



ISSN 2456-3110

Vol 9 · Issue 8

August 2024

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

The significant relief of Ayurvedic management for Severe Migraine Episodes: A Case Study

Ritu Pohiya¹, Devjinder Singh², Pramod Kumar Mishra³, Indumati Sharma⁴

¹Post Graduate Scholar, PG Department of Kayachikitsa, Post Graduate Institute Of Ayurved, Jodhpur, Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur, Rajasthan, India.

²Post Graduate Scholar, PG Department of Rog Nidan Evum Vikruti Vigyan, Pt. Khusilal Sharma (Auto) Ayurvedic College & Hospital, Bhopal, Madhya Pradesh, India.

³Professor & HOD, PG Department of Kayachikitsa, Post Graduate Institute of Ayurved, Jodhpur, Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur, Rajasthan, India.

⁴Associate Professor, PG Department of Kayachikitsa, Madan Mohan Malviya Ayurved Mahavidyalaya, Udaipur, Rajasthan, India.

ABSTRACT

Migraine is a common and debilitating neurological disorder marked by recurrent, severe headaches that are frequently accompanied by nausea, sensitivity to light, and sensitivity to sound. These migraine attacks can profoundly disrupt daily life and overall well-being. The development of migraines is influenced by a complex interaction of genetic, environmental, and neurovascular factors. Recent studies have enhanced our understanding of migraine mechanisms, highlighting the role of cortical spreading depression and neuropeptides such as calcitonin gene-related peptide (CGRP). Managing migraines effectively often involves a combination of lifestyle changes, medications, and, in some cases, alternative treatments. In *Ayurveda*, migraine is compared with *Ardhavybhedaka* (half-headache) which belongs to the *Shiroroga*. *Ardhavybhedaka* is primarily associated with imbalances in the *Pitta* and *Vata Doshas* due to etiological factors such as eating dry food, eating immediately after a meal, exposure to air from the east, dew, excessive sexual activity, preventing the natural urge of bodily waste, excessive physical labor, develop *Ardhavybhedaka*.

Key words: Migraine, Shiroroga, Ardhavybhedaka, Pitta, Vata.

INTRODUCTION

Migraine is a complex and debilitating neurological disorder characterized by recurrent, severe headaches often accompanied by nausea, vomiting, and sensitivity to light and sound. Migraines affect

approximately 12% of the global population and pose a significant public health challenge due to their impact on quality of life and productivity.^[1] The pathophysiology of migraines involves genetic, environmental, and neurobiological factors, which complicate diagnosis and treatment.^[2]

Recent advancements in our understanding of migraine have highlighted the role of cortical spreading depression and the trigemino vascular system in the initiation and progression of migraine attacks.^[3] Despite these insights, effective management remains challenging due to the variability in individual response to treatments and the diverse range of migraine subtypes.^[4] This case study aims to explore the intricacies of migraine through a detailed examination of a patient's experience with chronic migraine. By analyzing the patient's symptoms, triggers, and response to various treatments, this study seeks to contribute to the growing body of knowledge on

Address for correspondence:

Dr. Ritu Pohiya

Post Graduate Scholar, PG Department of Kayachikitsa, Post Graduate Institute Of Ayurved, Jodhpur, Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur, Rajasthan, India.

E-mail: ritupohiya178@gmail.com

Submission Date: 14/07/2024 Accepted Date: 21/08/2024

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.9.8.39

effective management strategies and potential areas for future research.^[5] In *Ayurveda*, the management of *Ardavvedaka* involves a holistic approach integrating dietary modifications, herbal therapies, *Panchakarma* (detoxification therapies), and lifestyle changes to restore *dosha* balance and alleviate symptoms. Treatments often include the use of specific *Shaman Aushadh* such as *Guduchi Sattva*, *Pathyadi Kwath*, *Ashwagandha* (*Withania somnifera*) etc. which are believed to pacify aggravated *Doshas* and support mental clarity and relaxation.

