

	<b>Sattvavajaya Chikitsa</b>	<b>Cognitive Behavioural Therapy</b>
<b>Basic Principles</b>	<p>Considered to be a means of countering/ alleviating distress through controlling the mind and its urges.</p> <p>Sattva – guiding towards hita, away from ahita (Sarma et al., 2016)</p> <p>The victory of sattva, over the demands of rajas and tamas, (dhee, Dhriti, Smriti) (Sarma et al., 2016)</p> <p>through Gyan (self knowledge) Vigyan (psycho-education), Dhairya (patience &amp; will power) Smriti (memory) and Samadhi (self-transcendence)</p>	<p>Ultimately aims to teach patients to be their own therapist, by helping them to understand their current ways of thinking and behaving, and by equipping them with the tools to change their maladaptive cognitive and behavioural patterns.</p> <p>Essentially being aware of one's responses, and actively changing them.</p>
	<p><b>Aims to provide (i) Assurance to the patient of the return of lost objects or persons</b> – Empathically, emotional support is given to the patients who are in grief or sudden loss.</p> <p>It declares that when a person is stressed by the loss of some desired subject, he should be treated by supplementing the same, if not at least through a minimal empathy or consolation</p>	<p>Aims to break down the problem step by step, in a structured manner, whilst focused on the present and alleviating current needs and manifestations of the problem.</p> <p>Problem oriented approach, focused on SMART (specific, measurable, achievable, realistic and time-limited) goal setting</p>
	<p><b>(ii) Works at inducement of emotions opposite to those associated with patient's distress</b> - Substitution or replacement of emotions with opposite ones is another novel method induced by SC. It is advised that if the patient has developed psychosis due to emotional disorders, he/she should be treated by inducing the opposite nature of the respective attained emotions.</p>	<p>Focuses on understanding and unlearning Negative automatic thoughts, Dysfunctional assumptions, and negative Core beliefs</p> <p>(Donohue et al. 2008).</p>
<b>Cause of Distress</b>	<p>Disturbance is caused via imbalance of the gunas, excessive rajasic or tamasic living. Aims to increase sattva guna, hence the name.</p> <p>Disturbances are also caused through the actions of the senses (taste, tactile, visual, auditory &amp; olfactory) as well as the objects of the mind and thinking in various malfunctioning patterns/ states.</p> <p>It is advised that if the patient has developed psychosis due to emotional disorders such as</p>	<p>CBT hypothesises that people's emotions and behaviours are influenced by their <b>perceptions of events</b>. It is not a situation in and of itself that determines what people feel but rather the way in which they construe a situation' (Beck, 1964).</p> <p>Therefore, illnesses are caused more due to negative or dysfunctional perceptions as compared to the event itself.</p>

	<p>excessive <i>Kama</i> (desire), <i>Bhaya</i> (fear), <i>Krodha</i> (anger or aversion), <i>Harsha</i> (happiness), <i>Irshya</i> (jealousy), and <i>Lobha</i> (greed), he/she should be treated by inducing the opposite nature of the respective attained emotions.</p> <p>Forexample, “<i>Kama</i>” (desire) toward alcohol may be alleviated by inducing “<i>Krodha</i>” (aversion) toward that affection and vice versa. (similar to aversive conditioning from behaviourism)</p>	<p>Attempts to tackle faulty cognition at 3 levels  Negative automatic thoughts - are thoughts that are involuntarily activated in certain situations. In depression, NATs typically centre on themes of negativity, low self-esteem and uselessness. For example, when facing a task, a NAT may be ‘I’m going to fail’</p> <p>Dysfunctional assumptions - rigid, conditional ‘rules for living’ that people adopt. These may be unrealistic and therefore maladaptive. For example, one may live by the rule that ‘It’s better not to try than to risk failing’.</p> <p>Core beliefs - or schemas, are deeply held beliefs about self, others and the world. Core beliefs are generally learned early in life and are influenced by childhood experiences and seen as absolute. (Byrne, 2013) (analogous to our inherent samskaras)</p>
<p><b>Domains covered</b></p>	<p>1. <i>Dhee chikitsa</i> or uplifting intelligence. This domain brings about uplifting or understanding their intellectual mind/thoughts. The overall mode of action of this domain is the judgment and discrimination of the negative thoughts. (chintya – ability to do chintan. Thinking at a higher level)</p> <p>2. <i>Dhairya chikitsa</i> or boosting confidence and determination.[14] The aim here is to bring firmness/strength to the disturbed mind and also preserving the mental stability. The support here is to give maximum empathy and create a matured level of awareness and judgment</p> <p>3. <i>Atma vijnana chikitsa</i> or stimulating the consciousness to set self-realization-This domain brings mental tranquillity through</p>	<p>A – B – C Components of the problem are understood before treatment. Each component is targeted for holistic treatment, and since the components constantly interact with each other</p> <p>A – Affective- Emotions: Types of emotions experienced post event (e.g., anger, anxiety and depressive problematic emotions)</p> <p>B- Behavioural – Problematic behaviors, outward expressions of how the thoughts and</p>

