A REVIEW ARTICLE OF AYURVEDA AND MODERN APPROACH FOR NUTRITIONAL DEFICIENCY DISORDERS

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Abstract- In this growing world, providing health care services and proper nutrition to children is still part of big plans. Whereas, through the data collected in last few years, the issues majorly seen in rural areas than in urban. Increasing urbanisation also deteriorate the quality of life in some areas due to overcrowding. The biggest disadvantage of poor livelihood is no basic health standards and malnutrition on broad spectrum leading to PEM, deficiencies, diarrhoeal and respiratory illness. Even infant feeding practices are not good enough to meet the requirements of children. Poor environment, improper sanitation, inadequate food security among people living out in areas with no basic necessities including mothers who feed their infants are affected equally that give rise to further more adversely affecting disease and disorders among children. Lack of public health sector services in areas where malnutrition is affecting inefficiently is the biggest drawback for the country. According to WHO 45% of child deaths are associated with under nutrition and 45 million children under 5 years are too thin for their heights. There are 4 different forms by which under nutrition can be understood – wasting, stunting, and underweight and deficiencies of micronutrients. From this classification, underweight are more prone to diseases and death. Well, the Ayurvedic approach for the children is always to provide them optimal health and well-being. Ayurveda elaborates the fact that how food is important for longevity and how important is it to know that in the initial growing stage maintenance of healthy lifestyle, good immunity, mental growth plays a major role. On this basis ‘Swarnaprashna’1,2 is given great importance under Ayurveda. In Ayurveda the nutritional disorders are considered as Phakka Roga3-7, Parigarbhika8, Bala shosha9 and modern correlation is termed as Protein Energy Malnutrition (PEM).


INTRODUCTION
For establishing a foundation for development and healthy survival, proper nutrition should be encouraged in daily routine of children. A balanced diet is crucial for completing the growth and development of child. In most of the cases preschool children face nutritional deficiencies. For potential growth and keeping the immune strong every food constituent should be included in diet as children are more prone to diseases. Poor nutrition starts from birth, generally continues into adolescence and adult life and can span generations. It is often irreversible. The first two years of life is the most crucial period of life as foundation of mental, physical and emotional development of a person appears to be fulfils in this period of life. Improper intake and absorption raises the issue of PEM. Protein energy malnutrition is due to lack of protein and energy from calorie or both.

In Ayurveda, all the nutritional disorders are considered under Aptypanjanya Vyadi including krishta, phakka Roga, Balshosha, Parigarbhika. In all the under nutritional conditions the body is affected by Dhatu Kshaya. Kshaya indulges both Anuloma Kshaya and Pratialoma Kshaya. Ayurveda Works On The Prakriti And Aahara For Better Lifestyle And To Manage Doshas And Dhatu.

Krishta:- According To Acharya Charaka, (It is the condition of excessive emaciation)10

शुष्कसिन्द्रादी सीवी धमनीजालसततः। लगस्थिशोपोतिकृष्णा सूतुलपत्ता नरी ममः॥
• Buttocks, abdomen and neck of a karshya patient are emaciated;
• A vascular network is visible on skin with prominent joints.
• Person appears to have skin and bones only.
• An excessively emaciated person cannot tolerate physical exercise.
• Intake of food in large quantity, hunger, thirst, diseases and drugs.
• They also cannot stand excessive cold and heat.
• Such emaciated persons often suffer from splenic diseases, cough, wasting, dyspnea, gulma (abdominal tumor), piles, abdominal diseases and malabsorption diseases

Etiology of Krishta:-

• Rukshannpana sevan(intake of dry and rough food and drinks)
• Vegdharana (suppressing natural urges)
• Rukshudvartan (non-unctuous anointing)
• Krodha (anger)
• Ratrijaghana (awakening at night)
• Vyayam (exercise)
• AlapMatra Bhojan (less intake of food)
• Bhaya (fear)
• Sharana (performing physical and mental activities more than capacity)
• Adhyanna (mentally stressing)
• Upwasa (fasting)
• Beejadosha (heredity)
• Vikara-Anushaya (long term continued disorder) all these nidana (causes) may lead to Krishta.

