A Clinical Study of Efficacy of *JivaniyaGhritam* on Anger

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Abstract
JivaniyaGhritamis mentioned in Charak Samhita for the treatment of Pittaj Unmada[1]. The present study were conducted on 90 cases of Anger for 30 days duration with an objective of clinical efficacy evaluation of JivaniyaGhritamon Angry patients.
Aim*: This study was aimed to evaluate efficacy of JivaniyaGhritam oral administration on Anger.*
Materials and Methods*: 90 Angry Patients were divided into 3 parallel groups.Group- A (30 Patients given Modern Conventional Psychiatric Medicines), Group B (30 Patients given Modern Conventional Psychiatric Medicines and JivaniyaGhritam), Group C (30 Patients given only JivaniyaGhritam),between the age of 20 and 60 years, withextremely Angry states of mind for 4 weeks in the dose of10gm. Aggressive behaviour/ Anger emotions subsided significantly after takingJivaniyaGhritam.*
Conclusion*: Administration of JivaniyaGhritaisstatistically proved improvements on Angry Patients.*
Keywords*: Anger, JivaniyaGhritam.*

I.   Introduction

There won't be any human being who has not experienced anger. During the arousal of any kind of anger, perspectives become narrow and rigid. Anger mobilizes the organism to fight. In doing so, it activates every muscle group and organ of the body.Anger is eliminating the possibility of mitigating context. Anger is self validating. Person feels if he is angry on other, he/ she must be doing something wrong. Feeling angry often and to an extreme degree not only destroys relationships but also affects person's psychological & physical well being and quality of life. Suppressing and storing up anger can also have a damaging and lasting impact. Medical fraternity, most of the time, looks at anger as a secondary emotion[2] and that's why anger is not thought upon as an emotion to treat with drug. Ayurvedic Samhitas have given due importance to Anger (Krodha) as a causative factor of psychological as well as physical disorders. We have explored Samhitas deeply in view to understand anger and its drug treatment.

Five stages of Anger are found after exploring from Brihattrayi, meanings of them are stated as per their context and Sanskrit language:
- *Upatapta* **mind-**Prone to Anger
- *Tapta mind* - Angry mind for short time
- *Samtapta mind* - Moderately Angry for longer time, full verbal expression of Anger.
- *Kshubdha mind* - Irritated mind and fully distracted from all routine work.
- *Samkshubdha mind* - Severely irritated and Angry and will act harshly and violently --sometimes uncontrollable. This mental state is equivalent to episodes of Pittaj Unmad[3]
❖   Steps-
- **1st step**: Initially 500 individuals who fulfilled inclusion criteria were interviewed. They were screened for Anger Dominance w.r.t APA's Williams CAS-**Clinical Anger Scale-1**.
- **2nd step**: Angry patients were screened through self prepared**Anger Scale-2.**
- **3rd step**: Extremely Angry Patients were screened and selected for Clinical study with the help of **Anger Scale-3**.
- Informed written Consent of mentally capable and legally competent relatives of patients were taken as per Canadian Psychiatric Association's Guidelines and guidance of Psychiatric Doctors.

✓ Self prepared **Anger Scale-2** and **Anger Scale-3** are of these methods-

➢ **Anger Scale-2** consists of 2 sets of questionnaires- A) Self assessment for Angry stage B) Assessments by Doctor

➢ **Anger Scale-3** contains 21 questions to assess-

a) *Samtapta mind*(Moderately Angry for longer time)

b) *Kshubdha mind*(Irritated mind)

c) *Samkshubdha mind*(Severely irritated and Angry)

Total 21 Questions were based on Anger scale -3

➡ Out of 21 Questions

➢ Physical Symptoms -09

➢ Mental Symptoms- 11

➢ Physical and Mental Symptoms- 01

II. Aim And Objectives

❖ *AIM:*

To study the efficacyofJivaniya*Ghritam on* anger.

❖ *OBJECTIVES:*

1. Identification of levels of anger clinically.

2. To study the efficacy of *JivaniyaGhritam*on different levels of Anger(related to abnormal mental stages).

III. Hypothesis

H_0 JivaniyaGhritam is not clinically significant on Anger.

