

<https://doi.org/10.46344/jbino.2020.v09i5b.21>

NIDRANASH HETUS IN FEMALES

Jayashri Bharadia

Associate Professor, Dept Of Rognidan & Vikruti Vignyan Dr.Vedprakash Patil Ayurved College
& Research Institute, Jalna,

ABSTRACT

Nidranasha is a term of Ayurveda used for loss of Sleep. Ayurveda mentioned three important facts to keep a person in healthy status as Aahara (diet), Nidra (Sleep) & Bramhacharya (Celibacy). Out of which Nidra (Sleep) is a state which refills our power of activity which we lose in daily routine. Due to loss of sleep person suffers too many problems related with health. In the present paper we are discussing regarding the nidranash factos in females.

No: of References: 15

INTRODUCTION

Humans have to suffer many problems related with health in day to day life. To overcome these problems he has to keep his body and mind strong and healthy. Ayurveda, the science of life, suggested many Siddhantas (principles), which, one has to obey to maintain healthy life. One of the most important principles is the three factors i.e. Aahar (diet), Nidra (sleep) and Brahmacharya (celibacy), are mentioned as three Upastambha (sub-supporting pillars) executing an important role in maintaining the health [1]. Aahara (Diet) is the first which directly affects the life by causing various problems with health & mind. Changes in diet habit, changes in the timing of diet etc. may cause problems related with digestive tract [2]. Brahmachary (Celibacy) is a pillar which also affects on the healthy status of the body. It means controlled sex, if done at proper age and at proper time it preserves the body or it is harmful if done in a wrong or non-scientific way [3]. Nidra (Sleep) also has its important role in healthy life. By getting a good & sufficient sleep one can get ready for new work. A sound sleep in the night regenerates the power of the mind and body to accept new challenges, maintains health, proficiency and emotional well-being [4]. In daily routine a person can't concentrate on sufficient and in time sleep, so he is suffering from many problems related with mind & body. Researches show that improper sleep can increase risk of developing obesity, diabetes, high blood pressure or heart

disease [5]. A survey conducted by WHO in India reveals that about 35 percent of respondents have reported mild to extreme difficulty associated with sleep [6]. Ayurveda has enlightened about this fact centuries ago and mentioned various causes, symptoms and remedies for Nidranaasha (insomnia). By observing this one can get rid of the problems arising from the loss of sleep. On the other hand conventional medical science is still lacking definite treatment for insomnia. It frequently prescribes sedative and hypnotic like benzodiazepines drugs as a therapy of insomnia.

In spite of these benefits some persons can't achieve their normal pattern of sleep as mentioned by Ayurveda, due to some reasons. These symptoms may lead to Nidranasha (Insomnia). Handful bunch of population in the society is suffering from this ailment. Numerous factors such as mental stress, illness, type of work, age, changing life style and changes in diet etc are responsible for insomnia. Persons suffering from Nidranasha or Insomnia may also suffer other medical problems related with mind & body. 2. Definition: Nidranasha or Anidra [9,10,11] (insomnia) is the difficulty in initiating or maintaining sound sleep or waking up early without complete sleep and unable to sleep again, or waking up with a feeling of tiredness and exhaustion. In conventional medical science various are the concepts used to define insomnia. The concept of "unsatisfactory sleep" was developed by the American Medicine Institute in 1979

[12]. According to which insomnia corresponds to the complaint of insufficient sleep almost every night or by being tired after the usual sleep time [13]. 3. Prevalence Rate: Primary insomnia is estimated to occur in 25% of all chronic insomnia patients [14]. Although there is variations in the population studied to determine the estimated prevalence [15, 16] Hence estimates of insomnia prevalence have varied widely, from 10–40% [17-21]. 4. Etiology of Nidranasa (Insomnia) The etiological factors of insomnia provided in Ayurveda includes dietary consumption of food which is predominant in dry property barley excessive exercise and fasting intercourse, hunger and uncomfortable bed, Therapeutic causes such as excessive induced Vamana (emesis), Virechana (purgation), Nasya (nasal medications), Raktamokshana (bloodletting), Dhooma (medicated smoke), Swedana (sudation), Anjana (collyrium), can also cause Nidranasha. Psychological causes- fear, anxiety, anger, Apart from these excessive joy, sorrow, [23] greed, agitation . are also responsible for insomnia. According to Charakacharya, following factors are responsible for the disturbance in the sleep Ayurveda describes Nidranasha as a symptom, as a disorder and even sometimes as a complication of certain diseases. Peculiar symptoms arising during Nidranasha are yawning, body ache, lethargy, head-ache, giddiness in the head and eyes, apathy, fatigue, indigestion and diseases produced by Vata Dosha .Troubled sleep can lead to unpleasantness, emaciation, weakness, impotency, terminating in death .

