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ROLE OF AYURVEDA IN THE MANAGEMENT OF ARDHAVBHEDAKA

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ABSTRACT

Shira is considered as *Uttamanga* i.e that where vital breath of living beings and also all the sense organs are located, and which is supreme of all organs In modern science, *Ardhavbhedaka* can be correlated with Migraine. The word *Ardhavbhedaka* has two components viz. *Ardha* and *Avabhedaka ka*. *Ardha* means half side, *Ava* suggest bad prognosis, *Bhedaka* means breaking through, perforating or bursting out type of pain. In this, pain affects half region of the head. Role of *Agni-dusti, Manahsantapa, Rodana, Shoka, Bhaya* etc. psychological factors have been emphasized in the etiopathogenesis of this condition. Generally, traditional medicine focus on pain relief, but the main objective of *Ayurvedic* diagnosis is to find the root cause and eliminate it through changes in life style (*Dincharya*), diet (*Ahara*) and keeping the *Agni & Doshas* in balance. Life style management like proper Diet and Sleep, Exercises, *Yoga & Pranayam*, following *Ayurvedic Ritucharya, Ratricharya, Dincharya and Sadvritta* etc. formulations like *Ashwagandha*, Pravalapishti, *Giloya satva, Pathyadi kwath, Shirah shuladivajra rasa* are effective.

Keywords: Ardhavbhedaka, Migraine, Shamana, Samashodhana Chikitsa.

INTRODUCTION

In Ayurveda, Shiroroga are known by any of the following names: Shiroruja, Shiroarti, Shiropida, Shiroruk, Shirogada and Shirovedna¹. According to Sushrutacharya and Bhavaprakash, there are eleven types of Shiro-rogas: Vataja, Pittaja, Kaphaja, Saniipataja, Raktaja, Krimija, Kshyaja, Shankhaka, Suryavarata, Anantvata and Ardhavbhedaka^{2, 3} of each of these types

Ardhavbhedaka is a type of *Shiro Roga* (headache) with hemicranial location and periodic onset. It is well explained among other *Shiro Roga* in respect to its aetiology, pathology, symptomatology as well as treatment⁴. In Ayurvedic texts *Ardhavbhedaka* is described as *Vata or Vata-Kaphaja* predominant Shirogataroga by Acharya Charaka⁵ and *Tridoshaja shirogataroga* by Acharya Sushruta⁶. The translation of *Ardhavbhedaka* seems to be most fitting for Migraine headaches.

Migraine is a relatively common medical condition that can severely affect the quality of life of the sufferer and his or her family and friends⁷. Almost 8% of Canadians over the age of 12 have been diagnosed with migraine, of which 75% are women and 25% are men. Migraine is most commonly experienced by both men and women between the ages of 25 and 39^8 .

Although an estimated 2 million Canadians have been diagnosed with migraine, only 1 in every 12 migraine cases has been diagnosed.

There are two different types of migraines: migraines without aura and migraines with aura.

Migraine without aura is a condition characterized by moderate to severe throbbing and unilateral pain. The pain is worsened by movement and accompanied by at least one of the following symptoms⁹.

- Nausea, loss of appetite and/or vomiting
- Photophobia (increased sensitivity to light)
- Phonophobia (increased sensitivity to sound)

Migraines without aura are characterized by sudden onset and can have a major impact on the sufferer's daily life¹⁰. On average, untreated migraine episodes last from 4 to 72 hours.

Migraine with aura involves any number of different sensations that range from visual disturbances to physical sensations. The aura symptoms usually occur in alternating body sites during different attacks. Almost always preceding the headache, the aura symptoms can last between 5 and 60 minutes. Some people report having a prodrome, a feeling of strangeness a day or two before the attack begins. Prodromes are characterized by mood changes, food cravings, feeling tired or hyperactive, or excessive yawning. Some people may also experience fatigue, stiffness in the neck and/or difficulty concentrating.

Nidana (Etiological factors)¹¹

- Food associated factors: *Rukshahara* (Intake of dry food), *Atyahara* (Overeating), *Adhyashana* (Intake of food before digestion of prior meal), *Upavasa* (Fasting), *Mada, Tikshna pana* (Intake of alcohol).
- Sleep associated factors: *Divasvapana* (Day Sleep), *Prajagarana* (Awakening at night)
- Climate /environment associated factors: - *Pragvata, Avasyaya* (Exposure to cold breeze, dew), *Raja, Dhuma* (Exposure to Dust /smoke) *Atapa sevana* (Sun exposure)
- Behavioural factors: Vegasandharana (Suppression of natural urges), Uccha bhashya (Loud speech) Ati bhashya (Excessive talking)
- **Physical Factors:** *Ayasa* (Fatigue), *Vyayama* (Physical exercise), *Atimaithuna* (Excessive sexual activity)

- **Psychological Factors:** Manastapa (Stress)
- **Others:** *Asatmya Gandha* (Unpleasant odour)

Rupa (Clinical features):-

All the *Acharyas* have mentioned that the headache of *Ardhavabhedaka* occurs in one half of the head.

