



ROLE OF SHIRODHARA WITH ASWAGANDHA OIL IN THE MANAGEMENT OF INSOMNIA

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ABSTRACT

Shirodhara is an important therapeutic measure in *Ayurvedic* system of medicine because of its simple administration and efficacy in variety of life style disorders. *Shirodhara* is a purifying and rejuvenating therapy designed to eliminate toxins and mental exhaustion as well as relieve stress and any ill effects on the central nervous system. *Shirodhara* is a unique form of ancient therapy of pouring oil on the forehead from a specific height and for a specific period continuously and rhythmically. Allowing the oil to run through the scalp and into the hair. Now a day's insomnia is a common problem in society. Insomnia is considered as *Anidra* in *Ayurveda*. Almost every person is indulging in *VatavardhakAhara-vihara*. In *Anidra* vitiated *VataDosha* is the main culprit. Oil therapy is best suitable for *VataDosha*. *Aswagandha* oil has *Vataghna* property. So, *Shirodhara* with *Ashawagandha* oil was selected for this work. Total 30 patients were randomly selected for this open study. *Shirodhara* was done for 45 minute on each participant for 14 consecutive days. Insomnia Severity Index (ISI) was used to evaluate the severity of insomnia as well as to determine the response to *Shirodhara* therapy. Data were collected at baseline, end of the treatment (day 14) and 4 week after the treatment ended (follow-up). Highly significant result was found in the study. *Shirodhara* with *Ashawagnadha* oil was beneficial for moderate to severe insomnia. *Shirodhara* is a effective therapy in the management of insomnia. In this therapy no side effect was noticed such as letharginess which are common in modern treatment.

KEYWORDS: *Shirodhara*, *Ashwagandha* oil, *Anidra*, Insomnia.

INTRODUCTION

Ayurveda is one of the most ancient medical sciences of the world. It conceives and describes the basic and applied aspects of life process, health, disease and its management in terms of its own principles and approaches. As man has entered in 21st century with modernization in each and every walk of life, he has also paid for it by living in several stressful psychological conditions. The response to the psychological conditions varies person to person because each individual has different psychic and bodily constitution. However, these stressors play certain role in the development, progression, prognosis as well as management of the disease. Human life is considered as the invaluable opportunity to achieve the prime goals of life viz. *Dharma*, *Artha*, *Kama* and *Moksa*. To achieve all these things, one needs a healthy and calm life.

Aahara, *Nidra* and *Bramhacharya* are described to be the *Trayopasthambas* (Three supportive pillars). Hence, Sleep is one of the essential factors to lead a healthy life. It has been rightly stated by *Acharya Charaka* that happiness & misery, proper & improper growth, good

strength & weakness, potency & sterility, knowledge & ignorance and life & death of an individual depend on proper and improper sleep. It means *Anidra* is directly affecting our physical and mental health. Insomnia (inadequate quality and quantity of sleep) may be a symptom of stressful life style, depressive illness, anxiety disorders, any psychiatric conditions or any other pathological conditions. Whatever may be the cause of insomnia it needs immediate attention in present day lifestyle. It is affecting nearly 1/3rd of population (especially youth) in western developed countries and the incidences are increasing day by day in the developing countries. If insomnia is left untreated, it may reduce mental capacity of an individual, reduce efficacy, increase the chances of various types of accident and ultimately it may drag the individual towards several severe psychosomatic disorders.

MATERIAL AND METHODS

Selection of Cases: In this trial, 30 clinically diagnosed patients of *Anidra* were randomly selected from O.P.D. / I.P.D. unit of JIAR, Jammu.

Inclusion Criteria

Individuals between the age group of 16 to 60 years of both sexes having insomnia of minimum one month duration were selected randomly for the study. 2. Patients of Insomnia with mild hypertension, mild depression and anxiety disorders without any complications of any other diseases were included for the present study.

Exclusion Criteria

1. Patients below 16 years and above 60 years of age.
2. Patients with major psychiatric illness like schizophrenia, depressive psychosis, epilepsy etc were not registered.
3. Patients with alcohol dependency or drug dependency were excluded from the study.
4. Patients having chronic illness like asthma, malignancies, liver cirrhosis, chronic renal failure, diabetes etc. were excluded.
5. Patients with acute illness like Cardio Vascular Accident, Congestive Cardiac Failure, Myocardial Infarction, Chronic Obstructive Pulmonary Disorders, meningitis, and acute pain conditions and similar other disorders were excluded.

Administration of Drug & Treatment Schedule: Total 30 registered, clinically diagnosed and confirmed patients of *Anidra* (Insomnia) were selected for the present clinical trial.

Shirodhara Drug: *Ashawagandha* Oil

Dose: 2 litre, Duration: 45 min. /per day in the morning (14 Days for *Shirodhara*)

Follow up: 4 week after completion of trial.

