

Vibandha; A common Gastrointestinal anomaly that affect Nutritional efficiency in the Children**Dr. Lakshendra Kushwaha^{*1}, Dr. Ritesh Kela²**¹P. G. Scholar, Department of Kaumarbhritya, Shri Dhanwantari Ayurvedic Medical College & Research Centre, Mathura- 281401 (UP) India, Mob. 09162395918, Email: sribishnu.lk@gmail.com²Associate Professor. Department of Kaumarbhritya, Shri Dhanwantari Ayurvedic Medical College & Research Centre,, Mathura- 281401 (UP) India**ABSTRACT**

The words *Vibandha* or *Vibaddha* or *Baddha purisha*, which signify one of the states of Srotodusti, particularly in *Purishavaha srotas*, literally mean Sanga meaning full or partial obstruction of *purishvaha Srotas*. The distinctive indications of their vitiation include the voiding of a little quantity of faeces with difficulty, a very scybalous stool accompanied by sound and discomfort, and the voiding of a small quantity of faeces with difficulty. All of the signs indicate that vitiated Vata is involved in the pathophysiology of *Vibandha*. *Vibandha* is one of the most common clinical diseases characterised by difficulty defecating, infrequent bowel motions, and firm stool in youngsters. The majority of youngsters suffer from constipation due to either ingesting insufficient fibre and water, or due to their lifestyles having been disrupted. Sometimes, overzealous toilet training in infancy can be stressful for children, leading to chronic constipation later in life.

KEY WORDS: *Vibandha*, *ahaar vidhi viseshayatana*, *Purishvaha***INTRODUCTION**

Vibandha is a common condition of the gastrointestinal tract characterised by difficulty defecating, infrequent bowel motions, and firm stool¹. There is no direct and explicit definition of *Vibandha* as a disease in Ayurveda, but diverse presentations of *Purisha*, such as *Baddha Purisha*, *Ghana Purisha/Grathita Purisha*, *Sushka Purisha*, and *Mala avabaddhata*, might be interpreted as different manifestations of *Vibandha*². *Vibandha* is a prevalent symptom in the majority of the *Annavaha* and *Purishavaha srotovikaras* of children, since it results from the vitiation of Apanavata³.

The tree's roots are essential for the tree's maintenance, stability, and growth. Similarly, Dosha, Dhatus, and mala are essential for human body function. Unquestionably, they are comparable to the Developmental base (Genesis), Maintenance (Operating system), and Degeneration (Destruction Power). The tree or our body cannot flourish if any of its roots are rotten; similarly, if the Doshas, Dhatus, and mala are out of balance, it can lead to a variety of ailments. The physiological characteristics of the following *Vibandha* involved elements are *Pureesha*, Dosha and the *Kostha*.

The physiological characteristics of the following *Vibandha*-involved elements are described below.

Pureesha⁴

As one of the Mala, it is referred to as *Shakrit*, *Vit*, *Gootha*, and *Varchas*. Typically, golden in colour and semisolid in consistency, *Purisha's* Rasa is *Katu*. It is 7 Anjali *pramana*. Its consistency is determined by the Prakriti of the individual who consumed food. It is hard in a Vata Prakruti person, semi-solid or liquid

in a Pitta Prakruti person, and soft and solid in a Kaphaja Prakruti person. Sama *purisha* is heavier, has a terrible odour, and sinks in water, but *Nirama purisha* is lighter and floats.

Purisha has the function of *Avasthambha*, which is to provide support. From *Purisha vaha srotas*, *Purisha* is created and expelled. *Pakvashaya*, which maintains the body and performs dharana of Vayu and Agni, always contains a little bit of *Purisha*.

Physiology associated with the *Purisha*:

Pureeshavaha srotas:

Pakvashaya and Guda are the two roots of the *Pureeshavaha srotas* (big intestine), which is responsible for the creation, storage, and outflow of faeces. *Pakvashaya* consists primarily of *unduka* (where mala *vibhajana* begins), *vatashaya* (where *vata* is found), *Malashaya* (where faeces accumulate), and the region beneath the Sthula antra. Guda is situated 512 Angula *vistara* away. *Uttara guda*, where mala is stored, can be compared to the sigmoid/pelvic colon, while *Adhara guda*, where mala comes during defecation only to be expelled, can be compared to the rectum. This is followed by *Gudaoushta* (anus) and Guda Mukha or *Malayana* (anal orifice)

Pureeshadhara kala or *Maladhara kala*:

It is the fifth Kala, associated with the transformation of *Kitta bhaga* into *Pureesha* within the *Pakvashaya*, and is associated with the mucosa of the colon.

