CHITTODHVEGA

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Chittodhvega (Anxiety Neurosis)

CHARAKA SAMHITHA
SUSHRUTHA SAMHITA
BHAGAVADGITA
Definition and Etiology

- Chittodvega is a psychological and physiological state characterized by cognitive, somatic, emotional and behavioral components.
- Chitta refers to psyche and Udvega refers to anxiety, totally it is an anxiety neurosis.
- Categories:
  - **Nija** (internal Locus): genetic and hereditary, hormonal/biochemical imbalance
  - **Prajnaparada**: Intellectual Blasphemy or Cognitive distortions
  - **Agantuja** (External Locus): medical causes, and external trauma.
Etiology and Dosha Imbalance

- **Alpasatwa** (Low Vagal Tone)
- **Hridaya Pradushya** (As Heart is the seat of Buddhi, alteration of Buddhi)
- **Pradharshanam Deva Guru Dwijanam** (defying authority and higher power).
- Due to the above factors, alteration of ‘Dhi’ (derangement of understanding)
- Provocation of **Mano Dosha** (Rajas and Tamas).
- Prana, Udana and Vyana Vayu; Sadhaka Pitta and Tarpaka Kapha also play a major role in the pathogenesis of Chittodvega, due to their functions pertaining to Manas.
- Hridaya is also vitiated due to Asharaya-Ashrayi Bhava of Manas.
- Manovaha Srotas impairment leading to **Chittodvega**.
Prana Vayu

- Most important of 5 Vayus. Seat of PV is the head (cranial cavity)
- Areas of circulation: Chest, throat, ear, tongue, mouth or oral cavity, nose.
- Brain and Nerve functions are conducted by Prana Vayu. Drives Buddhi, Hrudhaya, Indriya and Chitta
- Annapravesha-ingestion of food, Nistiva-salivation, Kshavatu-sneezing, Udgaara-belching, Nishwasa-breathing, Dhamani dharana-nerve conduction.
- 13 types of Prana supported by Prana Vayu: Agni (fire), Kapha (soma), Vayu (air), Sattva, Rajas, Tamas, Shrotra, Twak, Netra, Jihwa, Ghrana(smell), Bhutatma(soul), Manas.
Vyana Vayu

- Seat of Vyana Vayu: Whole body
- Operational site: Heart
- Function: To distribute blood and nutrients to different parts of the body through blood circulation initiated in the heart. It is helped by Udana vayu, Avalambaka kapha in the chest region and Sadhaka pitta in the heart.
Udana Vayu

- Seat – Ura…Chest cavity (Urogata hrudhaya)
- Circulation: Nasa-Nasal cavity; Nabhi-Naval, umbilicus & diaphragm; Gala-Neck
- Functions: Vak-Speech, phonation(words & articulation); Urwa gati- upward movement; Geeta- singing and humming; Prayatna- efforts toward any tasks; Urja-enthusiasm & drive; Bala-strength, immunity & endurance; Varna-Color of the body.
- Mental functions: Dhriti-Power of retention of information; Smruthi-memory and reproduction of information; Mano Bhodana- Stimulation of mental activities.
Sadhaka Pitta

- Seat of Sadhaka pitta is the Heart
- Function: Enables us to achieve something in our life.

Abhiprasthita manoratah sadhan krut- motivates the person to achieve aspirations, goals and dreams.

Bhuddi medha Abhimana Sadhanath - Induces intellect, discriminating power and zeal.

Kapha tamo guna nashyati- Clears kapha and tamo guna

Purushartha Chatustaya- helps achieve the human pursuit of Dharma, Artha, Kama, Moksha.
Tarpaka Kapha

- Seat of Tarpaka kapha: Head (Cranial cavity)
- Functions: Nourishes brain and sensory organs, the controlling centers of organs of sensory perception located in the brain.

Aksha Tarpana- Nourish the eye and other sense organs. It is involved in the thought process, decision making and emotional high and lows, counteracts the hyperactivity of pranavayu and sadhaka pitta.

Kshama- Forgiveness, tolerance, immunity, endurance; Dhairyacourage; Alobha- not being greedy.
Samprapti

- Considering the dhatus involved in the disease, **Athi Chinta** or excess thinking is a causative factor for **Rasa Dhatu dusti** which again manifests as both physical and mental symptoms considering location of mind, hridaya to be seat of mind.