H_1 JivaniyaGhritam is clinically significant on Anger.

❖ **Methodology**

❖ **STUDY DESIGN-**

Planned, Active Controlled Trial Clinical Study

Anger scales used for study – 1. APA's William's Clinical Anger Scale-1

2. Self prepared Anger Scale-2 and Anger Scale-3, to determine Angry Stages.

STUDY DRUG

*JivaniyaGhrita*contains- Cow's Ghee and 10 *JivaniyaGana* Herbs as *Jivaka*(Microstylismuscifera), *Rishbhaka* (Microstyliswallichi), *Meda*(Polygonatumcirrhifolium species), *Mahameda*(Polygonatumcirrhifolium),*Mashparni*(Teramnus labialis), *Mudgaparni*(Phaseolus trilobus), *Kakoli*(Roscoeaprocera), *Kshirkakoli*(Lilium polyphyllum), *Jivanti*(Leptadenia reticulate), *Yastimadhu*(Glycyrrhiza glabra).

❖ **PREPARATION OF STUDY DRUG**

Raw Materials drug Collection

All 10 *Dravyas* of *JivaniyaGana*were collected from KotdwarUttarakhand i.e Himalayan mountains under guidance of well qualified Ayurvedic Dravya Guna experts and Botanists. Raw materials were dried. All herbal drugs were sent for Authentication at Botany Department of Agarkar Government Institute Pune and Late. Dr.Bhide Lab, Pune.

❖ **Drug Preparation and Authentication**

*JivaniyaGhrita*preparation done as per *Kalka*(bruised coarsely paste) method of *Sharangdhar*Samhita ie. Kalka 1 part, 4 part Cow's Ghee, 16 parts of water at RasaShastra- Bhaishjya Kalpana Department, College of Ayurved, Bharati Vidyapeeth (Deemed to be University), Pune.Proper *Sneha SiddhiLakshanas*(signs of appropriately prepared *JivaniyaGhrita*) were observed. Final product was analyzed in pharmaceutical Laboratory of Late.Dr.Bhide Lab, Pune.The drug was packed in airtight containers in required quantity and given to patients for this trial.

❖ **INCLUSION CRITERIA**

Based on 3 Anger Scales, following inclusion criteria were made for the study as-

1) Individuals who feel that they weredisturbed at least twice a week due to Anger.

2) Individuals who were ready to undergo mental status assessment.

3)Age group 20- 60 years.

Individuals, taking Psychiatric medication with minimum to moderate dose, were included if they are fulfilling above three criteria.

❖ **EXCLUSION CRITERIA**

1) Individuals having maximum dose of Modern Conventional Psychiatric Medications.

2) *Unmadi*(Psychotic) patients.

3) Angry patients who were alcoholicand/or other drug abused.

4) Individuals and relatives of Angry Patients who refused or who could not gave written consent for this Clinical trial.

❖ **PLACE OF WORK**-

Nityananad Mental Rehabilitation and Research Institute,Katraj, Pune and Bharati Medical foundation's - Bharati Ayurved Hospital Pune and from Scholar's own Ayurvedic Clinic.

❖ **CLINICAL TRIALS–**

Clinical trials with *JivaniyaGhritam*weredone on *Samkshubaddha manas*(Extremely Irritated Mind) and *Kshubaddhamanas* (Irritated mind)–*Krodhi*(Anger)patients for duration of 30 days.Follow ups of each patient were taken on the 10th, 20th, and 30th day. *HingawastakChurnam* with the quantity of 1gm was given with luke warm water after meals to all 90 patients for*Deepan*(stomachics)-*Pachan*(digestives) for 5 days and then *JivaniyaGhritam* with the quantity of 10 gms was administered, where patients were asked to report after interval of 10-10 days, and on every visit. The details regarding the status were recorded.

