



Research Article

ROLE OF NASYA BY SHADBINDU TAILA, LAXMIBILAS RASA AND PATHYAKSHADHATRAYADI KASHAY IN A SHIRASHULA (MIGRAINE)

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ABSTRACT

The word *Shirashula* (headache) denotes the painful condition of the head. According to Ayurvedic text, it is a symptom as well as diseases. It is an important cardinal symptom seen in most type of *Shiraroga* (disease of head). Various Acharyas have been described *Shiraroga* and its classification in different text. In all *Shiraroga* except *Shirakampa* (tremor in head), *Shirashula* is a prime complaint.

The sign and symptoms of *Shirashula* very much correlates to that of migraine. Migraine is the second most common cause of headache, afflicts approximately fifteen percent of women and six percent of men over a one-year period.

Nasyakarma (drug administered through nasal route) is highly efficacious in all types of *Shiraroga*, due to the fact that *Nasa* (nose) is the entry gate of head. It is the best method to eliminate and alleviate the vitiated *Dosha* of upper portion of body. In the study *Shadbindu taila* was administered to both groups of patients along with some *Vatakapsha shamaka* medicine for consecutive 21 days. After administration of this therapy, it is found that both group shows significant result. 70% patients of group A were completely cured, 20% were marked improved and 10% were mild improved and in group B 50% were completely improved and 50% were marked improved. The female and male ratio in the study is approximately 3:2. In this present study, out of 20 patients, almost all patients were improved without any side effect. In this paper, effect of *Shadbindu taila nasya* along with shaman medicine on *Shiraroga* has been discussed with statistical analysis.

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INTRODUCTION

Shirashula simply by defined as the pain felt in different parts of head, which may be differentiated from each other for their location, severity, character or time of pain. Acharya Charak described in details *Samprapti* of *Shirashula* in *Kiyanta shirasiya adhyaya*^[2]. As pain is Concerned *Vayu* should have predominant role especially *Vataja* type of *Shiraroga*. *Vayu* is aggravated by *Nidan sevana* and gets lodge into arteries and vein of head, causing headache. This type of *Shirashula* very much Co-relates to that of migraine.

Migraine is an inherited headache disorder that is typically unilateral but sometimes bilateral, moderate to severe, worsened by routine physical activity, associated with nausea and vomiting and accompanied by photophobia and phonophobia. The

headache occurs anytime and persists from 4 to 72 hours. It may occur with an aura (a focal neurologics symptom that may be visual, sensory or motor) or without an aura.^[3] It is common between the age group of 16-60 years, and is rare after the age of 60 years. The patho-physiology of Migraine is almost similar to that of *Shirashula*. There are some pain sensitive receptor inside the Cranium which are highly sensitive to stress and pressure changes. They are dural sinuses, and arteries, dura at the skull of base.^[4] So any pathological change, that is responsible to stimulate the receptors may Cause Headache.

Ayurveda has a variety of efficacious procedures and medications with no drawback and incidence of recurrence in the management of *Shirashula*. Here the special emphasis is given on

Nasya Karma in the management of *Shirashula*.^[5] The Condition Chief caused due to pre-dominance of *Vata dosha* or *Vata – Kapha dosha*. With this background, present study has been intended to evaluate the combined efficacy of *Shadbindu taila Nasya* and *Tab Laxmibilas Rasa* and *Syp. Pathyakshyadhatrayadi Kashay* in the management of *Shirashula*.

MATERIALS AND METHODS

a) **Study Area** : Total 20 patients, diagnosed as *Shirashula* were selected incidentally from the Panchakarma department of J.B.Roy State Ayurvedic Medical College & Hospital, 170-172, Raja Dinendra Street, Kolkata – 4

b) **Study Population**: Mainly from North-Kolkata area.

c) **Study Period** : (*Shodhan* + *Shaman*) = 21 days

Nasya → 21 days

Shaman medicine → 21 days

d) **Sample Size** : 20 patients

e) **Sample Design**: Total 20 patients were divided into 2 groups.

(i) Group – A (10 patients) → Treated with *Nasya Karma* by *Shadbindu taila*^[6] along with *Tab Laxmibilas Rasa*^[7] as *Shaman* medicine.

(ii) Group – B (10 patients) → Treated with *Nasya Karma* by *Shadbindu taila* along with *Syp. Pathyakshyadhatrayadi Kashay*^[8] as *shaman* medicine.

f) **Study Technique**

❖ **Group – A**

Shodhan ➔ *Poorva Karma*

i. *Sthanika Abhyanga* with *Til taila*.

ii. *Sthanika Bashpa swedana*.

Pradhan Karma

- Proper, position of patient.
- *Shadbindu taila Nasya* – 8drops in each nostril.

Paschat Karma

- *Haridra dhoom pana*.
- *Ushna jala Kavalgraha*.

Shaman ➔ *T. Laxmibilas Rasa*.

Dose : 250mg twice daily.

Anupan: *Adrak Rasa* with honey.

❖ **Group – B**

Shodhan: Same as Group – A.

Shaman: *Syp. Pathyakshyadhatrayadi Kashay*.

Dose: 15ml. twice daily.

Anupan : Equal amount of water.

g) **Inclusion Criteria**

- Patients between the age group of 16 to 60 years.
- Patients fit for *Nasya Karma*.
- Patients fulfilling the diagnostic criteria and all sign and systems would be selected randomly irrespective of sex, religion and occupation.

h) **Exclusion Criteria**

Any other systemic disorder which will interfere the cause of treatment.

i) **Assessment Criteria**

Assessment of the Condition was done based on detailed proforma adopting standard scoring method and was analyzed statistically based on obtained data.

