



Phenomenology of anxiety disorders in India

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Abstract

Anxiety Disorders have been influenced by culture factors in India for several centuries. These factors impact the presentations, diagnoses and treatment of anxiety disorders.

Ancient Indian texts, some dating back to 5000 BC, have described various anxiety disorders. Cultural aspects of anxiety disorders were first represented in DSM IV, as late as 1994. Collectivism, interdependent self-construal, and the emotion of *lajja* (shame) are unique features of Indian culture. These influence the presentation of various anxiety disorders including Generalized Anxiety, Panic, Social Anxiety and Phobias. Culture specific syndromes like *Dhat* are associated with multiple somatic complaints which are attributed by male patients to semen loss. Similarly, *Koro Syndrome* or *Jhinjhinia Bemar*, entails the belief that the genitals will retract into the abdomen is seen in men and woman.

This review also explores the wide range of therapeutic modalities practiced in India. Somatization of anxiety results in pharmacological treatments being sought from general physicians rather than mental health professionals. In rural areas, faith healers and religious rituals are common. Psychotherapy is more directive, short term and often uses analogies from mythology, philosophy and religion. Ayurvedic herbs, including *Sankhapuspi*, *Bhrami* and *Ashwagandha* are efficacious in treating anxiety disorders. Unani medicine uses herbal drugs like *Sankhaholi* to treat anxiety symptoms without any side-effects or withdrawal upon suddenly stopping the medicine. However, homeopathy in the treatment of anxiety disorders has limited efficacy evidence. Yoga includes practice of *asanas*, *pranayama* and meditation, which help manage anxiety by their down-regulating effect on HPA axis resulting in reduced heart-rate variability and greater gray matter volumes. Transcendental meditation has been linked to neurotransmitter changes resulting in reduces stress and anxiety symptoms. Mindfulness, based on Buddhist philosophy, is associated with reduced anxiety.

Factoring in cultural factors enables one to make relevant diagnoses and also offer effective and holistic treatments to individuals with Anxiety Disorders.



Biography

Maherra Khambaty is a clinical psychologist and the Head of Quality Assurance in the Department of Psychiatry Research at the Jaslok Hospital and Research Centre in Mumbai. She has a Master's degree (MSc, MA) in Clinical Psychology and a Diploma in Clinical Research. Being a Yoga practitioner for over 15 years, her current research interest is in Yoga and Meditation in Cardiac Disease and in Mental Health. She is also involved in the development of a new instrument for the study of Depressive Disorders. She has won numerous awards in the areas of Psychology and Clinical Research.

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