A case report providing brief ayurvedic and modern review and treatment of Migraine (Ardhavabhedaka)

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Abstract:

Ardhavabhedaka is a very common disease dignosed in Shalakya Tantra OPDs. The headache is so severe and pulsatile that patient is very irritated during it. Unilateral headache in modern science is explained as Migraine. Modern medicine has done a lot but gives only temporary relief. Here is a case study in which history of headache was oh 6-7 years but remarkable relief was noticed only with Ayurvedic regimen and Nasya therapy. With the treatment given not only headache but the associated complains were also relieved.

Keywords: Migraine, Ardhavabhedaka

Introduction:

Migraine is moderate to severe unilateral and recurrent headache which is pulsating in nature and last from two to 72 hour^[1]. It affects the routine life of the patient. This complaint is quite common in Shalakya Tantra OPD. This headache is associated with nausea, vomiting, and sensitivity to light, sounds and smells [2]. This pain is generally made worse by physical activity. Mostly one third of the patients feel an aura: typically a short period of visual disturbance which signals that the headache will soon occur^[3]. Triggers include hormonal changes, certain food and drink, stress and even exercise. It is of relapsing nature and frequency varies from 3-6 times in a month. Patient likes to stay in dark room and refuses to talk with anyone. Migraine headache is a result of specific changes within the brain. In Ayurved such type of headache is described as Ardhavabhedaka. Ardhavabhedaka is Tridoshaja as per Acharya Sushruta, Vata- Kaphaja as per Charaka and Vataja as per Vagbhatta. In present article a case study is discussed having history of migraine since 10 years.

Migraine:

Migraine is a very common disorder characterized by repeated attacks of headache usually unilateral with different intensity. It is a highly prevalent headache disorder over the past decade having considerable impact on the individual and society. It can involve brain, eyes and autonomous nervous system. Migraine results from blood vessel enlargement and release of chemicals from nerve fibers. Due to the modern life style, people are facing hectic and competitive stressful life. All these habits together will act as the causative factor for many diseases including migraine. About two-thirds of cases run in families. [4] Changing hormone levels may also play a role, as migraines affect slightly more boys than girls before puberty and two to three times more women than men. [5] The risk of migraines usually decreases during pregnancy. [6] They are, however, believed to involve the nerves and blood vessels of the brain. [7]

Signs and Sympoms:

There are four possible phases to a migraine, although not all the phases are necessarily experienced: [8]

- Prodome: occurs hours or days before headache
- Aura: immediately precedes the headache
- Pain: headache phase
- Postdrome: effects experienced following the end of a migraine attack.

Management:

In modern there are three main aspects of treatment: trigger avoidance, acute symptomatic control, and medication for prevention. Medicines are more effective if taken in earlier phase of attack. Analgesic medicines like paracetamol, Diclofenac, Aspirin are the mainstay of treatment. Paracetamol in combination with metoclopromide is also effective. Triptanes such as sumatriptane are effective on both pain and nausea. Ergotamines and dihydroergotamines are also equally effective.

Ardhavabhedaka:

As per Acharya Sushruta, If one half of the head develops severe tearing and pricking pain, giddiness and piercing pain, suddenly after a fortnight or ten days. This should be diagnosed as Ardhavabhedaka caused by all the three doshas.^[11]

The vata, getting provoked by addiction to dry articles or excess of diet oreating on a loaded stomach, exposure of eastern wind and frost, suppression of natural urges, excessive sexual indulgence, exertion and exercise, either alone or in combination with Kapha, seizes the one half of head and causes acute neuralgic pain in the sides of the neck, eyebrow, temple, ear, eyes or forehead of one side. This pain is very agonizing like that of churning rod (red hot needle). This disease is called Ardhavabhedaka. If the condition becomes aggravated, it may even impair the functions of the eye and ear. [12]

Treatment of Shira shula

• Nidana Parivarjana

According to the treatment point of view, the etiological factors producing headache should be avoided. Commonly rest, avoid holding of the urges, controlling the mind is very helpful. Also other Aharaja and Viharaja Hetus should be avoided.

