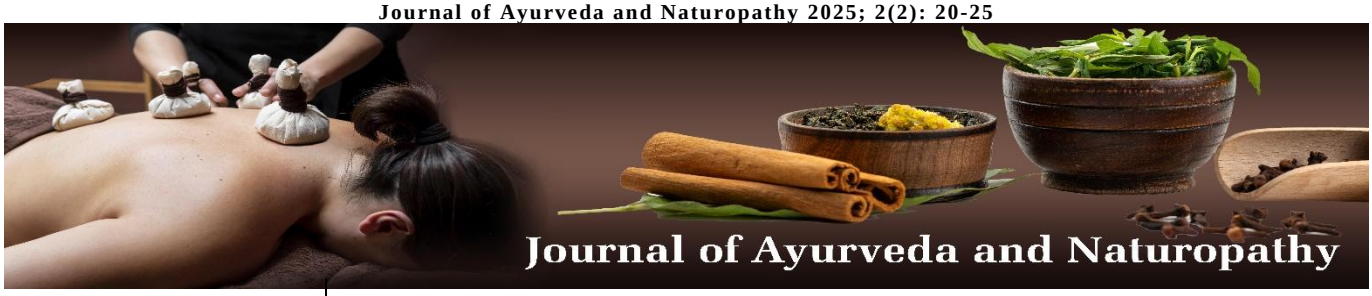

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A comprehensive review on Nidra and Swapna: Insights from Ayurveda and sleep science

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Abstract
Background: *Nidra* (sleep) is regarded as one of the *Trayopastambha* (three essential pillars of life) in Ayurveda, contributing significantly to physical, mental, and spiritual well-being. *Swapna* (dreams), an integral phenomenon occurring during *Nidra*, is interpreted in Ayurvedic texts as reflective of the *Manas* (mind), *Dosha* predominance, and psychological states. In contemporary sleep science, sleep and dreams are analyzed through neurophysiological, hormonal, and cognitive frameworks. A holistic comparative understanding of these concepts may offer insights into managing sleep disorders and promoting optimal health.
Aim: To critically explore and compare the Ayurvedic and modern scientific perspectives on *Nidra* and *Swapna*, and to evaluate their physiological, psychological, and therapeutic significance.
Objectives: To compile classical Ayurvedic references related to *Nidra* and *Swapna*. To study the types, functions, and stages of sleep and dreams in modern sleep science. To analyze the factors affecting sleep and dream patterns from both traditions. To explore Ayurvedic and modern management strategies for sleep disturbances.
Materials and Methods: A qualitative review approach was adopted. Literature was collected from *Brihattrayi*, *Laghutrayi*, and contemporary Ayurvedic commentaries for classical insights. For modern perspectives, standard neurophysiology textbooks and indexed journals (PubMed, Scopus) were reviewed. Comparative analysis was done thematically and descriptively.
Results: Ayurveda emphasizes *Nidra* as essential for *Dhatu Pushti*, *Bala*, and *Medha*. It classifies sleep into types based on causes such as *Tamobhava Nidra* and *Manah Shramaja Nidra*. Dreams are interpreted through *Dosha* imbalance and *Manovaha Srotas* disturbances. Modern science identifies Non-REM and REM stages, regulated by circadian rhythms and neurotransmitters. Psychological and pathological interpretations of dreams relate to subconscious processing. Both traditions acknowledge the diagnostic and prognostic value of dreams and sleep quality.
Conclusion: The Ayurvedic and modern perspectives on *Nidra* and *Swapna* complement each other in understanding the depth of sleep physiology and its impact on health. Integration of Ayurvedic principles with contemporary approaches may enhance preventive and therapeutic strategies for sleep disorders.

