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ROLE OF SHADBINDU TAILA NASYA IN THE MANAGEMENT OF ARDHAVBHEDAKA W.S.R. TO MIGRAINE

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ABSTRACT

Background: *Ardhavbhedaka* is one of the most common disease which affect large number of world population. In this, pain mainly occurs in *lalata, akshi, bhru, shankha* and *karna* on anyone of the side i.e. half of the head, hence the name "*Ardhavbhedaka*." It can be clinically correlated with migraine in modern science. *Charaka* Samhita mentioned nasya karma as the master key for all *shirorogas*, hence this study has been carried out with *Shadbindu taila nasya* in *Ardhavbhedaka*. **Aim:** To study role of *Shadbindu taila nasya* in the management of *Ardhavbhedaka* w.s.r. to migraine. **Objectives:** To study role of *Shadbindu taila nasya* to reduce the symptoms of *Ardhavbhedaka* w.s.r. to migraine. **Materials and Methods:** Single clinical trial of *Shadbindu taila nasya* given for 7days with 7 days gap for 2 settings along with *Pathyadi kwatha* 20ml twice for 28 days. **Conclusion:** *Shadbindu taila nasya* gives significant relief in *Ardhavbhedaka.*

KEYWORDS:- *Ardhavbhedaka*, Migraine, *Shadbindu taila nasya, Pathyadi kwatha*.

INTRODUCTION

In *Ayurveda* Migraine can be compared to *Ardhavbhedaka* characterized by pain in half side of head.[1] According to *Acharya Charaka Vata* either alone or in combination with *Kapha*, seizes the one half of head and causes *Ativedana* (acute neuralgic pain) in the sides of the *Manya* (neck), *Bhroo (*eyebrow), *Shankha* (temple), *Karna* (ear), *Akshi* (eyes) or *Lalatardhe* (forehead of one side). If the condition becomes aggravated, it may even impass the functions

of *Netra* (eye) and *Karna (*ear).[2] The major etiological factors of *Ardhavabhedaka* are *aharaja, viharaja* and *manasika vyadhi*. As per *Aharaja* concern *Vishamashana, Adhyashana, Anashana & Rookshahara sevana* are main factors. *Agnimandya* along with *Tridosha dushti* also contributes in the pathogenesis of the disease. *Ratri jagarana, Diwaswapa, Atapa/dhupa sevana, Chinta, krodha* and also trigger migraine headache.[3]

According to *Acharya Vagbhata*-pain in half of considered the head is as *Ardhavbhedaka .Acording to Acharya Sushruta* - Severe tearing and pricking pain in one half of the head associated with giddiness. These featuresappear every fortnightly or ten days or any time.[4]

Ardhavbhedaka has been explained *as tridoshaja* by Acharya *Sushruta*.[5]
According to modern science, Migraine is the most common cause of vascular headache. Migraine is a benign and recurrent syndrome of headache, nausea, photophobia and other symptoms of neurological dysfunctions.[6] Prevalence rate of the Migraine at about 6 to 8% in men and 12 to 15% in women.[7]

In *Ayurveda Nasya* therapy is considered as one of the most promising treatment for all the *urdhwajatrugat vikaras. Nasya karma* involve administration of herbal oil/drugs/liquids into the nostrils which removes the blockages of the nasal pathways, reduces feeling of heaviness in head region & relief mental stress. These effect of *Nasya* gives significant relief in diseases associated with nose & head region such as; migraine (*Ardhavbhedaka*).

Ardhavbhedaka mainly caused due to the predominance of *Vata dosha* or *Vata kapha dosha*. With this back ground present study has been intended to evaluate the combined efficacy of *Shadabindu taila nasya* karma with *Pathyadi kwath* as *shamanoushadhis* in the management of *Ardhavbhedaka.*

AIMS AND OBJECTIVE

To assess the combined effect of *Shadbindu taila Nasya* and *pathyadi kwath* internally in *Ardhavbhedaka.*

MATERIAL AND METHODS

A 29 year Female was selected during the opd of department of *Shalakyatantra* having complaints of throbbing pain over the right side of head, nausea, giddiness and photosensitivity since 1 and ½ year with no history of any systemic major illness. Attack of headache repeat at regular 10, 15, or 30 days interval or irregularity.

