



IJAPC

Volume 11 Issue 2,
2019

www.ijapc.com

2350-0204

GREENTREE GROUP PUBLISHERS



Critical Review on Disorders Related to *Manovah srotas* and Role of *Swasthviritta* in their Management

Amol M. Shirbhate¹, Dipali P. Nijwante² and Kundan R. Meshram^{3*}

¹Dept. of Swasthviritta, Jupitar Ayurved College, Nagpur, MS, India

²Dept. of Rachana Sharir, Jupitar Ayurved College, Nagpur, MS, India

³Dept. of Agadtantra, JVWU, Jaipur, Rajasthan, India

ABSTRACT

According to Acharya Charaka, *Srotas* are the channels for the purpose of secretion, conduction and transportation of body constituents. Mana which is known as mind, is very well described in ayurveda. Here *Hriday* and *Dasha Dhamani* are considered as the site of Mana. Anatomically *hriday* is considered as heart. But here heart cannot be considered as the site of mana. Mana does mainly functions of emotional, intellectual activities. All these are related to brain functions. In this study *hriday* is considered as brain not the heart. *Hriday* name means the organ which takes something, gives something and transports something. The brain does same activity like responses to incoming sensory, outgoing motor and nerve conduction. *Hriday* has also one meaning i.e. centre place. Brain is the part of central nervous system. Functions of brain matches with functions of *mana* mentioned in *samhitas*. There are some causative factor for *manashikavikara* like *Asatmyendriyatha samyoga*, *Pragyaparadha*, *Parinama*. All these factors directly or indirectly affects *manas* (mind) and ourbody and lastly cause diseases like *Unmada* (Psychosis), *Apasmara* (Epilepsy), *Bhrama* (illusion), *Vyamoha* (paranoia), *Avasada* (dipression), etc. Role of *swasthviritta* is very important in management of such disorders including *Daivavyapasraya chikitsa*, *Satvajaya chikitsa*, *Nidan parivarjana*, *Naisthiki chikitsa* and *Yoga*. The complete review on *manovaha srotas*, its disorders and there management by using principles of *swasthviritta* explained in our ancient texts are elaborated in the given article.

KEYWORDS

Mana, Hriday, Manashika Vikara, Swasthviritta



Greentree Group Publishers

[Received 12/07/19](#) [Accepted 21/08/19](#) [Published 10/09/19](#)



INTRODUCTION

In our day to day life, we see large number of peoples in the community are suffering from psychological problems including stress, depression, anxiety etc. All these factors lead to mental illness. According to the national mental health survey 2015-2016 has revealed the huge burden of psychological disorders in Indian community. In fact that nearly 11% of Indians above 18 years suffering from such disorders. As said in our literatures, equilibrium of *Mana*, *indriya*, *satva*, *aatma* is called *shariram*. *Ayurveda* mentioned, person is said to be healthy (*swasthya*), when they enjoy balance between *sharirika* and *manasika dosha*, of energies produced in the body (*samaganischa*), tissues in the organs (*samadhatu*) combined with proper elimination of *mala* from our body (*malakriya*), a happy *atma* (*prasannatma*), happy of functioning mind (*prasanna manaha*) and proper functioning of five senses (*samaindriyas*). On the other hand WHO says the definition of health, as a complete physical, mental and social well-being and not merely the absence of disease. Thus from both sciences, we get understand the importance of mental health along with physical well-being is necessary requirement of good health of