Keywords: *Nidra*, *Swapna*, Ayurveda, sleep science, circadian rhythm, sleep disorders

Introduction
In Ayurveda, *Nidra* (sleep) is considered one of the *Trayopastambha*—the three fundamental pillars of life—alongside *Ahara* (food) and *Brahmacharya* (regulated lifestyle). It plays a crucial role in maintaining physical strength (*Bala*), mental clarity (*Medha*), emotional balance, and immunity (*Vyadhikshamatva*). Classical texts such as *Charaka Samhita* and *Ashtanga Hridaya* emphasize that proper sleep ensures nourishment (*Dhatu Pushti*), vitality, and overall well-being, while its disturbance (*Anidra*) leads to significant derangements in body and mind [1].
Swapna (dreams), though often considered abstract, have been intricately discussed in Ayurvedic literature. Dreams are believed to arise from the subconscious activity of the *Manas* (mind) and are influenced by the predominance of *Doshas* and the impressions (*Samskaras*) stored within the psyche. Different dreams are classified based on their causes, nature, and prognostic values. Acharyas such as Charaka, Sushruta, and Vagbhata have elaborated on auspicious and inauspicious dreams and their relevance in disease diagnosis and prediction [2].

From the modern scientific perspective, sleep is a complex and dynamic physiological process, essential for homeostasis, learning, memory consolidation, and emotional regulation. It is broadly divided into Non-Rapid Eye Movement (NREM) and Rapid Eye Movement (REM) phases, each characterized by distinct neurophysiological activity. Dreams predominantly occur during REM sleep and are considered essential for mental processing, emotional coping, and cognitive restructuring [3].

The neurobiology of sleep is governed by the circadian rhythm, orchestrated by the suprachiasmatic nucleus (SCN) in the hypothalamus, and regulated by melatonin and neurotransmitters like serotonin, dopamine, and GABA. Disruptions in these pathways lead to sleep disorders such as insomnia, hypersomnia, parasomnias, and circadian rhythm disorders. Sleep science has also classified sleep stages and disorders in detail through tools such as polysomnography and EEG studies [4].

While modern sleep science provides mechanistic and neurophysiological insights into sleep and dreaming, Ayurveda offers a personalized and holistic framework that accounts for *Dosha* predominance, mental state, seasonal variations (*Rutu*), daily cycles (*Dinacharya*), and spiritual dimensions. Ayurvedic texts recommend specific lifestyle practices, *Ahara-Vihara*, and herbal formulations like *Tagara*, *Jatamansi*, and *Ashwagandha* for sleep promotion and mental balance [5].

An integrative approach that combines Ayurvedic wisdom with contemporary neuroscience can deepen our understanding of sleep and dreams and improve strategies for managing sleep-related issues. This review attempts to bridge these two paradigms—exploring the Ayurvedic concepts of *Nidra* and *Swapna* alongside modern sleep physiology—thereby enriching both preventive and therapeutic approaches to sleep health [6].

Aim and Objectives

Aim

To critically explore the concepts of *Nidra* and *Swapna* from Ayurvedic and modern scientific perspectives, and evaluate their physiological, psychological, and clinical relevance.

Objectives:

1. To compile classical Ayurvedic references on *Nidra* and *Swapna*.
2. To study the types, functions, and stages of sleep and dreams in modern sleep science.
3. To analyze factors influencing sleep and dreams from both Ayurveda and modern viewpoints.
4. To explore Ayurvedic and contemporary strategies for managing sleep disorders.

Materials and Methods

This review was conducted using a qualitative and thematic approach. Classical Ayurvedic texts including *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, and their authoritative commentaries were examined to gather references related to *Nidra* and *Swapna*. Supplementary information was sourced from *Laghutrayi*, Nighantus, and Ayurvedic research journals. For modern insights, standard neurophysiology and sleep science textbooks, as well as peer-reviewed articles indexed in PubMed, Scopus, and Google Scholar, were reviewed. The data were organized under conceptual themes such as definitions, types, physiology, causative factors, and management strategies in both systems, followed by a comparative analysis to highlight similarities, differences, and integrative potentials.

Conceptual study on Nidra

The term *Nidra* is derived from the Sanskrit root "*Ni* + *Dra*," meaning to lie down or to enter a passive state. In Ayurveda, *Nidra* is defined as a natural state of mental and physical rest where the *Indriyas* (sense organs) and *Manas* (mind) disengage from external stimuli, leading to a state of unconsciousness and restoration. According to *Charaka Samhita*, when the *Manas* and *Indriyas* detach from their objects due to fatigue or *Tamoguna*, *Nidra* naturally arises [7].

