



Case Study

AYURVEDIC MANAGEMENT OF *CHITTODVEGA* WITH *PRATIMARSHA NASYA* AND *GHRITA PANA*: A CASE REPORT ON A HOLISTIC APPROACH TO GENERALIZED ANXIETY DISORDER

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ABSTRACT

Mental health has become a major concern in today's increasingly stressful world, impacting individuals and society at large scale. The modern lifestyle usually consists of instability, uncertainty, and constant change which has contributed to widespread psychological strain, leaving many people in the feeling of overwhelmed and disoriented, thereby increasing the risk of developing mental health disorders. Anxiety, a widely recognized mental health disorder, is described in Ayurveda under the category of *Manodosha Vikara*, specifically identified as *Chittodvega*. It is considered a type of *Manovikara*, primarily caused by the aggravation of the *Manasika Doshas* i.e., *Rajas* and *Tamas* and is also regarded as a contributory factor in the pathogenesis of *Unmada Roga*. In modern psychiatric practice, this condition aligns closely with Generalized Anxiety Disorder (GAD), one of the most commonly encountered mental health disorders in current clinical settings. This case study describes a 32-year-old female patient who presented with chief complaints of persistent overthinking, significant memory decline, restlessness, impaired concentration, and delayed cognitive responses. These symptoms adversely affected her professional and occupational life. In this clinical case, the patient was managed with *Pratimarsha Nasya Karma* as a local therapeutic procedure, alongside internal administration of *Medhya Ghrita* as part of *Shamana Chikitsa*. This combined intervention resulted in significant clinical improvement, with marked reduction in anxiety symptoms, enhanced cognitive clarity, emotional regulation, and improved the sleep cycle.

INTRODUCTION

Anxiety is a universal experience, often arising before exams, critical decisions, or everyday challenges. While mild anxiety can be adaptive and beneficial, excessive or chronic anxiety significantly impairs daily functioning. In our fast-paced, high-pressure modern society, the prevalence of anxiety disorders has surged across all age groups, it not only affects cognitive and emotional well-being but also causes impairment in physical health and behaviour patterns. One of the most commonly diagnosed conditions under the umbrella of anxiety disorders is

Generalized Anxiety Disorder (GAD). Characterized by persistent, excessive and unrealistic worry associated with muscle tension, impaired concentration, autonomic arousal feeling on edge or restless and insomnia. Patients with generalized anxiety disorder worry excessively over minor matters with life disrupting effects^[1]. Anxiety and worry are universal human experiences and only assume medical significance if they are disproportionate to stresses or persists even after they have been resolved. Persistent Anxiety is distressing, interferes, with medical management and may require specific attention^[2].

Chittodvega is a compound term derived from "*Chitta*" and "*Udvega*." *Chitta*, from the root *Chit*^[3], refers to consciousness, perception, and mental activity. With the addition of *Kta Pratyaya*, it implies the perceived or contemplated mind^[4]. *Udvega*, derived from the root *Ud* with *Vin Pratyay*, signifies mental agitation, anxiety, or emotional distress^[5].

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Thus, *Chittodvega* denotes a disturbed or anxious state of mind, reflecting both cognitive and emotional imbalance. *Acharya Charaka*, in *Vimana Sthana*, categorizes it under *Manodosha Vikara*^[6], distinguishing it as a mental disorder primarily arising from psychological imbalances. In *Manasika Vikaras*, the disturbance originates in the *Manasa* and later affects the *Sharira*. This occurs due to the deterioration of *Sattva Guna* and the dominance of *Rajas* and *Tamas* the vitiated *Manasika Doshas*^[7]. As a result, both mental and spiritual faculties are impaired, leading to the manifestation of various *Mano Vikaras*.

In addition, *Tridoshas* also significantly contribute to the manifestation of this condition. *Vata Dosha* plays an important role in mental instability due to its control over the nervous system and cognitive functions. When *Vata* especially *Prana Vayu* is aggravated, it can result in symptoms such as overthinking, fearfulness, and sleep disturbances. An imbalance in *Sadhaka Pitta*, which governs emotional and intellectual responses, may heighten emotional sensitivity. Similarly, dysfunction of *Tarpaka Kapha*, which supports mental steadiness and nourishes brain tissues, can lead to poor emotional resilience and mental dullness. The combined disturbance of these specific *Tridoshic* imbalance forms the pathophysiological basis of *Chittodvega*.

