

International Conference on Integrated Mental Health, Ayurveda & Digital Well-Being 2026 (ICIMHAD 2026)

Innovations in Psychology, Technology & Management

CONFERENCE PROCEEDINGS

07th March 2026



Organized By

ARYAVART INTERNATIONAL UNIVERSITY

Dharmanagar, North Tripura, India

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**International Conference on Integrated
Mental Health, Ayurveda & Digital Well-Being 2026
(ICIMHAD 2026)**

Conference Proceedings

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Tilthai, Dharmanagar, North Tripura, India-799260

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Chancellor's Message

I am delighted to extend my heartfelt greetings as Chancellor of Aryavart International University on the occasion of the **International Conference on Integrated Mental Health, Ayurveda & Digital Well-Being 2026 (ICIMHAD 2026), held online on March 7, 2026.**

These proceedings compile selected abstracts from experts in Ayurveda, psychology, computer science, management, public health, yoga, and neuroscience, highlighting innovative integrations of traditional healing, mental health sciences, and digital technologies for holistic well-being.

This collection underscores our university's dedication to multidisciplinary research addressing global mental health challenges through tracks like digital innovations, workplace wellness, and integrative practices. I congratulate all contributors, the organizing committee under Patron Dr. Shaiju David and Conference Chair Dr. A R V Murthy, and commend the awards recognizing excellence in these vital areas.

May these insights inspire further collaborations and impactful advancements.

Sincerely,

Dr. Gunjan Bansal

Chancellor

Aryavart International University

Tripura, India

Vice Chancellor's Message

I am thrilled to introduce the proceedings of the **International Conference on Integrated Mental Health, Ayurveda & Digital Well-Being 2026 (ICIMHAD 2026)**, organized online by Aryavart International University on March 7, 2026.

This volume gathers insightful abstracts from experts in Ayurveda, psychology, digital innovations, management, public health, yoga, and neuroscience, designed to spark dynamic discussions and partnerships.

Embodying AIU's mission to pioneer cross-disciplinary breakthroughs for societal wellness—like mental health in professional settings and blended healing approaches—I extend deep gratitude to Conference Chair Dr. A R V Murthy, the dedicated organizers, authors, and awardees.

May this compilation catalyze meaningful progress in holistic health solutions worldwide.

Sincerely,

Dr. Shaiju David

Vice Chancellor

Aryavart International University

Tripura, India

Message from the Conference Chair

It is my distinct honor to present the proceedings of the **International Conference on Integrated Mental Health, Ayurveda & Digital Well-Being 2026 (ICIMHAD 2026)**, conducted online by Aryavart International University on March 7, 2026.

This compilation brings together concise abstracts from diverse fields including Ayurveda, psychology, digital health tools, management strategies, public health initiatives, yoga practices, and neuroscience—prioritizing idea exchange over complete papers to ignite collaborative research sparks. A key focus highlights Ayurveda's profound role in mental health through holistic therapies like Shirodhara, herbal formulations (Medhya Rasayanas), and Sattvavajaya (psychotherapy), integrated with modern neuroscience for balanced emotional wellness.

True to AIU's ethos of blending ancient wisdom with modern technology to tackle contemporary wellness issues—such as digital-age stress, workplace mental health, and integrated care models—I thank Vice Chancellor Dr. Shaiju David, the organizing committee, abstract authors, session chairs, and award winners for their pivotal roles.

May these pages fuel innovative pathways for healthier minds and communities globally.

Sincerely,
Dr. A R V Murthy
Conference Chair
ICIMHAD 2026

Message from the Conference Co-Chair

It is a matter of great privilege and honor to serve as the Conference Co-Chair of this esteemed International Conference. I extend my heartfelt greetings to all distinguished speakers, researchers, academicians, practitioners, and participants who have contributed to making this academic gathering a meaningful and intellectually enriching event. The conference has been thoughtfully designed to provide a vibrant platform for scholarly exchange, innovative ideas, and evidence-based discussions in the field of Ayurveda and allied health sciences. In the rapidly evolving landscape of healthcare and integrative medicine, such academic forums play a crucial role in bridging traditional wisdom with contemporary scientific advancements. The research papers compiled in these proceedings reflect the dedication, rigor, and commitment of scholars who are striving to expand the horizons of knowledge and practice. I sincerely appreciate the efforts of the organizing committee, reviewers, and contributors whose collective dedication has ensured the high academic standards of this conference. The diversity of themes and research perspectives presented herein demonstrates the growing global interest in holistic and integrative approaches to health and well-being. I am confident that the deliberations and research findings documented in this proceedings volume will serve as a valuable reference for researchers, practitioners, and students, and will inspire further inquiry and collaboration in the years to come. I congratulate all authors and participants for their valuable contributions and extend my best wishes for their continued academic and professional success.

With warm regards,

Dr. Raja Singla
Conference Co-Chair
ICIMHAD 2026

Message from the Conference Secretary

It gives me immense pleasure to present the proceedings of this International Conference. As the Conference Secretary, I feel honored to be part of an academic platform that brings together distinguished scholars, researchers, practitioners, and students committed to advancing knowledge and fostering meaningful academic dialogue. This conference has been meticulously planned to encourage interdisciplinary exchange, promote research excellence, and create opportunities for collaboration in the fields of healthcare, pharmacy, and allied sciences. The enthusiastic participation and high-quality research contributions received from various institutions reflect the growing commitment of the academic community toward innovation and evidence-based practice. The papers included in this proceedings volume represent sincere scholarly efforts and thoughtful investigations that address contemporary challenges and emerging trends. I sincerely appreciate the dedication of all authors, reviewers, organizing members, and volunteers whose collective efforts have ensured the smooth conduct of the conference and the timely publication of these proceedings. I am confident that the insights shared during this conference and documented in this volume will contribute meaningfully to academic research, professional practice, and future collaborations. I extend my heartfelt gratitude to the Hon'ble Chancellor, organizing committee, keynote speakers, and all participants for their valuable support and active involvement in making this conference a grand success.

With best wishes,

Dr. Nirmalya Ganguly
Conference Secretary

Faculty
Aryavart School of Pharmacy, Tripura

Message from the Conference Convenor

It is with great pleasure and pride that I extend my warm greetings to all participants, speakers, researchers, and delegates on the occasion of this International Conference. Serving as the Conference Convenor has been both an honor and a rewarding experience, as this event represents a collective effort to promote academic excellence and meaningful scholarly exchange. This conference has been organized with the vision of creating a dynamic platform where academicians, professionals, and young researchers can share their innovative ideas, research findings, and practical insights. The enthusiastic response and active participation from various institutions reflect the growing importance of collaborative learning and interdisciplinary research in the present academic landscape. The proceedings of this conference stand as a testimony to the dedication and intellectual commitment of the contributors. Each paper included in this volume highlights rigorous research, thoughtful analysis, and a sincere effort to address contemporary challenges in healthcare, pharmacy, and allied disciplines. I am confident that these scholarly contributions will inspire further research, dialogue, and innovation. I extend my heartfelt gratitude to the Hon'ble Chancellor, Conference Co-Chair, Conference Secretary, organizing committee members, reviewers, and volunteers whose tireless efforts ensured the successful planning and execution of this event. My sincere appreciation also goes to all authors and participants for their valuable contributions and cooperation. I wish all participants continued success in their academic and professional endeavors and look forward to future collaborations.

With warm regards,

Mr. Biswajit Das
Conference Convenor

Faculty

Aryavart School of Pharmacy, Tripura

About Aryavart International University

Aryavart International University (AIU), established by the State Legislature of Tripura under Act No. 03 of 2023, is recognized under Section 2(f) of the UGC Act, 1956, and holds membership in the Association of Indian Universities.

Located in the serene Tilthai, Dharmanagar region of North Tripura, AIU spans a vibrant 70-acre campus equipped with state-of-the-art libraries, advanced laboratories, sports complexes, and incubation center to nurture academic excellence and innovation.

Academic Offerings

The university delivers a broad spectrum of programs at undergraduate, postgraduate, and doctoral levels, spanning social sciences, humanities, sciences, technology, management, commerce, law, pharmacy, physiotherapy, paramedical sciences, computer science, journalism, agriculture, yoga, and allied health fields.

AIU emphasizes interdisciplinary curricula, skill-based learning, and practical training through industry collaborations, internships, and projects aligned with national priorities like NEP 2020.

Research and Innovation

AIU prioritizes cutting-edge research through specialized centers focusing on sustainable development, health sciences and digital technologies.

Faculty and students engage in funded projects, publications, patents, and global partnerships, fostering a culture of inquiry that supports events like ICIMHAD 2026.

Vision and Impact

True to its motto of blending ancient wisdom with modern advancements, AIU cultivates global citizens committed to ethical leadership, community service, and societal progress.

The university's holistic approach—integrating academics, sports, cultural activities, and wellness programs—prepares graduates to address real-world challenges in mental health, digital well-being, and beyond.

About the Conference

The International Conference on Integrated Mental Health, Ayurveda & Digital Well-Being 2026 (ICIMHAD 2026) unites experts from Ayurveda, psychology, computer science, management, public health, yoga, and neuroscience on a global platform.

Hosted virtually by Aryavart International University on March 7, 2026, it explores intersections of traditional healing systems like Ayurveda, modern mental health sciences, and digital technologies to advance holistic well-being amid rising global challenges.

Key objectives include promoting integrated mental health approaches via Ayurvedic therapies and AI tools, workplace wellness strategies, evidence-based research, and cross-sector collaborations through tracks on psychology, digital innovations, cyberpsychology, and integrative practices.

Conference Highlights

ICIMHAD 2026 features keynote addresses, panel discussions, and abstract presentations spotlighting Ayurveda's role in mental health—such as Medhya Rasayanas for cognitive enhancement and mindfulness integrated with apps for stress management.

Awards ceremonies recognize outstanding contributions in categories like innovation in Ayurveda-mental health fusion and digital well-being, alongside interactive sessions with chairs and co-chairs like Dr. Vijayendra G. Bhat, Prof. (Dr.) Sheetal S. Mahadik, fostering real-time idea exchange.

Participants benefit from networking opportunities, e-certificates, and proceedings publication, all designed for virtual accessibility to maximize global reach.

Organizing Framework

Under Patron Dr. Shaiju David and Conference Chair Dr. A R V Murthy, robust committees—including organizing, scientific, and advisory boards—ensure high-quality curation and execution.

The proceedings compile these abstracts as a concise reference, emphasizing multidisciplinary synergy to address contemporary issues like digital-age anxiety and holistic care models.

This event positions AIU as a leader in blending India's ancient wisdom with cutting-edge tech for sustainable mental health solutions worldwide.

Organizing Committee

The Organizing Committee for ICIMHAD 2026 comprises distinguished leaders and experts from Aryavart International University and partner institutions, driving the successful execution of this landmark virtual conference.

Patron

Dr. Shaiju David

Vice Chancellor, Aryavart International University

Conference Chair

Dr. A R V Murthy

Professor Emeritus, MD, Ph.D (BHU)
Director (Academics Research & Hospital Promotion)
Sri Balahanuman Ayurveda College & Hospital, Gandhinagar, Gujarat

Conference Co-Chair

Dr. Raja Singla

Professor, PG Department of Panchkarma
Institute of Ayurved Studies & Research
Shri Krishna Ayush University, Kurukshetra, Haryana

Organizing Secretary

Dr. Nirmalya Ganguly

Faculty, Aryavart School of Pharmacy, Tripura

Convenor

Mr. Biswajit Das

Faculty, Aryavart School of Pharmacy, Tripura

Advisory Committee

The Advisory Committee for ICIMHAD 2026 provides strategic oversight, international perspectives, and expert guidance to elevate the conference's impact on integrated mental health, Ayurveda, and digital well-being.

- **Mr. Akhilesh**, MD (Ayurveda Samhita & Siddhant), NIA, Jaipur
- **Mr. Nirupam Nath**, Faculty, Dept of Journalism and Mass Communication, Aryavart International University, Tripura
- **Mr. Anirban Nath**, Faculty, Dept of Computer Science, Aryavart International University
- **Mr. Chandan Kumar Debnath**, Faculty, Aryavart International University
- **Mr. Biswajit Debarma**, Faculty, Aryavart International University
- **Mr. Bodhisattwa Debnath**, Faculty, Aryavart International University
- **Mr. Zahirul Haque**, Faculty, Aryavart International University
- **Dr. Meenakshi Amrutkar**, Professor, Rasashashtra Department, YMT Ayurvedic Medical College and Hospital, Dr. G. D. Pol Foundation, Kharghar, Navi Mumbai
- **Dr. Sri Nagesh K A**, Professor, Department of Samhita, Siddhanta and Sanskrit Sri Sri College of Ayurvedic Science and Research, Kanakapura Road, Post. Udayapura, Bengaluru
- **Dr. Ashwini S Shetty**, Director, Directorate of Extension and Outreach Activities, Yenepoya (Deemed to be University), Karnataka
- **Mr. Sanu Debnath**, Dept of Commerce and Management, Aryavart International University, Tripura
- **Dr. Ashvini Deshmukh**, MD, PhD, Associate Professor, Rasashastra Evam Bhaishsya Kalpana, Dr G. D. Pol Foundations, YMT Ayurved Medical College, Kharghar, Navi Mumbai

Scientific Committee

The Scientific Committee for ICIMHAD 2026 comprises renowned experts in Ayurveda, mental health, neuroscience, digital technologies, psychology, public health, and related fields, responsible for abstract peer review, session curation, and scientific quality assurance.

- **Dr. Akhilesh**, MD (Ayurveda Samhita & Siddhant), NIA, Jaipur.
- **Dr. Kajal Raskotra**, MD Kayachikitsa, JIAR, Jammu
- **Ms. Shibani Debarma**, Faculty, Dept of Computer Science, Aryavart International University
- **Mr. Bikram Nath**, Faculty, Dept of Commerce and Management, Aryavart International University
- **Dr. Ruma Koiri**, Registrar, Aryavart International University
- **Dr. C. Sveta Devi**, Faculty, Dept of Computer Science, Aryavart International University
- **Mr. Hafizul Islam**, Faculty, Aryavart School of Pharmacy, Tripura
- **Mr. Saptadip Nandi**, Faculty, Aryavart School of Pharmacy, Tripura
- **Dr. Arhanth Kumar A**, Associate Professor, Department of Samhita, Siddhanta and Sanskrit, S.D.M College of Ayurveda, Hospital and Research Centre, Udupi, Karnataka
- **Dr. Sapna D**, Professor, Department of Samhita, Siddhanta and Sanskrit, Sharada Ayurveda Medical College and Hospital, Devanagari, Talapady, Mangaluru
- **Dr. Pranali N Dandekar**, Associate Professor, PTSR Dept. MD OBGY (Ayu) YMTAMC, Kharghar, Navi Mumbai
- **Dr. Yagyik Mishra**, BAMS, MD (Swasthavritta & Yoga), Associate Professor at BDM Institute of Ayurveda, Jhajjar, Haryana
- **Dr. Sheetal S Mahadik**, Professor, PG Department of Swasthavritta (Institute of Ayurved Studies and Research), Sri Krishna Ayush University, Kurukshetra, Haryana

Keynote Speakers



Dr. Shekhar Annambhotla

BAMS, MD (Ayu), ERYT-500, LMT

Dr. Shekhar Annambhotla, BAMS, MD (Ayu), ERYT-500, LMT, is an esteemed Ayurvedic physician with over 37 years of clinical practice, teaching, and leadership since 1988. Trained at Gujarat Ayurved University (MD Ayurveda) and Nagarjuna University (BAMS), he specializes in Panchakarma detoxification therapies for chronic conditions including stress, autoimmune disorders, and metabolic imbalances.

Founder and President of the Association of Ayurvedic Professionals of North America (AAPNA), he also directs Global Ayurveda Conferences, LLC and founded Ojas Ayurveda Wellness Center in Pennsylvania, USA—delivering 13,000+ Panchakarma sessions and consulting 28,000+ clients worldwide. A Licensed Massage Therapist, Registered Yoga Teacher, and faculty at institutions like UPenn and Penn State Medical School, Dr. Annambhotla bridges classical Ayurveda with integrative medicine through evidence-based protocols.

Panchakarma for Stress, Anxiety and Depression

Prof. Vaidya Dr. Shekhar Annambhotla

Pennsylvania, USA

Abstract

Ayurveda recognizes Panchakarma as one of the most comprehensive detoxification, purification, and rejuvenation therapies. Panchakarma offers a holistic five-step Ayurvedic detoxification process to manage stress, anxiety, and depression by calming the nervous system, reducing cortisol levels, and balancing Vata dosha. The key therapeutic modalities include Shirodhara, full-body Abhyanga (oil massage), Swedana (herbal steam therapy), Nasya (nasal administration of medicated oils), and Basti Karma (medicated enemas).

According to Ayurvedic principles, stress, anxiety, and depressive disorders are closely associated with chronic Vata dosha imbalance. Emerging studies suggest that Panchakarma may help regulate neuroendocrine function, strengthen the immune system, enhance cognitive performance, and reduce the impact of stress-related disorders. Additionally, Panchakarma naturally supports improved sleep quality and overall well-being. By facilitating the removal of accumulated physical and mental toxins (Ama), Panchakarma promotes mood stability, emotional balance, and improved mental clarity.



Prof. (Dr.) Warungase Hiranman Nivrutti

MD (Ayurveda) - Psychiatry
Professor & Head, SMBT Ayurved College, Nashik
Consultant Psychiatrist, Psychotherapist & Counselor
Disha Institute of Holistic Healing
(Psychological Health and Neuro Sciences), Nashik

Prof. (Dr.) Warungase Hiranman Nivrutti, MD (Ayurved), serves as Professor and Head of the Manasaroga (Ayurvedic Psychiatry) Department at SMBT Ayurveda College and Hospital, Nashik. A distinguished Consultant Psychiatrist, Psychotherapist, and Counselor, he specializes in Ayurvedic management of bipolar mood disorders, anxiety, depression, and women's mental health issues.

Recognized speaker at national seminars like MANOAYATANA–2025 and adjunct faculty at All India Institute of Ayurveda (AIIA), New Delhi, Dr. Warungase integrates classical Ayurvedic psychotherapy (Sattvavajaya) with modern diagnostics. His expertise in physiological transitions across women's lifecycles and evidence-based herbal interventions makes him a leading voice in holistic mental health care.

Evidence Based Practices in Ayurveda for Stress Management

Prof. (Dr.) Warungase Hiranman Nivrutti

M.D. (Ayurveda) - Psychiatry SMBT Ayurved College

Abstract

Chronic Stress is a major public health issue and it leads to physiological and psychological disturbances contributing to psychiatric disorders, metabolic dysfunction, cardiovascular disease, and impaired immune response. Ayurveda conceptualizes stress as an imbalance in the doshas—particularly aggravated Vata—and disturbances in mental qualities (rajas and tamas). Modern research increasingly validates Ayurvedic evidence-based approaches, demonstrating measurable improvements in Cortisol levels, heart rate variability, and overall psychological wellbeing and stress reduction through traditional interventions.

This review synthesizes current clinical and experimental evidence on Ayurvedic strategies for stress management, including adaptogenic herbs, Mind-body practices (Yoga & meditation), Panchakarma therapies, Dietary Regulation (Ahara) and daily lifestyle routines (Dinacharya). These evidence-based modalities work synergistically to restore balance, reduce physiological stress markers, and enhance resilience through multiple pathways.

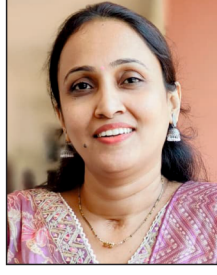
Among herbal medicine, *Withania somnifera* (Ashwagandha) has demonstrated significant reductions in perceived stress scale (PSS) scores and serum cortisol levels in randomized controlled trials, supporting its adaptogenic and anxiolytic properties. *Ocimum tenuiflorum* (Tulsi) and *Bacopa monnieri* (Brahmi) show evidence of neuroprotective, antioxidant, and cognitive-enhancing effects, contributing to improved stress tolerance. Mechanistic studies suggest modulation of the hypothalamic–pituitary–adrenal (HPA) axis, regulation of inflammatory cytokines, and attenuation of oxidative stress pathways. *Jatamansi* (*Nardostachys*) traditional nervine tonic with validated anxiolytic effects modulates serotonin and GABA neurotransmission for mood stabilisation

Panchakarma procedures, including Abhyanga (Therapeutic Oil

Massage), Swedana (Herbal Steam), Nasya (Nasal Administration), Basti (Therapeutic Enema), Virechana (Therapeutic Purgation) and Shirodhara (steady Oil Streaming on the forehead), have shown preliminary benefits in reducing sympathetic overactivity and promoting parasympathetic dominance, as

indicated by improvements in heart rate variability and subjective relaxation measures. Additionally, integrative practices combining Ayurvedic dietary guideline, daily lifestyle routines with Yoga and meditation have demonstrated synergistic effects in reducing anxiety, improving sleep quality, and enhancing overall psychological well-being. Even though findings are promising, methodological limitations, heterogeneity of formulations, and variability in intervention protocols remain challenges. Future research should emphasize standardized preparations, multicentric randomized trials, biomarker-based outcomes, and long-term safety evaluation.

In conclusion, evidence-based Ayurvedic practices offer a multidimensional approach to stress management. Integrating traditional Ayurvedic wisdom (phytotherapy, detoxification procedures, lifestyle modulation, and mind–body medicine) with modern scientific validation creates powerful, sustainable stress management solutions for contemporary healthcare challenges.



Dr. Divyarani

Associate Professor, Department of Samhita,
Siddhanta and Sanskrit, Yenepoya Ayurveda
Medical College and Hospital, Naringana, Mangaluru

Dr. Divyarani brings deep scholarly expertise in Ayurvedic classical texts (Samhita and Siddhanta) to contemporary mental health discourse. As Associate Professor, she specializes in interpreting foundational principles from Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya for modern Manasa Roga (psychiatric disorders) management.

Her research bridges ancient Sanskrit treatises with evidence-based applications of Sattvavajaya (psychotherapy), Medhya Rasayanas, and dosha-specific interventions for anxiety, depression, and cognitive disorders. Dr. Divyarani's presentations elucidate how classical Ayurvedic paradigms inform integrative digital wellness and holistic mental health strategies relevant to ICIMHAD 2026 themes.

With proficiency in both theoretical Sanskrit scholarship and clinical correlations, she advocates authentic textual interpretations adapted for today's global mental health challenges, making complex classical concepts accessible to interdisciplinary audiences.

Mental Hygiene in Ayurveda: Ancient Tools for Modern Minds

Dr. Divyarani

Associate Professor Department of Samhita, Siddhanta and Sanskrit,
Yenepoya Ayurveda Medical College and Hospital,

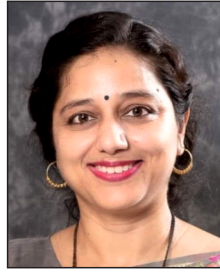
Abstract

Mental health challenges such as stress, anxiety, depression, and burnout are increasingly prevalent in the modern era, largely driven by rapid lifestyle changes, digital overload, and psychosocial stressors. While contemporary mental health care predominantly focuses on diagnosis and treatment, Ayurveda offers a comprehensive and preventive framework for maintaining mental wellbeing through the concept of mental hygiene.

Ayurveda views the mind (Manas) as a vital determinant of health, intricately connected with the body, senses, intellect, and soul. Mental health is explained through the balance of Triguna—Sattva, Rajas, and Tamas, where dominance of Sattva represents mental clarity, stability, and wellbeing. Mental disturbances arise primarily due to Prajnaparadha (intellectual error), improper diet and lifestyle, suppression of natural urges, and unethical conduct.

Classical Ayurvedic texts describe several non-pharmacological tools for mental hygiene, including Sadvritta (ethical conduct), Achar Rasayana (behavioral rejuvenation), Satvavajaya Chikitsa (psychotherapy), Dinacharya and Ritucharya (daily and seasonal regimens), and Yoga practices such as Pranayama and Dhyana. These interventions aim at strengthening mental resilience, emotional regulation, and cognitive discipline.

The present keynote highlights how these ancient Ayurvedic tools remain highly relevant for modern minds and can complement contemporary mental health strategies. Integrating Ayurvedic mental hygiene principles into daily life offers a holistic, sustainable, and preventive approach to global mental wellbeing.



Dr. Shivani Omprakash Gupta

Associate Professor, YMT Ayurvedic Medical College
and Hospital Dr. G. D. Pol Foundation, Kharghar, Navi Mumbai

Dr. Shivani specializes in Ayurvedic diagnostics and pathology, with 15+ years of clinical practice complemented by 13+ years in academic teaching. Currently pursuing PhD on "Medovaha Srotus Dushti in Offspring of Type 2 Diabetes Parents" from Maharashtra University of Health Sciences, her research bridges Personalized Ayurvedic Examination and modern biomarkers for preventive mental health screening and Lifestyle disorders.

Expertise includes dosha-based neuropsychiatric assessments, Roga Pariksha for stress-induced disorders, and integrative protocols combining Rasayana therapies with digital wellness monitoring.

Been a Ted talk speaker she advocates importance of mental health in well being of human kind. A certified Yoga practitioner (BHU Varanasi), she advocates holistic lifestyle interventions for cognitive resilience and emotional balance relevant to ICIMHAD 2026 themes.

The Digital Natives And Their Mental Health Spectrum With Ayurveda

Dr. Shivani Omprakash Gupta

Associate Professor, YMT Ayurvedic Medical College
and Hospital Dr. G. D. Pol Foundation, Kharghar, Navi Mumbai

Abstract

Gen Z and Gen Alpha are the architects of our future, yet they face severe psychological hurdles including digital overload, academic pressure, and social isolation. Constant connectivity leads to cognitive fatigue and emotional exhaustion, as virtual interactions often fail to provide genuine support. My lecture explores how these societal pressures negatively impact mental health and introduces Ayurvedic tools to restore prosperity to these generations.

Ayurveda's holistic approach is the key to balancing the Sharirik and Manasik Doshas. Digital and informational burdens cause Srotus-Avarodh and Vimarg-Gaman, where the flow of biological energies is blocked or diverted, manifesting as disease. Through the integration of Aushadh and Adravaya Chikitsa, we can achieve both physical and mental Virechan to detoxify the system. By utilizing a structured format for Dosha Dushti, we identify the ideal combination of Ahar, Dincharya, Rutucharya, Sadvrutta, and Nidan Parivarjan. Furthermore, Satvavajay Chikitsa provides a vital framework for mental health care, offering a clear roadmap to ensure our digital natives remain healthy and balanced.



Prof. Mala Kapadia

Director, Anaadi Centre for Indigenous Knowledge Systems, Anaadi Foundation

Author Bio

Prof. Mala Kapadia integrates Ayurvedic wisdom, Yoga philosophy, and Emotional Intelligence for holistic wellbeing and leadership development. Her signature programs blend Sattvavajaya principles with modern psychology, addressing workplace stress, intergenerational trauma, and ecological belonging through indigenous knowledge systems.

Principal Investigator for Ministry of Education's IKS project on Ayurveda-based Happiness & Wellbeing, she pioneers AyuManasa frameworks combining classical texts with positive psychology. Previously Adjunct Professor at SP Jain's global campuses (Dubai, Singapore, Sydney), her 25+ years span executive coaching, OD interventions, and faculty development across ICICI Bank, SAB TV, and SPJIMR.

Positive Psychology and Ayurveda

Prof. Mala Kapadia

Director, Anaadi Centre for Indigenous Knowledge Systems,
Anaadi Foundation

Abstract

The world today is struggling with not just after effects of pandemic, it is also struggling with mental health issues. Psychology in the West, has taken more than a century to now talk about Positive Psychology and Flourishing, while Ayurveda, has been the foundation of leading life of individual and Planetary Flourishing.

We will explore Hitayu and Sukhayu, the philosophy and competencies of Positive Psychology from Ayurveda. The Meta Cognition and Awareness of our Life, interconnectedness with the Cosmos is essential for well-being. Meta Values from the Heart are the guiding Principles to translate this Meta Cognition into life. They work as a compass, showing us the True North. Meta Skills, the way of living meaningful life, are the practical applications of the above.



DR. A R V MURTHY

Professor Emeritus, MD, Ph.D (BHU),
DIRECTOR (Academics Research and Hospital Promotion),
Sri Balahanuman Ayurveda College and Hospital,
Lodra Gandhinagar Gujarat

Dr. A R V Murthy, MD, Ph.D (BHU) Ayurveda Pioneer 39 years of Teaching and around 25 years in Administration as Director Dean Medical superintendent across Ayurveda Colleges in the states of Andhra Pradesh, Goa, Gujarat, Karnataka Uttarpradesh and Maharashtra.

Recipient of Lifetime Achievement Award ,Professor Emeritus citation, Veda Vyasa International Award for the book - Rationale of Ayurvedic Psychiatry. A First Rank holder in all major exams. Receptient of Gold Medal , State Award and MV Shastri Memorial Award.

