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**CLINICAL EFFICACY OF SARASWATHARISTA AS A DEADDICTION
MEASURE IN MADATYAYA TREATMENT W.S.R TO ALCOHOL USE
DISORDER -A CASE REPORT**

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ABSTRACT

At present days of Clinical practice Madya is the cause for many disease among that Madatyaya¹ is the most common disease caused due to improper use of Madya² is called Madatyaya. One should take Madya with proper food materials and judiciously. Madatyaya is produces when person consumes the excess amount of alcohol without considering Prakruti, Satmya Agni etc. In Ayurvedic classical text treatment of madatyaya includes the combined approach of doshavasechana, rasayana and satvavajaya Chikitsa. Madatyaya is the most common alcohol use disorder is exponentially increasing which is major problem with extensive, legal, social, moral & ethical consequences all over the world irrespective of cultural, geographical, educational and economic difference. This alcohol abuse interferes with health, social relationships, economic stability which affects other area in terms of illness, disability, decreased productivity, accident, crime, psychological disturbance and lastly death in all classes of society. Hence here an attempt

is made to publish successfully treated case of Madatyaya with cost effective and oral Ayurvedic medications.

Keywords: Ayurveda ,Madya, Madatyaya, Doshavasechana, Rasayana, Satvavajaya, Shodana, Shamana, Alcohol, Alcoholism use disorder, Medications

INTRODUCTION

Since the antiquity the man is using Madya and it is the part of social and cultural life. The Madya has nectar like properties when used judiciously following all norms, otherwise it acts as poison³. Man is experiencing the ill effects of Madya since beginning and invented the modes of overcoming its ill effects. Alcoholism is among the most common psychiatric disorders observed in the western world. There are 2million injuries each year, including 22000 deaths due to alcoholism. Alcohol is a potent drug that causes both acute and chronic changes in almost all neurochemical systems. Thus alcohol abuse can produce serious temporary psychological symptoms including depression, anxiety and psychosis. In long term consumption can produce tolerance as well as such intense adaption of the body that cessation of use can precipitate withdrawal syndromes marked by insomnia, hyperactivity and feeling of anxiety⁴. Alcohol use disorder is defined by a cluster of behavioral and physical symptoms, which can include withdrawal, tolerance and craving alcohol withdrawal is

characterized by withdrawal symptoms that develop approximately 4-12 hours after the reduction of intake following prolonged, heavy alcohol ingestion because withdrawal from alcohol can be unpleasant and intense, individual may continue to consume alcohol despite adverse consequences, often to avoid or to relieve withdrawal symptoms. Some symptoms (e.g. sleep problems) can persist at lower intensities for months can contribute to relapse. Once a pattern of repetitive and intense use develops, individuals with alcohol use disorder may devote substantial periods of time to obtaining and consuming alcoholic beverages⁵.

CASE STUDY-PRADHANA VEDANA:

Reduced sleep since 3 months which is associated with reduced appetite, Headache, tremors in both hands, episodes of vomiting and numbness in both legs.

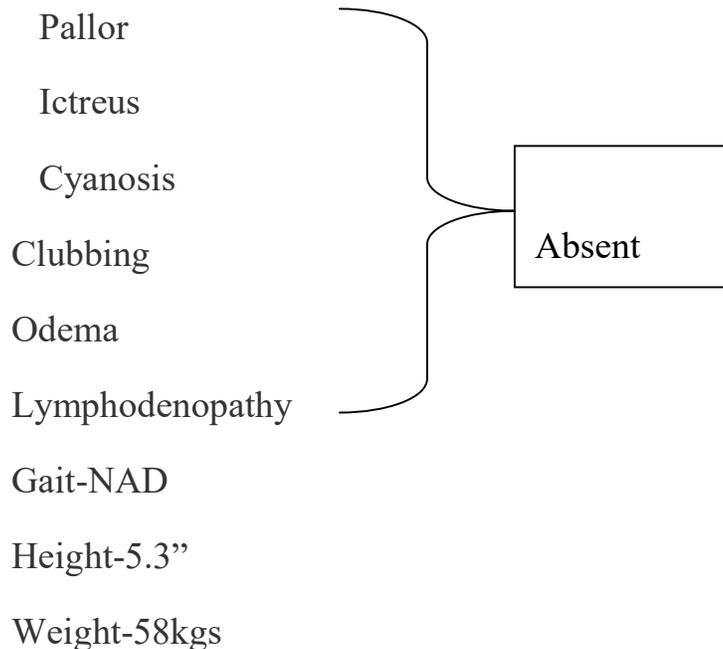
BRIEF HISTORY: A 45 years male patient K/C/O Alcoholism since 5yrs and not a K/C/O DM/HTN was apparently normal 3 months back. When he came to our hospital Kayachikitsa OPD (OPD No.2125267) on 12th August 2021 with the complaints of

Reduced sleep since 3 months which is associated with reduced appetite , Headache, tremors in both hands ,episodes of vomiting and numbness in both the legs for all these complaints he consulted nearby doctor they advised CBC,LFT all are within normal limit given Tab.Anxit 0.5mg 0-0-1 after food took this medicine more than 2months by

these medication pt. didn't get complete relief later consulted to Kayachikitsa O.P.D Of S.S.Ayurvedic Medical College & Hospital, Haveri, Karnataka.

