

A COMPARATIVE STUDY TO EVALUATE THE EFFICACY OF KSHEERABALA TAILA NASYA AND SAHACHARA TAILA NASYA IN VATIKA SHIRAHSHOOLA W. S. R. TO TENSION-HEADACHE

¹Dr. Ashok kumar patel ²Dr. Suresh N Hakkandi ³Dr. Manjunath P. Akki
¹PG Scholar ²HOD ³Professor Department of Panchakarma, SJG Ayurvedic Medical College Koppal-Karnataka

ABSTRACT

Tension headache is one among the common health issue in present busy lifestyle. Each and every individual suffer from tension headache at least once in his lifetime. This condition can be co related to vataja shirashoola explained in ayurveda classics. Nasya is the best treatment modality that can be adopted in management of vataja shirashula. To evaluate the efficacy of Ksheerabala Talia Nasya and Sahachara Talia Nasya in the management of Vatika Shirah shola and compare the efficacy of them. 30 patients diagnosed with vataja shirashula were selected for the study based on inclusion and exclusion criteria and divided into two groups. Group A was treated with nasya of ksheerabala taila and Group B with nasya of sahacharadi taila. The overall effect of Ksheerabala Taila Nasya over 15 patients of Vatika Shirahshoola shows that 8 patients got marked improvement (53.28%), and 7 patients got complete remission (46.62%). The overall effect of Sahachara Taila Nasya over 15 patients of Vatik- Shirahshoola shows that 4 patients got complete remission (26.64%), 7 patients got marked improvement (46.62) and 4 patients got moderate improvement Nasya has good effect on shiroroga as nasa hi shiraso dwaram, Ksheerabala Taila and Sahachara Taila are having Balya, Snigdha, Vatahara, Shoolahara, Srotoshodhaka, Brimhaneeya property, may be very useful in the treatment of Vatika Shirahshoola. Clinically Group A shown best response compared to group B.

KEYWORDS: vataja shirashoola, tension headache, ksheerabala taila, sahacharadi taila.

INTRODUCTION

Ayurveda is not only a system of medicine rather it is the way of life. It includes physical, mental and spiritual wellbeing. So, health is designed as not only the normal function of Dosha, Dhatu and Agni along with proper expulsion of Mala but it also includes clarity of senses, mind and soul. Body and mind both are inter-related and inter-dependent to each other.

sleep and inadequate time for relaxation are being the part of our life which enhance of many diseases, mainly having psychosomatic clinical presentation.

WHO states that globally it has been estimated 47% of adult population have been suffering from headache¹. In an Indian survey, it is found that headache prevalence rate is increased about 63.9%². Though, modern neuropsychiatry have broad

spectrum of pharmacological managements, they contribute side effects and are addictive in nature, therefore there is a wide scope of research to find out a safest remedy from Ayurveda.

Shirahshoola is a chief symptom of Shiroroga which comes under Urdhvajatrugata vikara. Tension headache can be compared with Vatika Shirah shoola described in Ayurvedic texts, as mental factors like excessive weeping, grief, fear, terror have also been attributed in its aetiopathogenesis³.

The Nasyakarma is effective in treatment of all Urdhvajatrugata Vikara. Navana type of Nasya will help in eradicating Vatika disorders since Nasika being doorway to Shirah⁴. Vata Dosha is responsible for Shoola, So Ksheera Bala Taila and Sahachara Taila Vatashamana property are useful in the management of all type of Vata Vyadhi explained in the classics⁵.

