant that is essential for optimal nutrition, cognitive performance and neurological development and immunity. Breast milk promotes growth and development and acts as a tonic for all the tissues. Breast milk is optimal food for almost all infants in the first year of life. Ayurvedic text describes the Ksheerap stage of child; in this the children up to one year of age have their main diet as milk. Ayurvedic and modern texts both describes breast milk in detail. Ayurvedic scholars have praised breast milk and mentioned many benefits of it .As per modern aspect, the 1st breast milk called as colostrome should be fed to baby as it contains the antibodies which protects baby from many diseases. In ayurvedic texts, stanya nirmiti (formation of breast milk), causes of stanya pravritti (breast milk ejection), stanyasampat (merits of breast milk), stanyakarya (functions of breast milk), stanya mahattva (importance of breast milk), stanya vikruti (disorders of breast milk), stanyavidhhi dravyas (drugs increasing quantity of milk) etc. are discussed in detail.

Keywords: Breast milk, Stanya nirmiti, Stanya pravritti, Stanyasampat, Stanyakarya, Stanya mahattva, Stanya vikruti, Stanyavidhhi dravyas.

AYURVEDIC APPROACH OF OBESITY IN PEDIATRICS

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Since a last few decades there has been a lot of discussion on life style disorder, though the change of life style is as old as the man kind. It is being possible due to gradual increase of health awareness among the public.

Identification of obesity and over weight in children may be an important aspect of preventive pediatrics with implication for the promotion of physical social and emotional health for children that may have effect on adulthood. Obesity may be defined when BMI units is more than 95 percentile. In Ayurveda it is stated as MEDA ROGA or STHOULYA. It is a condition of excessive accumulation of fat (Meda) in the fat depots of body caused by the vitiation of Kafa predominant tridosha. Meda vaha srotos are fully affected by Amarasa. It may evident of any age but frequently seen in first year of life, 5-6 years as and during adolescence. Female children obesity is more predominant than male.

AYURVEDIC AND MODERN APPROACH OF HYDROCEPHALUS W.S.R.TO UPSHIRSHAK ROGA

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Hydrocephalus, increased cerebrospinal fluid within the skull , is the most common neurosurgical problem seen in paediatric field .It may develop due to various causes such as congenital anomalies ,tumour ,infection ,intracranial haemorrhage ,trauma and idiopathic disorder.Hydrocephalus can be inherited genetically or may be associated with developmental disorder including spina bifida.Hydrocephalus is making one of the most common developmental disabilities in children. It is the leading cause of brain surgery for children .Lack of treatment or delays in treatment can lead to permanent brain damage .Appropriate therapy can prevent the occurrence of this complication in most cases and ventriculo-peritoneal (VP) shunt is often used to treat this disease As per Ayurveda acharya vagabhatta described about "upshirshak roga " which is similar to hydrocephalus. The present paper leads with the ayurvedic preview and approach to understand and manage it.This challenging neurosurgical disorder. The contribution and line of

management are very beneficial for the palliation of the disease in the form of minimize the clinical effect and to prevent the complication. The details will be presented full paper on the base of guidelines narrated by our ancient acharya.

Keywords- Hydrocephalus, Upshirshak, ventriculo- peritoneal shunt

MANAGEMENT OF CLEFT LIPW.S.R. TO AUSTHASANDHAN

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AcharyaSushruta, The father of surgery has mentioned cosmetic surgery by describing Karna, Nasa, and Austhasandhan in sutrasthan 21 chapter. The plastic Surgery of the 19th century was stimulated by the example of Indian methods. AcharyaVagbhata also mentioned cleft lip as khandaustha due to vataprakopa and describe its management as Sandhankarma. Cleft lip is a congenital abnormalities of lip. AcharyaSushruta have already described. Itsas birth Abnormality in sushrutasamhita. Cleftlip occurs early in pregnancy hen the side of the lip do not fuse together as they should. Cleft lip is more common in boys. The exact cause of cleft lip is not known. Cleft lip is caused by multiple genes inherited from both parents, as well as environmental factors. It can be considered as kulaj/ Sahaja/Kulodbhavvyadhi to AyurvedicAcharya. In the un parallel and unique contribution in the Medical science that is cosmetic and plastic surgery is not only principally but in the applied way is fully followed by modern surgery to treat the disease cleft lip, in full paper I will present their golden principle of plastic surgery and its steps of management as well as prophylaxis directions.

Keywords- Cleft lip, Austhasandhan, Kulajroga.

MARM CHIKITSA IN MATERNAL NEUROMUSCULOPATHIES

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While selecting medicines and pain management methods for maternal neuromusculopathies, marm chikitsa is the most appropriate approach to get rid of these ailments. During maternity period, maximum mothers put on weight which causes pain and damage to cartilaginous matrix of weight bearing joints. Repeated breast feeding leaning posture results in cervical spondylosis and continuous sitting causes low backache, lumbar spondylosis and prolapsed intervertebral disc. Chances of developing Tennis elbow are there on lifting the child. In marm chikitsa, patient's own vital areas are selected for treatment purposes. These marmas come into operation only when the indicated marma is stimulated by applying pressure (vimlapan, peedan), Agnikarm and puncture at specific points. These methods provide quick and satisfactory relief in neuromusculopathies developed due to day to day wear and tear along with pre and post natal vatic changes.

Key words: Maternal Neuromusculopathies, Marm Chikitsa, Pain Management.

ROLE OF BALA TAILA MATRA BASTI AND YONI PICHU IN SUKH PRASAVA

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In a woman's life, motherhood is a crowning act. Every woman tries to enter in this new world of mother with minimum pain, operative aids and complications. As child bearing and delivery are physiological phenomenon and any abnormality in courses of labour can affect women health not only for that time being but also through her life. That's why for good health of mother and baby Sukhprasava is important.

Acharya Caraka has mentioned the concept of Anuvasana Basti and Yoni Pichu in navama masa. Acharya Caraka described Bala under Madhura skandha, Prajasthapana mahakashaya and brmhaniya. Bala is madhura rasa,

madhura vipaka, snigdha guna, balya. It is also mentioned as a rejuvenative (rasayana). As Bala taila Matra Basti favours vatanulomana, particularly apanavayu, which performs garbha nishkramana and Yoni Pichu favours snigdhatta to muscles and ligaments of garbhashaya, hence the expulsion of foetus is not much difficult. These also reduces the rate of Caesarean section and harmful effect of use of Oxytocic drugs

WORM INFESTATION IN CHILDREN: AN AYURVEDIC APPROACH AND MANAGEMENT

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The worm infection helminthiasis is one of the most common problem in developing countries due to the poor hygiene. The common parasitic infection in children is *Ascaris Lumbricoides* (Roundworm), *Enterobiasis vermicularis* (Pinworm), *Ancylostoma duodenale* (Hookworm), *Echinococcus granulosus* (Hydatid diseases) and *Cystercos* is Most common worm infection in children is *Ascaris Lumbricoides*. Helminthiasis has been found to result in poor birth outcome poor cognitive development, poor school and work performance, poor socio-economic development and poverty. Chronic illness, malnutrition, and anemia are further examples of secondary effects of helminthiasis.

The Ayurveda described worm infestation as *krimiroga*. Excessive intake of *madhura, amlarasa* rich diet, eating during indigestion, avoid exercise and resorting to day sleep are main etiology in ayurveda. Main symptoms of *krimi roga* are *Jwara* (fever) *Vivarnata* (discoloration of skin) *Sula* (Pain) *Hridayaroga* (Heart trouble) *Sadanam* (lassitude) *Bhaktadveso* (Anorexia) *Atisara* (Diarrhea) *Vamana* (Vomiting). Ayurveda puts three basic approaches for the treatment of helminthic disease such as *apakarsana* (Removal of visible worm from the body), *prakritivighata* (to create unfavourable environment by means of diet and medicine) and *nidanaparivarjana* (Avoid etiological factor).

All details regarding to topic should be presented in full paper at the time of presentation.

Keywords: Worm infestation, Helminthiasis, Krimi Roga, Vidanga ghrita.

AYURVEDIC MANAGEMENT OF CHILDHOOD BRONCHIAL ASTHAMA

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Bronchial asthma is a disease characterized by an increased responsiveness of the trachea and bronchi to various stimuli. It manifests by wide spread narrowing of the airways causing paroxysmal dyspnea wheezing or cough. In India prevalence of asthma in school going children has been reported between 4-20% in different geographic regions. The prevalence has increased by two folds in last two decades. Asthma is the commonest chronic illness during childhood. It is responsible for significant social, economic and psychological impact on the family. Acute asthma leads to disturbed sleep restriction in day to day activities and absenteeism. Childhood Bronchial Asthma has multifactor causation. Geographical location, environmental, racial, as well as factors related to behaviors and lifestyles are associated with the disease.

Tamaka Shwasa is a disease described in Ayurvedic texts that shows close resemblance with bronchial asthma on the basis of clinical manifestations. Ayurvedic medicines can be a potential and effective alternative for the treatment against the bronchial asthma. The present study was a review on the management of Tamaka-Shwasa (Childhood bronchial asthma) who were being managed through Ayurvedic approach that includes a combination

of ShodhanaChikista, Ayurvedic drugs, lifestyle management and wholesome diet. Ayurvedic drugs include the respiratory tonics and naturally occurring bronchodilator and immune-modulator. Thus, study result concluded that the Shodhana, Shaman, herbal and herbo-minerals compound drug has got significant anti asthmatic properties.

Keywords :Asthama, Tamakaswasa, Ayurvedic medicines.

ROLE OF BRAHMI (BACOPAMONNIERI) FOR ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) IN CHILDREN:

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Attention deficit Hyperactivity disorder is a neuro developmental type of brain disorder, specially involving dopamine and nor epinephrine neurotransmitter which govern a variety of cognitive process, directly responsible for the control of behavior, motivation and motor function. It is characterized by hyperactivity, impulsiveness and inattention. ADHD is more common in boys than girls (male to female ratio 4:1 for hyperactivity type and 2:1 for inattentive type). ADHD affects children and teens and can continue into adulthood. Children with ADHD have been found to have cognitive deficits, lower IQ, impaired social relationships with in the family and with peers as well as poor study skills and lower academic achievement. In Ayurveda it occurs due to vitiation of dhee (rational thinking), dhriti (intellect / retaining power of the mind), smriti (memory) which results into improper contact of the senses with their objectives and give rise to inattention, hyperactivity and impulsivity. In Ayurvedic texts MedhyaRasayanare described which are used as Shaman chikitsa for these types of disorders because Medhya drugs improve coordination, cognition and concentration capacity of the brain. Chark described 4 drugs in medhyaRasayan. BRAHMI chemical constituents show good effects on ADHD. ADHD is on the rise globally so the brahmi (Bacopa) is a natural substance that has the ability to significantly help ADHD without all the scary side effects of psycho-stimulants.

Keywords: ADHD, medhyarasayan BRAHMI.

CLINICAL UNDERSTANDING OF PHAKKA ROGA IN THE PRESENT AYURVEDIC PAEDIATRICS PRACTICE

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Kaurmarbrithya deals with *Kumarbharana*. *Bharana* implies the growth and development of the child while *Poshana* target for fulfilment of nutritional demands of the growing child. Both are directly related to each other and improper management will lead to failure to thrive.

Kumarabharana ensure proper nutrition, parental care, love, sympathy, opportunities, social exposure, reinforcing environmental factors, to facilitate proper growth. Meanwhile certain congenital, chromosomal, endocranial, nutritional, physical and psychological disabilities, threatens the growth and development as well as nutrition of the child, resulting in Failure to thrive (FTT) which accounts for 3-5 % of all hospital admissions for children under two years of age. Clinical presentations, mimicking the pathological consequences of FTT has been mentioned in *Kashyap Samhita* while explaining the *Phakka Roga*. *Phakka* is of three types which highlights three important causes of Failure to Thrive. In clinical practice, *Phakka* reflects a symptomatic clinical presentation which can be seen in various disorders ultimately ending up as a failure to thrive. Details of critical analysis of *Phakka Roga* with clinical consequences of Failure to thrive will be discussed in full paper presentation.

Keywords – *Bharana*, *Poshana*, *Phakka*, Failure to Thrive.

AYURVEDIC APPROACH TO ANEMIA IN PREGNANCY AREVIEW OF LITERATURE

Beneficial for heart health, Improves Immunity,
Rejuvenating agent



Dabur
Hridayasava
Beneficial for heart health

DOSAGE:

10-20 ml, 2-3 teaspoons twice a day with equal amount of water or as directed by physician.



Reduces the risk of frequent infection



Dabur
Giloy Ki Ghanvati
Strengthens immunity

DOSAGE:

1-2 tablets a day or as directed by physician.





In low Stamina, Strength & Libido

Dabur
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Boosts Your Performance

DOSAGE:

1 capsule, twice a day



In Premature Ejaculation,
Lack of Strength and Stamina

Dabur
Camne Vid
With Kesar and Jaiphal

DOSAGE:

Adults: 1 tablet, two times
a day



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Motherhood is the birthright of every woman. Pregnancy is a state in which all the physiological functions are hyper stimulated in order to meet the demands of foetus. The incidence of anemia in pregnancy ranges widely from 40-80% in the tropics compared to 10-20% in the developed countries. Anemia is responsible for 20% of maternal death in the third world countries. Pregnancy induced anemia is very common condition in which involves the fall in the haemoglobin concentration and expansion in plasma volume. According to WHO, anemia in pregnancy is present when the haemoglobin concentration in the peripheral blood is 10gm/100ml or less. In Ayurveda this condition studied under GARBHINI PANDU. In Garbhini, saar of all dhatus is lost due to garbhaposhana, hence the dhatus become nissar. This ultimately results in oja-kshaya. It results in decreased work productivity, increased child mortality, increased maternal mortality, slowed child development and mild to moderate anemia may increase susceptibility to infectious disease.

Keywords:-Anemia in Pregnancy, Garbhini Pandu, Saar of Dhatus, Garbha Poshana

ROLE OF RAJAYAPANA BASTI

IN THE MANAGEMENT OF DUCHENNE MUSCULAR DYSTROPHY (DMD)

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Duchenne muscular dystrophy is one among the most common muscular disorder. The incidence is 1: 3600 live born infant boys worldwide. DMD is a genetic disorder characterized by progressive muscle degeneration and weakness. In DMD involves mutations in the dystrophin gene. Dystrophin is one of the large structural proteins in the cell membrane and absence of Dystrophin leads integrity of all muscle cells. DMD cannot be directly correlated with any single disease in Ayurveda. All most all major neuromuscular disorder are identified with vata dosha. In Ayurveda this pathogenesis can be clearly understood by the concept of Adhi Bala pravritta vyadhi. No any specified treatment schedule in any medical field related to Duchenne muscular dystrophy. Therapeutic approach of muscle dystrophy is represents on corticosteroid, physical therapy, gene therapy and muscle transduction. The Ayurvedic treatments relevant to Rajayapana group of herbal -mineral medicines and specified Panchkarma therapies have definite protective influence and long survival on dhatu kshaya according to ayurvedic classics. There is no other excellent treatment of vata vyadhi such as basti therapy. Rajayapana basti is a type of niruha basti. It described in charak Shamita. Rajayapana basti having Sandhya balajanna (increased strength), rasayan (rejuvenation) properties and can be used for all the cause of vitiation of vata viz Dhatukshaya (decrease in various tissues) and avarana. In this review article an effort has been made to explore the function of Rajayapana basti for treating Duchenne muscular dystrophy

Keywords- Rajayapana basti, Panchkarma, Duchenne muscular dystrophy, Adhi Bala pravritta vyadhi

CONCEPTUAL STUDY ON GARBHINI PANDU W.S.R. TO ANAEMIA IN PREGNANCY

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Anaemia in pregnancy is a global health issue facing in developing countries. It is a condition where hemoglobin concentration in venous blood is below 11 g/dl defined by WHO. Most of woman from rural areas and low socio-economic group could not get proper nutritious diet during pregnancy which cause deficiency of iron in the pregnancy. That's why anemia become very serious problem in India. In ayurveda, direct reference regarding Garbhini Pandu is not available. Vivarnata can be correlate with Garbhini Pandu. Garbhini pandu need to be

treated like shaman yoga of pandu chikitsa (eg. Dadimadi ghrit, Navaysha lauha, Punarnava mandur etc.). These formulations help to cure anaemia without having any side effects on mother and fetal well being.

Keyword: Garbhini Pandu, Vivarnata, Anaemia in pregnancy, shaman chikitsa.

ROLE OF SHIRODHARA IN AUTISM SPECTRUM DISORDER (ASD)

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Autism spectrum disorder is a range of neurodevelopmental disorders that includes autism and related conditions. Individuals on the spectrum present with two types of symptoms: problems in social communication and social interaction, and restricted, repetitive patterns of behaviour, interests or activities. Symptoms are typically recognized between one and two years age. Its etiology is still obscure in modern science while based on ayurvedicetiopathogenetic, we can say it may occur due to vitiation of *Dhee*, *Dhriti* and *Smriti* that causes imbalance of *Kala* and *Karma*, which results into improper contact of the senses with their objectives i.e. *Asatmendriyarthasamyoga*. The current medications used in the treatment of mental disorders in children include Antipsychotic, Antidepressants, Antianxiety drugs Stimulants and Mood stabilising groups. Although these drugs are the first choice medication, but these agents produce various unacceptable side effects, which is one of their greatest demerits. Supportive *Panchakarma* therapy (*Shirodhara*) can be done that calms down aggravated symptoms. *Shirodhar* brings changes in the electric potentials of the brain compartments that lead to regularization of the neurotransmitter mechanism, which is proved very potent to control inattention, hyperactivity, impulsivity and distractibility.

Keywords :-Autism spectrum disorder, Dhee, Dhriti, Smriti, Shirodhara

ROLE OF STANYADOSHADRAVYA IN IMPROVING THE QUALITY OF STANYA A CRITICAL REVIEW

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Introduction- Lactation and its health benefits to infants are very much specified & well documented in ayurvedic classics. Lactation is promotive & most superior source of nutrition & overall health associated with new born till infancy. As described in Ayurveda text consumption of vitiated breast milk causes *Vikara* like *Balasosha*, *Fakkaroga*, *Kheeraalsak*, *Kukunaka* etc. and consistently ill health & recurrent infection in the infants, resulting in inadequate growth & development. It also states that rational use of *Stanayadoshahara* (lactodepurant) drugs to prevent vitiation and improve quality of *Stanya*.

Aim- The present review is undertaken to critically analyze the role of drug included *StanyaDoshahardravya* of *VagabhatSamhita* in enhancing the qualities of breast milk (*Stanya*).

Discussion- *Acharya vaghghat* has mentioned drugs like *Patha*, *Shunthi*, *Amrita*, *Tikta*, *Devadaru*, *Sariva*, *Kiratatikta*, *Musta*, *Murva*, *Inderyava* for *Stanayadoshahara*. Recent study reveals their nutritional, antioxidant, antimicrobial, immunomodulatory properties & other health benefits like increase in immunity to fight infectious disease.

Conclusion- Drugs of *Doshahardravya* can be used either single or may be combined with other drugs to enhance the qualities of breast milk & prevent the disease due to vitiated breast milk.

Key Word- *Stanya*, *Stanyakshaya* & *Stanyavridhi*, *Stanyadushti*, *Stanya doshhardravya*.

AYURVEDIC APPROACH ON THE MANAGEMENT OF JUVENILE RHEUMATOID ARTHRITIS

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Juvenile rheumatoid arthritis is also known as idiopathic arthritis refers to condition with no define causes. JRA is the common form of arthritis in children and adolescents. It is a autoimmune non infective inflammatory joints disease of more than 6 weeks duration in children and less than 16 years. Most commonly it affects age group of 7-12 years but it can be seen in older children as old as 15 years of age. Symptoms of JRA are often non specific initially and include lethargy reduce physical activities and poor appetite cardinal clinical features is persistent swelling of the affected joints such as knee, ankle, wrist and small joints of hands and feet. Childrens with JRA cause significant growth retardation joint as well as other body systems. International prevalence range from 8-150 per one lakh. As per clinical feature JRA can be correlated with Amavata in Ayurved. Here vitiated vata associated with ama (undigested toxic substance) and produce many constitutional specific symptoms affecting the bony joints by involving multiple body system. In modern medicine there is no effective and curable treatment for JRA. Allopathic medicines used in JRA harm so many side effects and much costly so there is a hope in ayurveda to manage the JRA very effectively and safely. The line of treatment can be summarised under two main captions i.e. to bring agni (digestive power) to normal stage to digest ama and eliminate and vitiated vata and ama. Some herbo mineral drug like simhanadaguggulu is drug of choice in amavata gomutra haritaki ajmodadichurna rasnasaptakkwath chitrakadivati etc and some shodhanand shaman chikitsa are available to need JRA.

