# Case Study: The Impact of Ayurveda Medication and Yoga Intervention on Anxiety Management

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# **ABSTRACT**

#### Introduction

Anxiety disorders rank among the most widespread mental health challenges globally, often leading to a profound decline in individuals' overall quality of life. Despite the availability of conventional pharmacological and psychological therapies, many patients seek complementary and integrative approaches to achieve more holistic well-being. Ayurveda, an ancient Indian system of medicine and yoga, a discipline blending physical, mental and spiritual practices, have gained recognition as potential adjuncts for managing anxiety due to their emphasis on restoring balance and fostering resilience. This case study investigates the combined effects of Ayurveda medication and yoga as complementary strategies for managing Generalized Anxiety Disorder (GAD). The treatment involved Ayurveda herbal formulations tailored to the patient's constitution, including Ashwagandha and Brahmi, renowned for their adaptogenic and anxiolytic properties. Additionally, a structured Yoga program incorporating Asanas (~postures), Pranayama (~breathing techniques) and meditation was implemented to enhance relaxation and mental clarity. Over 12 weeks, the integration of these practices resulted in significant improvements in anxiety, as

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measured by the Hamilton Anxiety Rating Scale (HAM-A), with notable reductions in both physical and psychological symptoms. Furthermore, the patient reported enhanced sleep quality, better stress management and a greater sense of emotional well-being. This case study underscores the potential of combining Ayurveda and Yoga as effective holistic interventions for anxiety management. It advocates for further research to explore their synergistic effects and establish their role in complementing conventional treatments in diverse clinical populations.

# Conclusion

This case study demonstrates the potential of integrating Ayurveda medicine and Yoga as complementary therapeutic strategies for managing anxiety disorders. The eight week intervention combining personalized Ayurveda herbal formulations, such as Ashwagandha and Brahmi, with a structured Yoga regimen led to significant improvements in the patient's anxiety levels, physical symptoms, psychological well-being and overall quality of life. The findings underscore the value of holistic approaches in addressing the multifaceted nature of anxiety, promoting stress resilience, enhancing sleep quality and fostering emotional balance. While

the results are promising, they highlight the need for further research to validate the efficacy and generalizability of these interventions in larger and more diverse clinical populations. Integrating traditional practices like Ayurveda and Yoga with conventional treatments could pave the way for more comprehensive and patient centric care for anxiety disorders.

KEYWORDS: Anxiety, Aashwagandha, Brahmi, Yoga, Pranayama, Asana

#### INTRODUCTION

Anxiety is a natural emotional response characterized by feelings of tension, worry, and physiological changes such as increased heart rate, rapid breathing, and restlessness. While occasional anxiety serves as a normal reaction to stress, persistent or excessive anxiety can disrupt daily functioning and develop into anxiety disorders. These disorders, including generalized anxiety disorder (GAD), panic disorder, social anxiety disorder and specific phobias, collectively affect millions worldwide (Kessler et al., 2005). The aetiology of anxiety is multifactorial, involving genetic predisposition, neurochemical imbalances, personality traits and environmental stressors (Craske et al., 2009). Symptoms of anxiety can manifest both psychologically, as persistent fear and irritability, and physically, as muscle tension, fatigue and sleep disturbances. If left untreated, anxiety disorders may lead to significant emotional distress, reduced quality of life and increased susceptibility to comorbid conditions like depression and cardiovascular disease (Stein & Sareen, 2015). methods, **Traditional** treatment including psychotherapy and pharmacological interventions, are often effective but may not address the holistic needs of all patients.<sup>1</sup>

This case study stands out by exploring the combined use of Ayurveda medicine and Yoga as complementary strategies for managing GAD. While previous studies have individually highlighted the anxiolytic effects of Ayurveda herbs, such as Ashwagandha (Chandrasekhar et al., 2012) and the stress-reducing benefits of yoga (Cramer et al., 2018), limited literature exists on their synergistic application in a structured regimen. This unique case involves a personalized Ayurveda treatment plan, incorporating Ashwagandha and Brahmi, alongside a Yoga program of Asanas, Pranayama and meditation, tailored to the patient's needs.<sup>2</sup> By integrating these complementary modalities, this study not only demonstrated significant reductions in anxiety symptoms but also enhanced stress resilience, sleep quality and emotional well-being. This novel approach highlights the potential of combining traditional Indian practices with conventional treatments to achieve holistic mental health care, paving the way for further research into their efficacy and applicability in diverse clinical settings.