the In ancient science the basic approach to the concept of health was basically psychosomatic in nature which was related to the state of equilibrium of physiological and biochemical factors like *Dosha*, *Agni*, *Dhatu*, *Mala* and a state of wellbeing of mental and spiritual forces (*Atma*, *I ndriyas and Manas*). *Rajas* and *Tamas* are the important factors affecting mind and *vata*, *pitta* and *kapha* are the morbid factors affecting the body. The *Manas Roga Vigyan* is a branch of *Ayurveda* which deals with *manas*, its disease and treatment. *Kama* (desire), *Krodha* (anger), *moh*(delusion), *Bhaya* (fear), *Shoka* (grief), *chinta* (worry), *Irsha* (envy), *vilap* (groaning), *lobh* (greed) etc. are the *Manasika Bhavas* which leads to imbalance of mind and intellect. *Asatmya indiriya arth sanyog*, *pragyapradh* and *parinaam* are the causes of *manas roga*. For the management of these disorders two types of *chikitsa* are explained in *Ayurveda* i.e. pharmacological management and Non- Pharmacological management. Pharmacological management – Among three modalities of *chikitsa* only *Yuktivyapasraya Chikitsa* comes under pharmacological management. In this person should be treated by external and internal therapy. While in Non pharmacological management includes *Daivavyapasraya*



Chikitsa, Sattvavajaya Chikitsa, Nidanaparivarjana, Naisthiki Chikitsa, Yoga, Relaxation, etc. which are very well explained in *swathavritta*.

AIMS AND OBJECTIVES

- (1) To elaborate the concept of *mana* and *manovaha srotas* in ayurveda and its modern correlation
- (2) To explain the *Manas roga vigyana* in detail.
- (3) To discuss the management of these disorders as per concepts explained in *swasthvritta*.

MATERIAL AND METHODS

Material related to *Manas roga* is collected from ancient Ayurvedic books and modern literature. The available literary information is analyzed critically correlated with contemporary classical texts for authentication.

LITERATURE REVIEW

Manovaha srotas:

Mana which is known as mind is very well described in ayurveda. In *sroto vimaniya adhyay* in *vimansthana*, *Charakacharya* has mentioned 13 *srotas* and their respective *mulasthanas* except *manovaha srotas*. But in *Charaka Sharirsthana* 1/20, *Charaka Indriyasthan* 5/41 and *Charaka*

Chikitsasthan 9/5 *manovaha srotas* has been mentioned clearly. With context to *Chakrapani tika* on above references it is said that *Hriday* and *Dasha Dhamani* is the site of *Mana*. Nervous system in modern literature and concept of *mana* in Ayurvedic literature is always topic of discussion. While the functions of Central Nervous System (CNS), Autonomous Nervous System (ANS) are mentioned as functions of *Vata dosha* the anatomical description of CNS, ANS is very rarely found. In *Yogshastra*, the concepts like *Sushumna, Ida, Pingala* and many *nadis* are explained in very gross manner. These *nadis* can be considered as of nervous system. *Mana* which is known as mind is very well described in ayurveda. *Charakacharya* has mentioned *mana* in *sharirsthan* along with functions of *mana*. In *vimansthana* he has not mentioned *manovaha srotas* separately but in *indriyasthan* and *chikitsasthanmanovaha srotas* is mentioned. From the above references *mulasthanas* of *manovaha srotas* are *Hriday* and *Dasha dhamani*. *Hriday* is commonly considered as Heart. *Dashdhamani* are considered as vessels attached to heart. So heart can be considered as place of *mana*. But functions of *mana* or mind are related to central nervous system. According to Sanskrit literature meaning of *Hriday* is a central



place, brain is also centre place of nervous system. *Nirukti of Hriday is Hruharati, Da dadati, Yayati* meaning a place where something is taken, something is given and place of exchange. Brain gives the commands (motor function) receives information (sensory function). Hence it fits the etymology of *hriday*. If we observe base of skull then 10 openings are seen from which 12 cranial nerves and spinal cord exit. If we consider brain as *hriday* then these 10 exits of skull with cranial nerves can be correlated with Dasha Dhamani. So for *manovaha srotas* we can say that the word *hriday* means brain not heart.

According to *Charakacharya*¹, functions of Mana are Control of sense organs, self-restraint, hypothesis and consideration represent the action of the mind. Beyond that flourishes the domain and intellect. Heart does not have any cognitive, intellectual or psychological function. Whereas brain performs many functions including cognitive, psychological functions. So brain is seat of Mind.

