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Original Research Paper

Ayurveda

A CASE STUDY ON AYURVEDIC MANAGEMENT ON MAJOR DEPRESSIVE DISORDER

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ABSTRACT Depression is the most common mental disorder that affects most people's life directly or indirectly by affecting their physical, mental, personal, social and spiritual wellbeing. The common features are sadness, emptiness, irritable mood, accompanied by somatic and cognitive changes that significantly affect the individual's capacity to function. Depression is a leading cause of morbidity and mortality worldwide with profound public health concern. Current case presented with the complains of Loneliness, Sadness, Worthlessness, Helpless, Disturbed sleep, Lethargy and Heaviness in right side of the body and was diagnosed with Depression. Conventional psychopharmacological interventions taken from last 20 yrs were tapered in dose. Ayurvedic management was planned with Shodhan Chikitsa, Shaman Chikitsa, Satvavajaya Chikitsa and Daiwa vyapashraya chikitsa. Treatment continued for 60 days including 45 days of hospitalized treatment and then follow-ups. Intervention outcome showed that reduction in HDRS from 24 to 9, MADRS from 34 to 14, and PHQ-9 from 24 to 12. Improvement in symptoms. Thus, the Ayurvedic management showed efficacy in management of Depression.

KEYWORDS : Depression, Ayurvedic Management, Shodhan Chikitsa, Saman Chikitsa, Satvavajaya Chikitsa, Daiwa vyapashraya chikitsa

INTRODUCTION

Depression is a mental state of low mood and aversion to activity.[1] It affects about 3.5% of the global population, or about 280 million people worldwide, as of 2020.[2] Depression affects a person's thoughts, behavior, feelings, and sense of well-being.[3] The pleasure or joy that a person gets from certain experiences is reduced, and the afflicted person often experiences a loss of motivation or interest in those activities.[4] People with depression may experience sadness, feelings of dejection or hopelessness, difficulty in thinking and concentration, or a significant change in appetite or time spent sleeping; suicidal thoughts can also be experienced.

Depression can have multiple, sometimes overlapping, origins. Depression can be a symptom of some mood disorders, some of which are also commonly called *depression*, such as major depressive disorder, bipolar disorder and dysthymia.[5] Additionally, depression can be a normal temporary reaction to life events, such as the loss of a loved one. Depression is also a symptom of some physical diseases and a side effect of some drugs and medical treatments.

PATIENT INFORMATION

A 50 years old female patient presented with Loneliness, feeling of Sadness (on & off), Worthlessness, Helpless, Disturbed sleep, Lethargy in doing work and Heaviness & altered sensation in Rt side of the body, arguments with family on past matters, get tensed over little things, over thinking and did not like to socialized with people. She was under psychiatric medications since 20years. Family history mother (since age of 20years) & brother (since age of 25years) having depression. On Jan 2025 Patient was brought to P.D. Patel Ayurveda Hospital at Nadiad, Gujrat.

CLINICAL FINDINGS

Genral examination	
BP	120/ 80 mmHg
Pulse	86/min
SpO_2	97%
Weight	64kg

Asthavidha pariksha	
Nadi	86/ min, *kapha pradhana vata*
Mutra	5-6 times/day
Mala	1-2times/ day
Jihva	*Nirama*
Shabda	*Shpashta* (no any abnormality found with normal speech)
Sparsh	*Anushna sheeta*
Drik	Normal vision with no any icterus found
Akriti	Normal

TIMELINE

Patient had complained of Loneliness, Sadness, Worthlessness, Helpless, Disturbed sleep, Lethargy, Heaviness in rt side of the body and over thinking before20 years (2005). So, she consults homeopathic doctor & take homeopathic medicines for 2years, but her mother & brother forced her to take allopathic medicines for that and repeatedly said that how you treat with homeopathic medicines. After that she had gradually increases complain due to stress so she consults with psychiatrics and diagnosed with depression (2008) & took antidepression medicaments. Symptoms increase on full moon night & during menstruation also had complain mild Swelling (on & off) on b/l legs & b/l hands, facial puffiness & wt. gain about 20kg (60kg to 80kg), so she stopped medicines for 1year. Wt. and swelling on b/l legs and hands increases gradually. In 2012 she consults another psychiatrics and gave her antidepression medicines like, Tab INTALITH CR 450 Once A Day, Tab. PEXTI LR 37.5 Once A Day, Tab. VELKEM OD 500 Once A Day. She feels better after taking that medicament, but after 4 years she did not take medicines on time and discontinue herself. She feels better whenever taking medicines for that. She came here for ayurvedic treatment on Jan 2025.

Diagnostic Assessment [6&7]

- Hamilton Depression Rating Scale (HDRS)
- Montgomery and Asberg Depression Scale (MADRS)
- Patient Health Questionnaire (PHQ-9)

Treatment Modalities Of Depression In Ayurveda

1) DAIVAVYAPASHRAY CHIKITSA (DIVINE OR SPIRITUAL THERAPY) – it includes Mantra Pathan (chanting of mantra), Houma (spiritual oblition), Upwas (fasting), Swastivachanam (reading good books). This might play important role for a person to be anxiety, fear, anger free and get stable at spiritual level.

