

A CLINICAL STUDY OF EFFICACY OF 'SHANKHPUSHPI CHURNA' IN THE MANAGEMENT OF CHITTODVEGA W.S.R. TO GENERALISED ANXIETY

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ABSTRACT

Chittodvega is the term to illustrate the whole anxious state of the mind .Modern Psychiatry has coins the term generalized anxiety disorder as a group of symptoms of altered mood. According to our classics, various shodhana process described in texts in reference to manas vuadhi like unmad, apsmar and also they described various shamana chikitsa, in which Charaka had mentioned use of these medhya rasayan in manas rogas like unmad, apsmar and one of the treatment principle of chittodvega includes medhya rasayan. Acharya Charaka narrated use of four plants as the medhya rasayan, namely Shankhpushpi, yashtimadhu, brahmi, and guduchi. .using these line of treatment, shankhpushpi as in powdered form given for 28 days of 15 patients and observation and statistics had been made by changes in manas bhav like Krodha, bhaya, shoka, dvesha as a negative emotions and Dhairyam, Harsha, priti, viryam as a positive emotions by using gradation to each emotions. Observation made by regular follow-up and examination by using anuman praman.

Keywords: Shankhpushpi churna, chittodvega, medhya rasayan, GAD

INTRODUCTION

Research Article

It is pertinent to observe that Psychiatry had roots in Vedas where Bhootvidya finds vivid mention. The word "Bhootvidya" of vedic texts refers to Ayurveda as a whole.. The contemporary Ayurvedic psychiatry consists of: (1) Ayurvediya Manas Roga Vigyana which deals with clinical conditions where the disease and its treatment is based on the fundamental principles of Ayurveda viz. theory of Panchamahabhuta, Tridosha, Triguna etc as in the case of *Unmada*, *Apasmara*, Chittodvega etc. (2) Bhootvidya which deals with psychiatric problems like Bhootonmada, Grahavesha etc. where the disease and its treatment is not based on classical principles of Ayurveda but on paranormal factors like Karma, Graha, Bhoota etc. which relates more with astrology than psychiatry. The mind or manas is considered to be three dimensional: Sattva, Rajas, and Tama. The entire concept of *manas* or mind is psychological in nature. Though its neurophysiological attributes have not been described vividlye in Ayurveda, our ancient literature describes in detail about Mana. According to Avurveda, mental health is a state of sensorial, mental and spiritual well being. The mental ill health is brought about essentially as a result of unwholesome interaction between the individual and his environment. A wide range of psychiatric conditions have been described in Ayurveda.

Primary psychological conditions caused purely by Manasa Doshas, i.e. Rajas and Tamas include : Lust (Kama), Anger (Krodha), Greed (Lobha), Delusion (Moha), Jealousy (Irshya), Pride (Mana), Euphoria (Mada), Grief (Shoka), Anxiety (Chinta), Neurosis (Udvega), Fear (Bhaya), Happiness (*Harsha*)¹, etc. Anxiety is a problem that ranges from mild uneasiness to distress in physical, mental & emotional setup. It becomes morbid when symptoms are out of proportion to external circumstances or if they persist long after a threatening situation has been averted. Though there is no clear distinction between the features of normal and pathological anxiety, in pathological condition, the anxiety is the chief symptom and acting through the autonomic nervous system, produces all kinds of visceral symptoms. Ayurveda, as a holistic science, follows psychosomatic approach of health. While describing psychological disorders, Acharya Charaka has quoted word Chittodvega along with Kama, Krodha, Moha, etc. Chittodvega is more applicable term to illustrate the whole anxious state. Therefore, in this study the term "Chittodvega" is compared with "Generalized Anxiety Disorder (GAD)" 2, 3. Generalized Anxiety Disorder (GAD) can exist as a separate disease or can be an etiological factor for other psychic and psychosomatic diseases. Being an alarming disease, it requires effective management. Acharya Charaka has advised to use Medhya Rasayana drugs for the mental disorders, especially for the promotion of Medha and Shankhapushpi had been considered best amongst the *Medhya Rasayana*¹ drugs. So this drug was selected for this study.

AIMS & OBJECTIVES

1. Study of mode of action of *shankhpushpi churna* .

2. Study of efficacy of *shankhpushpi churna* in the management of *chittodvega* w.r.t. Generalized Anxiety Disorder (GAD) .

MATERIAL AND METHODS

'Shankhapushpi Churna': Raw material was taken from private dealer. Raw material drug was taken in the amount of 6 Kg. Raw materials grinded into powdered form and sieved by 80 – 120 no. of mesh use.

Research design: Open randomized study of *Shankhapushi Churna* on 15 patients for 28 days with 14 days follow-up with doses 3 gms and anupan drava used is honey and the time of administration of Drug is morning and evening before meal.

