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RESEARCH ARTICLE

TRADITIONAL WISDOM FOR MENTAL WELL-BEING FROM THE BHOJPATRI BHAGAVAD GITA

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Abstract

Mental health deterioration is a global concern, with depression being the most prevalent psychiatric disorder, presenting a lifetime risk of 13.23%. Ayurveda's *Satvavajaya chikitsa*, as outlined in the *Charaka Samhitha*, offers therapeutic potential alongside modern psychotherapy. The Bhojpatri Bhagavad Gita, a rare manuscript containing 755 verses, provides unique insights into psychotherapeutic practices. Objective: This review aims to analyze the physical features and distinctive content of the Bhojpatri Bhagavad Gita, comparing Arjuna's behavior in the *Arjuna Vishada Yoga* chapter with contemporary depression pathology and examining Lord Krishna's counseling methodology. Data Sources: The primary source is the Bhojpatri Bhagavad Gita manuscript (1609 CE) housed at ITRA Jamnagar. Supplementary materials include Kashmiri Pathanusari manuscripts and Persian Gita translations, along with comparative shloka analyses. Review Methods: A comparative analysis of shloka distribution across versions (+55 vs. the 700 shloka standard), the matic evaluation of Arjuna's *vishada* through imbalances in *manogunas* (Satva-Raja-Tamas), and synthesis of Lord Krishna's counseling techniques within Ayurvedic frameworks. Conclusion: The Bhojpatri manuscript's additional shlokas highlight correlations between Arjuna's psychosomatic symptoms and *Raja-Tamo guna* dominance, while Krishna's responses reflect evidence-based counseling strategies. Integrating these Ayurvedic principles with modern mental health practices could enhance public health interventions for depression management.

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Introduction:-

Depression is currently the fourth leading cause of disability worldwide, and it is expected go ahead in the forthcoming years. It can be chronic or recurring, significantly impairing an individual's ability to function at work or school or cope with daily life. An estimated 3.8% of people in the population suffer from depression, including 5.7% of people over 60 and 5% of adults (4% of males and 6% of women). Around 280 million individuals worldwide suffer from depression.^[1] Women are around 50% more likely than men to experience depression. More than 10% of expectant mothers and new mothers experience depression globally.^[2] Every year, around 700,000 people commit suicide and the prime culprit is depression. For people aged 15 to 29, suicide is the fourth most common cause of death. More than 75% of people in low- and middle-income countries do not obtain treatment, despite the fact that there are well-established, efficient treatments for mental disorders.^[3] Lack of funding for

mental health care and a shortage of qualified healthcare workers are two obstacles to successful care. Since up to two-thirds of patients with depression present with somatic symptoms (headache, back pain, chronic pain, etc.), depression is underdiagnosed in the primary care setting.^[4] For a variety of reasons, including but not limited to fear of stigmatization, believing that such symptoms are a personal flaw rather than an illness, believing that depressive symptoms can only be evaluated by a psychiatrist, and worries about being prescribed an antidepressant medication, patients are reluctant to discuss depressive symptoms unless specifically asked.

According to Ayurveda, "*VishadoRogavardhanam*" or depression, can aggravate all types of disorders. As a result, the prevention and treatment of all mental disorders is very significant.^[5] The three *Gunas*, *Satva*, *Rajas*, and *Tamas*, are generally complementary for mental well-being even though they are diametrically opposed. *Sattva* is the purest and creator of knowledge, so it does not cause disease, but the imbalanced stage of *Satva-Raja-Tamo guna*, can cause mental disorders. *Rajas* and *Tamas* can become dominant due to emotional, intellectual, or physical factors. Imbalances in these are the primary aspect of psychopathology, which may affect the physical factor, which reflects on *Manas*, and vice versa. *Ayurveda* has three treatment approaches: *Daivavyapashraya*, *Yuktivyapashraya*, and *Satvavajaya*.^[6] *Acharya Charaka* defines "*Satvavajaya*" as a mental withdrawal from unwholesome objects. It is a mind-controlling therapy which prevents mind from being occupied with stressful factors. It incorporates all *Manonigraha* and *Ashtanga Yoga* (yogic techniques) methods.