Ayurveda, treasure of healthy living is an eternal science of life and health which deals with physical, psychological and spiritual well-being of humans. *Acharya Charaka* advocates a comprehensive approach to managing *Manasa Rogas*, emphasizing the regulation of *Manasika Doshas* i.e. *Rajas* and *Tamas*, enhancement of *Sattva*, and re-establishing the equilibrium between the mind and body. For this *Acharya Charaka* recommends three types of *Chikitsa*^[8]: *Daivavyapashraya Chikitsa*, *Yuktivyapashraya Chikitsa*, *Satwavajaya Chikitsa*.

In the present study, a therapeutic combination of *Pratimarsha Nasya Karma* and *Ghrita Pana* has been selected to evaluate its efficacy in the management of *Chittodvega*. The intervention proved to be clinically beneficial, as evidenced by a substantial decline in *Chittodvega* symptoms, therefore supporting the efficacy of the chosen Ayurvedic protocol.

Case Presentation

Chief Complaints: Complaints of persistent overthinking, declining memory associated with restlessness and a progressive worsening of these complaints from last 1 year.

History of Present Illness

A 32 years old female patient reported to the *Panchakarma* OPD at Dayanand Ayurvedic College and

Hospital, Jalandhar, with complaints of persistent overthinking, reduced memory, and increasing restlessness, progressively developing over the past one year. She was apparently asymptomatic prior to this period. On detailed inquiry, the patient revealed that she had an outstanding academic record, having secured top positions during her graduation and post-graduation. Motivated by academic excellence and concern for future job security, she decided to pursue a Ph.D., while simultaneously conducting home tuitions to contribute financially to her family. However, over time, she began to struggle with maintaining equilibrium between her academic pursuits and financial responsibilities, which led to mental strain and emotional exhaustion. She started experiencing declining academic performance, which triggered excessive worry, self-doubt, and a persistent inability to focus. She described a constant cycle of intrusive thoughts, mental restlessness, and difficulty in decision-making, significantly affecting her daily functioning.

The patient also reported disturbed sleep patterns with delayed sleep onset, intermittent awakenings, and non-refreshing sleep leading to daytime fatigue and irritability. Her mood became increasingly anxious and agitated, with frequent negative thoughts and emotional instability. Additionally, her bowel habits became irregular, and she noticed a marked reduction in appetite this all increased from last 7-8 months. She had previously consulted an allopathic physician for her complaints but declined pharmacological treatment due to concerns about drug dependency and side effects. Unwilling to continue conventional treatment, she approached our PCK OPD for Ayurvedic management for her condition.

History of Past Illness: Patient had no prior history of diabetes, hypertension, or any significant medical or surgical illness.

Family History

Father: HTN (Stressful due to financial crisis)

Mother: Type 2 DM

Brother: *Janusandhigata Vata* B/L knee joints

Personal History

Appetite: Reduced

Sleep: Disturbed

Bowel Habit: Irregular

Micturition Habit: Normal

Treatment History, (if any): No specific treatment history

General Examination

Pallor: Absent
 Icterus: Absent
 Clubbing: Absent
 Cyanosis: Absent
 Lymphadenopathy: Absent
 Oedema: Absent

Vital Examination

Blood Pressure: 128/80mmHg
 Pulse rate: 88/min
 Respiratory rate: 18/min.
 Temperature: 98.5°F

General Appearance & Behaviour

Weight: 65kg
 Height: 5 Feet 5 inches
 Healthy looking,
 Grooming: Well-groomed, Dressing: Adequate
 Behaviour towards Examiner: Cooperative & communicative
 Comprehension: Intact
 Gait and posture: Normal
 Motor activity: No abnormal involuntary movement, reaction time increases occasionally
 Social manner: Normal
 Eye contact: Normal
 Mood: Anxious mood

Speech

Rate and Quality: Generally slow with occasional appropriateness
 Volume and tone- Normal
 Flow and Rhythm: Smooth and uninterrupted

Systemic Examination

Gastro-intestinal system: Soft, non-tender
 Respiratory system: Bilateral chest clear
 Cardiovascular system: S1 and S2 heard normal
 Central nervous system: Conscious, well oriented to time and place and person.

