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Effect of *Siddharthaka Agada Arka Pratimarsha Nasya* in *Kaphaja Unmada* (Depressive Disorders)

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ABSTRACT

In Ayurveda, the term '*Unmada*' encompasses a wide spectrum of mental disorders. *Unmada* means "a state of disrupted mental functioning" in etymological terms. The aggravation of *Kapha Dosha* causes *Kaphaja Unmada*, which is one of the five forms of *Unmada*. The symptomatology and description of *Kaphaja Unmada* can be found in all major Ayurvedic texts. "*Kaphaja Unmada*" has been linked to "depressive disorder"/"depression"/"major depressive disorder" in previous studies. In this regard, it was planned to do a clinical study on the effectiveness of *Siddharthaka Agada Arka Pratimarsha Nasya* in *Kaphaja Unmada* (depressive disorders). Resulting in a statistically significant improvement in the primary and secondary outcome measures of *Kaphaja Unmada* (Depressive disorders). Thus, concluding *Siddharthaka Agada* in the form of *Arka*, administered as *Pratimarsha Nasya* for 30 days, with a dosage of two drops per nostril, twice a day, before food, is effective in *Kaphaja Unmada* (Depressive Disorders).

Key words: *Kaphaja Unmada*, *Depressive Disorders*, *Siddharthaka Agada Arka Pratimarsha Nasya*.

INTRODUCTION

Depression is a widespread ailment that affects 3.8 percent of the world's population, with 5.0 percent of adults and 5.7 percent of persons over 60 years old suffering from depression. Around 280 million individuals worldwide suffer from depression.^[1] In India, 18 percent of the global estimate suffers from depression.^[2]

In terms of misery, dysfunction, morbidity, and economic impact, it remains a sociocultural stigma. If left untreated, it can lead to obesity, diabetes, alcohol or other substance addiction, social phobia, panic disorders, family difficulties, and other problems.

It can make the individual who is affected suffer severely and perform poorly at the job, at school, and in the family. Depression can lead to suicide in the worst-case scenario. Every year, around 700,000 individuals die by suicide, globally. Suicide is the fourth highest cause of mortality among those aged 15 to 29.^[3]

In this study, the drug used was a modification of *Siddharthaka Agada* in *Arka* form. *Siddharthaka Agada* is useful in the management of mental diseases, especially *Unmada*.^[4]

The reason of selecting *Arka Kalpana* is that it is one of the most sought-after formulations in this modern age. Many dosage forms are being converted to *Arka* due to its reduced dose, patient compliance, and increased potency.

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Since *Arka* is prepared by the combination of *Jala* and with the help of *Agni*, therefore they are *Laghupaki*, *Vyavayi*, and *Vikasi* and thus assimilates quickly in the body.^[5]

Arka is easy to self-administer in the patients for *Pratimarsha Nasya*.

According to *Vagbhatta*, *Pratimarsha Nasya* is good from birth till death and is well-tolerated, has fewer complications, and is a very much convenient procedure. It can be given to anybody at any time without having any restrictions. The dosage is very less (2 drops) and cannot produce any complication.^[5]

MATERIALS AND METHODS

In an open label single arm clinical study participants attending the out-patient and in-patient department of *Mano Vigyan & Manas Roga, Sri Dharmasthala Manjunatheshwara Ayurveda* and Hospital, Hassan, Karnataka were screened for *Kaphaja Unmada*, A total of 30 participants were included in the study.

Lakshanas of *Kaphaja Unmada* were assessed as primary outcome measures based on its *Lakshanas* such as *Sthanamekdeshe Tooshnimbhava Alpashchankramana Lala Shinghanaka Sravanam Anannabilasha Rahaskaamta Svapna Nityata Shauch Dvesha Beebhat Satvam Shvayathu Anan Shuklastimita Malopdigdha Akshi* and Hamilton's depression scale was assessed as the secondary outcome.

Intervention

<i>Siddharthaka Agada Arka</i>	2 drops to each nostril
Time of administration	Early morning, before food and Evening, before food
Duration	30 days

Method of preparation of *Siddharthaka Agada Arka*

1. Drugs were dried as coarsely powdered

2. Drugs were soaked overnight in water
3. The *Kalka* was diluted 7 parts, with distilled water
4. The goat urine sample was added
5. The mixture was kept in the distillation flask
6. The distillation apparatus was heated at 40- 50 wt.
7. As the first distilled drop came, it was discarded and reduced the heat to 15 wt.
8. The mixture reduced to 60 %
9. The procedure was repeated 7 times to obtain the desired quantity.