Source of data and method of collection: There was random selection of patients from the O.P.D and I.P.D of Department of *Kayachikitsa* of the Smt. K.G.P.M.P. AYU. Hospital as per inclusion criteria.

Informed consent: Patient fulfilling criteria for selection will be included under the study after receiving their written consent. **Ethical approval: The** institutional ethical committee had been approved this research work

Inclusion criteria

- 1. Patients of age between 18 to 65 years with no sex, race & religion and economic status barrier.
- 2. The patients presenting **anxiety** as a major symptom in Generalized Anxiety Disorder were subjected to detailed clinical history and physical examination. The criteria of Generalized Anxiety Disorder as described in 'The International Statistical Classification of Diseases & Related Health Problems (**ICD-10**)' published by World Health Organization was taken into consideration for the final diagnosis.

Exclusion criteria

- 1. Age below 18 years and above 65 years.
- 2. Pregnancy or Lactation.
- 3. Currently showing suicidal tendency.
- 4. Drug dependence.
- 5. GAD associated with other disorders like neurological disorders, systemic conditions, endocrine disorders, defi-

ciency states, toxic conditions & other psychiatric disorders as mentioned in ICD 10.

CLINICAL ASSESSMENT

I. Gradation of Manasa Bhavas:

Negative Emotions: I- Krodha-Abhidrohena

Grade -	Lakshanas
0	No violent tendency.
1	Violent thoughts very rarely.
2	Violent, Sadistic functions quite often.
3	Frequent thoughts & functions of violence &
	sadism.

II- Bhayam-Vishaaden

Grade -	Lakshanas
0	No Depressed mood.
1	Depressed mood only in reasonable cause.
2	Depressed mood even in unreasonable cause.
3	Always in depressed& fearful emotion.

III- Shoka-Dainyen

Grade -	Lakshanas
0	No feeling of sorrow.
1	Feels inferiority & sorrow at occasions.
2	Inferiority complexes.
3	Often weeps & feel inferior very frequently.

IV- Dvesha-Pratishedhena

0	No revenging tendency at all.
1	Thoughts of revenge only at few events.
2	Thoughts & acts of revenge often.
3	Always thoughts & acts of revenge.

Positive Emotions:

I. Dhairyam- Avishadena

Grade -	Lakshanas
3	No fear or sorrow at any cause.
2	Fearful only atreasonable cause.
1	Fearful occasionally.
0	Always in fearful & depressed state.

II. Harsha-Amodena

Grade -	Lakshanas
3	Totally cheerful at all occasions.
2	Cheerful & initiative with good circumstances.
1	Cheerful & active only at occasions.
0	No feeling of cheerfulness.

III. Priti-Tosena

Grade -	Lakshanas
3	Always happy & pleased.
2	Happy & pleased occasionally.
1	Express happy mood often.
0	No feeling of happiness at all.

IV. Viryam- Utthanena

Grade -	Lakshanas				
3	Starts & works very quickly.				
2	Works with less interest.				
1	Delayed & decreased working capacity.				
0	Not able to start any work.				

OBSEVATIONS, ANALYSIS AND INTERPRETATIONS

Table no. 1] Data related to response to the treatment

Symp-	Mean		S.D		S.E.		Median		'P'	ʻr'	Re-
tom	B.T	A.T	B.T	A.T	B.T	A.T	B.	A.	Value	Val-	sult
							T	T		ue	
Krodha	2.367	0.733	0.490	0.449	0.089	0.082	2	1	< 0.00	0.302	E.S.
		3	1	8	49	12			01	4	
Shoka	2.100	1.467	1.467	1.467	1.467	0.124	2	2	< 0.00	0.227	E.S.
						4			01	3	
Bhaya	2.200	0.933	0.484	0.583	0.088	0.106	2	1	< 0.00	0.303	E.S.
		3	2	3	41	5			01	6	
Dvesha	1.467	1	0.730	0.742	0.133	0.135	2	1	< 0.00	0.574	E.S.
			3	8	3	6			10	6	
Dhairya	1.833	0.766	0.746	0.626	0.136	0.114	2	1	< 0.00	0.648	E.S.
		7	6	1	3	3			01	2	
Harsha	0.966	0.700	0.718	0.702	0.131	0.128	1	1	0.015	0.720	S
	7	0	4	2	2	2			6	1	
Priti	0.700	0.366	0.535	0.490	0.097	0.089	1	0	0.003	0.469	V.S.
	0	7	0	1	67	49			9	6	
Virya	1.167	0.533	0.746	0.507	0.136	0.092	1	1	< 0.00	0.565	E.S.
		3	6	4	3	64			01	3	

DISCUSSION

The main objective of research was to evaluate the clinical efficacy of the treatment. Total research work can be divided into following subtopics:

- A. Statistical analysis
- B. Mode of action of Trial Drugs on Generalized Anxiety Disorder
- **A. Stastistical analysis:** During **analysis** of Data available, it was observed that Av-

erage percentage relief obtained by giving shankhpushpi churna is significant for **Ayurvedic Gradation of** ManasaBhavas. After giving Shankhapushpi churna Moderate Relief was found in symptoms like Krodha, Shoka, Dhairya and Mild relief was found in Bhaya, Dvesha, Harsha & Priti.

