



**A MANAGEMENT MODEL TO PROMOTE HAIR GROWTH FOR ANDROGENETIC
ALOPECIA CASES THROUGH YOGA & AYURVEDA**

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Abstract: **Aim:** The aim of the paper is to develop management strategies to overcome baldheadedness through complimentary medicine system like Ayurveda and the supplement it through yoga techniques. **Background** baldheadedness is a worldwide problem that promotes alopecia and it is a dermatological disorder. It may be due to psychological disorder and nearly 2% of world's population is affected from this disorder commonly known as baldness starts from hair fall. **Method** A strategic management tool is developed based on traditional and complementary medicine systems. Yoga and Ayurveda methods are used to reduce the hair fall without side effects; unlike in the allopathic systems. In a hair fall due to heat imbalance of three streams of Ayurveda system produced in the brain region which could be overcome by different ayurvedic compositions. This is supplemented with yoga practices. **Results** A management strategy tool is developed for constant worry management. In addition, one has to practice Hath yoga exercises such as: suryanamaskar (Sun salutation), Tadasana (breath awareness – lying or standing) etc. Yogic exercises helps to come over hair fall. The soft essences of the herbal oil are used to increase nutrients for hair growth. **Conclusion:** Complementary & alternative medicine may be systematized; further research data to be collected and further study is required to make protocols for therapy purposes. Anxiety, constant worry and depression gets reduced through yoga and thus indirectly helping for better hair growth.

Key words: Baldheadedness, constant worry, Yoga, Ayurveda.

Introduction: Hair is considered to be a major element of an individual's general appearance. The

psychological impact of baldheadedness results in a constant worry ful state along with images of reduced worth. It is not surprising that both male and female find baldheadedness a constant worry ful experience. Genetic baldheadedness is the major problem affecting male in the age of 50. In female the major cause of baldheadedness at the age of 50 is nutritional. Increased and persistent hair shedding (chronic telogen effluvium) and

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Received on: November 2018

Accepted after revision: December 2018

DOI: 10.30876/JOHR.6.4.2018.301-306

reduced hair volume are the principal changes occurring in modern society. The main cause appears constant worry, depression, anxiety compromised by a suboptimal intake of the fast food and lack of physical workout.

Baldheadedness wanes with telogen effluvium and androgenetic alopecia which aggravates anxiety and constant worry more reflective than its objective cruelty would appear to justify. Constant worry reflects the profound symbolic and psychosocial importance of hair. Constant worry has long been implicated as one of the causal factors involved in baldheadedness. Constant worry is an ordinary condition, a response to a physical threat or psychological anguish that generates a host of chemical and hormonal reactions in the body. Basically, the body prepares to fight or flee, pumping more blood to the heart and muscles and shutting down all nonessential functions. As a temporary state, this reaction serves the body well to defend itself. When the constant worry reaction is prolonged, however, the normal physical functions that have in response either been exaggerated or shut down become dysfunctional.

P.K. Jain et al. (2012) explained different causes of baldheadedness i.e. hypothyroidism, damage of pituitary gland that stimulates the thyroid gland, excess formation of male hormones due to any of the disorders, heredity, autoimmune disease where the immune system of the body attacks the hair follicle, severe psychic constant worry and biological constant worry, number of surgical operations, hemorrhage or shock, crimping or hot water bath etc. cause thermal damage to the hair follicle. As per Albert and M. Kligman 1961 (Pathologic Dynamics of Human Baldheadedness) constant worry is the main cause of temporary baldheadedness.

A case-control design was used to compare constant worry by Janine York, Thomas Nicholson and Patricia Minors in 1998 (as measured with the Social Readjustment Rating Scale) in the lives of 25 women who had experienced recent, unexplained baldheadedness with that of 25 women with no baldheadedness. High constant worry was reported by 22 of the

women experiencing baldheadedness and 10 not experiencing baldheadedness. An odds ratio of 11 suggests that women who experience high constant worry are 11 times more likely to experience baldheadedness. As per Schmidt et al. (2001), there is a need for further study of quality of life as an instrument to regulate in patients suffering from alopecia in both male and female candidates. In female candidates, it may be psychological disturbances. From the point of view of psychosocial importance, the human baldheadedness has to be prevented from constant worry and its other forms. The secondary baldheadedness constructs are formed and strategies require complex, and careful management techniques proposed to prevent the loss.

A lot many chemical compounds like topical minoxidil fortified with finasteride (Chandrasekaret al, 2015), without fortifications like saifuddhin sheikh et al, 2014 are used to treat Androgenetic alopecia with lot many side effects like blurred vision, chest pain, flushing, light headedness, numbness of hands, feet, or face, etc. In many parts of the world, management strategists and medical practitioners are wrestling with the issue of baldness inspite of using allopathic treatments, transplantation (Bolduc C.Shapiro, 2000).The WHO report (2014) encourages policy makers and strategists to go for research in complimentary medicines with due consideration for the safety, effectiveness, quality, availability, preservation and regulation of traditional and complementary medicine (T&CM) continues to be widely used in India, and its uptake is increasing rapidly in the other parts of the world as well.

