

## A Comparative Clinical Study of Jaladhara and Taildhara in the Management of Stress

### Research article

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### Abstract

In the present Era, stress is said to be one of the largest killers of man today. Stress is related to our total health - physical, mental and emotional. In Ayurveda stress is a resultant condition due to *pragyaparadha*. In the present study total 137 patients were registered and randomly divided into 3 groups viz: Group A were subjected to *Jaladhara* 7days along with *Mansyadi Kwatha* for 30days; Group B were subjected to *Tailadhara* for 7 days along with *Mansyadi Kwatha* for 30days; Group C received only *Mansyadi Kwatha* for 30days. The main aims & object of the study are: 1) To study the comparative effect of *Jaladhara* and *Tailadhara* in the management of stress. 2) To study the clinical efficacy of *Shirodhara*. Assessment of the effect of treatment was done on the basis of relief in the subjective & objective signs & symptoms of stress and on Brief psychiatric rating scale. The data were analysed statistically. It was observed that symptoms like insomnia, anxiety etc were almost completely relieved in *Shirodhara* group. In Brief Psychiatric rating scale statistically results of both the *dhara* group are highly significant. *Tailadhara* provided better relief in all most all the symptoms of Stress and in Brief psychiatric rating scale compared to *Jaladhara*.

**Key Words:** *Jaladhara, Taildhara, Stress, Bio humors, Pragyapradha, Shirodhara*

### Introduction:

According to the American academy of family physicians, the majority of all physician visits are prompted by stress-related symptoms that are known to cause or worsen medical conditions.

The modern jet-age world, which is said to be a world of amazing achievements, is also a horrible world of stress. We find stress everywhere, whether it be within the family, business

organization, enterprise or any other social or economic activity. Right from the time of birth till the last breath drawn; an individual is invariably exposed to various stressful situations. Thus, it is not surprising that interest in the issue has been raising in the present century which can be appropriately called the "Era of Anxiety and stress" According to latest health reports, stress is said to be one of the largest killers of man today. Stress is now becoming more accepted as being crucially related to our total health - physical, mental and emotional.

### Definition of stress:

The term "stress" is difficult to define and may mean different things to different people in divergent circumstances. The oldest definition is that

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of Hans Selye who defined stress as the "non-specific (i.e. common) result of any demand on the body, whether the effect be mental or somatic".

Regarding 'stress', there is no direct reference available in Ayurveda texts. In various available dictionaries, meaning of stress words are- *Aayaas*, *Pratyabala*, *Bhaar*, *Prayatna*, *Tanaav*, etc. (1) Hence it is clear that only terminological clarification is available to some extent but not detailed description regarding stress. So a hypothesis can be formulated where stress is correlated with *Buddhi*, *Dhruiti* and *Smriti Vibhramsha*, which ultimately leads to *Pragnaparadha*. *Pragnaparadha* is mentioned as one of the causative factor for nearly all the diseases, especially mental diseases. Due to *Pragnaparadha*, a person is not able to perform his intellectual functions at its optimum level and fails to discriminate between right and wrong which results in numerous mental diseases. Stress is outcome of such conditions.

Approach of Ayurveda towards mental diseases always keeps uniqueness, as it does with all other diseases. In any disease changes in the basic constitution of the body, which are evolved from causes related to physical and mental functions, frame a morbid physiology. The routes of the diseases get embedded in the two inseparable aspects of the living being, the body and mind in varying proportions. It is the keynote for the mutual dependence of mind and body, through which Ayurveda developed its therapeutic basis.