History

The Bhagavad Gita, a revered Vedic text, contains elements of psychotherapy beyond traditional Ayurvedic sources. It presents a dialogue between Lord Krishna and Arjuna, offering spiritual and psychological guidance through an eight-step, four-level process encompassing Bhakti yoga, Karma yoga, Jnana yoga, and Dhyana yoga.

While the 700-verse Gita has been widely accepted since Adi Shankaracharya's time, evidence suggests the existence of a 745-shloka version (Mahabharata/43rd/Gita Mahima-1-5). Acharya Sri Charan Tirth Maharaj's discoveries in the 20th century brought attention to Gita versions with over 700 shlokas:

1. 1937: Kashmiri Pathanuseriki Gita (20 additional shlokas, 250 text variations)
2. 1939: Bhojpatra manuscript (Vikram Samvat 1665/1609 AD).

The Bhojpatra Gita, containing 745 shlokas, has a complex history:^[7]

- Transferred to Gulabkunwarba Ayurvedic Society post-independence
- 1953: Acquired by CIRISM
- 1968: Transferred to Gujarat Ayurveda University
- 2017: Rediscovered at IPGT & RA

Guruji Narayana's examination confirmed 745 shlokas and revealed two secret shlokas preserved since 1609 AD. The Ahmedabad Management Association published these findings as "Samagra Bhagavad Gita".

The Bhojpatra Gita offers unique psychotherapeutic insights, potentially addressing gaps in Ayurvedic explanations of Vishada Roga (depression) and providing ancient wisdom-based guidance for mental health.

AIM AND OBJECTIVE:

The study analyzes the Bhojpatra Bhagavad Gita, its complete shlokas, additional shlokas, physical characteristics, Arjuna's mental state during Kurukshethra, and the pathogenesis of depression, focusing on the current psychotherapy method and Lord Krishna's role as an ideal counsellor.

Materials and Method

The Bhagavad Gita and Ayurveda both emphasize the concept of satvavajaya chikitsa, a concept explored in various texts and articles related to psychiatry, counselling, and mood disorders. The study of Bhojpatri Bhagavad Gita, including physical characteristics, additional shlokas, and Lord Krishna's response, provides insights into current counseling methods.

Apart from the 700 shloki *Gita*, there were some versions having additional shloka, which never came into light. Existence of these textbooks always kept the actual number of *shlokas* in *Gita* under controversy. This also encouraged acharya Charan Thirth Maharaj to explore further and finally lead to the discovery of the rare manuscript *BhojpatriGita*.

Table 01: Excerpt from Catalogue: Central Library I.T.R.A, Jamnagar^[8]

Sl no.	Name	Scribe's date	commentary	Language	No.of leaves	Complete/ incomplete
1	Srimat <i>Bhagavad Gita</i>	1236/ <i>Jyeshtha masa</i>	<i>Moola matra</i>	Sanskrit	12	Complete
2	Kashmira Pathanusari <i>Bhagavad Gita</i>	1690	<i>Moola matra</i>	Sanskrit	33	Complete
3	<i>BhojpatriBhagavad Gita</i>	1665 <i>maghamaasa</i>	<i>Moola matra</i>	Sanskrit	20	Complete
4	<i>BhojpatriBhagavad Gita</i> + uthamaakshara	1777/ <i>vaishaakha vada</i>	<i>Moola saha vajra bhasha teeka</i>	Sanskrit	422	Complete
5	<i>BhojpatriBhagavad Gita</i>	1748 / <i>chaithra</i>	<i>Prachina+ dhyanasamhita</i>	Sanskrit	37	Complete
6	<i>BhojpatriBhagavad Gita</i>	1700	--	Sanskrit	50	Inomplete