In this paper and effort has been made to describe JRA and its ayurvedic management all details regarding this topic should be presented at the time of full paper presentation.

KEYWORDS-Amavata, ama.

PRESENT SCENARIO OF KAUMARBHRITYA IN RAJASTHAN

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India is known as one of the richest country in cultural values, spirituality and traditional health care sciences like ayurveda, yoga, sidhha, naturopathy any many more. Ayurveda is one of the oldest n popular health science, it is further devided into astha angas (8 parts), kaumarbhritya (ancient term for pediatrics) is one of them. Among all the states of India, Rajasthan is known for its vibrant colours, spirit and unique combination of modern and traditional values. Government of Rajasthan is always been cherishing Ayurveda. There are approximately 3698 government ayurvedic hospitals are running by 4491 ayurvedic medical officers. The academic history of ayurveda in Rajasthan, is started by National Institute of Ayurveda (NIA) on 7th February, 1976, in the capital of Rajasthan, Jaipur. Not only that, but India's 2nd ayurved university started on 24th may, 2003 in jodhpur. There are huge number of patients coming every year for seeking Ayurvedic treatment, in which approximately 20% are children. According to the department of ayurveda, children are mainly coming with complaints of cerebral palsy, childhood asthma, childhood obesity, ADHD, malnutrition, recurrent cough, cold and other infections. Ayurveda offers the solution for all such problems in the form of preventive (swarn prashan, principales of swathyavritta, yoga etc) and curative (panch karna, various modulation of vasti, swedan, like pps, shashthi shaali, piddichhil etc) and various herbal, mineral, herbo-mineral medicines for physical as well as mental well-being. Details will be discussed at the time of paper presentation.

EFFICACY AND MODE OF ACTION OF "KUMAR KALYAN RASA"

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Childhood is an important age of human being and growth & development mainly occurs in this age. Balanced diet and well nutritional foods are necessary for growth and development. In Ayurveda this stage is called kapha dominant period of life. Rasa shastra is vedic alchemy of an ancient ayurveda. The word rasa shastra means the “science of mercury.” It is a specialized branch of ayurveda dealing mainly with Rasa Dravyas. Hence it is a very important sub discipline of ayurveda. A number of herbo-mineral or metallic formulations are found in practice for prevention as well as for the treatment of pediatric disorders. Efficacy of herbo-mineral or metallic formulations in ayurvedic therapeutics is subject of great concern in present era. Kumar kalyan rasa is also a herbo-mineral formulation. In this abstract I will try to summarize the unique preparation and mode of action of kumar kalyan rasa in children's development. It is used in the treatment of pediatric complaints such as fever, cough, diarrhea, jaundice, asthma, vomiting, emaciation and indigestion.

Key words – Kumar Kalyan Ras, Rasa Shastra, Herbo Mineral, Pediatric Disorders, Efficacy, Mode Of Action.

ROLE OF THE PANCHKARMA IN DOWN SYNDROME [TRISOMY 21]

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Down syndrome is most common chromosomal abnormality. Down syndrome is a genetic disorder caused by the presence of extra genetic material from chromosome #21 in some or all of individual's cell. Incidence 1:700-800 live births. According to ayurveda down syndrome occurs due to vata dosh predominance and also due to beej, beejabhaga dosha and beejabhaga avayava abnormality. Down syndrome is found in newborn with clinical features like poor motor reflex and in children with hypotonia mental retardation. Treatment is useful in down syndrome cases in shiropichu with medicated oil, sarvaang Abhanga (full body massage with medicated oil) matra vasti (oil and decoction enema). Improve flexibility of joints improve circulation. Vasti improves gross as well as fine motor function provides nourishment, improve overall general conditions.

Keywords: Vata dosh predominance, beej, beejbhaga, beejbhaga avayava, hypotonia, mental retardation, panchkarma, abhanga.

APPLICATION OF AYURVEDIC DAILY REGIMEN

AT THE AGE OF INFANT AND TODDLER W.S.R. TO KSHEERAP AND KSHEERANNAD VAYA

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Our country is home to the largest child population in the world. We know that generally, a child who enjoys a better state of health during childhood will become a healthy adult. So we need a more concrete and compassionate road map to ensure that every child is safe and protected.

Ayurvedic daily regimen (Dincharya) is one of the most powerful preventive measure to ensure a long and healthy life for humans. Dincharya is a gift for the people to live healthy and longer than and as well as for children. In the assimilation of Ayurvedic daily regimen (Dincharya) in the life of child (Ksheerap and Ksheerannad) their mother can play an important role. A mother can greatly influence child's growth and development by applying all regimen on her child like Abhyanga (oil massage), Anjan (collyrium) Snaana (bath), Pratimarsha-Nasya (nasal drop) etc. But at the age of child some modification should be accepted because of day to day life style changes in

modern era. Further details about the concept will be provided at the time of paper presentation.

Keywords: Ayurvedic daily regimen, Dincharya, Khseerap, Ksheerannad, Abhyanga, Anjan, Pratimarsha-nasya.

AYURVEDIC PANCHAKARMA PROCEDURES USED IN CHILDREN WITH CEREBRAL PALSY

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Cerebral palsy (CP), a static, non-progressive disorder caused by brain insult or injury in the prenatal, and postnatal time period, is the major developmental motor functions and it has the potential to have an effect on the overall development of a child. The disease is not curable but early intervention with counselling, appropriate medication and physiotherapy along with *Panchakarma* procedures will help to improve their quality of life and give active and selfsupporting happy life. In *Ayurveda*, there is no single condition/disease which exactly show similarity with CP. Most of the authors considered CP as *vatavyadhi*. Various *Panchakarma* procedures like *Udwartana* (medicated powder massage), *Sarvaanga abhyanga* (full body massage with medicated oil), *Baashpasweda&Naadisweda* (steam bath) and *Vasti*(oil and decoction enemas) etc are found to be beneficial in the management of CP in children. *Udwartana* opens the minute channels and improves blood as well as lymphatic circulation. *Udwartana* is *kapha,vatahara* and removes *aavarana* or *srotorodha*. It provides a platform for further procedures like *abhyanga*, *swedana* and *vasti*. *Sarvanga abhyanga*, *baashpa&naadisweda* reduce spasticity (especially scissoring phenomenon), improves flexibility of joints, improves circulation and reduces pain. *Vasti* is the major treatment for CP and it improves gross as well as fine motor functions, provides nourishment, improves overall general condition and quality of life in children with CP.

Keywords: Panchakarma, Cerebral palsy, Vatavyadhi, Abhyanga, Swedan.

PRECONCEPTIONAL CARE IN AYURVEDA FOR SHREYASHI PRAJA (CLASSICAL REVIEW)

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Preconception care can be defined as the care or advice to couple planning a pregnancy well before the actual conception. Preconception care is one such preventive measure to get (Shreyashi Praja) . It helps in early identification of high risk factor and prevents the adverse affect of that. Incidence of congenital anomalies affects an estimated 1 in 33 infants resulting 3.2 million birth defect every year. In such situation Ayurveda can contribute tremendously with the effective pre-cautionary, dietary and seasonal regimes helps bringing up a healthy offspring. Acharya*s emphasized on Age criteria, Rajaswala charya, Pathya-apathya before conception ,garbhadhan vidhi,contradiction to garbhadhan, various drugs viz. Garbhasthapan , rasayan as a preconceptional measure helps in better outcome of healthy progeny

Keywords: - ayurveda, pre-conceptional care, shreyashi praja

DIGITAL NUTRITION

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Today, we are living in a digital Era. Digital gadgets are integral part of our day to day activities. Be it computer, mobile, laptops, I-pad or any other digital gadget, kids are also not far from these attractive instruments. Use of digital gadgets can effectively improve the learning capacities of a growing kid as using digital board provides better understanding of subject than conventional black board in class rooms. Potential claims about their hazards and long term side effects are regularly aired in newspapers and modern scientific journals. Here this

presentation is aimed to point digital Nutrition (Positive, proactive, mindful, balanced, judicious and realistic use of digital instruments) and preventing problematic internet uses. Mere distancing from such gadgets cannot solve the problems. Hence apart from digital detoxing or de-addiction, we must switch on to digital nourishment.

LEHANA KARMA IN CHILDREN

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The Vedic literature is considered to be the world's oldest literatures, and the description of 'Ashtanga Ayurveda' is found right from these literary works. One of the eight limbs of 'Ashtanga Ayurveda' is Kaumarabhritya. The Kaumarabhritya subject deals with "Child Health and Medicine". The classical book of Kaumarabhritya is Kashyapa Samhita.

The principle of Ayurveda is that 'disease will not occur without Dosha Vaishamy'. In order to maintain equilibrium of Doshas and develop the body's resistance to disease, it advises to do Lehana karma in children. This Lehana Karma is the speciality of Kashyapa Samhita. According to Acharya Kashyapa, "The happiness (health) and sufferings (diseases) of children are dependent on Lehana Karma". Apart from this, Acharya Vagbhata also described Lehana Karma according to Ritu (Seasons).

For Lehana, Kalyanaka Ghrita, Brahmi Ghrita, Panchgavya Ghrita, Samvardhana Ghrita Ashtanga Ghrita, Swarnaprashana etc, are used. Lehana Karma increases the immunity and life longevity as well as improves concentration, memory power and overall intelligence.

There is special significance of Lehana karma in children. So far many research works have been carried out in Lehman Karma, which are on Swarna Prashana, Kalyanaka Ghrita, etc. The Lehana Karma boosts up overall development (physical and mental) of the child, including the immune system against diseases.

The full article contains the detailed explanation and discussion on Lehana Karma and its importance and need in the present era.

Key words: Lehana Karma, Immunity, Children, Ayurveda

AYURVEDIC MANAGEMENT OF GUILLAIN-BARRE SYNDROME: A PEDIATRIC CASE REPORT

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Guillain-Barré syndrome (GBS) is a rare neurological disorder in which the body's immune system mistakenly attacks part of its peripheral nervous system—the network of nerves located outside of the brain and spinal cord. A 14 year old boy attended the Kaumarabhritya OPD of All India Institute of Ayurveda, New Delhi with chief complaints of weakness in all four limbs, unable to stand with support, get up from supine position since 2 years. He was diagnosed with Guillain-Barre Syndrome (GBS) at the age of 12 years. He took modern treatment from IMS, Banaras Hindu University, Varanasi and Medanta hospital, Haryana for several months but no significant relief was observed in the progressive limb weakness. MRI Brain showed features of Posterior Reversible Encephalopathy Syndrome (PRES). EEG showed evidence of mild degree of diffuse non-specific neurophysiological dysfunction. No epileptiform discharges or electrographic seizures were seen. 2D echo was normal. NCCT Brain showed small areas of gliosis in the bilateral posterior parietal region. Rest of the brain parenchyma was normal. On neurological examination, patient was conscious, alert and well oriented. Memory and intelligence intact. Speech was normal. Upper and lower limbs were kept in a state of extension without any

involuntary movements. There was wasting of distal muscles in both upper and lower limbs. Muscle tone was hypotonic in all four limbs. Power was reduced in all four limbs, right upper limb 1/5, left upper limb 1/5, right lower limb 0/5, left lower limb 0/5. Extensors were weaker than flexors in both upper and lower extremities. Both ankles were in a state of extension and could not be flexed. Coordination was intact. Deep tendon reflexes were either absent or sluggish. Sensory functions were intact. Plantar reflex was absent. The patient was admitted in the Kaumarabhritya IPD ward, AIIA and treatment was planned using internal medications as well as Panchkarma based procedures i.e. *Udwartana, shalishastikapindasweda (SSPS), Kala Basti, Nasya, and shirodhara*. Complete motor assessment was done before treatment and after treatment. The patient showed mild improvement in the motor functions after the first session of treatment of 52 days. Complete details will be presented in the full paper. Keywords: GBS, PRES, Panchakarma, SSPS, Kala Basti.

GARBHADHANSAMSKARA AN INIMITABLE AYURVEDIC APPROACH FOR BETTER PROGENY

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Samskara (Sacrament) are rites of passage in a human being's life described in ancient Sanskrit texts as well as a concept in the karma theory of Indian philosophy. It has been defined as a peculiar excellence residing either in the soul or in the body. In Ayurveda, Samskara is 'Gunaantaradhana' which means quality transformation is carried out by incorporating the specific qualities. The number of samskara varies from 16-40 in different Hindu Dharma Granthas, but only 16 are applicable in present time which spreads from Garbhadhan to Antyeshitisamskara. Ayurveda has envisaged the concept of planned pregnancy through Garbhadhansamskara to beget a Suprajai, i.e. child with optimum physical, psychological, intellectual and spiritual health. Current scenario with lots of GarbhaUpaghatakarBhavas (factors adversely affecting the fetus) in our life style, food habits and environmental pollutants influence the gametes thereby increasing the possibilities of deformities and defects in the fetus. Besides this, Epigenetical factors also affect the fetus. Epigenetics is the branch of science which deals with the heritable phenotype changes that do not involve alterations in the DNA sequence. This samskara helps the body to overcome the impact of these factors along with the diet & lifestyle modifications and to have a better progeny.

Keywords : Epigenetics, Garbhadhan, GarbhaUpaghatakarBhavas, Sacrament, Samskara.

PAIN MANAGEMENT THROUGH PANCHAKARMA JANUBASTI WITH NIRGUNDI TAIL IN SANDHIGATA VATA W.S.R. KNEE OA

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Osteoarthritis is one of the most common degenerative joint disorders characterized mainly by pain, bony swelling and functional restriction of the joint. In Ayurveda, the disease Sandhivata resembles with osteoarthritis. It commonly presents unilaterally in the knee joint, which is the most important weight bearing joint in the body. Osteoarthritis of the knee joint is the most common joint disorder seen in elderly people and obese person. Sandhigata Vata is one among the 80 Nanatmaja Vata Vyadhis. According to Ayurveda, Snehana, Svedana, Dahana and Upanaha are the prime modalities of treatment in the management of Sandhigata vata. These are mostly aimed at Bramhana. Sushruta has mentioned the treatment for Sandhigata vata as Snehana. Janubasti is one of the modalities of treatment commonly adopted in the management of Janusandhigata vata. According to Dhanwantarinighantu Nirgundi Leaves are used therapeutically in Shula, Shophya, Vatavyadhi, Janubasti with Nirgundi tail prepared from leaves has

promising effect in pain in osteoarthritis and as Acharya Charak also has described bahiparimarjanchikista for various diseases. Janubasti (external oleation) is the one type of bahiparimarjanchikista.

Keywords: Nirupstambhitjanusandhigatavata, Nirgundi tail, Janubasti, Bahiparimarjanchikitsa.

CONCEPT OF PATHYA IN PRECONCEPTIONAL CARE

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Preconceptional care can be defined as the care or advice given to a couple planning for a pregnancy well before the actual time of conception. A new WHO report shows that preconception care has a positive impact on maternal and child health outcomes. What you do before is just as important as what you do during pregnancy. To prepare for the best pregnancy possible, preconception planning is essential and may reduce the risk of adverse outcomes. Ayurveda is blessed with unique concept of pathya and apathya sankalpa. Proper observance of pathya right from time of rajaswala kala till garbhadhana kala is the main emphasis in this review. This review will put a light on several wholesome and unwholesome diets, conducts and their mode of action on basis of Ayurveda in relation with preconception care.

Key Words: Preconception, preconceptional care, pathya, apathya

ASHTAVIDHASHASTRAKARMAS (EIGHT SURGICAL PRINCIPALS)

APPLICATION IN GYNAECOLOGY AND OBSTETRICS

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To heal sick has been challenge and obligation of the surgeon throughout the ages. During the centuries he has developed the urge to impart his knowledge to other member of his profession. In this way the Ashtavidhashastrakarma and its extended applicability is still followed all over the world either in the modified way or in a way of superspeciality. This unique contribution of sushrutsamhita is soul of any surgery. Gynaic and obstetric surgery is also obelized in the same manner. All the Ashtavidhashastrakarmas are repeatedly used in either way as a routine and specific way. The present paper is the importance and application of Ashtavidhashastrakarmas in practice of Gynaecology and Obstetrics.

REVIEW OF SWARNA (GOLD) IN DIFFERENT DOSAGE FORMS

WITH PEDIATRIC PERSPECTIVE

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Ayurveda has a great concern for its natural healing and therapeutic system of medicine. Balroga stand at 2nd position in ashtang ayurveda as told by our acharyas. However all branches of ayurveda can't exist without medicine and preparation of drugs is done under the umbrella of rasashastra & bhaishajya kalpana. Herbomineral preparations have its own unique importance in all types of medicine. Their least dose, quick efficacy, tastelessness, effective in incurable diseases also made it useful for all age groups. Our acharyas has been gave great emphasis to use of minerals for the treatments of child diseases. Swarna is a mineral form of medicine. It has been used since last years for prevention and treatment purpose by adults as well as children. Now days it is most popular in different dosage form in our society. Specially swarna used with herbal drugs like vacha, brahmi, kushtha and honey, goghrita in swarn prash form for its immunity modulating action and mental development of children. Different

dosage forms of swarna will be scientifically discussed in the paper.

Key words: - Swarna, children, health, dosage form, prash etc.

PHYSIOLOGY OF PARTURITION W.S.R. TO AYURVEDA

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Parturition or labor is a physiological event involving a subsequential, integrated set of changes within the myometrium, decidua, and uterine cervix that occur gradually over a period of days to weeks. Biochemical connective tissue changes in the uterine cervix appear to precede uterine contraction and cervical dilatation, and all of these events usually occur before rupture of the fetal membranes. In other words, parturition is the process of delivery of the fully grown fetus on the completion of the normal pregnancy period.

तस्मिन्नेकदिवसातिक्रान्तेऽपि नवमं मासमुपादाय प्रसवकालमित्याहुरादशमान्मासात् ॥ (च . शा . - 4/2 5)

In ayurvedic context (in shaarir sthan, acharya charak and sushrut both) explained about the period of delivery (prasav kaal), process of delivery, various symptoms just prior to delivery (prajayani), different stages of labour, concept of involuntary (aavi) and voluntary (pravahan) contractions. Ancient acharyas also explained different methods to induce smooth labour and resolve complication like obstructing labor (garbhasangha). Different physiological aspects of parturition would be explained according to ayurvedic and modern context in detailed presentation.

ROLE OF PATHYA-APATHYA IN POLY CYSTIC OVARIAN SYNDROME

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PCOS is a multifactorial disorder; changing life style has altered normal physiology of the body. PCOS has made great impact on women's physical, psychological and emotional health.

In today's era by consumption of nidanas like sedentary life style, junk food, improper work schedules, stress etc. the incidence of PCOS is increasing.

PCOS is a psychosomatic disorder of uncertain etiology characterized by Obesity, Anovulation associated with Primary or Secondary infertility, Hirsutism, abnormal menstrual pattern, increased incidence of pregnancy loss, and pregnancy related complications

In Ayurveda, there is no direct reference about PCOS but when we go through the Ayurvedic literature there are many references which are nearer to sign and symptoms of PCOS.

Clinical features of PCOS are nearer to Pushpaghni Jataharini. The woman menstruates in regular interval but is unable to conceive is pushpaghni the other symptom is corpulent and hairy cheeks. According to reproductive point of view, the pathogenesis of PCOS is similar to condition of Nashtartava. Vitiation of vata-kapha (↑ estrogenic state) leads to Avarana of artava (inhibition of FSH) leads to Nashtartava (no proper growth of follicles and chronic anovulation).

Pathya and apathya plays a major role while treating PCOS.

Pathya-Apathya Ahara and Vihara are the main measures which keep individual healthy in preventive and curative both purposes.

As in Ayurveda text it is quoted that “If pathya is followed medicine is not needed and if pathya is not followed even medicines are not useful”.

All these lifestyle modification with this concept will surely improve the quality of lifestyle in patients of PCOS and help them to get rid of PCOS.

Materials and methods: Various Ayurveda classics and studies published in journals are reviewed and evidences are analyzed.

