

# Journal of **Ayurveda and Integrated Medical Sciences**

www.jaims.in



An International Journal for Researches in Ayurveda and Allied Sciences



No standard

## Journal of

### Ayurveda and Integrated Medical Sciences

**REVIEW ARTICLE** 

September 2024

# Understanding of Body Dysmorphic Disorder - An Ayurvedic conceptual study

#### Priyadarshini<sup>1</sup>, Vijayendra G Bhat<sup>2</sup>

<sup>1</sup>Post Graduate Scholar, Department of Kayachikitsa and Manasaroga, Shri Dharmasthala Manjunatheshwara College of Ayurveda, Udupi, Karnataka, India.

<sup>2</sup>Associate Professor, Department of Kayachikitsa and Manasaroga, Shri Dharmasthala Manjunatheshwara College of Ayurveda, Udupi, Karnataka, India.

#### ABSTRACT

Body dysmorphic disorder (BDD) is common mental health condition characterized by an obsessive focus on perceived flaws in physical appearance. These perceived imperfections, often not visible to others, can cause significant emotional distress and impair daily functioning. BDD affects both men and women and can manifest at any age, though it commonly begins in adolescence. In *Ayurveda*, this appearance preoccupation can be understood in terms of *Chintyam* (thinking) or *Atichintana* (overthinking). *Chintyam* is also considered as objective of mind which means to be thought about or to be imagined and by regulating the thought process *Manonigraha* can be achieved. *Chinta* and *Chita* (fire) have only a difference of dot. *Chita* burns the dead while *Chinta* burns the alive. *Chinta* In a recent systematic review it was found that weighted prevalence of BDD in adults in the community was estimated to be 1.9% though this was increased when looking at specific psychiatric settings (adult psychiatric outpatients (5.8%) and adult psychiatric inpatients 7.4%) and even further increased in the context of other nonpsychiatric specialties such as general cosmetic surgery 13.2%; in rhinoplasty surgery 20.1%; in orthognathic surgery 11.2%; in orthodontics/cosmetic dentistry settings 5.2%; in dermatology outpatients 11.3%; and in cosmetic dermatology outpatients 9.2%. *Many* individuals affected with this condition will have high level of anxiety and depressed mood and some may even end up with major depressive disorder.

Key words: Body dysmorphic disorder, Appearance concerns, Atichintana, Chintyam.

#### **INTRODUCTION**

Even though our *Vedas* and *Puranas* believed in the inner beauty of a person i.e., purity of *Manas*, many mythological traces like stories of *Shurpanakha*, *Chyvana*, *Ashtavakra*, *Parvati* can be found which emphasize the desire for physical transformation and emotional disruption associated with perceived

#### Address for correspondence:

#### Dr. Priyadarshini

Post Graduate Scholar, Department of Kayachikitsa and Manasaroga, Shri Dharmasthala Manjunatheshwara College of Ayurveda, Udupi, Karnataka, India.

E-mail: priyapriyadarshini455@gmail.com

Submission Date: 13/08/2024 Accepted Date: 21/09/2024
Access this article online

Quick Response Code

Website: www.jaims.in

DOI: 10.21760/jaims.9.9.33

#### unattractiveness.

Indian mythology, rich with complex characters and narratives, offers numerous examples that resonate with the themes of body dysmorphia. These stories reflect on the human concerns with physical appearance, self-worth, and the psychological struggles that accompany perceived imperfections.

In some versions of the *Shiva Purana, Parvati*, the spouse of lord Shiva, was cursed to become dark-skinned. Feeling distressed by her appearance, she performed severe repentance to regain her fair complexion, eventually transforming into the goldenhued goddess Gauri. This story emphasizes the psychological impact of perceived physical imperfections and the proportions to which individuals may go to change their appearance.<sup>[4]</sup>

In the Ramayana, Shurpanakha, the sister of the demon king Ravana, is a notable figure whose story touches on themes of body dysmorphia.

Shurpanakha's obsession with her appearance and her subsequent disfigurement highlight the distress and consequences associated with perceived physical imperfections.<sup>[5]</sup>

Ayurveda also explains about the concept of *Sharira Pramana Pariksha* and *Samhanana Pariksha* which tells about compactness and measurement of bodily organs. According to which, a person who possess the measurement as mentioned are considered to be endowed with *Ayu* (longetivity), *Bala* (strength), *Ojas, Sukha* (happiness) and *Aishwarya* (wealth). And those with less or more dimensions are considered to have characteristics of the opposite.<sup>[6]</sup>

#### **MATERIALS AND METHODS**

This article draws upon a comprehensive review of *Ayurvedic* texts, collecting materials pertinent to the concept of *Chinta* and other relevant topics. References encompassing both *Ayurveda* and modern perspectives on Body dysmorphic disorder were gathered from textbooks, various reputable websites, and articles.

