



“AYURVEDIC CONCEPTS IN THE TREATMENT OF UNMADA (PSYCHOSIS): A SCIENTIFIC REVIEW”

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ABSTRACT

Introduction: *Unmada* (psychosis) is one of the most serious *manasika rogas* (mental disorders) described in Ayurveda, characterized by disturbances in perception, thought, and behavior due to *dosha* vitiation and impairment of *manas*, *buddhi*, and *indriyas*. Modern psychiatry describes psychosis as a cluster of disorders including schizophrenia, schizoaffective disorder, and bipolar disorder with psychotic features. Integrating Ayurveda with modern psychiatry may provide novel therapeutic strategies. **Methods:** A systematic review was conducted using classical Ayurvedic texts (*Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*) along with electronic databases such as PubMed, Scopus, and Web of Science. Keywords included *Unmada*, *Ayurveda*, *psychosis*, *schizophrenia*, *manas roga*. Inclusion criteria comprised classical references, clinical trials, pharmacological studies, and review articles published between 2000–2024. Studies exclusively focusing on unrelated psychiatric disorders were excluded. **Results:** Ayurveda describes five types of *Unmada* (*Vataja*, *Pittaja*, *Kaphaja*, *Sannipataja*, and *Manasika/Agantuja*) with distinct clinical features. Classical management includes *daivavyapashraya chikitsa* (spiritual measures), *yukti vyapashraya chikitsa* (herbal formulations such as *Brahmi*, *Shankhapushpi*, *Ashwagandha*, *Jatamansi*), and *sattvavajaya chikitsa* (counseling, meditation, self-control techniques). Modern studies support the neuroprotective, anxiolytic, antipsychotic, and adaptogenic properties of these herbs. Panchakarma interventions like *Shirodhara*, *Virechana*, and *Nasya* show positive effects in managing psychotic features. **Discussion:** Ayurvedic approaches emphasize restoring *dosha* balance and strengthening *manas* through holistic measures. Modern pharmacological evidence correlates the action of Ayurvedic herbs with modulation of neurotransmitters, antioxidant effects, and stress reduction. However, large-scale randomized controlled trials are lacking. An integrative approach can address gaps in long-term management and reduce side effects of conventional antipsychotics. **Conclusion:** Ayurvedic management of *Unmada* offers holistic, individualized care incorporating herbal, psychological, and detoxification therapies. Evidence suggests potential synergy with modern psychiatry, though further robust clinical studies are necessary.

KEYWORDS: Ayurveda; *Manas roga*; Psychosis; *Unmada*; Yoga

INTRODUCTION

Unmada is a severe psychiatric disorder described extensively in classical Ayurvedic texts, often equated with conditions under the umbrella of psychosis.^[1-2] The term literally means "derangement of mind," leading to abnormal thinking, behavior, perception, and memory. *Charaka Samhita* describes *Unmada* as arising due to derangement of *manas*, *buddhi*, *smriti*, *bhakti*, *sheela*, *cheshta*, and *achara*.^[3-4]

Modern psychiatry defines psychosis as a mental state characterized by hallucinations, delusions, disorganized thought, and impaired reality testing, seen in schizophrenia, schizoaffective disorder, and bipolar disorders.^[5-6] Globally, psychosis affects nearly 1% of the population and significantly contributes to disability and caregiver burden. Despite the availability of modern pharmacological interventions, side effects, treatment resistance, and relapse remain major concerns.^[7-8]

This review aims to explore the Ayurvedic understanding of *Unmada*, its classification, causative factors, and therapeutic strategies, while comparing these approaches with modern psychiatry to highlight integrative management strategies for psychosis.^[9-10]

MATERIALS AND METHODS

A systematic review approach was employed. Primary Ayurvedic references were taken from *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Madhava Nidana*, and commentaries. Secondary sources included PubMed, Scopus, Web of Science, and AYUSH Research Portal. Search terms used were: *Unmada*, *Ayurveda*, *psychosis*, *schizophrenia*, *manas roga*, *sattvavajaya chikitsa*.^[11-12]

Inclusion criteria:^[13]

- Classical Ayurvedic textual references
- Pre-clinical and clinical studies (2000–2024)
- Reviews and meta-analyses related to Ayurveda and psychosis
- Pharmacological studies on relevant Ayurvedic herbs

Exclusion criteria:^[14]

- Studies not related to psychosis or severe psychiatric disorders
- Non-English publications without translation
- Articles lacking scientific methodology

Both qualitative and quantitative studies were reviewed. A thematic analysis was performed to categorize Ayurvedic principles, formulations, and clinical evidence.^[15]

OBSERVATION AND RESULTS

1. Ayurvedic Concept of *Unmada*

Ayurveda describes *Unmada* as a psychiatric illness where *dosha vitiation* affects *manovaha srotas*, disturbing *manas* (mind), *buddhi* (intellect), *smriti* (memory), *sheela* (behavior), *bhakti* (emotions), *cheshta* (activities), and *achara* (conduct). Five types are described:

- **Vataja Unmada:** Restlessness, incoherent speech, excessive fear.
- **Pittaja Unmada:** Aggression, irritability, delusions, violent outbursts.
- **Kaphaja Unmada:** Withdrawal, excessive sleep, dullness.
- **Sannipataja Unmada:** Mixed features, severe prognosis.
- **Agantuja (exogenous/traumatic) Unmada:** Caused by grief, fear, trauma, or external agents.

