E-ISSN: 2583-1615

Impact Factor: 3.133

A Case Study of the Ayurvedic Treatment to Hyperactive Disorder with Attention Deficit

Pages: 24-26

*1Silswal M1, 2Yadav H1 and 3Sharma P

*1MD Scholar, Department of Panchkarma, Rishikul Campus, India.

²Assistant professor, Department of Panchkarma, OM Ayurvedic College, India.

³Assistant Professor, Department of Panchkarma, Rishikul Campus, India.

Abstract

One of the most prevalent neurobehavioral disorders in children, ADHD frequently persists into adulthood. Children with ADHD may exhibit impulsive behaviour (doing without considering the consequences) or excessive activity. It is typical for kids to occasionally struggle with their attention spans and manners. However, these behaviours do not just disappear in children with ADHD. Current research indicates that heredity has a significant influence in ADHD, despite the fact that the actiology and risk factors are unknown. Along with behavioural therapy, ayurvedic treatments that improve brain function, increase concentration, and quiet the mind can be highly beneficial for ADHD patients.

Keywords: ADHD, vata roga, ayurveda, mastishka gata vata

Introduction

Millions of youngsters worldwide suffer from ADHD, which frequently lasts into adulthood. Inability to maintain focus, excessive movement that is inappropriate for the environment, and impulsivity are all signs of ADHD (hasty act that occur in the moment without thought). The persistent, sometimes severe symptoms might make it challenging to function at work, home, or with friends. Scientists are researching causes and risk factors due to the lack of a documented aetiology in an effort to improve management and lower the likelihood that someone may develop ADHD. According to the symptoms, Dhee, Dhriti, and Smriti Vibhrams are also associated to ADHD.

Ayurvedic Concept

Ayurveda makes no mention of ADHD as a distinct condition. However, certain abnormal behaviour has been noted in Ayurveda, including Dhee's vitiation, Smriti vitiation (memory), and Dhriti vitiation (the retaining/intellect energy of the mind), which may be related to ADHD. As a result, there is an irregular pattern of behaviour that affects how the senses interact with their intended uses. As a result, impulsivity, excessive activity, and inattention occur, which are the hallmarks of ADHD. Sadhaka Pitta, a dosha that regulates emotions and their impact on heart function, and Prana Vata are linked to memory (controls the mind, sensory perception and brain). Movement, activity, the process of thought, expression, perception of sense objects, etc. are all under the influence of the vata dosha.

Case Details

Sex -Male Religion -Sikhism

Socio-economic status – Middle class Father's occupation – working in private sector Mother is House wife

Chief Complaints

Delayed speech, behaviour abnormality, less interaction with parents and family members, unable to sit in one place, hyperactive and poor eye contact since birth.

History of Present Illness

After nine months, the patient underwent a lower segment caesarean section (LSCS), and she did not cry right away. For 10 to 16 hours, the patient was on ventilator. With the exception of speaking, all of his developmental milestones were met, but his parents did observe that he was hyperactive. His parents saw that he had trouble focusing, was quickly irritated, shouted a lot, and couldn't utter more than two words at once. Poor eye mobility was also a complaint. Common indications include parents feeling ashamed of their son's mischievous behaviour. Since then, the parents have started to treat the youngster, visiting numerous doctors without seeing any notable results. They came to us for more management.

Family History

No significant ancestry or consanguinity was discovered.

Treatment History

For 10 to 16 hours, the youngster was on ventilation. He spent four months receiving physical treatment, speech therapy, play therapy, and occupational therapy. Additionally, he received training in ADLs (activities of daily living). For two years, he received allopathic care at AIIMS Rishikesh.

Birth History

- The entire LSCS was completed. After birth, the baby didn't cry. birth hypoxia and minor hearing loss on both sides
- The newborn weighed 3 kg.
- Admission to the NICU for observation for 24 hours.
- Mother noticed that her child became progressively less attentive to hearing after receiving a chicken pox vaccination at age one.

