

A CASE STUDY ON CHITTODWEGA

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ABSTRACT: Anxiety is arguably an emotion that predates the evolution of man. Its ubiquity in humans, and its presence in a range of anxiety disorders, makes it an important clinical focus. GAD (Generalised anxiety disorder) is the most common psychiatric disorder characterised by Repeated, Persistent and unrealistic worry about life-events but it is different from normal feelings of anxiousness. The prevalence rate of Anxiety disorder varies according to the different age group as per the current DSM-5 criteria, only phobia and GAD are included under anxiety disorders, with weighted prevalence values of 4.2% and 5.8% respectively. For this available Psychiatric drugs are having various adverse effect and produces the dependency of the drugs, for this integrated approach is very essential, Ayurveda medicines are safe, cost effective hence here a case of chittodwega is successfully treated with Shamana medicine.

KEYWORDS: Generalised anxiety disorder

Chittodwega

Ayurveda

Shamana

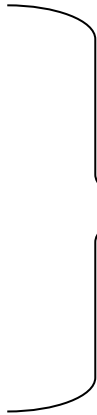
INTRODUCTION : Generalized anxiety disorder is one of the most common mental disorders. Up to 20% of adults are affected by anxiety disorders each year. Generalized anxiety disorder produces fear, worry, and a constant feeling of being overwhelmed. Generalized anxiety disorder is characterized by persistent, excessive, and unrealistic worry about everyday things. This worry could be multifocal such as finance, family, health, and the future. It is excessive, difficult to control, and is often accompanied by many non-specific psychological and physical symptoms. Excessive worry is

the central feature of generalized anxiety disorder. Ayurveda understands these disorders under the umbrella of chittodwega. The word chittodwega¹ is mentioned by Caraka in Vimanasthana while explaining the Manovikara²(Minor psychritric disorders). The word meaning of chittodwega refers to Anxious state of the mind.which is produced due to vitiation of Raja and Tama. In addition to Prana, Udana, Vyana Vayu; Sadhaka Pitta; and Tarpaka Kapha are also provoked factors in it.

CASE STUDY: A 30 years male patient not a K/C/O DM/HTN was apprently normal 3months back . When he came to our hospital Kayachikitsa OPD(OPD No.2010444) on 14th September 2020 with the complaints of palpitation since 3months which is associated with tremors in the both upper limb, electric shock like sensation in both the upper and lower limb, burning sensation in the chest, sour belching and reduced sleep, for all these complaints he consulted near my doctor but pt.didnt get complete relief later consulted to our hospital OPD.

PAST HISTORY: Pt. not suffered from any chronic illness like DM/HTN and Thyroid disorders.

ON EXAMINATION : General examination

Pallor		<div>Absent</div>
Ictreus		
Cyanosis		
Clubbing		
Odema		
Lymphodenopathy		
Gait-NAD		
Height-5.7''		
Weight-77kgs		

Vital signs: Temp.98.6⁰F

Pulse-78/min

Respiratoryrate-20cycles/min

Bp-130/80 mm of Hg

Mental status Examination :

MENTALSTATUS	BEFORE TREATMENT	AFTER TREATMENT
Appearance	Ill	Good
Behavior	Pre-occupied	Co-operative
Speech	Minimal	Adequate
Mood	Depressed	Normal
Thought process	Flight of ideas	Normal
Thought content	Phobias	Normal
Cognition	Normal	Normal
Insight/Judgment	Moderate	Normal

Treatment protocol:

1 st PHASE(14-09-2020 to 24-09-2020)	2 nd PHASE(25-09-2020 to 24-10-2020)
1.Tab.Kamadugharasa with mukta 1-0-1 Before food	1.Tab.Kamadugharasa with mukta 1-0-1 Before food
2.Tab.Medhya vati 1-0-1 After food	2.Pittashekara rasa 1-0-1 Before food
3.Saraswatharista 15ml-0-15ml After food	3.Saraswatharista 15ml-0-15ml After food
4.Aviphattikara choorna 1tsf-0-1tsf with hot water	4.Aviphattikara choorna 1tsf-0-1tsf with hot water

Assesment of the patient:

SL.NO	SIGN & SYMPTOM	BEFORE TREATMENT	AFTER TREATMENT
1.	Palpitation	++	---
2.	Tremors	++	---
3.	Electric shock like sensation	++	---
4.	Burning sensation in the chest	++	---
5.	Sourbelching	++	---
6.	Reduced sleep	++	+

Discussion: Acc. To ayurveda understanding of vyadhi is mainly based on Laxana, Udbhavasthana and Adhisthana considering this acc. To Sushruta³ vyadhi is mainly classified into two types i.e. Shareera and Manoadhisthana. At present because of stress and changes in lifestyle many people suffering from minor to major psychiatric disorder. For disorders like Chittodwega (Anxiety disorder) many herbomineral preparations are explained in the classics, among these many preparations are used based on the involvement of Dosha and Dushya, Here an case presented with Dushti of Pitta-vata and Manas hence the selection of the drugs as mentioned above. Rationality behind these drugs Kamadugharasa⁴ is mainly having Mukta bhasma, muktasukti bhasma, shanka, pravala and varatika bhasma which mainly acts on manovikara and pittahara, Medhya vati⁵ is Shankapushpi, Bramhi, Guduchi, Jatamamsi which are having medhya, Sanjyaprabhoda and Nidrajana properties which are very much useful to calm the mind of the individual. Saraswatharista⁶ is mainly having Bramhi panchanga as main ingredient which is having the property of Rasayana and chittasantosha. Aviphattikara choorna⁷ is the herbal preparation mainly used in annavaha srotovikara here patient even presented with disturbance of annavaha srotas which mainly reduces the pittadosha, vatanulomana and rechana. Hence patient needs the combination of different formulations in cases of Chittodwega and even other psychiatric disorder too.

Conclusion: In this case study justifies the successful management of Chittodwega through simple, cost effective and easily available. By this case study, we can conclude that in all cases of chittodwega (Generalised anxiety disorder) if patient seeks Ayurveda treatment as early as possible the percentage of recovery is more. And we can prevent the drug dependency and adverse effect of anxiolytics and sedatives. As this is a single case study so its very difficult to conclude the effect of

Ayurvedic treatment, but along with shamana medicine its very essential to plan panchakarma for better result. But this case study might be considered as base for future research protocol on the management of chittodwega through Shamanoushadi.

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