WORLD JOURNAL OF PHARMACEUTICAL RESEARCH
SJIF Impact Factor 8.453
Volume 13, Issue 19, 1454-1462. Case Study ISSN 2277–7105

AYURVEDIC MANAGEMENT OF TRIGEMINAL NEURALGIA WITH EMPHASIS ON *ANANTAVATA*: A CASE REPORT

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Article Received on
20 August 2024,

Revised on 10 Sept. 2024,
Accepted on 30 Sept. 2024

DOI: 10.20959/wjpr202419-34156

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ABSTRACT

Introduction: *Ayurveda's* comprehensive methods may offer new avenues for treating neurological conditions by focusing on balancing internal systems and supporting brain health. Combining these traditional techniques with contemporary scientific research could improve therapeutic approaches, providing a broader scope for effective treatment. Trigeminal neuralgia is also a severe neurological disorder characterized by sharp, intense facial pain that can strike intermittently throughout the day. This condition typically affects one side of the face and can involve any branch of the trigeminal nerve, with V2 and V3 being the most frequently impacted. The primary cause is often vascular compression of the nerve root, commonly by the superior cerebellar artery. While there are several treatment options, medication is usually the first-line approach for managing trigeminal neuralgia, regardless of its cause. *Anantavata*, categorized under *urdhava jatrugata vikara*, bears significant resemblance to trigeminal neuralgia. Its management includes *shamanaushadha* (palliative medicines) and *Panchakarma* therapies such as *Nasya*, *Shirodhara*, and *Raktamokshana*. **Aim and Objective:** *Ayurvedic* Management of Trigeminal Neuralgia with Emphasis on *Anantavata*. **Materials and Methods:** A 39year old female pt. Visited our hospital with complaint of pain

in left lower half of face, cheeks and lips radiate towards left ear and neck region since 7years. Pain tearing in nature with sudden onset and getting worsen with time. For this *Nasya karma* planned with *jyotishmati tail* and *shirodhara* with *jatamasi kwath* with *sthanik snehana* and *swedana*. **Result:** Moderately relief was found in symptoms and pain intensity in patient. **Conclusion:** It was found that *Ayurveda* management like *Nasya Karma* and *shirodhara* followed by *shaman chikitsa* is significant effective in *Anantavata* (Trigeminal Neuralgia).

INTRODUCTION

Ayurveda's comprehensive methods may offer new avenues for treating neurological conditions by focusing on balancing internal systems and supporting brain health. Combining these traditional techniques with contemporary scientific research could improve therapeutic approaches, providing a broader scope for effective Trigeminal neuralgia Is a type of severe chronic pain characterized by brief electric shock-like pains in one or more divisions of the trigeminal nerve.[1] Trigeminal neuralgia is a severe neurological disorder characterized by sharp, intense facial pain that can strike intermittently throughout the day. This condition typically affects one side of the face and can involve any branch of the trigeminal nerve, with V2 and V3 being the most frequently impacted. The primary cause is often vascular compression of the nerve root, commonly by the superior cerebellar artery. While there are several treatment options, medication is usually the first-line approach for managing trigeminal neuralgia, regardless of its cause. *Anantavata*, categorized under *urdhava jatrugata vikara,* bears significant resemblance to trigeminal neuralgia. Its management includes *shamanaushadha* (palliative medicines) and *Panchakarma* therapies such as *Nasya*, *Shirodhara*, and *Raktamokshana*.

The trigeminal nerve, the largest cranial nerve, provides sensory input to the face and motor control to the muscles involved in chewing. Its sensory fibers converge at the trigeminal ganglion, transmitting touch, pain, and temperature sensations from the face to the contralateral thalamus via the trigeminothalamic tract.[2] The nerve divides into three branches: Ophthalmic (V1): Supplies the eye, upper eyelid, and forehead. Maxillary (V2): Innervates the lower eyelid, cheek, nostril, upper lip, and upper gums. Mandibular (V3): Affects the lower lip, lower gums, jaw, and the muscles of mastication. Trigeminal neuralgia is often caused by compression of the trigeminal nerve root near its entry into the pons, typically by a nearby artery or vein, with the superior cerebellar artery being involved in 75%

to 80% of cases.[3] Other possible compressive sources include the petrosal vein and the anterior inferior cerebellar or vertebral arteries. Additionally, space-occupying lesions like meningiomas, acoustic neuromas, epidermoid cysts, arteriovenous malformations, or saccular aneurysms can contribute to nerve compression. Multiple sclerosis, affecting about 2% to 4% of patients, can also cause trigeminal neuralgia due to demyelination of the trigeminal nerve nucleus.[4]

Trigeminal neuralgia affects between 4 and 13 individuals per 100,000 each year, with a higher prevalence in women compared to men. The female-to-male ratio is approximately 1.5 to 1.7. While the condition most frequently presents after the age of 50, it can also occur in individuals in their 20s and 30s, though it is rarely diagnosed in children.[5]

Anantavata is a type of *Shiroroga* in which the word *anant* denotes never ending kind pain and *vata* means *vata* predominant disease.

