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A Case Report on Ayurvedic Management of **Attention Deficit Hyperactivity Disorder [ADHD]** in Children

Akshav Gurav¹, Jennifer D'souza²

¹Assistant Professor, Dept. of Kaumarabhritya, Government Ayurveda Medical College & Teaching Hospital, Shivamogga, Karnataka, India.

²Final Year UG Student, Government Ayurveda Medical College & Teaching Hospital, Shivamogga, Karnataka, India.

ABSTRACT

Attention Deficit Hyperactivity Disorder - ADHD is the most common neurobehavioral disorder of childhood. It interferes with social, academic and occupational functioning and it is characterized by inattention, hyperactivity and impulsivity. In Ayurveda, disorders related to psychiatric and behavioral disturbances are discussed under the chapter of Unmada. So, according to the sign and symptoms it can be co-related with Unmada. The present case was carried out in Kaumarabhritya OPD & IPD of Government Ayurveda Medical College & Teaching Hospital, Shivamogga, Karnataka with an aim to assess the efficacy of Ayurvedic treatment protocol in the management of ADHD in children. Ayurvedic treatment like Kosthashodhana, Basti, Shirodhara and Nasya were followed and assessment was done before and after treatment and during follow ups. The given treatment was found to be effective in management of ADHD.

Key words: ADHD, Unmada, Behavioral Disorder, Ayurvedic Management, Case Report

INTRODUCTION

ADHD is a neurobehavioral disorder of childhood. Its prevalence in India was estimated at 1.3 per 1000. The American academy of pediatrics recommends evaluating any child between 4-18 years of age for ADHD, if he or she presents with academic or behavioral problems with symptoms of inattention, hyperactivity and impulsivity. It interferes with social, academic and occupational functioning. Its onset will

Address for correspondence:

Dr. Akshay Gurav

Assistant Professor, Dept. of Kaumarabhritya, Government Ayurveda Medical College & Teaching Hospital, Shivamogga, Karnataka, India. E-mail: guruakshay001@gmail.com Submission Date: 19/05/2022 Accepted Date: 29/05/2022

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be upto 12 years of age. Although the symptoms of ADHD begin in childhood, it can continue through adolescence and adulthood.^[1] Mothers of children with ADHD are more likely to experience birth complications such as toxemia, prolonged labor and complicated delivery. Maternal drug use, smoking and alcohol during pregnancy, lead or mercury exposure are commonly linked to attentional difficulties associated with the development of ADHD.^[2]

In Ayurveda, there is no direct correlation for ADHD, but according to its signs & symptoms it can nearly be corelated with Unmada. According to Acharya Charaka, the causative factors for Unmada are, intake of incompatible, contaminated and unclean foods, possession by spirits like Gods, mental trauma due to recurrent exposure to fear or exhilaration. By these causes the Dosha gets vitiated in the person possessing low level of Sattva Guna and in turn vitiate the mind, which is the seat of intellect. Common features of Unmada are, intellectual confusion, unsteadiness of mind, impatience, restlessness, incoherent speech, feeling of emptiness in mind, anxiety. Ayurvedic line of

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treatment has key role in managing Neurobehavioral disorders like ADHD etc., Hence, present case was an attempt to manage the ADHD disorder using Ayurvedic line of treatment.

CASE STUDY

A 7-year-old female child with the complaints of hyperactivity, irritability in attentiveness, and lack of concentration, low memory power and delayed speech had approached our hospital. As per the information by her parents, the child was apparently normal till 3 years of age. Gradually they noticed the behavioral disturbances in their child. She was not able to concentrate on any things in particular for more time. She developed irritability behavior, inattentive and slow learning. She had low memory power that she can't even recognize their parents. Then she developed anxiety and fear towards people and the crowd where she became socially inactive. She also had the problem in her speech. Patient had taken treatment for this but no changes observed in her behavior. So, they approached our hospital for further management.

Birth History

Pre-term delivery with caesarean section [previous LSCS]. No history of Birth Asphyxia.

Developmental History

Gross motor & fine motor development were normal as per the chronological age but there was delayed with Language and Social development.

Family History

Non-Consanguineous marriage. Elder sister has no any problem.

Personal History

Diet - Mixed Appetite

Bowel - Clear (once daily)

Urine - Normal

Sleep - Sound

General Examination, Anthropometry and Vitals

General condition - Fair, Lean, Hyperactive and inattentive. Height - 110 cm Weight - 17 kg HC - 50 cm CC - 56 cm MAC - 13.5 cm HR - 102 bpm RR - 26 rpm Temperature - Afebrile

Systemic Examination

Examination of Cardiovascular system, Respiratory system, Per abdomen shows no deformity. Gait was normal. Muscle tone and texture was normal.

