

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.084

Volume 11, Issue 13, 281-288.

Review Article

ISSN 2277-7105

ROLE OF RASAYANA IN GERIATRICS (JARACHIKITSA) AND MENTAL HEALTH (MANSIK SWASTHA)-AN AYURVEDIC REVIEW

*1Dr. Arunesh Kumar Dwivedi, 2Dr. Archana Tiwari and 3Dr. Hemlata

^{1,2}Assistant Professor, Department of Kayachikitsa Pt.Dr.Shivshaktilal Sharma Ayurvedic Medical College and Hospital Ratlam (M.P.).

³PG Scholar (Panchakarma) Pt. Dr. Shivshaktilal Sharma Ayurvedic Medical College and Hospital Ratlam (M.P.).

Article Received on 28 July 2022,

Revised on 18 August 2022, Accepted on 08 Sept. 2022,

DOI: 10.20959/wjpr202213-25548

*Corresponding Author Dr. Arunesh Kumar Dwivedi

Assistant Professor,
Department of Kayachikitsa
Pt.Dr.Shivshaktilal Sharma
Ayurvedic Medical College
and Hospital Ratlam (M.P.).

ABSTRACT

Geriatric health care is the process of planning and coordinating care of the elderly with physical and mental impairments to meet their long-term needs, improve their quality of life and maintain their independence for as long as possible. India has, acquired the label of "An aging nation with 8.3% of its population being more than 60 years old. Due to increased elderly population, the prevalence of Geriatric specific disease condition is also increase number of psychiatric complications like Dementia, Delusional disorders, Hallucinations, Depression, Anxiety, Personality alterations, Alzheimer's disease and age related neurological problems. Geriatrics or JaraChikitsa or Rasayana in Ayurveda is a method to control or slow down or arrest the aging process in the human being during the degenerative phase of

life and act as micronutrients. Some of these Rasayans are organ and tissue specific. Those specific to brain tissue are called Medhya Rasayan. In Ayurveda Medhya Rasayanas' e.g. Mandukparni Swaras, Yashtimadhu Churna with Ksheer (Milk), Guduchi Swaras, and Shankhapushpi Kalka are known to be beneficial to improve the intellectual. Medhya Rasayana drugs are used for prevention and treatment of Geriatric disorder. These drugs promote the Dhi,Dhriti, Smriti. This helps the mental patients to get relieves from stress anxiety and depression.

KEYWORDS: Gara Rasayan, Chikitsa, Medhya Rasayan.

INTRODUCTION

The term geriatrics is derived from Greek word, Geri-old age and iatrics-care. It is a special division of medicine related to the preventive and curative measures of elderly. Ageing is defined as a result of natural changes of the body that progressively leads to the death of individuals. It is also defined as the intrinsic, inevitable, and irreversible age-related loss of viability. In Ayurveda our body is presented as a living subject where the wear & tear phenomenon is continuous. Ageing is not a pathological condition but a physiological action like hunger, thirst and sleep. Swabhavoparamavada (Swabhava= natural and Uparama= destruction) which means natural destructions. The concept described by Acharya Charakais that there is a cause for the equilibrium and non-equilibrium state of Rasadi Dhatu but there is no cause for their destruction, since death following birth is a state of natural flow. Rasayanatherapy is a unique therapeutic science to delay ageing process and to reduce the strength of diseases which occurring this elderly phase of life. Rasayanatherapy is a special remedial solution in present scenario to prevent premature ageing and to treat the manifestations due to ageing process; it also ensures healthy life spanincluding mental health and better resistance against various geriatric disease conditions.

OBJECTIVES

- 1) To understand the concept of ageing.
- 2) To understand and elaborate preventive measure of rasayanatherapy in geriatrics.

MATERIALS AND METHODS

Published information from several articles, of which few review articles and cross-references were collected. All publications containing original data and an adequate detailed description of methodology were considered in the present review. The literatures reviewed in this article are taken from the modernmedical science journals and classics of Ayurveda.