Modern science now a days says mind and brain are connected. Mind is a set of cognitive faculties including consciousness, perception, thinking, judgement, language and memory. Manais known as *Atindriya* and it sactionisei the rob servable or inferable.

Mana in Sanskrit means to think, believe, imagine & suppose. It is *Nitya* and *Anu*. These are the functions of mana. *Chintya* (thinking), *Vicharya* (analysis), *Uhya* (speculation), *Dhyeya*(aim/goal). *Sankalpya* (decision). The brain is responsible for cognition which functions through numerous processes and executive functions. Executive functions include ability to filter information and tune out irrelevant stimuli with attention control and cognitive inhibition, the ability to process and manipulate information held working memory, the ability to think about multiple concepts simultaneously and switch tasks with cognitive flexibility and ability to determine the relevance of information or appropriateness of an action.

Mana is non-material component of body is composed of the three substances specific mixtures which are Satva, Rajas and Tamas which are also known as Triguna or Param Padarthas. They are character of being promotive of knowledge and thinking, rational thinking and permission of alklowing the existence of opposite qualities. The dominance of Satvamakes one of intelligently active and not ruling over others by any means. The dominance f Rajas is not able when one hast end ency to supercede other sbyall means and more maneuvering for



achieving desired. The dominance of Tamas causes least efforts and curiosity but prefersto be instageo funa wareness and effortlessness. Notto bother fignorance and not to make any efforts is the characteristi cof *Tamas*. The expression of disease will be modified as per the dominance i.e. Guru Vyadhitaand Laghuvyadhita of *Pravara* and *Avara* Satvarespectively. Therefore, there cognition of existence and dominance of anyone of these omni substance is essential and it is possible to note the behavioural and psychological manifestations for the evaluation of manas-vikaraand dominance of specificguna and dosha.

Manas Vikara:

The prevalence of *manas roga* in today's community is in very large magnitude so that every *vaidya* must to able to carry out the psychiatric assessment. The range of such disorders are very wide. Manytimes there is emotional disturbance, not with overt psychiatric symptoms, but with more respectable physical symptoms. While in some patients both physical and psychiatric illness may coexists. Like in *Unmada* patient who have *arochaka* getting *panduroga*. On the other hand, sometimes physical and psychiatric illness may not related with each other, as in patients of *apasmara* in whome *madhumeha* may be coexists. Also, every

patient's reaction to its illness will be influenced by his emotional state and this will itself affect the cause of the illness. Thus it is necessary to have knowledge about the psychosomatic condition when we start to understand the underlying pathogenesis of all psychosomatic diseases which are the individual reaction and variable perception depending upon the *satva bala* and that also give the special attention to understand the psychic constitution. The basic factor essential for the *mano vikaras* is inconsistent *satva*. *Dosha*, be it *shareerika* (*Vata*, *pitta* and *kapha*) or *mano doshas* (*rajas* and *tamas*) would need inconsistent *satva* to create *mano vikaras*. A strong mind would resist and deal with annoyance of *dosha*. The pathway through which *Manas* moves in the body for the perception of knowledge should be free from distorted *dosha*. Also, the knowledge perceived shall be carried through the *srotas* which are free from *doshas*. Similarly, distorted *Manas* would spoil the *srotas* and would perceive the knowledge in a distorted way itself.

Collectively we can say that, *Manas* while going towards *shiras/indriya*'s *adhishtana* would get spoiled due to *dushta srotas*. Also, the knowledge which is carried towards *Hridaya* would get spoiled due to *dushta srotas*. Distorted *Manas* would perceive the knowledge



wrongly and distorted *Manas* would spoil the normally functioning *srotas* as well. This explains the basic structure of any *mano vikaras*. *Shareerika doshas* can involve *Manas* and can lead to *mano vikaras*. Similarly, *mano doshas* can involve *shareera* and lead to *mano vikaras*. Thus according to Acharya Charaka, for understanding of somatic disease, the knowledge of *Sharira* is essential².

