LETTERS TO EDITOR

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ANCIENT INDIAN KNOWLEDGE ON MENTAL HEALTH AND MODERN PSYCHIATRY

Sir.

The editorial in the October issue of Indian Journal of Psychiatry, titled "Relevance of ancient Indian knowledge to modern psychiatry" (Trivedi, 2000) is not only thought provoking but also stimulating for appropriate action. The richness of ancient Indian literature on mental health and illness since prehistoric era is well known. A brief overview of relevant literatures in different ages has been given by Varma (1982). Many literatures especially Bhagawat Gita is guoted often in modern psychiatric articles (Venkoba Rao and Nammalvar, 1979, Trivedi, 2000) for various reasons. including understanding Indian psyche, philosophy and psychotherapeutic revelance. Ancient literatures help us understand the cultural attitudes, belief systems and group philosophies, which has shaped and influenced Indian psyche for thousands of years. These influences which has given the "Indianness" manifest in the social life, social support systems, coping strategies and many more. These are relevant issues for mental health and illness.

It is a common observation that these ancient literatures are being followed and practised in many forms in the society and have become almost a part of life. Similarly the adherence of most of the Indians to cultural and religious practices indicated in these literatures needs to be highlighted as research reports suggest that religiosity may be protective against mental illness especially depression (Miller et al., 1997).

Psychotherapeutic interventions practised in India mostly follow western methods. Whereas many of the strategies and techniques of western psychiatry especially those of psychotherapy do not seem relevant to different cultural systems (Neki et al., 1986; Pande, 1968). In the process of following the western models excessively, the rich resources of indegenous knowledge, methods and techniques which may

be more relevant, easily applicable and which may bring the desired change more easily and quickly are not used adequately during psychotherapeutic interactions. Similarly a lot of methods of Indian origin e.g. Yoga and Meditation, which are widely practiced around the globe are not commonly used in psychiatric practice in India.

It needs to be highlighted that being aware of different concepts, philosophies and belief systems prevalent in a culture, which contribute immensely to the mental health and illness, is of paramount importance. Knownledge of these concepts will also help in understanding the evolution, presentation, therapeutic response and course of many psychiatric illnesses. The utility of above concepts and their applicability in the psychotherapeutic interventions should be explored through contemporary research methods to make them acceptable to the scientific community. This knowledge is expected to help in developement of effective culturally relevant treatment strategies. It is also strongly suggested that the ancient Indian knowledge on mental health and illness should get proper representation and be integrated with modern psychiatric knowledge base. While discovering newer frontiers we should not remain unaware of the path.

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