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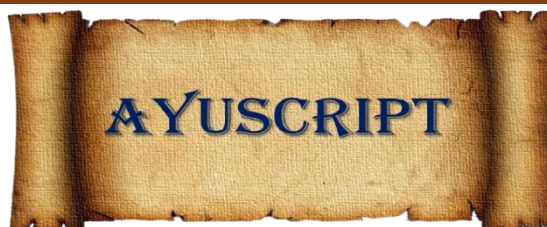
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ॐ नमो भगवते वासुदेवाय ॥ १ ॥ विश्वकर्मो एमाहूयपुरीहाटकनि
र्मेता ॥ तत्रयोऽशसाहस्रस्त्रीणां चैव वराधिकसु ॥ ११ ॥ भवनानि मनोज्ञानि
योमध्यकल्पयन् ॥ परिजानतस्तत्रैवतासांभोगायकल्पयन् ॥ १२ ॥ या
सानांस्तस्मान्नयद्रूपेचाशतकोटयः ॥ अन्यपिबहुत्रैलोक्यावसेनिविगत
राः ॥ १३ ॥ यत्किंचित्त्रिभुलोकैस्तु सुंदरं न च दृश्यते ॥ सवाजिनप्रसेनाख्यो पु
नरुग्रस्यविद्युता ॥ १४ ॥ अमोघप्रीतिरमासाद्यतन्मनस्कतयावसः ॥ सनाडि
स्तपस्तेपेस्वर्यमुद्दिश्य बुद्धिमान् ॥ १५ ॥ अर्चनं निरसनं हस्तस्य सर्वदुःख
नः प्रसन्नो भगवान् सनाजितपुरं स्थिता ॥ १६ ॥ सनाजितोऽपि तुष्टावदृष्टादेव दि
नकरम् ॥ निजोराजनमस्तिस्तनमस्तिसर्वलोमुखः ॥ १७ ॥ विश्वव्यापिन्नमस्तिस्त
मस्तिविभूरुपिणः ॥ करपेयनमस्तिस्त हरिदम्बनमोस्तते ॥ १८ ॥ गहराजनम
स्तनमस्तचंद्रोच्चिह्नः ॥ वेदत्रयनमस्तिस्त सर्वदेवनमोस्तते ॥ १९ ॥ प्रसीद
तु हि देवा सुदृष्ट्यामादिवाकरे ॥ ध्वंसस्तनमोस्तनोस्तदेवदेवादिवाकरे ॥ २० ॥
सिंहासनेभीरुमधुरं सवाजिनसवाजितः ॥ चरं हृदि प्रसन्नोऽस्मि यत्नेमनसि





International Journal for Empirical Research in Ayurveda

Effective Ayurveda Treatment for Revival of a Semi-Conscious Patient: A Case Study

Phadke.J.¹, Chandurkar.V²

1.MD (Kayachikitsa), Assistant Professor, College of Ayurveda and Research Centre, Nigdi, Pune, India, PhD Scholar, Seth Govindaji Raoji Ayurved Mahavidyalaya, Solapur, India

2.Professor, Department of Kayachikitsa, Seth Govindaji Raoji Ayurved Mahavidyalaya, Solapur, India

ABSTRACT:

Atyayika Chikitsa, the Ayurvedic branch of emergency and critical care, addresses life-threatening conditions such as Sanyasa, a state of impaired or lost consciousness. Chronic disorders of consciousness following traumatic brain injury have limited treatment options, highlighting the need for complementary therapeutic approaches. This case evaluated the effectiveness of Ayurvedic management in reviving consciousness in a 51-year-old female who remained semi-conscious for seven months after a hemorrhagic head injury, with a Glasgow Coma Scale (GCS) score of 6. The treatment protocol emphasized restoration of Agni (digestive and metabolic function), Nasya therapy for neuro-sensory stimulation, and Medhya drugs with nootropic and neuroprotective properties. Progressive improvement was observed in the patient's level of consciousness, sensory responsiveness, voluntary motor activity, eye contact, and speech. The findings suggest that an Ayurvedic approach focusing on metabolic restoration and neuro-sensory stimulation may serve as a promising complementary strategy for managing chronic disorders of consciousness and warrants further validation through larger clinical studies.

Keywords: Atyayika Chikitsa, Sanyasa, Nasya therapy, Hemorrhagic stroke, Semi-conscious state.

