# AYURVED BHARATI® WHERE CLASSICAL WISDOM MEETS INTELLIGENT LEARNING

# vii. Psychological disorders

In the realm of **disease biology**, **psychological disorders** (also referred to as mental or psychiatric disorders) significantly impact individual well-being, social interactions, and societal health. Modern biomedicine classifies such disorders based on **clinical phenomenology** (e.g., anxiety, mood, psychotic symptoms), while **Āyurveda** interprets them through **doṣa**-mind interplays, *sattva-rajas-tamas* influences, and *manas roga* (mental diseases). Below is a detailed exploration of (I) modern classification and approach, (II) Ayurvedic concepts, and (III) integrative management strategies.

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# **Modern Biomedical Perspective on Psychological Disorders**

#### **Definition and Classification**

#### 1. DSM-5 / ICD-10 Systems

- Diagnostic and Statistical Manual of Mental Disorders (DSM-5) from the American Psychiatric Association, and the WHO's ICD-10 (soon ICD-11) provide standardized criteria for diagnosing psychological disorders.
- Main categories: Mood disorders (depression, bipolar), anxiety disorders (generalized anxiety, panic disorder, phobias), schizophrenia spectrum and other psychoses, personality disorders, neurodevelopmental disorders (ADHD, autism), etc.

#### 2. Etiological Factors

- Biological: Genetic predispositions, neurotransmitter imbalances (serotonin, dopamine), neural circuitry anomalies.
- **Psychological**: Trauma, stress, maladaptive thought patterns.
- $\circ \ \, \textbf{Social} \hbox{: Family environment, socio-economic stress, cultural context.}$

# **Pathophysiology and Neurobiology**

## 1. Neurochemical Dysregulation

- $\circ \ \ \text{E.g., low serotonin or norepine} phrine implicated in major depression, excessive dopamine in schizophrenia. \\$
- $\circ\,$  Synaptic receptor sensitivities, second messenger pathways can also be key.

#### 2. Brain Circuit Alterations

- Structural or functional changes in **limbic system** (emotions, memory), **prefrontal cortex** (executive function), or **amygdala** (fear processing) shaping symptom expressions.
- Neuroplastic changes from prolonged stress or environment can sustain pathological loops.

# **Management in Modern Psychiatry**

# 1. Pharmacotherapy

• Antidepressants (SSRIs, SNRIs), mood stabilizers (lithium, anticonvulsants), antipsychotics (dopamine-serotonin antagonists), anxiolytics (benzodiazepines, buspirone).

## 2. Psychotherapy

o Cognitive Behavioral Therapy (CBT), psychodynamic therapy, interpersonal therapy, etc.

#### 3. Lifestyle and Social Support

• Sleep hygiene, exercise, stress reduction, social rehabilitation.

# 4. Emerging Approaches

o Brain stimulation (ECT, rTMS), novel psychedelics for treatment-resistant depression, telepsychiatry.

# **Ayurvedic Perspectives on Psychological Disorders**

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# **Concept of Manas Roga**

# 1. Triguņa Model

- Āyurveda conceptualizes the mind through sattva (clarity), rajas (activity, passion), and tamas (inertia, darkness).
- Psychological imbalance arises from rajas-tamas aggravation overshadowing sattva.

#### 2. Doşa Interplay

- Mind is subtle but can be influenced by doşic imbalances—particularly vata (restlessness, anxiety), pitta (anger, irritability), kapha (lethargy, depression-like states).
- Unmadā (insanity), apasmāra (epilepsy with mental components), chittodvega (anxiety) often revolve around deeper doṣa-manas synergy.

# **Etiological Factors in Ayurveda**

# 1. **Prajñāparādha** (Failure of Intellect)

 Engaging in unethical or mentally disturbing actions, ignoring moral/spiritual intelligence → mental doşa aggravation.

# 2. **Asātmyendriyārtha-saṃyoga** (Improper Use of Senses)

 Overstimulation (loud noises, bright screens), suppressed expression or unnatural lifestyle fosters psychological distress.

# 3. Daiva/Āgantuka

• External events like trauma or "fate" (exogenous factors) can tip mental equilibrium, akin to modern psychosocial stressors.

# **Ayurvedic Therapeutics**

- 1. **Satvāvijayā Chikitsā** (Mind Control Therapy)
  - o Strategies involving counseling, spiritual or intellectual reorientation, affirmations, self-discipline.

# 2. Daivavyapāśraya Chikitsā

o Spiritual or faith-based approaches (mantra, devotions) for deep mental realignment.

#### 3. Yuktivyapāśraya

 Rational therapy using diet, herbal formulations (e.g., Brahmī rasāyana, Jatāmsī, Aśvagandhā), panchakarma for clearing dosic toxins.

#### 4. Lifestyle

 Dinacharyā, ritucharyā, consistent sleep-wake cycles, daily meditation, and yoga for psychosomatic harmony.

# **Integration: Commonalities and Distinctions**

## 1. Common Ground

- Both views see psychological disorders as multi-causal—biological, psychological, social or doṣa-guṇa interplay.
- Lifestyle and stress are recognized triggers.

#### 2. Points of Divergence

- Neurotransmitter imbalances vs. guņa/doṣa vantage.
- But synergy emerges when combining **Pharmacotherapy** (antidepressants, antipsychotics) with **Ayurvedic** rasāyanas, yoga, and *satvāvijayā*.

# **Clinical Implications and Management Approaches**

## 1. Modern-Ayurvedic Combined Therapies

- e.g., an SSRI for major depression + Brahmī (Bacopa monnieri) to enhance cognition, reduce anxiety.
- o Shirodhara or mild sedation with Jatāmsī, Tagara in insomnia, complementing short-term hypnotics.

#### 2. Public Health

- o Rising incidence of depression, anxiety, and psychosomatic disorders globally, especially post-pandemic.
- $\circ \ \ \text{Integrative mental wellness: Stress management camps, meditation (Sattva\ re-strengthening),\ nutritional}$

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guidance (avoiding tamas- and rajas-promoting diets).

# 3. Research

- Evaluating synergy of select Ayurvedic herbs (e.g., Aśvagandhā) in mild-moderate anxiety or depression with standard therapy.
- Neuroimaging evidence of improved cognition or stress hormone regulation with yoga-based interventions.

## **Future Directions**

## 1. Precision Mental Healthcare

- Pharmacogenomics guided psychotropics plus doşa-based identification for lifestyle prescriptions.
- o Incorporation of AI to track mental health progress, doping with daily routines from Ayurvedic vantage.

#### 2. Cultural and Holistic Outreach

• Emphasizing mind-body unity integral to Ayurveda, bridging psychological therapy with daily *dinacharyā*, prāṇāyāma, integrative counseling.

#### 3. Policy and Education

- AYUSH-psychiatry cross-training, broadening the acceptance of safe herbal anxiolytics or nootropics in mainstream mental health systems.
- WHO's mental health frameworks can incorporate validated Ayurvedic stress-management modules.

# Conclusion

**Psychological disorders** range from **anxiety, mood disorders, psychoses** (modern classification) to **unmadā, apasmāra, chittodvega** (Ayurveda). Both traditions concur on **multi-factorial etiology** (genetic predisposition, environment, psychosocial stress, doṣa-guṇa imbalance).

**Integrative** solutions hold promise: Modern psychiatry's advanced **pharmacotherapy** and **psychotherapies** can combine with **Ayurvedic** techniques (*satvāvijayā chikitsā*, doṣa-based regimens, yoga, rasāyana). This synergy addresses the **psychological**, **physiological**, **and spiritual** dimensions of mental illness—ultimately aiming for **holistic wellbeing**.

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