Phenomenon of Ageing

Ageing is basically a physiological process which results because of time bound inherent evolutionary processes by the evolutionary changes occurring in the mind-body system. Such changes starts right from the beginning of life and get worsen and worsen with progress of chronological age. The advancing involution ultimately progress into extreme old age and lastly end of life. So life span of individual is a timelimited entity and everyone is mortal. The main point in the management of manifestations in elderlyphase of life is not merely the concern about the natural process which is not preventable; rather it is more the health issues

and problems mainly affecting elderly phase of lifewarning medical Intervention to enhance a blissful ageing. Thus the medical management in elderly phase of lifeis facing mainly two type of problems, firstly the delaying of natural ageing process and secondly the therapeutic cure of disease conditions and disorders specifically manifest in old age such as hypertension, ischemic heart disease, diabetes, senile dementia, Alzheimer's disease, Parkinson disease, degenerative osteoarthritis, osteoporosis, opportunistic infections, prostatic enlargement, degenerative eye diseases like cataract, a range of angiopathies, neuro-degenerative diseases and senile psychoses which results mass morbidity in elderly phase of life.

Ayurveda and Science of Ageing

1. Kala Parinama

Kala Parinama (changes due to time) is one of the most important factors that affects ageing as it includes all creation in itself. Kala Parinamarefers to the physical and mental transformation that occurs as a function of time and as we age. Time affects all individuals from beginning of life till the end, and this period of time is called Ayush(life span). Ayurveda divides Ayushinto various stages of life, Bala-16 years, Vivardhamana-1620 years, Youvana-20-30 years, Sampoornata-30-40 years, Parihani-40-60 years and older adults Vriddhavastha.

2. Prakriti

Prakrutiis concern to the nature of body constitution (Vatadidosasand satva, raj, tam) of a subject. Thus, nature interfere a subject's strength for changes at the level of kaayik, vaachikand maansikowing to the responses with internal and external stimuli that affects the ageing process.

3. Doshas

Vatadi Doshas affects the life span at the molecular level. Vata, Pitta and Kapha Doshas are Prana, Ojasandtejasthat are essential for blissful life span.

4. Ahara

It is one of the most important factors that affects ageing. A poordietary practice like improper timing, bad habits of food mixing of inappropriate food materials with inappropriate lifestyle disturb equilibrium state of Vatadi Doshas leading to disease conditions and finally death.

5. Achara

Ayurveda has contributed a great concept of Achara Rasayana (Ayurvedic lifestyle modification). It is a behavioral therapy for calm mind and long life. It is a unique Ayurvedic concept of mind rejuvenation. It controls and maintains the circadian rhythmof the body clock that results in good health, vitality and immunity, all of these slow the physiological ageing process.

6. Agni

Jatharagniis among the chief agniamong all agnipresent in the body. Jatharagniserves as the main digestive element and is the main contributor for all anabolic and catabolic process in the body. If Jatharagniis not strong, the digestion of food stuff is improper that results in impaired absorption and formation of Ama Dosha. If Jatharagniis powerful then it destroys all the related tissues and resulting in degeneration of tissue. Thus, the state of Jatharagniinfluences the ageing process.

Dimensions of Geriatric Care

Management in elderly phase of life has two different areas: (a) Firstly for betterment of healthy status of life and (b) Secondly for the management of disease conditions elderly phase of life. The most of the therapeutic science is better in terms of the second dimension, although the final outcome may not be sufficient because most of the problems in elderly phase of life are difficult to cure. Unlike the contemporary science approach of finding additional or transplantation of the body parts to enhance the healthy life span of the elderly person, Ayurveda relies on a number of comprehensive programs that includes yoga, dincharya, ratricharya, ritucharya, achara-rasayana, sadvrittaand pathyaapathya, intervention for extension of healthy life span. Ayurveda is remarkably stronger in terms of the first dimension of the geriatric care as it has the best potential to enhance healthy status in the elderly phase of life. Ayurveda contributes other multiple scopes like rejuvenation and promotion of longevity in geriatric care.

