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Ayurveda and Yoga Therapy for Nidra Nasha- Insomnia

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A beautiful verse from Charaka Samhita speaks to the importance of *nidra* (sleep) in our lives:

Nidraayattam sukham dukham pushtih kaarshyam balaabalam |

Vrishataa kliibataa jnaanam ajnaanamm jiivitam na cha ||

Reference: Charaka. Sutra Sthana . 21.36

Translated, it reads: Happiness, misery, nourishment, emaciation, strength, weakness, virility, sterility knowledge, ignorance, life and death all depend on proper or improper sleep.

Despite its importance for maintaining health, many people suffer from sleep disorders. There are over 100 sleep/wake disorders, but the most common one is insomnia, defined as the “inability to obtain sleep that is sufficiently long or good enough to result in feeling rested or restored the following day (Davis, 2009).

Western Medical Concept

The National Sleep Foundation conducts the Sleep in America poll every year, and its most recent results show that 20% of Americans report that they get less than 6 hours of sleep on average, and the number of Americans that report getting 8 hours

of more has decreased. The consequences of such statistics are grave, as sleep deficits have been linked with poor work performance, driving accidents, and relationship problems. Even more worrying is that they have been linked to heart disease, diabetes, and obesity (Davis, 2009).

The most common sleep disorder is insomnia, in which people have trouble falling or staying asleep. There may be a genetic predisposition to insomnia as well as specific neurological markers that differentiate insomniacs from non-insomniacs. Mark W. Mahowald, MD, a neurologist and director of the Minnesota Regional Sleep Disorders Center in Rochester, says that insomniacs may have a condition called hyperarousal, which means that they are always on alert. This alertness makes it difficult for them to fall asleep, precipitating fatigue, lack of concentration, and drowsiness the following day.

Types

There are two types of insomnia, primary insomnia and secondary insomnia. The more common is secondary insomnia and is a symptom or side effect of some other problem. Primary insomnia, however, is not a symptom or side effect of another medical condition. It is due to major or long lasting stress or emotional upset. Frequent travel can also cause it. Secondary insomnia can be due to a variety of other disorders, a few of which are mentioned below:

- Depression, anxiety, and posttraumatic stress disorder
- Alzheimer's disease and Parkinson's disease
- Chronic pain, such as arthritis and headache disorders
- Asthma and heart failure
- Hyperthyroidism

- Sleep disorders, such as restless legs syndrome and sleep apnea
- Certain medications
- Substances such as caffeine and other stimulants; tobacco or other nicotine products; alcohol and other sedatives

Signs and Symptoms

Insomnia can present with any of the following symptoms:

- Inability to fall asleep for a long time
- Sleeping for short periods
- Being awake for most of the night
- Waking up very early
- Anxiety, depression, irritability
- Feeling drowsy while working and driving

Diagnosis

A physician diagnoses insomnia based on a thorough medical history, sleep history, physical examination, and relevant investigations. As part of a sleep history, the patient may be asked to keep a sleep journal, in which she is encouraged to document what time she sleeps, wakes up and takes naps. Other important questions to ask relate to the sleeping environment, bed time routines, and the patient's feelings about falling asleep, staying asleep and getting enough sleep.

Treatments

Possible treatments include lifestyle changes, cognitive-behavioral therapy, and medications. Lifestyle changes should stress avoidance of nicotine, caffeine, alcohol, and medications that disrupt sleep. The patient should be encouraged to develop a good bedtime routine in which he can wind down by reading, listening to soothing music, or having a warm bath. Eating or exercise just before bedtime should be discouraged. The bedroom environment should be sleep friendly with minimal distractions like TV, computer, and bright lighting. Waking and sleeping time should be the same everyday- this will help to put the body into a rhythm.

In cognitive-behavioral therapy, a therapist works with the patient to target the thoughts and actions that disrupt sleep. Relaxation techniques and biofeedback can also be incorporated. Many prescription drugs are now available for short term and long term insomnia. Over the counter products like melatonin and valerian are also available for use. Medical advice should be sought before starting any medication (National Heart Lung and Blood Institute).