Result: Fish, kulattha, kanji, tila, masha, sura, mutra, dadhi, shukta, lahsuna, guda etc. should be used as pathya in diet. Most of them having agni guna that leads to increment of artava. Yoga, asana and proper scheduled dincharya should also be followed by the patient to attain hormonal balance .

Conclusion: Thus main aim of management in PCOS is to adopt life style modifications including diet and physical activity. Because Ayurveda mainly emphasis over holistic and scientific approach based

upon Pathya-apathya Dietary regimen (Aahara) and Life style (Vihara) primarily than Medicines (Aushadha), therefore inspite of expensive hormonal treatment modalities, Indian system of medicine is better one to adopt.

Keywords- PCOS, Pathya-Apathya, Pushapaghi, Nashtartava.

PHYSIOLOGY OF STRESS DURING PREGNANCY AND ITS MANAGEMENT WSR TO AYURVEDA

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Introduction: pregnancy and delivery can be the most rejuvenating experience of women's life, during which every cell of the mothers body can be transformed.a pregnant lady is going through many changes, as her hormones change. The stress hormones which floods the body when pregnant women feel excess stress. Too much stress can cause a pregnant women to have trouble in sleeping, headache, loss of appetite or a tendency to over eat, high blood pressure all of which can be harmful to her and her developing baby.

Methods: Ayurveda texts, journals, published papers, articles, web searches etc are concerned to collect the related information.

Results: Physiological factors which affect the mother can be managed by do and don`t along with various yoga and pranayam, herbs and other herbal preparations, which are quite safe during pregnancy.

Conclusion: Ayurveda offers remarkable results in maternal health cases, which may have arisen from both physical and psychological causes. Both, the mental as well as physical components of the disorder can be addressed using ayurveda treatment. Details will be presented in the form of full paper at the time of presentation.

KEYWORDS: Pregnancy, Maternal Health, Herbal preparations, Physiological factors.

AYURVEDIC MANGEMENT OF JUVENILE RHEUMATOID ARTHRITIS

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Juvenile rheumatoid arthritis also known as idiopathic arthritis idiopathic refers tocondition with no define causes. JRA is the common form of arthritis in children and adolescents. It is an autoimmune non infective inflammatory joint disease of more than 6 weeks duration in children and less than 16 years. Most commonly it affects age group of 7 to 12 years but it can be seen in older children as old as 15 years of age. Symptoms of JRA are often nonspecific initially and include lethargy reduced physical activities and poor appetite cardinal clinical features is persistent swelling of the affected joints such as knee, ankle, wrist and small joints of the hands and feet. Children with JRA cause significant growth retardation of joints as well as other body systems. International

prevalence range from 8 to 150 per one lakh. As per clinical features JRA can be correlated with *Amavata* in ayurved. Here vitiated *Vata* associated with *Ama* (undigested toxic substance) and produce many constitutional and specific symptoms affecting the bony joints by involving multiple body system. In modern science treatment of JRA is very long lasting and expensive. So Ayurveda can provide potential and effective treatment. The line of treatment can be summarised under two main captions i.e. to bring *Agni* (digestive power) to normal state to digest *Ama* and eliminate and vitiated *Vata* and *Ama*. Some herbo-mineral drug like *Keshorguggulu*, *Chitrakadivati*, *Rasnasatakkwath* etc. and some *Panchakarma* procedure are useful to treat JRA. In this paper an effort has been made to describe JRA and its ayurvedic management. All details regarding this topic should be presented at the time of full paper presentation.

Keywords: Amavata, Vata, Panchkarma.

CHILDHOOD OBESITY AS A LIFESTYLE PROBLEM AND ITS MANAGEMENT THROUGH AYURVEDA

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Childhood obesity is a major health problem. The incidence of childhood obesity has increased rapidly in the last decade. In Ayurveda, *Sthaulya* as a disease which possess symptoms like obesity. It is one of the “medorog” excess fat accumulates in body. Children become overweight and obese for a variety of reason. The most common causes are genetic factors, lack of physical activity, unhealthy eating patterns, screening time activities such as watching T.V., gaming, texting etc. Only in rare cases is being overweight caused by medical condition such as hormonal problem. Ayurveda advocates some principle as *Dincharya*, *Ritucharya* and *Sadvritta*. It may be possible to implicate these principles on children in today's scenario. Ayurveda suggested that conduction of *Ahar-vihar*, use of drugs, yoga, panchkarma therapy can effectively manage child's obesity.

Keywords : *Sthaulya*, Lifestyle, *Ahar-Vihar*, Yoga.

ROLE OF PANCHAKARMA IN DUCHENNE MUSCULAR DYSTROPHY IN CHILDREN

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Duchenne muscular dystrophy (DMD) is one among the most common muscular dystrophy, as well as life threatening condition which shortens patient's life substantially. Disease characterized by progressive symmetrical muscular weakness that affects predominantly the proximal muscles and often accompanied by calf muscle pseudo-hypertrophy. It affects every 1: 3600 live male births due to mutation in dystrophin gene. Until now corticosteroids are the only pharmacological palliative management available for DMD but these drugs are associated with many adverse effects.

Ayurveda, considers the same under *Adibalapravruttavyadhi* due to *Beejabhagadusti* (hereditary) or *Garbhopaghatkarabhavas* (sudden mutation) which lead to *MedomamsaDusti* with vitiation of *Vata*. As disease ultimately leads to *Dhatukshaya* with vitiation of *Vata*. Certain *Panchakarma* procedures can be employed to improve the neuro-muscular status of the child. *Kashyapa* explained *Basti* in children with beneficiary effects in such conditions of *Vata* vitiation. Details with critical analysis and mode of action of *Panchakarma* procedures will be explained in full paper presentation.

KEYWORDS: *Beejabhaga Dushti*, Dystrophin, *Panchakarma*.

AYURVEDIC SYSTEM OF MEDICINE CONCEPT AND APPROACH A GOOD MOTHER HEALTH

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Introduction- Some people use the term traditional, indigenous, unofficial, complementary or alternative medicine as synonym of ayurveda. This is not correct ayurveda does not include only simple home remedies or herbs. it is complex system of healthcare.

Ayurveda means science of life. ayurveda is based certain fundamental they can be enumerated as panchmahabhuta, tridosha, dushya according to ayurveda, life is four dimensional ie. sharir (physical body), indriya (sense), satva (psyche) and atma (soul) and all these are complementary to each another.

According to ayurveda there are two more factors of concern when we are going to treat any person. One is **PATHYA** (diet taken during life or illness) and another is **ANUPANA** (After drinks or drink taken with or after medicine)

Healthy progeny and safe confinement is dream of every mother. which one can have complication free antenatal period safe delivery and healthy puerperium for the achievement of full time healthy baby while planning of diet is done it is necessary that diet should be balanced in term of all essential food factors (calories,minerals,vitamin and others)such as

MONTH WISE DIETETIC REGIMEN-

- The skimmed milk should be boiled with madhuyashti
- Along with sweet, cold and liquid diet milk with kakoli
- Milk with honey specially cooked with rice has got its beneficial value.
- Small amount of butter is advised in fourth month,cooked rice with curd is also beneficial.
- Kheer with sugar should be taken in fifth month of gestation.
- Shatavari, madhuyashti, Gokshuru the powder form taken one teaspoon full twice day or boiled milk gives beneficial results.
- Little amount of ghee heated with madhuyashti and shatavari.
- One should make use of different varieties of cerelac.
- Some important herbs use good mother health is shatavari, shalmali, nagkesar, lodhra, guduchi, japa, kumari, dashmula, chandana, bala, amalaki.

Why Need Of A Good Mother Health : (According To Shushtra)

ध्रुवं चतुर्णां सान्निध्याद् गर्भः स्याद्विधिपूर्वकः । ऋतुक्षेत्रान्बुबीजानां सामग्रयादङ्कुरो यथा ॥(सु.शा.2/35)

PREVENTION OF ANAEMIA DURING PREGNANCY THROUGH AYURVEDA

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In Asia, anaemia (irrespective of the severity) is the second leading cause of maternal death accounting 12.8% independent of deaths due to postpartum haemorrhage. Literature search further adds that about 20% of maternal deaths are caused by anaemia and with this anaemia is additional risk factor in contribution of 50% of all maternal deaths. Common type of anaemia is iron deficiency, this is an nutritional deficiency disorder and the pregnant women are highly vulnerable population particularly with its frequent risks. In Ayurveda we have solutions to tackle it in both mild and severe forms i.e. herbs and Bahamas respectively. By which we can use a form that tackles with GI problems caused by intake of iron. In this paper we are going to discuss these forms and formulations and their effects.

ROLE OF AYURVEDA IN PROMOTING SAFE MOTHERHOOD

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Maternal and child healthcare in Ayurveda aims to provide good health for the expectant mother and the infant, ensuring prevention of diseases through wholesome diet and regimen which vary depending upon the season and surrounding environment as well as the digestive power of the expectant mother. For proper ante natal care of expectant mother, balance of *doshas* through proper food (*ahara*) and lifestyle (*vihara*) in different stages of pregnancy in consonance with the digestive power and the development of fetus has been emphasized. The specific regimen to be followed just after birth using various oils and herbs has been laid down giving reasons for various procedures. Breast milk being wholesome, vitalizing and appetizing in nature has been mandated as the most complete and wholesome diet for the infant.

Keywords: *Maternal, Child Health Care, Ayurveda.*

EFFECT AND MODE OF ACTION OF KRIMI MUDGAR RASA ON KRIMI ROGA

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In Ayurvedic system of medicine to serve the human well being different types of drugs such as plants , metals , minerals , gem stones and animal origin had been used by acharyas . The discipline of Ayurveda which deals with collection, manufacturing, standardization of medicinal formulations is known as Ras shastra & Bhaishjya kalpana. One of its various formulations krimi mudgar rasa is also a famous formulation which can be used in pediatric care. Its main utility is in krimi roga in which most commonly affected groups are infant , children and adolescents. It contains parada, gandhak, vayvidang which is named as krimighna according to Acharya Charak. These formulations can be administered with various anupanas of which honey is meant to be more effective. In the following paper I will try to enlighten the utility and mode of action of krimi mudgar rasa in pediatric care and krimi roga.

Keywords : Krimi Roga , Pediatric care , Anupana , Mode of action.

GARBHINI PARICHARYA AND ITS CLINICAL IMPORTANCE

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In ayurveda, antenatal care has been given prime importance and elaborated as garbhini paricharya. garbhini paricharya refers to **antenatal care** which recommends ahar (specific dietary regimen), vihar (normal day activities) and vichara (psychological and emotional activities). the care of pregnant women should start from the beginning of conception till birth of child. garbhini paricharya comprises of **masanumasik pathya (month wise dietary regimen), garbhopghatkar bhava and garbhashtapak dravyas**. This ideal & unique configuration is also having prime importance in the field of prevention of most of congenital abnormality. Such as cleft lip, cleft palate, spina bifida. At the same time this paricharya promote the intrauterine fetal nourishment with qualitative beneficial changes in the motor as well as sensory organ. The present paper deals with these highlights & unparalleled contribution to the medical science in the field of desire & disease-free next generation.

Keyword: -Garbhini paricharya, Ayurveda, Regimen, Pregnancy.

ROLE OF AYURVEDA IN THE MANAGEMENT OF GUDABHRAMSA

W.S.R. TO PROLAPSE RECTUM

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Rectal Prolapse in paediatrics has its highest incidence in infancy and is commonly seen in industrialized countries. The prolapse may involve only the mucosa or all layers of the rectum. These circumstances are most common from 3-5 years of age and usually first detected by the child's parents and usually spontaneously reduce. In ancient Ayurveda Acharya Charak&Shushruta has described RECTAL PROLAPSE as a GUDA BHRAMSA that is passing of stool with excess straining (pravahan)in ruksh and durbal purush lead to prolapse of the anus and rectum out of gudavali.

The main object of my paper is to understand the etiopathogenesis this disease and to highlight the principles of treatment for the radical benefit of this common disease in developing countries as well as under developed countries. In present paper I will also re-established the guidelines for the complication free management without any surgical intervention.

Keyword: -Rectal Prolapse, Ayurveda, Management.

A CONCEPTUAL REVIEW OF KAPHAJA YONI VYAPAD (NON SPECIFIC VALVO VAGINITIS)

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A healthy woman is a promise of a healthy life. In different phase of life from puberty to menopause, the concept of healthy yoni has been mentioned in Ayurveda. Vulvovaginitis is one of common gynecological complaints reported by women irrespective of their age and socio economic status. The common type of vaginal infections is vaginal candidiasis (CV), Trichomoniasis (TV) and bacterial vaginosis. In Ayurveda Non Specific Vulvovaginitis can be correlated with Kaphaja yonivyapad. The management of Kaphaja yonivyapad include Sthanik chikitsa (Yoniprakshalan, Yoni Varti, Yonipichu etc), and Shaman chikitsa (Pushyanug churna, Varunadi kwath etc). These procedures and preparation have beneficial effect in treatment of Vulvovaginitis and there is very less chance of recurrence and having no side effect. Therefore, in this study an effort has been put forth to make a conceptual study covering almost all the aspects of Kaphaja yonivyapad as per Ayurveda and modern.

Keywords:- Ayurveda, Kaphaja yonivyapad, Vulvovaginitis, Ayurvedic chikitsa.

GARBHASHYAPATAN (LSCS) IN SUSHRUTA SAMHITA

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In Ayurveda LSCS can be discussed under Mudhgarbha. Concept of Mudhgarbha described in various Ayurvedic classic is very unique and scientific. Acharya Sushruta described surgery of Mudhgarbha in Sushruta samhita. Caesarean section is one of the commonly performed surgical procedures in obstetrics and is certainly one of the oldest operations in surgery. One of the most dramatic features of modern obstetrics is the increase in the caesarean section rate. Acharya Sushruta described as Garbhashyapatan in treatment of Mudhgarbha.

Keywords- Ayurveda, Sushruta, Mudhgarbha, Caesarean section, Garbhashyapatan.

DYSMENORRHOEA (KASHTARTAVA): AN AYURVEDA PERSPECTIVE

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In present day life women are effectively facing challenges encountered by stressful life resulting in Mithya Ahar, Vihar, over exertion & malnutrition this may direct to Vikruti in “Rutuchakra” leading to various vyadhi allied to menstruation. Ayurveda recommends rutucharya and dinacharya, diet modulation and yoga in the form of asamas, pranayam and meditation on a regular basis so as to alleviate dysmenorrhoea effectively. Similarly, Uttabasti, Garbhashaya balyaushadhi, amuvasan or matrabasti can also be administered if necessary.

Keyword: Ayurveda, Kashtartava, Mensuration, Dysmenonhoea.

MANAGEMENT OF RESPIRATORY DISORDERS IN CHILDREN

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Respiratory infections are the most frequently occurring illness in childhood. It is a leading cause of mortality in children below five years of age. A Preschool aged child has 6 -10 episodes and 10 -15% of school aged child have at least 12 episodes per year. Due to specific anatomical and physiological peculiarities, immunological consideration and immature response, children become more susceptible to respiratory infections. In India about 26% cases of RTI were reported with an incidence rate of 2,173 case per lakh population. Early treatment is necessary because it may hamper the optimum growth and development of child.

Ayurveda pathy gives a safe and effective formulation with fewer side effects. *Pushkarmuladi churna* mentioned in *BHAISHJYA RATNAWALI* under *Bal Rogadhikar*. It contain *Pushkarmul, Ativisha, Karkatshringi, Pippli* and *Dhanvyas*, which acts on Respiratory System by their *Ushan, Laghu guna*.

Keywords – Respiratory disorders, Children mortality, Ayurveda pathy, *Pushkarmuladi churna*.

LEHAN AS IMMUNOMODULATION IN CHILDREN

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Balyavastha has been described in Ayurvedic text as period of minimal relative Bala (physical strength and immunity) and hence children of this period are more prone for various diseases. A considerable decrease in physical strength and immunity are said to be added factor for disease occurrence and severity. Immunity is the balanced state of having adequate biological invasion, while having adequate tolerance to avoid inflammation, allergy and autoimmune diseases. Vyadhikshamatva is the strength to protect the body against diseases. It is also called body resistance. It depends on Bala, Balavardhak bhava, Prakrita kapha and Ojas. Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. In ancient time, there was neither the facility of immunization nor vaccination. Our Acharaya developed their own skill named as Lehan. The concept of Lehan which depicts the administration of various herbal drugs, ghrut preparation and gold as supplementary feeds to increase brain efficiency and body strength of the child. Swarn prashan described in Kashyap Samhita under the concept of Lehan. In Swarn prashan gold along with madhu and goghrit is given to the babies. This enhances intellectual capacity, complexion, longevity of life, metabolic and digestive power and provides protection from disease.

Key word – Vyadhikshamatva, Immunity, Lehan, Swarn prashan

MANAGEMENT OF SEVER'S DISEASE IN CHILDREN (CALCANEAL APOPHYSIS)

AN AYURVEDIC VIEW
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Sever's disease is a common cause of heel pain, particularly in growing children and people who are physically active. It happens when the attachment of the Achilles tendon to the growth plate becomes inflamed and causes pain. Sever's disease or calcaneal apophysis can be corelated with *vatakantaka* in ayurveda. It is explained by *sushruta* in the context of *vatavyadhi* as a painful condition of heel caused by its improper placement of foot on the ground. In this disease *Vata* as *pradhana* dosha along with *anubandhi kapha*. Pain in heel due to vitiated *vata dosha* and *kantaka* refers to thorn which results in pricking pain in heel. Depending on the *vyadhi laxan*, the *dushti* of *vata*, along with *kapha* was considered here and treatment was planned according to that. Therefore to prevent side effects, to save duration of treatment and to make it cost effective an ayurvedic line of treatment must have developed.

Keywords – vatakantaka, vata, anubandhi kapha, vyadhi laxan

AYURVEDIC APPROACH OF POST- NATAL CARE (SUTIKA PARICHARYA)

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Ayurveda has always given importance to care of *stree* (female) at every aspect of life in respect of *Rajaswalaparicharya*, *Garbhiniaparicharya* and *Sutikaparicharya*. After delivery of baby and expulsion of placenta, the woman is termed as “*Sutika*” and the time period extending upto six weeks is termed as “*SUTIKA KAAL*”. The care given during *Sutikakaal* is called *Sutikaparicharya*. *Acharya Kashyapa* described about stage of *Prasava* that one foot of female is situated in this *Loka* and other in *Yamloka*. The woman became extremely debilitated physically and mentally after the delivery so the lady after such a difficult process of *Prasava* must be advised certain mode of life and the regimen that helps the woman to regain the lost vitality and helps her body to revert back to pre- pregnant state. The main achievements through *Sutikaparicharya* are *Garbhashayashuddhi*, *Dhatu-paripurnata*, *Stanyavridhhi* to destabilization of physical, mental and physiological well being.

In this article, an effort has been made to describe about *Sutikaparicharya* by specific *Aahar* (diet), *Vihar* (life style) and *Ausadh* (medicine) which is beneficial for post-natal woman.

Keywords: *Sutika*, *Sutikaparicharya*, Post -natal

**SCIENTIFIC ANALYSIS OF NUTRITIONAL QUALITIES OF FOOD
INDICATED IN GARBHINI PARICHARYA (PRE-NATAL CARE)**

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Ayurveda has given great emphasis on *garbhini paricharya* (pre natal care) which has multiple goal of easy parturition, uncomplicated pregnancy, safe mother and healthy progeny. As per recent W.H.O report, it suggests that everyday approximately 830 die from preventable causes related to pregnancy and child birth. To reduce this rate, proper *garbhini paricharya* (antenatal care) is the need of the day. In this paper, we have made an effort to do critical analysis and scientific description on nutritional qualities of diet for pregnant woman as explained in classical *Ayurveda* textbooks. There is specific food regimen prescribed for pregnant woman throughout nine months. The propose to analyze why there is specific food article indicated for the particular month. We are trying to make scientific explanation like chemical composition and properties of foods with specific reference to *garbhini*, e.g. use of *gokshur* (*Tribulus terrestris*) at 6th month, helps to reduce edema and other complication of water accumulation by gravid uterus, because *gokshur* has diuretic and nephroprotective properties. Consumption of adequate milk

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during whole pre natal period supplies the required nourishment to mother and fetus, because milk contains all vitamins (except vitamin C), minerals and fat, protein and carbohydrates. In this paper, authors are proposing scientific explanation on all foods which are suggested by acharyas during prenatal regimen.