Etiological factors for *Manashika Vikaras*

I. *Triguna*:

If the *Satva*, *Rajas* & *Tamas guna* in person is not balanced then this is also a one etiological factor for *Manshika Vikaras* and person get more *Krodha*, *Kama*, *Bhaya*, *Lobha* etc. The behavioral manifestation of *Triguna* are as follows:

***Satva*:** Enlightening, Efforts for more knowledge, Cleanliness, Theism, Appreciate existence of Almighty, Straight forward dealing gratitudeous, Polite, Prompt to learn, Serious, Good memory, intellect, Welfare wisher

***Rajas*:** Propulsive and dynamic, Over expression of pain, Effort-some Industrious, Egoistic, Angry, Reacting, Pretender, Jealous, Brave, Tense, Cruel, Greedy

***Tamas*:** Inhibitive, Ignorant, Excessive, Fatigue of sense organs, Atheism, More

sleep, Poor, Worrying, Unhygienic, Commits mistakes.

The interplay between the *triguna* manifests as sequel of there action and they should be noted individual suffering from psychosomatic diseases. Special attention in psychic diseases helps to know *manodosha* and *manovyapara*. Before the clinical evaluation of dosha in *manas roga*, it is worth to note the *mano-vyapara*, they include sensation, perception, ideation, conception, understanding insight, resolution, opinion, imagination, feeling, memory, conation, longevity of life, desire, self-control.

They are the subjects of *manas* through which the *manas* manifests in *vrittnya* viz. *Pramana*, *Viparyaha*, *Vikalpa*, *Nidra* & *Smriti* and they in turn cause *Avidya*, *Asmita*, *Raga*, *Dweshha* and *Abhinivesha*. There is another five condition of mind, known as *chitta bhumayah*; *Kshipta* (*Restless*), *Mudha* (*Blinded*), *Vikshipta* (*Distracted*), *Ekagra* (*Singlepointed*) and *Nirodha* (*Restricted*). Basically they are *Antahkarma* related to *manas*, *Ahankara* and *Buddhi*³.

Three psychic constitution should be considered separately. The *satvika* is healthy one without impaired or morbid condition while in *Rajasika* and *Tamasika* there is predominance of *Rajas* and *Tamas manodosha* respectively, which are



inheritedly carry the traits of certain *manoroga*. The term *manoroga* encompasses a broad range conditions characterized by patterns of abnormal behavioral and psychological signs and symptoms that result in dysfunction. The implication that *manoroga* can be by physical cause and *sharirika roga* is also caused by *manodosha* is correct, therefore there is tradition in ayurveda to consider the *sharirika* and *manasika* dosha in the disease. For the correct evaluation of disease the appropriate format should be followed in each and every patient. Valid patient based questionnaires have been developed that systematically probe for signs and symptoms associated with the most prevalent psychiatric diagnoses and guide the clinician into a more targeted historical assessments. The psychosomatology deals with cardinal features of disease which distinguish it from others.

II. Trividha Hetu:

(1) *Asatmyendriyarthasamyoga*

(2) *Pragyaparadha*

(3) *Parinama*

(1) *Asatmyendriyarthasamyoga*:

Indriyas are always in contact with their respective *indriyarthas* (objects) by bridging with *Atma*. If there is excessive, absence, incomplete contact with their respective *arthas* then it will cause disease.

Manas controls the *Indriyas*. Without active involvement of *Manas*, *Indriyas* are not able to perceive their *Arthas* and results in useless results. Vitiating of *Manas* indulges *Indriyas* in improper way by *Asatmyendriyarthasamyoga*.

(2) *Pragyaparadha*:

Functional disarrangement of *Dhi*, *Dhriti*, *Smriti*. These acts as obstacle in discussions and making decisions. The individual will not come to know that what is good or bad for him/her. Then he lands up into the situation that even knowingly he does successive *pragyaparadha*.

