Research Article

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AYURVEDIC MANAGEMENT OF OPIUM ADDICTION: A CASE STUDY

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Received on: 29/09/17 Accepted on: 28/10/17

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DOI: 10.7897/2277-4343.09116

ABSTRACT

Opium dependence is condition where one is taking opium despite of knowing what it is doing with his body and who much his daily routine is affected without opium. If patient want to get rid of this dependency he suffers from opium withdrawal. In this case patient was taking opium in form of Heroin since 8 years and presented with chest pain, difficulty in breathing, Anxiety, Restlessness, had sweating in night at palm and face, loose motion and nausea. The treatment given to get rid of opium dependency is based on Padansika karma. The patient was treated with Sameergajkeshari rasa, vishtindukvati, ashvagandhachurna, vidharigandhachurna, muktashukti, Avipattikarchurna, Pittantakchurna, Brahmi vati, Smartisagarra, Shirodhara with Brahmi Him and Lavanbhaskarchurna. The treatment approaches to improve in condition of patient with improvement in sign and symptoms of opium dependent and opium withdrawal. The result assessment is done on the basis of COWS score and Insomnia Screening Questionnaire.

Keywords: Opium dependence, Padansikakrama, sameergajkeshari rasa, COWS score

INTRODUCTION

Opium is a neurotoxic somniferous poison.⁽¹⁾ The alkaloid present in opium are Morphine, Apomorphine, Codeine, Thebaine, Nicotine, Papaverine, Nascopine, Xanthaline etc. ⁽²⁾ In *Ayurveda* opium and its poisoning was first describe in Bhavaprakash in the name of "Aaphuka". In *rasa shashtra* opium is describe under heading of "Upavisha". *Ayurveda* text describes medicinal use as well as poisoning effect of Ahiphena (Opium).

Clinical feature of opium addiction or opium dependence are⁽³⁾-

1. Anorexia, Weight loss, Weakness, Constipation and furred tongue.
2. Irritability and disturbed sleep (insomnia with inadequate dose).
3. Impotency in male and frigidity in female.
4. Mental depression, moral degradation, loss of self respect and morality.
5. Pigmentation and scar formation with artificial tattooing may be due to frequent injection.

CASE STUDY

This is a case of 25 years old male. He was taking Heroin since 8 years, starting in small doses but he gradually increases the dose. He tried to get rid of it but he fail to do so. He was healthy before 2 month then he gradually starts chest pain, difficulty in breathing, Anxiety, Restlessness, had sweating in night at palm and face, loose motion and nausea.

On 27 July 2017, he came at de-addiction unit, NIA, Jaipur, he was admitted here for 26 days. The patient was presented with anorexia, insomnia, anxiety, uneasiness, restlessness, decreased appetite, nausea, loose motion, difficulty in breathing and slight

tremor. Examinations shows B.P. is 100/60 mmHg, pulse is slight high i.e. 102/min, pupils are moderately dilated, Piloerection of skin can be felt, chest is clear, abdomen is soft and non-tender.

According to *Ayurveda* opium (Ahiphena) have following properties⁽⁴⁾-

Rasa- Tikta and kashya
Guna- Laghu, Ruksha, sukshma, vyavahi and vikashi
Vipaka- katu
Virya- Ushna
Dosh prabhav- Vata pitta vardhak and kaphasyamak

Main aim of management was to balance doshas and also give symptomatic relief.

According to *Ayurveda* following regimes are given-

1. Sameergajkeshari rasa (1tab- 65mg)
-2 tab in morning and evening for 3 days
-1 tab in morning and evening for 3 days
-No tab in morning and 1 tab in evening for 3 days
2. Vishtindukvati – 2 tab BD for 15 days. This drug is mainly used to balance vatadosa.
3. Combination of Ashvagandhachurna- 2 gm and Vidarikandachurna- 2 gm, annupaan- milk, drugs are continuous through complete treatment and follow-up. These regime are used for balance pitta-kapha and also used as anti-craving agent as well as anxiety.
4. Combination of Avipattikarchurana- 2 gm, Pittantakchurana- 500mg and Muktasukti- 500mg, BD, 10 min before meal for 15 days. This combination is given for burning sensation in epigastric region and chest region.
5. Brahmi vati 2 tab. BD, annupaan-milk, Syp. Shankhapushpi 3 tsf BD, Amarsundarivati 2 tab BD and Shirodhara with Brahmi Him for 45 min daily in morning. All these drugs are continuous through complete treatment.