CASE REPORT

A 30-year-old female patient came to the *Kayachikitsa* OPD of *Sanjivani Chikitsalaya*, DSRRAU Jodhpur with a history of

Demographic data

- Age: 30 years
- Sex: female
- Religion: Sikh
- Education: Graduate
- Occupation: Housewife
- Marital status: Married
- Socio-economic status: Lower Middle class

Presenting complaints with duration

SN	Complaints	Duration
1.	Headache (left temporal region), Neck pain and tenderness	2-Year
2.	Nausea	2-Year
3.	Vomiting	2-Year
4.	Photophobia	2-Year
5.	Phonophobia	2-Year
6.	Sleep disturbed due to pain	2-Year
7.	Vertigo	on/off
8.	Fatigue: A marked sense of exhaustion or lack of energy that can occur during or after a migraine attack.	2-Years

9.	Irritability: Mood changes, such as becoming easily annoyed or agitated.	2-Years
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History of present illness

A 30-year-old female patient visited the *Kayachikitsa* OPD of *Sanjivani Chikitsalaya*, DSRRAU Jodhpur and presented with chief complaints of headaches involving the left half side (temporal region) for the last 2 years with an interval of 20 days per month. The severity of the headache increased in the last 6 months, with an episodic attack at intervals of 3-4 days. Associated complaints were irritability, nausea, anger, and pulse, Aggravating factors of headache were stress, hunger, sunlight, noisy surroundings, and crowds whereas relieving factors were only strong analgesics of modern science. The patient was diagnosed with Migraine (*Ardhavabhedaka*).

Assessment of Pain: (Based on Socrates)

SN	Assessment	Symptoms
1.	Site	Left temporal region
2.	Onset	Chronic
3.	Character	Throbbing pain
4.	Radiation	No radiate
5.	Associated Symptoms	Nausea, vomiting,
6.	Timing/duration	2 years
7.	Exacerbation	Increased with exposure to light, and sound
8.	Severity	Severe

Family history: No family history related to disease

Personal history:

Diet - Vegetarian

Appetite - Good

Bowel - Clear

Sleep - Disturbed due to pain

Micturition - 4 - times/day

0 - times/night

Treatment history: Ergomar, Compazine, Pamelor, fremanezumab, and Naproxen for the Last 2 years.

General Examination

- Pulse - 78bpm
- B.P. - 110/80 mm of Hg
- Temp. - 98.6°F
- RR - 16/min.
- Pain - Left Temporal Region
- Pallor - Absent
- Icterus - Absent
- Clubbing - Absent
- Cyanosis - Absent
- Oedema - Absent

Systemic examination of the cervical spine

- **Inspection:** No Protracted cervical spine
- **Palpation:** Tenderness over C3, C4, vertebrae
- **Spurling's test:** Negative (No radicular pain)

Examination of the ear

External Inspection

- **Auricle and Ear Canal:** No signs of infection, inflammation, trauma, and any discharge.

Otoscopy

- **Ear Canal:** No obstruction
- **Tympanic Membrane:** No signs of infection (e.g., redness, bulging), perforation, or fluid behind it (e.g., otitis media).

Hearing Tests

- **Weber Test:** No conductive or sensorineural hearing loss.
- **Rinne Test:** Negative Rinne test

Balance Tests

- **Romberg Test:** Negative Romberg test
- **Dix-Hallpike Maneuver:** Negative

Through a detailed assessment of the patient's medical history and a careful physical examination, a diagnosis was made. Based on this diagnosis, an appropriate treatment regimen was then prescribed to manage the condition.