CORRESPONDING AUTHOR:

Dr. Japa Phadke

MD (Kayachikitsa), Assistant Professor, College of Ayurveda and Research Centre, Nigdi, Pune, India, PhD Scholar, Seth Govindaji Raoji Ayurved Mahavidyalaya, Solapur, India

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Introduction:

Traumatic brain injury may result in prolonged unconscious states. Ayurveda describes similar conditions under Sanyasa (coma). Restoration of Sandnyavah Srotas (neuro-sensory pathways) and Agni (digestive fire) is essential for neurological recovery¹⁻³

Materials and methods:

Patient: 51-year-old female with hemorrhagic head injury; semi-conscious for 7 months.

GCS Score at admission: 6 (Severe). Ashtavidha Pariksha (eightfold clinical examination): Nadi 60/min, Mala–Malavashtambha (constipation), Jivha–Saam (coated tongue), Sparsha–Sheeta (cold touch), Druk–Nisteja (dull vision), Akrti–Krusha (emaciated). Ayurvedic Assessment: Agnimandya (impaired metabolism), Vata prakopa (neuromuscular dysfunction), obstruction of Sandnyavah Srotas (neuro-sensory impairment), condition resembling Sanyasa (coma state).

1. treatment protocol:

Phase:	Intervention:
Phase 1 (First 2 Months) Focus on improve digestion and recover constipation.	Chitrakadi Vati (digestive stimulant), Bhringarajasava (metabolic tonic), Hingwashtak Churna (carminative digestive powder), Gandharva Haritaki (bowel regulator), Gomutra Haritaki (detoxifying bowel support), Abhyanga with Sahachara Taila (medicated oil physiotherapy), Nasya with Vacha Taila (nasal neurostimulation)
Phase 2 (4 months) Focus on brain stimulation, regain conscious state and relieve stiffness.	Jivhadi Kwatha (metabolic decoction), Saraswatarishta (neurocognitive tonic), Suvarna Malini Vasant (immuno-neuro rejuvenator), Abhyanga with Chandanbalalakshadi Taila (neuromuscular strengthening oil), Nasya therapy, Tikta-Ksheera Basti (medicated therapeutic enema for neuroinflammation), Dhoopana (medicated fumigation)

Medicine chart: dosage and therapeutic action**2.Phase 1 Treatment (First 2 Months);**

Medicine	Dose & Timing	Route	Ayurvedic Action	Modern Terminology
Chitrakadi Vati	2 tab BD	Oral	Deepana, Pachana	Improves digestion & metabolism
Bhringarajasava	15 ml BD	Oral	Rasayana	Metabolic & liver tonic
Hingwashtak Churna	3 g BD before food	Oral	Vata-Anulomana	Carminative & gut motility
Gandharva Haritaki	3 g HS	Oral	Anulomana	Mild laxative
Gomutra Haritaki	2 tab BD	Oral	Ama pachana	Detox & bowel cleansing
Sahachara Taila Abhyanga	Local	External	Vata shamana	Reduces stiffness
Vacha Taila Nasya	2 drops BD	Nasal	Indriya stimulation	Neurostimulatory

3.Phase 2 Treatment (After 2 Months):

Medicine	Dose & Timing	Route	Ayurvedic Action	Modern Terminology
Jivhadi Kwatha	15 ml BD	Oral	Deepana-Pachana	Metabolic enhancer
Saraswatarishta	15 ml BD	Oral	Medhya Rasayana	Neuroprotective
Suvarna Malini Vasant	1 tab morning	Oral	Rasayana	Immunomodulator
Gandharva Haritaki	1 tab HS	Oral	Anulomana	Bowel regulation
Gomutra Haritaki	2 tab BD	Oral	Ama pachana	Metabolic detox
Chandanbalalakshadi Taila	Daily	External	Balya	Muscle & nerve strengthening
Vacha Taila Nasya	2 drops BD	Nasal	Prabodhana	Neural stimulation
Tikta-Ksheera Basti	60 ml daily	Rectal	Vata shamana	Anti-inflammatory neuroprotection
Dhoopana	Daily	External	Shodhana	Antimicrobial & sensory stimulation

4.Clinical Improvement Timeline:

Time Period	Clinical Changes	Ksheera Basti may provide neuroprotective and anti-inflammatory effects supporting neurological repair. ^{4,5}
Week 1–2	Improved bowel movements and reduced abdominal distension.	
Week 3–4	Improved reflex responsiveness and reduction in neuromuscular stiffness.	
Month 2	Eye tracking and response to verbal stimuli observed.	
Month 3	Improved motor responses and attempts to vocalize.	
Month 4+	Regained speech, awareness, and improved consciousness level.	

stimulated higher neurological centers through Nasya therapy and Medhya Rasayana (neurocognitive rejuvenation). Tikta

Results:

Gradual restoration of consciousness was observed along with significant improvement in sensory and motor responses. Neuromuscular stiffness reduced progressively, and the patient eventually regained speech and awareness.

