



## “APASMARA (EPILEPSY) IN KAYACHIKITSA: INTEGRATING ANCIENT AYURVEDIC INSIGHTS WITH MODERN NEUROLOGICAL PERSPECTIVES”

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### FUNDING INFORMATION:

Not Applicable

### How to cite this article:

Priya Bhaware, “*Apasmara* (Epilepsy) in Kayachikitsa: Integrating Ancient Ayurvedic Insights with Modern Neurological Perspectives” International Journal of Ayurvedic Medicine and Mental Health. 2025;2(1):16-19.

### ABSTRACT

**Introduction:** *Apasmara*, described in classical Ayurvedic texts, encompasses a spectrum of neurological disorders, including epilepsy. The ancient texts provide a comprehensive understanding of its pathophysiology, classification, and therapeutic approaches. However, with the advent of modern medicine, the interpretation and management of *Apasmara* have evolved, leading to a need for integrative approaches.

**Methods:** A systematic review was conducted by analyzing classical Ayurvedic texts such as Charaka Samhita, Sushruta Samhita, and Ashtanga Hridayam, alongside contemporary research articles from PubMed, Scopus, and Web of Science. Inclusion criteria encompassed studies focusing on the pathophysiology, classification, and treatment modalities of *Apasmara*. Exclusion criteria involved studies unrelated to neurological disorders or those lacking peer-reviewed validation. **Results:** Classical Ayurvedic texts classify *Apasmara* into four types based on *dosha* predominance: *Vataja*, *Pittaja*, *Kaphaja*, and *Sannipataja*. Treatment modalities include *Shodhana* (purification therapies) and *Shamana* (pacification therapies), utilizing herbal formulations, Panchakarma procedures, and lifestyle modifications. Modern research corroborates the efficacy of certain Ayurvedic herbs, such as *Bacopa monnieri* and *Withania somnifera*, in exhibiting anticonvulsant properties. Integrative approaches combining Ayurvedic therapies with conventional treatments have shown promising results in managing epilepsy. **Discussion:** The integration of Ayurvedic principles with modern medical practices offers a holistic approach to managing *Apasmara*. While classical Ayurveda provides a detailed framework for understanding and treating epilepsy, modern research validates and enhances these approaches. Future research should focus on clinical trials to establish the efficacy and safety of Ayurvedic treatments in the management of *Apasmara*.

**KEYWORDS:** *Apasmara*, Ayurveda, Epilepsy, Kayachikitsa, Neurology

## INTRODUCTION

*Apasmara*, often equated with epilepsy in modern medicine, is a condition characterized by recurrent seizures or convulsions.<sup>[1]</sup> In Ayurveda, it is categorized under the broader term '*Unmada*' (psychosis) and is considered a manifestation of disturbances in the mind and consciousness. The classical texts of Ayurveda, including Charaka Samhita and Sushruta Samhita, provide detailed descriptions of *Apasmara*, its classifications, and treatment modalities.<sup>[2-3]</sup>

The pathophysiology of *Apasmara* in Ayurveda is explained through the imbalance of *doshas* (*Vata*, *Pitta*, and *Kapha*), leading to disturbances in the mind and consciousness. Each type of *Apasmara* corresponds to a specific *dosha* imbalance: *Vataja Apasmara* (due to *Vata*), *Pittaja Apasmara* (due to *Pitta*), *Kaphaja Apasmara* (due to *Kapha*), and *Sannipataja Apasmara* (a combination of all three *doshas*). These classifications aid in tailoring individualized treatment approaches.<sup>[3-4]</sup> Modern medicine recognizes epilepsy as a neurological disorder characterized by abnormal brain activity leading to seizures. Advancements in neuroimaging and electrophysiological studies have enhanced the understanding of its pathophysiology.<sup>[5-6]</sup> Conventional treatments primarily involve antiepileptic drugs, which may have limitations and side effects. This has led to a resurgence of interest in alternative therapies, including Ayurveda, for the management of epilepsy.<sup>[7-8]</sup>

This review aims to explore the ancient Ayurvedic perspectives on *Apasmara*, compare them with modern neurological understandings, and evaluate the efficacy of Ayurvedic treatments in the management of epilepsy. Objectives include: Analyzing the classification and pathophysiology of *Apasmara* in classical Ayurvedic texts, examining modern interpretations and research findings on epilepsy, assessing the therapeutic approaches in Ayurveda for managing *Apasmara*, identifying gaps in current research and proposing directions for future studies.<sup>[9-10]</sup>

## MATERIALS AND METHODS

A comprehensive literature search was conducted using electronic databases such as PubMed, Scopus, and Web of Science. Keywords including "Apasmara," "epilepsy," "Ayurveda,"

"Kayachikitsa," and "neurology" were used to identify relevant studies.<sup>[11-12]</sup> Inclusion criteria encompassed peer-reviewed articles, clinical trials, and case studies published in English between 2000 and 2025. Exclusion criteria involved non-peer-reviewed articles, studies not related to *Apasmara* or epilepsy, and publications not available in full text.<sup>[13-14]</sup>

Classical Ayurvedic texts were analyzed for descriptions of *Apasmara*, its classifications, and treatment modalities. Modern research articles were reviewed to understand the current perspectives on epilepsy, its pathophysiology, and treatment options. The findings were synthesized to provide a comparative analysis of ancient and modern approaches to managing *Apasmara*.<sup>[15]</sup>

## OBSERVATION AND RESULTS

### Classical Ayurvedic Perspectives

In Ayurveda, *Apasmara* is considered a disorder of the mind and consciousness, resulting from an imbalance in the *doshas*. The classical texts describe four types of *Apasmara*:

- ***Vataja Apasmara***: Characterized by sudden onset, jerky movements, and loss of consciousness.
- ***Pittaja Apasmara***: Associated with irritability, aggression, and a burning sensation.
- ***Kaphaja Apasmara***: Marked by lethargy, excessive sleep, and mucous discharge.
- ***Sannipataja Apasmara***: A combination of all three *doshas*, presenting with mixed symptoms.

