

# INTERNATIONAL AYURVEDIC MEDICAL JOURNAL



**Impact Factor: 6.719** 

**Review Article** 

ISSN: 2320-5091

# **REVIEW ARTICLE ON APSMARA AND AYURVEDIC MANAGEMENT**

#### Mahantesh hiremath<sup>1</sup>, Girish Kumar S Dharmannavar<sup>2</sup>. Shreeshaila swamy Kanvimath<sup>3</sup>

<sup>1</sup>2<sup>nd</sup> Year PG Scholar, <sup>2</sup>Assistant professor. <sup>3</sup>2<sup>nd</sup> Year PG Scholar Department of kayachikitsa, shri Shivayogeeshwar rural ayurvedic medical college & hospital. Inchal, Savadatti, Belagavi, Karnataka, India.

Corresponding Author: mahanteshhiremath6@gmail.com

#### https://doi.org/10.46607/iamj2210082022

(Published Online: August 2022)

**Open Access** 

© International Ayurvedic Medical Journal, India 2022 Article Received: 09/07/2022 - Peer Reviewed: 25/07/2022 - Accepted for Publication: 16/08/2022

Check for updates

#### ABSTRACT

The vitiate *Dosha* related to the condition are *Vata* and *Rajo Dosha*. The main features of *Apasmara* are impairment in memory or awareness. Even though most of the time, it is considered *Manasaroga* (psychic disorders), it is not a *Manasaroga*. *Apasmara* is one of the diseases, which affects both *Sharira* (physical) and *Manas* (mental). *Apasmara* –the disease characterized by its peculiar features like convulsive movements, frothy discharges from the mouth, up rolled eyes, and above all, temporary loss of memory stands first in the category. Having origin in *Manas*, manifested through the nervous system and ending with *Manas* by loss of a major function of the mind that is*Smriti*. *Acharya Sushruta* had advised *siravedha*. *Ayurveda* is a traditional system of medicine that possesses great potential to eradicate the disease from its base.

Keywords: Apasmara, Manasaroga, Smriti, Siravedha, Ayurveda,

#### INTRODUCTION

In Ayurveda all psychiatric disorder is described under the heading of *mansika vyadhi Apsmara* isone of them. "Apsamarm punah: smrutibudhi satwasamplawat Vishamachesta Swastiuakram Tama: praveshamachakaste"- 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. *Acharya Charaka* described *Apasmara* (epilepsy) as *Apagama* (loss of) of *Smriti* (memory/retention)

associated with Bibhatsa Chesta (scary/irrelevant behavior) due to derangement of Dhi (thinking capacity) and *Sattva* (mental strength) <sup>[1]</sup>. Transient loss of memory or loss of memory of convulsions is known as Apasmar. In this disease, the patient gets convulsions, attacks of falling down and frothing from the mouth. After convulsions patient is again normal. According to Avurveda constituents of the body are divided into two types 1stSthula and  $2^{nd}$ Sukshma. Dosa, Dhatu and Mala are of Sthula type and Atma, Indriva Mana are of Sukshma type. According to Avurveda, Apasmar<sup>[2]</sup> is a psychosomatic disorder. In more or less proportion Apasmar is found in almost all countries. Being prevalent in both sexes, all age groups, and in any socio-economic condition, it has a predilection for children. The word "Apasmara" indicates only a clinical sign and not a supernatural cause. Smaran means memory. It includes memory, intelligence, and consciousness. Apa means loss. Loss of consciousness is one of the important signs <sup>[3]</sup>. Apasmara is described in Madhava Nidana as the loss of Smriti, characterized by Tamaha Pravesha (feeling of aura), which occurs spontaneously<sup>[4]</sup>. The clinical features of Apasmara can be correlated with epilepsy in modern medicine. The disease epilepsy is featured in a disturbed normal pattern of neural activity, which causes strange sensations, occasional convulsions, muscle spasms, and loss of consciousness <sup>[5]</sup>. Apasmara is mentioned as Mahavyadhi<sup>[6]</sup> Hence management remains difficult. Before advising Shamana Aushadhi (palliative therapy), Shodhana (purificatory) therapy is essential. From the results of the previous study, it is evident that Virechana eliminates all morbid Doshas from all micros to macro-Dhatu (channels) and thus regulates the Vata Dosha. Henceforth in this study, the disease apasmara with its relative avurvedic management is being explained.