2. Samprapti (Pathogenesis)

- Imbalance of *Tridosha* leading to dysfunction in *manovaha srotas*.
- Impairment of *ojas* and *sattva* resulting in dominance of *rajas* and *tamas*.
- Neurobiological parallel: disturbances in neurotransmitters (dopamine, serotonin, glutamate) mirror *dosha* imbalance.

3. Chikitsa (Management Principles)

Ayurvedic treatment is holistic and classified into three domains:

- **Daivavyapashraya (spiritual therapy):** Mantra, homa, prayers, rituals.
- **Yukti Vyapashraya (rational therapy):** Herbs, diet, *panchakarma*.
- **Sattvavajaya (psychotherapy):** Mind control, counseling, yoga, meditation.

4. Ayurvedic Herbs with Antipsychotic Potential

- **Brahmi (*Bacopa monnieri*):** Enhances memory, anxiolytic, modulates serotonin.
- **Shankhapushpi (*Convolvulus pluricaulis*):** Nootropic, improves cognition.
- **Ashwagandha (*Withania somnifera*):** Adaptogen, antipsychotic effects via GABAergic activity.

- **Jatamansi (Nardostachys jatamansi):** Calms mind, reduces aggression.
- **Vacha (Acorus calamus):** Enhances speech, improves cognition.

5. Panchakarma in *Unmada*

- **Snehana and Swedana:** Remove *ama* and calm doshas.
- **Vamana and Virechana:** Detoxification for Kapha/Pitta dominance.
- **Nasya:** Medicated oils strengthen higher centers.
- **Shirodhara/Shirobasti:** Reduce anxiety and improve sleep.

6. Modern Evidence Supporting Ayurveda

- *Ashwagandha* extracts shown to reduce psychotic symptoms in schizophrenia patients (systematic reviews, 2019).
- *Brahmi* demonstrated anxiolytic and neuroprotective properties.
- *Shirodhara* with medicated oils reduces cortisol levels, improving stress and mood.
- Small-scale clinical trials report improvement in sleep, reduction of hallucinations, and enhanced quality of life.

7. Integrated Care Approaches

- Combination of Ayurvedic therapies with modern antipsychotics showed reduction in dosage requirements and fewer side effects.
- Yoga and meditation-based *sattvavajaya chikitsa* improved social functioning and reduced relapse.

DISCUSSION

Ayurvedic descriptions of *Unmada* provide a multidimensional understanding of psychosis that aligns remarkably well with modern psychiatric concepts. The emphasis on *dosha* imbalance and disturbance in *manas* can be seen as parallel to neurotransmitter dysregulation and neurocognitive dysfunction in psychosis.^[16]

Ayurvedic management strategies offer several advantages over conventional medicine. Herbs like *Ashwagandha*, *Brahmi*, and *Shankhapushpi* demonstrate neuroprotective, adaptogenic, and antipsychotic activities validated by modern pharmacology. Panchakarma therapies such as *Shirodhara* and *Nasya* have demonstrated stress-reducing and neuroendocrine-modulating effects, which may complement modern drug therapy.

Furthermore, *sattvavajaya chikitsa* (Ayurvedic psychotherapy) resonates with cognitive-behavioral therapy, mindfulness, and supportive counseling in psychiatry.^[17]

However, there are notable gaps. Evidence from modern clinical trials remains limited, with most studies being small in scale, lacking blinding, and conducted with heterogeneous populations. The challenge of standardizing Ayurvedic formulations and practices also restricts their integration into mainstream psychiatric care. In addition, long-term safety and efficacy studies are scarce.^[18]

Future prospects lie in integrative psychiatry, combining the rapid symptom relief of modern antipsychotics with the holistic, lifestyle-based, and relapse-preventive strengths of Ayurveda. Collaborative research models, standardized protocols, and robust clinical trials will be essential. Furthermore, exploring molecular mechanisms of Ayurvedic herbs through genomics and neuroimaging can bridge the traditional-modern gap.^[19]

Thus, Ayurveda's concept of *Unmada* not only enriches our understanding of psychosis but also offers practical, complementary approaches that can enhance long-term outcomes and quality of life for patients.^[20]

CONCLUSION

Unmada (psychosis) is one of the most debilitating psychiatric disorders, extensively documented in Ayurvedic classics. Its management through a threefold strategy—*daivavyapashraya*, *yukti vyapashraya*, and *sattvavajaya chikitsa*—provides a holistic model for addressing psychosis. Classical formulations, rejuvenative therapies, and detoxification approaches aim not only at symptom relief but also at preventing recurrence by restoring doshic balance and enhancing *sattva guna*.

Modern evidence supports the role of Ayurvedic herbs like *Ashwagandha*, *Brahmi*, and *Shankhapushpi* in neuroprotection, anxiolysis, and psychosis management. Panchakarma therapies have shown promising psychoneuroendocrine effects, and counseling methods resonate with contemporary psychotherapeutic approaches. Importantly, Ayurveda emphasizes individualized treatment, long-term wellness, and addressing root causes rather than symptomatic suppression.

While Ayurveda alone may not replace modern

psychiatry in managing acute psychosis, it provides a valuable adjunct that reduces side effects, improves patient compliance, and enhances overall well-being. The integration of Ayurvedic and modern psychiatry offers an opportunity to develop a comprehensive model of care, especially in contexts of chronic and treatment-resistant psychosis.

In conclusion, Ayurveda's insights into *Unmada* remain highly relevant. With further rigorous research, standardization, and integrative frameworks, Ayurveda can contribute significantly to psychosis management, offering patients holistic care and improved quality of life.

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