AN AYURVEDIC PERSPECTIVE TO THE MANAGEMENT OF TENSION TYPE HEADACHE WSR TO VATIK SHIRASHOOL

Vinay Chaudhary¹, Dimple², Rahul Kadam³, Ruta Kadam⁴

¹A.M.O., Govt. of Haryana, India.
²P.G. Scholar, Dept. of Ayurveda, Bharati Vidyapeeth Deemed University, College of Ayurved, Pune, Maharashtra, India
³Associate Professor, Dept. of Shalyatantra, Bharati Vidyapeeth Deemed University, College of Ayurved, Pune, Maharashtra, India
⁴Professor, wDept. of Agadtantra, Bharati Vidyapeeth Deemed University, College of Ayurved, Pune, Maharashtra, India

ABSTRACT

Tension Type Headache (TTH) is the most prevalent headache disorders. The term TTH has been coined by the International Classification Headache Diagnosis (ICHD-1) and has been retained in ICHD-2. It is characterized by recurrent episodes of Headache lasting from few minutes to a week wherein pain is typically pressing or tightening in quality, mild to moderate in intensity, and bilateral in nature. In Ayurveda Shirashool (headache) has been given as a symptom of many diseases though headache is the hallmark symptom of most of the Shirogatas, but most of the symptoms of tension headache show some correlation with Vatik Shirashool. This paper investigates the causes of Tension type headache, examines the contributing factors and recommends a general line of treatment in accordance with the principles of treatment of Vatik Shirashool which includes Snehanam (Oleation therapy) and Swedan; (Sudation) and Nasyam (Nasal administration of drug).

KeyWords: Headache, Shirashool, Shirogata, Tension Type Headache

INTRODUCTION

Tension Type Headache (TTH) is the most prevalent headache disorders. About 1.4 billion people (20.8% of the population) are affected by Tension Headache, out of which women are found to be more commonly affected than men (23% to 18% respectively) [¹]. In spite of being very common, it is the least studied of the primary headache disorders, despite the fact that it has the highest socio-economic impact. It does not have a biomarker for diagnosis like other primary headaches and remains a diagnosis of exclusion. [²] Tension Type Headaches (TTH) were previously known by many terms, however the term TTH has been coined by the international classification Headache Diagnosis (ICHD-1) and has been retained in ICHD-2 [²].

REVIEW

The word tension shows that the headache has some relation with Muscular Tension. Though this is very common form of headache, however most subjects never consult a doctor. Tension Type Headache (TTH) are recurrent episodes of Headaches lasting anywhere from minutes to week. The pain is typically pressing or tightening in quality of mild to moderate intensity, and is bilateral in nature. It does not
worsen with routine physical activity. Nausea and vomiting are usually absent but Photophobia and Phonophobia may be present.[2]

**CRITERIA OF DIAGNOSIS:**
The diagnosis of Tension Type Headache is essentially clinical and relies only on symptoms and signs

**Salient features of Tension Type Headache** [3]
Duration: 30 min to 7 days
2 out of 4 following Headache characters:
- Bilateral
- Pressing/Tightening (Non pulsating)
- Mild to Moderate intensity
- Not aggravated by routine physical activity

**CLASSIFICATION OF TENSION TYPE HEADACHE** [3]

<table>
<thead>
<tr>
<th>FREQUENCY</th>
<th>INFREQUENT ETTH</th>
<th>FREQUENT ETTH</th>
<th>CHRONIC TTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 days/yr</td>
<td>More than 12 days/yr</td>
<td>More than 180 days per year.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>At least 10 episodes per month for at least 3 months</td>
<td>15 days/month</td>
<td></td>
</tr>
</tbody>
</table>

**CONTEMPORARY AND TRADITIONAL CORRELATION**
In Ayurved, Shirashool (headache) has been given as a symptom of many diseases. Ayurvedic texts also describe Shirashool as primary disorders as Shirorogas [4]. Head has been given utmost importance by Charak who has declared it as the most important organs of the body [5]. Though headache is the hallmark symptom of most of the Shirorogas, a majority of the symptoms of tension headache show some correlation with Vatik Shirashool.

**CLINICAL FEATURES:**

<table>
<thead>
<tr>
<th>SYMPTOMS</th>
<th>Vatik Shirashool</th>
<th>Tension Type Headache</th>
</tr>
</thead>
<tbody>
<tr>
<td>Both of the associated symptoms:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- No nausea and vomiting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- No more than either of the two ie Photophobia and Phonophobia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Not attributed by another disorders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Excluded by History and proper investigation.</td>
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</tr>
</tbody>
</table>

**CLASSIFICATION:**
The ICHD -2 divided Tension type Headaches into two broad categories, Episode (ETTH) and Chronic (CTTH). Episode Tension Type Headache is then divided into two –Infrequent and Frequent. All of the three types of tension type Headache have similar clinical features.

