



AYURVEDIC APPROACH TO COMMON ISSUES IN PSYCHO-ONCOLOGY

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ARTICLE INFO

Article History:

Received 5th February, 2018

Received in revised form 20th

March, 2018 Accepted 8th April, 2018

Published online 28th May, 2018

Key words:

Psycho-oncology, psycho- endocrinology, rasayana, satvavajaya, daivavyapasraya

ABSTRACT

Individuals affected with cancer as well as those ongoing the treatment for cancer faces a lot of psychological issues, not addressed in a satisfactory manner through any system of medicine, as per published studies. Cancer patients frequently present with anxiety, depression, post traumatic stress disorder, adjustment disorder etc. Recent studies hold the view that positive mental attitude and belief can inhibit as well as prevent the occurring as well as worsening of conditions including cancer. The area is yet to be explored so as to lend a hand to the affected. Psycho-oncology is a developing branch of psychiatry as psychological interventions are said to provide good sort of relief as well as delay in the recurrence of cancer. Rigorous efforts from clinicians and researchers are the need of the hour to throw light on the scope of psychosocial approach in cancer. Ayurveda unwraps wide possibility for stress management with its several techniques, where several curative as well as preventive measures are explained for the unavailability of mind. There are a lot of drugs and treatment modalities explained which are psychotropic and simultaneously having immuno modulatory properties, of ultimate benefit in the management of psychological affections of cancer.

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INTRODUCTION

The prevalence of cancer is so high in the Indian population and almost 70-90 per lakh of individuals. It is a miserable condition to the individual as far as his physical, mental as well as social health is concerned, but the extent varies as per the individual, as well as the type of cancer¹. The diagnosis itself affects all the enthusiasm, hope as well as happiness in the life. Psycho-oncology is a extensive approach which tends to manage the emotional, social, and spiritual distress which often accompanies cancer.² All aspects of health are moreover affected at the very onset of diagnosis itself, than in any other disease.

So far there has been no effective approach for the permanent cure for cancer, though there are reported cases, which is well beyond generalization. Along with the therapeutic approach, a palliative and supportive care have got foremost role in managing the patients, at some point of time in the disease course. The development of psycho-oncology instigated in the second part of the 20th century reflecting the increased interest in the study of psychological reactions at all stages of its course, and the analysis of the emotional, spiritual, social, and behavioral factors which influence the risk of developing cancer and in long-term aftercare.

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Psycho-oncology – relevance

The cancer is an illness, which is associated with severe emotional disturbances and distress. Psycho oncology deals with impact of cancer on psychological functioning and also the role that psychological and behavioral variables take part in cancer risk and survival. Sadness and grief are key reactions to a cancer diagnosis. Such a person faces many stressful issues such as changes in body image and self-esteem, alterations in day to day living, mind-set of denial or despair, trouble in sleeping, loss of appetite, anxiety or worry about the future and also the ultimate fear of death apart from the, economical and legal concerns.

A key clinical challenge for the oncologist is in differentiating the expected and transient distress associated with cancer from the excessive, disabling distress that requires psychiatric interventions. Emotional and social support can lend a hand to patients so as to learn to cope with the associated psychological stress. Psychological interventions enhance the role of recovery of cancer patients as per published studies³. Such a support reduces the levels of depression, anxiety, and the cancer related symptoms, among the affected. One third of patients with cancer experiences distress that require evaluation and treatment, and the most common psychiatric conditions are depression, anxiety disorders and adjustment disorders. Psychiatrists should be involved in the multidisciplinary team who vocates with the cancer patients.⁴ A study by Pai, Mehrotra, Vidyasagar *et al* in 2005 examined the feasibility, process and outcomes of a controlled trial of

brief group interventions in hospitalized non-terminally ill patients, undergoing radiotherapy. The study demonstrated short-term beneficial outcomes of interventions utilizing supportive and cognitive behavioral components.⁵ Mindfulness based stress reduction in relation to quality of life, mood, symptoms of stress, and immune parameters in breast and prostate cancer outpatients was reported in a study by Carlson L.E *et al* in 2003.⁶ Several studies have concluded the support of research activities in managing the emotional problems of cancer patients.

The approaches include the following methods such as

- Cancer education
- Counseling
- Training in relaxation, meditation, exercise
- Medications for depression or anxiety or associative psychological problem
- Social support

Assessment of the quality of life, anxiety, depression, general distress along with pain in cancer patients has attracted utmost attention in the area of research in psycho-oncology. It is high time for Ayurvedic fraternity to concentrate in psycho-oncology and interrelated problems.

