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An insight towards the Ayurvedic management of Trigeminal Neuralgia - A Single Case Report

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ABSTRACT

One of the unpleasant conditions affecting the fifth cranial nerve, trigeminal neuralgia causes extreme unilateral pain in the areas served by its branches, along with stiffness in the temporal mandibular joint. Anticonvulsants, tricyclic antidepressants, and other surgical procedures are used to treat trigeminal neuralgia in contemporary medicines. Initial adverse effects that are frequently experienced are ataxia, diplopia, nausea, and drowsiness. According to ancient *Ayurvedic* texts, this condition is closely related to the *Sannipatika* disease *Ananthavata*. Even the name suggests that the *Vatadosha* is highly vitiated. *Anantavata* is one of the 11 varieties of *Shirorogas* described by Acharya *Sushruta*. The treatment is based on *Tridosha*. The goal of the current study is to determine how effective *Ayurveda* medicine in Trigeminal neuralgia.

Key words: Trigeminal neuralgia, Shiroroga, Anantavata

INTRODUCTION

Trigeminal neuralgia is a neurological condition that causes stabbing pain in the cheek, eye, and lower area of the face as a result of irritation or pressure on the trigeminal nerve route, which exits the skull as the fifth cranial nerve. Although the pain rarely lasts longer than a few seconds or minutes, it can occasionally be so severe that the patient winces, hence the name "tic." They could happen on their own or in response to movements of the afflicted areas brought on by speaking, chewing, or smiling. trigger zones, generally on the face, lips, or tongue that set off attacks, are another distinguishing trait; patients may report that

tactile stimuli - e.g. washing the face, brushing the teeth or exposure to a draft of air – generate excruciating pain^[1]

Trigeminal neuralgia, also known as tic douloureux disorder, affects 4-5 people out of every 100,000 people and is more common in women than in men.^[1]

The patients are heavily burdened by the discomfort caused by trigeminal neuralgia. Anti-convulsants like carbamazepine relieve pain in about 80 to 90 percent of users. Most patients have unpleasant side effects include nausea, fatigue, forgetfulness, unsteadiness, and dizziness. Sometimes the discomfort they cause is worse than the pain itself, forcing the patient to quit taking them. These drugs sometimes lose their effectiveness over time, too. Larger doses or multiple drugs must be taken at the same time. In order to treat individuals who are no longer responding to medication, surgery is employed.^[2]

The symptoms of Trigeminal neuralgia are comparable to those of *Anantavata* in Ayurveda. *Acharya Sushruta* has explained eleven *Shirorogas* and one of them is *Anantavata*.^[3] In *Anantavata*, *Tridosha* are vitiated and cause severe intolerance pain at the back of the neck, eyeball, root of nose, temporal region and frontal

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region, associated with eye-diseases, lock jaw and shivering of jaw.^[4] The main treatments for *Anantavata* include *Siravedha* and *Vata-Pitta Shamana*.^[5]

AIM AND OBJECTIVES

To study the efficacy of Ayurvedic management in trigeminal neuralgia with special reference to *Ananthavata*.

MATERIALS AND METHODS

A 33 year old male patient was complaints of Trigeminal Neuralgia was selected from OPD Department of Kayachikitsa Ayurveda Mahavidyalaya and hospital, Hubballi, Karnataka

CASE REPORT

A 33-year-old male patient complaints of shooting, stabbing and shock like pain over temporal region, cheeks, forehead and face associated with stiffness of tempero mandibular joint.

A male patient of age 33 years was apparently healthy 4 years back. Gradually he started developing pain over the face, over the temporal region, which was radiating to cheek, forehead associated with stiffness of Temporomandibular joint. Pain was excruciating, with 10 to 12 episodes in a day, each episode persisting for 2 to 3 minutes. Pain was triggered and aggravates by chewing, cold weather, yawning, as well as due to physical and mental stress. Initially patient was taking painkiller medicines on self, when the pain was severe went to allopathy doctor and after his MRI-scan done he was diagnosed with Trigeminal Neuralgia due to nerve compression. He took allopathic treatment and got sustained relief for 6 months than gradually during the course of treatment observed giddiness which relieved on withdrawing the treatment. But for the complete recovery patient opted *Ayurvedic* treatment. So he came to our hospital for further treatment.