AIMS AND OBJECTIVES

1. To evaluate the efficacy of Ksheerabala Talia Nasya in the management of Vatika Shirah shoola.
2. To evaluate the efficacy of Sahachara Talia Nasya in the management of Vatika Shirah shoola.
3. To evaluate and compare the efficacy of Ksheerabala Talia Nasya and Sahachara Talia Nasya in the management of Vatika Shirahshoola

Source of data:

a. Sample Source: Patients suffering from Vatika Shirahshoola were selected from O.P.D. of SJG Ayurvedic Medical College and Hospital as preset inclusion and exclusion criteria.

b. Preparation of medicine: Ksheerabala Taila⁶ & Sahachara taila⁷ was prepared in R.S. and B.K. of SJG Ayurvedic Medical College and Hospital, Koppal

Methods of collection of data:

a. Sample Size and Grouping: Minimum of 30 patients diagnosed as Vatik Shirahshoola, which fulfilling the inclusion criteria were selected and divided into two groups.

b. Inclusion Criteria:

- Patients having the classical signs and symptoms of Vatik Shirahshoola.
- Patients aged between 16-60 years.
- Patients irrespective of sex, religion, and socioeconomic status and locality.
- Patients fit for Nasya karma.

a. Exclusion Criteria:

1. Patients contraindicated for Nasyakarma.
2. Other Primary and Secondary Headache like episodic tension headache, migraine, cluster headache etc.
3. Patients with any other systemic disorders (Anaemia, Hypertension, Cerebral Haemorrhagic condition etc).
4. Pathological condition occurring in Ear, Eye and Nose.

Diagnostic Criteria:

Diagnoses were made according to the classics and modern signs and symptoms

- Shirah Shoola
- Bheda Toadavat Shoola
- Prakasha Asahishnuta

a. Posology:

Nasya Karma in Group A with Ksheerabala Taila and in Group B Sahachara Taila 8-8 Bindu in a continuous stream in each nostril.

b. Study Duration:

- Total 28 days.
- Treatment duration will be for 14 days.

-Follow up for 14 days.
-Readings will be observed on 0, 14th and 28th day.

Assessment criteria

Assessment of the condition was done based on detailed proforma adopting standard

scoring methods of subjective and objective of pre and post procedure parameters and was analyzed statistically based on the obtained data.

Grading of Parameters	0	1	2	3
Severity of headache	Normal : Nil	Mild: headache which does not interrupt patient's regular works	Moderate: headache which interrupts patients works and diverts his/her concentration.	Severe: headache in which patient has to stop his regular works.
Frequency of headache	Normal: Nil	Mild: onset of headache once or twice in one month	Moderate: onset of headache once or twice in 15 days	Severe: onset of headache often and often in a week.
Duration of Headache	Normal: Nil	Mild: 1 -6 hours	Moderate: 7-10 hours	Severe: 11 hours above
Sirahshoola	Nil	Mild	Moderate	Severe
Bheda todavat Shola	Nil	Mild	Moderate	Severe
Prakasha asahishnuta	Can Tolerate bright light	Cannot tolerate bright light	Tolerate dim light only	Cannot tolerate dim light

Assessment of Result:

Subjective and objective parameters of baseline data to post medication data had compared for the assessment of result by using paired “t” test.

a) Subjective Parameters

- Shirah Shoola
- Bheda Toadavat Shoola
- Prakasha Asahishnuta

b) Objective Parameters:

- Teevrata of Vedana
- Kala Prakarsha
- Vega Pravritti

Composition of trial drug

Ksheerabala taila

Ingredients:

1. Balamoola (*Sida cordifolia*) Kashaya - 16 parts
2. Balamoola (*Sida cordifolia*) Kalka - 1 part
3. Tila Taila (*Sesamum indicum*) - 4 parts
4. Ksheer (cow's milk) - 8 parts

Composition of Sahachara Taila

1. Sahachara (*Barleria prionitis*) Kashaya - 16 parts
2. Sahachara (*Barleria prionitis*) Kalka - 1 part
3. Tila Taila (*Sesamum indicum*) - 4 parts
4. Ksheera (cow's milk) - 8 parts

Procedure of Nasyakarma:

-The procedure of Nasyakarma was performed in following 3 steps

Purvakarma

-Preparation of the patient mentally and physically for Nasyakarma.

-Patients were asked to be in supine position on Droni comfortably for Snehana purpose.

