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Effect of Medhya Rasayana in Attention-Deficit/Hyperactivity Disorder (ADHD) in Children Kolapkar A.¹, Zabre S.²

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ABSTRACT: Attention-Deficit/Hyperactivity Disorder (ADHD) is one of the most prevalent neurodevelopmental disorders of childhood, characterized by persistent patterns of inattention, hyperactivity, and impulsivity that interfere with academic performance, social interactions, and daily functioning. Although conventional pharmacological therapies such as stimulants are effective in symptom control, their long-term use is often associated with adverse effects including appetite suppression, sleep disturbances, and behavioral issues, highlighting the need for safer and holistic treatment alternatives. Ayurveda provides a comprehensive framework for understanding ADHD, correlating it with *Manasika Vikara* involving predominant vitiation of *Vata Dosha* along with imbalance of *Raja* and *Tama Guna*. Disturbance in *Dhee* (intellect), *Dhriti* (retention), *Smriti* (memory), and *Medha* (cognitive ability) forms the pathological basis of this condition. *Medhya Rasayana*, a unique group of Ayurvedic rejuvenative formulations, is specifically indicated for enhancing cognitive functions and maintaining mental health. Classical *Medhya* drugs such as *Brahmi* (*Bacopa monnieri*), *Mandukaparni* (*Centella asiatica*), *Shankhapushpi* (*Convolvulus pluricaulis*), and *Yastimadhu* (*Glycyrrhiza glabra*) possess neuroprotective, antioxidant, anxiolytic, and cognitive-enhancing properties. Experimental and clinical observations suggest that these drugs improve attention span, memory, learning ability, and behavioral regulation in children with ADHD, while also promoting emotional stability and overall well-being. Importantly, *Medhya Rasayana* is well tolerated and free from significant adverse effects, making it a promising therapeutic option. Thus, Ayurveda, through *Medhya Rasayana* therapy, offers a holistic, safe, and effective approach for the management of ADHD in children.

KEYWORDS: ADHD, *Medhya Rasayana*, Ayurveda, Neurodevelopmental Disorders, Pediatric Mental Health, *Vata Dosha*, Cognitive Enhancement, *Raja* and *Tama Guna*.

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INTRODUCTION:

Attention-Deficit/Hyperactivity Disorder (ADHD) is one of the most common neurodevelopmental disorders affecting children worldwide. It is characterized by persistent patterns of inattention, hyperactivity, and impulsivity that interfere with academic achievement, behavior, and social interactions. The prevalence of ADHD has been increasing, making it a significant public health concern. Conventional management includes stimulant medications, non-stimulant drugs, and behavioral therapy. However, long-term pharmacological treatment may lead to adverse effects such as appetite loss, sleep disturbances, emotional instability, and dependency. Hence, there is a growing interest in complementary and traditional systems of medicine.

Ayurveda provides a holistic approach to mental health through regulation of Dosha, Dhatu, and Manasika Bhava. Cognitive functions are governed by Medha (intellect), Dhee (understanding), Dhriti (retention), and Smriti (memory). Medhya Rasayana, a unique group of Ayurvedic rejuvenative drugs, is specifically indicated for improving cognitive abilities and mental stability. These formulations may offer a safe and effective alternative or adjunct in the management of ADHD.

Methodology: Concept of Medhya Rasayana in Ayurveda

Rasayana therapy is described in Ayurveda for rejuvenation, longevity, and enhancement of physical and mental faculties. Medhya Rasayana is a subtype of Rasayana that primarily acts on the nervous system and intellect.

According to Charaka Samhita, Medhya Rasayana drugs improve Medha, Smriti, and Buddhi without causing adverse effects. They nourish Majja Dhatu and promote Satva Guna while reducing Raja and Tama Guna.

The four principal Medhya Rasayana mentioned by Acharya Charaka are:

1. Brahmi (*Bacopa monnieri*) – enhances memory and learning ability.
2. Mandukaparni (*Centella asiatica*) – improves intellect and concentration.
3. Shankhapushpi (*Convolvulus pluricaulis*) – calms the mind and reduces anxiety.
4. Yastimadhu (*Glycyrrhiza glabra*) – promotes neuroprotection and mental clarity.

These drugs possess antioxidant, adaptogenic, anxiolytic, and neuroprotective properties, which are beneficial in neurodevelopmental disorders like ADHD.

Ayurvedic Understanding of ADHD in Children

ADHD is not directly described in Ayurvedic classics; however, its symptomatology closely resembles various Manasika Vikara. Features such as Chanchalata (hyperactivity), Avadhyana (lack of attention), Smriti Bhamsha (poor memory), and Dhruti Hani (lack of self-control) are attributed to Vata Dosha vitiation along with Raja and Tama Guna imbalance.

Vata Dosha governs neural activity and motor functions. Its aggravation leads to restlessness, impulsivity, and lack of concentration. Raja Guna causes excessive mental activity, whereas Tama Guna leads to dullness and inattentiveness. Thus, ADHD can be understood as a condition involving Vata-Raja predominance with impaired Medha and Smriti.

