

THE PATHOPHYSIOLOGY OF VAIKARIKĪ NIDRĀ IN THE CONTEXT OF SLEEP
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ABSTRACT

Ayurveda, the traditional Indian system of medicine, places significant importance on the role of sleep in promoting overall health and wellness, along with *Āhara* (diet) and *Bhramacārya* (abstinence). Despite the existence of sleep disorders in both *Ayurvedic* and modern medicine, there is a growing need for integrative research that combines the principles of Ayurveda with modern science. The American Psychiatric Association categorizes sleepwalking as a mental illness in both the Diagnostic and Statistical Manual (DSM) and the International Statistical Classification of Diseases and Related Health Problems (ICD-10). However, there is a need for further classification and categorization of sleepwalking in Ayurveda, particularly in terms of determining whether it should be considered a stage of *Vaikarikī Nidrā* (abnormal sleep) or a *mānasika roga* (mental disorder). This highlights the importance of incorporating fundamental concepts of Ayurveda in future research efforts to bridge the gap between

the two systems of medicine. Integrating these principles may lead to a more comprehensive understanding of sleepwalking and its impact on mental health, and ultimately result in more effective treatments and therapies.

Keywords: *Āhara*, *Bhramacārya*, DSM, ICD-10, *Mānasika roga*, *Vaikarikī Nidrā*

INTRODUCTION

The first objective is to gain a deeper understanding of the underlying physiological processes that lead to somnambulism from an Ayurvedic perspective. The second objective is to determine the relationship between the Ayurvedic concept of *Vaikarikī Nidrā* and somnambulism (sleepwalking). This involves examining whether sleepwalking can be classified as a stage of *Vaikarikī Nidrā* or if it is considered a separate condition in Ayurveda. By establishing this relationship, we aim to gain a more comprehensive understanding of sleepwalking from an Ayurvedic perspective and its impact on mental health.

METHODS

- Various *Ayurvedic* classics like *Caraka Samhita*, *Sushruta Samhita*, *Astanga hridaya samhita*, and modern literature were consulted as source material. Apart from this, various peer-reviewed research journals, published research papers, and other relevant topics have been studied.

RESULT

The symptomatology of somnambulism is a crucial aspect to understand as it encompasses a wide range of behaviors that occur during sleep. Despite the name, sleepwalking is not limited to just walking and can encompass a variety of actions. These actions can range from simple activities such as getting dressed, moving furniture, or engaging in routine behaviors, to more complex and potentially dangerous actions such as running, engaging in sexual behavior, urinating in inappropriate places, or even attempting to drive a car.¹ It is important to recognize the full range of behaviors that can occur during sleepwalking to effectively diagnose and treat the condition. So, on applying fundamental concepts of Ayurveda to this symptomatology. It becomes evident that it is a disorder of *manovāha* and *sangyavāha srotas*. *Vāta doṣa*, especially the *Cala guṇa* along with *Kapha doṣa*, and *Rajo Guṇa* are involved.²

DISCUSSION

Sleep manifests when the seat of *caitanā* (wakefulness) is covered by *kapha doṣa* and *tama Guṇa*. *Tama Guṇa* naturally predominates at night with *kapha doṣa*.³ This along with the exhaustion of body, mind, and soul tend to disengage from sensory and motor inputs and it results in sleep.⁴ But in the case of *Vaikarikī Nidrā* which arises due to intake of *āhāra vihāra* which enforces a decrease in *kapha doṣa* and an increase in *vāta doṣa* which significantly increases *rajo Guṇa* and causes an imbalance in *manovāhi srotasa* and further affects our normal sleep cycle.⁵ Due to this the *jñanaindri* are able to process the sensory inputs, not from *pratyakāṣa jnana*, but from the memory or day-to-day activities stored as *smriti* in sleep and *karma indri* perceives this and acts according to that stimulus resulting in actions like walking, talking, etc. Somnambulism can be considered as a transient state of *manovāhi srotas* and *sangyavāha srotas duṣṭi* which occurs due to the vitiated *vāta*, *pitta*, and *rajo Guṇa*. This condition leads to different motor activities in sleep and the patient is unaware of it.

CONCLUSION

According to the review, we can say that sleepwalking can be correlated with *Vaikarikī Nidrā* of Ayurveda up to some extent. It is recommended that further clinical studies should be done to verify the proposed conceptual theory.

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