



A clinical study to evaluate the therapeutic effect of Siddartakadi Yoga in Vishada w.s.r. to Depression

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Background: According to Ayurveda, both physical and mental health are equally important for an individual to be considered Swastha. Ayurveda explains that diseases can manifest as Shareerika (physical), Manasika (mental), or both. Vishada is a mental disease with psychosomatic consequences. "Siddharthakadi Yoga has been explained by Acharya Charaka in the context of Unmada Chikitsa (treatment of psychiatric disorders in Ayurveda).

Aims and Objectives: To evaluate the therapeutic effect of Siddartakadi yoga in Vishada (Depression).

Methodology: An open labelled clinical study with pre and post-test design. The 30 patients with diagnostic criteria of Vishada (Depression), were selected from Sri Dharmasthala Manjunatheshwara Hospital of Ayurveda, Udupi, were subjected with 500mg capsule of Siddartakadi Yoga with Sukoshna Jala thrice after food for 30 days, follow-up was taken after 45days. All the parameters in subjective parameters were statistically analyzed with Wilcoxon signed rank and objective parameters by paired 't' test.

Results: The effect of therapy was assessed with self-prepared Vishada Rating scale, Hamilton Depression Rating scale and WHO-QOL BREF Scale before and after treatment, have showed significant results.

Conclusion: Equally distributed gender of all age group, economic class and educational status were registered for the study, 1TID (Thrice a dose) of Siddartakadi Yoga. This shows no one is immune to Depression. Most of the subjects were of Vata-Kaphaja Prakruti and having Tamor/ Rajo Guna predominance who are prone for group of psychological imbalances. 30 days of treatment proved to be effective on Psychological, Somatic and Psycho somatic domains.

Keywords: Vishada, Siddhartakadi Yoga, Depression

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Introduction

It is natural to experience a range of emotions, from happiness and sadness to anxiety and fear or even moments of forgetfulness and confusion. These emotional fluctuations are part of everyday life. Emotions are fundamental aspects of human experience.

However, when a person's emotions, thoughts or behaviour consistently cause distress or disrupt their life and the lives of those around them, it could be a sign of mental illness. Despite the fact that approximately 1 in 5 people are believed to suffer from some or the other form of mental illness, it remains heavily stigmatized and often leads to discrimination.

As a result, many individuals hesitate to acknowledge they have a problem and delay seeking help or treatment. Sadly, untreated mental illness can lead to tragic outcomes, including suicide, which claims more than 720,000 lives annually, usually around the age 15-35. The economic burden of mental health conditions is also significant and continues to grow. Ayurveda places great importance on the mind and its disorders, recognizing their critical role in overall health.

Ayurveda, an ancient system of medicine, originated from the spiritual visions of Indian Rishis. It was developed through a gradual, step-by-step process by many sages. *Ayurveda* is a powerful tool provided by nature to help us understand, analyse, and cure diseases which are broadly classified into two types: *Sharirika* (physical) and *Manasika* (mental) disorders.

Regardless of exact origin of *vedas*, they hold a unique position by shedding light on early habits, customs, and medical science of nation. In fact, the *Vedas* serve as a foundation of *Ayurveda*, which emphasizes inseparable connection between body (*Shareera*), Mind (*Manas*) and Soul (*Atma*). This holistic integration forms basis of *Ayurvedic* philosophy, which views health as a dynamic balance of physical, mental and spiritual well-being. *Ayurveda* is considered as an *Upaveda* (Subtext) of *Atharvaveda*. According to *Ayurveda*, diseases are caused by an imbalance of three doshas- *Vata*, *Pitta* and *Kapha*. Treatment focuses on restoring balance to these doshas through lifestyle modification, dietary adjustments etc.

Additionally, the Mind (*Manas*) being closely connected with the body (*Shareera*), plays a significant role in maintaining health, alongside the influences of the three *Gunas*- *Satva*, *Rajas* and *Tamas*. This dynamic balance between body, mind and spirit reflects Ayurveda's holistic approach to healing, which not only addresses symptoms but also aims at preventing diseases by promoting overall harmony.

Ayurvedic literature gives equal importance to both physical and mental well-being, defining an individual in a state of health as "*Swastha*"- one whose established in the self, with balanced *Doshas*, Proper digestion (*Agni*), well-functioning of the senses (*Indriyas*) and a tranquil mind. In the context of disease (*Athura*), *Ayurveda* explains that ailments manifest primarily as either physical (*Sharirika*) or mental (*Manasika*) conditions or the combination of both.