Keywords: pregnancy, garbhini paricharya, diet and nutrition, pre natal care, *Tribulus terrestris*.

ANTENATAL AND POSTNATAL CARE OF WOMEN THROUGH AYURVEDA

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A healthy world starts with a healthy mother. The health of mother and the in-utero environment can continue to have an influence on her children throughout their lifecourse- well into adulthood. Infact health of mother at the time of fetal development has even been linked to probability of child developing heart disease or diabetes in adulthood. In short healthy mother starts a cycle of intergenerational health. Good antenatal, perinatal and postnatal care, is therefore, important to individual, to society and to future generation. Pregnancy is a happy and joyous time of life for many women, but it can also be a challenging time of life as mother's body goes through numerous changes in order to create and support development of new life. Ayurveda provide support for physical, mental/emotional and spiritual aspect of mother by providing good health for expectant mother through wholesome diet and regimen which vary depending upon season and surrounding environment as well as digestive power of expectant mother. Ayurveda places enormous emphasis on importance of caring mother before, during and after pregnancy. According to Ayurvedic text the care of mother begins even before conception by certain purifying procedure ,after conception by specific routine for each month and stages of pregnancy which constitute aahar(specific dietary regimens) , vihar(daily activities and therapeutic procedure) and modification in psychological behavior. Aahar, vihar which are contraindicated for pregnant women known as garbhopaghatakara bhawas are also mentioned. After delivery general care of prasuta (puerperal women) are mentioned to restore the health of mother.

Keywords-Prasuta, Garbhopaghatakara Bhawas, Conception.

DEVELOPMENT OF MOBILE APPLICATION AND WEBPAGE “ BALAAYU POSHANA” FOR NUTRITION EDUCATION AND COUNSELLING FOR PRIMIPARA

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Introduction: Nutrition education and counselling is a widely used strategy to improve the nutritional status of women and children. Adequate nutrition during infancy is essential for lifelong health and well-being. *Kashyapa* have praised importance of breastfeeding and have mentioned various weaning food recipes. **Aim:** To develop mobile application and webpage “BalaAyu Poshana” for nutrition education and counselling for primipara along with ayurvedic guidelines. **Objective:** The strategy of forming an application and webpage focuses primarily on: - Promoting adequate weight gain through sufficient and balanced protein and energy intake. - Promoting consistent and continued use of micronutrient supplements, food supplements or fortified foods. -This application and webpage will provide an authentic, accessible and friendly guidance to primipara to promote the proper growth and nutrition of her child. **Material:** Smartphone or computer with suitable software. Internet connectivity or network access. **Methods:** The concerned literature from authentic resources is collected and inserted in the application and webpage. Nutrition education and counselling (NEC) is a commonly applied strategy to improve mother and child nutrition. Using a modified Child Health Epidemiology Reference Group method we systematically reviewed the literature. The overall quality of the body of evidence was deemed low for all outcomes due to high heterogeneity, poor study designs and other biases. **Conclusion:** The developed mobile application and webpage will provide

appropriate and authentic guidance for primipara in order to ensure good nutritional status of her child.

Keywords: Child nutrition, Primipara, NEC, Ayurvedic Guidelines.

APPLIED ASPECT OF LIGATION OF UMBILICAL CORD

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Umbilical cord is also called the navel string, birth cord or funniculus umbilicalis. Umbilical cord which connects foetus to placenta contains two arteries and one vein. Vein carries nutrition to the foetus whereas arteries carry waste products from the foetal metabolism. Lymph and venous blood flows upward above the plane of umbilicus and downwards below this plane. Umbilicus is the meeting point of the four (two lateral, one head & one tail) folds of embryonic plate. This is also the meeting point of three systems i. e. Digestive system (Vitello-intestinal), the excretory system (Urachus) and vascular system (Umbilical vessels). Umbilical cord has a greater importance at the time of birth. Various Acharyas have mentioned its cutting as Nabhinal Chedana. According to Acharya Charaka and Sushruta, the cord should be tied tightly with a sterile thread by marking a point at length of around 8 Angulas away from the abdomen of the child. Acharya Vagbhatta advised ligation at 4 Angulas and cutting of it by sharp scalpel or instrument in hygienic environment. If due to any reason infection spreads to the liver, portal vein, peritoneum or even systemic circulation, which becomes foetal for the growing neonatal. Detailed discussion in this regard will be presented as my full paper in the seminar.

Keyword:- Umbilical Cord, Blood, System.

IMPORTANCE OF VIRECHANA KARMA IN BAL ROGA

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The term virechana encompasses both the vaman and virechana according to acharya . This procedure is the most important appraise for elimination of the morbid doshas through the adhobhaga . Virechana is less stressful procedure and has least possibility of complications. Hence it is widely used as shodhan therapy. Virechana specially act on vaikranta pitta and subsequent to this all pittaja vikara pacifies completely, as fire of a house quiet down with water.

Reference of virechana karma by acharya kashyapa:

- In gulma chikitsa, eranda tailam for mild virechana after snehana and swedana is prescribed.(ks.chi.gulmachikitsa.29)
- In phakka roga chikitsa, virechana with trivrut ksheera is prescribed, followed by brahmi gritham. (ks.chi.phakka rog)
- Virechana causes frequent relief in pitta dominant sammipatik jwara by mustadi kwath,madhu and sarkara.(ks.kalp.visheshakalp)
- In anaha chikitsa, virechana recommended as the form of phalavarti .(ks.chi.udavarta chikitsa.4)
- In pitta pradhan vishama jwara, virechana is mentioned along with tikta sheeta shaman dravya.(ks.khila.vishamajwar 82)
- In amlapitta ,pakshvashaya gata dosha could be evacuated by virechana by triphala,trayamana,katuki,rohini and trivrut.(ks.khila.16/30,32)
- In niram stage of pittaja jwara, virechana after snehan by tikta gritham is recommended. (ks.khila.14/13)
- In pittaja shoola, peya with virechana properties is useful .(ks.khil . 18/14)

ROLE OF SWEDANA IN BAL ROGA

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Swedan is mala of medho dhatu produced in consequence to heat exposure. Swedan should apply according to doshas by the support of proper formulation of drugs. It is a process where sweating [sudation] induced artificially by which it relieves heaviness , stiffness and coldness of the body. Swedan procedure indicated specially for vatika and kaphaja disorder.It provide energy to the passive and morbid doshas the heat is reason to cause bend in dried wooden stick.Reference of swedana in samhitas :

- Hasta swedan is mentioned till four month of age
- During the process of shodhan if child complains of pain then hasta swedan should be given to them after the age of six year patra sweda should be given to them
- Before shaman chikitsa, snehan and swedana is described
- In Pratishyaya, swedana is indicated
- In Krimi roga, mild warm mustard oil and saindhava lavan with the help of finger And Phakka roga when vata is associated, swedana is indicated.
- Sannipatik jwar when patient feel pain and pain in flanks sarvanga sweda is mentioned
- Pitta pradhan visham jwar awagaha but all hot and warm measure are restricted
- Bahimargagata jwara pradheha and parighaka

IMPACT OF GARBH SANSKAR (ANC) ON A HEALTHY PROGENY

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In Ayurveda, there is a certain paricharya (do's & don'ts) mentioned for females to follow at every stage of their life; Rajaswala paricharya, garbhini masanumasik paricharya, sutika paricharya etc. According to Ayurveda mothers are instructed to follow garbhini paricharya for getting healthy progeny. There are lots of sutras which defines how the unhealthy life style of a pregnant lady can affect physical and psychological health of fetus. So acharys has prescribed certain specifically classified maternal care during anti natal period.In this paper, we are giving a detailed explanation of the monthly paricharya given in different texts which can be modified according to the age, season, place, constitution etc.

Keywords; Masanumasik paricharya, rajaswala paricharya.

UTILITY OF GARBHADHAN SANSKAR IN AYURVED

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It is necessary that the education of child's excellence begins from preconception and continues all the life. There is total 16 Sanskar described in Ayurveda. It is one of among them. It make arrangements to maintain the expected level of psycho-physical and spiritual health of associate woman and man.

It removes the doshas of kshetra (reproductive system of male and female) and also of Mana. The child has to be unique, Nobel and extremely talented. It also include YAGYA Therapy for preconception planning. Mantra Therapy involves chanting of beejmantra in a specific rhythm.It also reduced hereditary disorders in family and Invitation of Divine Soul to take birth through your WOMB.

Key words - Ayurveda, Sanskar, Garbhadhan Sanskar.

MANAGEMENT OF COW MILK PROTEIN ALLERGY – AN AYURVEDIC VIEW

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This review summarizes current evidence and recommendations regarding cow milk allergy (CMPA), the most common food allergy in young children, for the parents. CMPA is a common condition encountered in children with incidence estimated as 2% to 7.5% in the first year of life. It is important to accurately diagnose CMPA to avoid the consequences of either under- or over diagnosis. CMPA is classically categorized into immunoglobulin E (IgE)- or non-IgE-mediated reaction that vary in clinical manifestations, diagnostic evaluation, and prognosis. The most commonly involved systems in patients with CMPA are gastrointestinal, skin, and respiratory. Treatment is simply by avoidance of cow's milk protein (CMP) in the child's or mother's diet, if exclusively breast-feeding. In ayurveda classics it is pointed out that cow's milk is vaman, virechan, aasthapnam, saram, abhisyandi, . In classics, it has been mentioned that cow milk should always processed with *laghu panchmoola* before it is consumed.

Keyword – CMPA, aasthapnam, saram, abhisyandi, laghu panchmoola.

AYURVEDIC REVIEW OF SUTIKA PARICHARYA

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Ayurved emphasizes importance for the care of mother at every phase of her pregnancy period especially when it comes to antenatal care and postnatal care. A postnatal period beginning immediately after the separation of placenta and extending up to 6 weeks is called as puerperium or puerperal period. Postnatal care certainly can be correlated with Sutika Paricharya explained in Ayurvedic classics. Garbhini and Sutika Paricharya are well described by our ancient Ayurvedic scholars in their respective Samhitas. They have described dietary regimen, life style and other necessary management for whole pregnancy period and up to 6 month after delivery. In this stage mother should be educated to take care of herself along with the new born baby. This period is supposed to be the period of happiness and contentment on one hand and physical and mental fatigue due to delivery on the other hand. The lady becomes weak or emaciated after severe loss of blood and body fluid during delivery. Garbhini is very much prone to various diseases due to aggravation of Doshas. This condition may further be aggravated during delivery and puerperium due to severe loss of blood and other important Dhatus of body. Therefore she needs special and proper care during pregnancy as well as puerperium. The regimen that helps the woman to regain her lost vitality and helps her body to revert back to pre-pregnant state is called Sutika Paricharya. Detailed aspect of Sutika Paricharya will be discussed in my full paper.

SUTIKA SWASTHAWRITTA – A REJUVENATION THERAPY

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The word “SUTIKA” signifies a woman has delivered a child along with the placenta. The scientific interpretation of sutika is puerperal woman, all the classics have advised proper adherence to “Sutika Swasthawritta” as advised in Ayurveda classics results in faster restoration of health of a mother and to attain proper health after puerperium and rejuvenates. Acharya Kashyapa has defined the birth of child as “Rebirth” of mother. The word rebirth signifies the pain and hardships she has to undergo while delivering a baby. Hence, she needs

utmost level of care after delivery.

The “Sutika” recovers from her labour which often leaves her tired and exhausted. There is, never the less feeling of great relief and happiness. The “Sutika” undergoes what is probably the most important psycho-physiological experience of her life, she realizes that she is responsible for another human.

“Sutika” is prone to many diseases, and hence it is must to follow “sutika swasthawritta” which not only improves her physiological condition but also protects her from upcoming diseases. In general, all Acharyas' have explained massage, oral administration of Sneha, decoctions, medicated rice gruel, medicated soups to overcome this problem and scientifically explained “Sutika Swasthawritta”. So an attempt is made.

GARBHA SANSKAR -EFFECTIVE ANSWER FOR FETOMATERNAL WELL-BEING

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Introduction:

1. Sanskar -educating the mind of fetus. 2. Garbha sanskar has a very positive effective on mythological characters like Abhimanyu and Prahlad who were enlightened in there mother's womb 3. As far as mental development of fetus is concerned Ayurvedic reference such as daurudh in fourth month whereas mind starts developing in fifth month developing2) intellectual power in 1)6months.

Steps associated with the garbha sanskar procedure:

3)Masanumasik ahar -Ahar Ras of mother to fetus Masanumasik vihar -including prenatal yoga according to Yogasanas-boosts the mother for full term normal delivery.

Pranayam and omkar -helps to calm and relax Listening devotional music -from 7th month of gestational age fetus can hear what mother hears and respond to it. Meditation .

Conclusion :

Through the above concepts it can be concluded that Garbha it can be concluded that garbh sanskar agenda is directed towards the feto-maternal well-being along with the development of physical mental and holistic overall well-being of fetus.

Scope: Implementation of garbh sanskar is the need of the hour as it can play a vital role in feto maternal well-being and development of the healthy society improving to the global health.

Keywords- Maternal child health and pregnancy.

RESEARCHES DONE AND TO BE DONE ON GARBHASHAYA ARBUDA(UTERINE FIBROID)

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Background information: A woman plays a vital role in the society as well as in the family. Now a day's women faceso many problems related to Gynecological disorders like heavy menses, delayed menses, tumors of the genital organs etc. due to changes of diet and life style. Fibroid or leiomyoma is one of the tumors which is hazardous to their lifestyle. Fibroid is the most common benign tumor of the uterus and also the most common benign solid tumor in female. It has been estimated that at least 20% of women at the age of 30 have got fibroid in their womb [v]. Fibroids are almost never associated with mortality, but they may cause morbidity and significantly affect quality of life.Their incidence among women is generally cited as 20 to 25%, but is high as 70 to 80% in studies using histologic or sonographic examination (Baird, 2003; Cramer, 1990). These are more common in nulliparous or in those having one child infertility. The prevalence is highest between 35 and 45 years 1 African American women found by age 35 the incidence of fibroid was 60% and it was over 80% by 50. .The prevalence of uterine fibroid in India ranged from 46% in age group41 to 45 years, 24% in 46 to 50 years, and 11% in 36 to 40 years. Women with

uterine fibroids complained of menorrhagia in 78%, dysmenorrhea in 30%, metrorrhagia in 10%, polymenorrhea in 22%, pain in abdomen 22%, urinary problem 8%, primary infertility 4%, leucorrhea 12% and lump in abdomen 4%. Fibroid is one of the leading cause of hysterectomy accounting for approximately one-third of all hysterectomies or about 200000 hysterectomies per year. Ayurveda literature has described Garbhashaya Arbuda which is perfectly correlates with uterine fibroid. On the basis of specific clinical features of Mamsaja arbuda as well as description of Arbuda in general, it can be said that all relatively big neoplasms developing from muscular and fibrous tissues (myomas and fibromas) come under Mamsaja Arbuda. In Madhukosa commentary it is mentioned that though rakta or mamsa are causative factors for respective arbudas, yet, for raktaja and mamsaja arbuda respective pitta and vata dosas are responsible for their beginning.

ROLE OF STANYA DOSHA IN CHILD HEALTH

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Excellence of milk is useful for child baby. According to ayurveda in Charak Samhita stanya sampat are defined-

स्तन्यसंपत्तु प्रकृतिवर्णगन्धरसस्पर्शम्, उद्पात्रे च दुह्यमानमूदकं व्येति प्रकृतिभूतत्वात्; तत् पुष्टिकरमारोग्यकरं चेति (स्तन्यसंपत्)।। (च.शा.- 8/54)

It should have natural color, smell, taste and touch and when poured in to pot of water, it should mix at once and perfectly with the water, being of a natural kind. Such milk is both strengthening and healthgiving. Due to impure breast milk various kinds of diseases may occurs in child. According to ayurveda in charak samhita 8 types of stanya dusthi is explained

वैरस्यं फेनसंघातो रौक्ष्यं चैत्यनिलात्मके। पित्ताद्वैवर्ण्यदौर्गन्ध्ये स्नेहपैच्छिल्यगौरवम् कफाद्भवति।। (च.चि.- 30/237)

In condition of vitiation of vata the milk will be distasteful, frothy and unctuous in vitiation by pitta; there will be discoloration and bad smell. In vitiation by kapha unctuousness sliminess and heaviness will be observed. Details will be presented in the form of full paper at the time of presentation on stanya dusthi.

BEHAVIOR DISORDER: ADHD [ATTENTION DEFICIT HYPERACTIVITY DISORDER]

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*****Dr. Ritu Kapoor*** Dr. Sunita Godara*** Dr. Kavita Sharma**

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Attention deficit hyperactivity disorder is a neuro development type of brain disorder, especially involving Dopamine and Nor Epinephrine neurotransmitter which govern a variety of cognitive process, directly responsible for the control of the behavioral, motivation and motor function. It is characterized by Hyperactivity, Impulsiveness and Inattention. ADHD is more common in boys than girls (male to female ratio 4:1 for hyperactivity type and 2:1 for inattentive type). ADHD affects children and teens and can continue into adulthood. Children with ADHD have been found cognitive deficits, lower IQ, impaired social relationships with in the family and with peers as well as poor study skills and lower academic achievement. In Ayurveda it occurs due to vitiation of Dhee (rational thinking), Dhriti (intellect/retaining power of mind), Smriti (memory) due to some factors like Cigarette Smoking, Alcohol, Drug use during pregnancy and Lead poisoning which results into Improper contact of the senses with their Objectives and give rise to inattention, hyperactivity and impulsivity. In Ayurveda Texts Medhya Rasayana described which are used as Shaman Chikitsa for those types of disorder. Medhya drugs like Brahmi, Mandukparni, Shankhpushpi etc improve Coordination, Cognition and Concentration Capacity of the Brain.

Keywords: ADHD, impulsiveness, inattention, hyperactivity

LITERARY REVIEW: ROLE OF TRIPHALA KWATH IN YONIPRAKSHALAN

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Health is most important in our life & as it is directly proportionate to hygiene. A change in lifestyle due to rapid urbanization, faulty dietary habits, excessive work load & unhygienic conditions etc. all have raised many gynecological disorders but leucorrhoea is more common among of them. Every 2nd woman is suffering from it. It may be physiological but when turn into pathological conditions, produces associated problems like itching vulva, generalized weakness, backache, anxiety. In ayurvedic science leucorrhoea correlates with the swetapradara, in which mainly kapha dosha vitiated. In modern era, all females are used variety of vaginal washes which maintain vaginal flora & pH balance also. In some cases vaginal washes are disturbing normal PH Balance from acidic to alkaline. Management of leucorrhoea depends upon the causative factors, prakriti of the patients involvement of dosha etc. In ayurveda science that can be manage through triphala kwath, because triphala have the properties like- Tridoshghna, shothhar& antibacterial, antifungal, antimicrobial, & anti-inflammatory etc.

Keywords- health, hygiene, vaginal washes, leucorrhoea (swetapradara) triphala.

PREVIEW OF CONGENITAL HERNIA

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One of the most common surgical entity from the first moment to last moment of life is protrusion of the organs through an abnormal opening and this surgical entity has never been covered by any non surgical approach. This hernia is badly effects in child even some cases it became a life threatening (strangulated), unfortunately the suffer are much more in premature newborn babies. Which are prone for the occurrence of the disease. Hernia repair is one of the surgical condition in child. The management is purely surgical and quite satisfactory without any introvert side effect. In the present paper I will present the overall management with there related points such as epidemiology, etio-pathogenesis and clinical features and its different mode of management with brief description of subject on the line of ayurveda.

Keyword:-Hernia, Congenital hernia, pathology, Treatment.

AYURVEDA BASIC PRINCIPLE IN MANAGEMENT OF CHILDHOOD ILLNESS

A LITERARY STUDY

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Introduction: Children are not the miniature of adult. They differ from adult in anatomical, physiological and psychological aspects. They are characterized by weak immunity, immature tissues, period of rapid growth and development etc. so Ayurveda explain some different treatment principle in childhood period as compare to adult.

Method And Material: Literay study was done in Ayurveda samhitas regarding treatment principle in children. Collection and analysis of these principles on day to day practice were critically mention and summarize.

Results: Various concept regarding childhood illness management has mention in Ayurveda. In present era most of these principle were scientifically validated and practiced.

