

CASE REPORT

Role of Ayurveda in the Management of Alcohol Addiction: A Case Report

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ARTICLE INFO

Article history:

Received on: 11-04-2025

Accepted on: 08-05-2025

Published on: 31-05-2025

Key words:

Alcohol addiction,
CIWA Score,
Madatyā,
Shaman Chikitsa,
Shirodhara

ABSTRACT

Introduction: When significant doses of ethyl alcohol beverages are consumed on a regular basis for an extended period of time and are accompanied by a morbid need to drink alcohol, it is considered alcohol addiction.

Main Clinical Findings: A 45-year-old male who had been drinking for 5 years took a 3-day break. As a result, he began to experience anxiety, weakness, tremors, decreased appetite, and weariness as symptoms of alcohol addiction, along with disrupted mental status and sleep.

Diagnosis: The CIWA-Ar scale was used to evaluate the patient's status.

Interventions: The patient was given internal medicine as well as *Shirodhara* for 1 month.

Outcome: For 1 month, he received indoor patient care using a mix of internal pharmaceuticals and Ayurvedic treatments. The patient's condition, mental illness, and signs and symptoms are all improved by this treatment.

Conclusion: As a conclusion, it is imperative that the nation, society, families, addicts, and women who bear the brunt of this issue focus more on de-addiction in a method that yields the best results and has no negative side effects.

1. INTRODUCTION

The World Health Organization (WHO) has released data showing that for people over 15, the annual total amount of pure alcohol consumed per capita is 6.2 L, or 13.5 g, of pure alcohol.^[1] In *Ayurvedadipika*, Acharya Chakrapani said that an *Apathya* (unwholesome) material is more or less innocuous if it becomes homologous with repeated use, even though it could be poisonous.^[2] A person who has quit drinking alcohol experiences *Dhvamsaka* and *Vikshaya* if he suddenly resumes excessive alcohol use.^[3] This word was also explained by Acharya Kashyap under the *Panapkrām* category.^[4] The three management steps that are available are intervention, detoxification, and rehabilitation. *Trividh Parikshan*, which combines *Prashan* (questioning), *Darshan* (visual observation), and *Sparshan* (tactile sensing), is a special

technique for diagnosing and assessing the degree of addiction.^[5] Internal medication, *Panchakarma* (purification therapies), and dietary and lifestyle modifications are among the therapy options.

1.1. Chief Complaints

For the previous month, the patient has complained of weakness, exhaustion, decreased appetite, anxiety, weakness, tremors, and decreased appetite symptoms of alcohol addiction, along with disrupted mental status and sleep, as well as pain and watery eyes.

1.2. History of Present Illness

A 45-year-old male patient who had been in good condition before began exhibiting a number of symptoms, such as bodily aches, confusion, decreased appetite, generalized weakness, and sleep disturbances throughout the preceding month. After obtaining a medical history, it was discovered that the patient had started drinking 5 years prior as a result of stress at work. He started off consuming 180 mL of alcohol

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every day, but over time, his intake grew. He sought treatment at the de-addiction center 2 years ago, where he received therapy for 10 days. He then stopped drinking for a few months, but he later relapsed and was taken to one of the de-addiction centers for a related issue. He was able to avoid drinking for a year, but 2 months before his current presentation, he had a drink at a friend's wedding and started drinking every day again. Seeking additional care, he came to our hospital.

2. CLINICAL RESULTS

- Physical examination: Upon examination, the patient's blood pressure was 120/70 mmHg, their pulse was 76 beats/min, their eyes were pale, their belly was soft and non-tender, their bowel habits were clear, and their chest was clear.
- Systemic examination RS: Equal bilateral air entry; central nervous system: Confused and sleepy; CVS: S1 and S2 audible; cerebellar: No ataxia, no tandem gait, no dysmetria, no dysdiadochokinesia.
- Assessment: Based on the improvements seen at the clinical level, the therapy's effectiveness was evaluated.

2.1. CIWA-Ar Scale^[6]

The Clinical Institute Withdrawal Assessment for Alcohol is a 10-item scale used to assess and treat alcohol withdrawal. It is frequently shortened to CIWA or CIWA-Ar. An aggregate number that corresponds to the intensity of alcohol withdrawal is produced by adding the scores for each item on the scale. A score of less than or equal to 10 is considered mild alcohol withdrawal, a score of 11 to 15 is considered moderate, and any score of 16 or above is considered severe.

2.2. Investigation

- Ultrasonography – Grade II fatty changes in the liver
- Hemoglobin (Hb) level – 8.3 g/dL
- SGOT – 340 IU/L
- SGPT level – 121 IU/L.

The platelet count, SGOT, SGPT, and Hb levels all improved between the first and second follow-ups, suggesting that the underlying disease has improved the effect of treatment is given in table 1.

2.3. Management Protocol

Treatment for addiction with Ayurveda involves counselling, identifying the underlying cause of addiction, counselling for de-addiction, balancing the aggravated dosha at the body-mind level, boosting the immune system, detoxifying, and rejuvenating the body [Table 2].

2.4. Outcome of the Treatment

The CIWA-Ar scale was used to evaluate the patient's status after 30 days of treatment, and it was found that all symptoms were greatly decreased after 15 days. After 30 days, the patient's headache and tremors were subsiding, their sleep was returning to normal, their visual disturbance symptoms had subsided, and overall level of exhaustion had decreased. The therapy caused almost all of the symptoms to go away. All things considered, the patient's functional capacity improved.

2.5. Follow-Up

After therapy, symptomatic medication, re-counseling, and long-term follow-up are provided to prevent relapse. Inform the patient and their

family about the negative effects of drug and alcohol misuse on the body, mind, and society.

