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REVIEW ARTICLE

Clinical Significance of *Mantra Chikitsa:* Current Evidence and Future Directions

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ABSTRACT

Background: Mantra, a component of *Daivavyapashraya Chikitsa* (divine therapy) as described in classical Ayurvedic texts, represents a sophisticated system of sound-based therapeutics with far-reaching clinical applications. Derived from the Sanskrit roots *man* (mind) and *tra* (instrument), mantras function as psychoacoustic tools that engage body, mind, and consciousness simultaneously.

Objectives: This article reviews the Ayurvedic basis of *Mantra Chikitsa*, its classification, methods of chanting, neurophysiological mechanisms, and evidence from clinical research on various mantras including the Gayatri, Mrutyunjaya, Shiva Panchakshari, Mahamantra, and Vishnu Sahasranama.

Materials and Methods: A comprehensive narrative review of classical Ayurvedic texts (*Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Sangraha*) and contemporary peer-reviewed research publications was undertaken. Studies evaluating the effect of mantra chanting on physiological, psychological, and cognitive parameters were included.

Results: Mantra chanting demonstrably reduces anxiety, stress, blood pressure, and serum cortisol levels while improving cognitive function, heart rate variability, and quality of life across diverse populations. Neurophysiologically, mantra practice induces a shift from beta/alpha to theta/delta brainwave dominance, modulates the hypothalamic–pituitary–adrenal axis, reduces amygdala hyperactivity through insular cortex mediation, and stimulates parasympathetic tone.

Conclusion: *Mantra Chikitsa* represents an evidence-based, scientifically grounded therapeutic modality that integrates the principles of Vedic philosophy and modern neuroscience. Systematic clinical research is warranted to establish standardized protocols for its integration into contemporary healthcare.

1. INTRODUCTION

The classical *Ayurvedic* system of therapeutics is rooted in a tripartite treatment framework elucidated by *Acharya Charaka* in the *Charaka Samhita*. The three branches are: *Daivavyapashraya Chikitsa* (divine or supernatural therapy), *Yuktivyapashraya Chikitsa* (rational or pharmacological therapy), and *Satwavajaya Chikitsa* (psycho-behavioral therapy). Together, these modalities aim to restore *Dhatusamya Avastha* — the state of equilibrium among the bodily constituents.

Among these, *Daivavyapashraya Chikitsa* remains the least explored in contemporary research, despite being accorded primacy in classical texts. It encompasses modalities such as *Mantra* (sacred chanting), *Mani* (gemstone therapy), *Mangala* (auspicious rites), *Bali* (offerings), *Upahara* (gifts), *Homa* (fire offerings), *Niyama* (observances), and *Prayaschitta* (expiation). Of these, *Mantra Chikitsa* holds the foremost position.[1]

According to Ayurveda, every word or *Shabda* (sound) inherently possesses *Shakti* (energy). The *Vaisheshika-Nyaya* school postulates that *Shabda* is a unifying function across the five elements of the body (*Pancha Mahabhuta*: Sky, Air, Fire, Water, Earth), the five elements of the mind (Sky, Air, Fire, Direction, Time), and the five elements of the soul (Sky, Direction, Time, *Atma*, *Mann*). It is therefore evident that, owing to the involvement of *Atma*, mind, and body, the chanting of a mantra generates a particular energy within the practitioner. Since body, mind, and soul are interlinked, the pulsation of sound attunes the body, mind, and breath, allowing that energy to be transferred within the body.[2]

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In modern terms, a mantra is defined as a powerful sound or vibration capable of inducing altered states of consciousness and profound physiological relaxation. Research across neuroscience, psychophysiology, and clinical medicine is increasingly validating these ancient claims. *Mantra* is not confined to spiritual or psychiatric applications; classical texts describe its use in fever management (*Jwara Chikitsa*), wound care (*Vrana Chikitsa*), toxicology (*Visha Chikitsa*), obstetrics, and as a preparatory ritual before therapeutic procedures.[3]

This review aims to comprehensively consolidate the classical basis, mechanistic understanding, and clinical evidence base of *Mantra Chikitsa*, with the intent of positioning it as a legitimate adjunct within integrative medicine practice.