The relationship between the Mind (*Manas*) and mental disorders (*Manasika Vyadhis*) has been scientifically explored across various texts in *Ayurveda* Literature, which detail how imbalances in the mind can directly influence the body and vice versa. *Ayurveda* continue to evolve, Bridging the ancient wisdom of natural healing with modern health practices.

In the present era this is applicable to all alternative systems of medicine. Psychiatric disorders described in *Ayurveda* thousands of years ago are relevant in present time too. Depression is such an area where many studies have been done and it is very well correlated with *Vishada*.^[1]

Vishada is a state of mind or a disease caused by apprehension resulting in incapability of mind and retardation of psychomotor activities. It results in aggravation of ill health.^[2]

Sanskrit dictionaries describe *Vishada* as the state of Dejection or despondency. The symptoms of *Vishada* are almost same as that of Depression. Modern dictionaries define that Depression one of several mood disorders marked by loss of interest of pleasure in living.^[3]

Another dictionary describes that Depression means reduction of the level of functioning or a mental state or chronic mental disorder characterized by feelings of sadness, loneliness, despair, low self-esteem and self-approach.^[4]

According to WHO, about 280 million people globally suffer from Depression, which accounts for approximately 3.8% of the population.[5]

This also includes 5% of adults Globally suffering from depression. World Health Organization defines Depression as "A common mental disorder, characterized by persistent sadness and a loss of interest or pleasure in activities that are normally enjoyable, accompanied by an inability to carry out daily activities, for at least two weeks.[6]

Depression is significant contributor to the Global burden of disease and affects people in all communities across the world. Depressive disorders often start at a younger age. They reduce people's functioning and often are recurring.

For these reasons Depression is the leading cause of disability worldwide in terms of years lost due to disability. *Vishada* is considered one among the *Vataja Nanatmaja Vikaras* by *Charaka*. *Sushruta* has classified *Vishada* as one among the *Manasika Roga*.

In this regard *Vishada* is a condition in which the mind and body is affected and the qualities of *Siddartakadi Yoga* can provide solutions for the problem by tackling with both *Vata* and *Kapha Doshas* also by balancing and improving psychological state of the individual. In this view of above said facts "A clinical study to evaluate the therapeutic effect of *Siddartakadi Yoga* in *Vishada* w.s.r. to Depression is planned.

Materials and Methods

Source of data

Patient source: Minimum of 30 patients fulfilling the inclusion, exclusion and assessment criteria from the OPD and IPD of Sri Dharmastala Manjunatheshwara College of Ayurveda, Hospital and Research Centre, Kuthpady.

Drug source: Cap. *Siddartakadi Yoga* were prepared and collected from SDM Pharmacy, Udupi.

Method of Collection of Data

A special proforma was prepared with all the points of preliminary data, history taking followed by assessing the signs and symptoms with Hamilton depression rating scale, WHO quality of life scale, *Ayurvedic* scale for assessment of *Vishada*.

Design of study: An open label single arm clinical study

Table 1: Showing the intervention and duration of the study

Intervention	
Drug name	Siddartakadi Yoga capsule
Dose	500mg capsule, TID
Route of Administration	Oral
Time of Administration	Morning, Afternoon and night after food
Anupana	Sukoshna Jala
Duration	30 days
Duration of the study	
Intervention	30 days
Follow-up	15 days
Total Duration	45 days

Diagnostic criteria:

Subjects having the classical symptoms of *Vishada*, DSM 5 criteria, ICD10F33 criteria

Inclusion criteria	Exclusion criteria
§ Patients fulfilling diagnostic criteria of <i>Vishada</i> w.s.r. to Depression.	§ Subjects under pregnancy, lactation or below 18 years / above 60 years.
§ Age group from 18-60 years.	§ Subjects having symptoms of <i>Vata-Pittaja Unmada</i> , <i>Bhutonmada</i> , <i>Apasmara</i> , <i>Atatvabhinivesha</i> .
§ Subjects willing to sign the informed consent.	§ Subjects under other Psychiatric illness and complications of substance abuse.