Discussion: Ayurved has given special important to childhood period so to prevent there morbidity, mortality as well as to enhance their general wellbeing different treatment modalities had mention.

Keywords: Ayurved, Childhood, Basic Principle, Treatment Modality, Samhita.

EFFECT OF TIKTADIGHRITA

IN MANAGEMENT OF DUSHTA VRANA (MILD TO MODERATE INFECTED WOUND)

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JR 3Professor*

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A wound define as the disruption of cellular and anatomical continuity of soft part of body structures caused by violence or trauma. Wound healing is delayed and become difficult to manage if they become infected. Necrotic tissue, slough and foreign material in the wound can provide a medium for infection and prolonged the inflammatory response which delayed healing. Necrotic tissue and slough Debridment by Autolytic, Biological, Enzymetic , Mechanical and surgical debridement.

Acharya Sushruta the father of Ayurveda surgery was well aware of infections of Wound, he propounded, practiced and described a number of drugs for the effective management of dushta vrana. Acharya Sushruta mentioned number of drugs for local application in the management of dushta vrana. His technique are broadly classified as Vrana Shodhana and Vrana Ropana .It is almost impossible to provide full management by using single drug, so its needed to prepare the poly herbal preparation for management of dushta vrana. Tiktadighrita is mentioned in various ayurveda text(Chakradutta, Bhaishajya Ratnawali, Yogratanakar) as local application in management of dushta vrana.This preparation has both vrana shodhan and vrana ropana properties,so in this presentation effect of tiktadighrita in management of dushta vrana will be discussed.

Keywords- Dushta vrana, Tiktadighrita, Vrana Shodhna, Vrana Ropana.

ROLE OF ABHYANGA AND SHIRODHARA

IN MANAGEMENT OF ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

Dr. Sunita Bola* Dr. Gyan Prakash Dr. Mahesh Kumar Sharma*** Dr. Preeti Swami******

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Attention deficit hyperactivity is among the commonest childhood neurological disorder affecting the focusing,Behaviour and activity controlling abilities.This disorder not only influence the learning abilities of the child but also has a significant impact on patient social ,professional and family life,affecting their relationships with parents and siblings,causing disruption at work because of decresed concentration abilities and less stable relationship thus crippling the self-esteem in every aspect .The prevalence of the diseases is increasing treatment options are just limited to the management of symptoms and that too not very efficient ,no permanent cure is reported till date.In ayurveda ,it can correlated with various types of abnormal behaviours due to increased vata and symptoms arising due to imbalance in the homeostasis between the components of pragya (intellect).The relaxation and concentration improving panchakarma therapies .Abhyanga helps in pacification of vata Shirodhara is an excellent treatment for a compromised nervous systems and pacification of vata which is responsible for the impulsive behavior and it also told as indriya prasadana (sense orgen able to functions normally)

Keywords – ADHD ,Neurological disorder, Abhyanga,Shirodhara ,Pragya.

CHILDHOOD OBESITY-

Dr. Savitri** Dr. Utkarsh Gupta**Dr. Deepshikha Dr. N.N Tiwari****Prof. G.P.Garg**

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Obesity, one of the biggest health problem among children and adolescents impacts the child's heath and educational attainment. It has serious short and longterm medical consequences. Dietary imbalance and overnutrition may lead to diseases like obesity. The prevalence of obesity has increased dramatically in the last decades due to sedentary lifestyle. Ayurveda, the science of life mentioned it as medoroga, involve imbalance of

doshas along with disturbances of Agni. In the text of Ayurveda Pathya Aahar, Dincharya, Ritucharya, Ratricharya, Rasayana and various type of yoga are described for prevention and management of obesity. Drugs like Guggulu, Rasanjana, Triphala, Trikatu, and Vacha have very effective result on the obesity.

Keywords: Sthoulya, Medoroga, Childhood disorder.

ROLE OF PANCHMAHABHOOT & MATRIJADI BHAVAS IN FORMATION OF FETUS PRAKRITI

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The main aim of Ayurveda being to provide guidelines for maintenance and promotion of health as well as prevention and treatment of diseases. It considered individual as a whole, rather than just a disease. Treatment is finely tuned by taking into consideration to the individual's constitution, susceptibility to the disease, life style and other factors. This has been refined to a very high degree in Ayurveda with its powerful concept of Prakriti. According to Ayurveda, human body is a combination of vata ,pitta and kapha resulting seven types of prakriti which is under the influence of four factors:

1. Bija (sperm and ovum)
- 2.Kshetra (uterus or site for lodgement)
3. Ritu (proper timing)
- 4.Aahara rasa (nutrition)

Among these Bija is the main factor, which carry the progeny of parents (panchabhautika or tridoshika constitution of the parents) thus this give very much resemblance to the genetic make-up.(Ayurvedic Genomics)

• They start influencing fetus from the time of conception upto the birth (Garbhavakranti). All these factors can be grouped under three categories:

- | | | | |
|---------------------------------|---|-----------|------------|
| 1. Parental factors | - | • Matrija | • Pitrija |
| 2. Individual factors | - | • Atmaja | • Satmyaja |
| 3. Environmental factors | - | • Rasaja | • Sattvaja |

Prakriti is determined by the garbha kalaj bhavas which include:

Shukra shonita prakriti Kala garbhashaya prakriti

Matura ahara vihara prakriti Mahabhuta vikara prakriti

These are referred as pre-conception, heredity, post conception and postnatal states. So the roll & importance of these bhavas must be taken in mind for determinant prakriti. Details will provide at the time of presentation.

Theoretical aspects of physicochemical characterization and analytical specifications of Swarna Prashana: An approach to its standardization

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Swarna Prashana is gold preparation used as a Rasayana agent in indigenous system of medicine Ayurveda. Swarna Bhasma is used as a chief ingredient besides this cow ghee and honey are used for Swarna Prashana preparation. Nowadays, Ayurveda physicians are prescribing Swarna Prashana to children and neonates with claim of immunity booster in modified drop format. Many manufacturers have also manufactures Swarna Prashana drops and selling them on medical counters and online platforms. Standardization of Swarna Prashana is necessary to confirm its identity and to determine its quality, purity, safety, effectiveness and acceptability. The most important challenges faced by these formulations are the lack of complete standardization by physiochemical parameters. Swarna Bhasma was analyzed by adopting modern scientific tools like XRD, EDS, SEM and ICP-OES etc. It was also visually evaluated for physical state, colour, feel when touched, smell and taste. The Swarna Prashana needs to be

completely standardised under the analytical specifications like colour, odour, consistency, uniformity of content, microscopy, rancidity, TLC, HPLC, GC, viscosity, pH, particle size, total fatty matter, loss on drying, spreadability, test for heavy metals, microbial contamination, test for specific pathogen and pesticide residue. The current paper details the theoretical aspects of standardization of Swarna Prashana.

Keywords- Swarna Prashana, Swarna Bhasma, Standardization, Quality, Analysis.

“FAST FOOD CONSUMPTION IN CHILDREN – A LIFE STYLE DISORDER”

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Food is essential for growth and development of a child. 'Good food means the right kind of food for good health. It contains natural substances that body needs to grow properly and stay healthy. Fast food refers to food that can be served ready to eat fast. Energy dense food with high sugar/fat/salt content and low nutrient value in terms of protein, fibre, vitamin and mineral content. Many of our children are fond of such readymade food. Nuclear families, working mother, food taste and quick service in the shop are important contributing factors of fast food consumption. This kind of food is responsible for obesity, hypertension, dyslipidemia, heart disease and diabetes. School midday-food programme and health education can improve dietary habits of children. Implementation of laws for regulation of marketing and selling of fast food may be another step in controlling consumption of such food by our children. A balanced diet in Ayurveda is planned in relation to the known Panchabhautic composition and Tridoshic impacts in the living body. Food (Ahara) and lifestyle (Vihara) significantly affect one's overall health.

Key words – Fast food, healthy, nutrient, obesity, lifestyle etc.

RESUSCITATION OF A NEWBORN

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Of the million infants born every year in India, 3-5% experience asphyxia at birth. Asphyxia is characterized by progressive hypoxia, hypercapnia, hypoperfusion and acidosis. It may lead to multiorgan dysfunction that may cause death. Hypoxic ischemic encephalopathy (HIE) resulting from asphyxia may lead to longterm neuromotor sequelae.

When an infant is deprived of oxygen, an initial brief period of rapid breathing occurs. If the asphyxia continues, the respiratory movements cease and the infant enters into a period of apnea known as primary apnea. During primary apnea, the heart rate begins to fall, neuromuscular tone gradually diminishes but the blood pressure remains normal. In most instances, tactile stimulation during this period will reinitiate respiration. If the asphyxia continues, the infant develops deep gasping respiration, the heart rate continues to decrease, the blood pressure begins to fall and the infant becomes flacid. The breathing becomes weaker until the infant gasps and enters into a period of secondary apnea. The infant is now unresponsive to stimulation and does not spontaneously resume respiratory efforts unless resuscitation in the form of positive pressure ventilation is initiated. It is important to note that as a result of fetal hypoxia, the infant may go through the phases of primary and secondary apnea even in utero. Hence, apnea at birth may be either primary or secondary apnea. These two are clinically indistinguishable; in both instances, the infant is not breathing and the heart rate may be below 100 beats per minute. Hence when faced with an apneic infant at birth, one should assume that one is dealing with secondary apnea and be ready to undertake full resuscitation efficiently without wasting too much of time in providing tactile stimulation.

PSYCHOLOGICAL DISORDERS IN CHILDREN

AND THEIR MANAGEMENT THROUGH AYURVEDA

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Psychological and mental disorders involve physiological and/or genetic components in children but the etiology of some psychological disorders are still unknown. Mental retardation, communication skills disorders, learning disorder and pervasive developmental disorders (such as autistic disorder) etc. comes under these category. As per Ayurveda, most mental illness is caused by doshic imbalance and ultimately loss of understanding.

A fundamental approach of Ayurveda to treat mental illness is to enhance dhi, dhriti and smriti which ultimately enhance the mental coordination. Ayurveda suggest that achieving doshic balance, promoting healthy habits and strengthening immunity and agni in early childhood can set the foundation for optimal mental growth and development. Ayurveda involve various treatment component as part of for such conditions like; herbs, yoga, panchkarma and use of various traditional formulation like; Medhya Rasayanas which enhances mental ability, learning disorders, behavioral therapy through natural techniques etc.

Key words – Learning disorder, Immunity, Panchkarma etc.

“SHISHUNAM- ASHISHUNAM CHA BASTIKARMA AMRITAM”

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Basti can be used in all age groups from Pediatrics to Geriatrics.

“आजन्ममरणं शस्तः प्रतिमर्शस्तु बस्तिवत् ” (अ.ह.सू. 20/31)

Role of the Basti karma is useful not only in adults but also in children. It is just like amrutam (nectar).

“शिशूनामशिशूनां च बस्तिकर्मा मृतं यथा । भिषजामर्थयशसी, शिशोरायुः, प्रजां पितुः ॥

त्रयमेकपदे हन्ति भेषजं दुरुन्धितम् । तस्मादापन्नरोगेषु वातप्रायेषु देहिषु ॥ ” (का.सि. 1/9-10)

For the children and adults, the basti is just like a amrit (nectar), to the physician (it is) for money and fame, to the child for the longevity and to the father for the progeny, however, improperly used medicine destroys these three together. That-is-why, diseases caused in human beings due to predominance of vata.

“वातोल्बणेषु दोषेषु वाते वा बस्तिरिष्यते उपकमाणां सर्वेषां सोमणी । ” (अ.ह.सू. 19/1)

Basti is considered as superior among Panchakarma It is also considered as 'ARDHA CHIKITSA'

Treatment of choice for Vata dosha.

“बस्तिर्वाते च पिते च कफे रक्ते च शस्यते ।

संसर्गं सन्निपाते च बस्तिरेव हितः सदा” ॥ (सु.चि. 35/6)

Basti is indicated in maximum number of diseases. It is useful in Vata , Pitta, Kapha , Rakta , Samsarga & Sannipata.

“ आकेशाग्रं त्रेभ्यो बस्ति बंहयते नरान् वर्ण-तेजो-बलकरम् आयुष्यम् शुक्रवर्धनम् ।

“योनिप्रसादनं धन्यं बन्ध्यानामपि पुत्रदम् । बस्तिकर्म (कृतं) काले बालानाममृतोपमम् ॥ ” (का.सि. 1/39-40)

Basti, which is given in appropriate time produces complexion, lusture, strength, longevity and increases shukra dhatu. It clarifies the female reproductive organ and provide fortune and son even to infertile women, it is like a nectar to children-

- Basti causes anabolism starting from top of hair to tip of nail. Just like roots of a tree absorbs water from soil, the veerya of vasti spreads throughout body .

- Even basti dravya comes out quickly without or with mala, the veerya of vasti spreads throughout body by apanadi pancha vata.
- Basti retains in Pakwashaya and collects doshas from all over the body i.e. head to toe, similar to sun which is located millions of kilometers away from the Earth evaporates the water with powerful sun rays.
- It eliminates all doshas through anus after collecting from all over the body.

CLINICAL STUDY OF PALASHADI VARTI IN THE MANAGEMENT OF PICHCHHILA YONI W.S.R. ABNORMAL VAGINAL DISCHARGE

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Introduction: Abnormal vaginal discharge is a whitish mucoid discharge from the vagina. It may be thick and viscid, and foul smelling when it is caused by some infection. A study in India has shown that the prevalence of reproductive tract infections are 37% Based on symptoms, 36.7% Based on laboratory investigations, 31% Candidiasis, 02% Trichomoniasis, 45% Bacterial vaginosis, 03% Gonorrhoea. In modern science, various treatments are available for abnormal vaginal discharge but all have unsatisfactory results and complications, thus, there is a great scope of research to find out safe, potent and effective remedy for the management of abnormal vaginal discharge. **Materials and methods:** An open randomised clinical trial was conducted on 15 clinically diagnosed patients of abnormal vaginal discharge and were given Palashadi Varti for 2 consecutive cycles. **Results:** The study shows statistically very significant result on symptoms i.e. consistency of vaginal discharge and pain in lower abdomen and shown statistically significant result on symptoms i.e. discharge per vaginum, colour, vulval itching, general weakness, burning micturition. **Discussion:** No adverse effect was observed. Thus, Palashadi Varti can be recommended for the management of abnormal vaginal discharge.

Key words – Palashadi Varti, Abnormal Vaginal Discharge, Reproductive Tract.

RELEVANCE OF SWARNAPRASHANA USAGE IN CHILDREN AT PRESENT TIME A CRITICAL REVIEW

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Unique practice of administration of processed gold in children for the benefits of improving intellect, digestion, physical strength, immunity etc., is mentioned in Ayurveda as “Swarnaprashana” by Kashyapa. Kashyapa has advocated that if Swarnaprashana is administered for one month, the baby will become highly intelligent and will remain protected from all diseases and if administered for 6 months, memory of baby will be in a state that he/she can memorize things only by listening. Nowadays, Ayurveda physicians are claiming that “Swarnaprashana” have potential of immune modulation, improvement of intellectual function and overall growth and development of a child and they are prescribing it to neonates and children in India. Present review is an effort to critically evaluate the available evidences regarding, immuno-modulatory, nootropic activity and effects on growth and development of “Swarnaprashana” for protection and overall development of children. Many studies are available to understand the mechanism of its action on immunity modulation, intellectual function and hence providing its relevance in children. This review proposes that the benefits of Swarnaprashana can be achieved at multiple levels like as a general health promoter and in specific to enhancement of intelligence, digestion, metabolism, immunity, physical strength or complexion in children.

Key words: Swarnaprashana, immuno-modulatory, children, Ayurveda

CONCEPT OF PRE-CONCEPTIONAL CARE AND GARBHINI PARICHARYA IN AYURVEDA

CONCLUSSION: In Ayurveda the Acharyas have to be credited for keeping in place a very rational newborn care through *PranaPratyagaman*(Resuscitation) is surly having the aim of protecting the Child and adapting it to the worldly environment.

Keywords: Resuscitation, *PranaPratyagaman*, *AcheshtaShishu*, Asphyxia, *Prana*.

AN OPEN LABEL, RETROSPECTIVE, CONTROLLED STUDY TO EVALUATE EFFICACY OF DARUHARIDRA KASHAYA (AN HERBAL PREPARATION) IN MANAGEMENT OF BAHUPITTA KAMALA WITH SPECIAL REFERENCE TO NEONATAL JAUNDICE

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Kaumarbhritya a branch of Ayurveda highlights the child rearing as the foremost feature. Hence Ayurvedic paediatric aimed at treatment of disease and method of the bringing up the child to a healthy individual. Rigveda and Atharaveda suggested treating kamala (Neonatal Jaundice) with rays of the rising sun. Based on similar symptoms Bahupitta Kamala mentioned in Ayurvedic classic is considered as Neonatal Jaundice In modern science. Nearly all texts mentioned use of Daruharidra(*Berberis aristata* DC) in management of Neonatal Jaundice. In present study two groups containing 30 newborns each suffering from Neonatal Jaudice were selected randomly irrespective to sex, gestational age. Daruharidra Kashaya and honey combination was used as a trial drug. Phototherapy was also given as supportive treatment along with trial drug. Parameters such as serum bilirubin, alertness and activity, duration of jaundice, icterus with relative serum bilirubin level were taken in to consideration for assessing results. At the end of the study it was found that trial drug was very effective in the treatment of neonatal jaundice. It decreases serum bilirubin level, Icterus, Increased alertness and activity, decreases duration of jaundice.

Keywords- Icterus, Bilirubin, Kernicterus, Phototherapy, Hyperbilirubinemia, Bahupitta kamala

ROLE OF AYURVEDIC DRUGS IN THE MANAGEMENT OF SCABIES

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Scabies is an itchy skin condition caused by a tiny burrowing mite called *Sarcoptes Scabiei*. The presence of the mite leads to intense itching in the areas of its burrows. The urge to scratch may be especially strong at night. Scabies is contagious and extremely common in children younger than 2 years of age, but it is fairly common in older children. Scabies is one of the commonest dermatological conditions in children, accounting for a substantial proportion of skin disease in developing countries. Globally, it affects more than 130 million people at any time and the prevalence varies from .3 to 46 percent. The highest rates are found in countries with hot, tropical climates, where infestation is endemic.

In modern science, treatment for scabies is available but these are antihistamines in property and having so many side effects. These medicines are also are not capable to cure scabies. In Ayurveda, Eleven types of *Kshudra Kushthas* are described in detail; *PAMA* is one of them, which can be correlated with scabies. There are so many oral and local applicable herbs and herbo mineral drugs are dealt in Ayurveda to cure the scabies such as *Khadirashtaka Kwath*, *Durwadya tail*, *Haridra Khand*, *Manjishthadi Kwath*, *Mahatikta Ghrit*, *Gandhak Rasayan*, *Triphaladi Churna* and *Tikta rasa drayas*. Their administration, detail and curative effects will be discussed as the time of presentation in full paper.

Keywords- Scabies, Pama, Kshudrakushtha.

ROLE OF AYURVEDA IN PROMOTING MATERNAL AND CHILD HEALTH CARE

- When the umbilical cord become inflamed then oil with drugs like Lodhra, Muleti, Priyangu, Devadaru and Haridra are applied as abhyanga over umbilicus
- In nabhitundi, snehana through vatahara sneha is mentioned.
- When baby suffered with graha like Revati graha, pootana graham, andhapootana, sheetapootana there is various formulation for abhyanga are mentioned
- After applying lukewarm mustard oil mixed with rocksalt in anus, sudation of anus with finger should be done.
- In vataja and pittaja vishama jwara, abhyanga is prescribed.
- Skin disorders like Charmadala, abhyanga are mentioned by acharya kashyapa.
- Massage with gritha should be followed after relief from Pratishtyaya.
- In pleehodara before internal oleation, external snehana is described.
- In Kshaya roga, udvartana of sarson taila mixed substance is mentioned.
- In the case of panguta, Rajataila is used for abhyanga in phakka roga.

PRECONCEPTION REGIMEN FOR BETTER PROGENY

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Abstract: Ayurveda approaches to holistic health. It is not only limited to physical and materialistic health. It also provides sukhayu and hitayu. It plans the sound health of the individual from very early to conception. In Hindu culture conception has also been considered as one of the shodassanskar. There is a detailed description regarding child planning has been found in Ayurvedic classics. It starts before conception and includes samshodhan of the couple, rajasvalacharya, lifestyle modifications, diet plan, the method of coitus, certain rituals concerned with the surety of conception. All these activities result in an increased chance of conception and outcome of a child with desired qualities.

