



USE OF *AYURVEDIC SWASTHAVRITTA* REMEDIES AS ADJUVANT IN SCHIZOPHRENIA PATIENT TO IMPROVE THE QUALITY OF LIFE- A CASE STUDY

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ABSTRACT:

Schizophrenia affects approximately 24 million people or 1 in 300 people (0.32%) worldwide. This rate is 1 in 222 people (0.45%) among adults. Conditions that include symptoms of psychosis most commonly emerge in late adolescence or early adulthood. A 27-year-old unmarried lady suffering with Schizophrenia for 10 years, visited in OPD during month of March 2022. She was from socioeconomically upper middle class. Patient had complained of delusion of reference, delusion of persecution, thought broadcasting, Auditory hallucination, Fear, loss of interest enthusiasm in work and life, laziness, less confidence, bad dreams and disturbed sleep. PSQI, HDRS, HAM-A and WHOQOL-BREF are used for proper mental and quality of life assessment. Active utilization of *Pratimarsha Nasya* (~low dose medication through nasal route) with *Anu Taila*, *Shiroabhyanga* (~therapeutic oil massage to head) with *Til Taila*, *Padabhyanga* (~ therapeutic oil massage to foot) with *Til Taila*, *Karnapurana* (~filling of ear with medicated oil) with *Til Taila* and Power Yoga (a fast-paced style of Yogasana without meditation) daily with proper time limit were prescribed her. Regular use of prescribed protocol for 2 months, remarkable changes in the different assessment tools and patient condition was found. Using this protocol with proper time limits in schizophrenia patient may help to improve their quality of life.

Keywords: Anu Taila, Padabhyanga, Pratimarsha Nasya, Schizophrenia, Shiroabhyanga, Swasthavritta, Quality of life.

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INTRODUCTION:

There are several types of mental disorders having significant disturbances in thinking, emotional regulation, or behavior. As per WHO; In 2019, one in every 8 people of the world population were living with more or less symptoms of mental disorder among which anxiety and depression are the most common. In 2020, the number of people living with anxiety and depressive disorders has increased significantly because of the COVID-19 pandemic. Casual estimation shows a 26% and 28% increase respectively for anxiety and major depressive disorders in just one year. Though effective prevention and management options exist but most people with mental disorders do not have easy and early access to effective care. Many people also experience stigma, discrimination and violations of human rights.^[1]

Auditory hallucinations are experienced by 60–80% of all patients diagnosed with a schizophrenia spectrum disorder.^[2] Globally, it is estimated that 1 in 7 (14%) 10-19-year-olds experience mental health conditions, yet these remain largely unrecognized and untreated. Conditions that include symptoms of psychosis most commonly emerge in late adolescence or early adulthood. Symptoms can include hallucinations or delusions. These experiences can impair an adolescent's ability to

participate in daily life and education and often lead to stigma or human rights violations.^[3] Their quality of life go very low though medical field have so many medicine and intervention methods for management and improvement. In the present study, patient had been taken allopathic medicine from nearly 10 years, yet her quality of life and work efficiency were decreases day by day. She came for *Ayurvedic* treatment at OPD of the department. As per the principles of *Dinacharya* and common procedures, patient was managed along with her present medication.

CASE REPORT:

A 27-year-old unmarried lady suffering with Schizophrenia science 10 years, visited in OPD during month of March. She was from socioeconomically upper middle class. She has 5'3" inch (160 cm) height with body weight 54 kg and normal BMI of 21.1 kg/m². She works in bank as accountant. Patient had complained of delusion of reference, delusion of persecution, thought broadcasting, auditory hallucination, fear, loss of interest and enthusiasm in work as well as in life, lezzy-ness, less confidence, bad dreams and disturbed sleep. For that she has taken allopathic medicine from last 10 years. She possesses education of M.Com. She feels more mistakes occurs during work hours and work

efficiency was low. Patient was diagnosed by allopathic doctors was Schizobssesive disorder Schizophrenia.

