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Case Study

DRUG ADDICTION AND ITS AYURVEDA AND YOGA MANAGEMENT: CASE STUDY Jayvindra Singh¹, Narender Chanchal^{2*}, Sachin kumar³, Daya Shankar Singh⁴

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ABSTRACT

Addiction is defined as a psychological or physiological dependence on a drug or behaviour that is beyond voluntary control. It's a long-term brain disorder that leads to obsessive substance usage despite negative effects. Addiction has a wide-ranging negative impact on people, as well as society consequences. Sudden withdrawal from any addictive medication might result in psychosomatic illness. Material and method- The material for this article is taken from personal clinical experiences and from various clinical researches on drug addiction, withdrawal, and management those are published in index and non-index journals. To gather pertinent material, Ayurvedic Samhitas with commentaries and textbooks of Ayurveda and modern medicine are referred. Case report- A 45 year male resident in Tamil Nadu, India visited OPD of Shatkarma Department, Patanjali Ayurvedic Hospital in Haridwar, September 2020 with complaints of drug addiction and other multiple drugs taken, breathlessness while walking since 12 years. Patient had no systemic abnormalities detected during examination. Patient was then advised *Shodhana* by *Shatkarmas* followed by *Shamana* medicines. Patient was followed upto 1 month and he got significant relief in the symptoms caused due to addiction. Result- Shatkarmas along with internal medicines have good results in management of addictive, in management of systemic as well as associated ailments. Conclusion- Withdrawal of addicted drug by Padanshik Karma, symptomatic withdrawal treatment, Shatkarmas, psychological counselling, Yoga and meditation are very helpful in deaddiction of drugs.

INTRODUCTION

Addiction is defined as a recurrent, chronic brain disorder marked by obsessive drug seeking and use despite negative effects. Substance dependence is an adaptive state that develops as a result of the frequent use of a drug, and which results in withdrawal symptoms upon cessation of drug use. Drug addiction, also known as substance use disorder, is an illness that affects a person's brain and behaviour,

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resulting in an inability to manage the use of any drug or prescription, whether legal or illicit. Drug addiction, formerly known as substance dependence, is a chronically relapsing disorder marked by a compulsion to seek and take a drug, a loss of control in limiting intake, and the emergence of a negative emotional state (e.g., dysphoria, anxiety, irritability) when access to the drug is denied. The occasional but limited use of an abusable drug is clinically distinct from escalated drug use, the loss of control over limiting drug intake, and the emergence of chronic compulsive drug-seeking that characterize addiction. Historically, three types of drug use have been delineated:

1) Occasional, controlled or social use, 2) Drug abuse or harmful use and 3) Substance dependence

Trends in Drug Use

Cannabis was the most used substance worldwide in 2018, with an estimated 192 million people using it worldwide. Opioids, however, remain the most harmful, as over the past decade, the total number of deaths caused by opioid use disorders increased by 71%, with a 92% increase among women and a 63% increase among men.

Drug use increased far more rapidly among developing countries over the period 2000-2018, than in developed countries. Adolescents and young adults account for the largest share of those using drugs, while young people are also the most vulnerable to the effects of drugs because they use the most and their brains are still developing.

Poverty, lack of education, and social marginalisation continue to be key risk factors for drug use disorders, and vulnerable and disadvantaged populations may experience discrimination and stigma while seeking treatment.

The chronic dangers of drug addiction, such as alcohol, opium, and cannabis, are briefly covered in Ayurveda, but the latter semi-synthetic and synthetic drugs derived from natural or chemical sources are not mentioned. Avurveda has mentioned that the withdrawal effect of alcohol causes psychosomatic disorder. But withdrawal effect of other natural. semisynthetic and synthetic addicted drugs has not found in Ayurveda. The *Padanshika Krama*, which is a unique method to tapper up the abused medicines or substitute those misused substances, has been advised in Ayurveda for withdrawal of any substance.[1] Recreational therapy, psychological counselling is also suggested only in alcoholism. Hence it is need of time to evaluate, elaborate and discussion of drugs addiction and it method of cure by Ayurveda.

