Introduction

Naturopathy is a system of healing stimulating the body’s inherent power to regain health with the help of five great elements of nature-Earth, Water, Air, Fire and Ether. Naturopathy is a call to “Return to Nature” and to resort to simple way of living in harmony with the self, society and environment. Naturopathy provides not only a simple practical approach to the management of diseases, but a firm theoretical basis which is applicable to all the holistic medical care and by giving attention to the foundation of health; also offers a more economical frame work for the medicine of future generation. Though the basic Nature Cure deals only with Pancha Mahabhoota’s, the recent development advocates the practice of drugless therapies like Massage, Electrotherapy, Physiotherapy, Acupuncture and Acupressure, Magnetotherapy etc., Diet plays a major role, above all. History Nature Cure Movement started in Germany & other western countries with “Water cure” (Hydrotherapy). Water cure was synonymous with Nature Cure in those early days. The credit of making Water cure world famous goes to Vincent Priessnitz (1799-1851) who was a farmer. Dr. Henry Lindlahr and others go the extent of crediting him as “Father of Naturopathy”. The word “Naturopathy” has been coined by Dr. John Scheel in the year 1895 and was propagated and popularized in the western world by Dr. Benedict Lust. A number of Doctor of modern medicine and others became Nature Cure Enthusiasts and gradually added a number modalities within the fold of Naturopathy and scientifically developed them. Nature Cure movement gained momentum in India as Mahatma Gandhi, “Father of the Nation” became much interested in this system and included it in his programmes. He has also established a Nature Cure Hospital in Uruli Kanchan, Distt. Poona, Maharashtra which is still functioning.

Naturopathic medicine is a system of primary health care that emphasizes optimal wellness and health, disease prevention, and patient education. While in practice naturopathic physicians treat acute and chronic conditions, the primary focus of naturopathy is to support the body’s inherent abilities and empower the patient to make lifestyle changes necessary to maintain optimal health. Through in-depth history taking, physical examination, and clinical and laboratory optimal, naturopathic physicians diagnose disease, uncover individual and familial risk factors, and strive to understand the patient as the totality of body, mind, and spirit.
**Historical Background:**

Naturopathic medicine traces its philosophical roots back to the Hippocratic school of medicine (circa 400 B.C.). Its modern form derives from several 18th- and 19th-century natural healing systems, in particular hydrotherapy and nature cure, but also including homeopathy, spinal manipulation, hygienic and Thomsonian systems. Hydrotherapy was popularized by Father Sebastian Kniepp (1842-1897) of Germany, and was brought to the United States in 1892 by Dr. Benedict Lust (1872-1945). Lust later combined Kneipp’s water cure with principles of nature cure, founded by Dr. Arnold Rickli (1823-1926) of Austria. In nature cure, food, air, light, water, and herbs are used as medicines to treat illness and enhance the resiliency of an individual’s constitution (Pizzorno 1996).

Naturopathic medicine flourished in the early 1900s, and many dietary recommendations made then, such as increasing fiber intake and minimizing saturated fats, are being revisited today. Between the mid-1920s and the early 1940s, formalized medicine training, a well-organized medical society (namely, the American Medical Association or AMA), and the development of pharmaceutical medicines and new medical technologies came to the fore, contributing to the simultaneous decline of naturopathic medicine and natural healing (Pizzorno 1996). The green movement and counterculture of the 1960s redirected awareness to the importance of nutrition and health of individuals as well as the environment. Natural holistic healing began to regain popularity and naturopathic medicine was revived (Baer 1992). Recently, accredited naturopathic medical education, active research, and the scientific documentation of naturopathic concepts have led to renewed interest in naturopathic medicine and an acknowledgement of its contribution of healthcare (Pizzorno 1996).