Vata⁵

Samana Vata: A subtype of Vata that literally translates to "maintenance of Agni in a regular manner." It operates by receiving food into the digestive tract, digesting it, separating *Sara bhaga* and *Kitta bhaga*, and aiding in their utilisation and elimination via their respective channels. All neurohormonal aspects of digestion, including the role of the parasympathetic nervous system and the control of the endocrine nervous system (ENS), are under the purview of Samana *vata*. Apana Vata is a kind of Vata that seeks refuge in *Pakvashaya*. The meaning of the word Apana is "something which moves downwards." For example, to promote the elimination of Vayu, *Pureesha*, and Mutra., Expulsion of the Sukra; To bring about the *Artava Vahana*; Garbha's *Nishkramana* kriya at the period of *Prasava*. Apana *vata* aids the flow of *Pureesha* to Guda after *Pureesha* has been created and stored for expulsion. When *Pureesha* reaches Guda, the Chala and Sukshma guna of Apana *vata* create *Pureesha vegotpatti*, also known as the urge to defecate. The functions of Apana *vata* refer to the expulsion of faeces from the lower trunk through orifices positioned at the anterior and posterior perineal triangles with sufficient sphincter control.

Pitta and Kapha⁶

Pachaka pitta is a kind of Pitta that refers to the term "Anala" since it is involved in *Paakadikarma*. It then performs *Sara kitta vibhajana* after absorption and elimination of the same, respectively. It has a strong correlation with gastro-intestinal functions, particularly enzymatic digestive processes in the stomach.

Kledaka kapha: Located in *Amashaya*, this subtype of Kapha accomplishes the same activity as *Anna sanghata* and *Rasa kledana*. It refers to the secretion produced by oxyntic glands and pyloric glands, as well as the mucus secretion produced by peptic cells and mucous neck cells.

Koshta⁷

If Vata influences *Koshta*, it produces *Krura koshta* and becomes Ruksha. Consequently, absorption will rise. In *krura koshta*, the increased absorption of water from faeces results in the formation of hard, lumpy stools, causing *Vibandha*. Even with taking the Nishotha (*teekshna virechaka*) at *Krura koshta*, *Virechana* were challenging.

NIDANA PANCHAKA

Nidan/ causal factors

Although there is no independent mention of the causal causes of *Vibandha* in the classical texts, based on the cardinal manifestation and major Dosha involved, *Vibandha* can be considered a disease of *Pakwashaya* with a Vata dosha predominance. Consequently, the elements responsible for the vitiation of Vata and Agni are regarded to be the causative factors of the *Vibandha*. However, the factors listed below have a significant role in generating this *Vibandha*. Etiological causes for *Vibandha* are given jointly under the subheadings.

Aharaja

Rasa13	Guna ^{39,40,41}	Ahara ^{40,42,43}	Ashana ^{44,45,46,47}
<i>Katu</i>	<i>Ruksha</i>	<i>Patrashaka</i>	<i>Abhojana</i>
<i>Tikta</i>	<i>Guru</i>	<i>Shushkashaka</i>	<i>Adhyaashana</i>
<i>Kashaya</i>	<i>Sheeta</i>	<i>Na bhrishtashaaka</i>	<i>Vishamaashana</i>
	<i>Vidahi</i>	<i>Viruddha shooka</i>	<i>Asaatmya bhojana</i>
	<i>Abhishyanda</i>	<i>Nava shooka</i>	<i>Viruddhaahara</i>
	<i>Sushka</i>	<i>Guru phala</i>	<i>Atyashana</i>
		<i>Mudga-Kodrava-</i>	<i>Alpa bhojana</i>
		<i>Chanaka-Kareera</i>	<i>Alpa jalapana</i>
		<i>Ati ksheera sevana</i>	

***Viharaja* Nidana⁴⁸:**

Ratri jagarana Dukhasayya- Dukha asana

Manasika Nidana⁴⁹:

Vega sandharana: Pureesha, Mutra, Nidra, Trusha, Kshudha , , Shoka

***Poorvaroopa*: ⁵⁰**

In younger children, the *Vibandha*-related prodromal symptoms are *Agnimandya*, *Aruchi*, *Bhaktadwesh*, *Klama*, *Adhmana*, *Antrakoojana*, and *Arathi*.

