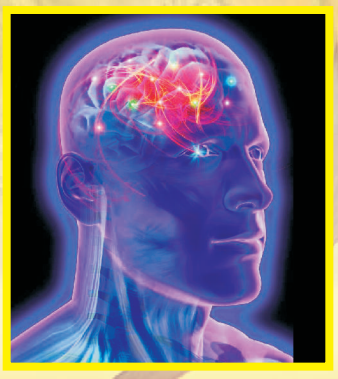
Yogic Management of

EPILEPSY





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EPILEPSY

Epilepsy is a **chronic neurological disorder** characterized by recurrent unprovoked seizures also known as fits. These seizures are transient signs and/or symptoms due to abnormal, excessive or synchronous neuronal activity in the brain. Not all epilepsy syndromes are life long - some forms are confined to particular stages of childhood. Epilepsy should not be understood as a single disorder, but rather as a group of syndromes with vastly divergent symptoms but all involving episodic abnormal electrical activity in the brain.

The meaning of the term seizure needs to be carefully distinguished from that of epilepsy. Epilepsy refers to a clinical phenomenon rather than a single disease entity, since there are many forms and causes of epilepsy.

Symptoms of epilepsy

The main symptoms of epilepsy are repeated seizures. There are many different types of seizure, depending on the area of the brain affected.

In terms of their origin within the brain, seizures may be described as either *partial* (focal) or *generalized*. Partial seizures only involve a localized part of the brain, whereas generalized seizures involve the whole of both hemispheres. The term 'secondary generalisation' may be used to describe a partial seizure that later spreads to the whole of the brain.

Triggering factors

Certain environmental factors can lead to an increased likelihood of seizures in someone with epilepsy or in certain syndromes, for example:

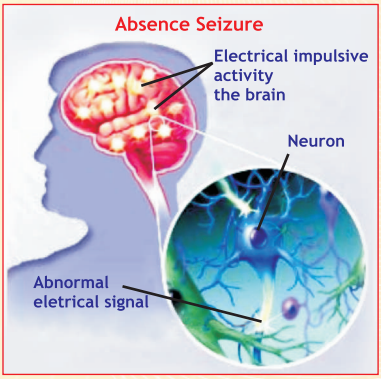
- Being asleep
- The transition between sleep and wakefulness (hypnogogia)
- Tiredness and sleep deprivation
- Illness

- Constipation
- Menstruation
- Stress or anxiety
- Alcohol consumption
- Pictures with excessive flashing

In terms of their origin within the brain, seizures may be described as either partial (focal) or generalized.

Partial seizures

In this type of seizure, only a localized part of the brain is involved, whereas generalized seizures involve the whole of both hemispheres. The term 'secondary generalisation' may be used to describe a partial seizure that later spreads to the whole of the brain.

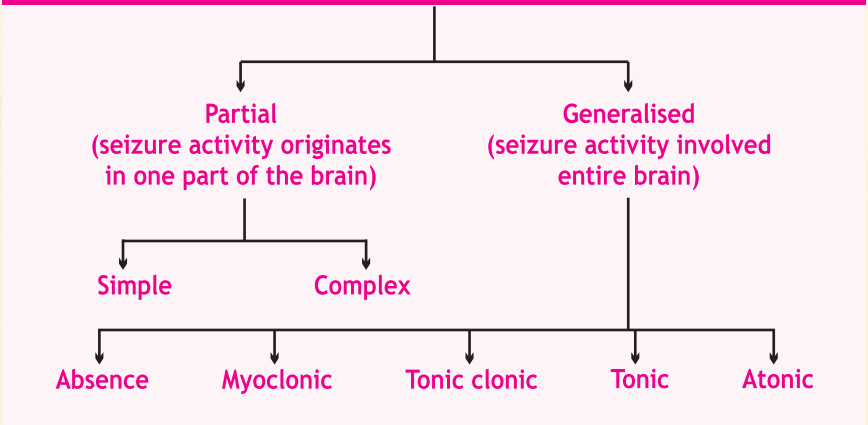


Generalized seizures :

Generalized seizures are divided according to the effect on the body but all involve loss of consciousness. They can be sub-classified into a number of categories, depending on their behavioural effects :

- *Absence seizures* involve an interruption to consciousness where the person experiencing the seizure seems to become vacant and unresponsive for a short period of time (usually up to 30 seconds). Slight muscle twitching may occur.
- *Myoclonic seizures* involve an extremely brief (< 0.1 second) muscle contraction and can result in jerky movements of muscles or muscle groups.
- *Clonic seizures* are myoclonus that are regularly repeating at a rate typically of 2-3 per second.
- *Tonic-clonic seizures* involve an initial contraction of the muscles *(tonic phase)* which may involve tongue biting, urinary incontinence and the absence of breathing. This is followed by rhythmic muscle contractions *(clonic phase)*. This type of seizure is usually referred to the term 'epileptic fit'.

