The developmental disabilities are not only the challenging medical problems but are also the social problems. And this burning problem cannot be overlooked. The World Health Organization estimates that about 10% of the total world population has one or the other form of disability and about 3.8% is seen in India. Advancement in perinatal and neonatal care has improved the chances of survival of many newborns who would have otherwise succumbed to such problems. Lack of proper medical care and certain other factors tends to increase the chances of childhood developmental delays such as speech problems, behavioral problems, attention deficit disorders, hyperkinetic disorders and scholastic backwardness etc. which can be considered as SAMVARDHANA VIKARAS, in general.

SAMVARDHANA VIKARAS are characterized by abnormality in the development and shows the clinical features like pangu (lame), jada (mental retardation), mooka (dumb), ashruti (deaf) etc.

Factors responsible for Prakritha Samvaradana:
Although many factors influence the proper growth and development, the important of them are,* Shareera Vridhhi kara bhavas.
* 'Bala Vridhi kara bhavas'.

Shareera Vridhhi kara bhavas:
These bhavas not only include factors pertaining to physical growth but those that influence mental growth also. Mainly four factors are identified in this regard as Kala yoga, Swabhava samsiddhi, Ahara saushthava and Avighata which have been highlighted here.

1) Kala yoga: The points that need to be considered here are age of the parents during conception, the prenatal period, the ritu of delivery etc.
2) Swabhava samsiddhi (Innate potentiality, Genetics): This possibly means the Genetic design for a particular pattern of development which is influenced by doshas of shukra and arthava of the parents during the time of conception. The deeds of previous birth may also be responsible for the pattern of samvardhana of individuals.
3) Ahara saustava : Nutritional factor plays an important role growth and development in pre and post natal periods. In the post natal period Sthanya has the major role in nutrition of the baby.
4) Avighata: Vighata means either psychic or somatic injury or sometimes both. Avighata is opposite to vighata. The whole gist is that one should avoid injury of any sort to both mother and foetus during pregnancy and during the child birth also.

Bala Vriddhi kara bhavas:
The factors explained in this context such as balevat deshe janma, kala yoga, sukhasch kala, beeja kshetra guna sampat, ahara sampat shareera sampat, satmya sampat satwa sampat, swabhava samsiddhi, yauvana, karma, samharsha.

Samskaras iike Jatakarma. dolashayana, namakarana, nishkramana, upaveshana etc. also have its own role in prakrita samvardhana.

Etiopathogenesis of bala samvardhana vikaras.
The nidanas of bala samvardhana vikaras can be devided into
1. Garbhe kalina nidanas-- prenatal.
2. Prasava kalina nidanas --natal.
3. Prasavottara kalina nidanas --post natal.
Garbha kalina nidanas-- prenatal:

It includes beeja dushti (genetical or chromosomal abnormalities), atma karma 'dushti (idiopathic causes may be because of past deeds), Ashaya dushti (abnormalities of reproductive system), kala dushti (improper age and time), Matur ahara vihar dushti (improper maternal diet and regimen), other than this Dauhrida avamana (suppressing the longings of the mother), Aghata, krimi, dhumapana etc.

Prasava kalina nidanas:

It includes vilambita avi (prolonged or weak uterine contraction), akala pravahana (untimely bearing down), moordhna abhigata (head injury).

Prasavottara kalina nidanas:

This includes sthanya dushti e.g Kaphaja sthanya, tridoshaja sthanya, garbhini sthanya resulting in developmental disorders. Effect of grahas like skanda. skandapasmara, the nija agantuja disorders causing vyadhi sambhava phakka.

Symptomatology of balmmdharana Vikara: Since the etiological factors of bala samvardhanavikaras are diverse the symptoms vary accordingly and many in number. The commonly encountered symptoms and as explain in our classics are jadata, mookata gadgada, badhirya, pangulya, phakkatwa, ekanga roga, pakshaghata, akshepaka etc. During delivery and immediately after birth much care should be taken not to have shiromarmabhighata to the baby. Immediate adoption of pranapratygamana (resuscitation), conduction of jatakarma, raksha karma, dharana of mani etc. are also important.

Slow head growth.

Management of samvardhana vikaras:
The management includes preventive and Other measures. (medicine)

Preventive measures:

once this problem takes the abode it becomes very difficult to manage and there fore preventive measures in prenatal, natal and post natal period play an important role. Avoiding sagotra vivaha (consanguineous marriage), following rutucharya, Garbhdhana procedures, avoiding pregnancy in very young and elderly ladies, following proper garbhini paricharya (ANC), avoiding garbhapaghatakara bhavas, madhya, dhoomapana etc. are important. Education towards bearing down efforts, proper conduction of labour and avoiding moordhhabhighata during delivery should be ensured. During neonatal period ensuring intime pranapratygamana (resuscitation), conduction of jatakarma, raksha karma, dharana of mani etc. are also important.

Other measures (medicine):

It includes the administration of following rasayanas. Medhya rasayana--mandookaparni, guduchi, shankha pushpi, yasti madhu etc. Ghritas: kalyanaka ghrita, bramhi ghrita, panchgavya ghrita, samvardhana ghrita, swarna prasana with medhya dravyas. Abhyanga, swedana, udwartana, basti, nasya etc are having very significant role.

Conclusion:

A number of culture specific tools have been developed to assess neuromotor development and cognition. Bayley scale of Infant development is widely used and has been simplified for use as Baroda development screening test (22 motor items and 31 mental items).

The Stanford Binet intelligence scale and McCarthy scale of children's abilities can be used in older children to assess their intelligence.

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