

Research Article

Epilepsy and Ayurveda: a review

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ABSTRACT:

In Ayurveda, neuro-psychological disorders have been broadly described [e.g. vata vyadhi (nervous disorders), unmada (insanity), murccha, moha (loss of consciousness), vismriti (amnesia), apasmara (epilepsy) etc.]. In Ayurveda, Apasmara (or epilepsy) has been described among the maharoga. In the Ayurvedic texts, Apasmara (Epilepsy) is defined as sudden abhorrent bodily activities (vibhatsa-cheshta) accompanied by momentary blackouts or loss of consciousness (tama-pravesha) owing to disturbance in mental faculties of dhi (intelligence), dhriti (retention) and smriti (memory). We can manage epilepsy with multifactorial approach of Ayurveda that includes shaman, tikshna sanshodhan, rasayan chikitsa, sattvavajaya chikitsa.

KEY WORDS: Apasmara, Epilepsy, Samprapti, Treatment.

INTRODUCTION:

Apasmara has striking similarities with epilepsy and has an incidence of 5-10 per every 1000 persons. It is affecting all the walks of life in an individual suffering from the disease. It is one of the disease which affects both Shareera and Manas Both Shareerika Doshas i.e., Vata, Pitta and Kapha as well as Manasika Doshas i.e., Rajas and Tamas plays equal role in the manifestation of disease Apasmara. Aggravated doshas get accumulated in hridaya and produce the features based upon Doshic predominance, which cause illusion of the mind and visual hallucination and seizures. There are abundant references to all aspects of epilepsy including symptomatology, etiology, diagnosis, and treatment in the Ayurvedic literature.

Causes:

In Ayurvedic texts, three basic factors have been implicated for the etiology of epilepsy. Endogenous factors (genetic, congenital, constitutional, enzymatic disturbances and idiopathic); Exogenous factors (intake of unwholesome and unhygienic foods, aggravation of vata dosha due to trauma and other environmental factors); and Psychological factors (excessive worry, grief, fear, passion, anger, anxiety and excitement). The aggravated dosha spreads

throughout the body through the nerves (dhamanis) leading to the manifestation of the epileptic fit in the form of shaking jerks or convulsions (akshepaka) or episodes of brief unconsciousness without shaking (apatantiraka).

Samprapti (Pathogenesis):

According to Acharya Charaka

Due to the Nidana Sevana, the Doshas located in the Dhamani afflict the Hrudaya and cause disturbances in its functions. The person, thus affected, is afflicted with stupor and malfunctioning of the mental activities.

According to Acharya Sushruta

When the channels carrying sensation get dominated by somatic and psychic Doshas, Rajas and Tamas, the person, due to mental disturbance, gets unconscious, throws his hands and feet at random with crooked brows and abnormal gaze, bites teeth, emits froth and falls down on ground with protruded eyes; after a short period regaining consciousness-this is the feature of epilepsy.

Prodrome Symptoms (Purvarupa):

Contraction of eyebrows, constant irregular movement of eyes, hearing of such sounds as are non-existent, excessive discharge of saliva and nasal excreta, anorexia and indigestion, distension of abdomen, body aches, transient blackout, giddiness, profuse sweating, increased thirst, fainting, hallucinations, falling and insomnia.

Symptoms (Rupa)

In Ayurveda, clinical manifestations of epilepsy (rupa) are divided into four types according to the dominant dosha (humour) involved in its pathogenesis: Vataja, Pittaja, Kaphaja and Sannipataja.

- 1. Vataj:** The Vataja type is characterized by frequent fits, regaining consciousness in shortest time interval; bulging eyes; excessive crying, frothing at mouth; irregularly contracted fingers; reddish rough and blackish nails, eyes, face and skin; hallucinations and trembling
- 2. Pittaja:** Pittaja type is characterized by regaining consciousness in shorter periods, scratching of ground, greenish-yellow and coppery nails, eyes, face and skin; and visions of bloody, agitated, irritated, frightful and burning objects (description like partial complex seizures).
- 3. Kaphaja:** Kaphaja type has features of prolonged fits with delayed recovery; increased frothing at mouth; white nails, eyes, face and skin; and visions of white, heavy, unctuous, smooth objects (description like grand mal seizures).
- 4. Sannipataja.:** Sannipatika form of the disease, is caused by the simultaneous vitiation of all the three doshas that gives rise to a combination of

symptoms and signs and is incurable (description like intractable epilepsy).

Management of Epilepsy (Apsamar)

Removal of Etiological Factors (Nidan)

1. Nidan Parivarjan

2. Shodhan Chikitsa: Tikshna shodhan is indicated in Apasmar.

a. Basti: Vataj Apasmar.

b. Virechan: Pittaj Apasmar.

c. Vaman: Kaphaj Apasmar.

3. Rasayan Chikitsa: As it is a chronic disease, one should use the rasayan drugs like Shankhapushpi, Medhya rasayan, Brahmi swaras, Kushtha swaras or Vacha with Madhu.

4. Sattvavajaya Chikitsa: It is the non-pharmacological approach for treating the mental disorder, it comes under adravya-bhut chikitsa. When epilepsy is associated with extrinsic factors, then mantras has been recommended.

5. Avasthik Chikitsa: During the treatment of seizures, the primary aim is to bring back the consciousness of the patient. So acharya charak prescribed Pradhmana nasya to awake the heart channels and indriya ayatanani (mind).

6. Siravedha: The only first-aid measure recommended in epilepsy is blood-letting from veins of temples.

7. Shamana Chikitsa: It includes oral use of different single and compound Herbomineral formulations. Drug formulations have been recommended only after the patient has been cleaned by all means of shodhan and consoled well.

Table No. 1: Type of Formulation useful in the treatment of Epilepsy

Type of Formulation	Name of Formulation
Rasa Aushadhi	Smrutisagar rasa, Chaturbhujra rasa, Vatavidhvans, Mahavatvidhvans Bhutbhairav rsasa, Sameerpannag, Stashekhar, Medhamrut.
Asav-Arishta	Saraswata Arishta, Ashwagandha Arishta.
Ghrita	Brhami Ghrita, Panchgavya Grita, Mahapanchagavya Ghrita.
Churna	Saraswat churna, Jatamansi churna, Vacha churna, Ashwagandha churna, Kalyanak churna.

Sadhya – Asadhyata

Vataja, Pittaja and Kaphaja types of Apasmara are considered to be Sadhya, if they are of acute origin. Whereas the fourth type i.e. Sannipataja Apasmara is considered to be Asadhya.

CONCLUSION:

On the basis of above study it is concluded that a detailed description regarding etiology, pathogenesis, sign and symptoms along with treatment of Apasmar is also given in Ayurveda as given in modern medical

science. Modern antiepileptic drugs suppress the seizure, but do not cure the disorder and having adverse effects, contraindications and Sometimes requires lifetime treatment Ayurveda believes in balancing humours (dosha) to remove the root causes of the disorders and normalize the brain activity. It is achieved by multifactorial approach of Ayurveda that includes shaman, tikshna sanshodhan, rasayan chikitsa, sattvavajaya chikitsa. By using these approach we can control or cure epilepsy (Apasmar).

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