

# Journal of **Ayurveda and Integrated Medical Sciences**

www.jaims.in



An International Journal for Researches in Ayurveda and Allied Sciences



not o

# Journal of

# **Ayurveda and Integrated Medical Sciences**

ORIGINAL ARTICLE

December 2024

# Clinical study to evaluate the effect of Suvarnaprashan Yoga on growth and development in children

### Sahil Kumar<sup>1</sup>, Minakshi<sup>2</sup>, Vijay Chaudhary<sup>3</sup>

<sup>1</sup>Post Graduate Scholar, Department of Kaumarbhritya, Rajiv Gandhi Government Post Graduate Ayurvedic College and Hospital, Paprola, Himachal Pradesh, India.

<sup>2</sup>Professor, P.G. Department of Kaumarbhritya, Rajiv Gandhi Government Post Graduate Ayurvedic College and Hospital, Paprola, Himachal

<sup>3</sup>Principal cum Dean, P.G. Dept of Kayachikitsa, Rajiv Gandhi Government Post Graduate Ayurvedic College and Hospital, Paprola, Himachal Pradesh. India.

### ABSTRACT

Suvarnaprashan Yoga, an ancient Ayurvedic practice, is a unique combination of Suvarna and herbal formulations, primarily used to enhance mental, physical, and immune health in children. This practice has been a part of traditional medicine for centuries, especially in the context of preventive healthcare and cognitive development. Suvarnaprashan is typically administered in the form of a liquid preparation, which contains Suvarna Bhasma (colloidal gold), along with various herbal ingredients like Brahmi, Vacha, and Shankhapushpi, known for their neuroprotective and cognitive-enhancing properties. The main aim of Suvarnaprashan Yoga is to stimulate the mind, enhance intelligence, improve memory, and promote overall vitality in children. This research article explores the scientific basis, therapeutic benefits, and clinical applications of Suvarnaprashan Yoga, with a focus on its pharmacological mechanisms, safety, and effectiveness. Through a comprehensive review of existing literature, this study seeks to evaluate the contemporary relevance of Suvarnaprashan as an alternative or adjunct to modern medical treatments for cognitive and developmental disorders. Further clinical trials are recommended to validate its efficacy in pediatric healthcare, with a particular emphasis on long-term outcomes.

Key words: Suvarnaprashan Yoga, Neuroprotective, Cognitive, Children.

### **INTRODUCTION**

Childhood is a critical period of growth and development. This period also presents challenges regarding low immunity, with a greater risk of illness due to poor cleanliness and inadequate nutrition. A nurturing environment is essential for children's growth

### Address for correspondence:

### Dr. Sahil Kumar

Post Graduate Scholar, Department of Kaumarbhritya, Rajiv Gandhi Government Post Graduate Ayurvedic College and Hospital, Paprola, Himachal Pradesh, India.

E-mail: sahilkumardhiman@gmail.com

Submission Date: 08/11/2024 Accepted Date: 22/12/2024

Access this article online **Quick Response Code** 

Website: www.jaims.in

DOI: 10.21760/jaims.9.12.7

and development, providing safety and stimulation for learning. Encourage regular outdoor play to promote physical and mental well-being.

In Ayurveda, there are sixteen essential Samskara for children; Suvarnaprashan is one of them. It is a process in which Suvarna Bhasma is administered with pure Ghrita and Madhu in liquid and paste form. In Ayurveda, there are sixteen essential Samskara for children; Suvarnaprashan is one of them. It is a process in which Suvarna Bhasma is administered with pure Ghrita and Madhu in liquid and paste form. Suvarnaprashan in children can be mainly implicated in two contexts of Ayurveda: Lehana (Supplementary feeds) and Jatakarma Samskara (Newborn care). The literary meaning of Lehana is licking. So, the process of licking and gulping is called Lehana. The substance subjected to Lehana is called Lehya. In Kashyapa Samhita, a separate chapter called Lehadhyaya is