Discussion:

The present case highlights the significant role of Ayurvedic management in a chronic semi-conscious condition, which can be correlated with Sanyasa in classical texts. The pathology primarily involves Vata prakopa, Agnimandya, and obstruction of Sandhnyavah Srotas, leading to impairment of higher neurological functions. The initial therapeutic approach

focused on Deepana-Pachana and Anulomana, aiming to restore Agni and eliminate Ama. In Ayurveda, proper functioning of Agni is essential for Dhatu poshana and overall physiological balance. The early improvement in bowel habits and reduction in abdominal distension observed in this case indicate successful correction of metabolic dysfunction. This step is crucial, as accumulated Ama and impaired digestion can aggravate Vata and obstruct microchannels, thereby affecting neurological recovery.^{11–16} Nasya therapy with Vacha Taila played a pivotal role in neurostimulation. According to Ayurvedic principles, the nasal route is considered the gateway to the brain (Shiras), allowing direct drug action on higher neurological centers. The

progressive improvement in eye tracking, response to verbal stimuli, and consciousness level suggests effective stimulation of central nervous system functions.¹⁷ The administration of Medhya Rasayana such as Saraswatarishta and Suvarna Malini Vasant contributed to cognitive enhancement and neuroprotection. These formulations are traditionally indicated for improving memory, intellect, and mental clarity, and may correlate with neuroprotective and adaptogenic effects described in modern medicine.¹⁸ Tikta-Ksheera Basti provided systemic Vata shamana and may have exerted anti-inflammatory and neuroprotective effects. Basti therapy is considered the prime treatment for Vata disorders, and its role in neurological conditions is well documented in Ayurvedic literature. External therapies such as Abhyanga helped reduce stiffness and improve neuromuscular coordination, while Dhoopana may have contributed through sensory stimulation and environmental purification. Overall, the therapy restored digestive fire, reduced neuromuscular dysfunction, cleared physiological obstruction, and stimulated higher neurological centers. This case demonstrates that a phased, holistic Ayurvedic approach can be effective in neuro-rehabilitation. However, further clinical studies are required to validate these findings on a larger scale.^{19,20}

Conclusion:

This case study demonstrates that Ayurvedic management can play a significant and effective role in the recovery of patients with chronic semi-conscious conditions. The treatment approach was based on fundamental Ayurvedic principles including Agni restoration, Vata pacification, Srotoshodhana, and Rasayana therapy, which collectively contributed to the patient's recovery. The observed clinical progression—from improvement in bowel function to restoration of consciousness, motor activity, and speech—indicates that Ayurvedic interventions can provide a structured and stepwise rehabilitative approach. The integration of internal medications, Panchakarma therapies such as Nasya and Basti, and external treatments like Abhyanga ensured a holistic management strategy addressing

both systemic and neurological aspects. One of the key strengths of Ayurveda lies in its individualized and phased treatment protocol. In this case, initial correction of metabolism and elimination of Ama prepared the body for advanced neuro-restorative therapies. This aligns with the Ayurvedic concept of treating the root cause rather than merely alleviating symptoms. Furthermore, therapies like Nasya and Medhya Rasayana may have implications in modern neuro-rehabilitation by influencing neuroplasticity, improving cognitive function, and supporting neuronal regeneration. Although this is a single case study, it provides promising evidence for the role of Ayurveda in managing complex neurological disorders where conventional prognosis is often limited.^{19,20} In conclusion, Ayurvedic management offers a safe, holistic, and potentially effective approach for neuro-recovery care in semi-conscious patients. Integration of Ayurvedic principles into mainstream rehabilitation practices may enhance patient outcomes. However, further large-scale clinical trials are necessary to establish standardized protocols and scientific validation.

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