3. DISCUSSION

Long-term alcohol use is a symptom of the medical condition known as alcoholism. Up to 41% of suicides are caused by alcohol, and 23% of intentional self-harmers suffer from alcohol dependence.^[7] According to WHO's estimation of the worldwide burden of alcohol-related disease, as previously indicated, alcohol is accountable for 4% of the world's illness burden.^[8] The distinctive *Samprapti*, *Lakshan* (signs and symptoms), and particular treatment of alcoholism have all been discussed in Ayurveda. *Deepan-pachan* was the first medication used in the patient's initial treatment. Abruptly stopping alcohol alters the *Agni*, which keeps the body in balance and causes ama to form. *Srotorodha* is brought on by the ama, which results in a balancing deficit. The combination of *Vidarikand churna*, *Ashwagandha churna*,^[9] and *Mukta Shukti*^[10] given to the patient in the current case study functions as a *balya* (tonic), balancing the *vata* and *kapha doshas*. The patient's health improved as a result of the *oja-vardhak* and anti-craving actions. The antioxidant properties of *Vidarikand* also help reduce alcohol consumption. *Sheeta virya properties of Mukta shukti's* (cold potency) lowers excess pitta dosha, whereas *Ashwagandha's* antioxidant and dopaminergic action helps prevent anxiety, depression, and cognitive impairment. Because of its *Deepan-pachan* characteristic, *Ajmodadi churna* is given to patients. *Vishtinduk vati* is used to cure patients' tremors. *Shirodhara* therapy, a component of Panchakarma therapy, is provided by Ayurveda to support mental well-being and is highly successful in fostering restful sleep and lowering stress levels.^[11] Stress, insomnia, and anxiety are related to *Amarsundari Vati* is crucial for recovering from withdrawal and past harm.^[12]

4. CONCLUSION

Alcohol withdrawal symptoms and related disorders are successfully reduced by Ayurvedic treatment plans combined with rehabilitation techniques. Depending on how severe the illness is, *shamana* or even *shodhana* therapy can be used, which is customized to the patient's strength and illness.

5. INFORMED CONSENT

Written informed consent was obtained from the patient for the publication of this case report.

6. ACKNOWLEDGEMENT

Nil

7. DECLARATION OF PATIENT CONSENT

All necessary patient consent papers have been received, the authors confirm. Anonymity cannot be guaranteed, but the patient is aware that her name and initials will not be published and that every precaution will be taken to hide her identity.

8. DATA AVAILABILITY

All collected data, including recorded measurements, are appropriately stored electronically. The corresponding author retains custody of these records and can make them available under suitable circumstances.

9. AUTHOR'S CONTRIBUTIONS

Conceptualization, Protocol preparation, patient recruitment, and follow-up writing and correspondence.

10. FUNDING

Nil.

11. ETHICAL APPROVALS

This study does not require ethical approval.

12. CONFLICTS OF INTEREST

There are no conflicts of interest.

13. FINANCIAL SUPPORT AND SPONSORSHIP

Nil.

14. PUBLISHERS NOTE

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How to cite this article:

Sharma M, Bairwa JP, Goyal S. Role of Ayurveda in the Management of Alcohol Addiction: A Case Report. *IRJAY*. [online] 2025;8(5):29-32.

Available from: <https://irjay.com>

DOI link- <https://doi.org/10.48165/IRJAY.2025.80505>

Table 1: Effect of treatment

Symptoms	BT 1 st day	During treatment 15 th day	AT 30 th day
Nausea/vomiting	2	1	0
Tremors	3	2	0
Paroxysmal sweats	1	0	0
Anxiety	4	3	1
Agitation	2	2	0
Tactile disturbances	2	0	0
Auditory disturbances	3	1	0
Visual disturbances	3	1	1
Headache and fullness in the head	3	2	0
Orientation and clouding of sensorium	2	1	0
Total	25	13	2

Table 2: The method used to treat patients

Medicine	Dose	Anupan	Days	Doshaghanta	Remark
<i>Ajmodadi churna</i>	2 g	Lukewarm Water	20 days	<i>Vatakaphara</i>	Deepan-pachan
<i>Vishtindukadi vati</i>	1 tablet BD	Milk	7 days	<i>Vatakaphara</i>	Analgesic, nervine, and cardiac stimulant
<i>Vidarikand churna</i> 3 g <i>Ashwagandha churna</i> 2 g <i>Mukta Shukti</i> 500 mg	5 g BD	Milk	30 days	<i>Vatakaphara</i>	Anti-craving, balya
<i>Saraswatarishta</i>	20 mL	Lukewarm Water	15 days	<i>Vatapitthara</i>	Anti-anxiety, help lower cortisol levels, reduce stress, and improve sleep quality
<i>Amarsundari vati</i>	2 tablet Od (at night)	Lukewarm Water	20 days		Anti-anxiety, improve sleep quality
<i>Shirodhara</i> – Brahmi tail mixed with <i>chandanbala</i> <i>lakshadi tail</i> and til tail	5 day	-	14 days	<i>Vataghana</i>	Anti-anxiety, improve sleep quality
<i>Brahmi vati</i>	2 tablet BD	Milk	15 days	<i>Vatapitthara</i>	Anti-anxiety, improve sleep quality
<i>Shrikhandasva</i>	20 mL	Water	15 days		Referred to in <i>Bhaishajyaratnavali</i> , <i>Srikhandasava</i> is utilized as <i>Madatyayadhikara</i> to help with intoxication and related issues, as well as to reduce the negative effects of alcoholism.
<i>Phaltrikadi kwath</i>	20 mL	Water	15 days	<i>Pittakaphahara</i>	<i>Yakriduttejaka</i> , <i>Shothahara</i> , <i>Pandurogahar</i> , <i>Rechan</i> , <i>Deepan</i>