



AYURVEDIC MANAGEMENT OF CANNABIS SATIVUM ADDICTION

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Abstract: Addiction is Habitual psychological or physiologic dependence on a substance or practice that is beyond voluntary control. It is a chronic brain disease that causes compulsive substance use despite harmful consequences. The Ayurveda has ancient science which has stores of herbal, mineral or herbo-mineral medication for prevention and cure of disease person including Addiction and Withdrawal of drugs abused.

Aims and Objective: To evaluate, elaborate and discussed the Cannabis addiction and to evaluate, elaborate and discussed the solution of Cannabis addiction as per Ayurveda.

Materials and Methods: Material related to Cannabis addiction and its 'solution' is collected from Ayurvedic text and text book of modern medicine respectively. The available commentaries of Ayurvedic samhitas have also referred to collect relevant matter. The index, non-index medical journals has also referred to collect information of relevant topic.

Discussion & Conclusion: Psychological Counseling, Abhyang, shiro-Abhyang, Shirodhara, Yoga and Meditation has important role and should be applied in case of addiction to rehabilitate the patient.

Keyword: Ayurveda, Herbal, Mineral, Addiction, Medication and Prevention.

Introduction: Ayurveda is not only a science of medicine, but also a theory of living life with awareness. Addiction is Habitual psychological or physiologic dependence on a substance or practice that is beyond voluntary control. It is a chronic brain disease that causes compulsive substance use despite harmful consequences. Without a clear understanding of the mental and physical effects of marijuana, its use on our youth, our families, and our society, we will never understand the ramifications it will have on the lives of our younger generation, the impact on their future, and its costs to our society. Globally, it is estimated that some 243 million people corresponding to some 5.2 per cent of the world population aged 15-64 had used an illicit drug. The Ayurveda has ancient science which has stores of herbal, mineral or herbo-mineral medication for prevention and cure of disease person including Addiction and Withdrawal of drugs abused. The *padansikkram* to withdrawal of any substance has suggested in Ayurveda which is unique method to taper up the abused drugs or replacement of that abused drugs ^[1].

Recreational therapy, Psychological Counseling is also suggested only in Alcoholism ^[2,3]. In this study management of cannabis addiction as per Ayurveda has discussed.

Aims and Objective

1. To evaluate, elaborate and discussed the Cannabis addiction.
2. To evaluate, elaborate and discussed the solution of Cannabis addiction as per Ayurveda.

Materials and Methods

Material related to Cannabis addiction and its 'solution' is collected from Ayurvedic text and text book of modern medicine respectively. The available commentaries of Ayurvedic samhitas have also referred to collect relevant matter. The index, non-index medical journals has also referred to collect information of relevant topic.

Conceptual Study

Definition

Addiction: A chronic, relapsing disease, characterized by compulsive drug seeking and

use, and by neurochemical and molecular changes in the brain.

Dependence: Often called physical dependence, an adaptive physiological state that occurs with regular drug use and results in a withdrawal syndrome when drug use is stopped.

Cannabis and Addiction: *Cannabis sativa* is a member of the family Cannabinaceae. *Cannabis sativa* preparation is known by various names worldwide. It is called Marijuana in America; Bhang, Ganja and Charas in India; Kif in North Africa; Dogga in South Africa; Krori in Tunisia; Habak in Turkey; Hashish in Middle East; Djomba or Liamba in Central Africa and Brazil; Sodom, Tampl, Gum, Gauge and stuff in Kinshasa, Swala and Whiskt in Ghana; Grifa in Mexico and Ma- cohna in some parts of South America [4]. Presently, the plant is popularly known only as a source of narcotics in various forms. It is illegal to produce, manufacture, possess, sell, purchase, transport, use, consume, import, export any narcotic drug or psychotropic substance except for medical or scientific

purposes under the Narcotic Drugs and Psychotropic Substances Act in India. Long-term cannabis use can lead to tolerance to the effects of THC, as well as addiction. Cannabis dependence is the most common type of drug dependence in many parts of the world. Young people are especially susceptible to cannabis addiction. THC content and the potency of cannabis have been increasing over the past 30 years, which may cause users to develop heightened responses to the drug, as well as adverse effects. Higher THC content can increase anxiety, depression, and psychotic symptoms, and can increase the risk of psychotic symptoms, dependence, and increase adverse effects on the respiratory and cardiovascular systems in regular users. [5,6].

Route of Administration

Cannabis

- Bhang-Oral
- Ganja/Marijuana-Smoked
- Hashish/Charas-Smoked

Table-1. Long term effect of cannabis sativum and shrotasvikruti

Drug	Long term effect	Strotasduшти
Cannabis	Bronchitis, asthma, sinusitis, or chronic redness of the eyes Sterility, reduces immunity, Amotivational syndrome, Psychosis [7].	Pranvah, raktavah, manovah.