Pathogenesis

Due to Nidana sevana and Vatavardhaka Aahara Vihara Sevana

Aggregation and vitiation of Vata

Agni Dusti

Ama \rightarrow formation

Dhatu Kshaya

Rasa Dhatu get affected leading to disbalance in all the Dhatu due to improper absorption

Alpaposhana of dhatu (dhatu dushti)

Karshya

Phakka Roga

बालः संवत्सरापन्नः पादाभ्या योगांच्छित सफक्क इति विषेषः
The word phakka is understood as running down condition of the body. Normally a child who attains one year of age should be able to walk with support. And if he fails to do so he is said to have slow movements or creeping like a snail or failure of the skill of locomotion. So when the child becomes crippled with wasting of the body, apathy and slow movements, he is referred as suffering from Phakka Roga. Phakka Roga is described in two conditions: (1) Samvatsarapanaha – one year is ideal age of child to start walking. (2) Samvatsaradudharva pratishthati. When child’s ability to walk is impaired the condition is termed as Phakka Roga.

Classification on the basis of causes

Phakka Roga is represented as:

धात्री श्लैस्फिकदुग्धा तु फक्कदुग्धेतत संतज्ञता I तत्क्षीरपो बहुव्यातधः काशाात् फक्कत्वमाप्नुयात् II

Phakka is classified into 3 types

• Ksheeraja
• Garbhaja
• Vyadhija
1. Ksheeraja Phakka – Milk Vitiated By Shleshma Is Called Phakka Dughdha. The Shleshma of Milk Blocks The Strotasas Of The Body Which Results In Improper Nutrition Of Body Leading To Shosha In Child. This Is Understood As First Stage, If Child Continued To Feed With The Phakka Dughdha He Becomes Apathetic And Adopts Slow Movements Because Of Weak And Withered Body. It Becomes Disaster When Child Also Suffers With Dehydration From Loose Stools In Apathetic Child. Thus the Shlesmika Dughdha Causes Ksheeraja Phakka Roga. Kashyapa With Emphasis Reveals The Role Of Kapha Dughdha By Saying That Why Even The Tridosha Ksheera Should Produce Idiocy, Lameness And Dumbness.

गभर्षेणमातृकः क्षिप्र सतन्य्य विनिवर्त्तानात्। क्षीयर्ते ग्रिह्ये द्व अपि सदक्क गभर्षेव।


3. Vyadhija Phakka – As The Name Suggests The Resultant Of Prolonged Disease Is Seen As Vyadhija Phakka. Disorders Like Celiac Disease Like Enteropathy, Grahan, Lactose Intolerance And Many More Of Them Can Cause Malabsorption. This Will Result In Growth Failure, Emaciation And Finally Crippling.

Pathogenesis of Vyadhija Phakka
• When child is not taken care properly (anath shishu), may suffer from various diseases like fever, etc. Prolong suffering from exogenous and endogenous diseases may result in malnutrition.
• Anath shishu may be victim of different problems
• Probably due to poor socio-economic status and negligence they may not be able to prevent the diseases, hence more susceptible for diseases and later on gets severely malnourished.
• Anatha Shishu
Anath shishu may be victim of
• child abuse
• neglect
• child labor
• poor nutrition
• psychological problems etc.

Features of Vyadhija Phakka
• Loss of strength, lustre and muscle wasting
• Buttocks, arms and thighs become lean
• The abdomen and head looks relatively bigger, due to the emaciation of the other body parts
• Eyes becomes yellowish and external body parts looks like skeleton
• Lower extremities becomes weak, resulting in slow and feeble movement. Therefore uses hand and knees to move.
• The severity of loss of movement incapacitates the child even to drive away the insects like house fly etc. Hence exists more contamination inviting secondary infections more easily.
• Due to metabolic disturbance of the body, the hairs are subjected for either falling or erection, nails becomes big , Polyuria and Diarrhoea may be resulted.
• Foul smelling odour from child due to dirtiness
• Child looks very irritable.
• Pattern of respiration is changed i.e. laboured breathing may occur at last.
• There is excess production of dhatu mala i.e. nasal secretions are increased.
• At last child becomes totally apathic, dull of unconscious and seem to be died.