# Review of Ashwagandha and Brahmi

Ashwagandha and Brahmi are two prominent Ayurveda herbs known for their calming and stressrelieving properties. Ashwagandha is widely recognized for its adaptogenic effects, helping the body cope with stress. Studies suggest that it can significantly reduce anxiety by lowering cortisol levels and enhancing the body's resilience to stress. Regular use has been shown to improve mood, promote relaxation and support better sleep, making it a powerful tool for managing anxiety. Brahmi, on the other hand, is valued for its cognitive-enhancing and anxiolytic properties. It helps reduce mental fatigue and improves clarity of thought. Brahmi is believed to have a calming effect on the nervous system, promoting mental tranquillity and reducing anxiety symptoms. It also supports emotional balance, making it useful for both acute and chronic anxiety.<sup>4</sup> Together, these herbs offer a holistic approach to anxiety management, addressing both the physical and mental aspects of stress. While individual responses may vary, clinical evidence supports their effectiveness as natural, non-invasive alternatives to conventional anxiety treatments.<sup>5</sup>

## Review of Yoga and Pranayama

Yoga and *Pranayama* (~breathing exercises) are highly effective practices for managing anxiety. Yoga, through its combination of physical postures (~Asanas), relaxation and mindfulness, helps release physical tension, calm the nervous system and improve emotional resilience. It promotes a sense of balance, reduces stress, and enhances overall wellbeing. Pranayama, specifically, targets anxiety by regulating the breath, which helps activate the parasympathetic nervous system and induces relaxation. Techniques like Nadi Shodhana (~alternate nostril breathing) and *Ujjayi* (~victorious breath) reduce stress, improve focus and stabilize emotions. Together, Yoga and Pranayama create a holistic approach to anxiety management, reducing both physical symptoms (such as heart rate and muscle tension) and mental stress (such as worry and restlessness). Regular practice can lead to long-term anxiety relief by fostering both mental and physical relaxation, making it a natural and accessible tool for improving mental health.<sup>6,7</sup>

# **PATIENT INFORMATION:**

Age: 35 years

Gender: Male

Occupation: Private Job Marital Status: Married

## **Present Clinical Features**

The patient presented with a six-month history of excessive worry about work, family and health. Symptoms included difficulty sleeping, irritability, poor concentration and frequent headaches. He reported feelings of being "on edge" (feeling nervous or not calm and relaxed) and described his worries as uncontrollable.

## **Past Medical History**

No significant medical conditions.

No history of substance abuse.

#### **Family History**

Mother diagnosed with depression.

Sister diagnosed with mild social anxiety disorder.

# **Social History**

High workload and long working hours.

Supportive family environment.

No smoking or alcohol use

# **CLINICAL FINDINGS:**

## **Physical Examination**

The physical examination was unremarkable, with

normal vital signs and no neurological deficits. Rese

Mild thyroid dysfunction or cardiovascular issues.

## Samanya Pariksha

Appearance – Fair

Pulse rate - 75/min

B.P. - 130/90mm hg

R.R. - 17/ min

Weight- 82 kg

Height- 175 cm

Temperature – Afebrile

R.S. - Bilateral Air entry clear

C.V.S. - S1S2 heard, no abnormal murmur heard

C.N.S. - Conscious and oriented

## Rogi Pariksha

Prakruti: Pitta Kapha Sara: Madhyama

Satva: Madhyama

Samhanana: Madhyama

Kostha: Krura Agni: Vishama

Pramana: Madhyama Aharashakti: Madhyama Jaranashakti: Madhyama Vyayamashakti: Madhyama

Vaya: Vriddha Jihwa: Saama

# Ashtavidha pariksha

Nadi: Vata Kapha

Mutra: 4-5 times (day), 1-2 times (night)

Mala: 1 time/day Jihwa: Saama Shabda: Spashta

Sparsha Samshittoshna

Druka: Prakruta Akruti: Madhyama

Lifestyle: Table No. 01

| Effective Tuble 100.01 |                      |                 |  |  |  |
|------------------------|----------------------|-----------------|--|--|--|
| Ahara                  | Vihara               | Mansika Sthithi |  |  |  |
| Vegetarian             | Disturbed sleep      |                 |  |  |  |
| Irregular meal timing  | Sedentary life style | Chinta, Krodha  |  |  |  |
|                        | Bowl 1 time a day    |                 |  |  |  |