ISSN: 2456-3110 ORIGINAL ARTICLE December 2024

dedicated to Lehana Karma explaining various forms of Lehana. The purpose of Lehana karma is to promote physical and mental well-being and prevent diseases by establishing immunity. Jatakarma is the birth ceremony that helps the baby transcend from intrauterine life to extra-uterine life. According to Charaka Samhita, after the initial stabilization of the baby (Prana Pratyagamana) and cord cutting, Jatakarma should be performed. First of all, the child should be given Madhu and Ghrita. Thereafter, milk from the right breast should be given to the child.[1] Sushruta Samhita has opined Jatakarma as cleaning the vernix on the newborn's body, clearing the newborn's mouth by Saindhava and Sarpi and placing a ghee-soaked cotton on the baby's head. This is followed by cutting the umbilical cord at a distance of eight Angula from the baby's skin and tying it by a thread that is tied to the baby's neck.[2] After this baby is made to lick Suvarna Bhasma mixed with Madhu and Ghrita.

There are various formulations of gold along with herbal drugs explained by different *Acharyas* for prolonged usage in children. *Sushruta Samhita* explains *Suvarnaprashan Yoga*, which contains *Brahmi*, *Shankhapushpi*, *Madhu*, *Ghrita* and *Suvarna Bhasma* in it. This *Suvarnaprashan Yoga* enhances the child's body, memory power (*Smaranshakti*), strength (*Bala*) and wisdom (*Buddhi*).<sup>[3]</sup>

Ayurveda has a broader vision than modern immunization. It was preferred to boost immunity and thus avoid many ailments, along with gaining physical, mental, social and spiritual strength to lead a healthy and happy life. The effects of Suvarnaprashan mentioned in Samhitas are owing to the quick absorption and assimilation of gold nanoparticles contained in Suvarnaprashan. In recent years, there has been a renewed interest in drug discovery strategies where natural products and traditional medicines are re-emerging as attractive options<sup>[4]</sup> and hence, renewed interest in agents like Suvarna Bhasma. Recent research has revealed that gold nanoparticles exhibit size-dependent absorption through rat skin and intestine, with smaller particles (~15 nm) absorbed more than larger particles (>100

nm).<sup>[5]</sup> Nanoparticles can also be absorbed through a sublingual route directly into the bloodstream.<sup>[6]</sup>

Growth and development begin from conception and ends at maturity. Early childhood is a time of tremendous growth and development. compared with the first year of life, a decreased growth rate is seen in toddlers. It is the age group, where parents express concern about poor growth. "Suvarnaprashan", has been used in clinical practice for thousands of years but still there is a lack of scientific evidence to support its beneficial effects, particularly regarding its impact on height, weight, cognitive abilities, and immunity. Today, substantial scientific evidence is needed to support the beneficial effects of Suvarnaprashan. Therefore, the present study has been planned to provide reliable data to determine if Suvarnaprashan has a positive impact on these factors and establish its safety and efficacy on growth and development in children with following aims and objectives.

### **AIM AND OBJECTIVES**

- 1. To study the effect of *Suvarnaprashan Yoga* on growth and development in children.
- 2. To evaluate the clinical safety of *Suvarnaprashan Yoga* in children.

### **MATERIALS AND METHODS**

### **Selection of study subjects**

The study subjects were randomly selected from OPD and IPD of P.G. Department of *Kaumarbhritya*, Rajiv Gandhi Government Post Graduate Ayurvedic College and Hospital, Paprola, Distt. Kangra (H.P.). A total of 218 study subjects between 0 to 2 years of age were registered for the clinical trial, out of them 18 did not turn up for follow-up. These 18 study subjects were dropped out from the study and the trial was completed in the remaining 200 study subjects.

### Intervention

A total of 218 selected study subjects were randomly divided into two groups. In Group A, 105 study subjects were managed with *Suvarnaprashan Yoga* at a dose of one drop/kg/day orally. In Group B, 113 study subjects

**ORIGINAL ARTICLE** 

December 2024

were managed with a placebo drug, i.e., *Madhu* and *Ghrita*, at a dose of three drops/kg/day orally (one drop of *Ghrita* and two drops of *Madhu*).

