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Original Research Paper

Ayurveda

Conceptual Review On Trigeminal Neuralgia W.S.R. To Anantavata

Dr Bhargavi N. Acharya* 3rd Year PG Scholar, PG Department of Kayachikitsa, J. S. Ayurveda Mahavidhyalaya, Nadiad. *Corresponding Author

Prof. Dr. Manish V. Patel 3rd Year PG Scholar, PG Department of Kayachikitsa, J. S. Ayurveda Mahavidhyalaya, Nadiad.

ABSTRACT Trigeminal neuralgia is a devastating disorder which impairs daily functionality and quality of life of patients. It is a painful neurological condition of the face and function of trigeminal nerve is disrupted. Despite numerous available pharmacological and surgical approaches, the results are not satisfying. Due to the intensity of pain some individuals avoid daily regimen or social contact because they fear an impending attack. The resemblance of trigeminal neuralgia with Anantvata is mainly based upon the precise clinical features and pathogenesis. It is explained as shiroroga involving simultaneous vitiation of Tridoshas producing severe pain at unilateral side of face. So an attempt is made to understand of trigeminal neuralgia from ayurveda principles.

KEYWORDS : Trigeminal Neuralgia, Ayurveda, Anantvata, Shiroroga

INTRODUCTION

Trigeminal neuralgia was previously known as tic duolourex/ trifacial neuralgia/ fothergills/prospalgia. It is a chronic pain condition characterized by recurrent brief episodes of pain which is electric shock like, sudden and brief. Pain is evoked by trivial stimuli. The females are more prone to trigeminal neuralgia than the male (2:1). Usually, it is seen in middle aged patients of 5th -7th decade. Prevalence is 5.7 and 2.5 per lakh women and men respectively. Aetiology is unknown in majority of the cases. Demyelination and vascular compression are the two probable mechanisms for trigeminal neuralgia. Diagnosis is mainly based on clinical features but trigeminal nerve examination, MRI and EEG is also helpful. Treatment includes pharmacological and surgical procedures.

AIMS & OBJECTIVES

- To study trigeminal neuralgia in terms of ayurveda.
- To understand the etiological factors and pathogenesis of trigeminal neuralgia through ayurveda perspectives.

MATERIAL AND METHODOLOGY

Classical/non classical modern medical textbooks, classical/non classical ayurveda textbooks and published ayurveda articles were collected. This material was critically appraised to find out the ayurveda perspective of trigeminal neuralgia.

Literature Review

Trigeminal Neuralgia from Modern Perspective

Trigeminal neuralgia (TN) is a chronic disorder characterized by paroxysms of electric shock-like pain involving the unilateral side of the face. The pain is sudden, usually unilateral, severe, brief, stabbing, recurrent. The pain may occur in the areas supplied by the trigeminal branches of the ophthalmic, maxillary, and mandibular. The pain is triggered by vibration or contact with the cheek, teeth brushing, nose blowing, eating, drinking, talking or being exposed to the wind. According to Love and Coakham, the majority of trigeminal neuralgia cases are caused by compression of the trigeminal nerve roots, usually within a few millimeters of entry into the pons. Other rare causes are ganglion, or tumor or amyloid and small infarcts or angiomas in pons and medulla. In few cases it is idiopathic.

The diagnosis can be done by ICHD-3 (International Classification of Headache Disorders edition 3) criteria for diagnosis of trigeminal neuralgia. In the trigeminal neuralgia pain is followed by a refractory period of upto 2-3 minutes. According to IASP (International Association for the Study of Pain) classification there are 3 subtypes of TGN:1) Idiopathic 2) Classical 3) Secondary. According to IHS classification it can be of 2 types 1) classical 2) symptomatic

Common medications that used to control the pain of trigeminal neuralgia are carbamazepine, phenytoin, gabapentin and clonazepam. Other treatment modalities are peripheral neurectomy, Gasserian ganglion injection, intracranial decompression of trigeminal ganglion etc. but these modalities show unsatisfactorily results. As the time passes, trigeminal neuralgia becomes more severe with time and the refractory periods between the episode of pain decreases. It will lead to psychological impairment in patients like depression or anxiety and social isolation. These patients are also prone for suicidal attempts.

Trigeminal Neuralgia from Ayurveda Perspective

Since vitiated dosha creates various kinds of diseases depending on the location and aetiology, there are innumerable diseases. Anantavata is similar to trigeminal neuralgia in terms of signs & symptoms and pathogenesis according to ayurveda. So we can corelate it with Anantavata. Anantavata compiles two words- Ananta + vata. Ananta means limitless, eternal or beyond tolerance. Vata refers to vata dosha. According to Amarakosa prakampana Anantvata means which shows the nature of shock like jolts of pain. Ananta vata is described in all the brihattrayis under the heading shiro roga. The headache in Anantvata is severe, uncontrolled, beyond tolerance and is incurable.

