



ISSN 2456-3110

Vol 6 · Issue 4

July-Aug 2021

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Maharshi Charaka
Ayurveda

Indexed

Ayurvedic management of Stress Induced Migraine - A Single Case Report

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ABSTRACT

In general medical practice, migraine can be considered as the most common and misinterpreted disease. It was observed that, around 40% of individuals worldwide are currently suffering from migraine headache which results in disturbance in daily routine of individuals. The life style of the people of modern era has changed due to rapid urbanization. Due to changed work expectations for better life style, stress is causing increased incidence of acute and chronic disorders. Migraine is an episodic headache disorder peculiarized by pain involving either half of the head associated with nausea, vomiting, and sensitivity to light, sound, or smell. Symptoms of Migraine are having resemblance with *Ardhavabhedaka*, which is mentioned under *Shiroroga*. All the three *Doshas* are engaged in the pathogenesis with the predominance of *Vata* or *Vatakapha*. Routinely the management of migraine is aimed at stopping the symptoms and preventing the future attacks. Use of modern medicines can result in gastric irritation and drug dependency which can trigger the attacks again. In Ayurveda, we have a wide array of natural remedies which can be used in *Ardhavabhedaka*. In present case study the patient of *Ardhavabhedaka* was treated with *Nasya Karma* and *Shaman Chikitsa*. *Nasya Karma* (Errhine Therapy) is considered as the best therapeutic intervention in *Shiro Roga* by *Acharya Charaka*. This patient has been treated with *Lodhra Ghrita Nasya*, *Drakshadi Kashaya*, *Avipathi Churna*, *Kamaduga Rasa* and *Manasamitra Vataka* assessment was done. Follow up was done after 3 months and the relief was considerable.

Key words: *Ardhavabhedaka*, *Lodhra Ghrita Nasya*, *Shiroroga*, *Migraine*, *Pranayama*

INTRODUCTION

Migraine headache, in general, is one of the commonest complaints of the people seeking professional help. It is also a major cause of absenteeism from work and of avoidance of social and personal activities. The term "migraine" refers to a syndrome of vascular spasms of the cranial blood

vessels. Migraine headaches range from moderate to very severe, can cause debilitating pain and can last from 4 to 72 hours.^[1] Prevalence of Migraine in India is 16-20%.^[2] During adolescence migraines becomes more common among women^[3] and this persists for the rest of the lifespan, being two times more common among elderly females than males.^[4] Migraines often run in families and affect all ages.^[5] Medications used to combat migraine falls under three broad categories such as Pain-relieving medication, Preventive treatment and Complementary treatment.

Ayurveda is the ancient health science which has glorious past and bright future. It comprises many dimensions about health of human being. Symptoms of Migraine are having resemblance with *Ardhavabhedaka*, which is mentioned under *Shirorogas* by *Acharya Susruta*.^[6] All the three *Doshas* are engaged in the pathogenesis with the

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Submission Date: 03/07/2021 Accepted Date: 05/08/2021

Access this article online

Quick Response Code



Website: www.jaims.in

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predominance of *Vata* or *Vatakaptha*. Diseases occurring in the *Urdhvajatru* have been very clearly highlighted in the *Ayurvedic* classics along with their management. *Nasa* (nose) has been considered as the gateway of *Shirah*.^[7] Hence *Ardhavabhedaka* is best treated with *Shiro Virechana*, *Kaya Virechana*, *Nadisveda*, *Niruha* and *Anuvasana*, *Basti*, *Upanaha* and *Shiro Basti*. Also, treatment for *Manas Dosha*, *Raja* and *Tama* is necessary for *Ardhavabhedaka*. In this case study the patient of *Ardhavabhedaka* was treated with *Nasya Upakrama*^[8] with *Lodhra Ghrita*^[9] and *Shaman Chikitsa*. The following are given as *Shaman Oushadhis* - *Drakshadi kashaya*, *Kamduga Rasa*,^[10] *Avipathi Choorna* and *Manasamitra Vati*. The patient was treated with the *Ayurvedic* medicines for 21 days. Along with medicines, patient was advised to practice *Pranayama* for 21 days. Assessment of the treatment was done and found to be effective.

