

SHIRODHARA IN THE MANAGEMENT OF VATIKA SHIRASHOOLA

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ABSTRACT

Shirorogas occupy a prime position in the *urdhwajatrugata vikaras*, as it is the seat of prana and indriyas. Mostly the term *shiroroga* is used as synonym of *shirashoola*. The term *shirashoola* encompasses all the aches and the discomfort located in the head. But in practice its application is restricted to discomfort in the region of the cranial vault. Headache is the most common reason for seeking medical help. In general 64% population reports headache. The prevalence of tension type headache has varied widely, affecting about 3% of the general population almost every day and as many as 10% about once a week (Rasmussen et al). *Acharya Vagbhata* has described the *Gandusha*, *Mukhalepa* and *Murdha Tailam*. The four types of *Murdha Tailam*² described there include *Abhyanga*, *Seka*, *Pichhu* and *Basti*. *Seka* here means *Shiro-Parisheka*, which is also known as *shirodhara*. *Shirodhara* is a procedure in which a liquid (oil, milk, butter milk, water, and decoc-tions) is poured in a continuous stretch on the forehead. It is mentioned under *Keraliya Panchakarma*, which is a simplified form of classical *Ayurvedic Panchakarma* therapy.

Keywords: *Shirodhara*, Headache, *Shirashoola*

INTRODUCTION

Shirorogas occupy a prime position in the *urdhwajatrugata vikaras*, as it is the seat of prana and indriyas. It is *sadyopranahara marma* and is *ashraya* (*moola*) for other parts of the body. Importance of *Uttamanga* and disease afflicting it has been mentioned in the authoritative texts of *Ayurveda*. Mostly the term *shiroroga* is used as synonym of *shirashoola*. The term *shirashoola* encompasses all the aches and the discomfort located in the head. But in practice its application is restricted to discomfort in the region of the cranial vault. Headache is the most common reason for seeking medical help.

It is clearly mentioned by *Charaka* and *Harita* that *shoka* and *bhaya* is specifically responsible for *vataja shira shoola*. Its increasing global incidence is a cause of concern for all which has forced to initiate the research work to discover an effective safe economical medicine for the better management of this challenging ailment. *Acharya Vagbhata* and *Yogaratanakara* have included excessive sudation, *Krimi*, avoidance of pillow during sleep, aversion to massage and constant looking at objects; as its etiological factors, but not mentioned head injury, sexual indulgence, exposure to dust and snow, heavy and sour food, advent of cloud, mental stress and adopt-

ing regimen contrary to locality and season, in the general etiological factors for disease occurring in head.

Our life style has become drastically changed and our growing needs have no end. Speed and accuracy are the prime demands of modern era.

Acharya Vagbhatta has described the *Gandusha, Mukhalepa and Murdha Tailam*. The four types of *Murdha Tailam*² described there include *Abhyanga, Seka, Pichhu* and *Basti*. *Seka* here means *Shiro-Parisheka*, which is also known as *shirodhara*. *Shirodhara* is a procedure in which a liquid (oil, milk, butter milk, water, and decoctions) is poured in a continuous stretch on the forehead.

Definition of Headache

A Headache at best is an unpleasant thing; most unpleasant, because it attacks the seat of reason. It is a common human experience, diverse in its expressions; complex in its manifestation and difficult to understand in any simple mechanistic way. The most of all headaches represents an inability of the individual to deal in some measure with the uncertainties of life. Often headaches are one of the consequences of a disease suffered by a patient or congenital weakness in some of the bodily system or a state of the nervous system that can be altered, causing a neurogenous or psychogenous headache.

Cause of Headache:

- Psychosomatic Headache.
- Intracranial and Local extra-cranial.
- Cranial neuritis and neuralgia.
- General or Systemic causes.
- Referred Pain.
- Psychogenic.
- Tension.

Mechanism of Headache:

It has been well established now that headache may be generated centrally and involves the serotonergic and adrenergic pain modulating systems where serotonergic system's 5HT interacts with enkephalin neurons whereas in the adrenergic system norepinephrine uses GABA containing interneurons. There is also involvement of primary sensory neuron containing encephalin receptors and uses the substance P and the polypeptide as a neurotransmitter, which inhibit neuronal transmission, preventing propagation of pain impulses from the periphery to CNS. Sensory stimuli from head are conveyed to the CNS via trigeminal nerves, for structures above the tentorium in the anterior and middle fossa of skull

via the first three cervical nerves for those in the posterior fossa and the inferior surface of tentorium. The ninth and tenth cranial nerves supply a part of the posterior fossa. Sometimes tension headaches can make one feel sick or nauseous and because of the way that neck muscles go in spasm; it can affect the blood supply to the upper part of the spinal cord, making the patient feel dizzy, woolly-headed, and off-balance. The changes in tension headaches sometimes cause the arteries in the muscles to open up, exposing the smaller arteries to full force of the blood pressure. Such type of tension headache is often pounding, in time with the heartbeat. Typically, straining or exercising exacerbates the headache, as the blood pressure rises even more during these activities.