1.1 Aim and Objectives

1.1.1. Aim

To critically review and consolidate the classical Ayurvedic foundations, mechanistic pathways, and contemporary clinical evidence of *Mantra Chikitsa* (mantra therapy), to establish it as a scientifically grounded and clinically viable component of *Daivavyapashraya Chikitsa* within integrative healthcare.

1.1.2. Objectives

1. To trace the *Ayurvedic* basis of *Mantra Chikitsa* — its etymology (*Nirukti*), classical definitions, and documented applications across *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Sangraha*
2. To describe the classification of mantras (*Beeja*, *Moola*, *Shloka*, *Samputa*) and the recognized methods of chanting (*Vachanika*, *Upansu*, *Manasika Japa*)
3. To examine the proposed neurophysiological mechanisms underlying mantra chanting — including HPA-axis modulation, autonomic/parasympathetic effects, amygdala–insular interaction and brainwave shifts (beta/alpha → theta/delta)
4. To review contemporary clinical evidence (randomized controlled trials [RCTs] and pre–post studies) on specific mantras, *Gayatri, Shiva Panchakshari, Maha Mrutyunjaya, Mahamantra, Vishnu Sahasranama,* and *Pranav* (OM), with respect to outcomes such as anxiety, stress, blood pressure, cortisol levels, cognition, and quality of life
5. To identify existing gaps in the evidence base (small sample sizes, methodological heterogeneity) and propose directions for future standardized, well-designed research on Mantra Chikitsa.

2. MATERIALS AND METHODS

This article constitutes a narrative literature review synthesizing classical *Ayurvedic* scholarship and contemporary scientific evidence. The following methodology was adopted.

2.1. Classical Text Review

Relevant chapters from *Charaka Samhita* (*Chikitsasthana*, *Sharirasthana*, *Kalpasthana*), *Sushruta Samhita* (*Sutrasthana*, *Chikitsasthana*, *Uttaratantra*, *Kalpasthana*), and *Ashtanga Sangraha* were reviewed for references to *Mantra Prayoga*, *Daivavyapashraya Chikitsa*, and *Shabda Chikitsa*.

2.2. Database Search

PubMed, Google Scholar, and the AYUSH Research Portal were searched for relevant contemporary studies.

2.3. Data Synthesis

Findings were organized thematically under specific mantras and mechanistic pathways, correlating classical Ayurvedic concepts with modern neurophysiological constructs.

3. RESULTS

3.1. Nirukti (Etymology) and Definition of Mantra

The Sanskrit word *Mantra* comprises two roots: *Man* (the root of the word for mind) and *Tra* (the root of the word for instrument). Together, these denote an "instrument of the mind."[3] Classical texts offer two foundational definitions:

- *"Aksharasamuhah Yasyochcharana Vyadhirupashamyati Devadayashcha Prasanna Bhavati"*[4] — A *Mantra* is a group of *Aksharas* (syllables) whose *Uchchara* (recitation) pleases the *Devadis* (divine beings) and relieves disease.
- *"Mananat Trayate Yasmat Tasmat Mantrah Prakeertitah"*[5] — That which protects the one who contemplates it is called a Mantra.

3.2. Narration of Mantra in Ayurvedic Texts

Classical *Ayurvedic* texts document mantra applications across a wide spectrum of clinical and para-clinical contexts, affirming the centrality of *Mantra Chikitsa* from the Vedic era through codified medical traditions. Key references from the *Charaka Samhita* and *Sushruta Samhita* are tabulated in Table 1.

3.3. Methods of Mantra Chanting

Three canonical methods of *Mantra Japa* (repetition) are recognized:

- *Vachanika Japa*: Audible recitation in low, medium, or high tone. Engages the phonatory apparatus and generates external acoustic vibrations
- *Upansu Japa*: Lip-movement-only recitation without audible sound. An intermediate method combining external movement with internal resonance
- *Manasika Japa*: Silent mental recitation without sound or lip movement. Considered the most powerful method; engages purely cognitive and subtle dimensions of consciousness

3.4. Classification of Mantras

Mantras are classified into four broad categories based on structural complexity and content, as summarized in Table 2.

