



Science

A SHORT REVIEW ON APSMARA W.S.R. TO EPILIPSY

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Abstract

Today's modern era, different types of stress, mental depression, night duties, insomnia, internet working, web searching, playing games on mobile lack of proper diet etc. All this leads prevalence of mental diseases day by day. Epilepsy is a mental disorder in which the central nervous system characterized by periodic loss of consciousness with or without convulsions associated with abnormal electrical activity in the brain. In some cases, it is due to brain damage, but in most cases the cause is unknown.

In Ayurveda all psychiatric disorder is described under the heading of mansika vyadhi Apsmara is one of them. "Apsamarm punah: smrutibudhi satwasamplawat bibhasachestam awastitakam tama: praveshamachkaste"- it's the one-line unique identity of Apsmara. It is the transient appearance of unconsciousness with loath some expression due to derangement of memory, intelligence and mind.

The present article is an attempt to highlighting on details of Apsmara with co-relating with Epilepsy.

Keywords: Apsmara; Epilepsy; Treatment; A Brief Review.

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1. Introduction

In 1948 world health organization (WHO) defined the definition of health is it is a stage of complete physical, mental and social well being and not merely the absence of disease or infirmity ⁽¹⁾. That means every healthy person must required mental fitness also. In Ayurveda *rajas* and *tamas* are two *mansika doshas* which causes psychiatric disorder. *Apsmar* is one of them it can be happened due to *drushti* of *sharirik* i.e *vata pitta* and *kapha* and *mansik doshas* *rajas* and *tamas*. The definition of *Apsmara* is *Tama Pravesha* and *Bheebatsa cheshta* due to the perversion of *Smruthi*, *Buddhi* and *Satva*. (ch.chi.10/3) *Apsmara* can be correlated with the Epilepsy. Epilepsy is a group of neurological disorders characterized by epileptic seizures.^{[3][4]} Epileptic seizures are

episodes that can vary from brief and nearly undetectable periods to long periods of vigorous shaking.⁽⁵⁾

The study also estimated a median prevalence of 1.54% (0.48-4.96%) for rural and 1.03% (0.28-3.8%) for urban studies in developing countries. With a conservative estimate of 1% as prevalence of epilepsy, there are more than 12 million persons with epilepsy (PWE) in India.⁽⁶⁾

Due to stress, mental depression, night duties, internet working, web searching, playing games on mobile its prevalence can be increases day by day. There is no satisfactory treatment in modern medicine except anti-convulsion drugs which gives temporary relief while our ancient science have lots of description about pathos-physiology and treatment of psychiatric disorder. Hence it is necessary to study this disease thoroughly.

Definition of Apsmara:

According to Acharya Charak, The definition of Apasmara is “**Apsamarm punah: smrutibudhi satwasamplawat bibhasachestam awastitakam tama: praveshamachkaste**” that means Tama Pravesha and Bheebatsa cheshta due to the perversion of Smruthi, Buddhi and Satva.⁽⁷⁾

Nidan Panchaka of Apsmara

Nidan

Following are the hetu of the disease Apsmara.

General hetu of Apsmara:

- 1) Aaharaja Hetu
- 2) Viharaja Hetu

Aaharaja-Hetu:

Acharya sushruta told that

- Viruddha (unwholesome),
- Malina (unhygienic)

Ahara etc are some of the Nidanas told for Apasmara (sushrut. utartantra-61/4)

Viharaja-Hetu.⁽⁸⁾⁽⁹⁾

- Vegadharana are included in Vihara Hetus.
- Gachtam ch rajswalam (sex during menstruation)
- Persons afflicted by Rajas and Tamas.
- Affliction of Manas by Chintha, Kama, Bhaya, Krodha etc.
- Mithya, Ayoga and Atiyoga of Indriyartha and Karma.

2. Classification

The Apasmara is classified basically as 4 i.e., Vataja, Pittaja, Kaphaja and Sannipataja.

- 1) Vataja Apasmara is characterized by Parusha Aruna Roopa darshana, Dantha dashana, Phenodvamana and Shwasana.