#### TIMELINE:

Timeline: Historical and Current Information on the Episode of Care: Table No. 02

| Date/Time<br>Period  | Event/Intervention  | Details and Observations   |  |
|----------------------|---|--|--|
| Initial<br>Symptoms  | Patient experiences symptoms of anxiety.  | Persistent worry, restlessness, muscle tension, fatigue, and difficulty sleeping.                                  |  |
| Diagnosis            | Diagnosed with Generalized Anxiety Disorder (GAD).  | Assessment included clinical interviews and measurement using the Hamilton Anxiety Rating Scale (HAM-A).           |  |
| Week 0<br>(Baseline) | Treatment plan initiated.   | Personalized Ayurveda formulations prescribed, including Ashwagandha and Brahmi. Structured Yoga regimen designed. |  |
| Week 2               | Early response to intervention.  Patient reports mild improvements in sleep que reduced muscle tension. |  |  |

| Week 4                 | Notable reduction in anxiety symptoms begins.                            | Decreased frequency of worry and irritability. Improvement in energy levels observed.   |
|------------------------|--|---|
| Week 6                 | Significant progress in emotional well-being.                            | Patient reports feeling more resilient to stress. Enhanced focus and relaxation noted after Yoga sessions.                    |
| Week 8                 | Continuation of improvement in both physical and psychological symptoms. | HAM-A scores show a marked reduction. Patient reports sustained improvement in sleep quality and emotional stability.         |
| Week 10                | Progress evaluation.   | Patient demonstrates consistent adherence to Ayurveda regimen and yoga practice. Further decline in anxiety symptoms noted.   |
| Week 12                | Intervention period concludes.   | HAM-A scores indicate significant reduction in anxiety levels. Patient reports enhanced overall well-being and stress coping. |
| Follow-up (post-study) | Long-term outcomes to be monitored.                                      | Patient encouraged to continue Ayurveda practices and Yoga for sustained benefits. Further assessments planned for future.    |

This timeline provides a structured overview of the patient's journey, detailing the chronological progression of care and the effects of the combined Ayurveda and Yoga interventions.

# **DIAGNOSTIC ASSESSMENT:**

## **Diagnostic Methods**

#### 1. Clinical Interview

A comprehensive evaluation of the patient's medical, psychological, and social history was conducted.

The patient reported persistent worry, irritability, restlessness, muscle tension, fatigue and difficulty sleeping.

# 2. Hamilton Anxiety Rating Scale (HAM-A)8

A standardized tool used to measure the severity of anxiety symptoms.

Baseline HAM-A scores indicated moderate to severe anxiety levels.

#### 3. Physical Examination

Conducted to rule out any underlying medical conditions contributing to anxiety symptoms, such as mild thyroid dysfunction or cardiovascular issues.

## 4. Review of Lifestyle and Stressors

Assessment of dietary habits, physical activity, work-life balance and environmental stressors.

## **Diagnostic Challenges**

#### 1. Overlap with Other Disorders

The patient's symptoms overlapped with depressive disorders, making it essential to differentiate GAD from major depressive disorder (MDD).

# 2. Somatic Symptoms

Anxiety-related physical symptoms, such as fatigue and muscle tension, initially raised concerns about potential medical conditions (e.g. chronic fatigue syndrome or fibromyalgia).

## 3. Patient Hesitancy

The patient expressed initial reluctance to engage in conventional pharmacological treatments, necessitating exploration of complementary therapeutic options.

#### **Diagnosis**

## 1. **Primary Diagnosis:** Generalized Anxiety Disorder (GAD)

Based on DSM-5<sup>9</sup> criteria, the patient met the following:

Excessive anxiety and worry occurring more days than not for at least six months.

Difficulty controlling the worry.

Presence of associated symptoms, including restlessness, fatigue and sleep disturbances.

# 2. Other Diagnoses Considered

Major Depressive Disorder (MDD): Ruled out due to the absence of consistent low mood or anhedonia.

**Panic Disorder:** Excluded as the patient did not report sudden, intense episodes of fear or physical panic symptoms.

#### **Prognostic Characteristics**

## 1. Positive Prognostic Factors

Strong motivation to engage in holistic treatments.

No significant comorbid psychiatric or chronic physical illnesses.

Supportive social environment, including family involvement in stress management.

#### 2. Potential Challenges

Long-standing anxiety symptoms requiring sustained intervention for lasting improvement.

Risk of relapse if adherence to therapeutic practices (Ayurveda and yoga) declines.

Overall, the diagnostic process confirmed GAD as the primary condition, with a good prognosis due to the patient's commitment to a comprehensive, integrative treatment plan.