#### Nirukthi and Paribhasha (Origin and Meaning)

*Nirukti*: The word *Chinta* is derived from the word *Chint* which means to think, reflect, sorrowful thought and anxiety.<sup>[7]</sup>

**Paribhasha:** Chinta is the objective of Manas, whatever is being perceived by the mind, without involvement of sense organs is called as *Chintya* (to be thought about or to be imagined). [8]

Any thought process undertaken by mind as a matter of obligation or otherwise is *Chintya*.

#### Paryaya (Synonyms)

The synonym of mind *Chitta*, in fact, suggests the same meaning - *Chintyate Anena Iti Chittam*.

Amarakosha has mentioned Chintana, Chintanam. [9]

#### **Nidana** (Causative Factors)

Among the objects of mind, *Chintyam* is the chief one. Mentioning of only *Chintya* also includes the other objectives of mind *Vicharya*, *Uhya* etc. *Samayoga* of these objectives with mind results in normalcy.

Atiyoga, Hinayoga and Mithyayoga leads to malady. Similarly improper thinking i.e., Atichintana, Achintana and Bhayanaka Chintana leads to defective Manas as well as Buddhi. [10]

#### Causes and risk factors of body dysmorphic disorder

Body dysmorphic disorder is influenced by various factors including: Genetic predisposition, negative life experiences such as teasing and bullying.

Personality traits like perfectionism and high sensitivity to societal beauty standards and overly critical or appearance focused parenting.

Environmental: Body dysmorphic disorder has been associated with high rates of childhood neglect and abuse.

Genetic and physiological - The prevalence of body dysmorphic disorder is elevated in first degree relatives of individuals with obsessive compulsive disorder (OCD).<sup>[11]</sup>

#### Samprapthi

Due to Atiyoga of mental faculties



Vataprakopa influences the Manasa Dosha



Raja and Tama Prakopa occurs



Manovaha Sroto Vaigunya occurs



Sthana - Samshraya in Hrudaya



This leads to false perception, recollection of negative memories, irrelevant thinking and failure to restrain from negative thoughts



Manovaha Sroto Dushti occurs



Resulting into various *Manovikara* including vicious cycle of *Atichintana*<sup>[12]</sup>

#### **Etiopathogenesis**

Due to genetics, brain damage or any other medical illness



Structural and functional abnormalities takes place



Brain networks that mediate body image distortion, self-recognition and emotional reaction are altered



May produce both characteristic symptoms and neurocognitive deficits in BDD<sup>[13]</sup>

#### Diagnostic criteria as per DSM-5

- A. Preoccupation with one or more perceived defects or flaws in physical appearance that are not observable or appear slight to others
- B. At some point during the course of disorder, the individual has performed repetitive behaviors (e.g. mirror checking, excessive grooming, skin picking, reassurance seeking) or mental acts (e.g. comparing his or her appearance with that of others) in reassurance to the appearance concerns
- C. The preoccupation causes clinically significant distress or impairment in social, occupational or other important areas of functioning.
- D. The appearance preoccupation is not better explained by concerns with body fat or weight in an individual whose symptoms meet diagnostic criteria for an eating disorder.

#### **Clinical features**

It is characterized by pre occupation with one or more perceived defects or flaws in physical appearance, repetitive behaviors such as mirror checking, excessive grooming, skin picking, reassurance seeking or comparing his or her appearance with that others, significant distress, low self-esteem, social avoidance etc.

#### **Treatment**

In *Manasaroga* threefold treatment modalities like *Satvavajaya*, *Daiva Vyapashraya* and *Yuktivyapashraya* has been mentioned.<sup>[14]</sup>

#### Daivavypashraya Chikitsa

This is the spiritual approach to healing. *Daiva* refers to the *Adrsta* which means fate or destiny. Various auspicious activities such as *Mantra*, *Mani*, *Dana*, *Bali*, *Homa*, *Yagna* etc. which are being carried out. These are considered as divine therapy. In this condition surrendering oneself to god may help an individual spiritually and understanding the incarnation helps to know the inner sense of god.