Treatment approaches in Ayurveda include:

- ***Shodhana (Purification Therapies)***: Procedures like *Vamana* (emesis), *Virechana* (purgation), and *Basti* (enema) are employed to eliminate toxins and balance *doshas*.
- ***Shamana (Pacification Therapies)***: Use of herbal formulations such as *Brahmi* (*Bacopa monnieri*), *Ashwagandha* (*Withania somnifera*), and *Jatamansi* (*Nardostachys jatamansi*) to calm the mind and restore balance.
- ***Lifestyle Modifications***: Incorporation of yoga, meditation, and dietary adjustments to support mental health and prevent seizures.

### Modern Perspectives on Epilepsy

Modern medicine defines epilepsy as a neurological disorder characterized by recurrent, unprovoked seizures due to abnormal electrical activity in the

brain. It is classified into focal and generalized seizures, with various etiologies including genetic, structural, metabolic, and immune-related factors. Treatment primarily involves antiepileptic drugs (AEDs), which aim to control seizures. However, challenges such as drug resistance, side effects, and cognitive impairments necessitate exploration of alternative therapies.

### **Integrative Approaches**

Recent studies have investigated the potential of integrating Ayurvedic treatments with conventional therapies for managing epilepsy. For instance, the use of Brahmi has shown promise in improving cognitive functions and reducing seizure frequency. Similarly, Ashwagandha has been noted for its neuroprotective and anti-stress properties. Yoga and meditation practices have also been found to reduce seizure frequency and improve quality of life in patients with epilepsy.

### **DISCUSSION**

The integration of Ayurvedic principles with modern medical practices offers a holistic approach to managing *Apasmara*. While classical Ayurveda provides a detailed framework for understanding and treating epilepsy, modern research validates and enhances these approaches. For example, the classification of *Apasmara* into different types based on dosha predominance aligns with the personalized treatment strategies in modern medicine. Furthermore, the use of herbal formulations such as Brahmi and Ashwagandha in Ayurveda corresponds to the growing interest in phytotherapy in contemporary neurology.<sup>[16-17]</sup>

However, there are challenges in integrating these approaches, including differences in diagnostic criteria, treatment protocols, and outcome measures. Standardization of Ayurvedic formulations, rigorous clinical trials, and collaborative research between Ayurvedic practitioners and neurologists are essential to bridge these gaps.<sup>[18-19]</sup>

Future research should focus on multicentric clinical trials to evaluate the efficacy and safety of Ayurvedic treatments in managing epilepsy. Additionally, exploring the molecular mechanisms underlying the anticonvulsant properties of Ayurvedic herbs can provide scientific validation and facilitate their integration into mainstream medical practice.<sup>[20]</sup>

### **CONCLUSION**

*Apasmara*, as described in classical Ayurvedic texts, represents a complex neurological and psychosomatic disorder, encompassing what modern medicine identifies as epilepsy. The Ayurvedic perspective emphasizes a holistic understanding of the disease, integrating the principles of dosha imbalance, dhatu dysfunction, and mental disturbances. The classification into *Vataja*, *Pittaja*, *Kaphaja*, and *Sannipataja* types enables a personalized and dosha-specific therapeutic approach, which includes *Shodhana* (purification therapies), *Shamana* (pacification therapies), *Rasayana* (rejuvenation), and lifestyle modifications. Herbal interventions such as *Brahmi* (*Bacopa monnieri*), *Ashwagandha* (*Withania somnifera*), and *Jatamansi* (*Nardostachys jatamansi*) have shown potential anticonvulsant, neuroprotective, and anti-stress effects, offering supportive therapy alongside conventional antiepileptic drugs.

Modern research validates the efficacy of certain Ayurvedic therapies, highlighting their role in reducing seizure frequency, improving cognitive function, and enhancing overall quality of life. Integrating Ayurvedic interventions with contemporary neurological management provides a complementary strategy that addresses both physical and psychological dimensions of epilepsy. However, challenges remain, including the need for standardization of herbal formulations, rigorous clinical trials, and well-defined protocols to ensure reproducibility and safety. Collaborative efforts between Ayurvedic practitioners and modern neurologists are essential to bridge knowledge gaps, optimize therapeutic outcomes, and develop evidence-based integrative protocols.

In conclusion, *Apasmara* management benefits from a combined approach where traditional Ayurvedic principles and modern medical insights converge. This integrative strategy not only enhances seizure control but also promotes mental well-being, overall health, and long-term resilience, emphasizing the importance of a patient-centered, holistic model in contemporary epilepsy care.

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