

A clinical study on the role of Brihat Dashamoola Taila Nasya and Laghu Sutashekhara Rasa in the management of Ardhavabhedaka w.s.r. to Migraine

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ABSTRACT: Migraine is one of the common causes of recurrent headache. According to IHS, Migraine constitutes 16% of the primary headache and affects 10-20% of the general population. The diagnosis is mainly based on clinical history. Moreover, unilateral headache with paroxysmal nature is the only symptom mentioned for the disease Ardhavabhedaka by ancient scientists. Ardhavabhedaka has been explained as Tridoshaja by Acharya Sushruta, Vata-Kaphaja by Charaka and Vataja by Vagbhata. But the different quality of pain such as Toda, Bheda, etc. describes the Vishama nature of Vata dosha. A study in 2002 that analyzed over 800,000 cases of migraine reported that most migraines are not treated according to any expert recommendations or accepted evidence. Our Acharyas have mentioned Nasya Therapy as the master key for all urdhavajatrugata vikaras. Considering all such things the present study was selected, in which total 44 patients were registered and were randomly divided into two groups. In group A, Laghu Sutashekhara Rasa & group B, Brihat Dashamoola Taila Nasya along with Laghu Sutashekhara Rasa was given for 6 weeks. In group A & in group B, maximum number of patients i.e., 35% & 52.94% respectively showed marked improvement.

Key words: Ardhavabhedaka, Migraine, Brihat Dashamoola Taila, Laghu Sutashekhara Rasa

INTRODUCTION

According to IHS, Migraine is the most common neurovascular headache, which constitutes 16% of the primary headache and affects 10-20% of the general population. Hence WHO ranks Migraine among the World's most disabling medical illness.¹³ Ardhavabhedaka can be scientifically correlated with Migraine due to its cardinal feature 'half sided headache' which is also explained by commentator Chakrapani as Ardha Mastaka Vedana¹ and also due to its paroxysmal nature. Ardhavabhedaka has been explained as Tridoshaja by Acharya Sushruta³, Vata-Kaphaja by Charaka² and Vataja by Vagbhata⁷. The various types of pain explained by different Acharyas suggest the Vishama nature of Vata dosha. Moreover, the symptoms nausea, vomiting and giddiness are also seen, which shows the involvement of Pitta dosha, which can be explained as under:

- ◆ Vomiting & burning sensation symptoms are seen when Prana Vayu combines with Pitta.⁴
- ◆ Udana Vayu with Pitta results in murchha, daha, bhrama and klama.⁵
- ◆ The symptom bhrama is due to Rajoguna and Pitta-Vata dosha involvement.⁶

The modern drugs are not acceptable due to their drawbacks - drug dependence, drug withdrawal syndrome, relapse of headache within hours and chances of getting chronic headache.¹³ In Ayurveda Nasya Therapy is considered as master key for all urdhavajatrugata vikaras. Hence Brihat Dashamoola Taila Nasya has been selected from Bhaisajya Ratnavali Shiro-roga adhikara⁸. The compound drug selected for the study "Laghu Sutashekhara Rasa" is described in Rasa Tarangini⁹, which is having digestive, anti-oxidant, anti-inflammatory properties.

Aims and Objectives:

- 1) To study the etiopathogenesis of Ardhavabhedaka - Migraine from Ayurvedic and modern point of view.
- 2) To evaluate the efficacy of Laghu Sutashekhara Rasa alone in the management of Ardhavabhedaka.
- 3) To assess the efficacy of Brihat Dashamoola Taila Nasya with Laghu Sutashekhara Rasa in the management of Ardhavabhedaka.

MATERIAL AND METHODS

Source of data - Patients of Ardhavabhedaka (Migraine) fulfilling the inclusion criteria attending OPD of Shalakya, IPGT & RA, GAU, Jamnagar were selected.

A detailed performa was prepared incorporating Ayurvedic and modern points of Ardhavabhedaka

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(Migraine). An assessment was made on change in clinical feature before and after treatment. The scoring was given to each symptom ranging from 0 - 4.

