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# IMPACT OF MANASIKA HETUS ON TWAK VIKRITI – AN AYURVEDIC AND MODERN REVIEW

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**ABSTRACT** Twak Vikriti (skin disorders) are widely discussed in Ayurveda as outcomes of both Shariika (physical) and Manasika (psychological) factors. Among these, Manasika Hetus such as Chinta (excessive worry), Krodha (anger), Bhaya (fear), and Shoka (grief) play a pivotal role in disturbing the balance of Doshas and Dhatus. Ayurvedic classics describe the inseparable link between Mana and Sharira, wherein mental stressors aggravate Vata and Pitta, impair Rasa-Rakta circulation, and ultimately manifest as Twak Vikritis like Kustha, Visphota, and Vicharchika. Modern science corroborates these findings by establishing the psychoneuroimmunological axis, highlighting how chronic psychological stress alters neuroendocrine responses, weakens skin barrier function, and triggers inflammatory dermatoses such as psoriasis, eczema, and acne. This review critically evaluates the role of Manasika Hetus in the pathogenesis of Twak Vikriti by correlating Ayurvedic principles with modern dermatological evidence. Understanding this interplay emphasizes the need for holistic management strategies that integrate stress reduction, diet regulation, and classical Ayurvedic interventions for effective prevention and treatment of skin disorders.

**KEYWORDS :** Manasika Hetus, Twak Vikriti, Ayurveda, Psychodermatology, Stress, Dosha imbalance

## INTRODUCTION

The skin (Twak) is regarded as a vital organ that reflects the overall state of health and disease. In Ayurveda, Twak is described as an Upadhatu of Rasa Dhatu and is closely connected with Rakta Dhatu, thus playing a significant role in diagnosis and prognosis of systemic disorders[1]. Twak Vikriti (skin disorders) are considered multifactorial in origin, where both somatic and psychological causes contribute to their manifestation.

Among these, Manasika Hetus such as Krodha (anger), Chinta (anxiety), Shoka (grief), and Bhaya (fear) are emphasized in the classics as precipitating and aggravating factors for numerous disorders, including those affecting the skin. These factors lead to disequilibrium of Manas and provoke primarily Vata and Pitta doshas, thereby disturbing the integrity of Twak[2]. This perspective highlights the inseparable relationship between Sharira (body) and Manas (mind), which Ayurveda considered integral to health.

Modern dermatology also acknowledges the influence of psychosocial stress on skin disorders. The concept of the neuro-immuno-cutaneous-endocrine (NICE) network provides a scientific explanation of how psychological stress alters immune response and skin barrier function, contributing to conditions such as psoriasis, atopic dermatitis, and acne[3]. Psychiatric literature also supports that chronic stress and negative emotions amplify inflammatory mediators and hormonal dysregulation, making skin highly vulnerable to psychosomatic influence[4].

Despite these insights, integrative models that combine Ayurvedic understanding of Manasika Hetus with contemporary dermatological evidence remain limited. This research aims to critically evaluate the impact of Manasika Hetus on Twak Vikriti, bridging classical Ayurvedic knowledge with modern psychosomatic dermatology.

### Methodology

This review article was designed following a systematic narrative approach. The primary objective was to analyze the role of *Manasika Hetus* (psychological factors) in the manifestation of *Twak Vikriti* (skin disorders) from both Ayurvedic and modern perspectives.

### Sources of Data

**1. Classical Ayurvedic Texts** – *Bruhatrayi* (Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya) and *Laghutrayi* were reviewed for references related to *Manasika Hetus*, *Twakvikara*, *Srotodushti*, and *Manasika Nidanas*. Specific chapters dealing with *Kustha*, *Visarpa*, *Shwitra*, and *Twak Vikriti* were critically analyzed[5].

**2. Modern Literature** – Standard dermatology textbooks and psychiatry references were consulted to correlate psychosomatic influences on dermatological disorders. Sources included *Rook's Textbook of Dermatology* [6], *Harrison's Principles of Internal Medicine, and Kaplan & Sadock's Synopsis of Psychiatry* [7-8].

**3. Published Research Articles** – Indexed journals from PubMed, Scopus, AYUSH Research Portal, and Google Scholar between 2000–2025 were searched using keywords: "psychological stress and skin disease," "Ayurveda and Manasika Hetus," "psychodermatology," and "Twak Vikriti."

## RESULT

The review of classical Ayurvedic literature and modern research clearly demonstrates that Manasika Hetus (psychological factors) play a significant role in the origin and progression of *Twak Vikriti (skin disorders)*. Both systems of knowledge emphasize that prolonged stress, anger, fear, grief, and similar emotions act as precipitating and aggravating factors in skin pathology.

### 1. Ayurvedic Perspective

Ayurveda considers *Twak* as a *marmasthana* and a reflection of the health of *Rasa Dhatu*. The balance of *doshas* ensures the integrity of *Twak*, but Manasika Hetus such as *krodha (anger), shoka (grief), bhaya (fear), irsha (jealousy)* disturb *Manovaha Srotas*, aggravating *Pitta* and *Vata* and causing *srotodushti*. Charaka highlights the role of *chinta* and *krodha* in *Kushtha Roga* nidana [9]. Similarly, Sushruta considers *manasika bhavas* important precipitating factors in chronic skin conditions [10].