**Duration of trial: 12 weeks.** 

**Follow ups:** Follow up at 4<sup>th</sup>week, 8<sup>th</sup> week and at the time of completion, and last follow up after 15<sup>th</sup> day and 30<sup>th</sup> day of completion of study.

### **Inclusion Criteria**

- Healthy children of age up to two years, irrespective of gender, religion, socio-economic status, etc.
- Parents of study subjects willing to participate in the trial.

### **Exclusion Criteria**

- Children above two years of age.
- Children with any congenital disorder, syndrome, etc.
- Children with acute illness.
- Children who are malnourished.
- Parents of the study subjects not willing to participate in the trial.

### **Withdrawal Criteria**

- Study subject showing any feature of adverse drug reaction.
- Parents of the study subjects not willing to continue with treatment.

### **Assessment Criteria**

### **Objective Criteria of Assessment**

### **Anthropometry**

The following Anthropometric measurements were recorded:

- Weight in kg.
- Height in cm.
- Chest circumference (CC).
- Mid-upper arm circumference (MUAC).
- Mid-thigh circumference (MTC).

### **Subjective Criteria of Assessment**

- Developmental milestone achievement: Trivandrum Developmental Screening Chart (TDSC) is used for assessment of Development before and after trial.
- Reduction in the frequency of episodes of common illnesses.

To assess the improvement in milestones, a scoring system was adopted based on the Trivandrum Developmental Screening Chart (TDSC) The scoring ranges from not attained to attained at lower limit as described below:

Milestones	Grade
Not Attained	3
Attained at Upper Limit	1
Attained between Upper and lower limit	2
Attained at Lower limit	0

### Items used in TDSC (Age range: 0-2yrs)

SN	Test items	3%	97%								
1.	Social smile	1 day	2 months								
2.	Eyes follow pen/ pencil	1 mo 3 days	3 months								
3.	Holds head steady	1 mo 3 days	3 mo 24 days								
4.	Rolls from back to stomach	2 mo 21 days	4 mo 24 days								
5.	Turns head to sound of bell/ rattle	3 months	5 mo 24 days								
6.	Transfer objects hand to hand	4 mo 3 days	7 months								
7.	Raises self to sitting position	5 mo 24 days	11 months								
8.	Standing up by furniture	6 mo 9 days	11 months								

### **ORIGINAL ARTICLE**

December 2024

9.	Fine prehension pellet	6 mo 24 days	11 months		
10.	Pat a cake	6 mo 24 days	12 mo 21 days		
11.	Walks with help	7 mo 24 days	13 months		
12.	Throws ball	9 mo 15 days	16 mo 24 days		
13.	Walks alone	9 mo 27 days	17 mo 12days		
14.	Says two words	11 mo 6 days	19 months		
15.	Walk backwards	11 mo 6 days	19 mo 15 days		
16.	Walk upstairs with help	12 mo 6 days	24 mo 15 days		
17.	Points to parts of doll (3parts)	15 mo 9 days	24 mo 15 days		

<sup>\*\*</sup>This table shows the upper and lower limits of items used for the evaluation.

### **Statistical Analysis**

Data was statistically analysed by using appropriate tests. For non-parametric data "The Wilcoxon Signed Rank Test" was used for individual groups and "Mann Whitney 'U' statistical test" was used for intergroup comparison.

### **RESULTS**

### **Effect of therapy on anthropometric parameters**

Anthropo metry	Gro ups	Mean score			%	SD ±	SE ±	W val	P val
med y		ВТ	AT	Dif f.		-	-	ue	ue
Body weight	Gro up A	11. 00	11. 90	0. 90	8. 18	0.2 9	0. 03	248 5	< 0.0 01
	Gro up B	10. 00	10. 30	0. 30	3. 00	3.5 9	0. 36	109 3	0.0 56
Height	Gro up A	80. 00	80. 20	0. 20	0. 25	13. 55	1. 35	103 4	0.0 23
	Gro up B	80. 20	80. 35	0. 15	0. 18	11. 99	1. 20	734	0.2 07