Insomnia severity index score	N	Mean score		Mean Difference	% Relief	S.D.	S.E	P
		BT	AT					
Insomnia severity index score	27	1.48	0.81	0.66	44.66	0.4840	0.0924	<0.0001
<i>Shirahshool</i>	27	1.63	0.48	1.14	69.93	0.7131	0.1381	<0.0001
<i>Tandra</i>	27	1.11	0.59	0.51	45.94	0.6427	0.1237	<0.0001
<i>Galani</i>	27	1.14	0.59	0.55	48.24	0.6405	0.1233	<0.0001
<i>Alasya</i>	27	1.63	0.48	1.14	69.93	0.7141	0.1072	<0.0001
<i>Jarimbha</i>	27	1.48	0.81	0.66	44.59	0.4804	0.0924	<0.0001
<i>Angamarda</i>	27	2.18	0.92	1.25	57.33	0.7642	0.1471	<0.0001

Observations and results in Insomnia Severity Index among 27 patients: Following Table shows the result of *Ashawagandha oil shirodhara* in Insomnia Severity Index among 27 patients:

In this clinical trial total 30 patients were selected. 3 patients had left the treatment during the trial. Only 27 patients were analysed for result. On observing, the result was found as highly significant in insomnia severity index score. It was found that before treatment 19 patients were having severe insomnia, 8 patients were

Assessment criteria: For assessment criteria Insomnia Severity Index was used. This Insomnia Severity Index is a 7 item question scoring pattern. Sum of these scoring patterns is interpreted as

- 0–7 No clinically significant insomnia
- 8–14 Sub threshold insomnia
- 15–21 Clinical insomnia(moderate severity)
- 22–28 Clinical insomnia (severe)

Other symptoms associated with insomnia which is described in *Ayurveda* such as *Shirshool*, *Tandra*, *Alasya*, *Glani*, *Angamarda*, *Jrimbha* were interpreted as-

- Severe – 3
- Moderate-2
- Mild-1
- Normal-0

Statistical analysis: Statistically in terms of mean score (X), Standard deviation (S.D.), Standard Error (S.E.). Paired t test was carried out at the level of 0.1, 0.05, 0.01, and 0.001 of P levels. The results were interpreted as – P>0.05 as Non significant (N.S.), P< 0.05 Significant (S.), P<0.01Significant, and P< 0.001 Highly Significant (H.S.)

OBSERVATIONS AND RESULTS

Among the total 30 patients registered for the trial, 3 patients could not pursue the trial for its complete duration for various reasons, so they were dropped out. Remaining 27 patients completed the trial and were analyzed statistically and results obtained are described below.

having moderate severity, no patient had mild severity. It was found that after treatment no patient had severe symptoms, only 2 patients had moderate severity, 9 patients had mild severity. 15 patients had got complete relief from insomnia. Improvement before & after treatment was statistically highly significant in symptoms like *Shirshool*, *Tandra*, *Galani*, *Alasya*, *Jrimbha*, *Angamarda*.

DISCUSSION

Shirodhara therapy is extensively used for alleviation of psychic and psycho-somatic ailments. The drugs under *Ashawagnadha* oil are having *UshnaVirya*, *Vatshamak* and *Vedanasthapaka* properties, balances the vitiated *Vata – Pitta Doshas* in this disease. This herb is considered an adaptogen which is a nontoxic herb that works on a nonspecific basis to normalize physiological function, working on the HPA axis and the neuroendocrine system. Lt. Name: *Withaniasomnifera* (*somnifera* means "sleep-bearing" in Latin, indicating it was considered a sedative, but it has been also used for sexual vitality and as an adaptogen). *Ashwagandha* is effective for insomnia but does not act as a sedative. It is rejuvenative and nervine properties produce energy which in turn help the body to settle and sleep. Thus it helps the body to address a stress related condition rather than masking it with sedatives. A herb that rejuvenates the nervous system, erases insomnia and eases stress. The therapeutic effect may be due to diffusion of Oil drugs through the fine pores present over forehead in similar way as seen by the procedure like *Abhyanga*, *Snana*, *Udvartana*, *Parisheka* etc.

Moreover, possibility is there to produce a certain amount of absorption by application of substances on the skin. *Shirodhara* procedure stimulate the *Agyachakra* - seat of vital part (*Marma*) and thus help in regulating the neuroendocrine system to maintain the hormones, Neurotransmitters etc. related to Hypothalamus, Pituitary, Pineal gland etc, to have proper relaxation & tranquility. Moreover, supine position in *Shirodhara* also helps in providing further relaxation. Whether *Shirodhara* directly influence the release of Melatonin – a hormone responsible to induce Sleep, could be a subject of further study. The neurophysiologic mechanism of the effect of *Shirodhara* on the psychophysiological changes may be related to the tactile stimulation of skin or hair follicle innervated by the first branch of the trigeminal nerves (Ophthalmic nerve).

CONCLUSION

In overall assessment it has been found that *Shirodhara* with *Ashwagandha* oil therapy have beneficial role for the management of Insomnia.

REFERENCES

1. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary of Chakrapanidatta, Sutra Sthana, Chapter 1, verse 15, published by Chaukambha Sanskrit Samsthana; Varanasi; 2004.
2. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary of Chakrapanidatta, Sutra Sthana, Chapter 11, verse 37, published by Chaukambha Sanskrit Samsthana; Varanasi; 2004.
3. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary of Chakrapanidatta, Sutra Sthana, Chapter 21, verse 36, published by Chaukambha Sanskrit Samsthana; Varanasi; 2004.
4. Ohayon MM, Epidemiology of insomnia: what we know and what we still need to learn. Sleep Medicine, 2002; 6(2): 97-111.
5. Pandey G S Editor, Bhavaprakash Nighantuuttarasthana, With Vidyotini Hindi Commentary. Ed. 1969. Chapter-1, verse 71-75.