AN AYURVEDIC APPROACH TO ALZHEIMER’S DISEASE
Ratnaprava Mishra¹, Jayashankar Mund², Akhilesh Shukla³, Krishnaprabha A⁴
¹Professor and HOD, Department of Kayachikitsa, Amrita school of Ayurveda, Kollam, Kerala, India
²Professor and HOD, Department of Samhita Sanskrit and Siddhanta, Amrita school of Ayurveda, Kollam, Kerala, India
³Assistant Professor, Department of Samhita Sanskrit and Siddhanta, Amrita school of Ayurveda, Kollam, Kerala, India
⁴PG Scholar, Department of Kayachikitsa, Amrita school of Ayurveda, Kollam, Kerala, India

Received 03-12-2015; Revised 01-01-2016; Accepted 30-01-2016

*Corresponding Author: Dr. Ratnaprava Mishra,
Professor and HOD, Department of Kayachikitsa, Amrita school of Ayurveda, Kollam, Kerala – 690525, India

ABSTRACT
Healthy aging is a journey and a natural process of life. The aging is inevitable, and every living organism has to go through it whether one likes it or not. The improvement of healthcare system in past few decades have contributed to increased life span of the human being but it has also resulted in increased number of neurodegenerative disorders like Alzheimer’s and it is not a normal part of aging process. Many elderly individuals exhibit mild motor and cognitive alterations reminiscent of those found in neurodegeneration. This observation gave birth to the popular idea that aging might be a "benign" form of neurodegeneration. Ayurvedic classics have given great emphasis to the higher faculties dealing with memory and cognition. Even though there is no direct reference regarding Alzheimer’s Disease (AD), scattered references are available regarding the symptoms as well as treatment such as Rasayana etc. A judicious application of Ayurvedic principles could go a long way in the management and care of AD, which is going to be an alarming sign in the future.

Keywords: Alzheimer’s Disease, Neurodegeneration, ageing, motor neuron disease, Rasayana, Satavajaya Chikitsa, Ayurveda.

INTRODUCTION
The process of aging begins at birth or conception and continues throughout life. This process of ageing brings changes which are unsolicited, irreversible and inevitable. While many of the changes we face as we age are celebrated and embraced, not all change is desirable, and not all are pleasant. Some of the biggest changes humans experience in their lifetime occurs in late adulthood and into their senior years. It is in this period that the majority of people start to experience mild motor and cognitive alterations reminiscent of those found in neurodegeneration. This observation gave birth to the popular idea that ageing might be a “benign” form of neurodegeneration (deterioration of nerve cells)¹. Neurodegenerative disorders are major challenges to clinicians all the time. Neurodegenerative diseases as diverse as Alzheimer's, Parkinson's, and Motor neuron disease share a common pathological mechanism involving aggregation and deposition of misfolded proteins, which leads to progressive central nervous system disease. Alzheimer’s is a disease of the brain that causes problems with memory, thinking and behaviour. It is the most common form of dementia and accounting for 60 to 80 percent of all cases². Alzheimer's disease, or AD, is a progressive, incurable disease of the brain caused by the degeneration and eventual death of neurons (nerve cells) in several areas of the brain³. Since it is a degenerative disease, patients develop it with few symptoms at an earlier stage, but then it gradually becomes more predominant in how the patient lives his or her life, developing into dementia. Living with Alzheimer’s disease can be saddening for both the sufferer and the family. Highly sophisticated medical technology and pharmacological advances unfortunately failed to meet the needs of the Neurodegenerative patients. As a strong alternative system patient are approaching Ayurveda clinicians most of the time and due to that it becomes important for us to understand it based on Ayurvedic principles and manage the condition effectively.

Nidana and Samprapti:
The exact cause and mechanism by which Alzheimer’s disease develops is still unknown. But the main postulates are:
1. Genetic causes/gene mutations⁴
2. Oxidative damage to the nerve cells⁵
3. Aggregated protein’s in the nerve bodies⁶
4. Mitochondrial abnormalities⁷.
5. Abnormal neuronal cell death⁸.
Alzheimer’s disease AD is a progressive disease which shows these different types of manifestation in different patients depending upon the Samprapti present. A good physician should always analyse the condition of the patient and very diligently arrive at the Dosha-Dushya and Samprapti involved at any given stage of the disease.