These drugs were used for anxiety, uneasiness, restlessness and insomnia.

6. Lavanbhaskarchurna- 3gm BD with takraannupaan. These drugs are used to treat decreased appetite and indigestion.
7. Syp. M-Liv 3 tsf BD is continuous through complete treatment and follow-up. Drug used as hepato-protective regime.
8. Patient would be given psychological counseling, normal healthy diet and meditation along with medicines.

Follow-up was done at 15th day after patient was discharged.

Present study was carried out in accordance with ethical principles by following International conference of Harmonization-Good Clinical Practices Guidelines (ICH-GCP).

DISCUSSION

A patient of opium dependence or opium withdrawal is suffering from physical as well as mental illness. He was also facing social embarrassment, depression, moral degradation, loss of self respect etc. So not only drugs but good counseling, moral and emotional support is needed.

In de-addiction center, NIA patient is provided by Ayurvedic medicine, group therapy, counseling, meditation and healthy diet. The improvement in sign and symptoms could be assist on the basis of COWS (Clinical opiate withdrawal scale) score.

Table 1: Clinical Opiate Withdrawal Scale (Cows)⁽⁵⁾

Sl. No.	Clinical feature	0 Day	7 th day	14 th day	After treatment	Follow-up
1	Resting Pulse Rate (Record beats per minutes): Measured after patient is sitting or lying for one minute. (0 = Pulse rate 80 or below/ 1 = Pulse rate 81-100/ 2 = Pulse rate 101-120/ 4 = Pulse rate greater than 120)	2	2	1	0	0
2	Sweating: Over past ½ hour not accounted for by room temperature or patient activity. (0 = No report of chills or flushing/ 1 = Subjective report of chills or flushing/ 2 = Flushed or observed moistness on face/ 3 = Beads of sweat on brow or face./ 4 = Sweat streaming off face.	3	1	0	0	0
3	Restlessness: Observation during assessment (0 = Able to sit/ 1 = Reports difficulty sitting still, but is able to do so/ 3 = Frequent shifting or extraneous movement of legs or arms/ 5 = Unable to sit still for more than a few seconds)	3	1	1	0	0
4	Pupil Size: (0 = Pupils pinned or normal size for room light./ 1 = Pupils possibly larger than normal for room light / 2 = Pupils moderately dilated/ 5 = Pupils so dilated that only the rim of the iris is visible)	2	1	0	0	0
5	Bone or Joint aches: If patient was having pain previously, only the additional component attributed to opiates withdrawal is scored (0 = Not present/ 1 = Mild diffuse discomfort/ 2 = Patient reports severe diffuse aching of joints, muscles/ 4 = Patient is rubbing joints or muscles and is unable to sit still because of discomfort)	1	0	0	0	0
6	Runny nose or tearing: Not accounted for by cold symptoms or allergies (0 = Not present/ 1 = Nasal stuffiness or unusually moist eyes/ 2 = Nose running or tearing/ 4 = Nose constantly running or tears streaming down cheeks)	0	0	0	0	0
7	GI Upset over last 1/2 hour (0 = No GI Symptoms/ 1 = Stomach Cramps/ 2 = Nausea or Loose stool/ 3 = Vomiting or Diarrhoea/ 5 = Multiple episode of Diarrhoea)	3	2	1	0	0
8	Tremor observation of outstretched hands (0 = No Tremor/ 1 = Tremor can be felt but not observed/ 2 = Slight tremor observable/ 4 = Gross tremor or muscle twitching)	2	1	0	0	0
9	Yawning: observation during assessment (0 = No Yawning/ 1 = Yawning once or twice during assessment/ 2 = Yawning three or more times during assessment/ 4 = Yawning several times/minute)	0	0	0	0	0
10	ANXIETY or IRRITABILITY: (0 = None/ 1 = Patient reports increasing irritability or anxiousness/ 2 = Patient obviously irritable anxious/ 4 = Patient so irritable or anxious that participation in the assessment is difficult)	2	1	0	0	0
11	Goosflesh skin: (0 = Skin is smooth/ 3 = Piloerection of skin can be felt or hairs standing up on arms/ 5 = Prominent piloerection)	3	0	0	0	0
	TOTAL SCORE-	21	9	3	0	0