3.5. Shad Chakra Beeja Mantra and Endocrine Correlations

Each of the seven primary chakras is associated with a specific *Beeja* (seed) mantra and a corresponding vibrational frequency (Hz). It is hypothesized that recitation of each Beeja mantra generates sound at that particular frequency, stimulating the tissue surrounding the chakra through frequency-mediated wave energy, which in turn influences the corresponding endocrine gland [Table 3].

3.6. Clinical Evidence for Specific Mantras

3.6.1. Pranav mantra (OM)

Research on the OM mantra suggests that it is the only mantra involving all three states of mind — wakefulness, dreaming, and the unconscious state. As OM is considered the mantra of the *Agnya* chakra, its practice is postulated to engage all planes of brain function, paralleling the role of its corresponding pituitary gland, the master gland controlling the other endocrine glands of the body.[6]

3.6.2. Gayatri mantra

The *Gayatri Mantra* (also called the *Savitri Mantra*), sourced from the *Rigveda* (Mandala 3.62.10), is among the most extensively studied mantras in clinical research. Multiple RCTs and pre–post intervention studies have demonstrated its efficacy across diverse outcome measures [Table 4].[7-12]

3.6.3. Shiva panchakshari mantra (Om Namah Shivaya)

The *Shiva Panchakshari Mantra* (*Om Namah Shivaya*) occupies a central position in the *Ashta Rudriyam* of the *Yajurveda*. The five syllables *Na-Ma-Shi-Va-Ya* are considered phonemic representations of the *Pancha Mahabhuta* (five elements) — Earth, Water, Fire, Air, and Ether, respectively, with OM representing the cosmic substrate. The mantra is postulated to harmonize these elements within both the individual body and the external environment.

Research on the effects of *Om Namah Shivaya* chanting in older hypertensive women revealed statistically significant improvements in mini-mental state examination (MMSE) scores and reductions in anxiety, tension, and blood pressure.[13] In a separate study, healthy medical students who chanted the Shiva Panchakshari Mantra for 30 min (108 repetitions) showed a substantial reduction in heart rate and pulse rate compared with controls.[14]

3.6.4. Maha Mrutyunjaya Mantra

The *Maha Mrutyunjaya Mantra* is found in Sukta 59 of the seventh *Mandala* of the *Rigveda* and is dedicated to Lord Shiva as the conqueror of death.

One study reported that *Maha Mrutyunjaya Mantra* chanting generates specific vibrational frequencies associated with positive physiological and psychological effects, which may contribute to stress reduction and decreased levels of pro-inflammatory cytokines, potentially improving clinical outcomes in patients with severe traumatic brain injury.[15]

Another study reported a significant reduction in self-inferiority and depressive symptoms among participants who practiced the *Maha Mrutyunjaya Mantra* for 30 min daily over 40 days, indicating a potential role in promoting psychological well-being.[16]

Further research has demonstrated that school students exposed to regular *Maha Mrutyunjaya Mantra* chanting showed significant improvements in memory performance along with reduced auditory and visual reaction times, attributed to enhanced neural activation resulting from repetitive acoustic stimulation of the brain.[17]

3.6.5. Mahamantra (Hare Rama Hare Krishna)

The sixteen-word Vaishnava *Mahamantra*, referenced in the *Kali-Santarana Upanishad*, invokes the names of Hare (Vishnu), Krishna, and Rama. A study assessing 30 subjects with moderate-to-severe stress (perceived stress scale score ≥14) demonstrated that Mahamantra intervention significantly increased parasympathetic tone (LF/HF ratio; $P < 0.05$), shortened auditory reaction time ($P = 0.05$) and visual reaction time ($P = 0.01$), and significantly decreased serum cortisol levels ($P = 0.05$) compared with controls.[18] Another study demonstrated a marked reduction in HAM-A anxiety scores among 100 sports athletes (aged 18–23 years), from a mean of 27 (moderate-to-severe range) pre-intervention to 11 (mild range) post-intervention.[19]

