

EFFICACY OF BHRUNGRAJADI NASYA IN MANAGEMENT OF ARDHAVBHEDAK (MIGRAINE)

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ABSTRACT

Background: *Ardhavabhedaka* can be clinically correlated with the Migraine; which is commonly occurring vascular headache. It presents cardinal symptom of pain on one half of the head. Factors which trigger the disease include weather, missing a meal, stress, alcohol and certain types of food items. About 50% of women reported menstrual periods as a significant trigger. Additionally, allergic reactions, exposure to loud noises or certain odors, smoking, or long exposures to computer screens/televisions could lead to Migraine attacks. **Objective:** Clinical evaluation of *Bhrungrajadinasya* in *Ardhavabhedak* w.s.r. Migraine. **Methods:** A clinical study was conducted on 30 patients irrespective of sex in the age group of 18 to 60 yrs. All the patients presented with classical features of *Ardhavabhedak*. The present study also includes a causation of the disease and clinical conditions considered for differential diagnosis of *ardhavabhedak* found in classical texts. *AvapeedakNasya* was administered with *Bhrungarajswaras* by adding equal amount of *AjaDugdha* (Goat milk) for 7 days. Appropriate diet was advised to all the patients. Follow up was planned every 15 days till 1 month to assess if there is any recurrence of symptoms. **Results:** Highly significant results were observed and improvement in cardinal symptoms of *Ardhavabhedak* was observed. **Conclusion:** This procedure appears to provide good clinical improvement in patients with *Ardhavabhedak*.

Keywords: *AjaDugdha*, *Ardhavabhedak*, *AvapeedakNasya*, *Bhrungarajswaras*, Migraine

INTRODUCTION

Migraine is the most common neuromuscular disease; factors which trigger the disease include weather (up to 50%), missing a meal

(40%), stress (50%), alcohol (50%) and certain types of food items (45%). About 50% of women reported menstrual periods as a signif-

icant trigger. Additionally, allergic reactions, exposure to loud noises or certain odors, smoking, or long exposure to computer screen /televisions could lead to migraine attacks.

WHO ranks migraine among the world's most disabled medical illness¹.

Migraine can be closely related to *ardhavbhedak* due to its cardinal feature 'half sided headache' which is also explained by commentator *Chakrapani* as *Ardhamastakvedna* and also its paroxysmal nature².

Ardhavbhedak has been explained as *trido-shajby Acharya Sushrut*³, *Vata-kaphaj* by *Charak* and *Vataj* by *acharya Vagbhat*.

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

In Ayurveda *Nasya* Therapy is considered as one of the most promising treatment for all the *urdhwajatrugata vikaras*.

Hence *Bhrungarajadinasya* has been selected from *Yogaratnakar ShirorogaAdhikar*⁴.

Subjective criteria

Table 1: Symptoms with grades

Symptoms	Grade 0	Grade 1	Grade 2	Grade 3	Grade 4
Severity of headache	No headache	Mild headache, patient is aware only if he/she pays attention to it	Moderate, but does not disturb the routine work	Severe headache can't ignore but he/she can do usual activities	Excruciating headache can't do anything
Frequency of Headache	Nil	>20 days	15 days	10 days	<5 days
Duration of headache	Nil	1-3 hours /day	3-6 hours /day	6-12 hours/day	More than 12 hours /day
Nausea	Nil	occasionally	Moderate headache, can ignore at times	Severe, disturbing routine work	Severe enough, small amount of fluid regur-

Incidence and Prevalence:- Recent studies estimate the prevalence of migraine at about 6-8% in men and 12-15 % in women, in terms of actual numbers 3000 migraine attacks occur every day for each million of general population⁵

Aims and Objectives

To assess the efficacy of *Bhrungarajadinasya* in the management of *ardhavbhedak*

Inclusion criteria-

- Patients between age group 16-60 years
- Having recurrent attacks of headache (mostly unilateral, variable in intensity)