-Patients were advised to remain relaxed.

-Body was draped with a bed sheet up to the neck.

Snehana:

-Abhyanga with luke warm Murcchita Tila Taila was done over Mukha, Lalata and Manya Pradesha for about 10-15 minutes.

Svedana:

-Sirah is considered to be as an important Marma, Swedana in the form of Mrudu Sveda was indicated so the eyes were covered with the cotton swab so as to protect them. Just after the completion of Abhyanga, Mrudu Swedana (Bhashpa Swedana) was performed.

Pradhana Karma^{8,9,10}The patient was asked Pralambita Shirasah position (lie down on the table in supine position with his head hanging from the head end of the table). In this position the head is bent backwards for about 45 degrees.

-Ksheerabala Taila for Group A and Sahachara Taila for Group B was taken in a Gokarna it held in right hand and with the help of left middle finger nasal septum was slightly elevated to create a straight passage within the vestibule. By this Taila was instilled into each nostril.

-There after patients were asked to inhale deeply.

-Slight massage should be done on Mukhpradesha and rub the palm and sole, patient should be in same position for 100 matrakala.

-Patient was advised to spit out the Sputum that has reached the throat.

Paschat Karma

-The patients were asked to return to supine position after instilling the Swarasa.

-Abhyanga and Svedana were performed in the same way as performed earlier.

-Simultaneously patients were advised to slightly raise their hands and rub both the palms vigorously, for 1 to 2 minutes, at the same time foot soles were also rubbed.

-The patient was allowed to take rest in supine position for 100 matrakala.

-The nasal secretion reaching the throat was advised to spit out.

-The patient was made to sit comfortably on the Nasya pitha. Ushna Jala kavalagraha was advised after Ignited Haridra Dhuma Varti was taken. The patient was then asked to inhale the Dhuma by placing the tube of the Yantra near the nostril. Patient was advised to exhale the Dhuma through the mouth. This was repeated for the other nostril. Any sputum that was accumulated was advised to spit out.

Ahara¹¹Patient was advised regarding the diet as follows:

-Avoid cold foods and drinks.

-Prohibition of all types of pulses except „Mudga“.

-Buttermilk and curd to be excluded completely from the diet.

Vihara¹²

-Advised to plug their ear with cotton swab.

-Avoid fan and A.C.

-Day sleep, Exposure to Sunlight and Wind was prohibited.

-Avoid sheetal jala, Sheetal and Abhishyandi Ahara, Teekshnapana etc.

OBSERVATIONS AND RESULTS

In present study 30 patients of Vatika Shirahshoola were treated in a two groups. In one group, 15 patients were treated with Ksheerabala Taila Nasya, and 15 patients of the other group were given Sahachara Taila Nasya.. The effects of the two Taila are being presented here according to the groups of the Treatment.

Effects of Nasya with Ksheerabala Taila in Vatika Shirahshoola

The results obtained in this group are being presented here under in the tabular form along with the statistical analysis and brief description of each finding under separate heading of each signs and symptoms as well as total effects of the therapy.

Showing the response of the Ksheerabala Taila Nasya (Group A) on 15 patients of Vatika Shirahshoola after 14th day of Treatment (AT)

-Teevrata of Vedana in mean BT is 2.4 and mean AT is 1.06 with 55.8% of improvement with SD of 0.488 SE as 0.126 with highly significant at the level of < 0.001.

-Kaala Prakarsha in mean BT is 2.33 and mean AT is 0.866 with 63.09% of improvement with SD of 0.833 SE as 0.215 with highly significant at the level of < 0.001.

-Vegapravrutti in mean BT is 2.26 and mean AT is 0.666 with 70.79% of improvement with SD of 0.632 SE as 0.163 with highly significant at the level

-Vegapravrutti in mean BT is 2.26 and mean AT is 0.666 with 70.79% of improvement with SD of 0.632 SE as 0.163 with highly significant at the level of < 0.001.