❖ **Observations-**

✓ **Observation-1**

All Angry patients were divided into 3 groups. Group-A- 30 Patients who were given Modern conventional Psychiatric Drugs, Group-B who were givenModern Conventional Psychiatric Medicines and JivaniyaGhrita, Group – C who were given JivaniyaGhrita,

Table -1: Angry Patients selected and classified as per Gender and different Age Groups-

Age Groups (Years)	No. of patients	Males	Females	Percentage
20- 30	22	17	5	24.44%
30-40	40	32	8	44.44%
40- 50	16	14	2	17.44%
50-60	12	8	4	13.33%
Total	90	71	19	100

There were high incidences of Anger between age group of 30-40 yrs of age. There were 71 Males Angry patients and 19 Females Angry patients who were selected for this study. 32Males mental patients with Anger were found. At the interval age group of 30-40 yrs, 44.44% patients were present suffering from mental sickness with aggressive behavior and violent actions. That may be due to Pitta DoshaDominant age group and high stress levels in life.At the interval age group of 50-60 yrs, 13.33% patients were present suffering from mental sickness with aggressive behavior and violent actions.

✓ *Observation -2*

Table 2 : Changes in Anger into normal Stable Mental conditions in90 patients (group wise) of Anger treated.

Questions	Group- A	Group-B	Group-C	P-Value	Significance
Question-1	35.53	52.27	48.70	0.00	Group- B
Question -2	35.43	57.40	43.67	0.00	Group-B
Question -3	36.45	56.52	43.53	0.01	Group-B
Question -4	51.83	50.20	34.47	0.01	Group-B
Question -5	42.37	50.65	43.48	0.33	No Difference
Question -6	41.40	46.45	48.65	0.49	No Difference
Question -7	46.70	55.30	34.50	0.00	Group – B
Question -8	40.33	52.17	44.00	0.13	No Difference
Question -9	45.88	43.47	47.15	0.81	No Difference
Question -10	37.97	50.80	47.73	0.07	No Difference
Question -11	40.90	55.10	40.50	0.03	Group –B
Question -12	45.27	44.47	46.77	0.93	No Difference
Question -13	46.65	45.50	44.35	0.93	No Difference
Question -14	39.78	54.08	42.63	0.03	Group- B
Question -15	46.52	43.70	46.28	0.84	No Difference
Question -16	46.30	49.47	40.73	0.32	No Difference
Question 17	48.43	45.30	42.77	0.66	No Difference
Question -18	41.52	51.35	43.63	0.23	No Difference
Question -19	42.65	48.02	45.83	0.69	No Difference
Question -20	44.42	49.60	42.48	0.42	No Difference
Question -21	41.68	46.03	48.78	0.47	No Difference

❖ *Statistical analysis* –

Since observations were on ordinal scale, Wilcoxon signed rank test was carried out to test the significance in Group A, Group B and Group C for before and after observations. In the below table P indicates Physical Symptoms and M indicates Mental Symptoms. Analysis was carried out using SPSS software.

Table below gave, Median before treatment, after treatment, Wilcoxon Test statistic Value, P-Value and Percentage effect.

P-Value less than 0.05 showed that, there was significant change observed after treatment.

		Median		Wilcoxon Signed Rank W	P-Value	% Effect	Result
		BT	AT				
Q.1 (P)	Group A	3	0	-4.628[a]	0.000	85.00	Significant
	Group B	3	0	-5.324[a]	0.000	97.78	Significant
	Group C	3	0	-5.165[a]	0.000	93.18	Significant
Q.2 (M)	Group A	2	1	-4.488[a]	0.000	56.92	Significant
	Group B	2	0	-4.901[a]	0.000	84.29	Significant
	Group C	2	1	-4.904[a]	0.000	67.14	Significant
Q.3 (P)	Group A	2	1	-4.703[a]	0.000	74.63	Significant
	Group B	3	0	-4.890[a]	0.000	88.75	Significant
	Group C	2	0	-4.851[a]	0.000	80.56	Significant
Q.4 (M)	Group A	3	1	-4.798[a]	0.000	71.60	Significant
	Group B	2	0.5	-4.875[a]	0.000	79.17	Significant
	Group C	2	1	-4.939[a]	0.000	61.43	Significant
Q.5 (P)	Group A	2	0	-4.730[a]	0.000	76.12	Significant
	Group B	2	0	-4.941[a]	0.000	86.76	Significant
	Group C	2	0	-4.912[a]	0.000	79.10	Significant
Q.6 (M)	Group A	3	1	-4.788[a]	0.000	65.82	Significant
	Group B	3	1	-4.875[a]	0.000	75.00	Significant
	Group C	3	1	-4.873[a]	0.000	74.68	Significant
Q.7 (P)	Group A	2	0	-4.798[a]	0.000	78.38	Significant
	Group B	3	0	-4.864[a]	0.000	83.75	Significant
	Group C	2	1	-4.904[a]	0.000	69.12	Significant
Q.8 (M)	Group A	2	0.5	-4.919[a]	0.000	76.12	Significant
	Group B	2	0	-4.901[a]	0.000	89.71	Significant
	Group C	2	0	-4.927[a]	0.000	79.41	Significant
Q.9 (P)	Group A	2	0	-4.714[a]	0.000	81.08	Significant
	Group B	2	0	-5.026[a]	0.000	88.24	Significant
	Group C	2	0	-4.995[a]	0.000	86.30	Significant
Q.10 (P)	Group A	3	0	-4.863[a]	0.000	81.48	Significant
	Group B	3	0	-5.027[a]	0.000	91.86	Significant
	Group C	3	0	-4.966[a]	0.000	90.48	Significant
Q.11 (M)	Group A	2	1	-4.902[a]	0.000	69.57	Significant
	Group B	2	0	-4.919[a]	0.000	83.33	Significant
	Group C	2	1	-4.893[a]	0.000	68.57	Significant