Authored 6 books, 111 research papers, led 63 research projects; organized 1000+ seminars/CMEs and more than 5000 Health camps across states.

At present DIRECTOR (Academics Research and Hospital Promotion) Sri Balahanuman Ayurveda College and Hospital Lodra Gujarat. A visionary leader preaching and practicing Ayurveda, he bridges ancient wisdom with modern healthcare for societal well-being.

Rasyana - Medhyarasayana – Ayurvedic Concept of Nootropic and Psychotropic Drugs

DR. A R V MURTHY

Professor Emeritus, MD, Ph.D (BHU),
DIRECTOR (Academics Research and Hospital Promotion),
Sri Balahanuman Ayurveda College and Hospital, Lodra Gandhinagar Gujarat

Abstract

Ayurveda, the ancient Indian Science of life has discussed at length the concept of promoting mental faculties and treating psychiatric disorders. A wide variety of traditional procedures and drugs were employed in those days to tackle these issues. Many a psychological disorders starting from Insanity (Unmada) to emotional disturbances (Manovega) have been discussed in detail and systematic treatment methods have also been outlined in the classical texts like Charaka Samhita, written around 500 B.C. Ayurveda physicians have used a numbers of drugs - both herbal and mineral either severally or in combination in treating the diseases those existed. The drugs were used internally in the form of powders (Churna), tablets (Gutika), medicated Ghee (Ghrita), elocturials (Lehya) or fermented preparations (Asava/Arishta) and externally for massage or instillation in to nose (Nasyam), eyes (Anjanam) or for retention over the head (Murdhni Tailam).

Another aspect which is worth noting is with reference to mentioning of the drugs for promoting mental faculties. The concept of promoting cognitive functions like Reception (Grahana), Retention (Dharana) and Recollection (Smriti) is something unique and they can be equated to nutropic drugs that are currently in use. Ancient Indian masters had discovered some special group of drugs for this purpose- Medhyarasayana group of drugs. Caraka Samhita the most ancient extant text on medicine has discussed four such drugs which are known to improve cognitive functions of human beings and aptly named them Medhyarasayana-s in view of their specific property of promoting higher mental functions. Susruta Samhita an ancient text on surgery also discusses eight drugs under the head Medhakamyasayana group. Though these drugs are basically aimed at promoting intellectual functions, they have been consistently and repeatedly employed to treat psychological ailments which add to their nutropic actions thus significantly promoting the armory of management of psychological disorders as pronounced in Ayurveda literature.



Dr Suhas Kumar Shetty

Principal and Medical Director,
KLE Academy of Higher Education and Research (KAHER)
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Potentials of Ayurveda in Mental Health: Current Status & Futuristic Strategies

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Abstract

Mental health disorders are emerging as a major public health challenge globally, with increasing prevalence of anxiety, depression, stress-related disorders, and psychosomatic illnesses. According to the World Health Organization, mental health conditions contribute significantly to the global burden of disease. In this context, Ayurveda offers a holistic, person-centered, and preventive approach to mental well-being through its well-established concepts of Manas, Trigu a (Sattva, Rajas, Tamas), and Trido a theory. Classical descriptions under Unmada, Apasmara, Atatvabhinivesha, and other Manasarogas reflect a comprehensive understanding of psychopathology.

Currently, Ayurveda contributes to mental health care through pharmacological interventions (Medhya Rasayanas such as Brahmi, Mandukaparni, Yashtimadhu), Panchakarma therapies, Satvavajaya Chikitsa (psychotherapy), Daivavyapashraya, and lifestyle-based regimens including Yoga and meditation. Institutions under the Ministry of AYUSH and research bodies like the Central Council for Research in Ayurvedic Sciences are actively undertaking clinical trials and integrative research to validate Ayurvedic interventions in psychiatric conditions. However, challenges remain in standardization, large-scale evidence generation, interdisciplinary collaboration, and global acceptability.

Futuristic strategies should focus on integrative mental health models combining Ayurveda with contemporary psychiatry, development of evidence-based clinical protocols, digitization of traditional knowledge, and translational research in psychoneuroimmunology. Capacity building through specialized training in Manasaroga, strengthening of community-based mental health programs, and policy-level inclusion of Ayurveda in national mental health frameworks are essential. Furthermore, personalized medicine approaches rooted in Prakriti assessment may offer predictive and preventive mental health care.

Ayurveda holds significant potential to complement modern psychiatry by emphasizing prevention, resilience, and holistic healing. Strategic research, global collaboration, and policy support can position Ayurveda as a sustainable and culturally adaptable system in future mental health care paradigms.



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The Power of Mind

Prof Dr. Sureshwarnapuri (MD)

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Abstract

The concept of Manas (Mind) has been elaborately explained in Ayurveda. This keynote will explore the four psychic components — Manas, Buddhi, Ahankara, and Chitta—at different functional levels, drawing parallels with contemporary neuroscience. The session will also discuss practical methods and techniques to balance and strengthen mental faculties, integrating classical Ayurvedic wisdom with modern scientific perspectives.



Dr. P. Gourisankar

Dean - Research

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Dr. P. Gourisankar is a senior Ayurvedic physician, academician, and researcher specializing in Kayachikitsa (Ayurvedic Internal Medicine). He currently serves as Dean–Research at Glocal College of Ayurvedic Medical Sciences and Research Centre, Saharanpur, Uttar Pradesh, and as Professor and Head of the Department of Kayachikitsa. He is a Retired Professor and HoD from Vaidyaratnam Ayurveda College, Thrissur, Kerala. He completed his BAMS from the University of Madras and M.D. (Kayachikitsa) from the University of Mysore. With over three decades of teaching experience, he has served in various academic positions from Tutor to Professor, guiding numerous undergraduate, postgraduate, and Ph.D. scholars. He has authored 52 publications, delivered 28 guest lectures, and actively participated in national and international seminars, workshops, and research projects. Dr. Gourisankar has served as a Member of the Board of Studies and Board of Examiners for various universities and has been a Resource Person for AYUSH programs under the Government of India and different state governments. He has also contributed as Principal and Co-Investigator in government-sponsored research projects. Recognized for his service and dedication, he is a recipient of the Swasthyamitthra Award (2022) and the Ayurveda Vishwaratna Award (2025). He continues to contribute significantly to Ayurvedic education, research, and clinical excellence.

The integrated approach advocates continued use of essential AEDs with careful monitoring (Rule and regulations of the state has to be taken into consideration) while gradually incorporating Ayurvedic interventions under expert supervision. This comprehensive protocol aims not only to reduce seizure recurrence but also to enhance cognition, emotional balance, and overall quality of life, ensuring safe, sustainable, and patient-centred epilepsy care.

Indian philosophy emphasizes prevention of mental disorders through harmony of body, mind, and soul. The Yoga Sutras of Patanjali advocates control of mental fluctuations through meditation and self-discipline. Practices like Asana, Pranayama, Dhyana, positive thinking, self-reflection, and cultivation of Sattva guna strengthen emotional stability, enhance resilience, and promote lasting mental well-being. The Bhagavad Gita teaches Satvika diet and equanimity (Samatvam) and detachment to reduce stress and anxiety. Ayurveda advises proper sleep, ethical conduct (Sadvritta), and seasonal routines.

Treatment Protocol for Epilepsy

Dr. P. Gourisankar

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Abstract

Epilepsy is a chronic neurological disorder characterized by recurrent, unprovoked seizures arising from abnormal cortical neuronal discharges. Contemporary management relies predominantly on anti-epileptic drugs (AEDs) such as Sodium Valproate, Carbamazepine, and Levetiracetam, which effectively reduce seizure frequency in many patients. Nevertheless, long-term drug dependence, adverse effects, and refractory cases necessitate complementary approaches. An integrated treatment protocol with greater emphasis on Ayurveda provides a holistic, individualized, and neuroprotective strategy.

In Ayurveda, epilepsy is described as Apasmara, a condition resulting from vitiation of Vata predominance along with deranged Rajas and Tamas affecting Manas (mind), Smriti (memory), and Buddhi (intellect). The Ayurvedic protocol begins with Nidana Parivarjana (elimination of causative factors) including irregular diet, sleep deprivation, stress, and incompatible foods. Shodhana therapies such as Snehana (oleation), Swedana (sudation), Virechana (therapeutic purgation), and especially Basti (medicated enema) are selected according to Dosha predominance. Nasya (nasal medication) is emphasized for its direct action on the central nervous system.

Shamana therapy includes Medhya Rasayana formulations containing Brahmi (*Bacopa monnieri*), Shankhapushpi (*Convolvulus pluricaulis*), Jatamansi (*Nardostachys jatamansi*), and Vacha (*Acorus calamus*), known for their neuroprotective, anticonvulsant, anxiolytic, and cognitive-enhancing properties. Classical Ghrita preparations such as Brahmi Ghrita and Kalyanaka Ghrita are recommended for long-term neuro-rejuvenation. Adjunctive measures include Satvika Ahara (wholesome diet), regulated sleep, stress reduction, and yoga practices including Pranayama and meditation to stabilize neuropsychological function.

The integrated approach advocates continued use of essential AEDs with careful monitoring (Rule and regulations of the state has to be taken into consideration) while gradually incorporating Ayurvedic interventions under expert supervision. This comprehensive protocol aims not only to reduce seizure recurrence but also to enhance cognition, emotional balance, and overall quality of life, ensuring safe, sustainable, and patient-centred epilepsy care.

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Key Words: Epilepsy, Apasmara, Ayurveda, Panchakarma, Medhya Rasayana, Integrated Medicine, Neuroprotection, Basti, Nasya.

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Ayurveda and the Growing Burden of Mental Health in Urban India

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Abstract

Mental health issues are increasing rapidly in urban India due to factors like fast-paced lifestyles, work pressure, pollution, and social isolation. Anxiety, depression, and stress-related disorders have become common, affecting people of all age groups. At the same time, modern treatments often come with side effects or do not address the root cause of the problem. This growing concern has made people look toward holistic systems like Ayurveda for support.

The study reviews existing literature and studies on how Ayurveda is being used to address mental health concerns in urban settings. It also explores common Ayurvedic practices such as herbal remedies, meditation, yoga, dietary changes, and lifestyle adjustments. The information is simplified to help the general public understand the potential benefits and applications of Ayurveda in everyday life.

Studies show that Ayurvedic approaches can be effective in reducing symptoms of anxiety, depression, and chronic stress. Therapies like Shirodhara (a warm oil head treatment), use of herbs like Ashwagandha and Brahmi, daily yoga, and guided meditation have shown positive results without serious side effects. People using Ayurveda alongside or in place of conventional therapy have reported better sleep, reduced stress, and improved emotional balance.

While Ayurveda is not a quick fix, it offers a long-term and natural way to manage mental health. Its focus on balancing the body and mind aligns well with current needs in urban areas, where stress levels are high and self-care is often neglected. More awareness, proper regulation, and scientific validation can help integrate Ayurveda into mainstream mental health care.

Ayurveda holds promise as a supportive system for mental wellness in urban India. With the growing burden of mental health issues, it may offer a sustainable and holistic path to healing.

AI and Digital Innovations for Self-Empowered Psychological Wellness: An Ayurveda–Integrative Perspective

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Abstract

Mental health is a major global health concern, requiring solutions that are integrative, culturally attuned, and widely accessible. This paper brings together Ayurveda's ancient wisdom and its integrative view of mind, body, and spirit with the latest advances in digital health and artificial intelligence. It examines how AI-powered tools—such as neural network-based chatbots, natural language processing algorithms in mental health apps, wearable biosensor technology, virtual reality platforms, and digital phenotyping—can support psychological health. Studies have shown positive results. For example, pilot projects that integrate AI with Ayurved principles have led to notable decreases in anxiety

and stress indicators in participants.(1) Specifically, convolutional neural networks (CNNs) and support vector machines (SVMs) are effective in analyzing behavioral and lifestyle data to detect early signs of psychological distress. However, integrating AI technology and Ayurveda into mental health care raises significant challenges. These include the need for rigorous validation of AI models to minimize bias, the complexity of aligning evidence-based AI interventions with individualized Ayurved approaches, and potential resistance from practitioners and users due to differing epistemological foundations. While the proposal emphasizes ethically aligned design, it is crucial to consider how these ethical frameworks compare to those used in conventional mental health interventions. For instance, consent procedures and data privacy requirements in AI-Ayurveda systems must meet international standards. These include those set by the Declaration of Helsinki and the General Data Protection Regulation (GDPR). Such systems must also address potential gaps due to cultural or epistemological differences between Ayurved and biomedical paradigms. A comparative critique reveals a key divergence: biomedical paradigms emphasize Universalist norms such as autonomy and beneficence, while Ayurved traditions may prioritize collective well-being and values rooted in community and spirituality. This divergence can lead to fundamental differences in the application of concepts such as consent, risk disclosure, and user agency in AI-driven interventions. Moreover, transparency, a central feature of Western ethical frameworks, must be examined alongside Ayurved principles, which may place different emphasis on practitioner authority or holistic care. Traditional biomedical models are grounded in established regulatory practices, but integrating Ayurveda and AI introduces novel complexities, such as algorithmic neutrality in non-Western health contexts, that require tailored assessment. Resistance from stakeholders may arise not only from epistemological differences but also from ethical ambiguities around algorithmic transparency and accountability. According to a 2023 article by Pooja Sabharwal and Ishant, AI innovations are being applied in Ayurveda for Prakriti assessment, phytomedicine, and disease data analysis.(2) When combined with existing mental health frameworks, we propose collaborations with healthcare providers to implement AI-Ayurveda tools. Integration efforts can include training sessions for healthcare professionals to familiarize them with AI models and Ayurved concepts. This enables personalized care using evidence-based insights. Pilot programs can be launched to gather data and insights on user experiences and outcomes. Public participation and educational initiatives are critical for adapting technologies to local contexts and ensuring their availability to diverse cultural groups. Only through ongoing comparative critique of ethical standards across biomedical and Ayurved systems—including examination of principles such as justice, autonomy, and the balance between community- and individual-centered ethics—can stakeholder concerns be addressed and the legitimacy of these innovations assured. The combination of AI and Ayurveda promises wider access, improved self-awareness, earlier risk detection, and stronger preventive psychological support, particularly for underserved communities.

Keywords: *Mental health; Artificial intelligence; Digital mental health; Ayurveda; Manas Roga; Satva; Sattvavajaya*

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Ayurvedic Psychology and Lifestyle Management: A Holistic Approach to Mental Well-Being

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Abstract

Ayurvedic Psychology represents a holistic framework for understanding the human mind, behavior, and well-being, rooted in the ancient Indian system of Ayurveda. Unlike modern psychology, which often focuses on isolated mental processes or pathologies, Ayurvedic psychology integrates mind (Manas), body (Sharira), and consciousness (Atma) as an inseparable continuum. This integrated approach emphasizes balance, self-awareness, and harmony with nature as essential determinants of mental health and overall quality of life. Central to this framework is the concept of Triguna- Sattva (clarity and balance), Rajas (activity and restlessness), and Tamas (inertia and ignorance) - which governs mental tendencies and personality traits. Mental well-being is achieved by cultivating Sattva while regulating Rajas and Tamas through conscious lifestyle choices. Lifestyle management in Ayurveda (Dinacharya and Ritucharya) plays a pivotal role in maintaining psychological equilibrium. Daily routines, seasonal adaptations, dietary regulation, sleep hygiene, physical activity, and ethical conduct (Sadvriddha) are prescribed not merely for physical health but also for emotional stability and cognitive clarity. Practices such as yoga, meditation, Pranayama, and mindfulness are integral tools for managing stress, anxiety, and emotional disturbances, fostering resilience and mental discipline. Ayurvedic psychology also recognizes the psychosomatic nature of disease, acknowledging that unresolved emotions, negative thought patterns, and lifestyle imbalances can manifest as physical illness. Furthermore, Ayurvedic lifestyle management emphasizes individualized care based on Prakriti (psychophysiological constitution), allowing personalized interventions that align with an individual's innate tendencies. This personalized approach enhances self-regulation, emotional intelligence, and adaptive coping mechanisms. In the context of modern life, characterized by stress, sedentary habits, and sensory overload, Ayurvedic psychology offers practical, preventive, and promotive strategies for mental health. In conclusion, Ayurvedic psychology and lifestyle management provide a comprehensive, preventive, and sustainable model for mental well-being. By harmonizing mental attributes, daily habits, and ethical living, this approach contributes significantly to stress management, emotional balance, and holistic health. Its relevance continues to grow in contemporary integrative healthcare, offering valuable insights for mental wellness and lifestyle transformation in a rapidly changing world.

Keywords: *Triguna; Dinacharya; Ritucharya; Sadvriddha; Prakriti; holistic health*

Integrative Perspectives on Adolescent Mental Health: An Actionable Roadmap for Bridging Ayurveda, Psychology, and Digital Innovations to Enhance Holistic Well-Being

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Abstract

This paper looks at the concerning rise in mental health problems among adolescents, which are linked to academic pressure, digital exposure, lifestyle imbalance, and psychosocial stress. According to a World Health Organization report and various national surveys, approximately 20% of adolescents experience a mental disorder each year, with rates of anxiety and depression having increased by 50% in the past decade. By integrating Ayurveda, psychology, and digital innovations, this paper suggests a holistic, evidence-based strategy to support adolescent mental health and address these prevailing challenges.

This approach combines Ayurveda, modern psychology, and digital technology to support adolescent mental health holistically. The paper explains that using Ayurvedic concepts like Manasika Bhavas, Satva Bala, Dinacharya, and mind-body balance, together with proven psychological methods such as Cognitive Behavioral Therapy (CBT), Rational Emotive Behavior Therapy (REBT), mindfulness, and positive psychology, can help adolescents build resilience, emotional stability, and self-control. For example, consider a scenario where an adolescent is experiencing high levels of anxiety. A clinician might begin by introducing mindfulness meditation techniques rooted in Ayurveda to help the adolescent achieve greater mind-body balance. Concurrently, psychological approaches like CBT would be used to address negative thought patterns. Digital tools, such as an app for daily mindfulness tracking and motivational notifications, augment these efforts by providing consistent reinforcement and engagement. This integrative strategy enables adolescents to tackle mental health issues with a comprehensive set of tools, combining traditional wisdom with modern advancements.

By bringing together traditional knowledge and modern science, this paper shows that a team-based approach using Ayurveda, psychology, and digital innovation best supports adolescent well-being. This approach fits the conference's goal of promoting evidence-based, culturally aware, and lasting mental health solutions through strong teamwork among clinicians, educators, researchers, and policymakers. To ensure rapid adoption and effectiveness of this integrative approach, identifying 'first ten minutes' actions can make a significant impact.

These initial steps are designed to catalyze the momentum needed for integrative initiatives to flourish across different stakeholder groups. However, adopting this integrative approach may pose challenges, including the need for adequate training, resource limitations, and varying levels of cultural acceptance. To address these barriers, stakeholders might collaborate to develop training programs that enhance clinician skills in integrative practices, secure funding for necessary resources, and engage in community outreach to build cultural acceptance. By acknowledging and addressing these challenges, the integrative strategy becomes more robust and adaptable to real-world complexities.

Keywords: *Adolescent Mental Health; Integrative Psychiatry; Ayurveda; Psychology; Digital Mental Health.*

A Comparative Clinical Study on the Efficacy of Saraswatha Choorna and Dhyana on Adolescence Stress

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Abstract

Adolescence Is Marked By Significant Shifts In Hpa Axis Reactivity, Resulting In Heightened Stress Induced Hormonal Responses. Consequently, Perturbations Of The Maturing Adolescent Brain May Contribute To The Increase In Stress Related Psychological Dysfunction Such As Anxiety, Depression, And Drug Abuse, Often Observed During This Period. For The Study Purpose, Saraswatha Choorna, A Compound Preparation, Contains 12 Drugs Triturated With Brahmi Swarasa Which Is Specially Indicated To Promote Medha, Buddhi, Smriti, Dhruti And Kavitchakriti Was Selected. Dhyana One Among The Satvavajaya Chikitsa Is Helpful In Steadying The Mind Which Is Fickle By Nature And Which Is Responsible For Most Of Our Afflictions And Disturbances Which Can Be Eliminated By The Practice Of Dhyana.

Objectives

- To Evaluate The Efficacy Of Saraswatha Choorna In Adolescence Stress.
- To Evaluate The Efficacy Of Dhyana In Of Adolescence Stress.
- To Compare The Efficacy Of Saraswatha Choorna And Dhyana In Adolescence Stress.

Method: 40 Subjects Fulfilling The Diagnostic And Inclusion Criteria Were Selected And Randomly Assigned Into 2 Groups. Group A Were Treated With Saraswatha Choorna. Group B Were Treated With Dhyana. The Effect Of Treatment Was Assessed Based On Har- Scale.

Interpretation and Results: Both Saraswatha Choorna And Dhyana Showed Statistically Significant Effect On The Assessment Criteria I.E Har- Scale. On Comparison Between Group-A And Group-B There Is No Significant Difference Is Seen.

Conclusion

- Both Saraswatha Choorna And Dhyana Showed Statistically Significant Result On Assessment Criteria.
- On Comparison Between 2 Groups There Is No Significant Difference Is Seen.
- Thus Null Hypothesis Is Rejected and Alternate Hypothesis (H₁) Is Accepted I.E There Is Significant Effect of Saraswatha Choorna and Dhyana in the Management of Adolescence Stress.

Keywords: *Adolescence Stress; Saraswatha Choorna; Dhyana*

Focal Epilepsy and Psychosis Symptoms: A Case Report

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Abstract

Apasmara (epilepsy) is defined by Acharya Charaka as *Apagama* (deterioration) of *Smriti* (retention) associated with *Bibhatsa Chesta* (seizers) due to derangement of *Dhi* and *Sattva*. The vitiate *Dosha* related to the condition are *Vata* and *Rajo Dosha*. The main features of *Apasmara* are impairment in memory or awareness. *Apasmara* is one of the diseases, which affects both *Sharira* (physical) and *Manas* (mental). A 52-year-old man approached the OPD of Department of Manasaroga with episodes of altered consciousness for 2 years with auditory and visual hallucinations and a behavioural disorder not improved by antiepileptic treatment alone or an antipsychotic alone. Earlier, he had taken allopathic medicine but he discontinued the medicine due to no significant relief from the adverse effects of the medicines. He was advised with *Yoga Basti* (enema), *Shirodhara* (Pouring of medicated oil over head from a distant height), and *Nasya* (errhine therapy) along with palliative treatment. After 1-month treatment and follow-up, it was observed that the patient was satisfied with treatment and changes in the complaints with improved quality of life. Palliative treatment was advised to the patient for additional.

Keywords: *Apasmara; epilepsy; meditation; Panchakarma; Yoga*

Mind–Body Axis in Ayurveda: Integrating Satvavajaya Cikitsā and Modern Psychology

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Introduction

Mental health disorders such as stress, anxiety, and depression are increasing globally due to rapid lifestyle changes, academic pressure, and psychosocial stressors. Modern psychology acknowledges the bidirectional relationship between mind and body, commonly referred to as the mind–body axis. Ayurveda, the ancient Indian system of medicine, has long emphasized this connection through the concepts of *manas*, *doṣa*, *agni*, and *triguṇa*. *Satvavajaya Cikitsā*, described as Ayurveda psychotherapy, focuses on strengthening mental resilience by controlling the mind from unwholesome objects and restoring psychological balance.

Aim: To explore the concept of the mind–body axis in Ayurveda and to highlight the integration of *Satvavajaya Cikitsā* with modern psychological approaches for holistic mental health management.

Methodology: This conceptual and narrative review is based on classical Āyurvedic texts, contemporary research articles, and modern psychological literature. The principles of *Satvavajaya Cikitsā* were analyzed and compared with evidence-based psychological therapies such as cognitive behavioral therapy (CBT), mindfulness-based interventions, and emotional regulation strategies.

Keywords: *Satvavajaya Cikitsā; Mind–Body Axis; Ayurveda; Modern Psychology; Mental Health.*

Lifestyle Interventions for Holistic Health

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Abstract

Ayurveda views health as a dynamic balance between the body, mind, and consciousness. Lifestyle regulation is a core component of Ayurvedic philosophy and is essential for maintaining health and preventing disease. With the rising prevalence of lifestyle-related disorders, Ayurvedic lifestyle principles offer a comprehensive and individualized approach to holistic well-being. This review aims to critically examine lifestyle interventions described in Ayurveda and their contribution to holistic health. A comprehensive literature review was carried out using classical Ayurvedic texts such as Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, along with relevant modern scientific studies published in peer-reviewed journals. Key concepts including Dinacharya (daily regimen), Ritucharya (seasonal regimen), Ahara (dietary discipline), Vihara (lifestyle behavior), Sadvritta (ethical conduct), and mind–body practices like yoga, pranayama, and meditation were analyzed. The reviewed literature indicates that following Ayurvedic daily and seasonal routines supports physiological homeostasis and strengthens immunity. Personalized dietary practices based on Prakriti enhance digestive efficiency and metabolic balance. Ethical behavior and disciplined lifestyle practices contribute to mental clarity and emotional stability. Mind–body interventions were consistently associated with reduced stress levels, improved psychological health, and a lower risk of chronic non-communicable diseases such as diabetes, obesity, cardiovascular disorders, and stress related illnesses. Ayurvedic lifestyle interventions provide a preventive and holistic framework that emphasizes personalization, sustainability, and harmony between mind and body. These principles complement modern preventive medicine and can be effectively integrated into contemporary healthcare systems to promote long-term wellness and improve overall quality of life.

A Clinical Case Series on the Effect of Shadbindu Tailam Nasya in the Management of Sinusitis (*Pratiśyāya*)

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Abstract

Sinusitis is a chronic inflammatory disorder of the paranasal sinuses presenting with nasal obstruction, nasal discharge, headache, facial pain, and postnasal drip. In Ayurveda, sinusitis can be correlated with *Pratiśyāya* and *Duṣṭa Pratiśyāya*, predominantly involving *Vāta* and *Kapha doṣa*. *Nasya karma* is considered the principal line of treatment for diseases of the head (*Urdhva-jatruḡata vikāra*). **Shadbindu Tailam**, a classical Ayurvedic formulation described in *Aṣṭāṅga Hrdaya* and *Aṣṭāṅga Saṅgraha*, is specifically indicated in chronic nasal and sinus disorders. The present case series evaluates the clinical effect of *Shadbindu Tailam Nasya* in three patients suffering from chronic

sinusitis. Significant improvement was observed in major symptoms with good tolerability and no adverse effects, suggesting that *Shadbindu Tailam Nasya* is an effective and safe therapeutic modality in sinusitis.

Keywords: *Shadbindu Tailam; Nasya; Sinusitis; Pratiśyāya; Ayurveda*

Psychological Stress and Its Role in Disease Activity of Ulcerative Colitis

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Abstract

Ulcerative colitis (UC) is a chronic inflammatory bowel disease characterized by relapsing and remitting inflammation of the colonic mucosa. Although its etiology is multifactorial, increasing evidence highlights the significant influence of psychological stress on disease onset, exacerbation, and progression. Stress activates neuroendocrine and immune pathways through the brain-gut axis, potentially worsening intestinal inflammation. Understanding the psychological dimensions of UC is essential for comprehensive disease management and improving patient outcomes.

Keyword – *Psychological stress; Grahani; Ulcerative colitis; IBD*

Rasayana and Herbal Interventions

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Abstract

Rasayana is one of the eight clinical specialties (Ashtanga Ayurveda) and represents the rejuvenative branch of Ayurveda aimed at promotion of health, prevention of disease, and enhancement of longevity. Rasayana therapy primarily nourishes Rasa Dhatu, thereby supporting optimal tissue nutrition, immunity (Vyadhikshamatva), mental faculties, and resistance against aging and degenerative disorders. In the post-COVID era, increasing oxidative stress, immune dysregulation, and premature aging have highlighted the relevance of Rasayana and herbal interventions as preventive and promotive healthcare strategies. A narrative review was conducted using classical Ayurvedic texts such as Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, along with contemporary scientific literature from indexed biomedical databases. Rasayana drugs including Chyavanprash, Brahma Rasayana, Triphala Rasayana, Shilajit Rasayana, Madhya Rasayana (Mandukaparni, Brahmi, Shankhapushpi, Guduchi), and single herbs like *Emblica officinalis*, *Withania somnifera*, *Tinospora cordifolia*, and were reviewed for their phytochemical, antioxidant, immunomodulatory, and anti-aging properties. Rasayana formulations demonstrated significant antioxidant activity through phytoconstituents such as polyphenols, flavonoids, tannins, alkaloids, glycosides, fulvic acid, and withanolides. These agents counter oxidative stress, modulate inflammatory pathways, enhance mitochondrial function, and improve neurocognitive and immunological outcomes. Madhya Rasayanas showed neuroprotective and nootropic effects, while Chyavanprash and Brahma Rasayana exhibited broad immunonutritional benefits, particularly in elders and post-viral convalescence. Triphala and Shilajit contributed to metabolic balance, detoxification, and rejuvenation. Rasayana therapy serves as a holistic, evidence-supported alternative and adjunct for

disease prevention, post-COVID recovery, healthy aging, and youthful vitality. Integration of Ayurvedic Rasayana concepts with modern antioxidant and phytopharmaceutical research provides a promising framework for preventive, geriatric, and lifestyle medicine.