Table 1: Subjective parameters

S. No.	Symptoms	No.	Mild	Moderate	Severe
1.	<i>Shirashula</i>	0	1	2	3
2.	<i>Chardi</i>	0	1	2	3
3.	Exposer to light	0	1	2	3
4.	<i>Shabda</i> <i>Asahishnutva</i>	0	1	2	3
5.	No. of attacks	0	Once daily (1)	Two times daily (2)	Three or more (3)
6.	Duration	0-15 minutes (1)	<6 hours (2)	<12 hour (3)	>12 hours (4)
7.	Severity	Relieved spontaneously	Relieved by taking balm	Relieved by balm with light message	Relieved only by pain killers

Table 2: Effect of therapy of group A

S.No.	Mean Score		Difference in Mean	%	Paired t-test			
	BT	AT			SD	SE	T	P
1.	2.5	0.2	2.3	92%	.4830	.154	14.88	>.001
2.	1.2	0.1	1.1	91.66%	.7378	.233	4.72	<.001
3.	0.6	0.1	0.5	83.33%	.5163	.163	3.06	<.01
4.	0.6	0.2	0.4	66.66%	.5270	.166	2.4	<.02
5.	2.1	0.2	1.9	90.47%	.5676	.179	10.58	>.001
6.	1.1	0.1	1	90.90%	.4714	.149	6.71	>.001
7.	2.3	0.2	2.1	91.30%	.7370	.233	9.01	>.001

Table 3: Effect of therapy of group B

S.No.	Mean Score		Difference in Mean	%	Paired t-test			
	BT	AT			SD	SE	T	P
1.	2.8	0.4	2.4	85.71%	.516	.163	14.72	>.001
2.	1.8	0.1	1.7	94.44%	.483	.152	11.18	>.001
3.	0.8	0.1	0.7	87.5%	.483	.152	4.60	<.001
4.	1.2	0	1.2	100%	.918	.290	4.13	<.001
5.	2.5	0.4	2.1	84%	.737	.233	9.01	>.001
6.	2.1	0.3	1.8	85.71%	.632	.2	9	>.001
7.	3	0.4	2.6	86.66%	.516	.163	15.95	>.001

Table 4: Total effect of therapy

Overall	Group-A	Assessment	Overall	Group-B	Assessment
Complete Improvement	7	70%	Complete Improvement	5	50%
Marked Improvement	2	20%	Marked Improvement	5	50%
Mild Improvement	1	10%	Mild Improvement	0	0
No Improvement	0	0%	No Improvement	0	0

DISCUSSION

Shiraroga is a disease of *Vata-Kapha* origin and upper portion of body. *Vata-Kapha* nasak treatment as well as *Nasya Karma* is essential to treat this case.

Tab. *Laximibilas Rasa* and *Pathyakshya dhatrayadi kashay* both are popularly used for *Vata-Kapha* originated *Shira-roga*. For the above mentioned result, it is found that both groups shows highly significant.

Nasya used in the protocol, is of *Pratimarsha* type. So, patient is advised to take *Nasya* in the evening at their home as because this study was carried in OPD level. Statistically Group-B shows slightly better result than Group-A.

Probable mode of action of *Nasya Karma*

- The Pre-operative measures adopted in *Nasya* therapy like lowering of the head, elevation of lower extremities and fomentations of face, have some role on enhancement of blood circulation in head. Efferent Vaso-dilator nerves are spread out on the superficial surface of face. These receptors may receive stimulation from above said action and results in an increase in blood circulation in head. There is also

possibility of falling of arterial pressure due to Vaso-dilatation that may encounter "Cushing reaction". As a result, the aroused ischemic response will raise the arterial pressure.

- This act convinces more of slush created in intracranial space, probably forcing more transfusion of fluid into brain tissue^[9].
- The drugs when administered nasally will normally be cleaned rapidly from nasal cavity into gastro-intestinal tract by muco-ciliary clearance system. A quality of drug will be absorbed across the nasal mucosa and reach the systemic circulation from where it will be eliminated via normal clearance mechanism. It is also dependent on the lipophilicity and molecular weight of drugs. Some of the drugs which are lipid soluble, can cross the blood brain barrier and reach the brain.^[10]
- According to Ayurvedic text, *Nasa* is the doorway to *Shira* and it communicates with eyes, ears, throat etc. by minute channels. The drugs administered through nostrils, reaches *Shringataka marma* and spreads into *Murdha* (Brain), *Netra* (eye) *Shrotra* (ear), *Kontha* (throat), *Siramukha* (opening of veruvas) etc. and

snatches the morbid *Dosha* from their region and expel them from the *Uttamanga*.^[11]

Mode of action of *Laxmibilas Rasa*

It is specially indicated in *Vatavyadhi chikitsa*^[12]. Most of The ingredients are having *Vedanasthapana*, *Shothhara*, *Rasayan* property.

Mode of action of *Pathyakshya dhatrayadi Kashay*:

It is well known drug specially used in all types of *Suhirashla*, like *Ardhavavedaka*, *Sankhak*, *Suryavarta* *Naktandhya*, *Akshishula* etc. *Pathya*, *Akshas*, *Dhatri*, *Bhunimba*, *Nisha*, *Nimbo* and *Amruta*, are the ingredients of this *Kashay*. Most of the ingredients are *Sothahara*, *Vedanasthapana*, *Medhya*.^[13]

CONCLUSION

It can be concluded from the current research project that:

- (i) *Nasya Karma* along with *Vata-Kapha shamak* medicine like tab *Laxmibilas Rasa* and *Pathyakshadhatrayadi kashay* are highly effective therapy.
- (ii) Study has not shown any side effect.
- (iii) To establish the role of *Nasya* & Tab *Laxmibilas Rasa* and *Pathyakshadhatrayadi Kashay* on *Shirashula*, it needs series of clinical trials in long duration with large No. of cases.

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