Epidemiology

According to the newest World Drug Report, released by the United Nations Office on Drugs and Crime, some 269 million people used drugs globally in 2018, up 30% from 2009, and over 35 million people suffer from drug use disorders (UNODC). ^[2]

In-patient treatment is reported by one out of every 180 people with alcoholism and one out of every 20 people with illicit substance addiction. The number of people who inject drugs in the United States is believed to be over 8.5 million (PWID). Opioid use is reported in 2.1 percent of the country's population, with heroin being the most common, accounting for 1.14 percent, pharmaceutical opioids accounting for 0.96 percent, and opium accounting for 0.52 percent. ^[3] **Classification** ^[4]

Drug Classifications Based on Chemical Makeup Alcohol - Beer, wine, liquor Opioids - Heroin, fentanyl, oxycodone Benzodiazepines - Ativan, valium, xanax Cannabinoids - Marijuana, hashish Barbiturates - Amytal, luminal, phenobarbital

Drug Classifications Based on Effect

Depressants - Alcohol, opiates, barbiturates

Stimulants - Adderall, cocaine, meth

Hallucinogens - LSD, psilocybin mushrooms, PCP Inhalants- Paint thinner, nail polish remover, gasoline

Drug Classifications Based on Legal Definitions

The Federal Government passed the Controlled Substances Act in 1970 in response to the drug epidemic. This act established five drug classifications or schedules.

Schedule V- Schedule V drugs have the fewest regulations and lowest penalties of any federal drug classification. Schedule V drugs have a legitimate accepted medical purpose, have a lower potential for abuse than Schedule IV drugs, and have a lower potential for addiction than Schedule IV drugs. Examples include: Lyrica, Motofen and Lomotil.

Schedule IV medicines fall somewhere between Schedule V and Schedule III in terms of regulations and punishments. Schedule IV medicines are those that have a legitimate recognised medicinal use, a low potential for abuse, and a low risk of addiction. Ambien, darvocet, and tramadol are just a few examples.

Schedule III- Schedule III medications are subject to more rules and harsher punishments than Schedule IV drugs, whereas Schedule II drugs are subject to less regulation and less severe penalties. Schedule III medications have a valid medical use, are less likely to be abused than Schedule I and II substances, and have a moderate to low risk of addiction. Anabolic steroids, ketamine, and vicodin are examples of Schedule III pharmaceuticals. Examples of Schedule II drugs include: Codeine, methadone and ritalin.

Schedule I - Of all the medications, Schedule I has the most rules and the heaviest penalties. Drugs classified as Schedule I have no recognised medicinal value and a significant potential for misuse. Examples of Schedule I drugs include: Ecstasy, Quaaludes and GHB.

Diagnosis- Diagnosing drug addiction (substance use disorder) requires a thorough evaluation and often includes an assessment by a psychiatrist, a psychologist, or a licensed alcohol and drug counsellor. Drug usage is assessed using blood, urine, or other lab tests, but they are not a diagnostic test for addiction. These tests, on the other hand, could be used to track

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therapy and recovery. Most mental health practitioners utilize criteria from the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-5) to diagnose drug use disorders.^[5]

Case Report- A 45-year male resident of Lilawati Nagar Chitraipuram, Chennai, Tamil Nadu, India visited OPD of Shatkarm Department, Patanjali Ayurvedic Hospital in Haridwar, September 2020 with complaint of habitual of drug addict and other multiple drug taken problem in breathing while walking since 12 years.

Chief Complaints and Associated Symptoms: When the patient did not receive the drug, he used to feel anxious and it appeared that he was harming someone. While walking, there was a problem with breathing.

History of Present Illness A male patient, age 45 years was apparently normal 12 years back then he gradually started developing symptoms since 12 years. He went to the family doctor and was prescribed prescription medications, which provided him with

temporary comfort but symptoms were aggravated when the medications were removed. So he came to the Shatkarma Department of Patanjali Ayurvedic Hospital in Haridwar, for drug addiction treatment.

