

Effect of Ashvasan Chikitsa and Jatamansi Ghana Vati in Mental illness**1. Dr Manoj Kulkarni****2. Dr Sharvari Kulkarni**

1. M.D. (Ayu) Professor ARAC, Manchi Hill, Sangamner

2. M.D. (Ayu) Associate Professor

vdmanoj007@gmail.com**Abstract**

Mental illness is one of the major diseases affecting large number of people. It is very hard to cure as it requires long term treatment and counseling. According to our Acharyas, involvement of Manas should never be neglected. Charakacharya describes 'manasah sadanam' as a symptom along with vaichitya, arati and glani.

Present study was conducted on patients having various symptoms of manas vikriti like vaichitya, arati, glani, nairashya were observed. So Ashvasana chikitsa and Jatamansi Ghana vati were started. Patients were assured and motivated for the long term treatment and counseling.

Annamayativam of mana, ashraya of mana that is Hridaya and Rasavaha srotas were considered in the samprapti of Mental illness. Because main dooshya in mental illness is Rasavaha srotas and its moola sthana 'Hridaya' is also ashraya sthana of mana. According to Charakacharya, there is a relation between 'mana poshana' and 'anna sevana'. So these dooshya were treated accordingly.

In present study, significant results were observed in the patients with Jatamansi Ghana vati and Ashvasana chikitsa given along as a treatment.

Present study concludes that there is a significant role of Ashvasana chikitsa and Manas chikitsa in Mental illness.

Key words – Ashvasana chikitsa, mental illness, Manas chikitsa, jatamansi ghanavati

Introduction

In the huff & puff of life, every individual is confronted with mental illness. According to the state of mind, human life can be classified in two different ways. Firstly, easy going, expected and favorable things to mind give feeling of satisfaction and happiness. On the other hand, some bad, unexpected and unwanted situations create negative approach of mind. Both these things are called as 'sukha' and 'dukha' in Ayurved. To deal with these things, mental health is the need of hour.

In day-to-day routine, stress is unavoidable, unwanted and undesirable factor of our life. Besides running away from the stressful situations, stress management helps us to tackle with stress by easier and friendly ways. This can be achieved by Ashvasana chikitsa – an ancient Ayurvedic healing practice. Mental illness, stressful situation and

equilibrium status of mind can be easily maintained by ashvasana chikitsa and jatamansi ghanavati.

Aims and Objectives

- ▶ To see whether the ashvasan chikitsa is important in Mental illness
- ▶ To observe the efficacy of jatamansi ghanavati and ashvasana chikitsa in mental illness

Materials and Methods**Jatamansi Ghanavati**

It was prepared by ghanakriya that is jatamansi kwath was boiled up to get concentrated and jatamansi powder was added to it and vati was made of size 500mg.

This was a prospective, pilot study involving patients with symptoms of mental illness. Patients were given according treatment of mental illness along with jatamansi ghanavati and ashvasana chikitsa. Study was carried out at college hospital. Study period was April 2018 to Dec 2018. The

duration of administration of jatamansi ghanavati and ashvasana chikitsa was 6 weeks for each patient.

Inclusion criteria

1. Patients diagnosed as mental illness
2. Patients between age 25 to 50 years
3. Patients who are not taking any other medicines
4. Patients having symptoms related to manas like irritation (vaichitya), loss of interest in activities (arati), difficulties in concentration, insomnia and sleep latency period.

Exclusion criteria

1. Patients below 25 and above 50 years
2. Patients taking medicines for other problems like DM, HT, Thyroid, Psychiatric Drugs, Depression etc.
3. Patients having symptoms related to manas were not seen.
4. Patients having any other treatment.

Study Procedure

Each patient was advised to take 3 jatamansi ghanavati along with the treatment of grahani after meals with warm water for 6 weeks and ashvasana chikitsa was done accordingly for the motivation of patient.

In ashvasana chikitsa along with positive motivation by means of self instructions, stress relieving techniques were used like meditation, pranayama and imagery techniques.

Analysis and Assessments

As it was a pilot and low sample study that means less than 30 patients were involved, percentage and graphical analysis was done instead of parametric tests and summarized in tabular form.

Assessment Criteria

It was as follows

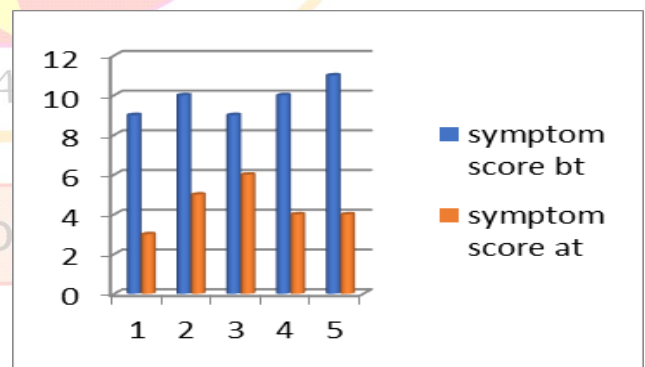
1. Irritability (Vaichitya)
 - Absent : Normal behavior
 - Mild : irritable but calms in few min that is less than 30 min
 - Moderate: Irritable and heart rate increased more than 30 min

Severe: disturbance in routine through whole day.