MATERIALS AND METHODS

Case Report

A female patient of age 28 years approached Shalaky Tantra OPD of SJIM Hospital, Bengaluru on 07.01.2021, complaining of throbbing headache on right side of her forehead, nausea, sensitivity to light, sound and smell, anxiety attacks, constipation and belching.

History of Present Illness

Patient was accompanied by her mother and history was given by the patient herself. Her headache was severe in intensity, throbbing in nature, usually lasting 10-12 hrs. often associated with nausea. It was aggravated by loud noises and flashing lights. She had 3-week history of constipation and belching. The patient was conscious during these attacks and does not give any history suggestive of aura. She did not seek any medical help. The symptoms were relieved by taking self prescribed NSAIDs. Patient had difficulty in paying attention to her work as she was unable to get proper sleep at night. Hence, she approached our OPD

History of Past Illness

Patient had similar headache episodes and panic attacks 3 years ago. She underwent treatment for

panic attacks. There was no history of hypertension & diabetes mellitus.

Personal History

Ahara: Vegetarian, Takes food at improper time, *Sheeta*, *Guru* and *Amla-Rasa Pradhan Ahar*.

Vihara: Sleeping late at night, Disturbed sleep

Family History

Patients' father suffered from migraine headache

Personal History

- Occupation : Teacher
- Marital status : Unmarried
- *Prakriti* : *Vata-Pittaja*
- *Koshta* : *Madhyam* (on the basis of bowel habit)
- *Bala* : *Madhyama* (Average)
- *Satva* : *Madhyam*
- *Satmya* : *Madhyam*
- Addiction : None
- Sleep : Inadequate (Disturbed)
- *Agni* : *Abhyaharana* - Normal & *Jarana* - Poor.

General Examination

- *Nadi* : *Vata pradhan Pitta*
- *Mala* : *Kosthabaddhata* (Constipation)
- *Mutra* : Normal
- *Jivha* : Dry & cracked
- *Shabda* : Sluggish
- *Sparsha* : Normal(samanya),
- *Druka* : Normal
- *Akruti* : *Madhyama*.

Assessment Criteria

The improvement was assessed on the basis of relief in the signs and symptoms of the disease. Scoring pattern for subjective criteria is recorded in the table given below.

Criteria	Symptoms	Score
Intensity of Headache	No Headache	0
	Mild headache which doesn't interrupt patient's regular activities.	1
	Moderate headache which interrupt patient's activities & diverting her concentration	2
	Severe headache in which patient is unable to perform her regular work.	3
	Severe headache due to which patient prefers to be in bed/dark room	4
Duration of Headache	Nil	0
	1-6 hours/day	1
	7-12 hours/day	2
	13-18 hours/day	3
	18 –24 hours/day	4
Nausea	No nausea	0
	Occasionally	1
	Moderate nausea, but does not disturb the routine work	2
	Severe nausea, disturbing routine work	3
	Severe enough, small amount of fluid regurgitating from mouth	4
Photophobia	No photophobia	0
	Very mild photophobia	1
	Photophobia on exposure to sun light/bright light	2
	Photophobia on exposure to indoor light	3

	Severe Photophobia in which patient unable to open the eye	4
Phonophobia	No phonophobia	0
	Very mild phonophobia	1
	Moderate phonophobia	2
	Severe phonophobia	3
	Severe Phonophobia which force to take medicine	4
Constipation	Nil	0
	Mild	1
	Moderate	2
	Severe	3
	Very severe	4
Belching	Nil	0
	Mild	1
	Moderate	2
	Severe	3
	Very severe	4
Disturbance in Sleep	Never	0
	Rarely	1
	Sometimes	2
	Often	3
	Always	4

Treatment Plan

Chikitsa	Aushadha Yoya	Kala	Avadhi	Matra
Sodhana Chikitsa	Lodhra Ghrita	Pratah Kala	7 Days	6 Bindu
Shamana	Drakshadi	Muhurmuhur	21	5 ml