Roopa:

According to the definition, the primary manifestation of Vibandha is constipation, and additional concurrent manifestations are described as follows.

Lakshana with relation to Mala^{51,52}

Vatavarcha Apravrutti - Mala katinata - Sushka, Grathita mala Pravarthana (dry, pellet like stool) - Alpamatra mala Pravarthana - Kashta mala Pravarthana - Sashoola mala Pravarthana - Krucchrena-Chiraath pravrutthi

Anubandha Lakshana^{27, 53, 54}

Anorexia/Arugia

Ajeerna/ indigestion

Atopa/Admana/ gurgling of stomach

Udara Shoola/ pain in abdomen

Antrakoojana/ bloating

Alasya/ weariness

Katiprushtavedana/ back ache

Samprapthi Ghataka^{55, 56}

Dosha	Vata dosha Pradhana Pitta <i>anubadha</i>
Dushya	Mala
Dhatu	Rasa
Agni	<i>Jataragni</i>
Ama	Sama
Srotas	<i>Annavaha, Pureeshavaha</i>
Srotodushti	<i>Sanga</i>
Rogamarga	<i>Abhyantara rogamarga</i>
Udbhavasthana	<i>Amasahaya</i>
Vyaktasthana	<i>Pakwashaya, Sarvasarira</i>
Sadyasadyata	<i>Sukhasadhya</i>

Upadrava⁷⁸:

Upadrava of *vibandha* can be described as that of *Udavarta*, such as *Nishwasita* (expires excessively) or faints, *Trushyati* (thirsty excessively) and *Hikka*, *Parikarthika* (anal fissure), *Arshas* (haemorrhoids), and other characteristics such as *Guda Bhramsha*, *Gulma*, *Hridaya uparodha*

Chikitsa

On the basis of the preceding explanation, it may be stated that *Vibandha* is a sickness of *Pakwashaya*, which is the *Vatasthana*, and that Agni is always involved in *Vibandha*. The therapeutic principles for children focus primarily on the eradication of etiological causes, Agni *deepana*, *Amahara* chikitsa, and Vata *anulomana*. Consequently, therapeutic concepts can be explained using the following factors:

- Nidan *parivarajana*
- *Apakarshana*
- *Prakriti Vighata*
- Yoga- Asanas
- *Pathya Apathya*

Nidana *parivarajana*⁵⁷

Nidana *Parivarajana* is the primary line of treatment because the majority of children with *Vibandha* engage in poor eating practises such as *Ruksha-Sheeta guna ahara*, *Alpa bhojana*, *Kashaya*, *Katu*, *Tikta rasa atisevana*, *Ati ksheerapana* etc. As a preventative measure, *Vibandha* halts the evolution of the disease and prevents recurrences of the same condition.

Apakarshana

Children's treatment principles aid in the removal of faecal impaction, the regularisation of bowel movements, the development of self-confidence, and the correction of food patterns, as described below.

Agni *deepana*⁵⁸

Agni dushti is central to the pathology of *Vibandha*, and *Agni deepana* is of paramount importance. Even in the *Apana avrutha vata chikitsa*⁵⁹ and *Gulma chikitsa*⁶⁰ texts, *Agni deepana* is described as the primary line of treatment. Through *Aushadhis*, *Pathya Ahara*, and *Vyayama*, *Agni deepana* (the correct functioning of *Agni*) is attained.

*Amahara Chikitsa*⁶¹

Observations indicate that the *Ama* plays a significant role in the manifestation of the disease *Vibandha*. Therefore, *Ama Pachana Chikitsa* is necessary for the treatment of *Vibandha*. Following *Deepana Dravyas*, *Pachana Dravyas* like *Shatapushpa*, *Trikatu*, *Shunti* etc., can be administered. *Amahara chikitsa* is the exclusive cure for *Vatanulomana*.

Treatment fundamentals of Pancha karma

One can alter *Snehana* (unction), *Swedana* (sudation), *Matrabasti* (kind of enema), and *Mrudu virechana* based on the severity (mild purgation).