- Khavaigunya (Vitiated body channels)
Anxiety Disorders in DSM-V

- Former DSM-IV category of Anxiety Disorders became three separate categories in DSM-5. These three categories are:
  - **1. Anxiety Disorders** (separation anxiety disorder, selective mutism, specific phobia, social phobia, panic disorder, agoraphobia, and generalized anxiety disorder).
  - **2. Obsessive-Compulsive Disorders** (obsessive-compulsive disorder, body dysmorphic disorder, hoarding disorder, trichotillomania, and excoriation disorder).
  - **3. Trauma and Stressor-Related Disorders** (reactive attachment disorder, disinhibited social engagement disorder, PTSD, acute stress disorder, and adjustment disorder).
Stats and Facts

- Anxiety disorders are the most common mental illness in the U.S., affecting 40 million adults in the United States age 18 and older, or 18.1% of the population every year.
- Anxiety disorders are highly treatable, yet only 36.9% of those suffering receive treatment.
- People with an anxiety disorder are three to five times more likely to go to the doctor and six times more likely to be hospitalized for psychiatric disorders than those who do not suffer from anxiety disorders.
- Women are twice as likely to be affected than men.
In any given year the estimated percent of U.S. adults with various anxiety disorders are:

- 7 to 9 percent: specific phobia.
- 7 percent: social anxiety disorder.
- 2 to 3 percent: panic disorder.
- 2 percent: agoraphobia.
- 2 percent: generalized anxiety disorder.
- 1 to 2 percent: separation anxiety disorder.
General Anxiety Disorder (GAD)
ICD10/DSM 5 Code: F41.1

- Assessment: Beck’s Anxiety Inventory; Hamilton Anxiety scale, Astavidha or Dashavidha pareksha
- Symptoms: Pain in the back, shoulders and neck, tightness in the chest
- Physical: fatigue, light headedness, sweating, trembling, palpitations, nausea, headache
- Behavioral: Hypervigilance, irritability or restlessness, nervousness
- Cognitive: Lack of concentration, irrational thoughts
- Psychological: Fear, overwhelmed, anxiety, worry
- Common: difficulty falling asleep; emotional distress
Autonomous Nervous System (ANS)

- The autonomic nervous system is made up of two main branches, the **sympathetic and the parasympathetic**, and responds to signals and sensations via three pathways, each with a characteristic pattern of response. Through each of these pathways, we react “in service of survival.”
PolyVagal Theory

- **PolyVagal Theory**: Steven Porges, originator of Polyvagal Theory in 1993, identified a biological order of human response that is active in all human experience.
Vagus Nerve

- The vagus is divided into two parts: the ventral vagal pathway and the dorsal vagal pathway. The ventral vagal pathway responds to cues of safety and supports feelings of being safely engaged and socially connected. In contrast, the dorsal vagal pathway responds to cues of extreme danger. It takes us out of connection, out of awareness, and into a protective state of collapse. When we feel frozen, numb, or “not here,” the dorsal vagus has taken control.
Polyvagal Theory

Dr. Porges identified a hierarchy of response built into our autonomic nervous system and anchored in the evolutionary development of our species.

1. The origin of the dorsal vagal pathway of the parasympathetic branch and its immobilization response lies with our ancient vertebrate ancestors and is the oldest pathway.

2. The sympathetic branch and its pattern of mobilization, was next to develop.

3. The most recent addition, the ventral vagal pathway of the parasympathetic branch brings patterns of social engagement that are unique to mammals.
Management Of Chittodhvega in Ayurveda

- **Snehana** (oleation) in the form of **Bruhmna nasyam** (nasal administration) with Brahmi gritha.
- **Abhyanga**: Ksheera Bala Tailam
- **HrudBasti**: Since Hrudhaya is the seat of manas this will pacify vyana vayu, sadhaka pitta and balance kledhaka kapha.
- **Kati Basti**: Since the vagal pathways are in the sacral region, this will pacify the dorsal vagus nerves.
- **Rasayana**: Aswagandha or Saraswatha Choorna to restore balance from chronic condition.
Management of Chittodvega (Anxiety Neurosis)

- **Achara rasayana**: Mantra, pooja, japa, Dhyana, Positive affirmations, self love, universal love for all living and nonliving, gratitude, pranayama, vyayama, yoga, sahayoga, seva.

- **Satvavajaya Chikitsa: Psychotherapy** to manage cognitive distortions, stress and triggers, behavioral modification

- **Marma therapy**: tapping or gentle massage clockwise over these points: Adhipathi(crown); Sthapani(Ajna); Avarta(middle of eyebrow; Apanga(temporal); Shanka(side of eye); Phana(bottom of nose and chin); Hridaya(heart); Amsa(between neck and shoulder); Apastambha(below the breast); Gulpha(ankle).

- **Panchakarma**: Shirodhara with Aswagandha Bala oil
Mindfulness MBSR

- Mindfulness means maintaining a moment by moment awareness of our thoughts, feelings, bodily sensations, and surrounding environment, through gentle, nurturing lens
- Mindful breathing
- Mindful eating
- Mindful daily routine and maintaining natural biorhythm
Autonomic Nervous System

Meditation-induced Homeostasis—Parasympathetic Dominance

Sympathetic division

Parasympathetic division

Cervical (C1-C8)
Thoracic (T1-T12)
Lumbar (L1-L5)
Sacral (S1-S5)

Blood pressure ↓
Normal salivation
Skin conductivity ↓
Muscle tension ↓

Heart rate ↓
Heart rate variability ↑
Respiratory rate ↓

GABA ↑
Thalamus ↓
Limbic ↓
Alpha waves ↑

Hypothalamus
Amygdala

Cardiovascular & respiratory center oscillation rates ↓

Bowel motility ↑
Regularity

Preganglionic fibers
Postganglionic fibers