दोषास्तु दुष्टास्त्रय एव मन्यां सम्पीड्य घाटासु रुजां सुतीव्राम्। कुर्वन्ति साक्षिभ्रुवि शङ्खदेशे स्थितिं करोत्याशु विशेषतस्तु। गण्डस्य पार्श्वे तु करोति कम्पं हनुग्रहं लोचनजांश्च रोगान् ।अनन्तवातं तमुदाहरन्ति दोषत्रयोत्थं शिरसो विकारम्।.[6]

Acharya Sushrutha explains that an imbalance of the three *doshas* (*Vata, Pitta, and Kapha*) lodges in *Manya Nadi* and causes severe pain when they affect certain areas, especially the forehead and eyes. It leads to symptoms like facial trembling and eye disorders. The condition, known as *Anantavata*, is specifically associated with these dosha imbalances impacting the head.

Trigeminal neuralgia and *Anantavata* both involve intense facial pain. Trigeminal neuralgia is a neurological disorder characterized by sharp pain along the trigeminal nerve. Similarly, *Anantavata*, according to *Ayurveda*, results from *dosha* imbalances that cause severe localized facial pain. Both conditions target similar facial areas and exhibit comparable symptoms, highlighting their shared nature of causing significant facial discomfort.

Although trigeminal neuralgia is not life-threatening, it can result in persistent pain and disability. The condition varies among individuals: some experience intermittent pain with periods of relief, while others suffer from continuous facial pain alongside episodic flare-ups. Medical treatments may become less effective over time, and while surgical options can

provide quick relief, pain often recurs. *Ayurveda* offers supportive management for trigeminal neuralgia through personalized treatments that address underlying dosha imbalances and enhance overall nerve health. Techniques such as *Panchakarma* and targeted herbal remedies may complement conventional therapies and potentially reduce symptoms and improve quality of life.

CASE REPORT

A 39-year-old female patient, previously healthy, began experiencing pain on the left side of her face seven years ago. The pain, located in the temporal region and radiating to the cheek, forehead, and ear, was accompanied by TMJ stiffness. It was severe, twitching in nature, with 10 to 12 episodes daily, each lasting 2 to 3 minutes. The pain was triggered by chewing, cold weather, yawning, and stress. Initially self-medicating with painkillers, she later sought allopathic treatment with medications such as Tegrital CR 300 mg, pregabalin 50 mg, and oxcarbazepine 450 mg, which provided relief for six months. However, in the past three months, her symptoms worsened with increased frequency and duration, leading her to seek *Ayurvedic* treatment at our hospital.

Personal History: Table 1.

Diet	Mixed
Appetite	Low
Bowel	Irregular
Sleep	Often Disturbed
Micturation	Normal

Family History - NAD

***Dashavidhapareeksha* Table 2.**

Prakriti	*Vata kapha*
Vikriti	*Vata predominant tridosha*
Sara	*Madhyama*
Samhanan	*Madhyama*
Pramana	*Madhyama*
Satwa	*Avara*
Satmya	*Madhyama*
Ahar shakti	*Avara*
Vyayam shakti	*Madhyama*
Vaya	*Madhyama*

Ashta vidha pareeksha **Table 3.**

Nadi	***Vata***
Mutra	***Prakrita***
Mala	***Vibandha***
Jivha	***Lipta***
Shabda	***Shpashta***
Sparsha	***Mridu***
Drishti	***Prakrita***
Akriti	***Avara***

General Examination

• Pallor – Absent • Icterus – Absent • Koilonychias – Absent • Lymphadenopathy – Absent • Edema – Absent

On MRI Brain

- NAD

Past history

- No H/O – HTN, Diabetes Mellitus, Hypothyroidism
- No/C/O –Allergy, Typhoid, Malaria, Dengue.
- No H/O – Trauma or Accidental Injury

On Examination

- General condition: Moderate
- Pulse Rate: 75/min
- BP: 130/80 mm of Hg
- RR: 16/min
- HR: 72/min

Objective examination Table 4.

No	Clinical features	Grading Score	Grade
1	Pain	VAS Scale	7
2	TMJ Stiffness	Verbal descriptor Scale	3

Treatment Table 5.

No	Treatment	Drug	Duration
	Panchakarma		
1	*Nasya Karma* *Sthanik snehana, swedana*	*Jyotishmati tail*	Alternate days 8 days
2	*Shirodhara*	*Jatamansi kwath*	Alternate days 7 days

3	*Abhyantara Aushadha*		
		Yograj guggul 2 bd	15 days
		Rasa Raj rasa 1bd	15 days
		Cap Palsineuron 1BD	15 days
		Maha Rasnadi Kwath 20 ml BD	15 days

Results Table 6.

