



Efficacy of Mahanarayana Taila Matra Basti in Primary Insomnia (Anidra)-An Analytical Review

Gupta H^{1*}, Sharma KK² and Shukla GD³

¹PG Scholar, Department of Panchakarma, Uttarakhand Ayurved University, India

²Professor and Head, Department of Panchakarma, Uttarakhand Ayurved University, India

³Associate Professor, Department of Panchakarma, Uttarakhand Ayurved University, India

***Corresponding author:** Himani Gupta, PG Scholar, Department of Panchakarma, Rishikul Campus, Haridwar, Uttarakhand Ayurved University, Dehradun, India, Email: himsingh291994@gmail.com

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Abstract

We all live in 21st century; this era is an age of industrialization and fast life. This fast life has destroyed healthy life style which has created various lifestyle disorders. Insomnia is one of those deadly disorders. Nowadays increasing number of patients with various forms of sleep pattern abnormalities is seen attending the outpatients, among this insomnia is important one. Insomnia disorder is defined as a subjective perception or complaint of inadequate or poor quality sleep due to a number of factors such as difficulty in falling asleep, waking up frequently during the night with difficulty in returning to sleep, waking up too early in the morning or unrefreshing sleep. In *Ayurveda* it can be correlated with *Anidra* and *Nidranasha*. People with *Vata* and *Pitta Prakriti* are more susceptible to develop insomnia [1]. *Asvapna* is categorized in to 80 *Nanatmaja Vata* diseases [2]. *Anidra* is a disease, which is having cardinal symptoms like *Jrumbha*, *Angamarda*, *Tandra*, *Shiroroga*, *Shirogurava*, *Akshigaurava*, *Jadya*, *Glani*, *Bhrama*, *Apakti* and *Vataroga* occur due to sleeplessness [1]. Allopathic treatments show temporary relief in curing of this disease and produce massive side effects. Ayurveda has a very good approach towards the treatment of insomnia by both internal and external medications. *Panchakarma* therapy is designed to eliminate the vitiated *Doshas* through the nearest route. Mahanarayana Taila when administered through anal route in the form of *Matra Basti*, it gives soothing effect to the mind and initiate good sleep. After reviewing the recent findings from literature we aim to discuss efficacy of therapy in management of insomnia.

Keywords: Anidra; Nidranasha; Mahanarayana Taila; Matra Basti

Introduction

Sleep is a naturally recurring state of mind and body. Insomnia is a sleep disorder that regularly affects millions of people worldwide. Insomnia disorder is defined as a

subjective perception or complaint of inadequate or poor quality sleep due to a number of factors such as difficulty in falling asleep, waking up frequently during the night with difficulty in returning to sleep, waking up too early in the morning or unrefreshing sleep [3]. Insomnia is not defined

by the numbers of hours of sleep a person gets. Insomnia is widely associated with medical and psychiatric conditions as well as with impaired quality of life and emotional functioning. It has also been associated with higher risk of developing chronic disorders [3].

Insomnia is the most commonly encountered sleep disorder and occurs 10-50% of the population [4]. Worldwide epidemiological studies assessed the prevalence of insomnia without restrictive criteria as 33% in general population [5]. When frequency was used to determine the presence of insomnia around countries, it was 17-34% [6]. On the basis of severity it was 18% [7]. According to the symptoms with daytime consequence, it is around 16%. Approximately 40% of adults with insomnia also have a diagnosable psychiatric disorder, most notably stress [8]. It is more common in women and in the people who work in shifts. Insomnia is less prevalent in Asians but increasing day by day due to stressful nature of work. Individuals with anxiety prone personality and depression are more susceptible for insomnia.

Management of insomnia, so far, is not up to the mark because medications available for insomnia are sleep inducing rather than treating the underlying cause. Benzodiazepines, Barbiturate, SARI are potent sleep inducing agents commonly used for insomnia has several adverse drug effects such as drug dependence, mood disorders, GIT disorders and sometimes depression. Many non-pharmacological remedies such as cognitive behavioral therapy are also used to overcome the adverse drug effects of insomnia but unfortunately incidences are increasing day by day.

Ayurveda has a very good approach towards the treatment of insomnia by both internal and external medications. In external treatment of insomnia most of researches were conducted on *Shirodhara*, *Shiropichu*, etc... Those effective in insomnia but that is costly and time taking process. *Mahanarayana Taila* is beneficial in condition of insomnia and it should be used in form of *Abhyanga*, *Basti*, *Pana* and *Nasya*. Proper administration of *Basti* enhances sound sleep, so *Basti* with *Mahanarayana Taila* is the appropriate therapy for this disease.

