

MANAGEMENT OF GENERALISED ANXIETY DISORDER IN AYURVEDA- A CASE REPORT

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ABSTRACT

Generalized anxiety disorder, a common mental health condition that majority of the individual may face at least once in their life time. It can be precipitate with both psychological and physical symptoms. If untreated it can even adversely affect the quality of life. Thus, a diverse approach is required to manage the condition and to reduce the recurrence of its attack. Ayurvedic principle on managing these anxiety disorders gives promising results. *Chittodwega* can be taken into consideration here, which is not mentioned as a separate entity but can be considered here due to the similarities in presentations. This case report brings an ayurvedic approach on managing the condition with improvement on clinical outcomes.

Index Terms - Ayurveda, generalised anxiety disorder, poly herbal formulation, DSM criteria, Case report.

I. INTRODUCTION

Generalized anxiety disorder otherwise known as GAD, is defined as excessive anxiety and worry about several events or activities for most days during at least a 6-month period.^[1] It is one among the mental disorder, which is more common with a prevalence of 35% found in a study conducted on a population of 1,13,285 individuals.^[2]

It is characterized by the persistent, excessive and unrealistic worry about everyday life events. This can be a multidimensional worry regarding any domain such as can be of finance, future, family, relationship, health etc. Even though this can be associate with non specific psychological and physical symptoms, excessive worry is the cardinal feature.^[3]

According to ayurvedic literature, this can be understood under the heading of *Chittodwega*. A condition in which the *manasika dosha*, *tama- guna* and *raja- guna* along with the *shareerika dosha* that is *vata Pradhana tridosha* is vitiated.^[4]

CASE REPORT

A 47 year old male, IT-Professional who complaints of lack of concentration, negative thoughts, excessive worry and nervousness since 10 months. He also complaints of chronic constipation since 7 years.

He had a history of serious stress regarding his life and career since 20 years. He also gave a childhood history of fear and worry. He had given episodes of similar attacks several times with an irregular pattern, which might occur at the time of stressful emotional state. He has a negative family history regarding the presenting complaints and no history of smoking, alcohol consumption and drug abuse but no suicidal or homicidal tendencies.

Along with these symptoms, he also noticed physical symptoms such as weight loss, difficulty to sleep, difficulty in eating. Thus for the better evaluation and further management he approached our OPD.

On examination

He was a-febrile at the time of examination and vitals were within normal range, no abnormality detected on general examination. His personal history reveals a decreased appetite, reduced sleep, constipative bowel with type 2 consistency of stool as per Bristol stool consistency chart on most days. No difficulty in micturation. No allergies or addictions were reported.

The mental status examination revealed distracted attention, thought process affected, sad mood on most of the time, phobia of unknown cause, and anxiety for everything were present.

The HAM-A criteria, suggested moderate to severe anxiety with a score of 31/56.

DSM-V, suggestive of generalized anxiety and DASS-21 suggested extreme stress, anxious and depression with a score of 34.

Diagnosis

He is diagnosed as GAD, based on clinical outcome and assessment criteria, as well ICD 10 F41.1 criteria.

Treatment protocol

Treatment protocol includes Daivavyapasraya, Yuktivyapasraya, and Satwajaya initially planned for 30days. Timeline on treatment were given below. The Follow-up and outcome were described in the following table.

IV. RESULTS AND DISCUSSION

Table 1: Treatment during IP-stay.

Date	Treatment	Medicine
11 days (5/11/21 to 14/11/21)	Shirodhara followed by Shiro abhyanga	Tungadrumadi taila
A-8 Basti, N-3 Basti (15/11/21 to 22/11/21)	Yoga basti Anuvasana Niruha	With Ashwagandha ghrita With Erandamoola niruha basti
11 days (in the beginning) (5/11/21 to 14/11/21) (15/11/21 to 22/11/21)	Sarvanga abhyanga and bashpa sweda Sarvanga abhyanga with baspa sweda	With Ashwagandha bala lakshadi taila
23/11/21 to 3/12/21	Padabhyanga (at evening)	With Himasagara taila
23/11/21 to 3/12/21	Yoga nidra and counselling session	-
28/11/21 to 3/12/21	Pratimarsha nasya	With Brahmi ghrita 10ml early morning

Table 2: List of oral medicines during IP-stay.

