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ROLE OF PSYCHOLOGICAL FACTORS IN IBD

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ABSTRACT:

Disorders of Gastro intestinal tract are common in the present era. They have increased to such an extent that they now include autoimmune disorders as well. Inflammatory Bowel Disease (IBD) is one such autoimmune disease. It is an idiopathic disease involving an immune response of the body to its own intestinal tract. Influence of psychological factors on IBD causation are stress(chinta), depression, anxiety (udvega) etc. The stress induces changes in GI function, such as increased intestinal permeability and visceral sensitivity and altered GI gut motility, which could lead to IBD symptoms. In today's fast-moving world, everybody is under a sense of urgency, stress or any other psychological influence. Our *shastra* says food should be consumed at the right time, in the right place, in a proper state of mind. In contrary to this, the dining table has now become a round table conference for discussing all the matters and exuberating the emotions during the intake of food. The way you are feeling when you eat has an impact on how you digest. So psychological factors have become a major cause of IBD. Different ways can be adopted to treat IBD as Deepana, Pachana, Shodhana, and Rasayana, following proper Dinacharya, Rutucharya, and Sadvrutta, Ahara should be consumed as per Ahara Vidhi Vidhana. Population based studies estimate the prevalence of IBD to 42 %. Considering the increasing rate of gastrointestinal disease across the world, the treatment approach through Ayurveda is the need of the hour. So in order to remove a disease from its root, the causative factor should be understood and ruled out completely. So in this study, analysis of role of psychological factors in IBD will be done.

<u>Keywords:</u> IBD, Stress, Psychological factors and *Manasika Bhava*.

INTRODUCTION:

Gastrointestinal disorder is any condition that occurs within the gastrointestinal tract which is commonly seen in the present era. Inflammatory bowel disease (IBD), one among the gastrointestinal tract disorders encompasses ulcerative colitis (UC) and Crohn's disease (CD). IBD is characterised by an unpredictable, chronic, relapsing, and remitting inflammation course of the gastrointestinal tract. ¹ IBD has emerged as a

global disease. The prevalence of IBD is known to be high in western countries, but now there are rising incidences and prevalence of the disease in India, which tops the Southeast Asian (SEA) countries.² The effects of IBD on a patient's life may be extensively detrimental due to the variety of severe symptomatology (i.e., frequent, bloody diarrhoea with the urgency of defecation and faecal incontinence, fatigue, abdominal pain, and weight loss), the early onset of the disease (between the ages of 15 and 30), the fluctuating feature of the disease course, and the lack of a cure.³ Stress, depression, and anxiety are three psychological factors that influence IBD causation. The stress induces changes in GI function, such as increased intestinal permeability and visceral sensitivity and altered GI gut motility, which could lead to IBD symptoms. According to *Ayurveda*, a number of *manasika bhavas* (emotions) are the underlying causes of numerous illnesses. Numerous *Manasika Bhavas*, such as desire (*kaama*), anger (*krodha*), greed (*lobha*), delusion (*moha*), jealousy (*irsya*), grief (*shoka*), anxiety (*udvega*), fear (*bhaya*), etc., disrupt the homeostasis of the body and mind by vitiating *Manasika dosha*, *Sharirika dosha*, and *Agni*.

METHODOLOGY:

Data will be collected from the *brihatrayee*, *laghutrayee* and other *Ayurvedic* classics, different contemporary modern books, research articles, relevant journals, periodicals, magazines and other digital media, internet, studies conducted on related works and other sources. The role of psychological factors on the IBD will be analysed.

REVIEW OF LITERATURE:

> Inflammatory Bowel Disease (IBD)

The inflammatory bowel disease (IBD) is an idiopathic disease involving an immune reaction of the body to its own intestinal tract. IBD has 2 major disorder which includes 1. Crohn's disease and 2. Ulcerative colitis.

Crohn's disease is a chronic inflammatory disease of the intestines. It primarily causes ulcerations of
the small and large intestines, but can affect the digestive system anywhere from the mouth to the
anus.

Signs and symptoms:

Diarrhea

Constipation

Pain in the abdomen

- Bloating after eating
- Pain or bleeding with bowel movement
- 2. Ulcerative colitis is a chronic disease of the large intestine, also known as the colon, in which the lining of the colon becomes inflamed and develops tiny open sores or ulcers that produce pus and mucous.