(Total score- 5-12: mild, 13-24: moderate, 25-36: moderately severe and more than 36 shows severe withdrawal)

According to COWS score, when patient was admitted; total score was 21. So that he was suffering from moderate opiate withdrawal. After treatment of one week the score goes to 9, that

shows symptoms of opiate withdrawal decreases and become mild. In another week the score is 3 i.e. below mild and at the end of treatment & follow-up it remains 0. This shows exciting results of Ayurveda therapy on opium withdrawal.

In an Ayurvedic setting insomnia as symptoms cannot be neglected, as in COWS score.

Table 2: Insomnia Screening Questionnaire⁽⁶⁾

Sl. No.	QUESTIONNAIRE	Before treatment	After treatment	Followup
1.	Do you have trouble falling asleep? (1- Never/ 2- Rarely/ 3- Occasionally/ 4- Most nights/days/ 5- Always)	4	1	1
2.	Do you have trouble staying asleep? (1- Never/ 2- Rarely/ 3- Occasionally/ 4- Most nights/days/ 5- Always)	4	1	1
3.	Do you wake up un-refreshed? (1- Never/ 2- Rarely/ 3- Occasionally/ 4- Most nights/days/ 5- Always)	5	2	1
4.	Do you take anything to help you sleep? (1- Never/ 2- Rarely/ 3- Occasionally/ 4- Most nights/days/ 5- Always)	5	2	1
5.	Do you use alcohol to help you sleep? (1- Never/ 2- Rarely/ 3- Occasionally/ 4- Most nights/days/ 5- Always)	5	1	1
6.	Do you have any medical condition that disrupts your sleep? (1- Never/ 2- Rarely/ 3- Occasionally/ 4- Most nights/days/ 5- Always)	5	1	1

(Patients who answer 3, 4 or 5 on any question likely suffer from insomnia. If they answer 3, 4 or 5 to two or more items and have significant daytime impairment the insomnia requires further evaluation and management. If there is no evidence of a primary sleep disorder and/or no identifiable secondary cause of insomnia, this is conditioned insomnia.)

When pt. was admitted, most of answer of insomnia screening questionnaire was in 4-5 but after treatment answer become 1-2 and in follow-up it goes to 1. That shows significance improvement in opium withdrawal related insomnia.

According to Ayurveda text Sameergajkeshari rasa is used for vatavikara, amavata, katishula, aruchi, udarshula, sangrahi, aptanaka, apasmaraetc. this wonderful drug is also used to remove mala, kapha, medha or ama from vatanadi, also relaxes the brain.⁽⁷⁾

Sameergajkeshari rasa contains ahirphenia (opium) so that this drug is used in "padanshikkrama" that means the amount of opium in blood did not decrease sudden but gradually. Padanshikkrama; great ayurvedic contribution is gradually get rid of bad habit without having its withdrawal.

Vishtindukavati is used in atisara, pratishya, ajirna, mandagni, jirnavataroga. This drug is mostly used to treat opium addiction.⁽⁸⁾

CONCLUSION

The outcome of the ayurvedic therapy given to patient is much of encouraging. Result of therapy are shown on modern parameters and scale i.e. Clinical Opiate Withdrawal Scale (COWS) and Insomnia Screening Questionnaire, where with proper medication, meditation and counseling patient shows

improvement in physical as well as psychological symptoms. The focus of treatment is to balance tridosha (vata, pitta & kapha) as well as triguna (satta, raja & tama) through which to provide symptomatic relief to patient. As we seen that the Ayurvedic treatment is quite effective and safe in opium addiction.

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Cite this article as:

Piyush Gupta et al. Ayurvedic management of opium addiction: a case study. Int. J. Res. Ayurveda Pharm. 2018;9(1):81-83
<http://dx.doi.org/10.7897/2277-4343.09116>

Source of support: Nil, Conflict of interest: None Declared

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