DIAGNOSIS OF ALZHEIMER’S DISEASE (AD)

Alzheimer’s disease can be definitively diagnosed only after death, by linking clinical measures with an examination of brain tissue and pathology in an autopsy. Scientists are exploring ways to help physicians diagnose Alzheimer’s disease earlier and more accurately. Alzheimer’s Disease can be diagnosed clinically by physical and psychological examinations. Memory problems are typically one of the first warning signs of cognitive loss, possibly due to the development of Alzheimer’s disease. A decline in other aspects of cognition, such as word-finding vision/spatial issues, and impaired reasoning or judgment, may also signal the very early stages of Alzheimer’s disease. As Alzheimer’s disease progresses, memory loss worsens, and changes in other cognitive abilities are evident. Problems can include, for example, getting lost, trouble handling money and paying bills, repeating questions, taking longer to complete normal daily tasks, using poor judgment, and having some mood and personality changes. People often are diagnosed in this stage. Later stage there will be hallucinations, delusions, and paranoia, and may behave impulsively. People with severe Alzheimer’s cannot communicate and are completely dependent on others for their care18. From the Ayurvedic point of view in a nutshell these symptoms can be correlated with the vitiated Prana, Udana, Vyana, Sadhaka pitta, Avalambaka and Tarpaka Kapha, Rajas and Tamo Doshas which are involved in the different stages of pathogenesis of Smritibhramsa. All these symptoms are produced due to above mentioned factors.

MANAGEMENT

Alzheimer’s disease is life-changing for both the diagnosed individual and those close to him or her. While there is currently no cure, treatments are available that may help relieve some symptoms. A wise Ayurveda physician must have specific logic about where to start and how to progress the treatment while treating AD. We cannot say ‘completion of treatment’ as this may be considered as a Yapyaroga. Ayurved can provide a better relief if diagnosed and treated in the early stages of AD. The first stage of treatment involves Rookshana and intake of Amapachana medicines. Udwartana, Dhanyamlakizhi/Dhanyamladhara and intake of medicines like Shadangam kashaya, Saddharamam churna may be useful. We do Rookshana and Amapachana to make the Srotas ready for Snehana and Shodhana procedure. In most patients we can see that there is some relief by these processes itself as the Srotas may become slightly conducive to circulations. We can remember here Langhana (lightening therapy) is advised even before going for Brihana (nourishing)19. Properly administered Langhana itself bring about the clarity of senses, expulsion of wastes and lightness in body20. But one must never overdo the process as it may very much aggravate the Vatadosha. Then we must selectively do Snehana. If the progression is not rapid it must be predominantly Vatikam. In Vatika we can introduce Taila both internally and externally. Especially in PranaavrutaSamana, Chatushprakarasnehana (four types of unctuous substances that is Ghee, oil, fat and bone marrow) is being indicated. Medicines which are Brimhana (nourishing) and Vatanulomana (downward movement of Vata) should be selected like Kshirabala, Vatasini, Dhanwantram, Narayana, or Lakshaditaila. Mudhataliam with Balalakshadi, Kshirabala or Vatasini can be also done for Snehana. After proper Snehana (oilation), Swedana (Sudation), Shodhana should be done in the form of Vasti or Virechana, while the latter is found to be more effective in Pittanubandha condition.
Vasti is said to be the best in Vata Vyadhi, moreover it is said to be Ardhachikitsa. Yapanavastis are indicated in Avarana and also in Manovikara (psychological disturbances) and we can select Rajayapanavasti for the treatment of AD. The patient should be given proper counselling and mental support i.e. nothing but the Satavajaya Chikitsa as it is the best in management of Manovikara (psychological disturbances). This will be very helpful to manage the behavioural symptoms of patient of Alzheimer’s disease like agitation, wandering, anxiety, anger, and depression. Rasayana therapy including Medhya Rasayan and Achara Rasayana must be planned for the AD because it helps us in strengthening the host- defence mechanisms. It is very beautifully says about right mental and physical conduct, which when followed lead to a disease free life. A regulated lifestyle, wholesome diet, appropriate behaviour, and following ideal code of conduct as quoted in Ayurveda are best to prevent and manage the Neurodegenerative diseases in general and Alzheimer’s Disease (AD) in particular.

CONCLUSION

Alzheimer’s disease is an irreversible, progressive brain disease that slowly destroys the memory and thinking skills, and eventually even the ability to carry out the simplest tasks. The prevalence of Alzheimer’s disease is increasing rapidly and in spite of various medical advancement the exact pathogenesis and management is not known. System of Ayurveda with its longest clinical experiences can do a lot for preventing and management of AD and other neurodegenerative disorders. Ayurveda treatments like Shodhana Karma, Medhya Rasayana, Achara Rasayana, Satvavajaya Chikitsa etc. can effectively reduce the progression of disease and provide a better quality of life to patients of AD.

REFERENCES

7. Paula I. Moreira , Cristina Carvalho, Xiongwei Zhu, Mark A. Smith, George Perry, Mitochondrial dysfunction is a trigger of Alzheimer's disease pathophysiology, Biochimica et Biophysica Acta, 2010; 1802: 2–10.


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