Role of Yoga and Mind–Body Practices in the Management of Menopausal Syndrome

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Abstract

Menopause is a natural physiological transition in a woman's life, marked by the permanent cessation of menstruation due to decline in ovarian function. It is often associated with a constellation of symptoms collectively known as menopausal syndrome, including vasomotor symptoms (hot flashes, night sweats), psychological disturbances (anxiety, depression, irritability), sleep disorders, urogenital complaints, and musculoskeletal pain. These symptoms significantly impair quality of life.

Conventional management mainly includes hormone replacement therapy (HRT), which, though effective, is associated with potential risks and contraindications. Hence, there is growing interest in non-pharmacological, holistic approaches. Yoga and mind–body practices emphasize the integration of physical postures (asana), breathing techniques (pranayama), meditation (dhyāna), and relaxation, which help restore psycho-neuro-endocrine balance. These practices are increasingly recognized as safe, cost-effective, and beneficial in alleviating menopausal symptoms.

Keywords: *Menopausal syndrome; Yoga; Mind–body practices; mental health; Stress management*

Clinical Evaluation of Shirodhara with Brahmi Taila in the Management of Generalized Anxiety Disorder: A Case Study

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Abstract

Generalized Anxiety Disorder (GAD) is a chronic mental health condition characterized by excessive worry, disturbed sleep, autonomic symptoms, and impaired quality of life. Conventional pharmacological management is often associated with adverse effects and dependency, highlighting the need for safe, holistic interventions. In Ayurveda, anxiety is described under Chittodvega, where both Shodhana and Shamana therapies are advocated. Shirodhara, a classical Panchakarma procedure, exerts a calming influence on the central nervous system, while Brahmi Taila and Brahmi Vati possess Madhya, Manobalya, and Rasayana properties.

Objective : To Clinically Evaluate The Combined Effect Of Shirodhara With Brahmi Taila Along With Brahmi Vati In The Management Of Generalized Anxiety Disorder.

Methods : A 25-Year-Old Female Patient Diagnosed With Generalized Anxiety Disorder Was Treated With Shirodhara Using Brahmi Taila Once Daily For 14 Consecutive Days. Simultaneously, Brahmi Vati Was Administered Orally In A Standard Therapeutic Dose. Clinical Assessment Was Performed Using Subjective Symptom Grading And The Hamilton Anxiety Rating Scale (Ham-A) Before And After Treatment.

Results: The Ham-A Score Reduced Significantly From 26 (Moderate–Severe Anxiety) Before Treatment To 9 (Mild Anxiety) After Treatment, Indicating A 65.38% Reduction In Anxiety Severity. Marked Improvement Was Observed In Symptoms Such As Excessive Worry, Disturbed Sleep, Restlessness, Irritability, And Mental Agitation. No Adverse Drug Reactions Or Complications Were Reported During The Treatment Period.

Conclusion : The Combined Therapy Of Shirodhara With Brahmi Taila And Internal Administration Of Brahmi Vati Proved To Be A Safe And Effective Integrative Approach In The Management Of Generalized Anxiety Disorder. The Intervention Significantly Alleviated Anxiety Symptoms And Improved Overall Mental Well-Being, Supporting Its Role As A Promising Non-Pharmacological Ayurvedic Treatment Modality.

Keywords: *Generalized Anxiety Disorder; Chittodvega; Shirodhara; Brahmi Taila; Brahmi Vati; Ayurveda; Hama*

A Randomized, Controlled, Integrative Clinical Pilot Study Evaluating the Effect of Yoga Therapy on Stress-Related Insomnia (Anidra)

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Abstract

Stress-related insomnia (Anidra) is a prevalent psychosomatic disorder precipitated by chronic psychological stress and characterized by difficulty in sleep initiation and maintenance, impaired cognitive functioning, and reduced quality of life. Pharmacological hypnotics offer short-term symptomatic relief but are associated with adverse effects such as tolerance, dependence, and residual daytime sedation. In Ayurveda, Anidra is described as a disorder of Manasika Bhavas with predominant Vata–Pitta vitiation. Yoga therapy, as an integrative mind–body intervention, has demonstrated regulatory effects on the hypothalamic–pituitary–adrenal axis and autonomic nervous system, thereby improving sleep architecture.

Keywords: *Anidra; Stress-Related Insomnia; Yoga Therapy; Integrative Medicine; Randomized Controlled Pilot Study; Insomnia Severity Index*

Role of Sattvavajaya Chikitsa in the Management of Manoavsada– A Case Review

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Abstract

Introduction: Manoavasada is the change in the mood, which is characterised by sadness that may vary from mild despondency to deep despair. In Ayurveda, it is equivalent to vishada, manodainya, soka, and glani. Tamasika-hina satva purusa are vulnerable to Manoavasada, which is also related to Vatakshaya, Pittavruddhi, Sleshmavruddhi

Methodology: This case study describes a 42-year-old female patient with the complaints of inexplicable sadness, reduced social interactions, excessive overthinking, increased need for external reassurance and validation, and inappropriate eating habits related to occasional indigestion and burning sensation. The case study was analysed by rogi-roga parīkṣā and diagnosed under the category of manodukkhaja kapha-dominant vataja nānātmaja vyādhi (depression). The Hamilton Depression Rating Scale was employed to measure the intensity of the depressive symptoms.

Results: Screening was done to confirm Major Depressive Disorder as per DSM-5 criteria. As per vata Pradhana tridoshaja, there was improvement, and HAM-D scores reduced from 18 to 8. There was a shift in the total personality and behaviour due to treatment, which also includes sattvavajaya chikitsa, which proves the effectiveness of Ayurvedic management.

Analysis: The condition was managed with Shamana Chikitsa using Manasmitra Vati, Sutshekhar Rasa, Eladi Vati, Hingwashtak Churna, Trayodashanga Guggulu, and Narasimha Rasayana, along with Koshta Shodhana, Shirodhara, and Shiropichu. Sattvavajaya Chikitsa included counselling, recreational activities, sketching, mandala art, puzzles, and reading. Integrated Shamana, Shodhana, and Rasayana therapy led to improved HDRS scores.

Discussion: Manoavasada, a common Manasika Roga, showed Rajoguna predominance due to Tridosha vaishamya. Management with Shamana Chikitsa and Sattvavajaya Chikitsa restored Dosha–Agni samya, improved Manas prasannata, behaviour, and vishada, corrected maladaptive thoughts, prevented progression to severe psychiatric illness, and enhanced dinacharya and daily functioning.

Keywords: *Manoavasada; Sattvavajaya Chikitsa; Shamana Chikitsa; Major Depressive Disorder; Manasika Roga; Vataja Nanatmaja Vyadhi; Dosha-Agni Samya; Manas Prasannata; Tridosha Vaishamya*

Role of Yukti Vyapashraya and Sattwavajaya Chikitsa in the Management of Chittodwega – A Case Study

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Abstract

Introduction/ Background: Social Anxiety Involves Persistent Fear Of Scrutiny, Paralleling Ayurvedic Chittodwega (Vata-Pitta/Rajo Guna Imbalance). Affecting 25% Of The Population, Particularly Females, This Disabling Condition Necessitates A Comprehensive, Integrated Approach Bridging Traditional Ayurvedic Wisdom With Modern Diagnostic Frameworks For Effective Clinical Recovery.

Case Presentation: A 57-Year-Old Female Patient Had Been Suffering From Persistent Worry (Chinta), Social Avoidance (Bhaya), Lethargy (Alasya) And Disturbed Sleep (Nidranasha) For Two Years, Followed By A Fear Of Judgment That Satisfies The Dsm-5 Criteria. Ayurvedic Diagnosis And Examination Revealed Chittodwega With Vata-Pitta Vitiation And Rajasika Predominance. Manovaha Srotodushti Due To Emotional Neglect And Unresolved Bhaya And Krodha Needs To Be Managed Along With Clinical Diagnosis.

Intervention: Management Using Shamana Chikitsa (Manasamitra Vati, Vishamushti Vati, Rasnasaptaka Kwatha, Ksheerabala Taila, Saraswatarishta) And Sattvavajaya Chikitsa (Yoganidra, Mandala Art), Along With Spousal Counselling, Reduced Irritability, Lethargy, And Overthinking, Improved Communication, And Restored Body–Mind Harmony And Adaptive Thinking.

Outcome: Screening Confirmed Social Anxiety, Meeting Criteria For Temperamental Behaviour (Krodha), Fear Of Criticism, Judgement, And Social Avoidance (Bhaya). Following A Vata-Pitta Pacification Protocol, Substantial Improvement Occurred: Ham-A Dropped From 25 To 4 And Isi From 19 To 0. This Clinical Reduction In Worry, Restlessness, And Lethargy Validates The Efficacy Of Integrated Ayurvedic Management.

Conclusion: Though Lacking A Direct Modern Equivalent, Chittodwega Is Symptomatically Near Identical To Anxiety Disorders. In This Case, Symptoms Reflected Rajoguna Predominance Due To Vata–Pitta Imbalance. With The Integration Of Shamana And Sattvavajaya Chikitsa, The Patient Achieved A Balance Between Dosha And Agni. This Helped To Improve The Clarity Of The Mind, Correct The Maladaptive Patterns Of Cognition, And Effectively Arrest The Progression Towards Serious Psychiatric Disorders.

Keywords: *Ayurveda; Case Study; Chittodwega; Social Anxiety; Yuktivyapashraya Chikitsa; Sattvavajaya Chikitsa*

Management of Cauda Equina Syndrome Through Ayurvedic Management

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Abstract

Cauda Equina Syndrome (CES) is a rare neurological emergency caused by compression or damage to the cauda equina nerve roots (L2-Co), with a prevalence of 0.3 to 7.0 per 100,000 individuals. Clinically, it presents with lower back pain radiating to the legs, sensory disturbances such as saddle anesthesia, motor weakness, urinary retention or incontinence, fecal incontinence, sexual dysfunction, and gait abnormalities. Etiologies include trauma, herniated discs, tumors, abscesses, hematomas, and other space-occupying lesions. Diagnosis is based on clinical evaluation, neurological examination showing sensory loss and diminished reflexes, and MRI, the gold standard for confirming compression.

In Ayurveda, CES does not have a direct counterpart but may be correlated with Urustambha, a condition caused by aggravated Vata and Kapha doshas. Symptoms such as numbness in the thighs and calves (Janghaurugalani), leg pain (Padam Vyatha), and a diminished sense of touch (Sheet Sparsha Na Vet) are similar in nature. It is important to note that CES/Urustambha is one of the rare conditions for which Panchakarma therapy is not recommended initially. In the later phase of treatment, local panchakarma therapy can be given.

Keywords: *Cauda Equina Syndrome; Urustambha; Panchakarma*

Role of Patolaadi Matra Basti in SLE W.S.R. to Uttan Vatarakta

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Abstract

Autoimmune diseases represent a family of at least 100 illnesses that share common characteristics. The immune system attacks its own tissues, causing inflammation & tissue damage in affected organs. Immune disease occurs due to genetic history, environmental factors and lifestyle disorders. SLE affects the heart, lungs, kidneys, skin and nervous system. SLE is a relapsing and remitting disease. Its common manifestations are rashes (malar), serositis, Arthritis, blood problems, ANA+ve, immunological factors, etc. In *Ayurveda*, its symptoms resembles with *Uttan vatarakta*, like itching (*kandu*- due to *kapha* dominancy), *Daah* (burning sensation - due to *pitta* dominancy), *Toda* (Piercing Pain- due to *vata*), *Tawak bahya tamrta* (Due to *pitta*-Reddish discolouration). Hence, the main concern is the line of treatment in the management of aggravated *vata-pitta doshas*. So, *Patolaadi ghrut basti* plays a major role in balancing the aggravated doshas in *Uttan vatarakta*.

Keywords – *Preclinical lupus; Lupus Nephritis; Uttan Vatarakta.*

Management of Psoriasis Using Ayurvedic Principles: A Case Report

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Abstract

Psoriasis is a persistent, immune-mediated inflammatory disorder characterized by accelerated skin cell proliferation, resulting in sharply defined, red, scaly plaques covered with characteristic silvery-white scales. These lesions most commonly appear on the extensor aspects of the limbs (such as the outer surface of the elbows and knees), scalp, nails, sacral region, and lower back. The condition shows no specific age of onset and can develop at any stage of life, though it most frequently begins between 15 and 30 years of age, with no notable gender predominance. Reported prevalence varies between 0.2% and 4.8% across populations. Psoriasis follows a chronic, relapsing-remitting pattern throughout life.

In the present case report, the clinical presentation of psoriasis was correlated with the Ayurvedic concept of kusta rog. The patient was managed exclusively using classical Ayurvedic principles along with Panchakarma procedures. Remarkable clinical improvement was achieved, with complete clearance of all psoriatic lesions observed. Photographic documentation before and after treatment clearly demonstrates the resolution of the disease. This case illustrates the promising therapeutic potential of Ayurvedic interventions, including Panchakarma therapy, in the effective management of psoriasis.

Role of Panchakarma in the Management of Stress, Anxiety, and Depression: A Review

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Abstract

Stress, anxiety, and depression are increasingly prevalent mental health disorders that adversely affect quality of life and functional capacity. Conventional treatment modalities often focus on symptomatic relief and may be associated with adverse effects or relapse. Ayurveda describes these conditions under Manasika Vikara such as Chittodvega and Vishada, resulting from imbalance of Doshas, disturbance of Manasika Gunas (Rajas and Tamas), and dysfunction of Manovaha Srotas. Panchakarma, the detoxification and bio-purificatory therapy of Ayurveda, is advocated for restoring psycho-somatic balance.

A narrative review of classical Ayurvedic texts and published scientific literature was conducted. Relevant articles from peer-reviewed Ayurvedic and integrative medicine journals were analyzed to assess the role of Panchakarma procedures in stress-related and mood disorders. Therapies such as Abhyanga, Shirodhara, Nasya, Virechana, and Basti were reviewed for their therapeutic relevance and mechanisms. The reviewed literature suggests that Panchakarma therapies have a calming effect on the nervous system and help regulate neuropsychological functions.

Shirodhara and Abhyanga were found to reduce stress, anxiety, and sleep disturbances, while Nasya improved cognitive and emotional regulation. Virechana and Basti contributed to systemic detoxification and dosha balance. Clinical observations demonstrated improvement in mood, anxiety levels, and overall quality of life. Panchakarma provides a holistic and individualized approach to the management of stress, anxiety, and depression by addressing their root causes. Although existing evidence is encouraging, further controlled clinical studies are required to validate its efficacy and standardize treatment protocols.

An Ayurvedic Approach to the Management of Ankylosing Spondylitis (Gambhir Vatarakta)

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Abstract

Ankylosing Spondylitis is characterized by chronic inflammatory arthritis predominantly affecting the sacroiliac joints and spine which can progress to bony fusion of the spine. Chronic back pain and progressive spinal stiffness are the most common features of the disease. Symptoms are exacerbated by inactivity and relieved by rest. Extra-articular features include fatigue, anemia, anterior uveitis, prostatitis, inflammatory bowel syndrome, osteoporosis, and cardiovascular diseases. Ankylosing spondylitis evolves slowly with fluctuating symptoms and ankylosis i.e. fusion of vertebrae develops in many patients over a period of time. Physical signs include reduced range of lumbar spine movement in all directions and pain on sacroiliac stressing. Diagnosis of Ankylosing spondylitis cannot directly correlate with any particular Ayurveda disease. However, based on symptoms of disease, it can be correlated with *Gambhir Vatarakta* like *Sandhi Shoth* (Joint inflammation), *Stabdhta* (joint stiffness), *Dhah* (warmth), *Kathinyata* (limited joint movement), *Abhyantra sandhi peda* (joint tenderness), *Toda* (throbbing pain) in *Kati* (Pelvic region), *Pristha* (Posterior region of trunk from neck upto pelvis), *Trik* (shoulder girdle). These symptoms are indicative of the presence of excessive *Vata* and *Rakta doshas* in the body. *Panchkarma* procedures (especially *Aanuvasana* and *Niruh basti*) along with *Ayurvedic* internal medication were used for the treatment of Ankylosing spondylitis

Role of Sattvavajaya Chikitsa in the Management of Anidra (Insomnia) – A Case Review

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Abstract

Introduction/Background: Insomnia (Anidra) In Ayurveda Is Considered Both A Symptom And An Independent Disorder Affecting Physical And Mental Health, Mainly Due To Vitiation Of Vata And Pitta Along With Disturbed

Mental Factors Like Stress, Worry, And Fear. Nidra Is One Of The Three Pillars Of Life, Essential For Maintaining Strength And Well-Being.

Methodology: This Case Study Presents A 57-Year-Old Male With Difficulty Falling Asleep, Frequent Night Awakenings, Early Morning Waking, And Non-Restorative Sleep. He Also Experienced Daytime Tiredness, Poor Concentration, Irritability, Mood Changes, And Headaches. The Condition Was Assessed Through Roga-Rogi Pariksha And Diagnosed As Anidra (Insomnia), With Severity Evaluated Using The Insomnia Severity Index. Management Included Shamana Aushadhi (Manasmitra Vatakam), Ksheerabala Taila Pichu, And Padabhyanga, Along With Sattvavajaya Chikitsa Through Counselling, Yoga, Recreational Activities, And Lifestyle Advice Such As Maintaining A Regular Sleep Schedule, Reducing Screen Time, And Avoiding Caffeine And Alcohol At Night

Results : Screening Was Done To Confirm Insomnia As Per Dsm-5 Criteria , As Per Vata And Pitta Pradhana, There Was Improvement, And Isi Scores Reduced From 21 To 7 From Moderate To Mild Scales, Which Also Includes Sattvavajaya Chikitsa , Which Proves The Effectiveness In Ayurvedic Management

Discussion : This Case Study Demonstrates That Anidra (Insomnia) Associated With Vata–Pitta Imbalance And Psychological Stress Can Be Effectively Managed Through A Holistic Ayurvedic Approach. The Use Of Shamana Aushadhi Like Manasmitra Vatakam (Medhya, Manas-Shamaka, Nidrajanana, Vata-Pitta Balancing), Along With External Therapy Such As Ksheerabala Taila Pichu (Vata-Shamaka, Balya, Brimhana) And Sattvavajaya Chikitsa, Resulted In Significant Clinical Improvement. The Isi Score Reduced From 21 To 7, Indicating Better Sleep Quality And Mental Well-Being. Overall, Ayurvedic Management Proved Beneficial In Improving Sleep and Enhancing the Patient's Quality Of Life in Chronic Insomnia.

Keywords: *Anidra; Sattvavajaya Chikitsa; Shamana Chikitsa; Insomnia; Manasika Roga*

Marma Therapy as an Integrative Healing Modality: A Review of the Literature

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Abstract

Marma Therapy, a cornerstone of Ayurvedic medicine, originates from classical texts like the Charaka Samhita and especially the Sushruta Samhita. Marma points refer to vital anatomical locations where various tissues—muscles, blood vessels, ligaments, tendons, bones, and joints—converge. Ayurveda recognizes 107 such marma points across the body. These points are classified in two primary ways: by predominant tissue type (e.g., mamsa marma for muscle-dominated, sira marma for vascular, snayu marma for ligament/tendon, asthi marma for bone, and sandhi marma for joint-related) and by the effects of injury (ranging from immediate death [sadyo pranahara], delayed fatality [kalantara pranahara], disability/deformity [vaikalyakara], to milder functional impairment). Marma points serve as critical junctions for prana (vital life force) and nadis (energy channels), playing a key role in regulating the three doshas—Vata, Pitta, and Kapha. Ancient texts highlight their significance in anatomy, surgery, trauma assessment, and self-protection, as injury to these sites can disrupt physiological balance, tissue nourishment, and overall vitality.

Over time, this knowledge evolved into Marma Chikitsa (Marma Therapy), a gentle, non-invasive therapeutic approach. It employs subtle methods such as light touch, precise pressure, medicated oil application, and specialized

manipulations to clear prana blockages, pacify doshic imbalances, enhance blood and lymphatic flow, nourish tissues, and restore holistic equilibrium. In contemporary healthcare, Marma Therapy serves as a personalized complementary modality that integrates effectively with conventional medicine. It is particularly effective for managing pain in conditions like cervical/lumbar spondylosis, osteoarthritis, migraines, and musculoskeletal disorders. Additional benefits include stress and anxiety reduction, improved joint mobility, deep relaxation, and support for mental and physical well-being. Emerging evidence from clinical observations, case studies, and reviews suggests benefits in chronic pain relief, anxiety management, blood pressure regulation, and supportive care for conditions such as Parkinson's tremors and post-injury recovery. Proposed mechanisms involve modulation of neural and vascular activity, release of fascial tension, and balancing of the autonomic nervous system—sharing similarities with acupressure while remaining rooted in Ayurvedic energetics. This summary outlines core marma principles and underscores the modern therapeutic relevance of Marma Chikitsa, especially in pain management, emotional balance, and musculoskeletal health.

Integrative Ayurvedic Approach to Perinatal Anxiety and Depression with Improved Breastfeeding Practices: A Case Report

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Abstract

Introduction: Perinatal Anxiety And Depression Are Common Yet Underdiagnosed Maternal Mental Health Conditions That Adversely Affect Quality Of Life And Breastfeeding Practices. Pharmacological Management During Pregnancy And Lactation Poses Safety Concerns, Creating A Need For Holistic And Non-Pharmacological Approaches. Ayurveda Conceptualizes These Conditions Under *Manasika Vyadhi* Involving *Rajas-Tamas Prakopa*, Where Integrative Therapies May Offer Benefit.

Method: This Case Report Describes A 27-Year-Old Primiparous Woman Presenting With Perinatal Anxiety, Depression, Insomnia, And Low Breastfeeding Confidence. Baseline Assessment Revealed HAM-A 24, HAM-D 22, ISI 19, Significant *Ashtavibhrama*, And Impaired WHOQOL-BREF Scores, Fulfilling DSM-5 Criteria For Perinatal Anxiety And Depression. An Integrative Ayurvedic Protocol Comprising *Murdhni Taila* Procedures (Shirodhara, Shirotalam, Shiropichu), Oral Medications (Manasmitra Vati, Brahmi Vati, Saraswatarishta, Agnitundi Vati), Yoga Practices, And *Satwawajaya Chikitsa* Counselling Was Administered Over Three Months.

Result: Gradual And Sustained Improvement Was Observed Across All Domains. Post-Intervention Scores Reduced To HAM-A 7, HAM-D 6, ISI 6, With Complete Resolution Of *Ashtavibhrama* And Near-Normal WHOQOL-BREF Scores. Breastfeeding Self-Confidence Improved Markedly, And The Patient Achieved Emotional Stability And Restorative Sleep Without Any Adverse Effects.

Analysis: The Baseline Assessment Showed The Presence Of Severe Anxiety, Depression, Insomnia, Poor Quality Of Life, And Low Breastfeeding Self-Confidence, As Measured By HAM-A, HAM-D, ISI, *Ashtavibhrama* Evaluation, WHOQOL-BREF, And Breastfeeding Self-Efficacy Scale. Re-Evaluation Was Done At The 15th, 30th, 60th, And 90th Days To Show The Progressive Reduction In The Severity Of Symptoms Using All The Standardized Scales. The Quantitative Improvement In Scores, Along With The Qualitative Assessment, Helped Evaluate The

Treatment's Effectiveness. The Lack Of Adverse Effects And The Remission Of Symptoms Helped In Establishing The Safety And Efficacy Of The Integrative Ayurvedic Therapy.

Discussion: The Observed Clinical Improvement Suggests That An Individualized, Integrative Ayurvedic Approach Can Effectively Address Perinatal Anxiety And Depression By Restoring *Dosha* Balance, Improving Sleep, Emotional Regulation, And Maternal Confidence. This Case Highlights The Potential Role Of Ayurveda As A Safe And Supportive Therapeutic Option During The Perinatal Period.

Keywords: *Perinatal Anxiety; Perinatal Depression; Integrative Ayurveda; Satvavajaya Chikitsa; Murdhni Taila; Shirodhara; Maternal Mental Health; Breastfeeding Self-Efficacy; Case Report*

An Ayurvedic Management of Katigat Vata-A Case Study

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Abstract

Katigata Vata is a classical Ayurvedic term referring to a condition where the Vata dosha becomes vitiated (imbalanced) specifically in the Kati region (lumbar/lower back area). "Kati" means the lower back or lumbar region, and "Vata" refers to the biological humour responsible for movement and neurological functions. It occurs when aggravated Vata fills the "vacant channels" (void spaces) of the spine, leading to degenerative changes and impaired mobility. Anterolisthesis -It is a spinal condition where an upper vertebral body slips forward in relation to the vertebra immediately below it. As a type of spondylolisthesis, it most Commonly affects the lumbar spine (lower back), causing pain, nerve compression, and Stiffness. A male patient who is 59 years old, visited Shri Krishna Ayush University's panchakarma department from Karnal for Medical help. He has been Experiencing health issues for the past 3-4 months. His symptoms include pain in lower Back, muscle weakness, radiating pain, numbness, or tingling that travels down the Buttocks and legs worse with bending, lifting, and prolonged standing. Panchkarma Treatment given in this hospital is-Kati basti and Patra potli swedan, Matra basti and shaman aushadhi.

Keywords:- *Katigat vat; Anterolisthesis; Katibasti; Patra Potli swedan; Vata dosha*

A Detailed Topic on Relationship Between Emotional Intelligence and Job Satisfaction

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Abstract

Employee attitudes and experiences at work are greatly influenced by emotional intelligence (EI). This study focuses at the connection between emotional intelligence and job happiness, emphasizing how people's capacity to identify, comprehend, and control their emotions affects how satisfied they are with their jobs. Higher emotional intelligence makes it easier for workers to manage stress at work, uphold healthy interpersonal connections, and adjust to organizational demands, all of which increase job satisfaction. In order to examine how emotional intelligence affects elements like motivation, work engagement, and emotional well-being, the study examines the body of theoretical and empirical research. Previous studies have shown that emotional intelligence and job satisfaction are positively

and significantly correlated in a variety of organizational contexts. In order to improve job happiness, lower turnover intentions, and foster a healthy work environment, the study emphasizes the significance of managers and employees having emotional intelligence competencies. The study comes to the conclusion that one of the most important psychological resources influencing both individual and organizational efficiency is emotional intelligence.

Keywords: *Job Satisfaction; Job Happiness; Employee Well-Being; Work Engagement; Organizational Performance*

Breathing Ease into Menopause: The Power of Nasya and Shamana

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Abstract

Introduction- Menopause the stage of life in Ayurveda known as Rajonivrutti, a natural transition mainly governed by increase in Vata & Pita. Nasya and Shamana therapy harmonizes these energies to reduce symptoms like hot flashes, anxiety, mood swings and sleep disturbances. Nasya involves Ghrita administration through nostrils, that brings calm & cooling properties, on other hand Shamana focuses on gentle way to pacify aggravated doshas.

Material & Methods – Here is a case report of a female aged 49 years in menopausal transition phase having severe menopausal symptoms since last 6months with increase in severity. Patient visited in OPD, clinically evaluated on the basis of symptoms. Patient advised for Nasya therapy with oral medications to balance the physiological changes.

Results - After 2 months of therapy, patient got major improvement in all these symptoms. Quality of life improved.

Analysis & Discussion – Nasya targets on HPO axis helping to regulate the hormonal status in body. Complementing this, Shamana therapy pacifying aggravated doshas and maintain the equilibrium.

Keywords – *Menopause; Nasya; Raja nivrutti; Shamana.*

A Detailed Topic on Schizophrenia & Anxiety Disorder in Perspective to Mental Health Awareness

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Abstract

Anxiety Disorders Are Commonly Comorbid With Schizophrenia, Being One Of The Most Common And Important Comorbidities In The Spectrum Of Psychotic Disorders. Recent Meta-Analyses And Large Cross-Sectional Studies Suggest That Around 38–40% Of Individuals With A Diagnosis Of Schizophrenia Also Meet Criteria For Comorbid Anxiety Disorders. In Addition, Excessive Anxiety Symptoms That Are Mostly of Severe Intensity Heavily Burden $\geq 50\%$ Out Of a Range of Patients At Different Stages In Their Illness, Including the Prodrome, First Episode, And Chronic Phases. Prevalence Rates Vary Widely, Ranging From Approximately 30% To 65%, Depending On The Specific Measures Employed, The Demographics Of The Sample, And The Stage Of Illness. Some Subtypes, Such As Social Phobia, Have Also Been Reported To Be More Common In These Individuals.

