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Concept of *Dhatri* (wet nurse) in perspective of Ayurveda w.r.t. Babylonian Code of Hammurabi

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ABSTRACT

Ayurveda, the native healthcare system of India, is a rich resource of well-documented ancient medical knowledge. Although the roots of this knowledge date back to the *Vedic* and *post-Vedic* eras, it is generally believed that a dedicated branch for healthcare was gradually established approximately between 400 BC and 200 AD. It is well known and nature's gift that breastfeeding is the best nutrition for human infants. There are several problems in motherhood so in such cases there is an alternative source for breastfeeding given in the code of Hammurabi and Ayurveda. But in today's world, there are advancements in the technology through which we preserve mother's breast milk and form milk bank and formula feed for baby. But there is a lack of love, care, and nutritional values that varies in the milk bank and formula feed. Due to advancement in the technology, there is some drawback which affects the baby normal life in term of nutritional value. Anger, grief, and lack of affection, etc. cause loss of breast milk. Ayurveda has a concept of *Dhatri* from an ancient time in the absence of mother milk for the baby. *Dhatri* another mother for the baby. Hence this article reviews the concept of *Dhatri* (wet nurse) in perspective of Ayurveda w.r.t. Babylonian Code of Hammurabi.

Key words: Ayurveda, Breast-feeding, Code of Hammurabi, *Dhatri*.

INTRODUCTION

The origins of donor human milk banking can be traced to the early practice of wet nursing, in which children were breastfed by friends, relatives, or strangers. Rules governing wet nursing are described in the Babylonian Code of Hammurabi (roughly 1800 BC), and detailed selection criteria for wet nurses have been found in centuries-old Greco-Roman texts. In these ancient times, children were thought to

inherit the physical, mental, and emotional traits of their wet nurse through breast milk, so the selection of the nurse was considered very important. By the 11th century, the aristocracy and royalty of Europe almost exclusively used wet nurses. Breastfeeding was considered to be indecent and ridiculous; this ideology persisted through the 1800s. The popularity of feeding by wet nurses began to decline in the 19th century as shock and concern about depravity among wet nurses reached an all-time high and alternative milk sources (e.g., animals) were used. Studies conducted by Theodor Escherich, Chair of Pediatrics at the University of Vienna from 1902 to 1911, demonstrated that the intestinal bacteria of breastfed neonates were significantly different than that of infants fed by other means. His efforts resulted in the eventual construction of the Imperial Institute for Maternal and Infant Care and the opening of the first human milk bank in Vienna in 1909. The second human milk bank opened in Boston in the following year, and more continued to open throughout the

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United States and Europe during the 20th century. In 1980, the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) released a joint statement supporting the use of human donor milk as the first alternative if the biological mother was unable to breastfeed. Other organizations released similar recommendations for the use of human donor milk and established regulations for human milk banks. Human milk banks provide the service of selecting, collecting, screening, storing, and distributing donated human milk to meet the specific needs of individuals for whom human milk is prescribed by healthcare providers. In 2010, the European Milk Bank Association (EMBA) was established to promote breastfeeding and milk banking and to encourage international cooperation between human milk banks throughout Europe. The EMBA has working groups to develop European guidelines for donor milk banks, as well as to assess best practices for the processing and fortification of human milk. Currently, Holder pasteurization and standard fortification (i.e., the addition of a fixed, recommended amount of multi-component human milk fortifier to a certain volume of human milk) are the most widely used methods; however, these methods may not provide optimal nutrition, particularly in preterm infants.^[1]

Though wet nursing had been in practice since mythological ages, modern human milk banking is in its infancy in India. Lack of awareness, leadership deficit, infrastructural and maintenance costs, and fewer neonatal setups are some reasons for the same. The first milk bank in Asia under the name of *Sneha*, founded by Dr. Armeda Fernandez, was started in Dharavi, Mumbai on November 27, 1989. Currently, the number of human milk banks (HMB) has grown to nearly 14 all over India but the growth of human milk banks has been very slow as compared to the growth of neonatal intensive care units. One of the major reasons for the loss of interest in human milk banking was the promotion of formula milk by the industry. Keeping in mind the complications associated with formula feeding to the sick, tiny preterm neonates, and mothers' inability to breastfeed in the initial

period, there is a need to establish human milk banks in all level II and level III facilities. It was with this objective that a need to formulate guidelines for the establishment and operation of human milk banks in our country was felt.^[2]