Acharya Charaka emphasizes *Nidra* as one of the *Trayopastambha*—the three essential pillars of life along with *Ahara* (food) and *Brahmacharya* (regulated conduct). Adequate sleep is considered crucial for maintaining *Sharira Bala* (bodily strength), *Medha* (intellect), *Varna* (complexion), *Pushti* (nourishment), *Ayu* (longevity), and *Sukha* (happiness). Conversely, disturbed or insufficient sleep leads to physical depletion, impaired cognition, and increased susceptibility to disease [8]. Ayurveda classifies *Nidra* into six types based on different causative factors as described in *Ashtanga Hridaya*:

- ***Tamobhava Nidra*:** Sleep caused by *Tamas* dominance.
- ***Shleshma Samudbhava Nidra*:** Sleep due to *Kapha* aggravation.
- ***Manah Shramaja Nidra*:** Sleep due to mental fatigue.
- ***Sharira Shramaja Nidra*:** Sleep due to physical exhaustion.
- ***Agantuki Nidra*:** Sleep occurring due to external factors or trauma.
- ***Ratri Svabhava Prabhava Nidra*:** Natural nocturnal sleep.

These types highlight that *Nidra* is not a monolithic state but can arise from various physiological and pathological causes. Ayurveda considers *Nidra* as a physiological necessity governed by *Kapha Dosha*, predominantly active during the night, especially in the first third of the night (*Ratri Purvabhaga*). The influence of *Tamas* and *Kapha* induces heaviness, stability, and stillness in the body and mind, facilitating natural sleep. According to *Dinacharya*, ideal sleeping time is after sunset and before midnight, in alignment with natural circadian rhythms [9].

Several factors influence the quality and quantity of sleep. These include *Ahara* (diet), *Vihara* (daily routine), seasonal variations (*Rutu*), mental state, physical fatigue, and the status of *Doshas*. Excessive consumption of heavy, unctuous, or alcoholic substances, emotional disturbances, and irregular lifestyle habits can either induce or disturb sleep. *Nidra* is also significantly affected by *Manasika Bhavas* like *Chinta*, *Bhaya*, and *Shoka* (worry, fear, and grief) [10].

Proper *Nidra* (*Samyak Nidra*) results in tissue nourishment, enhanced memory and immunity, balanced metabolism, and emotional stability. *Charaka Samhita* clearly mentions that proper sleep promotes longevity and vitality. On the other hand, *Alpa Nidra* (insufficient sleep) and *Ati Nidra* (excessive sleep) lead to *Dosha* imbalance, fatigue, impaired digestion, skin disorders, psychological disturbances, and metabolic syndromes like obesity and diabetes. Hence,

Nidra is not merely rest, but a critical determinant of overall health [11].

In Ayurvedic clinical practice, evaluation of *Nidra* forms a vital part of history taking, especially in *Manasika* and *Shariika* Rogas. Sleep disturbances are commonly observed in conditions like *Vata Vyadhi*, *Unmada*, *Apasmara*, and *Jwara*. Therapeutic approaches such as *Abhyanga* (oil massage), *Shirodhara*, *Padabhyanga*, use of *Medhya Rasayanas*, and regulation of *Ahara-Vihara* are traditionally employed for the management of *Anidra* (insomnia) [12].

Beyond its physiological scope, *Nidra* is also associated with the deeper philosophical concept of *Tamasika Avastha* or withdrawal from worldly perception. It is considered a temporary dissolution of *Ahamkara* (ego) and external identity, where the soul resides in its purest, undisturbed state. Thus, in Ayurveda, sleep is not only for the body and mind but also a state of spiritual rest and rejuvenation [13].

Conceptual study on Swapna

Swapna (dream) is considered one of the three fundamental states of consciousness (*Avasthatraya*) in Indian philosophical systems—*Jagrat* (waking), *Swapna* (dreaming), and *Sushupti* (deep sleep). Among these, *Swapna* is a transitional state where the individual is disconnected from the external world yet experiences vivid internal perceptions. Ayurveda, being a holistic science, explores the phenomenon of *Swapna* not only as a passive mental occurrence during sleep but also as an indicator of physical, mental, and spiritual health. Dreams are reflections of *Manas*, *Indriya*, and *Atma* interactions and are influenced by internal as well as external stimuli such as diet, thoughts, and Dosha status [14].

