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**INTERNATIONAL JOURNAL OF DIAGNOSTICS AND RESEARCH****The Effect of “Tayata Om Bekanze” Mantra Chanting on Chinta (Anxiety): An Integrative Ayurvedic Case Study****Dr. Krishna P. Thorat Kullolli<sup>1</sup>, Dr. Vivekanand Mohan Kullolli<sup>2</sup>**<sup>1</sup> HOD And Professor ,Department Of Roganidan Evum Vikriti Vigyana ,Indian Institute Of Ayurved, Research And Hospital Rajkot.<sup>2</sup> HOD And Professor ,Department Of Shalya Tantra,Indian Institute Of Ayurved, Research And Hospital Rajkot.**Corresponding Author:** Dr.Krishna P. Thorat Kullolli**ORCID ID:** 0000-0002-5791-372X**Article Info:** Article Received on : 25/03/2026

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*Chinta (anxiety)* is a common Manasika Vikara described in Ayurveda, predominantly associated with *Vata* aggravation, particularly *Praṇa Vayu* imbalance. It manifests as *Ati-chintana (excessive overthinking)*, *Hṛd-spandana (palpitations)*, *Nidra-nasha (insomnia)*, and *Utklesha (restlessness)*. Contemporary management primarily includes pharmacotherapy and psychotherapy; however, integrative approaches incorporating *Daivavyapashraya Chikitsa* such as mantra chanting are gaining attention for their psycho-spiritual benefits.

**Objective:**

To evaluate the effect of “*Tayata Om Bekanze*” mantra chanting on symptoms of *Chinta* in a 37-year-old female patient through an integrative Ayurvedic approach.

**Methodology:**

A single-case integrative study was conducted on a 37-year-old woman presenting with chronic overthinking, palpitations, disturbed sleep, and restlessness for six months. Clinical assessment was based on Ayurvedic parameters and symptom scoring. The intervention consisted of guided chanting of the *mantra* for 20 minutes daily (108 repetitions) for 21 consecutive days.

**Results:**

Post-intervention assessment revealed marked reduction in *Ati-chintana and Utklesha*, moderate reduction in *Hṛd-spandana*, and significant improvement in sleep quality. Emotional stability improved significantly.

**Conclusion:**

*Mantra* chanting showed promising results in managing *Vata-dominant Chinta* and may be used as a safe integrative therapy.

**Keywords:** *Chinta, Anxiety, Mantra Therapy, Ati-chintana, Utklesha, Hrispandana, Tayata Om Bekanze, Daivavyapashraya Chikita, Vata, Praṇa Vayu*

## Introduction :

Mental health disorders are a growing concern worldwide, with anxiety disorders being among the most prevalent conditions affecting individuals across all age groups. The World Health Organization reports that anxiety significantly contributes to global morbidity and reduced quality of life<sup>[1]</sup>. In *Ayurveda*, *Chinta* is described as a pathological condition characterized by excessive and uncontrolled thinking. It arises due to imbalance of *Manas Doṣas* (Rajas and *Tamas*) along with aggravation of *Vata Doṣa*, particularly *Prāṇa Vayu*, which governs higher mental functions<sup>[2,3]</sup>. Persistent *Chinta* leads to disturbances in mental equilibrium and contributes to psychosomatic disorders.

*Ayurveda* emphasizes a holistic approach in managing such conditions through three modalities: *Daivavyapashraya Chikitsā*, *Yuktivyapashraya Chikitsa*, and *Sattvavajaya Chikitsa*<sup>[4]</sup>. Among these, mantra chanting is a key component of *Daivavyapashraya Chikitsa*, aimed at restoring psycho-spiritual balance.

The “*Tayata Om Bekanze*” mantra, associated with the Medicine Buddha, is traditionally believed to possess healing vibrations that influence both mental and physical health. This study explores its role in managing *Chinta*.

## Review of Literature :

### *Ayurvedic Concept of Chinta :*

*Ayurvedic* classics provide detailed insight into mental disorders. *Charaka* describes excessive worry as a causative factor for *Vata* aggravation and depletion of *Ojas*, leading to weakened mental resilience<sup>[5]</sup>. *Sushruta* highlights the role of

disturbed *Manas Doṣhas* in psychological disorders<sup>[6]</sup>, while *Vagbhata* emphasizes the significance of *Prāṇa Vayu* in regulating cognition and emotional stability<sup>[7]</sup>.

The pathogenesis of *Chinta* involves *Nidana* such as stress, fear, and excessive thinking, leading to *Vata* vitiation. This affects *Manovaha Srotas* and manifests through symptoms like *Ati-chintana*, *Utklesha*, *Nidra-nasha*, and *Hṛid-spandana*.