Breastfeeding is the best method of infant feeding because human milk continues to be the only milk that is made-to-order and uniquely suited to the human infant. India faces its unique challenges, having the highest number of low-birth-weight babies, and significant mortality and morbidity in a very low birth weight (VLBW) population. In our country, the burden of low birth weight babies in various hospitals is about 20% with significant mortality and morbidities.^[3,4] Feeding these babies with breastmilk can significantly reduce the risk of infections. Besides the overwhelming bonding it creates, breast milk is also the perfect food for them. In Ayurvedic compendia formation of *Stanya* (breast milk),^[5] causes of *Stanya Pravrutti* (or milk ejection),^[6] *Dhatri* (wet nurse),^[7] *Dhatri-Pariksha* (examination of wet-nurse),^[8] *Stanapan-Vidhi* (breastfeeding),^[9] *Stanyasampat* (merits of breasts),^[10] *Stanyanasha Hetu* (causes of cessation of milk formation),^[11] *Stanyaviridhi Dravyas*^[12] (drugs increasing quantity of milk), *Stanya Apanayakala*^[13] (weaning period), abnormalities of breast-milk and its treatment, etc. are discussed in detail.

Hence, the researcher wants to say that Ayurveda has a solution for mother and baby problems as *Dhatri* (wet nurse) because there are several drawbacks in the milk bank and formula feed. A detailed view about *Dhatri* is given in the text of Ayurveda from an ancient time after the code of Hammurabi. So, we can achieve the utmost important care which is given by mother to baby in the first year of life.

MATERIALS AND METHODS

Ayurveda compendium, a standard online database was used for the collection of data and critical analysis. *Dhatri* breast milk for baby nourishment is best in all terms in nutritional value, infection value, and used as alternative milk.

DISCUSSION

The Code of Hammurabi was one of the earliest and most complete written legal codes and was proclaimed by the Babylonian king Hammurabi, who reigned from 1792 to 1750 B.C. Hammurabi expanded the city-state of Babylon along the Euphrates River to unite all of southern Mesopotamia. The Hammurabi code of laws, a collection of 282 rules, established standards for commercial interactions and set fines and punishments to meet the requirements of justice. Hammurabi's Code was carved onto a massive, finger-shaped black stone stele (pillar) that was looted by invaders and finally rediscovered in 1901.^[14] In Charak Samhita says that human milk is vitaliser, bulk promoting, suitable, uncting, and is used as snuff in internal hemorrhage and saturating in pain in eyes.^[15]

CONCEPT OF DHATRI (WET-NURSE)

In Ayurveda, Acharya Charaka described *Dhatri* (wetnurse) or foster mother. Since *Dhatri* is a substitute for a mother, Ayurveda advises that a *Dhatri* should be thoroughly examined and selected before giving her the responsibility of taking care and feeding the child. Her milk should possess the qualities of a mother's breast milk and should be compatible with the child to the optimum. In other words, she should be interview for the good qualities a *Dhatri* should possess and the norms which she should fulfill before being appointed for the post of *Dhatri*.^[16]

Acharya Sushrut says that a women should be selected as *Dhatri* (wet nurse to feed the child with breast milk) who should of the same caste, of moderate build, middle-aged, free of diseases, of virtuous character, not unsteady in mind, not greedy, neither emaciated nor obese, having pure milk, her lip not drooping; breast neither sagging nor everted, not having deformities, not grief-stricken always, who is giving milk to a living child, who is affectionate, not indulging in mean activities, born in a respected family, endowed with more benevolent qualities and of brown colour-should be appointed for ensuring health and increase of the strength of the child. A wet nurse with elevated breasts makes the child ugly; she

with sagging breasts will cause the death of the child by obstructing its orifices of the nose and mouth (with her breasts).^[16]

