

## AYURVEDA INTERVENTION IN CONDUCT DISORDER – A REVIEW

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### ABSTRACT

**Conduct Disorders** attain much significance in this era, as emerging concepts on individual and society are forcing amendments to the considerations of normalcy and deviance. There is no clear-cut description of any disorder matching that of *Conduct disorders* in *Ayurveda* texts. ICD-10 (International Classification of Diseases) classification has a category for *conduct disorders* (F91). On an analysis of these criteria categories, they can be considered under *Ayurveda* parlance. Body and mind are intimately associated with each other. *Ayurveda* practitioners dealing with conduct disorders have started incorporating *Counseling therapy* as a supportive measure in the management of many psychiatric and psycho-somatic disorders. A review of effective *Ayurveda* interventions is the objective of the paper as there is a dearth of published research on effective *Ayurveda* interventions in this condition.

**Keywords:** Conduct disorders, Ayurveda, *Ghritha*, Counseling therapy

### INTRODUCTION

**Conduct disorders** attain much significance in this era, as emerging concepts on individual and society are forcing amendments to the considerations of normalcy and deviance. The black and white picturization of bad and good actions is getting more and more difficult. A *conduct disorder* refers to any of a group of serious emotional and behavioral problems in children and adolescents<sup>1</sup>. *Conduct disorder* is also defined as a group of repetitive and persistent behavioral and emotional problems in youngsters.

There is no clear-cut description of any disorder matching that of *Conduct disorders* in *Ayurveda* texts. Description of abnormal behavior though are found scattered in our texts like- *Anavasthita-Chittatva*, *Mano-vibhrama*, *Budhi-vibhrama*, *Smriti-vibhrama*, *Sheela-vibhrama*, *Cheshta-vibhrama*, *Achara-vibhrama* etc<sup>2</sup>. Apart from exploration of the etio-pathogenesis of *Conduct disorders* from Modern and *Ayurveda* point of view, a review of effective *Ayurveda* interventions is the objective of the paper as there is a dearth of published research on effective *Ayurveda* interventions in this condition.

### Materials and methods

This article is a review article and hence the approach is the conceptual and analytical review of both modern and *Ayurveda* literature relevant to *conduct disorders* followed by conclusions.

### Disease definition and pathologic considerations

ICD-10 classification has a category for *conduct disorders* (F91). The ICD-10 “Diagnostic criteria for research” differs in the chronicity and impact aspects. DSM-V-TM<sup>3</sup> (Diagnostic and Statistical Manual) follows the ICD-10 research criteria very closely.

There are two major kinds of *Conduct disorders* – mixed disorders of conduct and emotions and hyperkinetic conduct disorder. While the cause is unclear, many possible factors can put a child at risk of developing *conduct disorder*. These include child abuse, impulsive behavior, low academic achievement, poor parental supervision, callous or unemotional parental attitude, antisocial parents or peers, trauma, poverty, and living in a high-crime neigh-

borhood or attending a school with a high delinquency rate<sup>4</sup>.

On an analysis of these criteria categories, they can be considered under *Ayurveda* parlance as depicted in the following table.

Serial No.	ICD-10 Criteria Category	<i>Ayurveda</i> parlance
1	Aggression to People and Animals	<i>Mano-vibhrama</i> <i>Budhi-vibhrama</i> <i>Cheshta-vibhrama</i> <i>Anavasthita-Chittatva</i> <sup>2</sup>
2	Destruction of Property	<i>Sheela-vibhrama</i> <i>Cheshta-vibhrama</i> <i>Achara-vibhrama</i>
3	Deceitfulness or Theft	<i>Cheshta-vibhrama</i> <i>Achara-vibhrama</i>
4	Serious Violations of Rules	<i>Cheshta-vibhrama</i> <i>Achara-vibhrama</i> <i>Smriti-vibhrama</i>

### ***Ayurveda* perspective on Conduct disorder and interventions**

Body and mind are intimately associated with each other. The mental makeup of an individual and function of body organs depends on and vice versa. *Ayurveda* picks out *rajas* and *tamas* as the *mano-dosha*<sup>5</sup>. *Vata-pitta-kapha* always is interlinked to the *tri-guna* via the *panchabhoutika* constitution<sup>5</sup>. It can be analysed that a dominance of *rajas* among the *mano-dosha* and *pitta* among the *tri-dosha* is evident in the manifestation of *Conduct disorder*. In general, *manoroga* too, as a whole, can be considered of two kinds – *sudha* (pure) caused by *manodosha* (*rajas* and *tama*) alone and *samsargaja* (mixed) caused by both *manodosha* and *tridosha*.