	<p>understanding the hidden conflicts which are the source of the emotional illness. (Belguli and Savitha, 2019)</p>	<p>feelings manifest themselves. Usually outwardly visible</p> <p>C- Cognitive - Thoughts: What is the patient thinking/ how did they perceive the event</p>
<b>Process</b>	<p><b>Gyana</b></p> <p>The word <i>Gyana</i> stands for <i>Atmagyana</i>; i.e., knowledge of self and soul, spiritual knowledge and true knowledge. For attaining <i>Atma Gyana</i>, Acharya Charaka has described various methods but stress has been laid on <i>Satya Buddhi</i> i.e., true knowledge or true understanding. <i>AdhyatmaGyana</i> also refers to the complete knowledge of the <i>Sarira</i> and the <i>Manas</i>. (i.e. Self- Knowledge)</p>	<p><b>Assessment</b></p> <p>This may include filling out questionnaires to help you describe your particular problem and pinpoint distressing symptoms. You will be asked to complete forms from time to time so that you and your therapist can plot your progress and identify problems or symptoms that need extra attention</p>
	<p><b>2. Vijnana</b></p> <p>The scriptural and the textual knowledge which takes the person to the true and the valid knowledge is <i>Vijnanam</i>. It gradually diminishes the <i>Rajasik</i> and <i>Tamasik</i> quality of the mind and increases the <i>Satwik</i> quality.</p> <p>Jnana turns into Vijnana when it gets processed and passes the criteria of scientific principles including formulation of hypothesis, analysis of the facts, repeated and reproducible observation leading to practical usability. Ultimately we get the approved Jnana called Vijnana (Jnanamtadarthniscita).  (i.e. Psychoeducation)</p> <p>Dhannarthavakya (education of individual and family)</p>	<p><b>Personal education</b></p> <p>Your therapist provides written materials (such as brochures or books) to help you learn more about your particular problem. The saying ‘knowledge is power’ is a cornerstone of CBT. A good understanding of your particular psychological problem will help you to dismiss unfounded fears, which will help to ease your anxiety and other negative feelings</p>
	<p><b>3. Dhairya</b></p> <p><i>Dhairya</i> refers to the stability of mind. It is <i>Dhairya</i>, which restrains the mind from unwholesome objects and can control the mind. Mind can be restrained only after adopting <i>Dhairya</i>, which is an important tool of <i>Satwavajaya chikitsa</i>. (i.e. Self- monitoring and control)</p>	<p><b>Goal setting</b></p> <p>Your therapist helps you to draw up a list of goals you wish to achieve from therapy (for example, you may want to overcome your shyness in social settings). You and your therapist work out practical</p>

