



TREATMENT OF MIGRAINE WITHOUT AURA THROUGH AYURVEDA- A SINGLE CASE REPORT

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Article Received on 22/08/2022

Article Revised on 12/09/2022

Article Accepted on 02/10/2022

ABSTRACT

Introduction: Migraine is characterized by periodic headache which is typically unilateral and associated with symptoms such as debilitating throbbing pain, nausea, vomiting, phonophobia, and temporary visual disturbances. These symptoms can be seen in *Ardavabhedaka roga* which is explained in Ayurvedic science. In contemporary medicine, it is treated by analgesics, which is not good for the body in long run, so there is a need to develop an Ayurvedic treatment protocol that will be viable to yield good result with less reoccurrence rate. **Materials and Methods:** A 34-year-old female subject approached OPD of SJIIM Bangalore, with complaints of half-side headache along with nausea, vomiting, photo and phonophobia since 2years. After assessment the subject was undertaken for treatment. **Result:** After 2 months of treatment and a 1 month follow up period, the subject got relief from symptoms and there was less reoccurrence rate. **Conclusion:** By the above study we can conclude that Ayurveda holds a pivotal role in treatment as well as in the preventional aspect of migraine.

KEYWORDS: Migraine without aura, *Ardavabhedaka*, Ayurveda, *Pathyadi kwatha*.

INTRODUCTION

There are over 150 types of headaches, divided into two categories, primary headaches and secondary headaches. A migraine is a primary headache, meaning that it isn't caused by a different medical condition. A migraine is a common neurological disease that causes a variety of symptoms, most notably a throbbing, pulsing headache on one side of your head. Migraine will likely get worse with physical activity, lights, sounds or smells.^[1]

Migraine is a common cause of disability and loss of work. Migraine attacks are complex brain events that unfold over hours to days in a recurrent matter. The most common type of migraine is without aura (75% of cases) or known as common migraine. It is characterized by a recurrent headache attack of 4 to 72 hours; typically unilateral in location, pulsating in quality, moderate to severe in intensity, aggravated by physical activity, and associated with nausea and light and sound sensitivity (photophobia and phonophobia).^[2]

Generally treatment of migraine includes over the counter painkillers, migraine specific treatments (triptans) and anti-sickness medication. These treatments aim to help manage the symptoms when an attack comes on. You do need to be careful not to take certain acute

treatments too many days a month as this can cause medication overuse headache. For example, triptans shouldn't be taken on more than 8-10 days per month.^[3]

Thus the need of the hour is to develop an Ayurvedic treatment protocol which is economically viable and yield a good result in tackling of the disease with less reoccurrence rate.

In Ayurveda we can compare it with *Ardavabhedaka* which is characterized by symptoms such as pain over half side of the head, neck, eyebrows and temple region, which occurs once in 7 days, 10 days or in one month and will relapse by itself. Side effect is told as visual disturbances and phonophobia.^[4] According to Acharya Charaka and Vagbhatta the main predominant *dosha* which causes *Ardavabhedaka* is *Vata*.^[5] Thus, the treatment follows the methods used to treat *Vataja shirashoola*, which includes *Nasya*, *snehapana*, *Virechana*.^[6]

Thus in these study we have tried to treat the disease by using *Vata hara* medications along with advised *Pathya* and *Apathya* for Shiroroga.

MATERIALS AND METHODS

History of present Illness: Patient was apparently normal before 2 years; gradually she started developing Headache which is unilateral, pulsating or throbbing in nature, Along with nausea, vomiting and discomfort over hearing sounds and on seeing bright objects. She was under analgesics for over the period of time as per advice of an ENT physician and was not getting any permanent relief thus she approached our OPD.

History of Past illness: No known complaints of DM/HTN.

Family History: Subjects mother had a history of Migraine.

Personal History

- Appetite: Good
- Sleep: Sound
- Bowel: Once a day
- Micturition: 4-6 times a day
- Diet: Mixed

Obstetric history: L1 P1

Menstrual History: regular 4-5days/ 28

Ashta Stana Pareeksha

- 1) *Nadi:* 70min
- 2) *Mutra:* 4-5times/day
- 3) *Mala:* Prakrutha
- 4) *Jihwa:* Alpa lipta
- 5) *Shabda:* Prakrutha
- 6) *Sparsha;* rooksha
- 7) *Drik;* Vikruta
- 8) *Akriti:* Krishna

- **Triggering factors**

- Irregular seep
- Hunger
- coffee

- **Relieving Factors**

- Hot food
- Sleep

Local Examination: as shown in the Table 1.

Table 1: Examination.

Sl.no:	Examination	Findings
1.	Visual Acuity	<u>OD OS</u> DV: 6/18, N6 DV: 6/9, N6
2.	Otoscopy	1)EAC: B/L clear, 2) TM: B/L visible and Intact
2.	PNS examination	No tenderness over the sinus region
3.	Anterior rhinoscopy	No DNS, No hypertrophied turbinate's

General Examination: Respiratory system: normal
NVBS, No wheezing on auscultation

CVS: No murmurs on auscultation

Per abdomen: on palpitation nothing specific.

Pulse rate: 72/ min

BP- 120/80mm/hg

Weight- 56kg

Height: 174cm

Assessment criteria

- **Subjective parameters**

- Nausea- Moderate
- Vomiting- Mild

- Photophobia- Moderate

- Phonophobia- Moderate

- Numeric Pain Rating Scale: Score was 7 out of 10.

Treatment

Treatment was given for a period of 2 months with a follow up period of 1 month. During the 2 months subject was advised to follow *Pathya* and certain lifestyle. the treatment administered during the time period is as shown in the table 2.

Table 2: Treatment.