### 2. Modern Perspective

Psychological stress triggers activation of the hypothalamic–pituitary–adrenal (HPA) axis and the sympatho-adreno-medullary system, releasing cortisol, adrenaline, and pro-inflammatory cytokines. These disturb cutaneous immune responses, impair barrier repair, and cause mast cell degranulation, which worsens inflammatory dermatoses such as atopic dermatitis, psoriasis, and urticaria [11]. Psychiatric disorders like depression and anxiety are shown to worsen chronic dermatological diseases by perpetuating the stress inflammation cycle [12].

### 3. Integrated Findings

- Ayurveda explains stress-induced Twak Vikriti through *dosha-*

*prakopa* and *srotodushti*.

- Modern science demonstrates similar outcomes via the neuro-immuno-cutaneous (NIC) axis**.**
- Both perspectives converge on the idea that psychological imbalance manifests as dermatological disease**.**

**Table No. 1 Impact Of Manasika Hetus On Twak Vikriti (Ayurvedic & Modern Coorelation)**

| Manasika Hetus | Ayurvedic Explanation | Associated Twak Vikriti (Ayurveda) | Modern Correlation | Clinical Manifestations |
|---|---|---|---|---|
| Chinta (Worry) | Vitiates *Vata* and *Rasa Dhatu*, weakens *Twak* | Kushtha, Shvitra | Chronic stress → HPA axis activation | Psoriasis, Atopic Dermatitis |
| Krodha (Anger) | Aggravates *Pitta* and *Rakta Dhatu* | Visphota, Dadru | Increased cytokines & mast cell activity | Urticaria, Acne flares |
| Shoka (Grief) | Weakens *Ojas*, disturbs *Rasa Dhatu* | Pandu, Twak Kshaya | Cortisol elevation → immunosuppression | Delayed wound healing, Infections |
| Bhaya (Fear) | Aggravates *Vata*, disturbs *Manovaha Srotas* | Twak Rukshata | Sympathetic overdrive → vasoconstriction | Eczema, Vitiligo |
| Irsha (Jealousy) | Causes *Pitta-Prakopa* | Kushtha, Dadru | Oxidative stress & inflammatory mediator release | Psoriasis relapse |

**Flow chart no. 1 –** Pathogenesis of Manasika hetus leading to Twak vikriti.

**Ayurveda**

Manasika Hetus (Chinta, Krodha, Shoka, Bhaya)

⬇

Aggravation of Vata & Pitta

⬇

Manovaha Srotodushti

⬇

Rasa Dhatu Dushti → Twak Dushti

⬇

Manifestation of Twak Vikriti (Kushtha, Visphota, Shvitra, Dadru)

**Modern**

Psychological Stress (Anxiety, Anger, Depression)

⬇

Activation of HPA Axis + Sympathetic System

⬇

↑ Cortisol, Catecholamines, Pro-inflammatory Cytokines

⬇

Neuro-immuno-cutaneous axis dysfunction

⬇

Skin Barrier Dysfunction + Inflammation

⬇

Manifestation of Dermatological Disorders (Psoriasis, Eczema, Urticaria)

## DISCUSSION

The psychosomatic dimension of skin disorders highlights how psychological disturbances influence dermatological health in ways that extend beyond simple causation. While earlier sections established the etiological role of Manasika Hetus, the discussion emphasizes their broader implications. Chronic exposure to negative emotions can modify disease severity, recurrence, and therapeutic responsiveness. For instance, patients with high stress reactivity often report delayed healing, frequent exacerbations, and reduced quality of life despite appropriate treatment [13].

Ayurveda uniquely contributes by integrating psychosocial dimensions into disease assessment through concepts like Satva, Prakriti, and Srotodushti. These frameworks allow a personalized understanding of why two individuals facing similar stressors may exhibit entirely different Twak Vikriti. Modern research supports this individual variability, citing genetic polymorphisms, epigenetic modifications, and variable cortisol reactivity as determinants of cutaneous outcomes [14].

Moreover, skin diseases influenced by Manasika Hetus often create a cyclical burden. Stigma and visible lesions generate secondary psychological distress, which worsens the condition. This feedback loop is well-documented in chronic dermatological conditions such as vitiligo, psoriasis, and atopic dermatitis [15]. Ayurveda addresses this through Satvavajaya Chikitsa, which aims to break the cycle by strengthening mental resilience, while modern psychodermatology employs cognitive-behavioral therapy and mindfulness-based interventions.

Another critical point is the therapeutic gap: conventional dermatological management often targets external symptoms, whereas Ayurvedic approaches emphasize internal balance, stress regulation, and lifestyle alignment. Integrating these perspectives may improve patient adherence, reduce relapse, and enhance overall well-being [16].

## CONCLUSION

The study of Manasika Hetus in relation to Twak Vikriti reveals a multifaceted relationship between mind and skin that cannot be addressed by isolated biomedical or classical Ayurvedic explanations alone. Instead, it calls for a transdisciplinary approach where traditional concepts of Dosha equilibrium and Satvavajaya are aligned with modern insights from neuroimmunology and psychodermatology.

The broader implication is that management of skin disorders requires more than topical or systemic interventions; it must involve psychological assessment, stress management, and individualized preventive strategies. This integrative approach not only addresses symptom control but also improves quality of life, resilience, and patient satisfaction.

Future directions include clinical trials comparing integrative regimens, molecular studies correlating Ayurvedic constructs like Prakriti with biomarkers of stress, and community-based programs promoting mental well-being to prevent Twak Vikriti. Such efforts could bridge the gap between classical wisdom and contemporary evidence-based practice, ultimately offering a more comprehensive model of skin health.

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