

A SINGLE CASE: STUDY OF *DADHIMASTU PADA ABHYANG* IN *NIDRANASHA*

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ABSTRACT

As per ICD Approximately 10% of the adult population suffers from an insomnia disorder and another 20% experiences occasional insomnia symptoms. Women, older adults, and people with socioeconomic hardship are more vulnerable to insomnia. Insomnia is often a chronic condition, with a 40% persistence rate over a 5-year period. Insomnia is a significant public health problem that should be addressed at the individual level with appropriate clinical care and at the population level with large-scale sleep health interventions.^[1] Hence here we are giving a quick solution on it so that person at home can easily do this. So we try to make out some positive things with the help of *Ayurveda*. *Padaabhyanga* is a holistic therapy and a religious approach towards an effective psychosomatic healing. Application of oil to the feet, followed by massage is popularly known as *Padaabhyanga*. **Material and Methods:** A single patient with having moderate insomnia symptoms was selected. **Observation and Results:** Significant Results observed in subjective as well as objective

criteria. **Conclusion:** On basis of observation and result study can be concluded as *Ayurvedic* Treatment can be used as best therapy in Insomnia patients, with reducing risk of dependency and side effects.

KEYWORDS: *Dadhi mastu, Padaabhyanga, insomnia.*

INTRODUCTION

Sleep is an essential function that allows your body and mind to recharge, leaving you refreshed and alert when you wake up. Now a days due to busy life-style, people often neglect to prioritize proper sleep. In modern science they give tranquilizers and sedative in patients of insomnia. After taking this patient feels drowsy and heaviness in head, also dependency occur. In ayurveda, Charak Samhita.^[2] explained the importance of sleep and how pada abhyanga helps in promoting good quality of sleep.

An optimal state of Health or *Swasthya* can only be achieved when there is a proper balance of three Pillars of life (*Trayopstambha*).^[3] i.e. as *Ahara*, *Nidra* & *Bhramhacharya*. According to *Charak Samhita*, with the help of *Trayopstambha* one can achieve better health with respect to strength, texture of body, growth. *Nidra* plays major role in managing the health. Acharya Charak mentioned that proper sleep helps to maintain physical and mental health, growth, muscle power, fertility and knowledge.^[4] Sleep plays integral part in the health and wellbeing of an individual. *Nidranasha* leads to squeezing pain in the body part, heaviness of the head, too much of yawning, lassitude exhaustion (even without strain), giddiness, indigestion, stupor and disease of Vata origin.^[5]

In Ayurveda, 'Pada' is a vital motor organ (*Karmendriya*). *Padabhyanga* is one of the unique procedures among *bahirparimarjana* chikitsa (therapies applied to the skin). It is explained as a daily ritual, especially before retiring at night.

In ayurveda Bhrutrayee not mentioned the seprate chapter on nidranasha. But in Laghutrayee Harita Samhita mentioned a separate chapter on treatment of nidranasha. From that we are giving Dadhi mastu pada abhayang to patient.^[6]

NEED OF STUDY^[7]

Insomnia is estimated to occur in 25% of all chronic insomnia patients.

Although there are variations in the population studied to determine the estimated prevalence. Hence estimates of insomnia prevalence have varied widely, from 10–40%.

AIM

To study the effect of *dadhimastu* yoga for pada abhyanga in *Nidranasha*.

OBJECTIVE

1. To assess the efficacy of *dadhimastu* yog for pada abhyanga in *Nidranasha*.

2. To propose possible mechanism of action of *Dadhimastu yog* in *Nidranasha*.

MATERIAL AND METHODS

A 34 year old female subject, come to the outpatient department of kayachkitsa, YMT Ayurvedic college, Kharghar, Navi Mumbai. Having long term history of *Angamarda*, *Shirogaurav*, *Galani*, *Apakti*, *Tandra*. since last 3 years. She is working women doing daily job of 8am-7pm. She consulted various physicians since, there was no relief she visited our hospital OPD for treatment. Here, she was assessed for her insomnia with symptoms and PSQI score as the criteria.

METHOD OF COLLECTION OF DATA

1) DIAGNOSTIC CRITERIA

- a. Classical signs and symptoms of *Nidranasha*.
- b. As per ICD 10 classification.

Difficulty in falling asleep, staying asleep, or non-restorative sleep, in spite of adequate opportunity and circumstances to sleep.