Table 02: Mahabharata standard *Bhagavad Gita* and other versions

Sl no.	<i>Gita</i> Version
1	<i>Bhagavad Gita</i> As per Adi Shankaracharya
2	Kashmiri <i>Gita</i> (commentary of abhinava Gupta)
3	<i>Gita</i> as per leaf script of Samvat 1236 (1180AD) recorded in leaf script of samvat 1594
4	Persian <i>Gita</i> by Faizi
5	<i>BhojpatriGita</i> (samvat 1665)
6	<i>Bhagavad Gita</i> of Neelakantha's commentary
7	Gondal <i>Gita</i> 1 (GG-1) based on leaf script dated samvat 1180/1594 AD
8	Gondal <i>Gita</i> 2 (GG-2) based on <i>Bhojpatris</i> of 1665/ 1609 AD
9	Anandavardhini <i>Gita</i> commentary
10	Gondal <i>Gita</i> 3 revised version of GG-2 based on <i>Bhojpatris</i> of samvat 1665/ 1609 AD
11	Sri Samgra <i>Bhagavad Gita</i> by Sri Guruji Narayan, based on <i>Bhojpatris</i> of samvat 1665/ 1609 AD

Result

Physical features of *Bhojpatri* *Bhagavad Gita*:

The *Bhojpatri Gita* is a unique manuscript written in birch bark, reshaped, cleaned, and coated with protective oiling. It contains 20 folios of 11" length and 3 ½" width, resulting in 40 pages. The handwritten cover title page is modern and not part of the leaf script. The manuscript has 581 lines on 40 pages, with an average of 14.7 lines per page. The shlokas are written in parshwamatralipi of Sanskrit, which optimizes the width of leaves (3 ½"), allowing for maximum lines per page. The manuscript was written in 1609 AD and survived for 409 years, unlike recent writing. The last page is half filled with 14 shlokas and 10 lines, and there are traces of remarks in the closing chapter at shloka 80 instead of 82.



The important reading change is:

तत्रश्रीविजयोभूतिर्धुवानीतिर्मतिर्मम changed to तत्रश्रीविजयोभूतिर्धुवानीतिर्मतिर्मम

The Kashmir Pathanusarini manuscript with 21 additional shlokas was written in 1594 AD based on another manuscript of 1180 AD. Most of the shlokas of that Kashmir pathanusarini MS are present in Bhojapatri.



Fig.04:Fullyhandpainted front page with golden border is a unique charecteristic of Kashmiri pathanusarini Gita.

Though not a perfect translation, glimpses of the spirit of the Gita as well as the genius of Hon. Allama Faizi have been observed. The Persian Gita adheres to Adi Shankaracharya's 700 shloka standard.

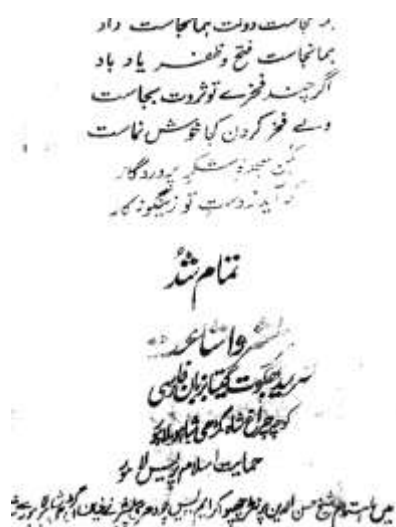


Fig.06: Introduction to persian Gita

Table no.3 - Role wise shlokas in BG/BP/MMS. ^[9]

Sl.no	Role	*BG	**BP	Diff.	***MMS	****SBG	Diff.
1	Dritarastra	1	1	0	1	1	0
2	Sanjay	41	68	+27	67	67	+1
3	Arjuna	84	66	-18	57	57	+9
4	Sri Krishna	574	620	+46	620	620	0
5	Total	700	755	+55	745	745	+10