The route cause of all these is, vitiation of bodily humors - *Vaata*, *Pitta*, and *Kapha*. Bodily humors though made of 5 elements are related with mind also. The normal physiological functions of the bodily humors include many psychological functions. Thus *Vaata* is responsible for enthusiasm, *Pitta* is responsible for the activities of brain and generation of intelligence and *Kapha* is responsible for intelligence and will power etc.(2) of the

three humors, *Vaata* is mainly responsible for the activities of the mind. It is controller and stimulator of mind.(3) (4) Coming to the divisions of *Vaata*, we find *Prana* is the supporter of the mental functions and *Udana* is responsible for the generation of memory (5) and amongst the types of *Pitta*, *Sadhaka Pitta* is directly related to the functions of mind.(6)

Changes in bodily humors affect the mind too. Vitiating bodily humors adversely effect the normal functioning of mind. Taking into consideration the above factors of *Vaata*, it is evident that *Vaata* is of prime important among humors. This is true in the case of mental disorders also. *Shirodhara* is one of the treatment which helps to control the function of mind and is therefore selected for the present study of stress where mind is mainly vitiated. *Shirodhara* is described under *Murdha Tail*.

*Murdha Tail - Shirahatarpana* is suggested treatment for any disorders occurring in head region.(7) Vagbhata has divided *Murdha Tail* into 4 divisions and suggested as "*Uttarotara*" *Gunaprada* i.e., Sequentially more beneficial; they are 1) *Shiro - Abhayanga*(2) *Shira - Seka* (3) *Shira - Pichudharana* (4) *Shiro - Basti*.

According to classics *Shirodhara* should be done with *Sneha* only as it falls under *Murdha Tail* but, as the medicated oils are very costly and whole society cannot consummate it for the treatment *Jaladhara* came into existence.

Many research works are carried out on *Jaladhara* and *Tailadhara* individually but very few research works are carried out for any comparative assessment of *Dhara*.

*Mansyadi Kwatha* is given as a follow up drug after *Shirodhara* as stress is a psychic disease which requires some drug treatment (internal) also. *Mansyadi Kwatha* is widely utilized in GAU Jamnagar for many psychic diseases, as it contains, *Ashwagandha* (*Withania Somnifera*), *Jatamansi* (*Nordostachys*

Jatamansi) and *Khurasani Ajowain* (*Hyoscyamus Niger*). It is a reference of Siddha Yoga Samgraha and is indicated for *Apasmara* (Epilepsy) & *Akshepa* (Convulsions) etc psychic conditions.

### Importance of present study:

Stress being a crucial problem world wide, various psychiatric medicines have come in to existence for its cure. But it leads to drug addiction, drug dependency and many physical and mental side effects. Such patients are always in search of better treatment with least side effects. *Shirodhara* is a treatment with better results and has no side effects at all. It is only external treatment. *Shirodhara* is described under *Snehana* treatment, but in the present world various drugs like decoction, water, butter milk etc are utilized for *Shirodhara*. So, here an effort is done to find out the comparative effect of *Jaladhara* and *Tailadhara* in the management of stress. There is always question for drug absorption through *Shirodhara* which is tried to explain to some extent.

### Aims and objects:

- 1) To study the comparative effect of *Jaladhara* and *Tailadhara* in the management of stress.
- 2) To study the clinical efficacy of *Shirodhara*
- 3) To study the clinical efficacy of *Mansyadi Kwatha* in the management of stress.

### Material and method:

#### Clinical study:

To evaluate the therapeutic effect of *Shirodhara* clinical study was undertaken.

### Criteria of selection:

Patients with signs & symptoms of stress attending I.P.G.T.& R.A. hospital O.P.D & I.P.D. were selected irrespective of age, sex, occupation, religion, financial status etc.

### Criteria of exclusion

Patients presenting with severe complications like schizophrenia, insane etc were not taken for the study.

### Investigations

All the patients selected were subjected to routine investigations to rule out any complications.

- (1) Blood investigations: Hb, TC, DC, ESR, and PCV etc.
- (2) Urine investigations: routine & microscopic examination.
- (3) Stool investigations: routine & microscopic examination.
- (4) Biochemical examination.

### Grouping:

The selected patients were randomly placed & studied under three groups.

- Group A were subjected to *Jaladhara* along with *Mansyadi Kwatha*.
- Group B were subjected to *Tailadhara* along with *Mansyadi Kwatha*.
- Group C (standard control group) received *Mansyadi Kwatha*

### Drug, Dose & Duration

#### Drugs:

- Internal drug:-*Mansyadi Kwatha*
- External drugs: For *Shirodhara*-water and sesame oil.