### Modern Understanding of Anxiety :

Modern medicine defines anxiety as a state of excessive fear and worry associated with physiological symptoms such as increased heart rate, insomnia, and restlessness. *Neurobiologically*, anxiety involves *dysregulation* of neurotransmitters such as serotonin and GABA, along with hyperactivity of the sympathetic nervous system<sup>[8]</sup>. Chronic anxiety is also associated with elevated *cortisol* levels and impaired emotional regulation<sup>[9]</sup>.

### Mantra Therapy and Its Scientific Basis :

Mantra chanting is a meditative practice involving rhythmic repetition of sound vibrations. Studies have shown that such practices can induce a relaxation response, reduce stress hormones, and improve autonomic balance<sup>[10,11]</sup>.

*Neuroimaging* studies suggest that chanting modulates brain regions associated with attention and emotional control, promoting mental calmness<sup>[12]</sup>.

### Origin and Significance of “*Tayata Om Bekanze*” Mantra :

The mantra “*Tayata Om Bekanze Bekanze Maha Bekanze Radza Samudgate Soha*” originates from Buddhist healing traditions and is associated with

the Medicine Buddha (*Bhaisajyaguru*)<sup>[13]</sup>.

It is believed to:

- Remove suffering
- Promote healing
- Enhance mental clarity
- Stabilize emotional disturbances

The *vibrational* aspect of the mantra is thought to harmonize the mind and body.

**Materials and Methods :**

**Study Design :**

This was a single-case integrative clinical study conducted over a period of 21 days.

**Case Description :**

A 37-year-old female patient presented with:

- Excessive worrying (*Ati-chintana*)
- Palpitations (*Hrid-spandana*)
- Disturbed sleep (*Nidra-nasha*)
- Restlessness (*Utklesha*)

**Duration of symptoms: 6 months**

**Inclusion Criteria :**

- Age between 18–60 years
- Presence of anxiety symptoms
- Willingness to participate

**Exclusion Criteria**

- Severe psychiatric illness
- Ongoing medication for anxiety
- Neurological disorders

**Intervention Protocol :**

- Mantra: *Tayata Om Bekanze*
- Duration: 20-30 minutes daily
- Repetitions: 108
- Duration: 21 days

**Procedure :**

The patient was instructed to:

- Sit in a comfortable posture
- Close eyes and focus on breathing
- Chant the mantra rhythmically
- Visualize healing light

**Assessment Criteria :  
Subjective Parameters (Score 0–3)**

Symptom	0	1	2	3
<i>Ati-chintana</i>	None	Mild	Moderate	Severe
<i>Utklesha</i>	None	Occasional	Frequent	Constant
<i>Nidra-nasha</i>	Normal	Mild	Moderate	Severe
<i>Hrid-spandana</i>	None	Occasional	Frequent	Severe

**Objective Assessment :**

Parameter	Day 0 (Baseline)	Day 7	Day 14	Day 21
Sleep Onset Latency	>60 min	30–45 min	15–20 min	<15 min
Night Awakenings	3–4 times/night	2–3 times	1–2 times	Rare/none
Total Sleep Duration	4–5 hours	5–6 hours	6–7 hours	7–8 hours
Feeling After Waking	Fatigued	Slightly refreshed	Refreshed	Well-rested
Irritability	Severe	Moderate	Mild	Minimal
Emotional Control	Poor	Slight improvement	Good	Stable
Concentration Ability	Poor	Moderate	Improved	Good
Social Interaction	Avoidant	Slightly improved	Normalizing	Normal
Palpitation Episodes	Frequent	Frequent	Occasional	Rare
Restlessness	Continuous	Frequent	Mild	Minimal
Breathing Pattern	Irregular	Slightly improved	Regular	Calm & rhythmic
Mental Calmness Score (0–3)	3	2	1	1
Daily Task Performance	Impaired	Slightly improved	Moderately improved	Normal
Decision-Making Ability	Poor	Moderate	Improved	Good
Work Efficiency	Low	Moderate	Good	Optimal