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Central Nervous Examination

Patient was conscious, inattentive, easily gets distracted, poor eye contact, not obeying the commands and irritable, can't speak even two words, unable to identify persons, body parts, numbers, colors, low memory power, not able to write.

Ashta Sthana Pareeksha

Nadi - Vata-Pittaja

Mala - Prakruta (once daily, normal consistency, satisfactory)

Mutra - Prakruta (4-6 times a day / 1-2 times at night)

Jihwa - Aliptha (not coated)

Shabda - Aspashta (unable to speak)

Sparsha - Sheetha (Cold)

Drik - Prakrutha (normal)

Akriti - Leena (lean)

Samprapti Ghataka

Dosha - Vata- Pitta Pradhana

Dooshya - Rasa, Manas

Agni - Vishamagni

Udbhavasthana - Pakwashaya

Adhisthana - Shiras

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Vyakthasthana - Sarvashareera

Srotas - Manovahasrotas

Srotodushti - Sanga and Vimargagamana

Rogamarga - Abyantara

Treatment Plan

Rogaswabhava - Chirakari

Sadya Asadyata - Krichra Sadhya

Diagnosis: Attention Deficit Hyperactivity Disorder (*Vata-Pittaja Unmada*)

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DOA – DOD	Panchakarma Given	Shamana Aushadi	Observation
			(After 15 days of discharge)
1 st sitting 30/08/2021 TO 08/08/2021	 1st and 2nd day Krimimudga Rasa 1-0-1 A/F Udhwarthana with Kola Kulatta Chuna + Godhuma Churna f/b Nadi Sweda 3rd day Sadhyo Virechana with Gandarvahastadi Taila - 10ml with warm milk for 1 day 4th to 10th day Shirodhara with Dashamoola Kwatha. Sarvangaabyanga with Ksheerabala Taila f/b Nadisweda Matrabasti with Ksheerabalataila - 20ml 	Saraswatarista with gold 10 drops -0-0 with milk on E/s Syp Memorin = 5ml-0-0 Smriti granules = 0-0-1tsf with milk bed time Asyapratisrana with Trikatu, Yastimadhu, Vacha Churna, twice daily	Mild decrease in hyperactivity. Slight increase in concentration. Able to spell few words.
2 nd Sitting 29/09/2021 TO 06/10/2021	 1st day Udhwarthana with Kola Kulatta + Godhumachurna f/b Nadi Sweda Trikatu Churna ½ tsf TID 2nd to 8th day Sarvangaabyanga with Ksheerabalataila f/b Nadi Sweda Takradhara with Brahmi, Yashtimadu, Vacha, Rasna, Ashwaganda Churna Matrabasti with Ksheerabala Taila - 20 ml 	Brahmi Vati Swarna Yukta 1-0-0 with milk E/s Brahmi Ghrita = 5ml-0-5ml Asyapratisarana with Trikatu, Yastimadhu, Vacha Churna, twice daily	Able to spell more words than last admission Able to concentrate on particular thing for more time Social activeness increased. Able to follow some instructions given by parents.
3 rd sitting 15/11/2021 TO 23/11/21	1 st day Udhwartana with Kola Kulatta Churna + Godhuma Churna f/b Nadi Sweda 2 nd day to 8 th day Shirodhara with Brahmi Taila Sarvanga Abyanga with Mahanarayana Taila Matra Basti with Mahanaryana Taila	Brahmi Vati Swarna Yukta 1-0-0 with milk E/s • Brahmi Ghrita 5ml-0-5ml Syp Mentrich 0-0-5ml	Irritability was decreased. Fear towards stranger decreased. Able to spell more words than earlier
4 th sitting 21/03/2022 TO 29/03/2022	1 st day Udhwartana with Kola Kulatta Churna + Godhuma Churna f/b Nadi Sweda 2 nd day	Smriti Sagara Rasa 1-0-1 Brahmi Ghrita 5ml-0-5ml Pratimarsha Nasya with Anu Taila 2/202/2	Able to spell more words. Able to recognize the parents Concentration and memory is increased than the earlier.