As compared to BG, 27 shlokas are increased for Sanjaya, 18 shlokas are reduced for Arjuna and 46 Shlokas are added to Sri Krishna making a total addition of 55 shlokas in BP/SBP. A total addition of 55 shlokas are added in BP vis-à-vis BG making a total of 755 shlokas. It is also observed that BP/SBP compared with MMS there is 1 excess shloka for Sanjaya, 9 excess shlokas for Arjuna, Which means that from Bhojpatri (BP/SBP) there is a reduction of 1 Shloka for Sanjaya and 9 for Arjuna.^[10]

Additional Shlokas of Bhojpatri Gita: As already mentioned, there are 45 extra Shlokas as per Mahabharata standard of Bhagavad Gita. Some of them require special mentioning while analyzing from the point of view of an ayurvedic psychotherapist. For instance,

- BG/2nd/11th – on human psychology and Lord Krishna being the ideal psychologist.
- 2nd / 50 – spirit of *karma yoga* emphasized, by explaining the necessity of working without expectations.
- 2nd/ 74,75, 77-79th – explains the reward of being detached from the materialistic world, to know the Brahma jnana etc.
- 4th / 24 describes ‘*Brahman*’ as the consumer of everything. (BRUGUVALLI – taithireeyopanishad)
- 11th / 42/2 , 44/1 – describes the all-pervading powerful supreme form.
- 13th /1 – *shloka* which often appears and disappears in 700 *shloka* Gita and its modern printing. The turning point where Gita moves to deeper knowledge.

सांप्रतन्तुमहाबाहोराज्यदिसुस्वलब्दये।पराजयायशत्रूणांदुर्गायाःस्मरणानकुरु॥

स्मृत्वापितामहादेवींविशुद्धैरन्तरात्मना।दुर्गतरतिसर्वत्रसर्वदुखैप्रमुच्यते॥(BG/18/63,64)

The following 2 shlokas was discovered by Acharya Narayan, which is an offering to Sri Mahadevi , in the last chapter.

Discussion

Charaka classified Ayurvedic treatments into three categories:

1. Daivavyapasraya (Faith Therapy): Aimed at addressing diseases caused by past actions (*Daivakrit* diseases) through spiritual practices like prayers, rituals, and mantras.
2. Yukti Vyapasraya (Rational Therapy): A scientific approach based on reasoning and planning, involving diet, medicines, and lifestyle modifications to restore balance.
3. Sattvavajaya (Psychotherapy): Focused on controlling the mind (*manas*) by addressing *mano doshas* (similar to the body's *tridoshas*).^[11] Charaka defined it as "keeping the mind away from unwholesome objects"

(*SattvavajayaPunahAhitebhyo Mano Nigrah*).^[12] This therapy aims to balance mental faculties (*chintya, vicharya, oohya, dhyeya, sankalpya*) and prevent sensory disturbances (*asatmendriyarthasamyoga*).^[13] Sadvrutta (Code of Conduct): To prevent psychosomatic disorders and promote well-being, Charaka emphasized adherence to ethical practices (*sadvrutta*) in daily life.^[15] These include:

- Physical practices: Cleanliness, offering prayers, and consuming food only after proper rituals.
- Mental practices: Kindness, self-control, avoiding sinful acts, and maintaining positive thoughts.
- Dietary guidelines: Avoid eating with a disturbed mind or in unclean conditions; specific rules include not consuming curd at night or eating roasted grain flour excessively.

By following these principles, individuals can maintain mental and physical health while preventing imbalances in the mind and body.

Aside from this, *Nithyasevaneeyaaharas* such as *shaali, shashtika, mudga, saindhava, amalaka*, and so on can be used to maintain the balance of *satva, raja, and tama*.^[14]

Another concept that is very similar to *sattvavajaya* is *achara rasayana*.^[15] It consists of the general rules of life that keep a person healthy and thus act as a *Rasayana*.

