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A Pilot Study Of Satavari Podi For The Management Of Reduced Lactation

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Keywords

Lactation, Satavari, Breast milk, Siddha.

Abstract

Objective: The present pilot study was designed to evaluate the clinical efficacy of Satavari podi for the management of Reduced Lactation.

Method: The study was conducted at National Institute of Siddha in the Department of Kuzhandhai Maruthuvam (sool matrum magalir maruthuvam opd), Tambaram, Chennai. The author recruited 10 patients in the study based on inclusion and exclusion criteria. Then they were given Satavari podi for three days and advised to take 10 gms once in a day morning with cow's milk and advised to have milk rice as diet for three days. The results were assessed by Breast milk assessment tool. Study outcome was based on the increase in the total number of feeds per day, relaxation and calmness of the baby after taking feeds, deep rhythmic sucks of the baby, and increase in time taken for a single feed.

Results & Conclusion: There was increase in the total number feeds intimating the increase in the production of milk after treatment. Generally the baby looks calm after feed and the time taken for the feed has been increased about 10-15 minutes in many of the cases. There obtained a good result by taking Satavari podi without any ill effects.

Introduction

Siddha system of medicine is one of the oldest medical systems of India existed separately in early times. The system has flourished well in India for many centuries. Although this system has declined in later years, in the wake of changing mode of life and modern medicine, it continues to sustain its influence on the masses because of its incomparable intrinsic merits. Siddha medicine can combat all types of diseases, especially the chronic diseases, which baffles and eludes even the modern sophisticated medicine.

Breastfeeding is more than a way to feed a baby. Breast milk is the perfect balance of nutrients for the healthy growth and development of infants and young children. Choosing to breastfeed is an investment in mother's and baby's health. Making the decision about infant feeding is more than a lifestyle choice, it is a health issue.

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It supplies all the necessary nutrients in the proper proportions. It protects against allergies, sickness, and obesity. It protects against diseases, like diabetes and cancer. It protects against infections, like ear infections. It is easily digested - no constipation, diarrhea or upset stomach. Babies have healthier weights as they grow. Breastfed babies score higher on IQ tests. It is available wherever and whenever your baby needs it. It is always at the right temperature, clean and free. No bottles to clean. Breastfeeding has no waste, so it is good for the environment. In some rare cases, a mother may truly be unable to produce enough milk to supply her child. This may occur when infant health problems or latching issues prevented the baby from efficiently clearing out each breast during early feedings. Another potential cause of an unexpected loss of milk is when the mother engages in a rigorous weight-loss program while breastfeeding, as a mother who doesn't take in enough calories might cease producing milk. A tiny minority of mothers are completely unable to produce sufficient milk no matter what they do. However, most causes of lack of milk in a breastfeeding mother are reversible.

In our NIS SMM Outpatient department we come across large number of cases with poor breast milk secretion. children health reflects the nations wealth. breast feeding plays the most essential role in this factor. Since exclusive breast feeding atleast for 6 months for a baby is essential to its growth and brain development, author decided to select this topic for the pilot study.

In our siddha texts SIKICHA RATHNA DEEPAM a simple and most efficient preparation is mentioned to improve lactation. The main ingredient is thanneervittan kilangu which is well known for its galactogogue activity. Hence the author decided to make a trial out of it.

Method

This pilot study was conducted in *Ayothidoss Pandithar* Hospital in the OPD of Sool and Magalir Maruthuvam, National Institute of Siddha, Tambaram Sanatorium, Chennai-47 in accordance with standard protocol after obtaining the approval of the Institutional Ethical Committee (IEC) (NIS/IEC/2016/11-33/14.10.2016). Before enrollment into the study the informed consent was obtained from the patients, and the study was registered in CLINICAL TRIAL REGISTRY OF INDIA and the

register number is CTRI/2018/02/012227 [Registered on: 28/02/2018].

Conduct of trial

The required raw drugs will be purchased from a well reputed indigenous drug shop. The raw drugs will be authenticated by the Asst Professor medicinal botany in NIS Chennai. The raw drugs will be purified and the medicine will be prepared as per sop in gunapadam laboratory of National Institute Of Siddha.

Satavari Tuber is the only ingredient.

Standard operating procedure for satavari podi for reduced lactation

Selection of raw drugs

From the purchased raw drugs, the quality of the raw drug is maintained by

removing the dusts, wastes and adulterants and selecting the best drugs for preparation.

Method of preparation:

Satavari kizhangu is collected and purified by scrapping its outer layer,removing its innerVein .It is then dried and grinded well till making it as an fine powder without using iron objects and filtered using a cotton cloth (vasthra kayam) and stored in a container.

Then the fine powder 30 gm is given to the patients in 10 gram separate packets for 3 days with diet advice and adjuvant.

Subject selection: Patients reporting at OPD of SOOL MAGALIR MARUTHUVAM with the symptoms of inclusion criteria will be subjected to screening test and documented using screening proforma.

Inclusion criteria

- Age between 21 to 36 years.
- > Both primi and multi parous women
- Poor breast milk secretion (both day and night time)
- ➤ Child age from birth to 1 year
- > Patient willing to sign the informed consent

Exclusion criteria

- ➤ H/O Presence of any breast pathology
- > Presence of any associated severe systemic illness.

The trial drug SATAVARI PODI will be given for 3 days only. The trial drug has been given by the investigator in the op department of Sool magalir maruthuvam, NIS, Chennai. The patients has been advised about the medicine and diet in the op department. The clinical assessment will be recorded in the prescribed Performa by the investigator in the op department. At the end of the trial the patients will be advised to come for follow up for 3 months for observation.