Drug Review

Mahanarayana Taila- *Mahanarayana oil* is a classical oil formulation which was formulated in *SAR SANGRAH* and *BHAISHAJ RATNAVALI*, CHAPTER 26, *VATAVYADHI ROGADHIKARA*, Verse: 343 to 354 & *BHAVAPRAKASHA CHIKITSA*. Letter it is also published in *Ayurveda* formulary of India in Second volume [9].

Physical Properties

Odour	Aromatic
Taste	Not tasted
Colour	Blackish Brown
Touch	Slippery

Table 1: Physical Properties.

Chemical Analysis

No	Tests	Results
1	Loss on drying at 110.C	0.3% w/w
2	Specific Gravity at room temperature	0.9494
3	Refractive Index at room temperature	1.464
4	Acid value	3.628
5	Saponification Value	185.66
6	Iodine Value	60.263

Table 2: Chemical Analysis.

Rasa Panchak

- *Rasa - Katu, Tikta*
- *Guna-Laghu, snigdha*
- *Veerya- Ushna*
- *Vipak- Katu*
- *Doshaghnata- Vata kapha shamak*

Karma

Mahanarayana Taila has Fifty six ingredient is which make this formulation special and best. In which *Asthavarga* drugs and animal origin drugs are added musk which makes this drugs a pleasant smell and the *kashar* make it more valuable of this formulation.

According to *Ayurvedic Pharmacopeia of India* part One Second Edition best remedies of these above disease *Ardita* (Facial palsy), *Badhiratva* (Deafness), *Pangutva* (Paraplegia), *Gatra*, *Kampa* (Tremors), *Manya Stambha* (Neck rigidity/Torricelli's), *Hanustambha* (Lock jaw), *Ekanga* (Wasting of one limb), *Sukraksaya* (Oligospermia), *Vandhyatva* (Infertility), *Siroruja* (Headache), *Jihvastambha* (Glossal palsy), *Danta sula* (Dental Pain), *Unmada* (Mania/Psychosis), *Kubja* (Hump-back/Kyphosis), *Jvara* (Fever), *Jara* (Senility/Progeriasis), *Karsya* (Emaciation), *Snayu Bhagna* (Tendon tear), *Asthi Bhagna* (Bone fracture) [10,11].

Pharmacological Action

Inflammation is a complex network of a variety of molecules, which is self-regulating through the balanced action of anti and pro inflammatory cytokines. An imbalance between anti and pro-inflammatory cytokines results in cellular damage in rheumatoid arthritis (RA), which is a common chronic inflammatory and destructive arthropathy. A study of anal sphincter tone in acute fissure in a patients treated with *Mahanarayana Taila* was also done. This oil also taken as reference standard activity for anti-inflammation. It is also used in various composition for improve the therapeutic efficacy it is also used in sinus therapy. It is also used in psoriasis treatments.

Discussion

Nidra is among the three important tripods of life (*Ahara, Nidra, Brahmacharya*) as per *Ayurvedic Acharyas*. Complete loss of *Nidra* is known as *Nidranaash* or Anidra. It is caused by *Vata Vaigunya*. *Nidra* is the *Upastambha* (sub-supporting pillar of life) that is essential in maintaining good health of a person. Happiness and sorrow, growth and wasting, strength and weakness, virility and impotence and the knowledge and ignorance as well as the existence of life and its cessation depend on the sleep [12]. Allopathic hypnotic drugs are useful for short term treatment in insomnia which is due to acute stage. Long term uses of certain classes of sedatives cause physical dependence, withdrawal symptoms and also have a number of side effects. Complaints of insomnia tend to be persistent or recurrent over time. Thus, it seems that patients with chronic insomnia need some form of treatment. Excessive consumption of food with dry property, barley, excessive exercise, fasting and intercourse, hunger, uncomfortable bed, improper induction of *Vamana* (emesis), *Virechana* (purgation), *Nasya* (nasal medications), *Raktamokshana* (bloodletting), *Dhooma* (medicated smoke) [13] are the main aetiological factors in producing *Nidranasha*. Psychological causes fear, anxiety, anger excessive sorrow, greed, agitation are also responsible for stress induced insomnia. *Tamo Guna* of mind along with *Kapha Dosh*a helps in generating sleep. When our mind gets disturbed due to psychological factors like fear, anxiety, anger, excessive sorrow, greed agitation, there is increase in *Rajo Guna* which closely resembles with the *Vata Dosh*a. Hence increase in *Rajo Guna* ultimately increases *Vata Dosh*a & diminishes the effect of *Tamo Guna* ultimately leading to insomnia.