OBSERVATION

In the present study, total of 30 patients were screened and selected among which 25 subjects completed the study. Among the 30 participants, Maximum(n=) were from the age group of 41-50 years and predominance of males (n=20). 25 subjects were from upper-middle-class group and majority of them (n=21) were from urban areas. Diet-wise distribution showed maximum (n=21) were following a mixed diet.

RESULTS

For statistical analysis, subjective parameters were assessed with Friedman's test, Wilcoxon sign rank test, and Cochran Q test followed by McNemar test. Objective parameters were assessed by Repeated Measures ANOVA and Paired t-Test.

Post hoc with McNemar test showed that there was a statistically significant difference between 1st to 30th day in the following *Lakshanas* of *Kaphaja Unmada*, *Sthanam Ekadeshe, Tooshnimbhava, Alpashchankramana, Annanabilasha, Rahaskaamta, Savapna Nityata, Shauch Dvesha, Beebhat Satvam, Shvayathu Anan & Shuklastimita Malopdigdha Akshi*.

Repeated Measure ANOVA test showed the effectiveness of *Siddharthaka Agada Arka pratimarsha Nasya* in Hamilton's depression score from 1st day to 30th day as significant.

Table 1: Repeated Measure ANOVA test showing the effectiveness of Siddharthaka Agada Arka Pratimarsha Nasya on Hamilton's depression score.

Ham D Score	N	Mean	Greenhouse-Geisser			Greenhouse-Geisser error df	Remarks
			df	F	P		
BT	25	15.560	1.740	321.17	<0.05	41.764	S
15 th day		6.160					
30 th day		2.800					

BT = Before treatment, N= Number of participants, df = Degree of freedom, F = frequency, P= value of significance, S= Significant, Ham D = Hamilton's depression score

Table 2: Pairwise comparison of Hamilton's depression score

Gross Score I	Gross Score J	Mean Difference (I-J)	Std. error	Sig.	95% confidence interval for difference		Remarks
					Lower	Upper	
BT	15 th day	9.400	0.532	<.016	8.030	10.770	S
15 th day	30 th day	3.360	0.420	<.016	2.279	4.441	S
BT	30 th day	12.760	0.598	<.016	11.221	14.299	S

S = Significant, BT = Before Treatment

DISCUSSION

Probable effect of therapy on Kaphaja Unmada

The classical formulation of Siddharthaka Agada contains nineteen ingredients. Each of these ingredients has a distinct effect and combined effect on Kaphaja Unmada. Arka form of Siddharthaka Agada

was used to administer pratimarsha nasya for thirty days.

Drugs in Siddharthaka Agada Arka as per Veerya

	Ushna Veerya	Sheeta Veerya
Number of Drugs	16	03
Name of Drugs	Siddharthaka, Vacha, Hingu, Karanja, Devadaru, Manjishtha, Haritaki, Vibithaki, Katabhi, Shunthi, Maricha, Pippali, Shirisha, Haridra, Daruharidra, Basta Mutra	Shweta, Priyangu, Amalaki

As per the above observations, sixteen out of nineteen ingredients in drug used are of Ushna Veerya. Therefore, they help in maintaining Jatharagni, which might have helped with Annabhilshasha, Shvayathu Aanan, Svapna Niyata.

Drugs in Siddharthaka Agada Arka as per Karma

	Kapha Pittahara	Kapha Vatahara	Tridosha Hara
Number of drugs	5	9	5
Name of Drugs	Manjishtha, Vibhitaki, Priyangu, Haridra, Daruharidra	Siddharthaka, Vacha, Hingu, Karanja, Devadaru, Shweta, Shunthi, Maricha, Pippali,	Haritaki, Amlaki, Katabhi, Shirisha, Basta Mutra

As per the above observations, Nine out of nineteen ingredients in the formulation used are of Kapha Vata Hara, Five are Kapha Pittahara and Five are Tridosha Hara.^[6] Due to this, they might have helped in the management of Kaphaja Unmada symptoms like Sthanam Ekadeshe, Tooshnimbhaava, Alpashchankramana, Rahaskaamta, Shauch Dvesha, Beebhat Satvam and Shuklastimita Malopdigdha Akshi.