#### **DEFINITION OF APSMARA:**

According to Acharya Charak, the definition of *Apasmara* is "*Apsamarm punah: smrutibudhi sat-wasamplawat Vishamachesta Swastiuakram Tama: praveshamachakaste*" which means *Tama Pravesha and Bheebatsa cheshta* due to the perversion of *Smruthi, Buddhi and Satva*<sup>[7]</sup>.

<u>Nirukti</u>: *Apasmar* is defined as the transient appearance of unconsciousness with loathsome expression due to the derangement of memory, intelligence, and mind<sup>[8]</sup>.

## NIDAN OF APSMARA.

Aaharaja-Karana: Acharya sushruta told that • Viruddha (unwholesome), • Malina (unhygienic) Ahara, etc are some of the Nidanas told for Apasmara (Sushrut. utartantra-61/4) Viharaja-Karana<sup>[9-10]</sup>. Vegadharana is included in Vihara Hetus. • Gachtam ch rajaswala (sex during menstruation) • Persons afflicted by Rajas and Tamas. • Affliction of Manas by Chintha, Kama, Bhaya, Krodha, etc. • Mithya, Ayoga, and Atiyoga of Indriyarthas and Karma.

*Manasika-Karana* Mind is overshadowed by *Raja* and *Tama* (nescience), by force passion, anger, fear, greed, attachment, excitement, grief, anxiety, perturbation, etc.

#### Anya-Karana

When the Doshas get exceedingly aggravated and their equilibrium is disturbed; when one suffers from excessive debility; and *Atiyoga*, *Ayoga*, and *Mithyayoga* of *panchakarma*.

#### **CLASSIFICATION**:

The *Apasmara* is classified basically into 4 Types [11].

- 1. Vataja Apasmara
- 2. Pittaja
- 3. Kaphaja Apasmara.
- 4. Sannipataja Apasmara

SAMPRAPTI
Hetu Sevan
Ţ
Vatatadi dosh prakopa
Ţ
Sthanasamshray at hrudaya
Ţ
Manovaha stratus avarodha
$\mathbb{1}$
Indriya vikruti
Ĵ
Sangyavaha Srotas rodha
<b>1</b>
Apsmara veg
$\mathbb{1}$
smrutinasha

Samprapti Ghatakas of Apsmara	
Doshas	Vata-Pran, vyan, udan vayuPitta- Sadhak pitta, Kapha- Tarpak kapha
Dushya	– Rasa dhatu, Mana
Agni	– Jatharagni-Mandya
Srotas	– Manovaha strotas
Srotodusti Prakara	– Sanga
Kha-vaigunya	– Mana
Udbhavasthana	– Hruday
Adhisthana	– Man, indriya
Vyadhimarga	– Madyama Marg

## PURVARUPA; [12-13]

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

#### <u>RUPA</u>

All the four types of *Apasmar* exhibit a group of symptoms with the help of which we can differentiate between them.

- 1] Vataja [14]
- The patient trembles, bites his teeth, emits froth, respires excessively, and sees things as rough, reddish, and black.

- The patient fancies that a dark supernatural being is coming thing is coming after him to seizehis person and is frightened and faints as consequence with shivering, grinding of teeth i.e., lockjaw, labored breathing, and foaming at the mouth
- 2] *Pittaja*<sup>[14]</sup>
- The patient has yellow froth, limbs, face, and eyes see things as yellow and red, suffers from thirst and heat, and views the environment as caught with fire.
- Fainting is excited by the terror of being seized by a yellow and fierce-looking being in the *pit-taja* type, which is further worked by thirst, increased heat of the body, perspiration, fainting,

mild tremor of the limbs, and restlessness.