3.6.6. Vishnu Sahasranama

A 12-week pilot study investigating the effects of daily *Sri Vishnu Sahasranama* chanting demonstrated significant improvements in both psychological and physiological parameters. Post-intervention assessments revealed significant decreases in anxiety, perceived stress, Depression, Anxiety, and Stress Scales, and serum cortisol levels, normalization of blood pressure, and significant improvement in MMSE (cognitive) scores. The study provided foundational evidence for long-term mantra practice as a neuroendocrine modulator.[20]

4. DISCUSSION

4.1. Neurophysiological Mechanisms of Action

4.1.1. Effects on breathing rate and cardiovascular parameters

Mantra chanting is associated with a reduction in respiratory rate and the generation of controlled airway resistance resulting from laryngeal modulation during vocalization. The rhythmic production of sound and accompanying vibratory stimuli are thought to enhance vagal activity, thereby promoting parasympathetic dominance and physiological relaxation. This autonomic modulation may contribute to improved cardiorespiratory regulation and an increased capacity for voluntary breath retention. When mantras are recited rhythmically, respiratory-rate modulation drives synchronized cardiac-rate modulation through cardiorespiratory coupling mechanisms (baroreflex resonance), leading to a reduction in blood pressure.[6]

4.1.2. Effects on the emotional brain

Neuroimaging data suggest that during sustained mantra recitation, the insular cortex exerts an inhibitory influence on amygdala hyperactivity. This limbic deactivation produces a state of profound relaxation characterized by reduced conceptual cognition and affective reactivity.[21]

4.1.3. Modulation of the hypothalamic–pituitary–adrenal (HPA) axis

Multiple lines of evidence confirm that mantra chanting down-regulates the HPA axis, resulting in measurably reduced salivary and serum cortisol levels. Comparative studies consistently demonstrate lower cortisol concentrations in mantra-intervention groups relative to controls.[18,20,22] This anti-stress mechanism likely underpins the clinical benefits observed across the anxiety, hypertension, and depression studies reviewed above.

4.1.4. Effects on different areas of the brain

Positron emission tomography-scanning studies in the domain of language neuroscience reveal that mantra chanting simultaneously recruits multiple cortical and subcortical regions. Hearing a mantra activates the auditory cortex and Wernicke's area; silent reading of mantras engages the visual cortex and visual-memory association areas; voiced chanting activates the motor cortex and Broca's area; and contemplating the mantra's meaning engages the limbic association cortex governing thought, learning, perception, and emotion.[23]

4.1.5. Brain wave modulation

Electroencephalographic studies have demonstrated that sustained mantra chanting produces a characteristic shift in dominant brain-wave frequency from beta (14–30 Hz; associated with active cognition, stress, and anxiety) and alpha (8–13.9 Hz; relaxed alertness) toward theta (4–7.9 Hz; deep meditation, enhanced learning and memory, spontaneous healing) and delta waves (1–3.9 Hz; deep sleep, growth-hormone release, deep physical relaxation).[24,25]

4.2. Neuro-Linguistic and Psycho-Linguistic Dimensions

Neurolinguistics examines the neural mechanisms controlling language comprehension, production, and acquisition, while psycholinguistics studies language behavior and its associated psychological

mechanisms. When a mantra is chanted in a rhythmic tonal pattern, neurolinguistic processes create a melodious, entraining effect on neurological systems. Crucially, this Neuro-linguistic Effect operates even without conscious knowledge of the mantra's semantic content, as it depends purely on the acoustic and vibrational properties of the sound. However, when the practitioner understands the meaning, an additional psycholinguistic effect is superimposed, generating curative neurochemicals (endorphins, serotonin, GABA) that exert further soothing and healing effects across both psyche and body.