	Group A	2	0	-4.813[a]	0.000	80.82	Significant
Q.12 (M)	Group B	2	0	-4.901[a]	0.000	85.51	Significant
	Group C	2	0	-4.873[a]	0.000	84.72	Significant
	Group A	3	0.5	-4.864[a]	0.000	80.52	Significant
Q.13 (P)	Group B	3	0.5	-4.873[a]	0.000	80.26	Significant
	Group C	3	1	-4.886[a]	0.000	78.95	Significant
	Group A	2	1	-4.901[a]	0.000	74.29	Significant
Q.14 (P)	Group B	2	0	-5.064[a]	0.000	91.30	Significant
	Group C	2	0	-4.972[a]	0.000	83.08	Significant
	Group A	3	1	-4.942[a]	0.000	73.26	Significant
Q.15 (M)	Group B	3	1	-5.063[a]	0.000	70.11	Significant
	Group C	3	1	-5.064[a]	0.000	71.59	Significant
	Group A	2	0	-4.813[a]	0.000	82.61	Significant
Q.16 (P)	Group B	2	0	-5.026[a]	0.000	88.24	Significant
	Group C	2	0	-4.912[a]	0.000	81.54	Significant
	Group A	3	1	-4.867[a]	0.000	72.73	Significant
Q.17 (M)	Group B	2	0	-4.885[a]	0.000	80.30	Significant
	Group C	2	0.5	-4.878[a]	0.000	76.12	Significant
	Group A	3	0	-4.824[a]	0.000	81.93	Significant
Q.18 (M)	Group B	3	0	-4.940[a]	0.000	89.53	Significant
	Group C	3	0	-4.880[a]	0.000	85.37	Significant
	Group A	3	1	-4.875[a]	0.000	75.00	Significant
Q.19 (M)	Group B	2.5	0	-4.864[a]	0.000	82.67	Significant
	Group C	2	0	-4.846[a]	0.000	83.33	Significant
	Group A	3	1	-4.920[a]	0.000	75.61	Significant
Q.20 (P+M)	Group B	3	0.5	-4.894[a]	0.000	81.48	Significant
	Group C	3	1	-5.260[a]	0.000	68.54	Significant
	Group A	2	0	-4.912[a]	0.000	77.94	Significant
Q.21 (M)	Group B	2	0	-5.106[a]	0.000	91.80	Significant
	Group C	2	0	-4.873[a]	0.000	86.76	Significant

Since observations were on ordinal scale, Kruskal Wallis Test was carried out for comparison among Group A, Group B and Group C Analysis was carried out using SPSS software. In the below table P indicates Physical Symptoms and M indicates Mental Symptoms.
Table below gives, mean rank for each group, Kruskal Wallis Test statistic Value and P-Value.
P-Value less than 0.05 showed that, there was significant difference among three groups.