3] *Kaphaja* <sup>[14]</sup>

- The patient has white froth, limbs, face, and eyes are cold horripilate, heavy and views things as white. He recovers after a long period.
- When the patient is excited by a fancied trade dreads if a supernatural being of the white color is coming to apprehend him, it is a case of *kaphaja* type which is more characterized by the exhibition of such symptoms as shivering, nausea, sleeplessness, falling prostrate on the ground and vomiting of mucus.

4] *Sannipataj* <sup>[14]</sup>:

• This *Apasmar* is caused by the simultaneous vitiation of all the three *doshas* and shares the symptoms of all the three *doshas* 

SADHYA ASADHYATA If *Apasmara* occurs newly, having strong immunity does not make any complications than it is *sadhya*. If it is prolonged, then *Kricha Sadhya* 

Chikitsa Siddhanta (Treatment Protocol).

Chikitsa of Apasmara can be classified broadly under Yuktivyapashraya (Shamana and Shodhana), Daivavyapashraya, and Satwavajaya. It can again be classified into Antaparimarjana, Bahiparimarjana, and Shashtra pranidhana. Antaparimarjana chikitsa includes Vamana, Virechana, Basti and Nasva. Abhyanga, Utsadana, Anjana, Lepa and Dhupana are the Bahiparimarjana chikitsa 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. Panchkarma T/t utilizes a number of formulations as Acharya Sushruta also recommended Siravedha (bloodletting) from the veins of the temples in epilepsy.<sup>[16]</sup>

1) *Ghritas* (clarified butters) - *Panchgavyaghrita*, *Brahmighrita*, *Vachadighrita*, *Goghrita*, kulatthadighrita, Saindhavadighrita, Jivaniyaghrita, Amalakadighrita, kushmandaghrita

2) Medicated oil- Katbhayadi oil, Palankshadi oil,

Triphaladi oil, etc.

3) *Dhupanadravyas* and *nasyayoga*<sup>[15]</sup>

4)Rasaushadhi-Smritisagararasa, Rasasindura, Indrabrahmavati, Unmadagajakesarirasa, Chandabhairav rasa, Amarasundari vati, Bhutbhairava rasa, Vatakulantka rasa, Sutbhasma etc

5) Churna-Saraswatachurna, kalyanakachurna, apasmarahara yoga, Sarpagandha churna yoga.
6)Gutika- Saptavinshatigugglu, Manasamritaguti-ka, Mritasanjeevanigutika, Bramhivati, Vijayasat-vadivati.

7)Asava/Arista-Ashwagandharista, Kumaryaasava, Sarswatarista, Chandasava.

8) Ekala Aushadha yoga –Amalaki, Rasna, Yashtimadhu, Brahmi, Choraka, Hingu, Jatamansi, Pathya

Light and easily digestible food, all measure which gives mental pleasure, assurance, *Medhya Rasayana*, Cow's milk, cows ghee, etc. red rice, older wheat, green gram, dries grape, etc, good sleep Apathya

Alcohol, pungent, and spicy food, penetrative and irritant food, Irritating or provocative incidence and activities, suppression of natural urge, incompatible and polluted food, sleeplessness, etc.

#### DISCUSSION

Apasmara is relieved with the help of panchakarma, Shamana treatment like yoga, pranayama, and Asana. Panchakarma and internal ayurveda medicines work surprisingly in this area and they do a remarkable job. Abhyanga cures Kampa, Akshepa, unmada and all types of vataja rogas. shirodhara makes satiety in the head, removes facial wrinkles, Santarpana of indriva, and does the pratipurana of shiras and acts as nidra labha sukha. Body massage with simple or medicated oil increases the blood amino acids such as tryptophan, simultaneously reducing the stress and stimulating the nervous system. ultimately which acts on a muscular system that governed particular nerve actions. nasya acts as anticonvulsant pranayama or deep diaphragmatic breathing exercise reported changes in metabolism blood flow and oxygen levels in the blood.so by following ayurvedic regimen in

*apasmara* and facilitate the society with harmless productive treatment

#### CONCLUSION

Panchakarma treatments such as Shirodhara, nasya, and basti along with palliative treatment (Shamana Chikitsa) are safe without any interactions and adverse effects in the treatment in apasmara. Apasmara is a neuropsychiatric disease and has episodic manifestation etiopathogenesis should be properly understood to diagnose and manage the cases of apasmara. Apasmara has sthayi and vega kalian samprapti. Management of apasmara is divided into vega kalian and vegantara kalian chikitsa. Duration of treatment should be planned according to chronicity, severity, etc of the disease and response to the treatment.