- 2) Pittaja Apasmara is characterized by Peeta Asruk Roopa Darshana, Peeta varna of Phena, Anga, Vaktra and Aksha, Suffers from Trishn and Ushna. He visualises as if the whole world is set in fire.
- 3) Kaphaja Apasmara is characterized by Shukla varna of Phena, Anga, Vaktra and Aksha, Gaurava Sheethatha, Lomaharsha of the Angas.
- 4) Sannipataja Apasmara is characterised by the Lakshanas of all the Tridoshas.

Samprapti (Pathogenesis) ⁽¹⁰⁾

Acharyas have described the following Samprapati of the disease sandhigatavata.

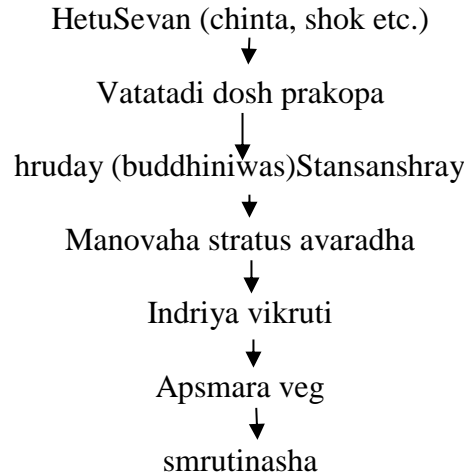


Table 1 : Showing Samprapti-Ghatakas of Apsmara

Samprapti Ghatakas of Apsmara	
Doshas	Vat-Pran, vyan,udan vayu Pitta- sadhak pitta Kapha- tarpak kapha
Dushya	– Rasa dhatu,Mana
Agni	– Jatharagni-Mandya
Srotas	– Manovaha strotas
Srotodusti Prakara	– Sanga
Kha-vaigunya	– Mana
Udbhavasthana	– Hruday
Adhithana	– Man,indriya
Vyadhimarga	– Madyama marg

Purvarupa ⁽¹¹⁾⁽¹²⁾

The premonitory symptoms of Apasmara are Hrud kampa (palpitation), Sweda (sweting), Dhyanam, Moorcha (syncope) , Pramoodatha, Nidra nasha (insomenia), Bhruvyudhasya, Akshi vaikrutha, Ashabdha sravana, Bhrama, Tamo darshana, Avipaka, Aruchi, Kukshi adopa etc.

Rupa ⁽¹³⁾

Rupa of Apsmara, according to different Ayurvedic classics areas –
The patient “suffers stupefied with wandering mind”

- He sees non-existent things (visual hallucinations)
- falling down twitching of the tongue, eyes,
- eyebrows excessive
- salivation convulsions in the hands and feet
- After the paroxysm is over, the patient wakes as if from sleep.

vataj	pittaj	kaphaj	sannipataj
Trembles	sensations of thirst and excessive heat	the patient is cold) showing symptoms of all doshas
bites his teeth	yellow limbs, yellow face and yellow eyes	white limbs, white face and white eyes	
emits froth	yellow froth	white froth	
Respires excessively reddish and black.	surroundings appear to him as though caught on fire	patient is heavy	

Sadhya Asadhyata

If Apasmara is occurs newly, having strong immunity not making any complication than it is sadhya. If it is prolonged then Krichha Sadhya .

Treatment

Treatment of All Types Epilepsy: Beneficial for the epileptics are the strong evacuative measures, pacificator measures according to doshas and in case of the exogenous factor mantras etc. ⁽¹⁴⁾

Use of Purgation to “Awaken” the Heart and Channels: First, one should “**awaken the heart, the channels and the mind**”. These have been blocked by the doshas.

So, one should apply drastic emesis, etc.

V-type should be treated mostly with enema

P-type should be treated mostly with purgation

K-type should be treated mostly with emesis

So, the patient has been “**cleansed by all means**”. Then he should be consoled well, so as to make him comfortable and at ease again. Then drug formulations should be administered. ⁽¹⁵⁾ All of the internal medicine included are ghritas.

