

## A CASE STUDY ON ADHD WITH AYURVEDIC MANAGEMENT

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**ABSTRACT**

Attention Deficit Hyperactivity Disorder (ADHD) is a juvenile neurobehavioral disease. It is primarily characterized by impulsivity, hyperactivity, and inattention, and it affects social, intellectual, and occupational functioning. Disorders associated with behavioral and mental problems are covered in Ayurveda's *Unmada* chapter. Therefore, it may be associated with *Unmada* based on the signs and symptoms. In this instance, the goal of the treatment regimen used in Kaumarbhritya OPD & IPD of Rishikul Ayurveda College & Hospital, Haridwar, Uttarakhand, was to evaluate how well the Ayurvedic approach worked in treating children's ADHD. Assessments were conducted prior to, during, and after Ayurvedic treatments such as *Kosthashodhana*, *Basti*, *Shiropichu*, and *Shiroabhyanga*. It was discovered that the prescribed medication worked.

**KEYWORDS:** ADHD, *Unmada*, Behavioral Disorder, Ayurvedic Management, Case Report.**INTRODUCTION**

A pediatric neurobehavioral condition is ADHD. In India, the estimated prevalence was 1.3 per 1000. The American Academy of Pediatrics advises that if a child between the ages of 4 and 18 exhibits behavioral or academic issues together with signs of impulsivity, hyperactivity, or inattention, they should be evaluated for ADHD. Social, academic, and professional functioning are all hampered by it. It will start when a person is 12 years old. Despite starting in childhood, ADHD symptoms can persist throughout adolescence and adulthood.<sup>[1]</sup> Mothers of children with ADHD are more likely to encounter difficult deliveries, protracted labor, and toxicemia during childbirth. Attentional problems connected to the development of ADHD are frequently linked to maternal drug use, smoking and alcohol consumption during pregnancy, and exposure to lead or mercury.<sup>[2]</sup>

ADHD and *Unmada* are not directly correlated in *Ayurveda*, although their signs and symptoms suggest a close relationship. *Acharya Charaka* states that mental stress from repeated exposure to fear or excitement, ingestion of incompatible, contaminated, and filthy foods, and possession by spirits such as gods are the causes of *Unmada*. These factors vitiate the *Dosha*, the seat of intellect, in those with low *Sattva Guna* levels, which subsequently vitiates the mind. Intellectual disorientation, mental instability, irritability, restlessness,

nonsensical speech, a sense of mental emptiness, and anxiety are common characteristics of *Unmada*. The current instance was an attempt to control the neurobehavioral diseases, such as ADHD, that are best treated with an *Ayurvedic* approach.

**CASE STUDY**

A 6 years old child came into our hospital with his father & mother who were hoping to get some help with their son's hyperactive aggressive behavior. Jay (Not real name) is the elder child in the family. He has a younger sister which is absolutely normal. He was cruelly biting his father & was continuously crying and was not ready to come in the OPD & to see the doctor for consultation. When his mom attempted to discipline him, he screamed. He also don't prefer to talk at all sometimes. His parents were concerned because he was not able to socialize, make friends in school. He always prefers to sit alone and play alone. He picks fight with her younger sister often beat her. He also has difficulty in speaking as well.

**Birth history**

**Jay** had normal vaginal delivery, full term with birth weight of 2.8 kg. Immediately cried after birth but after one month was hospitalized for pneumonia.

**Development history**

The neck holding was attained at the age of 6 months, sitting without support at the age of 1.5 years, walk without support at 2 years. Monosyllable words at 7-8 months and bisyllable words at 1.5 years. Till now he's not able to speak full sentence.

**Systemic examination:** Examination of cardiovascular system, respiratory system, per abdomen shows no deformity. Gait was normal. Muscle tone and texture was normal.

**Family history:** Non consanguineous marriage. One younger sister has no such problem.

**Personal history**

Diet- Normal  
Bowel- Clear (twice)Urine- Normal  
Sleep- Sound

**General examination, Anthropometry & Vitals**

General condition- Fair, lean, hyperactive, poor intellect and inattentive. Height- 118 cm  
Weight-22kg  
HC-55 cmCC-45 cm  
HR-85/minRR-26/min  
Temperature: 98.2<sup>0</sup>F

**Treatment plan**

Deepan Pachana for 5 days with Dadimashtaka Churana and Chitrakadi Vati.

Sittings	Panchakarma Given	Shamana Aushadi	Observations
1 <sup>st</sup> Sitting (7 days)	<ul style="list-style-type: none"> <li>Shiroabhyanga with Bala Tail</li> <li>Padabhyanga with Bala Tail</li> <li>Shiropichu with Brahmi Tail</li> <li>Matrabasti with Brahmi Tail (15ml)</li> </ul>	A combination of drugs with honey BID: Sarivadi Powder 65mg Bala powder 500mg Ashwagandha powder 250 mg Praval Bhasma 65 mg Brahmi Vati 1 Bid	Mild decrease in hyperactivity.
2 <sup>nd</sup> Sitting (7 days)	<ul style="list-style-type: none"> <li>Shriroabhyanga with Bala Tail</li> <li>Padabhyanga with Bala Tail</li> <li>Shiropichu with Brahmi Tail</li> <li>Matrabasti with Brahmi Tail (15ml)</li> </ul>	Brahmi vati Swarna yukt 1 OD with milk Brahmi Ghrit 5 ml with milk Bid A combination of drugs with honey BID: Sarivadi Powder 65mg Bala powder 500mg Ashwagandha powder 250 mg Praval Bhasma 65 mg	Able to spell properly. Able to follow Instructions given by parents.
3 <sup>rd</sup> Sitting (7 days)	<ul style="list-style-type: none"> <li>Shriroabhyanga with Bala Tail</li> <li>Padabhyanga with Bala Tail</li> <li>Shiropichu with Brahmi Tail</li> <li>Matrabasti with Brahmi Tail (15ml)</li> </ul>	A combination of drugs with honey BID: Sarivadi Powder 65mg Bala powder 500mg Ashwagandha powder 250 mg Praval Bhasma 65 mg Brahmi Ghrit 5 ml with milk Bid Brahmi vati Swarna yukt 1 OD with milk	Able to follow Instructions given by parents. Able to concentrate on particular things for more time.
4 <sup>th</sup> Sitting (7 days)	<ul style="list-style-type: none"> <li>Shriroabhyanga with Bala Tail</li> <li>Padabhyanga with Bala Tail</li> <li>Shiropichu with Brahmi Tail</li> <li>Matrabasti with Brahi Tail (15ml)</li> </ul>	A combination of drugs with honey BID: Sarivadi Powder 65mg Bala powder 500mg Ashwagandha powder 250 mg Praval Bhasma 65 mg Brahmi Ghrit 5 ml with milk Bid Brahmi vati Swarna yukt 1 OD with milk	Able to learn alphabets. Remarkable decrease in hyperactivity.