(3) *Parinama*: *Parinama* is an ever lasting's as well as unavoidable aspect. *Parinama* is not in our hand because it is basically dependent on *Sharirika* and *Manasika dosha* according to the *kala*. During *kala vaisamya*, if *Manas* is in normal state then it will make body for the suitable change but if *Manas* is in imbalanced state then body can not change itself. The disease becomes more dangerous for person.

III. *Sharir Dosha*: *Vata*, *Pitta*, *Kapha* are the three *sharirika doshas* and *Rajas* and *Tamas* is *Manasika dosha*. They are both interconnected to each other. Hence if any imbalance in these two *doshas* it leads to *Vyadhi*.

Etiological Factors for the Manifestation of *Unmada*:



Timid person with aggravation of Rajas and Tamas doshas along with three sharirik doshas. Consumption of unclean, unwholesome and damaged food substances. Person not follow the rules and regulation of dietetics, abnormal posture and extreme emaciation. Whose mind is inflicted by passion, anger, greed, exhilaration, fear, attachment, exertion, grief, anxiety and excitement⁴. Person having chronic disease, frequently subjected to physical assault and insulting God, preceptors and Dvijas.

Etiological Factors for the Manifestation of Apasmara:

Consumption of unwholesome food, infliction of mind with Raja and Tamas doshas, occlusion of Hridaya with excacerbated doshas⁵. Affliction to mind by excessive anxiety, passion, fear, anger, grief, agitation etc. Improper and more than tolerable limit interaction of the sense organ with their objects and activity. Suppression of the natural urges and sexual intercourse during menstruation.

The Psychiatric Assessment:

History:

1. Complaints
2. History of present illness
3. Previous disorders and the nature and extent of treatment.

Family history, important for genetic aspects and family influences, helping in understanding the familial traits.

Personal history: childhood development, adolescent adjustment, level of education and adult coping patterns.

Sexual history

Current life functioning

Current medications, alcohol or drug use

Personality: is defined as the sum of those characteristics that make a person into individuality. These characteristics include behaviour, both actions and reactions; attitude to self; ways of relating to others, both socially and sexually, attitude to authority, level of independence, mood, fantasy life, religious beliefs and moral attitudes and interests and hobbies.

The mental status examination:

1. Appearance: note unusual modes of dress, use of make-up etc. very helpful for evaluation of *bhootanmada* and *vataja unmada*.
2. Activity and Behavior: Gait, gestures, co-ordination of bodily movements.
3. Affect: outward manifestation of emotion such as depression, anger, fear or lack of emotional response.
4. Mood: the patients report of feelings and observable emotional manifestations.



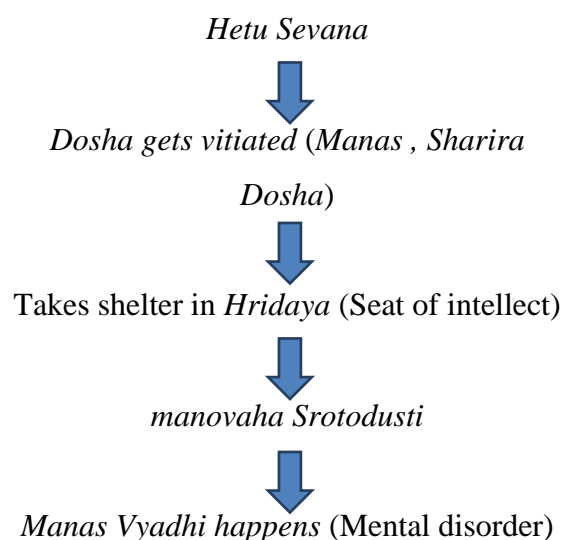
5. Speech: coherence, spontaneity, articulation, hesitancy in answering and duration and response.

6. Content of thought:
Association, obsession, depersonalization, delusions, hallucinations, Paranoid, ideation, anger, fear or unusual experiences.