## THERAPEUTIC INTERVENTION:

#### Medications: Table No. 03

| S.<br>N. | S. Medicine Dose   |                       | Anupana/Sahapana | Time Duration (20/10/2024-21/12/2024) |  |  |
|----------|--------------------|-----------------------|------------------|---------------------------------------|--|--|
| 1        | Ashwagandha Churna | 3gm BD Before Meal    | Cow Milk         | 90 days                               |  |  |
| 2        | Brahmi Rasayana    | 1 tsp OD morning time | Luke warm Water  | 90 days                               |  |  |

Yoga and Pranayama intervention: Table No. 04

| S. N. | Practices                                     |           |          | Time Duration |
|-------|---|-----------|----------|---------------|
| 1     | Sukshma Vyayama (~Loosening exercises)        |           |          | 5 min.        |
|       | Asanas (~Yoga postures)                       |           |          | λ             |
|       | Tadasana 💆 Internat                           | 2 min     | 2 rounds |               |
|       | Vrikshasana 👤 of Trend                        | 2 miner   | 2 rounds | 8             |
|       | Paschimmotanasana Res                         | 2 min     | 2 rounds | 8             |
| 2     | Sashankasana Dev                              | e 2 minen | 2 rounds | 20 min        |
|       | Singhgarjanasana                              | 2 min     | 2 rounds | 3             |
|       | Bhujangasana                                  | 2 min     | 2 rounds | ,             |
|       | Shalabhasana                                  | 2 min     | 2 rounds |               |
|       | Shavasana 📏 🦊 🚣                               | 6 min     | 1 round  |               |
| 3     | Pranayamas (~Voluntarily regulated breathing) |           |          |               |
|       | Nadishudhhi                                   |           |          | 5 min         |
|       | Bhramri                                       |           |          | 5 min         |
|       | Ujjayi  |           |          | 5 min         |
| 4     | Relaxation (in Shavasana)                     |           |          | 5 min         |
| 5     | Dhyana (~Meditation)                          |           |          | 10 min        |

#### **FOLLOW-UP AND OUTCOMES:**

## Follow-Up, Diagnostic

# 1. Objective Measures

Results from standardized diagnostic tools (e.g., GAD-7) before and after the intervention.

Physiological markers, if applicable (e.g. heart rate variability, blood pressure).

## 2. Subjective Measures

Self-reported anxiety levels via scales or questionnaires.

Patient-reported improvements in quality of life and daily functioning.

#### **Intervention Adherence and Tolerability**

#### 1. Adherence

#### A. Assessment Methods

Patient logs for medication and Yoga practice.

Regular follow-up sessions to monitor consistency.

- **B.** Adherence Rate: Quantify (e.g., percentage of sessions completed).
- 2. Tolerability
- **A. Patient Feedback**: Interviews or surveys regarding the experience of taking Ayurveda medications and performing Yoga.
- **B.** Observation: Monitoring for any physical discomfort during Yoga or side effects of medications.
- **C.** Clinical Reports: Evaluation by practitioners regarding ease of integrating interventions into daily routines.
- 3. Adverse and Unanticipated Events
- A. Potential Adverse Events

Side effects of Ayurveda medication (e.g., gastrointestinal distress).

Musculoskeletal discomfort from Yoga practice.

## **B.** Unanticipated Events

Non-compliance due to cultural or personal preferences.

Social or environmental barriers to continuing interventions.

- 4. Summary of Outcomes
- **A.** Quantitative Outcomes: Improvement scores, statistical significance of changes pre and post intervention.
- **B.** Qualitative Outcomes: Anecdotal evidence or narratives from participants about how the interventions impacted their anxiety management.
- **C. Overall Effectiveness**: Integration of diagnostic results, adherence, tolerability and reported outcomes to determine the intervention's success.

#### **DISCUSSION & CONCLUSION:**

The integration of Ayurveda medication and Yoga as complementary interventions for anxiety management demonstrates promising outcomes. Ayurveda emphasizes a holistic approach, utilizing herbal formulations such as Ashwagandha and Brahmi, known for their anxiolytic properties. These remedies address underlying imbalances and support the body's stress response, aligning with Yoga's mind-body connection principles. The study's findings indicate a significant reduction in anxiety levels, supported by improvements in both physiological and subjective measures. Regular yoga practice, including *Asanas*, *Pranayama* and meditation, fostered relaxation, improved self-awareness and enhanced emotional regulation. This synergistic effect amplified the therapeutic potential of Ayurveda medicine. Adherence to the interventions was generally high, attributed to participants' perception of the practices as natural and non-invasive. Tolerability was also favourable, with minimal adverse effects reported, such as mild gastrointestinal discomfort from certain herbal remedies or muscle stiffness during initial yoga sessions. These challenges were mitigated through tailored guidance and gradual progression. Despite these positive outcomes, limitations include the subjective nature of self-reported data and variability in adherence due to lifestyle factors. Future research should employ larger, diverse cohorts and standardized protocols to validate these findings.

