

# Review On Concept *Dhatri* (Wet-Nurse): Ancient Approach to First Alternative Feeding in Infants

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## Abstract

Breast milk is considered as ideal source of nutrition and immunological protection for infants. In situations where the biological mother is unable to breastfeed due to insufficient lactation or illness, Ayurveda recommends the concept of *Dhatri* (wet nurse) as the first alternative feeding option. Though widely practiced in ancient times, its conceptual understanding and contemporary applicability require further exploration. Ayurvedic literatures explain the qualities, selection criteria, dietary regimens, psychological attributes, and hygienic practices related to *Dhatri*. Contemporary literature regarding breastfeeding, donor human milk, and milk banking systems were reviewed and compared. Ayurveda describes detailed criteria for selecting a wet nurse, including physical health, psychological stability, proper breast anatomy, hygienic conduct, dietary discipline, and affectionate behavior towards the child. These principles demonstrate a holistic approach aimed at ensuring nutritional adequacy, emotional nurturing, and disease prevention in infants. Contemporary neonatal care similarly emphasizes donor screening, hygienic handling of breast milk, and the importance of human milk. The Ayurvedic concept of wet nurse shares similarities with modern human milk banking systems but additionally incorporates emotional bonding, direct breastfeeding, and psychological wellbeing of the infant. The concept represents a comprehensive and holistic alternative infant feeding approach in Ayurveda. Integration of ancient principles with modern neonatal practices and screening protocols may contribute to safer and emotionally supportive infant feeding strategies. Further scientific exploration is needed to evaluate its applicability in contemporary healthcare settings.

**Keywords:** Dhatri, Wet nurse, Breastfeeding in Ayurveda, Human milk banking, Infant nutrition

## 1. Introduction

In the era of novel infections day by day the infants those fed with breast milk are less infected which signifies the role of breast milk in prevention of infection.<sup>[1]</sup> Breast milk is considered as mandatory and serves both as a source of nutrition and immunological support for the developing infant. Ayurvedic science imparts practicality in living rather than the theoretical approach. But the conceptual understanding and applicability of wetnurse is an area to be explored more. It is a distinct and unique

form of breastfeeding put forward during ancient time and which is explained in Ayurvedic literatures. 'Dhatri' as an earth, as a mother, as a wet nurse or foster mother, sacrifices herself and bid space for the budding life.<sup>[2]</sup> Practice of *Dhatri* has been followed since *Vedic* period. Ayurveda advises breastmilk for the proper growth and development of the child (*Matureva Pipet Stanya Tat Param Deha Vridhaye*). *Acharya* by considering the necessity of breast milk put forth wet nurse as first alternative for that mother who lacks breast milk.

## MATERIALS AND METHODS

Brihatryee and Ayurveda literatures explain the qualities and characteristics of wet nurse. From the demographic data to the maintenance of the breast milk which includes selection criteria (physical and psychological fitness), screening, pre-requisites, techniques of feeding. These domains are to be achieved before giving the responsibility as *Dhatri*.<sup>[3,4,5]</sup> Demographic data includes age, race, built, constitution, and locality. Age is said to be *Yauvana* and *Madhyama* (middle age) which influence the quality of breastmilk. Considering the status of *Dhathu* (tissues), being too early or late for the age may not be responsible and weak to take care of the child. *Madhyama* (moderate) built is considered as ideal where lean and obese indicates malnourishment and disease prone. The race, family, constitution, and locality should be same of mother. Race and caste are not merely the discrimination indicates the social strata sharing common food and culture which influence the breast milk by which similar qualities are nurtured and showcased in child. Same locality also helps in compensating endemic deficiencies by different food habits. Detailed explanation of physical fitness includes *Avyanga- Avirupa- Anatura* i.e. devoid of disease and deformity to prevent transmission of disease. The breast of wet-nurse should not be *Nati urdhwa* (not in high level) *Nati lamba* (not hang down), *Nati krisa* (lean), *Nati pina* (not very plump). Ideally it should be with proper nipple which is needed for proper latching and sucking. The improper latching leads to difficulty in expression of milk and causes inadequacy of milk to her own child. Wet-nurse should be devoid of 8 inauspicious physique which includes a spectrum of endocrinal issues. Milk is produced with the interaction of hormones and reflexes. Hormone plays a role in ejection and cessation of breast milk. *Dhatri* should not be a pregnant as certain disease arise from the intake of breastmilk in Ayurveda. By this the child affects from nutritional deficiency. Impairment of tissues is cause to get disease like fever, skin manifestations and neurological impacts. As far as the physical attributes are concerned psychological stability is also considered in the literatures. Any disturbance in mind such as grief, greediness, anger, without any deviated mind, unaffectionate deteriorates the breast milk. The hormones from hypothalamus are in the hand of limbic system the controller of emotions.<sup>[6,7]</sup> Besides *Brihatrayees*, *Arogya Kalpa Druma* textbook points out the role of wet-nurse as a friend of mother again signifying the affection towards the child.<sup>[8]</sup> Another phase of wet-nurse as a care taker can be interpreted with quality i.e. trustworthy, helping in proper psychological development of the child. Other qualities like *Apramatha* (careful), *Ajugupsitha* (without frustration) or any deviation of mind and extreme patience are needed for tricky handling of the child. Concept of chanting of mantra during the feeding reveals the importance of relaxation of mind for both mother and baby. As a whole wet-nurse must be with specific qualities (socially, physically and psychologically) for the beneficial to the child.