-Prakashasahishnuta in mean BT is 0.133 and mean AT is 0 with 100% of improvement with SD of 0.351 SE as 0.009 with no significant at the level of 0.164.

-Bhedatodavat Shoola in mean BT is 1.86 and mean AT is 0.266 with 86.02% of improvement with SD of 0.507 SE as 0.130 with highly significant at the level of < 0.001.

-Shirahshoola in mean BT is 2.2 and mean AT is 1.066 with 51.81% of improvement with SD of 0.351 SE as 0.090 with highly significant at the level of < 0.001.

Overall Effects of Ksheerabala Taila Nasya (Group A):

The overall effect of Ksheerabala Taila Nasya over 15 patients of Vatika Shirahshoola shows that 8 patients got marked improvement (53.28%), and 7 patients got complete remission (46.62%).

Response of the Sahachara Taila Nasya (Group B) on 15 patients of Vatika Shirahshoola after 14th day of Treatment (AT)

-Teevrata of Vedana in mean BT is 2.46 and mean AT is 1.137 with 54.06% of improvement with SD of 0.488 SE as 0.126 with highly significant at the level of < 0.001.

-Kaala Prakarsha in mean BT is 2.53 and mean AT is 1.13 with 55.33% of improvement with SD of 0.632 SE as 0.163 with highly significant at the level of < 0.001.

-Vegapravrutti in mean BT is 2.26 and mean AT is 1.06 with 53.09% of improvement with SD of 0.676 SE as 0.174 with highly significant at the level of < 0.001.

-Prakashasahishnuta in mean BT is 0.133 and mean AT is 0 with 100% of

improvement with SD of 0.351 SE as 0.0.09 with no significant at the level of >0.05 .

-Bhedatodavat Shoola in mean BT is 1.86 and mean AT is 0.4 with 78.49% of improvement with SD of 0.561 SE as 0.133 with highly significant at the level of < 0.001 .

-Shirahshoola in mean BT is 2.26 and mean AT is 1.13 with 50% of improvement with SD of 0.351 SE as 0.090 with highly significant at the level of < 0.001 .

Overall Effects of Sahachara Taila Nasya:

The overall effect of Sahachara Taila Nasya over 15 patients of Vatik- Shirahshoola shows that and 4 patients got complete remission (26.64%), 7 patients got marked improvement (46.62) and 4 patients got moderate improvement.

DISCUSSION

Shirahshoola is one among the Shiroroga, which is mainly caused by Vata dosha. The drugs having Vatahara, Shoolahara, properties and also which provide Bhrimhana may be very useful in the treatment of Shirahshoola.

Discussion on Pradhanakarma:

Here patient in “Pralambita Shirashah” position means head slanted down and foot end slightly raised, in Pralambita position, the medicine reaches the Srotas and gives the result. The lowering of head plays a major role in the spread of medicine to the nose and adjoining structure i.e. sinus ostia. Later studies showed that drops instilled into the nose in the head down wards position would appear to be the most effective way of decongesting the ostia of the sinuses

Mode of Action of Nasya Karma:

A clear description regarding the mode of action of Nasya Karma is not available in Ayurvedic classics. Acharya Charaka described that Nasa is the only gate way to Shirah. So, the medicine administered through Nasya can easily spread to Shirah and get absorbed. Acharya Vagbhata has given some more details about the mode of action (A. S. Su 29/2). It is explained that Nasa Being door way to Shirah, the drug administrated through nostrils reaches Sringataka, a Sirahmarma by Nasa Srota and spreads in the Murdha (Brain), taking routes of Netra (eyes), Shrotra (ears), Kantha (throat), Sira Mukha and scratches the morbid doshas in Urdhwajatru and extract them from Uttamanga.

Indu commentator of Ashtanga Sanghrahā opined that Sringataka is situated in the inner side of middle part of the head.

“NASA HI SHIRASO DWARAM”¹³

Acharya ↓ Sushruta has explained there is communication between the nasal cavity and cranial cavity.