Date	Internal medicine	Dosage
5/11/21 to 22/11/21	Brahmi vati	1 TID Before food
5/11/21 to 15/11/21	Bravobol	1TID After food
22/11/21 to 3/12/21	Medhyarasayana	15ml BD After food
15/11/21 to 3/12/21	Manasa mitra vataka	2 HS After food
5/11/21 to 22/11/21	Anuloma DS	1 HS After food
15/11/21 to 3/12/21	Saraswatarishta with gold	10ml TID After food

Table 3: Discharge medication.

1	Saraswatharishta with gold	10ml TID After food for 1 month
2	Compound powder of:- Brahmi churna 30gm Shankapushpi churna 20gm Gokshura churna 20gm	½ tsf BD with honey, after food for 1 month
3	Anuloma DS	2 at bed time, after food for 1 month

DISCUSSION

After the completion of 30 days In-patient stay and 1 month follow up, patient showed a better results on all the symptoms. Improved quality of sleep, increased Appetite, reduced symptoms on constipation and moreover reduced episodes of Anxiety attack were reported.

Sarvanga Abhyanga is told to be a stress reliver^[5] in generally and this might be helped to reduce the symptoms and helped the patient to relax completely. *Ashwagandha bala lakshadi* used for *Abhyanga* by considering its properties on increasing body strength, and calmness to body.

Pada-abhyanga^[6] is told to have a direct benefit on stress relief, and allows body to relax completely. *Himasagara taila*^[7] having a cooling effect over the body may act as catalyst for *pada-abhyanga*.

Shirodhara^[8] for 45 minutes continuously in a to and fro motion uniformly over the forehead help to relive from all stress and induces sleep. *Tungadrumadi taila*^[9] having a cooling effect and thus it might help to relax the patient and there by reduces the symptoms.

Basti Chikitsa one of the important *chikitsa* arm, that provide an overall health benefit, as it is quoted that “Even though watering at the root of a plant helps to grow it”.^[10] The route of administration of *basti dravyas* is through anal route, but it help to reach the entire body. Thus it might help to relieve constipation, increased the Appetite and corrected the digestive fire. This also might be helped to relieve from mental stress by considering the gut-brain axis.

Nasya, exclusively indicated for *urdwajatru vikara*.^[11] *Pratimarsha Nasya* is advised in this case by considering the *satwa* of the patient; the medicine reaches the brain by crossing the cribriform plate, this might be helped to improve the quality of life by correcting the *manasika bhava*.

The internal medicines such as *Brahmi vati*, *Medhya rasayana*, *Saraswatharishta*, *Manasamitra vataka* helps to relieve from the stress, induces sleep, improve the quality of sleep, act as a neuro rejuvenator and reduces anxiety, constant thoughts of unwanted things. It helps to relax the body and to maintain the normal physiological balance. *Anuloma Ds*, helps to improve the appetite and reduces constipation.

Yoga nidra, a unique technique which is proven to be effective in stress relief was advised to the patient by a skilled technician, along with that proper counseling sessions was also scheduled and these might be helped to improve the *Satwabala*, which might be helped to reduce phobia of unknown cause, anxiety attacks and improved the general well-being.

On discharge, he was advised to continue few medicines. An ayurvedic polyherbal compound powder consisting of *Brahmi churna*, *Gokshura churana*, and *shankapushpa churna* was added to the prescription by considering its activity on brain to improve the cognitive function, to reduce anxiety, stress and phobia.

The current treatment protocol tried to cover both physical and psychological aspect since the condition of patient and the disease itself requires the same.

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