

Ayurvedic Review Article on Fakka

Dr Roshan Sarap¹, Dr Sachin Gwalani², Dr Vijay Suryavanshi³

MD Kaumarbhritya, S.M.B.T. Ayurved College and Hospital, Igatpuri, Nashik¹

Guide and Professor, S.M.B.T. Ayurved College and Hospital, Igatpuri, Nashik²

Professor and HOD, S.M.B.T. Ayurved College and Hospital, Igatpuri, Nashik³

Abstract: *Ayurveda mentioned various diseases related to the children and their therapeutic management. Ayurveda gives prime focus to the health of children therefore described health related issue of children in separate branch. Nutritional insufficiency, lack of immunity, diminishes digestive strength and weak physical strength, etc. mainly considered responsible for childhood disorders. There are many disorders related to the nutritional deficiency which described as Apatarpanjanya vyadhis in Ayurveda and Phakka roga is one of them. This condition on the basis of symptomatic similarities can be correlated to the rickets as per the modern science. The inability to walk or stand up on feet is main feature of Phakka roga. The bones become very weak or soft so that children can't stand up or walk using his/her feet. Diminish state of Dhatus especially Rasa and Asthidhatu mainly involves in disease pathogenesis. Ayurveda described several therapies for the management of Phakka roga including utilization of Deepana-Pachana and Rasayana drugs, etc.*

Keywords: Ayurveda, Phakka Roga, Apatarpanjanya vyadhis, Children, Bala Rog

I. INTRODUCTION

Phakka disease is classified under kuposhanajanya vyadhi. Phakka roga is a condition that affects bone development in children. Phakka roga has been described by Acharya Kashyapa. Various Ayurvedic therapies are given in Kashyapa Samhita which are used in the treatment of Phakka Roga. Malnutrition is one of such condition and rickets is one among them in which there is deficiency of results in bow legs. Either calcium or vitamin D hampered the bone mineralization and gives rise to multiple symptoms due to brittle bones in child especially below two years of life. A lack of adequate mineralization of growing bones results in rickets. The term Rickets is derived from English word wrick (twist) and Greek word rachitis means excess of osteoid tissue. Rickets is a condition that affects bone development in children. It causes the bones to become soft and weak which can lead to bone deformities. Rickets can cause bone pain, poor growth and deformity of the skeleton such as bowlegs, curvature of the spine and thickening of the ankle, wrists and knees. The incident is more in six month to 2 years age. The Samprapti of disease involve Agni dosha caused by etiological factors & malnutrition which affect process of digestion, metabolism & absorption thus body tissue becomes nutrients deficient which results Ati dravamala pravrutti, Atimutrata and improper utilization of Ahara rasa finally child becomes malnourished and Phakka roga occurs. The Laxanas of Phakka roga are; Jwara, loss of; dhyuti, sphik, bahu and uru, excess growth of abdomen, Peetakshi, angaharsha, weakness, excess of Mutra and pureesha, manda cheshta, irritability, dullness and excessive nasal discharges. The principle treatment approach involves normalization of kapha and vata dosa along with nutritional supply.¹⁻⁶ more in poor socioeconomic condition with low vit D in diet. The area in which lack of exposure of sunlight. Nutritional rickets usually presents in infancy or preschool age, usually as widened wrists or bowing of legs. Presentation in early infancy and finding of seizures or tetany suggest a defect in vitamin D metabolism⁷

AIMS AND OBJECTIVES

The main aim of this present article is to study the detail knowledge regarding

1. Phakka Roga
2. Treatment of various types



MODERN VIEW

Modern science described Phakka roga as rickets which arises due to the inadequate mineralization of bones and lack of nutritional supply. The softening of bones, bone deformities and poor growth leads inability to wear own weight on feet. The children belongs from six months to two years of age group are mainly get affected. The poor socioeconomic condition and children residing in dump area are more susceptible for such types of condition. The deficiency of iron, vitamin D, calcium and iodine are commonly observed in children suffering with rickets but insufficient vitamin D and/or calcium intakes is main reason of disease. The pathological sequences of disease initiated with malnutrition which further leads insufficient availability of phosphorus and calcium for bone mineralization. These sequences along with Vitamin D deficiency causes softening of bone and skeletal deformity. Modern science suggested uses of Vitamin D, oral calcium supplement, exposure to sunlight and physiotherapy, etc. for the management of rickets.

Important changes in Rickets are:

A) Craniofacial changes:

- 1) Craniotabes : thinning softening of skull bones with pin-pong ball like resilience on pressure over parietal bones.
- 2) Frontal bossing : Prominence of frontal bones.
- 3) Delayed closure of anterior fontanel.
- 4) Delayed dentition.

B) Thoracic Changes:

- 1) Rachitic rosary: Round, non tender bending due to widening of costochondral junction's.
- 2) Harrison sulcus: A groove / depression along the lower costal margins.
- 3) Sternal Deformities like pectus excavatum i.e. depression of sternum. Pigeon - Chest deformity.

C) Limb Deformities:

- 1) Widening of wrist ankles due to widened epiphysis and metaphysis
- 2) Gait abnormalities e.g. Knock-Knee, Bow legs and Coxa -Vera.
- 3) Green stick pathological fractures of long bones.

D) Spinal Deformities:

- 1) Kyphosis or scoliosis due to lax ligament.
- 2) Short stature due to deformed spinal curvature.
- 1) Pot -belly due to abdominal muscle hypotonia.
- 2) Visceroptosis due to ligamental laxity.
- 3) Hyper- extensible joints (acrobatic rickets).

