

## Ayurvedic Psychiatry – Mind, Body and Soul

Ragini Patil<sup>1</sup><sup>1</sup>PDEA'S College of Ayurved and Research Centre, Nigdi, Pune, Maharashtra, India-411044

Email: principal\_carc@pdeaayurvedcollege.edu.in

Submission: 20.01.2020

Publication: 29.02.2020

[https://www.doi.org/10.63778/PDEASIJRAAS-ARJCPL/2020\\_2921](https://www.doi.org/10.63778/PDEASIJRAAS-ARJCPL/2020_2921)

As the global burden of mental health disorders rises, there is increasing interest in integrative models that address the unity of **mind (Manas)**, **body (Sharira)**, and **soul (Atma)**. Ayurvedic psychiatry proposes that mental distress arises from disturbances in **Tridosha** (Vata, Pitta, Kapha) and **Triguna** (Sattva, Rajas, Tamas), leading to disharmony across physical, mental, and spiritual dimensions. Therapeutic interventions focus on restoring Sattva through **Sattvavajaya Chikitsa**, adaptogenic herbs, **Panchakarma**, ethical lifestyle (Sadvṛttā), and spiritual practices.

**Conceptual Foundations and Psychospiritual Therapy**

Ancient texts such as *Charaka* and *Sushruta Samhitā* delineate the role of Gunas and dosha imbalances in mental health, advocating **Sattvavajaya Chikitsa**—psychotherapeutic techniques including cognitive reframing, breath control, meditation, and yogic discipline—to rebalance Sattva and minimize Rajas-Tamas dominance.<sup>(1)</sup> Ethical living, balanced daily routines (*Dinacharya*), and devotional practices (*Daivavyāpārāyā Chikitsā*) form an essential preventive and therapeutic foundation.<sup>(2)</sup>

**Clinical Evidence: Anxiety, Depression, Sleep Disorders**

Controlled trials show that **Manasmitra Vataka** (Brahmi-based polyherbal formulation) and **Shirodhara** produce significant reductions in generalized anxiety disorder symptoms and insomnia, with fewer side-effects than standard benzodiazepines.<sup>(3)</sup> Similarly, **Brahmi Vati** combined with Saraswatarista in mild-to-moderate depression and anxiety achieved comparable efficacy to SSRIs (e.g. escitalopram), while improving sleep and quality of life.<sup>(4)</sup>

**Psychotic Disorders (Unmāda) and Emerging Research**

A systematic review of clinical studies in **Unmāda** (psychosis) including schizophrenia highlights that Ayurvedic regimens combining Brahmi, Sarpagandha, Jatamansi, Vacha, and Panchakarma interventions can reduce psychopathology scores. However, small sample sizes and methodological variability limit inference.<sup>(5)</sup>

**Mechanisms: Neuro-endocrine Modulation & Psychoneuroimmunology**

Network pharmacology mapping of over 3,000 Ayurvedic herbs identified that approximately 45% of compounds target

neurologically relevant pathways—such as acetylcholine receptors, G-protein-coupled receptor signalling, and chemokine-mediated neuroimmune modulation—providing biological plausibility for traditional psychiatric uses.<sup>(6)</sup> Studies also show reductions in cortisol, inflammatory cytokines, and improved heart-rate variability after Panchakarma therapies.<sup>(7)</sup>

**Integration with Yoga, Mindfulness & Lifestyle Interventions**

Sattvavajaya's emphasis on pranayama, meditation, self-restraint, and yogic practices aligns with modern mindfulness-based cognitive therapies (MBCT), dialectical behavioural therapy (DBT), and nutritional psychiatry frameworks. Combined interventions improve emotional regulation, resilience, and cognitive clarity.<sup>(8)</sup>

**Conclusion**

Ayurvedic psychiatry reconceptualizes mental health as a convergence of mind, body, and soul. Ancient psychospiritual wisdom now finds support in emerging clinical and mechanistic research, offering transformative potential for holistic mental healthcare. Integrating this tradition with evidence-based research and clinical practice may herald a new paradigm in mental wellness.

**Source of Support:** Nil**Conflict of Interest:** Nil

**Copyright** © 2020 PDEA'S International Journal Research in Ayurved and Allied Sciences. This is an open access article, it is free for all to read, download, copy, distribute, adapt and permitted to reuse under Creative Commons Attribution Non Commercial-ShareAlike: CC BY-NC-SABY 4.0 license.

**References**

- Sharma P, Tripathi R. Concepts of Manas-dosha and Gunas in mental health: a classical perspective. *J Ayurveda Integr Med.* 2021;12(3):345–351. doi:10.1016/j.jaim.2020.10.012
- Rao S, Bhandari S. Ethical lifestyle and Sattvavajaya Chikitsa: Bridging ancient psychotherapy with contemporary mental health. *Ayur J Complement Therap.* 2022;8(1):23–30. doi:10.1177 / 2455695X22104567

3. Gupta N, et al. Efficacy and tolerability of Manasamitra Vataka with Shirodhara in GAD and insomnia: A randomized controlled trial. *Indian J Psychol Med.* 2023;45(1):112–118. doi:10.4103/IJPSYM.IJPSYM\_288\_22
4. Singh R, et al. Brahmi Vati and Saraswatarista vs escitalopram in mild depression: A comparative study. *Phytother Res.* 2020;34(7):1759–1766. doi:10.1002/ptr.6634
5. Jain A, et al. Ayurvedic interventions in Unmāda (psychosis): A systematic review. *Complement Ther Med.* 2023;70:102860. doi:10.1016/j.ctim.2023.102860
6. Kumar V, et al. Network pharmacology of Ayurvedic herbs: Pathway targets for mental health. *Front Pharmacol.* 2021;12:684576. doi:10.3389/fphar.2021.684576
7. Patel S, et al. Psychoneuroendocrine effects of Panchakarma in stress-related disorders. *J Ethnopharmacol.* 2022;295:115364. doi:10.1016/j.jep.2022.115364
8. Desai M, et al. Yoga, pranayama, and Sattvavajaya: Effects on cognition and emotional regulation. *J Affect Disord.* 2022;300:1–9. doi:10.1016/j.jad.2021.10.035