2) SATVAVAJAY CHIKITSA (PSYCHOTHERAPY) - In Ayurveda,

role of psychotherapy has been emphasized in the treatment of mental disorders. It is aimed at restoring mental equilibrium through diversified techniques. If there are feelings of fear, anger, exhilaration, jealousy or greed then psychotherapy is aimed at replacing the negative emotions with development of positive feelings.

3) YUKTIVYAPASHRAYA CHIKITSA (RATIONAL TREATMENT) - It includes Shodhan as well as Shaman Chikitsa. Use of various drugs and food as medicine is done in this type of treatment modality.

Therapeutic Intervention

Intervention	Dose	Time	Anupana
Phase 1			
Snehapana with Brahmi Ghrita	40ml (In increasing dose up to Snehasiddhilakshana) (15ml increase gradually every day)	Twice	Ushnodak
After Snehasidhhilakshana Sarvanga Abhyanga with Narayana tail Sarvanga Bashpa svedana with Nirgundipatren			
After 3rd day of Abhayanga & Svedana Virechana karma	Virechana karma with Dindayal churna 5gm with Erandasneha 50 ml with Drakshakvath	1time	
After virechana karma samsarjan kram followed for 2days			
Phase 2			
Sarvanga Abhyanga with Narayanatail Sarvanga Bashpa Svedana with Nirgundipatren			
Niruhbasti with Medhya dravya	320 ml (before meal on empty stomach) Ano-rectal route	On alternate day	
Matra basti (Brahmi ghrita)	40 ml after dinner in evening		
Jatamansi churna	3gm	Twice	Ushnodak
Mandukparni churna + Brahmi churna + Sankhpushpi churna	1gm 2gm 1gm	Twice	Ushnodak
Nasya karma (Brahmi ghrit)	8-8 drops (Nasal route)	Evening	
Shamnartha snehapana (Brahmi ghrita)	20ml	Twice	Ushnodak
Brahmi vati	2tab	Twice	Ushnodak

Follow-up And Outcomes

Hamilton Depression Rating Scale (HDRS)			
No.	**1st Day of Admission**	**After 15 days of treatment**	**After 45 days of treatment**
1	3	2	1
2	1	0	0
3	0	0	0
4	0	1	0
5	1	0	0
6	2	1	0
7	4	3	1
8	1	1	1
9	1	1	1
10	2	1	1
11	2	1	1
12	1	0	0
13	2	2	2
14	2	0	0
15	1	1	1
16	A -1 B -	A -0 B-	A -0 B-
17	0	0	0
Total	24	14	9

Montgomery and Asberg Depression Scale (MADRS)			
No.	**1st Day of Admission**	**After 15days of treatment**	**After 45 days of treatment**
1	3	2	2
2	3	2	0
3	2	2	1
4	6	5	2
5	3	1	1
6	3	1	1
7	5	5	3
8	4	4	2
9	4	4	2
10	1	1	0
Total	**34**	**27**	**14**

Patient Health Questionnaire (PHQ-9)			
No.	**1st Day of Admission**	**After 15days of treatment**	**After 45 days of treatment**
1	3	3	2
2	3	3	1
3	3	3	2
4	3	3	2
5	3	2	2
6	3	3	2
7	3	2	1
8	2	1	0
9	1	0	0
Total	**24**	**18**	**12**

	1st Day of Admission	**After 15 days of Treatment**	**After 45 days of Treatment**
Sleep (in hrs. /night)	3-4hrs at night Early night sleeplessness wakes up in night (4-5times)	6-7hrs/at night wakes up in night (2-3 times)	8-9hrs/night wakes up in night (-(1-2 times) sound sleep

DISCUSSION

Brahmi having vatahara and Medhya properties and Promotes sleep, Anticonvulsive, Memory enhancer and helps in reducing stress and anxitety by reducing levels of cortisol and increases the serotonin levels which elevates the mood. [8] Mandukparni *Medhya, Rasayani, Agnivardhaka, Smritiprada* contains brahminoside, brahmoside which binds to cholecystokinin receptors, a group of G protein coupled receptors which bind the people hormones cholecystokinin and play a potential role in modulation of anxiety. [9] Shankhapushpi it balances the neurotransmitters and ups the dopamine secretion which inturn keeps the serotonin level under control and helps to reduce symptoms of anxiety. Jatamansi increases in the levels of monoamines and

inhibitory aminoacids, serotonin, 5-hydroxyindole acetic acid, gaba and taurine contributes to its antidepressant action. [10] Bramhi vati (anti-oxidant, anti-inflammatory, anti-anxiety and tranquilizer) are well established Medhya Rasayan(brain tonic) in Ayurveda.[11]

Patient Perspective

Patient feels better after taking ayurvedic treatment. Patient's husband opined of good and sustained improvement of the patient. Mental state, bonding with family member communications, socialization improved considerably. Compared to previous interventions, current intervention had better compliance.

CONCLUSION

Ayurveda is very much capable of treating/managing depression and other mental disorders. Ayurvedic Management like, Shodhana, Shamana, Satvavajaya, and Daivavyapashraya Chikitsa-can significantly improve symptoms of Major Depressive Disorder. The treatment protocol, especially Medhya Dravya Basti, Brahmi-based therapies, and Nasya, produced marked clinical improvements, reflected by reductions in HDRS (24 9), MADRS (34 14), and PHQ-9 (24 12), along with better sleep and overall functioning. A case series should be carried out in such cases to validate this case report which will lead to national prosperity by managing the disorders.

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