Types

Recent classification and research on this illness has helped to elucidate and categorized Tension Type Headache – TTH based upon episodic and chronicity into:

(i) Episodic Tension Type Headache - ETTH

(ii) Chronic Tension Type Headache - CTTH

Episodic Tension-Type-Headache – ETTH:

It is defined as recurrent episodes of headache meeting the diagnostic criteria as given in the table. ETTH has been further subdivided into –

a) Episodic tension-type-headache associated with disorder of pericranial muscles.

b) Episodic tension-type headache unassociated with disorder of pericranial muscles.

ETTH is the most common headache with a life time prevalence of 69% in men and 88% in women (in Denmark) and a one year prevalence of 63% in men and 86% in women. ETTH varies in frequency as well as in severity from rare, brief episodes to frequent, often continuous and disabling headaches. Its prevalence does not differ significantly with socio-economic background. Pain intensity increases with headache attack frequency.

Chronic Tension Type Headache - CTTH:

CTTH requires head pain to be present for 15 days a month for at least 6 months, many patients have daily headache.

Synonyms of Shirashoola: Shiroabhitapa, Shirovedana, Shiropeda.

Samaanya nidaana of shirorogas: It can be classified under 2 headings

- *Aharaja Karanas* (Dietic factors)

➤ *Viharaja Karanas* (Environmental, Personal and Climatic factors).

Aharaja karanas: Adhikamlasevana (Excessive intake of sour food), *Guru ahara sevana* (Intake of heavy food stuffs), *Atisheeta jalapana* (Excessive Drinking of very cold water), Adhikamadyapana (Alcohol abuse), *Adhikadhoomapana* (Smoking), *Ajeernaaharasevana* (Intake of indigestible foods), *Haritasevana* (Eating more greens)

Viharaja karanas: Vega dharana (Suppression of natural urges), *Rajosevana* (Exposure to dust), *Atapasevana* (Exposure to sun light), *Atisweda* (excessive sudation), *Jalakreeda* (Excessive swimming), *Tusharasevana* (Exposure to snow or mist), Diwaswapna (Day sleep), *Poorvavatasevana* (Exposure to wind blowing from east), Nishi jagarana (Night arousal), *Atirodana* (Excessive weeping), *Ucchairbhashana* (Speaking with loud voice), *Atimaitihuna*

(Over indulgence of sex),

Urdhwaadhahpratatekshanaihi (Stare down or up always), *Abhigata* (Head injury), *Upadhama* (Unsuitable head postures), *Ama* (Infected food), *Krimi* (Worm infestations), *Asatmyagandhasevna* (**Inhaling bad smell**).

Classification of shirorogas: All the shirorogas have involvement of Tridoshas (vata, pitta and kapha) but one or two doshas have their predominance, due to which classification is made. According to Sushruta there are 11 shirorogas. : They are

- 1). *Vataja Shiroroga*
- 2). *Pittaja Shiroroga*
- 3). *Kaphaja Shiroroga*
- 4). *Snnipataja Shiroroga*
- 5). *Raktaja Shiroroga*
- 6). *Kshayaja Shiroroga*
- 7). *Krimija Shiroroga*
- 8). *Suryavarta*
- 9). *Anantavata*
- 10). *Ardavabhedaka*
- 11). *Shankhaka*.

General management of Shiroroga:

Commonly in all types of headache the following preventive measures should be taken –

1. Nidana Parivarjana-

According to the treatment point of view, the etiological factors which produce headache should be avoided. Commonly rest, countenance without stress, avoiding the holding of the urges, controlling

the mind is very helpful. Also other Aaharaja and Viharaja Hetus should be avoided.

2. Samshodhana Chikitsa - Shirovirechana – Nasyakarma has been advised as the important method of treatment in Urdhvajatrugata Rogas. Thus repeated use of Nasya with special medicines which are indicated for such conditions is to be put into practice in headaches.

3. Samshamana Chikitsa -

Simultaneous to Nidana parivarjana, the vitiated Doshas should be brought to their normal state by help of drugs, based on Samanya Vishesh principles, according to predominance of the manifestating Dosha.

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In this procedure medicated liquids are allowed to trickle slowly on the forehead through a fine stream from an appropriate height. The vessel used is known as *Dharapatra* made up of clay or metal with probable capacity of 64 ounce (approx. 1.81 liter). In the basement of *Dharapatra* there should be a tiny hole for the passing of a wick (length = 6 *Angul*) which should hang 4 fingers (*Angul*) above the forehead of the patient. The special table on which patient lies is called *Droni* having suitable drainage system for the poured liquid.

