



Lifestyle changes causing insomnia (*Nidranasha*) and its management in Ayurveda: a review

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Abstract

Difficulties initiating sleep, difficulties maintaining sleep, and early morning awakening are a few of the many characteristics of insomnia. An average adult needs approximately 7 to 9 hours of sleep. This has interfered by environmental, behavioral, social, and other causes. A new rising trend of sleep disorders is eliciting the development of innovative therapies, medications, and devices in the market, perhaps these tranquilizers and sedatives have worse effects on CNS, so here's a try to grab attention towards management of insomnia according to Ayurveda. Ayurvedic classics have considered Insomnia as '*Vataja Nanatmaja Vikara*' and not a separate disease. This review elaborates general description of the lifestyle disorder insomnia, and general principles of

treatment and management according to various Ayurvedic texts.

Keywords- Insomnia, *Nidranasha*, Sleep, Vataja, Lifestyle disorder, Ayurveda

Introduction-

Aahara, *Nidra*, and *Brahmacharya* are *trayopastambha* (supporting pillars) of *dirghayu* (long life) according to Ayurveda as mentioned by acharya charak and *acharya Vagbhata*. *Nidra* is mentioned in the 2nd place in these supporting pillars because good sleep is essential for mental, physical, and emotional well-being. The significance of *Nidra* is mentioned in *Annaraksha adhyaya* by *acharya Vagbhata* as below-

निद्रायत्तं सुखं दुःखं पुष्टीः काश्यं बलाबलम्।

वृषता क्लीबता ज्ञानमज्ञानं जीवितं न च।

This means our happiness and sorrow, nourishment and malnutrition, strength and weakness, fat and lean body, fertility and infertility, and knowledge and lack of knowledge depend on sleep. But evolving mode of life has massive changes on these basic pillars. Insomnia is one of the most frequent sleep disorders and has continuously increasing prevalence due to lifestyle changes. Nidranash is most frequently complained about by elderly people but recently even the younger generation is facing problems like insomnia due to changed lifestyle habits like stress, anxiety, depression, non-traditional work hours, irregular nap habits, usage of gadgets, alcohol and nicotine intake, uncomfortable sleep environment, and others. Acharya vagbhata explained that lack of sleep induces heaviness in the body, indigestion, body pain, drowsiness, impaired cognitive behavior, headache, etc. These symptoms can be compared with insomnia. According to modern sciences, insomnia symptoms occur for at least 3 nights per week for at least 3 months and occur despite an adequate sleep environment.

Ayurveda didn't identify *Nidranasha* as a separate vyadhi but it is introduced under one of the 80 *nanatmaja* vata vyadhi by *acharya Charaka* and *acharya Vagbhata* in Ayurvedic classic texts.

In all Ayurveda classics, the description of nidranash is available.

1. *Nidranasha* is explained in the context of *Ashtauninditiya adhyaya* of *Charak Samhita*
2. *Acharya Charak* included *nidranasha* under 80 *nanatmaj vata vyadhi* in *vata vyadhichikitsitam adhyaya*

3. *Ashtanga sangraha* has mentioned term *aswapna* in *viruddhanna vidnyaniya adhyaya*
4. In *Ashtanga hridaya*, *Nidra vikara* and its *chikitsa* are mentioned in *Annaraksha adhyaya*
5. *Sharangdhar Samhita* has considered *nidranasha* in *vataj nanatmaj vikara*.

It is observed that all texts have considered the significance of *nidranasha*, hence *nidranasha* has been considered an independent manifestation too.

As mentioned in *ayurveda* symptoms of *nidranasha* are-

निद्रानाशादङ्गमर्दशिरोगैरवजृम्भिकाः।

जाड्यग्लानिभ्रमापक्तितन्द्रा रोगाश्च वातजाः।

1. *Angamarda* (body pain)
2. *Shirogaurav* (heaviness in head)
3. *Jrumbhika* (yawning)
4. *Jadya* (heaviness)
5. *Glani* (melancholy)
6. *Bhrama* (fainting)
7. *Apakti* (indigestion)
8. *Tandra* (drowsiness)
9. *Vatarogotpatti* (manifestation of Vataja vyadhi)

Epidemiologic studies have shown that 20% to 35% of the general population report insomnia symptoms and that 10% to 20% have clinically significant insomnia syndrome. It is common in older adults, females, and people with comorbidities i.e. mental and physical illness.

