



## AYURVEDIC MANAGEMENT OF SCHIZOPHRENIA: A CASE STUDY

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Article Received on 04/07/2019

Article Revised on 25/07/2019

Article Accepted on 15/08/2019

### ABSTRACT

Schizophrenia is the commonest and widely distributed psychiatric disorder which affects the subjects, along with their families. The condition is highly compensating the quality of life of the affected. Schizophrenia is characterized by disturbances in thought, verbal behavior, affect motor behavior and relationship to external world. A good number of patients opts *Ayurvedic* treatment to get rid of antipsychotic medication and also for better quality of life. The present case study was done on the previously diagnosed case of Schizophrenia patient, who was on his regular modern medications along with this *Ayurvedic Sthanik chikitsa (Nasya, Shirodhara, Shastikshali pindsweda)* was given according to *Ayurvedic* principles of treatment. The significant effect was found in various Subjective criteria.

**KEYWORDS:** Schizophrenia, *Sthanik chikitsa*, *Nasya*, *Shirodhara*, *Shastikshali pindsweda*.

### INTRODUCTION

The mental health is deteriorating day by day all over the world, the cause being many and varied. Among the psychiatric disorders, Schizophrenia is a major condition affecting almost 21 million people worldwide, with almost 50% of them living without adequate support.<sup>[1]</sup> Schizophrenia is characterized by disturbance in thought, verbal behavior, affect motor behavior and relationship to external world. The incidence of schizophrenia is currently about 0.5/1000 and the point prevalence is about 0.5 – 1%.<sup>[2]</sup>

According to *Ayurved 'Unmada'* (Psychosis including Schizophrenia) is a disorder of mind caused by imbalance or vitiation of *doshas* i.e. *Vata*, *Pitta* and *Kapha*. Based on the vitiation of *dosha* different types of *Unmada* like *vataj Unmad*, *Pittaj Unmad*, *Kaphaj Unmad* have been described in *Ayurvedic* classics.<sup>[3]</sup> Use of modern antipsychotic medicines is accompanied by various side effects like, Insomnia, Mood changes, Mental confusion, Dizziness, Irritability, Nausea, Hypersalivation and Clumsiness etc. due to these many people have been opting *Ayurvedic* treatment to explore safe, alternative cost effect, reliable and with no or minimal side effects for the treatment of various Psychiatric disorders including schizophrenia.<sup>[4]</sup>

A good number of patients opts *Ayurvedic* treatment to get rid of antipsychotic medication and also for better quality of life. The present case study was done on the

previously diagnosed case of Schizophrenia patient, who was on his regular modern medications along with this *Ayurvedic Sthanik chikitsa* i.e. *Sarvang Shastikshali pindsweda*, *Shirodhara* with *Dashmool siddha taila* and *Nasya* with *Panchendriya vardhan taila* was given according to *Ayurvedic* principles of treatment. The significant effect was found in various Subjective criteria.

### Aim

To improve the quality of life of person affected with Schizophrenia.

### Objectives

- 1) To assess the efficacy of selected protocol in Schizophrenia
- 2) To compare the efficacy of the selected protocol in improving the quality of life of person affected with Schizophrenia.

### MATERIAL AND METHODS

#### Type of study - single case study

#### Clinical intervention

A 28 years old male, previously diagnosed case of schizophrenia was admitted in IPD of our hospital with chief complaints of 1. *Anidra* (Insomnia) 2. *Atichinta* (excessive worry) 3. *Bhaya* (Fear) since last four years. Patient came along with his father and he was diagnosed as having "Schizophrenia" and has been taking antipsychotic medications (Clozapine, Amisulpride)

regularly since last four years. Patient wants to shift to *Ayurvedic* treatment as he has been suffering with Mental confusion, Insomnia, Anxiety, Hypersalivation.

### History and Investigations –

Past History – K/C/O Schizophrenia since 4 year.

H/O Acanthosis Grade 2 Since 1 year.

Family History – No.

### Drug History

- 1) Tab Sizopine 25 mg 1HS (Clozapine)
- 2) Tab Zaporil 12.5 mg ½ Morning (Clozapine)
- 3) Tab Solaze (Amisulpride) 100 mg 1OD

Investigations - TSH - 1.49 HB – 11gm%, BSL (R) – 78 mg /dl (27/12/2018)

### Examinations – (27/12/2018)

Systemic examination-

General examination-

RS – AEBE

P-70/min

CVS – S1S2 N

BP-120/90mmof Hg

CNS – Concious and oriented but confused

Wt.- 83kg increased since 4 yrs

### Nidan Panchak

#### Hetu

- 1) Ahara – Paryushita Ahar, Junk foods (*Vada pav*, *Pavbhaji*, *Pani-puri*), *Aniyamita Bhojana*
- 2) Manas – *Mansik Tanav* (Job related), *Bhaya*, Negative thinking

*Purvarupa* – *Manasika Tanav*, *Bhaya*

*Rupa* – *Anidra*, *Bhaya*, *Atichinta*

### Samprapti Ghataka

- 1) *Dosha* – *Sharirika* – *Vata Pradhan* (*Prana*, *Vyan*, *Udan*) *Manasika* – *Raja*, *Tama*
- 2) *Dushya* – *Mana*
- 3) *Adhithana* – *Hrudaya*, *Manovaha strotas*

