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A case study on *Vatakaphaja Unmada* : Autism Spectrum Disease

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ABSTRACT

Introducton: *Manasika Vikara* can be caused due to derangement in *Manasika Doshas* like *Kama, Krodha, Lobha, Moha, Irsha*, can be due to *Atyartha Prakupita Shareerika Doshas* which then vitiates the *Manovahasrotas* or can be due to *Agantuja Nidanans* like *Graha Badha* or *Bhootabadha Janya*. *Unmada* is on such *Manasika Vikara* caused due to vitiation of *Shareerika Doshas* finally disturbing the *Manasika Bhavas* leading to the specific *Doshik Lakshanas*. It can be compared to Autism spectrum disease as the very definition of it incorporates the features like impairment in Social and communicative behavior, restrictive and repetitive behaviors. The present case has been diagnosed as *Vatakaphaja Unmada* having autistic features **Materials and methods:** The treatment protocol of *Unmada* like *Basti, Nasya*, are adopted with classical medicines according to the *Dosha* predominance. **Result:** There has been improvement in the clinical manifestations after two sittings of the treatment. **Discussion:** *Basti* by its *Veerya* moves throughout the body, does the *Dosha Vilodana* and eliminates it from the body. *Nasya* being the *Dwara* to *Shiras* opens up the *Manovaha Srotas*. These procedures along with the internal medications have brought the improvement in present case. Here is the paper describing about the very case, its treatments and the result obtained.

Key words: *Manasika Vikara, Unmada, Autism spectrum disease, Case study*

INTRODUCTION

Autism is a neurodevelopmental disorder characterized by impairment in social communication along with presence of restricted, repetitive patterns of behavior, interest and activities. Autism and

developmental disability monitoring cohort estimated that 1 in every 68 children is defined with Autism spectrum disease (ASD) and male to female ratio is 5:1. Few studies have also shown higher incidence in Upper socioeconomic groups. Sibling studies have shown that risk of developing autism is 10-18% if one child is affected and 25% if two siblings are affected. Considering the Ayurvedic perspective of the disease, *Unmada* is the morbidity that originates due to *Dushtadosha* caused by the *Mithyahara* or *Vihara* consumption by an *Alpa Satwa* person, which gets lodged in the *Sthana* of *Buddi*; that is *Hridaya* and later does *Margavarana* of *Manovaha Srotas* leading to different *Lakshanas*. The treatment principle explained by our *Acharyas* include, *Mridushodhanas* for the *Margavishodhana* followed by *Sneha Pana* in case of *Vataja Unmada*, *Virechana* in case of *Pittaja Unmada* and *Vamana* in case of *Kaphaja Unmada*.^[1]

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CASE REPORT**Vedana Vrittanta (History of presenting illness)**

A 9 years old male boy was admitted in Kaumarabhritya IPD of SDM Ayurvedic Hospital, Udupi. He is the second child of non - consanguineous parents, born through normal vaginal delivery with a birth weight of 3.1kg. He was said to be apparently normal till 7th month of life where parents noticed non-attainment of neck holding and the further milestones were also noticed to be delayed. Child was diagnosed with mild MR with Autistic features at the age of two. At the age of 6, he presented with continuous cry and hence EEG was taken and impression read as mild epileptiform changes. Later he presented with irritability, disturbed sleep at night, repetitive fidgeting of hands, playing in his own world, dis-interest in mingling with peer group and drooling of saliva gradually along with persisted index finger sucking. Presently they are under Ayurvedic treatment since 2 years in our hospital this being the third sitting.

Natal history

Regular antenatal care was taken. At 9th month of pregnancy, had an allergic infestation of red eyes and itching after the intake of mushroom and hence 15 days of medicine in terms of injection was taken.

Developmental history**Gross motor development according to age**

Head control - 1 year
 Rolling over - 9 months
 Sitting with support - 2 years
 Standing with support - 2 years
 Walk with support - 2 years
 Walk without support - 2.6 years
 Climbing stairs - 3 years
 Running - 3.6 years
 Jumping - 3.6 years
 Riding cycle - Not attained

Fine motor development according to the age

Reaching object with both hands - 1 year
 Transfer objects - 3 years
 Pincer grasp - 3 years
 Scribbles circle - 5 years

Language development according to the age.

Cooing - 3 months
 Babbling - 6 months
 Laughing loud - 2 years

Social and adaptive development according to the age.

Social smile - 1.6 years
 Recognizing mother - 2 years
 Eye contact - 9 years

Present medication

Syp. Valproic acid: 7.5ml BD

Clinical examination

General examination: Gait - circumduction

Anthropometry

Height : 124cm
 Weight : 18kg
 MAC : 16cm
 MTC : 27cm
 HC : 51cm

Systemic examination

CVS : NAD
 RS : NAD
 P/A : NAD
 CNS : HMF – intact

Cranial nerve examination

I and II - Normal
 III, IV and VI - Movements normal, no ptosis, no nystagmus

V - Normal

VII - No asymmetry of nasolabial folds

VIII - Gross hearing intact

IX and X - Normal

XII - No deviation of tongue

Differential diagnosis

ADHD, Asperger's syndrome, Rett's syndrome, Intellectual disability, ASD.

Diagnosis

Vatakaphaja Unmada^[2] (Autism)^[3]

Treatment protocol

1. *Abhyanga* with *Mahanarayana Taila*^[4] for 13 days
2. *Godhuma Pinda Sweda* for 13 days
3. *Shirodhara* with *Dhanvantara Taila*^[5] for 13 days
4. *Matrabasti* with *Kalyanaka Ghrita*^[5] for 13 days
5. *Ksheera Dhooma* with *Bala Moola Ksheera Kashaya* for 5 days
6. *Dhmapana Nasya* with *Kchooradi Churna*^[7] for 7 days

Internal medications

1. Syrup *Manasa* - 7.5ml BD
2. *Brahmi Vati* with gold - ½ BD
3. *Smritisagara Rasa* with gold - ½ BD
4. *Vacha Churna* - 2 pinch with honey
5. Tablet *Sarpagandha* - ½ HS

RESULTS

Considerable improvement in the eye contact was observed by the second sitting of treatment.

Irritability of the child, in terms of cooperation with *Panchakarma* procedures was improved by the third sitting.

Prolonged hours of undisturbed sleep at night were observed.

CONCLUSION

The incidence of ASD is gradually finding an upward trend due to which diagnosing the disease and early treatment is of great importance. Understanding the disease Autism in our classics is based on the clinical features as most of the clinical manifestations of psychological disorders fall under the category of *Unmada. Basti* by its *Veerya* removes the *Doshas* situated in the *Hridaya*. *Nasya* by its virtue opens up the *Manovaha Srotas* which is *Avrita* by the *Doshas* and overcomes the deranged behavior. Hence in the further sittings of the treatment significant changes in the patient are expected.

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