

# Management of Depression through Ayurvedic Approach

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**Abstract:** One of the psychological disorders that people experience most frequently today is depression. Worldwide, depression is a common illness, according to WHO. Different from typical mood swings and emotional responses to day-to-day difficulties is depression. The premonitory symptoms of Vishad, a term used in traditional Ayurvedic literature to characterise constrained or hypokinetic speech, body, and mental activity, are thought to be related to symptoms of depression, according to traditional Ayurvedic literature. To treat depressive diseases, the Ayurvedic system suggests a number of herbal compositions and therapies. Patients are increasingly turning to herbal and other natural +therapies for the management and treatment of psychiatric problems due to the rising costs of prescription pharmaceuticals and their undesirable side effects. The purpose of this review is to raise awareness of the use of herbal treatments.

**Keywords:** Vishad, Depression, Mano-avasada, Rasayana.

## Introduction

A common psychiatric disorder, depressive disorder affects 21% of people worldwide. <sup>[1]</sup> Along with mania, hypomania, and bipolar illnesses, depression is one of several conditions that have an impact on mood. <sup>[2]</sup> A set of brain illnesses with a wide range of aetiologies known as depression are defined by a variety of symptoms that reflect changes in cognitive, psychomotor, and affective functions. The term "depression" is used to describe a variety of mental health conditions marked by a loss of interest in routine activities, a depressed mood, and a number of related emotional, cognitive, physical, and behavioural symptoms. <sup>[3]</sup>

## Epidemiology:

The World Health Organization (WHO) lists depression as the second largest cause of morbidity by 2020, and it rates it as the fourth main cause of failure globally.

According to a WHO assessment, the majority of conventional medicines are used by around 60% of people worldwide. <sup>[4]</sup> According to the Global Burden of Disease report, unipolar depressive episodes had a point prevalence of 1.9% for men and 3.2% for women, and a one-year prevalence of 5.8% for males and 9.5% for women. If demographic and epidemiological trends continue, it is predicted that by 2020, the burden of depression will represent 5.7% of the total burden of disease. <sup>[5]</sup>

Depression is distinct from common mood swings and fleeting emotional reactions to problems in daily life. Depression has the potential to develop into a significant medical disease, particularly if it is persistent and of moderate to severe intensity. Suicide can result from depression at its worst. Every year, around 700,000 people die by suicide. For people aged 15 to 29, suicide is the fourth most common cause of death. <sup>[6]</sup>

## Symptoms:

1. Feeling sad or having depressed mood
2. Loss of interest or pleasure in activities
3. Changes in appetite
4. Trouble sleeping or sleeping too much
5. Loss of energy
6. Increase in purpose physical activity (e. g, Inability to sit still, hand wringing) or slowed movements or speech
7. Feeling worthless or guilty
8. Difficulty thinking, concentrating or making decisions
9. Thoughts of death or suicide <sup>[7]</sup>

## Classification:

The mono- and bipolar dichotomy provides the basis for the international classification of depression. There are two types of unipolar depression: reactive and endogenous, in which mood swings always go in the same direction. About 75% of instances of depression are reactive, non-familial, obviously linked to stressful life events, and accompanied by symptoms of anxiety and agitation. A family pattern, unconnected to external pressures, and a slightly different symptomatology are present in endogenous depression (approximately 25% of cases). Early adulthood is when bipolar depression typically first manifests. <sup>[8]</sup>

Sr.No.	Types of Depression	Characteristics
1.	Major Depressive disorder	Significant depressive disorder is a frequent and severe condition that is characterised by recurrent bouts of major depression. 4.4% of all diseases in the world's population are major depressive disorders. The severity of major depression can range from mild to severe. A person with significant depression experiences sleep, appetite, and general activity difficulties for

		longer than two weeks, as well as a persistently poor mood, anhedonia, negative cognition, and other symptoms. <sup>[9]</sup>
2.	Dysthymia (Minor depression)	It is a more persistent, milder mood disorder where a person reports having a bad mood practically every day for at least two years. Although patients with dysthymia are susceptible to secondary bouts of major depression, the symptoms are not as severe as those for major depression. A low-grade persistent depression that has persisted for two years or more is referred to as dysthymia. <sup>[10]</sup>
3.	Bipolar Depression	Previously called as manic-depressive disorder, it is a condition in which alternating episodes of depression and mania or hypomania occur. Debate rages despite the fact that depression is currently classified as a distinct condition since people with serious depression frequently have hypomanic symptoms, suggesting a continuum of mood disorders. <sup>[11]</sup>
4.	Melancholic Depression	It is distinguished by a lack of enjoyment in most or all activities, a failure to react to pleasurable stimuli, a depressive mood quality that is more pronounced than that of grief or loss, an aggravation of symptoms in the morning, early morning waking, psychomotor retardation, excessive weight loss, or excessive guilt. <sup>[11]</sup>
5.	Atypical Depression	As a result of the hypersensitivity to perceived interpersonal rejection, it is linked to labile mood, hypersomnia, increased appetite and weight gain, leaden paralysis (a feeling of heaviness in the limbs), and considerable social impairment. <sup>[12]</sup>
6.	Catatonic Depression	It is a rare and severe case of serious depression that includes other symptoms such as motor behaviour abnormalities. In this case, the person is motionless or makes strange, even weird, movements while remaining quiet and nearly stuporose. Unipolar depression is the diagnosis when a person simply has depression and not mania. Bipolar affective disorder is the diagnosis if manic or hypomanic episodes are present. <sup>[12]</sup>