Hetu of Trigeminal Neuralgia

Hetu or Nidana is defined as a factor that causes a complete disease process in the body, either instantly or after a specified period.

Trigeminal neuralgia Hetu can be classified as:

- Nija hetu: exposure to cold wind, drinking cold water
- Agantuja hetu: trauma or injury to nerve
- Nidanarthkara roga: nerve compression by meningioma, acoustic neuroma, arteriovenous malformation, vascular defects secondary to disease like multiple sclerosis

Samprapti

Because of the Nidana sevana tridosha prakopa occurs which leads Rakta dushti. Here because of the vitiation of Tridosha and Rakta it leads to Khavaigunya and Sthanasamshraya in sira. so the Dosha-dushya Sammurchhana occurs in Greevayapristhabhaga(back of neck), Manya sampeedaya (pressurizes the nerve at petrous temporal area/ neuro-vascular compression of trigeminal nerve) which ultimately

leads to manifestation of symptoms along the areas of the nerve distribution. Prasarana (radiation) to other sites like periocular region, eyebrows and temple regions are because of the vataprakopa. These vitiation of Tridosha and Rakta ultimately leads to demyelination and hyperexcitability of the nerves.

Samprapti Ghatak

Dosha: Tridoshaja
Dushya: Rasa, Rakta, Majja
Strotodushti: Rasavaha, Raktavaha, Majjavaha
Adhisthana : Shirsha
Vyakti sthana: Shirsha
Vyadhi swabhava: Ashukari
Rogamarga:- Marmasthisandhi

Lakshna

Clinical pictures of trigeminal neuralgia shows the dominance of Vata dosha. The Vata prakopa symptoms of trigeminal neuralgia includes excessive pain in Manya and ghata(nape of neck) which ultimately affects the region of Akshi, Bhru, Shankha pradesha and these dosha create vibrations especially in the lateral side of Ganda pradesha. In the end Hanugraha and Akshiroga are produced.

Management

Anantavata is vatapradhana tridoshaja roga. Classical management includes Uttarabhakta sarpi, Kaya and Sirovireka. These both will pacify and expels the vitiated Pitta and to improve quality of the dhatus. Trisnehadharana and Ghrita-ksheer seka also gives nourishment to skin and dhatus. Internally protein rich diet consisting of soups of wild variety of animals, medicated milks, ghees and sweets made of ghee and jaggery are advised as nutrient supplements. Role of Murdhatails are well appreciated. It relives dryness and stiffness of body parts, provides strength to skull and neurons of brain, prevents various types of neurological pain affecting head and neck. Considering all these, treatment seems to be aimed upon- Vatanulomana, Agnideepana, Raktaprasadana, Brihamana and Rasayana. Agnikarma, and Lepa also shows marvellous results in trigeminal neuralgia.

DISCUSSION

As the time progresses, new diseases are emerging due to change in lifestyle and other infections. Ayurveda principles and concepts are endless and its applications can be useful in present era as well. Many neurological disorders presenting with head and facial pain can be understood under the heading of Shiroroga in ayurveda literature. Anantvata is a disease which has close proximity with trigeminal neuralgia in both symptomatology and pathogenesis.

The disease originates due to Nija, Agantuja, Anyavyadhi upadravakruta hetu. According to Acharya Chakrapani Rakta is also involved in all the Shiroroga. In Anantavata vitiated Tridosha along with Rakta obstructs the Shira and causes pain in cheek, temporal region, nape of neck, eyes and Hanugraha. This is similar pathology that occurred in trigeminal neuralgia. Acharya Susruta emphasizes that when Rakta is involved and doshas ate deeply located in marmasthana, the condition becomes hard to treat or curable by surgical intervention. Understanding trigeminal neuralgia through the lens of Anantvata not only allows for a deeper grasp of its etiology and progression but also opens avenues for integrative treatment strategies rooted in ayurveda.

CONCLUSION

The term Anantvata itself denotes difficulty in curing nature as substantiated by western system also. Understanding the pathology of trigeminal neuralgia in terms of ayurveda will help to initiate the appropriate line of treatment for the patient well being. Along with specific treatment modalities, Dincharya and Sadvritta palan plays a significant role in reducing the symptoms,preventing reoccurrence and complication of the disease.

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Conflict of Interest

No any conflict of interest.

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