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## AYURVEDIC MANAGEMENT OF AUTISM: A CASE REPORT

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**Case Report** 

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### **ABSTRACT**

In Aayurvedd, Unmada is a term that represents mental ailments. It is a broad term that covers autism spectrum disorders, too. The primary cause of Unmada, as explained in Ayurveda, is the derangement in Manas (mental functioning), Budhi (application of the acquired knowledge), Samjna(perceptions), Jnana(experiences), Smriti(memory), Bhakti (emotional adhesions), Seela (conditioned activities). According to Ayurveda, the symptoms of autism spectrum disorders as per DSM V criteria are diminished social interaction, impaired language and restricted repetitive behaviours (RRB), which can be co-related with Unmada. Aim and Objective- Ayurvedic management of Autism symptoms w.s.r. Unmada: A case study in the present case study, A diagnosed case of ASD, age four years female, came to OPD of Kaumarbhritya, Rishikul Ayurvedic College and Hospital, Haridwar. Along with the addiction to watching mobile. Materials and methods: The treatment protocol of Unmada, like Balpanchkarma, speech therapy, and parent counselling, are adopted with classical medication according to the Dosha predominance. Result -Balpanchkarma, like Nasya being the Dwara to Shiras, opens up the Manovaha Srotas, Speech therapy for speaking and communication skills development, Parental counselling for social skill development, restriction of watching mobile, etc. These procedures, along with the internal medications, have improved the present case.

Key words: Unmada, ASD, Balpanchkarma, Nasya, Manovaha Srotas

#### INTRODUCTION

Autistic Spectrum Disorders are an alarming problem of the present era, and their incidence has increased in the past decade. The prevalence of this condition in India its incidence rate is calculated as 1 in 90,666 or 11,914. [1] There are also factors such as genetic problems, autoimmune diseases and neurological abnormalities that have been identified as the causes of ASD. Still, there is no clear information about the causes of ASD to date. Different new theories about the causes of autism spectrum problems are also occurring. Among the children conceived using ART, about 0.8% of those born as singletons (only one baby carried during the pregnancy) and about 1.2% of those born as a twin or multiple were diagnosed with ASD. Children with ART with ASD are more likely to be diagnosed if it is intra cytoplasmic as compared to the traditional method, sperm injection (ICSI) was used with in vitro fertilisation. [2] In Ayurveda, Unmada is a term that represents broad classes of mental ailments. Unmada is a general term that covers autism spectrum disorders, too. The primary cause of Unmada, as explained in Ayurveda, is the derangement in Manas (mental functioning), Budhi (application of the acquired knowledge), Sam*ina*(perceptions), *Jnana*(experiences), Smriti(memory), Bhakti (emotional adhesions), Seela (conditioned activities).[3] According to Ayurveda, the symptoms of Autism spectrum disorders as per DSM V criteria are diminished social interaction, impaired language and restricted repetitive behaviours (RRB), which can be co-related with Unmada. Again, the era of digitalisation, exposure to mobile gadgets, changes in outside and social exposure timings, and a sedentary lifestyle. In addition to lack of time to communicate with their parents and engaged in watching mobile or other electronic gadgets etc. are some of the stresses causing factors which lead to mental disorder. Therefore, the first and foremost principle of treatment of any disease is *Nidana Parivarjana*, followed by the use of *Sansamana Chikitsa* with the help of internal medication, which boosts the mental power and helps to rejuvenation process and acts as neuroprotective; Balpanchkarma like *Nasya and Siropichu* by its virtue open up manovaha srotas, Speech therapy for speaking and communication skills development, Parental counselling for social skill development so, as she can create healthy environment and relief in all other complaints.

## Case study

A 4-year-old female child came to OPD of Kaumarabhritya of Rishikul campus and hospital, Haridwar. She is the second child of nonconsanguineous parents, born through full-term expected vaginal delivery with a birth weight of 3.25kg. Then, after the 3rd day of birth., she was diagnosed with jaundice for which she had taken medication, and it was resolved. According to the patient's attendant, she had a history of delayed milestones like neck holding at the age of 6 months, sitting without support at the age of 11 months, standing with support at the age of 17-month walk without support at the age of 20 month, monosyllable words at the age of 18 months, bi syllabus word at the age of 24 months, words with meaning at the age of 3 years, 1 or 2 sentence without pointing at the age of 4 years with this she has complain of Delayed Speech, improper social interaction, poor communication, poor respond to name, no eye contact, poor command following, self-engaged behaviour, poor imitation, repetitive behaviour. She took speech therapy for six months and got mild relief. Presently, they are under ayurvedic treatment for four months in our hospital for the above complaints.