Schizophrenia And Anxiety Disorders Exhibit A Robust And Clinically Significant Comorbidity, With Anxiety Representing One Of The Most Frequent Co-Occurring Conditions Across All Stages Of Psychotic Illness. Pooled Meta-Analytic Evidence From Dozens Of Studies Consistently Estimates That Approximately **38–40%** Of Individuals With Schizophrenia Meet Formal Diagnostic Criteria For At Least One Comorbid Anxiety Disorder (E.G., Social Anxiety Disorder [SAD], Panic Disorder [PD], Generalized Anxiety Disorder [GAD], Obsessive-Compulsive Disorder [OCD], And Post-Traumatic Stress Disorder [PTSD]). When Including Sub threshold But Clinically Impairing Anxiety Symptoms, Prevalence Rises Substantially, Often Exceeding **50%** And Reaching Up To **65%** In Certain Populations, Such As First-Episode Drug-Naïve (FEDN) Patients (Recent Chinese Cohort: $\sim 51.8\%$ With Severe Anxiety Symptoms) Or Early Psychosis Cohorts. Specific Subtypes Show Notable Variation: SAD Frequently Emerges as One of The Most Prevalent (Meta-Analytic Pooled Rate $\sim 14.9\%$, though Some Targeted Assessments Report Rates as high as 37–47%), Followed by PD, GAD, and OCD-Like Symptoms.

In Summary, the Schizophrenia–Anxiety Comorbidity Constitutes a Trans diagnostic Challenge with Substantial Clinical, Functional, And Mechanistic Relevance. Future Priorities Include Refined Dimensional Assessment Tools And Longitudinal Mechanistic Investigations (Including At-Risk Mental State Cohorts).

Keywords: *Psychosis; Hallucinations/Delusions; Comorbidity; Stigma; Early; Intervention*

Role of Agnikarma in the Management of Coccydynia: A Case Report

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Abstract

Coccydynia is a chronic painful condition involving the coccyx, frequently associated with lower back pain and functional limitation. It commonly results from trauma, prolonged sitting, or degenerative changes, and chronic cases often respond inadequately to conventional conservative management. In Ayurveda, such pain-dominant conditions are categorized under Vata Vyadhi, wherein aggravated Vata Dosha affects the Asthi (bone) and Sandhi (joints). The sacrococcygeal region can be correlated with Trika Pradesha, and persistent pain in this region resembles Trikagraha. Agnikarma, a Para surgical procedure described by Acharya Sushruta, is indicated in Vata-dominant disorders characterized by severe and localized pain.

A 37-year-old male patient presented with complaints of coccygeal pain associated with lower back pain for one and a half years, aggravated by prolonged sitting and interfering with daily activities.

Laboratory investigations revealed Vitamin B12 deficiency (136 pg/mL), while Vitamin D levels were within normal limits. Based on clinical evaluation, the case was diagnosed as chronic coccydynia. The patient was treated with Agnikarma therapy administered weekly. Initially, four sittings were performed, followed by two additional sittings to consolidate the therapeutic response. After completion of six sessions, the patient reported more than 75% reduction in pain intensity along with significant improvement in functional ability, without any adverse effects.

This case highlights the potential role of Agnikarma as a safe, effective, and minimally invasive Para surgical intervention in the management of chronic Vata-dominant coccygeal pain.

Keywords: *Coccydynia; Agnikarma; Vata Vyadhi; Trikagraha; Coccygeal pain; Ayurvedic Para; surgical therapy*

Role of Rasaushdhis in the Management of Anxiety

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Abstract

Excessive fear, worry, restlessness, palpitations, and sleep disturbances are all hallmarks of anxiety, a common psychological disorder that lowers quality of life. Anxiety-related disorders are classified under Chittodvega and other Manas Vikara in Ayurveda, where an imbalance of Raja and Tama Guna and vitiation of Vata Dosha are important factors. Traditional anxiolytic medications are commonly used, but prolonged use may result in side effects and dependence, necessitating the search for safer and more efficient substitutes. Ayurvedic herbo-mineral formulations, or rasashadhis, are renowned for their potency, quick action, and efficacy at low dosages. These formulations' Medhya, Balya, and Manasashamaka qualities aid in calming psychological disorders and restoring mental stability.

Anxiety symptoms like excessive worry, mental restlessness, irritability, palpitations, and disturbed sleep significantly improved when specific Rasaushadhis were administered in conjunction with suitable Anupana and supportive dietary and lifestyle changes. Additionally, patients reported feeling more at ease, focused, and generally better. Rasaushadhis were found to be safe and effective in treating anxiety when prepared and used sparingly in accordance with traditional guidelines. In addition to highlighting Rasaushadhis potential as a therapeutic option for managing anxiety, this study also highlights the need for more systematic clinical studies to confirm their safety and efficacy on a larger scale.

Keywords- *Guna; Manas vikara; Rasaushdhis; Anxiety*

Manasa Prakriti : A Study on the Triguna (Satva, Rajas and Tamas) Profiles in the Sushruta Samhita and Their Relevance in Modern Vocational Psychology and Emotional Intelligence

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Abstract

The term Manasa Prakriti in Ayurveda is the psychological make-up of an individual as a result of the predominance of the three Gunas: Satva, Rajas, and Tamas. These psychological qualities have been described as basic determinants of behavior, emotional traits, decision-making, and adaptability. Sushruta Samhita is mainly a surgical classic, but it also holds a highly developed psychological model in the form of Triguna theory. The combination of Satva (clarity/balance), Rajas (passion/activity), and Tamas (inertia/ignorance) gives rise to 16 different mental types or Manas Prakritis. Manasa Prakriti has differences in cognition, motivation, temperament, and emotional processes.

This literary analysis will examine the textual and conceptual analysis of Manasa Prakriti and their applications in the modern field of Vocational Psychology and Emotional Intelligence. Specifically, this study will attempt to unravel the Triguna patterns as described by Acharya Sushruta and assess their applications in the context of modern Vocational Psychology (career aptitude) and Emotional Intelligence (EQ).

Analysis indicates that Satvika profiles have high trait EQ and are naturally apt towards ethical leadership and complex cognition roles, whereas Rajasika profiles indicate high achievement motivation apt for the role of an entrepreneur, whereas Tamasika profiles indulges better in routine centric vocations. Conclusion: The study concludes that the combination of Manasa Prakriti with EQ and Vocational Psychology provides a holistic approach towards improving work-related well-being and reduce occupational burnout.

Role of Shirodhara in the Management of Anxiety -A Case Study

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Abstract

Introduction: Anxiety disorders are prevalent mental health conditions characterized by excessive worry, restlessness, disturbed sleep, and impaired daily functioning. Despite their effectiveness, side effects and dependency may limit the long-term use of conventional pharmaceutical therapies. As a result, interest in complementary therapies is rising. Shirodhara, a significant Panchakarma technique outlined in Ayurveda, traditionally used to treat Manasika Vikara (psychological disorders) and entails continuously applying a medicated liquid to the forehead.

Method: For this case study, a single patient who displayed clinical signs of anxiety was chosen. A standardized anxiety rating scale was used for the baseline evaluation. Over the course of a specified treatment period, shirodhara was given using medicated oil for a set amount of time each day under carefully monitored circumstances. According to Ayurvedic principles, the patient was advised to make regular dietary and lifestyle changes.. The same anxiety scale was used for post-treatment evaluation in order to assess the effectiveness of the treatment.

Result :Anxiety scores significantly decreased after the intervention when compared to the baseline. Symptoms like excessive worry, restlessness, irritability, and sleep disturbances showed improvement. Additionally, the patient reported subjective gains in emotional stability, mental calmness, and general wellbeing. No adverse effects were observed during or after the treatment.

Discussion :According to the findings, Shirodhara may help lessen the symptoms of anxiety. Its ability to calm the central nervous system and regulate stress responses—possibly by modifying the hypothalamic-pituitary-adrenal axis—may be the basis for its therapeutic effects. Despite the single-case design's limitations, this study indicates that Shirodhara may be a useful and safe therapeutic approach for anxiety management. To confirm these results, more extensive clinical research is advised.

Keywords- *Shirodhara; Anxiety; Manasika Vikara; Panchkarma*

Role of Manasikabhavas in the Manifestation of Grahanidosha- A Literary Review

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Abstract

In Ayurveda, The Manifestation Of Grahanidosha Not Only Depends On Apathya Aharaviharas But Also On Manasikabhavas. This Study Aims To Explain And Explore The Role Of Manasikabhavas Such As Chinta, Shoka, Krodha, And Harsha Etc In The Manifestation Of Grahanidosha. Data source: Classical Ayurvedic Literature Mainly The Charaka Samhita ,Sushruta Samhita And Ashtanga Hridaya Were Reviewed To Collect The Textual Insight

Regarding The Relationship Between The Mind And Agni Review Method: A Comprehensive Literary Review Was Conducted To Understand The Relation Between Manasikabhavas And Agni. It Involved The Compilation Of References Related To Agni And Grahani, Role of Agni And Mind And The Influence Of Manasikabhavas On The Grahani Result And Conclusion: Analysis Reveals That Even though If An Individual Is Taking A Balanced Diet, Proper Digestion Will Not Take Place If He Is Affected With Psychological Instability. Manasikabhavas Directly Affects The Samana Vayu And Pachaka Pitta which Results In Agnimandhya. This Study Concludes That Grahani Dosha Is A Psycho-Somatic Disorder. Thus In Grahani Dosha The Role Of Sattvavajaya Chikitsa Along With Internal Medication Is Very Important For The Proper Recovery From The Disease.

The Silent Surgery: Exploring Non-Invasive Shalya Tantra through the Concept of Anuśastra

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Abstract

Shalya Tantra Is Traditionally Perceived As A Surgical Discipline Centered On Operative Procedures Using Sharp Instruments. However, Classical Ayurvedic Literature Delineates A Parallel Domain Of Non-Incisional Surgical Interventions Known As Anuśastra Karma. These Procedures—including Kṣāra Karma, Agni karma, Jalaukāvacaṛaṇa, And Raktamokṣaṇa—Achieve Surgical Objectives without Mechanical Invasion. This Article Explores Anuśastra As An Early Form Of Minimally Invasive Surgery, Supported By Classical Sanskrit Evidence And Correlated With Modern Interventional Techniques. The Study Highlights Anuśastra as a Refined, Patient-Centered Surgical Science with Contemporary Relevance.

Keywords: *Shalya Tantra; Anuśastra Karma; Minimally Invasive Surgery; Kṣāra Karma; Agni karma*

Management of Postpartum Emotional Disturbances through Sattvavajaya Chikitsa and Yoga Nidra: A Clinical Case Study

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The postpartum period is a psychologically sensitive phase in a woman's life due to physiological changes, mental stress, and the responsibilities of newborn care. Emotional disturbances such as anxiety, fear, emotional instability, and insomnia are commonly observed during this period. Classical Ayurvedic literature, especially Kasyapa Samhita, emphasizes the importance of mental well-being in the management of Sutika Rogas, including conditions affecting the mind.

This clinical case study aims to evaluate the effectiveness of Sattvavajaya Chikitsa and Yoga Nidra in the management of postpartum emotional disturbances. A postpartum woman presented with complaints of emotional instability, anxiety, fear of not being able to take proper care of her baby, and disturbed sleep. The patient was managed through

Sattvavajaya Chikitsa, which included reassurance, counselling, emotional support, and mental relaxation techniques. Along with this, Yoga Nidra was advised as a guided relaxation practice for 20–30 minutes daily for seven days. The patient practiced Yoga Nidra at home under proper guidance and continued the practice as instructed.

Clinical assessment after the intervention showed significant improvement in emotional stability, reduction in anxiety and fear, and improvement in sleep quality. No adverse effects were reported. This case study suggests that Sattvavajaya Chikitsa combined with Yoga Nidra is a safe, feasible, and effective home-based, non-pharmacological approach for managing postpartum emotional disturbances.

Integrative Ayurvedic Management of Rajonivritti Janya Anxiety and Insomnia – A Case Study

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Abstract

Rajonivritti (menopause) is a natural physiological phase in a woman's life characterized by cessation of menstruation and predominance of Vata dosha, leading to Dhatu kshaya and depletion of Ojas. These changes commonly manifest as psychological disturbances such as anxiety, insomnia, irritability, and emotional instability, significantly affecting the quality of life in post-menopausal women.

This case study reports a 53-year-old post-menopausal woman presenting with persistent anxiety, disturbed sleep, restlessness, and mental fatigue for one year. Based on Ayurvedic assessment, an integrative Ayurvedic management approach was adopted, which included Rasayana therapy along with Panchakarma procedures and lifestyle modification.

After the intervention, marked improvement was observed in anxiety levels, sleep quality, emotional stability, and overall mental well-being without any adverse effects. This case highlights the effectiveness of integrative Ayurvedic management as a safe, holistic, and patient-centered approach for managing psychological disorders associated with Rajonivritti.

Integrated Ayurvedic Approach in the Management of Madatyaya (Alcoholism): A Case Report

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Abstract

Introduction: Alcohol Use Disorder (Madatyaya) in Ayurveda, represents a high-burden, multifactorial condition with significant hepatic and psychosomatic implications. Conventional management often addresses symptoms alone, whereas Ayurveda offers a systems-based, integrative therapeutic framework targeting Dosha imbalance, Agni

dysfunction, and psychosocial determinants.

Objective: To evaluate the clinical effectiveness and functional outcomes of an integrated Ayurvedic treatment protocol in the management of Madatyaya with associated hepatic dysfunction and insomnia.

Methodology: This single-patient case report documents a 40-year-old male with chronic alcohol dependence, elevated liver enzymes, jaundice, gastrointestinal symptoms, and sleep disturbance. Diagnosis was established using clinical features, laboratory investigations, and standardized assessment tools (ADS, AUDIT, and ISI). The intervention comprised Shamana Chikitsa using Madiphala Rasayana, Draksharishta, Aarogyavardhini Vati, Sutashekhara Rasa, and Amalaki Churna, alongside Nidana Parivarjana and Pathya Ahara, administered over two months. Outcomes were monitored through serial biochemical parameters and scale-based assessments.

Results: Post-intervention analysis demonstrated marked normalization of liver function tests, significant reduction in alcohol dependence and insomnia scores, and substantial symptomatic relief, with no reported adverse effects.

Conclusion: The integrated Ayurvedic approach delivered measurable clinical value by improving hepatic function, sleep quality, and overall wellness, positioning it as a scalable, holistic strategy for managing Madatyaya.

Keywords: *Madatyaya; alcoholism; Ayurveda; nidana parivarjan*

Nidan Panchak of Apasmar Vyadhi: A Literature Review

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Abstract

Introduction: Apasmar is a Ayurvedic disorder characterized by sudden and transient loss of consciousness associated with abnormal motor activities, followed by regaining of normalcy. It occurs due to vitiation of Manasika dosas (Raja and Tama) along with involvement of Sharirik doshas (Vata, Pitta and Kapha). These vitiated dosas primarily affect Hrudaya, which is considered the seat of Chetana, Manas, Buddhi, and Smriti, leading to derangement of normal mental and neurological functions. The disease is also said to involve Manovaha srotas, resulting in impairment of higher mental faculties. The Ayurvedic diagnostic framework of Nidan Panchak—comprising Hetu (etiology), Purvarupa (premonitory symptoms), Rupa (clinical features), Samprapti (pathogenesis), and Upshaya/Anupshaya (therapeutic tests)—offers a comprehensive understanding of this condition. This review aims to evaluate the classical description of Vatarakta through the lens of Nidan Panchak and highlight its diagnostic and therapeutic relevance.

Methods: A qualitative literature review was conducted using primary Ayurvedic texts including Charaka Samhita, Sushruta Samhita, Ashtang Hruday, Ashtang Sangrah and Madhava Nidana, along with relevant commentaries and contemporary scholarly publications. Passages related to Apasmar were extracted, compared, and synthesized to present a structured interpretation of Nidan Panchak elements.

Results: The review found that Hetu primarily includes viruddha aahar, improper lifestyle, suppression of natural urges, and excessive emotional disturbances leads to vitiation of Raja and Tama gunas of Manas. Simultaneously, Tridosas—especially Vata doṣa—become aggravated. Due to Agnimandya, improper digestion and formation of Ama occurs, which further vitiates Rasa and Rakta dhatus. The aggravated doshas along with Raja-Tama affect the Hrudaya, the seat of Manas, Buddhi, Smriti, and Chetana. These vitiated doṣas obstruct the Manovaha srotas, leading

to avaraṇa of Buddhi and Smṛiti. As a result, there is sudden loss of consciousness and memory. Purvarupa manifestations such palpitations, giddiness, drowsiness, sleep disturbances, visual disturbance, abnormal perception provide strong predictive value for early diagnosis. Lakshana further categorizes Apasmar into Dosha-specific symptomatology, enabling precise staging and individualized intervention. Upshaya measures such as Medhya Rasayana, Sattvavajaya Chikitsa showed conceptual alignment with disease mechanisms, whereas Anupshaya factors aggravate chronicity.

Discussion: The Nidan Panchak framework offers an integrated clinical model that unifies etiology, pathogenesis, and symptomatology, while providing a dual-targeted therapeutic strategy.

Conclusion: Nidan Panchak provides a precise and holistic diagnostic system for Apasmar Vyadhi, emphasizing stage-wise identification and individualized management. Future interdisciplinary research could strengthen its applicability in modern clinical practice and enhance understanding of Mental Health diseases.

Keywords: *Apasmar; Nidan Panchak; Manovaha srotas*

Mind-Body Integration for Stress Relief

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Abstract

Stress is a growing health challenge in the present era, affecting both mental and physical well-being and contributing to the development of lifestyle and psychosomatic disorders. Ayurveda, the ancient science of life, emphasizes the inseparable relationship between Sharira (body) and Manas (mind), making mind-body integration a fundamental concept rather than a modern innovation. According to Ayurvedic principles, imbalance of Doshas, particularly Vata, along with disturbance of Manasika Bhavas such as Chinta, Bhaya, and Shoka, plays a central role in the manifestation of stress-related conditions.

Mind-body integration in Ayurveda aims at restoring harmony between Sharira, Manas, and Atma through a holistic approach. Practices such as Dinacharya, Ritucharya, Sadvritta, Achara Rasayana, Yoga, Pranayama, and Dhyana are key components in stress management. These measures help stabilize Prana Vayu, balance Rajas and Tamas guna, and enhance Satva, thereby improving mental clarity and emotional stability. Ayurvedic therapies like Abhyanga, Shirodhara, Nasya, and Basti further support mind-body balance by calming the nervous system and nourishing the tissues.

From a physiological perspective, Ayurvedic interventions promote equilibrium of Agni, proper functioning of Srotas, and optimal neuroendocrine regulation, which collectively reduce the harmful effects of chronic stress. Mind-body practices also strengthen Ojas, the essence of vitality and immunity, enhancing the individual's capacity to cope with stressors. Unlike symptomatic management, Ayurveda focuses on prevention, self-regulation, and long-term well-being. In conclusion, the Ayurvedic concept of mind-body integration provides a comprehensive and sustainable approach to stress relief. By addressing stress at mental, physical, and behavioral levels, Ayurveda offers an effective framework for promoting holistic health, resilience, and quality of life in the modern world.

Keywords: *Mind-body integration; Stress relief; Ayurveda; Manas-Sharira concept; Dosha imbalance; Satvavajaya Chikitsa; Yoga and Pranayama; Ojas; Holistic health*

Ayurvedic Psychology and Lifestyle Management

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Abstract

Ayurvedic psychology presents a comprehensive framework for understanding mental health by emphasizing the dynamic interrelationship between body, mind, senses, and consciousness. Classical Ayurvedic literature conceptualizes psychological functioning through *Manas*, *Dosha*, *Triguna* (*Sattva*, *Rajas*, and *Tamas*), and the influence of lifestyle and ethical conduct. Mental disturbances arise due to *Pragyaaparadha* (intellectual blasphemy), improper dietary habits, irregular daily routines, suppression of natural urges, and chronic stress, leading to imbalance of mental and somatic components. Lifestyle management strategies such as *Dinacharya*, *Ritucharya*, *Achar Rasayana*, *Yoga*, meditation, and individualized dietary regulation form the cornerstone of preventive and therapeutic mental healthcare in Ayurveda.

From the perspective of modern psychology, concepts such as personality traits, cognitive regulation, emotional balance, stress response, and behavioral conditioning show significant conceptual parallels with Ayurvedic principles. The *Triguna* theory closely correlates with contemporary personality models and affective states, while Ayurvedic emphasis on routine, mindfulness, and ethical living aligns with behavioral therapy, stress management, and positive psychology. Integrating Ayurvedic lifestyle interventions with modern psychological approaches offers a holistic, preventive, and promotive model for mental health care. This integrative perspective highlights the relevance of Ayurvedic psychology in addressing psychosomatic disorders and stress-related mental illnesses in the modern era.

Keywords :- *Ayurvedic psychology; Triguna theory; Lifestyle management; Manas; Stress management; Achar Rasayana; Modern psychology correlation; Mental health promotion.*

Clinical Evaluation of Dugdha Dhara in Alcohol Withdrawal Syndrome: An Ayurvedic–Neuropsychiatric Correlative Case Study

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Abstract

Background: Alcohol Withdrawal Syndrome (AWS) manifests after abrupt cessation of chronic alcohol intake and is characterized by tremors, anxiety, agitation, aggression, speech impairment, sweating, nausea, perceptual disturbances, and autonomic instability. The Clinical Institute Withdrawal Assessment for Alcohol–Revised (CIWA-Ar) scale is a validated tool used to quantify withdrawal severity across 10 domains, with a maximum score of 67. In Ayurveda, AWS can be correlated with *Madatyaya*, involving derangement of mental and systemic regulatory mechanisms affecting *Manovaha Srotas*. *Dugdha Dhara* is traditionally indicated in conditions of mental agitation, insomnia, and neuropsychological imbalance.

Objective: To evaluate the effect of Dugdha Dhara along with Bhūnimbādi Kaṣāya and Tab. Zzowin on CIWA-Ar parameters in a patient with Alcohol Withdrawal Syndrome, with special emphasis on aggression, tremor, anxiety, and speech disturbance.

Methods: A 35-year-old male with alcohol dependence presented with moderate withdrawal symptoms. Baseline CIWA-Ar assessment showed a total score of 26, indicating moderate withdrawal severity. Individual domain scores included tremor (5), anxiety (5), agitation (4), paroxysmal sweats (3), nausea/vomiting (3), headache (2), tactile disturbances (1), auditory disturbances (1), visual disturbances (1), and orientation (1).

The patient underwent Dugdha Dhara siddha with Gulaba Pushpa for 15 consecutive days. The medicated Dugdha was processed with fresh Gulaba Pushpa and administered as continuous Shirodhara under controlled temperature. The procedure was followed by Netra Patta Bandhana (eye bandaging) using fresh Gulaba Pushpa to enhance śītala, Mano-prasādana, and sensory calming effects. Internally, Bhūnimbādi Kaṣāya and Tab. Zzowin were administered in divided doses along with dietary regulation. Reassessment was performed on Day 15 using the CIWA-Ar scale.

Results: Post-treatment CIWA-Ar score reduced to 8 (mild withdrawal). Significant improvement was observed in tremor (5→1), anxiety (5→1), agitation/aggression (4→1), and sweating (3→0). Perceptual disturbances resolved completely, orientation normalized, and speech clarity improved clinically with better focus and reduced irritability. Sleep duration improved from 3–4 fragmented hours to 6–7 sustained hours per night. Autonomic parameters stabilized without adverse effects.

Conclusion: Fifteen days of Dugdha Dhara siddha with Gulaba Pushpa, followed by Netra Patta Bandhana (eye bandaging) with Gulaba Pushpa, in combination with internal medications, demonstrated substantial reduction in CIWA-Ar scores, indicating effective mitigation of Alcohol Withdrawal symptoms. The intervention appears to provide Śamana, Mano-prasadana and autonomic stabilization, suggesting its potential as an integrative therapeutic approach in AWS management. Larger controlled clinical studies are warranted.

Nidan Panchak of Amlapitta Vyadhi: A Literature Review

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Abstract

Introduction: Amlapitta is one of the most commonly encountered Annavaha Strotas disorder in Ayurvedic practices. It is a Pitta-pradhanya vyadhi characterized by Amla and Drava guna vrudhi of Pitta leading to disturbances in digestion and metabolism. Amlapitta also known as hyperacidity or dyspepsia is a health condition not mentioned in Brihatrayi but was first mentioned in Kashyapa Samhita. Other texts like Madhava Nidana, Bhavaprakasha and Yoga Ratnakara have also provided description of Amlapitta. The Nidan Panchak is cornerstone of Ayurvedic diagnosis and provide a comprehensive understanding of etiology, pathogenesis, and clinical feature of Amlapitta. The Ayurvedic diagnostic framework of Nidan Panchak comprises of Hetu (etiology), Purvarupa (premonitory symptoms), Rupa (clinical features), Samprapti (pathogenesis), and Upshaya/Anupshaya (therapeutic tests). This review aims to evaluate the classical description of Amlapitta through the lens of Nidan Panchak and highlight its diagnostic and therapeutic relevance.

Methods: A systematic literature review was conducted by using Ayurvedic texts including Kasyapa Samhita, Charak Samhita, and Madhava Nidana, Astanga Hridaya, relevant commentaries and contemporary scholarly publications. Data related to Nidan Panchak of Amlapitta was collected, compared, and interpreted according to Nidan Panchak

elements.

Results: The review found that Amlapitta is caused primarily by Aharaj, Viharaj, Manasik and Kalaja factors leading to Pitta prakopa and Mandagni. Purvarupa such as Utklesa, Avipaka and Rupa including Amlodgara, Hrdhkantha Daha, Utklesa and Chardi play a crucial role in early diagnosis of the disease. Samprapti analysis shows the involvement of Annavaha Strotas with the Dosha-Dushya Sammurchana. Upashaya and Anupshyaya were found to be useful diagnostic tool.

Discussion: The structured understanding of Nidan Panchak provides a clarity in differentiating the Amlapitta Vyadhi from other Annavaha Strotas Vyadhi and helps in recognizing stages of Amlapitta. The review emphasizes the relevance of classical diagnostic principles in current clinical practice and highlights the importance of Nidan Panchak in formulating effective preventive and therapeutic approaches.

Conclusion: Nidan Panchak provides a precise and holistic diagnostic system for Amlapitta, emphasizing stage-wise identification and individualized management. Thorough knowledge of its component provides early diagnosis, accurate assessment of Samprapti and appropriate management planning.

Keywords: *Amlapitta; Nidan Panchak; Annavaha Strotas; Ayurveda; Hyperacidity.*

Exploring Rasa Dhatu as a Link between Mind and Body in Psychosomatic Disorders

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Abstract

Introduction: Psychological stress has become an unavoidable part of modern life and affects people of all ages, often showing its impact through physical complaints such as menstrual disturbances, sleep problems, cardiovascular issues, metabolic disorders, and skin conditions. Both modern medicine and Ayurveda recognize that the mind and body do not function independently, and that mental stress can play a key role in the development of disease. Contemporary science explains these mind–body interactions through neuroendocrine and autonomic pathways, while Ayurveda views health as a balance between Manas (mind), Sharira (body), and their supporting systems. Classical Ayurvedic texts repeatedly highlight the influence of mental factors in disease causation, yet their practical application in explaining stress-related physical disorders stays under-explored. In a time when stress is widespread and many conditions lack clear conventional causes, revisiting Ayurvedic concepts that explain how psychological stress manifests as bodily illness becomes especially relevant.

Objectives: To explore Rasa dhatu as a potential bridge between mind and body in psychosomatic disorders, and to examine its role in mediating stress-induced physiological disturbances.

Knowledge Gap: In contemporary medicine, psychosomatic disorders are explained primarily through neuroendocrine mechanisms such as dysregulation of the hypothalamic–pituitary–adrenal (HPA) axis, setting up a link between psychological stress and physical disease.

Ayurveda similarly recognizes the inseparable relationship between Manas (mind) and Sharira (body). But further exploration of what exactly causes the somatic effects of psychological factors is yet to be done. A clearly defined Ayurvedic framework explaining how psychological stress causes diverse somatic manifestations is needed.

Outcome:

1. A defined Ayurvedic theoretical framework analogous to modern stress physiology.
2. A clear, evidence-based explanation of psychosomatic diseases in Ayurveda.
3. A directed approach to evaluate various conditions like PCOD, cardiovascular diseases etc. which present without conventional risk factors or causes.

Conclusion: This narrative conceptual review proposes Rasa Dhatu as a functional link between Manas and Sharira in psychosomatic disorders, offering an Ayurvedic theoretical framework analogous to modern stress physiology. Understanding stress-induced disease through a Rasa-centric approach may enhance early diagnosis, improve clinical reasoning, and support more integrative and preventive strategies in Ayurvedic practice

Keywords: *stress; rasa dhatu; psychosomatic disorders*

Satvavajaya Chikitsa: An Ayurvedic Psychotherapeutic Approach for Mind–Body Integration

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Abstract

Introduction: Satvavajaya Chikitsa is one of the three principal therapeutic modalities described in Ayurveda, specifically aimed at the management of Manasika and psychosomatic disorders. It focuses on the regulation of mind by restraining unwholesome mental objects and strengthening Satva through methods such as Jñāna (knowledge), Vijñāna (analytical understanding), Dhairya (mental restraint), Smṛti (recollection), and Samādhi (mental stability). Despite its detailed classical description, Satvavajaya Chikitsa remains underexplored in contemporary clinical practice and research, particularly in comparison to modern psychotherapeutic models.