#### Yuktivyapashraya Chikitsa

Medhya Rasayana in Ayurveda is an herbal formulation specially designed to enhance mental faculties and cognitive functions like intellect, concentration, memory, attention and thinking. It primarily focuses on nourishing the mind and improving mental abilities hence it is considered as a cognitive enhancer. Bruhatrayees and Laghutrayees have mentioned various Medhya Rasayanas such as Shankhapushpi (Convolvulus prostrates), Brahmi (Bacopa monnieri), Yashtiamdhu (Glycorrhiza glabra), Guduchi (Tinospora cardifolia), Mandukaparni (Centella asiatica) for treating Manovikaras and promoting overall mental well-being. [15] These drugs also helps in correcting the de arranged Dhi, Dhriti and Smriti.

In accordance with severity of the condition and presentation of the symptoms, Doshavastha and Adhisthana of Vyadhi can be predicted and appropriate Shodhana line of management can be adapted. Considering like the symptoms repetitive acts/behavior such as mirror checking and excessive grooming indicates the Vata Dosha predominance. Mental acts such as comparing herself/himself with others and personality traits like perfectionism can be considered the subclinical indicator of Manobhavas like Matsarya and Irshya which indicates Pitta predominance. Symptoms like low self-esteem, social avoidance and preoccupation of thoughts indicate the presence of Sukha, Atichintana and Shokha which signals the Kapha predominance. Considering the clinical features and predominant Dosha respective Shodana line of treatment i.e., Vamana, Virechana or Basti can be adapted.

#### Satvavajaya Chikitsa

Satvavajaya Chikitsa plays a major role in the management of body dysmorphic disorder by enhancing the 5 factors which are Jnana, Vijnana, Dhairya, Smriti, and Samadhi and to achieve Manonigraha.[16] Jnana is the knowledge about self and the surroundings, right knowledge of self is impaired in this condition. Vijnana is considered as the scientific knowledge, here to enhance this factor family therapy or interpersonal therapy can be adapted. Dhairya is to keep the mind stabilized to have the courage to face the societal criticism. Smriti on the other hand is considered as the recollection of the past experiences and here group therapy can be adapted to make an individual feel included. Samadhi is state of deep mental stillness and equanimity which helps in withdrawing oneself from all the external materialistic things. Counselling therapies such as Santwana and Ashwasana can be adapted to provide an emotional in self-awareness support and personal development.[17]

#### **DISCUSSION**

Appearance of anxiety is one of the major concerns among young adolescents. It is the subclinical indicator of the Body dysmorphic disorder. Ayurveda has explained the concept of mind in a distinct way. Different Acharyas have mentioned different parts of the body as the seat of Manas but heart is considered as the principle seat of Manas. Ayurveda has not explained exact condition as body dysmorphia but Atichintana (Atiyoga of Chintya mental faculty) can be correlated, since the person's primary symptom is excessive worrying about their appearance. Considering the symptoms and the severity treatment has to be planned. Satvavajaya Chikitsa plays an important role in treating this condition because it helps an individual to control their mind and emotion (Manonigraha) and also enhances the Dhi, Dhriti, Smriti, Dhairya and Samadhi there by correcting the deranged mental faculties.

#### **CONCLUSION**

Body dysmorphophobhia is a prime concern in the present era. It affects both men and women. Nearly all

individuals with BDD experience impaired psychosocial functioning because of their appearance concerns. [18] This condition is treated with anxiolytics, group therapies and various behavioral therapies. Despite the availability of effective treatment, there are barriers associated with socio demographic and clinical characteristics. In Ayurveda considering and corelating this concern as *Atichintana* a variety of treatment modalities *Shodana*, *Shamana* and *Rasayana Chikitsa* can be adapted based on the presentation of the symptoms and the predominance of *Dosha*. *Medhya Rasayana* in Ayurveda helps to improves the cognition which is altered in this condition and there by correcting the thought process.