#### Dose:

- *Mansyadi Kwatha* 20 ml B.D.
- Approximately 3 liters water/ sesame oil for *Shirodhara*.

#### Duration:

The Duration was 7 Days for *Shirodhara* followed by *Mansyadi Kwatha* for 30 days in group A group B. In group C only *mansyadi kwatha* was given for 30 days.

**Follow up study:** ONE-MONTH follow up study.

7 – 9 +++

**Ahara & Vihara:**

Patients under study were advised about Ahara & Vihara as indicated in the management of Vaata Vriddhi.

**Criteria of Assessment:**

Assessment of the effect of treatment was done on the basis of the relief in the subjective & objective signs & symptoms of stress. The data were analysed statistically.

**Brief Psychiatry Rating Scale:**

Signs and symptoms mentioned in this scale were assessed by adopting the following scoring pattern.

Gradation for each symptom:  
ABSENT-0/MILD-1/MODERATE-2/SEVERE-3

The available adopted score is grouped and scored as follows:

0 – 3 +  
4 – 6 ++

**Overall Effect of Therapy**

Overall effect of the therapy was assessed in terms of complete remission, marked improvement, moderate improvement, improvement and unchanged by adopted the following criteria.

- Complete remission: 100% relief in the Brief Psychiatry Rating scale was considered as complete remission.
- Marked improvement: 75% to 99% relief in the score of the Brief Psychiatry Rating scale was taken as marked improvement.
- Moderate improvement: 50% to 74% improvement in the Brief Psychiatry Rating scale scoring pattern was recorded as moderate improvement.
- Improvement: 25% to 49% improvement in the Brief Psychiatry Rating scale was considered as improvement.
- Unchanged: Less than 25% reduction in the Brief Psychiatry Rating scale was noted as unchanged.

**Observations and Results:**

Total 137 patients were registered for the study of stress management. Distribution of patients were as follows:

**Table No: 1**

Group	Completed	LAMA	Total Registered
A	35	06	41
B	38	06	44
C	43	09	52
	116	21	137

Total 137 patients were registered for the present study which was divided into 3 groups, total 21 patients left the treatment. 6 patients in *Jaladhara* group (GP-A), 6 patients in *Tailadhara* group (GP-B) and 9 patients in *Mansyadi Kwatha* group (GP-C).

Reason may be they could not come daily for *Shirodhara* and another was they wanted a miraculous result in just one sitting of *Shirodhara*. Few patients who completed 7 days of *Dhara* did not complete the medicine course as they felt relieved with only *Shirodhara*.

**Demographic data:**

**Table No: 2**

<b>Data</b>	<b>%</b>
Age- 31-45yrs	41.60
Sex- females	51.82
Religion- Hindu	91.24
Living arrangement- with family	90.51
Education- Graduate	32.11
Marital status- married	84.67
Occupation- house wife	43.06
Socio economic- middle class	39.41
Family history	27.73
Diet	87.59
Lavana rasa more	75.91
Shamshana	53.28
Poor quantity of food	78.83
Poor appetite	70.80
Urban area of residence	94.89
Not doing exercise	87.59
Disturbed sleep	89.05
Nightmares	39.41
5-6 hrs sleep	85.40
More than 6hrs of working	67.15
Moderate nature of work	51.82
Job satisfaction	54.01
Pallor	85.40
Nadi pariksha	71.53
Constipation	62.77
Normal urine frequency	90.51

**Table No: 3**

<b>Parameters</b>	<b>Maximum%</b>
Sharira Prakruti- Vaata- Pitta Prakruti	72.26
Manas Prakruti- Rajasika Prakruti	70.80
Sara-Madhyam	87.59
Samhana-Madhyam	86.86
Satva-Avara	54.74
Satmya- Madhyam	92.70
Pramana-Madhyam	89.05
Vyayam- Madhyam	86.13
Desha- Jangama	93.43

Causative factors: The most common causative factors were change in social activities 83.94%, change in amount of recreation 78.10%, change in job responsibilities 65.68%, personal illness 62.77%, change in eating habits 59.12% & change in sleeping habits 58.39%.