Sattvavajaya chikitsa as per *Bhagavad Gita*

When examining the essence of *Gita*, it is clear that the core concept deals with persuading a depressed soul to believe in himself and arise, to fulfil his responsibility. To concentrate on one's *Karma*, one must have mind control, i.e., *Mano arthanigraha*. One of the most difficult tasks is mind control, which necessitates a perfect combination of desire, determination, and dedication. As Lord Krishna advises Arjuna, it can only be accomplished through practise and detachment. "*Abhyasenatu Kaunteya Vairagyena Cha Griyate*," says Krishna. This type of mind control is somewhat arbitrary. This appears to be distinct from *Sattvavajaya* as described by *Charaka* because it is objective due to the intervention of a physician.^[23]

इन्द्रियाणिपरम्भावमुदयास्तमयश्चरौ।पुथगुदपद्यमानानांज्ञात्वाधीरोनशोचति॥

इन्द्रियाणिपरान्याहुरिन्द्रियेभ्यपरम्मनः।मनसस्तुपराबुद्धेर्याबुद्धेपरतस्तुस॥

BG/3rd/48,49th

Asatmyendriyarthasamyoga is a concept in *Gita* that describes Arjuna's struggle with his *Mano arthas*, which hinders his decision-making abilities. This affliction, known as *indriyaabhigraha*, is triggered by his own kith and kin's conflict, leading to confusion and inability to make decisions. Lord Krishna, through counseling, resolves this *Asatmyendriyarthasamyoga*, enabling Arjuna to make the right decisions. *Gita* also emphasizes the significance of *Ahara*, where Brahman is the ultimate consumer and the food consumed ultimately reaches him. (BG/5th/24)

The 17th chapter of *Bhagavad Gita* explains the 3 kinds of *Shradha* i.e., dedication where Lord Krishna explains the characters of *satva-raja-tamo Guna*. Along with this, *ahara* has been classified as per *satva raja* and *tama* predominance.

The classification of foods according to their effects on health and well-being consists of three categories. *Satva bhuyishtaahara* refers to nourishing foods that promote vitality, energy, and overall happiness. In contrast, *Rajo bhuyishtaahara* includes foods that are spicy and stimulating, which can lead to emotional distress and exacerbate health issues. Finally, *Tamo bhuyishtaahara* encompasses spoiled or impure foods that cause discomfort and digestive problems.

Stress response mechanism & Arjuna Vishada Yoga

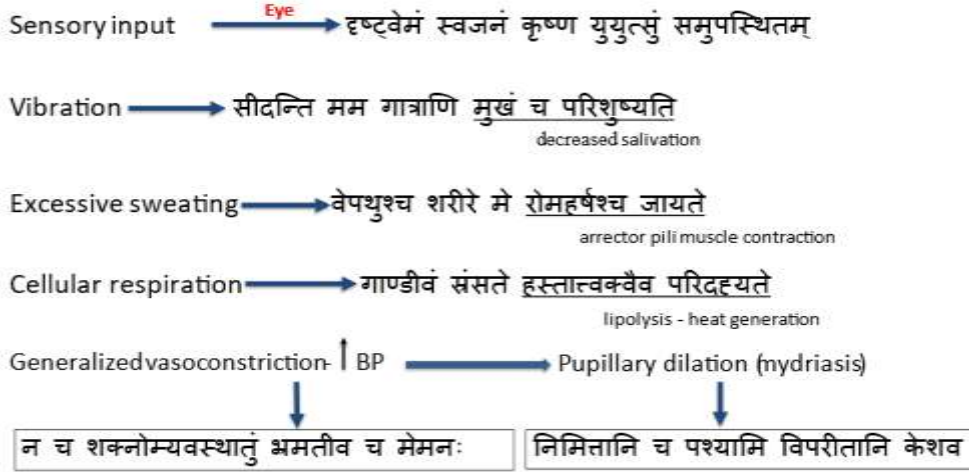
The autonomic nervous system (ANS) consists of both sympathetic and parasympathetic systems, allowing organisms to launch a coordinated flight or fight reaction. The Sympathetic Nervous System (SNS) serves various purposes, such as adjusting cardiac output, releasing heat through perspiration, and preparing for emergencies. When activated, the SNS triggers a cascade of responses, including increased cardiac output, dilatation of the bronchi, heart rate shift, and dilated pupils. These responses raise risk awareness and prepare for combat. The SNS can also be activated in response to long-term psychological threats, such as fear, depression, or emotional stress. Arjuna displayed a similar condition during a conflict, demonstrating the importance of the SNS in coping with stress.^[16]