The specific sites of headache are also mentioned in texts. *Acharya Charaka* has described the prominently involved sites as *Manya* (neck), *Bhru* (eyebrow), *Shankha* (Temporal region), *Karna* (ear), *Akshi* (eye) and *Lalata* (fore head). The pain is like cutting by the sharp objects or piercing in nature¹².

Acharya Vagbhatta has mentioned Ghata (occipital region according to Indu and Parietal region according to Arundatta) and all the Shirogata Sandhis in addition where the pain occurs. He has also emphasized on its paroxysmal nature and said that it comes in every Paksha (fortnightly) or Masa (Month). The headache subsides by itself i.e., Svayameva Upashamyati¹³.

Acharya Sushruta has mentioned severe piercing and tearing pain in one half of the head associated with giddiness. These features appear every fortnightly or ten days or any time¹⁴.

Samprapti (Etiopathogenesis)

- Dosha Vata or Vata-Kaphaja(Acharya Charaka)/Tridoshaja(Acharya Sushruta)/Type of Vataja Shirahshoola(Acharya Vagbhatta).
- Dushya -Rasa-Rakta.

Acharya Charaka has included "Shiro- Ruk" in "Shonitaja Roga"¹⁵. That's why Rakta is the main dushya in Shiroroga

Moreover, it has been clearly stated by *Acharya Charaka* that the vitiated *doshas* after reaching *Shirah* vitiates *Rakta* there to produce *Shiro Roga*. Thus, *Rakta* is the main *dushya* in *Ardhavabhedaka*.

• Srotasa - Rasa-Raktavaha srotasa.

It can be taken as *Siras* of head i.e. blood vessels of head. *Acharya Charaka* has mentioned the involvement of *Shirogata* sira in diseases occurring in head. He stated that the vitiated doshas after reaching *Shirah* vitiates *Rakta* along with *sira* situated there, to produce *Shiroroga*¹⁶. Hence, in disease *Ardhavabhedaka* also, *srotas* involved is *sira* (blood vessels) of headache.

On this basis, the involvement of *Raktavaha* srotasa in *Ardhavabhedaka* can be inferred.

- Srotodushti Sanga, Vimargagamana.
- Agnimandya Jatharagnimandya, Rakta dhatvagnimandya

The etiological factors of *Ardhavabhedaka* like *Atyashana*, *Adhyashana* causes *Jatharagnimandya*. *Raktadushti* is an essential factor in pathogenesis of *Shiro- Roga*. So, *Rakta dhatvagnimandya* can also be inferred.

- Udbhava Amashaya-Pakvashya.
- Sanchara Rasayani.
- Marga Abhyantara.
- Svabhava Ashukari.
- Adhisthana Shirah (Head).
- Vyaktisthana Shirah and its appendages

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Shirah and its appendages like Manya, Bhru, Shankha, Karna, Akshi, Lalata, Ghata, Hanu and Shirogata Sandhi can be considered as Vyakti sthana of Ardhavabhedaka.

Various stages of Samprapti as per shadviddha kriyakala

In *Sanchayavastha*, the various *Nidana sevana* leads to *Dosha-Dushya Dushti*, *Agnimandhya* causes *Apachana-Shuktapaka* formation of *annavisha* i.e. *Ama* in *Amashaya*. Simaltaneously *Rasa-Raktavaha sroto dushti* also takes place.

Explanation:

As in take of food in excess, taking food before the digestion of previous meal etc. is mentioned as the causative factors for *Ardhavabhedaka*. These factors also lead to *Agnimandya* as *Acharya Charaka* stated i.e. the quantity of food to be taken depends upon the power of digestion. Though, even light food article if taken in excessive quantity do affect the *Jatharagni*, which ultimately lead to *Agnimandya* and *Amotpatti*¹⁷.

This *Agnimandya* and *Amotpatti* may obstruct the channels and can aggravate all the three doshas¹⁸.

Nidana Sevana	mandya	- Amotpatti
		Ļ
Aggravation of all the three doshas	←	Srotovarodha

Then comes *Prakopavastha*, where vitiation of *doshas* is seen. *Acharya Sushrata* has mentioned involvement of *tridoshas* and *Acharya Charaka* has mentioned only Vata or Vata-*Kapha* involvement, whereas *Acharaya Vagbhatta* has described the involvement of *Vata dosha* only. The vitiated *Doshas* mixes with *Ama* in *Amashaya*. *Prakupita Dosha & Dushya* leads to *Sroto-Dushti* i.e. *Kha-vaigunya* in *Shirogata Rasa-Raktavaha Srotas* (can be correlated with blood vessels). Thus a base for *prasarana* is ultimately established.

Explanation:

Rakta is considered as the main *dushya* and *shirogata* as the main *srotasa* involved in *shiroroga* as *Acharya Charaka* has included *Shiroruka* in *Shonitaja Roga*¹⁹. Moreover it has been clearly stated that the vitiated *doshas* after reaching *Shirah* vitiate *Rakta* along-with

Sira i.e. blood vessels situated there, to produce $Shiroroga^{20}$.

