



## Insanity (Unmaad)

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### ABSTRACT

In criminal cases, the insanity defence is frequently employed. It is predicated on the idea that the defendant, who was suffering from serious mental illness at the time of the crime, was unable to understand the nature of the offence and distinguish between right and wrong behaviour. As a result, they were not legally responsible for the crime. A legal idea rather than a medical one, the insanity defence (medical one). This indicates that simply having a mental condition does not establish insanity. Similar to a civil case, the defendant must establish the defence of insanity by a "preponderance of the facts". Legal insanity is difficult to define, and successfully defending it in court is much more difficult. This article focuses on the most recent Supreme Court ruling about the level of proof for insanity in Indian courts. Researchers propose a model for assessing an insanity defence review of the defendant's mental status and briefly describe the legal requirements and processes for doing so. The establishment of a formal graduate programme and Forensic Psychiatric Training and Clinical Services are urgently needed. Establishing Centers across to improve manpower resources and deliver fair and swift trials

**Keywords:** Ayurveda, ASHT AAHAR VIDHI VISHESH AAYATAN

### I. INTRODUCTION

Insanity is characterised by the perversion of the mind, intellect, consciousness, knowledge, memory, desire, manners, behaviour and conduct.

The invariable symptoms of insanity are Thinking is of the mind, Due to the perversion of mind, the patient does not think of such things which are worth thinking; on the other hand, he thinks of such things as ought not to be thought of. Due to perversion of intellect, he understands eternal things as ephemeral and useful things as harmful. Sarsine 1:99. Due to the perversion (loss) of consciousness, the patient is unable to have perception of burns caused by fire etc. Due to the perversion of memory, the patient either does not remember anything or remembers things incorrectly. Due to perversion of desire, disinclination develops for things desired. Due to perversion of manners, the patient, who is otherwise normal, gets enraged. Due to perversion of behaviour, the patient indulges in undesirable activities. Due to perversion of conduct, the patient resorts to such activities as are against the rules prescribed in religious works

#### 1. Main text

2. Ayurveda is not just a pathy it's a science which promotes healthy and disease-free lives (Either physical, mental or social) as mentioned by our acharya Charak SWASTHASYASWASTHYARAKSHADAMATURASYAVIKAAR PRASAMANAMCHA which means how healthy people remains healthy and if somehow AND ALL THESE THINGS ARE ACHIEVED ONLY IF WE TAKE A PROPER DIET(SAMYAK AAHAR) Therefore we mentioned some points regarding proper way of taking food and also disadvantages if not being followed[]

A landmark study in the forensic psychiatry of Indian setting occurred in 2011, in which 5024 prisoners were assessed on semi-structured interview schedule reported that 4002 (79.6%) individuals could be diagnosed as having a diagnosis of either mental illness or substance use. After excluding substance abuse, 1389 (27.6%) prisoners still had a diagnosable mental disorder.[1] Another study from India portrays a very gloomy picture of patients in forensic psychiatry settings and advocates for there is a need to streamline the procedure of referral, diagnosis, treatment, and certification.[2] To address this issue of streamlining the process of evaluation of insanity defense and certification, this article focuses on semi-structured assessment in the Indian context based on landmark Supreme Court decisions. In addition, it will also present a model for evaluating a defendant's mental status examination and briefly discuss the legal standards and procedures for the assessment of insanity defense evaluations.

[3] Following are the premonitory symptoms of insanity: (1) emptiness in head, (2) congestion in eyes, (3) noises in ears, (4) hard breathing in excess, (5) excessive salivation in the mouth, (6) absence of inclination for food, anorexia and indigestion. (7) spasm in cardiac region, (8) meditation, fatigue, unconsciousness and anxiety in improper situations, (9) continuous horripilation, (10) frequent pyrexia, (11) fickle-mindedness, (12) pain in the upper

part of the body. (13) manifestation of symptoms of facial paralysis resulting in movement in one half of the face, (14) frequent appearance of the following in dreams.

1. Inauspicious objects that are wandering, moving and unstable,
2. Riding over the wheel of an oil press.
3. Being churned by whirl-winds,
4. Sinking in fierce whirl-pools; and
5. Retraction of eyes. Body.

Insanity manifests itself immediately after the appearance of the above mentioned premonitory symptoms. The distinctive features of various types of insanity are as follows >

**(A) Vat ka type**

1. Constant wandering;
2. Sudden spasm of eyes, eyebrows, lips, shoulder, jaws forearms and legs;
3. Constant and incoherent speech;
4. Coming out of froth from the mouth;
5. Always smiling, laughing, dancing, singing and play ing with musical instruments in inappropriate situations;
6. Loudly immitating the sounds of lute, flute, conch, jamya (cymbal played by right hand) and saila (cymbal played by left hand.);
7. Riding undesirable vehicles;
8. Adoration by such things as are not needed for orna ments;
9. Longing for eatables not available.
10. Disgust for food articles and also a strong desire not to part with the eatables available.
11. Emaciation and roughness;
12. Projected and reddish eyes, and
13. Aggravation of the condition by such of the regimens as are not wholesome for vatika

**(B) Paitt ka type:[4]**

1. Irritation and anger
2. Excitement on inappropriate occasions;
3. Inflicting injury on own people or on others by wea pons, brick bats, whips, sticks and fist
4. Fleeing, and desire for shade, cold water and food having cooling effect;
5. Continuous state of anguish;
6. Having ferocious eyes of coppery, green or yellow colour; and
7. Aggravation of the condition by such regimens as are not wholesome for pitta.

**(C) Ślaimika type:[5]**

1. Staying in one place and observance of silence;
2. Occasional movement.
3. Discharge of saliva and nasal excretions;
4. Disinclination for food and love for solitude
5. Frightening appearance,
6. Aversion for cleanliness,
7. Remaining always sleepy,

8. Oedema in the face:
9. White and timid eyes with excreta adhered to them;
10. Aggravation of the condition by such regimens as are not wholesome for kapha

**(D) Sānnpāt ka type:[6]**

In the Insanity caused by the combined vitiation of all the three days, all the symptoms mentioned above are simultaneously manifested. This type of Insanity is considered to be incurable.

Insanity occurs immediately after the manifestation of its pre-mnisory symptoms. In the case of other diseases, however, there is a time lag between the manifestation of their premonitory symptoms and the manifestation of the actual diseases.

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## DISCUSSION

Diseases have been classified in ayurveda from different view points to understand and manage them better. In one such classification diseases are categorised as manasa or manoadhishthita (psychological), shareera or shareeradhisthita (physical) and ubhayadhishthita (body-mind type). Unmada is the major type of mental disorder considered as ubhayashraya or ubhayadhishthita vikara in ayurveda [7]. It is the most descriptively dealt with manovikara and defined as the unsettled state of manas, buddhi, sanjnajana, smriti, bhakti, sheela, chesta and achara in Charakasamhita [8]. Although a manovikara, the importance of shareerika doshas in its diagnosis and management has been clearly indicated by categorising it under shareerika doshas viz., vata, pitta and kapha [9].

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## CONCLUSION

On the basis of the above mentioned description and discussion we have come to the conclusion that Therapies for treatment of the three types of insanity which are curable are oleation, fomentation, emesis, purgation, asthapana type of enema, anuasana type of enema, alleviation therapies, errhines, smoking, fumigation, collyrium, avapida and pradhamana types of snuff, massage, ointment, affusion, unction, assault, tying, confinement, frightening, inducing astonishment and forgetfulness, depletion and venesection. Suitable diets should be given according to the requirements of the patient.

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