**Scientific Principle:**

- The Healing Power of Nature (vis medicatrix naturae) is the cornerstone of naturopathic medicine. Enhancing the healing wisdom native to all living systems helps to promote, maintain, and restore normal function. Naturopathic physicians support, facilitate, and elicit healing by utilizing methods and modalities in harmony with the natural process (Downey 2000; Pizzorno 1996).
First Do No Harm (primum non nocere) means using the least invasive, most gentle therapies first, in order to avoid suppression of symptoms, support the patient’s own self-healing process, and minimize the chances of side effects.

Identify and Treat the Cause (tolle causam) occurs when a disease’s conditions – physical, mental, emotional or spiritual – facilitate the disruption of health. Symptoms are recognized as manifestations of the body’s attempt to resist, defend, adapt, or adapt, or heal itself when faced with challenges. Therefore, identification of these challenges to the organism is of primary importance when seeking to remove obstacles to health (Downey 2000; Pizzorno 1996). There is often more than one cause to be identified and manipulated.

Treat the Whole Person (appreciates health and disease as a totality) reflects the multidimensional aspects of the individual and the environment. The uniqueness of each patient and the multifactorial nature of disease require a comprehensive, individualized approach to diagnosis and treatment. Naturopathic physicians encourage patients to engage both their internal resources (e.g. spiritual beliefs, digestion) and external support (e.g., family and friends, dietary intake) to provide a solid foundation from which to move forward into a greater state of health (Downey 2000’ Pizzorno 1996).

Wellness and Prevention (the ideal “cures”) mean more than the simple absence of disease. Assessing risk factors and genetic predisposition helps naturopathic physicians make appropriate interventions and guide patients to establish balance and optimal health. In addition, through education and the promotion of good lifestyle habits, patients learn ways to avoid disease and optimize health (Downey 2000; Pizzorno 1996).

Doctor as Teacher (docere) illustrates the methods by which naturopathic physicians strive to establish a cooperative doctor-patient relationship, in order to educate patients about their health, and to encourage patient’s self-responsibility in their treatment (Downey 2000; Pizzorno 1996).

Mechanism of Action

Naturopathic medicine is not defined by its modalities. Practitioners utilize a wide variety of therapies and techniques, from the “nature cure” (i.e., health through diet, hydrotherapy,
lifestyle modification, detoxification), to the application of nutritional supplements and herbal extracts in order to manipulate the body’s biochemistry and physiology.

**Path of Nature**

- Blending of Human with Nature
- Basic Principles – Elimination, Accumulation & Cure within

**Clinical Evaluation**

In the initial visit, which typically lasts and hour or more, a thorough history is taken. This includes an exploration of diet, lifestyle, stress, and environmental factors. Following the history, an appropriate physical examination and/or laboratory evaluation may be performed. An important component of the visit is to assess the patient’s “toxic load”. Many factors by themselves may not be sufficient to initiate frank pathologies, but together they may overwhelm the body’s ability to respond appropriately. Patients are seen as partners in their case, and a treatment plan usually includes lifestyle modifications (e.g. sufficient sleep, moderate exercise, relaxation practices), dietary recommendations, and a supportive therapy such as an herbal formula, a physical modality (e.g., hydrotherapy, naturopathic manipulation) (Pizzorno 1996).

It has been increasing apparent that multidisciplinary approaches synthesizing biological, socio-cultural, Psychological & family Perspectives are necessary to better understand respiratory function & its effect on children.

Childhood seen as foundation for individual development both physiologically & Psychologically & is taken to define lifetime. Childhood is an milestone for physical vitality and personality along with mental growth. The preamble of the world Health Organization’s charter defined health as a state of complete physical, mental and social wellbeing. Not merely the absence of disease or infirmity (Monopolis et. al. 1977). Thus, health is a broader concept including physical, social and mental health. Mental health has been reported as an important factor influencing individual’s various behaviours, activities, happiness, and performance.

