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# AN AYURVEDIC APPROACH IN THE MANAGEMENT OF MIGRAINE- A CASE REPORT

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#### **ABSTRACT**

Background: Migraine is a widespread, chronic and intermittently disabling disorder characterized by recurrent headaches with or without aura. Allopathic management of Migraine is having only a short term effect. So, it is very necessary to adopt an effective treatment protocol. Case history: A 47 year old male patient presented with complaints of headache, nausea, vomiting and vertigo for the past 1 year. He has continuous, unilateral headache in frontal, parietal lobe in left side sometimes right side. For a better management she came to OPD of Immanuel Arasar Ayurveda Hospital. Materials and methods: Patient was managed with internal medicines and pratimarsha nasya using anutaila. Kapha vatahara line of management was followed. Result: Outcome was measured based on the relief of symptoms and was found clinically significant and this condition has not reoccurred for a period of 6months Conclusion: Kapha Vātahara treatments were adopted mainly focusing on Kapha. Pitta prakopa lakshanas have observed at some stages and was managed. With a thorough understanding of Dosha involved we can manage the complex conditions like Migraine.

Keywords: Ardhavabhedaka, Migraine, Nasya, Shira shula

# INTRODUCTION: A RYES In terms of actu

Migraine is a widespread, chronic and intermittently disabling disorder characterized by recurrent headaches with or without aura. Recent studies estimate the prevalence of migraine at about 6-8% in men and 12-15% in women.

In terms of actual numbers of attacks, combined figures from prevalence and incidence studies suggest 3000 migraine attacks occur a day for each million of the general population. According to WHO, the cause for migraine is not exactly known. Migraine can be defined as a

benign and recurrent syndrome of headache, nausea, vomiting other sign and symptoms of neurological dysfunctions. Migraine can often be recognized by its activators like stress (psychological as well as physical), lack of sleep, worries, red wine, menses, cigarette, etc. The authentic text books of medicine clearly state that there is no proper standardized treatment for migraine. Aspirin, Paracetamol Ibuprofen, and Diclofenac etc. a non-specific abortive therapy usually used for symptomatic relief from migraine. In Ayurvedic text, Acharayas have referenced rdhavabhedaka Shiro-roga. Acharaya Sushruta has mentioned 11 types of Shiro roga in Uttar Tantra. One among them is Ardhavabhedaka / in which paroxysmal unilateral headache associated with vertigo is seen and this can be associated with Migraine. As indicated by Acharaya Sushruta, it's tridoshaja disease according to Acharaya Charaka it is Vataja or Vata-Kaphaja.

Ardhavabhedaka can be symptomatically correlated with Migraine due to its cardinal feature

'half sided headache' which is also explained by commentator Chakrapani as *`Ardha* Mastaka and also due to its Vedana' paroxysmal nature. All the three doshas involved in the are pathogenesis of the Ardhavabhedaka with the predominance of *Vata* or Vata kapha. Ardhavabhedaka (migraine), which presents as a unilateral headache paroxysmal associated with vertigo and pain of According varying intensity. ayurvedic classiocs, Wasa (nose) the ateway of the Shira (head), and Nasya Karma (Medication through nasal route) is specifically indicated to clear away the diseases located in head, since medication administered through the nostrils 47 year old male patient presented with complaints of headache, nausea, vomiting and vertigo for the past 1 year. He has continuous, unilateral headache in one side The nature of pain was moderate to severe associated with nausea and sometimes vomiting. Blackouts and vertigo were also present. Family history was not contributory. He has to take allopathic medicine for pain. Patient was treated in

Panchakarma OPD of Immanuel Arasar Ayurveda Hospital with internal medications, Prathimarsha *Nasyam* (nasal instillation-daily). Associated complaints occurred throughout the treatment were managed Outcomes symptomatically, were measured based on the relief of symptoms presented at the baseline and found clinically significant. Even after the follow up of up to 8 months no recurrence was observed,

#### CASE REPORT:

Patient was a 18 years old female student, a pre diagnosed case of Migraine and was on allopathic medication for period of 4 years (Fevedom every 4 hourly, Flunarizine 5 mg HS, Metoprolol 100 mg bd, Propranolol 40 mg bd). She complaints of severe headache, nausea, belching and vomiting. She don't have history of any other illness or accidents. She has continuous, throbbing, unilateral frontal lobe pain durina each episodes. She complaints of 3-4 episodes per month. This started affecting her

studies Family also. history revealed her mother also have the same problem. Since 4 years she is under allopathic medication and she is getting only temporary relief. For better management and to prevent the recurrence of disease she came to Immanuel Arasar Ayurveda Medical College and Hospital.

The treatment was planned based on the dosha involved and avastha of patient.

### CLINICAL FINDINGS

his case was reported on 20-7-2021 in outpatient department of Immanuel Arasar Ayurveda Medical College and Hospital. Physical examination revealed patient is anxious with normal appetite, bowel movements and urination. Neurological examination was carried out and found that higher mental functions and all cranial nerves are normal. Motor examination showed, tone, power, coordination and bulk were normal on both sides. As the patient was suffering from this condition since past 4 years, she have already consulted few allopathic doctors and as per their advice CT brain was taken to rule out other pathological conditions and was found normal. Initially, Vata kapha samana treatments were adopted. Pitta prakopa lakshanas observed in some stages of treatment was managed symptomatically.

