MANAGEMENT OF ARDHAVABHEDAKA w.s.r MIGRAINE BY SHODHANA (VAMANA KARMA) – A CASE REPORT

Grampurohit Pradeep L, Halankar Pooja S

1Reader, 2PG Scholar, Department of Panchakarma, KLEU’s BMK Ayurveda Mahavidyalaya and research centre, Shahapur – Belagavi Pin: 590003, Karnataka, India

Email: drpoojahalankar@gmail.com

Published online: March, 2017
© International Ayurvedic Medical Journal, India 2017

ABSTRACT

Objectives: Treatment of Ardhavabheda by Shodhana therapy in order to reduce the severity of the pain and the frequency of attacks Methods: The case report is of a 26 years old female patient who was given Rukshana for four days by Udvartana and takrapaana, deepan paachan for 3 days, followed by snehapan for 3 days in arohana karma and one day of vishramakala wherein abhyanaga followed by Bashpa Sweda and Kaphakara Aahara was advised. Vamana karma was done with Vamana Yoga (MadanphalaPippali Churna, Vacha, Saindhava, honey) Samsarjana Karma was given for 7 days. The patient was assessed using the standard headache disability index. Results: Significant reduction was seen in the symptoms and frequency of attacks. Conclusion: Shodhana proves to be effective in reducing the severity and frequency of attacks in Ardhavabheda.

Keywords: Ardhavabheda, migraine, neurovascular, Pitta, Shiroroga.

INTRODUCTION

Ardhavabheda is one among the 11 types of Shiroroga. It can be co-related to Migraine in modern science which is an episodic headache as a triad of paroxysmal headache, vomiting and an ‘Aura’ of focal neurological events. Migraine has an estimated global prevalence of 14.7%. [2] Chronic migraine affects 2% of the world population. [3] Although Ardhavabheda is said to be a neurovascular disorder, the Gastro intestinal disturbance and vitiated pitta also has a significant role in its pathogenesis. The word Ardhavabheda has three components. Artha which means half, Ava suggests bad prognosis and Bhedaka mean perforating pain. It affects one half of the head either right or left. Ardhavabheda is Vatakaphaja but can also be taken as Tridoshaja or a purely vataja disease. [4] The vata, getting provoked by vatajaahara and vihaara, either alone or in combination with Kapha, affects one half of head and causes acute neuralgic pain in the sides of the neck, eyebrow, temple, ear, eyes or forehead of one side. Vamana is said to be the best treatment for kapha dosha but can also be given in pittaja conditions when pitta is lodged in the seat of kapha. It sequentially expels out kapha, and then pitta and relieves the symptoms of the disorder.
Case report

A Twenty six years old female patient approached the OPD of KLEU’s BMK Hospital with complains of severe headache on the left side, associated with heaviness of head since 8 years. The duration of headache was 10 – 12 hours. Shooting up of Blood Pressure during episodes of migraine, burning sensation in eyes and giddiness was experienced during the episodes. Frequency of episodes was 3 - 4 per month which increased in severity and frequency during last one year. Relief from symptoms was seen after vomiting.

MATERIALS AND METHODS

Materials:
Medicines: Udwartana churna, chitrakadi vati, moorchita Ghrita, moorchita Tila Taila, MadanphalaPippali Churna, Vacha churna, Saindhava, Madhu, Abhyanga table, Vamana tub, chair, Vamana tray with all requirements.

Methods

The patient was given Rukshana for four days by giving Udwartana with Udwartana churna and Triphala Kashaya 100ml OD. Then she was given Deepan Paachan for 3 days with Chitrakadi Vati 2 tid. Snehapana was given for 3 days with Moorchita Ghrita (30 ml, 80ml, and 120ml). On day of Vishramakala Sarvanga Abhyanaga with Moorchita Tila Taila followed by Bashpa Sweda and KaphakaraAahaara was given. On day of Vamana, Sarvangaabhyanaga and Bashpa Sweda was given followed by AkanthaPana with milk and Vamaka Yoga (MadanphalaPippali Churna 7gms, Vacha 4 gms, Saindhava 2 gms, honey- QS) was given. SamsarjanaKrama was given for 7 days and oral medications, Sootashekhara Rasa 1tid, Triphala Kashaya 50 ml BD and anulomaka aushadhi were given for 15 days.

Duration of treatment: 12 days

Aims and Objectives: Treatment of Ardhavabhedaka by shodana therapy (Vamana Karma) in order to reduce the severity of the pain and the frequency of attacks.

Type of Study: Single Case Study

Study Centre: KLEU’s BMK Ayurveda Hospital, Shahapur –Belagavi

RESULTS

Table 1: Symptom wise assessment

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Baseline</th>
<th>15 days after Vamana</th>
<th>1 month after Vamana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency of episodes</td>
<td>4-5 times / month</td>
<td>No episodes</td>
<td>No episodes</td>
</tr>
<tr>
<td>Burning sensation in eyes</td>
<td>Present</td>
<td>Absent</td>
<td>Absent</td>
</tr>
<tr>
<td>Giddiness</td>
<td>Present</td>
<td>Absent</td>
<td>Absent</td>
</tr>
<tr>
<td>Blood pressure</td>
<td>Increased during every episode</td>
<td>Normal</td>
<td>Normal</td>
</tr>
</tbody>
</table>

Table 2: Assessment by Headache Disability Index

<table>
<thead>
<tr>
<th>Time points of assessment</th>
<th>Headache disability index score</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>84%</td>
<td>Complete disability</td>
</tr>
<tr>
<td>After 15 days of Vamana</td>
<td>30%</td>
<td>Moderate disability</td>
</tr>
<tr>
<td>After 1 month of Vamana</td>
<td>10%</td>
<td>Mild disability</td>
</tr>
</tbody>
</table>
**DISCUSSION**
Due to faulty eating and sleeping habits owing to today’s lifestyle, the *Agni* is hampered leading to improper digestion. This leads to the *Vidagdhata of Anna* which vitiates the *pitta dosha*. Hence here it is observed that when *shodhana* is given in the form of *Vamana*, evacuation of the vitiated stagnant *pitta dosha* gives relief from *Ardhavabhedaka*.

**CONCLUSION**
Migraine mimics most of the symptoms of *Ardhavabhedaka* in *Ayurveda*. Although it is taken as a neurovascular disease in modern system of medicine, there is a role of Gastro Intestinal disturbances in the pathogenesis of this disease. Other than symptomatic treatment for pain relief, *Shodhana* proves very effective in reducing the severity and frequency of attacks in *Ardhavabhedaka*.

**REFERENCES**

**Source of Support: Nil**
**Conflict Of Interest: None Declared**