**Observation and Results : Detailed Day-wise Clinical Observation :**

Day	<i>Ati-chintana</i> (Overthinking)	<i>Utkleśa</i> (Restlessness)	<i>Nidra-nāśa</i> (Sleep Disturbance)	<i>Hṛd-spandana</i> (Palpitations)	Clinical Remarks
Day 0	3	3	3	2	Severe anxiety, poor sleep, emotional instability
Day 1	3	3	3	2	Difficulty in concentration during chanting
Day 2	3	3	3	2	Mind wandering, no significant change
Day 3	3	3	3	2	Slight awareness during chanting, no relief
Day 4	3	2–3	3	2	Mild calmness after chanting
Day 5	3	2	3	2	Slight reduction in restlessness
Day 6	2–3	2	2–3	2	Improved engagement in chanting
Day 7	2	2	2	2	Mild improvement in sleep and calmness
Day 8	2	2	2	2	Reduced frequency of intrusive thoughts
Day 9	2	2	2	2	Better focus during chanting
Day 10	2	2	2	1–2	Reduced intensity of palpitations
Day 11	2	1–2	2	1–2	Improved emotional control
Day 12	2	1	1–2	1–2	Better sleep continuity
Day 13	1–2	1	1–2	1–2	Reduced restlessness
Day 14	1–2	1	1	1–2	Noticeable calmness and clarity
Day 15	1–2	1	1	1	Stable mood, reduced anxiety
Day 16	1	1	1	1	Improved daily functioning
Day 17	1	1	1	1	Minimal overthinking
Day 18	1	1	1	1	Sustained calmness
Day 19	1	1	1	1	Good sleep and emotional stability
Day 20	1	1	1	1	Near-normal mental state
Day 21	1	1	1	1	Significant improvement, patient satisfied

### Overall Outcome with Clinical Evaluation :

The present case study demonstrated a progressive and clinically significant improvement in both subjective and objective parameters of *Chinta* (anxiety) following 21 days of “*Tayata Om Bekanze*” mantra chanting. The therapeutic response was gradual in onset, with minimal changes observed during the initial 3–4 days, followed by consistent and sustained improvement from the end of the first week onwards, indicating a cumulative effect of the intervention.

At the subjective level, there was a marked reduction in *Ati-chintana* (*overthinking*), which decreased from severe and persistent intrusive thoughts at baseline to mild and manageable levels by Day 21. The patient reported improved thought control, reduced rumination, and enhanced mental clarity. *Utklesha* (restlessness), which was initially continuous and distressing, showed significant reduction, with the patient experiencing a sense of calmness and inner stability. *Nidra-nasha* (sleep disturbance) improved considerably, as evidenced by reduced sleep onset latency, decreased night awakenings, and increased total sleep duration, ultimately resulting in a refreshed feeling upon waking. *Hrid-spandana* (palpitations) also reduced in both frequency and intensity, indicating improved autonomic balance.

Objective assessment parameters further supported these findings. Sleep quality normalized progressively, with restoration of near-physiological sleep patterns by the end of the study. *Behavioural* and emotional assessments revealed substantial improvement in emotional regulation, irritability, and concentration ability, suggesting

enhanced *Sattva* predominance. The patient’s functional capacity, including daily task performance and decision-making ability, improved from impaired to near-normal levels. Additionally, autonomic symptoms such as irregular breathing and restlessness showed marked reduction, reflecting stabilization of physiological responses.

### Discussion :

The present integrative case study demonstrates that “*Tayata Om Bekanze*” mantra chanting produces significant improvement in the clinical manifestations of *Chinta* (anxiety). The observed therapeutic effects can be understood through both *Ayurvedic* principles and modern *neurophysiological* mechanisms, indicating a multidimensional mode of action.

From an *Ayurvedic* perspective, *Chinta* is primarily a manifestation of aggravated *Vata Dosha*, particularly *Prana Vayu*, which governs higher mental functions such as cognition, perception, and emotional regulation<sup>[14,15]</sup>. Persistent *Ati-chintana* (*overthinking*) leads to further vitiation of *Vata*, creating a self-perpetuating cycle of mental instability. In the present case, the reduction in *overthinking*, restlessness, and insomnia suggests effective *Vata-shamana* (pacification). Mantra chanting, being a component of *Daivavyapashraya Chikitsa*, acts at a subtle level by influencing *Manas* and enhancing *Sattva Guna*, which is essential for mental clarity and stability<sup>[16,17]</sup>.

The concept of *Nada* (sound vibration) plays a crucial role in mantra therapy. According to *Ayurvedic* and yogic literature, specific sound frequencies can influence mental and physiological states. The repetitive chanting of “*Tayata Om*

*Bekanze*” likely produced rhythmic *vibrational* effects that stabilized *Prana Vayu* and regulated *Manovaha Srotas*. This aligns with the classical understanding that controlled sensory inputs and focused mental activity help in reducing *Rajas* (agitation) and *Tamas* (inertia), thereby restoring equilibrium<sup>[18,19]</sup>.

The origin of the “*Tayata Om Bekanze*” mantra from Buddhist healing traditions further supports its therapeutic relevance. It is associated with the Medicine Buddha (*Bhaisajyaguru*), symbolizing healing and removal of suffering. The semantic meaning of the mantra—removal of physical and mental distress—combined with its *vibrational* properties, may contribute to both psychological reassurance and *neurophysiological* regulation<sup>[20]</sup>. The incorporation of visualization during chanting, as practiced in this study, likely enhanced the therapeutic outcome by engaging cognitive and emotional *centres* simultaneously.

