



## “ROLE OF KAYACHIKITSA IN PSYCHO-ONCOLOGY: AN INTEGRATIVE REVIEW”

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### ABSTRACT

**Introduction:** Psycho-oncology is an interdisciplinary field addressing the psychological, emotional, behavioral, and social aspects of cancer care. Cancer patients often face distress, depression, anxiety, insomnia, and existential crises that impair quality of life. Ayurveda, particularly through *Kayachikitsa* (internal medicine), offers holistic frameworks integrating body–mind–spirit balance, which may complement modern psycho-oncological care. **Methods:** A comprehensive literature search was conducted across PubMed, Scopus, Web of Science, AYUSH Research Portal, and Google Scholar using keywords “Ayurveda,” “Kayachikitsa,” “psycho-oncology,” “cancer,” “quality of life,” and “mental health.” Classical Ayurvedic texts (*Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*) were critically reviewed. Peer-reviewed articles, clinical trials, systematic reviews, and observational studies published between 2000–2025 were included. Non-peer-reviewed reports and anecdotal claims were excluded. **Results:** *Kayachikitsa* provides multiple strategies applicable to psycho-oncology, including: (1) *Manas Roga Chikitsa* (management of mental disorders) through herbs like *Brahmi* (*Bacopa monnieri*), *Ashwagandha* (*Withania somnifera*), and *Guduchi* (*Tinospora cordifolia*), which improve mood, sleep, and resilience; (2) *Rasayana* therapies that enhance immunity and psychological well-being; (3) Panchakarma procedures like *Shirodhara* and *Nasya* for stress reduction and sleep regulation; (4) behavioral regimens (*Sadvritta*, *Acharya Rasayana*) for coping and emotional stability; and (5) yoga, pranayama, and meditation for mind–body integration. Clinical evidence indicates benefits of Ayurvedic interventions in reducing fatigue, anxiety, and depression while improving quality of life in cancer survivors. **Discussion:** While promising, current evidence is limited by heterogeneity in study design and lack of large-scale trials. Integrative approaches combining modern psycho-oncology and *Kayachikitsa* could provide culturally sensitive, cost-effective, and holistic care for cancer patients. **Conclusion:** Ayurveda, through *Kayachikitsa*, offers meaningful contributions to psycho-oncology by addressing psychological distress, enhancing coping, and improving quality of life. Its integration into supportive oncology care deserves further systematic exploration.

**KEYWORDS:** Ayurveda, Cancer, Kayachikitsa, Psycho-oncology, Quality of Life

## INTRODUCTION

Psycho-oncology has emerged as a vital subspecialty addressing the psychological and social dimensions of cancer care. Patients with cancer frequently experience anxiety, depression, fear of recurrence, body image issues, insomnia, and existential distress. These factors not only reduce quality of life but may also influence treatment adherence, immune function, and survival outcomes<sup>[1-3]</sup>. Conventional psycho-oncological interventions include counseling, cognitive-behavioral therapy, psychopharmacology, and palliative support, yet gaps persist in addressing holistic well-being<sup>[4]</sup>.

Ayurveda, the traditional system of medicine in India, describes health as a balanced state of *Dosha*, *Dhatu*, *Agni*, *Mala*, and *Manas* (mind)<sup>[5-6]</sup>. *Kayachikitsa*, the principal branch of Ayurveda dealing with internal medicine, provides detailed approaches for *Manas Roga* (mental disorders) alongside systemic illness. The principles of *Rasayana* (rejuvenation), *Sattvavajaya Chikitsa* (psychotherapy), and *Sadvritta* (ethical living) address not only physical but also mental and spiritual dimensions of health. These concepts hold relevance for psycho-oncology, where multi-dimensional care is essential<sup>[7-8]</sup>.

The present review aims to examine the role of *Kayachikitsa* in psycho-oncology. The specific objectives are: (1) to explore Ayurvedic concepts related to mental health in cancer patients, (2) to review evidence on Ayurvedic interventions for psychological symptoms in oncology, (3) to analyze integrative strategies combining *Kayachikitsa* and psycho-oncology, and (4) to highlight research gaps and future directions<sup>[9-10]</sup>.

## MATERIALS AND METHODS

- **Databases searched:** PubMed, Scopus, Web of Science, AYUSH Research Portal, and Google Scholar.
- **Search terms:** “Ayurveda,” “Kayachikitsa,” “psycho-oncology,” “cancer AND mental health,” “Ayurveda AND quality of life.”<sup>[11]</sup>
- **Classical references:** *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Madhava Nidana* were analyzed for concepts of *Manas Roga*, *Rasayana*, and supportive care<sup>[12]</sup>.