The cranial and nasal cavities are significant cavities in the head and neck region. It is mainly based on procedure and therapeutic effect.

Nasal and cranial cavity:

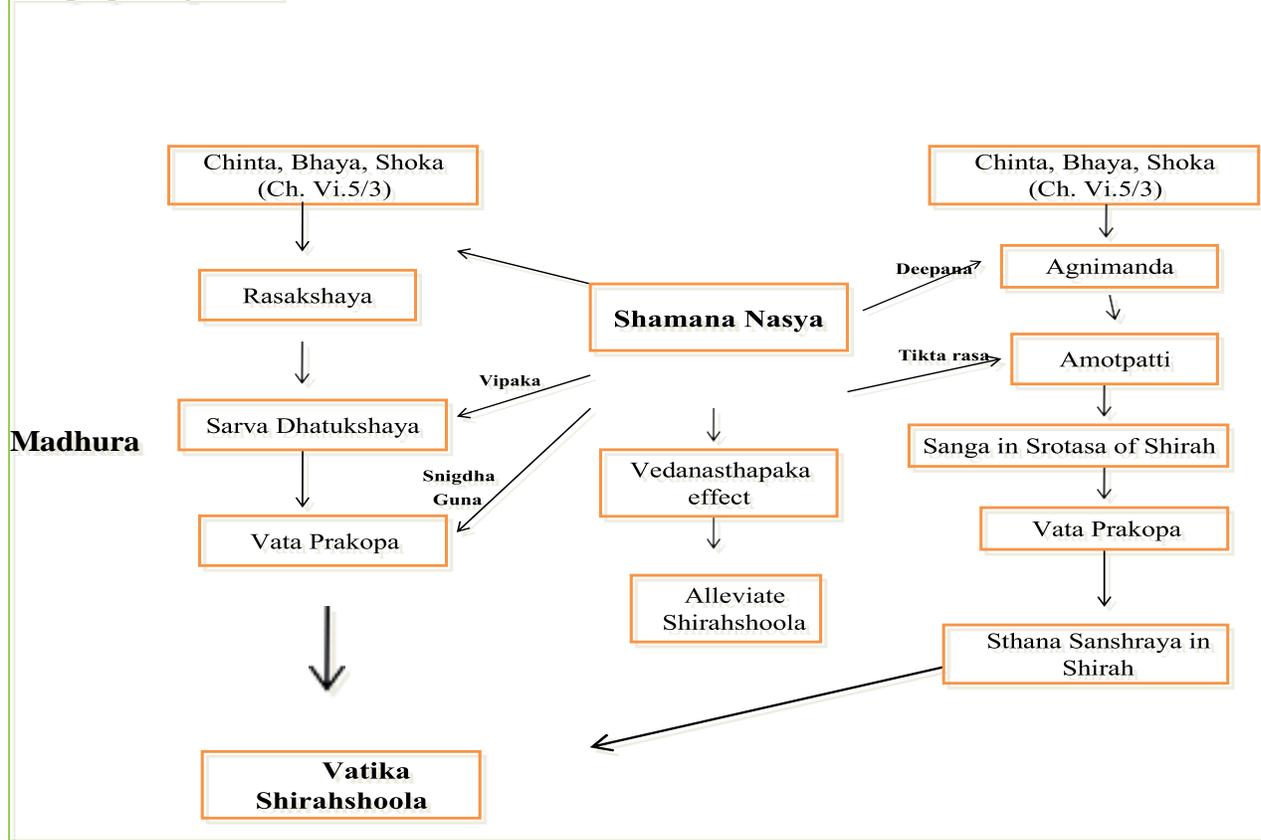
The medicine will enter from the nasal cavity to the cranial cavity and reaches the centres, through the foramens in the cribriform plate. Which transmits the nerves and blood vessels, will make communication between the nasal and cranial cavity.