*Srotas Dushti* wise: Maximum *Sroto Dushti* is of *Rasavaha Srotas* found in 97.81% of patients & *Asthivaha Srotas* in 97.08% of patients followed by *Annavaha Srotas Dushti* in 95.62.

All the patients i.e. 100% had chief complaint of can't concentrate, than 97.81% had can't cope, 95.62% had always tired, 94.89% of patient had feel hopeless & helpless & trouble sleeping & 85.40% had depressed, 89.05% were uninterested in life in general.

Associated complains were mainly Gabharaman in 53.28%, negative thinking in 49.63%, chest pain in 33.57% and burning in chest in 37.22%.

**Table No: 4 Total effect on brief pshychiatric rating scale in Group-A (*jaladhara* group):**

<b>BPS</b>	<b>N</b>	<b>mean</b>	<b>% of relief</b>	<b>SD</b>	<b>SE</b>	<b>t</b>	<b>P</b>
Somatic concern	29	1.45	69.16	0.74	0.14	10.41	<0.001
Anxiety	35	2.03	69.67	0.45	0.08	26.12	<0.001
Emotional withdrawal	34	1.74	69.23	0.62	0.11	16.12	<0.001
Conceptual disoranzation	34	1.38	64.51	0.55	0.09	14.40	<0.001
Guilt feeling	33	1.73	69.35	0.57	0.10	17.02	<0.001
Tension	35	2.08	71.77	0.51	0.09	23.98	<0.001
Mannerism & posturing	21	0.81	57.14	0.60	0.13	6.02	<0.001
Grandiosity	25	1.36	72.92	0.91	0.19	7.34	<0.001
Hostility	30	1.80	75.95	0.81	0.15	12.03	<0.001
Suspiciousness	33	1.73	75.77	0.88	0.15	11.16	<0.001
Hallucinatory behaviour	00	00	00	00	00	00	00
Motor retardation	34	1.21	70.58	0.54	0.09	12.87	<0.001
Uncooperativeness	32	1.31	72.37	0.69	0.12	10.55	<0.001
Unusual thought affect	34	1.41	76.59	0.66	0.11	12.35	<0.001
Excitement	34	1.85	80.35	0.74	0.13	14.31	<0.001
Disorientation	04	0.75	60	0.50	0.29	2.59	<0.001
Blunted affect	33	1.42	72.16	0.61	0.11	13.12	<0.001

p<0.001 : Highly significant

**Table No: 5 Total effect on brief psychiatric scale In Group -B ( *Taildhara* Group)**

<b>BPS</b>	<b>N</b>	<b>mean</b>	<b>% of relief</b>	<b>SD</b>	<b>SE</b>	<b>T</b>	<b>P</b>
Somatic concern	25	1.64	78.85	0.64	0.13	12.59	<0.001
Anxiety	37	2.57	88.29	0.55	0.09	27.77	<0.001
Emotional withdrawal	38	2.21	85.06	0.53	0.09	25.47	<0.001
Conceptual disorganization	38	1.53	78.68	0.56	0.09	16.67	<0.001

Guilt feeling	35	1.71	85.71	0.67	0.11	14.98	<0.001
Tension	38	2.29	80.63	0.65	0.11	21.30	<0.001
Mannerism & posturing	16	0.43	44.25	0.51	0.13	3.31	<0.001
Grandiosity	20	1.25	69.44	0.72	0.16	7.61	<0.001
Hostility	35	1.97	87.68	0.71	0.12	16.27	<0.001
Suspiciousness	32	1.81	82.56	0.86	0.15	11.75	<0.001
Hallucinatory behaviour	03	0.33	34	0.58	0.41	0.82	-
Motor retardation	34	1.09	77.30	0.71	0.12	8.78	<0.001
Uncooperativeness	30	1.2	86.71	0.61	0.11	10.59	<0.001
Unusual thought affect	36	1.44	84.57	0.56	0.09	15.32	<0.001
Excitement	37	1.94	85.71	0.62	0.10	18.79	<0.001
Disorientation	04	1.25	62.50	0.50	0.29	4.33	<0.01
Blunted affect	37	1.38	74.19	0.68	0.11	12.14	<0.001