Investigations

Blood investigations:- Hb% - 11.2%

Total leucocyte count 7500/mm^3

Differential leucocyte count: WNL

ESR 18mm

RBS- 96mg/dl

Urine – Sugar nil

Albumin nil

Treatment

1. *Nidanparivarjana*
2. *Shadbindu taila nasya* given for 7days with 7 days gap for 2 settings along with *Pathyadi kwatha* 20ml twice a day for 28 days.

Procedure

Purva Karma

1) Prior to *Nasya, Snehan* was done on face, forehead, ears, and neck with *Tila Tail* approximately for 10 minutes.

2) *Sthanik Mrudu Swedan* was done.

Pradhan karma

1. Position Supine position with slightly extended neck.
2. Drug will be instilled into one nostril while other nostril kept closed the same process is carried out in other nostril also.
3. For administration of drug dropper was used and 6 drops were instilled in each nostril.

Pashchat karma

Mrudu Swedana was done and Patient is advised to spit out the collected secretions. Kaval with *luckewarm* water is given. *Pathya Apathya* must be followed

Assessment criteria

Symptoms	0	1	2	3	4
1.Severity of attack	No headache	Mild headache(aware only if pay attention to it)	Moderate headache (can ignore at times)	Severe headache (can't ignore but can do usual activities)	Excruciating headache (can't do any thing)
2.Frequency of headache	Nil	Once week	Twice week	Thrice week	Thrice week
3.Duration of headache	Nil	1-3hrs day	3-6hrs/ day	6-12hrs/ day	More than 12hrs /day
4. Nausea	No Nausea	Occasional episodes of brief duration	Frequency and prolonged nausea		
5.Vomiting	No Vomiting	Present before episode	Present before and after episode	Present during and after episode	
6. Giddiness	No Giddiness	Mild (can do his/her work)	Moderate (forced to stop work)	Severe (forced to take rest)	Very severe (forced to take medicine)
7. Aura	Absent	Present	Absent	No Change	No Change
8.Associated symptoms	No Symptoms	Mild (can do his/her work)	Moderate (forced to stop work)	Severe (forced to take rest)	Excruciating (forced to take edicine)

OBSERVATIONS AND RESULT

	B.T (Day 1)	Day 8	Day 15	Day 28
1.Severity of attack	3	3	2	1
2.Frequency of headache	3	2	1	1
3.Duration of headache	2	2	1	1
4.Nausea	2	2	1	0
5. vomiting	1	1	0	0
6.Giddiness	2	2	2	1
7. Aura	0	0	0	0
8. Associated symptoms	1	1	1	0

DISCUSSION

In *Ardhavbhedaka*, when episode of *Ardhavbhedak*a occurs person feels helpless and handicap. WHO has ranked Migraine among the world's most disabling medical illness, the scope for prevention of the disease in modern science is not satisfactory. So, an attempt has been made to study the complete aspect of disease and to find the best possible way for the betterment of mankind.

In modern drugs are not acceptable due to their drawbacks, drug dependence and drug withdrawl syndrome, relapse of headache within hours and chances of getting chronic headache.

The *nasya dravya* acts on head region spreads into various *strotasas* and pacify vitiated *doshas.* The *nasya* helps to open *srotasas* and remove accumulated toxins & *dosha*. The *nasya dravya* enter into general blood circulation, after absorption through mucous membrane, into venous sinuses of brain through inferior ophthalmic veins and *nasya dravya* also directly absorb into the cerebrospinal fluid. These drugs also irritate the mucous membrane of the nose, increase local secretions and eliminate the morbid doshas from the nasal canal.

Ardhavbhedaka mainly caused due to the predominance of *Vata dosha* or *Vata kapha dosha* and *Shadabindu taila* have the property of *tikshana* (irritant) and *ushana Guna*. *Shadbindu taila nasya* cures all types of *shirorogs*. So *Shadbindu taila* from *Chakradatta* which is having *vatkaphahar* properties has been selected for *shodana* therapy in the present study. Hence they do normalize the vitiated *Vata* and *Kapha doshas* and also *Pathyadi kwath* have predominantly *laghu ruksha gunas, ushna virya, madhur vipak,* and *tridoshahar properties.*

CONCLUSION

Considering the entire factors regarding treatment of *Ardhavbhedaka*, *Ayurvedic shodhana karma* help in management of this disease. In above case study, significant reduction was obtained in severity, frequency, duration of headache, Nausea, vomiting and associated symptoms after treatment. Hence, *Shadabindu taila Nasya* and *Pathyadi kwath* internally helps in management of *Ardhavabhedaka.*

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