There was no any specific related past history found in that patient. Patient took the total seven medicine as prescribed by physician on date 26.02.2022 [Table 1].

Table 1: Allopathic Medicine Taken by Patient on the date of consultation

S.N.	Medicine	Dose
1.	Tab T. LITH CR300MG (Lithium)	1 BD
2.	Tab PALIDO OD 6 MG (Paliperidone)	1 OD
3.	Tab NIMEDIN 5 MG (Procyclidine)	1 BD
4.	Tab ARZOL 20 MG (Aripiprazole)	1 OD
5.	Tab CLOLOL 0.25 MG (Clonazepam)	1 OD
6.	Tab PANOZ 40 MG (Pantaprazole)	1 OD
7.	Tab PALIP XR 3 MG (Paliperodone)	1 OD

Clinical findings: Vitals were under normal limit. Patient's look was sad and expression less. Cardiovascular system, respiratory system and central nervous system had shown normal findings. On *Astavidha Pariksha* (examination), *Nadi* (~Pulse) 86 per min, *Mala* (~Stool) frequency Once in a day with hard consistency of stool, *Mootra* (~Urine) frequency 3-4 times per day (100-80ml/ void), *Jihva* (~Tongue) show Mild yellowish coating, slow and confused *Shabda* (~voice) with normal *Sparsha* (~touch), *Drishti* (~vision and eyes) and normal *Akriti* (~general body build) were noted. Patient was a middle age 27-year-old women of *Jangal Desha* (~Arid region). On *Dashavidha Pariksha*, *Prakriti* (~constitution) was *Kapha-Vata Pradhana* with *Madhyama*

(~Medium) *Sara* (~Systemic strength), *Samhanana* (~Compactness) & *Pramana* (~measurement of Dhatu) were noted. Patient's *Satva* (~mental status), *Vyayama Shakti* (~Physical work capacity,) *Satmya* (~suitability) and *Ahara Shakti* (~digestive power) were *Avara* (~weak) noted.

Diagnostic Assessment- All assessments for Sleep Quality, Quality of Life, anxiety level, and depression level were assessed by Pittsburgh Sleep Quality Index (PSQI), ^[4] WHOQOL: Measuring Quality of Life,^[5] Hamilton Anxiety Rating Scale ^[6] and Hamilton Depression Rating Scale (HDRS).^[7] Other symptoms were assessed on the grade system (Nil, mild, moderate, sever). [Table 2]

Table 2: Therapeutic Interventions applied from 12.03.2022 to 15.05.2022

S.N.	Daily Procedure	Duration
1.	<i>Pratimarsha Nasya</i> with <i>AnuTaila</i> 4 drops in each Nostrils	Morning (once every day)
2.	<i>Shiroabhyanga</i> with <i>Tila Taila</i>	10 min (once every day in evening)
3.	<i>Padabhyanga</i> with <i>Tila Taila</i>	10 min (once every day in evening)
4.	<i>Karnapurana</i> with <i>AnuTaila</i> 4-4 drops	At Bed Time (every day)
5.	Power Yoga	30 min (In morning every day)

Diagnosis: Schizophrenia, diagnosed by modern medical science specialist.

Therapeutic interventions: With-out alteration in ongoing therapy, On the basis of Ayurveda principles and procedure

management of the patient was done by some daily procedure like *Pratimarsh Nasya*, *Sirobhyanga*, *Padabhyanga* and regular activity. No *Ayurvedic* oral medicine was prescribed.^{[8][9][10]} [Table 3]

Table 3: Case Timeline for management of Schizophrenia

Date	Day of event	Assessment
12.3.22	Day 0	PSQI-: 7 HDRS-:17 HAM-A-:27 WHOQOL-BREFF-: 50
12.4.22	Day 31	PSQI-: 5 HDRS-: 14 HAM-A-: 19 WHOQOL-BREFF-: 67
18.5.22	Day 67	PSQI-: 4 HDRS-: 12 HAM-A-: 15 WHOQOL-BREFF-: 92

All above procedure had done by her family member after proper training.