Assessment criteria:

Classical symptoms of *Vishada* - Clinically assessed, Hamilton's Depression rating scale, WHO quality of life scale before 0th day and after the treatment 30th day. And follow up was done on 45th day and the ratings were noted.

Subjective parameter:

- Hamilton scale for Depression
- WHO- BREF quality of life scale
- *Vishada* rating scale (self-assessed)

Frequency of Abnormalities - Gradings for assessing the parameters

Frequency	BT	AT
Never - 0		
Occasionally - 1		
Sometimes - 2		
Frequently - 3		
Constantly - 4		

Table 4: Classical symptoms of Vishada

1. Udvignata	Intensity of feeling tense/ irritable/ uneasiness
2. Apravritti	Unable to have continuous flow in life/ active life
3. Sada	Intensity of experiencing misfortune/bad or unhappiness of things that make you feel sad.
4. Aprayatna	Absence of effort / not endeavouring
5. Ashabhanga	Defeat of hope/ disappointment
6. Alpavak	In conversable/ restrained/ closemouthed
7. Bhaya	Fear of danger/ distress
8. Hastapada Kampa	Shivering of hands& feet out of danger/ in fear of happening
9. Alpa Chesta	Limited effort/ desire/ wishes
10. Atinidra	Excessive sleeping/ desire to keep sleeping
11. Anannabhilasha	Reduced appetite/ not interested towards having food
12. Shoka	Sorrow/grief/ deep anguish
13. Nirasa	Feeling of hopeless, despair or freedom from desire.
14. Alpa Nidra	Reduced/ disturbed sleep

Objective criteria: Routine Blood investigations (If required)

Results

In the current study, 30 patients of *Vishada / Depression* were registered and administered 1 capsule of *Siddartakadi Yoga* were given thrice a day as divided dose of 500mg once in the morning, afternoon and night after food with warm water for total 30 days, in this single group and also pre-test post-test clinical trial was done. The effect of the treatment following medication was assessed. The parameters were analysed statistically using Paired 't' test and Wilcoxon sign rank test with help of sigma statistics software. The details of the same are elaborated in this section on results.

Effect on Utsahanasha

Administration of *Siddartakadi Yoga* capsules was found to be effective in symptom *Utsaha Nasha*. Among all the 30 patients, the mean score prior to the treatment was 2.033 which decreased to 0.767 after the treatment with mean difference of 1.266.

The analysis by applying the Wilcoxon signed rank test showed that the improvement was statistically highly significant with 'P' value of $P < 0.001$. Details are shown at full length in the table (table no. 5) and figure (fig no. 1). The mean score on before treatment 0th, 30th (after treatment), 45th (follow-up) day of treatment is shown in line diagram. Figure no. 2.

Table 5: Utsaha Nasha

BT	AT	BT-AT	% of improvement	SD	SEM	Median	Zvalue	Pvalue
2.033	0.767	1.266	62.27	BT-1.273	0.475	2.000	4.388	<0.001
				AT-0.568	0.212	1.000		

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Figure 1: Utsaha Nasha

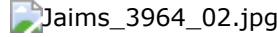
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Figure 2: Utsaha Nasha

Effect on Apravritti

Administration of *Siddartakadi Yoga* capsules was found to be effective in symptom *Apravritti*. Among all the 30 patients, the mean score prior to the treatment was 2.200 which decreased to 0.997 after the treatment with mean difference of 1.203.

The analysis by applying the Wilcoxon signed rank test showed that the improvement was statistically highly significant with 'P' value of $P < 0.001$. Details are shown at full length in the table (table no. 6) and figure (fig no. 3). The mean score on before treatment 0th, 30th, (after treatment), 45th (follow-up) day of treatment is shown in line diagram. Figure no. 4.

Table 6: Apravritti

BT	AT	BT-AT	% of improvement	SD	SEM	Median	Zvalue	Pvalue
2.200	0.997	1.203	54.68	BT-0.997	0.372	2.000	4.573	<0.001
				AT-0.571	0.213	1.000		

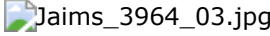
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Figure 3: Apravritti

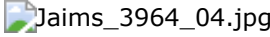
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Figure 4: Apravritti

Effect on Sada:

Administration of *Siddartakadi Yoga* capsules was found to be effective in symptom *Sada*. Among all the 30 patients, the mean score prior to the treatment was 2.767 which decreased to 1.067 after the treatment with mean difference of 1.7.