The vulnerability of children is increased in degraded and poor environment. Neglected and Malnourished children suffer the most. “Children are not just small adults” said Dr Terri
Damstra, WHO’s team leader for the International Research Unit, children are especially vulnerable and respond differently from adults when exposed to environmental factors, and this response may differ according to the different periods of development they are going through for example, their lungs are not fully developed at birth, or even at the age of eight & lung maturation may be the origin of chronic, respiratory disease later in life.

The development of the child depend on the many factors & they are:

1) Physiological Factors
2) Psychological Factors
3) Nutritional Factors
4) Environmental Factors

This factors are determining our lifespan and state of health. The grand total of all the choice we make in these four area is know as our lifestyle.

Physiology of the respiratory system:

Comprising the lungs and the passageways by which air reaches them, the respiratory system performs a vital function. Through the process of inhaling and exhaling air – breathing – the body is able to obtain necessary oxygen and expel carbon dioxide, the waste product of man’s basic biological process.

Respiratory tract infection in children:

Respiratory tract infection affect the nose, throat and airways & may be caused by any of several different viruses.

Triggers of respiratory tract infection are:

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URTĐ – Upper Respiratory Tract Disease Like:

The common cold, sinusitis, rhinitis, nasonal (hayfever-allergy disease), Perennial rhinitis (affect the eyes or throat), Perennial allergic rhinitis (allergic of house dust), vasomotor rhinitis (irritation in nasal mucosa), nasal polyps, pharyngitis (sore throat-bacterial infection), acute epiglottits, influenza, inhalation of foreign bodies- Impact usually occurs in the right main bronchus and produces chocking.

LRTĐ – Lower Respiratory Tract Disease:

Acute bronchitis (bacterial infection), chronic obstructive pulmonary disease (COPD), emphysema (damage of lung tissue around the respiratory bronchioles), cystic fibrosis (mucus production at epithelial surfaces), cough (chronic & acute chronic), asthma (common chronic inflammatory condition of the lung airways).

The respiratory pathology is one of the most often pathology in childhood. Especially in each & late childhood knowledge of normal structure & function and of differences between childhood & adult. Respiratory system is important for recognizing & understanding age-related disease pattern & providing effective therapy.

Main function of respiratory system in children:

1) Breathing & gas exchange function
2) Defense function
3) Metabolic function
4) Deposited function
5) Filterated function
6) Endocrine function

Breathing and gas exchange function is the vital function of human. The gas exchange via alveolar – Capillary Membrane Provides the supplying of human body the oxygen from the environment air goes through tracheal-bronchical tree into alveoli & exchange simultaneously with carbon dioxide from venous blood. If physician need to estimate the ventilation and gas exchange function in children one uses the lung volumes estimation.
**Psychological Factors:**

In an epidemiological study, Janson et al. found a clear association between psychological disturbances, such as anxiety & depression & COAD (Chronic Obstructive Air Way Disease) & Mental disturbance. Recent recognition of the complex relationship between children’s adjustment and illness has resulted in exuberating children with respiratory complication. Emotion regulation is a critical dimension of behavior expression that has been demonstrated to contribute to the development of psychopathology. Assessment of children’s behavior and parent-child interactions during a structured, challenging task found no significant group differences among children with and without asthma in their emotion regulation and negativity and in observed alone and with their mothers (Klinnert, McQuaid, McCormick, Adinoff, & Bryant, 2000). However, were related to difficulties with emotion regulation demonstrated greater asthma severity.

**Co-relation between Psycho-physiological factor:**

The accurate perception of charges in respiratory function and consequent appropriate initiation of self management is a complex skill. Inaccurate perception of respiratory system, and its Physiological & Psychological effects which may occur for variety of reasons. First there must be a perceptual capability to detect airway changes. This capability requires intact proprioceptives neurons in the lungs and respiratory muscles, and unimpaired neuronal pathways to the brain. Second the person must be motivated and able to pay attention to these inputs. Third the individual must accurately distinguish which perceptions correspondence to changes in respiratory function due to bronchoconstriction versus which perception are due to changes in anxiety levels, Emotional distress, pain or other illness. Finally the person must have the cognitive skills, knowledge and the motivation to initiate an appropriate sequences of self-care assessment and treatments.