Table 1: Ashthavidha Priksha

<i>Nadi</i>	<i>Vata Pradhana Pitta Anubandhi</i>
<i>Mala</i>	<i>Aniyamit</i>
<i>Mutra</i>	<i>Samanya</i>
<i>Jihva</i>	<i>Nirlepit</i> (White Coating)
<i>Sparsha</i>	<i>Khara, Alpa Ushna</i>
<i>Shabda</i>	<i>Alpavaak</i>
<i>Drika</i>	<i>Pittabh Shweta</i>
<i>Aakriti</i>	<i>Madhyam</i>

Table 2: Dasahavidha Pariksha

<i>Prakriti</i>	<i>Vata-Pittaja</i>
<i>Vikriti</i>	<i>Vata-Rajasa</i>
<i>Sara</i>	<i>Rakta Sara</i>
<i>Samhanana</i>	<i>Madhyam</i>
<i>Pramana</i>	<i>Madhyam</i>
<i>Satva</i>	<i>Avara</i>
<i>Satmya</i>	<i>Vyomishra</i>
<i>Ahara Shakti</i>	<i>Abhyavaharanashakti: Heena</i> <i>Jaranashakti: Heena</i>
<i>Vyayama Shakti</i>	<i>Avara</i>
<i>Vaya</i>	<i>Madhyam</i>

Diagnostic Assessment

In light of the clinical findings, the condition was identified as *Chittodvega*, an Ayurvedic correlate of Generalized Anxiety Disorder (GAD). The diagnosis was confirmed in accordance with the DSM-5^[9] criteria for GAD. Comprehensive hematological investigations were carried out, all of which remained within normal physiological limits. Following the diagnosis, individualized Ayurvedic management was initiated. To assess the therapeutic response, both the Hamilton Anxiety Rating Scale (HAM-A)^[10] and the classical symptomatology of *Chittodvega* as outlined in the NAMASTE PORTAL^[11] were systematically evaluated prior to treatment, at the end of the treatment, and at follow-up. This enabled a comprehensive understanding of the patient's progress from both modern and Ayurvedic perspectives.

Therapeutic Intervention

<i>Shaman Yog</i>	Dose	Duration	<i>Anupana</i>
<i>Medhya Ghrita (Kalpit Yoga)</i>	15ml twice a day empty stomach	15 Days	Warm water/ warm milk

<i>Pratimarsha Nasya Yog</i>	Dose^[12]	Duration	Time
<i>Medhya Ghrita (Kalpit Yoga)</i>	2 Bindu i.e., 1ml (20 drops) each nostril once in a day	15 Days	<i>Pratah Kala</i> <i>Abhakta</i>

Table 3: Contents of Medhya Ghrita (Kalpit Yoga)

S.No.	Dravya	Type of Dravya	Dose ^[13]
1.	<i>Kushmanda Swarasa</i>	<i>Drava Dravya</i>	4 parts
2.	<i>Brahmi</i>	<i>Kalka Dravya</i>	1/8 th Part
3.	<i>Shankhpushpi</i>	<i>Kalka Dravya</i>	1/8 th Part
4.	<i>Vacha</i>	<i>Kalka Dravya</i>	1/8 th Part
5.	<i>Ustukhuddus</i>	<i>Kalka Dravya</i>	1/8 th Part
6.	<i>Mukta Pishti</i>	<i>Kalka Dravya</i>	1/8 th Part
7.	<i>Go Ghrita</i>	<i>Sneha Dravya</i>	1 Part

Preparation of Medhya Ghrita (Kalpit Yoga): It was prepared according to the standard preparation method of preparing medicated Ghrita described in *Sharangdhara Samhita*^[14].

Assessment Criteria

Table 4: On the basis of classical signs and symptoms of Chittodvega, assessment is done on subjective parameters. Standardized Terminologies are taken from NAMASTE PORTAL for assessment

S.No.	Symptoms	Scoring Criteria	Day 0 (BT)	Day 15 (AT)	Day 30 (AF)
1.	<i>Ayasa</i> (Easy fatigability)	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	2	1
2.	<i>Unmattachittatvama</i> (Fickle mindedness)	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	1	1
3.	<i>Shirsha Shoonyata</i> (Feeling of emptiness in the head)	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	2	2	1
4.	<i>Krodha</i> (Anger)	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	2	1	0
5.	<i>Angavedana/ Angamarda</i>	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	2	1	1
6.	<i>Anidra/Nidra Nasha</i> (Inability to sleep)	None (0) Mild (1) Moderate (2) Severe (3)	4	1	0

		Very Severe (4)			
7.	<i>Anannabhilasha</i> (Aversion of food)	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	1	0
8.	<i>Udvega</i> (Agitation)	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	2	1
	Total Score		22	11	5

Table 5: Hamilton Anxiety Rating Scale (HAM-A)

