



## Ayurvedic management of Alzheimer's Disease - A Case Study

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DOI:10.21760/jaims.10.7.56

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The prevalence of age-related cognitive decline is becoming an important public health concern as there is premature ageing due to various environmental and lifestyle changes. Alzheimer's disease is now recognized as the most common disorder of dementia. Dementia is a syndrome – usually of a chronic or progressive nature – in which there is deterioration in cognitive function beyond what might be expected from normal ageing. Features of Smrti Vibhrama and characteristics of Pranavruta Vyana are being observed as Alzheimer's dementia. There is still no effective cure for dementia in contemporary medicine. So, developing an Ayurvedic protocol to treat dementia is a necessity. This is the case of a 66 -year-old male patient presented with loss of interest in daily activities, fatigue, reduced appetite and increased sleep for duration of 2 years. Diagnosis was done based on the criteria of Mini-mental status Examination Scale. The management was a combination of modalities including Shirodhara, Nasya, Dhoompana and internal medications. The treatment modalities were found to be effective in the cognitive and depressive symptoms as well as improving the social behaviour in dementia patient.

**Keywords:** Alzheimer's dementia, Dementia, Ayurveda, Nasya

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Manuscript Received  
2025-05-19

Review Round 1  
2025-05-27

Review Round 2  
2025-06-07

Review Round 3  
2025-06-17

Accepted  
2025-06-27

Conflict of Interest  
None

Funding  
Nil

Ethical Approval  
Not required

Plagiarism X-checker  
12.98

Note



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## Introduction

Cognitive decline, commonly first recognized as memory impairment, is a typical feature of Alzheimer's disease. Neuropathological changes in the cerebral cortex and limbic system lead to deficits in learning, memory, language, and visuospatial skills. The precise nature of cognitive dysfunction reflects the distribution of pathological changes in Alzheimer's disease. Alzheimer's disease is a condition that affects the brain. Symptoms are mild at first and become more severe over time. Common symptoms of Alzheimer's disease include memory loss, language problems, and impulsive or unpredictable behaviour. One of the underlying biological changes of the condition is the presence of plaques and tangles in the brain. Another feature is a loss of connection between the nerve cells, or neurons, in the brain.

These changes prevent information from passing between different areas of the brain or between the brain and the muscles or organs. As symptoms worsen, it becomes harder for people to remember recent events, to reason, and to recognize people they know. Eventually, a person with Alzheimer's disease may need full-time assistance.

### Stages of Alzheimer's disease

Alzheimer's disease ranges from mild to severe.

**Mild Alzheimer's Disease:** People with mild Alzheimer's disease develop memory problems and thinking difficulties that may include:

- taking longer than usual to perform daily tasks
- difficulty handling money or paying the bills
- wandering and getting lost
- experiencing personality and behaviour changes, such as getting upset or angry more easily, hiding things, or pacing.

### Moderate Alzheimer's Disease

In moderate Alzheimer's disease, parts of brain responsible for language, senses, reasoning, and consciousness become damaged. This can lead to:

- Greater memory loss and confusion
- Difficulty recognizing friends or family
- An inability to learn new things
- Difficulty performing tasks with several stages, such as getting dressed

- Difficulty coping with new situations
- Impulsive behaviour

### Severe Alzheimer's disease

In severe Alzheimer's disease, plaques and tangles are present throughout the brain, causing the brain tissue to shrink substantially. This can lead to:

- An inability to communicate
- Dependency on others for care
- Being unable to leave bed all or most of the time

### Signs and symptoms of Alzheimer's disease

Alzheimer's disease is a progressive condition, meaning the symptoms get worse over time. Memory loss is a key feature, and this tends to be one of the first symptoms to develop. Symptoms appear gradually, over months or years.

Symptoms of Alzheimer's disease include:

- **Memory loss:** A person may have difficulty taking in new information and remembering information.
- **Cognitive deficits:** A person may experience difficulty with reasoning, complex tasks, and judgment.
- **Problems with recognition:** A person may become less able to recognize faces or objects or less able to use basic tools, even if they can see them clearly.
- **Problems with spatial awareness:** A person may have difficulty with their balance, trip over, or spill things more often, or they may have difficulty orienting clothing to their body when getting dressed.
- **Problems with speaking, reading, or writing:** A person may develop difficulties with thinking of common words, or they may make more speech, spelling, or writing errors.

### Diagnosis

- Cognitive and memory tests to assess the person's ability to think and remember
- Neurological function tests to test their balance, senses, and reflexes
- Blood or urine tests
- A CT Scan or MRI scan of the brain
- Genetic testing

### Ayurvedic concept on Alzheimer's disease

As per the opinion of *Acharya Sushruta* old age is above 70 years[1] whereas according to *Acharya Charaka*, it is above 60years.[2] *Vata dosha* is predominant in old age, it causes atrophic involution of tissues and is responsible for most of the manifestation of aging. As the age advances *Agni* also get depleted which again causes atrophy due to defective metabolism. According to *Ayurveda* aging is *Swabhavaja Vyadhi*. *Sharangdhara Samhita* has reference addressing the loss of different biological factors during different decades of life due to aging. [3] In *Ayurveda* the impaired memory is seen in *Smriti Vibhrama*[4] and the behavioural changes in dementia is comparable with features of *Pranaavruta Vyana*.[5] The aim of the treatment approach should be to prevent the further brain degeneration and revert back the normal daily functioning.

