



## ROLE OF AYURVEDA IN MANAGEMENT OF DOWN SYNDROME [TRISOMY 21]

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### ABSTRACT

Down Syndrome is most common chromosomal abnormality. Incidence 1:700-800 live births. According to Ayurveda Down Syndrome occurs due to Vata Dosh predominance and also due to Beej, Beejbhaga dosha and Bheejbhaga awayava abnormality. Down Syndrome is Found in newborn with clinical features like poor moro reflex and in children with Hypotonia, Mental Retardation. Treatments are useful in Down Syndrome cases in Shiropichu with Dhanwantar taila, Abhanga with Dhanwantar tail, Panda Sweda etc, and physiotherapy is also beneficial for Down Syndrome.

**KEYWORDS:** Vata Dosh predominance, Beej, Beejbhaga, Beejbhaga-ayayava Dosha, Hypotonia, Mental Retardation, Poor Mororeflex, Developmental Delay, Shiropichu, Abhanga, Physiotherapy.

### Article Down Syndrome [Trisomy 21]

Down Syndrome is most common autosomal chromosomal abnormality. Incidence 1-700 live births (50% cases abort in early pregnancy) Incidence increases with increasing maternal age.

Age of Mother	Risk
20 Years	1:2000
30 Years	2:1000
40 Years	3:100

**Atiology:-** According to Ayurveda Down Syndrome is due to Beej, Beejbhaga and Beejbhaga-ayayava Dosha i.e. non-meiotic dysfunction, Robert-sonian translocation and mosaicism.

### Clinically:- (A) New born

1. Poor moro reflex.
2. Hypotonia.
3. Joint Hyperflexibility
4. Excessive skin at back of neck.
5. Developmental Delay.
6. Small Stature.

### (B) Children

1. Mental Relardation
2. Short Stature
3. Hypotonia

### CVS

- ASD
- VSD
- PDA
- Fallot's of Tetralogy.

### GIT

- Duodenal atresia.
- Oesophageal atresia.
- Distal small bowel atresia.
- Hirschprung's disease.

**Thyroid:-** Hypothyroidism.

**Upper limb:-** clinodactyly

- Single palmer crease (Simian Cerase)

**Skin**

- Velevety
- Loose
- Mottle in newborn
- During adolescence skin is coarse and dry.

**Social Aspect:-** Happy Children, Friendly and enjoy music.

**RS:-** Respiratory infection due to difficulty in nasal sinus drainage.

**Dermatoglyphics**

- Distal axial triradius.
- Ulnar loops in 1<sup>st</sup> 3 fingers.
- Radial loops in 2 fingers.
- Large ATD angle.

**Investigation:-** Karyotype (Chromosomal Analysis)

- Maternal serum markers like Triple test.
  - USG:- Suggestion of Down Syndrome
1. Thick Nuchal Fold
  2. Short Femur
  3. CHD
  4. Git Anomaly.
  5. Clinodactyly.

**Management**

- Shiropichu with Dhanwantar Taila (30ml) for 1 month.
  - Abhyanga with Dhanwantar Taila (50ml) for 15 days.
  - Pinda Sweda.
  - Physiotherapy
  - Genetic Counseling.
  - Antenatal Diagnosis for Subsequent Pregnancies.
  - Stimulation Programme.
  - Assessment of growth, Vision, Hearing and Behaviour.
  - Internal medicines-(1) Saraswatarishta (Gold) with water
- (2) Brahmi Ghrita with hot water
- (3) Kalyanak Avaleha Churna with Jambir Swaras for Jivha Pratisarnartha.