



Alcoholism and its Ayurvedic Management-An Overview



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Introduction

Alcohol was and still continues to be a part and parcel of the social as well as cultural life. The various merits as well as medicinal effects of alcohol or 'Madya' have been dealt in detail, in the various treatises of Indian medicine. Madya is to be consumed only after considering prakrithi, dosha, desa, kala, bala, satwa and even kula or familial background of the individual for the positive benefits is well explained. For the same, several types of madya processed with fruits, cereals etc. have been prepared for use, at that time. A condition of "madatyaya" ie. a group of diseases arising from the improper administration of Madya is also narrated with treatment options, in almost all the ancient Ayurvedic books with much concern.

Madya is said to have effect on three aspects, physical or sareera, Psychological or Manas and also on Ojus, the factors contributing to the immunological background by the Ayurvedic scholars. The intake of madya alters the status of all the doshas of the body-Vatha, Pitta as well as Kapha. The initial alteration is more for Kapha, but in the later stages, Vatha and Pitta are affected much. Similar is the alteration in the doshas of manas-Rajas and Tamas.

The sodhana therapy in Madatyaya is indicated in mainly two situations-if the condition is chronic and if the presentation is moderate or severe. Otherwise the patient responds to conditional samana chikitsa, decided as per the assessment of the involved doshas. While going on with Sodhana chikitsa, one have to cautious, as the madya, having opposite qualities of ojus and also leads to depletion of dhatus, affects the health status of the individual to a good extend. Various diagnostic factors like Dosha, Dushya, Bala, Kala, Prakriti, Agni, Vaya, Satva, Satmya and Roga Avastha are carefully assessed before performing sodhana in a madatyaya patient.

If the patient is complaining of saitya, Kapha praseka, gourava, utklesha, chardi, aruchi, the madatyaya is diagnosed as Kapha dominant one. Here sadyo vama is one of the effective options available. Here we are administering Yastimadhu Phanta or Lavanodaka (salt water) without Poorvakarma such as Snehapana, Abhyanga and sweda. Teekshna Vamana is to be avoided in Madatyaya as many of the patients are having severe gastritis

and have a chance for mucosal erosion or even bleed. For samana, medicines such as Aragwadhadi gana, thaleesapatradi vataka, Patoladi gana, ashtanga lavana etc. are administered in Kaphaja madatyaya.

If a person presents with sweda, mukhasosha, daha, moorcha, peeta netrata, atisara etc. it is diagnosed as Pitta madatyaya. Here Avipathy choorna, drakshadi kwatha, Guloochyadi kwatha, drakshadi lehya, kharjooradi mandha are being used for samana. Sadyo virechana is ideal in Alcohol withdrawal syndrome, but in alcohol dependence, snehapana followed by mridu sodhana is performed. Here Mahatiktaka gritha or Kalyanaka gritha is being used for snehana.

If the symptoms dominating are angamarda, pralapa, toda, kampa, siroruja, nidranasa it is assumed as Vatika madatyaya and managed with Snehapana followed by Nirooha. Here Vatha Pitta samana yogas such as vidaryadi and Mahakalyanaka gritha is used for snehapana till samyak lakshanas are attained. Swedana followed by mridu virechana with eranda taila is performed. After pepadikrama, Nirooha is done after assessing the status of doshas. In Vatika condition, Madhutailika vasthi is preferred. When Kapha associates with Vatha, erandamooladi nirooha is the option and in Pitta associated condition, Ksheera vasthi is prescribed with suitable combinations.

Nasya is having a very crucial role in the management of alcohol related conditions. In the initial stages of alcohol withdrawal, nasya with anutaila is highly effective as it clears the srotuses and also alleviates the aggravated Kapha in the affected. In conditions such as insomnia or agitation, nasya is administered with Ksheerabala taila or even Kalyanaka gritha. Pradhamana Nasya with rasnadi choorna, nasika choorna or Vilwadi gulika is used in delirious state and altered consciousness due to consumption of alcohol.

If the symptoms still persists, especially sleep dysfunction or slight behavioral changes, sirodhara or siro pichu is being employed. Mostly Jadamanchi or Yashtimadhu kwatha or medicated takra with Mustha and Amalaki is used for sirodhara. For siropichu, taila such as Ksheerabala or Chandanadi is used peculiarly in conditions of Vatha associated with Pitta especially. Sankupushpi or Pippali

ksheera is used as rasayana after sodhana chikitsa in many of the subjects. In Kaphaja conditions, ardraka vardhamana is used.

Along with these, the patient is insisted to carry on yoga therapy in our institute which includes sookshma vyayama, vajrasana, Bhujangasana, Pavanamuktasana, meditation techniques such as Nadeesudhi pranayama etc. The subjects are also undergone with interactional group psychotherapy along with the family members through Alcoholic Anonymous along with the inpatient management.

Conclusion

The Ayurvedic management protocol along with the rehabilitation measures is effective in alleviating the symptoms

of Alcohol withdrawal and associative conditions. They are also proved as safe. as per the reported previous studies in this regard. Samana therapy or even sodhana therapy can be administered as per the severity of the condition of the affected. One need to be careful in selection of appropriate procedure as it is based on Rogi and Roga Bala. Thus Ayurveda can contribute much in this regard, but it is the need of the hour to carry on with evidence based studies before generalization of the reported facts, so as to enhance the management of Alcohol related disorders.



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