

**Study the Efficacy of an Āyurvedic Treatment
Regimen on Bālaka Pakshāghāta with special
reference to Cerebral Palsy.**



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SUMMARY

The present study was to study the efficacy of an Āyurvedic treatment regimen on Bālaka Pakshāghāta with special reference to Cerebral Palsy.

Bālaka Pakshāghāta appeared as growth and developmental delay of a child. The main cause for the BP is Shiromarmābhighāta.

Cerebral Palsy is also a condition due to damage of a developing brain.

Growth and development is also elaborately explained in modern science. Delay in development milestone, abnormal persistence of primitive reflexes; make the early marks of CP.

Etiopathogenesis and associated symptoms of BP is similar to CP. Therefore, BP can be considered as CP to a certain extend.

Etiological factors responsible for BP / CP can be described under pre Conceptional (Garbha Pūrva), Prenatal (Garbha kālena), Perinatal (Prasava kālena), and post natal (Prasovohtara) conditions.

Preconceptional causes depend on mainly martruja and peetruja bavās, can be described under chromosomal disorders according to the modern concept. Prenatal causes (Garbha kālena nidāna) depend on the Garbhini paricharya.(Anti natal care) Perinatal causes(Prasava kālena nidāna) related to the conditions that baby has to face at the time of delivery. It is one of the main causes for BP / CP.

Summary and Conclusion

Post natal causes (Prasovohtara nidāna) such as delayed Prānapathyagamana / improper resuscitation, disorders of breast milk, make deformities of child.

Special Āyurvedic Treatment regimen and Physiotherapy are used to manage the condition of BP / CP in this study. Specially the medya drugs (Intellect promoting drug), Abhyanga (massage), and selected Pancha karmas are used in the treatment regimen of Āyurveda. Physiotherapy is depends on the affected parts of the body.

60 patients were randomly selected in age group of 6 month to 6 years, 30 from OPD in Āyurvedic Teaching Hospital in Boralla and 30 patients from Physiotherapy unit in Base Hospital, Avissawella.

Age of the patients is categorized into 3 according to GMFCS for assessment purpose. Out of 60 patients, maximum number of patients found from age group between 2 and 4 years.

Most of the mothers of this study 78.33% had conception at appropriate age, where as each of 21.67% mothers reported of having early or late conception and mothers of 53% patients in one or more risky stage of pregnancy. When considered about health factor of those mothers during the pregnancy, 38.66% mothers suffered from one or more diseases such as Pregnancy Induce Hypertension and Pregnancy Induce Diabetes Mellitus.

Among the 60 patients of BP/ CP 60 % of children were born at full term. 40 % of children were reported pre term or post term, in the present study. 50 % of children were delivered normally (Spontaneous Vaginal Delivery). 30% had been delivered Lower segment cesarean Section (LSCS) and 15 % by application of instruments.

Summary and Conclusion

Among the 60 children, of BP / CP 51.66% had Birth Asphyxia at birth. 11.66 % were with history of Neonatal jaundice. Only 33, 33% children had no specific illness.

55.33 % children were in normal birth weight. 25% babies were in low birth weight and 16.66 % were reported having very low birth weight. Out of 60 patients, 66.66% were kept in incubating during the neonatal period.

58.33% children had normal head circumference, 25 % children were with micro cephally and remaining 16.66 % children were with macro cephally. 31.66 % children were reported have history of convulsion.

Out of 60 patients of BP / CP, 68.33 % were having Spastic Quadriplegia (Drudatā Pūrvaka Sarvāngaghāta), 20 % of patients were suffering from Spastic Diplegia(Drudatā Pūrvaka Adarāngaghāta) and 11.66 % followed by Spastic Hemiplegia (Drudatā Pūrvaka Ardāngaghāta)

Effect of Āyurvedic treatment revealed significant improvement in gross motor functions such as crawling, sitting, standing and walking. (p value for group A- 9.44E -13)

Significant effect of Physiotherapy also provided better improvement of gross motor functions. (p value for Physiotherapy – 3.32 E -08)

However, Āyurvedic treatment regimen revealed comparatively better improvement in gross motor functions of affected BP / CP children than the Physiotherapy Treatment.

CONCLUSION

1. Signs and Symptoms of Bālaka Pakshāghāta described under the system of Āyurveda can be correlated to a certain extent with the signs and symptoms of Cerebral Palsy described in modern system of medicine.
2. Āyurvedic treatment regimen and Physiotherapy have the capacity to improve the gross motor functions of Bālaka Pakshāghāta / Cerebral Palsy.
3. Āyurvedic treatment regimen is highly effective than that of Physiotherapy treatment in the management of Bālaka Pakshāghāta / Cerebral Palsy.
4. Further studies are proposed to evaluate the efficacy of combine therapy, Āyurvedic treatment regimen and Physiotherapy for the management of Bālaka Pakshāghāta / Cerebral Palsy.