There are so many factors which play important role in conception. Garbha has been considered as a composite of six factors like matrija, pitrija, rasaja, satmyaja, atamaja and satvaja. If any factor is missing or vitiated, there is no conception or faulty conception. So, in preconception regimen, every factor has been considered very minutely.

Lifestyle, diet, emotions, thoughts, etc. have been searched and proven for their role in fertility and healthy conception. Rest of the factors may need critical re-evaluation and research.

ROLE OF PLAY IN THE DEVELOPMENT OF HOLISTIC HEALTH OF THE CHILDREN

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Play has been defined as any activity freely chosen, intrinsically motivated and personally directed. It stands outside ordinary life and is non-serious, but at the same time absorbing the player intensely. The play is essential to development because it contributes to the cognitive, physical, social and emotional well-being of children. Play induces fear, anxiety, stress, irritability, emotional flexibility, calmness and can heal emotional pain and increases empathy, compassion, sharing, non-verbal skills, attention and attachment and also improve immunity, endocrine, CVS and gross motor exploration.

Playing place of children should be even. This place should not be equipped with stones, pebbles, pieces of metal, glass, etc. like dangerous things. Nimbapatra, vidang, black pepper, etc. should be sprinkled on the playground. Children should be given different types of toys like sound producing, attractive, auspicious animals like cow, learning toys, etc. Toys should not produce trouble, fear and fatal to children.

Playing has been considered as an important factor in the holistic development of the child. It cannot be avoided, so playing places and toys should be selected in such a manner which is safe and enjoyable.

CLINICAL EVALUATION OF EFFICACY OF MADHURA AUSHADHA SIDDA TAILA MATRAVASTI AND YONIPICHU IN SUKHAPRASAVA

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As per Ayurveda, the woman is root of offsprings and she deserves prime status in society and requires a special care during different phases of life. But present scenario shows that, women are neglected part of the society especially in developing countries due to various reasons e.g., health issues, illiteracy, poverty etc. Obstetric care is also inadequate in this respect which leads to greater incidence of MMR and NMR. Reduce morbidity and mortality obstetricians are facing several problems in day to day practice even after available advanced health care.

Sukhaprasava is ultimate goal of Prasutitantra and to achieve the same regimen are described under Garbhini Paricharya. The matra vasti is one of them and it has its own significance and also the scientific basis.

Study carried out on Primi para patients, total 35 patients were registered for the present study under two groups. Group-A patients were given madhura aushadha siddha taila matra vasti and yoni pichu. Group –B was control group, matravasti and yonipichu were not given. Result of the study showed that Group A was better than Group B. This clinical trial shortened the first and second stage of labour by having good effect on ripening of cervix and stretching and relaxing of vaginal canal and perineum in Group-A. Details of the study will be presented in the full presentation.

CONGENITAL DEFORMITY DESCRIBED IN VRAHTRAYEE WITH SPECIAL REFERENCE TO THE CLEFT LIP AND CLEFT PALATE

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**** Dr. Vishnu Dutt Sharma*** Dr. Rajesh Gupta **** Dr. O.P. Dave**

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Cleft lip and cleft palate are most common congenital deformity in child. Acharya Vagbhata described this topic in Khandaushta due to Vata Prakopa and management in Sandan Karma. Acharya Sushrut the father of Plastic Surgery has mentioned Sandan Karma for various type deformity of Nasa, Karna and Austa in Karnvayadbandhvidhi Adhyaya. Modern science also says Cleft are most common congenital, Facial and oral malformation that occur in pregnancy, while the baby developing inside the mother. They occur due to combination of genetic and environment factor. Another reason related to a medication, a mother may have taken during pregnancy. Many problems associated with it like eating problem, Ear infection, Hearing loss, dental and Speech problem. Plastic Surgeon performs necessary surgery. In this paper I will present the evolution of modern surgery of cleft lip from Ayurvedic Cosmetic surgery of Austha Sandan.

Key word: - Cleft lip, Cleft Palate, Aushtha Sandhan.

REVIEW OF AYURVEDIC APPROACH OF “JAL-SIRSH” WRS TO HYDROCEPHALUS

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In the light of WHO reports it is well known and evidence based proof that childhood surgical conditions are common in developing countries and lack of proper care in these conditions mortality and morbidity rates are significantly very high in developing countries. The surgical care must be an essential component in child health

programmes in this collection. I would like to present the contribution of Ayurveda in the management of jal-sirsh.it is an open fact that various pathological condition may lead to this train of symptoms and it difficult writher impossible to say what is the eject state of matters going on with in the part of pathology.In the present paper I will explain the view of ayurvedic aacharya on the line of "NIDAN-PANCHAK" as well as line of treatment for the betterment of patient because there are no any satisfactory treatment to lead pathology and condition is always poor . The ayurvedic may give a golden support in this condition and the same will be describe in my full paper.

Keyword: Jalshirsh, Nidan-Panchak, Hydrocephalus.

ROLE OF NASYA IN BALA ROGA

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In ayurveda, the nasal route of administration of medicines i.e Nasya karma has been used for different therapeutic and prophylactic purposes. The drugs which are administered through the nose act locally as well as systemically. After absorption, it enters Shringataka marma from where it spreads entire shiras and pacify the vitiated doshas .Among various types of nasya, Pratimarsha nasya has been indicated in children, as it has minimal complications .Medicated tailam is beneficial for nasya karma among all sneha, on regular basis because taila doesnot aggravate kapha dosha as shiras is kapha sthaana .some references are as follows -

- Nasya with katu tailam / ghritha mixed with saindhava is useful in kaphaja vikaras for breastfed infants
- Nasya has been indicated in case of jeerna jwara and chaturtaka jwara.
- In santarpana janya jwara, nasya reduces shirashoola, shirogurutva and aruchi.
- Nasya of Panchabhoutika tailam promotes better sensory functions.
- Nasya with katu dravyas cures atinidra
- In kaphapraseka, vairechanika nasya and avapeedaka nasya is indicated.
- Teekshna nasya is beneficial in case of parshwa shoola in sannipatika jwara

Mixture of Equal quantities of gomutra, ksheera and gritha is indicated for nasya karma in all types of bala graha rogas.

SCOPE OF LEHANAS IMMUNOMODULATION IN CHILDREN

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In Ayurveda, the essence of all *Dhatu*s is called "Ojas" and it's responsible for the defence of human body against diseases (*Vyadhikshamatva*). *Kashyapa* indicated *Lehanakarmain* children for homeostasis of *Doshas*, to improve the immunity of the child, and also fulfil the nutritional requirement of *Ksheerapa* (infants),thus minimizethe infectious episodes

Aim: To corroboratethe facts about the *Lehana*are as under –

1. Enhance the growth & development by providing sufficient nutrition.
2. Promote health, complexion and strength (immunity).
3. Protect from various infections along with improving intellect

Material and method: *Various text books like Kashyapasamhita, Charakasamhita, Sushrutasamhita, Vaidikasutras and materials related to the Lehana published in recent Ayurvedic journals have been evaluated systematically.*

Result and conclusion: Various studiessuggest various aspects *Lehana viz. inpharmaco-clinical study, madhu-ghrita –swarna-vacha* combination given to neonate showed a significant effect of humoral antibody formation & it

acted on immunological system.

Gold has shown immunomodulation effects because of its antibacterial action against different organisms when it is mixed with *Madhu&Ghrit*.

On the basis of material available in ancient medical literature and recent studies, it can be concluded that *Lehana should be used to enhance the immunity in turn minimizing infectious episodes in children by considering indication and contraindication.*

Key words: *Lehana, Immunity, Gold.*

A SYSTEMATIC REVIEW OF PEDIATRIC QUALITY OF LIFE (QOL) SCALES

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Introduction: Pediatric Quality of Life (QOL) Scales are widely used assessment tool of well being in pediatric age group across various domains. A Number of Pediatric QOL scales are available for research purpose in General and disease specific conditions. The present systematic review is focused on analyzing Basic attributes like number of item, reliability and validity of these available instruments.

Method: Systematic review was conducted to Identify Pediatric Quality of life (QOL) scale for children up to 12 years of age. Review employed Search strategy of published literature on the PUBMED and MEDLINE databases published between 1990 and 2018. Keywords like 'children' and 'quality of life' were used. 552 abstracts were identified with this strategy. All the Abstracts were further reviewed for identifying QOL parameters. After Identification full papers were reviewed for construction, domains and properties. Content analysis of each scale to determine about studies on their Reliability and validity was performed.

Results: It was observed that, No published Pediatric QOL scale was found to be designed as per Ayurveda Samhita guidelines. General Pediatric QOL scales was found to have various domains. Most common domains were Body image, Family, School, Activities, Social Interaction, and Emotions etc. Condition specific pediatric QOL scales are available for many disease conditions.

Conclusion: It is highly essential to critically appraise the content and psychometric properties of Pediatric Quality of Life scales. As the definition of Swastha (Well being) as per Kashyap samhita is more holistic, QOL instrument based on these parameter will lead to better outcome and experience measures

Keywords: *Child, Quality Of Life, Paediatrics, Ayurveda.*

START RIGHT: ANNAPRASHAN SAMSKARA

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Breast milk provides all of the nutrients, vitamins and minerals an infant needs for growth for the first six months, and no other liquids or food are needed. However, from the age of six months, breast milk is no longer sufficient by itself, however it continues to be an important source of energy, high quality nutrients and anti-infective factors beyond six months of age. First time feeding with the solid foods such as cereals to a child at six month of his life is an important part of life and celebrated as Annaprashan Samskara as described in Ayurveda. Evidence-based studies also indicate that early nutritional inadequacy can lead to long-term impairment in growth and health of the growing child. Therefore this period is a sensitive period and nutritional influences at this time can exert long-term effects on later development and health of a child. Iron and zinc has been found to be the problem nutrients since their concentration in human milk is much lesser than relative need. In our Ayurvedic text they had mention about the good health of child with different type of recipes are mention for child. At every contact point with the caregivers, doctors can assess child's growth and give age appropriate counselling on infant and young child feeding and care practices. The time invested in counselling mothers by medical personnel has shown to give returns in terms of improved nutritional status of the children.

REVIEW ON RESEARCH WORKS ON *GARBHINI PANDU* AT N.I.A. JAIPUR

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Introduction: There is no direct reference of *Garbhini Pandu* (anaemia in pregnancy) in *Ayurvediya* texts. *Acharya Caraka* in *Sharira sthana* has explained about ***Bala varna hani*** of *garbhini* in 6th month of pregnancy, which means feeling of weakness and loss of complexion. In symptoms of 7th month *Acharya Chakrapani* has mentioned ***Shonita hinata*** means low blood volume. All these symptoms are present in 2nd trimester of pregnancy and may be due to anaemia and can be considered as reference for *Garbhini Pandu*. *Acharya Harita* has described eight *Garbhopadravasin Harita Samhita* and included ***Vivarnatva***, which appears to be pallor that accompanies anaemia. As per Ayurveda classics, this condition occurs due to improper formation of *Rasa Dhatu* in mother and continuous increasing fetal demands and is considered as *Rasa Pradoshaja Vikara*. India has the highest total prevalence of anaemia at 39.86% and contributes to about 80% of maternal deaths due to anaemia in South Asia. In pregnancy Iron deficiency Anaemia is the most common one.

Material and method: Various thesis available and studies being conducted at N.I.A., Jaipur, were reviewed and analysed. Ongoing studies were also reviewed.

Result and Discussion: Researches had been completed on effects of *Saptamrit Lauh, Dhatri Lauh, Shatavari mandur, Padmadi Lauham, Madhukadi Lauham*, in *Garbhini pandu*. Studies are going to evaluate effects of *Draksha Ghrita & Lakshmana Lauha, Dhatri Lauha with Draksha Ghrita, Punarnava Mandura with Shatavari Avaleha* on *Garbhini pandu*.

Conclusion: All studies conducted shows that Ayurveda drugs having significant result in enhancing the haemoglobin and improving the pregnancy outcome.

Key words: *Garbhini Pandu, Punarnava Mandura, Shatavari Avaleha*

AYURVEDIC NUTRITIONAL SUPPLEMENT IN FORM OF COOKIES

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In our developing society each and every parents are conscious for their children's physical and mental development especially in their developing phase. In this particular phase we have a lot of things to do but we have to face the main problems that children do not take medicines because of bitter taste. In aspect of Ayurveda it is worse because of more unpalatable kalpas like churna, kwatha, vati etc.

In ancient era our acharyas developed bhaishjya kalpana in which various medicinal preparation in form of traditional food recipes were used which made their absorption faster and increased their palatability. In today's generation people are more attracted towards prepared food like cookies.

So we have taken initiative in order to increase palatability of drugs by using medicines in form of cookies. In this paper I will focus on medicinal values and efficacy of these cookies.

Key words - Development, palatability, kalpana, cookies.

DOSAGE FORMS IN CHILDREN

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In the world of Ayurveda, drug therapy is given a huge importance. There is a very well developed sub-discipline entirely devoted towards different drug formulations known as "Bhaishajya Kalpana". Different dosage forms or

medicaments have been depicted in this ancient wisdom of knowledge especially in pediatric diseases.

Ayurvedic drug formulations are soulfully based on “PANCHVIDHA KASHAYA KALPANA” that is swarasa, kalka, kwatha, hima, phant. Ayurvedic Samhitas are having main focus on health and well-being of children and their pathological manifestations. A wide range of different dosage forms has been used throughout the text such as – swarasa , kalka , kwatha , avaleha , aristha , phant , sneh , aasava , dhoopan , anjana , nasya , basti etc. various upkalpanas like yavagu , ksheer , kamblika etc also have been amalgamated sporadically in samhitas.

My purpose here is to enlighten the different dosage forms (various kalpanas) which are used in treatment and maintaining health of children according to the text of ayurveda.

Key words- Dosage forms, different kalpanas, pediatric care.

VARIOUS DOSES AND FORMULATION_SUSED IN PEDIATRIC CARE

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Ayurveda is an ancient science . Acharyas used various formulations in the ancient period in order to maintain their health. This is a branch which deals with the manufacturing, use and doses of these preparations is known as Ras shastra and Bhaishajya kalpana. It plays an important role in preventive and curative care of children.

As a child is born , various steps are being taken to prevent him from diseases and making him healthy. Such steps include swarnaprashan , lehan etc. The medicines are given in some particular doses like amlakasthi, kolasthi, masha , shana etc.

Further in this paper , I'll try to explain the various preparations with their respective doses which are important in child to maintain their health and cure diseases.

Key words– Doses , Formulations , Pediatric Care

A CRITICAL REVIEW OF SWARNAPRASHAN AS A BOON FOR CHILDREN

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Objectives and scope: Swarnaprashan has been described in ancient Ayurvedic text Kashyap Samhita in which processed gold is given to children under the procedure of *lehana*. Enumerating the benefits of swarnaprashan Acharya kashyapa says that in children it helps in improving intellect, physical strength, digestion and metabolism, immunity, fertility, complexion and also improves the life span. Expanding the benefits of swarnaprashan Acharya kashyap has mentioned that by feeding the gold for one month, the child becomes extremely intelligent and is not attacked by any diseases and by using it for six months, the child is able to retain what-so-ever he/she hears.

Material and Method: For arranging the various references of Swarnaprashan authentic *Ayurvedic* textbooks as *Charaka samhita, Sushruta samhita, Ashtanga samgrah* and *Ashtanga hridaya Kashyapa samhita, Bhavaprakasha nighantu, Bhaisajya Ratnavali, Yogratanakara* etc. were consulted and all the references pertaining to the subject were collected and arranged according to the relevancy.

The standard pediatric textbooks, researches, journals and other up-to-date authentic literature available on internet was consulted to arrange the modern aspect.

Conclusion: Various experimental studies show that *Swarna Bhasma* possesses free radical scavenging activity, immunomodulatory, , antistress activity and analgesic activity.

Viewing the enormous benefits of swarna prashan for children and aroused curiosity about swarnaprashan in the scientific community, the present Scientific paper details the ancient review, practical procedure of usage, possible

benefits of swarna prashan, which will be elaborated in the full paper.

Keywords : *Swarnaprashana*, Gold Preparation, Immuno-Modulator, Lehan.

A CLINICAL STUDY OF APAMARGA KSHAR IN THE MANAGEMENT OF CERVICAL EROSION : A CASE SERIES

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Purpose : Certain diseases may not be life threatening but troublesome and irritating to an individual in day to day routine activity. Cervical erosion is a common condition seen in almost women and in the all age groups. Its prevalence is more than 50% of all the gynaecological conditions. It adversely affects the physiological as well as psychological health of female and even interferes in their professional life and also cause infertility. Hence it is a major problem in front of gynaecologist.

Methods: A case series was developed with 10 cervical erosion cases having the main symptoms of Vaginal white discharge , Low Backache, Dyspareunia Pruritis vulvae, Post coital Bleeding. The procedure is carried out once in an alternate day for 3 sittings, starting from 5th day of menstrual cycle for 2 consecutive cycles.

Results: The outcome of the treatment on Cervical erosion was analyzed on the basis of assessment parameters (both subjective and objective) statistically by applying student's't' test and other necessary tests. The treatment was effective in considerable symptomatic relief.

Conclusion: Ayurvedic intervention Apamarga kshar can be considered as the cost effective conservative options for the management of Cervical erosion with promising results in the associated Symptoms of Cervical Erosion.

ROLE OF PANCHAKARMA IN DUCHENNE MUSCULAR DYSTROPHY- A CASE STUDY

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Duchenne muscular dystrophy (DMD) is an X-linked recessive disorder characterized by progressive weakness and degeneration of the skeletal muscles that control movement. DMD is one among the most common muscular disorders. DMD affects about one in 5,000 males at birth. DMD occurs primarily in males, though in rare cases may affect females. Early signs of DMD may include delayed ability to sit, stand, or walk and difficulties learning to speak. DMD is caused by changes (mutations) in the DMD gene called Dystrophin, which helps to maintain the integrity of muscle cells; loss of these proteins leads to the wasting of muscle. In *Ayurveda* this pathogenesis can be clearly understood by the concept of *Adi bala pravritta vyadhi*. Here the pathogenesis occurs due to the *Beejabhagavayava Dushti* which leads to *Medomamsa Dushti* further vitiate the *Vata*. Here, we are presenting a case of DMD which was treated with *Panchakarma* procedures such as *Shashtika Shali Pinda Sweda* and *Mustadi Raja Yapana Basti*. This gives patient quality of the life and longer survival upon muscular dystrophy.

Keywords: DMD, Dystrophin, *Medomamsa Dusti*, *Panchakarma*, *Basti*, *Shashtika Shali Pinda Sweda*.

AYURVEDIC APPROACH ON LACTATIONAL FAILURE

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Lactation is a healthy and natural way of providing important nutrients to infants, it gives baby the healthiest start in life, it is the smartest way to ensure health and survival to a child across the globe, moreover Lactation provide numerous benefits to mother ,it is an important process needed in the life of every women to provide adequate

nutrition to an offspring as soon as possible after delivery, Failure of lactation can adversely effect the nutrition of a child, diminish immunity, increase incidence of infectious morbidity. As a result lactational failure require an immediate pharmacological interventions, Like wise in Ayurveda, the importance of Stanya(breast),StanyaSampat(importance of Breast feeding),StanyaPravritti(Milk ejection), and various treatments formulations in case of Stanyakshaya(Lactational failure),are discussed, Moreover description of Stanyajanandravyas(Drugs increasingthe quality and amount of milk).have been defined by various Acharyas,Lactational failure is a crucial physiological short coming in mammals,Since it effect mothers by not providing additional benefits of reduction in postpartum bleeding and weight gain, Hence it should be treated with utmost importance, nevertheless,Ayurveda provided a promising potential for the treatment of lactational failure,and are not associated with the adverse effect common to conventional drugs.