Table no:4 Mechanism of Stress Response

	Affecters	Receptors	Effects
1	Muscles (Voluntary to involuntary)	β_2 Blood vessels, involuntary muscle reflex	Vibration
2	Mouth	β_2	Decrease salivation
3	Sweat gland- Muscarinic receptor	M_3	Excessive sweating
4	Arrector pili muscle	α_1	Constriction

5	ATP Use (cellular respiration increases)	β_1	Energy demand increased
6	Fat cells	β_3	Lipolysis – heat generation
7	Blood vessels	α_1	Generalized vasoconstriction (increased B.P)
8	Eye	α_1	Pupillary dilation (mydriasis)

Pathology of Vishaada



The 1st chapter, *Arjuna Vishada yoga* depicts anxiety of Arjuna in the battlefield and the symptoms described clearly shows the stress response which eventually leads to anxiety and depression.

The sensory input via eye, I.e., ..दृष्ट्वेमंस्वजनं, here there is a mithayoga of indriyarthasamyoga via akshi. , and the symptoms are manifested as

.. सीदन्तिममगात्राणिमुखंचपरिशुष्यति (decreased salivation) along with loss of control over muscles to maintain the posture.

..वेपथुश्चशरीरेमेरोमहर्षश्चजायते, vibration and arrector pili muscle contraction, once the muscle loses the control, involuntary movements like vibration, horripilation can happen.

..गाण्डीवंसंसतेहस्तात्त्वक्वैवपरिदह्यते the bow slips from hand due to excessive sweating and deranged muscles and burning sensation in skin due to heat generation from lipolysis

..नचशक्नोम्यवस्थातुंभ्रमतीवचमेमनः, Arjuna says that he couldn't handle this situation and he is having dizziness. This can be due to generalized vasoconstriction leading to high blood pressure.

निमित्तानिचपश्यामिविपरीतानिकेशव – and finally blurred vision is manifested due to pupillary dilation leading to mydriasis.

It is depicted as Pathology of Vishada: Fig 07

Phases of psychotherapy and Arjuna's Battlefield Behavior

Phase-1 - A therapeutic relationship is established where the psychotherapist encourages the patient to express emotions until exhaustion without conceptualizing the problem.^[17]

In *Arjuna Vishada Yoga*, Arjuna expresses his inability to fight his relatives, reflecting stress and anxiety. Lord Krishna listens patiently to Arjuna's prolonged dialogue (*BG/1st/27-46*).

Phase-2 – The patient acknowledges inadequacies and seeks help, revealing depreciated self-concept. Resistance may arise during this process, requiring careful handling by the therapist.

Arjuna confesses his confusion and seeks Krishna's guidance:

कार्पण्यदोषोपहतस्वभावःपृच्छामित्वांध्रमसम्मूढचेताः।यच्छ्रेयस्यानिश्चितं ब्रूहितन्मेशिष्यस्तेअहंशाधिमांत्वांप्रपन्नम्।(*BG/2nd/4-7*).

