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# CONCEPTUAL REVIEW ON APASMARA

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#### ABSTRACT

According to WHO, health is a state of complete physical, mental and social well-being and not merely absence of disease. Now-a-days different type of emotional stress, insomnia, prolonged working hours, increased use of mobile phone and laptop, improper diet etc., all this leads to increase of mental illness day by day. According to  $\bar{A}yurveda$ , Apasmara is one of the psychiatric disorder places under  $Mansik\ vyadhi$ . Loss of memory is considered as main feature of Apasmara.

**KEYWORDS:** Apasmara, loss of consciousness, Āyurveda, Manas, psychiatric disorder.

#### INTRODUCTION

Mansik dosha Rajas and Tamas are responsible for psychiatric disorder, Apasmara is one of them. It can be caused due to vitiation of sharirika dosha (vata, pitta, kapha) and Mansik dosha (Rajas, Tamas). Apasmara can be defined as transient loss of consciousness, uncontrolled body movement and sometimes abnormal behaviour caused by dearangement of intellect and mind. In this disease, patient experiences convulsions, froathing from mouth along with attacks of falling down. In Madhav Nidana, Apasmara is defined as loss of memory, characterised by feeling of aura occuring spontaneously. Apasmara can be clinically correlated with Epilepsy. Epilepsy is featured in a disturbed normal pattern of neural activity, which causes strange sensations, occasional convulsions, muscle spasm and loss of consciousness.

# AIMS AND OBJECTIVES

- To understand the  $\bar{A}yurvedic$  concept and classification of Apasmara.
- To explore its *samprāpti* (pathogenesis), *lakṣaṇa* (clinical features), and *bheda* (types).
- To review evidence-based  $\bar{A}yurvedic$  interventions in the management of Apasmara.

# **METHODOLOGY**

The literature was reviewed from classical Āyurvedic texts such as Caraka Saṃhitā, Suśruta Saṃhitā, Aṣṭāṅga Hṛdaya, and Madhav nidana. A systematic search of databases like AYUSH Research Portal, PubMed, Google Scholar, and DHARA was conducted using

keywords such as *Apasmara, Vata, Pitta, Kapha,* loss of consciousness. Studies published up to April 2025 were included.

# Nidāna (Etiology)

According to Acharya Suśruta, Mithya, Ayoga and atiyoga of Indriyartha and Karma, Virrudha and Malina aahara, Vegadharana, Gachtam ch Rajaswalam (sex during menstruation), Perversion of Manas by Chinta, kama, Bhaya, Shoka, Krodha, Udyoga etc. are the causes of Apasmara.

# Bheda (Types)

- Vataja
- Pittaja
- Kaphaja
- Sannipataja

# Purvarupa (Prodromal Symptoms)

- Drooping/Raising of eyebrows
- Abnormal eye movement
- To hear something even if no words are spoken
- Continuous salivation, nasal secretion
- Anorexia
- Indigestion
- Tightness in chest region
- Generalised weakness
- Sweating
- Bodyache
- Insomnia
- Feeling of emptiness

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- Black out, vertigo
- Dreams of drinking alcohol, dancing, fainting etc.

# Lakshana (Characteristic features)

# • Vataja

Tremors, grinding of teeth, froath from mouth, fast and short respiration, sees red or black things before loss of consciousness.

## • Pittaja

Yellow froath from mouth, yellow coloured limbs, face and eyes, sees yellow or red things before loss of consciousness, excessive thirst, increased body temperature, view the surrounding as caught with fire.

# Kaphaja

White froath from mouth, white coloured limbs, face and eyes, cold and heavy body, sees white things before loss of consciousness, Patient become conscious after long duration.

# • Sannipataja

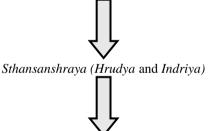
Caused by vitiation of all the three *doshas* and shows symptoms of all three *doshas*.

## Samprapti (Pathogenesis)

Nidāna sewana (Sharira and Manasa dosha prakopaka)



Dosha prakopa (Vatadi and Rajasa, Tamasa)







Tama pravesha and veebhasta chesta



#### Samprapti ghataka

- Doshas Vata, Pitta, Kapha, Rajas, Tamas
- Dushya Rasa dhatu, Mana
- Agni Jatharagni-Mandya
- Srotas Manovaha srotas
- Srotodusti Prakara Sanga
- Kha-vaigunya Mana
- *Udbhavasthana Hruday*
- Adhisthana– Mana, indriya
- Vyadhimarga Madyama Marg

#### Chikitsa (Treatment)

#### • Shodhana

Tīkṣṇā vamana, Nasya to restore activities of Hrudya, Mana

Vataja Apasmara – Basti

Pittaja Apasmara – Virechana

Kaphaia Apasmara – Vamana

Acharya Suśruta advised Siravedha of veins in temple region.

## • Shamana

#### Rasa/bhasma/pisthi

Vatakulantak rasa, Bhootbhrav rasa/ Chand Bherav rasa, SmritiSagar rasa, Paradbhasma, Chaturbhujrasa.

#### Vati

Brahmhivati, sarpaghanda ghanvati, arogyavardhanivati.

## Churna

Kalyanakchurna, vachachurna, Ashwagandhachurna, sarswatchurna, shatavarichurna.

#### Kwath

dashmoolkwath, mansyadikwath.

# Asava/ Aristha

Bhargyadi, Saraswataristha, Ashwagandharistha, Dasmoolaristha.

# Grihta

Panchgavyagrihta, Mahapanchgavyagrihta, Bramhigrihta, Sidharthakgrihta, Saindhvadigrihta.

# Taila

katbhyaditaila, Palankasaditaila, Godhaditaila, Shigruaditaila.

# **CONCLUSION**

Apasmara is a neuropsychiatric disorder. Modern medicine got limitation in management of psychological disorders, however Ayurveda believes in balancing the three doshas by Panchkarma (Shodhana) along with shamana to alleviate root cause of disease and normalise brain activity. Duration of treatment should be according to severity of disease and response to treatment.

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# REFERENCE

- 1. Dr. Brahmanandatripathi, Charak Samhita of Maharshicharak, Chikitsastan, chapter 10, chukhambhaprakashn, Varanasi, 2011.
- Dr. Brahmanandatripathi charaksamhita of Maharshicharak, nidansthana chapter 8<sup>th</sup>, chukhambhaprakashn Varanasi, 2010.
- Shastri A. Sushruta Samhita, Uttara Tantra 61. Varanasi, India: Chaukhambha Sanskrit Sansthana, 2007.
- 4. Upadhyaya Y. Madhav Nidan, Madhukosh Tika, Nidana 21 Varanasi, India: Sanskrit Sansthana, 2002.
- 5. Astang-Hrudayam by kavirajatridevgupt, uttartrantra chapter no.7.

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