In *Ayurveda*, many therapies are used for the maintenance of health and eradication of diseases. *Basti* therapy is the best treatment of Vitiated *Vata Dosh*a. Thus it normalizes the functions of different *Srotasa* as it clears the obstruction and allows free movement of bioenergetics

through the channels. Thus it acts as Curative, Rejuvenative and Preventive measure. It cures all kinds of diseases due to its varied pharmacodynamics and various kinds of drugs used in its preparation.

Mahanarayana Taila has been selected as the trial drug in the present study. The drugs of *Mahanarayana Taila* have *Prajasthapana, Rasayana, Balya, Brimhaniya* properties which will corrects the all *Dhatu* and its *Updhatu* subsequently results in inducing good sleep. The drugs of *Mahanarayana Taila* possess anti-oxidant, adaptogenic, immune-modulatory etc... Properties which may help in relieving the stress and gives soothing effect to mind. According to Ayurvedic physiology *Pitta* and *Kapha* both are dependent on *Vata* as it governs their functions. *Basti* eradicates morbid *Vata* from the root along with other *Dosha* and in addition it gives nutrition to the body tissue [14]. Therefore, *Basti* therapy covers more than half of the treatment of all the disease [2], while some authors consider it as the complete remedy for all the ailments.

Matra Basti through rectum reaches instantly into systemic circulation thus has faster absorption and quick results. According to the modern science, there is no digestive action of fat or oil in stomach. The fat digestion and absorption takes place in large intestine and no food substances other than water and salt are absorbed from the large intestine not because it is not possible but the Chyme contains no absorbable substances by the time it reaches the large intestine. *Basti* drugs contain *Sneha Dravya* in sufficient quantity. Hence *Basti* drugs mixed with *Sneha Dravya* when introduced through the rectum get easily absorbed in large intestine. So *Basti* produces effective result in Insomnia.

Conclusion

According to modern science, sleep is said to nourish and repair the damages to the tissues caused by various catabolic activities of the body. Proper sleep provides balance of the body constituents, alertness, good vision, good complexion, fired digestive power as well as happiness, vigor, virility, nutrition and long life. Every upcoming challenge should be taken as an opportunity to grow and should be dealt peacefully. So *Matra Basti* with *Mahanarayana Taila* is cost effective, rapid absorbed and no adverse effect processor i.e. superior to all other treatment.

References

1. Vagbhatta, Ashtanga Hrdaya, Sarvang Sundari (2005) Arundutta and Ayurved rasayana of Hemadri. Krishnadas academy, Varanasi, Sutra sthana.
2. Acharya YT (2007) Charak Samhita of Agnivesh. 5th

- (Edn.), Choukhamba Publications, Varanasi, pp: 113.
3. Ahuja N (2011) A Short Textbook of Psychiatry. 7th (Edn.), Jaypee Brothers Medical Publishers, New Delhi, pp: 136.
 4. Mallon L, Broman JE, Hetta J (2000) Relationship between insomnia, depression and mortality: A 12 year follow-up of older adults in the community. *Int Psychogeriatr* 12(3): 295-306.
 5. Doi Y, Minowa M, Okawa M, Uchiyama M (2000) Prevalence of sleep disturbances and hypnotic medication use in relation to socio-demographic factors in the general Japanese adult population. *J Epidemiol* 10(2): 79-86.
 6. Tellez-Lopez A, Sanchez E, Torres FG, Ramirez PN, Olivares VS (1995) Sleeping habits and disorders in residents of the Monterrey metropolitan area 18(1): 14-22.
 7. Roth T (2007) Insomnia: Definition, Prevalence, Etiology and Consequences, *J Clin Sleep Med* 3(5S): S7-S10.
 8. American Psychiatric Association. Diagnostic and statistical Manual of Mental Disorders. 5th(Edn.), (DSM-5) Arlington, VA: American Psychiatric Association.
 9. Rogadhikara V, Ratnavali B, Chapter 26, Verse: 343 to 354, pp: 151-162.
 10. Ayurvedic Pharmacopeia of India Part 1. 2nd (Edn.), pp: 436-439.
 11. Kumar S, Madaan A, Verma R, Gupta A, Sastri JLN (2014) In vitro anti-inflammatory effects of Mahanarayan oil formulations using dendritic cells based assay.
 12. Samhita C (2004) Sutrasthana. Chapter 21, 36th (Edn.), Chaukhamba Surbharati Prakashan, Varanasi, pp: 406.
 13. Tripathy HP, Harita S (2009) Chaukhambha Krishnadas. 2nd (Edn.), Academy, Varanasi, pp: 330.
 14. Vagbhatta (2005) Ashtanga sangrah with Sashilekha commentary by Indu. Krishnadas academy, Varanasi, Sutra sthana 28/3.