### Pathophysiology of Depression

An disturbance in the brain's structure and function is part of the pathophysiology of depression. In a number of depressed patients, excessive corticotropin-releasing hormone synthesis results in excessive stimulation of the hypothalamic-pituitary-adrenal axis. <sup>[13]</sup> The hippocampus's size decreases, the frontal lobe's volume decreases, and the ventricular-brain ratio increases are some of the anatomical alterations in the brain associated with depression. <sup>[14, 15]</sup> In addition, neurotransmitters—including low levels of monoamines, particularly serotonin and norepinephrine—play a crucial role in the pathophysiology of depression. <sup>[16]</sup> Numerous retrospective and prospective investigations have demonstrated that serotonin levels are lower in the brains of depressed people, which is important in the development of depression. <sup>[17]</sup> Tryptophan, a precursor to serotonin, is also present in depression at lesser concentrations in the brain. <sup>[18]</sup> Dopamine and norepinephrine, two catecholamines, have also been linked to depression. <sup>[19]</sup> Other neurotransmitters may also be aberrant in depression, including altered levels of GABA and glutamate in various brain regions like the prefrontal cortex and occipital lobe.

### Etiology of Depression

Depression's aetiology can be broken down into predisposing, triggering, and perpetuating elements. Predisposing elements include genetics, physical fitness, psychological traits, and social support. <sup>[20]</sup>

The following things may contribute to depression:

- **Biochemistry:** Variations in a few brain chemicals may be a factor in the manifestation of depressive symptoms. Depression may run in families due to genetics. For instance, if one identical twin develops depression, there is a 70% probability that the other would also get the condition at some point in life.
- **Personality:** It seems that those who have low self-esteem, are easily stressed out, or are usually gloomy are more prone to suffer from depression.
- **Environmental factors:** Some people may be more susceptible to depression if they are constantly exposed to violence, neglect, abuse, or poverty.

### Importance of Ayurveda in Depression

The conventional Indian medical practise known as ayurveda is still among the oldest extant traditions with a strong intellectual and experimental foundation. It is a science of life that emphasises customised treatment and a holistic approach to health. It is well recognised to be a comprehensive medical system that included mental, emotional, spiritual, philosophical, and ethical wellness. <sup>[21]</sup>

Ayurveda is an age-old medical system from India that addresses both physical and mental/spiritual health issues. Therefore, it provides a fantastic position from which to offer viable remedies for the global epidemic of poor psychological health. Ayurveda provides a safe, all-natural treatment for depression, anxiety, and stress. Additionally, ayurvedic drugs for stress offer extra advantages.

According to Ayurveda, the three elements known as the three doshas (tridoshas), namely vata, pitta, and kapha, govern human health. Kapha imbalance is the cause of depression, and modifications to the electrochemistry of the brain can promote a vata shift,

which may also result in a decrease in metabolic enzyme activity (also known as a shift in pitta). Kapha imbalance in these three doshas can cause weight, darkness, worry, and tension, which frequently result in hopelessness and sadness. <sup>[22]</sup>

#### **DEFINITION OF MANO-AVASADA (Depression)**

The idea of Avasada is: The roots of the word Avasada are Ava+Sad+Dhyani. Avasanna (lackadaisical, depressed), Vishada (melancholy, depressed), and Sadanam are the symptoms (sadness, dejection). Literally translated as depression, avasada Manasa Dosha Vikara has been discussed in relation to the word Vishada. When referring to a feeling of depression, Charaka used the term "Sadanam" and called it "Kaphaja Unmada" <sup>[23]</sup>.

#### **NIDANA OF MANO-AVASADA**

Although the precise cause of Vishada is not stated in traditional writings, it can be deduced from the Doshic predominance present in the path physiology. The foundation of disease and happiness is made up of both the physical structure and the psychology. <sup>[24]</sup> The two pathogenic variables for mental diseases are rajas and tamas. While Tamas controls and occasionally prevents the acts, Rajas is responsible for all of the activity. <sup>[25]</sup>

#### **AYURVEDIC REMEDIES FOR DEPRESSION**

Three sorts of treatments for bodily and mental problems are described by Acharya Charaka: Spiritual therapy is provided by Daivavyapashraya, physical therapy by Yuktivyapashraya, and mental therapy by Satvavajaya.

##### **1. Daivavyapashraya Chikitsa (Spiritual Therapy)**

It entails the recitation of mantras, the taking of medications, the wearing of gems and roots, the Bali (offering), the Upahara (gift), the Homa, the Niyama, the Prayascita (atonement), the Upavasa (fasting), the Pranipata, and the Yatragaman, among other practises (pilgrimage). These techniques inspire and build up the individual.