Sl.no;	Treatment	Medicine	Mode of administration	Duration
1.	<i>Ama Pachana</i>	<i>Ashta Churna</i>	6 gm (bd) before food	3 days
2.	<i>Snehapana</i>	<i>Guggulu thiktakam</i>	<ul style="list-style-type: none"> ➤ 1st day- 10ml before food ➤ 2nd day- 30 ml ➤ 3rd day-50 ml ➤ 4th day-70 ml ➤ 5th day- 90 ml ➤ 6th day- 110 ml ➤ 7th day- 130 ml 	7 days
3.	<i>Virechana</i>	<i>Gandharva hastadi eranda taila</i>	20ml with 60 ml of lukewarm water before food	1 day
4.	<i>Nasya</i>	<i>Anutaila</i>	10 drops to each nostrils in early	7 days of 2 sittings

			morning	with 2 weeks gap
5.	<i>Shiro Lepa</i>	<i>Rasnadi choorna</i>	7 days.	7 days
6.	Orally	1) <i>Pathyaksha datryadi Kashaya</i> 2) <i>Shirashooladi Vajra rasa</i>	-20ml with 40ml of lukewarm water in empty stomach, twice a day - 2(bd) (a/f)	-After 10 th day for 2months - For 2 months

RESULT

As shown in the table no. 3.

Table 3: Result.

Sl no.	Parameters	Before the treatment	After the treatment
1	Nausea	Moderate	Mild
2	Vomiting	Mild	0
3	Photophobia	Moderate	Mild
4	Phonophobia	Moderate	Not interfering with daily life
5	Numeric Pain Rating Scale	7	3

DISCUSSIONS

- In this study we have concentrated on treating *Vata*, which is the main reason for causing *Ardavabhedaka roga*. Thus, we started with *ama pachana*, by that making the *agni* capable for *Snehapana*. Here we have taken *Guggulu thiktaka ghritam* for *Snehapana*, as it does *Vatahara* and *Vilayana* action of *dosa's*^[7], these *dosa's* are being expelled by *Virechana*.
- *Nasya* is considered as one of the important therapies which does the strengthening of *Urdwa jatrugatha pradasha* and it expels the vitiated *doshas*. It does the *srotosangahara* action and help in pacifying *vatadi doshas*.^[8]
- *Rasanadi lepa* is applied over *Lalata* or forehead region and is washed off before drying. Acharya Charaka has told *rasna in Vatavyadhi chikitsa* as *sreshtha vataharanam*^[9], as it is having *ushna* and *shotahara* property. *lepa* acts by dilution of the accumulated toxins and increasing peripheral vascularization.^[10]
- Orally drugs which are indicated in *shiroroga* was administered, especially *Pathyaksha datryadi Kashaya*, which is specifically indicated in *Ardavabhedaka roga*. It acts by its *Vatadi tridosha shaman* action. It stabilizes the direction of *Apana vata*, by its *anulomana* and *ushna action*.^[11]
- Thus during the course of treatment subject was advised to avoid coffee intake and to have food at proper time along with proper sleep.
- Here along with the treatment we have tried to improve the quality of day to day life of the patient.
- During the follow up there was less reoccurrence rate of the symptoms, which can be due to the changes brought into the lifestyle.

CONCLUSION

From the above study we can conclude that as important as the treatment is, there is equal importance of maintaining a proper lifestyle. Thus Ayurveda is a science which not only helps to treat a disease; it also

helps to improve the quality of life. As it says prevention is better than cure.

REFERENCES

1. Migraine Headaches. Compilation done by Cleveland Clinic. <https://my.clevelandclinic.org/health/diseases/5005-migraine-headaches>
2. Marco A. Pescador Ruschel. Orlando De Jesus. Migraine Headache. National Library of Medicine. Statpearls. <https://www.ncbi.nlm.nih.gov/books/NBK560787/>
3. The migraine trust. Migraine without aura. <https://migrainetrust.org/understand-migraine/types-of-migraine/migraine-without-aura/#:~:text=Migraine%20without%20aura%20is%20the,attack%20is%20about%20to%20start.>
4. Susrutha. Susrutha Samhitha English translation by Prof. K.R. Srikantha Murthy. Publisher Chaukambha Orientalia. Varanasi, 2002; 25(15): 135.
5. Dingari Lakshmanacharya. Shalaky Tantra Diseases of Eye, ENT & Head. Chaukambha Sanskrit Pratishthan. Delhi. Reprint, 2007: 25.
6. Vagbata. Ashtanga Hrudaya with commentaries Sarvangasundara of Arunadatta and Ayurvedarasayana of Hemadri. Chaukambha Surabharathi Publications. Uttarasthana. Reprint, 2016; 23(24): 338.
7. Vagbhata. Ashtanga Hridaya. Chikitsa sthana: 21(57-60). Aruna Datta. Reprint 2010. Chaukambha Subharati Prakashan. Varanasi, 291.
8. Vagbata. Ashtanga Hrudaya with commentaries Sarvangasundara of Arunadatta and Ayurvedarasayana of Hemadri. Chaukambha Surabharathi Publications. Sutra sthana. Reprint, 2016; 20(1): 87.
9. Charaka. Charaka Samhita Vidyotini Hindi Commentary Edited by Agnivesha. Gorakhantha Chaturvedi. Sutra sthana. 25/40. Varanasi: Chaukambha Bharati Academy, 1998: 468.

10. Raja Ram Mahto. Alankruta R Dave. V D Shukla. A Comparative study of Rasnadi Ghanavati and Simhanada Guggulu on Amavata with Special Reference to Rheumatoid Arthritis. *AYU.*, Jan-Mar 2011; 32(1): 46-53.
11. Sarangadhara. Sarangadhara Samhita. Madhyama Khanda. Chaukambha Orientalia. Varanasi, 2014; 2(145-146): 78.