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5 th Sitting 22/04/22 TO 29/04/22	Sadhyo Virechana with Trivrut Leha - 15gms with milk on E/S3rd to 9th dayShirodhara with Ksheerabala TailaSarvanga Abyanga with Ksheerabala Taila Matra Basti with Kalyanaka Ghrita - 20 ml1st to 7th dayShirodhara with Brahmi Taila Sarvanga Abyanga with Ksheerabala Taila f/b NadiswedaMatra Basti with Mahakalyanaka Ghrita - 20 ml	Smriti Sagara Rasa 1-0-1 Brahmi Ghrita 5ml-0-5ml Pratimarsha Nasya with Anu Taila 2/202/2 Asyapratisarana with Trikatu, Yastimadhu and Vacha Churna.	Concentration on particular thing has been increased a lo Able to recognize her family members and friends. Hyperactivity decreased She is able to attend the school Obeys the commands and does the assigned work properly. Able to spell her name and their family members. Able to recognize the body parts. Socially friendly behavior and friendship developed.
6 th sitting 03/05/2022 TO 11/05/2022	 1st & 2nd day Udhwartana with Kola Kulatta Churna + Godhuma Churna f/b Nadi Sweda 3rd to 9th day Sarvanga Abyanga with Mahanarayana Taila f/b Nadi Sweda Matra Basti with Brahmi Taila 20ml Shiro Pichu with Brahmi Taila 	Saraswataarista with gold, 10 drops with milk E/s Brahmi Ghrita 5ml-0-5ml Brahmi, Vacha, Ashwagandha Chruna 0-0-1/2 spoon with honey at bed time	Follow up advised after 15 days

DISCUSSION

IS

ADHD is associated with *Pitta* and *Vata Dosha* and even in this case we observed predominant of *Vata* and *Pitta*. So, plan of treatment was mainly to bring *Vata*-*Pitta* into normalcy. As ADHD is a neurobehavioral disorder, drugs were used which is having the *Medya* properties.

In the first admission we advised the *Sadhyo Virechana* with *Gandarvahastadi Taila* with milk for the purpose of *Koshta Shodhana* as well as it helps in further treatment by appropriate absorption of medicine. As she is 7 years old, the classical *Virechana* is contraindicated so, we planned for *Sadhyo Virechana*.

Then in each sitting we had planned for the Sarvanga Abyanga, Nadi Sweda, Kashayadhara / Takradhara / Tailadhara, Matrabasti.

Probable mode of action of the treatment are as follows:

Udwarthana: In each sitting for 1st day along with *Deepana Pachana* drugs we conducted *Udwartha* for *Avaranahara* action.

Shirodhara: As *Shira* is considered to be *Uttamanga* in Ayurveda which controls the functions of body, we planned for *Shirodhara*. When *Dhara* falls over forehead and head, in a continues oscillatory manner

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it activates the local cells. With this the drugs used here like *Dashamoola, Yastimadhu, Vacha, Brahmi* are *Vata Pitta Hara* and possess *Sheetavirya* which gives cooling effect to head, helping in reducing the hyperactivity and the *Medya* property in them increases the concentration and memory power. *Shirodhara* only acts as the *Sthanika Chikitsa* which helps in acute cases. So, for the further development in the condition, we added *Matra Basti* with this simultaneously.

Matra Basti: According to *Acharya Charaka, Basti* is considered as *Ardha Chikitsa* which is the prime treatment for *Vata*.^[3] *Rajoguna* which is predominant in ADHD is controlled by *Vata*. So, if *Vata* is controlled then *Rajo Guna* also gets controlled. *Basti* acts on whole body through gut brain axis and acts on brain which helps in reducing the stress, anxiety and depression.

Initially we advised *Matra Basti* with *Tailas* like *Ksheerabala Taila* and *Mahanarayana Taila*, as the *Taila* helps in controlling the *Vata* which in turn controls the hyperactivity which is the primary complaint in ADHD. Later on in the further sittings we advised *Mahakalyanaka Ghrita*, as *Ghritha* controls the *Pitta* and also this *Ghrita* helps in increasing the cognitive power. When *Vata Pitta* got controlled, we used *Brahmi Taila* which is having *Medya* property.

Shamana Aushadi: After purificatory measures, the morbid Doshas from the body will be eliminated. After that by giving the Shaman Aushadi containing gold which possess the Medya properties will act on the brain cells and helps in increasing the concentration and memory power. So, we advised Brahmi Vati Swarna Yukta, Brahmi Ghrita, Saraswataarista with gold, Smriti granules etc.

Asyapratisaran: Speech is also matter of concern in ADHD and even in this case child was having the

problem with speech, so we also planned *Asyapratisarana* with *Teekshna*, *Ushna* and *Medhya* drugs which helped a lot more in her speaking abilities.

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Nasya: *Nasa* is the *Dwara* of *Shiras*. So, we advised the *Pratimarsha Nasya* with *Anu Taila* which increased her mental ability.

CONCLUSION

According to Ayurveda, ADHD can be nearly co-related to Unmada based on the sign and symptoms. Approach to Doshas involved, symptoms and Chikitsa are explained in the same. On this basis the case was diagnosed as Vata-Pittaja Unmada and accordingly treatment has been planned. Treatment included Deepana, Pachana, Shirodhara, Matra Basti followed Shaman Aushadi with Medya by drugs, Asyapratisarana and Pratimarsha Nasya along with speech therapy. As ADHD is Yapya Vyadhi an attempt was made to increase the quality of life to child as well as for the family and it gave the satisfactory results for which even the parents are also happy.

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