Chikitsa	Kashyam		Days	
	Kamaduga Rasa	Adhobhutkam	21 Days	500mg BD
	Avipathi Churna	Nisha Kala	21 Days	5 gm OD
	Manasamitra Vati	Nisha Kala	21 Days	500 mg OD
Pranayama	Anuloma Viloma	Pratah Kala	21 Days	10 minutes

Do's & Don't

Do's	Proper sleep	Disturbed sleep is a trigger for migraine, so patient is advised to follow a proper sleep schedule
	Stay hydrated	Patient is advised to take min 8 glasses of water a day as mild dehydration can be act as a trigger
	Track the migraine attacks	Patients is told to keep a migraine diary
	De-stress	Counseling, biomedical feedback, music, exercise etc can bring calm to a migraine prone patient
	Sticking to fresh food	Patient is advised to take nutritious diet

Don't's	Skip meals	Skipping meals is a big migraine trigger, as it can lead to deflecting sugar levels and can lead to headache
	Caffeinated beverages	Patient had the habit of taking more tea and coffee. Hence advised not to take any of the caffeinated drinks
	Prolonged use of digital screens	Patient is a teacher by profession. She was using digital devices for a longer period during the pandemic
	Pain relievers	Patient had the habit of taking diclofenac sodium tablets for the menstrual cramps. Hence advised to stop all the pain relievers

RESULTS

Before treatment and after completion of 3 months of treatment, clinical assessments were made from the interrogation and grading was done as per the scoring pattern. There was a drastic change in the symptoms as:

Symptoms	Before Treatment	After Nasya Karma	After Shamana Chikitsa	Follow Up After 1 Month	Follow Up After 3 Months
Intensity of headache	4	2	1	1	0
Duration of headache	3	3	2	1	0
Nausea	3	2	1	0	0
Photophobia	3	3	2	1	0
Phonophobia	4	3	2	1	0
Constipation	3	3	2	0	0
Belching	2	2	1	0	0
Disturbance in sleep	4	3	2	1	1

DISCUSSION

Being a psychosomatic disease, we can consider stress as the major triggering factor for migraine headaches. In *Ayurveda*, psychological factors like *Manasa Santapa*, *Shoka*, *Bhaya* are mentioned as the causative factors of *Shirahshoola*. Considering Doshas of *Ardhavabhedaka*, there is *Vata Kapha Pradhana Pitta Prakopa* and *Raja Tama Manasik Dosh* *Prakopa*. So the treatment should be aimed at removing *Doshaprakopa* i.e. *Shodhana* and also *Shamana* of *Shareerika* and *Manasik Doshas*. *Lodhra Ghrita* contains *Lodhra Twak* and *go Ghrita* as ingredients. *Lodhra* is *Vata Kapaha Hara* according to *Raja Nighantu* and *go Ghrita* is *Vata Pitta Hara*. Hence the *Ghrita* prepared out of *Lodhra* may be helpful in reducing the Laxanas of *Ardhavabhedaka* which is usually *Vata Kapha* in nature. *Avipattikara Churna* was

administered for the purpose of *Koshtha Shuddhi* (bowel clearance). *Drakshadi Kashaya* which is prepared as per *Toyapaka Vidhi* is indicated in *Chardi*. *Kamaduga rasa* is *Pittahara* in nature as it will be helpful in reducing the symptoms of belching and gastric irritation. *Manasamitra Vati* induces sleep and it calms down the stress and anxiety. Yoga therapy can be effectively incorporated as an adjuvant therapy in migraine patients.

CONCLUSION

The present case study signifies the role of Ayurvedic medicine in the treatment of Migraine. The patient achieved significant reduction in symptoms in relatively short periods of time. We can conclude that the herbo-mineral formulations are simple and effective in treating Migraine without any adverse effects. Migraine is a chronic disorder with episodic disabilities and it requires long-term management as well as preventive strategies. The treatment of migraine involves both acute and preventive drugs along with non-pharmacological strategies.

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How to cite this article: Anu PV, Rathi S. Ayurvedic management of Stress Induced Migraine - A Single Case Report. *J Ayurveda Integr Med Sci* 2021;4:363-367.

Source of Support: Nil, **Conflict of Interest:** None declared.
