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A COMPARATIVE STUDY ON THE EFFICACY OF KUMKUMA NASYA AND GO-GHRITA NASYA IN THE MANAGEMENT OF ARDHAVABHEDAKA WITH SPECIAL REFERENCE TO MIGRAINE

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ABSTRACT

Ardhavabhedaka have predominance of vata and vatakaphaja, Tridoshaja, vataja according to Acharya Charaka, Acharya Sushruta, and Acharya Vagbhatta respectively. The causes of ardhavabhedaka are excessive intake of rooksha padartha, Adhyashana, Purva-vata-sevana, Atimaithuna, Vegadharana, Ativyayama. Due to nidanasevana vata-dosha get aggravated and pain is appreciable in Manya, Bhru, Shankha, Karna, Akshi and half of the Shirah. The attacks of ardhavabhedaka repeat every 10days, 15days, 30days or suddenly as per classical texts. As per modern view migraine is episodic headache. So, ardhavabhedaka can be correlated with migraine. Nasya is described as the best procedure in all Urdhwajatrugata rogas. In Chakradatta, Bhaishajyaratnavali had mentioned Go-ghrita nasya in the management of ardhavabhedaka. Also, in Yogaratnakar, Chakradatta anasya in the management of ardhavabhedaka. 30 cases of migraine diagnosed based on International Headache Society Criteria were 15 patients were treated with kumkuma nasya and 15 patients were treated with go-ghrita nasya. The outcomes were assessed by standard scoring methods according to the symptoms of disease.

KEYWORDS: Ardhavabhedaka, Migraine, Kumkuma Nasya, Go-ghrita Nasya.

INTRODUCTION

Almost all acharyas have mentioned Ardhavabhedaka in Shiroroga. Ardhavabhedaka term derived from its nature Literally specific of pain. the ardhavabhedaka means severe tearing, pricking, churning types of pain get precipitated in half of the head. According to Acharya Sushruta if episode is repeated every 10days, 15days or sometimes suddenly so it should be diagnosed as ardhavabhedaka. It has influence of all three doshas. According to modern, migraine is episodic unilateral headache. ardhavabhedaka can be correlated with migraine. Predominance of dosha in ardhavabhedaka:

Acharya Charaka - Kevala vataja & Vatakaphaja Acharya Sushruta – Tridoshaja Ashtanga Hridaya - Vataja

"Migraine" refers as a syndrome of vascular spasms of the cranial blood vessels with the symptoms of Nausea, Vomiting, Vertigo, Photophobia, Phonophobia, Tinnitus and intense pain predominating on one side of the head.^[11] Acharya have mentioned prime importance to nasya karma in the management of *shiroroga* as an ideal therapy. In *Chakradatta* and *Yogaratnakara* have described Kumkuma nasya in the management of *ardhavabhedaka*, where as in *Bhaisajyaratnavali nasya* with *Go-ghrita* in the management of *ardhavabhedaka* is mentioned.

AIM AND OBJECTIVES

- **Aim:** To compare the efficacy of *kumkuma nasya* and *go-ghrita nasya* in the management of *ardhavabhedaka*.
- Objectives:
- 1. To study the efficacy of *kumkuma nasya* in the management of *ardhavabhedaka*.
- 2. To study the efficacy of *go-ghrita nasya* in the management of *ardhavabhedaka*.
- 3. To compare the efficacy of *kumkuma nasya* and *goghrita nasya* in the management of *ardhavabhedaka*
- 4. To assess the disease according to etiological factors as pre *Ayurvedic* and modern literature.

MATERIAL AND METHODS

> Sample source

- 1. Patient with *lakshanas* of *ardhavabhedaka* (migraine) was selected irrespective of their gender and religions.
- Patient was selected randomly from OPD and IPD of Parul Ayurved hospital, Parul sevashram hospital, Limda, Waghodia, Vadodara, Gujarat.
- 3. Patient was selected in medical camps organized by college and hospital authorities.

> Drug source

1. *Kumkuma ghrita* was prepared as per need during procedure as mentioned in *Chakradatta*. [12]

For Kumkuma ghrita drug proportion

Kumkuma-2rati (250mg)

Sharkara-2rati (250mg)

Go-ghrita-1/2 tola (6gm)

2. Authenticated and standardize *go-ghrita* was collected from the market and use for the *nasya*.

> Preparation of Kumkuma Nasya

250mg of *Kumkuma ghrita* + 250mg of *Khanda sharkara* made into a fine powder

6gm of lukewarm ghrita is slowly poured in to powder

Well triturate until it gets mixed well

Kumkuma ghrita

Method of collection of data

- 1. Study design: Comparative clinical study
- 2. **Sample size**: 30 patients irrespective of their gender fulfilling the inclusion criteria was randomly selected and divided into 2 groups.