No	Clinical features	Grading Score	Before Treatment	After Treatment	Follow up After 1 month
1	Pain	VAS Scale	7	3	2
2	TMJ Stiffness	Verbal descriptor Scale	3	2	1

DISCUSSION

This study examines the impact of *Ayurvedic* treatments on CTN (classical trigeminal neuralgia), where pain significantly diminishes the patient's quality of life. TN pain is linked to neurovascular compression and demyelination of the trigeminal nerve, though the precise pain mechanism remains unclear. It is thought that hyper excitability of the demyelinated nerve contributes to the pain, and inflammation plays a role in its progression. The primary aim of treatment is pain management.[7,8]

In *Ayurveda*, pain is seen as an imbalance of *Vata*, addressed through therapies such as *Sneha*, *Basti*, *Nasya*, *Shamana (*palliative care*)*, *Brimhana (*nourishing therapy), and *Rasayana* (rejuvenation therapy). For this case, treatments focused on *Vata Shamana*, *Brimhana*, and *Rasayana* were implemented to manage the pain.

Nasya Karma

Jyotismati taila is administered as *Nasya*, with a minimal dose of 6 drops per nostril. *Jyotismati* (*Celastrus paniculata*) is classified as a *medhya dravya*, known for its memory-boosting and neuroregenerative properties. Research has demonstrated that it significantly reduces brain levels of malondialdehyde while increasing levels of glutathione and catalase. Studies suggest that the aqueous extract of *Celastrus paniculata* has cognitive-enhancing and antioxidant effects.[9]

Shirodhara

Shirodhara, effective for balancing *Vata* and *Pitta doshas*, promotes relaxation and mental clarity. It helps address stress-related issues such as insomnia, anxiety, chronic headaches, hypertension. Additionally, it improves blood circulation in the brain, nourishes the scalp,

reduces nervous tension, and enhances overall sleep quality. *Shirodhara's* therapeutic effects are attributed to its multifaceted approach, including stimulation of the *ajna chakra*, pressure application on *sthapani marma*, temperature variations, and influence on the *manomaya kosha*, highlighting its diverse mechanisms of action.[10]

Yograj Guggulu

Yograj Guggulu, characterized by its *Tikta, Kashaya, Katu Ras, and Ushna, Ruksha Guna*, is effective in balancing *Kapha* and *Vata*. It provides pain relief, strengthens the nervous system, and reduces inflammation, making it a key remedy for *Vata* disorders.[11]

***Mahavatvidhwans Rasa, Sameerpannaga Rasa, Sootshekhara Rasa, Ekangveer Rasa, Khurasani Owa (Hyoscyamus niger), and Lajari (Mimosa pudica)* combination**

Palsineuron Capsule is formulated to treat neuro-muscular disorders impacting both the central and peripheral nervous systems. It includes a combination of *Mahavatvidhwans Rasa, Sameerpannaga Rasa, Sootshekhara Rasa, Ekangveer Rasa, Khurasani Owa (Hyoscyamus niger), and Lajari (Mimosa pudica). Mahavatvidhwans Rasa* supports CNS and PNS metabolism and neuro-muscular coordination. *Sameerpannaga Rasa* enhances tissue oxidation and neuro-muscular metabolism. *Ekangveer Rasa* aids in nerve and blood vessel repair and improves sensory and motor functions. *Sootshekhara Rasa* provides nutritional support for quicker healing, while *Lajari* promotes regeneration of neuro-lesions and *Khurasani Owa* alleviates neuro-irritation.[12]

Rasaraj Rasa

Rasaraj Rasa includes *Parada (*mercury*), Abhraka (*mica*), Swarna (*gold*), Roupya (*silver*), Loha (*iron*), and Vanga (*tin*) Bhasma,* along with *Jatifala, Ksheerkakoli, Kumari,* and *Kakamachi* as *Bhavana Dravya.* It effectively balances vitiated *Vata Dosha,* with its ingredients predominantly having *Tikta, Madhura,* and *Kashaya Rasas,* along with a slight presence of *Katu Rasa*. The formulation exhibits *Sheet Virya, Madhura Vipaka, Laghu, Snighdha,* and *Vyavayi* qualities, making it effective against all *Doshas. Abhraka Bhasma* is known for its hepatoprotective properties, *Lauha Bhasma* acts as an antioxidant, and *Tamra Bhasma* has antibacterial effects. *Ashwagandha* provides immunomodulatory and anti-inflammatory benefits, while *Swarna* and *Tamra Bhasma* have free radical scavenging properties. *Rasaraj Rasa* helps reduce numbness, twitching, and inflammation in patients.[13]

Maharasnadi kashayam

Maharasnadi Kashayam primarily works to balance *Vata dosha*, which controls movement and can lead to pain and stiffness when out of balance. Its herbal ingredients contain bioactive compounds that reduce inflammation by inhibiting pro-inflammatory molecules and blocking pain signals. This results in improved blood circulation to the affected areas, promoting healing and reducing swelling. Additionally, *Maharasnadi Kashayam* supports tissue repair and strengthening.[14]

CONCLUSION

In summary, this case report demonstrates the potential benefits of *Ayurvedic* treatment for trigeminal neuralgia, especially through the perspective of Anantavata. The use of traditional therapies like *Vata Shamana*, *Brimhana*, and *Rasayana* provides a valuable supplementary option to conventional treatments. The observed improvements highlight the effectiveness of tailored Ayurvedic approaches in reducing pain and enhancing patient well-being. Further studies and clinical trials are needed to confirm these results and assess the broader applicability of Ayurvedic methods for other neurological disorders.

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