

A CLINICAL STUDY TO EVALUATE THE EFFICACY OF NASYA WITH SARSHAPATAILA IN VISHADA (DEPRESSION)

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ABSTRACT

Depression is a common but serious mood disorder which exerts wide range of physical, physiological and psychological impact. It may include feeling of anxiety, sadness, emptiness, helplessness, worthlessness, guilty, irritability or restlessness. According to WHO (2017, p.1), Depression affected over 322 million people worldwide as per 2015 statistics. In India it is estimated that around 57 million people are affected by depression. *Vishada* is the main factor which increases the range of all the diseases. It is a condition originated from apprehension of failure, resulting in incapability of mind and body to function normally with significant reduction in activities. When depression compared with *Vishada*, symptoms appears similar hence we can co-relate *Vishada* with depression. *Samanya Unmada Chikitsa* can be used in all kind of *Manasikarogas* based on the understanding of the *Doshas* predominant in that particular condition. In *Chikitsa sangraha*, *Chakradatta* mentions *Sarshapa taila Nasya* in *Unmada chikitsa*. *Sarshapa Taila* having *Ushna and Teekshna* qualities that can subside *VataKapha Dosh*. *Vishada* is one of the *Vataja vikara* and *Nasya Karma* is considered as prime line of treatment in *Vataja Vikaras* and could effective, economical and affordable treatment modality. The drug is having *Snigdha Guna* which is easily administrable Hence the study was planned to check efficacy of *Sarshapa Taila* in *Vishada*.

Keywords: *Vishada, Nasya, Sarshapa Taila*

INTRODUCTION

Depression it is mood disorder. In our day to day activities everyone occasionally feels sad, but these feelings are usually pass within a couple of days. When a person has a depressive disorder, it interferes with their daily life, normal functions, and it causes pain for both the person with the disorder and those who care about him or her. Depression is a common but serious illness, and anyone who experiences it need treatment to get better. *Vishada* is one of the *Vata Nanatmaja vikaras* and one of the *ManasikaRoga*¹ described in *Ayurvedic* literature. This disease has manifestations of loss of interest and inactivity in routine works following fear of failure. The symptoms of *Vishada* resemble disease mild depression in presentation. In depression the mood or effect of an individual are derailed. This disease is characterised by mood of extra ordinary sadness and dejection characterised by depressed mood, pessimistic thinking, reduced energy and psychomotor retardation. In *Ayurveda Samanya Unmada Chikitsa* can be used in all kind of *Manasika Rogas*. Based on the understanding of the *Doshas* predominant in that particular condition. *Vishada* is one among the *Vataja Vikaras* and *Nasya karma* is consider as one of the prime treatment modalities in treating *Vatavyadhi*. However, *Sushruta Samhita* mentioned *Sarshapa Taila Nasya* as *ShodhanaNasya*² and *Chakradatta* mention *Sarshapa Taila Nasya* for *Unmada Sarshapa Taila* having *Ushna* and *Teekshna* qualities that can subside *Vatakapha dosha*³. This drug is having *Sneha Guna* which is best medicine for *Vata Dosha* and easily administrable without much hospitalization. Hence the study is intended to find the effect of *Sarshapa Taila Nasya* in *Vishada*.

Procedure

Study Design:

Single group clinical study.

Drug	Mode of Administration	Dose	Duration of Treatment
<i>Sarshapa Taila</i>	<i>Nasya</i>	6 Bindu In Each Nostril.	1 Sitting For 7days

Observation Period: Patients were observed before the treatment and on 7thday (after treatment).

Study Duration -14 Days.

Follow up period: Follow up was done on 14th day.

Aim and Objectives

To evaluate the efficacy of *Sarshapa Taila Nasya* in the management of *Vishada*.

Materials and Methods

Selection of cases

20 Patients attending the OPD and IPD department of *Manasa Roga*, Alva's *Ayurvedic* Medical college and Hospital, Moodbidri. Diagnosed with depression and willing patients were enrolled in the study Case selection was random regardless of age, sex, occupation and socioeconomic considerations.

Ethical clearance

The institutional Ethical Committee of the Alvas *Ayurveda* Medical College and Hospital, Moodbidri, Dakshina Kannada, Karnataka, approved the study. An informed written consent was taken from each willing patient. The patients were free to withdraw their name from the study at any time without giving any reason.