Objectives : To evaluate Satvavajaya Chikitsa as a structured Ayurvedic psychotherapeutic approach for promoting mental regulation and holistic mind–body well-being.

Knowledge Gap: Although Satvavajaya Chikitsa is extensively mentioned in classical Ayurvedic texts, there is a lack of systematic interpretation, standardized clinical protocols, and evidence-based studies correlating it with modern psychotherapy. The absence of structured documentation and outcome-based research has limited its acceptance and utilization in present-day mental healthcare systems.

Outcome : The study is expected to provide a conceptual framework for Satvavajaya Chikitsa as a holistic psychotherapeutic approach. It may help in identifying its parallels with modern cognitive and behavioral therapies while emphasizing its unique mind–body–consciousness integration. The findings could support the development of structured treatment modules for mental and psychosomatic disorders

Conclusion : Satvavajaya Chikitsa represents a profound Ayurvedic approach to mental health that emphasizes self-regulation, cognitive refinement, and emotional balance. Re-establishing its principles through systematic research and clinical application may contribute significantly to integrative psychotherapy and promote sustainable mental well-being.

Keywords: *Satvavajaya Chikitsa; Ayurvedic psychotherapy; psychosomatic disorders*

Panchakarma for Stress, Anxiety and Depression

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Abstract

Stress, anxiety, and depression have become pervasive psychosomatic challenges in contemporary life, often leading to behavioral, emotional, and physiological disturbances. In Ayurveda, these conditions are viewed as manifestations of Tridoshic imbalance, predominantly of Vata, along with disturbances in the Manasika doshas—Rajas and Tamas. Panchakarma, the classical Ayurvedic system of detoxification and rejuvenation, offers a holistic approach to managing these disorders by purifying the body, calming the mind, and restoring systemic harmony. Procedures such as Shirodhara, Abhyanga, Nasya, Virechana, and Basti have been shown to regulate the hypothalamic-pituitary-adrenal (HPA) axis, balance neurotransmitters, modulate the gut-brain axis, and normalize autonomic nervous activity. Clinical and conceptual evidence suggests that Shirodhara reduces cortisol levels and induces deep relaxation, while Basti therapy influences gut microbiota and mood regulation. Abhyanga and Nasya promote parasympathetic activation, improving sleep, concentration, and emotional stability, and Virechana aids in reducing systemic inflammation and mental agitation. Through these mechanisms, Panchakarma addresses both the somatic and psychological roots of mental distress, enhancing emotional regulation and overall well-being. Thus, Panchakarma serves as an integrative mind-body therapy for stress, anxiety, and depression, bridging ancient Ayurvedic wisdom with modern neuropsychological understanding, and offering a sustainable, individualized approach to mental health care.

Keywords: *Panchakarma; Ayurveda; Stress; Anxiety; Depression; Shirodhara; Abhyanga; Basti; Mind-Body Medicine; Neuroendocrine Regulation; Gut-Brain Axis*

A Conceptual Review of the Therapeutic Significance of Ghritha in the Management of Generalized Anxiety Disorder

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Abstract

Ayurveda emphasizes both preventive and curative approaches to maintain health and manage disease through holistic principles. Among its preventive measures, the regular use of Nitya Rasayana substances is emphasized. Of these, Ghritha (ghee) is considered superior under Chaturvidha Sneha, particularly Go Ghritha (cow ghee). Charaka Samhita describes Ghritha as a Rasayana with rejuvenative and cognitive-enhancing properties. Classical Ayurvedic texts also recommend its use in disorders of the Manovaha Srotas. These include conditions such as Unmada, Apasmara and many other. This underscores its importance in promoting and maintaining mental health. Generalized Anxiety Disorder (GAD), characterized by persistent, excessive, and unrealistic worry about everyday things. Upto 20% of adults are affected by anxiety disorders each year. The general prevalence in children under 18 years is between 5.7% to 12.8%. This condition is not directly described in Ayurvedic literature. However, it can be understood through the

framework of Trividha Bodhya Sangraha. It includes, Vyadhi Prakruthi (nature of the disease), Vyadhi Adhishtana (site), and Vyadhi Samutthana (Etiology and Pathogenesis). However, the condition can be broadly considered under diseases of Manovaha Srotas and by considering the close interrelationship between Shareera (body) and Manas (mind), disturbances in mental health can influence physical well-being. Hence by analysing the underlying pathophysiological factors involved in anxiety through Trividha Bodhya Sangraha, the relevant Ayurvedic treatment principles have to be adopted for its management. In which the administration of a single drug- Ghritha either processed or unprocessed, appears conceptually relevant due to its nourishing, stabilizing, and Rasayana properties. Thus, the present study explores the supportive therapeutic role of Ghritha in the management of GAD within an Ayurvedic framework.

Keywords: *Ghritha; Generalised anxiety disorder; Trividha Bodhya Sangraha; Rasayana*

Management of Digital Addiction Through Padamshika Krama: A Conceptual Study

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Abstract

Digital addiction is an emerging lifestyle-related behavioral disorder characterized by excessive and compulsive engagement with digital devices, resulting in psychological disturbance, physical discomfort, and social dysfunction. Although not described directly in classical Ayurvedic literature, its etiopathogenesis can be understood through the concepts of *Prajñāparādha* (intellectual blasphemy) and *Asātmendriyārtha Samyoga* (improper contact of senses with their objects), leading to vitiation of *Vāta–Pitta Doṣa*, aggravation of *Rajo–Tamo Guṇa*, *Agni dūṣṭi*, and accumulation of *Mānasika Āma*. Repeated and prolonged digital exposure results in *Okasātmya* (adaptation through habituation), thereby creating dependency and making abrupt cessation difficult, often precipitating withdrawal-like manifestations.

Padamshika krama is a sequential regimen to adopt wholesome practices and withdraw unwholesome practices. It functions as a structured and rational withdrawal strategy, conceptually comparable to tapering therapy in modern addiction management. Application of *Padamshika Krama*, through gradual reduction of digital exposure, facilitates mental and physiological adaptation, stabilizes imbalance of doshas, reduces withdrawal symptoms, and improves adherence to de-addiction measures. When applied as a *Vihāra*-based intervention and integrated with principles like *Dinacaryā*, *Sadvṛtta*, *Yoga*, *Prāṇāyāma*, and *Satvavajaya Cikitsā*, it enhances *Sattva Guṇa*, improves self-regulation, and supports sustainable behavioral change.

Thus, *Padamshika Krama* offers a holistic, preventive, and effective Ayurvedic approach for digital de-addiction and relapse prevention.

Keywords: *Digital addiction; Padamshika Krama; Prajñāparādha; Okasātmya; Withdrawal.*

Mental Wellbeing Through Yoga: The Preventive Role of Niyama in Mental Disorders

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Abstract

Introduction: Mental health is a fundamental component of overall well-being, enabling individuals to cope with life stresses, realize their abilities, and contribute productively to society. According to the World Health Organisation, nearly one in eight people globally suffers from mental disorders, emphasizing the urgent need for effective preventive strategies. Contemporary risk factors such as poverty, inequality, violence, and physical disability further aggravate mental health challenges. Yoga, particularly Ashtanga Yoga described by Patanjali, offers a holistic preventive approach, wherein Niyama—the personal observances—forms the foundational step toward mental discipline and wellbeing.

Objective: The present work aims to explore the preventive role of Niyama in promoting mental well-being, to understand the effects of practicing all five components of Niyama on mental health, and to compare these concepts with Sadvritta and Achara Rasayana as described in classical Ayurvedic literature.

Methodology: A comprehensive literary review was conducted. Classical texts, including the Patanjali Yoga Sutras, Ayurvedic treatises describing Sadvritta and Achara Rasayana, and contemporary medical textbooks, scientific journals, and relevant online resources were critically reviewed to collect and analyse data on mental health and preventive yoga practices.

Discussion: Niyama—comprising Shaucha, Santosha, Tapas, Svadhyaya, and Ishvara Pranidhana—acts as a code of self-discipline that refines mental faculties. Shaucha enhances clarity, reduces anxiety, and promotes cognitive order. Santosha cultivates contentment, reducing stress, anxiety, and psychosomatic disorders. Tapas strengthens self-control and resilience, preventing addictions and impulse-related disorders. Svadhyaya encourages self-reflection, aiding emotional regulation and preventing substance abuse. Ishvara Pranidhana nurtures spiritual well-being, alleviating stress, post-traumatic symptoms, and cognitive decline. These principles closely parallel Ayurvedic Sadvritta, reinforcing their preventive mental health role.

Conclusion: Niyama, though often underappreciated, plays a crucial preventive role in mental disorders. Regular practice fosters mental stability, emotional resilience, and spiritual balance, thereby promoting optimal mental well-being and preventing psychosomatic and psychiatric disorders.

Satvavajaya Chikitsa as a Mind–Body Intervention: Evidence from a Single Case Study

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Abstract

Background: Satvavajaya Chikitsa, described in classical Ayurvedic texts, emphasizes regulation of mind through cognitive restraint, emotional regulation, and ethical conduct. Its relevance to modern psychological disorders such as anxiety, fear, and stress remains under-explored using contemporary research methods.

Objective: To evaluate the effect of Satvavajaya Chikitsa on psychological symptoms and mental wellbeing in a single clinical case.

Methods: A single-case observational study was conducted on a patient presenting with anxiety-related symptoms. Intervention included structured Satvavajaya Chikitsa techniques such as Jnana, Vijnana, Dhairya, Smriti, and Samadhi practices over a defined period. Psychological assessment tools (e.g., anxiety scale) and Ayurvedic parameters (Manasika Bhavas, Satva Bala) were assessed pre- and post-intervention.

Results: Post-intervention assessment showed marked improvement in anxiety scores, emotional stability, sleep quality, and adaptive coping responses. Ayurvedic parameters indicated enhancement of Satva Guna and reduction of Rajas–Tamas dominance.

Conclusion: Satvavajaya Chikitsa demonstrated promising effects in improving psychological wellbeing in this case. This study supports its potential as a non-pharmacological psychotherapeutic approach and encourages further controlled studies.

Keywords: *Satvavajaya Chikitsa; Anxiety; Single Case Study; Ayurveda Psychology; Mental Health*

Digital Well-Being AI & Emerging Technologies

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Abstract

Background : The rapid expansion of digital technologies, artificial intelligence (AI), and connected platforms has transformed modern lifestyles and healthcare delivery, bringing both opportunities and challenges for mental well-being. Digital well-being refers to the balanced and healthy use of technology that supports psychological, emotional, and social health while minimizing digital overload and technology-related stress. However, excessive digital engagement, social media dependence, cyberbullying, and information overload can negatively impact mental health, contributing to anxiety, social comparison, reduced attention span, and emotional distress.

Objective : Emerging technologies such as AI-driven mental health applications, wearable devices, virtual reality therapy, and Internet of Things (IoT)–enabled monitoring systems are increasingly integrated into mental healthcare to support early detection, personalized intervention, and remote psychological support.

Methodology : Wearables and mobile health applications facilitate continuous monitoring of sleep, activity, and heart rate variability, offering proactive alerts and self-management strategies. Virtual reality therapies and digital counseling platforms further expand access to therapeutic services, especially in remote or underserved regions.

Purpose / Intervention : AI-powered tools now enable real-time analysis of behavioral patterns, physiological signals, and digital interactions to predict stress, anxiety, depression, and burnout risks.

Results / Expected Results : By promoting digital well-being and responsible technology use, ethical AI implementation, privacy protection, and digital literacy education alongside technological innovation, integrating human-centered design with mental health awareness can be obtained.

Understanding Manasika Roga through Ayurveda: A Review of Classical and Modern Perspectives

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Abstract

Ayurveda, The Traditional Indian Medical System, Perceives Mental Health As A Reflection Of Equilibrium Between Body, Mind, And Soul. The Ancient Seers Elaborated the Concept of Manasika Roga (Mental Disorders) Through an Understanding of Gunas (Qualities of the Mind), Doshas (Bio-Energetic Principles), and Atma (Consciousness). This Review Explores The Classical Foundations Of Manasika Roga Alongside Modern Psychiatric Concepts, Focusing On Their Pathogenesis, Diagnosis, And Management. Ayurvedic Approaches Such As Satvavajaya Chikitsa, Daivavyapashraya, Yuktivyapashraya, And Aachara Rasayana Aim To Restore Mental Balance Through Holistic Lifestyle Practices, Herbal Interventions, And Ethical Conduct. Modern Research Supports Several Ayurvedic Psychotropic Herbs—Such As Brahmi (Bacopa Monnieri), Ashwagandha (Withania Somnifera), And Mandukaparni (Centella Asiatica)—For Their Anxiolytic, Antidepressant, And Neuroprotective Effects. The Integration of Ayurveda with Contemporary Psychiatry Offers Promising Insights into Preventive, Promotive, And Therapeutic Mental Healthcare.

Manas Vikara : Exploring Mental Health in the Modern Era with *Ayurveda*

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Abstract

Background: A growing global health concern, mental health disorders significantly affect quality of life and productivity. Contemporary psychiatry mainly focuses on symptom-based classification and management. However, *Ayurveda* provides a holistic understanding of mental health through the concept of *Manas* and its disorders, collectively described as *Manas Vikara*. *Ayurveda* also highlights the importance of maintaining a healthy mind for normal physiological functions in the body. These disorders arise due to the imbalance of *rajas* and *tamas gunas* often in association with *sharirika doshas* leading to psychological, behavioral and somatic levels.

Objective: To explore the concept of *Manas Vikara* in *Ayurveda* and correlate with contemporary health perspectives, highlighting its relevance in the modern era.

Result: *Manasa Vikara* is primarily caused by *prajnaparadha*, *asatmyendriyarthasamyoga*, and *kala*, leading to vitiation of *Rajas* and *Tamas*. Disorders such as *Unmada*, *Apasmara*, *Cittodvega*, *Viśada*, and *Bhaya* exhibit close resemblance to conditions like psychosis, epilepsy, anxiety, depression, and phobic disorders. *Ayurveda* emphasizes individualized management through *Satvavajaya Chikitsa*, *Daivavyapasraya Chikitsa*, *Yuktivyapasraya Chikitsa*, along with *Achara Rasayana* and lifestyle modifications.

Conclusion: The *Ayurvedic* concept offers a comprehensive, preventive and an integrative framework for understanding mental health. *Ayurveda* can provide sustainable solutions for modern mental health challenges and may enhance holistic mental healthcare.

Role of Trayopastambha in Mental Health

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Abstract

Mental health enables a person to cope with life's stresses, realize personal potential, work productivity, and contribute meaningfully to society. This paper highlights the importance of preventive approaches in maintaining mental health. *Ayurveda* describes *ahara*, *nidra* and *brahmacharya* as the *Trayopastambha* – the three pillars of life responsible for maintaining *Swasthya*. These pillars play a crucial role in the prevention of mental disorders. The concept that “purity of mind arises from purity of food” underscores the significances of *Ahara* in mental well-being. Dietary practices guided by *Dinacharya*, *Rtucharya* and *Sadvritta* support mental stability and clarity. *Nidra* is another vital element for both physical and mental health. In present scenario, sleep disorders are increasingly prevalent. *Ayurveda* recognizes sleep as an *Adharaneeya Vega* and provides detailed guidelines through *Dinacharya* and *Sadvritta* which promote mental relaxation. *Brahmacharya* contributes significantly to mental health by promoting discipline and balance. It is achieved through *Sharirika Shuddhi* and *manasika Shuddhi* thereby supporting psychological stability and emotional well-being. Thus adherence to the principles of *Trayopastambha* along with *Dinacharya*, *Rtucharya* and *Sadvritta* plays

a vital role in the prevention of mental illness and the attainment of positive mental health. The WHO emphasizes mental health as an integral component of overall well-being.

Keywords: *Trayopastambha; Mental health; Brahmacharya; Dinacharya; Ritucharya; Sadvritta*

Preventive and Therapeutic Dimensions of Mental Health in Ayurveda: A Psychological and Lifestyle Perspective

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Abstract

Mental illnesses are an important part of the worldwide healthcare issue, which stresses on the necessity of holistic, preventive, and patient-oriented healthcare models. The ancient Indian system of medicine called Ayurveda gives a holistic approach to the concept of mental health by establishing the inseparable connection between the body and mind and consciousness. Classical Ayurvedic literature defines mental health as moderation of Tridosha, or Manasika Gunas (Sattva, Rajas, and Tamas), Agni and Dhatus, and psychological makeup and susceptibility to mental illnesses are defined by individual Prakriti.

This paper discusses the principles of Ayurvedic psychology and how interventions that are based on lifestyles can be used to prevent and manage mental health disorders. The classical sources of Charaka Samhita, Sushruta Samhita and Ashtanga Hridaya are critically examined in conjunction with the modern scientific research on Ayurvedic therapy and mind body medicine. Pragyaparadha (intellectual error), Vishada (grief) and repression of natural urges along with the imbalance of Manasika Doshas are examined with reference to contemporary psychosomatic and stress disorders.

The Ayurvedic treatment is based on a multidimensional approach, which is the Satvavajaya Chikitsa, (psychotherapy), Yuktivyapashraya Chikitsa, (rational therapeutics), and Daivavyapashraya Chikitsa in line with Aachara Rasayana, Sadvrita, Dinacharya, Ritucharya, Yoga and Medhya Rasayana. The neuroprotective, anxiolytic, antidepressant, and cognitive-enhancing capabilities of such herbs as Brahmi, Ashwagandha, and Shankhapushpi are confirmed by recent research, which adds to their suitability in integrative mental care.

The paper identifies Ayurveda as scientifically applicable and culturally adaptable system with personalized, preventive, and lifestyle oriented approaches to mental health promotion. The combination of Ayurvedic psychology and modern mental health can help in the creation of sustainable and holistic remedies to mental health in the world.

Keywords: *Ayurveda; Mental Health; Ayurveda Psychology; Manas Roga; Integrative Mental Health*

Guided Imagery for Emotional Resilience in Adjustment Disorder: A Harshana Chikitsa Approach

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Abstract

Background: Adjustment disorder is a transient state of emotional and behavioral disturbance arising during adaptation to significant life stressors, major life changes, or serious illness. Guided imagery is a therapeutic technique that utilizes imagination, emotions, and multisensory visualization to influence psychological and physiological responses, facilitating communication between unconscious and conscious processes. In Ayurveda, Harshana is defined as utseka (upliftment/excitation) and prahladana (induction of happiness), which is described under Pravidwaja Chikitsa as a therapeutic approach for conditions dominated by shoka (grief or distress).

Objective: To conceptually explore guided imagery as a modern psychological correlate of Harshana Chikitsa and its potential role in improving emotional resilience in individuals with adjustment disorder.

Methods: Classical Ayurvedic references describing Harshana therapy were reviewed and conceptually correlated with contemporary psychological literature on guided imagery techniques that emphasize visualization of positive emotional experiences and sensory-based imagination.

Results: Guided imagery techniques that promote visualization of pleasant, reassuring, and empowering experiences may function analogously to Harshana, facilitating emotional upliftment, reduction of stress perception, and improved adaptive coping responses in stressor-related conditions such as adjustment disorder.

Conclusion: Guided imagery can be viewed as a contemporary therapeutic expression of Harshana Chikitsa, offering a culturally integrative and psychologically supportive modality for enhancing emotional adjustment in stress-related disorders. Further clinical studies are required to evaluate its therapeutic efficacy.

Satvavajaya in PTSD: A Structured Counselling Protocol

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Abstract

Introduction: Post-Traumatic Stress Disorder (PTSD) manifests with intrusive memories, avoidance, hyperarousal and persistent threat perception due to maladaptive processing of trauma memory. Ayurveda describes similar disturbances under Manas vikara i.e. Madonmada, involving impaired cognition (mithya-jnana), memory disturbance (smriti vibhrama) and fear response. Satvavajaya chikitsa, the Ayurvedic psychotherapy aimed at regulation of thought, behaviour and emotional control, may provide a structured therapeutic model comparable to trauma-focused counselling. This work presents a standardized Satvavajaya-based counselling protocol for PTSD.

Methodology: An intervention module with 9 sessions was designed by mapping Satvavajaya components—Chintya, Vicharya, Uhya, Dhyeya and Sankalpa—onto cognitive-behavioural mechanisms of trauma therapy. Counselling stages (Jnana, Vijnana, Dhairya, Smriti, Samadhi) were integrated with grounding, guided trauma narration, memory updating, cognitive restructuring, trigger discrimination, behavioural activation and relapse-prevention techniques. Sessions sequentially addressed stabilization, trauma processing, appraisal correction, attention regulation and belief restructuring, targeting intrusive recollections, avoidance behaviour and hypervigilance.

Results: The protocol demonstrated conceptual correspondence between Satvavajaya mechanisms and trauma psychotherapy processes. Memory integration (Smriti sanghatana) reduces perceived current threat, cognitive correction (Vicharya) modifies distorted appraisal, and behavioural engagement (Sankalpa) restores adaptive functioning. The model predicts reduction in flashbacks, improved emotional regulation and strengthening of psychological resilience (sattva bala).

Conclusion: Organizing Satvavajaya into a reproducible counselling format offers a clinically applicable integrative framework for PTSD management. The protocol bridges traditional Ayurvedic psychotherapy with modern trauma counselling and warrants clinical validation.

Keywords: *Satvavajaya Chikitsa; Post Traumatic Stress Disorder (PTSD); Counselling Protocol; Integrative Psychotherapy; Trauma-Focused Therapy.*

Psychological Safety at Work: Role of Sattvavajaya in Emotional Regulation

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Abstract

Background: Psychological safety at work, the belief that one can express ideas without fear of negative consequences, relies on effective emotion regulation to raise trust and openness which influence inter personal functioning. ICD 11 Captures this in stress related anxiety, adjustment disorder and burnout (QD85) linked to poor emotion regulation and maladaptive stress. While CBT and organizational strategies strengthen cognitive restructuring and external psychological safety. Yet gap persist in deep emotional regulation and impulse control, leaving psychological safety internally fragile. Sattvavajaya Chikitsa cultivates sattva through impulse restraint, cognitive insight which helps in internal psychological safety.

Methods: This study undertakes a classical textual review of the Charaka Samhita and Sushruta Samhita, focusing on Sattvavajaya and critically correlates these findings with contemporary psychiatric literature and PubMed-indexed research to develop an integrative perspective.

Results: Sattvavajaya helps in reducing mental impairment and Negative emotions and boosts resilience which helps in aligns with CBT/mindfulness, improving coping and autonomic balance by reducing anxiety/irritability and promoting equanimity.

Discussion: Sattvavajaya reinforces psychological safety by restraining unwholesome thoughts, instilling courage and balancing manasika doshas, preventing prajnaparadha. Integrating into wellness programs for overall well-being validating the cultures of different individuals which are apt for diverse workplaces.

Redefining Corporate Mental Health: An Integrative Ayurvedic Model for Burnout Prevention and Cognitive Resilience

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Abstract

The rising incidence of workplace stress and burnout signals a critical imbalance between modern occupational demands and individual psychophysiological capacity. While corporate wellness programs are increasingly implemented, most remain reactive and symptom-oriented, lacking preventive and constitution-based frameworks. This paper proposes a structured and integrative **Ayurvedic Corporate Mental Health Framework** aimed at transforming burnout into sustainable productivity through personalized regulatory strategies.

The proposed model is anchored in three foundational Ayurvedic pillars—**Dinacharya, Sadvritta, and Rutucharya**—integrated with Prakriti-based occupational alignment. *Dinacharya* introduces daily autonomic-regulating practices such as Abhyanga, Nasya, sensory discipline, and sleep regulation to counter digital fatigue and cognitive overload. *Sadvritta* functions as a behavioral-ethical governance model that strengthens emotional intelligence, leadership discipline, and interpersonal harmony within organizations. *Rutucharya* incorporates seasonal adaptation in dietary and lifestyle regulation to maintain doshic balance and psychometabolic resilience across work cycles. Complementing these pillars, Prakriti-based role alignment is proposed as a preventive organizational strategy to reduce burnout susceptibility and enhance task compatibility.

Importantly, the framework allows scope for future integration of **Medhya Rasayana** as neurocognitive and stress-modulating agents within corporate mental health protocols, expanding its application toward evidence-based cognitive resilience enhancement.

By bridging classical Ayurvedic principles with contemporary management science, this model presents a scalable, preventive, and policy-relevant paradigm for workplace mental health. The study contributes an interdisciplinary systems-based approach capable of redefining corporate wellness beyond stress management toward constitutional balance and sustained productivity.

Keywords: *Corporate Mental Health; Burnout Prevention; Ayurvedic Workplace Model; Prakriti-Based Management; Medhya Rasayana; Integrative Productivity Framework*

Effect of Shirodhara on Mental Health Disorders: A Review of Classical and Contemporary Evidence

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Abstract

Background: Anxiety, depression, insomnia, and stress-related psychosomatic disorders are major global health concerns. In Ayurveda, these conditions are classified as Manovikara, Nidranasha, and Vishada. Shirodhara, a traditional Panchakarma therapy involving the continuous pouring of medicated liquids over the forehead, is historically used to support mental and nervous system health.

Objective: To review classical Ayurvedic concepts and contemporary scientific evidence regarding Shirodhara's role in managing mental health disorders.

Methods: A narrative review was conducted using classical Ayurvedic texts, authoritative commentaries, and modern studies examining neurophysiological, neuroendocrine, and psychoneuroimmunological mechanisms of Shirodhara.

Results: Classical sources describe Shirodhara as acting through stimulation of Sthapani Marma, balancing Vata and Pitta doshas, regulating Manovaha Srotas, and enhancing Sattva. Modern research suggests that the rhythmic tactile and thermal stimulation of the forehead engages trigeminal pathways, influences hypothalamic activity, and suppresses Hypothalamic–Pituitary–Adrenal (HPA) axis overactivation, thereby reducing cortisol levels and sympathetic nervous system hyperactivity. Studies further report enhanced alpha wave activity on EEG, improved autonomic regulation, modulation of neurotransmitters such as serotonin and dopamine, and favorable psychoneuroimmunological responses. Clinically, Shirodhara has been associated with improvements in anxiety, depression, insomnia, and stress-related psychosomatic disorders.

Conclusion: Shirodhara may exert multidimensional effects by modulating neuroendocrine function, stabilizing autonomic activity, and supporting psychophysiological balance. It represents a promising non-pharmacological and integrative intervention for mental health management. Nevertheless, rigorously designed randomized controlled trials employing standardized protocols and objective biomarkers are necessary to confirm its clinical efficacy.

Keywords: *Shirodhara; Mental Health Disorders; Anxiety; Depression; HPA Axis; Neuroendocrine Modulation; Panchakarma*

Manasopachara: An Integral Measure in Shodhana Chikitsa

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Abstract

Introduction: Shodhana chikitsa is one of the most important treatment approaches in Ayurveda, aimed at removing deeply seated aggravated doshas from the body. Along with the sharira, the Manas plays a vital role in deciding the success of the shodhana. Hence, Manasopachara : proper mental care and psychological preparation of the patient, becomes an essential part of shodhana chikitsa. Acharya Charaka explains that Manas and sharira are closely connected and influence each other continuously, and disturbance in Manas can directly affect bodily functions.

Methods: The conceptual understanding of Manasopachara is based on classical references from Acharya Charaka and Acharya Sushruta, which explain the relationship between Manas and sharira, the role of Sattvabala, and the impact of emotions on treatment outcomes. The procedures like Vamana, Virecana, Basti, and Nasya were considered in understanding the need for psychological preparation before shodhana karma.

Results: Procedures like Vamana, Virecana, Basti, and Nasya often create fear, anxiety, hesitation, or lack of confidence in patients. If these mental states are not addressed, the patient may not cooperate properly, tolerate the procedure poorly, or develop complications. Acharya Sushruta mentions that emotions such as fear, grief, and anger can disturb both sharirika and manasika doshas and delay healing. Acharya Charaka further emphasizes the importance of Sattvabala, stating that patients with strong mental strength respond better to treatments. By strengthening Manas, Manasopachara improves treatment acceptance, smooth execution of shodhana, and complete elimination of doshas.

Discussion: Thus, Manasopachara reflects healing that is achieved by caring for both the Manas and the sharira together. By addressing the psychological state of the patient through reassurance, gentle counselling, building trust, and removing fear, Manasopachara supports the successful administration of shodhana chikitsa and enhances overall therapeutic outcomes.