Chest Circumfer ence	Gro up A	46. 83	47. 10	0. 27	0. 57	6.7 0	0. 67	135 2	0.0 02
	Gro up B	46. 60	46. 90	0. 30	0. 64	4.5 5	0. 46	160 8	0.0 05
Mid upper arm circumfer ence	Gro up A	12. 40	12. 60	0. 20	1. 61	1.7 0	0. 17	231 8	< 0.0 5
	Gro up B	12. 30	12. 40	0. 10	0. 83	1.2	0. 13	130 3	< 0.0 5
Mid-thigh Circumfer ence	Gro up A	13. 01	13. 20	0. 19	1. 46	0.0 6	0. 01	505 0	< 0.0 5
	Gro up B	13. 00	12. 15	0. 15	1. 15	0.0 5	0. 01	505 0	< 0.0 5

# Intergroup Comparison of anthropometric parameters between Group A and Group B

Anthropometry  Group A and Group B	Mean Difference	T value	P value
Body weight	11.18	8156	< 0.001
Height	0.43	8999.500	0.010
Chest Circumference	1.21	9805.500	0.551
Mid upper arm circumference	2.44	9292.500	> 0.05
Mid-thigh Circumference	2.61	5152	< 0.001

### Effect of therapy on developmental milestones

Milest ones	Gro ups	Mean score		%	S D	SE ±	W value	p val	
		ВТ	A T	Di ff.		±	Ι	value	ue
Holds head steady	Gro up A	1. 81	0. 19	0. 99	54. 69	0. 61	0. 06	3321. 000	< 0.0 01
	Gro up B	1. 17	0. 92	0. 18	15. 38	0. 39	0. 04	325.0 00	< 0.0 01

### **ORIGINAL ARTICLE**

December 2024

	I								
Rolls from back to	Gro up A	1. 09	0. 15	0. 96	88. 07	0. 60	0. 06	3081. 00	< 0.0 01
stoma ch	Gro up B	1. 19	1. 06	0. 11	9.2 4	0. 31	0. 03	91.00	< 0.0 01
Raises self to sitting positio	Gro up A	1. 07	0. 12	0. 95	88. 78	0. 52	0. 05	3570. 00	< 0.0 01
n	Gro up B	1. 1	1. 02	0. 06	5.4 5	0. 24	0. 02	36.00	0.0 08
Standi ng up by Furnit	Gro up A	1. 14	0. 12	1. 04	91. 22	0. 51	0. 05	3828. 00	< 0.0 01
ure	Gro up B	1. 12	1. 03	0. 09	8.0 3	0. 29	0. 03	45.00	0.0 04
Walks with help	Gro up A	1. 23	0. 11	1. 12	91. 01	0. 57	0. 06	4005. 00	< 0.0 01
	Gro up B	1. 15	1. 09	0. 06	5.2 1	0. 24	0. 02	21.00	0.0 31
Walks alone	Gro up A	1. 07	0. 09	0. 99	92. 52	0. 52	0. 05	3655. 00	< 0.0 01
	Gro up B	1. 07	1. 00	0. 07	6.5 4	0. 26	0. 03	28.00	0.0 16
Walks backw ard	Gro up A	1. 19	0. 12	1. 07	89. 91	0. 69	0. 07	3240. 00	< 0.0 01
	Gro up B	1. 13	1. 05	0. 08	7.0 7	0. 31	0. 03	28.00	0.0 16
Walks upstai rs with help	Gro up A	1. 14	0. 12	1. 01	88. 59	0. 63	0. 06	3321. 00	< 0.0 01
neip	Gro up B	1. 20	1. 12	0. 07	5.8 3	0. 26	0. 03	36.00	0.0 08
Transf er object	Gro up A	1. 20	0. 10	1. 11	92. 5	0. 58	0. 06	3828. 00	< 0.0 01