Rasayana Therapy

Rasayanatherapy specially deals with the science of geriatric care and rejuvenation. The strongest point of Ayurveda in the context of geriatric care is Rasayanatherapy. Rasayanatherapy is a special remedial solution in present scenario to prevent premature ageing and to treat the manifestation due to ageing process; it also ensures healthy life span including mental health and better immune status against various geriatric disease conditions.

The biological stimulation of Vata Dosha can be delayed by Rasayanatherapy particularly by using Vayasthapanadrugs. Ageing is progressive change related to passage of time, free radicals cause oxidative damage to different biological units which may enhance to ageing process. Certain Rasayanadrug like withaniasomniferaprevents lipid peroxidation and oxidative protein moderation. Rasayanatherapy also acts as antioxidant so they help in blissful ageing. Mode of action of Rasayanadrugsin ageing by immune stimulation, free radical destruction, promoting cellular detoxification mechanisms, repair damaged non proliferating cells and Inducing cell-proliferation and self-renewal of damaged proliferating tissues.

The probable mode of action of Rasayana therapy as per contemporary science is as follows

- 1. Antioxidant action Amalaki.
- 2. Immunomodulatory action Guduchi.
- 3. Haematopoietic effect Amalaki, Bhringaraja, Mandura, LauhaBhasma.
- 4. Adaptogenic action- Ashwagandha.
- 5. Antiageing action Ashwagandha, Bala.
- 6. Anabolic action Vidarikanda.
- 7. Nutritive function Gritha, Ksheera.
- 8. Neuroprotective action Ashwagandha, SwarnaBhasma, RajataBhasma.

Indications for Rasayana

- 1. Jitendriya.
- 2. Rasayanaenthuastic person.
- 3. Hitayuperson.
- 4. Sukhayuperson.
- 5. Sadhanasampanna(rich) person.
- 6. Sadavadhana(cautious).
- 7. Non-addicted.
- 8. Dharmika.
- 9. Age between 16-70 years.
- 10. Sodhitaperson.
- 11. Snigdha.
- 12. From mental worries.

13. Male and female both are eligible.

Contra-Indications for Rasayana

- 1. Anatmavan(unstudy) person.
- 2. Alasi(Lazy) person.
- 3. Daridra(poor) person.
- 4. Pramadi(unstable) person.
- 5. Vyasnai(addicted) person.
- 6. Papakruta(evil) person.
- 7. Bhesajapamani(who do not respect medicine).
- 8. Papi(evil minded) person.
- 9. Patita(characterless) person.
- 10. Sushrusharahita(asradda) person.

Classification of Rasayana

According to Mode of Administration 1. KutiPraveshika(Indoor Management). 2. Vatatapika (Outdoor Management).

II. According to Achievable outcome

- 1. KamyaRasayana-Prana, Medha and Shri Kamya.
- 2. NaimittikaRasayana(Curative).
- 3. AjasrikaRasayana(Vayasthapana).

III. According to Modalities

- 1. Achara Rasayana(Behavioural modalities).
- 2. AharaRasayana(Dietary modalities).
- 3. DravyaRasayana(Drug based modalities).

IV. According to Dravya

- 1. DravyabhutaRasayana.
- 2. AdravyabhutasRasayana.

Purva Karma before Rasayana Therapy

If Rasayana chikitsa is taken up without performing sodhana of the patient, it becomes total waste work like a dirty cloth never catches the color even if it is subjected to dying of colors repeatedly. In other words Rasayana therapy should be initiated after sodhanachikitsa, only to

obtain better and desired results especially under Kuti Pravesika Rasayana procedure.

Preventive and Therapeutic Measure Of Rasayana

Charaka and Sushruta have spelt out two distinct yet mutually complimentary objectives for Ayurveda i.e. (a) Prevention of disease and (b) Alleviation of disease when it manifests. Further AcharyaCharakaclassified the therapeutic approaches into two- (a) The promotive therapies to preserve and promote the health and (b) The restorative therapies to cure the disease and restorehealth, when it is disturbed. Thus Rasayana falls under the first-objective of Ayurveda. According to him, Rasayana contributes to long life, lasting memory, talent, health physique, youth, luster, bright complexion, good voice, strength of body and senses, truthfulness, respect and glowing body.

