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REVIEW ARTICLE ON PANVIBHRAM (ALCOHOL WITHDRAWAL)

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**ABSTRACT** 

This paper examines the Ayurvedic condition known as" Panvibhram." This allows for a comparison with the contemporary affliction known as "alcohol withdrawal." The Charak. Sushruta. Bhavaprakash, Madhavnidan, texts Chakradatta, Bhaisahajya Ratnavali, and Vangasen Samhita provide descriptions of Panvibhram or madatyaya. According Ayurvedic principles, alcohol consumed following appropriate procedures, dosage, timing, meal combinations, and individual constitution induces bliss and functions akin to nectar. Madya consumed indiscriminately, without food and in excessive quantities, behaves like a fire, interacting with body heat to induce severe drunkenness and related ailments. Vangasena, Chapter on Sangha Numerous references exist for the Ayurvedic care of Panvibhram that should be implemented in contemporary practice. The primary objective of this paper is to convey essential information regarding Madatyaya for

appropriate treatment.

**KEYWORDS:** Panvibhram, Madatyaya, Tamaguna, Buddhibhrama, Pragnyaparadh, Manas vikar etc.

#### INTRODUCTION

Alcohol use disorder is a major global health issue and is addressed in both modern medicine and Ayurveda. In Ayurvedic classics, alcoholism is termed Madātyaya, and its withdrawal syndrome is referred to as Panavibhram or Panapkram.

The classics of Ayurveda quote the similarities between Madya and Visha. With its ten properties, Madya contradicts the ten properties of oja and hence causes Madatyaya, ultimately leading to ojakshaya.

On the basis of use, Madhya is classified into two types; as medicine and as beverage. It can also be categorized into 5 types depending on method and raw material used viz; Asava, Arista, Sura, Varuni, Sidhu, out of which first two are used for medicine and remaining as beverages.

Ayurvedic texts describe the effects of excessive alcohol and prescribe measures for prevention and treatment. Panavibhram refers to the condition arising after abrupt cessation of chronic alcohol use, and it is characterized by disruptions in mind and body, comparable to the modern concept of withdrawal or delirium tremens.

This presentation will outline Ayurvedic concepts of alcoholism and withdrawal, review classical and contemporary literature on Panavibhram, summarize the biomedical perspective on withdrawal.

#### LITERARY REVIEW

- 1. Madatyaya is discussed in 24th chapter of Charaka Samhita after Visha Chikitsa, because Madhya is having properties like Visha (poison). Charaka describes in detail the Madya Gunas (qualities), stages of Madatyaya and diseases caused by alcoholism, their signs, symptoms and Chikitsa has also been outlined.
- 2. In Sushruta Samhita, Uttara Tantra 47th chapter, Acharya has discussed about Madatyaya in detail in the name of Panatyaya Pratisheda.
- 3. In Astanga Sangraha, Madatyaya Chikitsa is elaborated in detail in 9th chapter of Chikitsa Sthana. He mentions Madya Prayoga in Madatyaya and also mentions treatment of Mada and Murcha.

- 4. In Astanga Hrudaya, Nidana (causes) of Madatyaya is elaborated in 6th chapter of Nidanastana, and in 7th chapter of Chikitsasthana has outlined treatment of Mada, Murcha, Sanyasa including Nidana and Chikitsa of Dwamsaka and Vikshaya.
- 5. In Kashyapa Samhita, Chikitsastana author has outlined effects of Madya in pregnant women and infants with their treatment.
- 6. In Madhava Nidana, Madatyaya outlined after Krumi Nidana.
- 7. In Bhava Prakash, Madatyaya outlined in Madyama Khanda after Murcha, Bhrama, Nidra Tandra and Sanyas Adhikarana, followed by Daha Adhikarana.
- 8. Yogaratnakar has outlined a separate chapter as Madatyaya Adhikara after Murchadhikara.