Inclusion criteria :

Patients between the age group of 16 to 60 years having recurrent attacks of headache, mostly unilateral in site, variable in intensity, frequency and duration with or without nausea, vomiting, aura and GI tract symptoms were included in the present study.

Exclusion criteria :

Patients suffering from sinusitis, hypertension, and fever, secondary headache caused by meningitis, tumor, encephalitis, cervical spondylitis and refractive errors; also patients using any other systemic drugs which may alter the results of the study were excluded.

Ethical clearance :

The study was cleared by the ethical committee of the institute. Written consent was taken from each

patient willing to participate before the start of the study. Patients were free to withdraw their name from the study at any time without giving any reason.

Grouping of Patients :

Total 44 patients were registered from the O.P.D. of Dept. of Shalakya of I.P.G.T. & R.A., Gujarat Ayurveda University, Jamnagar hospital and randomly divided into 2 groups.

Group A : Laghu Sutashekhara Rasa (LSR group)

Group B : Brihat Dashamoola Taila and Laghu Sutashekhara Rasa (CG group)

LSR Dose : 500 mg twice a day.

Nasya Dose : 4-8 drops in each nostril, 3 sittings of 7 days each with 1 week gap (alternate week)

Duration : 6 weeks

Follow Up : 2 months

TABLE NO. 1 : CRITERIA FOR ASSESSMENT OF THE CLINICAL SYMPTOMS DEPENDING ON THE SEVERITY :

Severity of Headache	Nausea
0 No headache	0 Nil
1 Mild headache, patient is aware only if he/she pays attention to it	1 Occasionally
2 Moderate, but does not disturb the routine work	2 Moderate headache, can ignore at times
3 Severe headache can't ignore but he/she can do his/her usual activities	3 Severe, disturbing routine work
4 Excruciating headache can't do anything	4 Severe enough, small amount of fluid regurgitating from mouth
Frequency of Headache:	Vomiting
0 Nil	0 Nil
1 ≥ 20 days	1 Only if headache does not subside
2 15 days	2 Vomiting 1-2 times
3 10 days	3 Vomiting 2-3 times
4 ≤ 5 days	4 Forced to take medicine to stop vomiting
Duration of Headache :	Vertigo
0 Nil	0 Nil
1 1-3 hours/day	1 Feeling of giddiness
2 3-6 hours/day	2 Patient feels as if everything is revolving
3 6-12 hours/day	3 Revolving signs + black outs
4 More than 12 hours/day	4 Unconscious
Aura	Gradation for Associated symptoms
0 Nil	0 No symptoms.
1 Lasts for 5 minutes	1 Mild (can do his/her work).
2 Lasts for 15 minutes	2 Moderate (forced to stop work).
3 Lasts for 30 minutes	3 Severe (forced to take rest).
4 Lasts for 60 minutes	4 Excruciating (forced to take medicine)

Advice Given to Patient :

