

A Clinical Trial of Mentat in Patients with Various Types of Epilepsy

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ABSTRACT

Thirty one adult epileptics participated in this trial. Aged between 23-42 years, 6 were newly diagnosed cases, while the remaining 25 were old ones already taking some antiepileptic drugs.

Mentat, 2 tablets b.i.d., along with the other drugs for a period of six weeks brought about significant reduction in seizure frequency. Thus Mentat served as a valuable adjuvant to commonly used antiepileptic drugs. No side effects were observed with Mentat administration.

INTRODUCTION

Epilepsy is defined as a condition in which the patient is prone to epileptiform seizures. An epileptic seizure or fit is caused by a transient, excessive and abnormal discharge of nerve cells. Epilepsy is not a homogenous entity. It varies widely in its forms, aetiology and severity. It is clearly a major public health problem encountered in 1 in 20 people having an epileptic seizure at some point in their lives. One in 200 people in a general population have epilepsy at one time or other (UK, US based data).

In more than 95% of epileptics the disease is active for a relatively short period. It is suggested that early treatment may contribute to a good, overall, long-term prognosis.

Drug treatment of epilepsy has improved considerably over recent years and there has been much better understanding of the pathophysiology of the disease as well as the principles of drug treatment. However, about 30% of epileptics cannot achieve complete control. Treatment failures could be attributed to any of the following reasons: Monotherapy, poor patient compliance, side effects and toxicity of the drugs, psychological factors, non-epileptic seizures and last, but not the least, hidden neurological disorders existing without being detected.

Keeping in view this high rate of treatment failures, we undertook the present trial using Mentat as an adjuvant to the commonly used antiepileptic drugs. It was conducted at the Department of Medicine, S.C.B. Medical College, Cuttack.

MATERIAL AND METHODS

Thirty one adults with various types of epilepsy were included in the study. Secondary causes for the symptomatic seizures were ruled out by such investigations as CT scan, EEG, angiography and various biochemical parameters of blood. The patients were in the age range of 23-42 years (mean age 30.3 years). Of the 31 cases, 6 were newly diagnosed and 25 were old ones on some antiepileptic drugs. In none of these 25 cases was there any control of epilepsy. All of them were put on Mentat, 2 tablets b.i.d., along with the antiepileptic drugs. The six new cases were put on either phenytoin sodium, valproate or carbamazepine, depending on the type of epilepsy, response, sensitivity etc. With a further addition of Mentat, for a period of six weeks, the frequency and severity of the epileptic disorders were revalued.

The chief characteristics of the thirty one patients are shown below:

Positive family history	-	01
Males	-	24
Females	-	7
(Pregnant 1; Non-pregnant 6)		
Case with mental retardation	-	1
Alcohol excess (abuse)	-	1
Side effects needing discontinuance of Mentat	-	Nil

RESULTS

Six weeks after adding Mentat at a dose of 2 tablets b.i.d. to the usual antiepileptic regimen, there was significant reduction in seizure frequency (Table).

Type of epilepsy	No.	Frequency of attacks per week	
		Before Mentat	After Mentat
Generalised tonic clonic seizures	24	3-9	1-6
Partial	Simplex	1	2-12
	Complex	2	3-13
Psychogenic attacks (Pseudoseizures)	3	2-7	0-2
Alcohol excess	1	2-3	0

DISCUSSION

Mentat is a new remedy containing certain important Ayurvedic ingredients such as *Bacopa monnieri* (Jalbrahmi), *Centella asiatics* (Mandookaparni, Brahmi), *Withania somnifera* (Ashwagandha), *Evolvulus alsinoides* (Shankhapushpi), *Nardostachys jatamansi* (Jatamansi) etc besides many others.

In the ancient system of Ayurveda these ingredients have been used since long as nervine tonics for organic as well as functional nervous system disorders. In the present study, Mentat was used as an adjuvant to various antiepileptic drugs. However, monotherapy with Mentat needs to be evaluated to assess whether it has any antiepileptic potential. We plan in the near future to use Mentat alone in epileptic convulsions. This type of study needs a lot of care and caution. Furthermore, EEG and CT scan changes before and after monotherapy with Mentat would throw further light on its clinical efficacy in epilepsy.

A lot of antiepileptic drugs have been used so far in various epileptic disorders. But because of their many side effects as well as toxicity, continued therapy has had to be given up. Moreover, the high cost of the newer drugs restricts their use. Other problems to contend with are noncompliance by the patient and prolonged use (often life-long). Considering these drawbacks of the commonly used anticonvulsants, the present study was undertaken to assess the antiepileptic potential of a safe, age-old and relatively economical herbal remedy. Though the results of the present study are quite encouraging, it is still premature to say that monotherapy with Mentat would prove ideal.

No toxic effects were observed during the short-term use of Mentat. Since the present study is a small one and the duration of treatment and follow-up observations very limited, further trials on a larger, controlled scale at several centres for longer periods. Are recommended.

CONCLUSION

The results of our study indicate that orally administered Mentat served as effective adjuvant to the commonly used antiepileptic drugs. No side effects whatsoever have been observed with Mentat.

REFERENCES

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