4.3. Integration with Classical Ayurvedic Theory

Viewing *Mantra Chikitsa* through the prism of classical Ayurvedic theory reveals its coherence with established principles. The *Tridosha* framework posits that *Vata* governs movement and nervous function, *Pitta* governs transformation and cognition, and *Kapha* governs structure and stability. Stress-induced *Vata–Pitta* aggravation, manifesting as anxiety, hypertension, and insomnia, is precisely what mantra practice appears to remedy through its parasympathetic, HPA-suppressive, and limbic-calming effects. Simultaneously, the elevation of *Satwa Guna* (the quality of clarity and equanimity) through regular mantra practice aligns with the *Satwavajaya* dimension of Ayurvedic therapeutic philosophy.

5. FURTHER SCOPE

Mantra Chikitsa presents a broad new horizon that can advance Ayurveda and open avenues for further research and knowledge. The following aspects merit consideration:

- Systematic research on the effects of different mantras is the need of the hour
- Correlating mantra practice with the principles of sound energy is essential to enhance its effect and understand its underlying biophysics
- Methods of mantra chanting, including their indications and contraindications, should be clearly delineated
- The scope of *Mantra Chikitsa* extends beyond the spiritual and psychological; its clinical implementation as a standalone therapy, as described in classical texts, also warrants dedicated research.

6. CONCLUSION

Mantra Chikitsa, a key component of *Daivavyapashraya Chikitsa* described in Ayurveda, represents a promising complementary therapeutic approach with potential applications in both preventive and clinical healthcare. The available evidence suggests that regular mantra chanting is associated with beneficial effects on psychological, physiological, and cognitive parameters, including reductions in perceived stress, anxiety, blood pressure, and cortisol levels, as well as improvements in heart rate variability, cognitive performance, and overall quality of life.

Emerging research indicates that these effects may be mediated through multiple interconnected mechanisms, including modulation of autonomic nervous system activity, enhancement of parasympathetic tone, regulation of the HPA axis, alterations in limbic and cortical brain activity, and changes in neural oscillatory patterns. Neuroimaging and electrophysiological studies further suggest that mantra chanting influences brain regions involved in emotional regulation, attention, memory, and self-awareness.

From an Ayurvedic perspective, these findings may be interpreted in the context of the holistic interaction between *Sharira* (body), *Manas* (mind), and *Atma* (consciousness), wherein *Shabda* (sound) serves as an important medium influencing both physiological and psychological processes. The convergence of traditional Ayurvedic concepts with contemporary neuroscientific observations provides a valuable framework for understanding the therapeutic potential of mantra-based interventions.

Mantra Chikitsa is not superstition; it is a scientifically grounded therapeutic modality deeply embedded in the fundamental principles of Vedic physics and physiology. Despite encouraging findings, the current evidence base remains limited by small sample sizes, methodological heterogeneity, and variability in intervention protocols. Further well-designed RCTs, multicenter studies, and mechanistic investigations employing standardized mantra protocols, validated outcome measures, and advanced neurophysiological assessment tools are warranted. Such research may help establish the efficacy, safety, and clinical applicability of *Mantra Chikitsa* and facilitate its integration into evidence-based, integrative healthcare practice.

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Ethical approval was not required for this study as it is a case report.

11. CONFLICT OF INTERESTS

The authors declare no conflicts of interest regarding the publication of this paper.

12. DATA AVAILABILITY STATEMENT

The data analyzed in this review were obtained from publicly available sources, including peer-reviewed articles, observational studies, and surveys accessible through databases.

13. DISCLAIMER/VIEW AND OPINIONS

The opinions expressed in this article are solely those of the authors and do not reflect the views of the *International Research Journal of Ayurveda and Yoga* or its editorial board.

14. AI-USE DECLARATION

The authors declare that no generative AI tools were used to create scientific content, interpret data, or draft any sections of this manuscript. AI-based tools were used solely for minor language and grammar refinements to improve clarity and readability. All scientific content, analysis, and conclusions remain the sole responsibility of the author.