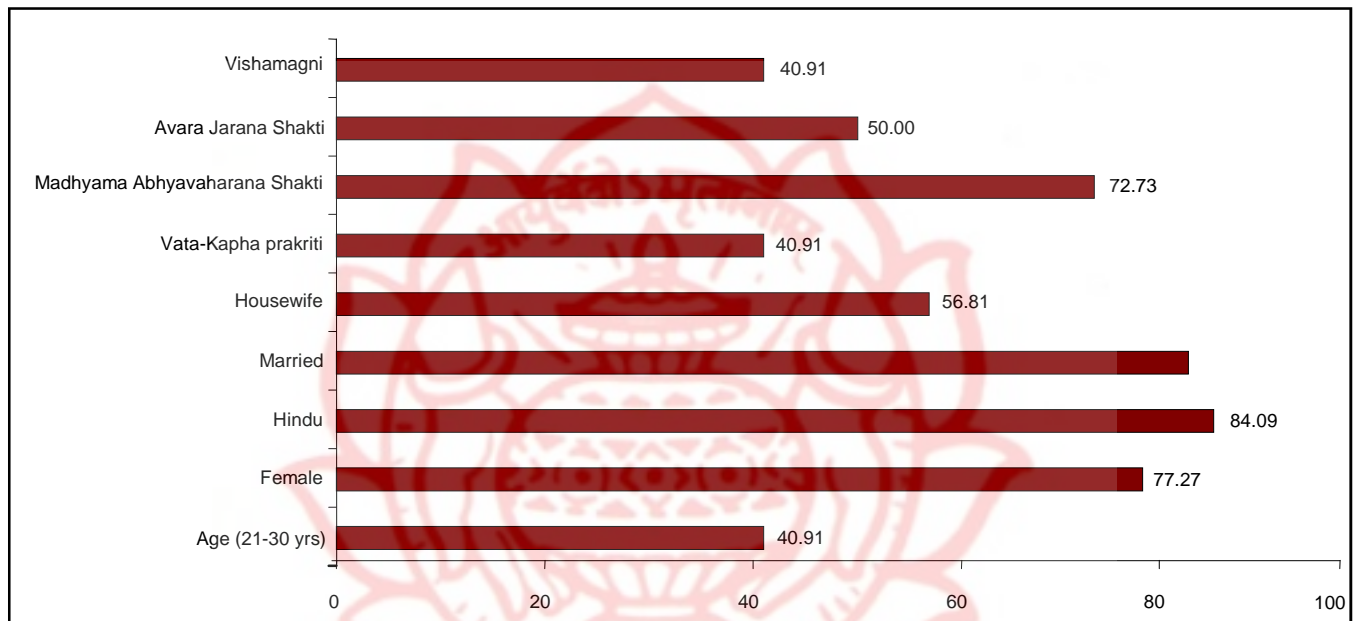
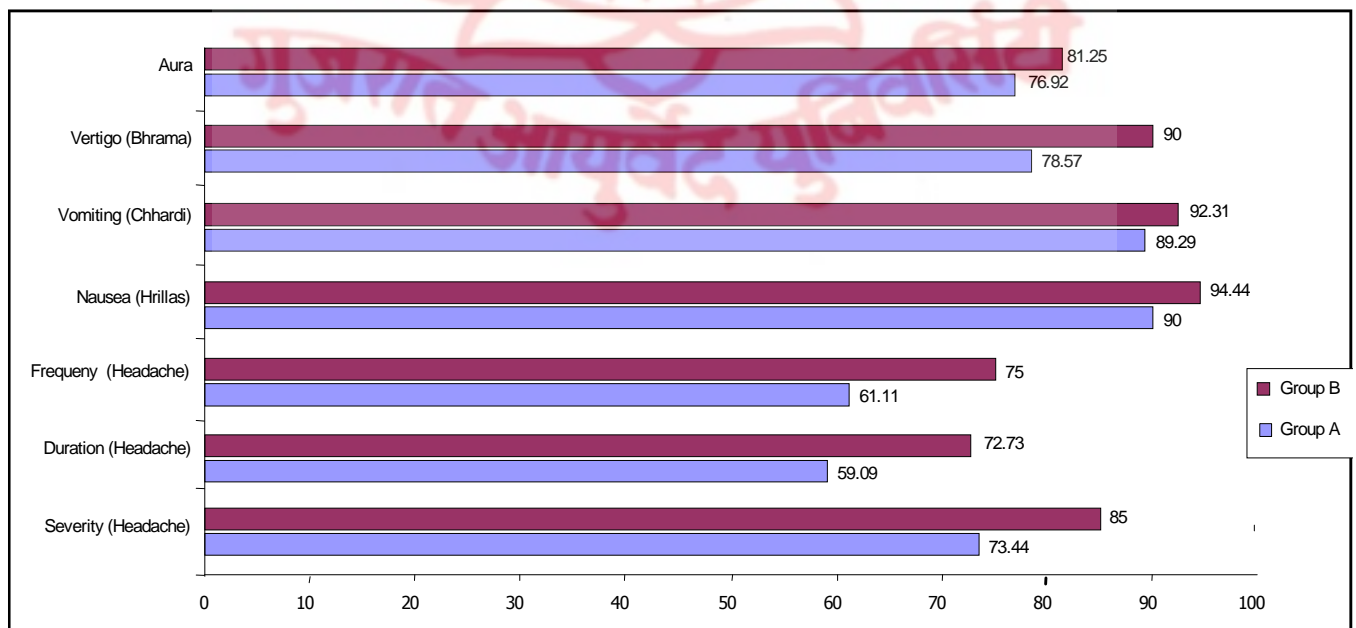
- ◆ Diet - avoid spicy and junk food.
- ◆ 10 gm of Ghee or sweet prepared of Ghee was advised to take daily morning.
- ◆ Shavasana and other relaxation exercises were advised for at least one hour daily.