Aims and objectives-

1. To state the importance of sleep in human life and why Ayurveda

considers *nidra* as one of the *trayopastambha*.

2. To prove the increasing prevalence of insomnia and its effects on human well-being.
3. To state the lifestyle changes that are causative factors for insomnia.
4. To review information available in Ayurvedic texts about *nidranasha*.
5. To know more about the management of *nidranasha* as given in Ayurvedic texts.

Materials and method

Nidra is *tamoguna* dominant and *shleshmasammudbhava* in nature meaning increasing *kapha dosha*. An Imbalance in *tridosha* caused by *hetusevan* affects sleep, causing sleep disorders like *anidra*, *atinidra*, *nidranash*, etc. *Vata pitta prakopa*, *manastapa*, *kshaya*, *abhighat* are some other causes of *nidranash*

According to *Acharya Vagbhat* the *Samanya Chikitsa* for *nidranash* is described as follows-

शीलयेन्मन्दनिद्रस्तु क्षीरमद्यरसान्दधि ।

अभ्यंगोद्वर्तनस्नानमूर्धकर्णाक्षितर्पणम् ॥

कान्ताबाहुलताश्लेषो निर्वृतिः कृत्कृत्यता ।
मनोऽनुकूल विषयाः कामं निद्रासुखप्रदा ॥

Which means

1. Including milk, curd, alcohol, and nonveg soup in the diet
2. *Abhyanga* (Body massage), *Udvardhana* (herbal powder massage), *Snana* (bath), *Tarpan* of head, ears, eyes
3. Companionship of females
4. Be relaxed

5. Retirement from the job

6. Doing pleasurable things

- *Acharya charaka* has mentioned *chikitsa* of *nidranash* as-

1. *Abhyanga*, *Snana*, *Utsadan*, intake of *mamsa rasa* of *anupa*, *gramya*, and *audhaka* animals, *Shali* rice with *dadhi* (curd), *Ksheera* (milk), *Sneha*, *Madya*.

2. *Samvahana*, *netra tarpana*, *vadana lepa*, *shiro lepa*.

3. Comfortable bed, home, and proper time bring sleep.

- *Ashtang Sangraha* mentioned the following regimen-

1. Sugarcane juice, milk, *mamsa rasa* of *gramya*, *anupa*, and *audhaka* animals, food prepared with jaggery, rice, and *madyapan*

2. buffalo milk, *abhyanga* (bath), *shiroabhyanga* (head massage), *padabhyanga* (foot massage)

3. *Shravana ourana* and *netra tarpana*, *shirolepa*, application of *lepa* on face.

- *Acharya Sushruta* also mentioned the same regimen.

- *Chikitsa* for *Nidranash* as mentioned by *Bhavprakash* is

1. *Abhyanga*

2. *Udvardhana*

3. *Snana*

4. *Akshitarpana*

5. *Samvahana*

- *Panchakarma* procedures are intended to remove toxins (aam) from body and balance *tridosha* of the body for its better functioning. *Nasya* is one of the *panchakarma* procedures. *Nasya* is a procedure where ayurvedic medicines are administered through the nose, then

it pervades the *shringatak marma* and spread throughout the interior of the brain. *Dravya* reaches all the *strotas* of the nose, eyes, and oropharynx and reduces accumulated dosha.