Now comes the **Prasaranavastha**, in which there is *urdhavagamana* by *Vata dosha* due to its *chala guna* or *Kapha* along with *Vata* causes *urdhavagapravriti*. The *urdhavagata doshas* establishes their seat in *Shirah*, which is the fourth stage i.e. **Sthana sanshrayavastha**.

Vyakti: On the basis of above mentioned factors it is obvious that the vitiated *doshas*, particularly *Vata* or *Vata-kapha* reach the head which in turn vitiate *Rasa* and *Raktavaha srotas* situated there leading to the manifestation of symptomatology of *Ardhavabhedaka* in the fifth stage of *Samprapti*. The aggravated *Vata* gets obstructed by *Kapha* and it dry up the *Kapha* or *Somatatva* of *Manya*, *Shankha*, *Bhru* and *Lalata pradesha* and causes severe pain in half of the head. In this way, to dry up the *Ka*-

pha copulation of *Pitta* is also necessary. So *Sushruta's* opinion is appropriate in his way.

Bhedavastha: If the disease is neglected or not treated due to any cause it may become chronic or lead to various complication such as *ne*-*tra–karna-Nasa*.

Chikitsa (Management Approaches)

1. *Nidana parivarjana*:- Avoid the precipitating factors whenever possible, consume compatible diet and adopt life style modifications suitable to the disease condition.

2. Shamana Chikitsa (Drug therapy):-

- SINGLE DRUGS:- Shunthi (Zingiber officinale Rosc.) Churna, Yashthimadhu (Glycyrrhiza glabra L.) Churna, Godanti Bhasma, Pravala Bhasma/Pisti.
- COMPOUND FORMULATIONS:- Ashvagandharishta, Sirashuladivajra Ra- sa, Sutashekhara Rasa, Laghusutashekha- ra Rasa, Sitopaladi Churna, Rasonadi Va- ti, Kalyanaka Ghrita, Anu Taila, Shath- bindu Taila, Asanabilvadi Taila, Bhallata-kadi Taila, Bhrahmi Taila, Rashnadi Lepa
- 3. Samashodhana Chikitsa:
- > Snehana (Oleation) :-
- a. Bahya (External): Asanabilvadi Taila / Balaguduchyadi Taila
- b. Abhyantara (Internal): Jivaniya Ghrita / Kalyanaka Ghrita
- > Svedana:- Nadisveda, Upanaha
- **Kaya Virechana:-** with Kshira and Ghita
- > Anuvasana Basti:- Purana Ghrita
- Shirovirechana:- Nasya with Kshira and Ghrita or Anutaila or shunthi with milk, Avapidana Nasya with shirisha phala.
- > Raktamokshana:-Siravedha

4. Other procedural therapies:-

- Shirobasti : Asanabilvadi Taila/ Candana balalakshadi Taila/ Kshirabala Taila
- > Shiroabhyanga
- Shiro Lepa: Shunthi mixed with water, Vidanga with Tila and Sarivadi Lepa mixed with Kanji, Taila and Ghrita.
- > Dahana

Pathyapathya

- 1. Should consume:-
- Cereals and Pulses:- Shali (Old rice), Shashtika, Mudga, Masha, Kulattha.
- Fruits and Vegetables:- Patola, shigru, Draksha, Karavellaka, Amra, Dhatri, Mastulunga, Narikela.
- Liquids:- Takra, Lukewarm milk, Yusa, Kanji, Taila.
- Purana ghita (Old Ghee)
- Jangala masa.
- Herbs:- Haritaki, Kustha, Bhringaraja, Kumari, Musta, Usheera.
- Ksheera, ghita abhyasa.
- Practices:- Svedana, Nasya, Dhoomrapana, Virechana, Lepana, Vamana, Langhana

2. Should avoid:-

Suppression of natural urges, contaminated water, Day sleep and Incompatible diet.

Prevention

Practice *Dinacharya* (daily regimen) and *Ritucharya* (seasonal regimen), Practice *Nasya karma* (nasal administration of medicaments), Consume wholesome, compatible and easily digestible food. Avoid the causative /trigger factors, Avoid stress, Practice Meditation

CONCLUSION

Ardhavbhedaka is described as Vataja or Vata-Kaphaja predominant Shirogataroga. Rakta is the main dushya in it. Ama produced due to jatharagni mandya obstructs the srotasa and aggravates all the three doshas. This leads to manifestation of the disease. So, the aim of management of Ardhavabhedaka in Ayurveda is focused on *pachana* of *Ama* by enhancing Jatharagni and pacification of vitiated doshas. Rasayana therapy may also be given to enhance oja. This can relax the mind and give strength to nervous system. Patients are also advised to avoid those diets and life styles, which are trigger factors for *ardhavabhedaka*. Along with this, a number of herbal and herbo-mineral preparations are advised to get relief in symptoms of ardhavabhedaka.

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