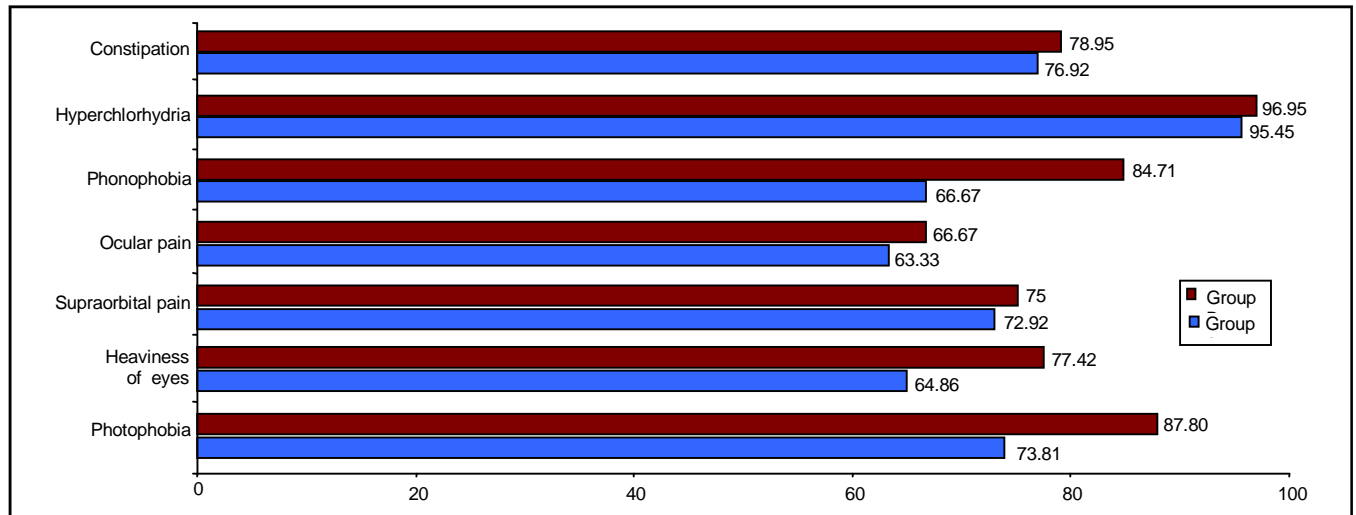
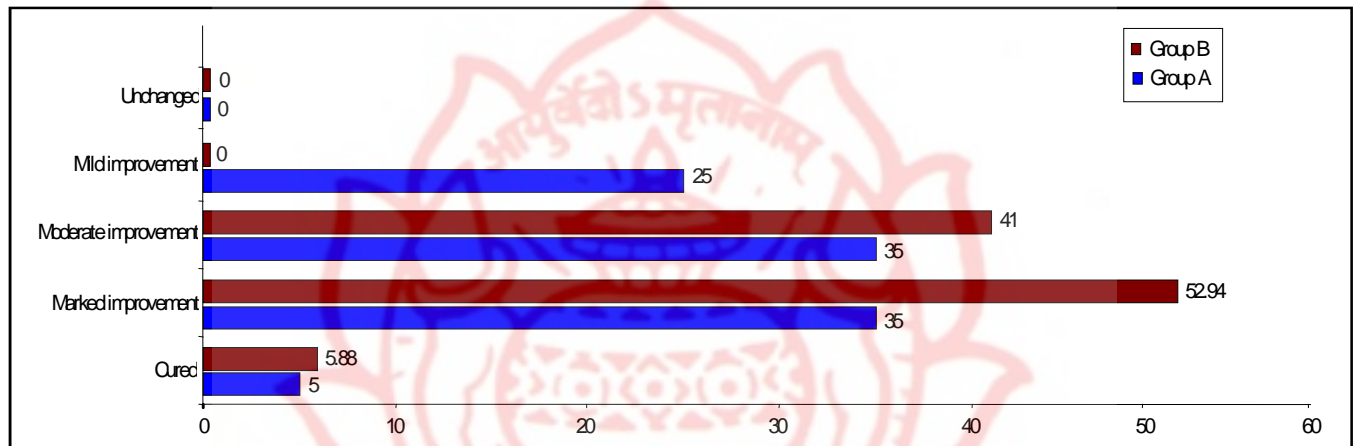
OBSERVATIONS & RESULTS