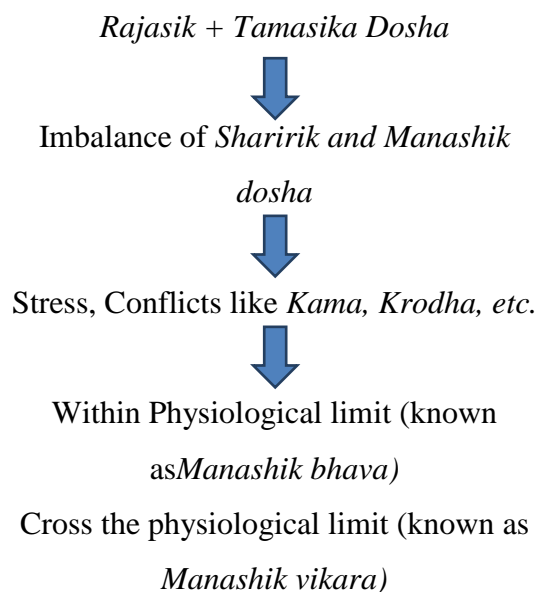
7. Cognition:

- (1) Orientation to person, place
- (2) Time and circumstances
- (3) Remote and recent memory and recall
- (4) Calculation
- (5) General knowledge
- (6) Ability to identify by naming
- (7) Reading and writing, Judgment regarding common sense problems.

Pathophysiology of Mansika Vikaras



Manifestation of *Manasikbhava* and *Manas Vikara*:



*Manasikbhava (Physiological limit)*⁶

Kama- *Kama* simply means desire. In present time, *kama* word means sexual desires but the actual meaning of desire or *kama* is any kind of wish, pleasure of the senses or passion to achieve something in life.

Krodha- *Krodha* is an anger, it is type of emotion or mental state of mind of an individual. Opposition of *mana, vani* and *karma* is *Krodha*. When *Rajo guna* increases in the body then *krodha* is the main and prominent feature to appear. The person will have the tendency to harm somebody or even to kill. And also, symptoms can be produced according to the vitiated *dosha* like silent resentment, hysteria etc.

Shoka – This is state of mind which occurs after a person loses beloved ones



or object. It also occurs due to the *rajo dosha* involvement and *vata, pitta dosha* vitiation respectively. *Shoka* is seen on person's face.

Bhaya - It occurs due to facing a dreadful situation and because of this *vata dosha* can get aggravated and cause *Unmad roga*. Any Symptoms vary from person to person like excessive weating, tremors, giddiness, stamering -not able to speak anything, feeling of dry mouth and causes many types of Manashika vikar.

Lobha- The meaning of *lobha* is greed, appetite or cupidity. *Lobha* is always due to the *rajoguna*. This situation leads to disturbed mental health. In this, person will have the desire to possess others object that can be money, property, food etc.

Manashik vikara (Cross the physiological limit)

The *mansikbhava* are nothing but the physiological limit which when crosses then it leads to *Manasika Vikaras* because when these *Bhavas* are not fulfilled by individual then there will be vitiated *vata* mainly. Some *Manshika Vikaras* describes in Ayurveda are: *Unmada* (Psychosis), *Apsmara* (Epilepsy), *Bhrama* (illusion), *Vibhrama* (Delusion), *Vyamoh* (paranoia), *Avyavasthit chittata* (mood disorders), *Prajnaparadha* (Lack of harmonization between *dhi, dhriti* and *smriti*),

Manograsita (Obsession), *Apatantrakam* (Hysteria), *Avasada* (Depression), *Chitto Udvega* (Anxiety disorder)

In *Manasroga*, the evaluation of *dosha* of both types, *nija* and *manasika* is crucial to decide the line of treatment. After the study of mentioned clinical features in *Unmad*

a, the concept of understanding of predominant *dosha* in particular type can be understood, which is helpful in psychiatric diseases mentioned in modern sciences. As now-a-days the prevalence of psychiatric illnesses are progressive and the occurrence is worldwide. The ayurveda deals *dosha, dushya, srotas* etc. in the *samprapti* to finalize the line of treatment therefore the involvement of specific *dosha* evaluation is so important to treat specifically.