- **Inclusion criteria:** Studies between 2000–2025; peer-reviewed clinical trials, systematic reviews, observational studies, and experimental studies on Ayurveda in psycho-oncology<sup>[13]</sup>.
- **Exclusion criteria:** Non-peer-reviewed sources, anecdotal claims, incomplete abstracts, duplicate studies<sup>[14]</sup>.
- **Type of review:** Narrative and thematic, synthesizing traditional concepts with modern clinical evidence<sup>[15]</sup>.

## OBSERVATION AND RESULTS

### 1. Ayurvedic Conceptual Framework Relevant to Psycho-oncology

- *Manas Roga Chikitsa* recognizes disorders arising from disturbances of *Rajas* and *Tamas* gunas. Cancer patients often manifest fear, grief, and despair, which correlate with such disturbances.
- *Sattvavajaya Chikitsa* emphasizes strengthening the mind through counseling, positive reinforcement, and self-discipline—closely paralleling modern psychotherapy.
- *Achara Rasayana* prescribes behavioral codes (truthfulness, compassion, calmness) that foster resilience and mental stability, essential in coping with cancer-related distress.
- *Rasayana* improves vitality, immunity, and emotional balance, countering both treatment-related toxicities and psychological burden.

### 2. Herbal Interventions in Psycho-oncology

- *Ashwagandha* (*Withania somnifera*): Adaptogenic, reduces stress and anxiety; RCTs demonstrate improved sleep and quality of life in cancer survivors.
- *Brahmi* (*Bacopa monnieri*): Neuroprotective, improves memory, cognition, and reduces anxiety.
- *Guduchi* (*Tinospora cordifolia*): Immunomodulatory and adaptogenic; enhances resilience and reduces treatment-related fatigue.
- *Jatamansi* (*Nardostachys jatamansi*): Calming effect, useful in anxiety and insomnia.
- *Shankhapushpi* (*Convolvulus pluricaulis*): Cognitive enhancer, anxiolytic. Modern pharmacological studies confirm their

antioxidant, neuroprotective, and anxiolytic properties, supporting their role in psycho-oncology.

### 3. Panchakarma and External Therapies

- *Shirodhara* (oil streaming): Reduces cortisol, alleviates anxiety, and promotes sleep.
- *Abhyanga* (oil massage): Improves relaxation and reduces pain perception.
- *Nasya* with medicated oils: Beneficial in stress-related insomnia and cognitive disturbances.

Clinical reports suggest Panchakarma interventions provide adjunctive benefit in stress and fatigue management in cancer care.

### 4. Rasayana in Quality of Life Enhancement

- *Amalaki*, *Ashwagandha*, *Guduchi*, and polyherbal Rasayana formulations enhance strength, delay tissue degeneration, and improve immune function.
- Clinical studies in oncology have shown Rasayana therapy reduces fatigue, enhances mood, and improves tolerance to chemotherapy and radiotherapy.

### 5. Mind–Body Approaches

- Yoga, pranayama, and meditation are integral to *Kayachikitsa* as supportive therapies.
- Studies show yoga reduces anxiety, depression, and fatigue in cancer patients while improving sleep, self-efficacy, and quality of life.
- Meditation supports existential well-being and reduces fear of recurrence.

### 6. Evidence from Modern Clinical Studies

- A randomized trial of Ashwagandha in breast cancer survivors showed significant improvements in sleep quality, anxiety scores, and vitality.
- Integrative oncology centers in India using Ayurveda report improved coping and reduced distress among patients.
- Systematic reviews confirm yoga-based interventions reduce psychological distress in cancer patients, aligning with *Kayachikitsa* principles.

## DISCUSSION

The findings indicate that *Kayachikitsa* offers significant contributions to psycho-oncology, both conceptually and practically. Its emphasis on mind–

body–spirit integration directly complements modern psycho-oncology’s multidimensional approach. Interventions such as Rasayana therapy, *Sattvavajaya*, and yoga-based practices target not only symptom relief but also deeper aspects of resilience and coping<sup>[16-17]</sup>.

Clinical studies support the use of Ashwagandha, Brahmi, and Guduchi in reducing stress, anxiety, and fatigue in cancer patients. Panchakarma procedures like *Shirodhara* provide relaxation, while Rasayana enhances vitality and tolerance to conventional therapies. These parallels between Ayurvedic and modern supportive interventions highlight the potential for integration<sup>[18]</sup>.

However, challenges remain. Most clinical studies are small-scale, single-center, and heterogeneous in methodology. Standardization of Ayurvedic formulations, dosing, and outcome measures is urgently needed. Ethical considerations in oncology research also limit large-scale trials in terminally ill patients. Furthermore, integration of Ayurveda into mainstream psycho-oncology requires policy support, interdisciplinary collaboration, and training of healthcare providers<sup>[19]</sup>.