Inclusion Criteria:

1. Patients diagnosed as per the criteria for mild and moderate depression as per ICD -10.
2. Age between 16 to 60 years.
3. *Nasyarha* patients.
4. Patients of either gender, irrespective of socio-economic status.

Exclusion Criteria:

1. Patients with frequent suicidal tendency/ thoughts.
2. Patients with major depressive disorder.
3. Pregnant women/ Lactating women.
4. Patients with other psychiatric disorders.

Assessment Criteria:

Subjects were assessed by using Hamilton's Depression Rating Scale⁴.

Diagnostic Criteria:

ICD 10 Criteria.

Statistical test

The obtained data on the basis of observations was subjected to statistical analysis in terms of mean, standard deviation, and standard error by applying student ‘t’ test. The results were interpreted at the level of $P < 0.001$ as highly significant, $P < 0.05$ or $P < 0.01$ as significant and $P < 0.10$ or $P > 0.01$ as insignificant.

Results

The effect of therapy is shown in Table 1 and overall effect of the group is shown in Table 2

Observation:

Gender: Majority of patients i.e. 75% were male, 25 % were Female. Though incidence of depression is more in females, in this study male patients approached more for the study.

Age: Among 20 subjects 30% were belong to age group 16-30 years of age group, followed by 67.5% in age group of 31-50, Remaining 2.5% were belong to age group of 51-70 years. Among 40 subjects participated in the study maximum no of subjects belonged to the age group 67.5% due to Prevalence of depression is more in this group.

Religion: It was observed in the study that 90% were Hindu, 5% were Christian and 5% were Muslim. This is due to the predominance of Hindu population in the area.

Marital Status: Majority of patients i.e. 65% were married and 14% were unmarried the age group selected for the study was 16-60 years and the incidence of middle-aged population was more, hence majority are married.

Education: 10% were had primary education, 67.5% were Higher Secondary and 22.5% were Graduates. It indicates the educational status of the region.

Occupation: 12.5% were Housewife, 20% Students and 27.5% Business class, 17.5% Agriculturists, 22.5% Service class. Business class people more suffer more due to work related problems.

Socio-economic status: Majority of patients belonged to middle class, i.e. 67.5%, 32% were from Lower Middle Class. It shows middle class people suffer more of stress related issues.

Diet: 70% of patients were consuming mixed diet and 30% were vegetarians According to recent researches, non-vegetarians (Mixed) suffer more from anxiety, stress which lead to depression.

Prakruti: Majority of patients belonged to 52.5% *Vata-kapha Prakruti*, 32.5% had *Vata-Pitta Prakruti*, 15% had *Pitta-Kapha Prakruti*, Due to *Vata Kapha Doshas* are predominant *Doshas* in *Vishada*.

Satva: 67.5% of patients were of *Madhyama Satva*, 32.5% *Avara Satva*.

Manasika Prakruti: Majority of the patients were of 57.5% *Rajasika Prakruti*, 42.5% had *Tamasika Prakruti*. *Vishada* is a *Vataja Nanatmaja Vikara* which increased *Rajo Guna* of *manas*.

Kosta: As per the study, it is observed that 82.5% were *Krura Koshta*, 17.5% were *Madhyama Koshta*, this might be because of *Agnimandya*.

Agni: 67.5% patients were of *Mandagni*, 12.5% had *Teekshnagni*, 5% had *Vishamagni* and 15% had *Sa-magni*. This shows the relation between disease and *Agnimandya*.

Table 1: Effect of *Sarshapa Taila Nasya* on Symptoms

Symptoms	BT	AT	RELIEF%	SD	SE	t – Value	p – Value
Loss of interest in activity	2.00	0.70	69	0.47	0.15	12.36	<0.001
Decreased energy	2.00	0.70	65	0.47	0.10	12.36	<0.001
Loss of self confidence	2.00	0.60	70.5	0.50	0.11	12.45	<0.001
Unreasonable guilt	1.90	0.7	63.1	0.52	0.11	10.25	<0.001
Suicidal thoughts	0.2	00	75	0.61	0.13	11.45	<0.001
Difficulty in concentration	2.0	0.60	70	0.50	0.11	12.45	<0.001
Change in psychomotor activity	1.8	0.70	65.1	0.55	0.12	8.90	<0.001