3. Grouping:

• **Group-A:** In these group 15 patients was treated with *kumkuma nasya*.

Drug: *Kumkuma Nasya*Dose: 8 drop each nostril.

Time: Morning

• **Group-B:** In these group 15 patients was treated with *go-ghrita nasya*.

Drug: *Go-ghrita Nasya*Dose: 8 drop each nostril.

Time: Morning

4. Study duration: 27days

- Group-A: 3 Sitting *Nasya* for 7days with the gap of 3days.
- Group-B: 3 Sitting Nasya for 7days with the gap of 3days.
- Follow up: 2 follow ups with the gap of 7days.

5. Inclusion criteria

- Patients with "Lakshanas" of ardhavabhedaka.
- Patients between the age group of 16-60yrs of age.
- Patients who are fit for "nasya karma".

6. Exclusion criteria

- Patient less than 16yrs and those above 60yrs.
- Patients of ardhavabhedaka who are under other treatment modalities.
- Patients suffering from COPD, Hypertension, or other systemic disease.
- Patients suffering from other secondary types of headache like in brain tumors, meningitis, cervicalspondylitis, encephalitis, referred pain, refractive errors and glaucoma.
- Patients who are contraindicated for "nasya karma".

Criteria for Assessment

Assessment of the patients was done on the basis of subjective parameters. For this purpose, the standard scoring methods was adopted according to the symptoms of disease. The details of scoring are as follows:

Subjective Parameters:[13]

- "Ardhe tu Murdha" (Unilateral headache)
- Prakasha-asahishnuta (Photophobia)
- Bhrama (Vertigo)
- Sabda-asahishnuta (Phonophobia)
- Hrillasa (Nausea)
- Chardi (Vomiting)
- Tinnitus

Assessment Criteria for Severity, Frequency, Duration and Associated Symptoms of Migraine Headache:

Sr.No.	Symptoms	Grading						
SEVERITY OF HEADACHE								
1	Intolerable pain	4						
2	Disturbing the routine work	3						
3	Not disturbing the routine work	2						
4	Tolerable Pain	1						
5	No pain	0						
FREQU	FREQUENCY OF HEADACHE							
1	Continuous / daily	4						
2	Once in 1-10 days	3						
3	Once in 11-20 days	2						
4	Once in 21-30 days	1						
5	No attack	0						

DURATION OF HEADACHE								
1	Over 24 hours or continuous	4						
2	13 – 24 hours	3						
3	4 – 12 hours	2						
4	1min 3 hours	1						
5	No pain	0						
ASSOC	ASSOCIATED SYMPTOMS							
1	Nausea	Absent/Present						
2	Vomiting	Absent/Present						
3	Photophobia	Absent/Present						
4	Vertigo	Absent/Present						
5	Tinnitus	Absent/Present						
6	Phonophobia	Absent/Present						
7	Confusional state	Absent/Present						
8	Aura	Absent/Present						

OBSERVATION AND RESULTS

Effect of Kumkuma Nasya in the management of Ardhavabhedaka.

Symmtoms	Mean Rank		(4)	% of	SD	SE	't'	P	Remarks
Symptoms	BT	AT	(d)	difference	SD	SE	value	value	Kemarks
Duration of	2.47	0.93	1.53	61.94%	0.915	0.236	6.487	< 0.001	HS
Headache	2.17	0.73	1.55	01.5170	0.713	0.230	0.107	\0.001	115
Frequency of	2.53	0.87	1.67	66.00%	0.488	0.126	13.22	< 0.001	HS
Headache	2.33	0.67	1.07	00.00%	0.466	0.120	13.22	<0.001	113
Severity of	3.07	1.07	2.00	65.14%	0.756	0.195	10.24	< 0.001	HS
Headache	3.07	1.07	2.00	03.14%	0.730	0.193	10.24	<0.001	пъ
Nausea	1.00	0.47	0.53	53%	0.516	0.133	4.000	< 0.01	S
Vomiting	0.53	0.07	0.47	88.67%	0.516	0.133	3.500	< 0.01	S
Photophobia	1.00	0.47	0.53	53%	0.516	0.133	4.000	< 0.01	S
Vertigo	0.60	0.00	0.60	100%	0.507	0.131	4.583	< 0.001	HS
Tinnitus	0.27	0.13	0.13	48.14%	0.352	0.091	1.468	>0.05	NS
Phonophobia	0.67	0.20	0.47	70.14%	0.516	0.133	3.500	< 0.01	S
Confusional State	0.27	0.07	0.20	74.07%	0.414	0.107	1.871	>0.05	NS
State	0.27	0.07	0.20	,, 70	0.111	0.107	1.571	, 0.05	110

Effect of Go-ghrita Nasya in the management of Ardhavabhedaka.

