Review Article

Holistic Approach in the Management of Depression: A Review

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Abstract

Emotions are the basic feelings of human beings. All of us have felt unhappy, "down," or discouraged at times in our lives. But when somebody feels anxious, hopeless, helpless, worthless, guilty, hurt, restless or irritable, it comes under the categorization of depression. Depression is a disorder of mood that produces sad feelings, negative thoughts, disruptions of sleep, appetite, thinking, and energy level. Globally, more than 300 million people of all ages suffer from depression. The burden of depression is 50% higher for females than males.

USM enlists whole Usool-e-ilaj of depression under the heading of ilaj bil ghiza, ilaj bil dawa and ilaj bil tadbeer. In ilaj bil dawa many drugs have been used for the treatment of depression but herbal medications in psychiatry are under research while more than 20 herbal remedies have been identified that may potentially be applied in medicine as anti-depressive, anxiety-relieving or sleep-inducing agents.

Keywords: Depression, USM, Usool-e-ilaj, Herbal remedies

Introduction

Depression is a chronic mental disorder that causes changes in mood, thoughts, behavior and physical health. It is a common but serious disease that can take away a person's ability to enjoy life and cause decline in capacity to undertake even the simplest daily tasks. According to World Health Organization (WHO), unipolar depression is one of the leading causes of disability-adjusted life year (DALY) and approximately 350 people worldwide are said to suffer from this mental disorder.[1]

Depression is a common mental disorder that presents with depressed mood, loss of interest or pleasure, decreased energy, feeling of guilt or low self-worth, disturbed sleep or appetite, and poor concentration. Moreover, depression often comes with symptoms of anxiety. These problems can become chronic or recurrent and lead to substantial impairments in an individual's ability to take care of his or her everyday responsibilities. At its worst, it can lead to suicide. Almost 1 million lives are lost yearly due to suicide which translates into 3000 suicide deaths every day.[1,10] Stressful life events and chronically stressful circumstances are typically the triggers of depression.[5,11] A study reported about 69% of cases of insomnia are followed by depression, whereas an anxiety disorder preceded by insomnia 73% of times. Onset of insomnia coincides with the onset of the associated mental disorder.[3]

Types of Depression

Depression is a heterogeneous disorder, often mistaken for a single clinical mental illness.[12]

- Major depressive disorder (MDD)
- Dysthymic disorder

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- Melancholic depression
- Seasonal affective disorder (SAD)
- Post-partum depression (PPD)
- Psychotic depression[21]

Prevalence

Globally, more than 300 million people of all ages suffer from depression.[13] It is a significant contributor to the global burden of disease and affects people in all communities across the world. According to the WHO, rates for depression will continue to rise over the next 20 years.[22] Today, depression is estimated to affect 350 million people. While depression is the leading cause of disability for both males and females, yet the burden of depression is 50% higher for females than males.[1]

Risk Factors

Psychological Factors

Negative body image is thought to lead to depression and eating disorders and low self-esteem may also lead to depression. Anxiety typically precedes depression, suggesting a causal role.[2]

Cognitive Factors

Adolescents show dramatic increases in cognitive ability and reasoning capacity. Their increased capacity to reflect on the developing self and the future is thought to play a role in the possibility of experiencing depressed mood.[2]

Family Factors

Having a depressed parent is a major risk factor for depression in childhood. Offspring of depressed parents are more likely than children of healthy parents to experience perinatal complications, cognitive impairments in infancy, school problems, peer problems and high rates of depressive disorders as well as other psychiatric disorders and problem behaviors.[2]

Peers

Low peer popularity is related to depression and depressive symptoms. Among young adolescents, less closeness with a best friend, less contact with friends and more experiences of rejection contribute to increases over time in depressive effect. Conversely, being depressed appears to contribute to poor relationships.[2]

School Factors

The academic grades of both boys and girls appear to decrease over adolescence; although part of this decline is due to increasingly difficult grading practices as students move from elementary to secondary school, depression also may play a role[2].

Daily Stress and Stressful Life Events

The experience of difficult changes or challenges in adolescence appears to predict increased depressed affect. The effects of parental divorce were mentioned earlier.[2]

Symptoms of Depression

- Emotional Changes: Sadness, anxiety, guilt, anger, mood swings.[8,20]
- Physical Changes: Sleeping too much/too little, eating too much/too little, constipation, weight loss, menstrual irregularity, impotence/frigidity, feeling weak, easily tired, pain, diminished sexual drive.[8,20]
- Behavioral Changes: Crying, withdrawal from other people, agitation, hallucinations, slowing down in general behavior.[8,20]
- Thought/Perception Changes: Negative view of self and the world, pessimism about the future, blaming self, criticizing self, difficult in making decisions, helplessness, hopelessness, worthless, delusions, etc.[8,20]

Management

An array of treatment options has been developed to combat depression over the decades. Various approaches include pharmacotherapy, psychotherapy and somatic therapy often employed for treatment-resistant depression.[13,21]