<table>
<thead>
<tr>
<th>features</th>
<th>Vyadhija Phakka</th>
<th>Marasmus</th>
<th>Kwashiorkor</th>
<th>Rickets</th>
</tr>
</thead>
</table>

Comparison between Vyadhija Phakka, PEM and Rickets
| 1. Irritability   | + | + | - | - |
| 2. Muscle wasting | + | + | - | - |
| 3. Distended abdomen | + | + | - | - |
| 4. Hair & nail Changes | + | + | + | - |
| 5. Loss of subcutaneous fat | + | + | - | - |
| 6. Associated Features like Anemia, infections etc. | + | + | + | - |

Physiotherapy in phakka roga

- Abyanga – patient should be massaged with Raj Taila. It can cure Bandhyalva and Pangutva
- Practice of walking should be started with the help of specially prepared tricycle (Tricakra Phakka Ratha)

Pathyapathya in phakka (Diet regimen)

- Supplementation of diet is important factor in the management of Phakka.
- The child should be offered especially meat soup, cereals and medicated milk for prompt relief

Balshosh{$^a$}:-

अत्यहः स्वप्न शीताम्बुश्लैस्फिक स्तन्य सेतवनः।
तशशो कफे न्दुरूद्धेषु सोतेषु सस्वाहिषु॥ अरोचकः प्रततश्यायो
ज्वरः कासश्च जायते। कुमाः शुष्यतश्ततः तिग्ध मुखेिणः॥

Balshosha is a kaphja vyadhi. If child repeatedly sleeps for a long time, drinks cold water and sucks kapha vitiated milk this will block the rasavaha srotas and child will suffer with Aruchi (disinterest towards food), Pratishaya (running nose), Kasa (cough), Shosha (emaciation), Jwara (fever) and child may have paleness of face and eyes.

Samanya Nidan of Balshosha

Dhatu kshaya causing factors

They are well summarized in Charaka Samhita. These are -

- Pertaining to food habits
  - Anashana (avoidance of food), ruksha (dry), alpa & pramita (low in quantity as well as in quality) diet intake, intake of ununctuous fluids
- Environmental factors and habits
  - Facing strong air current or sunlight, excessive exercise, awakening in nights, excessive loss of feces, Rakta, Shukra & Kapha, Bhooto-upghata and Adana kala
- Psychological factors - Fear, tension, grief etc

Nidana of Shosha-

- Visham Bhojana (Improper and unbalanced diet)
- Dhatu Kshaya (wasting of dhatus)
- Sandharanama (suppression of natural urges)
- Sahasa (work beyond one’s power)

Nidan(pathogenesis) of Balshosha

Ashtanga Samgrahakara describes Balshosha for first time with its specific etiology and pathology, clinical features and treatment. Thus the Nidana mentioned by Vagbhatta are vishishta to Balshosha. These are:

- Excessive sleep in day hours
- Excessive intake of cold water
- Excessive intake of Kapha vitiated breast milk
- Due to obstruction to rasavaha srotas and ill formation of Rasa dhatu leads to anuloma Kshaya of the subsequent dhatus (tissues). The poor nutrition of tissues results in emaciation of the child leading to the Balshosha.
- Due to the vishama/hina ahara (low calorie/quantity/quality diet), the Jatharagni will get hina indhana for the pachanakriya. Ultimately the dhavagnis will get low quality/quantity of indhana. After digesting the indhana (low quantity) the dhavagnis will start the dhatupachana itself. Ultimately there will be Sarvadhatukshaya leading to Balshosha (Marasmus).
- Due to causative factors there will be Kaphaprokop which is further endangered by Balyavastha there will be mandagni and production of Amarasa which may cause vaman, aruchi, atisar etc. leading to Rasakshay and Anulom kshay of Sarvadhatus and ultimately Balshosh will occur.

- Showing symptoms of Balshosha according to various Ayurvedic texts

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>K.S</th>
<th>C.S</th>
<th>S.S</th>
<th>A.S</th>
<th>A.H</th>
<th>M.N.</th>
<th>Sh .S.</th>
</tr>
</thead>
</table>

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### Differential diagnosis of Balshosa with Ksheeraja phakka

<table>
<thead>
<tr>
<th>Differentiating factor</th>
<th>Balshosa</th>
<th>Ksheeraja phakka</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nidana</strong></td>
<td>Three main causative factors are excessive day time sleep, excessive intake of cold water and feeding of Kapha vitiated breast milk</td>
<td>Main causes are intake of Kapha vitiated breast milk and wasting due to other illness</td>
</tr>
<tr>
<td><strong>rupa</strong></td>
<td>Wasting (kumara shushyati tat) is the main feature with arochaka, kasa, jwara, pratishyaya etc. dhatu kshaya is the main feature causing wasting of total body</td>
<td>Main feature is inability to walk at the age of one year. There is weakness of snayu sansthan and dhatu kshaya is not the prime feature</td>
</tr>
<tr>
<td><strong>Type</strong></td>
<td>No types described</td>
<td>Is one of the three types of Phakka roga</td>
</tr>
<tr>
<td><strong>Age affected</strong></td>
<td>Total childhood age may be affected</td>
<td>Only infants are affected</td>
</tr>
</tbody>
</table>