Treatment Of Rickets (According to modern science):

- A) Vit D is administered orally either in a single dose of 600,000 IU or over 10 days (60,000IU daily for 10 days) followed by a maintenance dose of 400-800IU/day and oral calcium supplement 30 -75 mg/kg/day for 2 months.
- B) Expose the child to the sunrays in morning hours for about 15-20 minutes. Human skin contains provitamin which gets activated and synthesized on exposure to sun. This promotes the absorption of calcium and phosphorus by the body which makes the bone grow stronger.
- C) Include whole grains and beans like oats, Barley, Rice, Black beans, Lentils etc in the diet regularly. D) Consume more of green leafy vegetables like Spinach, Methi etc
- E) Consume dry fruits like Almond, Walnuts, Cashews, Raisins in diet
- F) Include fresh fruits like Oranges, Figs, Bananas etc in your diet



II. DISCUSSION

Management of Phakka

The disease involve dhatu-nirman; rasa, mamsa, meda and asthi dhatu therefore treatment approaches must aimed at prakruta rasa nirmana with the improvement in agni by mrudu shodhan followed by deepana, pachana, balya and bruhana therapy. The etiopathogenesis can be controled by shodhan upakrama at dhatri level to treat kaphaj stanya. Tikshna shodhan vama dravya such as;

vacha, sarshapa & pippali may be used for this purpose. Dipana and pachana dravya like; vacha, ativisha & panchmula ghana kwatha should also be used to relief pathological progression. Ayurveda also suggested nasya, dhum, gandush, pradeha, parisheka, and kapha shamak aahara at dhatri level for the prevention of phakka. Ayurveda also described disease management at Balaka level (diseased child) & suggested use of Raja taila & Abhyantar snehana. Oral use of amruta ghrita, kalyanaka ghrita, shatpala ghrita & bramhi ghrita followed by virechana with trivrutksheeram basti which pacify vata dosha and mamsa. The dipana & pachana dravya like; raasna, madhuka siddha ghrita, milk with gomutra for pana, bruhana dravya also indicated. Approaches used to stroto shodhana (udavartanam) play significant relief in disease management. Abhyanga with raj-taila consisted of earanda, shaliparni & bilva offer beneficial effects in disease, oil siddha with mamsa & yusa also useful in phakka. Sudhavarga ausadhi dravyas like Sudhasatak is helpful for nourishment of Asthidhatu. Physiotherapy by expert physician or use of Phakka ratha also offers relief in disease symptoms.

Management of Ksheeraja Phakka

The condition may occur due to kaphaja stanya sevana which leads krusha and finally phakka. The milk medicated with deepaneeya dravya help in disease management. Rasna, madhuka, punarnava, ekaparni, eranda and shatapushpa also offer relief in disease symptoms.

Management of Garbhaj Phakka

The condition involve balshosha in which shosha leads kshiraj Phakka, parigarbhik then garbhaj Phakka, this condition require use of agnidipan chikitsa which help to control parigarbhik. Dipan and pachan dravya siddha with vidari, yava, godhum & pippali in ghrita may be recommended. Anupana rich in milk with honey and sugar help to manage Phakka associated with vitamin deficiency.

Management of Vyadhija Phakka

Dosh dushya samprapti mainly involve in vyadhij Phakka associated with nija roga and agantuj roga. The nourishment of tissue decreases due to the mandagni and dushta grahani which further leads sara sanhanan deterioration. The treatment approaches involve consideration of hetu & its management. Consumption of nutritious food, kshirapeya, lehya dravya and kalpas should be recommended. Samvardhan Ghrita also possesses relief in disease symptoms.

Herbs used for Phakka Roga

Bala · Guggulu · Triphala · Shigru · Ashok · Laksha · Ashwagandha · Shatavari Ayurvedic formulations used for Phakka Roga · Shukta Pishti · Mukta Pishti · Kamdudha Rasa · Amalaki Rasayan · Triphala Churna · Ashwagandharishta · Ashwagandha Churna · Ashwagandha Avaleh · Mahanarayan tailam · Ashwagandha Ghrit

Ayurveda formulation Ashwagandha ghrita in phakka

Ashwagandha Ghrita is an Ayurvedic formulation & literature review suggests efficacy of Ashwagandha ghrita in phakka. Ashwagandha ghrita along with other nutritional supplement offers improvement in process of growth development. Ashwagandha Ghrita helps to improve physical and mental status of underweight children. It possesses Rasayana properties thus acts as a nourishing supplement, strengthen internal circulation, enhance agni and thus weight. It pacifies Vata and Pitta dosha. Ashwagandha Ghrita is prepared from Ashwagandha roots and Go-Ghrita, the Brumhana effect of formulation improved symptoms such as; Shuska Sphik, Udar Greeva, Dhamani Jala, Darshana &



Sthula parva. Ashwagnadha possess all beneficial effects of steroids while Ghrita offer Yogavahi and Samsakaranuvarti properties. The fatty acids of Ghrita promote protein synthesis and thus increase physical strength. The Brumhana effects of Ashwagandha boost muscle strength.

Guideline for the management of Phakka

Exposure to the sunlight in morning hours.

Consumption of whole grains and beans in the diet.

One should eat almonds, walnuts, cashews & raisins.

Consumption of fresh fruits like oranges, figs, bananas etc.

Pulses should be exposed to sunlight before cooking this increases vitamin D absorption.

Tea & coffee should be avoided.

Consumption of fast food should be avoided.

III. CONCLUSION

We can say that Phakka Roga is Growth and Development deficiency. It can be correlated with protein energy malnutrition, Rickets, or chronic mal absorption conditions. Most of the characters are correlating with Rickets disease child. Kshiraja and Garbhaja Phakka can be classified as acute malnutrition, while Vyadhija Phakka is a state of chronic malnutrition with general and reversible motor disability owing to malnourish state.

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