The ability to focus attention on respiratory changes may vary between person as well as within persons, although empirical studies of relevant factors are scarce. For example, it seems possible that children with ADHD may have more difficulty than other children. The severity of their current Psychological symptoms may interfere with attention. Like wise, concurrent
stressors & resultant anxiety or dysporia may either distract attention from respiratory sensations or lead to enhanced focus & hypersensitivity in them.

The ability to distinguish physical sensations from emotional states is likely dependent on a number of factors, including familial teaching or modeling culture input, and genetic predisposition. Developmentally, Younger Children specially late childhood often complain of somatic symptoms when they feel distressed for Emotional reasons (Compo & Fritsch, 1994) in part because they have not yet learned to sort out the different states.

**Nutritional factor: Oxygen and Energy Metabolism**

Energy is essential to maintain the internal milieu or homeostasis and to support electromechanical activity of the organism. Food supplies the energy necessary for the normal physiological functions and physical activity of the body to sustain life. Food is the source of energy and it is variable to a great extent depending upon its availability and energy content (Delvin and Horton 1990 and Szepesi 1990) Normally nourished individuals have sufficient quantity substrate available for the production of energy in the body. They also possess equally sufficient compliment of haemoglobin to supply oxygen for the production of energy required for the thermodynamic functions of the body. This is the normative physiological function.

**Environmental factor: Global warming**

Global warming results from interactions between greenhouse gases, the Earth’s atmosphere, and the sun. The main greenhouse gases are carbon dioxide and methane. These, along with nitrogen oxides, sulfur oxides, ozone, and halocarbons, are produced by fuel combustion and agricultural activities. To achieve thermal balance, energy reradiated from the Earth must equal energy absorbed from the sun. Greenhouse gases trap energy in the atmosphere, causing global warming. Children may be an especially vulnerable subpopulation because of their developing physiology and anticipated long-term exposure. Internationally, two thirds of all preventable ill health due to the environment occurs in children. As products of fuel combustion, forest fires, and agricultural activities, air pollutants such as ozone, nitrogen oxides, sulfur oxides, and particulate matter have adverse respiratory effects. Worldwide asthma rates have doubled in the past 15 years. Ozone’s respiratory effects have been particularly well studied. Cough and asthma are initiated and exacerbated by ozone. Ground-level ozone induces respiratory tract inflammation, reduces lung function, and aggravates chronic respiratory disease. Children exercising in high ozone environments are 40% more likely
to develop asthma, and reductions in ambient ozone concentration are associated with reduced pediatric emergency admissions. Because warming accelerates the reaction that produce ozone, climate change may further increase breathing zone ozone concentrations. According to the World Health Organization (WHO), 5 million children die annually from diseases linked to air pollution. Compared with adults, children breathe more rapidly and more often play outdoors, leading to greater exposure to pollutants per unit mass (Figure 3). Their narrower airways result in more tissue exposure per volume inhaled and more inflammation. Further, exercise increases breathing through the mouth rather than the nose, which filters approximately half of pollutants. Polluted air hence goes straight to the lungs, increasing parenchymal damage. Because children’s respiratory systems are still developing, this damage can have longer-term impacts. Because children have less self-awareness than adults, they also often do not stop playing when they experience respiratory difficulty.

**Statement of the problem:**

Researcher proposes the problem which is related to psycho-physiological aspects and its effects on respiratory system among children. The title of the problem is “psycho-physiological aspects and its effect on respiratory system through naturopathy on children age group 5-12yrs --- positively link to global warming”

**Significance of the study:**

Researcher into the intention is to make the world aware of the importance of adapting human body to the very rapidly changing environment hence helping them to lead a better life in not so predictable and friendly environment by naturopathy and humans merging and adapting ability.