- c. This difficulty is present despite of adequate opportunity and circumstances to sleep.
- d. The impairment in sleep is associated with daytime impairment or distress.
- e. This sleep difficulty occurs at least 3 times per week and has been a problem for at least 1 month.

2) INCLUSION CRITERIA

- i) Age 20 – 45 years of either gender / economic background / work class.
- ii) PSQI scale score 8 – 21.
- iii) Episode of insomnia for at least 3 times per week in a month.
- iv) Sleep difficulty occurs at least 3 times per week and has been a problem for at least 1 month.

3) EXCLUSION CRITERIA

- i) K/C/O any other psychiatric disorder.
- ii) K/C/O any other uncontrolled systemic disorder.
- iii) Under treatment of immune compromised drugs.
- iv) Pregnant and lactating.

ASSESSMENT CRITERIA**A) SUBJECTIVE CRITERIA****GRADATION OF SYMPTOMS^[8]**

Symptom	Normal	Mild	Moderate	Severe
Angamarda(Bodyache)	0	1	2	3
Shirogaurav(Heaviness in head)	0	1	2	3
Jrumbha(Yawning)	0	1	2	3
Jadya(Heaviness)	0	1	2	3
Galani(weakness)	0	1	2	3
Bhrama(Illusion)	0	1	2	3
Apakti(Indigestion)	0	1	2	3
Tandra (Drowsiness)	0	1	2	3

OBJECTIVE CRITERIA**PITTSBURGH SLEEP QUALITY INDEX (PSQI)**

1. When have you usually gone to bed? _____
2. How long (in minutes) has it taken you to fall asleep each night? _____
3. When have you usually gotten up in the morning? _____
4. How many hours of actual sleep do you get at night? (This may be different than the number of hours you spend in bed) _____

5. During the past month how often have you had trouble sleeping because you.....	Not during the past month (0)	Less than once a week (1)	Once or twice a week (2)	Three or more times week (3)
a. Cannot get to sleep within 30 minutes				
b. Wake up in the middle of the night or early morning				
c. Have to get up to use the bathroom				
d. Cannot breathe comfortably				
e. Cough or snore loudly				
f. Feel too cold				
g. Feel too hot				
h. Have bad dreams				
i. Have pain				
j. Other reason(s), please describe, including how often you have had trouble sleeping because of this reason(s):				
6. During the past month, how often have you taken medicine (prescribed or "over the counter") to help you sleep?				
7. During the past month, how				

often have you had trouble staying awake while driving, eating meals, or engaging in social activity?				
8. During the past month, how much of a problem has it been for you to keep up enthusiasm to get things done?				
	Very Good (0)	Fairly Good (1)	Fairly Bad (2)	Very bad (3)
9. During the past month, how would you rate your sleep quality overall?				

Component 1 #9Score..... C1_____

Component 2 #2 Score (≤ 15 min=0; 16-30 min=1; 31-60 min=2, >60 min=3) + #5a Score
(if sum is equal 0=0; 1-2=1; 3-4=2; 5-6=3) C2_____

Component 3 #4Score (>7=0; 6-7=1; 5-6=2; <5=3..... C3_____

Component 4 (total # of hours asleep)/(total # of hours in bed) x 100

>85%=0, 75%-84%=1, 65%-74%=2, <65%=3..... C4_____

Component 5 Sum of Scores #5b to #5j (0=0; 1-9=1; 10-18=2; 19-27=3)...C5_____

Component 6 #6Score..... C6_____

Component 7 #7Score + #8Score (0=0; 1-2=1; 3-4=2; 5-6= C7_____

Add the seven component scores together _____

Global PSQI Score _____

The quantity and quality of sleep will be assessed by adopting Insomnia Severity Index scale.

B) 0–7 = No clinically significant insomnia

C) 8–14 = Sub-threshold insomnia

D) 15–21 = Clinical insomnia (moderate severity)

Clinical Findings

The general condition of the patient was good and vitally stable. She had Angamarda (bodyache), Shirogaurav (Headache), Galani (weakness), Apakti (Indigestion), Tandra (Drowsiness).

Personal History

Name- XYZ	Age-34 yrs
Sex- Female	Marital Status- Married
Occupation- IT Sector	Diet- Mixed
Addiction-None	Sleep- Disturbed
Bowel- Unsatisfactory	Appetite- Decreased

Ashtavidh Parikshan

Nadi – Vata Pradhan pitta	Shabda – Spashta
Mala – Baddha Mala pravrutti	Sparsha – Anushna sheeta
Mutra – Prakruta	Druka - Prakruta
Jivha - Saam	Aakruti - Madhyam

Prakruti- Vatta

Agni- Manda Koshta- Mrudu

PLAN OF RESEARCH

Place of study: Ymt, Ayurvedic Medical College, Kharghar, Navi –Mumbai.