p<0.001 : Highly significant

**Table No: 6 Total effect on brief psychiatric scale in Group -C (only oral drug)**

BPS	N	mean	% of relief	SD	SE	T	P
Somatic concern	29	1.04	60.98	0.65	0.13	8.14	<0.001
Anxiety	43	1.81	63.42	0.76	0.12	15.39	<0.001
Emotional withdrawal	43	1.69	65.46	0.56	0.09	19.72	<0.001
Conceptual disorganization	43	1.07	60.97	0.55	0.09	12.56	<0.001
Guilt feeling	41	1.00	58.48	0.63	0.10	10.00	<0.001
Tension	43	1.93	65.87	0.51	0.08	24.68	<0.001
Mannerism & posturing	11	0.09	10	0.30	0.09	0.95	-
Grandiosity	07	0.14	12.28	0.38	0.15	0.93	-
Hostility	39	1.08	59.34	0.58	0.09	11.45	<0.001
Suspiciousness	38	1.21	62.37	0.70	0.12	10.47	<0.001
Hallucinatory behaviour	00	00	00	00	00	00	-
Motor retardation	33	0.52	44.07	0.51	0.08	5.74	<0.001
Uncooperativeness	33	0.42	38.39	0.56	0.09	4.28	<0.001
Unusual thought affect	42	0.83	53.90	0.69	0.11	7.67	<0.001
Excitement	43	1.44	70.59	0.73	0.11	12.74	<0.001
Disorientation	17	0.41	47.62	0.62	0.15	2.66	<0.01
Blunted affect	42	1.12	62.50	0.59	0.09	12.08	<0.001

p<0.001 : Highly significant

**Effect of therapies on chief complaints :**

**Table No: 7 Comparative Data Of % Wise Relief In All The Three Groups:**

Chief complaints	Group- A	Group- B	Group- C
Can't cope	77.82	84.29	61.62
Can't concentrate	79.56	83.33	57.99
Feel hopeless & helpless	78.03	86.36	59.14
Depressed	82.03	88.34	74.70
Always tired	67.01	86.60	82.27
Often irritable & angry	80.35	83.45	75.66
Eat too much	33.33	50	66.67
Eat too little	85.10	86.70	75.69
Trouble sleeping	69.71	96.23	47.57
Frequent headache	96.94	97.23	55.68
Frequent backache	65.73	72.68	62.98
Frequent pain in legs	73.68	75	62.50
No time to talk to friends & family	69.12	63.64	70
Not interested in sex	55.33	85.71	57.80
Always sick get cough & cold & other viral infection	100	66.67	84.72
Allergies	24.81	00	40
Skin rashes	69.35	54.55	50.22
IBS	85.71	100	78.57
Hyper gastritis	100	100	93.41
Constipation	100	100	91.51
Not interested in life in general	74.07	80.09	64.62

**Table no: 8 Assessment of Shirodhara:**

<i>Samayaka Shirodhara Lakshana</i> (Symptoms of properly performed <i>Shirodhara</i> )	Group- A	%	Group- B	%
<i>Sthairya Vaaga</i> (Stability of speech)	24	68.51	14	36.84
<i>Sthairya Mana</i> (Stability of Mind)	35	100	35	92.1
<i>Sthairya Sharirabala</i> (Enhances the physical stamina)	34	97.14	36	94.73
<i>Ahara Akanksha</i> (Promotes appetite)	29	82.85	35	92.1
<i>Dhriti</i> (Promotes intellect)	35	100	34	89.47
<i>Vaani Madhura</i> (Promotes sweetness of voice)	29	82.85	23	60.52
<i>Netra Prakasho Agadaha</i> (Improves the eye sight)	34	97.14	36	94.73
<i>Tvacha Mruduta</i> (Promotes smoothness of skin)	12	34.28	07	18.42
<i>Shukra Asrigapariposhanam</i> (Nourishes the body tissues)	33	94.28	36	94.73
<i>Rat Rati</i> (Promotes sexual function)	07	20	10	26.31
<i>Alpa Ushana</i> (Decreases the body temperature)	12	34.28	06	15.78