Incidence of Hypertension in Type A Personality Trait: A Modern and Ayurvedic Perspective with Preventive Implications

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Abstract

Background/Objective: Hypertension, commonly known as high blood pressure, is one of the most prevalent cardiovascular disorders globally, contributing significantly to morbidity and mortality. Personality traits have long been studied as psychological determinants of physical health outcomes. Type A personality, characterized by hostility, time urgency, competitiveness, and chronic impatience, has been consistently associated with elevated blood pressure and increased cardiovascular risk. Despite growing evidence linking psychological temperament to hypertension, the integration of traditional systems of medicine such as Ayurveda in understanding this association

remains underexplored. Ayurveda describes personality through the concept of Prakriti — the inherent psychophysiological constitution of an individual — wherein Pitta and Rajasic dominance closely mirrors the traits observed in Type A personality.

This paper aims to explore the incidence of hypertension among individuals with Type A personality traits, understand the underlying pathophysiological and Ayurvedic mechanisms, and propose preventive strategies from both modern and Ayurvedic perspectives.

Methods: A narrative review methodology was adopted for this study. Relevant literature was systematically gathered from electronic databases including PubMed, Google Scholar, and Ayurvedic classical texts such as Charaka Samhita and Ashtanga Hridayam. Studies focusing on Type A personality, hypertension incidence, psychosomatic correlations, and Ayurvedic concepts of Prakriti, Pitta dosha, Manas dosha, and Rakta Dhatu vitiation were included. Data was synthesized to draw parallels between modern psychosomatic findings and Ayurvedic principles, and preventive strategies were identified from both systems.

Results: Review of literature revealed that individuals with Type A personality, particularly those with high hostility scores, showed significantly higher incidence of hypertension compared to Type B personalities. The sympathetic nervous system hyperactivation, elevated cortisol and catecholamine levels, and chronic vascular inflammation were identified as key modern pathophysiological mechanisms. From the Ayurvedic perspective, Type A personality closely corresponds to Pitta-dominant Prakriti with Rajasic Manas Prakriti. Pitta dosha governs heat, metabolism, and transformation — its vitiation leads to Rakta Dhatu dushti (blood tissue vitiation) and Siragata Vata, which correlates with the pathogenesis of hypertension (Rakta Gata Vata). Preventive strategies from modern medicine include stress management, cognitive behavioral therapy, regular aerobic exercise, and dietary modifications. Ayurveda recommends Pitta-pacifying diet, Brahmi, Ashwagandha, Sarpagandha, Shirodhara, Nasya, Pranayama, and Sattvic lifestyle practices as effective preventive and management tools.

Conclusion: Type A personality trait, particularly its hostility component, significantly increases the incidence of hypertension through both psychological and physiological pathways. The Ayurvedic concept of Pitta-dominant Prakriti with Rajasic Manas offers a complementary and holistic understanding of this association. An integrated approach combining modern preventive cardiology with Ayurvedic lifestyle and therapeutic interventions holds great promise in reducing the burden of hypertension among Type A individuals. Early personality assessment and individualized preventive strategies can serve as effective tools in managing this growing public health concern.

Keywords: *Type A Personality; Hypertension; Prakriti; Pitta Dosha; Rakta Gata Vata; Psychosomatic; Prevention; Ayurveda*

A Conceptual Review of Ayurveda Chikitsa Principles in the Management of Stress, Anxiety and Depression

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Abstract

Introduction: Stress Is Typically A Response To An External Pressure, Anxiety Is A Persistent Internal Reaction To Perceived Threats, And Depression Is A Mood Disorder Characterized By Prolonged Sadness And A Lack Of Interest And While Their Symptoms Frequently Overlap—Such As Sleep Disturbances Or Irritability. Modern Life Often Brings A Complex Mix Of Pressures That Can Impact Mental Well-Being.

Treatment For Stress, Anxiety, And Depression Typically Involves A Combination Of Professional Medical Intervention And Lifestyle Self-Care To Address Both Physical And Mental Symptoms. The Primary Clinical Treatments Are Psychotherapy, Specifically Cognitive Behavioural Therapy And Medications Such As Selective Serotonin Reuptake Inhibitors (SSRIs). Complementary Strategies Include Regular Physical Exercise, Which Releases Mood-Boosting Endorphins, And Maintaining A Structured Daily Routine With Consistent Sleep And Healthy Nutrition To Stabilize Energy Levels. For Severe Or Treatment-Resistant Cases, Doctors May Explore More Specialized Options Like Brain Stimulation Therapies Or Advanced Psychiatric Care.

In Ayurveda, Nasya And Murdhni Taila Are Critical Therapeutic Interventions For Managing Stress, Anxiety, And Depression By Targeting The Head, Known As Uttamanga Or The "Superior Organ". Nasya Is Gateway to the Brain, Stimulate the Olfactory Pathway and Limbic System—the Brain's Emotional and Cognitive Center. This Process Helps Balance Vata And Rajas Promotes The Secretion Of Mood-Regulating Neurotransmitters Like Serotonin And Dopamine, And Regulates The Hypothalamus-Pituitary Axis To Stabilize Hormonal Stress Responses. Complementing This, Murdhni Taila Procedures—Such As Shirodhara (Oil Pouring) And Shiroabhyanga (Head Massage)—Apply Physical Pressure And Rhythmic Vibrations To The Scalp, Which Soothe The Nervous System, Reduce Cortisol, And Enhance Cerebral Circulation. Together, These Therapies Provide Deep Psychosomatic Healing, Alleviating The Mental Fatigue And Emotional Imbalances Associated With Depression While Effectively Inducing Sound Sleep To Counter Stress-Related Insomnia.

Aim and Objectives: To Review The Various Principles Of Ayurveda And Using Those Principles In Management Of Stress, Anxiety And Depression.

Material and Methods: All The References Are Taken From The Ayurvedic Literature, Researches, Journals Of The Ayurveda And Contemporary Science.

Result: The Principles of Ayurveda —Specifically Shodhana (Purification) and Shamana (Palliating) Therapies— Can Effectively Manage the Stress, Anxiety and Depression. By Targeting Dooshana Of Tridosha, Mastishka These Ayurvedic Interventions May Improve Stress, Anxiety And Depression.

Conclusion: Principles Of Ayurveda Can Effectively Manage The Stress, Anxiety And Depression.

Abhyanga in Manasaroga: An Ayurvedic and Contemporary Perspective

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Abstract

Manasaroga encompasses a group of mental and psychosomatic disorders arising from the imbalance of Mano Dosa (Rajas and Tamas), along with shareerika Doṣa, as explained in Ayurveda. In the present era, increasing stress, lifestyle patterns, and growing psychosocial challenges have resulted in a significant rise in the prevalence of mental disorders. Hence, there is a growing need to explore holistic and preventive therapeutic approaches described in classical Ayurvedic texts.

Abhyanga, a form of Bahiparimarjana Chikitsa, is discussed in brihatrayee both as a part of Dinacharya and as a therapeutic intervention in various diseases. In Abhyanga, Sparsanendriya plays a pivotal role. Sparsanendriya is considered unique among the panchaindriya due to its vyapakatwa, as it is functionally associated with all the pancajanendriyas. Through the all-pervasive skin, it serves as a primary medium connecting bodily sensations with mental functions, thereby contributing significantly to sensory integration. The Phala Sruti of Abhyanga highlights indriyaprasdana and Manaprasadana, indicating its positive influence on the sensory organs and mental well-being.

The present work attempts to conceptualize the mode of action of Abhyanga in Manasaroga by integrating classical Ayurvedic principles with contemporary scientific understanding. This conceptual and literary review is based on references from classical Ayurvedic texts along with relevant modern scientific literature. Abhyanga predominantly acts through Sparsanendriya (tvak), one of the pancajanendriyas, which is vata-Bahula and vyapakatwa in nature. Stimulation of tvak through Abhyanga facilitates indriyaprasdana and Manaprasadana. From a contemporary perspective, Abhyanga supports transdermal absorption of sneha Dravya and generates hydrostatic pressure in the extracellular space, thereby influencing neurochemical changes. Post-Abhyanga, an increase in circulating amino acids such as tryptophan, a precursor of serotonin responsible for mood stabilization, concentration, and memory, may occur. Thus, Abhyanga contributes to psychophysiological balance by regulating Vāta Doṣa and supporting neurochemical pathways. Overall, Abhyanga emerges as a simple, safe, and effective supportive therapy in the preventive and therapeutic management of Manasaroga in the modern era.

Lifestyle Modification and An Ayurvedic Approach to Female Infertility Associated with PCOS - A Case Study

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Abstract

Introduction: Polycystic Ovarian Syndrome (PCOS) is one of the most common endocrine disorders and a leading cause of infertility among women of reproductive age. It is characterized by hyperandrogenism, anovulation, and polycystic ovarian morphology on ultrasonography (USG), often presenting clinically as amenorrhea or oligomenorrhea, hirsutism, acne, and infertility. In Ayurveda, it can be correlated with Vata-Kaphaja Artavadushti. The etiology is multifactorial, involving genetic, environmental, and lifestyle factors. Objective: To assess the

effectiveness of Lifestyle Modification and an Ayurvedic management in a case of infertility associated with PCOS, focusing on restoration of ovulatory function and achievement of natural conception. Case Description: A 25-year-old female presented to the Prasuti Tantra and Stri-Roga Outpatient Department, with infertility of 4 years and a history of two early spontaneous abortions. She was known case of PCOS with clinical features including menstrual irregularity and anovulation. USG revealed bilateral polycystic ovaries. Intervention: A personalized Ayurvedic regimen including Shodhana Chikitsa along with strict lifestyle modification focused on dietary regulation, weight reduction, regular physical activity, adequate sleep hygiene, stress management.

Outcome: After ten months of therapy, the patient reported a missed menstrual cycle. A urine pregnancy test on 15 October 2024 confirmed conception. Follow-up ultrasonography showed a viable single intrauterine pregnancy of 5 weeks and 6 days. Subsequent anomaly scans and prenatal screenings were normal, and she later delivered a healthy child.

Conclusion: This case highlights the potential role of lifestyle modification and an Ayurvedic management in restoring ovulatory function and achieving natural conception in PCOS-related infertility.

Keywords: *Ayurvedic Management; Infertility; Lifestyle Modification; Ovulatory Dysfunction; PCOS.*

Revisiting Ashmari: A Pathogenesis- Oriented Ayurvedic Review of Renal Calculi

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Abstract

Introduction: Renal calculi, commonly termed urolithiasis, are a prevalent urinary tract disorder characterized by stone formation and a high tendency for recurrence. Approximately 97% of urinary calculi are located in the kidneys and ureters, with the remaining 3% in the bladder and urethra. Global prevalence has risen to 12%, likely driven by evolving lifestyles and improved diagnostics. Recurrence is notably high, affecting 70–81% of males and 47–60% of females. In Ayurveda, this condition is described as Ashmari and is classified under Ashtamahagada due to its severity and potential complications. The disease is attributed to dietary indiscretions, lifestyle factors, and derangement of Doshas affecting the Mutravaha Srotas. Conventional management primarily focuses on analgesia and surgical interventions, which may not adequately address recurrence or underlying pathology. This review evaluates Ayurvedic principles in managing renal calculi, with a specific focus on their role in Samprapti Vighata (breaking the pathogenesis) and preventing recurrence. By synthesizing clinical and literary evidence, it explores how these traditional methods address both the immediate stone and the underlying systemic imbalance.

Methods: A comprehensive review of published Ayurvedic literature, clinical studies, and case reports related to Ashmari was conducted. Relevant articles were analysed for diagnostic criteria, treatment approaches, duration of therapy, outcome measures, and safety. Emphasis was placed on symptom relief, radiological changes, and recurrence prevention, with broad focus on ayurvedic medicine and protocol.

Results: The reviewed studies consistently reported significant improvement in clinical symptoms such as pain, dysuria, burning micturition, and haematuria. Radiological assessments demonstrated reduction in stone size, fragmentation, or complete expulsion in mild to moderate cases over a defined treatment period. Ayurvedic management was observed to exert lithotriptic, diuretic, anti-inflammatory, and analgesic effects, along with

correction of underlying metabolic and functional disturbances. Most studies reported good tolerability and absence of serious adverse effects, with reduced recurrence during follow-up.

Discussion: Ayurvedic management of renal calculi offers a holistic and non-invasive approach by targeting disease pathogenesis rather than symptomatic relief alone. The emphasis on Dosha balance, dietary regulation, and lifestyle modification may contribute to sustained outcomes and recurrence prevention. However, further well-designed clinical trials and standardized protocols are required to validate efficacy and facilitate broader integration into contemporary urolithiasis management.

Keywords: *ayurveda; asmari; renal calculi; urolithiasis; stone; renal stone*

Artificial Intelligence in Vrana Chikitsa: Scope And Future Directions

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Abstract

Background: The management of wounds, particularly chronic wounds, remains a major challenge in modern healthcare due to complex pathophysiology, delayed healing, and high resource utilization. Globally, chronic wounds affect approximately 2.2 per 1,000 individuals. Vrana Chikitsa, a core component of Shalya Tantra, emphasizes systematic wound assessment (Vrana Pariksha), cleansing therapies (Shodhana), and tissue repair (Ropana). Traditionally, wound evaluation is based on parameters such as Varna, Gandha, Srava, Vedana, and Akrti, which rely largely on clinical experience and introduce subjectivity, limiting standardization and outcome comparison.

Recent advances in Artificial Intelligence (AI) and digital health technologies offer objective approaches while remaining aligned with Ayurvedic principles. AI-driven image analysis and machine learning enable quantitative assessment of wound dimensions, tissue characteristics, discharge, and early signs of infection. These tools assist in differentiating Shuddha and Dushta Vrana, predicting healing duration, and identifying delayed healing or complications. AI-based clinical decision support systems further aid treatment planning by integrating patient-specific factors such as Prakriti, comorbidities, and wound chronicity, thereby strengthening rational clinical judgment in accordance with Yukti Pramana. Digital health platforms also facilitate remote monitoring, postoperative follow-up, and standardized digital documentation, supporting improved outcomes and research validation in Vrana Chikitsa.

Objectives: This paper explores the integration of Artificial Intelligence (AI) and digital health technologies to objectify Ayurvedic wound care, bridging the gap between ancient clinical wisdom and modern evidence-based practice.

Methodology: A computerized search on PubMed, Scopus, Research gate and other indexed journal using keywords Vrana Chikitsa, Artificial Intelligence, Shalya Tantra, Wound Assessment, Yukti Pramana Ayurveda from past 10 years articles are discussed in the paper and snowball research technique is used.

Results: Application of Artificial Intelligence and digital health tools in Vrana Chikitsa demonstrated may improve objectivity in wound assessment by enabling standardized evaluation of wound size, tissue characteristics, discharge, and healing progression. AI-assisted image analysis may reduce inter-observer variability and supported consistent documentation of classical Vrana Lakshanas.

Conclusion & Relevance: The integration of Artificial Intelligence with classical Ayurvedic wound management principles may contribute to evidence-based practice and enhance the global recognition of Ayurvedic surgical care.

Keywords: *Vrana Chikitsa; Artificial Intelligence; Shalya Tantra; Wound Assessment; Yukti Pramana; Ayurveda*

A Comprehensive Analysis of Styles of Leadership and Workplace Wellness

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Abstract

Workplace wellness has arisen as a crucial concern for enterprises because of its significant impact on employee performance, retention, and organizational sustainability. Leadership has a significant impact on employee experiences and well-being at work, yet existing research on leadership styles and workplace health is dispersed among disciplines. This paper offers a thorough analysis of empirical research on the connection between workplace wellness outcomes and leadership philosophies. The review summarizes research on various leadership philosophies, including transformational, servant, ethical, authentic, and authoritarian leadership, and how these philosophies affect employee wellness metrics like psychological health, job satisfaction, stress, burnout, and work-life balance. The results show that whereas dominating or abusive leadership styles are associated with negative mental health outcomes, positive and people-oriented leadership styles consistently show positive relationships with workplace wellness. The review also identifies important mediating and moderating mechanisms, such as employee involvement, organizational support, and psychological safety. By combining workplace wellness and leadership research into a cohesive framework and pointing out research gaps, this study adds to the body of literature. There is discussion of the practical ramifications for managers and organizations looking to foster long-term employee well-being via successful leadership techniques.

Keyword: *workplace; organization; leadership; wellness; mechanisms*

An Analysis of Workplace Stress, Burnout, and Employee Productivity Through Mediation

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Workplace stress has become a serious worry for modern organizations due to its adverse impact on employee well-being and performance. Prolonged exposure to stressful work situations frequently results in burnout, which reduces employee productivity. This study examines the relationship between workplace stress and employee productivity, with burnout considered a mediating component. The current study conducts a comprehensive evaluation of existing literature from diverse scholarly sources to investigate the relationship between workplace stress and employee productivity, with a special emphasis on the mediating effect of burnout. The research review also shows that long-term stress exposure frequently results in burnout, which is characterized by diminished personal accomplishment, depersonalization, and emotional tiredness. The findings emphasize the necessity of organizational interventions

aimed at lowering workplace stress and burnout in order to improve employee productivity and overall organizational success.

Keywords: *Organizational Performance; Workplace Stress; Burnout; Employee Productivity; Mediation Analysis*

Mind–Body Resonance in Autism: Theory and Clinical Illustration

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Abstract

Background: Autism Spectrum Disorder (ASD) as a neurodevelopmental condition involving sensory dysregulation, impaired mind–body coherence, and altered stress response. ASD mapped to Manovaha Srotas Dushti, Vata predominance, and impaired Satva.

Introduction: Autism involves disrupted mind–body synchrony, reflected in sensory hypersensitivity and emotional dysregulation. Mind–body resonance refers to harmonization between neural rhythms, breath patterns, and emotional responses. Mantra Chikitsa is an Ayurvedic sound-based therapeutic modality utilizing structured syllables and it may act through rhythmic acoustic stimulation, breath regulation, and attentional anchoring. Mind–body resonance explained as harmony between mental processes, sensory inputs, and physiological rhythms. Rationale for Mantra Chikitsa as a sound-based intervention restoring resonance through Nada and Shabda. Repetitive mantra chanting may promote Parasympathetic activation, Emotional regulation, Reduction in sensory hyper-responsiveness, Improved attentional stability. However, systematic clinical documentation of mantra-based resonance in autism remains limited.

Materials and Methods: This case was managed in the Kaumarabhritya OPD and Inpatient IPD of SDM College of Ayurveda, Hospital and Research Centre, Katpadi, Udipi. A male child of age 4 and half years was brought with complaints of delayed milestones and speech delay since age appropriate as per mother she had twin to twin transfusion syndrome so the baby was delivered through elective LSCS, and the premature baby born in 7th month with birth weight of 1.9kg, he was diagnosed with Pneumothorax and stayed in NICU for 30days, then gradually parents noticed delayed milestones and speech in gross motor, fine motor, social and in adaptive milestones. He was treated earlier at Kalavara Child Development Center, Mangalore for the ABA OT Speech and DSM 5 evaluation at the age of 3years, now came here for the same and for further management. The treatment protocol included Shirodhara, Lepa, abhyanga, Yoga basti, gudanagara nasya, yoga and mantra therapy. The Clinical assessment was done before, during and after the treatment.

Results and Discussion: Moderate reduction in hyperactivity and irritability, especially post-session. Better sleep pattern and emotional calming. Findings suggest mantra-based neuro-entrainment may support gradual autonomic regulation, not instant behavioral transformation. Improvements correlate with the Ayurvedic principle of Vata Shamana occurring progressively, especially in chronic neurodevelopmental conditions. Reinforces the concept that mind–body resonance develops through repetition and rhythmic exposure. Mind–body resonance provides a novel integrative framework for understanding autism. Mantra Chikitsa demonstrates potential for gradual behavioral regulation and emotional stabilization.

Keywords: *Autism Spectrum Disorder; Mantra Chikitsa; Mind–Body Resonance*

Ayurvedic Management of DSM V Autism Spectrum Disorder (Vaataja Unmaad) in a Child: A Case Study in Kaumarabhritya

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Abstract

Background: Autism Spectrum Disorder (ASD) is a neurodevelopmental condition characterized by persistent deficits in social communication and interaction, along with restricted and repetitive patterns of behavior, interests, or activities. DSM-5 defines ASD under two core domains: deficits in social communication and social interaction, and restricted, repetitive behaviour's. Severity levels (Level 1–3) indicate the degree of support required, facilitating early diagnosis and individualized intervention planning. From an Ayurvedic perspective, the clinical features of ASD can be correlated with disturbances in neurodevelopmental functioning involving *Manovaha Srotas* and higher mental faculties such as *Dhi* (intellect), *Dhriti* (retention), and *Smriti* (memory).

Introduction: Autism Spectrum Disorder represents a significant global public health concern, with increasing prevalence rates reported worldwide. According to DSM-5, (ASD) is defined by symptoms in two core domains. The first domain involves persistent deficits in social communication and interaction, including reduced social-emotional reciprocity, impaired nonverbal communication (such as poor eye contact or limited facial expressions), and difficulty developing and maintaining relationships. The second domain includes restricted and repetitive patterns of behaviour, interests, or activities, such as stereotyped movements or speech, insistence on sameness and rigid routines, highly restricted interests, and abnormal sensory responses (hyper- or hypo-reactivity).

Materials and Methods: This case was managed in the Kaumarabhritya OPD and Inpatient IPD of SDM College of Ayurveda, Hospital and Research Centre, Katpadi, Udupi. A male child of age 3 years 8 months brought with c/o over activity, delayed speech, hand flapping, inability to sit, jumping over the bed, poor eye contact, difficulty mingling with other children since the age of 2 years. The treatment protocol included *abhyanga*, *sweda*, *vestana*, *dhmapana*, *ksheerohuma*, *shirodhara*, *basti*. Clinical assessment was performed before treatment, after treatment, and during follow-up.

Results and Discussion: Significant clinical improvement was observed in the child, with marked reduction in symptoms such as hyperactivity, delayed speech, hand flapping, inability to sit still, jumping behavior, and poor eye contact. The Ayurvedic treatment protocol effectively addressed the underlying Vata–Kapha imbalance and associated neurodevelopmental disturbances. The internal medications administered acted as *Medhya Rasayana* (cognitive enhancers), Vata-balancing agents—particularly regulating *Prana Vata*—and stabilizers of *Manovaha Srotas*. These formulations supported speech and neurodevelopmental progression, improved behavioural regulation, and enhanced cognitive functions. Additionally, their therapeutic properties contributed to tissue nourishment, reduction of irritability, and overall neurological stabilization

Keywords: *autism spectrum disorder; manovaha srotas; DSM-5*

Rasayana Chikitsa in Cognitive, Psychological, and Vasomotor Symptoms of Postmenopausal Woman: A Case Report

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Abstract

Introduction: Menopause is a physiological transition characterized by declining estrogen levels and associated vasomotor, psychological, and cognitive disturbances commonly described as “brain fog.” Symptoms such as hot flushes, mood instability, sleep disturbances, and attentional deficits significantly impair quality of life. In Ayurveda, Rajonivritti is considered a natural age-related state marked by Dhatu-kshaya and Vata-Pitta predominance, where Rasayana therapy is indicated to promote systemic rejuvenation and neuropsychological balance. **Case Description:** This case report evaluates the effect of Rasayana-based Ayurvedic intervention in a 55-year-old postmenopausal woman (menopause established for 4 years) presenting with persistent hot flushes, irritability, mood changes, sleep disturbances, and attention difficulties. Baseline assessment using the Montreal Cognitive Assessment (MoCA), Adult ADHD Self-Report Scale (ASRS), and Regensburg Insomnia Scale (RIS) revealed mild cognitive impairment, significant insomnia, and attention-related concerns. A personalized Ayurvedic regimen emphasizing Rasayana therapy was administered for three months. The patient received Shatavari churna (2 g), Ashwagandha churna (2 g), and Guduchi churna (1 g) twice daily before meals with milk. In addition, daily Pratimarsha Nasya with Brahmi Ghrita was advised, along with customized diet modification. **Outcome:** Post-intervention evaluation demonstrated significant reduction in vasomotor symptoms, improved mood stability, enhanced sleep quality, and better cognitive performance, reflected by improved MoCA scores and reduced ASRS and RIS scores. **Conclusion:** This case highlights the potential role of Rasayana therapy combined with Pratimarsha Nasya may serve as a safe and comprehensive approach for addressing cognitive, psychological, and vasomotor symptoms of menopause. The observed outcome suggests that Rasayana and Nasya treatment approaches are effective to support neurocognitive and systemic balance in the postmenopausal woman leads to improve the quality of life.

Keywords: *Cognitive Dysfunction; Menopause; Pratimarsha Nasya; Rajonivritti; Rasayana*

Rejuvenating Adolescent Mind Through Achara Rasayana

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Abstract

Introduction: Nowadays, adolescents face escalating mental health challenges including emotional dysregulation, academic stress, digital overuse, sleep disturbances, impulsive behavior, and early addictive tendencies. Conventional approaches largely emphasize screening and symptom-based interventions, with limited focus on preventive self-regulation. Ayurveda offers a holistic, preventive framework through Achara Rasayana, which emphasizes ethical conduct, self-discipline and mental regulation. This model is especially relevant in addressing adolescent vulnerabilities in the contemporary digital environment.

Objectives: To conceptualize and present Achara Rasayana as an Ayurvedic mental health model for cultivating self-

regulation and emotional resilience in adolescents, with relevance to modern psychosocial stressors.

Methods: A classical Ayurvedic textual analysis was undertaken focusing on Rasayana concepts described in classical textbooks interpreted through the lens of Swasthavritta and Yoga. These principles were critically correlated with contemporary adolescent mental health issues, behavioral science concepts and preventive psychiatry models. Emphasis was placed on practical applicability in school and community health settings.

Results: Achara Rasayana promotes self-regulation through enhancement of Sattva Guṇa and regulation of Rajas and Tamas, leading to improved emotional control, impulse regulation, ethical decision-making and stress tolerance. Practices such as truthfulness, anger control, moderation of sensory indulgence, compassion, and disciplined routine directly address common adolescent concerns like aggression, anxiety, peer conflict, and digital addiction. When integrated with Yoga, this model supports mental clarity, resilience, and healthy psychosocial development.

Conclusion: Achara Rasayana represents a low-cost, preventive, and culturally adaptable Ayurvedic mental health model for adolescents. By fostering self-regulation and ethical living, it bridges ancient wisdom with modern mental health needs, offering a sustainable strategy for adolescent well-being in the digital era.

Keywords: *Adolescent mental health; Acara Rasayana; Self-regulation; Preventive psychiatry; Digital well-being; Yoga.*

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Digital Overstimulation and Mental Health: An Ayurvedic Perspective on Screen Exposure in Adolescents

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Abstract

Rapid digitalization has transformed adolescent lifestyle patterns, leading to excessive screen exposure through smartphones, gaming platforms, and social media. While digital technology offers educational and social advantages, excessive usage contributes to cognitive fatigue, emotional instability, and sleep disturbances. Contemporary medicine largely interprets this phenomenon as behavioral addiction; however, Ayurveda offers a broader psychosomatic perspective.

From an Ayurvedic standpoint, excessive screen exposure represents Indriyārtha Atiyoga (overuse of sensory faculties) and Prajnaparadha (intellectual error), leading to imbalance of Manasika Doshas — Rajas and Tamas. This review explores digital overstimulation as sensory overload of Manas, correlating Ayurvedic principles with modern neurobiological findings. The paper also highlights preventive and therapeutic strategies including Dinacharya, Sadvritta, Medhya Rasayana, Panchakarma, and Yoga-based interventions.

Keywords: *Digital overstimulation; Adolescents; Manasika Dosh; Prajnaparadha; Screen exposure; Ayurveda; Lifestyle disorders*

Comparative Clinical Study of Chaitasa Ghrita Nasya and Panchagavya Ghrita Nasya in Chittodvega with Special Reference to Generalized Anxiety Disorder

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Abstract

Background: Chittodvega is a Manasika Vikara described in Ayurveda, primarily caused by vitiation of Raja and Tama doshas, and clinically resembles Generalized Anxiety Disorder (GAD). GAD affects 3–9% of the population and is commonly treated with psychotropic drugs that may produce adverse effects. Ayurveda advocates Nasya Karma as an effective and economical therapy for mental disorders through nasal drug administration influencing higher mental functions.

Objectives: To compare the clinical efficacy of Chaitasa Ghrita Nasya and Panchagavya Ghrita Nasya in the management of Chittodvega with special reference to GAD.

Materials and Methods: A randomized, single-blind, two-arm prospective clinical study was conducted on 60 patients diagnosed according to DSM-IV-TR criteria and Ayurvedic features of Chittodvega. Patients were divided into two groups (n=30 each). Group A received Panchagavya Ghrita Nasya, and Group B received Chaitasa Ghrita Nasya, administered as 8 bindu per nostril daily for 7 days. Assessment was done using the Comprehensive Anxiety Test (CAT) scale. Statistical analysis included paired and unpaired t-tests.

Results: Both groups showed highly significant improvement ($p < 0.0001$). Inter-group comparison revealed that Chaitasa Ghrita Nasya demonstrated significantly better results ($p = 0.0057$) compared to Panchagavya Ghrita Nasya.