Despite of quality of *Dhatri*, the quality of breast milk is also considered. Examination of breast milk is suggested to fulfill adequate nutrition to the child and should be examined physically, chemically and

clinically. After the selection and screening of wet-nurse certain diet and regimen are explained to maintain breast milk. The proper tissue nourishment depends on this diet and regimens. A lactating mother should consume 450-500 extra calories.<sup>[9]</sup> Acharya Susrutha clearly justifies the pathogenesis of contradictory diets causing tissue impairment which in turn affects the child. Along with diet, wet nurse is advised to follow celibacy as excess activity is a cause for deterioration of breast milk. Also, she should be pure in conduct. In concise wet-nurse is not only meant for feeding but also a mother in all aspects. She must be enriched with the skillful knowledge of nursing as the baby is immature to verbally express their thoughts and feeling. It is said that cleanliness is next to godliness and hygiene is essential for contamination free environment. *Arogya Kalpa Druma* literature mentions the materials for locally cleaning the breast which indicates hygiene concern.<sup>[10]</sup> The contemporary science recommends the discard of dripped breast milk, similar concept is explained in mentioned in Ayurveda.<sup>[11]</sup> All these include the proper hygienic practices of feeding in infants.

## DISCUSSION

Other than healthy infants premature low birth weight babies in neonatal intensive care unit also in need for human milk.<sup>[12]</sup> International Milk Banking Initiative (IMBI) put forward the concept of milk bank as WHO & UNICEF declared the use human milk from other sources as the first alternative if mother cannot feed the baby. The donor should be of healthy, lactating, without any infectious disease and not under any medication. The triple protection system and serological test for some infectious disease such as HIV are advised. Even though equipment's are available to regulate the temperature, time, speed and contamination of breastmilk, the ancient method also aims the same through physical examinations. The concept of wetnurse gives the emotional fitness additionally. A wetnurse who is feeding baby, the amount of milk needed, maintenance of temperature, contamination by exposure, storage, dispatch are not at all a matter of concern. Though milk bank recommends expression of milk, direct sucking by the baby was an advantage in ancient times. Ayurveda contraindicates the usage of different variety of mixed breast milk and considered as non-congenial to baby. Breast milk bank seeks a donor with excess milk without compromising nutritional needs of their own baby. In ancient time, the number of wet-nurses for feeding purpose was two could be to balance the nutrition alternatively for both the babies. The thought, sight and physical contact of baby can stimulate milk production in *Dhatri*. There is no role for bonding between mother and child in breast milk bank while only nutritional needs are important. To manage the nurse is also a concern in ancient time. Such management makes them free from the diseases like *Stanakeelaka* (mastitis).<sup>[13]</sup> Daily purificatory therapies, proper diet and regimens were explained for them. As the enteral feeding with human milk reduces the risks in premature infants, initiatives that support the breast feeding includes baby friendly hospital initiative (BFHI) by WHO and UNICEF with the aim to increase the numbers of babies who are exclusively breastfed, to facilitate immediate and uninterrupted skin-to-skin contact, rooming in, support mothers to recognize and respond to their infants. Infant Milk Substitutes (IMS) act protects breastfeeding and prohibit the unnecessary use of artificial feeding and its commercialization. International code of marketing of breast milk substitutes promotes the practice of breast feeding to improve the health and nutrition of the child. The World Health Organization advocates the importance of a baby being close to its mother even if the mother does not feed which indicates mother is not only for feeding. Wet-nurse also aims the overall nutrition and caring

of child.

## CONCLUSION

Modern perspective of giving artificial feeding a substitute position to mother's milk is a vague notion. It should be given if necessary, according to the specified conditions. Technology developed leaps and bounds thus breast milk bank came as an alternative to other artificial feeding. The awareness and practical utility of such system must be explored more. With the breast milk can be preserved for the needy one and it can satisfy the demand of milk. But the mental hunger of the baby for care and protection must be taken care by the mother as well as foster mother. The presence of mother mentally preserves a layer of protection which could have a positive effect in future of child. Breast milk gives adequate strength and longevity and both can lead a healthy life. Nurturing the child by wet-nurse can be taken as an alternative if biological mother is not able. Practice of ancient concept can be applied with the technology and after proper screening and examination of foster mother. Further development of ancient heritage can be flourished with the researches using the developing technologies in present era.

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