In *Jaladhara* group *Dhriti* and *Sthairya Mana* is obtained in 100%. And *Sthairya Sharira Bala* and *Netra Prakasho Agadaha* is obtained in 97.14 %

In *Tailadhara* group 94.73 % of patient had *Sthairya Sharira Bala*, *Netra Prakasho Agadaha* *Shukra Asrigapariposhanam*, and 92.10% of patient had *Sthairya Mana*, *Ahara Akanksha*.



**Table No 9 : Total effect of therapy in recurrence:**

Recurrence	Gp A	%	Gp B	%	Gp C	%
Present	05	14.29	01	2.63	09	20.93
Absent	30	85.71	37	97.37	34	79.07

Recurrence was obtained in 14.29 % of patient in *Jaladhara* group, and 20.93% in *Mansyadi Kwatha* Group. While only 2. 63 % of recurrence is obtained in *Tailadhara* group

**Discussion:**

**Effect on brief psychiatric rating scale:**

It was observed that symptoms like Somatic concern, anxiety, emotional withdrawal, Guilt feeling, Tension etc occur due to change in normal functions of various parts of brain and specially hypothalamus. On observing the relief obtained in brief psychiatric rating scale through *Shirodhara* the following possible explanation can be given.

**Effect on central nervous system:**

The hypothalamus controls many body activities and is one of the major regulators of homeostasis. Sensory input from the external and internal environments ultimately comes to the hypothalamus via sensory pathways originating in somatic and visceral sense organs. Impulses from sound, taste, and smell receptors all reach the hypothalamus. Other receptors within the hypothalamus itself continuously monitor osmotic pressure, certain hormone concentrations, and the temperature of blood.

- 1) Control of autonomic nervous system: Most regulation of involuntary activities of smooth muscles, cardiac muscles and glands by the autonomic nervous system originates in the brain stem and nearby brain region called the hypothalamus.
- 2) control of pituitary gland: The hypothalamus produces several hormones and has two types of important connections with the pituitary gland.
- 3) Regulation of emotional and behavioural patterns: Together with the limbic system with the hypothalamus

regulates feelings of rage, aggression, pain, and pleasure and behavioural patterns of sexual arousal.

- 4) Regulation of eating and drinking.
- 5) Control of body temperature.
- 6) Regulation of diurnal (daily) rhythms and states of consciousness.

Signals from the hypothalamus and even from the cerebrum can affect the activities of almost all the brain stem autonomic control centers.(8,9) Control of Corticotrophin Releasing Hormone (CRH) is also from hypothalamus. Serotonin or 5-Hydroxytryptophan (5 HT) is concentrated in the neurons in a part of the brain stem called the raphe nucleus. Axon projecting from the raphe nucleus terminates in the hypothalamus and other part of the brain and spinal cord. Serotonin is thought to be involved in inducing sleep, sensory perception, temperature regulation, and control of mood. More serotonin available in the synaptic cleft may allow signals to pass from one neuron to another more easily. Various other nucleus of limbic system like amygdaloid, thalamus and Locus Ceruleus are all involved with the psychic behavior of an individual. It can be ultimately postulated that *Shirodhara* may be having some effect on hypothalamus resulting in the effect of brief psychiatric rating scale.

