

INFANTILE COLIC: A REVIEW STUDY

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ABSTRACT

Infantile colic is a common condition of recurrent abdominal pain in young infants occurring first to fourth month of life. The attacks of sudden screaming with flexion of thighs and flushing or frowning of face occur at a precise time in the evening in a clockwise regularity and may last for a couple of minutes or hours. These babies are typically healthy throughout the day but develop paroxysmal excessive crying spells in evening. Infantile colic can be correlated with *Udarashoola* in Ayurveda Samhitas. *Udarashoola* is condition where one express high intensive pain in abdomen. *Stanya dushti* is one of the principle causative factors for disease development in an infant. according to acharya *bhavaprakasha* Local application of (asafoetida) *hing* over the periumbilical area is useful and effective home remedy for *Udarashoola* (infantile colic) and flatulence in infants.

KEYWORDS: Infantile colic, abdominal pain, excessive crying, *Hing*.**INTRODUCTION**

Infantile colic is a distinct clinical entity of uncertain aetiology. The clinical picture is characterized by sudden bouts of unexplained crying spells in the evening after a few days of birth. These babies are typically healthy throughout the day but develop paroxysmal excessive crying spells in evening along with flexion of thighs and facial flushing. Each episode lasts for a few hours before baby goes to sleep, only to recur on next evening. Although infantile colic is considered to be a self-limiting and benign affection, it is often a stressful problem for parents. The condition is more common among first born wiry and active babies of anxious parents or grandparents. The incidence of disorders is equal among breastfed and formula fed infants. Nothing seems to provide relief to the baby who cries with full vigour and the family is extremely upset and demoralized by these unexplained shrieking episodes.

Other signs frequently associated to inconsolable crying are flushing, abdominal distention and leg contracture. In addition, changes to the crying sound (higher pitch), burping, needing to eat, difficulty with passing stool, tight fists, kicking, arching the back and other manifestation of pain are reported in literature. Fortunately, infantile colic is not meant to last long, it usually begins at about two weeks of age and improves by the fourth month.

ETIOPATHOGENESIS

Infantile colic is unexplained, probably relates to aerophagia or behavioural problem. Crying leads to further aerophagia with colic-crying -colic cycle. With respect to the aetiology of colic, from the point of view of gastroenterology, gastrointestinal immaturity or allergy, intolerance of Cows milk, malabsorption and gastroesophageal reflux. The hypothesis that colic could be the result of intolerance of Cows milk, treatment employing soya milk or hypoallergenic formulae have produced reductions in symptoms. Management of infantile colic, from the point of view of modern science, pharmacological treatment is essentially supportive with rocking and burping the baby though a mild antispasmodic may be used. Administration of antispasmodic drops 30 minutes before the anticipated time of colic and placing the baby in prone position for effective release of wind from above and below provide some relief of most babies. The use of probiotics in infantile colic is based upon the hypothesis that aberrant intestinal microflora could cause gut dysfunction and gas production, contributing to symptoms. Probiotics have been shown to provide relief to some infants.

AYURVEDIC POINT OF VIEW

In Ayurveda, pain in and around the navel is called colic. It is generally associated with constipation. In infants, the dhatu (body tissue) is still new and developing; Also, the *Agni* (digestive fire) is low or *mand*. This means that they cannot digest everything that is eaten by the mother or the formula food that is given

to them. Sometimes faulty feeding technique may develop Aerophagia. Thus, the mother has to be very careful about correct methods of feeding techniques. According to Ayurveda, aggravation of *vata dosha* causes the colic pain.

MANAGEMENT

Two types of treatment Modality can be used for the management of infantile colic i.e.

1. External Management (*bahya chikitsa*): External management consists of 4 methods

- Burping
- Exercise
- Abhyanga
- Lepana

Burping: Babies swallow lot of air during breast feeding, especially if not properly attached to the breast. This aerophagia, may lead abdominal discomfort, colicky pain. This method is done to help a baby let out air from the stomach Specially to patting or rubbing the baby's back.

Exercise: Both the legs of the baby must be held straight at first and then flexed from the knee, in this flexed position the thighs should be pressed against the abdomen. This manoeuvre creates pressure on the abdomen which aids in releasing the accumulated air via the anal orifice which helps in alleviating the pain.

Abhyanga: Soft touch and pressure massage should be given to the infants especially on the abdomen and back slightly heated oils.

Lepana: Fine powder of dry drugs with *ushna veerya* such as *hingu*, *vacha*, *rasna* etc should be made into a fine sticky paste by mixing water and a thick layer of this paste of 2-3mm should be smeared on the baby's abdomen.

हिंगुष्ण पाचनं रुच्यं तीक्ष्ण वातबलासनुत।

शुलगुल्मोदरानाहकृ मघ्नं पत्तवर्धनम॥

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2. Internal Management (*Abhyantara chikitsa*): internal management consists of 2 phases:

1. Treatment to the baby: drugs can be administered by applying as a *lepa* externally on the mothers nipple before suckling. Drugs with *deepana*, *pachana* and *anuloma* effect are mainly chosen for internal administration in *udarshoola*.

2. Treatment to the mother: similar mode of treatment has to be followed which was used as internal administration in baby but in higher doses.

DOs AND DON'Ts IN MANAGING THE COLIC

- ✓ Do try things that usually stop your baby crying such as offering a pacifier, singing, walking etc.

- ✓ Do try snug wrapping of your baby and holding the baby in your arms or lap.
- ✓ Do hold the baby upright and walk the baby around.
- ✓ Do put your baby on your lap and gently massage the baby's back.

- Do not worry too much about colic. Colic has no effect on a baby's health or development.
- Do not ever shake a baby.
- Do not ever cover a baby's face with pillow or other object to quite a crying.

MATERIAL AND METHOD

Information is collected from pub med, google, various journals articles, research papers, dissertation and thesis from different institutes and websites, textbooks on paediatrics and neonatology, Ayurveda samhitas and related texts, news-paper and other electronic media sources.

CONCLUSION

Udarshoola in infants or infantile colic is benign self-limiting disorder characterised by episodes of incessant crying 3 hours a Days, for 3 weeks in a month. General advice and counselling should be offered to all families. Correction of *stanya dushti* with *shodhana dravyas*. The medicine given to the child contain *deepana pachana* properties for *samprapti vighatana* of the disease. According to acharya bhavaprakasha local application of *hingu* helps in reducing the pain.

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