#### THERAPEUTIC INTERVENTION

FIRST VISIT					
	INTERNAL	EXTERNAL	OBSERVATIONS		
20-07-	1. Varanadi kashayam	1. Rasnadi choorna, mix	After the treatment		
2021 to	(20 ml with 60 ml	with lime juice apply	considerable		
31-07-	boiled and cooled	over forehead	improvement noted		
2021	water three times daily	2. Rasnadi choornam	during episode ,		
	before food)	mix with <i>ksheerabal</i> a	appetite become		
$\simeq$	2. Avipathy choornam-	<i>taila</i> external	normal, acidic belching		
	5 gm bd with	application on murdha	reduced		
4	kashayam				
SECOND VISIT					
1-08-	1. Pathyashadangamk	1. Rasnadi choorna, mix	No recurrence of		
2021	ashayam	with lime_juice apply	headache. Slight		
to	kashayam (20 ml	over forehead	headache noticed after		
10-	with 40 ml boiled	2. Rasnadi choornam	having chchoclate.		
08-	and cooled water	mix with ksheerabala	Allergic sneezing after		
2021	three times daily	táila. 为 🕇 external	cold exposure		
	before food)	application on murdha			
	2. Avipathy				
	<i>choornam</i> - 5 gm				
	bd with <i>kashayam</i>				
		<u> </u>	<u> </u>		

THIRD VISIT					
11-08-	1. Drakshadikashayam	1. Rasnadichoornam	Symptomatic relief		
2021	(20 ml with 40 ml	mix with	from all complaints.		
to	boiled and cooled	ksheerabala taila	Mild symptoms		
21-08-	water three times	external application	reappeared only		
2021	daily before food)	on <i>murdha</i>	when she has not		
	3. Kanchanara Guggulu	2. <i>Prathimarsha</i>	taken food at proper		
	1-1-1 afterfood	<i>Nasyam</i> (nasal	time		
	4. Haridrakhandam –	instillation) with			
	1 tsp thrice daily	<i>Anutailam</i> 2 drops in	P		
	afterfood	each nostril			
FOURTH	VISIT				
21/09/ MEDICINES REPEATED AS IN THIRD VISIT Symptoms has not					
2021			reoccurred		
Outcom	es were assessed base	ed on the relief of pa	n and other symptoms		
presented by the patient at the baseline and found clinically significant.					
TIME LINE					
DATE	CLINICAL FINDING	5			
5/10/2017 Had first episode of migraine					
	Started analgesics,	Calcium channel blockers	and Beta blockers		
20/07/2	2021 First visit – Started	ayurvedic medicines	N.		
	Improvement noted	d, appetite become norma	al, acidic belching reduced		
1/08/20	21 Second visit No re	ecurrence of headache.	V A		
	Slight headache no	ticed after having chchoc	ate.		
	Allergic sneezing af	ter cold exposure			
11/08/2	2021 Third visit- Sympto	matic relief from all comp	laints.		
	Mild symptoms rea	appeared only when sh	e has not taken food at		
	proper time				
2/09/20	Pourth visit – Symp	toms has not reoccurred			

The symptoms has not reoccurred for a period of 7 months after this treatment.

#### **DISCUSSION**

Migraine has got similarities with that of Ardhavabhedaka. The case was presented with severe headache, nausea, belching and vomiting. She has continuous, throbbing, unilateral frontal pain during each episodes. She complaints of 3-4 episodes per month. Hence it was treated with shamana kapha vata chikitsa followed with brumhana chikitsa. Varanadi kashayam acts kapha vata shamana, srotoshodhaka, shula prashamana. Avipatti choornam is pitta kapha shamana, shodhaka, sroto dahaghna. External application of Rasnadi choornam and lime juice showed a markeable reduction in the symptoms, since it is having ruksha, ushna guna, shiro abhishyanda hara , kapha vata haratva. Ksheera bala rakta prasadana, balya, tailam is prasadana. Pathya indriya shadangam kashayam act Tridosha Shamana by virtue of its urdhwa jatru visheshatwa. Drakshadi kashayam is pitta vata shamana and rakta prasadana Kanchanara guggulu has lekhana and chedana property helps to remove the excess

Kapha from the shiras. Allergic sneezing during the course of treatment was managed by Haridrakhandam. Pratimarsha nasyam was done with Anu Tailam which resulted in overall relief in the symptoms.The Nasya dravya reaches to *Sringataka Marma* from where it spreads into various strotas (vessels and nerves) and alleviates the vitiated dosha. Nasya provides nourishment to the nervous system by neural, diffusion and vascular pathway. Anutaila | is vataghna, *rumhana* and *sneha <mark>karaka* and is</mark> having *sukshma, vyavayi guna*,so it can spreads through minute Profuse secretions channels easily. administration occur after its indicates the mobilization of kaphadi doshas from its sthana. The sneha reaches in the srotasas and it does oleation and strengthening action also. Outcome was a combined effect of both internal and external treatments. After the first course of treatment itself the patient showed marked improvement in symptoms of headache and radiating pain to jaws. Almost all symptoms have subsided in the treatment period itself and the allopathic medicines

were stopped. Even after the follow up of 8 months, no recurrence in symptoms were observed.

#### **CONCLUSION**

The case study presented suggest that an integrated approach will be effective in managing Migraine. Ayurveda medications can arrest the the disease. progress Kaphavātahara treatments adopted mainly focusing on Kapha. Pitta prakopa lakshanas observed at some stages and w managed. With thorough understanding of Dosha involved we can manage the complex conditions like Migrain

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