	Group	N	Mean Rank	Sum of Ranks	Kruskall Wallis H	P-Value
Q.1 (P)	Group A	30	35.53	1066.00	13.468	0.001
	Group B	30	52.27	1568.00		
	Group C	30	48.70	1461.00		
	Total	90				
Q.2 (M)	Group A	30	35.43	1063.00	12.986	0.002
	Group B	30	57.40	1722.00		
	Group C	30	43.67	1310.00		
	Total	90				
Q.3 (P)	Group A	30	36.45	1093.50	10.193	0.006
	Group B	30	56.52	1695.50		
	Group C	30	43.53	1306.00		
	Total	90				
Q.4 (M)	Group A	30	51.83	1555.00	9.640	0.008
	Group B	30	50.20	1506.00		
	Group C	30	34.47	1034.00		
	Total	90				
Q.5 (P)	Group A	30	42.37	1271.00	2.236	0.327
	Group B	30	50.65	1519.50		
	Group C	30	43.48	1304.50		
	Total	90				
Q.6 (M)	Group A	30	41.40	1242.00	1.424	0.491
	Group B	30	46.45	1393.50		
	Group C	30	48.65	1459.50		
	Total	90				
Q.7 (P)	Group A	30	46.70	1401.00	10.907	0.004
	Group B	30	55.30	1659.00		
	Group C	30	34.50	1035.00		
	Total	90				
Q.8 (M)	Group A	30	40.33	1210.00	4.132	0.127
	Group B	30	52.17	1565.00		
	Group C	30	44.00	1320.00		
	Total	90				
Q.9 (P)	Group A	30	45.88	1376.50	.419	0.811
	Group B	30	43.47	1304.00		
	Group C	30	47.15	1414.50		
	Total	90				
Q.10 (P)	Group A	30	37.97	1139.00	5.299	0.071
	Group B	30	50.80	1524.00		
	Group C	30	47.73	1432.00		
	Total	90				
Q.11 (M)	Group A	30	40.90	1227.00	7.391	0.025
	Group B	30	55.10	1653.00		

	Group C	30	40.50	1215.00		
	Total	90				
Q.12 (M)	Group A	30	45.27	1358.00	.145	0.930
	Group B	30	44.47	1334.00		
	Group C	30	46.77	1403.00		
	Total	90				
Q.13 (P)	Group A	30	46.65	1399.50	.138	0.933
	Group B	30	45.50	1365.00		
	Group C	30	44.35	1330.50		
	Total	90				
Q.14 (P)	Group A	30	39.78	1193.50	7.151	0.028
	Group B	30	54.08	1622.50		
	Group C	30	42.63	1279.00		
	Total	90				
Q.15 (M)	Group A	30	46.52	1395.50	.348	0.840
	Group B	30	43.70	1311.00		
	Group C	30	46.28	1388.50		
	Total	90				
Q.16 (P)	Group A	30	46.30	1389.00	2.273	0.321
	Group B	30	49.47	1484.00		
	Group C	30	40.73	1222.00		
	Total	90				
Q.17 (M)	Group A	30	48.43	1453.00	.843	0.656
	Group B	30	45.30	1359.00		
	Group C	30	42.77	1283.00		
	Total	90				
Q.18 (M)	Group A	30	41.52	1245.50	2.916	0.233
	Group B	30	51.35	1540.50		
	Group C	30	43.63	1309.00		
	Total	90				
Q.19 (M)	Group A	30	42.65	1279.50	.733	0.693
	Group B	30	48.02	1440.50		
	Group C	30	45.83	1375.00		
	Total	90				
Q.20 (P+M)	Group A	30	44.42	1332.50	1.756	0.416
	Group B	30	49.60	1488.00		
	Group C	30	42.48	1274.50		
	Total	90				
Q.21 (M)	Group A	30	41.68	1250.50	1.521	0.467
	Group B	30	46.03	1381.00		
	Group C	30	48.78	1463.50		
	Total	90				

Total 21 questions were asked as per Anger Scale-3rd for the assessment of Anger emotions before the clinical study and after the trials of *JivaniyaGhritam*on Angry patients. Since observations were qualitative on ordinal

scale (gradtions), Wilcoxon Signed Rank Test is carried out to test efficacy in Group A, Group B and Group C. Above table shows that P-Values for Group A, Group B and Group C are less than 0.05 for 14 Questions. Hence we concluded that effects observed in Group A, Group B and Group C are significant.