Ayurvedic and Yogic Concept

Nidra is considered one of the *traya upastambha*, amongst *aahaara* and *brahmacharya*. It has been described by Acharyas Charaka, Sushruta, and Vagbhata. Charaka has described the physiology of sleep in the following verse:

Yadaa tu manasi klaante karmaatmaanah klamaanvitaah |

Vishayebhyoh nivartante tadaa svapati manavah ||

Reference: Charaka Sutrasthana

This verse describes how sleep descends when the mind with its *indriyas* dissociate themselves from their objects (*visheyas*). This is a natural process every time we fall asleep. When the mind disconnects from the senses and their objects, it goes into a state of deep rest from which we derive strength and health. While Charaka and other acharyas also address the ill effects of sleep, here we will deal with the pathology of *anidra*.

Nidana

There are a variety of causes listed in the texts, a list of which follows:

- According to Sushruta: Aggravation of vata and pitta doshas; irritation of the mind (*manah taapa*) and emaciation and injury
- According to Charaka: Excessive *panchakarma* procedures, fear, anxiety, anger, smoke, exercise, *rakta mokshana*, fasting, uncomfortable bedding, predominance of *sattva guna*, excess work, old age, and diseases especially due to *vata dosha*

Charaka has included *asvapna* (a synonym of *anidra*) as one of the 80 *naanaatmaja vata vikaaras*, or diseases that are entirely due to *vata dosha*. Thus *vata* pacifying measures are the best treatment for this disorder. However as clinicians, it is important that we try to identify the cause of *anidra* in each patient. *Nidana parivarjana*, or avoidance of the cause, is the first step of treatment.

Chikitsa

A variety of treatments are mentioned in the texts, namely:

- External Therapies: *abhyanga* (massage), *murdhni taila* (therapies for the head), *samvahana* (light massage), *snana* (bathing), *lepa* (paste) for eyes, face and head
- Diet: *Mamsa rasa* (meat soup) of aquatic animals, rice with milk, curd or *sneha* (oily) substances, *madya* (wine), *draksha* (grapes), sugar cane products
- Other: Pleasant scents and sounds, comfortable bed, proper time
- General *vatahara chikitsa* can also be adopted: drugs having sweet, sour, and salty tastes, *snehana*, *svedana*, *nasya*, and *basti*.

Specific Prescriptions

- ***Abhyanga***: daily with *vata* pacifying oils, like *ksheera bala taila*, *dhanvantara taila*, *maha narayana taila*; or simple *tila taila*. Special attention should be given to massaging the head and feet.
- ***Murdhni Taila***:
 - ***Shiro Abhyanga***: Head massage can be done as a separate procedure- use of *hima sagara taila* for *vata* pacification; if person is prone to sinusitis , can use *triphaladi taila*; simple coconut oil is also helpful
 - ***Shiro Seka/Dhara***: *Ashwagandhadi taila*, *kshira dhara* with *shatavari* and *bala*; *ksheera bala taila*; should be done for 7-14 days for best results
 - ***Shiro basti***: best of *murdhni taila* procedures, because the oil is retained on head for an extended period.
- ***Nasya***: *Sneha nasya* with *ksheera bala taila* 101 is useful

- **Pure Herbs:** Ashwagandha 3-6gm, Tagara 1-3gm, Brahmi 1-3gm, Jatamamsi 1-2gms, Sarpagandha 1-2gms (dosage refers to maximum per day)
- **Preparations or Combinations:** Ashwagandha churna with sugar and ghee; Pippali mula churna 2gm and purana guda (jaggery); Punarnava kashaya (reference from Nighantu Adarsha)

Yoga Therapy:

- In bed, the patient can focus on abdominal breathing- lie in shavasana- place right hand on abdomen and as inhales and exhales, feel the abdomen rising and falling underneath hand. Practice for 10 minutes before sleeping.
- Sleep Technique: Slow walking for five minutes around the room; lies down in shavasana and closes eyes; chants five rounds of 'a' kara; uses auto suggestion to relax each part of the body from head to toe
- *Nadi shodhana pranayama*- alternate nostril breathing; 5-10 rounds
- *Chandra bhavana*- breathing in through left nostril and out through right nostril or in and out through the left nostril; this stimulates the parasympathetic nervous system- 11 rounds
- *Bhramari* – 11 rounds
- *Kapala bhati/Bhastrika*- should not be done in cases of insomnia- they are stimulating practices that may aggravate *vata dosha*

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Nighantu Adarsha

Sushruta Samhita

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