	1								
s hand to hand	Gro up B	1. 11	1. 03	0. 08	7.2 0	0. 27	0. 03	36.00	0.0 08
Fine prehe nsion Pellet	Gro up A	1. 13	0. 12	1. 03	91. 15	0. 46	0. 05	4005. 00	< 0.0 01
	Gro up B	1. 25	1. 17	0. 08	6.4	0. 31	0. 03	28.00	0.0 16
Pat a cake	Gro up A	1. 13	0. 12	1. 01	89. 38	0. 58	0. 06	3486. 00	< 0.0 01
	Gro up B	1. 16	1. 06	0. 10	8.6 2	0. 33	0. 03	45.00	0.0 04
Points to part of doll (3	Gro up A	1. 10	0. 15	0. 96	87. 27	0. 45	0. 05	3741. 00	< 0.0 01
parts)	Gro up B	1. 10	1. 02	0. 08	7.2 7	0. 27	0. 03	36.00	0.0 08
Social smile	Gro up A	1. 14	0. 13	1. 01	88. 59	0. 54	0. 05	3741. 00	< 0.0 01
	Gro up B	1. 18	1. 11	0. 07	5.9 3	0. 26	0. 03	28.00	0.0 16
Eyes follow pen/p encil	Gro up A	1. 08	0. 13	0. 97	89. 81	0. 48	0. 05	3655. 00	< 0.0 01
encii	Gro up B	1. 08	1. 01	0. 07	6.4 8	0. 29	0. 03	21.00	0.0 31
Throw s ball	Gro up A	1. 15	0. 10	1. 06	92. 17	0. 40	0. 04	4371. 00	< 0.0 01
	Gro up B	1. 11	1. 03	0. 08	7.2 0	0. 31	0. 03	28.00	0.0 16
Turns head to the sound	Gro up A	1. 18	0. 14	1. 03	87. 28	0. 54	0. 05	3828. 00	< 0.0 01
of bell/ra ttle	Gro up B	1. 15	1. 05	0. 10	8.6 9	0. 33	0. 03	45.00	0.0 04

### **ORIGINAL ARTICLE**

### December 2024

Says two words	Gro up A	1. 12	0. 21	0. 92	82. 14	0. 49	0. 05	3486. 00	< 0.0 01
	Gro up B	1. 20	1. 10	0. 10	8.3 3	0. 33	0. 03	45.00	0.0 04

# Intergroup comparison of developmental milestones between Group A and Group B

Milestones (Group A vs Group B)	Mean Difference	T value	p value
Holds head steady	39.31%	13362.00	< 0.001
Rolls from back to stomach	78.83	13588.00	< 0.001
Raises self to sitting position	83.32	13983.00	< 0.001
Standing up by Furniture	83.19	14117.500	< 0.001
Walks with help	85.8	14269.00	< 0.001
Walks alone	85.98	14045.500	< 0.001
Walks backward	82.84	13754.00	< 0.001
Walks upstairs with help	88.59	13820.00	< 0.001
Transfer objects hand to hand	85.3	14142.00	< 0.001
Fine prehension Pellet	84.75	14246.500	< 0.001
Pat a cake	80.75	13834.500	< 0.001
Points to part of doll (3 parts)	80.00	14036.00	< 0.001
Social smile	82.65	14052.500	< 0.001
Eyes follow pen/pencil	83.21	14086.500	< 0.001
Throws ball	84.96	14395.00	< 0.001
Turns head to the sound of bell/rattle	78.59	13978.500	< 0.001
Says two words	73.80	13794.00	< 0.001