DISCUSSION

Ayurveda contributes most important role in geriatric care, as it is one among the branch of Astangaof Ayurveda. JaraChikitsahas a good scope in present day scenario as a preventive tool. As mentioned earlier the qualities of Rasayana therapy are one which enhances the longevity, one which enhances Smiriti, Medha, which maintains Aarogyata, and also maintains youthfulness etc. The past few decades of genetic and biochemical research have revealed an extensive network of molecular interactions involved in the ageing process, suggesting that a Rasayana-based therapeutics approach potentially more effective for delaying or reversing the ageing process. Ayurveda considers ageing as a natural and inevitable process and gives timetested Rasayana therapies for healthy ageing. Healthy ageing would therefore require for the individual to bring in blissful impressions, incorporate healthy lifestyle practices and routines Rasayana therapy that promote good health and well being, and encourage healthy transformation of the body and mind through harmonious choices and actions, Rasayana therapy is a unique therapeutic science to delay ageing process and to reduce the intensity of problems occurring this elderly phase of life. To be healthy in old age according to Ayurveda one should use of Rasayana in all decade of life.

CONCLUSION

Due to increased elderly population, the prevalence of geriatric specific disease conditions is also increasing. This is creating a big burden to the health care providers and the government. Traditional remedies or herbal informants of Rasayana care the only answer to meet out the problems. It is the duty of the young health care professionals to explore the Ayurveda classics and Rasayanatherapy to create awareness about the strength of Ayurveda in geriatric

care.

REFERENCES

- 1. Partridge L, Mangel M. Messages from mortality: the evolution of death rates in the old. TrendsEcolEvol, 1999; 14: 438-42.
- 2. Lopez-Otin C, Blasco MA, Partridge L, Serrano M, Kroemer G. The hallmarks of aging. Cell,2013; 153: 1194-217.
- 3. Datta HS, Mitra SK, Paramesh R, Patwardhan B. Theories and management of aging: modern and ayurveda perspectives. Evid Based Complement Altern Med, 2011; 2011: 528-527.
- 4. Dr.NiteshvyasEt: Al: A Review Article On Geriatric Care In Ayurveda. International Ayurvedicmedical journal {online}, 2016. {cited 2016 june} Available form:
- 5. Singhal A, Gupta K. Process of ageing e an Ayurvedic perspective. J Ayurveda Integr Med Sci, 2016; 1: 7882.
- 6. Devi D, Srivastava R, Dwivedi BK. A critical review of concept of aging in ayurveda. Ayu, 2010; 31: 516-9.
- 7. Ninivaggi FJ. In: A comprehensive guide to traditional Indian medicine for the westanatomy, Rowman & Littlefield Publishers, Inc, 2010; 59-85.
- 8. Manikrao GP, Tulsiram SA, Anantarao KV, Kumar AP, Lal MK. Comprehensive review of gramyaahara. Int Res J Pharm, 2012; 3: 69-71.
- 9. Chavan SO, Patil RY. Approach towards life style modification plan as per ayurveda and moderntechnique for prevention of geriatrics. Int Res J Pharm, 2013; 4: 12-5.
- 10. Gond P, Kumar J, Byadgi PS, Singh L. Importance of agni and its impact on human body. Int J PharmMed Res., 2015; 3: 186-90.
- 11. Kumar Gaurav Garg. A review on geriatrics common problems of old age People and theirmanagement.
- 12. Mishra Yagyik, Journal of Ayurveda and Integrated Medical Sciences, May June 2016; 1(1): 53-54.
- 13. Susruta, Susrutha Samhita Translated by Prof. K.R. Srikantha Murthy reprint edition, Chaukhambha Orientalia, Varanasi, 2012; 279.
- 14. S. Suresh Babu, the principal and practice of Kaya Chikitsa reprint edition, chaukhambha Orientalist, Varanasi, 2016; 125.
- 15. S. Suresh Babu, the principal and practice of Kaya Chikitsa reprint edition, chaukhambhaOrientalist, Varanasi, 2016; 123-124.