

 International Journal of AYUSH	IJAYUSH International Journal of AYUSH AYURVEDA • YOGA • UNANI • SIDDHA • HOMEOPATHY https://internationaljournal.org.in/journal/index.php/ijayush/	ISSN: 2349-7025 OPEN ACCESS PEER REVIEWED MONTHLY
Review Article	Volume 15 Issue 09	September 2026

ROLE OF ASHWAGANDHA IN THE MANAGEMENT OF NIDRANASHA: AN AYURVEDIC PERSPECTIVE

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DOI: <https://doi.org/10.5281/zenodo.22703352>

Abstract

Nidra, or sleep, is considered one of the fundamental physiological supports of life in Ayurveda and is closely associated with physical strength, mental stability, proper functioning of the senses, and overall well-being. Disturbance in the normal pattern, duration, or quality of sleep may be understood clinically through the Ayurvedic concept of **Nidranasha**, characterized by inadequate or disturbed sleep. In contemporary medicine, persistent difficulty in initiating or maintaining sleep and associated daytime impairment are broadly represented within the spectrum of insomnia and sleep disorders. Increasing psychological stress, irregular lifestyle, excessive screen exposure, shift work, inappropriate dietary habits, and disturbed circadian rhythms have contributed to the growing prevalence of sleep disturbances.

Ashwagandha (*Withania somnifera* [L.] Dunal) is an important Ayurvedic Rasayana traditionally valued for its Balya, Brimhana, Rasayana, and Medhya-related properties and its application in conditions associated with weakness, stress, and nervous-system dysfunction. Its potential role in Nidranasha can be interpreted through its ability to support physiological equilibrium, reduce stress-related disturbances, promote relaxation, and improve sleep quality.

Keywords: Ashwagandha, *Withania somnifera*, Nidranasha, Nidra, insomnia, Rasayana, sleep quality, Vata, stress.

1. Introduction

Sleep is an essential biological process required for restoration, adaptation, cognitive functioning, emotional regulation, and maintenance of physiological homeostasis. Modern lifestyles have substantially altered normal sleep patterns. Prolonged exposure to digital devices, occupational stress, irregular working schedules, late-night eating, sedentary behaviour, psychological stress, and inadequate physical activity are increasingly associated with sleep complaints.

Ayurveda approaches health not merely through the absence of disease but through maintenance of equilibrium among **Dosha, Dhatu, Mala, Agni, and physiological functions of the mind and senses.**

Ashwagandha, botanically identified as *Withania somnifera* (L.) Dunal, is one of the best-known Ayurvedic medicinal plants used in Rasayana therapy. The plant belongs to the family Solanaceae and its roots are particularly important in traditional Ayurvedic practice. Modern phytochemical investigations have identified several classes of constituents, including steroidal lactones called **withanolides**, alkaloids, flavonoids, saponins, and other phytochemicals^{1&2}.

2. Concept of Nidra in Ayurveda

Nidra is not regarded simply as a period of inactivity. It represents an important physiological state that contributes to restoration and maintenance of health.

Classical Ayurvedic literature discusses Nidra in relation to the functioning of the manas, sensory faculties, and bodily processes. The state of sleep occurs when the mind and sensory faculties withdraw from their respective objects and the individual enters a state of physiological rest.

Charaka describes **nidra** among the important supports of life and emphasizes its relationship with:

- Sukha (happiness)
- Pushti (nourishment)
- Bala (strength)
- Vrishata (vitality)
- Jnana (knowledge)
- Jivita (life)

Thus, adequate sleep is considered essential for maintaining physical and mental health.

The quality of sleep is influenced by several factors, including:

- Dosha status
- Agni
- Ahara

- Vihara
- Mental state
- Physical exertion
- Age
- Seasonal variation
- Daily routine
- Environmental factors

From an Ayurvedic perspective, sleep is consequently a multidimensional phenomenon rather than an isolated neurological event.

LAKSHANA of nidranasha includes angmarda, shiro-gaurava, jrumbika, jadya, glani, bhrama, apakti etc.