Traditional medicine (TM) has not been given more importance in presence and generally underestimated part of health services. The WHO developed Traditional Medicine (TM) Strategy for the World Health Assembly resolution on traditional medicine (WHA62.13).

The goals of the present paper is based on the strategies proposed by TM to health, wellness and people centered health care to promote the safe and effective use of TM by regulating ,

researching and integrating TM products like the herbal hair oil and practice into health systems wherever it is appropriate. The method aims to support in proactive policies and implement action plans that will strengthen in streamlining innovative systems. Yoga strategy and techniques establishes harmony, once it becomes integrated.

As per Michael O'Leary and Margie Hesson (2012) yoga is a management strategy tool to integrate mind and body. Marty E. Sawaya et al. (1997) discusses about different levels of 5 α reductase type 1 & 2, aromatase, and androgen receptor in hair follicles of women and men with androgenetic alopecia. Sekhar Annambhotla (1988) mentions that frequent masturbation over a limit can be harmful for DHT (dehydrotestosterone) hormone and outcome will be hair fall. He also mentioned that practicing of yoga and meditation to control it. Manoj Sharma, 2013 (Yoga as an Alternative and Complementary Approach for constant worry Management) concluded that Yoga offers one possible way of reducing constant worry. The purpose of his study was to look at studies from 2011 to May 2013 and examine whether yoga can be an efficacious approach for managing constant worry. Caroline Smith, Heather Hancock, Jane Blake-Mortimer and Kerena Eckert comes to a conclusion (A randomised comparative trial of yoga and relaxation to reduce constant worry and anxiety) That Yoga provides a comparable improvement in constant worry, anxiety and health status compared to relax.

R.K. Roy et al. (2007) mentioned that *Citrullus colocynthis* Schrad (Cucurbitaceae) is a traditionally acclaimed hair tonic in Ayurveda (the traditional Indian system of medicine). The dried pulp of the unripe but full-grown fruit freed from the rind constitutes the drug, colocynth of commerce, and is used for treating loss of hair. The oil from the seeds of the plant has been reported and is used by ethnic tribes for controlling premature falling and graying of hairs. Deepali Jaybhaye et al. (2010) discuss that seed of *Tectonagrandis* Linn. (Saguna) traditionally used and also in present days as a hair tonic in

Indian herbal system. It reduces the time required for hair growth. 5% of *Tectonagrandis* linn. extract with minoxidil was more effective than any single drug, whereas the minoxidil treated group resulted in soft and silky hair. Gupta Amit et al. (2010) briefs about different herbs that are described in ancient ayurvedic text to promote hair growth, i.e. Amla (*Emblica officinalis*), Brahmi (*Centella asiatica*), Bhringraj (*Eclipta Alba* Linn.), Gurhal (*Hibiscus rosasinensis*), Coconut (*Cocos nucifera* Linn.), Jatamansi (*Nardostachys jatamansi*), Neem (*Azadirachta indica*) etc. Mona Semalhyet al. (2010) stated that over 3 lakhs products have claimed to help hair regrowth. With exception of minoxidil and finasteride, none of them was able to hair growth promotion. Minoxidil, a synthetic drug, was scientifically proved to help the treatment of alopecia.

All the above authors are found to use different ingredients invariably; however some are common in their preparations. The reasons for dermatological disorders and side effects of anticancer drugs are mentioned. Yoga and Ayurvedic herbs are only one way to take care of mental shock and emotional constant worry. In this paper, we will work to reduce emotional constant worry to overcome baldheadedness.

Method: The following diagram illustrates the management strategies that are adopted in this paper. As per Nagendra and Nagarathna (2014) constant worry, depression and anxiety are the main reasons for the physiological changes like hair fall. C. Smith et al. (2007) Yoga was found to be as effective as relaxation in reducing constant worry, anxiety and improving health status & yoga was more effective than relaxation in improving mental health. Yoga and Ayurveda, the ancient Indian sciences recognize this symbiotic relationship of body and mind. How the personality and psychological behavior is related to society network is interlinked. The solution doesn't lie not only in pharmacological management of medicines or in its cosmetic treatment but also in complimentary medicines and yoga techniques.