Krishna addresses Arjuna's delusion and grief empathetically, explaining the transitory nature of his distress:

त्वांमनुष्येण उपहतान्तरात्माविषादमोहाभिभवाद्धिसज्ञा। कृपागृहीतसमवेक्ष्यबंधूनभिप्रपन्नान्मुखमन्तकस्य।
(BG/2nd/11) – Absent in the 700-shloka Gita.

Krishna further introduces *Karmayoga*, advising Arjuna to focus on duty without attachment to outcomes, marking a significant spiritual and therapeutic leap. Lord Krishna's entire counselling process is very similar to the uncovering process described in modern psychotherapy, in which he strongly establishes the importance of doing the duties rather than being a slave to worldly attachments. He tries to exert control by implanting proper ideas in Arjuna's mind. (BG/2/30-50)

यस्य सर्वसमारम्भाः निराशीर्बन्धनास्त्विह।

त्यागे यस्य हतं सर्वसात्यागी सा च बुद्धिमान्॥

(BG/2/51) (-)

Phase-3 The therapist facilitates accurate self-evaluation by identifying the patient's outdated self-concept, encouraging them to use a fair standard, and if successful, the patient relinquishes false self-perceptions in exchange for a more accurate self-evaluation.

Similar scenario can be seen in *Bhagavad Gita*'s following contexts:

कायेन मनसा बुद्ध्या केवलैरिन्द्रियैरपि।

योगिनः कर्म कुर्वन्ति सङ्गत्य क्त्वात्मसिद्धये॥ (BG/5th/11)

Here, Lord Krishna asks to leave attachment to embrace self-realization. I.e., the outmoded self-concepts are changed and new ways of self-evaluation is adopted. (BG/5th/21-25)

The 25th shloka emphasizes the significance of detachment for mental stability and eternal peace, while Lord Krishna presents Arjuna with a new understanding of self-realization and the divine fusion of soul and Brahman.

phase-4 This stage involves creating new behavioral responses that are consistent with recently developed self-evaluation. In this stage, Arjuna's inquiries become more spiritually elevated in line with his gradual transition to a fresh outlook on life. (BG/8th/1-3)

When Arjuna tries to learn more about the Divine Lord Krishna, his transformation has reached its zenith. In the 11th chapter he reaches the path of vision, where Lord Krishna reveals his vishwaroopa. (BG/11th/15-16)

Theoretically, this could be connected to a person becoming enlightened by altering his or her perspective on everything they think or do. It is the transition from a narrow perspective to a broad one. towards the outside world as well as one's inner self. As a result, a transformed person who has received effective counselling will clearly exhibit their new behavioural response. Ayurveda also depicts the same as *loka-Purusha sidhanta*.

Conclusion

The Bhojpatri Bhagavad Gita is a unique text with potential applications in contemporary *Satvajaya chikitsa*. This study highlights the importance of integrating traditional psychotherapy techniques from Vedic literature to transform public health approaches to mental well-being.

Acknowledgement: The authors gratefully acknowledge Guruji Narayan for his analysis of the Bhojpatri Bhagavad Gita manuscript, Acharya Sri Charan Tirth Maharaj for discovering the Bhojpatri and Kashmira Pathanusariki Gita, and CIRISM and the Gulabkunwarba Ayurvedic Society for preserving and providing access to the manuscript. Special thanks to the staff of the Central Library, ITRA Jamnagar, the Department of Kaumarbhritya, ITRA, and the Ahmedabad Management Association. Finally, we thank our families and mentors for their support

Conflict of Interest Statement: The authors declare no conflict of interest.

Funding Statement: This research received no specific grant from any funding agency.

Data Availability Statement:

The data supporting the findings of this study are available within the article and its supplementary materials. The Bhojpatri Bhagavad Gita manuscript (Catalogue No. 3 and 4, Table 01) is preserved at the Central Library of the Institute of Teaching and Research in Ayurveda (ITRA), Jamnagar, Gujarat, India, and can be accessed for academic research purposes subject to the institution's access policies. Physical characteristics, folio details, and shloka comparisons (Tables 02–03, Figures 01–06) are provided in the article.