SN	Medicine	Dose	Duration	Anupana
1.	<i>Pathyadi Kwath</i>	20 ml with the same quantity of water bd	1 month	Jaggery, Ghee
2.	<i>Ashwagandha Churna</i>	3 gm	1 month	Jaggery, Ghee
	<i>Shirashooladi Vajra Ras</i>	250 mg		
	<i>Mahavata Vidhvansan Ras</i>	250 mg		
	<i>Kamdudha Ras (Mukta Yukt)</i>	250 mg		
	<i>Godanti Bhasma</i>	500 mg		
	<i>Guduchi Sattva</i>	500 mg		

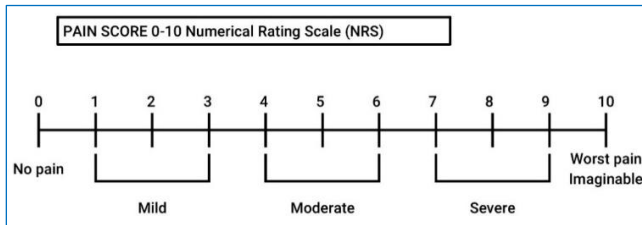
- Subjective Criteria Pain will be assessed using the Numeric Pain Rating Scale before and after the treatment.
- Disability will be assessed using the MIDAS questionnaire, before the treatment and after the fourth follow-up.

Effect of therapy on symptoms of Migraine

SN	Symptoms	BT	AT
1.	Intensity of headache	8	0
2.	Nausea	8	0
3.	Vomiting	7	0
4.	Photophobia	9	1
5.	Phonophobia	7	1
6.	Sleep disturbed due to pain	9	0

7.	Vertigo	3	0
8.	Fatigue	6	1
9.	Irritability	8	1

Numeric Pain Rating Scale(NPRS)



MIDAS Grade:3 Score 17 (Moderate Disability)

The Migraine Disability Assessment Test

The **MIDAS** (Migraine Disability Assessment) questionnaire was put together to help you measure the impact your headaches have on your life. The information on this questionnaire is also helpful for your primary care provider to determine the level of pain and disability caused by your headaches and to find the best treatment for you.

Instructions

Please answer the following questions about ALL of the headaches you have had over the last 3 months. Select your answer in the box next to each question. Select zero if you did not have the activity in the last 3 months. Please take the completed form to your healthcare professional.

1. On how many days in the last 3 months did you miss work or school because of your headaches?
2. How many days in the last 3 months was your productivity at work or school reduced by half or more because of your headaches? (Do not include days you counted in question 1 where you missed work or school.)
3. On how many days in the last 3 months did you not do household work (such as housework, home repairs and maintenance, shopping, caring for children and relatives) because of your headaches?
4. How many days in the last 3 months was your productivity in household work reduced by half of

more because of your headaches? (Do not include days you counted in question 3 where you did not do household work.)

5. On how many days in the last 3 months did you miss family, social or leisure activities because of your headaches?

A. On how many days in the last 3 months did you have a headache? (If a headache lasted more than 1 day, count each day.)

B. On a scale of 0 - 10, on average how painful were these headaches? (Where 0=no pain at all, and 10=pain as bad as it can be.)

Scoring: After you have filled out this questionnaire, add the total number of days from questions 1-5 (ignore A and B).

Total (Questions 1-5)

Midas Grade	Definition	Midas Score
I	Little or No Disability	0-5
II	Mild Disability	6-10
III	Moderate Disability	11-20
IV	Severe Disability	21+

A. On how many days in the last 3 months did you have a headache? (If a headache lasted more than 1 day, count each day.)

B. On a scale of 0 - 10, on average how painful were these headaches? (where 0 - No pain at all, and 10 pain is as bad as it can be.)

Scoring: After you have filled out this questionnaire, add the total number of days from questions 1-5 (ignore A and B).

Discussion on Shaman Aushad

- **Pathyadi Kwath:** Facilitates the optimal functioning of digestive fire (*Agni*) and enhances metabolic processes.
- **Ashwagandha Churn:** Anti-anxiety and Stress Relief and It is known for its calming effects, which help in reducing symptoms of anxiety and stress.