History of Immunization
Proper for age
Personal History
Appetite-Poor
Thirst—normal
Bowel—Irregular
Micturition-Normal
Sleep-sound
Nature of activity was always assisted

General Examination

Vital signs were typical. The patient's overall health was fair; he was well-fed, afebrile, and hyperactive. Examinations of the respiratory, cardiovascular, and abdominal systems had revealed no abnormality.

Asthtavidha Pariksha

Nadi -Vata pradhana

Mala - Nirama

Mutra - frequency and colour were normal

Jihva – Sama (coated)

Sabda – Asamyaka

Sparsh – Anushnasheeta

Drik – Samyaka

Akriti – Madhyama

Examination of the central nervous system revealed that the patient has ADHD. The infant was cognizant but not well oriented with time, place, or people, according to the CNS. The patient was unable to comply with the command, making it impossible to elicit muscle strength. There were no abnormalities and the sensory system was unharmed.

Due to the patient's instability in one location, it was unable to accurately document his examination.

Diagnostic Evaluation

According to DSM-V criteria, the case was identified as having a hyperactive form of ADHD. Children must exhibit six or more signs of the disease for a diagnosis to be made. After getting a thorough history from the parents, the diagnosis was confirmed and the parents of the children were called.

Result

Table 1: Table showing sign and symptoms before treatment after treatment.

Sign and symptoms	Before treatment	After treatment
Hyperactivity - Not sitting in one place	Not sitting for one place for 5 min.	Sitting for 10-15 min. in one place
Sustaining attention in tasks and play activities	Difficulty in sustaining attention in tasks and play activities	Mild improvement in sustaining attention in tasks and play activities
Talking	Talking excessively	Now talking limitedly but sometimes talking nonstop
Inattention Eye contact while conversation	Less eye contact while conversation	Moderate increasement in eye contact while conversation
Obeying commands	Every time not obeying commands	Sometimes not obeying commands
Regarding task focus	Start task but quickly lose focus	Now focus increases in tasks
Impulsivity Having trouble waiting for his turn	Every time having trouble waiting for his turn	Sometimes having trouble waiting for his turn
Controlling anger	Trouble controlling anger	Tries to control anger

The observation and result based on clinical picture was noted before and after the course of treatment is as given.

Discussion

According to DSM V criteria, the youngster complained of being noticeably hyperactive. Vata Dosha becomes vitiated in ADHD, which simultaneously vitiates Pitta and Kapha Dosha. Other than the neuro-behavioural perspective, the pathology of ADHD is unclear in the modern medical system. Any disease is believed to have a mental, physical, or combined root in Ayurveda. The pshycho-somatic aetiology is present in these situations. According to Ayurveda, the two Tridoshas govern the body and mind, and a vitiation of these Doshas results in a mental and physical anomaly. The primary Tridosha, Vata Dosha, has significant power on mental processes like thinking inception, stimulation, and direction. In this instance, vata's usual functions were compromised, which caused the child's hyperactivity.

In the current situation, therapy planning and medicine selection were done based on the main Dosha participation utilising the aforementioned information as a reference. The child first had oleation therapy to control the vitiated Vata and Pitta Dosha. As a result, for seven days, sarvanga abhyanga with ksheera bala taila and sarvanga mridu swedana with dashmoola kwth were performed. Due to lipophillic medicines' alleged ability to pass the blood-brain barrier, medicinal oil may have had an altering effect on cognition. The external oil massage had stimulated touch receptors, which had assisted in soothing the hyperactive toddler. Seven days will pass once the initial therapy is finished.

Shiro-Abhyanga with Ksheera Bala Taila and Anna lepana with Shashtika shali were completed after that. Shiro-Abhyanga is a gentle fingertip massage applied to the scalp to allow the oil formulation to work on this area of the body. The head, the seat of awareness and the sense organs with which we communicate, serves as the body's operational centre. In the head are Adhipati, Simantaka, Krikatika,

Vidhura, and Shankha Marma. These Marma points can be stimulated to reduce stress, enhance blood flow, nourish the skin, and detoxify the body. Shiro-Abhyanga is primarily utilised as a treatment to ward off psychosomatic illness. Due to its qualities, such as Snigdha Guna, which functions through, Abhyang with Ksheera Bala Taila is considered to be effective.