From a modern scientific perspective, anxiety disorders are characterized by autonomic nervous system *dysregulation*, particularly increased sympathetic activity and reduced parasympathetic tone<sup>[21]</sup>. The findings of this study, including reduced palpitations, improved sleep, and decreased restlessness, suggest a shift towards parasympathetic dominance. This can be explained by the relaxation response induced through rhythmic chanting, controlled breathing, and focused attention.

Research by Benson demonstrated that repetitive prayer or mantra chanting activates the relaxation response, characterized by reduced heart rate, decreased oxygen consumption, and lowered stress

hormone levels<sup>[22]</sup>. Similarly, *Bernardi et al.* reported that recitation of mantras can synchronize cardiovascular rhythms and improve autonomic function<sup>[23]</sup>. These findings correlate with the observed reduction in *Hrid-spandana* (palpitations) and normalization of breathing patterns in the present case.

*Neuroimaging* studies further indicate that meditative practices, including mantra chanting, influence brain regions such as the prefrontal cortex, *amygdala*, and limbic system, which are involved in emotional processing and stress response<sup>[24]</sup>. Modulation of these areas may explain the improved emotional stability, reduced irritability, and enhanced concentration observed in the patient. The decrease in intrusive thoughts suggests improved regulation of the default mode network, which is often hyperactive in anxiety disorders.

Another important aspect is the role of attention and cognitive restructuring. Mantra chanting involves sustained attention and repetition, which may act as a form of cognitive distraction, reducing rumination and negative thought patterns. This aligns with principles of *Sattvavajaya Chikitsa*, where control of mind and withdrawal from unwholesome thoughts are emphasized<sup>[25]</sup>. Thus, although primarily categorized under *Daivavyapashraya*, mantra chanting also indirectly supports psychological therapy.

The progressive improvement observed in this study highlights the cumulative effect of the intervention. Minimal changes in the initial days followed by significant improvement after one week suggest that consistent practice is essential for

achieving therapeutic benefits. This pattern is similar to other mind-body interventions, where *neuroplastic* changes occur gradually over time.

Furthermore, the improvement in sleep parameters is particularly noteworthy. Sleep disturbance is both a symptom and a contributing factor in anxiety disorders. The normalization of sleep onset latency, reduction in awakenings, and increased total sleep duration indicate restoration of circadian rhythm and reduced *hyperarousal*. This may be attributed to decreased sympathetic activity and enhanced melatonin regulation, as suggested in studies on meditation and relaxation techniques<sup>[26,27]</sup>.

Importantly, the intervention was found to be safe, non-invasive, and free from adverse effects, which is a significant advantage over pharmacological therapies that may cause dependency or side effects. The cost-effectiveness and ease of practice make it highly suitable for long-term management and preventive care.

However, certain limitations must be acknowledged. Being a single-case study, the findings cannot be generalized. The absence of standardized psychometric scales such as HAM-A or GAD-7 limits objective quantification. Additionally, placebo effect and patient expectancy cannot be ruled out. Despite these limitations, the consistency of improvement across multiple parameters strengthens the validity of the findings.

Overall, the results of this study support the integration of mantra chanting into the management of anxiety disorders. It provides a bridge between traditional *Ayurvedic* wisdom and modern scientific understanding, emphasizing a holistic approach to mental health. Future studies with larger sample

sizes, control groups, and objective biomarkers are recommended to further validate and standardize this therapeutic modality.

### Conclusion:

The present integrative case study demonstrates that “*Tayata Om Bekanze*” mantra chanting has a significant therapeutic effect in the management of *Chinta* (anxiety), particularly in conditions dominated by *Vata Doṣha* imbalance. The intervention resulted in notable improvement in key symptoms such as excessive worrying, restlessness, palpitations, and disturbed sleep. From an *Ayurvedic* perspective, the therapy works by stabilizing *Prāṇa Vāyu*, enhancing *Sattva Guna*, and reducing the impact of *Rajas* and *Tamas*, thereby restoring mental harmony. From a modern scientific viewpoint, mantra chanting appears to modulate autonomic nervous system activity, reduce sympathetic overdrive, and induce a relaxation response, contributing to improved emotional regulation and sleep quality. As a safe, cost-effective, and non-pharmacological modality, this practice can be effectively incorporated into integrative management of mild to moderate anxiety disorders. However, further large-scale clinical studies with objective assessment tools are necessary to validate these findings and establish standardized therapeutic protocols.

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