Pancagavya Ghrta, goghrit, bramhi ghrta etc.

Chikitsa of Apasmara can be classified broadly under Yuktivyapashraya (Shamana and Shodhana), Daivavyapashraya and Satwavajaya. It can again be classified into Anthaparimarjana, Bahiparimarjana and Shashtra pranidhana. Anthaparimarjana chikitsa includes Vamana, Virechana, Basti and Nasya. Abhyanga, Utsadhana, Anjana, Lepa and Dhupana are the Bahiparimarjana chikitsas administered in Apasmara; and under the Shastra, pradidhana comes Raktamokshana. As Apasmara or Epilepsy is a disease that has Vegavastha and Avegavastha the treatment should also be administered considering that.

Vegakaleena Chikitsa

- Poorva roopa avastha- Nasya and Anjana.
- Vegavastha- first aid and Dhupana.
- Paschat vega avastha- Nasya, Anjana, Dhupana, Utsadhana, Seka

After the patient attains consciousness Teekshna Vamana and Virechana should be administered. Nasya yogas: Yastyadi nasya⁽¹⁶⁾, 5-6 drops of the following medicines triturated in cow's urine- a) Bargi, Vacha and Nagadanti b) Svetha Aparajitha and Sveta Vishanika c) Jyotishmathi and Nagadanti⁽¹⁷⁾; Pradhmana with Pippalivrischikali yoga⁽¹⁸⁾

Anjana Yogas: Kayastha varti⁽¹⁹⁾, Mustavayastadi varti⁽²⁰⁾, Vrushikalibaladi varti⁽²¹⁾, Manohvadhanjanam⁽²²⁾ Yogas for Utsadana: Apetarakshasikushtadi yoga⁽²³⁾, Siddharthaka Agada⁽²⁴⁾ Dhupa Yogas: Palamkashavachadi yoga⁽²⁵⁾, Brahmiaindriyadi yoga⁽²⁶⁾, Nimbapatradi dhupa⁽²⁷⁾

Avegakaleena Chikitsa

- During Avegavastha the patient should be administered with Shodhana chikitsa first if the patient is Arha for Shodhana.
- For Vataja Apasmara Asthapana Basti should be done with Dashamoola, Bala, Rasna, Sarala, Devadaru, Yava, Kola, Kulatha, Moothra, Kshara, Saindhava, hingu with Sneha.
- For Pittaja Apasmara Virechana should be administered with drugs like Shymatruvut, Dravanthi, Sapthala, Snuhi.
- In Kaphaja Apasmara Vamana should be administered with Madana, Vishala or Kutaja⁽²⁸⁾.
- After the Shodhana Chikitsa, Shamana chikitsa should be done to the patient. The common Shamana yogas administered for Apasmara are Panchagavya Ghrutha, Mahapanchagavya Ghrutha, Kalyanaka Ghrutha, Mahakalyanaka Ghrutha, Paishachika Ghrutha, Mahachaithasa Ghrutha, Jeevaneeya Yamaka, Bhrahmi Ghrutha, Saraswatha Churna etc...
- Rasayanas should be administered to the patients.

Epilepsy⁽²⁹⁾**Definition of Epilepsy**

Seizures, abnormal movements or behavior due to unusual electrical activity in the brain, are a symptom of epilepsy. But not all people who appear to have seizures have epilepsy.

Causes of Epilepsy

There are around 180,000 new cases of epilepsy each year. About 30% occur in children. Children and elderly adults are the ones most often affected.

There is a clear cause for epilepsy in only a minority of the cases. Typically, the known causes of seizure involve some injury to the brain. Some of the main causes of epilepsy include:

- Low oxygen during birth
- Head injuries that occur during birth or from accidents during youth or adulthood
- Genetic conditions that result in brain injury, such as tuberous sclerosis
- Brain tumor
- Infections such as meningitis or encephalitis

- Stroke or any other type of damage to the brain
- Abnormal levels of substances such as sodium or blood sugar
- In up to 70% of all case of epilepsy in adults and children, no cause can be discovered.
- While many types of repetitive behavior may represent a neurological problem, a doctor needs to establish whether or not they are seizures.
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Generalized seizures: All areas of the brain (the cortex) are involved in a generalized seizure. Sometimes these are referred to as grand mal seizures.