### **Interventional modalities**

*Sneha kalpana*, one of the unique *kalpana*, has been established to increase potency, palatability, shelf life etc. it is a pharmaceutical process to prepare oleaginous medicament from the substances like *Kalka*, *Sneha Dravya* and *Drava Dravya*<sup>6</sup> in specific proportion by subjecting to unique heating pattern and duration, to fulfill certain parameters according to need of therapeutics. Contemplation of ancient literature reveals that *Ghrita* and *Taila* are predominantly used for internal and external application.

### **Effect of go-ghrita on manas**

*Ghrita* contains *Prithvi* and *Jala Mahabhuta* which helps in nourishment of the body and promotion of strength, which are useful in weight loss, muscle wasting, loss of strength. *Ghrita* contains *Snigdha* and *Guru Guna* which helps in mitigating *Vata dosha* and maintaining *kapha dosha*, which are useful in physical inactivity, myalgia, fatigue. *Ghrita* has *madhura rasa* which is *saptadhatu vardhaka*, *indriyaaa prasadaka*, *rasayana*, *smriti buddhi agni shukra oja vardhaka* etc<sup>7</sup>. By applying the theory of similarity, it can be said *Mastishka* (brain) which resem-

bles molten ghee can be supplemented with clarified butter in various therapies.

*Go-ghrita* has a striking efficacy in crossing BBB (Blood Brain Barrier) which is very much needed for treating mental anomalies. The distribution of drug in blood is chiefly influenced by its lipid solubility, ionization, differences in the regional blood flow etc. A water-soluble drug is usually distributed in the extracellular spaces and it may not readily diffuse in to CSF (Cerebro-Spinal Fluid) and other body cavities, while the lipid soluble drugs are rapidly distributed throughout the intra and extra cellular spaces. The drugs that are rapidly absorbed from the gut because of their lipid solubility are known to readily diffuse into the CSF and the brain. The main reason behind this is the molecular structure of the blood brain barrier. This membrane separating the CNS (Central Nervous System) tissue and the circulating blood is lipophilic in nature. Thus, it selectively allows the passage of lipids and lipid soluble drugs across it<sup>8</sup>.

So, any drug given in the form of *go-ghrita* will not only be digested and absorbed fast but will also be able to reach some of the most distant and difficult to reach areas of body like the CNS. This explains the better efficacy of various Psychotropic drugs given in the form of *go-ghrita* in CNS diseases. Also, its antioxidant properties prevent the oxidative damage of brain and other tissues of the nervous system, thus providing protection from various degenerative diseases. *Go-ghrita* is therefore one of the most effective drug dosage forms used among *Ayurveda* medicines.

Studies have observed the effect of *ghrita* on emotional quotient<sup>9,10,11</sup>, thereby have suggested possible influence of *ghrita* on limbic system. Also, in routine clinical practice, the advice of *ghrita* in mental ailments is dependent on the *dosha* characterization of clinical symptomatology

viz. *Mahatiktaka* in *pitta* dominance, *panchagavya* in *kapha* dominance and likewise.

*Counseling Therapy as a supportive therapy to Ghritha-paana*

*Ayurveda* practitioners dealing with conduct disorders have started incorporating *Counseling therapy* as a supportive measure in the management of many psychiatric and psycho-somatic disorders. A psychological test formally framed to assess a child's behavior or conduct may go objectively in nature because a counselor with his measuring tool and continued questioning will keep a child to a distance and non-cooperative. Hence child a counselor should be so close, and a strong rapport is an essential factor. *Counseling* starting with one to one examination and include parents in the process and a periodical visit in school where the child studies. Parents reveal some facts of their ward, mostly explained with slight inclination or favoritism in nature. When we approach teachers of them, they were more impartial in presenting the nature of the child. Assessing both view-parents and teachers an assessment of character can be evolved with our prolonged clinical experiences, interrogating methods.

Some children may be shying away from the conversation initially but after convincing their safest part they themselves come forward to express their grievances complaints and deceit etc. Deceleration in conversation also may be an initial hurdle in a counseling. Combining parents, teachers and children's versions must be collected for finding a diagnosis and through which mental healing process can be started. Success or failure with test is related to the sensitivity, ability and knowledge of the counselor who selects, administers and interprets them.

A counselor should think his client's needs are within the range of expertise of him and should understand the client better. The counselor must help the client to gain self-understanding and confidence. Criterion validity is applied with practical implication which refers to the comparison of the test's course with the person's actual performance of a certain skill across time and situation. Here a positive achievement in counseling in certain groups of children is seen resultantly stimulates new interests in studies or good behavior and social approach.

## CONCLUSION

**Conduct Disorder**, even though not directly described in *Ayurveda*, can be understood in terms of *mano-dosha* and *deha-dosha* afflictions and thereby the *samprapti* constructed warrants an approach in which *snehana*, especially, *ghrita-paana* is important. Also, the current understanding of the affected individual and the society implies that a holistic approach including *counseling therapy* chiefly is of prime importance.

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