Prevention

The prevention of depression is an area that deserves attention. Many prevention programs implemented across the lifespan have provided evidence on the reduction of elevated levels of depressive symptoms.[1] Effective community approaches to prevent depression include school-based programs to enhance a pattern to positive thinking in children and adolescents. Interventions for parents of children with behavioral problems may reduce parental depressive symptoms and improve outcomes for their children.[12]

Treatment

Individuals with mild to moderate depression can be treated with time. Limited psychotherapy, cognitive behavioral therapy, and interpersonal therapy have been shown to be equally efficacious to anti-depressant medication, although improvement is initially slower than with medication.[13,23] Antidepressant medication is the first-line treatment for moderate and severe depression.[22]

The Unani physicians divided the treatment itself into different modes. They are listed under.

- Ilaj-bil-Ghiza
- Ilaj-bil-Dawa

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- Ilaj-bil-Tadbeer
- Ilaj-bil-Yad

Ilaj bil Ghiza

- High carbohydrate diet increased the brain's production of serotonin.[4]
- High protein seeds (like almond, pistachio, kaju, kaddu, kahu etc.).[4]
- Diet rich in the B-Complex of vitamins (especially vitamins B_1,B_2,B_3, B_6 and folic acid).[4]
- Trace metal (Cu, Zn, Li, Co) containing food.[4]

Ilaj bil Dawa

- Ashwagandha, brahmi, almond, konch, chilghoza, etc. These drugs can be used to manage depression.[4]
- Herbal oils: Roghan labub saba, Roghan kahu, etc.[4]
- Murrabay and Muffarrehat (exhilarates) are also helpful as adjunct therapy for nervous tension and other similar syndromes.[4]

Ilaj bil Tadbeer

- Reyazat[12]
- Dalak[7]
- Nutool[3]

Ilaj bil Yad

This mood is not required for the treatment of depression.

Unani Drugs

Medicinal plants around the world have been used to treat disorders of the body and the mind since antiquity. Herbal medicine has been a reasonable alternative for the management of mental disorders such as anxiety, depression and dementia among plenty others.[22] More than 20 herbal remedies have been identified that may potentially be applied in medicine as anti-depressive, anxiety relieving or sleep-inducing agents.[9,10] The use of ingested natural health products to provide a pharmacological action in order to provide an 'adaptogenic' or protective effect against stress.[15]

- *Withania somnifera*
- *Centella asiatica*
- *Valeriana wallichii* DC
- *Mucuna pruriens*

Conclusion

Depression is a state of low mood and aversion to activity that can affect a person's thoughts, behavior, feelings and sense of wellbeing. Prevalence of depression increases day by day. Various programs play an important role for the prevention of depression. Combination of psychotherapy and antidepressant medications may be used as an initial treatment for patients with moderate to severe major depressive disorder. In USM ilaj bil ghiza along with ilaj bil dawa and ilaj bil tadbeer are useful for the management of depression. In ilaj bil dawa, many herbal drugs are available for treatment of depression but there is further need of research for herbal medication in the management of various subtypes of neurological disorders.

Conflict of Interest: None

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S. No.	Plant Name	Botanical Name	Vernacular Name	Family	Temperament	Action	Pharmacological Action
1.	Asghand	Withania somnifera Dunal	KaknajeHindi, Mehernanbarari, Ashvagandha, Punir	Solanaceae	Hot[1] and dry[1]	Muhallil, Moqawwi-e-hafiza (memory enhancing), muqawwie bah (aphrodisiac), Eliminate the viscid phlegm and black bile[13,14.]	Methanolic and water extract of W. somnifera have acetyl cholinesterase inhibitory activity. another study shows that it works as an anti-dementia drug.[24] Anti-stress activity.[30]
2.	Brahmamanduki	Centella asiatica Linn	Mandukaparni, Cheka-parni, Khulakhudi, Artaniyal-hindi[16]	Mackinlayaceae	Hot[2] and dry[2]	Muqaww-e-dimagh wa hafiza (Brain and memory tonic, Muqawwi-e-azae raisa (Tonic for vital organs)[6,14,19]	One study shows it possesses memory-enhancing, mental retardation,[28] antidepressant, antioxidant[29]
3.	Tagar	Valeriana officinalis.	Tagara, Nahani, Shumeo Asarun,Tagar-ganthoda[16]	Valerianaceae	Hot[2]and dry[2]	Muqawwi-e-dimag, diuretic, Brain tonic, stress reliever, hypnotic and mild sedative[17,18]	It possesses mild sedative and tranquilizing characteristic.[27]
4.	Konch	Mucuna pruriens	Habulkulai, Anaghooris, Cowage, Kavancha, Goncha	Leguminoceae	Hot[2] and dry[1]	Aphrodisiac, Tranquilizer, Anaesthetic, Seminopietic[24]	Low dose-.N.S Stimulation& High dose-C.N.S depression. It possesses both central depressant and anti-anxiety.[23] Neuron restorative effect[25]. Antidepressant action[26].