# Effect of therapy on hematological and biochemical parameters

Milest	Gro	Meai	n score	;	%	SD	SE	w <sub>.</sub>	Р.
ones	ups	ВТ	АТ	Dif f.		±	±	val ue	val ue
Hb gram%	Grou p A	11. 47	11. 49	0.0 2	0.1 7	0.0 8	0.0	173 8	> 0.0 5
	Grou p B	11. 89	11. 90	0.0	0.0 8	0.0 9	0.0	105 7	> 0.0 5
TLC	Grou p A	9.0 5	8.9 9	0.0 6	0.7	3.0 6	0.3 5	120 8	> 0.0 5
	Grou p B	6.5 4	6.5 1	0.0 4	0.6	2.0 8	0.2	616	> 0.0 5
ESR	Grou p A	15. 33	15. 04	0.2 9	1.8 9	4.3 5	0.4 4	134 0	> 0.0 5
	Grou p B	6.5 4	6.5 0	0.0 4	0.6 1	2.0 8	0.2	602	> 0.0 5
SGOT	Grou p A	41. 03	39. 00	2.0	4.9 4	15. 26	0.1 5	164 8	> 0.0 5
	Grou p B	31. 19	30	1.1 9	3.8 1	8.1 8	0.8	633	> 0.0 5
SGPT	Grou p A	29. 47	23. 94	5.5 3	18. 76	15. 89	1.5 9	170 7	> 0.0 5
	Grou p B	27. 95	25. 00	2.9 5	10. 55	10. 89	1.0 9	102 0	> 0.0 5
Serum Creatin ine	Grou p A	0.5 8	0.5 7	0.0	1.7 2	0.1 9	0.0	36	> 0.0 5
	Grou p B	0.7 5	0.7 6	0.0	1.3 3	0.1 1	0.0	111 5	> 0.0 5

### **ORIGINAL ARTICLE**

### December 2024

Blood urea	Grou p A	26. 13	26. 79	0.6 6	2.5 2	8.2 2	0.8 2	636	> 0.0 5
	Grou p B	27. 60	27. 50	0.1 0	0.3 6	4.2 5	0.4 3	123	> 0.0 5

# Intergroup comparison of hematological and biochemical parameters between Group A and Group B

Lab investigations (Group A vs Group B)	Mean Difference	T value	P value
Hb gram%	0.03	8396	> 0.05
TLC	1.3	10879	> 0.05
ESR	2.5	11001	> 0.05
SGOT	6.13	10715	> 0.05
SGPT	8.21	10515	> 0.05
Serum Creatinine	3.05	9104	> 0.05
Blood urea	2.88	9762	> 0.05

### Effect of therapy on frequency of common illness

Common	Grou	Mea	Mean score		%	6 SD±	SE±	W valu	P valu
imesses	ps	ВТ	AT	Diff				e	e
Cough	Grou p A	0.3 5	0.1 3	0.2 2	62.8 5	0.5 4	0.0 5	136	< 0.00 1
	Grou p B	0.3 1	0.2 2	0.0 9	29.0 3	0.2 9	0.0 3	45	0.00 4
Running nose	Grou p A	0.3 2	0.1 6	0.1 6	50	0.3 9	0.0 4	120	< 0.00 1
	Grou p B	0.3 3	0.2 8	0.0 5	15	0.2 2	0.0 2	15	> 0.05
Nasal blockage	Grou p A	0.4 1	0.2 4	0.1 7	41.4 6	0.3 8	0.0 4	153	< 0.00 1
	Grou p B	0.3 2	0.2 5	0.0 7	21.8 7	0.2 6	0.0 3	20	< 0.05

Constipat ion	Grou p A	0.4 7	0.3 2	0.1 5	31.9 1	0.3 6	0.0 4	120	< 0.00 1
	Grou p B	0.3 0	0.2 5	0.0 5	16.6 6	0.2 2	0.0 2	15	> 0.05
Loose stools	Grou p A	0.3 3	0.2 0	0.1 3	39.3 9	0.3 4	0.0	91	< 0.00 1
	Grou p B	0.4 1	0.3 7	0.0 4	9.75	0.2 0	0.0 2	10	> 0.05
Abdomin al Colic	Grou p A	0.3 0	0.2 1	0.0 8	26.6 6	0.2 7	0.0 3	45	0.00 4
	Grou p B	0.3 1	0.2 4	0.0 7	22.5 8	0.2 6	0.0 3	28	< 0.05
Vomiting	Grou p A	0.3	0.2	0.1	37.5	0.3	0.0	78	< 0.00 1
	Grou p B	0.4 1	0.3 5	0.0 6	14.6 3	0.2 2	0.0 2	15	> 0.05
Fever	Grou p A	0.3 0	0.2 1	0.0 8	26.6 6	0.2 7	0.0 3	45	< 0.05
	Grou p B	0.3 0	0.2 4	0.0 6	20.0 0	0.2 4	0.0 2	21	< 0.05
Physiolog ical	Grou p A	0.4 1	0.3 5	0.0 6	14.6 3	0.2 4	0.0 2	21	0.03 1
Jaundice	Grou p B	0.4 1	0.3 7	0.0 4	9.75	0.2 0	0.2 0	10	0.12 5