Definitions

The classical Ayurvedic compendia offer various definitions of *Swapna*. According to *Charaka Samhita*, *Swapna* is the recollection or manifestation of past experiences (*Samskara*) during the sleep state when the senses are at rest. *Sushruta Samhita* views it as an internal perception caused by the movement of *Manas* and *Indriyas* towards their respective *Arthas* in a subjective or abstract manner. *Ashtanga Hridaya* emphasizes that *Swapna* arises when the *Manas* becomes active during sleep, while the external sense organs remain inactive. These definitions underline that dreams are subtle psychological events and not merely illusions [15].

Factors influencing *swapna*

Ayurveda attributes the occurrence and nature of dreams to multiple influencing factors. The foremost among them is the predominance of *Doshas* during sleep. When *Vata* is aggravated, one may experience dreams involving motion, flying, or fear. In *Pitta*-dominant conditions, dreams often include fire, light, arguments, or blood. In *Kapha* predominance, dreams of water, happiness, romantic themes, or stagnation are observed. Apart from Doshas, diet, lifestyle, seasonal variations, psychological state (*Manasika Bhavas*), and unresolved desires (*Vasanas*) play a significant role in shaping dreams. Dreams are also affected by prior sensory inputs, emotions, and cognitive processes stored as memory imprints (*Samskaras*) [16].

Classification of *swapna*

Ayurvedic texts provide a rich classification of dreams. *Sushruta Samhita* lists seven types of dreams—*Drishta* (seen), *Shruta* (heard), *Anubhuta* (experienced), *Pratibimba* (imagined), *Kalpita* (fictitious), *Bhavika* (prophetic), and *Dosha Ja* (arising from bodily humors). *Drishta* and *Anubhuta* dreams are reflections of real experiences and often lack clinical or prophetic significance. *Bhavika* dreams are believed to hold predictive value and may foretell future events, especially when seen in *Brahma Muhurta*. *Dosha Ja* dreams are important in diagnosis and can indicate vitiation of specific Doshas. This classification emphasizes the importance of discerning pathological dreams from natural and spiritually significant ones [17].

Mechanism of *swapna*-utpatti

The process of dream formation in Ayurveda is both physiological and philosophical. During sleep, although the sensory organs (*Indriyas*) withdraw from external stimuli, the *Manas* remains partially active. In this state, *Vata*—particularly *Prana* and *Vyana* Vayu—facilitates the movement of *Manas* and stimulates the stored *Samskaras*, creating a mental projection in the form of dreams. The *Atma* (consciousness) acts as a witness (*Sakshi*) to these experiences. This explanation finds parallel in the Vedantic and Yogic traditions, where *Swapna* is considered the subtle or subjective experience (*Taijasa*) of the individual self. The absence of external input in *Swapna Avastha* makes it a purely internal process dominated by memory and desire [18].

Psychological and philosophical perspectives

In the psychological dimension, *Swapna* serves as an outlet for unresolved emotions, stress, desires, and internal conflicts. Ayurveda associates frequent, vivid, or disturbing dreams with *Manasika Bhavas* like *Bhaya* (fear), *Shoka* (grief), *Krodha* (anger), or *Chinta* (anxiety). Such dreams are also symptomatic in mental illnesses like *Unmada* (insanity), *Apasmara* (epilepsy), or *Atattvabhinivesha* (delusional disorders). In Vedantic philosophy, the *Swapna* state is a manifestation of *Taijasa*, the subtle aspect of the self, which interacts with internal impressions without sensory involvement. Thus, dreams are more than fleeting night visions; they are windows into one's deeper consciousness and emotional state [19].