Signs and symptoms:

- Abdominal discomfort or cramps
- Rectal bleeding

Diarrhea

Passage of mucus

Tenesmus⁴

> IBD and its understanding in Ayurveda.

In Ayurveda, symptoms of IBD can be seen in Grahani, pittaja atisara, rakta atisara, bhayaja atisara and shokaja atisara.

According to Ayurveda, Crohn's disease can be compared to Grahani disease. In Ayurveda, "grahani" is actually an anatomical term to describe the small intestines (specifically the duodenum, ileum, and jejunum). Any vitiation or inflammation to this particular part caused by imbalanced doshas (*Vata, Pitta*, and *Kapha*) can cause a wide variety of symptoms similar to those of Crohn's disease. Like muhur baddham and muhur dravam, which means that stool is sometimes hard and sometimes liquid. 5" atisrustam vibaddham va dravam" means the stool is frequent, constipated, and liquid. 6

Clinically, *Pittaja grahani* is characterised by watery stools, which is similar to Crohn's disease.⁷

Signs and symptoms of ulcerative colitis:

In *Pittatisara*, the patient passes stool that is yellow, green, blue, or black, which is associated with *Raktapitta* and foul smell(durgandha). At the same time, the patient experience general symptoms such as thirst, burning sensation, sweating, fainting, abdominal pain, inflammation(bradhna), and suppuration(paaka) in the anus.⁸ While in *Raktatisara*, loose stool with blood along with thirst, pain, burning sensations in the abdomen, and inflammation in the anorectal region(gudapaka). ⁹ The patients of pittatisara passes warm faeces with a foul smell and resemblance to mutton wash water (bright red in color). The patient is thirsty, fainting and burning sensation, fever and inflammation in the anorectal region(gudapaka).¹⁰ The patient of *Pittatisara* passes yellow, black, yellow or greenish faecal matter mixed with blood with a foul smell, associated with thirst, fainting, perspiration and burning sensation.¹¹ If the patient of pittatisara continuously consumes Pitta aggravating factors or food articles then subject will develop Rakttatisara(loose stool with blood) with symptoms of thirst and fever. 12 Shokaja or Bhayaja Atisara along with Rakta (blood), Rakta resembles Kakananti (Gunja - Abrus precatorius) in colour (bright red) either mixed with stool or without stool with foul smell or without smell and Faeces is eliminated with difficulty.

Table 1: Comparison of signs and symptoms of Ulcerative colitis with *Pittatisara*, *Raktatisara* and *Bayaja* or Shokaja atisara.

Signs and Symptoms of ulcerative colitis		Pittatisara	Raktatisara	Shokaja or Bhayaja atisara
1.	Increased frequency of stool	++	++	
2.	Blood with feces	+	++	+
3.	Mucous discharge	-	+	
4.	Urgency and tenesmus	+	+	
5.	Loose consistency of stool	++	++	
6.	Abdominal pain	+	+	+
7.	Involvement of rectal mucosa	+	+	

PSYCHOLOGICAL FACTORS (MANASIKA BHAVA) IN IBD:

Both depression and anxiety have been identified as significant experiences in inflammatory bowel disease (IBD). ¹³ Stress has been shown to interfere with the digestive system's normal functions. The large intestine is particularly sensitive to stress, which tends to slow or even stop its activity and it is a major cause of constipation. 14 This causes increased production of pro-inflammatory mediators, which will lead to inflammation of the mucosal layer. A variety of epithelial defects have been described in Crohn's disease and ulcerative colitis.

Psychological Involvement in IBD

The mentality has a significant impact on IBD. The awareness of colon spasms is increased by stress and worry. Stress has an impact on the immune system, which may cause IBD. The ENS, ANS and CNS regulate the neural system of the GIT. The ENS controls blood flow in addition to motility, fluid exchange and fluid secretion. The vagal and sacral plexuses regulate parasympathetic nerve activity. This encourages sphincter relaxation and the sympathetic nervous system keeps sphincters contracting. The gut microbiota, according to gut-brain psychology is an essential component of the gut brain and communicates with the brain via the microbiota-gut-brain axis. Gut microbes are engaged in a number of normal mental occurrences and processes, they play a role in the pathogenesis of many neurological and psychiatric illnesses. The microbiota in the gut begin to disappear as a result of various stress factors, poor diet, and regimen, resulting in a variety of diseases, including IBD ¹⁵.