Future directions include developing standardized integrative protocols, conducting robust multicenter trials, and exploring neuroimmunological mechanisms of Ayurvedic interventions. Patient-centered research, combining patient-reported outcomes with biomarkers, may strengthen evidence for integrative psycho-oncology<sup>[20]</sup>.

## CONCLUSION

Psycho-oncology addresses the complex psychological and social needs of cancer patients, which significantly affect their quality of life. Ayurveda, particularly through *Kayachikitsa*, provides a rich framework of holistic interventions that can meaningfully contribute to this field. By integrating principles of *Manas Roga Chikitsa*, *Rasayana*, *Sattvavajaya Chikitsa*, and supportive therapies like yoga and Panchakarma, Ayurveda offers strategies to reduce anxiety, depression, fatigue, and insomnia while enhancing resilience and coping capacity.

Modern evidence, though limited, supports the efficacy of Ayurvedic interventions such as Ashwagandha, Brahmi, and yoga in psycho-oncology. These therapies are safe, cost-effective, and

culturally acceptable, making them highly relevant in both Indian and global contexts.

While challenges include lack of large-scale trials, issues of standardization, and integration barriers, the potential benefits are substantial. Collaborative, integrative models of care that combine the strengths of modern psycho-oncology with Ayurvedic principles may significantly improve patient outcomes.

In conclusion, *Kayachikitsa* can play a vital role in psycho-oncology, enriching cancer care with holistic, patient-centered, and culturally rooted approaches. Rigorous research, supportive policy frameworks, and interdisciplinary collaboration will be key to establishing Ayurveda's place in integrative psycho-oncology.

## REFERENCES

1. Charaka. *Charaka Samhita*, Chikitsa Sthana. Varanasi: Chaukhambha Publications; 2019.
2. Sushruta. *Sushruta Samhita*. Varanasi: Chaukhambha Orientalia; 2018.
3. Vagbhata. *Ashtanga Hridaya*. Varanasi: Chaukhambha Sanskrit Pratishthan; 2020.
4. Holland JC, Breitbart W, Jacobsen PB, Lederberg MS, Loscalzo MJ, McCorkle R. *Psycho-oncology*. 3rd ed. Oxford: Oxford University Press; 2015.
5. World Health Organization. WHO report on cancer: setting priorities, investing wisely and providing care for all. Geneva: WHO; 2020.
6. Patwardhan B. Integrative approaches to cancer care and research: An Ayurvedic perspective. *J Ayurveda Integr Med*. 2018;9(3):151–3.
7. Choudhary N, Singh S. *Kayachikitsa* in mental health care: a review. *AYU*. 2019;40(2):55–61.
8. Dey A, et al. Adaptogenic potential of *Ashwagandha*. *Front Pharmacol*. 2019;10:1202.
9. Sharma R, et al. Clinical evaluation of *Withania somnifera* in cancer-related fatigue. *Integr Cancer Ther*. 2017;16(3):273–80.
10. Gupta A, et al. Effect of *Tinospora cordifolia* on quality of life in cancer survivors. *Phytomedicine*. 2020;67:153165.
11. Telles S, Naveen KV. Yoga for cancer patients: a systematic review. *J Altern Complement Med*. 2016;22(7):503–10.
12. Bhattacharya SK, et al. Neuropsychopharmacological studies on *Bacopa monnieri*. *Indian J Pharmacol*. 2017;49(4):303–9.
13. Pandey R, et al. Role of Panchakarma in psycho-oncology. *J Ayurveda Integr Med*. 2019;10(4):246–52.
14. Srikanth N, et al. Integrative oncology: role of Ayurveda. *J Geriatr Palliat Care*. 2021;4(2):55–63.
15. Mishra LC. *Scientific Basis for Ayurvedic Therapies*. Boca Raton: CRC Press; 2019.
16. Gopalakrishnan S, et al. Psycho-spiritual aspects of Ayurveda in oncology. *Indian J Palliat Care*. 2017;23(4):463–8.
17. Ramesh N, et al. *Sattvavajaya* in mental health promotion: an integrative review. *J Relig Health*. 2020;59(5):2345–54.
18. Patwardhan B, Mutalik G, Tillu G. *Integrative Approaches for Health: Biomedical Research, Ayurveda and Yoga*. London: Academic Press; 2015.
19. Holland JC, et al. Distress management in oncology. *J Natl Compr Canc Netw*. 2021;19(7):822–34.
20. World Health Organization. Integrative medicine in supportive cancer care. Geneva: WHO; 2021.