General Examination

Pallor - Nil	Pulse	e - 78 bpm	
Icterus - Nil	Resp	iratory rate - 17 episodes/ min	
Cyanosis - Nil	B.P	· 125/80 mm/Hg	
Oedema - Nil	Tem	perature - 98.6°C	
Weight - 62 kg	kg Height - 165 cm		
Personal History			
Bowel- Constipa	tion	Micturition- normal	
Appetite- Good		Sleep- Disturbed	
Diet- Vegetarian		Addiction- Drug addiction	
Systemic Evan	inatio	n: No abnormality detected in	

Systemic Examination: No abnormality detected in any system.

Treatment & Methodology Schedule: The treatment plan included both *Shodhana* therapy and *Shamana* medications.

S.No	Shatkarmas Procedure	Medicines Used	Date
1.	Shankha Prakshalam	Fennel fruit + salt + water	19-09-2020
2	Acupressure		19-09-2020 to 26-09-2020
3	Jal Neti	Salt + water	19-09-2020 to 26-09-2020
4	Kunjankriya	Fennel fruit + water	19-09-2020 to 26-09-2020
5	Steam	The second	19-09-2020 to 26-09-2020
6	Sutra Neti	Rubber neti	19-09-2020 to 26-09-2020
7	Trataka	and the second	19-09-2020 to 26-09-2020
8	Yog Nidra		19-09-2020 to 26-09-2020
9	Yoga Class		19-09-2020 to 26-09-2020

Table 1: Shatkarmas Intervention

Table 2: Medicines on Discharge				
S.No	Medicine	Qty	Schedule	Anupana
1.	Chitrakadi Vati Aarogyavardhini Vati	40gm 40gm	Take 2 tabs. Each after food	With lukewarm water
2.	Sarvakalpa Kwath	300gm	Take 1 spoon medicine in 400 ml of water and boil it reduces to 100 ml filter and drink on empty stomach	
3	<i>Udaramrita Vati</i> Liv d 38 tab	60gm 40gm	Take 2 tabs. Each after food	With lukewarm water
4.	Kumaryasava	450ml	Mix 4 spoon of medicine in an equal amount of water and take it in morning and evening after meal	
5.	Haritaki Churna	100gm	Take 1 spoon powder before going to bed	With lukewarm water
6.	Mulethi Kwath	300gm	Take 1 spoon medicine in 4 cups of water and boil it reduces to 1 cup.	

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			Strain and take it twice a day an hour before meal	
7.	Avipattikar Churna Kamdudha Ras Mukta Shukti Bhasma Praval Panchamrit Ras	100gm 20gm 10gm 5gm	Mix all and take half teaspoon twice a day before meals in the morning and evening	With lukewarm water/honey

Follow up Period- 1 month OBSERVATION AND RESULTS

The patients got tremendous relief of the pain and symptoms after the treatment.

S.No	Symptoms	ВТ	AT	FU 1
1	How often do you use drugs often than alcohol?	4 times a week or more often	2-4 times a month	Once a month or less often
2	Do you use more than one type of drug on the same occasion?	4 times a week or more often	Once a month or less often	Never
3	How many times do you take drugs on a typical day when you use drugs?	5-6	1-2	Never
4	How often are you influenced heavily by drugs?	Daily or almost everyday	Less often than once a month	Less often than once a month
5	Over the past year, have you felt that your longing for drugs was so strong that you could not resist it?	Every week	Less often than once a month	Never
6	Has it happened, over the past year that you could not have been able to stop taking drugs once started?	Every week	Every month	Less often than once a month
7	How often over the past year have you taken drugs and then neglected to do something you should have done?	Every week	Less often than once a month	Never
8	How often over the past year have you needed to take a drug the morning after heavy drug use the day before?	Every week	Less often than once a month	Never
9	How often over the past year have you had guilt feeling or a bad conscience because you used drugs?	Every month	Less often than once a month	Never
10	Have you or anyone else been hurt (mentally or physically) because you used drugs	Yes, over the past year	No	No
11	Had a relative or friend, a doctor or a nurse, or anyone else, been worried about your drug use or said to you that you should stop using drugs?	Yes, over the past year	No	No