MANASIKA BHAVA IN IBD

Rajas and Tamas are the Manasika doshas. Disorders brought about by Rajas and Tamas are kama, krodha, lobha, moha, irshya, mana, mada, shoka, chitta, udvega, bhaya and harsha. 16 There is no direct reference to Manasika Nidana in Grahani Roga. But in Vimana Sthana Adhyaya, poor digestion occurs due to increased emotional factors, like, Krodha Lobha Irshya Shoka... Upatapta Manasa, Upatapta Manasa(stress) leads to Agnidusti (Mandagni, Vishamagni, or Tikshnagni, collectively called Grahani Dosha), which leads to changes in bowel habits and abdominal pain.¹⁷ In the state of chinta, krodha, bhaya, shoka, dukkha and shayyaprajagare, the modest meal will not undergo the proper digestion even if the person is having samaagni. 18 Pittatisara is brought on by an excessive consumption of sour, salty, pungent, alkaline, hot, and irritating foods, excessive intake of food as well as continuous exposure to the sun, fire, and hot wind and psychological factors of stress, anger. ¹⁹ Continuous intake of *pitta* vitiating food by a *Pittatisara* patient leads to *Raktatisara*.²⁰ Similarly *Acharya Charaka*, *Acharya Sushruta* also stated same. ²¹ *Shoka* and *Bhaya* are the causative factors for the *shokaja* and *bhayaja atisara*.²² When manas is affected by *bhaya* and *shoka*, *vayu* and *pitta* liquify *mala* and expel it, resulting in *atisara*.²³

Management

The *Ayurvedic* approach to the management of diseases includes both preventive and curative aspects. Preventive aspects consist of *Dinacharya, Ritucharya, Sadvritta Palana*, and *Achara Rasayana*. These practises have a positive influence on physical and mental health. Some social behaviour and conduct will have all of the qualities mentioned in *Achara Rasayana* (rejuvenating regimens) therapy.²⁴ Curative aspects include *Daivavyapasraya chikitsa*, *Yuktivyapasraya chikitsa* and *Satvavajaya*.

DISCUSSION:

In present era, due to change in lifestyle, mankind are giving least importance to their diet and dietary rules. If Ayurvedic dietary guidelines are followed, many diseases can be prevented arising merely due to faulty dietary habits and maintain *Swastha* status of *Shareera* and *Manas*.

- 1. Relation between manas and shareera: Sharirika and manasika doshas are always inter related to each other. If one is affected the other is also affected. And one is Adhara and the other is Adheya, hence one can influence the other. Thus it is clear that somatic disorders have a Psychological backup. Due to nidana sevena- vitiates vatadi shareerika dosha and Raja tama Manasa dosha- takes ashraya(located) in Hrudaya(heart) and Mastishka(brain)- vitiates Manovahasrotas- produce Manovyadhi(mental diseases), if vitiates rasavaha srotas produce shareeravyadhi (physical diseases).
- 2. <u>Manasika bhava and agni</u>: persons consume food in the effect of *manasika bhavas* for long duration the *manasika bhavas* leads to vitiation of *manasika dosha* which in turn vitiate the *sharirika dosha* (*kama, shoka, bhaya vitiates vata dosha; krodha* vitiates *pitta dosha*). This process continues for longer period leads to *agnimandhya*(diminished *agni*). *Hrudaya*(heart) is the location of *manas*, due to the *manasika dosha hrudaya* get affected. As *hrudaya* is *moolasthana* of *rasavaha srotas* also, if there is *hrudhaya dusti* it may lead to improper formation of *rasa*. When the genesis of *rasa* gets hampered invariably *ama* is formed.
- 3. Manasika bhava in IBD: Manasika hetu (psychological factors) causes the vitiation of Dosha and Agni which causes Agnimandya (loss of digestive fire) and that leads to Avipaka (improper digestion) and in this stage even light diet cannot be digested. It remains as it is in Amashaya and produces Shuktatva (fermented/acetonus), which leads to formation of Ama (Annavisha-toxins). This Annavisha produces Ajirna (indigestion). Hence, once Agni Dushti occurs it results in Avipaka, Ajirna and this further damages the Agni. Agnidushti causes Shuktapaka of food, it further disturbs the Agni. Thus, Amavisha disturbs the Grahani and Atisara.
- 4. *Grahani* basically caused by the *Durbalagni* (diminished *Agni*) leads to *Rasa kshaya* i.e. reduced circulating nutrition place in *shareera*(body) there will be *Uttarottara dhatu kshaya* (progressive or subsequent *dhatu* decreased) i.e. *Rakta*, *Mamsa*...because adequate nutrition is required for normal metabolic functions. In *Grahaniroga* due to the impaired *agni* the food which has been consumed by the individual will not get