# MADATYAYA (ALCOHOLISM)

Madatyaya is a combination of two words Mada and Atyaya. Mada means Harsha (excitement) Atyaya means Atikrama (excess), it means after consumption it makes the person to lose his sense is called as Madya. This over excitement is caused by excess consumption of Madya. Depending on the involvement of the Dosha, its toxic effects are seen.

In Sharangadhara Samhita while defining the term Madakari, Madya is also included in the classified drugs i.e.; drugs possessing Tamoguna predominantly and which causes derangement of the mind are called a Madakari (intoxicants) for example Sura and the Madhya.

Sushrut used Panatyaya term in the place of Madatyaya, and According to Sushrut, the adverse effects of chronic usage of Madya against the rules and regulations prescribed for Madya intake are classified into four types. They are Panatyaya, Parmada, Panajeerna and Panavibhrama.

#### **THREE STAGES OF MADA (Intoxication)**

According to Susruta Samhita

• **Prathama Avastha** (Stage of excitement) – The first or preliminary stage is marked by an exhilarated state of mind with increased valour, and conviviality as well as satisfaction and talkativeness, etc.

- Madhyama Avastha (Stage of in-coordination) The second or intermediate stage is
  indicated by incoherent speech, delusion and the performance of proper and improper
  acts.
- Antima Avastha (Stage of narcosis) The third or last stage the man lies down unconscious, lack of all powers of action, of memory and of judging the ethic effects of his acts.

#### MADATYAYA BHED (TYPES)

#### **Types of Madatyaya**

Charakacharya describes Madatyaya types as Vataja, Pittaja, Kaphaja and Sannipataja.

# 1] Vataja Maadatyaya

**Nidana**: If a person is excessively emaciated because of indulgence in women (Vyavaya), grief (Shoka), fear (Bhaya), carrying heavy load (Bharavahana), walking long distance (Chankramana), other strenuous activities (Sahasa), while eating ununctuous food (Ruksha Aahara), less quantity of food (Alpa Aahara) drinks alcohol at night and which is excessively fermented then this leads to the impairment of his sleep (Nidra) and causes Vataja Madatyaya.

**Lakshana**: Vataja Madatyaya shows characteristics of signs and symptoms like hiccup (Hikka), asthma (Shwasa), tremors in the head (Shirakampa), pain in the sides of the chest (Parshva Shoola), insomnia and delirium in excess (Bahupralapa).

#### 2] Pittajja Madatyaya

**Nidana**: If a person, indulging in food that is Tiksna, Ushna, Amla in excess and having liking for excessive exposure to the fire and sun, drinks excess quantity of Madhya that is Tikshna, Ushna and sour, then he suffers from Pittaja type of Madatyaya.

**Lakshana**: Symptoms are like thirst (Trushna), burning sensation (Daha), fever (Jwara), sweating (Sweda), giddiness (Moorcha), diarrhea (Atisar), Vibhram, green colouration of the body (Haritavarna).

# 3] Kaphaja Madatyaya

**Nidan**: If a person who is habituated to sweet (Madhura), unctuous (Snigdha), heavy food (Guru Aahara), who does not undertake exercise (Vyayam), who sleeps during day time

(Divaswapa), and who indulges in the Sukhaseenata, excessively drinks Madhya which is not an old or which is prepared of Guda, then he immediately develops Kaphaja Madatyaya.

Lakshana: In Kaphaja Madatyaya symptoms are characterised by vomiting (Chardi), anorexia (Arochaka), nausea (Hrullasa), drowsiness (Tandra), timidity (Sthaimitya) and heaviness (Gaurava).

#### 4] Sannipataja Madatyaya

In Sannipataja Madatyaya all Tridoshaja or some of three individual Dosha can be seen. Lakshana: Body pain (Shareera Dukham), unconsciousness (Balavat Sammoha), chest pain (Hrudvyatha), tastestlessness (Aruchi), excessive thirst (Trushna), fever (Jwara), heat cold feeling (Sheetoshna), (Shirokamp) headache, yawning (Jrumba), chest congestion (Urovibandha), cough (Kasa), hiccups (Hikka), difficulty in breathing (Shwasa), insomnia (Prajagara), shivering (Shareera Kampa), dieases of ear, eyes, mouth (Karna Akshi Mukharoga), vomiting (Chardi), loose motion (Atisara), nausea (Hrullasa), giddiness (Bhrama), irrelevant talk (Pralapa).

