



Clinical Study

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Comparative Clinical study on the therapeutic effect of *Saraswatharista* and *Jaladhara* in *Nidranasha* W.S.R. to Insomnia

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ABSTRACT

Nidra is considered as one among the *Trayoupasthambha*¹ which is very essential to lead happy and healthy life. In present era because of stressful lifestyle many people suffering from one or the other psychosomatic illnesses, among that insomnia is the most common health problem which affects the functions of central nervous system and even other systems. Around 9% of general population are suffering from insomnia, around 28% of people suffering from initiation and maintenance of sleep. At present the medical management of insomnia includes different variety of benzodiazepines² which causes various toxic effect and also drug dependency. For this one can find out the best remedies in *Ayurvedic* system of medicine, for the treatment of this disease. *Saraswatharista*² is one of the best *shamana* medicine with *Bramhi panchanga* as main ingredient, having *Rasayana* effect as well as properties which can cure the diseases like *Unmada*, *Mada*, *Apasmara* as both *Shareerika* and *Manasika vyadhi* are inter-related⁶. And *Jaladhara* is very safe, effective, readily available and cost effective without any side effect which mainly having *aaswasahara*⁴ and *nidrajanana* action hence, present clinical trial is planned to compare the therapeutic effect of *Saraswatharista* and *Jaladhara* in *Nidranasha* with special reference to Insomnia is undertaken.

Keywords: *Nidra*, *Jaladhara*, Benzodiazepines, Insomnia.

INTRODUCTION

Ayurveda is the holistic and time tested evidence based medicine which understands disease is mainly because of *dushti* of the either *shareerika* or *manasika dosha*. At present scenario of life because of stress most of the individuals are suffering from one or the other psychosomatic disorders. *Ahara (Food)* *Nidra (Sleep)* and *Bramhacharya (Abstinence)* are described to be the *Trayoupasthambas*. Hence forth, Sleep is one of the essential thing to lead a healthy life. It has been rightly stated by *Acharya Charaka* that happiness & misery, proper & improper growth, good strength & weakness, potency & sterility, knowledge & ignorance and life & death of an individual mainly depends on proper and improper sleep respectively. Insomnia (inadequate quality and quantity of sleep) may be a symptom of stressful lifestyle, depressive illness, anxiety disorders, many psychiatric diseases or any other pathological conditions. Whatever may be the cause, it needs immediate attention. It is affecting nearly about 1/3rd of population (especially youth) in western countries and the incidences are increasing day by day. If insomnia is left untreated, it may reduce mental capacity of an individual, hampers physiological functioning of body and ultimately it may drag the individual towards several severe psychosomatic ailments.

AIMS AND OBJECTIVES OF THE STUDY:

- 1) To evaluate the therapeutic effect of *Saraswatharista* in *Nidranasha*.
- 2) To evaluate the therapeutic effect of *Jaladhara* in *Nidranasha*.
- 3) To compare the therapeutic effect of *Saraswatharista* and *Jaladhara* in *Nidranasha*.

MATERIALS AND METHODS

Inclusion criteria:

- Patients of both sex between 16 to 60 years of age.
- Patients with signs and symptoms of *Nidranasha*-
 - *Jrimba (Yawning) Tandra (Drowsiness)*
 - *Angamarda and angasada (Malaise)*

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- *Shirashoola (Headache) Manodourbalya (Lack of concentration)*
- *Smritidourbalya (Lack of memory) Indriya karmahani (Poor sensory perception)*
- *Ajirna & Agnimandya (Indigestion) Malabadhata (Constipation)*
- *Dhatu kshaya (Weight loss) Kanti kshaya (Loss of luster)*

- *Nidranasha* patients with chronicity of 1month to 10yrs.

Exclusion criteria

- Patients below 16 yrs. and after 60 yrs. of age.
- Patients with major psychiatric illnesses like Schizophrenia, Bipolar mood disorder.
- Patients having chronic illness like IHD, COPD, malignancies.
- Patients with RTA.

Diagnostic Criteria

As per *nidranasha laxana* mentioned in classics

Jrimba (Yawning) Tandra (Drowsiness)

Angamarda and angasada (Malaise)

- *Shirashoola (Headache) Manodourbalya (Lack of concentration)*
- *Smritidourbalya (Lack of memory) Indriya karmahani (Poor sensory perception)*
- *Ajirna & Agnimandya (Indigestion) Malabadhata (Constipation)*
Dhatu kshaya (Weight loss) Kanti kshaya (Loss of luster)

DESIGN OF THE STUDY

- Comparative clinical study with pre-test and post-test design.