The analysis by applying the Wilcoxon signed rank test showed that the improvement was statistically highly significant with 'P' value of $P < 0.001$. Details are shown at full length in the table (table no. 7) and figure (fig no. 5).

The mean score on before treatment 0th, 30th, (after treatment), 45th (follow-up) day of treatment is shown in line diagram. Figure no. 6.

Table 7: Sada

BT	AT	BT-AT	% of improvement	SD	SEM	Median	Zvalue	Pvalue
2.767	1.067	1.7	61	BT-0.935	0.349	3.000	4.635	<0.001
				AT-0.521	0.194	1.000		

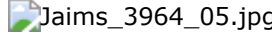
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Figure 5: Sada

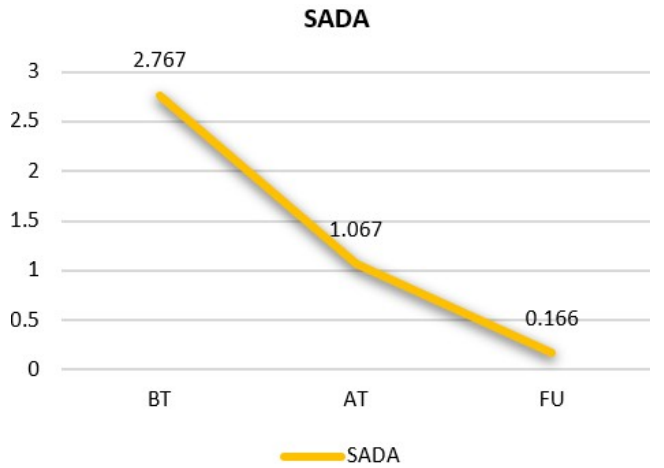


Figure 6: Sada

Effect on Asiddhi Bhaya:

Administration of *Siddartakadi Yoga* capsules was found to be effective in symptom *Asiddhi Bhaya*. Among all the 30 patients, the mean score prior to the treatment was 1.533 which decreased to 0.733 after the treatment with mean difference of 0.8.

The analysis by applying the Wilcoxon signed rank test showed that the improvement was statistically highly significant with 'P' value of $P < 0.001$. Details are shown at full length in the table (table no. 8) and figure (fig no. 7) The mean score on before treatment 0th, 30th, (after treatment), 45th (follow-up) day of treatment is shown in line diagram. Figure no. 8

Table 8: Asiddhi Bhaya

BT	AT	BT-AT	% of improvement	SD	SEM	Median	Zvalue	Pvalue
1.533	0.733	0.8	52.1	BT-1.279	0.478	1.000	3.900	<0.001
				AT-0.868	0.324	1.000		



Figure 7: Asiddhi Bhaya

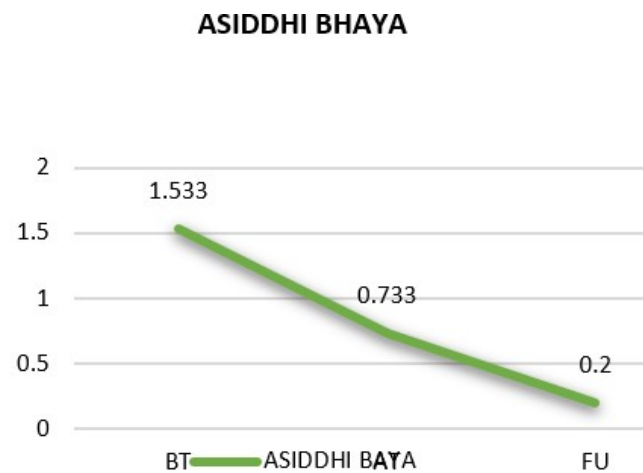


Figure 8: Asiddhi Baya

Effect on Hamilton Depression Rating Scale: Administration of *Siddartakadi Yoga* capsules was found to be effective in symptom Hamilton Depression rating scale. Among all the 30 patients, the mean score prior to the treatment was 19.90 which decreased to 9.00 after the treatment with mean difference of 10.8.

Table 9: Hamilton Rating Scale

Mean			Wilcoxon signed rank test					
BT	AT	BT-AT	% of improvement	SD	SEM	Median	Z value	P value
19.80	9.00	10.8	54.54	BT-3.836	1.433	19.50	4.797	<0.001
				AT-3.533	1.319	9.50		

The analysis by applying the Wilcoxon signed rank test showed that the improvement was statistically highly significant with 'P' value of $P < 0.001$.