# MADATYAYA ACCORDING TO SUSHRUT

Sushrutacharya describes the adverse effects of chronic usage of Madya, when taken against the rules and regulations prescribed for Madya intake are classified as Panatyaya, Paramada, Panajeern and Panavibhram.

- 1. Panatyaya (Intoxication due to excessive drinking)-Sushrutacharya outlined Panatyaya in the place of Madatyaya. Four types of Panatyaya discussed as Vatakrita, Pittakrita, Kaphakrita and Sarvakrita.
- a. Vatakrita Panatyaya: It shows characteristics of numbness (Stambha), bodyache (Angamarda), palpitation, a catching and pricking pain in the region of the heart (Hridayagraha), pricking sensation (Toda), and headache (Shiroruja).
- b. Pittakrita Panatyaya: It shows characteristics of perspiration (Sweda), delirium (Pralapa), dryness of mouth (Mukhashosha), burning sensation (Daha), loss of consciousness (Murcha), yellowness of face and eyes (Vadanalochan Peetata).
- c. Kaphakrita Panatyaya: It shows characteristics of vomiting (Vamathu), shivering (Sheetata), water brash (Kapha Praseka).
- **d.** Sarvakrita Panatyaya: All Tridoshaja Lakhsanas seen in this type of Panatyaya.

- **2. Paramada** (hangover): It shows characteristics of heat (Ushmanam), heaviness in the body (Angagurutam), excessive accumulation of Sleshma (Sleshma-adhikatwam), an aversion of food (Aruchi), suppression of stool and urine (Malamutra Sangam), thirst (Trushna), headache and joint pain (Shiro and Sandhiruja).
- **3. Panajeerna** (alcoholic gastritis): Distension of abdomen (Aadhmana), sour taste in the mouth (Udgiran Amlarasa), Vidaha and indigestion (Ajeerna) and features of aggravated deranged Pitta(pitta prakop lakshan).
- **4. Panavibhrama** (alcohol withdrawal): sudden cessation of alcohol after long period of alcoholism withdrawal symptoms can arise. It shows characteristics of piercing pain in the heart and body (Hridgata Toda), vomiting (Vomathu), fever (Jwara), sensation of the rising of fumes into the throat (Kanthadhuma), giddiness (Murcha), salivation (Kaphasravan), headache (Shiroruja), burning sensation in the throat (Vidaha).

# MADATYAYA ACCORDING TO VAGBHATA

Aacharya Vagbhata describes four types of Madatyaya viz., Vataja, Pittaja, Kaphaja and Sannipataja. Apart from this Dhvamsaka and Vikshaya is also outlined.

**Etiology:** A person, if suddenly stopped drinking Madhya, takes recourse to drinking Madhya in excessive amount again, then he suffers from Dhvamsaka and Vikshaya.

# **Signs and Symptoms**

Dhvamsaka: Sleshma Praseka, Kanthasya Shosha, Shabdasahishnuta, Atitandra and Nidra.

Vikshaya: Sammoha, Chhardi, Angaruja, Jwara, Trishna, Kasa, Shiroshoola.

A person suffering from Dhvansaka or Vikshaya are difficult to cure, as the person is already become weak and emaciated because of his earlier alcohol drinking habit.