2. Loss of interest in activities (Arati)
 - Absent: Normal behavior
 - Mild : Feeling dull while doing routine work
 - Moderate: no interest in day to day activities, only mechanical work
 - Severe: Unnessisory thoughts, feeling depressed whole day
3. Difficulty in concentration
 - Absent: Normal behavior
 - Mild: can concentrate for few minutes
 - Moderate: can concentrate for some self instructions
 - Severe: can not concentrate at all.
4. Insomnia
 - Absent : greater than 6 to 7 hours
 - Mild: 4 to 5 hours
 - Moderate: 2-3 hours
 - Severe : less than 2 hours
5. Sleep Latency
 - Absent : less than 30 min
 - Mild : 30 min to 1 hr
 - Moderate : 1 hr to 1 and half hours
 - Severe : more than 1 and half hours

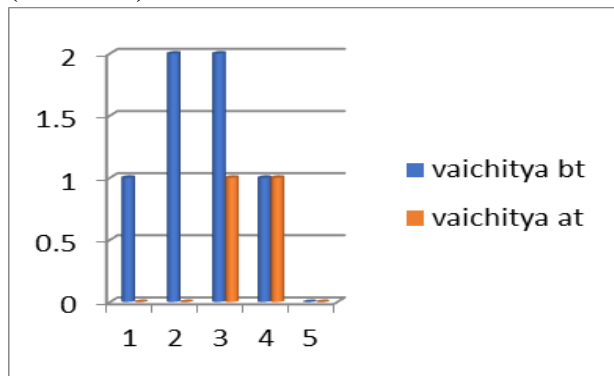
Results and Discussion

Symptom Score

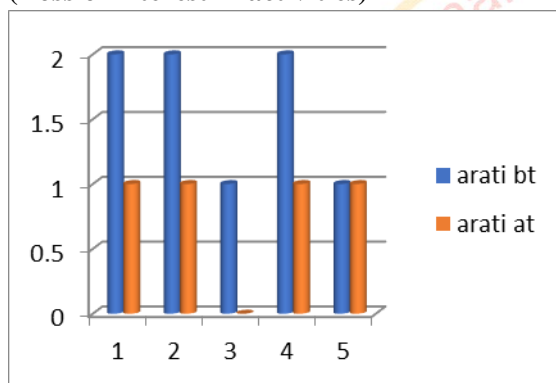


About 8 patients were screened from which 5 patients were selected to study. The period of treatment was 6 weeks.

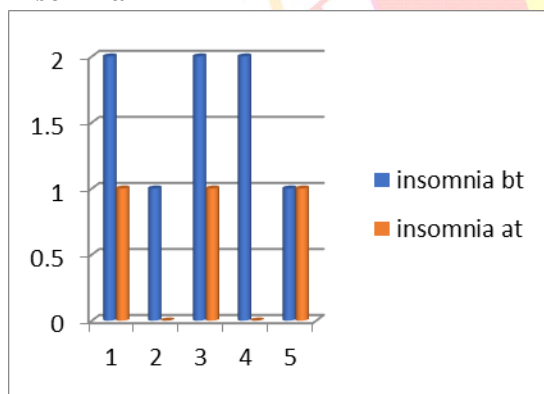
**Vaichitya
(Irritation)**



**Arati
(Loss of interest in activities)**



Insomnia



In patients irritability (vaichitya), loss of interest in activities (Arati), Difficulty in concentration, insomnia along with sleep latency was reduced after 6 weeks of treatment that is administration of jatamansi ghanavati and ashvasana chikitsa. While treating mental illness before administration of above said treatment, symptoms related to manas showed no significant improvement. As it was a pilot and low sample study that means less than 30 patients were involved, percentage and graphical analysis was done instead of parametric tests and summarized in tabular form.

Discussion

Now a days a high percentage of population is suffering from mental illness. The main causes were observed as changed lifestyles, negative thinking and stress, pramitashana, anashan, vishamashan, adhyashan, and consuming food without following aahara vidhi vidhan. Annava srotas get contaminated. Sthoolapachan and sookshmapachana also get hampered and apachit aahararasa and rasadhatus are generated. By which moolasthanas of rasadhatus that is hridaya is hampered which is also sthana of manas. It causes manas vikriti symptoms like vaichitya, arati and some symptoms which has strong involvement of manas, an ubhayendriya.

Like mental health we can find some symptoms which prove involvement of mana indriya in other diseases also. As well as we can find ashvasan chikitsa advised for many diseases in our texts viz pittadosh samanya chikitsa.

Similarly jatamansi has a nervine, mild sedative, antispasmodic and antioxidant activities which helps in the treatment of mental health. It has long history of use in Ayurved and Siddha medicine as rasayana and medhya rasayana as well. It is used to promote memory and concentration and relative anxiety. It also has good effect on attention deficit disorders.

Jatamansi has been studied extensively for research purpose for its action. alkaloids in jatamansi helps to repair damaged neuron by augmenting kinase, the protein involved in the synthesis of neuron to replace old ones. Depleted synaptic activity is thus restored, leading to enhance memory function and concentration.

Conclusion

The study concludes that there was a significant effect of jatamansi ghanavati and Ashvasan chikitsa on mental illness.

More research related to this topic should be done in large scale so that it will be helpful in patients like stress, mental illness and related some other entities.

Bibliography

1. Charakasamhita with chakrapani teeka , chaukhambha publication

2. Bharatiya sanskritik kosh edited by mahadevshastri joshi volume 6
3. Ayurvediya shabdakosh
4. Chemistry and Pharmacology of Indian Medicinal Plants by Dr Mukund Sabnis, Chaukhambha Publication 2006
5. Cognitive behavioral treatment of insomnia by Michel paulis 2005
6. Sleep, a comprehensive handbook by Toefilo L 2006
7. Doctors guide to natural medicine, the complete and easy to use by Paule Barny 1998
8. Advanced abnormal Psychology by Michel Hersen Vincent b. van hasselt second edition 2000
9. International Journal of Drug Discovery and Research 2(4), oct-Dec 2012.