SAMPRAPTI

Nidana Sevana – Ruksha, Laghu, Alpa Ahara, Atichinta, Shoka, Bhaya, Mansik Tanav, Ratri-Jagarana, etc. – leads to vitiation of Vata and Pitta, leading to an increase in Rajas Guna, hence leading to Kapha and Tamas-Shaya, ultimately leading to Anidra.

3. Ashwagandha: Ayurvedic Profile

Botanical identity

Botanical name: Withania somnifera (L.) Dunal **Family:** Solanaceae **Common names:** Ashwagandha, Indian ginseng, Winter cherry **Part commonly used:** Root

Ashwagandha is considered an important Rasayana drug in Ayurveda. Classical and contemporary literature describes its traditional use in promoting strength, nourishment, vitality, and general resilience. A modern review of Ayurvedic literature characterizes Ashwagandha as Balya and Brimhana and highlights its historical Rasayana applications⁴.

Ayurvedic pharmacological attributes

Traditional Ayurvedic descriptions generally characterize Ashwagandha as:

Table 1: Ayurvedic pharmacological attributes

Parameter	Ayurvedic description
Rasa	Madhura, Tikta, Kashaya
Guna	Guru, Snigdha
Virya	Ushna

Parameter	Ayurvedic description
Vipaka	Madhura
Doshakarma	Primarily Vata-pacifying; may influence Kapha depending on dose and formulation
Karma	Balya, Brimhana, Rasayana, Vrishya

The combination of **Guru and Snigdha Guna**, Madhura Vipaka, and Vata-pacifying action provides a theoretical basis for its use where sleep disturbance is associated with Vata aggravation, depletion, weakness, or excessive mental activity.

4. Why Ashwagandha May Be Relevant in Nidranasha

The Ayurvedic rationale for using Ashwagandha can be understood through several interconnected mechanisms.

4.1 Vata pacification

Excessive Vata may manifest as irregularity, restlessness, instability, and disturbed sleep. Ashwagandha's Guru and Snigdha qualities can theoretically counter excessive Ruksha and Laghu characteristics associated with aggravated Vata.

4.2 Brimhana effect

Sleep disturbance may occur in individuals experiencing physical exhaustion, undernutrition, excessive activity, or depletion. Ashwagandha's traditional Brimhana and Balya attributes make it relevant in such presentations.

4.3 Rasayana action

As a Rasayana, Ashwagandha is traditionally used to support systemic resilience and physiological strength. This is particularly relevant when disturbed sleep occurs along with fatigue and reduced vitality.

4.4 Mental relaxation

Stress and excessive mental activity are important contributors to sleep disturbance. Contemporary research has investigated Ashwagandha for stress-related outcomes, providing a possible bridge between its traditional application and modern understanding of stress-associated sleep problems.

4.5 Restoration rather than simple sedation

The Ayurvedic rationale does not necessarily imply that Ashwagandha acts simply as a sedative. Its traditional therapeutic positioning is broader, involving nourishment, strengthening, Rasayana effects, and restoration of physiological equilibrium.

5. Phytochemical Basis

Phytochemical investigations of *W. somnifera* have identified numerous bioactive compounds.

Major groups include:

- Withanolides
- Alkaloids
- Steroidal lactones
- Saponins
- Flavonoids
- Phenolic compounds
- Sитоindosides
- β -sitosterol and related compounds

Withanolides are among the best-characterized constituents of Ashwagandha. Withaferin A, withanolide A, withanolide D, and withanone are among compounds frequently discussed in pharmacological research⁵.

Importantly, the chemical composition can vary according to:

- Plant part
- Geographical origin
- Cultivar
- Extraction method
- Processing
- Standardization
- Concentration of active constituents

This variation is one reason why results from one Ashwagandha preparation cannot automatically be generalized to all commercial products.

6. Appropriate Ayurvedic Approach

Management of Nidranasha should not depend exclusively upon a single medicinal plant.

An Ayurvedic management strategy may include:

A. Nidana Parivarjana

Identification and avoidance of causative factors such as:

- Late-night screen exposure
- Irregular sleep timing

- Excessive mental work at night
- Excessive caffeine
- Daytime sleeping
- Irregular meals
- Excessive fasting
- Overexertion
- Psychological stress

B. Dinacharya

A regular daily routine should be encouraged.