#### **SAMPRAPTI**

# Excess consumption madya

Due to Vyavayi vikasi guna

Reaches hrudaya

Decreases the qualities of ojus

Which are exactly opposite to madya

Laghu ruksh gun of madya

Hamper sattva gun

causes SHUBDATA to man

Madya increases the

gun of tamo and rajas

Causes vitiation of vat

Also ushna Tikshna gun of madya

causes Manovikruti

Causes vitiation of pitta

When madya is stopped or dose is decreases

Due to OKSATMYA effect of body

Koshika (cells) shows withdrawal signs and symptoms

# **PANVIBHRAMA**

#### MANAGEMENT OF MADATYAYA

Ayurvedic management is doṣa-dūṣya-viśeṣa based, with emphasis on detoxification (śodhana), pacification (śamana), and restoration of ojas (vikṛti nirodha, ojovardhana) with Psycho-spiritual care (Satvavajaya, counselling).

# A] SAMANYA CHIKITSA

- 1. Doshanusara Chikitsa: All types of madatyaya are tridosaja. Treatment should be based on the dominant doshas. However, most of the time treatment is started for kapha dosha as pitta and vayu are manifested towards the end in most of the cases of madatyaya
- 2. Administration of Madya (Madya Prayoga): The diseases which arise from inadequate, improper and excess drinking of liquor Following the digestion of ama and the disadvantages of alcohol get cured by the same if administered properly. Charaka describes more about the usage of this madya. Vayu obstructed in channels due to Dosha excited by Madya produce intense pain in head, bones and joints. In such cases for liquefying the Dosha particularly Madya should be given because of its properties like quick absorption, sharpness and hotness unlike of other remedial measures. madya removes the obstruction(Aam) of channels.
- 3. Administration of Milk (Dugda Prayoga): After discontinuing madya, when Kapha is diminished, debility and lightness arises due to lightening (Langana, Pachana, Shodhana procedures and Shamana measures and Vata and Pitta becomes predominate in the patient inflicted by madya, so milk administration acts as a boon like rains for the tree which is extremely dried in summer. After some days milk also should be withdrawn slowly with substitutes of Pathya Dravyas.
- **4. Psychological measures** (**Harshanakriya**): Alcohol does not cause alcoholism without causing agitation of the mind and causing morbidity in the body hence exhilarating measures necessary. Beautiful parks, ponds, with lotus flower, good food and drinks,

pleasing companions, garlands, perfumes, clean clothes, melodious music, entertaining parties, ample arrangement of talks, jokes and songs and beloved

#### B] VISISTHA CHIKITSA

- 1. Vataja Madatyaya Chukra, Maricha, Ardraka, Dipya and Kusta with a little of Sauvarchala should be taken with Madya.
- 2. Pittaja Madatyaya Madhya should be mixed with Kashaya prepared with Madura Rasa Dravyas, like kharjur, draksha, phalsa along with Madhu and Sita.
- 3. Kaphaja Madatyaya Induce Vamana by the help of Madya, followed by laghan.

# C] SHODHANA (Detoxification and Panchakarma)

- Snehapāna (internal oleation) with medicated oil is indicated in vata-predominant or debilitated patients to prepare for purification. Charaka recommends sarpi (processed ghee) and basti (medicated enema) for Vata-type Madatyaya.
- **Virechana** (therapeutic purgation) is advised to expel aggravated Pitta and Kapha;
- Vamana Classical texts suggest sadyo-vāmana with Yashtimadhu decoction for Kapha-Pitta mala due to toxic alcohol.
- Nasya (Nasal therapy) is specifically highlighted by Vagbhata: in the unconscious (sannyāsa) stage after overdose, "immediate application of potent nasya and dhum chikitsa." is prescribed to revive the patient. Likewise, **Sirodhara** (continuous oil/abhyanga to forehead) and **Takradhara** may be used to calm Vata and induce sleep. Modern Ayurvedic practice frequently employs Sirodhara, music therapy, and Shiropichu for relaxation and sleep improvement in detox.

If purification is contra-indicated, focus remains on samana and supportive care.