Prognostic importance of *SWAPNA*

Swapna has been traditionally used in Ayurveda as a prognostic tool. The branch of *Swapna Vijnana* or *Swapna Phala Shastra* interprets dreams to predict future health, psychological trends, and even life events. Dreams seen during *Brahma Muhurta* are considered most accurate and spiritually significant. Auspicious dreams—like flying, bathing in holy rivers, or seeing deities—are believed to indicate positive outcomes. Inauspicious dreams, especially those involving fall, fire, darkness, or death, may suggest disease onset or unfavorable events. Thus, analyzing dream patterns aids the physician in understanding not only Dosha imbalances but also the patient's mental and karmic constitution [20].

Management and regulation of *SWAPNA*

Ayurveda emphasizes the regulation of *Swapna* as a part of maintaining *Manasika* and *Sharirika Swasthya*. Practices such as proper *Ahara* (wholesome diet), *Vihara* (disciplined lifestyle), and *Achara Rasayana* (ethical conduct) promote peaceful and positive dreams. Avoiding heavy meals at night, following *Dinacharya*, and engaging in Sattvika

activities help in reducing negative dreams. Ayurvedic treatments like *Abhyanga* (oil massage), *Shirodhara*, and intake of *Medhya Rasayana* like *Brahmi*, *Mandukaparni*, and *Shankhapushpi* are beneficial in calming the mind and reducing dream disturbances. Meditation and Pranayama are also effective in balancing *Manas* and improving sleep quality [21].

Modern sleep science identifies dreaming as a phenomenon occurring predominantly during the REM (Rapid Eye Movement) stage of sleep. This phase is associated with increased brain activity, rapid eye movements, and vivid dreams. The psychological theories of Freud and Jung suggest that dreams are expressions of the unconscious mind and repressed desires. Neuroscience views dreaming as a function of emotional regulation, memory consolidation, and cognitive integration. These perspectives align with Ayurvedic views, where *Swapna* is an interplay of mental impressions, emotions, and internalized experiences processed by *Manas* during sleep [22].

Modern review

Sleep is a fundamental biological process characterized by a reversible state of reduced consciousness, decreased responsiveness to external stimuli, and inactivity of voluntary muscles. It is essential for survival and critical for maintaining optimal health, affecting nearly every type of tissue and system in the body—from the brain, heart, and lungs to metabolism, immune function, and mood. Sleep is not a passive process; rather, it is an active, regulated phenomenon controlled by intricate neural circuits and chemical messengers in the brain [23].

Architecture of sleep

Modern sleep is broadly divided into two alternating phases: Non-Rapid Eye Movement (NREM) sleep and Rapid Eye Movement (REM) sleep. NREM sleep accounts for approximately 75-80% of the total sleep time and includes three stages (N1, N2, N3) that range from light to deep sleep. Stage N3, also called slow-wave or delta sleep, is the most restorative. REM sleep, constituting 20-25% of total sleep, is characterized by rapid eye movements, vivid dreaming, and heightened brain activity similar to the waking state. A complete sleep cycle (NREM + REM) lasts around 90 minutes and recurs 4-6 times per night [24].

Neurobiology and control of sleep

Sleep is primarily regulated by two mechanisms: the circadian rhythm and the sleep-wake homeostatic drive. The circadian rhythm is a 24-hour internal clock governed by the suprachiasmatic nucleus (SCN) of the hypothalamus, which responds to light and darkness. It promotes wakefulness during the day and sleepiness at night. The homeostatic drive increases the urge to sleep the longer a person stays awake [25].

Key neurochemicals involved in sleep regulation include:

- **GABA:** The primary inhibitory neurotransmitter that promotes sleep by suppressing arousal systems.
- **Melatonin:** Secreted by the pineal gland, it helps regulate circadian timing.
- **Adenosine:** Accumulates during wakefulness and promotes sleep pressure.
- **Orexin (hypocretin):** Maintains wakefulness and arousal.

Physiological functions of sleep

Sleep plays a vital role in several physiological processes. In the central nervous system, it is essential for synaptic plasticity, memory consolidation, learning, and emotional regulation. Sleep also supports endocrine functions, such as growth hormone release and cortisol modulation. It influences metabolic regulation, helping maintain glucose balance, insulin sensitivity, and appetite control. Furthermore, sleep supports the immune system, enhancing the body's defense mechanisms. During sleep, particularly in the deeper stages, the brain clears waste products like beta-amyloid, a process linked to neurodegenerative disease prevention [26].