With or without nausea, vomiting aura and GI tract symptoms

Exclusion criteria

- Patients suffering from sinusitis, hypertension, and fever
- Secondary headache caused by meningitis, tumor, encephalitis, cervical spondylosis, and refractive errors
- Individuals suffering from immunocompromised disease or on immunosuppressive drugs.
- Pregnancy and lactation

					gitating from mouth
Vomiting	Nil	Only if headache does not subside	Vomiting 1-2 times	Vomiting 2-3 times	Forced to take medicine to stop vomiting
Vertigo	Nil	Feeling of giddiness	Patient feels as if everything is revolving	Revolving signs + black outs	Unconscious
Aura	Nil	Last for 5 mins	Last for 15 mins	Last for 30 mins	Last for 60 mins

Material and Methods

Sample size -30

Study duration – Follow up every 15 days till 1 month

Study center- YMT Ayurvedic medical college Kharghar

Type of study- open non comparative study

Source of data- OPD & IPD of study institute

Drug Formulation⁵:-

Bhrungarajasahachhagaksheeratulyaarkatpitaha/

Suryavartamnihantiashunasyaen eve prayograta//

Yo. Ra (Shiroroga chikitsa/ suryavarta – ardhavbhedak chi 2)

Eshevavidhihikaryahakrutsna cha ardhavbhedake/

Yo.Ra. (Shiroroga chikitsa/ suryavarta – ardhavbhedak chi 5)

Preparation of drug:

Equal quantity of *Bhrungarajaswaras* and *ajadugdha* was taken and kept under sunlight and then brought down to room temperature followed by *nasya*.

Methodology:-

Purva karma – Sthaniksnehanswedan

Pradhan karma – 4-8 drops of bhrungaraja + Ajadugdha in each nostril for 7 days

Paschat karma – Dhumpan, Kawaldharan

Observation & Result:-

It was observed that out of 30 patients 21 patients (70 %) were female & 9 patients (30%) were male.

The maximum number of patients 22(73.33 %) were in age group of 31 to 40 years & 5 (16.66 %) patients were in age group of 21-30 years and 3 (10%) patients were in age group of 41-50.

Majority of patient about 19(63.34%) belongs to >6 months chronicity & 11(36.66%) patients belongs to 3- 6 months chronicity.

Around 90% patients were Non- vegetarian

38% patients had family history of headache.

57% patients were totally dependent on allopathic medicine.

It was found that exertion, lack of sleep, hunger (missing meals) and stress were the most important factor for aggravating migraine.

Maximum patients those who were enrolled had migraine attack once a week.

Maximum migraineurs complained of nausea, photophobia, phonophobia and vomiting as associated symptoms.

Table 2: Observation on results of complains

Severity of headache	G0	G1	G2	G3	G4	Total
Before Treatment	-	-	8	20	2	30
During Treatment	-	10	15	5	-	30
After Treatment	20	8	2	-	-	30
Frequency of Headache	G0	G1	G2	G3	G4	Total
Before Treatment	-	7	8	15	-	30
During Treatment	8	15	7	-	-	30
After treatment	20	7	3	-	-	30
Duration of headache	G0	G1	G2	G3	G4	Total
Before Treatment	-	-	13	17	-	30
During Treatment	-	15	15	-	-	30
After Treatment	-	24	6	-	-	30
Nausea	G0	G1	G2	G3	G4	Total
Before Treatment	-	-	8	20	2	30
During Treatment	6	12	12	-	-	30
After Treatment	19	11	-	-	-	30
Vomiting	G0	G1	G2	G3	G4	Total
Before Treatment	-	8	10	12	-	30
During Treatment	-	16	11	3	-	30
After Treatment	20	10	-	-	-	30
Vertigo	G0	G1	G2	G3	G4	Total
Before Treatment	-	5	10	15	-	30
During Treatment	8	12	10	-	-	30
After Treatment	22	8	-	-	-	30
Aura	G0	G1	G2	G3	G4	Total
Before Treatment	-	5	20	5	-	30
During Treatment	2	20	8	-	-	30
After Treatment	15	10	5	-	-	30

1. Severity of headache

After the treatment, at the end of study 20 patients were completely relieved of the symptom i.e. grade 0, while 8 were in grade 1, 2 in grade 2Severity of headache.