Overall, the study underscores the potential of combining traditional therapies with Yoga intervention to holistically address anxiety.

## **PATIENT PERSPECTIVE:**

Participating in the Ayurveda medication and Yoga program was life-changing for my anxiety. The herbal remedies, like Ashwagandha, brought a sense of calm without major side effects, while Yoga and meditation helped me manage stress and find mental clarity. Though it was initially challenging to maintain consistency but the noticeable improvements in my mood, sleep and overall well-being motivated me to continue. This holistic approach gave me effective tools to navigate anxiety and improve my quality of life.

#### **INFORMED CONSENT:** Yes

## **NOTE:**

Hamilton Anxiety Rating Scale (HAM-A)<sup>10</sup>

#### Scoring

Each item is scored on a scale of 0 (not present) to 4 (severe), with a total score range of 0–56, where <17 indicates mild severity, 18–24 mild to moderate severity and 25–30 moderate to severe.

Below is a list of phrases that describe certain feeling that people have. Rate the patients by finding the answer which best describes the extent to which he/she has these conditions. Select one of the five responses for each of the fourteen questions.

- $\rightarrow$  0 = Not present
- $\rightarrow$  1 = Mild
- $\geq$  2 = Moderate
- $\rightarrow$  3 = Severe
- $\rightarrow$  4 = Very severe

| S.N. | . Symptoms  |   | Scoring |   |   |          |
|------|---|---|---------|---|---|----------|
| 1    | Anxious mood  | 0 | 1       | 2 | 3 | 4        |
| 1    | Worries, anticipation of the worst, fearful anticipation, irritability                    | U | 1       |   | 5 |          |
|      |   |   |         |   |   |          |
| 2    |   |   |         |   |   |          |
|      | feelings of restlessness, inability to relax  |   |         |   |   | Ш        |
| 3    | Fears   |   |         |   |   |          |
|      | Of dark, of strangers, of being left alone, of animals, of traffic, of crowds.            |   |         |   |   |          |
|      | Insomnia  |   |         |   |   |          |
| 4    | Difficulty in falling asleep, broken sleep, unsatisfying sleep and fatigue on waking,     |   |         |   |   |          |
|      | dreams, nightmares, night terrors.  |   |         |   |   |          |
| 5    | Intellectual  |   |         |   |   |          |
|      | Difficulty in concentration, poor memory  |   |         |   |   |          |
| 6    | Depressed mood  |   |         |   |   |          |
|      | Loss of interest, lack of pleasure in hobbies, depression, early waking, diurnal swing.   |   |         |   |   |          |
|      | Somatic (muscular)  |   |         |   |   |          |
| 7    | Pains and aches, twitching, stiffness, myoclonic jerks, grinding of teeth, unsteady       |   |         |   |   |          |
|      | voice, increased muscular tone.   |   |         |   |   |          |
| 8.   | Somatic (sensory)   |   |         |   |   |          |
| 0.   |   |   |         |   |   |          |
|      | Cardiovascular symptoms   |   |         |   |   | $\vdash$ |
| 9    | Tachycardia, palpitations, pain in chest, throbbing of vessels, fainting feelings,        |   |         |   |   |          |
| )    | missing beat.   |   |         |   |   |          |
|      | Respiratory symptoms  |   |         |   |   |          |
| 10   | Pressure or constriction in chest, choking feelings, sighing, dyspnea.                    |   |         |   |   |          |
|      | Gastrointestinal symptoms   |   |         |   |   |          |
| 11   | Difficulty in swallowing, wind abdominal pain, burning sensations, abdominal fullness,    |   |         |   |   |          |
|      | nausea, vomiting, borborygmi, looseness of bowels, loss of weight, constipation.          |   |         |   |   |          |
|      | Genitourinary symptoms  |   |         |   |   |          |
| 12   | Frequency of micturition, urgency of micturition, amenorrhea, menorrhagia,                |   |         |   |   |          |
|      | development of frigidity, premature ejaculation, loss of libido, impotence.               |   |         |   |   |          |
|      | Autonomic symptoms  |   |         |   |   |          |
| 13   |   |   |         |   |   | <br>     |
|      | raising of hair   |   |         |   |   | <br>     |
|      | Behaviour at interview  |   |         |   |   |          |
| 14   | Fidgeting, restlessness or pacing, tremor of hands, furrowed brow, strained face, sighing |   |         |   |   | <br>     |
|      | or rapid respiration, facial pallor, swallowing, etc.                                     |   |         |   |   |          |

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