Table 3: Showing the Results

BT - Before Treatment; AT - After Treatment; FU1 - Follow up after 1 month

DISCUSSION

Drug addiction is the major problem in the world including India. The number of drug users in the country is rapidly increasing, so it is critical for their families and general practitioners to recognise the psychosomatic issues that result from drug misuse. Many different types of drugs can be addicted: not only illegal drugs such as heroin, cannabis, cocaine or ecstasy, but also prescription drugs such as tranquilizers, analgesics. The main groups of addicted drugs are stimulants, depressants, narcotics and hallucinogens. Addiction is a state of physical or psychological dependence on a substance. Physical

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addiction includes the development of tolerance (needing more and more of the drug to achieve the same effect) and withdrawal symptoms that appear when the user stops taking the drug, and disappear when more of the drug is taken. The management of drug addiction is divided into two subheadings pharmacological and non-pharmacological treatment.^[6] More and more programs are focusing on a "whole person" or holistic approach that encompasses a variety of methods and tools to help achieve, maintain, and enhance recovery of drug addicts.

Shatkarmas are considered as a natural form of medicine.^[7] They are more beneficial when used along with other traditional substance internally. It is increasingly being used in substance abuse treatment programs and throughout recovery to help prevent relapse, reduce withdrawal symptoms and drug cravings, and provide a healthy outlet to cope with potential triggers and daily life stressors.^[8] It has many potential benefits, including stress relief, increased physical stamina and strength, self-reflection and increased self-awareness, healthier exercise and eating habits, heightened self-confidence and improved self-image, pain relief, better sleep, increased energy levels, reduction in fatigue, emotional healing, overall health and wellness improvement.

Acharya Charak stated that the concept of *Oak Satmya*^[9] on which Acharya Chakrapani has given the commentary that *Apathya* (unwholesome) substance whatever it may be harmful or less harmful may become *Satmya* (homologous) due to continuous prolonged utilization. Hence we can conclude that an addiction is a form of *Satmya* though the prolonged adverse effect of substance depends upon the nature, property, dose of substance, duration and mode of utilization. According to Acharya Charaka, a Jitendriya (sense subdued) person who abstains from all sorts of alcohol is never physically or mentally ill. It means that if a person who is not Jitendriya and stops drinking, he will have physical and mental problems, which are referred to as withdrawal symptoms.

Psychological counselling has very important role in de-addiction it is also mentioned in Ayurvedic *Samhita* which aware the patient from ill effects of drug addiction and give will power to come out from drug addiction^[10]. *Pranayam* and *Asana*, particularly *Anulome Vilome, Bhramari, Pranayam*, and *Savasana*, aid in the patient's mental stress reduction and increased attentiveness.^[11] The patient's daily schedule is critical to his or her rehabilitation. Recreational therapy is improving physical, emotional, cognitive quality which is mentioned as *Harshan Chikitsa* in Ayurvedic Samhita *Chitrakaadi Vati, Arogya Vardhini Rasa, Kumaryaasava, Avipatikar Churna* directly acts on liver and helps to improve metabolism of the substances in the liver. They are hepatoprotective in nature.^[12] It helps to improve the liver functions thus helpful for eliminating the toxic substances out of body. *Kamdudha Rasa, Mukta Shukti Bhasma, Praval Panchammrut Rasa* is useful for symptomatic management ailments like nausea, vomiting, dizziness, etc. They are known to be useful in acute minor illnesses.^[13] *Haritaki, Udaramrit Vati* helps for *Anulomana* of *Vata,* so helpful for relieving constipation and gastric disorders.^[14]

CONCLUSION

Shatkarma, Yoga and meditation has important role and should be applied in case of addiction to rehabilitate the patient. *Padansik Krama* is a one-of-akind technique for avoiding the abrupt withdrawal of dangerous substances, such as narcotics. Detoxification should be performed by substituting medicinal medications or the same substance in a taper up approach. Psychological counselling, Yoga *Nidra*, acupuncture techniques also plays a significant role in relieving stress and achieving *Jitendriya*.

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