Body - mind relation in ill health – Ayurvedic view

Both mind and body are explained as the substratum of the disease and they are inseparably related. Ayurveda have explained the mind and its affection in many of the diseases affecting the mind as well as the body. The management of these conditions opens wide scope for handling stress and associative problems and efficacy have been reported at the clinical level. Body is being explained as a psychosomatic entity and many curative as well as preventive measures are mentioned for a sound mind. Apart from *saareerika* (somatic) and *maanasika* (psychic) diseases, there is another classification- *s'aareera maanasika vyaadhi* ie. those presenting with physical problems associated with psychological factors such as *s'oka*, *krodha* etc. eg: *s'oka sossa*, *bhayaja atisara* etc.

In *Asht'aanga Hr'daya*, the treatise by *Vaghbata*, it is highlighted that an extraordinary physician, is the person capable of pacifying the conditions affecting the mind such as *raaga*, *dwesha*, *krodha* etc.⁴ *Chakrapaani* has classified diseases based on either body or mind is the most affected and states that both are influenced in any disease in a simultaneous manner.

The *tapta aajya ghat'a nyaya* is an amazing concept of body and mind relation where Ayurveda stresses importance of mental health and the relation between physical illness and psychological ones⁵. The pain/sorrow affecting either the body or mind affects the other because of the integral relationship between the two, similar to the heat of ghee spreading into the pot in which it is kept or vice versa. In cancer, the disease affecting the body rapidly influences the mind, associated with emotional disturbances and distress. The increased distress in cancer worsens the physical strength and hence worsening the condition, leads to a awful prognosis.

Mental agonies come under the context of “*manovikaara*” as per Ayurveda. The derangement of *doshas of the mind - the rajas and tamas*, leads to different types of conditions affecting mind such as *cittodvega*, *vishada* etc.⁶ The derangement of

doshas of the body-Vatha, Pitta and Kapha have to be rectified before the management of *doshas of the mind*, which signifies the importance of *Panchakarma* or *Sodhana* in Psychiatry.

Vishaada or episodes of grief is considered to be crucial aggravating factor for all diseases, regardless of those of the body or mind.⁷ *Mental afflictions such as kopa, s'oka* etc leads to depletion of *ojus* or alteration in the immunal status which is the primary evidence of association between the disorders affecting the mind and immunal status, which later led to the development of psycho-neuro-immunology. Many of the psychiatric patients attending the OPD are observed to have a depleted level of *Ojus* on primary inference.⁸

Ayurvedic Approach to psychological conditions

The mental strength (*satva bala*) of an individual is the primary factor that determines the health as well as the vulnerability to mental disorders. *Sadvr'tta*, *Aacaara rasaayana* (ethical code of conduct), *Dinacarya* (Daily routine) etc are explained to be followed so as to lead a peaceful life. Similarly the *vegas* (impulses) in relation with mind have to be controlled or regulated, for the promotion of mental health and avoidance of mental infirmity. These are all the steps mentioned as a part of preventive psychiatry and seem noteworthy.

From time immemorial, diverse management techniques for uplifting mental strength have been explained and put to practice. The mental strength was enhanced or modified and the various diseases of mind were managed by adopting the non pharmacological techniques (*adravya chikitsa*) and *psychotherapy* (*Satvaavajaya*). Medicines were not given prime priority in the management in Ayurvedic Psychiatry. *Yukti vyapaas'raya* ie. conditional use of *sodhana* as well as appropriate internal medicines for preventive as well as curative aspects are done as well.

Non pharmacological approach in psycho oncology

Satvaavajaya techniques are designed to achieve equilibrium of the human mind in dealing with the environmental stressors as well as the emotional stressors. Caraka has advised to manage the psychological illness with the five-fold methodology - *jn'aana*, *vijn'aana*, *dhairya smr'ti* and *samaadhi*, on a strict conditional basis. These techniques in a modified form contribute the basic principles of contemporary psychotherapy, developed in due course. Such methods are used effectively in psychologically ill, in clinical practice.

Jn'aana is *adhyaatma jn'aana* (absolute knowledge and awareness about self), *Vijn'aana* is explained as *s'aastra jn'aana* (specific knowledge regarding the disease, prognosis as well as all the available options), *Dhairya* is mentioned as *anunnati cetasa* (Ability to face worse situation is enhanced in the affected with certain techniques), *Smr'ti* is *anubhootaardha smarana* (Recollection of seen, heard and experienced things by the affected, with the help of an expert), *Samaadhi* is *vishayebhyo nivartyaatmani manaso niyamana* (Detachment from worldly pleasures and avoid hope at the extreme level and to think as an ordinary human)⁹. These steps are used in a subsequent manner as per the demand from the condition or even the situation.