B. Mode of Action of Trial Drugs on Generalized Anxiety Disorder

Mode of action of Shankhapushpi Churna^{3,4} The results of present study showed that Shankhapushpi relieves anxiety, irritability, restlessness, and inability to relax due to its anxiolytic effect. Shankhapushpi improves lack of concentration and memory due to its Medhya effect. Shankhapushpi has a sedative effect, which gives good healthy sleep. Shankhapushpi has been mentioned as a Rasayana in Charaka Samhita, so that it gives freedom from fatigueness. Shankhapushpi has Kashaya rasa, Ushna Virya & Madhura Vipaaka. Shankhapushpi reduces Kapha Dosha due to its Kashaya rasa, Pitta Dosha due to its Madhura Vipaka, and Vata Dosha due to its Ushna Virya. It nourishes Majja & Shukra dhatu due to Madhura Vipaka0 which further leads to Balavridhhi & Ojovridhhi. When Vaataprakopa due to Dhaatukshaya leads to Manasa Vikaras, Shankhapushpi pacifies Vaataprakopa & Manasaroga by nourishing Majjadidhatus. Thus, we can say that Shankhapushpi is more beneficial in Vaataja Manasa Vikaras.

CONCLUSION

This proved the utility and relevance of Shankhapushpi Churna. During analysis of Data of Ayurvedic Gradation of Manasa Bhavas, it was observed that Average percentage relief obtained in Shankhapushpi churna is significant. Symptoms better managed by Shankhapushpi Churna are Krodha, Shoka. In classics, Chikitsa sutra of mental disorders like Unmada, Apasmar, etc. starts with shodhana of the patient. Thus, we may conclude that prior shodhana may augment the action of drugs. Also, following of pathyapathya yields good results. The clinical improvement provided by Shankhapushpi churna presents new availability in the management of GAD, so that the quality of life of the patients can be definitely improved.

REFERENCES

- 1. Kashinath pandey ----et al , Charaka samhita of agnivesh , vidyotini Hindi Commentary , Chaukhambha bharati academy , reprint edition 2008 ,vol I , viman sthan 4/8 , p.707.
- 2. American Psychiatric Association, (2013). Diagnostic and statistical manual of mental disorders: DSM-5. (5th ed.). Washington, D.C.: American Psychiatric Association. p. 222.
- 3. Torpy, Janet M.; Burke, AE; Golub, RM (2011). "Generalized Anxiety Disorder". JAMA **305** (5): 522.
- 4. Prof. P. V. Sharma ,dravyaguna vijnan, Chaukhambha bharati academy , Varanasi , reprint edition 2006 , vol II ,p.9 .
- 5. Dr. Indradev tripathi, chakradutta of chakrapani dutta, Vaidyaprabha Hindi Commentary, chaukhambha Sanskrit bhavan, reprint edition 2015, 20/3,p.125; 21/30,p.132.
- 6. Dr.BrahmanandTripathi, Charaka samhita of agnivesh ,charak chandika Hindi Commentary , Chaukhambha Surbharti Prakashan, Varanasi , reprint edition 2009 , vol. II chikitsa sthan 1/30-31 , 48 ;10/62 ,p.419.
- 7. Lieb, Roselind; Becker, Eni; Altamura, Carlo (2005). "The epidemiology of generalized anxiety disorder in Europe". European Neuropsychopharmacology **15** (4): 445–52.
- 8. Rickels, K; Schweizer, E (1990). "The clinical course and long-term management of generalized anxiety disorder". Journal of Clinical Psychopharmacology **10** (3 Suppl.): 101S–110.
- 9. Spitzer, Robert L.; Kroenke, K; Williams, JB; Löwe, B (2006). "A Brief Measure for Assessing Generalized

- Anxiety Disorder". Archives of Internal Medicine **166** (10): 1092–7.
- 10. Dr. Indradev tripathi, raj nighantu of shri narhar pandit ,dravyaguna prakashika Hindi Commentary ,ksrishnadas academy , Varanasi, first edition 1982 ,131-133,p.56.
- 11. Prof. P.V. Sharma ,kaiyadev nighantu (
 pathyapathya vibodhaka) , Chaukhambha orientalia , Varanasi , first
 edition 1979 ,191/690
 ,p.127;462/1493-96,p.622.

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