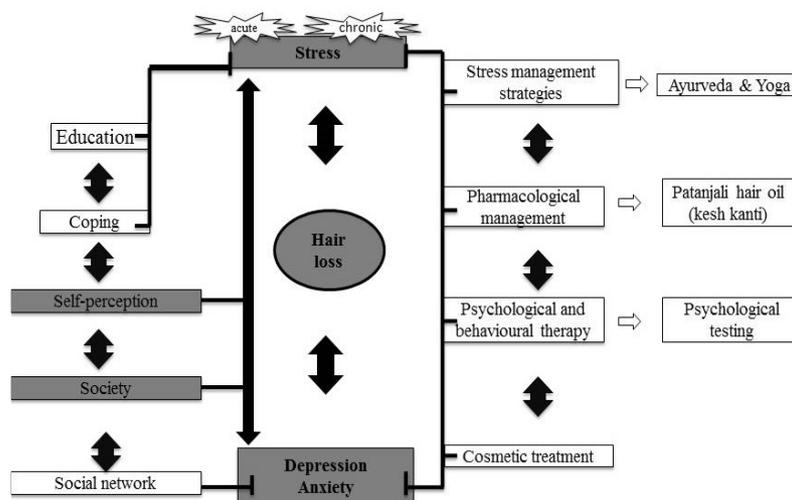


Fig 1: Management strategies through complimentary medicine systems.

With yogic techniques, one can prevent baldheadedness, as all these will effectively help in eliminating constant worry daily. Hence chances of reducing baldheadedness. Yoga rejuvenates the whole body and also promotes blood circulation to specific parts of the body like the scalp, which needs good levels of oxygen flow, which in turn prevents hair fall. Meditation and breathing techniques help release constant worry, which aids in preventing baldheadedness. This is only strategic measure. Further research will be carried out on the following topics:-

- Patanjali yoga techniques (anuloma-viloma, suryanamaskar, mandukasan, viparitkarni, kapalabhati, bhastrika, brahmari, meditation, ardhakatichakrasana (half wheel lateral bending the body like a wheel), ardhachakrasana (backward bending of the body like a wheel) will be implemented.
- They will be asking to use Patanjali keshkanti hair oil.
- Questionnaires to be filled.
- The outcome will be measured through the collection of data on the basis of questionnaire.

Results: Patanjali Kes Kanti Hair Oil (2016) is developed to provide deep nourishment and strengthens for hair roots, to reduce hair fall and dandruff and prevents from split ends and hair from graying. The regenerating mix of Wheat Germ Oil (*Triticum vulgare*), bhringraj

(*Ecliptaalba* Linn.), sunflower oil (*helianthus annuus* Linn.) and aloe vera (*Aloe Barbadosis*) calm the scalp, reduces toxin build up and help hair become soft, smooth and tangle free. The soft essences of the herbs used aid in reducing sleeplessness and headaches. Herbal hair care products are made mostly from natural ingredients and these help to nourish and strengthen your hair. Patanjali hair oils are made mostly from these natural ingredients, hence making your hair smooth and silky. Wage et al. (2007) the stress management tool is to practice exercise: Sun salutation, Tadasana, ardhakatichakrasana (half wheel lateral bending the body like a wheel), ardhachakrasana (backward bending of the body likes a wheel) are found to be suitable under the guidance of a yoga instructor (2014).

Discussion: The most important finding of this study is to find a management tool to link the mind and body on the lines of WHO regulation of traditional and complementary medicine (T&CM, 2014). Though we have not covered the protocols of detailed description of various exercises, but we have given examples of practices such as lateral bending, backward bending to understand and study further under expert guidance. By trial and error methods we did find in harnessing the potential contribution of TM to hair care, wellness and community based hair care; promoting the safe and effective use of TM by regulating, researching and integrating TM products such as Patanjali hair oil, practitioners

and practice into hair care remedies where it is appropriate.

The challenge lies in tackling the global development and enforcement of policy and regulations for baldheadedness; integration, in particular identification and evaluating strategies and criteria for integrating TM into national and primary health care; safety and quality, notably assessment of products and services, qualification of practitioners, methodology and criteria for evaluating efficacy, ability to control and regulate TM and traditional & complementary medicine advertising and claims, research and development, education and training of T&CM practitioners; information and communication, such as sharing information about policies, regulations, service profiles and research data, or obtaining reliable objective information resources for consumers. However, there is a need for its closer integration into health systems. Policy makers and consumers should consider how traditional & complementary medicine may improve patient experience and community health. Important questions of access as well as population and community health issues may be addressed. The T & CM modalities and practices vary from region to region. In India it is regarded differently depending on the culture, understanding and accessibility of conventional medicine. A practice where significant progress has been made is Yoga. Although Yoga was ridiculed and abused as a snake charmer exercise, originally a feature of traditional Indian mental medicine, it is now used worldwide. According to reports supplied by 183 countries, 90% of them now recognize the use of Yoga in preventing the baldheadedness.

Conclusion: As a management measure, Patanjali or herbal hair oil - a Traditional medicine (TM) is an important and often underestimated part of health services may be systematized and appropriate quality standards may be applied. In some countries, traditional medicine may be non-conventional medicine but it may be termed as a complementary medicine (CM). Yoga on the hand has a long history for use in mental health care. It should be systematized and further is required to make the protocols for therapy purposes. As

anxiety, constant worry and depression gets reduced through yoga, it may be used as a management tool.

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