Keywords: Lactation, Stanyasampat, Stanyajanandravyas, Stanyakshaya,stanyapravritti,

AYURVEDIC AND MODERN APPROACH NAVAJATA SHISHU PARICHARYA CARE

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Navajata shishu paricharya (care of the newborn) is described by both ayurvedic and modern text in details. Three major treatise of Ayurveda the bhihatrayi it includes charak samhita, sushruta samhita, and astanga hridaya. New born care in Ayurveda includes pranapratyagamana or resuscitation baby which adds striking two stones, sprinkling water, cleaning of oral cavity, naal chedan (cutting of umbilical cord), Shana, giving madhu and ghrita for licking. Bath, feeding, clothing, maintenance of body temperature and protection from infection (raksakarma) also mention in care of newborn baby. Acharya susurta karna and nasa vedhan as mention. In modren Science newborn care is mentioned in detail's with use of different instruments and protocol based management.

Keywords: - Pranapratyagamana, Snana, Naal Chedan, Striking Two Stone, Raksakarma.

ROLE OF PANCHAKARMA AND RASAYANA IN BALROGA

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The childhood diseases described as Bal-Rog in ancient Ayurveda science, this is the state of mental and physical development. Ayurveda consider DhatriStanyaDushti as causative factor of diseases in KsheeradaAvastha. The physiological participation of Dosh, mala and Dushysa are different in children as compared to adult therefore the type and prevalence of diseases are also different in children and thus pediatric care needed utilization of various approaches for the management of Bal-Rog such as herbal remedies, discipline life style, Rasayanand Panchkarma.However use of Rasayan and Panchkarma in Bal-Rog preferably not come first but traditional texts of ayurveda advised these therapy in some special conditions. Panchakarma may be done from the age of seven years and as per requirementRasayana therapy may be used in early age but with great precautionary measurement.

PANCHAKARMA FOR BAL-ROG: Many childhood diseases occur due to the vitiation of Dashes and Panchkarma therapy help to pacify theseDoshas vitiation and thus relief many disorders. It is believed that purification of body thought Panchkarma and Yoga pacifies Dosh and clear harmful toxins from the body and thus help to relive many diseases in children. Panchkarama utilizes various approaches of Shodhana such as; Vamana, Virechan, Nasya: Vamanain children help to eliminate KaphaDosh and thus open pranavahasrotastha which may

block due to the accumulation of Kapha in KaphaVyadhi. Virechanamay help in PranavahaSrotoVyadhi; SwasaKasa where pitta dosha is predominate. Nasya Karma is useful for diseases associated with Kapha and Vata predominance. Cerebral palsy is common paediatric disorder in children. Seizures, hearing impairments and mental retardation are common features od diseases Ayurveda emphasized various treatment options for diseases including Panchkarama and yoga. It is VataVyadhi which involves Pankshaghat, Ekangvata, Sarvagavata, Pangu etc. Ayurveda believed that anti spastic, muscle relaxant and calming properties of Panchkarama and Yoga help in the management of Cerebeal palsy.

UTTARBASTI

A SUSTAINABLE PROCEDURE DESCRIBED FOR GYNECOLOGICAL DISORDERS

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Ayurveda is unique science of life. There are many local procedures described specially for the women. In AyurvedicGynaecology, SthanikChikitsa (Local therapies) are the specializedtreatment procedures. These procedures basically deal with the disorders ofTryavarta Yoni (Three coverings of Vagina). These includes mainly Yonidhavan (Cleaning of Vagina),Uttar-Basti (Insertion ofMedicated oil, decoction into Intra Uterine Cavity through Vagina), Yoni-Pichudharan (Insertion ofTampoons soaked in medicinal oil or liquid), Yoni-Dhupan (Vaginal Fumigation),Yoni-Lepan (Vaginalpainting), Yonivarti (Vaginal Suppository), Yoni-Puran (Vaginal Packing), Yoni Parishek (vaginalwash), PindaChikitsa etc. Uttarbasti is one of them. It is mentioned for the genitourinary disorders ofboth, the males and the females. It directly works locally. This review is mainly dealt with indication, contraindication, procedure, effect ofUttar basti in female.

Keywords:- Sthanikachikitsa, Uttarbasti.

PANCHAKARMA SKILLS IN BAL -ROGA

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Ayurveda is an eternal science. It is the science of human life which deals with physical , psychological as well as spiritual well being of an individual. There are two method of treatment samsodhana and samsaman therapy. Samsodhana is one among the two modalities of treatment which best for uprooting the disease from the root by extraction of dushita dosha, disease treated with sodhana chikitsa will never recur. While samsaman chikitsa stabilize dosha in equilibrium by use of drug. It include deepan, pachan etc. Shodhana therapy includes 1st purvakarma (snehan and swedan) then pradhan karma (vaman, virechan, basti, nasya, ratamokshan) and at last paschat karma (samsarjan). In BAL-ROGA, panchkarma procedure are equally effective as they are in adult but there is difficulty in administering of it in children because of considerable dose, methodology and complication. Causative factor of dosh prakopa in children are due to mother aahar-vihar, breast milk vitiation, immaturity, partantrata etc. Kashyap avoid excess sodhana while Charaka advice it in low quantity.Panchakarma therapy cleans all the microcirculatory channel of the body. It eliminate the vitiated doshas, waste , toxic material accumulated in body, enhances the kaya-agni and help to maintain equilibrium of dosh, dhatu and mala, clear indriya ,manas ,buddhi, acquire bala and pushti of child. At proper time with skillfully administration provide long lasting beneficial effect of panchakarma. All these skills of administration of panchakarma and it benefit in children will be discussed in full paper.

Key Words: Shodhana, Dosh ,Dhatu ,Mala, Partantrata, Skill, Agni, Bala ,Pushti.

GHARBHINI CHARDI : MANAGEMENT THROUGH AYURVEDA

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“Prevention is better than cure”, is a famous quote which everybody is aware of. Presently, due to altered lifestyle in the form of food and regimen, people are not able to resist disease status. Though life expectancy has globally increased, quality of life is compromised. Hence globally *ayurveda* has drawn more attention nowadays as it focuses on preventive aspects. Pregnancy is a very sensitive phase in a women's life. *Acaraya Kashyapa* has compared pregnant woman with *taila poorna patra*. This statement clearly indicates the level of attention she required at that time. *Garbhini chardi* is one of the *garbhini vyapad*. Most of the pregnant women are seen suffering from *chardi* in 1st trimester. It is called as *emesis gravidorum*, which occurs physiologically. It is usually presented as morning sickness, i.e., nausea and vomiting. But, at times, it may be pathological as well if she is involved in *nidana sevana*. *Kapha* and *pitta doshas* are vitiated initially which ultimately vitiates *vata* causing *udavarta* presented in the form of *chardi*. If care is not taken at this time, it may attain severity causing severe vomiting, epigastric pain and features of dehydration. Hence, proper treatment is to be provided as per *vyadhi avastha*. *Acarya Sushruta* says, *garbhini chardi* can be treated by giving desired things to the pregnant lady. Many of the *shamana* methods are also seen in classics like use of *bhoonimba kalka* with *sita*. So, overall care of *garbhini* to prevent from hyperemesis will be presented in the form of *ahara, vihara* and *oushadha*.

Keywords : Garbhini Chardi, Bhoonimba Kalka, Hyperemesis.

BALA RASAYANA AS IMMUNIZATION IN PUBLIC HEALTH: REWARDS AND CHALLENGES

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Introduction: Immune system in children is not yet fully functional. Acharya Charaka has put forth the *Vyadhikshamatva*, which can be correlated to resistance against disease or immunity. Childhood is a *Kapha Pradhana Kala* as per Ayurveda, so they are prone for *Kapha* disorders especially the respiratory illnesses. Under five mortality rate (U5MR) in India showed 43/1000 in 2015 and 39/1000 in 2016. Highest prevalence of morbidity in India is due to Anemia (78.7%), followed by Protein Energy Malnutrition (52.23%), Vitamin B deficiency (46.53%), and diseases of respiratory system (32.19%). All the above mentioned common diseases directly reduce the immunity and the respiratory diseases occur due to infection leading to the impaired immunity. Conventional immunization gives the protection against certain diseases, but still Ayurvedic immune-modulator mentioned in our classic text, can be used as immune-boosters to prevent the diseases. Hence, *Balarasayana* as Ayurvedic immunization can improve the immunity of children and neonates in turn preventing the illness in general and respiratory illness in particular.

Objective:

- Improve the immunity of children with *Bala Rasayana* as mentioned in Ayurvedic Classics
- Bring about awareness about the advantages with *Bala Rasayana* in the community so as to improve health status of children

Materials and Method: *Bala Rasayana* having the ingredients of *Atibala* (*Abutilon indicum*) *Amalaki* (*Embelica officinalis*), *Vidanga* (*Embelica ribes*), *Guduchi* (*Tinospora cordifolia*), *Pippali* (*Piper longum*), *Yashtimadhu* (*Glycyrrhiza glabra*), *Shankhpushpi* (*Convolvulus pluricaulis*), *Vacha* (*Acorus calamus*), *Musta* (*Cyperus rotundus*), & *Ativisha* (*Aconitum heterophyllum*) are *Medhya* as well as *Rasayana* drugs mentioned in Ayurvedic classic. They can be given in the children to enhance immunity. The public should be made aware about these drugs through awareness programme, or through health related personnel like ASHA, Health assistants etc. as they are

commonly available and economical.

Discussion: The Bala Rasayana drugs are strong immune-modulators cost effective and commonly available. They not only improve immunity, but also benefit the children in regards to mental development and retention (Shrutadhara) and memory power (Smriti Vardhaka) etc. This is an added Advantage with Ayurvedic immunization which is not found in immunization of conventional modern medicine. Even then bringing this into practice is a great challenge because certain drugs mentioned in Samhita are controversial and not available. The preparations should be palatable, presentable, and available. Large sample scientific researches are less in this particular area, so that the Classical Ayurvedic Medicines can be used in the community at large.

Conclusion: The Bala Rasayanas should be administered in the community. The awareness should be created in the about Balarasayanas and their advantages. The Bala Rasayanas should be available in acceptable formulation after methodological authentic research so that it is acceptable globally.

Keywords: Vyadhikshamatva, Respiratory disorders, Smritivardhaka, Awareness Programme, Diseases of Childhood.

EFFICACY AND MODE OF ACTION OF“SAMVARDHAN GHRITA”

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Ayurveda is traditional type of system of medicine which is used to treat different types of diseases. Ayurveda medicine has apply to the patients nature, age and condition of disease. In ayurveda classics term jada, abuddhi have been used by acharya's in sense of mental retardation. In modern concept mental retardation term used when IQ is below of a normal person. In low IQ person can't understand and learn proper. The mental impairment are influenced by genetic, environmental and psychological factor. Many type of medicine are used to improve in mental capacity level. Such types of medicine samvardhan ghrita in Kashyap Samhita clearly mention that this ghrita is effective in the child suffering from the symptoms of panguta, jada.

Dose of the ghrita is orally - 5-10 gm.

Nasal – 1-2 drops

Anal – 20 ml.

In this presentation I will try to emphasis our benefit and mode of action of Samvardhan Ghrita.

Key words - Mental retardation, IQ level, Samvardhana ghrita, Panguta, Jada.

AYURVEDIC AND MODERN APPROACH TO UMBILICAL CORD CARE

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India has the dubious distinction of having highest number of annual neonatal birth and deaths among all the countries in the world. A newborn is prone to get infection due to multiple causes. So proper and adequate newborn care plays an important role to avoid those infections. Umbilical cord care is described by both ayurvedic and modern texts in details. In ancient ayurveda texts acharyas have given prime importance to care of new born. This conceptual study collected from ayurvedic samhitas and modern neonatology. Various procedures were advised in the management of umbilical cord by acharya as with a few differences in sequences of these procedures. Acharyas have described the care of umbilical cord in their own measures and pharmacodynamics properties of drugs. Singularly the modern also describes care of umbilical cord in the discipline of neonatology along with prevention of infections both having common aim to protecting new born and avoid sepsis.

Keyword:- Umbilical cord, modern neonatology, infections.

SCROTAL PATHOLOGY IN CHILDREN

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Scrotal pathology composes a large percentage of surgical disorders in children. The spectrum of condition that affects the scrotum and its contents ranges from incidental findings to pathologic events. Disorder involving a child's scrotal area are frequent and the most common condition. A variety of pathologic condition can cause scrotal pain or swelling in children. Scrotal disorders include hernia, hydrocele, undescended testis, torsion of the testis and testicular tumors etc. Scrotal pathologic processes in children can be classified into following categories:

(1) Acute scrotum (2) Empty scrotum (3) and Full scrotum.

Evaluation of scrotal pathology begins with a careful history and physical examination. So the complete history, physical examination, urine analysis and ultrasonography are the most important tools in the assessment of the scrotal pathology. The Acute scrotum includes testicular torsion, epididymitis, testicular trauma etc. The empty scrotum includes cryptorchidism, retractile testis etc. The full scrotum includes hydrocele, varicocele, hernia etc. An elaborative description will be dealt in full paper with the reviewing of the subject.

Keywords: Acute scrotum, Empty scrotum, Full scrotum, cryptorchidism, hydrocele

SAFETY AND EFFICIENTLY HEALTH OF MOTHER AND CHILD THROUGH ALTERNATIVE THERAPY (YOGA AND NATUROPATHY)

Dr. Meena Kumari Sethi

BNYS, Dr. S.R. Rajasthan Ayurved University, Jodhpur (Raj.)

Mother and child health care are one of the most critical events in a woman's life cycle. Woman in this present era is struggling between increased responsibilities of her family and profession. There is more incidence of back ache, loss of strength feeling of weakness and even psychological instability seen today. Instead, there is a need to own solutions, culturally acceptable, cost effective and easily accessible. Child health is the key to healthy youth and adulthood. It is thus important to improve health status of children and prevent disease to facilitate their growth into healthy adult for prevention and treatment of disease mother and child health care in yoga and naturopathy is best method. We can begin with integrating the existing traditional service providers or people's health traditions system of health care like yoga, naturopathy etc. with the existing health care structures. Yoga is mind-body technique which involves relaxation, meditation and a set of physical, mental, social and spiritual. Naturopathy is an art and science of health living and a drugless system of healing based on well founded philosophy. It has great health promotive, disease preventive and curative as well as restorative potential for mother and child health care.

Keywords:- Alternative therapy, Yoga, Naturopathy, Meditation, Spiritual.

PRENATAL YOGA - YOGA FOR THE 2000

Dr. Shubhada Dadasaheb Hake

PG Scholar

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Philosophy and a way of life where art and science meets is Yoga It is multi dimensional physical, mental emotional, intellectual means that provides total answer to challenge of stress on the other hand. Pregnancy is a joyful time for any expecting mother. It is exciting time that often causes the mind to over think and be stressed. Yoga is the thing which helps women to escape from all the anxieties and focus on themselves in a calm and relaxing environment. According to Bhagvad Gita "Ability to maintain inner peace at all times. Calmness in Act is the secret" This helps in of all the adverse effects of stress like PIH, Pregnancy induced DM, Abortion, preterm, IUGR. The

following helps to deal with symptoms of pregnancy ensuring smoother and easier delivery and faster recovery after childbirth.

Method: ASANAS Sukhasan Marjarasan(cat stretch) Vanessa with ujjayi breath (adamanline pose with victory breath) Tadasana(mountain pose) Konasana(standing side ways bending one warm) Trikonasana(triangular pose) Veerbhadrasana(warrior pose) Badhkonasana(butterfly pose) Vipirit karni (leg against wall pose) Shavasana(corpse pose) PRANAYAMAS: Ujjayi breathing Bhramari pranayam

Yog nidra : Nadi shodhan pranaya (alternate nostril breathing technique) MUDRAS: Akash mudra, shanmukhi, siha mudra, Ashwini mudra, siha Joli. There are some PET scan photos where you can see the change in grey matter from one hemisphere to the other in just a few minutes of meditation.

Benefits: Help in reducing backache constipation & swelling

prevents gestational DM preeclampsia

Increase energy, mood ,posture, muscle tone and srength.

Improves ability to cope with labour.

Conclusion: From physical body to mental state it is a key ingredient to healthy and happy pregnancy.

MEDICINAL PLANTS IN AYURVEDA W.S.R TO BALROG

Dr. Chandan Singh

Associate Professor & HoD, P.G.Dept. of Dravyagun

DSRRAU- Jodhpur

Plants are the natural source of nutrition, oxygen, medicines, paper, abode for various birds etc for the society. World cannot survive without plants. Plants carry various Medicinal properties. These are the base of Ayurved which is an effective and harmless natural ancient system of medicine. As said – Bhisaga dravyaanu upasthatha rogi pada chatustayam. This reference says that Dravya which includes the medicinal plants is one of the four important and inevitable pillars of Chikitsa Pada Chatustaya. Plants have been given such an importance in Ayurved that while implantation-preparation of medicines from plants and application of medicines various auspicious Mantras are enchanted for their effectiveness and potency. These are used as single drug and multiple drug combination for the effective cure of various acute and chronic medicines according to their properties. According to the medicinal properties of the plants are grouped and classified as Vayasthapaka, Jeevaniya, Rasayana, Sthambhak, Mutrajanana, Ashmarighna, Jwaraghna etc. The bark, root, fruit, flower, pulp, seed, discharge are the various components of plants which are used for the treatment of various diseases as per the medicinal properties available in the components. These can be used in the form of powder, extract, decoction, paste, etc. for ingestion. Ashwagandha, Shatavari, Haritaki, Amalaki, Giloya, etc. are the hundreds of species which are used for the effective and harmless natural treatment of various diseases. The detailed description of medicinal plants will be discussed in the seminar.

Keywords : Ayurveda, medicinal plants, herbs, dravya, karma.

IMPORTANCE OF YOGA IN POST PARTUM PERIOD

Dr. Rashmi Sharma

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University Jodhpur, Rajasthan

A woman is the unique creation of God and he blessed the female with gift of motherhood. Ayurveda give importance for the care of mother at every phase of her life especially when it comes to antenatal care and postnatal care. Postnatal care certainly co-related with “Sutika Paricharya” explained in Ayurvedic classics. Post natal period is a critical period for women; it needs a proper management and care with specific diet (Ahar), mode of life (vihara, yoga etc.) and medicines. Some important Yoga's describe during post natal period are Trikonasana,

Bhujangasana, Shalabhasana, Ushtrasana etc. Yoga can induce a state of deep relaxation, reducing stress, repair all the tissues and calming the body and mind. The main achievement through Yoga's in Post partum women is destabilization of physical, mental and physiological wellbeing.

Keywords – Ayurveda, Sutika, Post natal period, Yoga.

CONTROL THE A.D.H.D. BY CHANTING THE OMKAR

***Dr.Rahul Parashar **Dr. Gorishankar Indoria**

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Attention deficit hyperactivity disorder (A.D.H.D) is a mental condition. It affects the children and adolescents and can even be seen continuing to adulthood. It is one amongst the most commonly diagnosed disorder of the children. The world wide prevalence of this condition is 5.29 % in children and 7.1% in adolescents (A.D.H.D. INSTITUTE). Hyperactivity and uncontrolled impulses are the main features exhibited in A.D.H.D. . This sort of behavior hinders their social and school life as it may interfere with their bonding capacities with others. The divine word “OM” has magnificent benefits which needs to be unfolded and told to the world. “OM” if chanted properly yields positive vibes along, which help in stabilizing mind in turn increasing the concentration, reducing stress and anxiety. The modern era is the era of STRESS and PRESSURE because of over expectations. An adult or a child everyone suffers from it resulting in mental disorders.

During the of “OM” chanting vibrations are experienced which have tremendous effect on Vagus nerve as in it stimulates the Vagus nerve through the auricular branches and exhibits its effect on brain. The neurohemodynamics correlates of “OM” chanting indicate limbic deactivation which resemble to the vagus nerve stimulation used in depression treatment. In this context OMKAR chanting can be used for both preventive and curative aspect.

Keywords- OM, Chanting, Vagus, A.D.H.D.

