



COMPREHENSIVE REVIEW OF HERBS USED IN MAJOR DEPRESSIVE DISORDERS

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Abstract: A thorough assessment of preclinical research on Ayurvedic herbal medications used as antidepressants in psychopharmacology is need of the hour to combat depression effectively. These results allow for the planning of additional clinical applications as well as a better understanding of the medication's mode of action and dosage form. In this review, popular psychotropic herbal medications were identified using electronic search engines. In addition to a scientific assessment of preclinical studies for the treatment of depression, a review was done to ascertain the medications' mechanisms of action. The review was constructed emphasizing herbal remedies in depression.

Keywords – Antidepressant, Ayurveda, Herbal medicine, Medhya.

I. INTRODUCTION

322 million people worldwide suffer from depression, a serious mental health issue¹. According to research from 2015, it is a significant contributor to the 7.5% global disability rate and the about 800,000 suicides each year, mostly among the elderly². Due to additional causes such as systemic diseases with higher co-morbidity, decreased physical activity, family issues, and income loss, depression seems to impact elderly age groups more than other age groups³. Therefore, it is pertinent to recognise depression early on and treat it, and it should be treated seriously as a health concern. Outside of the traditional medical system, there has been interest generated by the expanding diversity in the etiopathogenesis and the difficulties in treating patients without adverse responses. The traditional system of medicines comprises layers of promising herbs therapeutically effective in the management of Depressive disorder. The present paper will enumerate some of the herbal medicines used in depressive disorders.

II. METHOD

The popular psychotropic herbal medications were identified using electronic search engines.

III. RESULTS

In Ayurveda, the term "Unmada" is frequently used to represent various mental illnesses. Kaphaja Unmada claims that suppressing one's mental faculties causes loss of interest, social withdrawal, intellectual deterioration, and other cognitive problems. Relationships between people, within families, and throughout society are strained as a result. It's possible that Kaphaja Unmada's symptoms are similar to those of depression. Ayurvedic science has three sorts of therapy procedures described for managing a variety of disorders affecting both the body and the mind⁴.

- Daivavyapashraya - Also known as therapy by faith or divine therapy where in Mantra, Aushadha, Mani, Mangala, Bali, Homa, etc. are primarily used.
- Yuktivyapashraya - This is the deliberate adoption of a course of treatment, including the deliberate use of food and medications. In treating depression, the unmada's therapeutic recommendations—shodhana treatment then shamana—are followed. There is an imbalance of vitiated kapha over vitiated vata in depression. As a result, according to Charaka, "sasneha mridushodhana" must first be boned to remove an avarna. If the dosha is vitiated negatively, then Snehapana must be performed with the goal of reducing vitiated kapha while also restoring vata's natural functioning. It is necessary to administe Vamana therapy in order to eliminate vitiated Kapha Dosha. Virechana can be given to a subject who has alpa bala. Hapushadi Yapana Basti is shown to be effective in treating depressive condition. Additionally, basti is recommended

to remove vitiated kapha from the intestines. Nasya is suggested to relieve vitiated kapha caused by shira pradesha. The efficacy of Atasi taila, Panchagavya ghrita, Jyotishmati taila, and Brahmi ghrita nasya in treating depression has been established. Additionally, based on the amount of dosha vitiated, medications with teekshna guna, ushna veerya, kaphavatahara property, and medhya action can be advised⁴. (Table 1).

- c) Satvavajaya Chikitsa - The Satvavajaya Chikitsa consists of a number of psychotherapies that aid in preventing Manas from travelling in the direction of the Ahita Arthas. The finest remedy for mano dosha (vitiating rajas and tamas) is satvavajaya chikitsa⁴.

Table 1: Antidepressant herbs in Ayurveda

SI No	Name	Scientific name	Pharmacological action
I.	Vacha	<i>Acorus calamus</i>	MAO inhibitor ⁵
II.	Brahmi	<i>Bacopa monnieri</i>	GABAergic actions ⁶
III.	Shankhapushpi	<i>Convolvulus pluricolis</i>	CNS depressant ⁷
IV.	Jatamansi	<i>Nardostachys jatamansi</i>	MAO inhibitor ⁸
V.	Yashtimadhu	<i>Glycyrrhiza glabra</i>	Blocks Serotonin reuptake ⁹
VI.	Shunti	<i>Zingiber officinale</i>	Attenuate abnormality in 5HT & NA systems ¹⁰
VII.	Lashuna	<i>Allium sativum</i>	CNS depressant ¹¹
VIII.	Tulasi	<i>Ocimum sanctum</i>	MAO inhibitor ¹²
IX.	Ashwagandha	<i>Withania somnifera</i>	Adaptogenic ¹³
X.	Shatavari	<i>Asparagus racemosus</i>	Serotonergic, noradrenergic systems & augmentation of antioxidant defenses ¹⁴
XI.	Haridra	<i>Curcuma longa</i>	MAO inhibitor ¹⁵
XII.	Amalaki	<i>Embllica officinales</i>	MAO inhibitor ¹⁶
XIII.	Guduchi	<i>Tinospora cordifolia</i>	MAO inhibitor ¹⁷
XIV.	Mandukaparni	<i>Centella asiatica</i>	Ameliorating the function of HPA axis ¹⁸

IV. DISCUSSIONS

The "Monoamine hypothesis" is the most popular concept for the aetiology of depression. The signs and symptoms of depression are caused by a functional shortage of cerebral monoamines like noradrenaline, 5-hydroxytryptamine, and dopamine¹². Many currently prescribed antidepressants work by raising these neurotransmitter concentrations in the brain. Evidence suggests that active principles of *Acorus calamus*, *Convolvulus pluricolis*, *Nardostachys jatamansi*, *Ocimum sanctum*, *Curcuma longa*, *Embllica officinales*, and *Tinospora cordifolia* raise levels of noradrenaline, 5HT, and dopamine in the brain. The fact that these herbs have antidepressant-like properties may therefore be a result of its modulatory impact on central monoamines¹². However, because to the inclusion of a significant number of phytochemicals, the precise mechanisms underlying the antidepressant activity cannot be determined at this time. It has been demonstrated that the herbs *Bacopa monnieri*, *Convolvulus pluricolis*, *Ocimum sanctum*, *Allium sativum*, *Withania somnifera*, and *Asparagus racemosus* have immunostimulant and antioxidant properties while sparing cortisol¹⁹. The behavioural disinhibitory activity may also be influenced by this cortisol-sparing immunomodulatory function. Uncertain processes underlie how some herbs have effects akin to those of antidepressants. Numerous antidepressants raise central monoamine levels or stop stress-induced depressive-like behaviour by either blocking the MAO enzyme or the reuptake mechanism¹⁹.

V. CONCLUSIONS

The review was carried out emphasizing herbal remedies in Depression. Since time immemorial all psychosomatic, psychiatric and somatic illnesses were treated with herbal, herbo mineral and mineral formulations. The chapter unmada chikitsa adhikara provides enormous contribution to the society by giving treatment guidelines for all kinds of psychiatric illnesses. The present review has provided enough evidences on the effectiveness of these herbal medicines in the management of depressive disorders. Further robust research studies would help understand the underlying mechanism of antidepressant like action.

VI. REFERENCES

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