		<p>strategies to help fulfil these goals</p> <p><b>Practise of strategies</b> – you practise your new strategies with the therapist. For example, you may role-play difficult social situations or realistic self-talk (how you talk to yourself in your head) to replace unhealthy or negative self-talk</p>
	<p><b>4. Smriti</b></p> <p>‘<i>Smriti</i>’ is a term used to denote a wide range of higher intellectual faculties including memory, cognition, past tense perception and mastery in higher sciences, hence is also used in metaphysics. This means preservation of the acquired faculty of cognition is ‘<i>Smriti</i>’. <i>Yoga</i> claims that one can stop mental functions through <i>Abhyasa</i> (practice) and <i>Vairagya</i> (renunciation)</p> <p>(i.e. Self monitoring + mastery)</p> <p>Can be seen as analogous to EMDR, wherein an attempt is made to remove ill memory (vikrit smriti) and replace them with positive memories/ associations (samyak smriti).</p>	<p><b>Homework</b></p> <p>You will be expected to actively participate in your own therapy. You are encouraged to use the practical strategies you have practised during the course of your daily life and report the results to the therapist. For example, the therapist may ask you to keep a diary, and consciously work on changing negative or harmful memories and instincts</p> <p>Skills once acquired are to be consolidated and applied to real life situations, both within and outside clinic. Goal is to bring about generalisation and maintenance</p> <p>(CBT, Mayo Clinic)</p>
	<p><b>5. Samadhi</b></p> <p><i>Samadhi</i> is the condition where after gaining complete contact with the <i>Atma</i>, <i>Mana</i> loses its contact with the external objects and conjunctions with the <i>Atma</i>. It is a specialized concept of <i>Yoga</i> mostly regarded as either spiritual or psychological technique to develop the ideal human personality, leading to the state of character transformation and attainment of final goal of life towards salvation</p> <p>(i.e. Self Transcendence)</p> <p>(Belaguli and Savitha, 2019)</p>	<p><b>Follow Up (optional)</b></p>

<p><b>Techniques</b></p>	<p><i>Cintya</i>- by regulating the thought process</p> <p>Some important techniques / steps in promoting Jnana are- recognizing and correcting negative automatic thoughts, teaching reattribution techniques, increasing objectivity in perspectives keeping spiritual understanding of life, identifying and testing maladaptive assumption, and decentering, and it may also include such behavioural techniques as activity scheduling, homework assignments, graded task assignment, behavioural rehearsal, role playing and diversion techniques and teaching problem solving skills</p> <p>Reeducation and Insight – Punarshikshan and vicharana is encouraged (Tripathi, 2012)</p>	<p>Activity scheduling and behaviour activation - If there's an activity you tend to put off or avoid due to fear or anxiety, getting it on your calendar can help. Once the burden of decision is gone, you may be more likely to follow through. Activity scheduling can help establish good habits and provide ample opportunity to put what you've learned into practice.</p> <p>Journaling and thought records - Writing is a time-honored way of getting in touch with your own thoughts.</p> <p>Your therapist may ask you to list negative thoughts that occurred to you between sessions, as well as positive thoughts you can choose instead.</p> <p>Another writing exercise is to keep track of the new thoughts and new behaviors you put into practice since the last session. Putting it in writing can help you see how far you've come.</p>
	<p><i>Vicharya</i>- by replacing the negative ideas and thinking patterns</p> <p>Dharma Artha Vakya involves correcting the depressive negative cognitions (ideations) e.g. hopelessness, worthlessness, helplessness and pessimistic ideas, and replacing them by new cognitive, emotional</p> <p>Pratidvanda Cikitsa (Replacement of Emotions) Replacement of opposite emotions (viz. Kama for Krodha) is one of the approaches of psychotherapy (Sattvavajaya) in Ayurveda. In the case of mental derangements resulting from an excess of desires, grief, delight, envy or greed, should be allayed by bringing the</p>	<p>Cognitive restructuring or reframing - Perhaps you tend to over-generalize, assume the worst will happen, or place far too much importance on minor details. Thinking this way can affect what you do and it can even become a self-fulfilling prophecy.</p> <p>Your therapist will ask about your thought process in certain situations so you can identify negative patterns. Once you're aware of them, you can learn how to reframe those thoughts so they're more positive and productive.</p>