## Case Report

### Aatura Parichaya

- Patient name - xyz
- Age - 66 Years.
- Sex - Male.
- Religion - Muslim.
- Occupation - Retired teacher.
- Address - Kot Bhalwal Jammu.

### Pradhana Vedana

Loss of interest in daily activities since 2 years.  
Fatigue since 2 years.  
Reduced appetite since 2 years.  
Increased sleep since 2 years.  
Increased doubts since 2 years.

### Vedana Vrittanta

A 66 years old male patient presented in the OPD complaining loss of interest in daily activities, fatigue, reduced appetite and increased sleep for 2 years Patient is the second child of non - consanguineous parents, an introvert from childhood. For the last 20 years his daughter is living with them after separated from her husband. He is thinking that he is solely responsible for his daughter's condition. This made him so sad and feels guilty that he remains restricted inside his home without much social interaction.

His son made him to visit a psychiatrist nearby and was diagnosed with dementia in and started medication. But he didn't get much relief. So, they consulted here for better treatment.

### Poorva Vyadhi Vrittanta

History of Hypertension since 10 years. (on medication).  
No History of T2DM and Hypo/Hyperthyroidism.

### Kutumbh Vrittanta

No significant history was found.

### Vyaktika Vrittanta

Food habit: Mixed diet (Non-veg - Weekly twice)  
Sleep: Increased.  
Bowel: Constipated.  
Micturition: 5-6times/day, 1 time/night.

### General Examination

Pallor - Positive  
Clubbing - Absent  
Oedema - Absent  
Cyanosis - Absent.  
Icterus - Absent  
Lymphadenopathy - Absent  
Weight - 52 Kg.  
Height - 5.4 feet.  
BMI - 22.5.  
BP - 144/92 mm of hg.  
Pulse - 88/min.  
Respiratory rate - 19/min.  
Temp - 98.6°F

### Ashta Sthana Pariksha

*Nadi* - Vataj (88bpm)  
*Mala* - Prakrita  
*Mutra* - Prakrita  
*Jihwa* - Ishat Liptata  
*Shabda* - Aspatha  
*Sparsha* - Anushna Sheetha  
*Druk* - Prakrita  
*Akriti* - Madhyama

### Dashavidha Pariksha

*Prakruti* - Vata-Pitta  
*Vikriti* - Vata- Kaphaj  
*Sara* - Madhyama  
*Samhanana* - Madhyama  
*Pramana* - Madhyama  
*Satwa* - Madhyama

Satmya - Shadrasa  
Aharashakti - Madhyama  
Vyayamashakti - Avara  
Vaya - Vridha

### Systemic Examination

**Respiratory System:** Normal Vesicular Breath Sound heard.

**Cardiovascular System:** S1 S2 heard. No added sound heard.

**Central Nervous System:** Patient is conscious and oriented to time, place and person.

**Gastro – Intestinal Tract:** Soft and Non –Tender

**Neurological System:** Higher mental functions like attention and concentration were slightly impaired, abstract thinking was impaired and the dimensions of speech like intensity and speed were reduced

### Mental Status Examination

General appearance	Lean, well dressed
Psychomotor behaviour	Reduced
Attitude towards examiner	Co-operative
Mood	Sad
Affect	Anxious
Speech	Poverty of speech, low pitch
Judgment	Slightly impaired

### Management

#### Panchkarma Modalities

Procedure	Drugs	Days
Pratimarsa Nasya	Mahapanchgavya Ghrita 5 drops	7 days
Takradhara	Dashamoola and Triphala Kwatha	7 days
Dhoopana	Haridradi Choorna	7 days

#### Abhyantar Aushadhis

SN	Drug	Dose	Anupana
1.	Smritisagara Rasa	1 BD (A/M)	Drakshadi Kwatha
2.	Drakshadi Arishta	25 ML (A/M)	Sam Bhag Jala
3.	Bhrami Vati	2 BD (A/M)	Water
4.	Aswaghandhaadi Tail	2 times	External application (Sira Pradesh)

## Observations and Results

### Assessment scales

Scale	On 1st Day	1 Month	2 Months	3 Months
MMSE	22	22	24	28

After 3month of treatment, patient shows marked improvement in loss of interest in daily activities, fatigue, reduced appetite and increased sleep.

## Discussion

*Pratimarsa nasya* is done with *Mahapanchagavya Ghrita* to alleviate the behavioural changes and improve cognitive functions. *Pratimarsa Nasya* with *Mahapanchagavya Ghrita* which is indicated in *Kaphaja Unmada* was selected to alleviate the behavioural changes associated with dementia.

*Takradhara* is done with *Dashamoola & Triphala Kwatha* to reduce *Kaphaja* symptoms, for stimulation of brain & to bring out normal dopaminergic activity. *Smritisagara Rasa* - Improve sensory & motor function - *Kaphagna*, *Sanjnasthapaka*, *Smrtivardaka*, *Masthishka Dourbalyahara*[6]

## Conclusion

Alzheimer's disease is progressive degeneration of brain with changes in behavioural and cognitive levels. The present case study of Alzheimer's disease treated with Ayurvedic medications and therapies yielded changes in depressive and cognitive symptoms associated with Alzheimer's disease thereby helped the patient to improve his day -to -day functioning. There is further scope in the field of Ayurveda in managing such conditions as well as in providing better outcome both in the health status of the affected as well as their caretakers.

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