##### **2. Satvavajaya Chikitsa** The words "Sattava" and "Avajaya" both refer to the mind.

Removal of the mind from dangerous objects. It implies that after discovering the true nature of the soul and achieving the pinnacle of spiritual enlightenment, a person should remain rooted in themselves. <sup>[26]</sup>

##### **3. Naisthikichikitsa "Naisthiki ya vinopadham"**

Refers to the complete eradication of suffering achieved through doing away with wants, which are the source of all suffering. Salvation is nothing but the complete removal of suffering. The only way to get to this point is to get go of your desires. Once such impulses are rejected, there is no longer any attachment to or anger toward one's acts, eliminating the potential for new sources of suffering. <sup>[27]</sup>

##### **4. Yoga moksho pravarkak**

It implies that doing yoga is a way to achieve Moksha. The concept of moksha refers to the soul's complete separation from all mental and physical interactions. Karmakshaya (loss of deeds) is caused by an increase in Satva and a decrease in Raja and Tama, which aids in achieving

##### **5. Aahar**

The patient's diet should be pleasant, enticing, and healthful. It should be high in vitamin D, Omega 3 fatty acids, vitamin B, zinc, foods high in protein, and foods containing selenium (whole grain, some seafood, organ meat like liver etc). <sup>[28]</sup>

##### **6. Vihara Chikitsa**

Modifying one's lifestyle is crucial in the treatment of depression. Depressed people should receive training in a variety of yoga, aerobic, music, and breathing techniques to help them manage stress and promote mental relaxation. <sup>[29]</sup>

##### **7. Shock treatment**

He should be exposed to breathtaking landscapes, informed of the passing of a loved one, and put in danger by creatures with horrifying forms; Elephants and non-toxic, domesticated wild animals frightened him by tying him up with ropes or beating him. <sup>[30]</sup>

##### **8. Rasayana**

Rasayana are used to rejuvenate the body, increase longevity and improve the quality of life. Rasayanas improves immunity levels as well as enhance the function of endocrine, Psychological and neurological system. Shilajit Rasayana Kalpa, Amalaki Rasayana, Brahmi Ghrita, Panchagavya Ghrita. <sup>[31]</sup>

##### **9. Yuktivyapashraya Chikitsa - 3 types (Antarparimarjana, Bahirparimarjan, Shastapranidhana)**

###### **1. Antarparimarjana (Internal cleansing)**

- a. Samshodhana (Purification)- That is elimination of vitiated Doshas by Panchacarma therapy.
- b. Samshaman (Alleviation)

It includes different type of drugs, diet activities used to alleviate the vitiated doshas. E.g., Medhya rasayana, Saraswat ghrit, Kalyanak ghrit etc.

###### **2. Bahirparimarjana (External cleansing)**

It includes procedure like Snehan (oileation) & Swedana (sudation), Lepa (Liniment), Parisheka (Fomentation), Shirodhara etc.

###### **3. Shastapranidhana (Surgical or para-surgical procedures)**

Bloodletting has been recommended for a number of different mental problems. Although the three-fold therapy described above is most useful for treating physical illnesses, it can also be used to treat mental issues (like Insanity, Epilepsy, and Depression etc). <sup>[32]</sup>

##### **10.Panchkarma**

It is a potent Ayurvedic therapy that balances the Doshas or Energy Types by removing harmful toxins from the body, increasing metabolic rate, and improving digestive fire.

##### **Discussion**

One of the most prevalent conditions, depression results in unhappiness, boredom, guilt feelings, and decreased appetite. The psychological causes of stress and depression in the modern world include pressure at home, at work, to keep up with others, to meet deadlines, persistent or repeated fears of failing or falling behind, and unfulfilled goals to achieve things like fitness, certain body types, etc. Manasa vikara often progresses in a step-by-step manner, starting with small general behavioural signs and ending with a noticeable change in Budhi, Dhriti, and Smriti. An individual's quality of life may be greatly impacted by depression, and managing it can be difficult.

Unipolar major depression has a complicated aetiology and pathophysiology that is mostly based on neurobiological research in clinical psychiatry. Depression is believed to result from the interaction of hereditary and environmental variables. The idea of the "Psyche" and "Soma" having a mutually beneficial interaction is at the core of Ayurvedic psychiatry. Physical elements like food intake and daily activities have an impact on psychic factors as a whole.

### Conclusion

Depression is one of the most prevalent mental illnesses that categorically manifests as a depressed mood. Depression is a mood condition marked by a depressed mood, a sad feeling that doesn't go away, loss of appetite, disturbed sleep, etc. Different emotional disturbances can both induce and worsen depression illnesses. Actually, all forms of depression diseases are derivatives of the original condition. For the prevention or treatment of psychological problems, Daivavyapashraya (spiritual therapy), Yuktivyapashraya (physical therapy), and Satvavajaya (mental therapy) are all required. According to the results of this literature review, a mix of hereditary and environmental variables contribute to the development of depression, a common psychiatric illness. Rasayana therapy can be used in conjunction with current psychotherapy to treat depression, even though it plays a significant part in the treatment of the condition.

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