Additional Materials Referenced Include:

- Kashmiri Pathanusari manuscripts (Catalogue No. 2, Table 01) and Persian Gita translations (Figure 06), available at the same repository.
- Mahabharata-standard Bhagavad Gita versions (Table 02) and Bhojpatri Gita's 755 shlokas, with critical variations documented in Tables 02–03 and Figures 01–05.

For access to physical manuscripts or further details, contact the Central Library, ITRA Jamnagar. The datasets generated during the study are included in the supplementary material, and excerpts from the Bhojpatri Gita's additional shlokas (e.g., BG/2nd/11th, BG/18/63–64) are analyzed in the Results section.

Author Contribution statement

Author 1 and Author 2 jointly conceptualized the study, defining its objectives and scope. They designed the research framework, focusing on the integration of Ayurvedic principles with psychotherapeutic insights derived from the Bhojpatri Bhagavad Gita manuscript. Additionally, they provided strategic guidance on the comparative analysis of shloka distributions and thematic evaluations, ensuring alignment with modern mental health practices. Their contributions were pivotal in shaping the study's direction and scholarly rigor.

संरचितसारांश

परिचय: मानसिकस्वास्थ्यकाक्षरणवैश्विकचिंताकाविषयहै, जिसमेंअवसादसबसेसामान्यमनोरोगविकारहै, जिसकाजीवनकालजोखिम13.23% है।आयुर्वेदकी *सत्ववजयचिकित्सा*, जैसाकि *चरकसंहिता* मेंवर्णितहै, आधुनिकमनोचिकित्साकेसाथउपचारात्मकक्षमताप्रदानकरतीहै। *भोजपत्रीभगवद्गीता*, जिसमें755 श्लोकहैं, मनोचिकित्साअभ्यासोंमेंअद्वितीयअंतर्दृष्टिप्रदानकरतीहै।

उद्देश्य:

इससमीक्षाकाउद्देश्यभोजपत्रीभगवद्गीताकेभौतिकलक्षणोंऔरविशिष्टसामग्रीकाविश्लेषणकरनाहै, *अर्जुनविषादयोग* अध्यायमेंअर्जुनकेव्यवहारकीतुलनाआधुनिकअवसादकीपैथोलॉजीसेकरनाऔरभगवानकृष्णकीपरामर्शपद्धतिकाअध्ययन करना।

डेटास्रोत: मुख्यस्रोतभोजपत्रीभगवद्गीतापांडुलिपि (1609 ई.) है, जोITRA

जामनगरमेंसंरक्षितहै।सहायकसामग्रीमेंकश्मीरीपथानुसारीपांडुलिपियांऔरफारसीगीताअनुवादशामिलहैं।

समीक्षाविधियाँ: श्लोकवितरणकातुलनात्मकविश्लेषण (+55 बनाम700-श्लोकमानक),

अर्जुनके *विषाद का मनोगुण* (सत्व-रज-तम) असंतुलनकेमाध्यमसेथीमैटिकमूल्यांकन,

औरभगवानकृष्णकीपरामर्शतकनीकोंकाआयुर्वेदिकढांचेमेंसंश्लेषण।

निष्कर्ष: भोजपत्रीपांडुलिपिकेअतिरिक्तश्लोकअर्जुनकेमनोदैहिकलक्षणोंऔर *रज-तमगुण*

प्रभुत्वकेबीचसंबंधकोउजागरकरतेहैं, जबकिकृष्णकीप्रतिक्रियासाक्ष्य-

आधारितपरामर्शरणनीतियोंकोदर्शातीहै।इनआयुर्वेदिकसिद्धांतोंकोआधुनिकमानसिकस्वास्थ्यप्रथाओंकेसाथएकीकृत करनाअवसादप्रबंधनकेलिएसार्वजनिकस्वास्थ्यहस्तक्षेपोंकोबढ़ासकताहै।

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