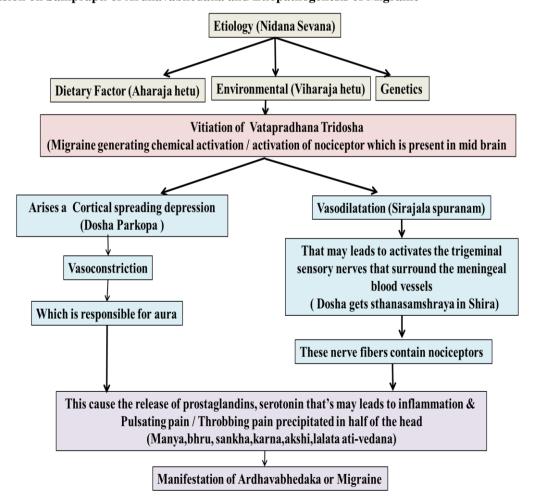
Symptoms	Mean Rank		(4)	0/ of Jiff oron oo	CD.	CT.	't'	P	Damanlas
	BT	AT	(d)	% of difference	SD	SE	value	value	Remarks
Duration of Headache	2.47	1.87	0.60	24.29%	0.737	0.190	3.154	< 0.01	S
Frequency of Headache	2.47	1.67	0.80	32.38%	0.676	0.175	4.583	< 0.001	HS
Severity of Headache	3.20	1.87	1.33	41.56%	0.816	0.211	6.325	< 0.001	HS
Nausea	1.00	0.80	0.20	20%	0.414	0.107	1.871	>0.05	NS
Vomiting	0.40	0.20	0.20	50%	0.414	0.107	1.871	>0.05	NS
Photophobia	1.00	0.60	0.40	40%	0.507	0.131	3.055	< 0.01	S
Vertigo	0.47	0.27	0.20	42.55%	0.414	0.107	2.256	< 0.05	S
Tinnitus	0.20	0.13	0.07	35%	0.258	0.067	1.000	>0.05	NS
Phonophobia	0.87	0.53	0.33	37.93%	0.488	0.126	2.646	< 0.05	S
Confusional State	0.13	0.07	0.07	53.84%	0.258	0.067	1.000	>0.05	NS

Comparison between Kumkuma Nasya (Group-A) and Go-ghrita Nasya (Group-B).

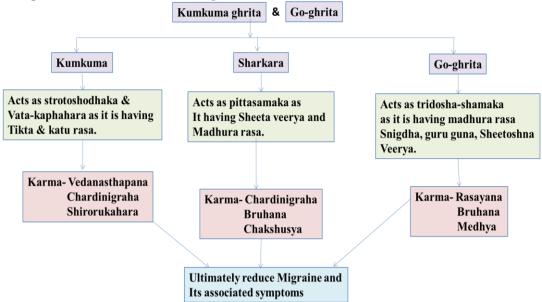
Symptoms	Group	Mean	%	Mean df	SE	T-value	P-value	Remarks
Duration of	Group-A	1.53	61.94%	0.933 0.	0.303	3.076	< 0.05	S
Headache	Group-B	0.60	24.29%	0.933	0.303	3.070	<0.03	3
Frequency of Headache	Group-A	1.67	66.00%	0.867	0.215	4.026	< 0.001	HS
Trequency of freadactie	Group-B	0.80	32.38%	0.807	0.213			
Severity of	Group-A	2.00	65.14%	0.667	0.287	2.320	< 0.05	S
Headache	Group-B	1.33	41.56%	0.007	0.287	2.320	<0.03	2
Nausea	Group-A	0.53	53%	0.333	0.171	1.950	< 0.05	S
Nausea	Group-B	0.20	20%					
Vomiting	Group-A	0.47	88.67%	0.267	0.171	1.560	>0.05	NS
Vollitting	Group-B	0.20	50%					
Photophobia	Group-A	0.53	53%	0.133	0.187	0.714	>0.05	NS
Т поторновіа	Group-B	0.40	40%					
Vantica	Group-A	0.60	100%	0.400	0.169	2.366	< 0.05	S
Vertigo	Group-B	0.20	42.55%					
Tinnitus	Group-A	0.13	48.14%	0.067	0.133	0.592	>0.05	NS
Tillitus	Group-B	0.07	35%	0.007				
Phonophobia	Group-A	0.47	70.14%	0.133	0.183	0.727	>0.05	NS
	Group-B	0.33	37.93%					
Confusional	Group-A	0.20	74.07%	0.133	0.126	1.058	>0.05	NS
state	Group-B	0.07	53.84%	0.133	0.120	1.036	<i>></i> 0.03	149