Ashwagandha is considered to balance all three *Doshas* (*Vata*, *Pitta*, and *Kapha*).

It is particularly useful for balancing *Vata and Pitta Doshas*.

- **Shirashooladi Vajra Ras:** The formulation is believed to balance all three *Doshas (Vata, Pitta, and Kapha)*, though its primary action is often associated with balancing *Vata and Pitta*. *Shira Shoolaadi Vajra Ras* has a heating potency (*Ushna*) which helps in alleviating cold or damp conditions in the body.
- **Mahavata Vidhvansan Ras:** Helps in balancing *Vata Dosh*, it reduces inflammation, and it can potentially help decrease the frequency and severity of migraine attacks.
- **Kamdudharas (Mukta Yukt):** *Kamdudha Ras* is a classical Ayurvedic formulation primarily used to balance *Pitta dosha*. It's a mineral-herbal compound with a history of use in treating various conditions related to heat and inflammation.
- **Godanti Bhasma:** *Godanti Bhasma* is believed to balance *Pitta Dosh* and reduce inflammation, which may help alleviate migraine symptoms. It is thought to have cooling and soothing effects.
 - *Godanti Bhasma* is said to work by neutralizing excess *Pitta* and reducing inflammation.
 - This can theoretically help with the heat and intensity associated with migraines.
 - The exact mechanisms of *Godanti Bhasma* are limited. However, understanding its primary

Ingredient, gypsum, suggests potential roles in calcium regulation and its impact on nerve function and inflammation.

- **Guduchi Sattva:** *Guduchi* has potential benefits in reducing inflammation, improving immunity, and managing stress, all of which could impact migraine management.

Guduchi is known for its ability to balance all three *Doshas (Vata, Pitta, and Kapha)*. It is particularly beneficial for balancing *Pitta* due to its cooling properties.

CONCLUSION

In the present case, the *Ayurvedic* diagnosis of (*Ardhavabhedaka*) is made for 'Migraine'. This case study reveals that *Ayurvedic* treatments, such as *Pathyadi Kwath, Ashwagandha Churna, and Giloy Satva*, can effectively alleviate migraines, as demonstrated by the notable improvement in the patient's symptoms. The significant decrease in headache severity, nausea, and light sensitivity, along with the overall enhancement in the patient's quality of life, highlights the effectiveness of these remedies. These results suggest that *Ayurvedic* medicine could serve as a valuable alternative for managing migraines, particularly for those who do not achieve satisfactory results from conventional therapies. Additional research is needed to validate these outcomes and refine treatment approaches for wider use.

REFERENCES

1. Denuelle, M., Lucas, C., & Payoux, P. (2020). Cortical spreading depression and its relationship with migraine. *Frontiers in Neurology*, 11, 123.
2. Goadsby, P. J., Holland, P. R., & Martins-Oliveira, M. (2017). Migraine pathophysiology: a review. *Journal of Neurology*, 264(1), 85-98.
3. Lipton, R. B., Bigal, M. E., & Diamond, M. (2018). Migraine prevalence, disability, and health care utilization in the United States: results from the American Migraine Study II. *Headache: The Journal of Head and Face Pain*, 48(6), 855-865.
4. Meyer, G., & Robson, S. (2021). The global burden of migraine. *Current Neurology and Neuroscience Reports*, 21(5), 28.
5. Saylor, D., Hsu, J., & Schramm, S. (2022). Case studies in chronic migraine: insights into treatment strategies. *Headache Medicine*, 13(2), 45-54.

How to cite this article: Ritu Pohiya, Devjinder Singh, Pramod Kumar Mishra, Indumati Sharma. The significant relief of Ayurvedic management for Severe Migraine Episodes: A Case Study. *J Ayurveda Integr Med Sci* 2024;8:257-261.
<http://dx.doi.org/10.21760/jaims.9.8.39>

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