Intervention:

- ***Saraswatharista group (S -group):*** 20ml, twice a day, after food with warm water

DRUG INGREDIENTS:

SL. NO DRUG	DRUG	BOTANICAL SOURCE	PART USED	QUANTITY USED
1.	Brahmi	Bacopa monnieri	Plant	6240gm
2.	Shatavari	Asparagus racemosus	Root	1560gm
3.	Vidarika	Pueraria tuberosa	Root	1560gm
4.	Abhaya	Terminalia chebula	Pulp	1560gm
5.	Ushira	Vetiveria zezanoides	Root	1560gm
6.	Ardra	Zingiber officinale	Rhizome	1560gm
7.	Mishi	Foeniculum vulgare	Fruit	1560gm
8.	Makshika		Honey	3.12kg
9.	Sita	Saccharum officinarum		7.8kg
10.	Dhataki	Woodfordia fruticosa	Flower	1560gm
11.	Renuka	Vitex negundo	Seed	78gm
12.	Trivrt	Operculina turpethum	Root	78gm
13.	Kana	Piper longum	Fruit	78gm
14.	Devapushpa	Syzygium aromaticum	Flower bud	78gm

Jaladhara group (J – Group):

- The patients of this group were subjected to *Jaladhara* for 30 minutes daily in the Morning between 8:30 to 11:00 AM for 7days.

Poorva karma

Dharapatra prepared from steel, whose mouth is wide and side are tapering gradually to a ventral point in the bottom. At the centre of this *dharapatra* a hole of little Finger size is made, at this point a brass cork was fixed with a provision of screw to Stop or start the *Jaladhara*. The capacity of the *Patra* was about 3 liters. *Dharapatra* was hanged on the hanger wire. So that it was about 4 finger (3 inches) just above the Patient's head.

The fresh tap water is used for *Jaladhara* at room temperature and it is collected to avoid wetting of the floor but not reused. The patient is asked to pass his natural urges before laying on *Dhara* table. The patients are allowed only to take tea, if they were addicted to it. The patient is asked to lay down on *Dhara* table on his back with his head resting on slightly elevated wooden platform made in the table. Then both the eyes covered with cotton piece. The patient's pulse, respiratory rate and blood pressure are recorded before starting the *Jaladhara*.

Pradhana karma

The fresh tap water at room temperature is filled up about three fourth of its capacity in *Dharapatra* and poured in oscillating movement continuously on the forehead of the patient for 30 minutes. The fresh water is used to refill the *Patra*.

Paschat karma

After *Jaladhara*, water is wiped with a napkin. Pulse, respiratory rate and blood pressure are again recorded. The patient is asked to sit in the room for some time before leaving the *Dhara* room.

DURATION OF STUDY: 7 Days

15.	Vacha	Acorus calamus	Rhizome	78gm
16.	Kushta	Saussurea lappa	Root	78gm
17.	Vajigandha	Withania somnifera	Root	78gm
18.	Vibheetaki	Terminalia bellirica	Pulp	78gm
19.	Amruta	Tinospora cordifolia	Stem	78gm
20.	Ela	Elettaria cardamomum	Seed	78gm
21.	Vidanga	Embelia ribes	Fruit	78gm
22.	Twak	Cinnamomum zeylanicum	Stem bark	78gm

ASSESSMENT CRITERIA:

Questions	Never	Rarely	Occasionally	Most nights/days	Always
1. Do u have trouble falling asleep?	1	2	3	4	5
2. Do u have trouble staying sleep?	1	2	3	4	5
3. Do you wake up un-refreshed?	1	2	3	4	5
4. Do you take anything to help u sleep?	1	2	3	4	5
5. Do you use alcohol to help you sleep?	1	2	3	4	5
6. Do you have any medical condition that disrupts your sleep?	1	2	3	4	5

DISCUSSION

Anidra or *Nidranasha* is enumerated as one among the *Vataja nanatamaja vikara*. It is also included as one of the symptoms in *vata & pitta dosha vridhhi lakshanas* and certain diseases. *Kaphadosha, Tamas, Hridaya and Samjnavaha srotas* are responsible for induction of sleep. During the explanation of *Nidra Utpatti* classical texts explained that both *Shareerika* and *manasika* Dosha plays an important role. when *manas* become *klanta*, *indriya* are unable to perform their normal function. In case of *Nidranasha* the available modern medicines are having various adverse effect and even drug dependency for that Ayurvedic system of medicine is having very safe and effective remedies. *Saraswatharista* is the very common drug having best *medhya* drug that is *Bramhi panchanga*. And even it acts as best *rasayana* and *shamana* medicine having *chittasantosha* and *nidrajanana* action.

CONCLUSION

To conclude On the basis of various clinical trials it is proved that *saraswatharista* is considered best drug of choice in *Nidranasha*. And it is very simple, common medicine with *Bramhi panchanga* as main ingredients having *tikta rasa*, *ushna veerya* and *medhya* property. *Nidranasha* is one among the *vataja natmaja vikara* for *vata shamana*, *nidrajanana* and *aaswasahara* action *saraswatharista* and *jaladhara* are very safe, cost effective and easily available medicines.

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