Details are shown at full length in the table (table no. 9) and figure (fig no. 9).

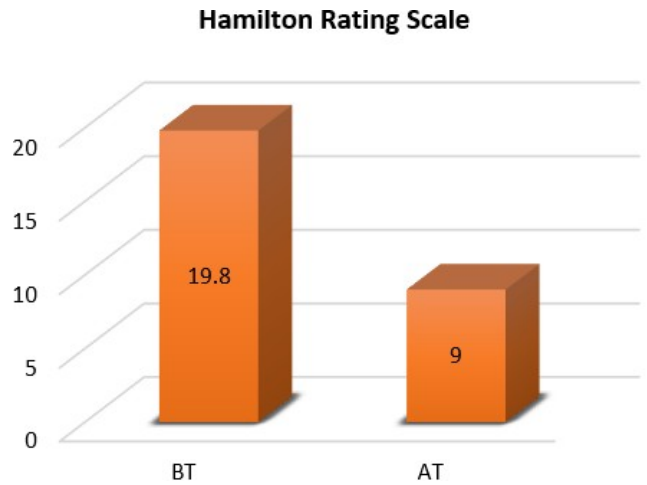


Figure 9: Hamilton Rating Scale

Effect On Vishada Rating Scale

Administration of *Siddartakadi Yoga* capsules was found to be effective in symptom *Vishada* rating scale. Among all the 30 patients, the mean score prior to the treatment was 16.567 which decreased to 7.433 after the treatment with mean difference of 9.134. The analysis by applying the Wilcoxon signed rank test showed that the improvement was statistically highly significant with 'P' value of $P < 0.001$. Details are shown at full length in the table (table no. 10) and figure (fig no. 10)

Table No:10 Effect on Self Assessed Vishada Rating Scale

Mean			Wilcoxon signed rank test					
BT	AT	BT-AT	% of improvement	SD	SEM	Median	Z value	P value
16.567	7.433	9.134	55.133	BT-3.655	1.365	16.000	4.793	<0.001
				AT-2.661	0.994	7.500		

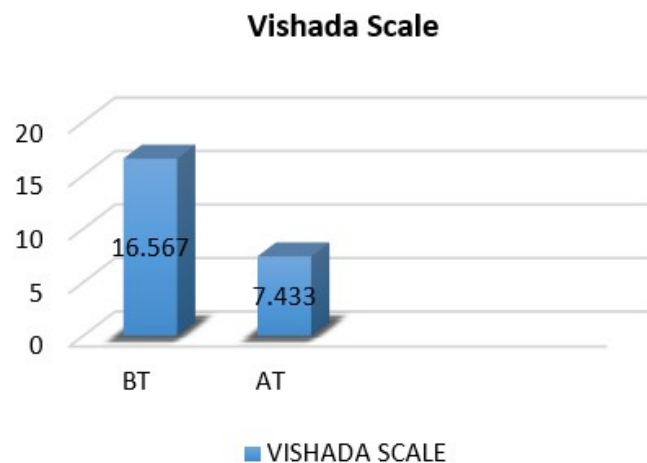


Figure 10: Showing Vishada Scale

Over All Assessment in Response to Treatment

In the study 0% had excellent improvement, 70% had marked improvement, 30% had mild improvement, 0% had a poor improvement. Details are shown at full length in the table (table no. 11) and figure (fig no. 11).

Table 11: Showing overall improvement

SN	Improvement	Scale	No. of Patients	% of Patients
1.	Excellent	75-100%	1	3%
2.	Marked	50-75%	22	70%
3.	Mild	25-50%	7	27%
4.	Poor	0-25%	0	0%