	<p>influence of opposite ones (contrast), to bear on the prevailing one and neutralize it.  Kama shokabhayakrodha, harshesyalobha Sambhavan,  ParasperPratidvandvairebhirevaShamamnayet mm  (C. Chi. 9/86)  (Dhoriyani, 2014)</p>	<p>For example: “I blew the report because I’m totally useless” can become “That report wasn’t my best work, but I’m a valuable employee and I contribute in many ways.”</p>
	<p><i>Uhya-</i> by channeling the presumptions</p>	<p>Behavioral experiments  Behavioral experiments are typically used for anxiety disorders that involve catastrophic thinking.</p> <p>Before embarking on a task that normally makes you anxious, you’ll be asked to predict what will happen. Later, you’ll talk about whether the prediction came true.</p> <p>Over time, you may start to see that the predicted catastrophe is actually not very likely to happen. You’ll likely start with lower-anxiety tasks and build up from there.</p>
	<p><i>Dheya-</i> by polishing the objective</p>	<p>Successive approximation  This involves taking tasks that seem overwhelming and breaking them into smaller, more achievable steps. Each successive step builds upon the previous steps so you gain confidence as you go, bit by bit.</p> <p>Realistic Goal Setting</p>
	<p><i>Samkalpa-</i> by proper guidance and advice for taking, right decisions</p> <p>Suhritvakya (guidance and suggestion)  The patients are given guidance to take decision with the help of guideline of Dharma and Artha, available in classical literature and thus, they can help themselves. The patients should know the pros and cons of their disease state and healthy state.  (Tripathi, 2012)</p>	<p>Guided discovery  In guided discovery, the therapist will acquaint themselves with your viewpoint. Then they’ll ask questions designed to challenge your beliefs and broaden your thinking.</p> <p>You might be asked to give evidence that supports your</p>

	<p>Dhannarthavakya (education of individual and family)  The family is also to be guided positively to support the patient and his needs. All the family members are to be informed about the nature and course of the disease, precautions to be taken for good management of the disease. They are further educated to behave properly with the patient whatever the situation is (Tripathi, 2012)</p>	<p>assumptions, as well as evidence that does not.</p> <p>In the process, you'll learn to see things from other perspectives, especially ones that you may not have considered before. This can help you choose a more helpful path.</p> <ul style="list-style-type: none"> <li>- Socratic Questioning</li> <li>- Gentle Reasoning</li> </ul>
		<p>Exposure therapy  Exposure therapy can be used to confront fears and phobias. The therapist will slowly expose you to the things that provoke fear or anxiety, while providing guidance on how to cope with them in the moment.</p> <p>This can be done in small increments. Eventually, exposure can make you feel less vulnerable and more confident in your coping abilities.</p>
	<p>Yogic relaxation is a part of psychotherapy.</p> <p>Biofeedback is the use of an instrument (usually electronic) which provides immediate feedback to the patient regarding his physiological activities normally not available to the conscious mind e. g. EKG, BEG, pulse rate, blood pressure, EMG, galvanic skin response(GSR).</p> <p>The feedback helps the patient, apparently to control these responses. Relaxation is easily achieved by this method  A simpler form (relaxometer) uses only one parameter, the GSR.</p> <p>Other uses of biofeedback include treatment of enuresis, migraine headaches, tension headache, idiopathic hypertension, incontinence, cardiac arrhythmias, uncontrolled generalised tonic clonic seizures and also for neuromuscular rehabilitation (Tripathi, 2012)</p>	<p>Relaxation and stress reduction techniques  In CBT, you may be taught some progressive relaxation techniques, such as:</p> <p>deep breathing exercises  muscle relaxation  imagery  You'll learn practical skills to help lower stress and increase your sense of control. This can be helpful in dealing with phobias, social anxieties, and other stressors.</p> <p>Biofeedback Mechanisms</p>

	<p>These methods should be used in combination with other methods for promotion of Vijnana (knowledge of our own bodily responses)</p>	
	<p>Deshatan – leaving space and going away, physical distancing from stressor</p>	<p>Role playing  Role playing can help you work through different behaviors in potentially difficult situations. Playing out possible scenarios can lessen fear and can be used for:</p> <ul style="list-style-type: none"> <li>improving problem solving skills</li> <li>gaining familiarity and confidence in certain situations</li> <li>practicing social skills</li> <li>assertiveness training</li> <li>improving communication skills</li> </ul> <p>(Techniques of CBT, Healthline)</p>