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Role of Homoeopathy in Epilepsy Shalu Munjal¹, Suhit Khanra²,

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Abstract

Epilepsy is a recurrent episodic disturbance of the brain function due to abnormal electrical activity of the neuron. It is manifested as abnormal motor sensory phenomenon often with impaired or loss of consciousness. The term epilepsy covers a group of disorders of brain function characterized by sudden attacks (seizures). The seizures are commonly labeled grand or petit mal. The conventional treatment attempts to subdue or suppress the seizures with sedatives but offers no cure. Homoeopathy can cure epilepsy successfully by riding on the waves of the brain and mind of the person.

Key Word- Epilepsy, Aura, Petitmal, Grandmal, Seizure etc.

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INTRODUCTION

Seizure: Paroxysmal, abnormal /excessive or hyper synchronous neuronal activity in the brain .

Epilepsy: Two or more unprovoked seizure without any identifiable cause leads to clinical syndrome called as epilepsy.

Epilepsy is group of syndromes characterized by recurring seizures. Epilepsy syndromes are classified by specific pattern of clinical features family history & seizures type. Epilepsy is a

syndrome of another underlying condition such as brain tumor.

Definition:

"Epilepsy is a recurrent seizure disorder characterized by abnormal electrical discharge from brain, often in the cerebral cortex"

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Or

"Epilepsy is a chronic seizures disorder with recurrent & unprovoked seizures."

Incidence

Epilepsy is the most common neurological problem. An estimated 2-4, million people are affected in the US with epilepsy. Approximately 50 million people are affected of all age groups globally by epilepsy. According to Venkataswamy (1998) the prevalence of epilepsy in India is 4.4/1000 population.

Causes of Epilepsy

- Drug associated
 - Alcohol
 - Barbiturates,
 benzodiazepines
 intoxication / withdrawal.
- Traumatic
 - Stroke / tumor
 - o Chronic structure injury to brain
- Metabolic causes
 - o Hypo/hypernatremia
 - Hypoglycemia
 - o Hypocalcemia
 - o Hypomagnesemia
 - o Hypo/hyperkalemia
 - o Hepatic encephalopathy
 - o Uremic encephalopathy
- Sepsis
 - Viral encephalitis

o Autoimmune encephalitis

Patho-Physiology

Disturbance of the brain functions due to any cause, e.g. genetic factors or head injury may cause brain cells to become overactive & to discharge in sudden violent disorderly manner, the burst of electrical energy which spreads to adjust areas of the brain & may jump to distant areas of CNS resulting in seizures.

Classification of Seizure

New definition suggests that one epileptic seizure is sufficient to term it as epilepsy if there is additional enduring alteration in brain that increases likelihood of seizure.

Classification

- A. Generalized Tonic clonic,
 absence, atonic, myoclonic
- B. Partial
 - a) Simple Intact awareness (focal without dyscognition)
 - b) Complex Loss of awareness(focal with dyscognition)

New Classification

ILAE 2017 classification of seizure types expanded version

- Focal onset
 - Aware / ImpairedAwareness
- Motor onset
 - o Automatism
 - Atonic

- o Clonic
- o Epileptic spasms
- Hyperkinetic
- Myoclonic
- o Tonic
- Non motor onset
 - Automatic
 - Behavior arrest
 - Cognitive
 - Emotional
 - Sensory
- Generalized onset
 - Motor
 - o Tonic -clonic
 - Other motor
- Non motor (absence)
 - o Unknown onset
 - Motor Motor
 - o Tonic -clonic
 - Other motor
 - Non motor
- Unclassified

Partial Seizures: When seizures appears to result from abnormal activity in just one part of the brain.

Simple Partial Seizures: They have elementary or simple symptoms & there is no loss of consciousness in this. The patient may experience only a finger or hand shake mouth may jerk uncontrollably he/she may talk unintelligibly, may feel dizziness or may experience unusual or unpleasant sight, sound odors or tastes.

Complex Partial Seizures: The patient's consciousness is altered during the event. The seizures may begin with an aura. Patient may have no movement or moves automatically but inappropriately for time & place; may experience excessive emotions of fear, anger, elation or irritability & does not remember episodes when it is over.

Generalized seizures (Grand Mal Seizures):

Generalized seizures involve both the hemispheres of the brain. There is intense rigidity of the entire body, followed by alternate of muscles relaxation & contraction. (Generalized tonic-clonic contraction).

There are following manifestation:

Tonic Phase:

- Simultaneous contraction of the diaphragm & chest muscles which produce characteristic epileptic cry.
- Face may become pale, head turned to one side eye fixed in one position & hands are clenched.
- Loss of consciousness. Tongue is bitten.
- Frothy discharge from the mouth
- Ineffective breathing
- Pulse becomes weak & irregular.
- This state may last for 30 seconds.

Clonic Phase:

- Jerky movement last for 1-2 minutes.
- Incontinence of urine & stool.
- The patient relaxes after jerky movement & goes into the deep sleep (coma) breathing is noisy.
- This state lasts for 1-2 minutes.

Postictal state

After the seizures, the patient are often confused & hard to arouse & may sleep for hours. Many complain of headache, muscle-ache, fatigue & depression.

Assessment & Diagnostic methods

- History of events during pregnancy & child birth for example, difficult labor, trauma & birth asphyxia.
- Neurological Examination.
 - MRI to detect lesions in the brain e.g. abscess or tumor etc.
 - EEG to classify the type of seizure.
 - CT scan to identify the epilepto - genic zone.
 - Blood Tests.

Prevention

- Use of safety precautions to prevent injury during birth.
- Early detection of high-risk mothers to prevent complications during pregnancy & labor.
- Essential obstetrical care, i.e.
- Institutional delivery to provide basic emergency obstetrical care & basic newborn resuscitation services.
- Genetic counseling: Prospective genetic counseling helps to identity heterozygous individuals for any particular defect.
- Vocational rehabilitation should be done of the patient through proper training & education in some suitable vocation. This enhances patients selfthe self-confidence & esteem, reduces fears & in security. Psychological support to the patient & his/her family must be provided to relieve thier anxiety & fears.
- Close observation should be kept on the conscious level & note fluctuation in mood & attitude.

Treatment:

The homoeopathic medicine for epilepsy are selected after a full individualizing examination and case

analysis, which includes the medical history of the patient, physical and mental constitution and a miasmatic tendency is also taken into account for the treatment.

Some are important homoeopathic medicine for epilepsy.

- 1. Cicuta: in this medicine epilepsy are marked by violent, distorted body shape. present a strange Opisthotonus position in which bends spine backwards with the head and heels touching the ground.it is used for convulsions occurring in children during dentition, in women during and after delivery and also for convulsion due to worms.
- 2. Artemisia Vulgaris: best medicine for epilepsy with petit mal seizure. The main symptom is frequent brief episodes of seizures in a short time period. The triggering factor for the seizure is strong emotions including fear.
- 3. Stamonium: it is most suitable medicine where convulsions arise after exposure to bright light or shinning objects. The consciousness is preserved and jerking of muscles of the upper body part.
- 4. **Cuprum Met:** it is indicated when the seizure attack is preceded by aura in the knee. The symptoms marked during the attack are clonic spasm that

- usually begins in the finger or toes and soon covers the entire body.
- 5. **Bufo Rana:** convulsions where the attacks are present during sleep. The aura is felt in the genital area. It also works well for female who have attacks of seizures during menses.
- 6. **Hyoscyamus:** It is indicated when deep sleep follows an epileptic fit. It also include picking at bedclothes and playing with hands and muscular twitching.

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