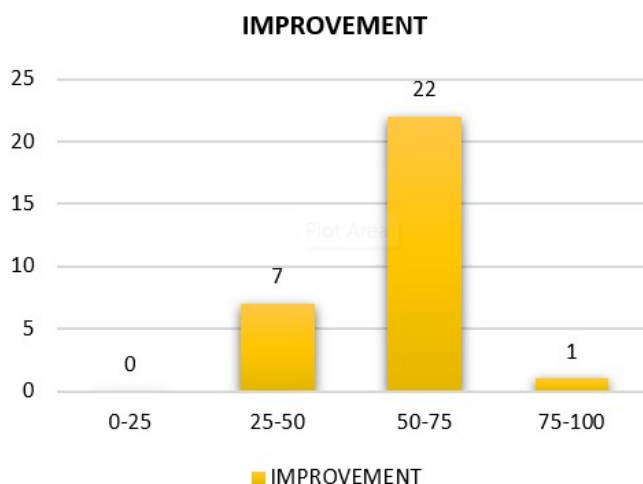


Figure 11: Showing overall improvement

Among the 2 assessment parameters which are taken for the study, i.e., HAM-D scale and Vishada scale there were marked improvement in between 50-75% and some are having mild improvement which lies between 25-50% results and there was also excellent result that is from 75-100%.

Discussion

Vishada is one of the *Nanatmaja Vyadhi (Vataja)*. *Vishada* is the main factor which is the reason for increasing or causative factor for diseases. The symptoms or the detail description of *Vishada* are very scattered in our classics. This condition is also neglected sometimes and in recent times the increasing rate of psychological issues and the impact of these factors on physical health are concerning. Understanding *Vishada* and exact co relation of symptoms of *Vishada* can be done with Mild to moderate Depression. The present clinical study was aimed to evaluate the efficacy of *Siddartakadi Yoga* in the management of *Vishada/ Depression*. [7]

Vishada is one among the *Vataja Nanatmaja Vikara* and also described as *Manasika Vikara* in *Ayurveda* literature. Texts describe *Vishada* as a state with loss of interest and inactivity in any works which is resultant of the fear of failure. In depression the mood or effect of the individual are derailed. The condition will be characterized by mood of extra ordinary sadness and dejection with depressed mood, pessimistic thinking, reduced energy and psychomotor retardation. Depressive disorder, a mood disorder which is characterized by depressed mood, anhedonia, decreased energy, fatigability, lack of emotional reactivity, loss of libido, anxiety, agitations, sleep disturbances, psychomotor retardation and other symptoms affecting the body and mind. The causes of depressive disorders can be classified as biological, psychological and social factors. Biological includes genetic, endocrine and other physiological and pathological changes happening in the body. Psychological factors explained by various philosophers in terms of "learned helplessness", cognitive theories like negative thoughts, nihilistic ideas; "mourning & depression" by Sigmund Freud etc. Social factors include lack of social relationship, insecurity, loneliness; life events like loss of spouse, unemployment, natural or artificial disasters etc. Some people's emotional responds in a situation tend to develop negative thought process like lack of initiative, anhedonia (inability to experience pleasure or indulge in previously pleasurable activity), social withdrawal etc, which can consider termed as "Depression" in a medical context means state of extreme dejection. "*Vishada*" according to dictionary also has explained it as state of depression and dejection.

Vata is the *Dosha* which is vitiated in *Vishada*. The *Karma* (function) of *Vata* can be seen impaired in this condition. This may be the reason why it is included under *Vata Nanatmaja Vyadhi* by *Charaka*. Psychomotor activities are seen in a depressive patient, thus can be concluded as the *Karmahani* of *Vata Dosha*. *Vishada* has been explained as a characteristic feature of *Tamasik Guna* "*Tamasastu Vishaditvam*" which can be considered as the psychological cause in *Ayurveda*. The symptoms as found in the context of *Vishada* in *Bhagavad Geeta* provides an idea regarding the psychological and social factors causing depressive disorders thus resulting in state of helplessness in person which is presented along with physical symptoms too.

The state of *Avasada* explains about the psychomotor retardation very clearly, which is one of the main symptoms seen in depressive disorder. *Vishada* is explained in terms of apprehension and fear of failure which can be correlated to a state of mind in the person which is observed in the initial stages of depressive disorders. The four main symptoms needed to consider the disease as depressive disorder according to DSM IV are Depression, anhedonia (lack of interest in indulge in activities which were previously pleasurable), decreased energy, fatigability. These four symptoms are clearly described in *Bhagavad Geeta* in the previously mentioned context.