1. **Head Pain**:
The pain of TTH is usually described as pressure like, dull, constricting. In 90% of TTH patients the location of pain is bilateral but can be anterior-posterior. While describing the characteristics of Vatik Shiroroga, Charak says that it produces Stambhan and Sphuran. Both the terms are pretty similar to constricting type of headache [6]

2. **Accompanying Symptoms**:
Presence of nausea and vomiting rules out the diagnosis of Tension Type Headache. Charak has not mentioned Chardi or Arochak like Lakshan in Vatik Shirashool [6]

3. **Precipitating and Aggravating Factors**:
It is believed that stress, lack of sleep and not eating on time can precipitate TTH. Charak has clearly mentioned Prajagrat and Upvasat and Bahya Trasa as Hetu of Vatik Shirosool which show resemblance to lack of sleep, fasting and stress [6]

**Correlation Of Vatik Shirashool And Tension Type Headache**

Table No 2 showing Correlation of Vatik Shirashool and Tension Type Headache
Dimple et al.: An Ayurvedic Perspective to the Management of Tension Type Headache wrt Vatik Shirashool

<table>
<thead>
<tr>
<th>Headpain</th>
<th>Bilateral Constriction of Griva Pradesh Band like pain</th>
<th>Bilateral Dull, Pressure like, constriction Band like pain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accompanying symptoms</td>
<td>No Nausea and Vomiting</td>
<td>No Nausea and vomiting Either Photophobia or Phonophobia</td>
</tr>
<tr>
<td>Precipitating and Aggravating factors</td>
<td>Excessive Talking Ratri Jagran increase Shoka Bhaya Trasa (stress) Increase Upavas (not adequate) or Fasting increase</td>
<td>Stress increase Lack of sleep increase Not eating on time increase</td>
</tr>
<tr>
<td>Relieving factors</td>
<td>Snigdha Usna Aushad and Ahar-Vihar gives relief</td>
<td>Non pharmacological treatments in the form of relaxation therapies like massage have been found to be good.</td>
</tr>
</tbody>
</table>

**TREATMENT:**
Considering Tension Headache as Vatik Shirashool, its principle of management consists of
1. **Snehanam:** (Oleation therapy)
2. **Swedan:** (Sudation)
3. **Nasyam:** (Nasal administration of drug) [7]
Since Tension Headache is quite similar to Vatik Shirashool in clinical presentation
**Snehanam** through its Snigdha Gunad (unctuousness) pacifies Ruksha Guna of Vata by which it gets aggravated and causes the illness
**Swedan and Upanaham** with its Ushna Guna pacify the Sheeta Guna of Vata and thus alleviate its vitiation.
For its management Charak also indicates special type of poultice i.e. Upanaha sweda (a special type of swedana which is made up of fish meat and Agaru together) [8]
**Nasyam** therapy by its specific action on Urdhva Jatru (region above the neck or shiro-pradesh) not only pacifies Vata but also acts as Rasayan therapy to prevent relapses.
For **Nasyam, Charak** has advocated some special formulation like Rasnadi Tailam [9] and Baladi Tailam [10] both of which contain Vatashamak and Brihan (nourishing) dravyas.

**Shaman Yogas:** *Mayur Ghritam* [11] or *Mahamayur ghritam* [11, 12] have been advocated by Charak in this context.

**Diet:** *Vatahara Anna* [7] or diet which pacifies Vata by its Snigdha and Ushna Gunas. eg. Milk, Ghee, Meat soup etc.

**External Therapies:** Charak has mentioned the following for the management of Vatik Shirashool. All therapies like *Abhyangam* (Massage), *Shirodhara* (Pouring of medicated oil on forehead), *Pichu* (medicated tampon) and *Shirobasti* (Pouring of medicated oil in a cap-like structure) have been indicated. Most of the above mentioned therapies possess Vata pacifying properties.

**DISCUSSION**
Tension Type Headache (TTH) is the most prevalent headache disorders It does not have a biomarker for diagnosis like other primary headaches and remains a diagnosis of exclusion. It is characterized by recurrent episodes of headache lasting from few minutes to a week wherein pain is typically pressing or tightening in quality, mild to moderate in intensity and bilateral in nature.
In accordance with Ayurvedic concepts, inspite of headache being the hallmark symptom of most of the Shirorogas, the majority of the symptoms of tension headache show some correlation with Vatik Shirashool. Considering this, the most beneficial line of treatment is Snehanam, Swedanam and Nasyam. Subsequently, Shaman yogas and Diet play an important role.

CONCLUSION

The Ayurvedic therapeutic techniques and medications offer good relief in TTH on utilisation of therapeutic measures prescribed by the classics in the context of Vatik Shirashool. This management also reduces the occurrence of relapse.

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CORRESPONDENDING AUTHOR

Dr.Dimple
P.G. Scholar, Dept. of Agadtantra,
Bharati Vidyapeeth Deemed University,
College of Ayurved, Pune, Maharshtra, India
Email: dr.dimplechoudhary@gmail.com

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