# Intergroup comparison of frequency of common illness between Group A and Group B

Common illnesses (Group A vs Group B)	Mean Difference	T value	P value
Cough	33.82	10427	> 0.05
Running nose	35	10552	> 0.05
Nasal blockage	19.59	10550	> 0.05
Constipation	15.25	10550	> 0.05
Loose stools	29.64	10500	> 0.05
Abdominal Colic	4.08	10100	0.904

### **ORIGINAL ARTICLE**

December 2024

Vomiting	22.87	10400	< 0.05
Fever	6.66	10150	> 0.05
Physiological Jaundice	4.88	10150	0.808

### **DISCUSSION**

# Pharmacodynamic Properties and Pharmacological Action

Drug	Pharmacodynamic properties		Action on Dosha	Other Properties	Pharmacol ogical properties
Brahmi	Rasa	Tikta, Kashaya Madhur a	Vata- kapha shamana and Sarvados	Hridya, Rasayana, Deepanam, Medhya rasayanam,	Antidepres sant, Memory enhancing effect,
	Guna	Hima, Sara, Laghu	hahara	Swarya, Smritiprada, Buddhi, Prajashakti,	Gastroprot ective activity, Antioxidant
	Veerya Sheeta Medho	Medhashakt ivardhana,	activity, Anti-		
	Vipaka	Swaau	Unmada vinashini.	inflammato ry,	
	Prabhav a	Medhya			Cognitive enhancem ent.
Shankh a Pushpin	Tikta, hamaka Kashaya and Vata		Tridoshas hamaka and Vata- pitta	Medhya, Rasayana, Manasroga hrit,	Learning, Memory and behaviour,
	Guna	Sara, Ushna	shamaka	Unmadanas haka, Nadi balya, Swarya.	Antioxidant activity, Antidepres
	Veerya	Ushna			sant, Antistress,
	Vipaka	Katu			Brain nourishme
	Prabhav a	Medhya			nt.
Suvarna Bhasma	Rasa	Madhur a	Tridoshas hamak	Rasayana, Deepana, Medhasmrit	Anti- inflammato ry and
	Guna	Snigdha , Laghu		iprada, Brimhana, Ojovarddha	Immunomo dulatory effect,
	Veerya	Sheeta		ka, Garaharam,	Increased brain
	Vipaka	Madhur a		Kantivardha ka, Vagshuddhi kara,	function, Antioxidant property, Cognition

				Vishanasha ka, Kshayanash aka, Unmadanas haka, Jwarahara, Shoshahara.	and learning, Anti-stress and depression.
Madhu	Rasa	Madhur a, Kashaya Ruksha, Sheeta, Guru, Picchila, Sukshm amarga nusari, Yogava hi	Tridoshas hamak	Atisara, Chhardi, Visha vikara.	Antioxidant property, Anti- inflammato ry effect, Antibacteri al activity.
	Veerya Vipaka	Sheeta Madhur a			

- Most of the ingredients of Suvarnaprashan Yoga are predominantly Madhura and Tikta Rasa, with Laghu, Sara, Guru and Snigdha Guna, Sheeta Veerya and Madhura Vipaka. Madhura Rasa contains predominantly Jala Mahabhuta which plays a significant role in enhancing the ability of mind. It may be the reason Madhura Rasa contribute to the proper functioning of senses. Ojovarddhaka property of Madhura Rasa plays an important role in enhancing the child's immune system.
- The Laghu, Sara Guna promote the proper functioning of sensory activities, mind and acquisition of knowledge. Snigdha Guna also enhances the nourishment of the functional brain and reinforces the sensory activities.
- Most of the ingredients have *Madhura* and *Katu Vipaka*, which contributes to overall enhancement of body's metabolism and facilitates proper enzymatic secretions whereas, *Madhura Vipaka* has *Saindriyaprasadaka* properties which promotes the nourishment of sensory organs and other body tissues.