### **General Examination**

General condition	Before treatment	On treatment
Temp	97.6degree F	97.8degree F
BP	100/80mmhg	110/70mmhg
Pulse	78 beats/min	76 beats/min
Rasp	20/min	24/min
Spo2	97@ RA	98@RA
Weight	15.5 Kg	16Kg
Pallor	Not Present	Not present
Cyanosis	Not present	Not present
Clubbing	Not present	Not present
Lymph node	Not palpable	Not palpable

## **Systemic Examination**

- Cardiovascular system S1 & S2 Heard, no abnormality detected in CVS.
- Respiratory system B/L air entry regular, chest B/L symmetrical, traditional shape and movement, trachea centrally present, no abnormality detected.
- **G.I. system-** no abdominal tenderness present, no organomegaly found,
- **Auscultation** 9 bowel sounds/minute.
- Gait normal
- CNS- conscious and oriented with date, time & place

**Immunisation HISTORY**- Immunization was completely up to date.

**FAMILY HISTORY**- no relevant family history.

PERSONAL HISTORY-

Diet- vegetarian (Qualitative and Quantitative)

Appetite - normal

Bowels- regular (1 time/day)

Micturition- standard (4-5 times in daytime)

Sleep- Sound (7-8 hr/day)

Deworming- done.

**Anthropometry** 

Height: 98cm Weight: 15.5kg MAC: 13cm MTC: 24cm HC: 51cm Natal history Regular antenatal care was taken up to the 9th month of pregnancy.

No H/O gestational DM, HTN to mother.

The mother was on regular ANC.

The mother took all the nutrients and supplements during pregnancy.

## **Developmental history**

## Gross motor development according to age

Neck holding - 6 months.

Rolling over - 8 months

Sitting with support - 9 months

Sitting without support - 11 months

Standing with the backing - 17 months

Standing without support - 18 months

Walk with support - 19 months.

Walk without support - 20 months.

Climbing stairs - 3 years

Running - 3.6 years

Jumping - 3.6 years

Riding cycle - 4 years

### Fine motor development according to the age

Reaching object with both hands - 1 year

Transfer objects - 3 years

Pincer grasp - 3 years

## Language development according to the age.

Cooing - 3 months

Babbling - 6 months

Laughing loud - 9 months

Mono syllabus word - 18months

Bi syllabus word - 24 months

Word with meaning - 3 years

1 to 2 sentences without telling - 4 years.

## Social and adaptive development according to the age.

Social smile - 1.6 years

Recognising mother - 2 years

Eye contact – NO eye contact

Present medication: NAD Differential diagnosis

ADHD, Asperger's syndrome, Rett's syndrome, In-

tellectual disability, ASD.

## **Diagnosis**

Unmada (Autism)

### **Internal medications**

## 1<sup>st</sup> assessment (for one month)

- 1. Smritisagar ras 35mg
  Brahmi Vati 65mg
  Mukta pishti 35mg
  Praval Panchamrit ras 35mg
  Giloya sat at 65mg.
- 2. Vacha Churna 65mg
  Bala Churna 125mg
  BID with honey.

BID with honey.

3. Mahakalyanaka gritham ½ tsp BID

## 2<sup>nd</sup> assessment (for one month)

- 1. CST no. 1, 2 and 3
- 2. Sarswataritha with gold -5ml BID with the same amount of water.

## 3<sup>rd</sup> Assessment (for two months)

- 1. Sarswataritha with gold -5ml BID with the same amount of water.
- 2. Syp Brento fort- 5ml BID.
- 3. Brahmi Vati 1 tab BID

## **Treatment protocol**

## Advice

- Speech therapy for speaking and communication skills development.
- 2. Parental counselling for social skill development.
- 3. Restriction of watching mobile.

## Balpanchkarma therapy

- Nasya: Yasthimadhu ghrita 2 drops in each nostril OID
- 2. **Shiropichu:** Brahmi oil for seven days at an interval of 15 days

4. Vacha Churna with Honey For tongue coat.

## 4<sup>th</sup> assessment (for one month)

1. Same as 3<sup>rd</sup> Assessment

## Marma Therapy-

Kshipra, Kurchkshipra, Talahridya, Indrabasti, Apanga, Sthapani, and Manibandh marma pressure was applied on these Marma for 0.8 Sec and each Marma stimulation 12 times in trice a day.

## **RESULTS**

Parameters	Before treatment	On treatment
Speech	Delayed speech	Gradually improving speech
Social interaction	Improper social interaction	Partial proper social interaction
Communication	Poor communication	Occasional communicate
Respond to name	Poor respond	Occasional respond
Eye contact	No eye contact	Partial eye contact
Command following	Poor command Following	Partial command following
Self-engaged behaviour	++++	++
Repetitive behaviour	Frequent repetitive behaviour	Occasional repetitive behaviour
Imitation	Poor Imitation	Occasional Imitation

Hence, considerable improvement was seen in the patient. For more improvement, further sittings are required.

## CONCLUSION

The incidence of ASD is gradually increasing in the present era, due to which diagnosing the disease and early treatment is of great importance. Understanding the disease Autism in our classics is based on the clinical features as most of the clinical manifestations of psychological disorders fall under the category of Unmada. Medhya drugs have a multi-dimensional mode of action ranging from boosting mental power and helping to rejuvenate the process, improving motor performances, and exhibiting neuroprotective, anxiolytic, and anti-depressant action beneficial in Unmada Chikitsa. Shiropichu and Nasya, by their virtue, open up the Manovaha Srotas, which is Avrita by the Doshas, and overcome the deranged behav-

iour. Hence, in the further sittings of the treatment, significant changes in the patient are expected.

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