Conclusion: Nasya Karma is effective in managing Chittodvega (GAD), with Chaitasa Ghrita Nasya showing superior clinical efficacy.

Keywords: *Chittodvega; Generalized Anxiety Disorder; Nasya Karma; Chaitasa Ghrita; Panchagavya Ghrita.*

Comparative Clinical Study to Evaluate the Efficacy of Specific Yogasanas and Dashmoola Ksheerpaka in Udavartini Yoni Vyapada w.s.r. to Primary Spasmodic Dysmenorrhea

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Background: Primary spasmodic dysmenorrhea is a common gynaecological disorder characterized by painful menstruation without pelvic pathology. In Ayurveda, its features closely resemble Udavartini Yoni Vyapada, a Vata-dominant condition caused by vitiated Apana Vayu leading to painful and obstructed menstrual flow. Conventional therapies provide symptomatic relief but are often associated with adverse effects, necessitating safer and holistic alternatives.

Objectives: To evaluate and compare the efficacy of specific Yogasanas and Ujjayi Pranayama with and without Dashmoola Ksheerpaka in the management of Udavartini Yoni Vyapada w.s.r. to Primary Spasmodic Dysmenorrhea.

Materials and Methods: An open-label, randomized, controlled clinical trial was conducted on 30 female patients (12–30 years), divided equally into Group A (Yogasanas + Ujjayi Pranayama) and Group B (Dashmoola Ksheerpaka 48 ml twice daily + Yogasanas + Ujjayi Pranayama) for two consecutive menstrual cycles. Assessment was based on Visual Analog Scale (VAS) for spasmodic abdominal pain, lumbosacral backache, radiating thigh pain, vomiting, and constipation. Statistical analysis was performed using Wilcoxon matched-pairs signed-ranks test and Mann–Whitney test.

Results: Group B showed highly significant reduction in spasmodic pain (6.87 ± 0.74 to 2.73 ± 0.80 ; $p < 0.0001$) compared to Group A (6.73 ± 0.88 to 5.87 ± 0.74 ; $p < 0.0001$; intergroup $p < 0.0001$). Significant intergroup differences were observed in lumbosacral backache ($p = 0.0024$), radiating thigh pain ($p = 0.0316$), vomiting ($p = 0.0120$), and constipation ($p = 0.0073$). No adverse effects were noted.

Conclusion: Both interventions were effective; however, Dashmoola Ksheerpaka combined with Yogasanas and Ujjayi Pranayama demonstrated superior efficacy in alleviating symptoms of Primary Spasmodic Dysmenorrhea, supporting integrative Ayurvedic management.

Keywords: *Primary Spasmodic Dysmenorrhea; Udavartini Yoni Vyapada; Dashmoola Ksheerpaka; Yogasanas; Ujjayi Pranayama.*

Clinical Evaluation of Mahapaisachika Ghrita as Sodhananga Snehapana Followed by Virechana in Vataja Unmada w.s.r. to ADHD: A Single Case Report

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Abstract

Background: Attention Deficit Hyperactivity Disorder (ADHD) is characterized by inattention, hyperactivity, and impulsivity. In Ayurveda, comparable features are described under Vataja Unmada, wherein aggravated Vata disturbs Manovaha Srotas and higher mental functions.

Mahapaishachika Ghrita is a classical Medhya formulation indicated in Unmada for its neurocognitive and Vata-shamaka properties. Virechana Karma, one of the principal Shodhana therapies, eliminates vitiated Doshas and helps restore psychophysiological balance in behavioral disorders.

Objective: To evaluate the role and clinical outcome of Mahapaishachika Ghrita as Sodhananga Snehapana followed by Virechana Karma in patient diagnosed with Vataja Unmada, with Ayurvedic and modern clinical parameters.

Methods: A 16-year-old male diagnosed with ADHD as per DSM-5 criteria was assessed using DSM-5 ADHD symptom scoring and an Ayurvedic grading scale for Vataja Unmada. After Deepana-Pachana, with Mahapaishachika Ghrita in shodhan matra was administered as internal oleation. Virechana was performed using Trivrita Avaleha. Pre- and post-treatment scores were documented, and percentage improvement was calculated.

Results: The DSM-5 total score reduced from 46 (severe) to 17 (mild), showing 63.04% improvement. Ayurvedic symptom grading decreased from 23 to 7, reflecting 69.56% improvement, with marked relief in Chanchalata, Asamyak Vachana, Krodha, Alpa Nidra, and behavioral instability. No adverse events were observed.

Conclusion: The combined Shodhana approach demonstrated significant improvement in both modern and Ayurvedic parameters, indicating its potential role in integrative management of adolescent ADHD.

Keywords: ADHD; Vataja Unmada; Mahapaisachika Ghrita; Virechana Karma; Trivrit Avaleha; Sodhananga Snehapana; Ayurveda; Shodhana Therapy; Case Report.

Mind at the Vital Points: Clinical Insights into Marma Therapy for Mental Health

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Abstract

Introduction: Marma therapy, a vital component of Ayurveda, is based on the concept that life energy (Prana) flows through 107 vital points in the body known as Marma. These sites represent junctions where physical structures and subtle energies converge. Classical scholars such as Sushruta and Charaka described the intimate relationship between

Manas (mind) and Marma, indicating that disturbances at these points can influence psychological well-being. Emerging clinical observations suggest that stimulation of specific Marma points helps regulate neurochemical balance, reduce stress, and enhance emotional resilience.

Aim: To explore the clinical significance of Marma therapy in promoting mental health, particularly in stress reduction, emotional balance, and management of anxiety, depression, and insomnia.

Methodology: A qualitative review and comparative analysis of Ayurvedic and clinical literature were conducted. Case reports and expert reviews were included. Key psychological parameters assessed were stress levels, sleep quality, and emotional stability in correlation with stimulation of Sthapani, Hridaya, Talahridaya, Apanga, and Seemant Marma.

Discussion: Findings indicate that Marma stimulation balances Vata dosha and optimizes Pranic flow through neurophysiological pathways. Case studies on Anidra (insomnia) reported measurable improvement in sleep and anxiety within ten days of therapy. Activation of Sthapani and Hridaya Marma appears to support emotional regulation and neuroendocrine balance, promoting calmness and psychological stability. Marma points function as psychosomatic access pathways influencing neural and subtle energetic processes.

Conclusion: Marma therapy is a safe, non-invasive, and holistic approach to mental health care. By harmonizing Prana, it enhances emotional well-being, reduces stress, and improves sleep quality, offering valuable complementary support alongside modern psychiatric management.

Ayurveda and Mind–Body Health: Ayurvedic Psychology and Lifestyle Management

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Abstract

Ayurveda, the traditional system of Indian medicine, presents a comprehensive model of mind–body health that integrates psychological balance with daily lifestyle practices. Ayurvedic psychology conceptualizes the mind (Manas) as an active determinant of health, functioning through the three mental qualities—Sattva (clarity and harmony), Rajas (activity and agitation), and Tamas (inertia and dullness). Mental well-being is achieved through the cultivation of Sattva and the regulation of Rajas and Tamas via diet, behavior, environment, and spiritual practices. The mind and body are understood as interdependent, with disturbances in mental states contributing to somatic disorders and vice versa.

Lifestyle management in Ayurveda emphasizes individualized daily and seasonal regimens (Dinacharya and Ritucharya), balanced nutrition, ethical conduct, sleep hygiene, sensory regulation, and stress moderation. Practices such as meditation, yoga, pranayama, mindful eating, and disciplined routines are prescribed to stabilize mental functions and optimize physiological processes. Ayurvedic interventions also include behavioral therapies (Satvavajaya Chikitsa) aimed at cognitive restraint, emotional regulation, and strengthening mental resilience. This integrative framework highlights prevention, self-regulation, and harmony with natural rhythms as central to sustaining mind–body health. Contemporary relevance lies in its holistic approach to psychosomatic disorders, stress-related conditions, and lifestyle diseases, offering complementary strategies for modern health management.

Keywords: *Ayurvedic Psychology; Manas; Dinacharya; Ritucharya; Yoga and Meditation; Stress Regulation.*

A Study on Effect of Chaumasik Aahar on Mental Health

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Abstract

Ayurvedic principles of Ahara (diet) are designed to take care of both physical and mental aspects of health of human being. Ayurveda emphasizes that the diet should be customized for each individual according to physical condition, Sharirika and Manasika Prakriti (physical and mental constitution), Agnibala (digestive power), seasonal and daily changes and other natural factors surrounding an individual. In Ayurveda, Ahara is considered as one among the Trayopasthambha (three subsidiary pillars). The present study focuses on the specific effects of Chaumasik Ahara (dietary regimens for the four-month monsoon period) on mental health. Unhealthy dietary habits during these seasonal transitions are well quoted by Ayurveda in the pathogenesis of mental disorders such as Unmada (insanity), Apasmara (epilepsy), and Atatvabhinivesha (psychic perversion). Though there is no direct classification of Ahara in classical text based on Manasika Gunas (psychic features), this can be well understood through the relationship between Sharirika and Manasika Dosha (physical and mental humors) and the gut-brain axis. The study highlights that adhering to Chaumasik Ahara can reduce stress and anxiety, improve mood, and enhance cognitive function by maintaining the balance of the three Doshas and three Gunas. Ayurvedic concept of Ahara emphasize that good physical strength, intellect, complexion, cheerfulness, and happiness are all dependent on the diet which we consume.

Keywords: *Ahara; Chaumasik; Triguna; Mana; Mental health.*

Cyberpsychology and Its Significance in the Digital Era

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Abstract

The rapid evolution of digital technology has fundamentally altered human interaction, communication and behavior. Cyberpsychology, an interdisciplinary field encompassing psychology, sociology and technology, investigates these changes and their impact on cognition and mental health. The rise of Smartphone's, social media, and virtual environments has introduced new mental health challenges such as addiction, anxiety, and loneliness. On the positive side, social networking allows people to connect and communicate with others in ways that were previously impossible, creating new opportunities for socializing, networking, and sharing information and ideas.

It can also provide a sense of community, support, and belonging for those who may feel isolated or marginalized in their offline lives. However, social networking platforms have also been linked to negative psychological outcomes such as excessive use leading to addictive behavior and cyber bullying. This article will explore the various aspects of Cyber psychology, its professional bodies and the impact of social media on behavior and the significance of studying this field in the digital age.

Keyword- *Cyberpsychology; social networking; mental health; behavior.*

Role of Brihmana Snehapana in the Management of Unmada and Apasmara

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Abstract

Mental health disorders such as psychosis and epilepsy pose significant therapeutic challenges due to chronicity, relapse, and adverse effects associated with long-term pharmacotherapy. In Ayurveda, conditions resembling psychosis and seizure disorders are described as Unmada and Apasmara respectively. These disorders are understood as manifestations of derangement of Doshas—predominantly Vata—along with impairment of Manas, Buddhi, Smriti, and Satva. Classical texts emphasize Snehana (oleation therapy) as a prime modality for pacifying aggravated Vata and restoring mental stability.

Brihmana Snehapana, a nourishing form of internal oleation, plays a dual role—Dosha shamana and Dhatu poshana. Unlike Shodhana-oriented Snehapana, Brihmana Snehapana aims at strengthening depleted tissues (especially Majja and Ojas), enhancing Satva, and stabilizing neuropsychological functioning. Medicated ghee preparations such as Mahakalyanaka Ghrita, Panchagavya Ghrita, and Brahmi Ghrita are traditionally indicated in Unmada and Apasmara for their Medhya (nootropic), Rasayana (rejuvenative), and Vatahara properties.

From an integrative standpoint, the lipid-rich medium of Ghrita enhances bioavailability of lipophilic phytoconstituents and facilitates their passage across the blood–brain barrier. Emerging research suggests that ghee-based formulations may exert neuroprotective, antioxidant, and adaptogenic effects, aligning with contemporary concepts of neuroinflammation and oxidative stress in psychiatric and neurological disorders. Brihmana Snehapana also addresses underlying depletion, stress vulnerability, and cognitive impairment—factors increasingly recognized in digital-era mental health challenges.

In the context of integrated mental health, Brihmana Snehapana offers a holistic approach that combines neuro-nutritional support, psychophysiological stabilization, and mind–body integration. It complements conventional management by reducing symptom severity, improving cognition, enhancing quality of life, and potentially lowering recurrence rates.

Thus, Brihmana Snehapana represents a classical yet clinically relevant intervention for Unmada and Apasmara, warranting systematic clinical evaluation and integration into evidence-based mental health frameworks.

Mind through Detox: Exploring the Psychotherapeutic Potential of Virechana Karma

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Stress, anxiety and depression are major psychosomatic disorders affecting global health and quality of life. Ayurveda considers these conditions as manifestations of Manasika Dosha imbalance, particularly aggravated Pitta and Vata, along with accumulation of Ama. Virechana Karma, a principal bio-purificatory therapy of Panchakarma, is specifically indicated for eliminating vitiated Dosha and restoring systemic and mental balance. This therapeutic purgation facilitates detoxification at both somatic and psychological levels, thereby improving emotional stability and cognitive clarity. By regulating gut-brain axis function, reducing inflammatory mediators, and balancing neuroendocrine activity, Virechana contributes to normalization of mood and stress response. Clinical observations suggest significant reduction in symptoms such as restlessness, irritability, sleep disturbances, and persistent low mood following Virechana. Furthermore, it enhances Sattva Guna, promotes mental relaxation, and improves overall psychological resilience. Thus, Virechana Karma offers a safe, effective, and holistic approach for managing stress, anxiety, and depression, addressing both root cause and clinical manifestations. Its integration with conventional care may enhance therapeutic outcomes and support long-term mental health and well-being in affected individuals across diverse populations and clinical settings worldwide today. Future research and standardized protocols are essential to validate its efficacy through evidence-based scientific evaluation and wider clinical application globally and sustainably ahead.

Keywords: *Virechana Karma; Stress; Anxiety; Depression; Ayurveda and Mental Health; Manasika Dosha*

Ayurvedic Management of Attention Deficit Hyperactivity in Children: A Case Study

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Abstract

Background: Attention-deficit/hyperactivity disorder (ADHD) is a common childhood neurodevelopmental disorder characterized by persistent inattention, hyperactivity, and impulsivity, resulting in significant functional impairment. In India, the pooled prevalence is approximately 7.1%, with wide regional variation ranging from 1.3% to 29%. ADHD has a multifactorial etiology and frequently persists into adolescence and adulthood, often associated with psychiatric and learning comorbidities. It increases the risk of academic underachievement, accidental injuries, substance misuse, and suicidal behaviour, contributing to substantial long-term psychosocial burden.

Introduction: ADHD as a multifactorial neurodevelopmental condition involving genetic predisposition and neurobiological alterations, particularly in dopaminergic and noradrenergic pathways affecting executive function and behavioural regulation. In *Ayurveda*, ADHD can be conceptually correlated with *Manovaha srotas dushti* and predominance of *Vata dosha* imbalance, especially *Prana Vata* and *Vyana Vata*. Aggravation of *Rajas guna* and

associated *Pitta* imbalance further contribute to hyperactivity, impulsivity, and emotional dysregulation.

Materials and Methods: A 6.5-year-old male child presented with complaints of increased activity, lack of concentration, roaming behaviour, and poor memory since four years. Detailed clinical history, systemic examination, and central nervous system evaluation were performed, revealing features of inattention, hyperactivity, and impulsivity. *Ayurvedic* assessment focused on *dosha* predominance, *srotas* involvement, and chronicity of the condition. Management included *Shirodhara*, *Matrabasti*, *Dhmapana Nasya*, and *Vestana*.

Results: Post-treatment, the child demonstrated significant reduction in hyperactivity and roaming, attention span, and memory. *Shirodhara* and *Nasya* contributed to calming the mind and enhancing cognitive functions, while *Matrabasti* effectively balances aggravated *Vata Dosha* and may modulate the gut–brain axis by regulating colonic *Vata*, thereby influencing enteric neural activity and bidirectional gut–brain communication. The combined therapy reduced *Rajas* aggravation and improved behavioural and neurological functioning.

Discussion: Considering the chronicity, a *Vata-pradhana* approach was adopted to achieve *Dosha Samyata* through *Shodhana* followed by *Vata-shamana* and *Medhya* support. The interventions stabilized *Prana* and *Vyana Vata*, improved *Manovaha srotas* function, and promoted cognitive and psychosocial improvement.

Key words: *ADHD; Shirodhara; Nasya; Matrabasti; Vata Dosha.*

Ayurvedic Management Of Allergic Rhinitis- *Vataj* *Pratishyaya*: A Case Series

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Abstract

Allergic Rhinitis (AR) is a Type I hypersensitivity disorder mediated by IgE antibodies, characterized by symptoms such as sneezing, nasal congestion, rhinorrhoea, nasal and ocular itching, and postnasal drip. It is a chronic and recurrent condition that significantly affects the patient's quality of life, sleep, and productivity. In modern times, the prevalence of AR has increased due to urbanization, pollution, and changing lifestyle factors. From the Ayurvedic perspective, *Vataja Pratisyaya*, described under *Nasa Roga* in texts like *Aṣṭāṅga Hṛdaya* and *Suśruta Samhitā*, shares a strong clinical resemblance to Allergic Rhinitis. *Vataja Pratisyaya* is characterized by *kṣavathu* (frequent sneezing), *śīta-tanu nāsika śrāva* (thin cold nasal discharge), *śiraḥśūla* (headache), *svarabheda* (hoarseness), and *kāsa* (dry cough) — all of which parallel the symptomatology of allergic rhinitis. Considering the signs and symptoms patient was treated on the lines of *vataj pratishyaya*. *dashmool kwath chitrak haritaki* and *Pratimarsh nasya* with *Anu tail* gives significant relief in symptoms. The therapy proves to be an easily available, cost effective, herbal alternative in the management of *Vataja Pratisyaya* (Allergic rhinitis).

Keywords: *Allergic rhinitis; Ayurveda; Pratisyaya; Vataja Pratisyaya.*

Artificial Intelligence: A New Frontier in Treating Epilepsy, Stroke, and Alzheimer's Disease

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Abstract

Background: The integration of Artificial Intelligence (AI) into neurology presents transformative opportunities for improving the diagnosis and treatment of Epilepsy, Stroke, and Alzheimer's disease.

Methods: I reviewed recent studies and clinical trials that utilized AI technologies, such as machine learning algorithms and deep learning models, in the context of epilepsy, stroke, and Alzheimer's disease. The focus was on applications in diagnostic imaging, predictive modeling, and treatment optimization

Key Findings: AI has shown significant promise in each of the neurological conditions studied. In epilepsy, AI algorithms have demonstrated high accuracy in detecting seizures from EEG data and predicting seizure onset. For stroke, AI-driven imaging techniques have enhanced the precision of ischemic and hemorrhagic stroke detection, leading to faster and more accurate identification of candidates for thrombolysis and thrombectomy. In Alzheimer's disease, AI has improved early diagnosis through the analysis of neuroimaging and genetic data, tracking disease progression and identifying potential biomarkers

Discussion: The findings highlight AI's potential to revolutionize neurology by offering more accurate and efficient diagnostic tools, predictive capabilities, and personalized treatment strategies. In epilepsy, AI can reduce the burden of manual EEG analysis, improve seizure management. In stroke, rapid AI-assisted diagnosis and intervention planning can significantly impact patient outcomes. In Alzheimer's disease, early detection and monitoring facilitated by AI can enhance accelerate the development of targeted therapies

Conclusion: AI applications in epilepsy, stroke, and Alzheimer's disease represent a significant advancement in neurological research and clinical practice.

Keywords: *Artificial Intelligence; Epilepsy; Stroke; Alzheimer's Disease*

Reel to Real: Bollywood's Role in Shaping Menstrual Hygiene Discourse in India

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Abstract

For millions of women in India, menstruation remains covered in shame and silence. A topic too uncomfortable for open discussion, yet one with very real consequences for health and wellbeing. Bollywood, with its massive reach across the country, has the power to change that. This paper takes a close look at how two films Phullu (2017) and Pad Man (2018) have shaped conversations around menstrual hygiene in India. Phullu tells the story of a young man in rural Uttar Pradesh who tries to help the women in his life access proper sanitary products, while Pad Man dramatizes the real-life journey of Arunachalam Muruganatham, the Tamil Nadu innovator who created low-cost menstrual pad machines. Both films broke new ground by bringing menstruation into mainstream Indian cinema, turning what was once a taboo subject into something audiences could actually watch and talk about. The paper further identifies structural limitations common to both, including male-centred framing and limited rural reach, and calls for a more intentional integration of media and menstrual hygiene advocacy that centres women's voices and lived experience.

Beyond Therapy: Preventive Dimensions of Sattvavajaya Chikitsa

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Abstract

Background: Mental health disorders are increasing globally due to rapid lifestyle changes, stress, sensory overload, and weakened coping mechanisms. Conventional mental healthcare often focuses on therapeutic management after disease manifestation. Ayurveda, however, emphasizes prevention as a primary goal of healthcare. Sattvavajaya Chikitsa, described as the control and regulation of mind through restraining it from unwholesome objects and strengthening psychological resilience, is traditionally discussed as a treatment modality for Manasika Vikara. Its preventive potential in maintaining mental equilibrium and promoting Manasika Swasthya requires deeper exploration.

Objectives

To conceptualize Sattvavajaya Chikitsa as a preventive mental healthcare strategy.

To analyze its role in strengthening mental resilience and emotional regulation.

Methodology: This is a conceptual and literature-based analytical study. A comprehensive literature review was

conducted using classical Ayurvedic texts such as Charaka Samhita, Patanjali yoga sutras , Bhagavad Geeta, Ashtanga hridaya.

Results: Analysis suggests that Sattvavajaya Chikitsa contributes to:

Regulation of thought processes and emotional responses
Enhancement of coping ability during stress exposure
Prevention of progression from psychological imbalance to disease state
Promotion of mental discipline, self-awareness, and adaptive behavior

The principles of Manonigraha, replacing negative thoughts with positive cognition, and strengthening Satva support mental homeostasis and may act as primary prevention strategies.

Conclusion: Sattvavajaya Chikitsa extends beyond a therapeutic intervention and can be viewed as a preventive mental health framework. By promoting mental discipline, emotional balance, and cognitive control, it aligns with modern preventive psychiatry concepts. Integrating Sattvavajaya principles into daily lifestyle and public mental health programs may help reduce the burden of mental disorders and promote holistic well-being.

Keywords : *Sattvavajaya; preventive; manonigraha; mental health*

Applying Padapadanshika Krama to Facilitate Sadvritta and Achara Rasayana Adoption Through a Micro-Habit Approach for Preventive Mental Well-Being

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Abstract

Introduction: Modern mental health burdens, driven by Prajnaparadha, create an “Intention-Behavior gap” where ethical knowledge fails to translate into sustained behavior. Although Sadvritta and Achara Rasayana promote psychological health, behavioral resistance often hinders their adoption. Using Yukti pramana, this study extends the Padapadanshika Krama (1/4th and 1/16th gradualism) to the psychological domain. Aligning with micro-habit psychology, this framework utilizes incremental, low-effort changes to bypass cognitive resistance, creating a practical and sustainable pathway for preventive mental well-being.

Aim and Objective: To develop a practical, dual-layered (Universal and Prakriti-specific) framework applying Padapadanshika Krama as a behavioral bridge alongside micro-habit psychology to facilitate the sustainable adoption of Ayurvedic principles for preventive mental well-being in diverse modern settings.

Methodology: A narrative literary review of classical texts (Charaka Samhita, Ashtanga Hridaya) and behavioral science on micro-habits was conducted. Comparative analysis identified parallels between Padapadanshika Krama and the modern “habit loop.” An application-oriented framework was developed by translating Sadvritta and Achara Rasayana into a “Gradual Integration Scale” of actionable micro-habits for domestic, educational, and professional

environments.

Result: The study developed a dual-layered framework for Ayurvedic adoption. The Universal Layer translates virtues into sector-specific micro-habits for workplaces, schools, and homes. The Personalization Layer tailors these to Prakriti, addressing Vata-anxiety with grounding and Pitta-reactivity through behavioural modulation. Low-intensity, graded steps reduce resistance and perceived effort, facilitating sustainable adherence to preventive mental health.

Discussion: This study highlights how small, sequential steps make complex lifestyle practices approachable. Integrating Padapadanshika Krama with micro-habit strategies emphasizes scalability and adaptability, suggesting that preventive mental well-being can be promoted across diverse populations without overwhelming effort.

Conclusion: Padapadanshika Krama provides a structured pathway for translating Ayurvedic wisdom into achievable routines. Integrating micro-habit psychology ensures Ayurveda's contemporary relevance through feasible, stepwise behavioral strategies.

Keywords: *Padapadanshika krama; Micro-habit Psychology; Sadvritta; Achara Rasayana; Preventive Mental Well-being.*

Beyond the Blood-Brain Barrier: A Clinical Appraisal of Nasya Karma as a Targeted Therapy for Stress, Anxiety, and Depression

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Abstract

Background: Psychological comorbidities such as Stress, anxiety, and depression have become global neurophysiological epidemics. In Ayurveda, these conditions are understood as disturbances of Prana Vata (neural regulation), Sadhaka Pitta (emotional processing), and Tarpaka Kapha (mental stability). Although modern psychopharmacology provides symptomatic relief, its efficacy is limited by the Blood-Brain Barrier (BBB), often requiring high systemic doses that result in adverse effects such as sedation and metabolic disturbances.

Ayurveda offers a unique alternative through Nasya Karma, based on the classical principle “नासा हि शिरसो द्वारम्” (the nose is the gateway to the head). This intranasal route facilitates direct access to the cranial cavity via olfactory and trigeminal neural pathways, thereby bypassing the BBB.

Objective: To assess Nasya Karma's efficacy in psychological disorders through Ayurvedic and modern neuroclinical evidence.

Methodology: A systematic review of classical Ayurvedic texts, including the Charaka Samhita and Sushruta Samhita, was conducted alongside searches of PubMed, Google Scholar, and the AYUSH Research Portal. Clinical studies on Anu Taila, Brahmi Ghrita, and Kshirabala Taila were evaluated using HAM-A and BDI scores.

Discussion & Clinical Evidence: Ayurvedically, Nasya stimulates Shringataka Marma and regulates Manovaha Srotas. Modern evidence suggests intranasal delivery to the limbic system (amygdala, hippocampus), modulating the HPA axis, lowering cortisol, and enhancing GABA activity.

Conclusion: Nasya Karma is a non-invasive intranasal neurotherapy integrating Ayurveda with modern pharmacokinetics for low-toxicity mental health management.

Keywords: *Nasya Karma; Anxiety; Depression; Stress; Intranasal Drug Delivery.*

Therapeutic Potential of Marma Chikitsa in Musculoskeletal Pain, Neuropathic, Psychosomatic Pain

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Abstract

Marma Chikitsa is a non-invasive Ayurvedic therapeutic modality based on the stimulation of vital points known as Marmas, which are anatomical and energetic convergence sites of muscles, vessels, ligaments, bones, joints, and Prana. Classical Ayurvedic texts describe Marmas as crucial regulators of physical and mental equilibrium, and their precise manipulation is believed to influence both somatic and psychological functions. This narrative analysis evaluates the therapeutic role of Marma Chikitsa in pain-predominant musculoskeletal, neurological, and psychological disorders through a critical appraisal of classical Ayurvedic literature and contemporary scientific evidence. The review synthesizes findings from a systematic review on musculoskeletal conditions, studies exploring applications in psychological disorders, and clinical case reports addressing Ardhavabhedaka (migraine), sleep disorders, and anxiety, thereby highlighting the multidimensional scope of Marma Chikitsa in integrative pain management. Analysis of the reviewed studies indicates that Marma Chikitsa produces significant reductions in pain intensity, stiffness, and functional limitation in conditions such as cervical and lumbar spondylosis, osteoarthritis, frozen shoulder, and tennis elbow. Additionally, notable improvements have been observed in stress, anxiety, depression, sleep disturbances, and both the frequency and severity of migraine attacks. These therapeutic effects may be attributed to Dosha regulation, facilitation of Prana flow, neuromodulation, gate control mechanisms of pain, endogenous opioid release, autonomic nervous system balancing, and enhanced local circulation. Overall, Marma Chikitsa emerges as a safe, cost-effective, and holistic complementary therapy with promising potential in the management of pain and neuro-musculoskeletal disorders; however, further well-designed, standardized, and controlled clinical trials are necessary to substantiate its efficacy and support its broader integration into contemporary healthcare practice.

Living Intelligently in the Age of AI

Vaidya Rama Prasad

Director of Education, Vaidyagrama Ayurveda Healing Village

Every generation believes its technology is unprecedented — and fears what it may cost. From writing to printing to television, the anxiety has remained the same. Now, with AI, we fear replacement. Yet while technology evolves exponentially, human biology evolves slowly.

We still operate on ancient circuitry: cortisol scanning for threat, dopamine chasing reward, oxytocin seeking connection, and attention functioning as a limited currency. AI does not create anxiety; it amplifies existing vulnerabilities — producing what we might call cognitive load inflation.