Important measures include:

- Fixed bedtime
- Fixed awakening time
- Appropriate physical activity
- Regular meals
- Reduced night-time stimulation

C. Ahara

Diet should be individualized according to Prakriti, Agni, Dosha, age, and clinical condition.

In Vata-dominant presentations, appropriate nourishing and easily digestible foods may be preferred.

D. Abhyanga

Appropriate **Abhyanga**, particularly with suitable medicated oils, may be considered as part of a Vata-pacifying approach.

E. Mental relaxation

Measures such as:

- Meditation
- Pranayama
- Yoga
- relaxation practices
- controlled breathing
- reduction of sensory stimulation

may be incorporated.

F. Rasayana approach

Ashwagandha may be considered where its traditional indications are appropriate, especially in individuals with weakness, stress, fatigue, or Vata-associated symptoms.

7. Ashwagandha Preparations

Ashwagandha may be used in several Ayurvedic pharmaceutical forms, including:

- Churna
- Ksheerapaka
- Avaleha
- Ghrita preparations
- Taila preparations
- Extract-based formulations

The form should be selected according to:

- Prakriti
- Vikriti
- Agni
- age
- strength
- associated symptoms
- Dosha predominance
- digestive capacity
- concurrent medicines

8. Discussion

Nidra represents an important physiological process in Ayurveda and is closely related to the maintenance of strength, nourishment, mental well-being, and normal functioning. Nidranasha therefore deserves a comprehensive approach rather than symptomatic treatment alone.

Ashwagandha offers an interesting therapeutic possibility because its traditional pharmacological profile extends beyond a simple sleep-inducing action. Its Balya, Brimhana, and Rasayana attributes provide a conceptual basis for its use when disturbed sleep occurs in association with Vata aggravation, stress, fatigue, or reduced strength.

Modern clinical research provides preliminary support for this traditional perspective. Randomized trials have reported improvements in sleep onset latency, sleep efficiency, sleep quality, and related outcomes¹⁵. A 2021 meta-analysis involving 400 participants found a statistically significant improvement in overall sleep, with greater benefits observed in insomnia

populations and with higher-dose and longer-duration interventions¹⁶. More recent systematic evidence has similarly reported promising improvements in several sleep parameters while emphasizing the need for larger and more rigorous studies¹⁷.

Nevertheless, it would be scientifically inappropriate to claim that Ashwagandha is a definitive cure for insomnia. Existing evidence remains limited by heterogeneous preparations, relatively small trials, differences in methodology, and incomplete long-term safety data.

The most appropriate interpretation is therefore that Ashwagandha may serve as a **potential supportive or adjunctive intervention in selected patients with sleep disturbance**, particularly when the clinical picture is consistent with Vata predominance, stress, fatigue, or depletion.

9. Conclusion

Nidranasha is a clinically important condition that can adversely affect physical strength, cognitive performance, emotional stability, and quality of life. Ayurveda approaches sleep disturbance through an individualized assessment of Dosha, Agni, Manas, lifestyle, diet, and causative factors.

Ashwagandha (*Withania somnifera* [L.] Dunal) occupies a significant position in Ayurvedic Rasayana therapy. Its traditional Balya, Brimhana, and Vata-pacifying attributes provide a plausible Ayurvedic rationale for its use in selected cases of Nidranasha. Contemporary clinical evidence also suggests that certain standardized Ashwagandha preparations may improve sleep quality and selected objective and subjective sleep parameters.

However, the evidence should be interpreted cautiously because clinical trials differ considerably in preparation, dose, duration, and methodology. Long-term safety and high-quality Ayurveda-specific clinical studies remain necessary.

Thus, Ashwagandha may be considered a promising supportive Ayurvedic intervention for selected cases of Nidranasha, particularly when sleep disturbance is associated with stress, Vata aggravation, fatigue, or reduced strength, provided that its use is individualized and clinically supervised.

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How to cite this article:

Singh M, Dhall B, Sharma S. Role of Ashwagandha in the Management of Nidranasha: An Ayurvedic Perspective. *International Journal of AYUSH.* 2026;15(09):30-38.