digested properly. It remains as it is in Amashaya and produces fermented, which leads to formation of Ama / Annavisha(toxins). It disturbs the grahani causes the grahani roga.

5. Due to excessive intake of causative factors like shoka, bhaya and krodha leads to the vata and pitta dosha vitiation leads to the Agnimandhya, due to its drava(fluidity) properties purishavaha and udakavaha sroto dusti occurs. Further leads to breaks the stool due to its hotness, fluidity and laxatives properties leads to pittatisara. Further excessive intake of pitta vitiating food and drinks causes the vitiation of rakta dhatu leads to raktatisara (loose stool with blood), bhayaja and shokaja atisara.

TREATMENT

Mani Dharana and mantra chanting are both a part of the treatment known as Daivavyapasraya Chikitsa. There was significant limbic deactivation and brain region deactivation during "OM" chanting. ²⁵ These treatments frequently lower stress levels, boost self-esteem, and promote mental health. ²⁶

The manasika bhava like krodha aggravates the pitta dosha. Krodha via teekshna and ushna vitiates the pitta dosha. For that we will treat with sheetala upacharas, which are opposite in gunas.

The underlying cause of this illness is angimandya. It is important to first identify the signs of Ama and Pakva avastha in grahani and Atisara. This is first line of defence. The fundamental idea to keep in mind is whether the Grahani or Atisara is ama (undigested) or pakvavastha (digested). In case of Amavasta Langhana (fasting) is recommended followed by yavagu pana with Deepana and Pachana medications like Shunti, Chitraka etc.

There are five methods in Satwawajaya Chikitsa: Jnana, Vijnana, Dhairya, Smriti, and Samadhi. Jnana Chikitsa is assisting the patient in discovering his own awareness. One's thoughts, feelings, beliefs, and experiences with regard to oneself are covered in this issue. These activities will lead to higher levels of accountability, behaviour control, and emotional growth.

Vignana provides Shastrajnana, which provides direction, in order to better understanding of the nature of illness and create coping mechanisms. Here, patients can learn about potential emergencies, their effects, and risk factors. Dhairya Chikitsa upholds mental equilibrium. In this method, the patient's confidence is increased and any unfavourable beliefs is identified. Interpersonal interactions so get better, and coping abilities get better. The hidden tensions that were the primary initiator of an emotional illness are understood and explained through Smriti Chikitsa. Samadhi is attained through meditation when the mind is in control. Practice of samadhi helps to manage deeper mental thoughts that are the root of illness.

CONCLUSION:

The abdomen is the sounding board of the emotion and more than any other system reflects disturbances in the emotional sphere. Hence it is that from mouth to anus occur a variety of symptoms included within the digestion, "functional disorders of the gastrointestinal tract". Hence, it can be concluded that Grahani Roga and atisara as a psychosomatic disease, since stress factor have a role in its pathophysiology. As Psychology also plays a great role in maintaining the health of a person. An abnormal psychology of a person in terms of anxiety, anger, greediness, etc. would affect the physiology of the digestion, by that; they are disturbing the homeostasis, which interns *Grahani*. In contemporary science only symptomatic treatment & assurance is given to the patient. Since Ayurveda treats the Rogi as a whole entity the mental state of a person is taken into consider before treatment.

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