Study outcome

Primary outcome:

Sufficient Breast milk secretion

Secondary outcome:

Persistent secretion of breast milk for the next 3 months.

The study outcome was assessed using Breast milk assessment tool

Breast milk assessment tool

S.No	Questionnaire	Before treatment	After treatment
1	Baby has at least 8 -12 feeds in 24 hours*		
2	Baby generally calm and relaxed when feeding and content after most feeds will take deep rhythmic sucks		
3	Baby will generally feed for between 5 and 40 minutes and will come off the breast spontaneously		
4	Baby has not lost more than 10% weight		

Questionnaire and Grades

1. Baby has at least 8-12 feeds in 24 hours

Grade

G1-Below 5 feeds

G2-5 to7 feeds

G3-8 to 10 feeds

G4- 10 to 12 feeds

G5-10& more feeds

2. Rhythmic sucks

Present - 1

Absent - 0

3. Baby gradually feed for 5 - 40 minutes

Grade

G1 - 5 to 10 minutes

G2 - 10 to 20 minutes

G3 - 20 to 30 minutes

G4 - 30 to 40 minutes

G5 – Above 40 minutes

4. Not lost weight more than 10%

Grade

G0 - No weight loss

G1 - Weight loss present

G2 - Persistence of same weight

G3 - Weight gain present

Reference:

http://www.unicef.org.uk/BabyFriendly/Resources/Guidance-for-Health-Professionals/Forms-and-checklists/Breastfeeding-assessment-form/

Reduced lactation clinical assessment

G	OP/IP	Name of the	feeds	o. of s in 24 ours	•	hmic eks	for	taken per ed	asses	eight ssment feeds		Total
S.no	NO	patients	BT	AT	BT	AT	BT	AT	BT	AT	BT	AT
1	I58482	Mrs.c.Visalachi	1	3	0	1	1	2	0	2	2	8
2	I7593/ 8806	Mrs.n.NandiniRamya	2	4	0	1	1	3	0	2	3	10
3	J06261	T.Vani Lakshmi	1	3	1	1	1	2	0	2	3	8
4	I80735	Mrs.Dhashnima	1	3	0	1	2	2	0	3	3	9
5	I52156	Mrs.T.Abinaya	1	4	1	1	1	1	0	2	3	8
6	J21625	Mrs.T.Deepa	2	3	0	1	2	2	0	2	4	8
7	H80369	Mrs.K.S.Sharmila	2	3	1	1	1	1	1	2	4	7
8	J36163	Mrs.R.Ilavarasi	1	4	1	1	1	2	1	3	4	10
9	J46630	Mrs.V.Seetha	1	4	1	1	2	1	0	2	4	8
10	J73201	Mrs.M.Suprithamuthu	1	4	0	1	1	1	0	2	2	8

In the other hand statistical data analysis reports that,

Treatment	Mean ± Std Dev	95% of C.I	t value	Significance (p)
Before (10)	3.2 ± 0.74	2.635 to 3.764	t(9,0.05)=2.2622	P 0.000
After (10)	8.4 ± 0.91	7.407 to 9.392	t(9,0.01)=3.2498	P 0.000

Results

Clinical symptoms such as reduced feeds per day, reduced feeding time, no deep rhythmic sucks, reduced breast milk secretions were corrected significantly. Among 10 patients 6 cases shown good improvement and 2 cases shown moderate results. About 70% of the cases had shown persistent milk secretion atleast for 2 months sufficiently. There were no adverse events reported during the study .Breast milk production increased moderately with in 2 doses of medicines for more than 6 among 10 cases.

In the other hand, on the statistical data

The mean and standard deviation of clinical symptoms score of Reduced Lactation before and after treatment were 3.2± 0.74and 8.4± 0.91respectively, which is statistically significant. The reduction of clinical symptoms after the treatment is significant. The reduction in the symptom is considerable at the end of the treatment.

Discussion

The medicine Satavari podi is a simple and very cost effective siddha drug for management of Reduced Lactation. As a result of this trial ,supplementary feed introduction in the early stage around 2-3 months for the new born were reduced significantly. Patients were highly satisfied with this easily palatable and simple medication for their issues.

A total number of 45 cases were screened and 10 cases was recruited and given treatment in the OPD of Sool and Magalir Maruthuvam OPD. After completion of the study, the patients were advised to visit the OPD of Sool magalir Maruthuvam for 3 month for follow-up. The results obtained provide promising good result. Among the total cases, 60% shows excellent improvement and 20% shows good improvement. These results were based completely on the clinical improvements.

Hence the efficacy of the trial drug, for the management of Satavari podi for the management of reduced lactation which is observed clinically and statistically is found to be a good one.

Conclusion

At some point during breastfeeding, many new nursing mothers wonder whether their milk supply is enough to satisfy their baby. Until 6 months of age only breast milk is enough for all the needs of the baby. Unfortunately, there are many myths and misconceptions regarding milk supply, causing unnecessary worry and stress. Even if you experience a true lack of milk, there are usually simple solutions in our traditional systems that can help build up your production and keep your baby well nourished and immunized. The observation both clinically and statistically made during the clinical study explores that the trail drug Satavari podi was clinically effective in the management of Reduced Lactation. This has inturn, provided a golden opportunity for a new

combination of drugs established in the management of Reduced Lactation.

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