Discussion on Nasya Karma's possible mode of action

There is contact between the nasal cavity and the cerebral cavity, according to Acharya Sushruta.

In the Ayurvedic texts, there is no clear definition of the *Nasya Karma's* mechanism of operation. *Nasa*, according to Charaka, is *Shiras'* entrance. *Nasya* is a medicine that is delivered by the nose and enters the brain, eliminating only the morbid doshas that cause sickness. The medicine supplied by the nostrils reaches *Shrungataka*, spreads in *Murdha* (opening of the vessels, etc.), scratches the diseased *Doshas* in the supraclavicular area, and expels them from *Uttamanga* in *Astanga Sangraha*.^[7] *Shrungataka marma* is defined by *Sushruta* as *Sira Marma*, which is created by the union of *Siras* (blood vessels).

He goes on to say that any harm to this *Marma* will be deadly right away.^[8]

Indu defined *Srungataka* as the inner side of the middle section of the head, i.e., *Sirasa Antar Madhyam*, in his commentary on *Astanga Sangraha*.^[7]

Sushruta remarked that excessive eliminative therapy may cause *Masthu Lunga* (C.S.F) to leak out of the Nose as a *Nasya* complication.^[9]

Nasa is regarded to be the *Shira* doorway by all notable acharyas. It does not imply that any channel links directly to the brain; rather, it is possible that they are linked via blood vessels or the neurological system (olfactory nerve etc.).

The fact that whenever any form of irritation occurs in any region of the body, the local blood circulation is always raised is an empirically proven truth. This is due to the body's inherent defensive mechanism. Because of the irritating impact of the supplied medicine, stimulation of the *doshas* occurs in *Shira*, resulting in an increase in cerebral blood circulation. As a result, excess morbid *doshas* are evacuated through tiny blood vessels.

These morbid *doshas* are eventually expelled by nasal discharge, tears, and salivation. All of the above insights allow one to think sensibly about *Nasya Karma's* Mode of Actions (i.e., at various stages of the operation).

Nasya's mechanism of action may be divided into two categories: stimulant and absorbent.

This is accomplished by the use of certain medications in various forms of *Nasya*.

For particular forms of *Nasya*, unique medications have been chosen. *Nimba*, for example, is utilized exclusively for *Shamana Nasya*, which should be treated using components that are not lipid-based. Certain medications, such as *Pippali*, *Maricha*, and other *Tikshna* drugs, have also been prescribed for *Pradhamana Nasya*. It is believed that certain medications have been suggested for use through the nasal route with particular effects, such as those drugs stimulating nasal mucosa with their irritating activity to bring forth Morbid *Doshas*. Some are light, medicated, or may be absorbed via some medium. *Marsha Nasya* can be regarded a stimulant activity that brings forth Morbid *Dosha* depending on the amount. Because *Pratimarsha Nasya* is unable to discharge vitiated *Doshas*, it should be classified as *Shamana Nasya*.^[10]

Ravana's Arkaprakasa depicts a great variety of different *Arka* (distillates) made from various portions of medicinal plants which are used for *Nasya*.^[11] *Siddharthaka Agada* was chosen to be administered in the form of *Arka* for *Pratimarsha Nasya*.

CONCLUSION

Two drops of *Siddhartaka Agada Arka* as *Nasya* in bilateral nostrils twice a day before meals for a period of 30 days is effective in the management of *Kaphaja Unmada* (Depressive Disorders). It showed significant improvement in primary outcome measures such as *Sthanam*, *Ekadeshe*, *Tooshnimbhava*, *Alpashchankramana*, *Annanabhilasha*, *Rahaskaamta*, *Svapna Nityata*, *Shauch Dvesha*, *Beebhat Satvam*, *Shvayathu Anan*, *Shuklastimita Malopdigdha Akshi* and not significant in *Lalashinghanaka Sravanam*. There was a significant improvement in the secondary outcome measure of Hamilton's depression score. No adverse drug reactions were reported during the study.

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