Role of Swasthavritta and Yoga in management of Mansik vikara:

In *Yuktivyapasaraya Chikitsa* comes under pharmacological management. In this person should be treated by external and internal therapy. Like *Shodhana, Samsaman, Sastra pranidhana* (operative procedures) in case of traumatic psychoses and other organic mental disorders. But other non-pharmacological modalities also plays as an important role in management of such disorders includes under heading of *Swasthavritta* and *yoga*



1. *Daivavyapasraya Chikitsa*

Daivavyapasraya Chikitsa is a type of *chikitsa* in which *mantra, mani, mangala, tapa, bali, homa, upavasa, pranipatra* etc are done to increase *satva* (confidence) and remove fear.

2. *Sattvajaya Chikitsa*

It aimed at control of mind i.e. one should keep himself established in his oneself after knowing the real nature of the soul and attaining the height of spiritual wisdom. By this we increase the *satva* of person as in *Mansika Vikaras* there is decreased *satva* guna as compare to *rajas* and *tamas*. According to *Acharya Charak, Sattvajaya & chikitsa* is nothing but withdrawal of mind from wholesome objects. In this *Acharya* has mentioned *Adravyabhuta chikitsa* in *Viman sthana*. The method of this treatment are *Bhayadarsana* (terrorizing), *vismaphana* (surprising), *vismarana* (dememorizing), *Kosbhana* (socking), *harsa* (exciting), *bhatsana* (chideing) etc. concise reports was published regarding *sattvajaya*, an Ayurvedic psychotherapy by Prof. R.H. Singh and Murthy A.R.V (1987) in which therapy is well designed from classics, is as follow : (a) Assurance. (b) Replacement of emotions (c) Regulation of thought process (d) Retraining of Ideas (e) Channelisation of Presumption (f) Correlation of objectives and ideals (g)

Proper guidance and advice for taking decisions (h) Proper control of patience (i) Fear therapy and psychoshok therapy.

3. *Nidaan parivarjana* (Avoidance of Causal Factors):

The main treatment in every disease is *Nidaan parivrajana*. It is very important and foremost principle of treatment of any disease. (a) *Sadvritta palan* (b) *Samyaka vega dharana* and *udirana* (c) Wholesome contact of *Kala, Buddhi and Indriyarth* (d) Following the *Ahara visheshayatana*. e) *pathya sewan*..

4. *Naisthiki Chikitsa*: These terms refers to absolute eradication of miseries attained by the elimination of desires (*Upadha*), which are root cause of all miseries. Elimination of desired lead to the eradication of all misery⁷.

5. *Practice of Yoga*: ‘*Yogo moksha pravartakah*’ i.e. by the practice of *yoga* one can attain the state of *Moksha* (salvation). It is a process of increasing *satva* and decreasing *Rajsa* and *Tamadosha* leading to *Karma Kshaya* (loss of deeds) is the path of attaining *Moksha*⁸. By improving blood circulation, easing muscle tension and focusing the mind on the breath, *Asanas* combine to ease the nervous system. Long-term benefits include reduced stress and anxiety levels and increased feelings of calm and well-being. Hyperactivity of parasympathetic



nervous system results in aggressiveness and criminal behaviors in a person. On the other side hyperactivity of sympathetic nervous system leads to inferiority complex and down with undue terror 9. With the result of *Yagasanas* the activity of both these nervous systems are well regulated and balanced which leads to progressive growth and development of the person.