The issue is not technology itself, but overuse, underuse, and misuse. In a world of constant stimulation, we risk confusing information with intelligence and automation with wisdom.

Should we reframe digital wellness as intentional, value-aligned living? Can AI function as a cognitive exoskeleton? If so, how? If not, what next?

What's the real question - whether AI will change life or whether we will evolve in wisdom as quickly as our tools evolve in power?

Are there any useful ancient principles to resolve this modern conundrum? Explore the solutions with Vaidya Rama!

Effect of 6 Week Shanti Yoga Program on Mental Health of Healthcare Professionals From Pune City in COVID 19 Pandemic

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Abstract

Background: The COVID-19 pandemic has impacted globally in the general population as well as has placed healthcare professionals (HCPs) especially doctors in stressful circumstances with increased patient loads.

Objective: This experimental study aims to investigate the effect of Shanti Yoga Program (SYP) on the mental health of HCPs during the COVID-19 pandemic from Pune city.

Methods: A total of 30 subjects aged between 35-50 years were randomized by self-selection method into the study group (SYG) ($n = 15$) and control group (CG) ($n = 15$). Baseline and after 6 weeks intervention assessment was performed before .DASS 21 scale was used for data collection. The data was analyzed by using by Independent samples t -test with the use of SPSS 20 version software. The result showed that there was a significant effect of Shanti Yoga Program on mental health of HCPs. The measured outcomes related to change in performance between two

groups for stress was, sig 0.013 sig = $p < 0.05$, anxiety sig 0.001, sig = $p < 0.05$, depression sig 0.001, sig = $p < 0.05$, show significant reduction in stress, anxiety and depression in SYG interventional group than the control group after intervention.

Conclusion: The results indicate that SYP technique had a significant impact on the mental health of private practitioner female doctors from Pune City during the COVID 19 pandemic. The study needs further multi-site randomized controlled trials on bigger sample size for understanding the efficacy of yogic techniques on mental health of the female doctors HCPs.

Keywords: *Shanti Yoga Program; healthcare professionals; COVID 19; mental health*

Mental Health Management Through Yoga And Mind Body Practice

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Abstract

Mental health disorders such as stress, anxiety, depression, and burnout have become increasingly prevalent in modern society due to rapid lifestyle changes, academic pressure, and occupational stress. Conventional management primarily relies on pharmacotherapy and psychotherapy; however, complementary approaches like yoga and mind-body practices are gaining global recognition for their holistic benefits. The present paper explores the role of yoga and mind-body interventions in promoting mental health and emotional well-being.

Yoga integrates physical postures (asanas), breathing techniques (pranayama), meditation (dhyana), and relaxation practices that collectively regulate the autonomic nervous system and reduce stress hormones. Mind-body practices enhance self-awareness, emotional regulation, and cognitive clarity. Scientific evidence suggests that regular yoga practice significantly lowers cortisol levels, improves sleep quality, enhances mood stability, and reduces symptoms of anxiety and depression. Additionally, mindfulness-based practices strengthen resilience and coping mechanisms by fostering present-moment awareness.

From a holistic perspective, yoga not only addresses psychological symptoms but also harmonizes physical, mental, and emotional dimensions of health. It is cost-effective, accessible, and associated with minimal adverse effects, making it a valuable adjunct to conventional therapies. The integration of yoga and mind-body practices into mental health care programs, educational institutions, and community settings can contribute to preventive as well as therapeutic mental health strategies.

In conclusion, yoga and mind-body practices offer a safe, evidence-based, and holistic approach for effective mental health management and overall well-being.

Psychology, Counselling and Behavioural Science

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Abstract

Psychology, counselling, and behavioural science are interconnected disciplines that focus on understanding human thoughts, emotions, and actions to promote mental well-being and adaptive functioning. Psychology is the scientific study of behaviour and mental processes, encompassing areas such as cognition, emotion, personality, and social interaction. It provides theoretical frameworks and research-based evidence to explain how individuals perceive, learn, remember, and respond to their environment.

Counselling is an applied branch of psychology that aims to support individuals in coping with personal, social, emotional, and occupational challenges. Through structured therapeutic relationships, counsellors facilitate self-awareness, problem-solving, stress management, and behavioural change. Approaches such as cognitive-behavioural therapy, humanistic therapy, and psychodynamic therapy help individuals modify maladaptive thoughts and behaviours, enhance resilience, and improve overall quality of life.

Behavioural science integrates principles from psychology, sociology, neuroscience, and anthropology to study observable behaviours and decision-making processes. It emphasizes how environmental, cultural, and biological factors influence human actions. Behavioural science is widely applied in healthcare, education, organizational management, and public policy to design interventions that promote healthy lifestyles, productivity, and social well-being.

Together, these fields contribute to a comprehensive understanding of human behaviour, bridging theory and practice. They play a crucial role in addressing contemporary challenges such as stress, anxiety, substance abuse, and interpersonal conflicts. By combining scientific inquiry with empathetic intervention, psychology, counselling, and behavioural science foster mental health awareness, personal growth, and societal development.

Ayurvedic *Rasakalpas* for Mental Health : A Review

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Abstract

Definition of health stated by WHO is a state of complete physical, mental and social well-being and not merely the absence of disease . Ayurveda offers a holistic approach to mental health with *adravyabhut* and *dravyabhut* chikitsa. *Dravyabhut* chikitsa contains herbo-mineral formulations like *churnas*, *rasakalpas*, *ghritas*, *asava-arishtas* along with *panchkarma* therapies with indications like *medhya rasayana*, *smruti*, *unmad*, *apasmar*. These *kalpas* show quick action, fast absorption in target places since many of the *rasa kalpas* contain *kajjali*, *dhatu* and other *rasa-dravya bhasmas* as they are *yogavahi* and *srotosukshmagami*. Modern therapies include SSRI, TCA, etc have known side effects like GI disturbances, neurological symptoms like sedation, headache, tremors and serotonin syndrome which

is due to excessive serotonin uptake which indirectly may worsen quality of life. Thus, there's a need for use of ayurvedic medicines which show minimal side effects and reduce anxiety, improve cognitive function, promote emotional balance and enhance sleep quality. This review enlists *rasakalpas* from *Bharat Bhaishajya Ratnakar* and their role in mental health.

Keywords: *rasakalpa; Medhya; unmada; apasmar; mental health*

A Critical Review on Role of Lipid Based Ayurvedic Formulations (*Ghrita*) in Mental Health

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Abstract

Mental health encompasses a wide range of conditions, ranging from anxiety, stress, and memory loss to psychiatric diseases like epilepsy, insanity, neurological disorders, etc. Ayurveda offers numerous medicinal dosage forms that have a potential effect in maintaining mental health balance. *Ghrita Kalpana* is one of the boons of Ayurveda due to its ability to instill in itself the medicinal properties of both the herbal drugs and *ghrita* in the finally attained medicated drug. Due to their lipophilic action, *ghritas* show the ability to cross the blood-brain barrier and thereby show therapeutic effects in mental disorders. Various *ghritas* have shown their effect in the treatment of mental disorders and maintaining mental health as per research papers in well- established journals. A review enlisting all the *ghritas* that might show therapeutic potential on mental health has been made here. *Ghrita* formulations from Ayurvedic texts, namely *Charak Samhita*, *Ashtang Hruday*, *Sharangdhar Samhita*, *Bharat Bhaishajya Ratnakar*, *Bhaishajya Ratnavali* and *Sushrut Samhita* have been incorporated in this review.

Keywords: *Ghrita; Ghrita Kalpana; mental health; psychiatric diseases; memory*

Management of Tinnitus

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Mental health disorders represent a significant global health challenge, requiring strong educational foundations to develop competent professionals. An outstanding educator in mental health plays a crucial role in improving mental health literacy, reducing stigma, and strengthening clinical practice standards. Such educators combine subject expertise, evidence-based teaching strategies, research engagement, and ethical leadership to foster academic excellence and compassionate care. Through innovative methodologies such as case-based learning, simulation training, and digital mental health tools, they enhance student competence and critical thinking skills. Beyond the classroom, outstanding educators contribute to curriculum development, community awareness initiatives, and policy advocacy. Their mentorship supports professional growth and promotes research advancement in mental health

sciences. Recognizing and supporting exceptional educators is essential for building sustainable mental healthcare systems and improving global mental health outcomes.

Combined Effect of Padabhyanga and Pranayama in Nidranasha (Primary Insomnia)

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Abstract

Sleep is one of the most significant human behaviour, occupying roughly one third of human life. It is the state of mind during which it blocks all the perception from the external world. Qualitative sleep is the essential component of good health. Disturbed sleep leads to discomfort and diseases, can be identified as longer time taken to fall asleep, more periods of wakefulness during the night, and time spent lying awake before rising in the morning. The reported prevalence of insomnia is 33% in the general population globally, and 16% in India. Padabhyanga as a part of Dinacharya is said to induce sound sleep and Pranayama not only enhances Pranashakti but also calms down the stress on body and mind. Hence, in the current study, the combined effect of Padabhyanga and Pranayama practice among elderly population is attempted as remedial measures.

Keywords: *Padabhyanga; Pranayama; Nidranasha; Primary Insomnia; Ayurveda.*

Ayurvedic Principles and Therapies

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Abstract

Ayurveda, the traditional system of medicine in India, is primarily based on the fundamental principles of Tridosha Siddhanta (Vata, Pitta, Kapha), Panchamahabhuta, Agni, Dhatu, Mala & Srotas. The equilibrium of Dosha, Dhatus, and Malas along with proper function of Agni is considered essential for maintaining health, while their imbalance leads to disease. The ayurvedic treatment protocol follows a systematic approach including Nidan Parivarjan, Shodhana, Shamana therapy and Rasayan therapy. Shodhan therapy includes Panchkarma procedure such as Vaman, Virechana, Basti, Nasya, & Raktamokshana, which to eliminate vitiated dosha from the body. Shamana therapy involves the use of Herbal formulation, dietary regulation, lifestyle modification and Rasayan to restore balance. Additionally, preventive measures like Dinacharya & Ritucharya play a significant role in health promotion and disease prevention. Ayurveda adopts a personalized and holistic approach aimed not only at curing disease but also at restoring equilibrium and promoting long-term wellness.

Keywords: *Tridosha; Panchamahabhuta; Srotas; Shodhana; Shaman.*

Mental Health Sciences

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Abstract

Mental health is a vital component of overall wellbeing and has become a major public health concern in the modern era due to increasing stress, lifestyle disturbances, and psychosocial challenges. While contemporary medicine primarily classifies and manages mental disorders based on symptomatic presentation, Ayurveda offers a fundamental understanding of mental health through the concept of Manas and the theory of Triguna—Satva, Rajas, and Tamas. These three psychological attributes govern cognition, emotional response, behaviour, and overall mental stability.

According to Ayurvedic philosophy, a balanced state of mind is achieved when Satva predominates and Rajas and Tamas remain in equilibrium. Aggravation of Rajas may manifest as restlessness, anger, and anxiety, whereas predominance of Tamas may result in lethargy, confusion, and depressive tendencies. Disturbance of these Gunas, often triggered by Prajnaparadha (intellectual blasphemy), Asatmya Indriyarthasamyoga (improper sensory indulgence), and persistent emotional stress, contributes to the development of various mental disorders.

Ayurveda advocates a holistic management approach through Satvavajaya Chikitsa (psychological regulation and counselling), Daivavyapashraya Chikitsa (spiritual measures), and Yuktivyapashraya Chikitsa (rational therapeutic interventions including Medhya Rasayana, dietary regulation, and lifestyle modification). By restoring Guna equilibrium, this approach not only addresses symptoms but also strengthens psychological resilience.

The present paper explores the relevance of Triguna theory in understanding mental health and highlights its potential role in preventive, promotive, and integrative mental healthcare in contemporary practice

Artificial Intelligence , Machine Learning And Digital Health

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Abstract

Artificial Intelligence (AI), Machine Learning (ML), and Digital Health are rapidly transforming global mental health care by shifting the paradigm from reactive treatment to predictive, personalized, and preventive models. AI-driven algorithms can analyze large-scale multimodal data—electronic health records, speech patterns, wearable biomarkers, and behavioral data—to detect early signs of depression, anxiety, psychosis, and suicide risk with increasing accuracy. Machine learning models enhance diagnostic precision, stratify risk, optimize treatment selection, and support measurement-based care, particularly in low-resource settings where specialist availability is limited. Digital platforms such as tele-psychiatry, mobile mental health applications, online AI organised medicine store, and AI-enabled chat interfaces expand access, improve adherence, and enable continuous monitoring.

From an integrative perspective, Ayurveda offers a complementary biopsychosocial-spiritual framework through concepts such as Manas, Tridosha (Vata, Pitta, Kapha), and Sattva–Rajas–Tamas gunas. Emerging digital phenotyping tools can be mapped with Ayurvedic constitutional assessment (Prakriti analysis), enabling personalized mental health interventions based on psychophysiological patterns. For example, AI models may correlate sleep variability, heart rate variability, and stress markers with Vata aggravation, while inflammatory biomarkers could align with Pitta imbalance. Such integration creates a data-informed, individualized mental wellness model combining evidence-based psychiatry with traditional preventive principles like Dinacharya, meditation, herbal nootropics, and lifestyle correction.

This paper proposes a hybrid framework integrating AI-powered predictive analytics with Ayurvedic personalization to build scalable, culturally sensitive, and preventive mental health ecosystems. The convergence of advanced computation and traditional wisdom can strengthen early detection, reduce stigma, optimize resource allocation, and promote holistic resilience in global mental health systems.

Digital Satvavajaya: Can Artificial Intelligence Support Ayurvedic Psychotherapy? - An Exploratory Inquiry

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Abstract

The rapid expansion of digital technologies has significantly transformed the delivery of mental health care with tele-counselling platforms, mental-health applications and artificial intelligence (AI) - driven conversational systems increasingly being used to provide emotional support and psychological guidance. These developments raise an important question within the context of traditional medical systems: can digital or AI-mediated interactions meaningfully contribute to processes of mental regulation described in classical Ayurvedic psychotherapy?

In Ayurveda, Satvavajaya Chikitsa described in Charaka Samhita refers to strengthening the mind through regulation of thought processes, withdrawal from unwholesome cognitive patterns, and cultivation of emotional stability through mechanisms such as manonigraha (control of the mind), dhairya (emotional resilience) and smriti (restoration of appropriate cognition). Modern digital mental-health tools frequently employ structured reflective dialogue and cognitive guidance approaches that resemble certain elements of contemporary psychotherapeutic frameworks such as Cognitive Behavioral Therapy.

This paper does not assume that artificial intelligence can replicate the full therapeutic depth of Satvavajaya. Instead, it explores the conceptual possibility of “Digital Satvavajaya” by examining whether AI-mediated counselling environments might function as supportive tools for cognitive reflection and emotional regulation. At the same time, the discussion critically considers the limitations of algorithmic therapeutic systems when examined through the classical Ayurvedic understanding of healing, which emphasizes the conscious role of the physician and individualized assessment of the patient, as elaborated in our Samhitas.

Furthermore, the paper raises broader questions regarding the ethical, philosophical and clinical implications of integrating digital technologies into mental health care, including whether technological environments may both

mitigate and unintentionally reinforce patterns resembling Prajnaparadha (errors of intellect) described in Ayurvedic psychopathology.

By presenting these questions, the study aims to initiate dialogue on the possibilities, boundaries and responsibilities involved in aligning emerging AI-based mental health technologies with classical Ayurvedic perspectives on psychological healing. Rather than proposing definitive conclusions. The paper seeks to open an interdisciplinary discussion on how traditional concepts of mental regulation might be understood in the context of an increasingly digital therapeutic landscape.

Keywords: *Satvavajaya Chikitsa; artificial intelligence; digital mental health; Ayurvedic Psychology; tele-counselling.*

Revitalizing the Digital Mind through Medhya Rasayana-A Clinical Review

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Abstract

Background: In our hyper-connected era and Digital Fatigue has emerged as a significant in public health crisis. In adolescents, leading to cognitive decline, reduced attention span, memory impairment, sleep disturbances, and anxiety-related symptoms. Continuous screen exposure, multitasking, and information overload contribute to mental fatigue and neuropsychological stress. In Ayurveda, this phenomenon aligns with Mano-Vaha Srotodushti (channel obstruction) and a disturbance in the functional trio of Dhi (acquisition), Dhriti (retention), and Smriti (recall).

Objectives: This review explores the therapeutic potential of Medhya Rasayana as Ayurvedic nootropics, specifically Brahmi, Mandukaparni, Yashtimadhu and Shankhapushpi in restoring mental equilibrium.

Methodology: A detailed analysis of classical evidence from the Charaka Samhita integrated with modern pharmacological data was conducted to evaluate their neuroprotective and adaptogenic capabilities.

Results: Findings indicate that these herbs effectively modulate neurotransmitters, combat hippocampal oxidative stress and enhance the brain's resilience to digital-induced triggers.

Conclusion: By bridging ancient wisdom with modern neuropsychology, Medhya Rasayana offers a holistic, need a balanced approach to reduce brain fog and anxiety caused by the digital age, so we can maintain long-term mental well-being.

An Experimental Evaluation of Wound Healing Property of *Rhaphidophora Pertusa* (Roxb.)Schott in Wistar Albino Rats

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Abstract

Polycystic Ovary Syndrome (PCOS) is a multifactorial endocrine disorder affecting reproductive-aged women. It presents with menstrual irregularities, hyperandrogenism, infertility, and metabolic disturbances. Conventional therapies offer symptomatic relief but often fail to correct underlying imbalances. Ayurveda offers a holistic approach through *Ekamoolika Prayoga* (single herb therapy) and lifestyle modification via *Pathya-Apathya* (wholesome/unwholesome practices). This review consolidates classical and contemporary evidence supporting these interventions. Single-drug therapy using herbs such as *Shatavari*, *Ashoka*, *Lodhra*, *Guduchi*, and *Ksheerakakoli* regulates hormonal function, supports ovulation, and improves metabolic parameters. Integrating diet and lifestyle management enhances therapeutic efficacy. Standardized clinical studies are required to validate these interventions and develop treatment protocols.

Keywords: PCOS; Ayurveda; *Ekamoolika Prayoga*; *Pathya-Apathya*; Herbal Therapy; Lifestyle

Yoga & Mind-Body Practices

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Abstract

Introduction: Yoga and mind-body practices have gained increasing attention in contemporary healthcare due to their holistic approach toward physical, psychological, and emotional well-being. Rooted in ancient Indian philosophy and systematically described in the Yoga Sutras of Patanjali, yoga integrates physical postures (asana), breathing techniques (pranayama), meditation (dhyana), and ethical principles to harmonize body and mind. Modern research suggests that regular engagement in yoga-based interventions contributes to stress reduction, improved autonomic regulation, enhanced musculoskeletal flexibility, and better metabolic outcomes.

Mind-body practices function through psychophysiological mechanisms, including modulation of the hypothalamic-pituitary-adrenal (HPA) axis, reduction in sympathetic overactivity, and enhancement of parasympathetic tone. Evidence indicates significant benefits in managing chronic conditions such as hypertension, diabetes mellitus, anxiety disorders, depression, and chronic pain syndromes. Furthermore, yoga enhances emotional resilience, cognitive clarity, and sleep quality, thereby improving overall quality of life.

Neurobiological studies demonstrate that meditation and controlled breathing practices positively influence brain plasticity, emotional regulation networks, and inflammatory markers. As a low-cost, non-pharmacological

intervention with minimal adverse effects, yoga offers a sustainable adjunct to conventional medical treatment. However, standardization of protocols and large-scale randomized controlled trials are necessary to strengthen the evidence base.

Conclusion: Yoga and mind–body practices represent an integrative therapeutic approach that bridges traditional wisdom and modern science. Their incorporation into preventive and rehabilitative healthcare models may significantly contribute to global health promotion and disease management strategies.

A Case Study of *Grahani* (Irritable Bowel Syndrome)

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Abstract

Irritable bowel syndrome (IBS) is the most prevalent disorder of brain gut interaction which affects 5 to 10 percent of general population worldwide and 4 to 7.5% in Bharat in the pathogenesis of IBS is poorly understood, although roles for abnormal gut motor and sensory activity, central neural dysfunction, psychological disturbances, stress, disturbed gut microbiota and luminal factors have been proposed. In *Ayurveda*, *Grahani Roga* is correlated to IBS due to similarity in their clinical presentation. In this case an effort was made to treat a 42 years old male patient with complaints of gradually losing weight with *Udarshool* (abdominal pain), *Vibandh* (Constipation), *Aadhman* (Flatulence), *Aanterkunjan* (intestinal sound), suddenly Breathlessness with chest pain, weakness and anxiety. Patient treated with *Panchakarma* procedures (*Shirodhara*, *Swedan*), and oral medications. After one month of treatment patient got significant improvement in constipation, anxiety, *aadhman*, chest pain, abdominal pain. 7 kg weight gained in 4 months of treatments.

Keywords :- *Grahni; Irritable Bowel Syndrome; Ayurveda; Udarshhol; Aadhman; Aanterkunjan; Panchkarma; Shirodhara; Swedan*

Posters

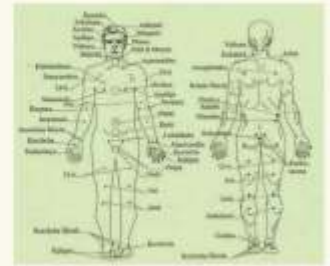
THERAPEUTIC POTENTIAL OF MARMA CHIKITSA IN MUSCULOSKELETAL, NEUROPATHIC AND PSYCHOSOMATIC PAIN

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01 INTRODUCTION

Marmas are vital anatomical points formed by the convergence of Mamsa (muscles), Sira (vessels), Snayu (ligaments), Asthi (bones), and Sandhi (joints). They are considered the seat of Prana (vital life energy). Marma Chikitsa utilizes controlled, non-invasive stimulation of these points to activate endogenous healing mechanisms and restore physiological and psychological homeostasis.



02 MUSCULOSKELETAL PAIN MANAGEMENT

- Clinical Evidence: Systematic reviews and case studies demonstrate significant efficacy in chronic degenerative and inflammatory conditions.
- Cervical & Lumbar Spondylosis
- Knee Osteoarthritis
- Frozen Shoulder
- Tennis Elbow
- Sciatica

03 OBSERVED OUTCOMES

- ✓ Significant reduction in VAS pain scores
- ✓ Improved range of motion and reduced stiffness
- ✓ Faster symptomatic relief compared to conventional conservative therapy

04 NEUROPATHIC PAIN

Stimulation of Shiro marmas (head marmas) demonstrates marked efficacy in migraine management. Key Marmas: Vidhura • Apanga • Avarta • Sthapani • Simanta • Shringataka • Adhipati
Results:
✓ significant reduction in nausea and vomiting



05 PSYCHOSOMATIC ASPECTS

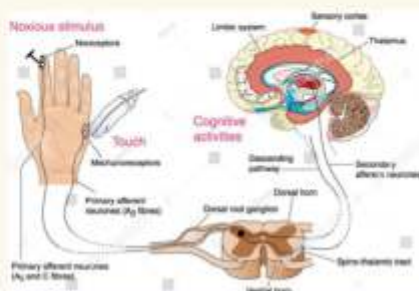
Marma Chikitsa may help bridge somatic and psychological domains. Indications: Anxiety, Depression, Stress-related disorders.

Proposed Mechanisms:

- Hormonal modulation (↓ cortisol, ↑ endorphins & serotonin)
- Autonomic regulation (parasympathetic dominance)
- Improved mental clarity and reduced brain fog.

06 WHY IT WORKS – INTEGRATIVE VIEW

- Peripheral nerve neuromodulation,
- Gate control theory of pain,
- Endogenous opioid release



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ROLE OF TRAYOPASTAMBHA IN MANASIKA SWASTHYA

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INTRODCUTION

- > Trayopastambha = AHARA, NIDRA & BRAHMACHARYA : are the 3 pillars of life
- > Described in Charaka Samhita
- > Supports sharira and Manas

त्रय उपस्तम्भा इति-
आहारः, स्वप्नो, ब्रह्मचर्यमिति;

- Cha.Su11/35

OBJECTIVES

- To explore Trayopastambha in mental health
- To explain preventive role

THREE PILLARS OF LIFE

AHARA



- Sattvika diet promotes calmness & clarity
- Medya dravyas like brahmi & shakapushpi improve cognition
- Viruddha ahara & junk food increase rajas & tamas, leading to irritability & anxiety

NIDRA



- > Nidra restores Manas Bala, memory, emotional stability
- > Nidra nasha leads to anxiety, poor concentration, depression
- > Simple measures like regular sleep schedule, abhyanga improve mental health

BRAHMACHARYA



- > Indriya nigraha, regulated sexual conduct
- > Sadvritta & achara rasyana
- > It improves cconcentration, emotional control, & reduces impulsiviyy thereby enhancing Satva

MATERIAL



- Ayurvedic classical textbooks
- Relevent websites, research articles eyc



AYURVEDIC PRINCIPLES IN MENTAL HEALTH

According to Ayurveda, mental health depends on the balance od SATVA, RAJAS & TAMAS

- > SATVA – Clarity, emotional stability
- > RAJAS – Agitation, anxiety
- > TAMAS – Inertia, depression

Disturbaces of these gunas leads to conditions like CHITTODVEGA, VISHADA & NIDRANASHA



CONCLUSION

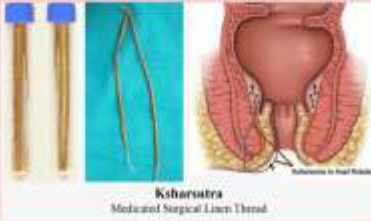
Trayopastambha is

- cost-effective,
- preventive &
- Holistic lifestyle

By prompting satva, ojas & mano bala, it plays a vital role in psychological well-being

1 Kshara Sutra

Medicated alkaline thread (seton) therapy – highly effective for treating fistula-in-ano, hemorrhoids (piles), and other ano-rectal disorders with minimal recurrence.



2 Agnikarma

Therapeutic thermal cauterization using heated instruments – excellent for pain relief in musculoskeletal issues, warts, chronic wounds, and Vata-related conditions like joint pain.



3 Raktamokshna

Controlled bloodletting (e.g., via Siravedha or leech) – removes vitiated blood to treat inflammatory conditions, skin disorders, abscesses, and hypertension-related issues



6 Dominant Aspect of Shalya Chikitsa in Ayurveda

Poster Presented by : Dr. Kirti Choudhary



4 Marma Chikitsa

Therapy targeting vital energy points (Marma) – relieves pain, restores mobility, and aids recovery in trauma, fractures, frozen shoulder, and chronic neuromuscular disorders.



5 Varna Chikitsa

60 types of Specialized wound management – heals chronic ulcers, diabetic foot, abscesses, and post-injury wounds using debridement, herbal dressings, and bandaging techniques.



6 Pradhana Shalya Chikitsa

Core surgical interventions – includes excision, incision, fracture reduction, hernia repair, stone removal, and emergency procedures for trauma, cysts, and obstructions

Ankylosing Spondylitis

Ankylosing Spondylitis is often correlated with Gambhir Vatarakta in Ayurvedic literature due to shared features like chronic stiffness, deep joint involvement, and progressive deformity

Aspect	Ankylosing Spondylitis (Modern)	Gambhira Vatarakta (Ayurveda)
Defination	A chronic inflammatory arthritis primarily affecting the spine and sacroiliac joints, leading to pain, stiffness, and potential fusion of the vertebrae (bamboo spine)	A deep-seated form of Vatarakta, where vitiated Vata Dasha abstracts and aggravates Rakta Dhatu (blood tissue), affecting deeper tissues like bones (Asthi), marrow (Majja), and joints, causing stiffness and pain.
Cause	Genetic factors (e.g., HLA-B27 gene), autoimmune response, environmental triggers.	Vitiation of Vata & Rakta due to apathya aahara and vihara.
Symptoms	Chronic low back pain, morning stiffness (>30 min), pain improving with exercise but worsening at rest, alternating buttock pain, reduced spinal mobility, fatigue, eye inflammation (uveitis).	Severe joint pain (Arati), stiffness (Stabdhata), swelling (Shotha), burning sensation (Daha), tingling (Sphuran), heaviness, numbness, affecting deeper joints like spine and hips.
Diagnosis	Clinical history, physical exam, imaging (X-ray/MRI showing sacroillitis or bamboo spine), blood tests (HLA-B27, CRP, ESR).	Based on Dasha assessment (Nadi Pariksha, symptoms), history of Nidana (causes), and correlation to Vatarakta features in texts like Charaka Samhita.
Treatment	NSAIDs for pain, biologics (TNF inhibitors like etanercept), DMARDs (sulfasalazine), physiotherapy, surgery for severe cases.	Panchakarma (Basti, Virechana for detoxification), internal herbs (Guggulu, Manjistha, Guduchi), external therapies (Abhyanga, Lepa), diet/lifestyle corrections to balance Doshas

Poster Presented by : Dr Narender Kumar
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