DISCUSSION

Discussion on Samprapti of Ardhavabhedaka and Etiopathogenesis of Migraine



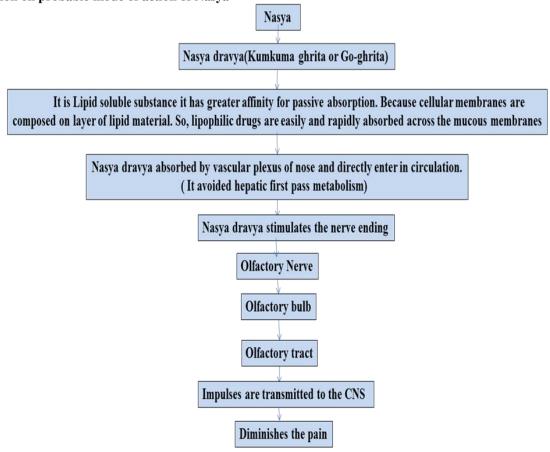
Discussion on probable mode of action of Drugs



Kumkuma ghritayoga nasya had best effect on ardhavbheadaka due to its tridoshanashaka property. Kumkuma ghritayoga have property such as srotoshodhana which helps to remove the obstruction in channels which occur during the ardhavabhedaka. Kumkuma ghritayoga also have property of vedana sthapana which helps to reduce the pain occur during the

episode of migraine. Kumkuma ghritayoga had property of bhruhana which gives poshana to the dhatu. Kumkuma ghritayoga had property of chardinigraha which helps to reduce the nausea, vomiting, abdominal discomfort. And it is having medhya and rasayana property which helps to reduce the confusional state, tinnitus, vertigo.

Discussion on probable mode of action of Nasya



CONCLUSION

- Etiological factors, Symptoms and etiopathogenesis are almost similar in *Ayurveda* and modern science.
- *Nidana parivarjana* is played an important role in the management of *Ardhavabhedaka*.
- Both the groups are showed good response for Duration of headache, Frequency of headache, Severity of headache, Photophobia, Vertigo and Phonophobia.
- Group- A showed good response for Nausea and Vomiting but Group-B showed poor response for Nausea and Vomiting.
- In both groups no result were observed in Tinnitus and Confusional state.
- According to statistical study, ALTERNATIVE HYPOTHESIS is accepted with percentage difference of 30.26% it can be concluded that the effect of kumkuma nasya is better than go-ghrita nasya in the management of ardhavabhedaka.

REFERENCES

- Charaka samhita, Dr. Bhramanad Tripathi, Chaukhamba Surbharti Prakasana, Varanasi, edition-2013, Siddhi sthana, 9/79-81: 1291.
- Sushruta samhita, Kaviraj Ambikadattashastri, Chaukhamba Sanskrita Sansthan, Varanasi, Reprint-2015, Uttara-Tantra, 25/15: 166.
- 3. Ashtanga hridayam, Dr. Bhramanand Tripathi, Chaukhamba Sanskrita Prtishthana, Dehli, Reprint-2012, Uttara-Tantra, Chapter, 23/7-8: 1051
- 4. Charaka samhita, Dr.Bhramanad Tripathi, Chaukhamba Surbharti Prakasana, Varanasi, edition-2013, Siddhi-sthana, 9/79-81: 1291.
- Sushruta samhita, Kaviraj Ambikadattashastri, Chaukhamba Sanskrita Sansthan, Varanasi, Reprint-2015, Uttara-Tantra, 25/15: 166.
- Chakra-datta, Dr. Indradev Tripathi, Chaukhamba Sanskrita Bhavan, Varanasi, Reprint, 2005; 374,375.
- Bhaishajya ratnavali, Kaviraj Ambikadattashastri, Vidhyotini bhasa tika Samhita, Chaukhamba Surbharti Prakasana, Varanasi, Edition, 2008; 65: 1019.
- Yogaratnakara with Vidyaprabha Hindi Commentary, By Indradev Tripathi and Dr. Daya Shankar Tripathi, Chaukhamba Krishnadas Academy, Varanasi, Shirorogasya upachara-69: 763.
- 9. Cakradatta, P. V. Sharma, Published by Chaukhambha Orientalia, Edition-2007, Shiro-rogs, Chapter-60/42: 520.
- Gadanigraha of Sri Vaidya Sodhala, By Sri Indradeva Tripathi, Edited by Sri Ganga Sahaya Pandeya, Chaukhambha Sanskrit Sansthana, Reprint-2005, Part-3, Shalakyatantre Shirorogadhikara-1/59: 22.
- 11. API Textbook of Medicine, Editor-in-chief YP Munjal, Edition-10, Vol. -1, Chapter-2: 29.
- 12. Cakradatta, P. V. Sharma, Published by Chaukhambha Orientalia, Edition-2007, Shiro-rogs, Chapter-60/42: 520.

13. Ashtanga hridayam, Dr. Bhramanand Tripathi, Chaukhamba Sanskrita Prtishthana, Dehli, Reprint-2012, Uttar tantra, 23/4-8.