Withdrawal Effects of Cannabis

Clinical Feature: Agitation. Anxiety, Drowsiness, Fear, Feeling of Unreality, Headache, Loss of Appetite, Hunger feeling, Mood Swings, Nausea & Vomiting, Sleep Difficulties, Racing Thought etc [8].

Ayurvedic Management of Cannabis

Addiction: The goal of a good treatment program is to discover and heal the underlying causes of dependency on drugs. Pharmacotherapeutic intervention has an important role play in the management of substance abuse. It is important not only in the withdrawal treatment, but also in the long-term management (relapse prevention). In this firstly we stop the abuse drug by replacing it by Ayurvedic medicine having same effects like

abused drug and the medicine is decreasing by Quad-part-manner (*padanshikkram*) or abused drug itself decreasing in quad-part- manner and finally fully stop the drug. The Ayurveda has suggested a '*PadanshikKrama*' to avoid the harmful effect due to sudden withdrawal of *Satmya* Substance. By the method of *padanshikkram* the dose of drugs are decreasing step wise so that there are less chances of appearing withdrawal symptoms. If the withdrawal symptoms are appears then they are treated symptomatically. Though the drugs used in the process of detoxification will be minimized the withdrawal effect, the psychosomatic clinical manifestation which will be observed at that time, have to be managed by giving symptomatic management.

Table-2. Shows the Symptomatic Management of Addiction during Detoxification

Clinical feature	Symptomatic Management
Nausea & Vomiting (WHO)	<i>Ela</i> (Cardamom) powder [9] is given in a dose of 250 milligrams to 500 milligrams for adults two to three times a day with a little warm water or honey. It is advisable to consume the powder on an empty stomach or half-an-hour before eating meals.
Headache (WHO)	Dose of the powder <i>Pippalimoola</i> (Root of <i>Piper longum</i> Linn.) for adults is 2 to 3 grams, to be taken twice daily, preferably on an empty stomach mixed with 3 to 5 gm of ghee or butter or honey and followed by warm water or milk.
Hunger feeling	The seeds of <i>Apamarga</i> (<i>Achyranthesaspera</i>) should be cooked like rice by adding milk to make <i>kheer</i> (<i>payasa</i> - milk & rice preparation) [10].
Insomnia	<i>GudaPippalimool</i> Yoga 4gm with 1 Glass of Milk at bed time [11]

Along with internal medication external application of medicine and procedures in

varieties of ways have own place in treatment of Substance use disorders

Abhyang (Massage): It is done with warm, herb-infused oil and takes only about 15-30 minutes for whole body massage. It helps pacify Vata dosha, relieving stress, anxiety and feeling of being overwhelmed and spaced-out.

Shiro Abhyanga (Head to Massage): Application of medicated oil to the head is said to be Shiro-Abhyanga. Head is one of the important vital organs (Marmas) and having all sense organs in it and hence one should protect it from stress and strain by doing Shiro-Abhyanga.

Shirodhara: Pouring of fluids like decoction, medicated oil, medicated milk, medicated butter milk and water over head continuously for a specific period is called shirodhara, which is effective in insomnia. Normally 20-30 minutes are the duration for Dhara and it can be continued for 15 to 21 days.

Non-pharmacological treatment is play vital role and has its own place in Substance Use Disorder. Especially this treatment is for rehabilitation of patient so it is continuous for longer period. It includes psychological counseling, Recreational therapy, yoga (meditation, asana, pranayam), nutritional diet and daily schedule. Out of this psychological counseling is started from first day of treatment and lefts are started as per the patient condition or generally after a week of treatment because in duration of withdrawal symptoms it is difficult to applied this non pharmacological treatment.

Discussion: Cannabis addiction is the major problem in the world including India. As the number of Cannabis addicts is fast rising in the country, it is important for their families and general practitioners to understand the psychosomatic problems caused by drug abused. Addiction is a state of physical or psychological dependence on a substance. Psychological counseling has very important role in de-addiction. It is also mentioned in Ayurvedic samhita which aware the patient from ill effects of drug addiction and give will power to come out from drug addiction.

Conclusion: Padansik Kram is a unique method to avoid the sudden withdrawal of harmful substance including drugs. By replacing the addicted drugs with medicated drugs or same drug in taper up method detoxification should be achieved. Psychological Counseling, *Abhyang*, *shiro-Abhyang*, *Shirodhara*, *Yoga* and *Meditation* has important role and should be applied in case of addiction to rehabilitate the patient.

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