Treatment of Nidranasha in Ayurveda: - Ayurveda has described treatment protocol of Nidranasha in meticulous fashion. It is more or less similar in all classics, considering the involvement of Doshas. It directs the rectification of diet, certain procedures in routine with or without single or compound medicine. Ayurveda indicates consumption of flesh of domestic and aquatic animals, meat of buffalo and buffalo milk Wheat, black gram,

Conclusion

Sleep restores energy to the body and provides relaxation particularly to the nervous system. It helps in building and restoring the control of the brain and nervous system over the muscles glands and other body systems. If person remains awake for 60 to 114 hours one can observe objective changes such as disturbed equilibrium, neuromuscular fatigue etc. and subjective changes like mental concentration difficulty and inaccurate judgments. Threshold of pain is also lowered. If sleeplessness is very much prolonged, it can also cause collapse & death . People deprived of sleep lose energy and become quick tempered. After two days without sleep, a person finds that, lengthy concentration becomes difficult. Through pure determination person may perform tasks well for short periods but is easily distracted. Many mistakes are made especially in routine tasks. Every sleepless person experiences a period of dozing off for a few seconds or more. The person falls completely asleep unless kept active continuously. According

to Ayurveda one can consume half the sleep in the morning before meal; to one they missed in the night to nullify the effect of Nidranasha (Insomnia). Hormonal changes also affect sleep. Menopausal women often experiences sleeping problem overstressed . A study of relationship between amount of sleep and long term mortality risk published by Prof. Danniell Kripke of the university of California suggested that people who slept fewer than 6 hours a night are more than 10 hours had significantly increased risk of death in a five year. Follow up period contributory factors were not discounted. Hence it indicates average 7 to 8 hours sleep was the healthy option. Constantly changing sleep patterns were also shown to be a health risk. According to Hume the effect of unscheduled sleep in the afternoon of feel miserable afterwards and the effect can last several hours and be self-perpetuating on a longer-term basis .

REFERENCES:

Lawrence E, Steven M. The Harvard Medical School Guide to a Good Night's sleep. McGraw-Hill eBooks, 2007, 13.

Kristen L K. Does inadequate sleep play a role in vulnerability to obesity? The American Journal of Human Biology, WileyBlackwell 2012; 24(3):361–371.

Health system performance assessment, world health survey 2003, India, International Institute for Population Sciences (IIPS) Mumbai & WHO-India-New Delhi 2006,153.

Agnivesha, Charaka, Dridhabala, Charaka S, Edited by Vd. Jadavaji Trikamaji

Acharya, Chaukhambha Surabharati Publications, Varanasi, 2001, topic no.21 verse no. 35, 118.

Agnivesha, Charaka, Dridhabala, Charaka S, Edited by Vd. Jadavaji Trikamaji Acharya, Chaukhambha Surabharati Publications, Varanasi, 2001, topic no.21, verse no.36, 118.

Sushruta, Sushruta S, ed. Vd. Jadavaji Trikamaji Acharya, Edn 8, Chaukhambha Orientalia, Varanasi, 2007, 358-359.

Vridha V, Ashtanga S, ed. KR Srikantha Murthy, Chaukhambha Orientalia, Varanasi 2005; 204-208.

Vagbhata, Ashtanga H, ed. Pt Hari Sadashiva Shastri, Chaukhambha Surbharati Prakashana, Varanasi, 2010, 140-143.

American Sleep Disorders Association (ASDA). International Classification of Sleep Disorders: Diagnostic and Coding Manual (ICSD). Diagnostic Classification Steering Committee, Thorpy Mj, Chairman. Rochester, M1990, 19-21.

World Health Organization -The ICD-10 classification of mental and behavioural disorders. Clinical descriptions and diagnostic guidelines. Geneva: World Health Organization;1992:362

Roth T. Insomnia: epidemiology, characteristics and consequences. Clinical Cornerstone 2003; 5(3):5-15.

Ohayon MM, Epidemiology of insomnia: what we know and what we still need to learn. Sleep Medicine 2002; 6(2):97-111.

Mai E, Buysse DJ. Insomnia: Prevalence, Impact, Pathogenesis, Differential Diagnosis, and Evaluation. *Sleep Medicine Clinics* 2008; 3(2):167–174.

Bixler EO, Kales A, Soldatos CR, Kales JD, Healey S et al. Prevalence of sleep disorders in the Los Angeles metropolitan area. *American Journal of Psychiatry* 1979; 136:1257–1262.