Indications: *Shirashoola, Shankhaka, Suryavarta, Ardhavabhedaka, Suryavarta, Ardita, Pakshaghata, Hanugraha, Akshishula, Nidranasha, Shirogata Vata, Shirah Kampa*

Procedure of Shirodhara: The procedure of *Dhara* is carried out in three stages-

1. *Purva karma* (Pre operative Procedure)
2. *Pradhana karma* (Main Procedure)
3. *Pashchat karma* (Post operative Procedure)

Purva karma: In *Purvakarma* preparation of the patient and equipment (*droni, dhara patra*, other equipments like cloth piece, cotton etc.) along with *sanskara* of *taila* is done (i.e. heating of *taila* just above the room temp.)

Pradhana karma: The patient is asked to become free from his natural calls before lying on *Dhara* table. The patients are allowed only to take tea, if they are addicted to it. The patient is asked to lie down on *Dhara* table on his back with his head resting on slightly elevated wooden platform made in the table. Then both the eyes are covered with cotton piece so that the *taila* may not enter in eyes.

Then lukewarm *taila* is poured in *Dharapatra* and is allowed to trickle continuously in a fine stream with neither very fast nor very slow rate on the forehead of the patient. The entire forehead is covered with the flow by maneuvering the *Dharapatra* in the pendulum manner. The *taila* is collected in another vessel and is used to refill the *Dharapatra* before it is empty.

Dharakala¹⁰: *Dhara* process is done for at least half an hour in the morning upto 21 days. It is believed that through this irrigation method of head the effect of medications can be achieved upto the limbs and entire body by 21 days. In the patients having dryness and *Pittayukta Vata*, the period of *Shirodhara* should be $2\frac{1}{2}$ *prahara* or 2 *prahara* and in *Snigdha Kaphayukta Vata* it is one *prahara* or it should be upto perspiration initiation.

Changing the Liquid: When milk is used for *shirodhara*, it should be changed daily. *Dhanyamla* can be used upto 3 days. Oil also should be changed at 3 days interval. In the first 3 days, half of the oil is used, for next 3 days later half of it is used and on the 7th day all the first and second half both are mixed together, after that it should be discarded.

Temperature of the Liquid: It should be *Sukhoshana* near about to body temperature.

Pashchat Karma: After completing *Shirodhara*, head and hairs of the patient are wiped with a cloth piece. Eyes may be washed with lukewarm water if needed. This is followed by a short duration of rest and massage of the body including head with oil and then a lukewarm bath. The patients are advised to have a light diet and as per indications they can continue their daily routine.

Pariharaniya: The patient should avoid physical exertions, mental excitement such as anger, grief etc., sexual desire and exposure to cold, sun, dew, wind, smoke or dust. Riding on elephant or horses, walking, speaking too long or too loud and such other actions that may give any strain to the system must be avoided. Sleeping during day-time and standing continuously for long period must also be avoided. It is also advisable to use a pillow which is neither very high nor very low, during sleep at night.

Pariharakala: The patient should take *pathya* and remain as *jitendriya* up to the period which is taken for the completion of *Dharakarma*.

Contra-indications:

- Space occupying lesion in the brain
- Glaucoma

- Fever
- Conjunctivitis
- Inflammatory conditions of head
- *Kaphaj Vikaras- Shirodhara* further increases *kapha*, which makes the diseases difficult to cure.

DISCUSSION

Mode of Action of *Shirodhara* Percutaneous absorption of the drug – *Dhara* acts by percutaneous absorption of the medicine through the skin into the microcirculation. The therapeutic effect may be due to diffusion of the drug *dravyas* through the fine pores present over forehead in similar way as seen by the procedure like *Abhyanga*, *Snana*, *Udvardana*, *Parisheka* etc.

Application of heat to the forehead skin

Luke warm oil and water act as a vehicle to transfer heat to the skin. This local application of heat causes vasodilatation of arterioles and the increased circulation to the concerned part further facilitates more nutrients and oxygen to the part.

CONCLUSION

In Ayurveda much importance has been given to *shiras*, as it is one among the three *marmas* and listed under *dashavidhapranayatanas*. *Shirorogas* occupy the prime position in *urdhwajatrugatavikara*. Headache is the most common reason for seeking medical help. Many dietic factors, environmental, personal and climatic factors will influence the *shirashoola*. *Shirodhara* is a safe and effective remedy for the management of *vatika shirashoola*. Ayurvedic treatment modality as a safe and effective remedy for the management of *vatikashirashoola*

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