✓ Forcomparison among Group A, Group B and Group C Kruskall Wallis H Test (Non parametric ANOVA) carried out. From above table we can observe that P-Value is less than 0.05. Hence, we conclude that there was significant difference among Group A, Group B and Group C. Further we have observed that mean rank for Group B is greater. Hence we concluded that effect observed in Group B weremore significant than Group A and Group C. Analysis was done with the help of SPSS 17.0 software. The results were interpreted as significant (P < 0.05), highly significant (P < 0.01), very highly significant (P < 0.001), and insignificant (P > 0.05).When statistical analysis of results were done, then it had been found that patients from Group B who were given *JivaniyaGhritam*along with Allopathic Modern conventional Psychiatric Drugs,were found more significant results as compared to Group A and Group C.

IV.   Discussion

Many times anger is not questioned, on the contrary is justified as it makes one enough dynamic to fight against injustice, to insist for the rights. This might be true if anger is expressed appropriately. In Nichomachean Ethics, Aristotle argues that ''Anyone can become angry—that is easy. But tobe angry with the right person, to the right degree, at the right time, for the right purpose, and in the right way—that is not easy'' (350 BCE/2004, p. 150)[4].

In view of Trigunas, anger is an expression of abnormal Rajo-guna[5]. Rajo –guna is cited as Mano-dosha - that one which causes dysfunction of mind.Any may be the situation; onset of anger will not excuse anyone without imposing its effects on mind and body. Once activated, anger can color people's perceptions, form their decisions, and guide their behavior, regardless of whether the decisions at hand have anything to do with the source of one's Anger [6]. At physical level, anger predominantly increases Pitta Dosha[7] and vitiates Rakta Dhatu[8]; additionally, it affects *Soumya*(pleasant liquid state) factors of body[9] (like Majja, Ojas). Collective effects of anger on mind and body lead to somewhat detrimental state as that person is out of self control. Repeated episodes worsen the condition. So it is essential to calm down Angry person and nullify Anger effects by one or other way. We decided to treat such individuals with drug treatment. Samhita studies reveal mention of J*ivaniyaGhritam* in*PittajaUnmada*[10].*JivaniyaGana* is *Sheet*(property developing cooling effect),*Snigdha*(Propertydeveloping liquification effect) , *Madhur* (sweet). *Ghrita*is *Pittashamak*, *Medhya*(Brain Tonic). In various researches it has been proven that *Ghrita Kalpana* plays an important role in treatment both internally and externally. If taken internally it enters the systematic circulation and can easily cross the blood brain barrier, thereby strengthens or stimulates the central nervous system and cures the deteriorated conditions of mind. Anger is a strong feeling of annoyance, displeasure, or hostility. This Rajogunatmaka mental status has not been mentioned differently in Modern Science or Ayurvedic science as special entity. Anger or wrath is an intense emotional response. It is abnormal emotion that involves a strong uncomfortable and emotional response. *JivaniyaGhritam* give positive results on Anger or Aggressive behavior in *Unmadi* Patients. Based on such views, we have conducted a clinical trial of *JivaniyaGhritam* on individuals of Angry nature.

V.   Results

All 3 Groups showed positive results but Group B showed more significant results in physical and mental symptoms.

Group-A-when only Modernconventional Psychiatric medicines given for 30 days, no significant difference means all got positive results.

Group-B-When both Modernconventional Psychiatric medicines with *JivaniyaGhritam* given for 30 days, 7 symptoms were seen some positive significant improvements like-

- ➡ Q1-Nausea, Acidity, Heart Burn
- ➡ Q2-Troubled, Disturbed mind
- ➡ Q3-Thirst
- ➡ Q4-Violently express
- ➡ Q7-Tingling in the Body
- ➡ Q11-Blame to others
- ➡ Q14- Rapid Breath

Group-C- When only *JivaniyaGhritam* was given to 30 patients, no significant difference in changes were seen, means all patients got relieved.