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Table 1: References to mantra prayoga in classical ayurvedic texts

S. No.	Reference	Mantra/Application
1	C.Chi. 3/311	*Vishnu Sahasranama — Vishamajvara* (irregular fever)
2	C.Chi. 9/89–93	*Mantra Prayoga — Unmada* (psychosis/mania)
3	C.Sa. 8/9	*Ahirasi* and *Brahma-Brihaspati Mantra* — before conception
4	C.Sa. 8/39	*Vishnu Prajapati Mantra* — chanted during *Prasava* (delivery)
5	C.Chi. 23/61	*Siddha Mantra — Jangam Visha Chikitsa* (animate poison)
6	C.Chi. 23/223	*Siddha Mantra — Shanka Visha Chikitsa* (conch poison)
7	C.Chi. 23/90	*Mantra Prayoga — Mahagada Nirman Vidhi* (polyherbal formulation)
8	C.Chi. 1/3/9	*Gayatri/Savitri+Omkar — Keval Amalaka Rasayan*
9	C.Ka. 1/14	Mantra recitation before *Vaman Karma* (emesis therapy)
10	Su.su. 2/4	*Gayatri Mantra* — before *Abhyasa/Pathan* (study/teaching)
11	Su.su. 5/20-32	*Rakshoghna Mantra* — protection of fresh wounds (*Sadyovrana*)
12	Su.chi. 13/26	Mantra — at the time of *Tuvarak Tail Pana* in *Madhumeha* (diabetes)
13	Su.u. 27/21	*Gayatri Mantra — Mukhamandika Chikitsa* (facial conditions)
14	Su.chi. 28/9	*Sri Sukta* (*Atharvaveda*) — manufacture of *Ayuvardhak Rasayan*
15	Su.k. 7/61–62	*Alarka Visha Chikitsa Mantra* — rabies treatment

Table 2: Classification of mantras with structural characteristics and examples

Type	Description	Examples
Beeja Mantra	Single-syllable seed sounds corresponding to chakras and their vibrational frequencies; activate dormant energy centers	LAM, VAM, RAM, YAM, HAM, OM
Moola Mantra	Root mantra comprising Beeja+deity name; invokes specific divine qualities	Om Namah Shivaya
Shloka Mantra	Verse-form mantra combining Beeja+deity name+desired fruit (*Phala*); complete invocations	Gayatri, Mrutyunjaya, Hare Rama Hare Krishna
Samputa Mantra	Compilation of multiple Shloka Mantras; comprehensive liturgical texts	Vishnu Sahasranama, Hanuman Chalisa, Lalita Sahasranama

Table 3: Shad Chakra Beeja mantras with vibrational frequencies and endocrine correlates

Chakra	Sanskrit name	Beeja	Frequency (Hz)	Endocrine gland
Root	*Muladhara*	LAM	396	Adrenal Glands
Sacral	*Svadhishthana*	VAM	417	Ovaries/Testes
Solar Plexus	*Manipura*	RAM	528	Pancreas
Heart	*Anahata*	YAM	639	Thymus gland
Throat	*Vishuddha*	HAM	741	Thyroid gland
Third Eye	*Ajna*	OM	852	Pituitary gland
Crown	*Sahasrara*	OM	963	Pineal gland

Table 4: Summary of clinical studies on Gayatri mantra chanting

Author (Year)	Outcome measure	Population	Design	Key findings
Sudha (2020)	Social anxiety, stress, self-concept, well-being	80 students (10–17 years)	RCT	Significant reduction in anxiety and stress; improvement in self-concept and well-being in the experimental group
Sharma and Singh (2014)	Educational stress	200 students (14–17 years)	RCT	Significant reduction in educational stress in the intervention group
Candrawati *et al*. (2018)	Anxiety	34 elderly (60–89 year)	Pre–post	Significant decrease in anxiety (P=0.001)
Jayanti *et al*. (2022)	Anxiety	22 participants	Pre–post	Significant reduction in anxiety (P=0.004) with the five-finger technique combined with Gayatri Mantra
Sharma and Singh (2019)	Anger expression, psycho-physiological state	60 students (18–25 year)	RCT	Significant reduction in state/trait anger and anger expression; improved psycho-physiological state
Dewi *et al*. (2020)	Quality of life (post-stroke)	46 post-stroke patients	RCT	Significant improvement in stroke-specific quality of life

RCT: Randomized controlled trials