- **Pratimarsha nasya** daily with *anutailam* is a procedure mentioned in *dinacharya* means it has to be followed every day. Doing *nasya* daily can induce sound sleep over long-term use.
- **Brimhana nasya** (nourishing nasal drop) with *Ksheera Bala Taila* with 8 drops of *Ksheerabala taila* in each nostril for 7 days continuously with 3 cycles of *nasya* in a month each cycle followed by 3 days break along with 6 gm *Ashwagandha* root powder orally with 100 ml of milk at night half an hour before going to bed.
- **Yapana basti** reduces vitiated vata and provides snigdha to the body which is helpful in inducing sleep.
- **Shirodhara-** is seen to have positive effects on sleep induction.
- **Abhyanga-** especially massaging roundly on ear lobes, head, and soles induces sleep
- **Yoga** balances the state of mind hence it is useful in induction of sound sleep.
- Internal medicines like **Saraswatarishta, Brahmi vati, Agurvadi taila prashan.**
- **Pathyapathya-**
- **Ahara:**
 1. *mamsa rasa* of *gramya, anupa,* and *audhaka animals, shali anna, dadhi,*
 2. *ksheera, godhuma, ikshu ,pishta ,mamsa rasa, draksha, sita, sura,*
 3. *masha, shaka, dala, ghrita, yusha.*

- **Vihara** : Comfortable bed, comfortable room, proper time of sleep, to speak softly, to take daily bath
- **Apathya** : All the *ahara* and *vihara* mentioned as *nidana* for *nidranasha* can be considered as *apathya* and their *parivarjana* forms an important aspect of *chikitsa*

Observation-

As age increases sleep patterns tend to change and people have to face a harder time falling asleep. They wake up more often during the night and earlier in the morning. According to recent research, women are more affected by sleep disorders. Multiple etiologies for insomnia in the elderly include medical and psychological causes. Dementia, depression, anxiety, psychosocial factors, and loneliness can affect sleep. Management strategies must include attention to both non-pharmacological and pharmacological aspects of care. People are widely approaching *Ayurveda* and *Yoga* for a basic need like good sleep which is more efficiently restored with the help of methods described in *ayurvedic* texts when followed along with *pathyapathya* and these methods show tranquilizing effects in a much safer way with the retrieve of better mental, physical and emotional wellbeing.

Result-

Ayurvedic management of insomnia is safer and more preferred by people since it is giving salutary results along with restoration of mental and physical health. whereas modern medicines have depressing effects on the central nervous system and also get habitual in patients. *Nidranasha* management

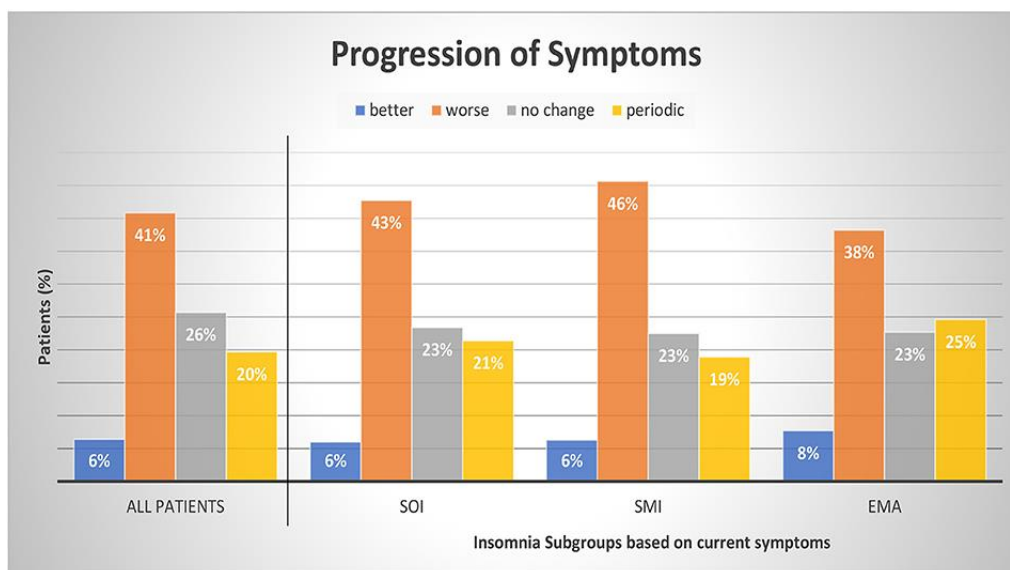
by ayurvedic methods can lead to a healthier and happier life for people.