STUDY DESIGN

15-20 ml of Dadhi Mastu is used for Padabhyanga at bed time for a time period of 15 minutes with Brisk shaking movements & Flexion and extension of toes & Thumb poking techniques.

Padabhyanga were given to patient on every day and assessment was done on Day 0 with follow up after 7 Days with a total period of 15 Days.

	Day 0	Day 7	Day 15
Padaabhyang			
Objective Criteria		X	
Subjective Criteria		X	

RESULT

Parameters	B.T.	A.T.
SUBJECTIVE CRITERIA	14	4
OBJECTIVE CRITERIA	17	10

The Padabhyang with dadhi mastu showed significant effect on patient with Insomnia. It can prove to be a promising method in near future for further more larger trials being cost effective and easily available.

DISCUSSION

Assessment of subjective criteria during treatment

Symptom	Normal	Mild	Moderate	Severe	On 0 th day	On 15 th day
Angamarda	0	1	2	3	2	0
Shirogaurav	0	1	2	3	3	1
Jrumbha	0	1	2	3	2	1
Jadya	0	1	2	3	1	0
Galani	0	1	2	3	0	0
Bhrama	0	1	2	3	1	0
Apakti	0	1	2	3	2	1
Tandra	0	1	2	3	3	1
Total					14	4

Probable mode of action of Padabhyanga^[9]

In the centre of the feet 02 Siras are directly connected to eyes. These transmit the effect of the medicines applied over the feet in the form of Abhyanga. These Siras are vitiated by the accumulation of the Malas and cause the Nidranasha. The Abhyanga is exceedingly beneficial to the skin. The aggravation of Vata in Pada can be pacified by Padabhyanga. Acharya Sushruta in Sarirasthana explains that, out of the four Tiryakgata Dhamanis, each divide gradually hundred and thousand times and thus become innumerable. These cover the body like network and their openings are attached to Romakooopa. Through these the Virya of Abhyanga enters into the body after undergoing Paka with Bhrajaka Pitta in skin and shows its action. Pada Abhyanga nourishes the Adhoga Dhamanis, these in turn nourish the Urdwaga Dhamanis and Tiryak Dhamanis and induce sleep.

According to modern view^[10]

The Abhyanga exhibits its action basically on three systems namely vascular system, Nervous system, and Lymphatic system. By fine touch and crude touch. Abhyanga stimulates the tactile receptors and mechano - receptors in the skin. The temperature in the skin increases thus causes kinetic motion in the receptors by which the axons get activated and conducts stimulus through first, second and third order of neurons to the sensory cortex in turn maintains the normal homeostasis of the body by exhibiting neuronal action. In other view, as there is kinetic motion it causes vasodilatation in the subcutaneous vessels by which the Virya of the drug gets absorbed there by improves circulation by increasing blood amino acids that is increasing plasma tryptophan in turn increases neurotransmitter activation causes the secretion of melatonin through which the serotonin is secreted, thus maintains normal mechanism as there is improved circulation there will be parallel improvement occurring in

lymphatic circulation thus exhibits the defence action and removes the toxins from cells via blood. Hence, maintains the normal homeostasis. Probably by doing Pada Abhyanga, this increases the intensity of brain waves and decreases the brain cortisone and adrenaline level.

Probably Pada Abhyanga normalises the two important neurotransmitters Serotonin and Norepinephrine, which regulates a wide variety of Neuropsychological process along with sleep. Thus, it induces relaxation and natural sleep; it impacts a positive effect on eyes.

CONCLUSION

The study concludes that Ayurved, specifically Pada Abhyanga with Dadhimastu, can be an effective treatment for insomnia. The results show significant improvement in subjective and objective criteria, including reduced symptoms of insomnia and improved sleep quality. Pada Abhyanga nourishes the Adhoga Dhamanis, which in turn nourish the Urdwaga Dhamanis and Tiryak Dhamanis, inducing sleep. The treatment stimulates tactile receptors and mechano-receptors in the skin, increasing kinetic motion and vasodilatation in subcutaneous vessels. This leads to improved circulation, increased plasma tryptophan, and secretion of melatonin and serotonin, regulating sleep and maintaining normal homeostasis.

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