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CHIEF EDITOR – PRAMOD PRAKASHRAO TANDALE

Effect Of Medhya Rasayan In Manas Rog W.S.R. To Alzheimer's Disease- A Single Case Study

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Abstract-

Introduction -

Alzheimers is the most common form of dementia. It is neurodegenerative brain disorder.

Alzheimers disease causes a deterioration in the brain by destroying the nerve cells. there by leading to reduction in responses by other nerve cells. Medhya Rasayan has been dyulge as a memory enhancing in classics of ayurveda hence this study has been under taken to affirm its role in dementia predominant disorder i.e. alzheimers disease.

Aim and objective- "To Study The effect of Medhya Rasayan In Manas Vyadhi With Special Reference Alzheimers disease"

To review the Ayurvedic herbs acting on the Alzheimer's disease.

Material and method- The 64 year old male patient who was recently diagnosed for alzheimers disease and having complaints of memory loss, disorientation, difficulty in learning, decline in ability to perform routine task, changes in behavior. since 3 month and he was approached to our OPD. He was prescribed Medhya Rasayan 10 gm BD for consecutive 3 month and was assessed clinically.

Observation & Result: Patient was assessed on the basis of clinical features and GP-Cog test. After administration of medhya rasayan for 3 month, there is marked improvement seen. Rasayana that not only help in improving brain functions but also have overall rejuvenation of body. Medhya Rasayana helps in improving the brain functions specifically act on Smriti (Memory).

Conclusion- 1. Medhya rasayan showed marked improvement in studied case.

Key wards- manas rog, alzheimers disease, medhya rasayan,, GP-Cog test.

Introduction:

Alzheimer's disease is a progressive Neuro-degenerative disorder in which a gradual decline in the memory along with one area of higher intellectual function is involved. The domains affected are cognition, daily functioning and behavior. The cognition includes memory orientation and judgment. Alzheimer's disease is the most common form of dementia, among middle-aged and older adults. Although AD develops differently for every individual, there are many common symptoms. Early symptoms are often mistakenly thought to be 'age-related' concerns, or manifestations of stress. In the early stages, the most common symptom is difficulty in remembering recent events, known as short term memory loss. When AD is suspected, the diagnosis is usually confirmed with tests that evaluate behavior and thinking abilities, often followed by a brain scan if available: however, examination of brain tissue is required for a definitive diagnosis. As the disease advances, symptoms can include confusion, irritability, aggression, mood swings, trouble with language, and long-term memory loss. As the person's condition declines they often withdraw from family and society. Gradually, bodily functions are lost, ultimately leading to death. According to Ayurveda, learning or acquisition of knowledge is a result of successive and complex interaction and coordination of Atma, Indriyas (cognitive organs), Mana (psyche) and Indriyartha (sense organs). The functioning of these factors is governed by Tridosha (Vata, Pitta and Kapha) and Triguna (Sattva, Raja and Tama) in a

specific coordination and balance. Any disturbance in these *Tridosha* and *Triguna* will cause disordered functioning of *Indriya*,(cognitive and motor organs) *Mana* (psyche) and *Buddhi* (intellect) leading to impaired memory. *Ayurvedic* drugs can help in the management of Alzheimer's by making these *Tridosha* and *Triguna* in a well balanced state and also by providing *Medhya* (intellect promoting) effect to improve the memory of the patients.

Classics of *ayurveda* mentions a list of herbs known for nortopic activity as well as their multimensioned utility in various condition *medhya rasayan* mentioned in *charak rasayan pada* is a group of four medicinal plants that can be used singly or in combination to boost memory and intellect in present study on attempt has been made to explore utility of *Madhya rasayan* in AD.

Case History -

A male study individual of age 64 yrs residing in Raigad district retired visited to OPD with following complaints.

Presenting Symptoms –

- Loss Of Memory
- Disorientation
- Difficulty In Learning
- Decline In Ability To Perform Routine Task
- Changes In Behavior

Since 3 Months

H/O of Present Illness-

Study individual was symptomless before 2 years. Then Gradually emerging symptoms where short term memory loss, Disorientation, Difficulty In Learning, Decline In Ability To Perform Routine Task.

In progression behavioral changes appeared since 3 month hence study subject approach for management.

History of past illness-

No H/O – DM, HTN

Family history - Nil

ASHTAVIDH PARIKSHA:

- *Nadi* 80/min
- Mal Malavshtambha
- Mutra Samyak
- Jivha Saam
- Shabda Dysarthria
- Sparsh Anushana
- **Druk** Prakrut
- Aakruti Madhyam

<u>O/E</u> :-

- ➤ GC- fair
- T- Afeb
- ➤ P- 80/min
- ➤ BP- 130/80 mm of Hg

P/A:-

➤ Soft ,Non tender

<u>S/E</u> :-

> RS- AEBE clear

> CVS- S1 Murmur S2 normal

> CNS-conscious, oriented

P/H:- Bowel- Constipation

➤ Bladder- Normal

> Appetite- Loss of appetite

> Sleep- Disturbed

> Thirst- Normal

Investigations Advised-

- > CBC ESR
- ➤ B12
- > Thyroid
- Diagnosis confirmed with GPCOG- Screening Test

Findings-

SUBJECTIVE -Loss Of Memory - GPCOG- Screening Test (General Practitioner Assessment Of Cognition)

- -Disorientation
- -Difficulty In Learning
- -Decline In Ability To Perform Routine Task
- -Changes In Behavior