Total 44 patients were registered (23 in Group A and 21 in Group B), out of which 37 had completed (20 in

Group A and 17 in Group B) and 7 discontinued (3 in Group A and 4 in Group B). The observation of all 44 patients are shown in Graph No.1.

Effect of Therapy on Chief Complaints : Group A : Relief in severity (73.44%), duration (59.09%) & frequency of headache (61.11%) & nausea (90%), vomiting (89.29%), vertigo (78.57%) & aura (76.92%). Group B : Relief in severity (85%), duration (72.73%) and frequency (75%) of headache and nausea (94.44%), vomiting (92.31%), vertigo (90%) & aura (81.25%).

GRAPH NO. 1 : GENERAL OBSERVATIONS (n=44):**GRAPH NO. 2 : EFFECT OF THERAPY ON CHIEF COMPLAINTS (n=37):**

GRAPH NO. 3 : EFFECT OF THERAPY ON ASSOCIATED COMPLAINTS :**GRAPH NO. 4 : OVERALL EFFECT OF THERAPY ON 44 PATIENTS OF ARDHAVABHEDAKA :**

Effect of Therapy on Associated Complaints :
 Group A : Relief in Photophobia (73.81%), Heaviness of eyes (64.86%), Supraorbital (72.92%), Ocular pain (63.33%) Phonophobia (66.67%), Hyperchlorhydria (95.45%) and Constipation (76.92%)

Group B : Relief in Photophobia (87.80%), Heaviness of eyes (77.42%), Supraorbital (75%), Ocular pain (66.67%) Phonophobia (84.71%), Hyperchlorhydria (96.55%) and Constipation (78.95%).

The overall effect of therapy showed that in Group B, 52.94% patients had marked improvement, followed by 41.18% moderate improvement and 5.88% had complete improvement. In Group A, marked and moderate improvement was seen in 35% each, 25% had mild improvement and 5% patients had complete improvement.

DISCUSSION

The symptoms 'half sided headache' with its paroxysmal nature is explained in almost all the texts.

Only Acharya Sushruta³ has mentioned Bhrama along with headache as a symptom. The various types of pain explained by different Acharyas suggest the Vishama nature of Vata dosha. Ardhavabhedaka can be differentiated from other Shiro-roga such as Suryavarta, Shankha, etc. only due to its cardinal feature "half sided headache" and also due to its paroxysmal nature³. This cardinal feature also differentiates it from Amlapitta because nausea & vomiting are seen in both the diseases. If the disease Ardhavabhedaka is not treated or neglected due to any reason, then it may become chronic or may lead to various complications such as karna-akshi nasha².

Probable mode of action of Laghu Sutashekhara Rasa¹⁰⁻¹² :

Ushna Virya (66.67%), Katu Rasa (40%) and Tikta Rasa (20%) have Deepana - Pachana Karma, which causes Amapachana and thus provides proper metabolism and ultimately balances the Agni.

Snigdha Guna (28.57%), Madhura Vipaka (66.67%) and Madhura Rasa (20%) having the property