### Assessment Criteria

#### 1. Anidra (Insomnia).

1	6-8 hours sleep / 24 hours	0
2	4-6 hours sleep / 24 hours	1
3	2-4 hours sleep / 24 hours	2
4	0-2 hours sleep / 24 hours	3

#### 2. Atichinta (Anxiety)

1	No Anxiety	0
2	Feeling of nervous, anxious or on edge	1
3	Not being able to stop or control worrying	2
4	Worrying too much about different things	3
5	Becoming easily annoyed or irritable	4

### 3. Bhaya (Fear)

1	No fear	0
2	Fearful only at reasonable cause	1
3	Fearful even in reasonable cause	2
4	Always fearful emotion	3

### Intervention

According to *Ayurveda* it may be considered as a case of *Unmada* with *vata* predominance treatment given as-

1. *Sarvanga shastikshali pindasweada* - 30 min OD for 30 days
2. *Shirodhara with dashamoola siddha taila* - 40 min OD for 30days
3. *Nasya – Panchendriya vardhana taila* - 4-4 Bindu (Drops) BD for 30 days

### Assessment After Treatment

Symptoms	Before Treatment (27/12/2018)	After Treatment (27/01/2019)
<i>Anidra</i> (Insomnia)	3	1
<i>Atichinta</i> (Anxiety)	4	2
<i>Bhaya</i> (Fear)	3	1

### DISCUSSION

1. *Shastikshali Pindsweda* – Skin (*sparshanendriya*) is considered to be site of *vata*.<sup>[5]</sup> *Vata dosha* is the *Niyanta* (controller) and *Praneta* (conductor) of the mind, the inspirator of all the senses, the conveyer of all the senses – stimuli. From among the senses, the sense of touch pervades all the others and has the mind inherent in it.<sup>[6]</sup> Hence *Sarvang Shastikshali pindsweda* given in this case. This treatment measures when applied directly on the skin lead to correction of the deranged functions of *vata*, which in turn corrects the impaired functions of mind.

2. *Shirodhara* - *Shirodhara* works as *samvahana* (gentle massage) on the head and this re-establishes the function of *vata* and *mana* because skin (*sparshanendriya*) is the *chetosamavayi* and the *vyapaka vata* is seated in it.<sup>[7]</sup> In the present case *dashamool siddha taila* was used because *dashamoola* and *tila taila* both are considered as best in *vata* disorder and hence their synergetic action may control the aggravated *vata* more rapidly. As there is dominance of *vata* in insomnia, *dashamoola siddha taila* used in this case.

3. *Bruhana nasya* - “*Dwaram hi shiraso nasa*”<sup>[8]</sup> – As *samprapti* of disease is *vataprakopaka* and symptoms are *urdhwajatrugata* hence *Bruhana nasya* is administered. Drugs of *panchendriya vardhanaa taila* are having *vatahara* property with *snidgha* and *ushna guna*.

## CONCLUSION

Schizophrenia is causing significant declining in the quality of life of this patient, instead of all the advancements in the modern psychiatry, apart from the adverse effect of the therapy. *Ayurvedic* management protocols are being tried with significant outcome in psychiatric conditions. Selected protocols are seems to be effective in the symptoms of this patient. The ultimate aim of *Ayurvedic* treatment is a balanced state of mind body and the sensory faculties (*indriyas*) and is helpful for condition like schizophrenia.

## REFERENCES

1. Sadock, Benjamin James, Virginia Alcott, synopsis of psychiatry. 10<sup>th</sup> edition, Lippincott Williams and Wilkins, New delhi, 2008; 5(13): 467.
2. Ahuja N, A short textbook of psychiatry, Schizophrenia, 5<sup>th</sup> edition, New delhi, Jaypee publications, 2002; 56.
3. Sarkar S, Mishra BR, Praharas SK, Nizamie SH, Add on effect of Brahmi in the management of Schizophrenia. Journal of Ayurveda & Integrative medicine, 2012; 3: 223- 225.
4. Sharma M, Sahu S, Khemani N, Kaur R, Ayurvedic medicinal plants as psychotherapeutic agents – A review. International journal of applied biology & pharmaceutical technology, 2013; 4: 214 – 218.
5. Vagbhata. Ashtang Hridaya, sutra Sthana, 12/1. In: Brahmanand Tripathi, editor. Reprinted ed. 2012. Chaukhamba Surbharati Prakashan, 156.
6. Charaka. Charak Samhita, Sutra Sthana, 12/7. In: Acharya Vidyadhar Shukla, Ravi Dutta Tripathi, editor. Reprinted ed. Chaukhamba Surbharati Prakashan, 185.
7. Charaka. Charak Samhita, Sutra Sthana, 11/38. In: Acharya Vidyadhar Shukla, Ravi Dutta Tripathi, editor. Reprinted ed. Chaukhamba Surbharati Prakashan, 2011; 173.
8. Charaka. Charak Samhita, Siddhi Sthana, 2/22. In: Acharya Vidyadhar Shukla, Ravi Dutta Tripathi, editor. Reprinted ed. Chaukhamba Surbharati Prakashan, 2011; 468.