Personal history

Appetite: Decreased

Bowel: Constipation

Micturition: Normal

Sleep: Reduced

General examination

Weight - 75 kg

Height - 5.10 feet

Pulse - 78/min

Blood pressure - 120/80 mmHg

On examination

Tenderness - present over cheeks and chin

Range of movements - Stiffness in Temporomandibular joint

Investigation

Hb - 14.5gm%

ESR - 25 mm/hr

Treatment given

1. *Sarvanga Abhyanga* with *Kayatirumeni Taila* followed by *Ksheeradhuma*
2. *Nasya* with *Balahathadi Taila*
3. *Yogabasti: Niruha Basti* with *Asanadi, Balapunarnavadi Kashaya*
4. *Anuvasana Basti* with *Ketakimuladi Taila, Chandanabalalakshadi Taila*

Internal medicines

1. *Tab. Shaddharana* 1-0-1
2. *Shirashuladivajra Rasa* 1-0-1
3. *Pathyadi Kadha* 10ml-0-10ml
4. *Manasamitra Vati* 1-0-1
5. *Manibhadra Lehya* 0-0-1tsp
6. *Cap. Jyothishmati Taila* 1-0-1
7. *Dadimashtaka Churna* ½ tsp -0-½ tsp with food

OBSERVATION AND RESULT

The patient got moderate relief from the symptoms after the treatment. There was subjective improvement in quality of life and no pain was noticed

on washing the face with soap after procedures and medications.

DISCUSSION

Anantavata is a *Vaatapradhana Tridoshaja Shiroroga* whose symptoms are similar to those of Trigeminal Neuralgia. There are 11 *Shirorogas* listed by *Acharya Sushruta*, two of which, *Ardhavabhedaka* and *Anantavata*, share the primary symptom of a half-sided headache. The two differ only in that *Ardhavabhedaka* is a *Pittapradhana* and *Anantavaata* is a *Vatapradhana Vyadhi*

Here in *Ananthavata*, most of the symptoms supports the involvement of *Vata*. Increased *Rooksha* and *Sheeta Guna* of *Vata* causes pain. *Chala Guna* of *Vata* is deranged and causes *Hanugraha* and *Gandaparswa Kampa*.

Currently, the patient's complaints are *Vatapradhana*. *Vatahara* and *Brihmana* line of treatment was consequently chosen. *Abhyanga* followed by *Ksheera Dhuma* which is *Vatahara*. *Abhyanga* corrects disorders caused due to *Vata*. As the entrance to *Shiras*, *Nasya* is a crucial line of therapy for *Urdhwajatrugata Rogas*. After *Nasya Karma*, the patient felt better. *Nasya* is effective in many brain disorders like depression, headache, migraine, Parkinson's disease, memory loss, seizures, poor coordination, mental stress and depression because *Vata, Pitta & Kapha* said to be involved in Trigeminal neuralgia. Ultimately, *Vata* must be addressed, and only *Sthanikashodhana* of *Vata* i.e., *Bastikarma* will bring the condition under control. Thus, the disease's recurrence can be stopped.

Along with these therapies, oral medications are prescribed. *Tab. Shaddharana* which balances *Vata*. *Shirashuladivajra Rasa* which balances *Tridosha* and also helpful in management of *Shirorogas*. *Pathyadi Kadha* which mitigates *Vata* and *Kapha*. *Manasamitra Vati* which useful in management of anxiety, depression. So, these helped patient in reducing the disturbed sleep. *Dadimashtaka Churna* which is also

aids *Vatanulomana*. *Cap. Jyothishmati Taila* also used to treat neurological disorder.

After taking these drugs patient got relief in the symptoms. Frequency of electric shock like pain was decreased and intensity of pain was also decreased So, in present case all medicines were used having *Vatahara* and *Vataanulomaka* properties that are found effective in symptomatic relief in *Anantavata* (Trigeminal neuralgia).

CONCLUSION

In current study, it is observed that *Ayurvedic* treatment has provided significant relief in symptoms and found reduced recurrence. The ailment had significantly improved with the use of the proper internal *Vatashamaka* and *Vatanulomana* medications.

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