#### **REFERENCES**

- Acharya Y T, editor, (1st ed). Commentary Ayurveda Dipika of Chakrapanidatta on Charaka Samhita of Agnivesha, Suthrasthana; Indriyopakramaniya adhyaya chapter8, verse 16. Varanasi: Chaukamba Prakasham; 2018; p.57
- Sanskrita sukta, sanskrutha documents https://sanskritdocuments.org/
- Singh AR, Veale D. Understanding and treating body dysmorphic disorder. Indian J Psychiatry. 2019 Jan;61(Suppl 1):S131-S135. doi:10.4103/psychiatry. IndianJPsychiatry\_528\_18. PMID: 30745686; PMCID: PMC6343413. (Prevalence)
- Butcher, Michael. "Parvati." <em>Mythopedia</em>,
  November 29, 2022. <a
  href="https://mythopedia.com/topics/parvati"> cited
  on https://mythopedia.com/topics/parvati</a>.
- M. Lakshmi Research Scholar, Department of English St. Joseph's College Devagiri Calicut, Kerala, India, shalanx journal cited on https://www.shanlaxjournals.in/wp-content/uploads/shurpanagha\_a\_myth\_retold.pdf
- Acharya Y T, editor, (1st ed). Commentary Ayurveda Dipika of Chakrapanidatta on Charaka Samhita of Agnivesha, Vimanasthana; Rogabhishakjitiya adhyaya chapter 8, verse 116. Varanasi: Chaukambaprakasham; 2018;p.279
- Vaman Shivram Apte. The Practical Sanskrit-English Dictionary. The Digital Dictionaries of South Asia.
- 8. Acharya Y T, editor, (1st ed). Commentary Ayurveda Dipika of Chakrapanidatta on Charaka Samhita of

Agnivesha, Sharirasthana; Kathidapurushiya adhyaya chapter 1, verse 20. Varanasi: Chaukamba prakasham; 2018; p.288

- Raja Radha Kanta Deva. Shabda Kalpadruma. Part 2, Reprint 1967, 3rd Varanasi Chowkhamba Sanskrit Series Office: 451
- Acharya Y T, editor, (1st ed). Commentary Ayurveda Dipika of Chakrapanidatta on Charaka Samhita of Agnivesha, Suthrasthana; Indriyopakramaniya adhyaya chapter 8, verse16. Varanasi: Chaukamba prakasham; 2018; p.57-58
- American Psychiatric Association. (5th ed., text rev.)
   Diagnostic and statistical manual of mental disorders.
   2022;p245
   https://doi.org/10.1176/appi.books.9780890425787DS
   M -5
- 12. Kamble Samiksha Shankar& Kaknurkar Vrinda: A Literary Review of Manas Roga According To Ayurveda. International Ayurvedic Medical Journal {online} 2018 {cited March, 2018} Available from: http://www.iamj.in/posts/images/upload/661 668.
- Feusner JD, Yaryura-Tobias J, Saxena S. The pathophysiology of body dysmorphic disorder. Body Image. 2008 Mar;5(1):3-12. doi: 10.1016/j.bodyim.2007.11.002. Epub 2008 Mar 7. PMID: 18314401; PMCID: PMC3836287.
- 14. Acharya Y T, editor, (1st ed).Commentary Ayurveda Dipika of Chakrapanidatta on Charaka Samhita of

Agnivesha, Suthrasthana; Tisraisaniya adhyaya chapter11, verse54. Varanasi: Chaukamba Prakasham; 2018; p77

- 15. Sharma P.V, Dravyaguna-Vigyana, Vol II, Chaukhambha Prakashanam; Bharti Academy, Varanasi; Reprint 2006
- Acharya Y T, editor, (1st ed). Commentary Ayurveda Dipika of Chakrapanidatta on Charaka Samhita of Agnivesha, Suthrasthana; Dheergham jeevitiya adhyaya chapter 1, verse 58. Varanasi: Chaukamba prakasham; 2018; p.16
- 17. Acharya Y T,editor,(1st ed).Commentary Ayurveda Dipika of Chakrapanidatta on Charaka Samhita of Agnivesha, Chikistasthana; adhyaya chapter 3,verse320. Varanasi: Chaukamba prakasham; 2018; p.426
- 18. Schulte J, Schulz C, Wilhelm S, Buhlmann U. Treatment utilization and treatment barriers in individuals with body dysmorphic disorder. BMC Psychiatry. 2020 Feb 18;20(1):69. doi: 10.1186/s12888-020-02489-0. PMID: 32070300; PMCID: PMC7027080.

**How to cite this article:** Priyadarshini, Vijayendra G Bhat. Understanding of Body Dysmorphic Disorder - An Ayurvedic conceptual study. J Ayurveda Integr Med Sci 2024;9:206-210.

http://dx.doi.org/10.21760/jaims.9.9.33

**Source of Support:** Nil, **Conflict of Interest:** None declared.

Copyright © 2024 The Author(s); Published by Maharshi Charaka Ayurveda Organization, Vijayapur (Regd). This is an open-access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by-nc-sa/4.0), which permits unrestricted use, distribution, and perform the work and make derivative works based on it only for non-commercial purposes, provided the original work is properly cited.

\*\*\*\*\*\*\*\*\*\*