ISSN: 2456-3110 ORIGINAL ARTICLE December 2024

- Brahmi and Shankhapushpi, both of which are Medhya drugs, are recognized for their specific impact on the cognitive performance achieved by inducing a neuro-nutrient effect and enhancing cerebral metabolism. Evidence-based studies also support these findings. Thus, by analyzing the benefits of Suvarnaprashan Yoga, it is evident that it aims to achieve comprehensive growth and development in children through its Rasayana effect. This includes addressing Yuktikrita Bala (balanced strength), Brimhana Karma (nourishment and growth) and Medhya Karma (cognitive enhancement).
- Suvarna Bhasma, with its micronized gold particles, enhances vitality and immune function, supports cognitive and physical development, and aids in detoxification. Together, these substances synergistically promote comprehensive physical and cognitive growth, ensuring balanced development and overall well-being.
- No untoward effect of trial drug was observed during entire study period.

### **CONCLUSION**

Group-A study subjects who were administered *Suvarnaprashan Yoga* showed better performance in growth and development parameters in comparison to the control group, specifically in terms of fine motor milestones and cognitive functions. Trial Group study subjects who were managed with *Suvarnaprashan Yoga* showed fewer episodes of illness during the study period in comparison to the control group. This may have been because of better optimization of immune system in response to the trial drug i.e., *Suvarnaprashan Yoga*. Hematological and biological parameters remained within the normal range in both the groups before and after the trial. Thus, based on improvement in subjective and objective criteria in

terms of growth and development, and fewer episodes of illness during the study period in comparison to the control group, it can be concluded that *Suvarnaprashan Yoga* may be given to the children to augment growth and development, especially during the rapid growth phase of early life.

### **REFERENCES**

- Acharya YT, editor. Sushruta Samhita: with commentaries Nibandhasamgraha by Dalhana and Nyayacandrika by Gayadasa. Reprint 2012. Varanasi: Chaukhamba Surbharti Prakashan; Sharir Sthana Chapter 10, Verse 13. p. 388.
- Parthasarathy A, editor-in-chief; Bhat BV, chapter editor. IAP Textbook of Pediatrics. 5th ed. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2013. Ch 23. p. 31.
- Sushruta Samhita Sharira Sthana Chapter 10, Verses 72,
   74.
- Patwardhan B, Vaidya AD. Natural products drug discovery: Accelerating the clinical candidate development using reverse pharmacology approaches. Indian J Exp Biol. 2010;48:220-7.
- Sonavane G, Tomoda K, Sano A, Ohshima H, Terada H, Makino K. In vitro permeation of gold nanoparticles through rat skin and rat intestine: Effect of particle size. Colloids Surf B Biointerfaces. 2008;65:1-10.
- Batheja P, Thakur R, Michniak B. Basic biopharmaceutics of buccal and sublingual absorption. In: Touitou E, Barry BW, editors. Enhancement in Drug Delivery. New York: CRC Press; 2007.

**How to cite this article:** Sahil Kumar, Minakshi, Vijay Chaudhary. Clinical study to evaluate the effect of Suvarnaprashan Yoga on growth and development in children. J Ayurveda Integr Med Sci 2024;12:58-66. http://dx.doi.org/10.21760/jaims.9.12.7

**Source of Support:** Nil, **Conflict of Interest:** None declared.

Copyright © 2024 The Author(s); Published by Maharshi Charaka Ayurveda Organization, Vijayapur (Regd). This is an open-access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by-nc-sa/4.0), which permits unrestricted use, distribution, and perform the work and make derivative works based on it only for non-commercial purposes, provided the original work is properly cited.

\*\*\*\*\*\*\*\*\*