**Mode of action of *shirodhara*:**

Mode of action of *Shirodhara* can be studied in following ways:

1. Drug Absorption
2. Physical Effect

3. Effect on Blood Supply
4. Effect on *Marma*

1. **Drug Absorption:** *Vagbhata* has given 4 varieties of *Murdha Tail* 1) *Shiro Abhayanga*, 2) *Pariseka*, 3) *Shiro Pichu*, and 4) *Shiro Basti*. Regarding its beneficial effect *Vagbhata* has clearly specified it as “*UTTAROTTAR GUNAPRADA*“ (i.e. sequentially beneficial). This indicates that there are chances of drug absorption from the scalp region otherwise there was no need for these four separate procedure on the head region.
2. **Physical effect:** The symptoms like tension headache, and muscular tension caused due to sustained contraction of skeletal muscles can be relieved by the physical effect of *Shirodhara*.
3. **Effect on Blood Supply:** *Shirodhara* improves the circulation there by correcting the brain circulation which is very important in stress. Symptom like migraine headache, which is caused by extra cranial Vasodilatation and that the neurological symptoms which are produced by intra cranial vasoconstriction.(10) *Shirodhara* may be helpful in regularizing the blood supply of brain and can relieve the pain of migraine.
4. **Effect on *Marma* (Vital sites):** Out of 37 *Marmas* in the supraclavicular region, 23 are situated in the head. *Shirodhara* procedure mainly effects on *Sthapani*, *Shankaha*, *Utkshepa* and *Adhipati Marma*, which are located in head region.

- In Gp. B 65.79% had marked improvement while moderate improvement was obtained in 26.32%.
- In Gp. C marked improvement was obtained in 32.56% & 41.86% of patients had moderate improvement. As *Taila* is considered to be best *Vaata Shamaka* we can get better result in *Tailadhara* group.

#### **Mode of action of drug:**

***Shirodhara:*** As per the principle of drug absorption maximum absorption is in the scalp region and comparatively oil is better absorbed than water. Due to *tikshana*, *vyavayi* & *sukshma* property of *til tail* it penetrates easily into *manovaha srotas* correcting vitiation of *manas dosha* (*Raja* & *Tama*). At the same *bhrimhana*, *balya*, *vaata shamana*, *medhya* properties of *til tail* it corrects all *maanas vikaras* (Mental Diseases).

***Mansyadi kwatha:*** *Bhutaghna prabhava* (Specific effect on micro organisms) of *jatamansi* & *maadak prabhava* (which calms the mind) of *khurasini ajwain* corrects the vitiation of *maanas dosha* (*Raja* & *Tama*) by penetrating into *manovaha srotas*. *Medhya* (promotes the intellect) & *nidrajana* (the one which induces sleep) property of *jatamansi* & *rasayana* (Rejuvenation) & *balya* (promotes the physical and mental strength) property of *ashwagandha* corrects all *maanas vikara*. *Tridosha shamaka* (subsides the increased bio humors) property of *jatamansi* & *kapha vaata shamaka* property of *ashwagandha* corrects all the somatic ailments.

#### **Total effect of therapy:**

- Marked improvement was obtained in 51.43% in Gp. A, & 40% had moderate improvement.

#### **Conclusion:**

- Main causative factor as per Ayurveda is *Pragnapradha* & main *Manas Dosha* involved is *Raja*. *Sharirika*

*Dosha* are mainly: *Vaata – Prana, Udana & Vyana, Pitta – Sadhaka, Dushaya- Mana* and all *Dhatu*s. *Rasavaha, Raktavaha, Asthivaha* and *Swedavaha* are main *Srotas* involved in the disease stress.

- For any disease occurring in head region *Vaata* is main *Dosha* as it is controller of mind. For *Vaata Shamana* oil is considered to be best. So various *Snehana* treatment under the topic of “*Murdha Tail*” is described, where *Shirodhara* is included under “*Pariseka*”(Seka). *Shirodhara* is a part of *Snehana Kalpana (Bahya Snehana)*.
- Due to specific procedure of *Shirodhara* i.e. pouring of liquid media on forehead, patient’s concentration is increased & hence his mind is relaxed from negative thoughts. This is the procedural effect, which is equally obtained in *Jaladhara & Tailadhara*.
- Due to *Vaata Shamaka* and *Medhya* properties of *Tila Tail* it provided better relief in sign & symptoms of stress.
- *Tailadhara* provided better relief in most of the chief complaints and in Brief psychiatric Rating Scale compared to *Jaladhara*.

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