Samshodhana Chikitsa

Shirovirechana-Nasyakarma has been advised as the important method of treatment in Urdhavajatrugata Rogas. Thus repeated use of Nasya with special medicines that are indicated for such conditions is to be put into practice in headache^[13].

· Samshamana Chikitsa

Along with Nidana parivarjana, the vitiated doshas should be brought to their normal state with the help of drugs, based on Samanya Vishesh principles, according to predominance of the manifesting dosha.

Other Measures

Yogratnakara has described the following measures for Shiroroga. Snehana, Upanaha, Svedana, Dhumpana, Lepa, Langhana, Parisheka, Agnikarma, Raktamokshana, Shirobasti. These measures should be applied after considering the predominance of dosha and other general considerations of the patient.

• Sattvavajaya

In the present time counseling is not only beneficial in psychiatric conditions but also in psycho-somatic diseases like Migraine, as a supportive therapy to alleviate the aggravated condition by making the patient able to cope up

his illness with better adjustment and adaptation. Psychological and Psychodynamic methods are no more a palliative management but also a curative treatment in those conditions.^[14]

The basics approach is,

- 1. Assurance
- 2. Exchange or replacement of emotions viz. replacement of Kama, Krodha, Bhaya, Harsha, Irshya etc. with appropriate emotions.
- 3. Psychoshock therapy

Ardhavabhedaka is best treated with Ghrita, Taila and Majja, Shiro Virechana, Kaya Virechana, Nadisveda, Niruha and Anuvasana, Basti, Upanaha and Shiro Basti

Case Study:

A female patient: ABC Age: 25 years

Religion: Muslim Native of Rajasthan

Occupation: Teacher

Chief Complains:

- Severe throbbing and piercing unilateral headache associated with nausea and felt relief after vomiting since 5-6 years.
- She liked to stay in dark, do not wanted to talk anybody during headache
- Frequency of headache is 3-5 times in a month
- Before headache she always feels an aura and within 1-2 days headache starts

Associated complains:

She had constipation, gas formation and acidity usually.

Medical History:

She has taken various treatments including allopathic and homeopathic but temporary relief was received.

Patient was on tablet Migranil and tablet Flunar when she came to OPD.

Patient was not able to do her job because of headache so she was also in stress.

Investigation:

Routine blood hemoglobin level was carried out to exclude anemia.

Treatment Given:

- ❖ Shirahshuladi vajra rasa 2 tablets twice daily
- ❖ Pathyadi Kwatha 40 ml twice daily with 40 ml lukewarm water
- ❖ Combination of Avipattikar Churna 6gm, Shankha bhasma 500mg and Mulethi 1gm was given twice daily empty stomach with milk.
- ❖ 2 sittings of marsha nasya were given with Shadbindu Taila

Oral drugs were continued for a period of two months and pratimarsha nasya with Shadbindu taila was continued along with.

Counselling of the patient was also done and was instructed to do a few changes in life style like avoiding late night heavy and spicy meals, going to sleep before 11pm., avoid diva swap etc...

Pathya Apathya followed:

Patient was indicated to have less oily and spicy food. Food items like pickels, bhujia, junk foods were prohibited. Frequency of tea intake was decreased (from 6-7 times a day to 1-2 times a day). Frequency of non vegetarian food intake was decreased from twice weekly to once in a week or 15 days.

Effect of Therapy:

Patient's chief complain of unilateral headache was relieved after taking the treatment for 15 days.

She felt headache only once during the treatment period.

Complains of nausea and vomiting were fully relieved.

Associated complains of acidity, constipation and flatulence also resolved completely.

Follow Up:

At an interval of 15 days.

Only pratimarsha nasya with shadbindu taila was continued after treatment period.

Conclusion:

Ardhavabhedaka can be correlated to Migraine as both have unilateral headache which comes as an attack in a frequency of 3-7 times a month. Without vata shula is not possible so vata prakopaka nidanas were avoided. Gastric problems and shiro shula are connected to each other. Veg dharan also contributes a lot to it. The regimen given above not only relieves headache but also it gives relief from gastric complains. This regime works as tridosha shamaka and nasya worked as shodhana.

Ayurvedic treatments give a better result in migraine. Modern science treatment provides temporary relief and patient has to continue it for a very long term whereas Ayurvedic treatment gives better results.

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