- The person experiencing such a seizure may cry out or make some sound, stiffen for several seconds to a minute and then have rhythmic movements of the arms and legs. Often the rhythmic movements slow before stopping.
- Eyes are generally open.
- The person may appear to not be breathing and actually turn blue. This may be followed by a period of deep, noisy breathes.
- The return to consciousness is gradual and the person may be confused for quite some time - minutes to hours.
- Loss of urine is common.
- The person will frequently be confused after a generalized seizure.

Partial or focal seizures: Only part of the brain is involved, so only part of the body is affected. Depending on the part of the brain having abnormal electrical activity, symptoms may vary.

- If the part of the brain controlling movement of the hand is involved, then only the hand may show rhythmic or jerky movements.
- If other areas of the brain are involved, symptoms might include strange sensations like a full feeling in the stomach or small repetitive movements such as picking at one's clothes or smacking of the lips.
- Sometimes the person with a partial seizure appears dazed or confused. This may represent a complex partial seizure. The term *complex* is used by doctors to describe a person who is between being fully alert and unconscious.

Absence or petit mal seizures: These are most common in childhood.

- Impairment of consciousness is present with the person often staring blankly.
- Repetitive blinking or other small movements may be present.
- Typically, these seizures are brief, lasting only seconds. Some people may have many of these in a day

Treatment of Epilepsy⁽³⁰⁾

Treatment can help most people with epilepsy have fewer seizures, or stop having stop seizures completely.

Treatments include:

- medicines called anti-epileptic drugs (AEDs)
- surgery to remove a small part of the brain that's causing the seizures

- a procedure to put a small electrical device inside the body that can help control seizures
- a special diet (ketogenic diet) that can help control seizures
- Some people need treatment for life. But you might be able to stop if your seizures disappear over time.
- You may not need any treatment if you know your seizure triggers and are able to avoid them.

Anti-epileptic drugs (AEDs)

AEDs are the most commonly used treatment for epilepsy. They help control seizures in about 70% of people.

Types of AEDs

Common types include

- sodium valproate
- carbamazepine
- lamotrigine
- levetiracetam
- oxcarbazepine
- ethosuximide
- topiramate

Side effects

General common side effects of AEDs include

- drowsiness
- a lack of energy
- agitation
- headaches
- uncontrollable shaking (tremor)
- hair loss or unwanted hair growth
- swollen gums
- rashes

Brain surgery

Surgery to remove part of your brain

This will usually involve having several tests, such as:

- brain scans
- an electroencephalogram (EEG) – a test of your brain's electrical activity
- tests of your memory, learning abilities and mental health

Other procedures like vagus nerve stimulation (VNS), Deep stimulation (DBS) ketogenic diet etc done.

3. Discussion

Psychiatric disorder is well explained in Ayurvedic samhita. That ancient knowledge of Ayurveda will helps in diagnosis and management *Apsmara* in present era very well. Public should be made aware of the nature of the seizures and first aids. Even though Ayurveda has a vast treasure of *Yogas* for the management of *Apsmara* most of them are yet to be explored in the present day especially during an acute condition. More researches needs to be conducted in these areas.

In *Ayurveda* it may be correlated to *apsmara with* (epilepsy) disease which is *sharirik and mansik Vikara*. So line of treatment according to disorders such as neuro-protective medications along with *Pancha karma* therapies have definitely shown outcome on the disease and thus pave way to further researches in employing *Ayurvedic* methods towards the management of *epilepsy*.

4. Conclusion

Ayurved has diagnosis and management of all psychological disorders in present era very well. While modern therapy got limitations in such diseases, but same time ancient knowledge of Ayurveda is perfect for all this disease. Ayurved has brief description of *apsmar* which can be correlated with epilepsy. Purpose of this review article is an attempt to highlighting on details *apsmara* with co-relating with *epilepsy*.

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