APPLIED ASPECT ON IMPORTANCE OF ABHYANAGA (MASSAGE) IN INFANTILE PERIOD

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Infant massage is massage given to young infants involving tactile and kinesthetic stroke and rubbing stimulation as a therapy to enhance their cognitive and physical development. Such contact is also found in other mammals where the mother provides tactile stimulation as part of their care through licking, grooming, and physical contact. Infant massage is widespread in traditional societies. Research finds that massage enhances neural development and body growth in rodents and humans and is particularly important for preterm infants. Full term infants receiving massage therapy show more weight, greater length, less irritability and better sleep. It also reduces crying and improves an infant's ability to regulate their stress hormones. Mothers with postnatal depression that massage their infants reduce their own depression and improve the quality of their social interactions with their infants. Preterm newborns receiving massage in neonatal intensive-care units gain more body weight than those that do not. In a study involving preterm infants who, upon receiving daily massages, averaged 47% more weight gain than infants in the control group. The studies suggest that the tactile deprivation that many preterm infants experience in intensive care may delay their recovery. Massage therapy helps preterm neonates grow more quickly and leave the hospital sooner. Other benefits include increased bone mineralization, bone density, bone length, and head circumference. They also show higher psycho-motor development and significantly higher Mental Development Index scores. Such massage therapy seems to be more effective when it involves "moderate" pressure

than "light" pressure. Such infants also sleep better. The body temperature of preterm infants increases when given massage compared to controls "even though the incubator portholes remained open during the 15 min massage therapy session but not for the control group over an equivalent time period". This has been suggested to be due to better control by the infant's brain of its body state and its blood circulation. Massage to the leg reduces pain prior to heel stick venipuncture. Nondepressed mothers also show lower anxiety if they massage their preterm infants. Length of stay in hospital and occurrence of late-onset sepsis is also reduced by mothers massaging their preterm infants. Details will be discussed at time of paper presentation.

Key words: - Abhyanga, Massage, Infants, Infantile period.

EFFECT OF ARKAKSHAR AND JATYADITAILAPICHU IN CERVICAL EROSION

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The physiology of reproductive system of woman is specific to perform many functions like menstruation, achievement of conception, maintenance and expulsion of fetus. These specific physiological changes make her more prone to pathological disorders. Amongst various gynaecological disorders, cervical erosion is one of the commonest benign condition of female genital tract. Cervical erosion is a condition in which the squamous epithelium of the vaginal portion of cervix is replaced by columnar epithelium. This research work is conducted to evaluate the efficacy of ArkaKshara and JatyadiTailapichu in cervical erosion. For the destruction of overgrown columnar epithelium in cervical erosion ArkaKshar has been selected. JatyadiTaila has been also selected as Shodhan and Ropan of vrana in cervical erosion. After completion of the research it has been found that ArkaKshar Cauterization alongwithJatyadiTailapichu is safe, less painful, easily available and effective treatment for cervical erosion.

Keywords: Reproductive system, conception, cervical erosion, ArkaKshar Cauterization, JatyadiTailapichu.

MATERNAL AND CHILD HEALTHCARE: A STAGGERING CHALLENGE

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Since the beginning of the Safe Motherhood Initiative, India has accounted for at least a quarter of maternal deaths reported globally. India's goal is to lower maternal mortality to less than 100 per 100,000 live births but that is still far away despite its Programmatic efforts and rapid economic progress over the past two decades. The World Health Organization (WHO) estimates that, of 536,000 maternal deaths occurring globally each year, 136,000 take place in India. Estimates of the global burden of disease for 1990 also showed that India contributed 25% of disability-adjusted life-years lost due to maternal conditions alone. Unfortunately, there is little evidence that maternity has become significantly safer in India over the last 20 years despite the safe motherhood policies and programmatic initiatives at the national level. Delivering healthcare to over a billion people is a very complex challenge. In this regard Planning Commission (Health & Family Welfare Division) Government of India constitutes a Steering Committee on AYUSH and the committee had submitted the report

for the Twelfth Five-Year Plan (2012-2017). The report shows eight national health outcome goals which are as follows.

- Reduction in Infant Mortality Rate (IMR)
- Reduction in Maternal Mortality Ratio (MMR)

- Reduction in Total Fertility Rate (TFR)
- Reduction in under-nutrition among children
- Reduction in anemia prevalence among women and girls
- Raising child sex ratio for the age group 0-6 years.
- Prevention and Reduction of burden of diseases
- Reduction of households' out-of-pocket expenditure

There is an urgent and immediate need for utilizing the strengths of AYUSH for achieving the eight national health outcome goals of the country. The national health priorities seek to correct the imbalance of unmet needs and improve health outcomes. AYUSH should contribute on this front and build health services in accordance with its strengths, infrastructure and trained human resource. The country's health outcome goals should be faster with focused involvement of AYUSH in achieving the given targets. The Eight national health outcome goals are as Joint behavior change plan incorporating AYUSH-based lifestyle guidelines for RCH, Adolescent Health, Geriatric Care, Mental Health, Non-communicable Diseases, Anemia, and Nutrition and health promotion to be developed and linked with National AYUSH Health Program as recommended in the WG Report. New Components/Schemes/ Repositioning AYUSH will be discussed at the time of presentation.

THE IMPORTANCE OF “LEHANA” IN CHILDREN- A SCIENTIFIC APPROACH

***Dr. Anamika soni** Dr. Surendra soni**

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The word “lehana” literally means “Licking” or “Lapping with tongue”. It is a special dosage form described in Ayurvedic pharmaceuticals in which extract/ decoction / fine powder of drugs is concentrated with heat or either mixed with honey/ ghee so that it can be easily licked with tongue .

It has both pharmaceutical and pharmacological importance especially in infants or children. In Kashyap Samhita its importance can be judged by the words that “ all pleasures and unhappiness in children are dependent on “lehana”. This form of drug /medication is most palatable for children, has specific immune boosting properties and beneficial in enhancing growth and development of children. Ayurveda classics have described various drug formulations for lehana according to different health conditions, seasons and age along with its various indications and contraindications.

The details about pharmaceutical properties & pharmacological actions of lehana will be discussed in full paper at the time of presentation.

IMPORTANCE OF YOGA IN POSTPARTUM RECOVERY

***Dr. Mahesh Kumar **Dr. Pramod Kumar Mishra**

*****Dr. Sarvesh Kumar Agarwal **** Dr. Indumati Sharma**

**Asst. Prof. (P.G. Department of Swasthavirtta & Yoga)*

***Asso. Prof. & HOD Prof. (P.G. Department of Swasthavirtta & Yoga)*

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*****Asso. Prof. (P.G. Department of Kayachikitsa)*

Delivery is a normal physiological phenomenon during the life of women. In order to cope with the incidence, lots of physiological and anatomical changes occurs during this period. Women also experiences emotional and psychological stress during this period. According to *Ayurveda* classics, all the *Dhatus* decrease and become languid or unsteady due to development of foetus, body empty due to labour pains and excretion of *Kleda* and blood. *Yoga* improves the muscle tone, which are stretched during pregnancy and labour especially the

abdominal and perineal muscles. *Yoga* focuses on deep breathing, stretching and relaxing the body, the combination of movements and breathing improves blood circulation and oxygenates the body at the same time. As such *Yoga* can induce a state of deep relaxation reducing stress and calming the body and mind. So it helps the women to regain vitally and helps her body to revert back almost in prepregnant state physiological as well as psychologically. Importance of *Yoga* will be explained in detail at the time of presentation.

Key words: Delivery, Labour, *Dhatu*s, *Yoga*

ROLE OF HERBAL FORMULATION IN THE MANAGEMENT OF SHWETA PRADARA (LEUCORRHEA)

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Leucorrhoea is a flow of persistent whitish, yellowish or greenish discharge from the vagina of the female that may be normal or may be a sign of infection. It is a mucous discharge which represents desquamation of vaginal epithelial cells because of the effects of estrogen on the vaginal mucosa. This discharge may originate from vagina, ovaries, fallopian tubes or most commonly the cervix. In leucorrhoea, women complaint with vaginal discharge which is associated with a variety of somatic symptoms like dizziness, backache and weakness. In *Ayurvedic Samhitas*, *Acharyas* have described about *Shweta pradara* which resembles with leucorrhoea. The word *Shweta pradara* has not appeared in *Brihat-trayi*. Commentator *Chakrapani*, and various *Samhitas* like *Sharngadhar Samhita*, *Bhavprakash*a and *Yogratnakara* have used the word *Shweta pradara* for white *yonis traya*. On the basis of clinical features it appears to be a disease of vitiation of *kapha dosha*. *Acharya Charak* has mentioned about a suppository (*Varti*) made with *Kashaya dravyas* mixed with honey should be placed in oiled vaginal canal. On the basis of this principle, we conducted a clinical trial on 40 patients and we got good results.

In this paper an effort has been made to describe about leucorrhoea and its *varti chikitsa*. All details regarding my research work should be presented at the time of full paper presentation.

Keywords:- *Shweta pradara*, *Leucorrhoea*, *Varti*, *Kashaya Dravya*, *Honey*.

EVALUATION OF IMPACT OF RASA SINDOOR AND AROGYA VARDHINI VATI IN CASES OF ACUTE PANCREATITIS : A CASE STUDY

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Introduction, Material and Method: The pancreas is a small organ located behind the stomach in abdomen. Acute pancreatitis is an inflammatory disorder of the pancreas affecting its endocrine and exocrine functions. It is mainly associated with abdominal pain, vomiting, nausea, indigestion, steatorrhea, weight loss, fever and diabetes. It is a major cause of morbidity and mortality in children. It can be initiated by several factors including gallstones, trauma, infection and in some cases hereditary. Despite the considerable amount of research underway relating to this disease its pathophysiological mechanism remains incompletely understood.

In Ayurveda there is no direct reference of this disease in ancient literature but supporting lines of treatment are available. The Ras sindoor is considered Shulaghna, Pramehaghna, and Rasayan and safe even after prolonged use. The Arogya vardhini vati is also considered as agnivardhak and good to promote health. Therefore to develop ayurvedic treatment protocol (ATP) for this disease a case study was undertaken in setelite ayurved hospital of DSRRAU Jodhpur. The patients were treated with Ras sindoor and Arogya vardhini vati. The patients were screened thoroughly before and after treatment.

Conclusion:- after application of above drugs for a period of two months significant and encouraging result was

observed in the patients which need an extensive study with large sample size.

Key Words:- Acute Pancreatitis, Ras Sindoor, Arogya Vardhini Vati.

EXCLUSIVE BREAST FEEDING IMPORTANT FOR MOTHER AND CHILD HEALTH

Dr. Manvi Sharma

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Dr. S.R.Rajasthan Ayurveda University, Jodhpur

Lactation is a natural phenomenon of secretion of milk from breasts, which benefits both the mother as well as child and should not be avoided. WHO's guidelines recommend "continue , frequent, on-demand breastfeeding until two years of age or beyond ."It is Upadhatu of Rasadhatu and is directly influenced by the quality of Rasadhatu which is in turn made up of nutrients in the mother's bloodstream and bodily stores. It has an optimal balance of fat, sugar, water, and protein that is needed for a baby's growth and development. Breastfeeding has a number of benefits to both mother and baby, which infant formula lacks . The sequelae of breastfeeding, and of having breastfed, are not minor: Breastfeeding, sometimes referred to as the *final stage of labour*, reduces the risk for postpartum blood loss, premenopausal breast cancer, ovarian cancer, retained gestational weight gain, type 2 diabetes, myocardial infarction, and the metabolic syndrome. In addition to reducing the severity of anaemia, breastfeeding may cause other changes that may help to protect mothers against bladder and other infections. In addition to the direct health effects, breastfeeding seems to provide a sense of bonding, a sense of well-being, and an improved sense of self-esteem for many women. Breastfeeding in baby decreases the risk of respiratory tract infections and diarrhoea . Other benefits include lower risks of asthma, food allergies, type-1 diabetes and leukaemia. Breastfeeding may also improve cognitive development and appropriate feeding could prevent at least 1.3 million of these deaths.

Keywords: - Exclusive breastfeeding, rasadhatu, postpartum, metabolic syndromes.

SUPPORTIVE AYURVEDA MANAGEMENT FOR ATTENTION DEFICIT HYPERACTIVITY DISORDER IN CHILDREN

Dr Nitin Sharma

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Attention deficit hyperactivity disorder (ADHD) is a behavioural disorder characterized by a persistent pattern of inattention, hyperactivity, forgetfulness, impulsivity and distractibility affecting 5-10% of Indian population. Its aetiology is still obscure in modern science while on the basis of *Ayurvedic* etiopathogenesis we can say it may occur due to vitiation of *Dhee*, *Dhriti* and *Smriti* that causes imbalance of *kala* and *karma* which results into improper contact of the senses with their objectives. i.e. *Asatmendriyarthasamyoga* and give rise to inattention, hyperactivity and impulsivity. Drug therapy for ADHD in modern medicine improve some academic skills but their side effects such as loss of appetite, weightloss, tics, mites, delirium, social withdrawal and obsessive compulsive disorder limits their use and on prolonged use develop abuses and addiction.

Need of Study : To find out supportive Ayurvedic modalities employed in the treatment of ADHD and to evaluate a safe , efficacious and side effects free treatment.

Conclusion : **Medhya drugs** having *Vatashamaka* property and possess nootropic, cognitive, neuroprotective properties are the main stay of treatment of ADHD as aetiopathogenesis points towards involvement of *Mastishkha* (brain) and *Vatadosha* with supportive *panchakarma* (*shirodhara* and *shiropichu*) that calm down aggravated symptom of ADHD.

Keywords : ADHD, Medhyadrugs, Shirodhara, Shiropichu.

SWARANAPRASHAN- MIRACULOUS EFFECT ON IMMUNITY

Dr. Prem Prakash Vyas

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University College of Ayurveda, Dr. S.R Rajasthan Ayurved University, Jodhpur

Infant or childhood is the growing state of life. Good health in this state gives strong foundation to the future building of life. Proper growth is observed by their physical characters like anthropometry and physiosocial development. Growth is an increase in physical size of whole or any of its part and can be measured in inches/centimetre and in pounds/kilograms. There are many factors influencing the rate of growth like inadequate nutrition, physical hyperactivity, lack of adequate rest physical illness and emotional illness which cause increase in nutritional need but at the same time result in poor appetite and poor absorption. Such situations during rapid growth period and critical period of development have a temporary or permanent delaying effect on the achievement of normal growth and development. Ayurveda science is more concerned for better life by preventive and supportive measures for paediatric age group. Acharya Kashyap stated that healthy and unhealthy condition depends on the lehana. Acharya have mentioned numerous swarna yogas for proper growth and development of child. It is an ancient process of administering swarna and other useful medicines through oral route in children for better health and prevention from many diseases. Acharya have mentioned the benefits of Swarnaprashana. They have stated that regular use of Swarnaprashana helps to sharpen the memory to its extreme level, help in proper growth and development and prevent from diseases

Various Seminars, Training Programmes and Other Extension Activities organized by the University

1. National Seminar on Ayurvedic Education: Problems & Prospects on 22-23 April 2008
2. National Workshop on writing of Research Paper. on 25-26 March 2009.
3. Work Shop on Constraints and Problems in Trading of Herbal Medicines on 28 Oct. 2013
4. Work Shop on Health Awareness and seasonal diseases on March 2013
5. National Seminar on Contemporary Importance of Inter-cropping in farming of Medicinal and Aromatic Plants on 18-19 September 2014
6. Organized Five Medical Officers (AYUSH) Induction Training Programmes from Oct. 2015 to Jan. 2016
7. National Seminar on Sanskrit Sahitya in Vikirna Ayurved - Ek Vaigyanik Vivechan on 7 January, 2016
8. National Seminar on Contemporary Importance of Agnikarma on 6-7 March 2017
9. State Level Workshop on Academic Ethics and Integrity on 8 Nov. 2017
10. National Seminar/Workshop on Recent Advancements in Kshar Karma WSR to Ano-rectal Disorders on 15-16 Dec. 2017
11. National Workshop on Panchakarma wsr to pain management on 9-10 March 2018
12. National Workshop on Karkatarbuda on 9 August 2018
13. National Workshop on Recent Advancement in traditional healing system on 17-18 September 2018.
14. One Day National Workshop on Sickle Cell Anaemia and its Ayurved Management on 5 January, 2019.

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		Dr. Monika Verma MA, PhD	Assistant Professor
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		Dr. Arun Dadhich MD	Assistant Professor
		Dr. Vishnu Dutta Sharma MD, PhD	Assistant Professor

9	P G Department of Prasuti Tantra & Stri Roga	Dr. A.Nileema MD	Associate Professor & HOD
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		Dr. Sunita Godara MD	Assistant Professor
13	Shalakya	Dr. Rajbir Singh MD	Associate Professor & HOD
14	P G Department of Swasthvritta	Dr. Pramod Kumar Mishra MD, PhD	Associate Professor & HOD
		Dr. Anita Sharma MD	Assistant Professor
		Dr. Mahesh Kumar MD	Assistant Professor
		Dr. Rahul Kumar Parashar MD, PhD	Assistant Professor

Glimpses of University Activities



MoU with Reputed Lachoo College, Jodhpur



University NSS Unit De-Addiction Activity



Implantation in University



Blood Donation Camp in University



Health Awareness Rally on International Yoga Day



Cleanliness Campaign in University Campus

SPECIAL THANKS TO DABUR INDIA LTD. FOR BEING THE SOLO EVENT PARTNER

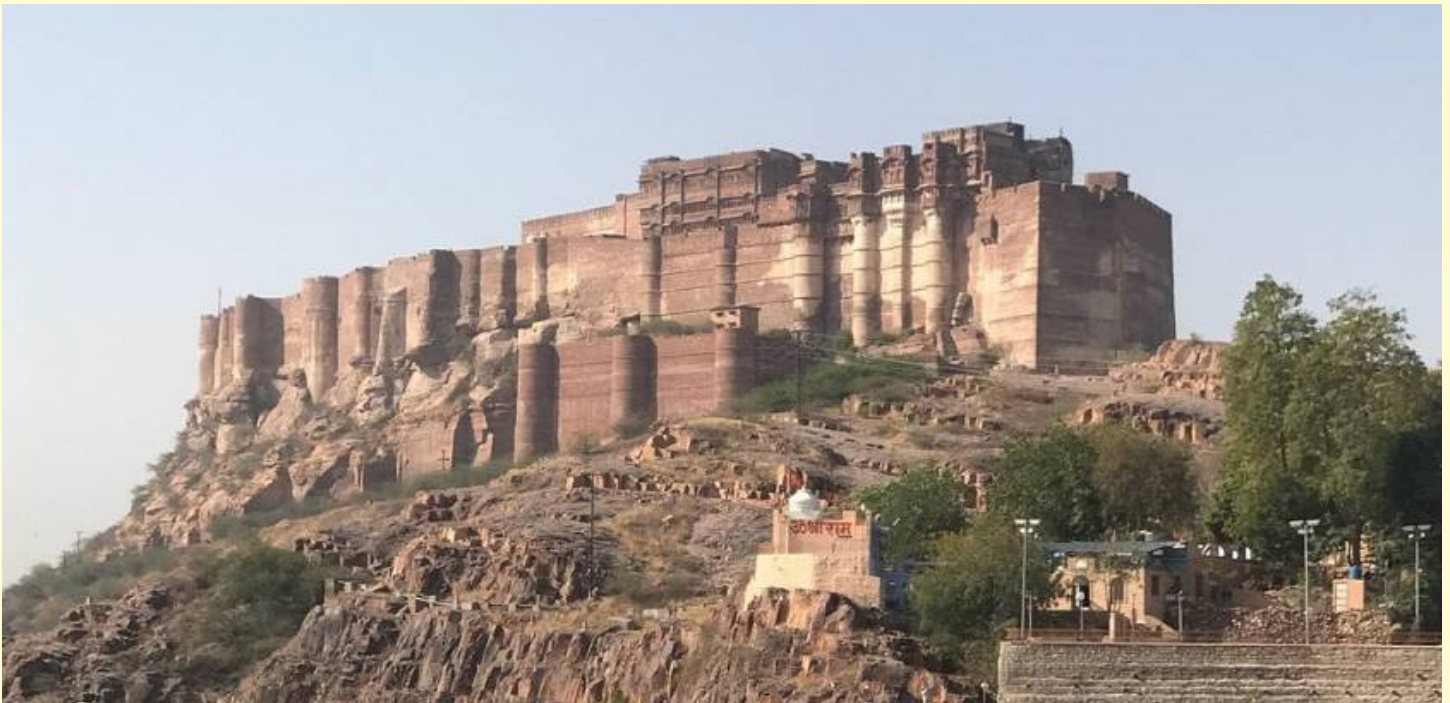
HISTORICAL AND CULTURAL HERITAGE OF JODHPUR



Umaid Palace



Mandore Cinetophs



Mehrangarh fort



Blue City, Jodhpur



Jaswant Thada