Acharya Vagbhata advised for the arrangement of two wet nurses in conditions of inability for feeding the baby by the mother.^[17] Examination of wet-nurses (including physical, physico-psychological qualities) has been described so that breastfeeding results in proper growth and development in the child. Acharya Charaka says that wet-nurse should be *Samana-Varna*, young, modest, non-addict, similar in *Desha* and *Jati*, affectionate to the child, free from diseases, *Jivitvatsa* (having an alive child), having an adequate amount of breast milk, etc.^[18] Similarly, description was given by other Acharyas.^[19] The ear of children is punctured for protection and decoration the child should be placed on the lap of either the wet nurse or matron.^[20] Earlier, the features of excellence of breast and breast milk of wet nurse, galactagogue and galactodepepurant measures, symptoms of breast milk affected by *Vata*, etc. Treatment of the diminished one and its eight defects all these have been said.^[21]

In Charaka Sharira Sthana examination of a wet nurse, One should 'bring the wet nurse which belongs to the same *Varna*, in a youthful age, submissive, free from impatience, deformity, addictions, ugliness, and loathsomeness; born in the same place, not mean-minded or indulged in mean acts, born in a good family, having an affectionate disposition towards children, free from diseases, having living male children, having profuse lactation, free from carelessness, not sleeping on excrements, not married to a man of the lower caste, skillful in management, clean, having a dislike for uncleanness and endowed with the excellence of breasts and breast milk.^[22]

Dhatri Karma

When the wet nurse has harmonious, copious, and pure milk, she should take bath, apply after paste, put on white dresses, and wear one of these herbs - *Aindri*, *Bramhi*, *Satavirya*, *Vatyapusp*, *Viswaksenakanta*. Then taking the baby with his face towards the east, she should make him suckle the right breast first.^[23]

In Astang Sangrah the nurse (or the mother) after taking bath and applying fragrant pastes on the body daily, the a pleasant mind, wearing *Prajasthapana* herbs (which are protective to the such as *Aindridurva* etc. - Indu) on her head, should sit facing east and give her right breast first, after washing it well and pulling it (the nipple) slightly and feed the child.

Acharya Kashyap says, un-impaired (development of) strength, body parts, and longevity, growth, and development in a disease-free state along with trouble-free state of child and wet nurse are the features of pure milk. Wet nurse does not suffer from *Stanakilaka* as she eats a congenial diet at some other's place, is cared for and nourished by others, and lives in other's houses. The *Dhatri* (wet nurse), undergoing cleansing measures regularly, is praised.

Substitute of Breast Milk (During its Unavailability)

In Ayurvedic texts, there are descriptions about the substitute milk in case of non-availability of milk of mother or wet nurse. Acharya Sushruta advised that when mother or wet-nurse is unable to feed due to any reasons, Goat or Cow's milk should be given in appropriate amount until the mother or wet-nurse does not regain sufficient milk or else till the child cannot thrive properly without milk. Vagbhata^[24] advised that goat or cow's milk should be given to the child after medicating it either with the decoction of *Laghu-Panchmoola* or both *Sthiraas* and mixed with sugar. There are several nutritional, physiological, and biochemical differences between human and cow's milk. The whey protein in human milk is easily digestible and human milk lipase promotes fat digestion. The nutrients available in human milk are more readily absorbed and better utilized due to higher biological efficiency. Antibodies that are in breast milk are not in cow's milk/formula and cannot be artificially produced. The amount of protein in cow's milk/formula is at least double the amount in breast milk and is also a different and less digestible type. Cow's milk/ formula has smaller amounts of carbohydrates than breast milk. The fat in cow's milk/formula is very different than the fat in breast milk and digestibility is poor. Tetany, late-onset

metabolic acidosis, milk allergy, iron deficiency anemia, dental caries, Zn, and Copper deficiency are diseases related commonly to cow's milk feeding. In Ayurvedic classics, it is advised that if the child is given breast milk of a different woman or lactating woman is frequently changed, then the child suffers from various diseases because this changed milk becomes *Asatmya* (non-congenial).^[25]

CONCLUSION

From an ancient era to the present era there are lots of changes (in the absences of mother's milk) that occur in the nourishment of baby from mother milk to the milk bank. But there is no other food that gives full nourishment to the baby as mother milk, so nature's natural nourishment process cannot be given by any other modern advanced technologies. Ayurveda is a science of life that gives you everything in the natural form, so that we can live a better and healthy life. Ayurveda gives *Dhatri* concept for mother and baby care, diseases, treatment and same for *Dhatri* also in detail and appropriate method.

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