Sleep stages and brain waves

Electroencephalogram (EEG) studies reveal distinct brain wave patterns during different sleep stages:

- **Stage N1**: Theta waves; lightest sleep
- **Stage N2**: Sleep spindles and K-complexes appear
- **Stage N3**: Delta waves dominate; deepest sleep
- **REM**: Beta-like activity, vivid dreams, and muscle atonia

Each stage contributes uniquely to brain and body restoration. For instance, N3 is crucial for tissue repair and immune strengthening, while REM is important for emotional processing and memory integration [27].

Circadian rhythm and zeitgebers

The circadian rhythm synchronizes internal biological processes with the external environment through cues known as zeitgebers (time-givers), the most powerful being light. Exposure to blue light suppresses melatonin and promotes alertness. Other zeitgebers include meal timing, physical activity, and social interaction. Disruption of the circadian rhythm—due to shift work, jet lag, or irregular sleep patterns—can lead to circadian rhythm sleep disorders and increase the risk of obesity, depression, cardiovascular disease, and metabolic syndrome [28].

Common sleep disorders

Modern medicine recognizes a wide range of sleep disorders, including:

- **Insomnia:** Difficulty initiating or maintaining sleep
- **Obstructive Sleep Apnea (OSA):** Repeated upper airway obstruction during sleep
- **Narcolepsy:** Sudden onset of sleep and REM-related symptoms
- **Restless Leg Syndrome (RLS):** Uncomfortable leg sensations disrupting sleep
- **Parasomnias:** Abnormal behaviors like sleepwalking, night terrors, or nightmares

Sleep disorders significantly impair daytime functioning, cognitive performance, and quality of life.

Sleep hygiene and management

Improving sleep quality often begins with proper sleep hygiene, which includes maintaining a consistent sleep schedule, limiting caffeine and screen time before bed, optimizing bedroom environment (dark, cool, and quiet), and avoiding heavy meals or stimulants close to bedtime.

Cognitive Behavioral Therapy for Insomnia (CBT-I) is considered the gold standard treatment for chronic insomnia. Pharmacological interventions such as benzodiazepines, non-benzodiazepine hypnotics, melatonin, and orexin antagonists are used selectively and under medical supervision [29].

Technological advances in sleep science

Recent advancements in polysomnography, wearable sleep trackers, actigraphy, and EEG headbands allow for objective assessment of sleep patterns and disorders. The glymphatic system, a newly discovered brain waste-clearance mechanism, has been shown to be active during sleep, highlighting the importance of sleep in preventing neurodegenerative conditions like Alzheimer's disease [30].

Results and Findings

- *Nidra* is one of the Trayopastambhas (three supporting pillars of life), essential for health maintenance.
- Good *Nidra* restores Dhatu balance, enhances Ojas, and supports mental stability.
- Types of *Nidra* (Charaka): *Swabhavika*, *Vikriti-ja*, *Agni-bala-kshaya-ja*, etc.
- *Nidra Vaishamya* (sleep disorders) arises from Dosha imbalance, especially *Vata* and *Pitta*.
- Proper sleep timing (*Nidra Kala*), especially night sleep (10 PM-6 AM), supports natural rhythms and longevity.
- Dreams are manifestations of Samskaras and *Manas* activity during sleep.
- *Swapna* formation is governed by Prana & Vyana Vayu, and stored impressions (*Samskaras*).
- *Dosha-dominance* influences dream nature:
  - *Vata* → fearful, unstable dreams
  - *Pitta* → violent, fiery dreams
  - *Kapha* → calm, watery or pleasant dreams
- *Swapna* is classified as *Drishta*, *Shruta*, *Kalpita*, etc., and used in prognosis and diagnosis.
- Dreams seen in Brahma Muhurta are considered most truthful and predictive.

Sleep Science (Modern Perspective)

- Sleep consists of NREM (Stages 1-3) and REM (dreaming phase) cycles.
- Controlled by circadian rhythm and homeostatic sleep drive via hypothalamus and neurotransmitters (GABA, melatonin, adenosine).
- Disorders: Insomnia, Sleep Apnea, Narcolepsy, RLS, Parasomnias.