	Tratment Plan	Jen.
Follow up	Symptoms	Treatment
FRIST VISIT – 5/8/2017	-Short term memory loss +++ -Disorientation +++	1. Bramhi vati 250mg BD
5/8/2017	-Disorientation +++ -Difficulty in learning ++ -Decline in ability to perform routine task ++	2. Agnitundi vati 250mg BD (Before food)
	-Changes in Behavior+	
12/8/2016	-Short term memory loss +++ -Disorientation ++ -Difficulty in learning ++ -Decline in ability to perform routine task ++ -Changes in behavior+	Bramhi vati 250mg BD Shirodhara with jatamansi phant (continues for 7 days)
19/8/2016	Short term memory loss +++ -Disorientation + -Difficulty in learning + -Decline in ability to perform routine task + -Changes in behavior	1. Medhya rasayan 10gm BD with honey

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Cont		
Follow up	Symptoms	Treatment
3/9/2017	Short term memory loss ++ -Disorientation + -Difficulty in learning + -Decline in ability to perform routine task↓ -Changes in behavior↓	1. Medhya rasayan 10 gm BD with honey
17/9/2017	-Short term memory loss + -Disorientation + -Difficulty in learning + -Decline in ability to perform routine task↓ -Changes in behavior↓	Medhya rasayan 10 gm BD with honey
2/10/2017	-Short term memory loss+ -Disorientation ↓ -Difficulty in learning -Decline in ability to perform routine task↓ -Changes in behavior↓	Medhya rasayan 10 gm BD with honey
2/11/2017	-Short term memory loss+ -Difficulty in learning ↓	Medhya rasayan 10 gm BD with honey

Mode of Action-

Initial line of treatment (Bramhi vati / Agnitundi Vati)

Tranquilizer, stress Anxiety Deepan / pachan/ mood elevator shirodhara with jatamansi phant



(madhur vipaki shit virya) MEDHYA RASAYAN

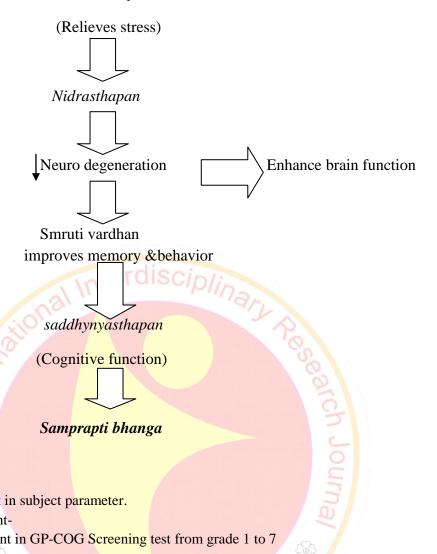


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Manasdoshahar prabhav



Endpoint outcomes

Primary Endpoint-

Significant improvement in subject parameter.

Secondary Endpoint-

Remarkable improvement in GP-COG Screening test from grade 1 to 7

Discussion-

AD is a neurodegenerative disease which can be considered as an irreversible disorder and results in progressive impairment of cognition function and behavior. The histological hallmark of AD include neural and synaptic loss and excitotoxicity. Herbs that fall into the ayurvedic classification of medhya rasayan provide excellent support for AD. There is no definite evidence of the drug to slow the progression of the underlying disease.

Process but it temporarily stabilize or delay worsening of memory problems and other cognitive symptoms. Temporary stabilization also proves to be valuable to the sufferers.

Centell asiatica has been desnbed in classic to possess CNS effect such as stimulatory nervine tonic, rejuvenate, sedative, tranquilizer and intelligence promoting herb. Study shows that it has cognitive enhancing and antioxidant properties its extract selectively decreases amyloidal β levels in hippocampus of Alzheimer's disease in animal model it is stated that it can impact the amyloidal cascade altering amyloidal β pathology and modulating components of the oxidative stress response that implicate neurodegenerative changes that occur in Alzheimer.

Shankhpushpi is an age old herb used as a nervin tonic for improvement of memory and cognitive function. A wide range of secondary metabolites from shankhpushpi are responsible for nootropic and memory enhancing property. It is believed that shankhpushpi calms the nerves by

regulating the body production of stress hormone. It has antioxidant property. It enhance memory by increasing functional growth of neurons.

Guduchi is known as an adaptogen or rejuvenator it has immunomodulatry, antioxidant properties along with several other recent studies underscores the potential antis tress properties of guduchi. The antis tress action has been shown to be beneficial in depression and in improving cognition and memory studies has shown it to be beneficial in improving cerebral ischemic prevention of oxidative stress injury and regulation of cytokines are possible mechanism involved in these beneficial effect.

Yashtimadhu also has effect against the cognitive impairment observed in AD. This effect is mediated by antioxidant action against oxidative stress. It enhance the learning ability and memory.

Thus all the ingredients from *medhya rasayan* combinely act for neuroprotection and proves to be effective in management of AD by decreasing neurodegeneration stress. It improves cognition, enhances memory and beneficial in behavioral changes.

Conclusion -

- Medhya Rasayan showed significant improvement in the present case.
- No adverse effects were observed.
- Central antioxidant properties are thought to be a key mechanism in improving cognition in Alzheimer's disease by the study drug.
- Direct establishment of *medya rasayanm* to nervine regeneration needs to be ascertain so as to come out with scientific evidence.

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