PAST HISTORY: Patient is not having history of any chronic illness like DM/HTN and Thyroid disorders.

ON EXAMINATION: General examination

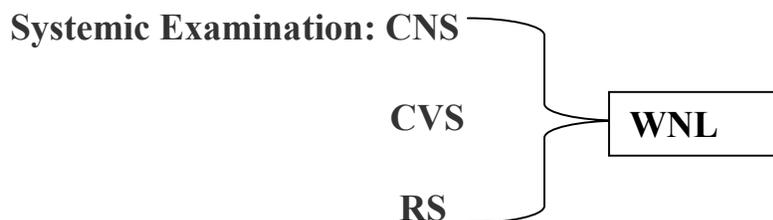


Vital signs: Temp.99⁰F

Pulse-86/min

Respiratoryrate-22cycles/min

BP-110/90 mm of Hg



MATERIALS AND METHODS

Source of data:

- A diagnosed case of Madatayaya is selected from OPD of S.S.Ayurveda Medical College & Hospital Kayachikitsa OPD, Haveri-Karnataka.

Method of collection of data:

- A special proforma is prepared with details of history taking, Physical and Psychological signs, Symptoms as mentioned in Ayurvedic classics and Allied sciences. The parameters of signs, symptoms is scored based on standard methods and analysed before and after treatment.

ASSESSMENT OF SYMPTOMS BEFORE AND AFTER TREATMENT

Symptoms	BT	AT
Nausea/vomiting	2	0
Tremors	2	0
Anxiety or guarded	1	0
Paroxysmal Sweats	0	0
Orientation	0	0
Tactile Disturbances	1	0
Auditory Disturbances	0	0
Visual Disturbances	0	0
Headache	3	0
TOTAL SCORE	9	0

DETAILS OF TREATMENT PLAN

1 st PHASE(12-08-2021 to 20-08-2021)	2 nd PHASE(21-08-2021 to 05-09-2021)
1. Saraswatharista 15ml-15ml -15ml After food	1.Saraswatharista 15ml-0-15ml After food
2.Tab.Agnitundi vati 1-0-1 Before food	2.Tab.Agnitundi vati 1-0-1 Before food
3.Shiropichu with Bramhighrita	

DISCUSSION

Madatyaya is a tridoshajavyadhi, initially vata and pitta gets vitiated then later these two together vitiated Kapha to cause Agnimandya, Aruchi etc. To treat any disease Agni should be in normal state hence Kapha chikitsa is considered to be the first line of treatment. But most of times patients come in a chronic condition where there will be the vitiation of shareerika and manasika doshas, which ruins the physical, psychological, social, economical and

occupational wellbeing. Rationality behind these drugs Saraswatharista⁶ is mainly having Bramhi panchanga as main ingredient which is having the property of Rasayana and chittasantosha. Agnitundi vati⁷ is having Visha as the main ingredient which mainly acts as Agnideepana, Pachana, Kaphavatahara and Vatanulomana action. Bramhighrita⁸ is mainly having Bramhi, Vacha and Shankapushpi which mainly acts as Medhya and corrects the altered functions of Manovaha srotas and Shiropichu increases

the circulation there by correcting the brain circulation which is very important in stress. Symptom like headache, which is caused by extra cranial Vasodilatation and the neurological symptoms which are produced by intra cranial vasoconstriction. Shiropichu is one of the supreme effective treatments for dipping stress and nervous tension. It works through exploit on TarpakKapha, Sadhak Pitta and PranVayu. Due to Tikshana, Vyavayi & Sukshma property of Ghrita. It enters easily into Manovaha srotas modifying vitiation of ManasDosha (Raja & Tama). Hence patient needs the combination of different formulations in cases of Madatyaya and even other psychiatric disorder too.

CONCLUSION:

In this case study justifies that successful management of Madatyaya through simple, cost effective and easily available medications. By this case study, we can conclude that in all cases of Madatyaya (Alcohol use disorder⁹) if patient seeks Ayurveda treatment as early as possible the percentage of early recovery is more without much of complication and by this we can prevent the drug dependency and adverse effect of commonly used Benzodiazepines, antipsychotics and sedatives for the treatment of Alcohol use disorder¹⁰. As this is a single case study so it's very difficult to conclude

the effect of Ayurvedic treatment, but along with shamana medicine it's very essential to plan Shodana as well as other Panchakarma measures. And to treat more effectively the combination of Shodana followed by shamana medications is very much essential; hence considering the dosha, dusha and avastha of the disease, one can adopt the suitable treatment for the better result. But this case study might be considered as base for future clinical trials and research protocol on the management of Madatyaya through the combined effect of Shodana and Shamanoushadi.

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