**DISCUSSION**

ADHD is linked to the *Pitta* and *Vata doshas*, and in this instance, the *Vata* and *Pitta dosha* was shown to be prevalent. Thus, the primary goal of the treatment approach was to restore *Vata-Pitta* equilibrium. Given that ADHD is a neurobehavioral condition, medications with *Medya* characteristics were employed.

In the first sitting we advised *Shiroabhyaga* with *Bala Tail*, *Shiropichu* with *Brahmi Tail*. Then in each sitting *Matra Basti* was advised with *Brahmi Tail* 15 ml.

**Probable mode of action of treatment are as follows**

**Shiroabhyanga:** Since *Shira* is regarded in Ayurveda as

*Uttamanga*, which governs bodily activities, we scheduled *Shiroabhyanga*. The primary function of *Abhyanga* is lymphatic drainage because the physical pressure used during the *Shiro Abhyanga* induces the fluids to migrate within the internal cavity. Lymph is essentially rich in albumin, glucose, and histaminases, and it contains comparatively more of the amino acid tryptophan than is found in food. Theoretically, serotonin affects mood, anxiety, and happiness, and blood amino acids like tryptophan create a corresponding increase in the neurotransmitter at motor end plates. Since it alters mood illegally, it is significant in a number of mental illnesses, including schizophrenia, depression, and ADHD. As a result, *Abhyanga* relieves *Manogata Vyadhi* effectively. *Shirodhara* only plays the role of *Chikitsa Sthanika* which helps in acute cases. So, for the further development in the condition, we added *Matra Basti* with this simultaneously.

**Shiropichu:** We chose the *Vatashamak* and *Medya* properties of the tail for the ADHD condition. The type of *Taila* used for the surgery and the drug's cellular absorption through the transdermal route determine *Shiropichu's* local effect. CNS is impacted by cellular absorption and circulation on a systemic level. The primary causes of the hyperactivity, inattention, and impulsivity associated with ADHD are vitiation of *Manogatadosha* and elevation of *Vata dosha*. *Shiropichu's* physical effects help the brain's circulation. *Shiropichu* has the ability to quickly penetrate *Manovaha Srotas* and repair the vitiation of *Manas Dosha (Rajas & Tamas)* because of the *Tikshana, Vyavayi, and Sukshma* properties of *Taila*. This may assist to regularize the blood flow to the brain. In addition, the *Vatashamaka* characteristics of the tail have an impact on impulsivity, hyperactivity, and intention.

**Matra basti:** Acharya Charaka states that *Basti* is the primary treatment for *Vata* and is referred to as *Ardha Chikitsa*. *Vata* governs *Rajoguna*, which is prevalent in ADHD. Therefore, management over *Vata* also affects control over *Rajo Guna*. *Basti* operates on the brain to help reduce stress, anxiety, and sadness. It also acts on the entire body through the gut-brain axis. At first, we suggested *Matra Basti* with *Brahmi Tail* because the *Taila* regulates the *Vata*, which in turn regulates hyperactivity, the main symptom of ADHD.

**Shamana aushadi:** The morbid *Doshas* will be eliminated from the body after purification measures. Then, by administering the *Shaman Aushadi* containing gold, which has *Medya* properties and acts on brain cells to help increase concentration and memory power, we recommended *Brahmi Vati Swarna Yukta, Brahmi Ghrita, Ashwagandha powder, Bala powder, Sarivadi powder, Praval Bhasma* etc.

## CONCLUSION

Ayurveda claims that based on the signs and symptoms, ADHD and *Unmada* may almost be co-related. *Chikitsa*,

symptoms, and the approach to *Doshas* involved are all explained in the same way. Treatment has been planned in accordance with the diagnosis of *Vata-Pittaja Unmada*. *Deepana, Pachana, Shirodhara, Matra Basti, and Shaman Aushadi* with *Medya* medications, speech therapy all were used as part of the treatment. Given that ADHD is *Yapya Vyadhi*, an effort was made to improve the child's and the family's quality of life, and the outcomes were excellent enough that even the parents are pleased.

## REFERENCES

1. Paul Vinod K, Bagga Arvind, Ghai Essential Pediatrics. New Delhi: CBS Publishers and distributors, 9: 56.
2. Kleigm Robert, Stanton Bonita, Jenson Hal B, Behrman Richard. Nelson textbook of Pediatrics. New Delhi: Elsevier publishers, 20: 200.