The effect of Shiro-Abhyanga has been evaluated in a study by Sembulingum et al., which states that during Shiro-Abhyanga, various mechanical sensations are applied to the skin, such as pressure, rubbing, touches, etc., so these sensory impulses are received by the appropriate receptor present on the skin's surface and carried to the hypothalamus in the brain. A method of treatment known as anna lepana involves applying Shashtika Shali, which has been cooked in milk that has already been treated with Bala kashayam (a decoction made by boiling the roots of Sida cordifolia with water), to the patient's body, is a procedure where a special pudding made with Shashtika Shali is applied to the entire body and then removed after half a Yama. It took between 30 and 40 minutes every day for 10 days to complete. It warms the body's joints and muscles and improves nourishment, especially for the body's bones, muscles, and other soft tissues. Additionally, it strengthens the entire body. There was a 7-day interval between Shiro-abhyanga and Anna lepana.

Ksheera Bala Taila

Go-ksheera (cow's milk), Bala, and Tila Taila are used to make Ksheera Bala Taila. All the nutrients needed for bone, nerve, muscle, and other bodily tissue growth and sustenance are present in cow's milk. All three ingredients have Vipaka and Madhura Rasa. Vata and Pitta Dosha are both lessened by Madhura Rasa. It has Dhatunaamprabalam (tissue strength), benefits sensory organs, and calms the mind. It provides the body with nourishment and is vital for sustaining life. According to Vata Nanatamja Vikara, Ksheera Bala Taila has sedative effects on all eighty chronic conditions of Vata origin3. In traditional Ayurvedic medicine, Ksheera Bala Taila is used as a Rasayana medication. Continuous use of this formulation helps patients' physical and mental conditions by preventing the release of abrupt electric electrical discharge. It has a strong calming and relaxing impact on the mind.

The child's appetite improved following the first round of therapy, but other symptoms, such as hyperactivity, remained unaffected. Mild changes in hyperactivity and irritation were noticed after the second session was finished. The child could spend some time sitting still, according to the mother.

Hyperactivity, inattention, and poor eye contact were improved after the third sitting. The youngster may also try to say his complete name and obeys his parents' instructions. Child tries to make eye contact for a while during conversations with parents and other family members.

Conclusion

A neurobehavioral disorder called ADHD causes a child's behaviour to be significantly altered. The current instance illustrated how Ayurveda can be used to treat the hyperactive form of ADHD. Ayurveda provides a variety of amazing herbal medicines, and several of the Panchkarma therapies mentioned above have been shown to significantly reduce the symptoms of ADHD, and the child tolerated the treatments well. It may be said that using Ayurvedic medicine to treat ADHD is safe.

References

- 1. K Sembulingam. Essentials of Medical Physiology. Jaypee Brother Medical Publishers. New Delhi. Edition 2007, P.N.835-838; 588.
- 2. Vaidya yadavji Trikamji Acharya, Sushrut Samhita of Sushrut with Nibandhsangraha commentary of sri Dalhanacharya, Shareera Sthana,1/20, Chaukhambha Sanskrit Samsthana, Varanasi, Reprint edition 201, pg-525
- 3. Bhisagaratna Pandit Shri Bhrahma Shankara Mishra, editor. Bhavaprakasha, Chikitsa Prakarana. Varanasi; Chaukhambha Sanskrit Bhawan, 2000. Vatarakta Adhikara, Chapter 29, verse155-156, 163-164. P.320
- 4. Nimmy et.al. A comparative study on Anticonvulsant Effect of Ksheera Bala Taila Ayurveda Formulation Made with Two Source Plants of Bala (Sida Cordifolia Linn. And sida Retusa Linn.) IAMJ. 2017: (5): 549-56.