Time line: Patient was instructed to visit OPD at regular 7 days interval for examination, assessment and 15 min counselling by physician.

Follow up and outcome: Ayurvedic interventions were stopped after 2 months of

regular use in month of May 2022. The treatment showed a significant result in **sign and symptoms** during the course of the treatment of 2 months and follow-up period of one month. [Table 4]

Table 4: Assessment of Patient (Before and after 2 months of Procedures plan)

S. N	Assessment Scale	Status Before Treatment	Status After Treatment
1.	PSQI	7	4
2.	HDRS	17	12
3.	HAM-A	27	15
4.	WHOQOL-BREFF	50	92

It was noted that Medicine taken by the patients after one month of therapy changed by here modern medical science physician.

The medicine as well as their doses were reduced up to a marked level. All changed medicines are listed in the table. [Table 5]

Table 5: Medicine prescribed by her consulting Allopathic doctor after two months of Ayurveda therapy and one month follow up (July 2022)

S.N.	Allopathic Medicine	Dose
1.	Tab T. LITH CR300MG (Lithium)	1 BD
2.	Tab NIMEDIN 5 MG (Procyclidine)	1 BD
3.	Tab ARZOL 20 MG (Aripiprazole)	1 OD
4.	Tab CARILIFT 3 MG (Cariprazine)	1 OD

DISCUSSION:

Nasya (~use of Oil as Nasal drops): Regular use of *Anutail* or minimum three months of year late rainy, Autumn and spring season for removal of *Kapha Dosa* and pacification of

Vata and *Pitta Dosa*. For proper functioning of the cells and organs proper natural cleaning at regular interval is very important. All sensory organs work properly. Nasal passage is very accurate for mode of administration of

medicine for area of brain. Nasal use of medicated oil (*Anutail*) work on limbic system and improve its work regarding different types of emotions work.^[11]

Siroabhyanga (oil application to head): The physiological effect of massage in general can be divided into are laxation effect and a stimulation effect. The relaxation effect involves hypothalamic reactions associated with the decline of sympathetic system activity and an increase in parasympathetic system activity. There are two types of stimulation effects: one is reflexive and the other is mechanical. The reflex effect is refreshing and relaxing due to delivering stimulation at the cutaneous peripheral nerve to the cerebrum. Peripheral cutaneous stimulation promotes circulation through stimulation of the parasympathetic nerve, relaxation of muscles and extension of capillary vessels. Ultimately, massage reduces sympathetic nerve activity while increasing parasympathetic nerve activity.^{[12][13]}

Padabhyanga (~Oilation of Foot): Regular foot massage pacifies the tiredness (physical & mental) and numbness and improve the working capacity, physical working capacity and sleep quality. It decreases the tension and anxiety.^{[14][15]}

Karnapurana (~Use of oil as ear drops): Regular use of oil (*Anutail*) for *Abhyanga* of

ears, it pacifies the *Vatadosa*, improve sleep quality. Prevent the pain, ^[16] *Karna Nada* (neurological problem of hearing and auditory hallucination).

Power Yoga/ Physical Activity: It improve the physical and mental strength ^[17] and working capacity, improve the tolerance of pain.^[18]

Conclusion: It was observed that after administration of *Nasya* with *Anutail*, *Sirobhyanga* (~Oilation of Head) with *Til Tail*, *Padabhyanga* (~Oilation of Foot) with *Til Tail*, *Karnapurana* (~Ear drop) with *Til Tail* and daily 30 min Power Yoga (No meditation) for 2 months with proper method in schizophrenia Patient, a positive effect in the patient like anxiety and depression scale number decreased and quality of sleep and the quality of life like work capacity, interest in work public relation were improved.

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