S.No.	Symptoms	Scoring Criteria	Day 0 (BT)	Day 15 (AT)	Day 30 (AF)
1.	Anxious mood Worries, anticipation of the worst, fearful anticipation, irritability.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	1	1
2.	Tension feelings of tension, fatigability, startle response, moved to tears easily, trembling, feelings of restlessness, inability to relax.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	2	1
3.	Fears of dark, of strangers, of being left alone, of animals, of traffic, of crowds.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	2	0	1
4.	Insomnia Difficulty in falling asleep, broken sleep, unsatisfying sleep and fatigue on waking, dreams, nightmares, night terrors.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	4	1	0
5.	Intellectual Difficulty in concentration, poor memory.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	2	1
6.	Depressed Mood Loss of interest, lack of pleasure in hobbies, depression, early waking, diurnal swing.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	2	1	0

7.	Somatic (Muscular) Pain and aches, twitching, stiffness, myoclonic jerks, grinding of teeth, unsteady voice, increased muscular tone.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	2	1
8.	Somatic (Sensory) Tinnitus, blurring of vision, hot and cold flushes, feelings of weakness, pricking sensation.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	2	1	1
9.	CVS Symptoms Tachycardia palpitations, pain in chest, throbbing of vessels, fainting feelings, missing beat.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	1	1	0
10.	Respiratory Symptoms Pressure or constriction in chest, choking feelings, sighing, dyspnoea.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	1	0	0
11.	GIT Symptoms Difficulty in swallowing, wind abdominal fullness, nausea, vomiting, borborygmi, looseness of bowels, loss of weight, constipation.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	3	2	1
12.	Genitourinary Symptoms Frequency of micturition, urgency of micturition, amenorrhea, menorrhagia, development of frigidity, premature ejaculation, loss of libido, impotence.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	1	0	0
13.	Autonomic Symptoms Dry mouth, flushing, pallor, tendency to sweat, giddiness, tension headache, raising of hair.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	1	0	0
14.	Behavior at Interview Fidgeting, restlessness or pacing, tremor of hands, furrowed brow, strained face, sighing or rapid respiration, facial pallor, swallowing, etc.	None (0) Mild (1) Moderate (2) Severe (3) Very Severe (4)	1	0	0
Total Score			30	13	7

Outcome

The Hamilton Anxiety Rating Scale score, which initially measured 30 indicating moderate to high anxiety levels reduced to 13 following the completion of treatment and further declined to 7 during the

follow-up. The classical symptomatology of *Chittodvega*, as outlined in the NAMASTE Portal, were also assessed at three stages: before treatment, at the end of the treatment, and during follow-up. The

symptom score, which was initially 22, showed a marked reduction to 11 post-treatment and further decreased to 5 at the time of follow-up, indicating progressive and sustained clinical improvement.

RESULT

The patient experienced marked improvement in all presenting symptoms, as reflected in the documented outcomes. Clinical outcomes indicated a significant reduction in the intensity and frequency of *Chittodvega* related manifestations post-intervention. She has remained symptom-free for the past two months, with no signs of recurrence observed during this period.

DISCUSSION

Manasa is regarded as a fundamental element of *Ayu* the essence of life forming part of the *Tridanda*^[15] (body, mind, and soul), which sustains existence. It plays an integral role in cognition, emotional regulation, disease progression, health maintenance, and the pursuit of liberation i.e., *Moksha*. The *Hridaya* is considered the primary seat of the mind^[16], through which *Manasa* exerts its influence across the body via the *Manovaha Srotas*, in association with *Vata*, *Pitta*, and *Kapha Doshas*.

When the *Manasika Doshas Rajas* and *Tamas* become aggravated, they vitiate the *Hridaya* and obstruct the *Manovaha Srotas*, disrupting mental clarity and emotional balance. This pathological process leads to the manifestation of various psychiatric disorders, among which *Chittodvega* is prominent. Considering its etymological meaning, neurotic nature, and psychosomatic presentation, *Chittodvega* can be closely correlated with Generalized Anxiety Disorder (GAD) in modern psychological terminology.

This study explores an integrative therapeutic approach utilizing *Ghrita Pana* in conjunction with *Pratimarsha Nasya* to evaluate their combined efficacy in the management of *Chittodvega*. These interventions incorporate *Medhya Aushadhis*, renowned in Ayurveda for enhancing intellect and stabilizing the mind. Acting directly on the central nervous system, they are intended to strengthen *Sattva Guna* and augment *Ojas*, thereby restoring psychological equilibrium. Based on these considerations, the integrated use of *Pana* and *Nasya* has been selected for this clinical approach.