### Differential diagnosis of Balshosa with Rajayakshma

<table>
<thead>
<tr>
<th>Differentiating factor</th>
<th>Balshosa</th>
<th>Rajayakshma</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nidana</strong></td>
<td>Three main causative factors are excessive day time sleep, excessive intake of cold water and feeding of Kapha vitiated breast milk</td>
<td>Four main causative factors are Sahasa, Sandharana, Kshaya Vishamashana</td>
</tr>
<tr>
<td>Purvarupa</td>
<td>No prodromal features described</td>
<td>Pratishyaya, excessive sneezing, shleshma praseka, mukha madhurya etc.</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>---------------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Rupa</strong></td>
<td>Wasting (kumara shushyati tat) is the main feature with arocaka, kasa, jwara, pratishyaya etc.</td>
<td>Divided into trirupa, shadarupa and ekadasha rupa on the basis of presence of clinical features</td>
</tr>
<tr>
<td><strong>Type of Dhatu kshaya</strong></td>
<td>Anuloma kshaya only</td>
<td>Both anuloma and pratiloma Kshaya</td>
</tr>
<tr>
<td><strong>Age affected</strong></td>
<td>Only childhood age is affected</td>
<td>Any age group can be affected</td>
</tr>
<tr>
<td><strong>Sankramakata</strong> (communicability)</td>
<td>Non- communicable</td>
<td>Is an infective &amp; communicable disease</td>
</tr>
</tbody>
</table>

**Principle of treatment of Balshosha**

- Nidanparivarjan
- Srotoshodhan (Vaman etc.)
- Dosashaman (Deepan, Paachan, Kaphasaman)
- Nutrition to the Dhatu (Balya, Bringhaniya, Rasayan therapy)
- Vagbhata mentioned following yoga for the management of Balshosha. The following drugs are powdered, mixed with honey and ghrita.
- Saindhava, Trikata, Sharangeshta, Patha, Maha Kadamba. This is quite useful for anorexia in an emaciated child.
- Powder of Ashok, kutki, Panchkola mixed with ghrita can be given for anorexia and emaciation.
- Suspension of powder of Bera, flowers of Dhai and Amalki churna mixed with ghee can be given to the child.
- Powder of Pippali, Trikattu, Patha, Murva, Shatavri mixed with honey
- Payashya, Prithakparni mixed with honey and ghee
- He mentions the use of Shishu shoshnashak shodhana ghrita, Shishu shoshjit ghrita, Shoshnashak oil and Lakshadi Tail for Balshosha.

Kashyapa has described and stated that Balshosha is the primary stage of phakka Roga as milk vitiated by kapha is termed as Phakka Dughdha and after intake the child becomes emaciated. Intake in continuation makes the bodily movements slow than usual that is finally leading to Phakka Roga.

Chakradutta describes the condition as Ahindika or Ahitundika which is commonly called Sukhandi.²³

**Parigarbhika**²⁻

The word Parigarbhika means to humiliate or disrespect. Thus Parigarbhika indicated the disregarded child consequent to the pregnancy. A successive early pregnancy in the mother makes the child to be prematurely weaned. When the mother feeding adequate amount of milk but the milk has poor quality in respect to nutrients that is not enough to meet the body demands, this can give rise to Parigarbhika. Sign and Symptoms are fever, vomiting, cough and anorexia.

**Clinical features of Parigarbhika**

- Agnimandya
- Vamathu (nausea and vomiting)
- Tandra (drowsiness)
- Karshya (emaciation) vertigo
- Aruchi (poor appetite)
- Bramha (vertigo)
- Kostha vriddhi (distention of the abdomen)

**Treatment of Parigarbhika**

**Principle**
1. Agnideepana is the main stay of treatment in Parigarbhika
2. Guru and Snigda bhojan after Agnideepana.

**Compound drug**

1. A Grita made with Pippali, Pippalimula, Chitrak, katuki etc. with Dahi, Kanji, Suramanda should be given.
2. Vidarikanda, Yava, Godhum and Pippali Churna mixed with ghee should be given. Balanced nutrition should be maintained by giving milk along with honey and adequate amount of sugar
3. Bhibhitak phalamajja, Yastimadhu, Kakoli, Ksheer-Kakolli should be boiled in goat’s milk and should be prescribed in parigarbhika patients.