Satvaavajaya have been defined as the measure of restraining one's mind from *ahita artha*.¹⁰ *Artha* refers to the objects of perception such as those requiring thought (*cintya*),

consideration (*vicaarya*), attention (*dhyeya*), determination (*sankalpya*) or whatever can be acknowledged by means of mind.¹¹ In short *artha* refers to the objects of mind and *ahita artha* refers to uncondusive objects or which is not positive to the mind. Hence it is quite a necessity to restrain one's mind from unnecessary thoughts, deeds or words for appropriate mental health. Any one indulging in the same is said to perform *prajnaparadha* – the causative factor for the development of a psychiatric illness.

Satvavjaya acts on modifying the areas of mental processes such as regulation of the thought process, reframing of ideas, channelization of presumptions, correction of objectives and ideas, proper guidance and advice for taking the prompt decision. Such techniques can be adopted in cancer patients as per the condition. Such methods including psychotherapies and relaxation techniques are of real importance in the management of psychological aspects of cancer. Along with the same, *rasayana* therapy is also adopted for enhancement of immunostatus. Such drugs are having adaptogenic, immunopotentiating, as well as antioxidant properties. The herbs such as *amalaki*, *guduchi*, *pippali*, *ashvagandha*, and combinations such as *Brahma rasayana*, *Chyavanaprasha* are advised to be used.¹²

Pharmacological Management of psycho-oncological issues

There are lots of Ayurvedic formulations as well as single drugs which are found to be effective in managing the emotional or psychological problems associated with any conditions, including cancer. The dosha status of the clinical presentations is to be assessed prior to fixing the medicines. For eg. Anxiety and associated problems are either of Vatha dominant or of Vatha pitta while depression associated conditions are of Kapha dominant or of Vatha kaphaja. Also relaxation techniques such as *yogasana* and *pranayama* are found to be effective in enhancing the psychological status and also improving the quality of life in cancer patients as per published studies.

In severe psychological presentations, an inpatient treatment is planned, after considering the bala or general health status of the affected individuals, as they may be ongoing several medicines or therapies for cancer. The protocol is designed as per the clinical presentation. Eg. In the presentation of depression, one have to adopt the Vatha kaphahara *chikitsa*, which includes *snehapana* followed by *Vamana* or *sodhana nasya*. In anxiety or phobia, the protocol to be framed for Vatha and Pitta which includes *snehapana* followed by *virechana*, *ksheeravasthi* and *samana nasya*. There is no tailor made ready protocols and everything fixed after the assessment of *prakrithi* as well as *satwa* and varies from one person to another.

Add on therapies are advised usually without disturbing the main therapy. Treatments such as *abyanga*, selected *swedas*, *panchakarma* procedures such as *virechana*, *vasthi*, *nasya* etc. can be planned as per the condition. The treatments for the head such as *siropichu*, *sirodhara* and even *sirovasthi* works in a very effective manner in all psychological conditions, even in the case of cancer. Selected *rasayanas* such as *pippali*, *chitraka*, *kanmada*, *sankupushpi* are administered after the *sodhana* therapies, after prior assessment of the clinical status. Dietary management with a *satwika* diet and also cognitive enhancer food such as *ghee*, *gooseberry*, *raisins*, *ash gourd* etc. are advised. The combined approach of pharmacological as

well as non pharmacological management with dietary regulation seems highly beneficial in clinical practice.

CONCLUSION

Ayurveda stands for a holistic mode of healthy living and also an absolute management of the disease. Its basement is on a psychosomatic axis for health. This science strictly recommends good mental health in the maintenance of good physical health and vice versa. Today the modern science in the field of psycho - neuro - immunology is proving the relation between one's mental health and immunity; while Ayurvedic science has already established this relationship a bit earlier. Ayurvedic science is also participating in improving the quality of cancer patients nowadays. Obviously no treatment in this aspect fails to attend the psychological well being of the patients. Ayurveda can help the distressed patients in a safe and friendly manner through medicines and a healthy way of life.

Mental health issues should be included in the training of health care professionals in all areas of medicine, psychology and social work to meet the demands of cancer patients. Further research is needed to determine the effectiveness of different psychological and psychopharmacological interventions in psycho-oncology. Such studies are the need of the hour from the Ayurvedic point of view with appropriate methodologies of research and the whole medical world is expecting much from the Ayurveda in psycho oncology.

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How to cite this article:

Jithesh M and Gayatri Jayan (2018) 'Ayurvedic Approach to Common Issues in Psycho-Oncology', *International Journal of Current Advanced Research*, 07(5), pp. 12272-12275. DOI: <http://dx.doi.org/10.24327/ijcar.2018.12275.2150>