DISCUSSION

Ghrita is consumed with *Saindhava lavana* while eating. Examples: *Goghrita*, *Sukumaraighrita*, *Indukanta ghrita* etc., *Eranda taila* (castor oil)⁶⁴ is an effective treatment for *Vibandha* because it acts on exacerbated *Vayu*. It may be administered with milk, meat soup, juice, or a decoction of *Triphala* (*Haritaki*, *Vibhitaki*, and *Amalaki*), cow's urine, etc. Due to its *Vata hara*, purgative actions, and the inclusion of other suitable medications, it heals *Vatika* ailments connected with *pitta* and *kapha* that have been vitiated. Depending on the *Bala*, *Koshtha*, and form of the sickness, up to five *palas* of *Eranda taila* should be administered. In *Mrudu Koshtha* (laxative bowel) and *Alpa balavaan*, *Eranda taila* is provided in conjunction with food. *Bahir snehana* can be quite beneficial for *Vibandha*- afflicted

children. Local *snehana* around the umbilicus can alleviate discomfort, aids in Vata *anulomana*, induces *snehana*, and hence aids in the relief of *Vibandha*. *Swedana* should be performed after *Bahya Snehana* for the detachment of the doshas that have stuck to *Koshta* and the effortless movement of Mala. As it targets *Purana purisha shodhana* in the *Purisha vaha srotas* and *Vataanulomana*, *basti* can be regarded as the finest emergency care and treatment technique for children with chronic constipation accompanied by significant stomach pain and distension. In *Vibandha*, targeting Vata *shamana* and *Anulomana*, *Anuvasana basti* can be adopted. Sometimes, aggravated Vata causes Pitta and Kapha to become aggravated. *Vataanulomaka taila* or *ghrita Anuvasana Basti* can be performed with the goal of easing *Purisha rookshata*, *vatanulomaka*, and *Koshta snehana*. Children should be offered *Snehana*, *Swedana*, and then *Niruha* if *Vibandha* does not react to previous therapeutic methods. For the creation of *Niruha Basti*, medications with purgative properties, cow's urine, oil, alkalis, and sour-tasting drugs that alleviate Vayu and are *Tikshna* in their action should be employed with the goals of *Koshta shuddhi* and *Vatanulomana*. Through *Guda marga*, *Virechana chikitsa* is modified to eliminate both *Pakwa* and *Apakwa pureesha*. The majority of *Virechana dravyas* are *Ushna veerya* with *Guru*, *Teekshna*, *Sukshma*, *Vyavayi*, and *Vikasi gunas*, as they might induce *Adhogami Prabhava* (downward movement) of the *Doshas*, particularly *Purisha*.

If the child is unwilling to take oral medication, when oral medication fails to treat constipation, or in the case of Refractive Constipation, *Varti Prayoga* can be used as an immediate treatment, followed by *Basti*, which is the optimal treatment. This facilitates Vata *anuloma*, aids in the elimination of Mala *rukshata*, and stimulates sphincter movement. The therapy concepts of *Arshas* and *Vibandh* may be utilised in the case of intractable constipation, which is unresponsive to standard treatment principles.

Constipation can be relieved by regular practise of some *Yogasana* (postures) like *Utkatasana*, *Bhujanghasana*, *Trikonasana* (triangular stretch pose), *Ardha Matsyendrasana* (Half spinal twist), *Supta Vajrasana* (the sleeping pelvic pose), *Dhanurasana* (Bow pose), *Pavanamuktasana*, *Paschimottanasana* (Head to knee pose) and *Kapalabhati*, *Pranayama*. As they aid digestion, expel abdominal gases, and treat constipation.

Pathya-Apathya knowledge is necessary for the comprehensive management of any disease. In the majority of disorders, *Pathya Sevana* and *apathya varjana* are integral components of the treatment. *Pathya* and *Apathya* play a crucial role in *Vibandha*, which aims towards *Agnideepana* and Vata *anulomana*. *Pathya-Apathyas* are analysed in the context of various diseases, such as *Arshas*, *Udavartha*, *Gulma*, *Ajeerna*, etc., and enumerated according to *rasa*, *guna*, *karma*, and *vargas*.

CONCLUSION

Vibandha as is typically caused by *vata prakopak ahara*, *vihara*, and noncompliance with *Astha ahaar vidhi viseshayatana* in children. This shall include changes in dietary habits, lifestyle, social structure, and constant mental stress that result in disturbances of the *Annavaha* and *Purishvaha srotas vikara* such as *Vibandha*, *Adhmana*, *Anaha*, *Atopa*, etc., and these symptoms persist for a longer period of time and lead to more distressing features. *Vibandha* Constipation can result in a vicious cycle characterised by frequent digestive problems, excessive food stagnation, and weak peristalsis. Children with extensive faeces

retention (*vibandha*) and resulting nutritional issues. In addition, it might have a negative impact on the physical and mental development of children. Ayurveda's focus on preventative medicine, including care for children, is not novel.

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