**Shuska Revati**:

**Features of Suska Revati**

<table>
<thead>
<tr>
<th>Sn.no</th>
<th>Features of Shuska Revati</th>
<th>Koch’s abdomen</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>The child passes loose greenish stool, sometimes of various colours</td>
<td>+</td>
</tr>
<tr>
<td>2.</td>
<td>The abdomen present nodular feelings and appearance of prominent veins over it</td>
<td>+</td>
</tr>
<tr>
<td>3.</td>
<td>The child becomes gradually emaciated</td>
<td>+</td>
</tr>
<tr>
<td>4.</td>
<td>Associated features-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>i. fall of hairs</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td>ii. aversion from food</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td>iii. weak voice</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td>iv. discolouration</td>
<td>+/-</td>
</tr>
<tr>
<td></td>
<td>v. excessive cry</td>
<td></td>
</tr>
</tbody>
</table>

**Treatment of Shuska Revati**

- Treatment of Skand Grah(except Dhupan for Skanda)
- Udvratan with Vacha, Aswagandha, Hingu and Sarsap churna
- Lepan-with fecal matter of crow, vulture and donkey.
- Dhupan with Shalyak, Kulir Kapal, Meshasringi and nail and hairs of goat, elephant and donkey
- Snan and Bali-snan should be done under dried tree and at the same time Bali of Masha, Mudyaa and Shuska Mamsa should be offered under that tree.

**Modern aspect**

After understanding the Ayurvedic definitions of Malabsorption, referring to modern, Malabsorption is the impaired nutrient absorption at any point where nutrients are not getting absorbed in the body resulting in under nutrition and malnutrition. Proteins, carbohydrates, fats, vitamin enriches cells and tissues for proper functioning of every organ of body. Protein is saved in two compartments i.e. somatic (protein saved in skeletal muscles) and visceral (protein stored in deep compartments of neck, head, trunk). We have already discussed about PEM earlier, considering the classification in reference to degree of the condition there is – Primary PEM (where there is deficiency of dietary protein and calorie) and Secondary PEM (caused by disease leading to secondary PEM). There is another classification considered according to symptoms – (1) Kwashiorkor – where there is deficiency of dietary protein. It is also known as Wet or Swollen or Oedematous malnutrition.

(2) Marasmus – deficiency of energy calorie. It is also termed as dry malnutrition or Non-Oedematous malnutrition.

**Diagnostic criteria**:-

- **Gomez classification**: Gomez classification is the oldest system of classification for classifying under nutrition in children based on percentage of weight and age.

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>First series</td>
<td>90% - 75%</td>
</tr>
<tr>
<td>Second series</td>
<td>75% - 60%</td>
</tr>
<tr>
<td>Third series</td>
<td>60% and below</td>
</tr>
</tbody>
</table>

- **Criteria Indian paediatrics association**
### Grade of malnutrition

<table>
<thead>
<tr>
<th>Grade of malnutrition</th>
<th>Weight for age of the standard (median)%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal</td>
<td>&gt;80</td>
</tr>
<tr>
<td>Grade 1</td>
<td>71-80 (mild malnutrition)</td>
</tr>
<tr>
<td>Grade 2</td>
<td>61-70 (moderate malnutrition)</td>
</tr>
<tr>
<td>Grade 3</td>
<td>51-60 (severe malnutrition)</td>
</tr>
<tr>
<td>Grade 4</td>
<td>&lt;50 (very severe malnutrition)</td>
</tr>
</tbody>
</table>

### WHO/FAO EXPERT COMMITTEE CLASSIFICATION:

<table>
<thead>
<tr>
<th>Nutritional status</th>
<th>Body weight as% standard for age</th>
<th>Oedema</th>
<th>Deficit in weight for height</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under weight</td>
<td>80-60</td>
<td>0</td>
<td>Minimal</td>
</tr>
<tr>
<td>Nutritional dwarfism</td>
<td>&lt;60</td>
<td>0</td>
<td>Minimal</td>
</tr>
<tr>
<td>Marasmus</td>
<td>&lt;60</td>
<td>0</td>
<td>++</td>
</tr>
<tr>
<td>Kwashiorkor</td>
<td>80-60</td>
<td>++/++</td>
<td>/+</td>
</tr>
<tr>
<td>Marasmic kwasiorkor</td>
<td>&lt;60</td>
<td>+</td>
<td>++</td>
</tr>
</tbody>
</table>

### Treatment

**MANAGEMENT OF PEM:** Management of PEM depends on –

- Nutritional status
- Degree of hyper metabolism
- Expected duration of illness
- Associated complications.