Discussion

Sleep is universally acknowledged as a vital physiological process essential for survival and well-being. In Ayurveda, *Nidra* is described as one of the *Trayopastambha* (three pillars of life), alongside *Ahara* (diet) and *Brahmacharya* (regulated lifestyle). A good quality sleep ensures physical strength, mental clarity, emotional stability, and enhanced immunity. Similarly, modern science highlights sleep as critical for memory consolidation, hormonal regulation, tissue repair, and immune modulation. Both systems agree that improper or disturbed sleep can result in systemic derangements, cognitive decline, and emotional instability, thereby emphasizing the shared centrality of sleep in health and disease [31].

In Ayurvedic texts, *Nidra* is not merely the cessation of consciousness but a restorative phase where the *Manas*, *Indriyas*, and *Sharira* attain equilibrium. Different types of *Nidra* have been described based on causative factors—*Swabhavika Nidra* (natural), *Agni-kshaya-ja*, *Roga-nimittaja*, and others. The quality and quantity of sleep are deeply influenced by *Dosha* states, particularly *Vata* and *Pitta*. Ayurvedic recommendations, including appropriate *Nidra Kala* (timing), *Dinacharya*, and *Sattvika Ahara*, are intended to promote deep and balanced sleep. These principles closely align with modern practices of sleep hygiene and circadian rhythm maintenance [32].

Swapna (dreams), as explained in Ayurveda, are subtle mental experiences that occur when the senses are inactive but the mind (*Manas*) is still functioning. They are the result of *Prana Vayu* acting upon stored *Samskaras* in the *Manas*, producing visual and emotional impressions. Dreams are classified into several types—*Drishta*, *Shruta*, *Kalpita*, and *Dosha-ja*—each with potential diagnostic or prognostic significance. The nature of dreams can indicate *Dosha* imbalances or mental disturbances. Dreams seen during *Brahma Muhurta* are believed to be predictive, offering clues about upcoming health events or mental status, which parallels the psychological theories in modern dream science [33].

Modern sleep science divides sleep into two main phases: NREM and REM, with further sub-stages based on brain wave activity. These cycles are governed by the suprachiasmatic nucleus (SCN), melatonin, and neurotransmitters like GABA and orexin. REM sleep is the phase most closely associated with dreaming and shares characteristics with the Ayurvedic *Swapna Avastha*. Contemporary neuroscience reveals that sleep is an active process, crucial for emotional regulation, cognitive function, and even cellular detoxification via the glymphatic system. Disruption in sleep cycles can contribute to a range of disorders, from insomnia and depression to metabolic syndrome and neurodegeneration [34].

The convergence of Ayurvedic and modern perspectives on sleep offers a holistic framework for understanding and managing sleep-related health issues. While modern science provides neurochemical and physiological insights, Ayurveda contributes a behavioral and constitutional model of sleep health. Practices like *Abhyanga*, *Medhya Rasayana* intake, *Pranayama*, and *Nidra Yoga* promote deeper, more balanced sleep, aligning with evidence-based strategies for improving sleep quality. The integrated understanding of *Nidra* and *Swapna* can thus enhance both diagnostic and therapeutic approaches in sleep medicine, fostering preventive care and psychological resilience [35].

Conclusion

Sleep (*Nidra*) and dreams (*Swapna*) are integral components of human physiology and consciousness, recognized by both Ayurveda and modern science for their profound impact on health and disease. Ayurveda emphasizes the role of balanced *Doshas*, proper lifestyle (*Dinacharya*), and mental clarity in ensuring restorative sleep, while *Swapna* serves as a subtle reflection of internal psychological and physiological states. Modern sleep science corroborates these insights by elucidating the neurobiological mechanisms of sleep, its cyclic architecture, and its role in memory consolidation, emotional regulation, and systemic healing. Together, these perspectives highlight sleep as a

dynamic, multidimensional process essential for holistic well-being, and underscore the need for integrative strategies in its management and optimization.

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