After applying Wilcoxon Signed rank test shows significant result as compare to 1st visit with ($p = <0.001$)

2. Frequency of Headache

After the treatment, at the end of study 20 patients were completely relieved of the symptom i.e. grade 0, while 7were in grade 1, 3 in

grade 2 frequency of headache.

After applying Wilcoxon Signed rank test shows significant result as compare to 1st visit with ($p = <0.001$)

3. Nausea

After the treatment, at the end of study 19 patients were completely relieved of the symptom i.e. grade 0, while 11were in grade 1Nausea.

After applying Wilcoxon Signed rank test shows significant result as compare to 1st visit with ($p = <0.001$)

4. Vomiting-

After the treatment, at the end of study 20 patients were completely relieved of the symptom i.e. grade 0, while 10 were in grade 1 vomiting.

After applying Wilcoxon Signed rank test shows significant result as compare to 1st visit with (p= <0.001)

5. Vertigo

After the treatment, at the end of study 22 patients were completely relieved of the symptom i.e. grade 0, while 8 were in grade 1 vertigo

After applying Wilcoxon Signed rank test shows significant result as compare to 1st visit with (p= <0.001)

6. Aura

After the treatment, at the end of study 15 patients were completely relieved of the symptom i.e. grade 0, while 10 were in grade 1 & 5 in grade 2 aura.

After applying Wilcoxon Signed rank test shows significant result as compare to 1st visit with (p= <0.001)

Overall assessment of therapy:

Markedly Improved: - 54% patients got markedly improvement in overall symptoms

Moderate Improvement: - 38% patients got moderately improvement in overall symptoms

Mild Improvement: - 7% patients got mild improvement in overall symptoms

DISCUSSION

Missing meals, hectic life style, lack of sleep are the causative factors for migraine

Samprapti bhanga: - *Bhrungarajadinasya* is capable of breaking the *Samprapti* of *ardhavbhedak* with its action of *katu, tikta rasa*

and *laghu, ruksha guna* which helps in removing *kapha avarodha* and leads to *vata shaman* and relieves pain^{6,7}

Kesharajobhrungarajhasuryavartoathamarkava |

Markavahakatukastiktorukshoshnoakshishi-roartihruta ||

Kaphavataharodantyaastvachyahakeshyo Rasayana |

Hantikasakrumishwaskushtashophampanduta || *Kai Ni Aoushadhivarga 1574- 1575*

Nasya karma –

Nasya karma is special procedure where the drug administered in *nasya*, the medicine is put into nostril moves in the channels up to the *shringataka* spreads to whole of the interior of the head and to the junction place where all the channels related to eyes, ears throat situated together thus shows influence on *shiras* by removing out the accumulated *doshas* localized in *shiras* i.e from all sinuses in the skull the action known as *Shirovirechan*

The olfactory nerves entering olfactory mucosa of nose carry the sheaths *dura, arachnoid* and *pia* with them. They directly enter into the brain. Olfactory striae are extensively connected to the limbic system. Stimulation can nourishment of nerve ending through *nasya* alters the pathology of migraine.

Ajadugha on the other hand helps in *agni-deepan* and is *tridosh shamak*

Thus it can be said that this formulation lowers headache and all the associated symptoms.

CONCLUSION

Ardhavbhedak is *vaat kapha pradhana shiro-roga*, the symptoms complex of which very well correlate to that of Migraine.

Most of the *nidanans* mentioned in our classics go in similarly with migraine triggers, which has active part in diagnosis and in planning the first line of treatment “*Nidanparivarjan*”

The study was clinical study in which consists 30 patients after treatment 54% patients got markedly improvement in symptoms, the study has shown highly significant results in the management of *ardhavbhedak*.

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