❖ **The goals are:**
- To minimize weight loss
- To maintain body mass
- To encourage body mass repletion or growth.

**Chikitsa Sidhanta Ayurveda**

The management of *karshaya* should be done as follows:

- *Nidana Parivarjan:* *karshaya* is a *Vata Pradhan vyadhi* which is leading to Agni dushti. So avoiding *Vata Ahara Vihar* will prevent *Dhatu Kshaya*.
- *Agni Depana and p achna dravya*
- *Samshana chikitsa:* Providing conservative treatment like *shishushosh nashakaghrita, swarn yoga, vidarikandadi Ghrita*.
- *Brimhana chikitsa:* It is very useful as it nourishes *dhatu* which prevents *dhatu shaya*. *Brimhana dravya* are *Guru, sheeta, madhur, mrida, snigdha, bahal, shool, pichila, mand, sthir and slakshan* in nature that contribute in nourishment of *dhatu*. *Brimhana Draya* to mother also.
- *Pathya sevana*
- *Aphtha tyaga*.

### For Mothers

a) **Extirpation of vitiated Doshas**

- *Snehana* and *Swedana* should always be done to soften the body.
- *Shushruta* advised the oral decoction of *Nimba* with Honey and *Pippali*. This is repeated 3-4 and 6 times.
- *Agnivesha* describes decoction of *Vacha, Priyangu, Madamphala, Kutaja* and *Sarshapa* is indicated to taken to induce vomiting.
- *Haritiki* can be used either with cow’s urine, honey and *Triphala* (*Triphala* alone for laxative effect).

b) **Pathya Bhajan**

After extirpation, a regime diet is followed in a balanced state.

- *Yuva, Godhum, Shaalti or Shastika dhaanya* with the dals of *Mudga, Masoor* and *Kulatha* made in the form of *Yusha* in which *Trikatu* and *Saindhavam* are added.
- Vegetables: twigs of *Nimba, Vetra*, *Vaartaaka, Amalaki* and *Naadi Saaaka*.
- The meat soup of Rabbit, *Chataka* and the black antelope.
- Water boiled with *Aswagandha, Saptaparni* or *Kutuki* should be used for drinking purpose.
- *Kaschypa* advises use of oils and ghee as suggested in *Vaajeekarna adityaya*.

c) **Medications**

- *Stanya vishodhana* drugs: the *Paatha, Sunthi, Devadaaru, Musta, Murva, Gudchi, Kutaj beeka, Kiraata, Kutuki and Saariva*. 
• **Stanya vardhan** drugs: the roots of *Veerana, Shaali, Shastika, Ikshu, Vaalika, Darbha, Kusa, Kaasa, Gundra and Ukataka. Kusamoola and Kaarpasamoola* are said to have Galactogenic effects. *Vidaari kanda* also have good Galactogenic effects. These drugs should be used with honey in cases of vitiation by Kapha and Ghritam in other cases either in the form of *Churana* or *Kwatha.be* followed.

**DISCUSSION:**

It can be said that kuposhan janya vyadhi/vikara are growth and developmental deficiency. On a wide spectrum the kuposhan vyadi are termed under karshaya. Parigarbhika, ksheeraj and garbhaj phakka are caused by alpa poshanansha in milk feded by mother to the child. Balshoshga, parigarbhika, phakka *Roga* all are closely relatable to protein energy malnutrition. The Causes of dieases may differ but deformities shown are similar in different ways. Leaching of body, vomiting, fever, diarrhoea are the common conditions seen in context to malnutrition. The management of sign and symptoms are done by understanding the pathogenesis of vyadi and treating it with *bhrighana* thereby as it results in *Dhatu Poshana* and with suitable *Aahar Vihara sevana.*

**CONCLUSION:**

On the basis of above description it is clear that many nutritional disease explained in *Ayurveda* but in d in scattered manner in Ayurvedic text. in this article systematic study of these conditions with references provide us insight in to hazards of nutritional deficiency and represents different aspects of Nutritional deficiency disorders their sign symptoms and proper understanding of pathogenesis of the conditions as well as effective management.

**REFERENCES:**