Discussion-

Due to aggravated condition of *vata* and *pitta dosha*, or aggravated state of mind, due to weakness or loss of vital fluid from the body, due to accidents, hurt, or any injury, one can feel insomniac. In comparison with good sleepers, people with persistent sleep disturbances are more prone to accidents and have higher rates of work absenteeism, decreased cognitive function, diminished job performance, decreased quality of life, and

increased health care utilization. Approximately 40% of adults with insomnia also have a diagnosable psychiatric disorder—most notably depression is the commonest. Once an individual begins to experience sleep difficulties, worry shifts from life events to worries about sleep itself and the daytime consequences of not getting enough sleep.

Below is the result of research held by the Department of Internal Medicine and Dermatology, Interdisciplinary Center of Sleep Medicine, University Berlin, Germany about different symptoms of insomnia.



Progression of symptoms by insomnia subgroups. Patients were divided into subgroups of current insomnia symptoms. Symptoms are not exclusive, they can occur either as a single symptom or along with other symptoms. SOI, Sleep onset insomnia; SMI, sleep maintenance insomnia; EMA, early morning awakening insomnia. A patient with a periodic pattern of insomnia experiences weeks or months-long insomnia

symptoms alternating with symptom-free periods. For comparisons between symptom groups, p was calculated with chi-square tests. Results were not significant at a 0.05 level. The sum of the subcategories does not add up to 100% as they were refrained from displaying the category “missing data and multiple answers” (7% All patients, 7% SOI, 6% SMI, and 7% EMA).

Conclusion-

In *anupashaya* of *nidranash* *rookshaannasevana*, *dhoomapan*, *krodha*, *shoka*, and *bhaya* these factors are considered. While in *upashaya* of insomnia good environment, a comfortable bed, and sound state of mind can be considered. Traditional methods recited to have *nidrajanan* properties according to ayurveda are mentioned in the article.

References-

1. Tripathi R. 2nd revised edition. Delhi: Chaukhamba Sanskrit Pratishthan; 1992. Ashtanga Samgraha of Vriddha Vagbhata, Sutra Sthana. Ch. 19., Ver. 6; p. 360
2. Shastri K, Chaturvedi G, editors. 18th ed. Varanasi: Chaukhambha Orientalia; 1992. Charka Samhita of Agnivesha, Sutra Sthana. Vol. 1. Ch. 20, Ver. 11; p. 399
3. Ashtanghrudaya of shrimadvagbhata by Dr. Brahmannad Tripathi, Chaukhamba Sanskrit Pratishthan
4. Sharangdhara samhita by Sharangdhara translated in English by Prof.K.R. Shrikanth Murthy, Chaukhamba Orientalia, page no 84 and 115

5. Bhaishajya kalpana vijnanam, by Dr.K.Rama Chandra Reddy , Chaukhamba Sanskrit Bhawan Publications, Ashaudha kalpana
6. Nirgude Rajendra, Nidranash (insomnia), causes, consequence and management an Ayurvedic perspective, International Journal of Herbal medicine
7. Daware Pournima Machhindra (Sep 2019) Ayurvedic management of Anidra-a case study. National Journal of Research in Ayurveda Science. Vol.07th, issue:5th
8. Nighantu Adarsha volume – 2 by Bapalala g. Vaidya, Chaukhamba Bharati Academy Varanasi, page no – 134
9. Panama Kales (August 2013) A review article on the role of medicinal plants in the management of Anidra (insomnia) Dept. of Dravyaguna, international Ayurvedic medicine journal . ISSN :2320 5091
10. <https://www.verywellhealth.com/sleep-efficiency-3014912>
11. <https://www.frontiersin.org/articles/10.3389/fpsy.2021.683943/full>
12. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1978319/>

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