Psychic Symptoms: *Dukhita* (distressed, unhappy, grieved in mind) *Avasada* (hoplessness, lassitude), *Manah Khedah* (feeling of depression), *Vishanna* (dejection, sorrow), *Chitta Glani* (fatigue of mind), *Asiddhi Bhaya* (fear and anxiety or apprehension of failure), *Dainya* (miserable state/depression), *Chittodvega* (Anxiety), Feeling of inadequacy, Thought of death/suicide. **Somatic Symptoms:** *Sidanti* (loosening of muscles), *Mukha Shosha* (Dryness of mouth), *Prasveda* (Excessive sweating), *Bhramati Manas* (Wandering mind), *Tvak Paridaha* (Burning sensation of skin), *Vepathu* (Tremor), *Roma Harsha* (horripilation), *Sransanam* (Inability to hold). The symptoms of *Vishada* which were found in various references in Indian Science when compared to depressive disorders almost appear similar. The above given psychic and somatic symptoms prove it on studies. The understanding and diagnosis of depressive disorders even in the modern science is based on either ICD or DSM. Both the two systems have emphasized on different symptoms in their respective diagnostic criteria and have stated those as symptoms which must be seen in the patient to consider it as depressive disorder. These prime symptoms when taken into consideration can be seen similar as the symptoms of *Vishada* itself. The *Bhagavad Geeta* reference says about the individual not interested in doing activity which he used to enjoy previously, this is specifically anhedonia which is seen as a main symptom in depressive disorder, again supported by other features of decreased energy, fatigability and depressed mood as found both in *Vishada* and depressive disorder. Based on the explanations given above, the condition *Vishada* can be interpreted and understood on the basis of depressive disorder.

A lot of symptoms can be found similar in both the conditions and thus providing a justification that both can be considered same, though has been explained in different schools of thought. Even in the modern science depressive disorders is explained with different views based on the understandings of various scholars. Specific criteria for diagnosing a condition as depressive disorder are still confusion. At this point of time Depressive disorders can be considered as *Vishada* according to the *Ayurveda* understanding. The present clinical study aimed to evaluate the efficacy of *Siddartakadi Yoga* in Depression was done to gain the familiarity on management of Depression through *Ayurveda* drugs, as it is one of the common mental diseases in present era and also today's need to focus. And the marked results were obtained. *Vishada* is one of the *Nanatmaja Vyadhi (Vataja)*. *Vishada* is the main factor which is the reason for increasing or causative factor for diseases.

The symptoms or the detail description of *Vishada* are very scattered in our classics. This condition is also neglected sometimes and in recent times the increasing rate of psychological issues and the impact of these factors on physical health are concerning. Understanding *Vishada* in contemporary science makes it more understandable and in detail. Exact co relation of symptoms of *Vishada* can be done with Mild to moderate Depression. This condition is also neglected sometimes and in recent times the increasing rate of psychological issues and the impact of these factors on physical health are concerning. Understanding *Vishada* in contemporary science makes it more understandable and in detail. The symptoms of *Vishada* can be best matched with Mild to Moderate Depression.[8]

The trial drug used for the present study was *Siddartakadi yoga*. *Siddartakadi Yoga* formulation has been taken from *Charaka Samhita*, and also available in *Yogaratanakara*. In this study, the formulation from *Yogaratanakara* has been selected and this formulation consist of *Kaphahara*, *Vatahara* and *tridosahara* properties helps to reduce the complaints of *Vishada*. So, this was the choice of drug in the management of *Vishada/ Depression*.[9] The formulation mainly consists of 17 drugs like *Siddartaka*, *karanja*, *Vacha*, *Hingu*, *Devadaru*, *Manjista*, *Haritaki*, *Vibhitaki*, *Amalaki*, *Katabhitwak(Jyotishmati)*, *Shunti*, *Maricha*, *Pippali*, *Priyangu*, *Shirisha*, *Haridra*, *Daruharidra*.

Most of the drugs are having *Kapha-Vatahara* Properties and having *Laghu-Rooksha-Teekshna-Sukshma Gunas* and also have *Katu-Tikta-Kashaya Rasa* and have *Ushna Veerya* (some have *Sheeta*), *Madhura* and *Katu Vipaka*.

Which also acts like a *Deepana-Pachana*. As the *Doshas* mainly here gets *Prakopa* are *Vata (Sharirika)* and *Rajas (Manasika)* mainly in *Vishada* and these *Prakupita Doshas* get seated in *Manas Sthana* i.e., *Hrudaya* and causes *Vibhrama Manas* leading to *Mano Avasada* which leads to disease causation.