- ➡ In all the symptoms, both the Modern Psychiatric conventional Medicines and *JivaniyaGhritam*treatment modalities were effective but:

➤ Modern PsychiatricsConventional Medicines+ *JivaniyaGhritam*(both types given at same time*)* were more effective in Anger related 4 Physical and 3 Mental Symptoms.

➢ As far as overall improvement of patients is concerned :

JivaniyaGhritam is found to be better than Modern Psychiatric Conventional Medicines.*JivaniyaGhritam* has property of easy administration on few mental patients through food.*JivaniyaGhritam* has no adverse effects. *JivaniyaGhritam* is feasible to take with food.

Some symptomatically positive results were- *Kshutpravartan*(feeling of hunger),sound Sleep, *Malamutrotsarga*(normal passing of urine and stools), Patients demanded medicines of their own because use of taste, smell, palatability of *JivaniyaGhritam.*

Some significant positive results were seen as *Krodhi–SamkshubdhaManorogi*(severly irritated mental patient*)*patients were recovered into Stable *Manas Awastha*(mental stages)in that period of study.(i.e. Dialogues werepossible with them).As the study was conducted in *Sharad ritu*(*Pitta Kala*),*Pitta shaman karmas*(pittadosha suppression symptoms and signs)*like Urodaha(Burning in chest), SarvangaDaha*(whole body buring sensation)*, Amlapitta*(hyperacidity),*PittajShirahshool*(migraine), *Avipaka*(indigestion*) etc.* were also seen positive results with *Manas lakshanas*(mental symptoms).19Females patients who have irregular menses with burning sensationsgot good positive results when *JivaniyaGhritam*administered.

VI. Conclusion

A detailed analysis of the observations proposes that *JivaniyaGhritam* is effective in Anger. Mental stability is observed by *JivaniyaGhritam*given with Modern conventionalPsychiatric Medicines

References

[1]. Charak Samhita, Ayurvedic Deepika, Chaukhambha Sanskrit Sansthan Varanasi, Edition-1997, ChikitsaSthan 4/76, Page no.476

[2]. A ComprehensiveTreatment Program for Anger Disorders Raymond DiGiuseppe, Ph.D., D.Sc., ABPP St. John's University and The Albert Ellis Institute PPT- 31

[3]. Charak Samhita, Ayurvedic Deepika, Chaukhambha Sanskrit Sansthan Varanasi, Edition-1997, ChikitsaSthan 24/ 53 Page 585

[4]. Journal of Behavioral Decision Making , J. Behav. Dec. Making, 19: 115–137 (2006) Portrait of The Angry Decision Maker: How Appraisal Tendencies Shape Anger's Influence on Cognition , JENNIFER S. LERNER1 * and LARISSA Z. TIEDENS2 1 Carnegie MellonUniversity, USA 2 Stanford University, USA⁾

[5]. Charak Samhita, Ayurvedic Deepika, Chaukhambha Sanskrit Sansthan Varanasi, Edition-1997, VimanSthan 6/6 Page no.254

[6]. Journal of Behavioral Decision Making , J. Behav. Dec. Making, 19: 115–137 (2006) Portrait of The Angry Decision Maker: How Appraisal Tendencies Shape Anger's Influence on Cognition , JENNIFER S. LERNER1 * and LARISSA Z. TIEDENS2 1 Carnegie MellonUniversity, USA 2 Stanford University, USA

[7]. Charak Samhita, Ayurvedic Deepika, Chaukhambha Sanskrit Sansthan Varanasi, Edition-1997, ChikitsaSthan 3/115, Page no.407

[8]. SushrutSamhita ,Jalpakalpataru Tikka, Dalhanacharya, Chaukhambha Sanskrit Sansthan Varanasi, Edition-2013,Uttar Tantra 45/3, Page no.734

[9]. Charak Samhita, Ayurvedic Deepika, Chaukhambha Sanskrit Sansthan Varanasi, Edition-1997, ChikitsaSthan 22/5, Page no. 566

[10]. Charak Samhita, Ayurvedic Deepika, Chaukhambha Sanskrit Sansthan Varanasi, Edition-1997, ChikitsaSthan 4/76, Page no.476