In the present clinical approach, *Ghrita* is utilized as a foundational medium for both *Pana* and *Pratimarsha Nasya*, based on its well-established lipophilic properties and exceptional *Yogavahi*^[17] nature. This lipid-soluble nature enables *Ghrita* to efficiently penetrate cellular membranes composed largely of lipids and facilitates the targeted delivery of active compounds. When *Medhya* herbs are processed

with *Ghrita*, their bioactive constituents bind with lipids, enhancing their ability to cross the blood-brain barrier and exert therapeutic effects on the central nervous system. Therefore, a combined intervention involving both *Pana* and *Pratimarsha Nasya* with *Medhya Ghrita* is strategically employed to assess its clinical efficacy in the management of *Chittodvega*, with special reference to Generalized Anxiety Disorder (GAD).

Among the four types of *Sneha Dravyas*, *Ghrita* is esteemed as the most potent due to its exceptional property of *Sanskara Anuvartana*^[18] the ability to assimilate and carry the therapeutic attributes of the herbs with which it is processed. In this study, *Ghrita* was fortified with *Medhya* (cognitive-enhancing) herbs to explore its therapeutic potential in managing *Chittodvega*. Classical Ayurvedic texts endorse *Ghrita* as a *Ajanamadev Dravya*^[19] meaning it is considered suitable for internal use right from birth, due to its nourishing and stabilizing properties.

Probable Mode of Action of *Pratimarsha Nasya*

"Nasa Hee Shiraso Dvaram"^[20] meaning the nose is the gateway to the head forms the foundational rationale for selecting the nasal route in the management of mental disorders. Leveraging this concept, *Pratimarsha Nasya* has been selected in the current study as a mode of intervention to evaluate its impact on mental agitation and anxiety. Recognized for its *Ajanma Satmyatva*^[21] suitability from birth to death. It can be safely administered across all age groups without adverse effects. Its regular use provides the nourishment to sensory organs and enhances the functioning of the brain by facilitating the direct delivery of therapeutic substances to the central nervous system. This makes it particularly beneficial in *Chittodvega* (Generalized Anxiety Disorder), where calming the mind and strengthening mental endurance is essential.

Medhya Ghrita, enriched with cognitive-enhancing *Medhya* herbs and possessing a lipophilic nature, easily permeates the nasal mucosa. This allows the active ingredients to swiftly enter the bloodstream and cross the blood-brain barrier efficiently and facilitating direct access to brain tissues. This direct route enables the *Medhya Ghrita* to exert a neuroprotective and neuro-modulatory effect by enhancing the functions of neurotransmitters and nourishing brain tissues. It helps in restoring the balance of *Manasika Doshas* particularly calming aggravated *Rajas* and *Tamas* while strengthening *Sattva* and *Ojas*, which are vital for mental resilience and clarity.

Probable Mode of Action of *Ghrita Pana*

Medhya Ghrita is a lipid-based Ayurvedic preparation containing herbs known for their neuroprotective, adaptogenic, and anxiolytic properties. The *Ghrita* acts as a carrier that improves the absorption and bioavailability of the herbal active compounds, allowing them to efficiently cross biological membranes, including the blood-brain barrier, due to its fat-soluble nature.

When taken orally, *Medhya Ghrita* influences brain chemistry by enhancing the production and release of essential neurotransmitters like acetylcholine, GABA, and serotonin, which play key roles in cognition and emotional balance. It helps pacify imbalanced mental qualities, specifically *Rajas* and *Tamas doshas*, thereby stabilizing mental disturbances linked with anxiety and psychosomatic conditions.

Additionally, *Medhya Ghrita* supports the increase of *Ojas* and *Sattva*, leading to improved neuro-immune regulation, increased neuronal adaptability, and better brain function. These combined effects help restore mental clarity, reduce anxiety symptoms, and maintain overall mental and physical health.

CONCLUSION

The combined use of *Medhya Ghrita* through *Pana* and *Pratimarsha Nasya* demonstrates a synergistic effect in the management of *Chittodvega*. While *Pana* facilitates systemic absorption and enhances neurocognitive functions by delivering bioactive compounds across the blood-brain barrier, *Pratimarsha Nasya* targets the central nervous system directly via the nasal route, promoting rapid therapeutic action on the brain and mind. Together, these modalities effectively balance the *Manasika Doshas*, strengthen *Sattva* and *Ojas*, and restore mental equilibrium. This integrated approach validates the holistic potential of Ayurvedic treatments in addressing anxiety disorders by combining systemic and localized pathways for optimal mental health outcomes.

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