#### REFERENCES

- Singh RH. Charak Samhita, Chikitsa Sthana 10/3. Delhi, India: Chaukhambha Surbharati Prakashana; 2006. p. 474.
- Susruta. Susruta Samhita Uttara Tantra, English Translation by- K.R. Srikanta Murthy, Chaukhambha Orientalia Prakashana. 3<sup>rd</sup> Edition 2008, Chapter 61 Apasmara pradesha, Verse 3.Page.nos.403.
- Shastri A. Sushruta Samhita, Uttara Tantra 61/3. Varanasi, India: Chaukhamba Sanskrit Sansthana; 2007. p. 81
- 4. Upadhyaya Y. Madhav Nidan, Madhukosh Tika, Apasmara Nidana 21/1. Varanasi, India: Sanskrit Sansthana; 2002. p.45.
- Mishra UK, Kalpita J. Clinical Electroencephalography. 1st ed. Vol. 17. Gurgaon, Haryana: Elsevier Publishers; 2009. p. 371-3.
- Sharama Govinda K et al., (2013). Review article-Critical Appraisal on Formulations of kousheyashma (Asbestos), Journal of Biological and Scientific Opinion. Vol I (3), Moksha Publishing House.228

- Dr. Brahmananda Tripathi, Charak Samhita of Maharshicharak, Chukhambha prakashan, Varanasi, 2011, Chikitsastan, chapter 10, verse no.3, page no.405.
- Charaka. CharakaSamhita- English Translation by-P.V. Sharma, Chaukhambha Orientalia Prakashana. Reprint 2008., Nidana Sthana Chapter 8 Apasmara Nidana and Chikitsa Sthana Chapter 10 Apasmara Chikitsa Page nos. 293-298 &171-178
- 9. Astang-Hrudayam by Kaviraja Tridev gupta, Uttartantra chapter no.7 verse no.3-page no.89
- Sushrutasamhita by Dr. Anant ram Sharma foreword by Acharya Priyavat Sharma chaukhmba surbharti prakashan, Uttartantra, chapter no.61 verse no.4-6-page no. 496
- Agnivesha, Charaka Samhitha, Ayurveda Deepika Commentry ofChakrapani, edited by; R K Sharma and Bhagavan Dash, Varanasi, reprint-2010; Chikitsa Sthana, chapter- 10, verse 8-12; pg-443.
- 12. Sushruta Samhita by Dr. Anant ram Sharma foreword by Acharya Priyavat Sharma chaukhambha surbharti prakashan, utter Sthana. chapter no.61 Verse no.7 Page.497
- 13. Astang-Hrudayam by Kaviraja tridev gupta Uttartantra chapter no.7 verse no.6-8-page no.89
- 14. 14. Charaka. Charaka Samhita Chikitsa Sthana English Translation By-P.V. Sharma, Chaukhambha Orientalia Prakashana. Reprint 2007, Chapter 10-Apasmara Chikitsa Verse 65.
- 15. OP Ghai, Piyush Gupta, VK Paul. Ghai Essential Pediatrics. 6<sup>th</sup> Edition, New Delhi, CBS Publishers & Distributors Pvt. Ltd, 2004, pp509-13.
- 16. Kaviraj Ambika Dutt Shastri, Rajeshwar Dutt Shastri, editors, Bhaisajyaratnavali, Hindi commentary, Chaukhambha Sanskrit Sansthana, Varanasi (India), 7th edition, pp370-373.

#### Source of Support: Nil Conflict of Interest: None Declared

How to cite this URL: Mahantesh hiremath et al: Review Article on Apsmara and Ayurvedic Management. International Ayurvedic Medical Journal {online} 2022 {cited August 2022} Available from: http://www.iamj.in/posts/images/upload/2177\_2181.pdf