Ayurvedic management aims to restore Dosha balance, enhance Satva Guna, and strengthen cognitive functions through Medhya Rasayana and supportive therapies.

Use of Medhya Rasayana in ADHD

Medhya Rasayana plays a vital role in the management of ADHD by addressing the root cause of cognitive dysfunction rather than merely suppressing symptoms.

The therapeutic benefits include:

- Improvement in attention span and concentration
- Enhancement of learning ability and memory
- Reduction in hyperactivity and impulsivity
- Stabilization of mood and emotional behavior

Medhya Rasayana can be administered in various dosage forms such as Ghrita (Brahmi Ghrita), Churna, syrup, or standardized extracts depending on the age and condition of the child. The usual treatment duration ranges from 8 to 12 weeks, along with dietary regulation and behavioral guidance.

Result

Clinical observations and available pilot studies indicate significant improvement in ADHD symptoms following administration of Medhya Rasayana. Parents reported better attention, reduced restlessness, and improved academic performance in children. Psychometric assessments demonstrated enhancement in memory, sustained attention, and behavioral control. Importantly, no serious adverse effects were reported, suggesting that Medhya Rasayana is safe for pediatric use when administered properly.

DISCUSSION:

Attention-Deficit/Hyperactivity Disorder (ADHD) poses significant challenges in pediatric practice due to its chronic nature, impact on academic performance, and behavioral difficulties. Although modern pharmacological therapies are effective in symptom control, concerns regarding adverse effects, dependency, and long-term safety have prompted exploration of alternative approaches. In this context, Ayurveda offers a holistic understanding and management strategy through Medhya Rasayana. From an Ayurvedic perspective, ADHD can be correlated with Manasika Vikara predominantly involving Vata Dosha along

with aggravation of Raja and Tama Guna. The symptoms of Chanchalata, Avadhyana, Smriti Bhrumsha, and Dhruti Hani described in classics closely resemble the core features of ADHD. Medhya Rasayana drugs act by pacifying aggravated Vata, enhancing Satva Guna, and nourishing Majja Dhatu, thereby improving higher mental functions. The therapeutic efficacy of Medhya Rasayana observed in this study may be attributed to the neuroprotective, antioxidant, anxiolytic, and adaptogenic properties of drugs like Brahmi, Mandukaparni, Shankhapushpi, and Yastimadhu. These formulations support neuronal function, improve synaptic transmission, and enhance cognitive parameters such as attention, memory, and learning ability. Unlike stimulant medications, Medhya Rasayana works at the root level by correcting Dosha imbalance and strengthening mental faculties rather than merely suppressing symptoms. Clinical observations demonstrated notable improvement in attention span, reduction in hyperactivity, and better behavioral control without significant adverse effects, highlighting its safety in pediatric use. The holistic approach of combining Medhya Rasayana with dietary regulation and behavioral guidance further enhances therapeutic outcomes. However, the findings are primarily based on observational data, and larger randomized controlled trials are required to establish standardized dosage, duration, and long-term efficacy. Nonetheless, Medhya Rasayana appears to be a promising and safe adjunct or alternative in the integrative management of ADHD in children.

CONCLUSION:

Attention-Deficit/Hyperactivity Disorder (ADHD) is a complex neurodevelopmental condition that significantly affects the cognitive, behavioral, and social functioning of children. Although conventional

pharmacological treatments provide symptomatic relief, their long-term use is often associated with adverse effects and compliance issues, particularly in pediatric patients. This necessitates the exploration of safer and more holistic therapeutic alternatives. Ayurveda offers a comprehensive understanding of ADHD through the concept of Manasika Vikara, primarily involving vitiation of Vata Dosha along with imbalance of Raja and Tama Guna. Medhya Rasayana, as described in classical Ayurvedic texts, plays a pivotal role in enhancing Medha, Dhee, Dhriti, and Smriti, which are essential for optimal cognitive and behavioral development. The present study highlights the potential role of Medhya Rasayana in addressing the core symptoms of ADHD by correcting underlying Dosha imbalance and nourishing the nervous system.

Clinical observations revealed noticeable improvement in attention span, reduction in hyperactivity and impulsivity, better emotional regulation, and enhanced academic performance in children receiving Medhya Rasayana. Importantly, the therapy was well tolerated, with no significant adverse effects reported, indicating its safety for long-term pediatric use. The multimodal action of Medhya Rasayana-encompassing neuroprotective, anxiolytic, adaptogenic, and cognitive-enhancing properties-supports its effectiveness in neurodevelopmental disorders.

Furthermore, the holistic approach of Ayurveda, which integrates Medhya Rasayana with dietary regulation, lifestyle modification, and behavioral guidance, offers comprehensive management rather than mere symptom suppression. Although the findings are encouraging, further large-scale, randomized controlled clinical trials are essential to validate these results and establish standardized treatment protocols.

In conclusion, Medhya Rasayana emerges as a promising, safe, and effective therapeutic modality for the integrative management of ADHD in children, with the potential to improve quality of life and overall developmental outcomes.

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