Sleep disturbance	2.0	0.70	65	0.47	0.10	12.36	<0.001
Variations in appetite	1.20	0.45	62	0.85	0.19	13.94	<0.001
HDR Scale	19.4	16.10	30.9	0.86	0.19	12.07	<0.001

Table 2: Overall effect of *Sarshapa Taila Nasya*

Overall Effect of The Group		
Class	Grading	Number of Subjects
<25%	No Change	0
26-50%	Mild Improvement	1
51-75%	Moderate Improvement	17
>75	Marked Improvement	2

DISCUSSION

Discussion on symptoms:

The pre and post treatment observations were recorded, and the student 't' test was done to find out the statistical significance. Regarding the response of the treatment on symptoms in the patients treated with *Sarshapa Taila Nasya* showed good effect on all symptoms. *Sarshapa Taila* contains Omega 3 fatty acids, Monounsaturated fatty acids, Glucosinolates, Vitamin-E and Antioxidants. Omega-3 fatty acid deficiency leads to depression by hampering serotonin production. Serotonin is chemical neurotransmitter, which helps to regulate positive mood, social behavior, appetite, sleep, memory etc⁵. The *Kapha* and *Vata* are the predominant *Doshas* in *Vishada*⁶. *Sarshapa Taila* is having *Katu Tikta rasa*, *Agni Deepaka*, *Srotoshodhaka* properties and *Ushna* and *Teekshna* qualities that can subside *Vata Kapha Dosh*⁷ so *Sarshapa Taila* is beneficial for *Vishada* condition. Antioxidant property which acts as *Rasayana*. The *Srotoshodhaka* action of the drug helps to act deeply on the mind destructing the *Avarana* of *Tamas*. It also acts in normalizing the chemical changes in brain by balancing the neurotransmitters so There is significant effect of *Sarshapa Taila Nasya* is seen in *Vishada*. Hamilton's Depression Rating Scale shows In 30.9% were improved after treatment. Result showed that *Sarshapa Taila Nasya* effective in *Vishada*.

Discussion on Nasya: The nose is the gateway of drug administration in case of *Urdhwajatrugata Rogas* and *Nasya* is the only procedure which directly influences all *Indriyas*. The drug administered through nose as *Nasya* reaches to the brain and eliminates all the morbid *Doshas* responsible for producing disease.

Vishada is a *Manasika Vikara* in which there is *TamoAvarana*. And *Shiras* is considered as one of the *Sthanas* of *Manas*. According to references nose is the gateway to skull and *Nasya* is the best therapeutic procedure for removing morbid *Doshas* from the *Utta-manga*⁷.

CONCLUSION

Sarshapa Taila Nasya is effective formulation giving good result in the management of *Vishada* due to its *Ushna*, *Tikshna Guna*, *Agnideepaka* and *Srotoshodaka* properties. *Nasya* expels the *Utklishta doshas* with minimal therapeutic dose there by shows quick results. The Group showing highly significant result.

REFERENCES

1. Acharya susharutha, Sushruta samhita, Hindi commentary Edited by Kaviraj Dr. Ambikadatta Shastri; Publish by Chaukambha sanskrit samstana edition 2011, Varanasi.pp 702, page no.587.
2. Acharya Susharutha, Sushurta Samhita, Nibandha Sangraha commentary Chaukhambha Orientalia Varanasi, 2002. Sutra Sthana1/24.
3. Cakradatta, chikitsa sangraha of chakrapani, commentary by G.Prabhaker rao,chapter 20 Page no 194-195,sloka no 7-8.
4. Kaplan, Harold I, Sadock BJ. 6th ed. Baltimore, Maryland, U.S.A.: Willium and wilkins; 1991. Synopsis of Psychiatry. [[Google Scholar](#)]
5. <https://www.easyayurveda.com/2015/03/19/mustard-benefits-types-side-effects-research/>
6. Acharya Susharutha, Sushurta Samhita, Nibandha Sangraha commentary Chaukhambha Orientalia Varanasi, 2002, Chikitsa Sthana. 40/34.

7. Dravya Guna Vijanana Hindi commentary by Prof Priyavrata Sharma Chaukhambha VisvaBharati Publication, 2012. Page no:152-154.

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