Agni Deepana action is one of the main properties of many drugs in the formulation used. All the diseases basically originated by *Mandagni* according to *Ayurveda*. As the patients may have *Viruddha-Dushta Ahara* which is also a causative factor for causing of the disease. The probable mode of action of *Siddartakadi Yoga*, based on the *Rasa, Guna, Karma, Virya, Vipaka* and *Prabhava* of drugs in it. [10]

After 30 days of treatment, over all response of the drug on signs and symptoms were collectively presented here in a nut shell. In the study 70% had marked improvement, 30% had mild improvement, 0% had excellent improvement, 0% had a poor improvement. Overall response based on the signs and symptoms is statistically significant in the present study. Almost all the patient showed an improvement in all symptoms.

Conclusion

Out of 30 patients of *Vishada* (Mild Depression) studied in this study, maximum number of patients belonged to the age group 30-40years, gender female, religion Hindu, marital status married, educated up to high school, socio-economic status middle class, occupation most of them were house wife, dietic habits were mixed, *Agni* was *Vishmagni* and *Krura Kosta*. *Siddartakadi Yoga* was found to be beneficial in 30 days of treatment. There were significant results noted in *Ayurveda* parameters of self-prepared *Vishada* rating scale (self-assessed). The drug can prevent further severity of the disease as Depression is an ailment which progress from mild to severe. The parameters of Hamilton's Depression rating scale also showed significant results in total score after 30 days of the treatment.

Study can be concluded that the drug used here, *Siddartakadi Yoga* could reduce the *Vata* and *Kapha Doshas* along with that maintains the normalcy of *Mano Doshas* as well. No any adverse drug reaction was seen on the subjects after intake of the medicine.

References

1. Sushruta Samhita of Sushruta. Nibandhasangraha, Sri Dalhanacharya Commentary. Edited by Vaidya Jadavji Trikamji Acharya. Varanasi: Chaukhambha Orientalia; 2021. p. 6-7. *Sutrastana 1/24* [Crossref][PubMed][Google Scholar]
2. Agnivesha, Charaka, Chakrapanidatta. Sharma RK, Das B. Charaka Samhita with Ayurveda Dipika commentary. Reprint edition. Varanasi: Chaukhambha Orientalia; 2009. p. 416 [Crossref][PubMed][Google Scholar]
3. Taber's Cyclopaedic Medical Dictionary. F. A. Davis Company. New Delhi: Jaypee Brothers Medical Publishers; 2009. p. 610 [Crossref][PubMed][Google Scholar]
4. Stedman's Medical Dictionary. 28th edition. Library of Congress Cataloguing Publication Data, Julie K Stegman. p. 515 [Crossref][PubMed][Google Scholar]
5. World Health Organization. Depression [Internet]. [cited 2023 Mar 4]. Available from: <https://www.who.int/news-room/fact-sheets/detail/depression> [Crossref][PubMed][Google Scholar]
6. Institute of Health Metrics and Evaluation. Global health data exchange (GHDx) [Internet]. Available from: <https://vizhub.healthdata.org/gbd-results/> [cited 2023 Mar 4] [Crossref][PubMed][Google Scholar]
7. Charaka Samhita. Acharya YT, editor. *Sutrastana*, ch. 20, ver. 42. Varanasi: Chowkhambha Krishnadas Academy; 2020. p. 113. Quote 11 [Crossref][PubMed][Google Scholar]
8. Sushruta Samhita of Sushruta. Nibandha Sangraha, Sri Dalhanacharya Commentary. Edited by Vaidya Jadavji Trikamji Acharya. Varanasi: Chaukhambha Orientalia; 2021. p. 6-7. *Sutrastana 1/24* [Crossref][PubMed][Google Scholar]

9. Sadock BJ, Sadock VA. Kaplan & Sadock's Synopsis of Psychiatry. 10th edition. New Delhi: Wolters Kluwer (India) Pvt Ltd; 2001. p. 527 [Crossref][PubMed][Google Scholar]

10. Sarangadhara Samhita of Pandita Sarangadharacharya by Dr. Brahmanand Tripathi. Varanasi: Chaukhambha Surbharathi Prakashan; 2010. p. 133, 182, 195 [Crossref][PubMed][Google Scholar]

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