# D] SHAMANA (Herbal Therapy and Formulations)

- A wide range of **Medhya rasāyana** and **Nervine sedatives** are recommended to relieve withdrawal and rebuild mental balance.
- Texts and recent reviews cite Bacopa monnieri (Brahmi) and Convolvulus pluricaulis (Shankhapushpi) for cognitive support and to pacify the mind – Brahmi "improves intelligence" and is indicated in insanity.
- Shankhapushpi is noted to detoxify and treat mental disorders ("visha useful in toxic conditions, unmada - useful in psychiatric disorders").

Other single herbs include

- Ashwagandha (Withania somnifera) for anxiety/depression relief,
- **Tagara** (*Valeriana wallichii*) for its Vata-kapha pacifying, anticonvulsant and soporific actions classical sources list Tagara for insanity and epilepsy
- Mandukaparni (Centella asiatica) and Jatamansi (Nardostachys jatamansi) for neurotonic effects.
- Guduchi (*Tinospora cordifolia*) is also valued for building ojas and treating fevers.

  In practice, combinations are common: e.g. Brahmi Ghrita or Saraswata Vati (with Brahmi, Shankhapushpi etc.) are used for craving and cognition.

# **Classical polyherbal formulations**

Preparations	Ingredients
Kharjuradi Mantha	Kharjura, Mridvika, Vriksamla, Amalaki, Dadima (Bhaisajya
	ratnavali
Mrudvikadi Kashaya	Mrudvika, Madhuka, Yastimadhu, Pippali, Kharjura,
	Chandana, Sariva, Musta, Laja, Ushira (Saharsha yoga)
Draksharishta	Draksha, Twak, Patra, Ela, Nagakesar, Pippali, Vidanga,
	Dhatki(Sharangdhar samhita)
Sreekhandasava	Sweta chandana, Jatamansi, Haridra, Musta, Ushira, Amalaki,
	Maricha, Lodhra, Dhataki, Guda. (Bhaisajya ratnavali)
Ashvagandharishta	Ashvagandha, Manjista, Haritaki, Haridra, Madhuka, Arjuna,
	Musta, Chandana, Trikatu.(Bhaisajya ratnavali)

# **E] SUPPORTIVE CARE**

- Rejuvenation (Rasāyana): Post-detox regimens focus on Ojovardhana and Medhya Rasāyana. Milk, ghee, and light meats are given along with medicated oils and fomentation to pacify Vāta. Restorative rasāyanas like Chyavanaprāśa might be employed
- **Counselling**: Motivational and Group counselling.
- Relaxing Therapies: Musictherapy, shirodhara, harshan chikitsa.
- **Padanshik**: Madya used in small amount or tapering doses.

Taken together, therapy is integrative: counselling and stress reduction, detoxification (preferably with Śodhana if strong enough), then śamana medications and rejuvenative care. As modern authors summarize: "All types of madatyaya are tridoṣaja. Treatment should be based on the dominant doṣa... However, most of the time treatment is started for kapha doṣa as pitta and vāyu manifest later". Ultimately, Ayurveda aims to eliminate the toxic residue of alcohol, pacify doṣas (especially Vāta), and rebuild Ojas and Satva to restore health and prevent relapse.

#### **CONCLUSION**

Alcohol withdrawal is recognized both in Ayurveda and modern medicine as a critical condition requiring careful management. Classical texts from Charaka and Sushruta provide detailed descriptions of alcohol's effects and withdrawal syndromes (Panavibhram), emphasizing dosha-based diagnosis and therapy (for instance, using emesis, laxatives, medicated alcohol, milk, or herbal decoctions as appropriate). Ayurveda additionally stresses psychological support and lifestyle correction (e.g. Satvavajaya therapy, ethical conduct, counseling) as key to recovery. Ayurveda also accept that it is cardiotoxic as well as dependent drug. Symptoms of pittaj madatyaya may be compared with alcoholic hepatitis. Concept of alcoholic addiction may be high lightened in terms of Dhwansaka & Vikshay. The chronic alcoholism with Withdrawal may be compared with Pan Vibhram as mentioned. If we review & compare entire views of all Acharyas we can come to certain concrete conclusions regarding Madatyaya.

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