DISCUSSION

WHO has described Health as a state of complete physical, mental, social & spiritual wellbeing and but not merely the absence of disease or infirmity. The health is linked with various factors like physical/social environments, employment/working conditions, social support networks, lifestyles etc. the maintenance and promotion of health is achieved through Health Triangle (combination of Physical, Mental and Social well-being). Thus mental health plays an important role in complete well-being of an individual. The factors like stress occurs due to modern lifestyle responsible for the physical, psychological, behavioral related disorders in an individual. The measures to overcome such disorders are very well explained in *swasthavritta*. By adopting the measures

explained in *swasthavritta* as a part of lifestyle can prevent and cure the disorders related to *manovah srotas*.

CONCLUSION

Many times person looks perfect but when observed, the irritable and changed behavior such as way of talking and reaction, activities- then that time we can conclude that this person is affected by some mental disorders. And that disorder is nothing but the *Manashika Vikaras* and the field which deals with that is called as *manas roga vigayan in Ayurveda*. *Manas roga vigayan* deals with the dosha related to the *manas* i.e *rajas, tamas* if any imbalance the three then they are called as *Mansika doshas* but when *manashika* and *sharirika doshas* vitiates then they takes shelter in *Hridaya* i.e is the site of *Atma, Manas, Buddhi and Srothas (Sangyawah, manowaha, chetanawaha srothas)*. These *Srothas* originate from the *Hridaya*. *Vitiated doshas*, do the *avarana* (cover) of *manovaha srotasa* and cause disease like *unmaad, apasmar* etc. Hence present article shows the importance of *manas*, their *gunas*, etiology, symptoms and their treatment in the shelter of *Manas Roga Vigyan*.



REFERENCES

1. Acharya Vidyadhar Shukla and Prof. Ravidatta Tripathi, Editor, Charakasamhita of Agnivesha Edited with Vaidyamanorama Hindi Commentary, Volume 1, Sharirsthana; Katidhapurushiya-adhyaya, Chapter 1, verse 23, Chaukhmba Sanskrit Pratishtahan, Delhi, Reprint 2010
2. Acharya Vidyadhar Shukla and Prof. Ravidatta Tripathi, Editor, Charakasamhita of Agnivesha Edited with Vaidyamanorama Hindi Commentary, Volume 1, Sharirsthana; Sharirvichasharir-adhyaya, Chapter 6, verse 3, Chaukhmba Sanskrit Pratishtahan, Delhi, Reprint 2010
3. P.C. Dave, Editor of Vedantasara of Sadanand Yogindra saraswati, Chapter 13, Publisher Saraswati Pustak Bhandar, Ahamadabad, Edition 2011
4. Byadgi, P.S., *Ayurvedic Vikriti Vigyana and Roga Vigyana*, Volume II, Unmadaadhyaya: Chapter 56, New Delhi: 1st Edition, Chaukhambha Publications, 2009, 520-21.
- 5 Byadgi, P.S., *Ayurvedic Vikriti Vigyana and Roga Vigyana*, Volume II, Unmadaadhyaya: Chapter 56, New Delhi: 1st Edition, Chaukhambha Publications, 2009, 511-12.
6. Acharya Vidyadhar Shukla and Prof. Ravidatta Tripathi, Editor, Charakasamhita of Agnivesha Edited with Vaidyamanorama Hindi Commentary, Volume 1, Nidanasthana; Unmadnidan-adhyaya, Chapter 7, verse 4, Chaukhmba Sanskrit Pratishtahan, Delhi, Reprint 2010
7. Acharya Vidyadhar Shukla and Prof. Ravidatta Tripathi, Editor, Charakasamhita of Agnivesha Edited with Vaidyamanorama Hindi Commentary, Volume 2, Sharirsthana; Katidhapurushiya-adhyaya, Chapter 1, verse 94-95, Chaukhmba Sanskrit Pratishtahan, Delhi, Reprint 2010
8. Acharya Vidyadhar Shukla and Prof. Ravidatta Tripathi, Editor, Charakasamhita of Agnivesha Edited with Vaidyamanorama Hindi Commentary, Volume 2, Sharirsthana; Katidhapurushiya-adhyaya, Chapter 1, verse 137-142, Chaukhmba Sanskrit Pratishtahan, Delhi, Reprint 2010