Seizure Classification



Continuous seizures

Status epilepticus refers to continuous seizure activity with no recovery between successive seizures. When the seizures are convulsive, it is a life-threatening condition and emergency medical assistance should be called immediately if this is suspected.

Neonates (<1 month)	♦ Perinatal hypoxia and ischemia ♦ Intracranial hemorrhage and trauma ♦ Acute CNS infection ♦ Genetic disorders ♦ Drug withdrawal ♦ Developmental disorders ♦ Metabolic disturbances (hypoglycemia, hypocalcemia, hypomagnesemia, pyridoxine deficiency)
Infants and children (>1 month and <12 years)	♦ Febrile seizures ♦ CNS infection ♦ Developmental disorders ♦ Trauma ♦ Idiopathic ♦ Genetic disorders

Adolescents (12-18 years)	♦ Genetic disorders ♦ Infection ♦ Brain tumor ♦ Illicit drug use ♦ Idiopathic
Young adults (18-35 years) Older adults (>35 years)	♦ Trauma ♦ Alcohol withdrawal ♦ Illicit drug use ♦ Brain tumor ♦ Idiopathic ♦ Cerebro-vascular disease ♦ Brain tumor ♦ Alcohol withdrawal ♦ Metabolic disorders ♦ Alzheimer's disease and other degenerative CNS diseases ♦ Idiopathic

Management of Epilepsy

Dietary Management

A ketogenic diet was one of the treatments used before Anti-Epileptic Drugs were available. A ketogenic diet is high in fats and low in carbohydrates and protein, and may make seizures less likely by altering the chemical composition of the brain. However, a high-fat diet is linked to serious health conditions, such as diabetes and cardiovascular disease, so is not generally recommended. A ketogenic diet is advised for children with seizures that are difficult to control and have not responded to AEDs. The diet has been shown to reduce the number of seizures in some children. It should only be used under the supervision of an epilepsy specialist with the help of a dietitian.

- Regularize your eating habits. Do not skip any meals.
- Drink adequate quantity of water in a day.
- Avoid spicy and junk food
- Avoid excessive intake of potatoes, rice etc.

Yogic Management

Yoga is supposed to reduce the hyperactivity of the systems of the body including brain. The regular practice of Yoga may help to prevent on set of seizures and reduce the intensity in some cases. Yoga could be a best add-on treatment along with medication.

The practices which are helpful in the management of Epilepsy:

Kriyas: Jalneti, Sutra neti

Yogic Sukshma Vyayama: Buddhi tatha Dhriti shakti vikasaka, Medha shakti vikasaka, Ucharana shakti tatha vishuddhi chakra shuddhi kriya

Yogic Sthula Vyayama: Urdhwagati

Yogasanas: Uttanapadasana, Pawanamuktasana, Vajrasana, Vakrasana, Ardha Matsyendrasana, Gomukhasana, Bhujangasana, Tadasana, Katichakrasana, Shavasana.

Pranayama: Nadishuddi, Chandra nadi pranayama, Ujjayi, Sitali and Bharamari.

Bandha: Jalandhara bandha

Meditation: Breath awareness, Om Meditation or guided meditation focusing on the affected part.

Special practice: Yoga Nidra

Yogic diet: (Mitahara) : Alkaline foods with less oil, salt and spices.

Note: The inverted postures and the hyperventilation practices (forceful breathing) are to be avoided.

Disclaimer : This literature is for general awareness about disease management through Yoga. It should not be considered as treatment prescription.

YOGIC PRACTICES FOR THE MANAGEMENT OF EPILEPSY


Jalneti


Sutraneti


Tadasana


Katichakrasana


Uttanapadasana


Ardhahalasana


Pavanamuktasana


Vajrasana


Shashankasana


Ardha Matsyendrasana


Gomukhasana


Bhujangasana


Shavasana


Nadishodhana Pranayama


Bhramari Pranayama


Dhyana

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Free Publicity Material not for Sale

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Printed by : Dolphin Printo-Graphics # 011-23593541/42