Nasal cavity Nasal mucosa

Foramens in the cranial cranial Foss plate Veerya of medicines transmit to nerves and blood vessels

Samprapti Vighat

Samprapti Vighatana



Observation

Maximum of 20(67%) patient's belong to the age group 21-30 years. Maximum of 19(63%) patients were Male.

Maximum of 18(60%) patients were Student.

Maximum of 19(63.33%) patients were under in Stress in family. Maximum of 22(73.26%) patients were disturbed sleep.

Maximum of 17(56.61%) patients were having Vata-Pittaja Prakruti.

CONCLUSION

1. Shirah is the main control system of all bodily ailments. Alteration in the activity of Shirah influences all body tissues and it is also influenced by body tissues in an inverse way.

2. The symptomatology of Vatika Shirahshoola explained in the classics is having the resemblance to the symptomatology of Tension headache explained in contemporary science.

3. The life style in modern era creates so many psychological disorders. Vatika Shirahshoola (TTH) is most common among them, which makes suffer many people due to their run race.

4. Statistically Teevrata of Vedana, Kaalaprakarsha, Vegapravrutti, and Shirahshoola are responding equally in both groups.

5. Clinically Group A shown Best response compared to group B.

6. No complications occur during and after the course of Nasya karma.

REFERENCES

1. Headache disorders [Internet]. Who.int. 2018 [cited 10 December 2018]. Available from: <http://www.who.int/news-room/fact-sheets/detail/headache-disorders>
2. Prevalence and clinical characteristics of headache [Internet]. 2018 [cited 10 December 2018]. Available from: https://www.researchgate.net/publication/275653978_Prevalence_and_clinical_characteristics_of_headache_in_dental_students_of_a_tertiary_care_teaching_dental_hospital_in_Northern_India
3. Vaidya Jadavaji Trikamji Acharya, Charaka Samhita by Agnivesa, Ayurveda Dipika commentary of Chakrapani Datta. Sutra Sthana – 17/16-17, Varanasi: Chaukhamba Prakashan; Reprint, 2009. Page No. 100.
4. Shivprasad Sharma, Astanga Samagraha with the Sashilekha Sanskrit Commentary by Indu. Sutra Sthana- 29/2-3, Varanasi: Chaukhamba Sanskrit Series, Tritiya Sansakarana; 2012. Page No. 223.
5. Dr. Rajiv Kumar Roy-Hindi Vyakhyakara, Dr. Ramkumar Roy- Sampadaka. Vangasena Samhita (Chikitsa Sara Samgraha). Vatavyadhyadhikara, Sloka no. 240, Varanasi: Prachya Prakashan; 2010. Page No. 27
6. 149, Dr. Indradev Tripathi. Chakradatta of Sri Chakrapanidatta with the Vaidyaprabha Hindi commentary. Vatavyadhi Chikitsa 22/100, Varanasi: Chaukhamba Sanskrit Bhawan; reprint, 2015. Page No. 142.
7. 153/P V Sharma. Dravyaguna Vijnana Vol II, Varanasi: Chaukhambha Bharati Academy, Reprint, 2011. Page No. 185-186.
8. 135/Vaidya Jadavaji Trikamji Acharya, Charaka Samhita by Agnivesa, Ayurveda Dipika commentary of Chakrapani Datta. Siddhi Sthana – 9/104, Varanasi: Chaukhamba Sanskrit Sansthan; Reprint, 2014. Page No. 725.
9. 136/Pt. Hari Sadashiva Sastri, Astanga Hridaya with Sarvangasundari and Ayurved Rasayana commentary. Sutra Sthana 20/18-20, Varanasi: Chaukhamba Sanskrit Sansthan; Reprint, 2014. Page No. 291.
10. 137/Vaidya Jadavaji Trikamji Acharya, Susruta Samhita of Susruta, Nibandhasangraha commentary of Sri Dalhanacharya. Chikitsa Sthana- 40/26- 27, Varanasi: Chaukhamba Sanskrit Sansthan; Reprint, 2014. Page No. 555.
11. Pt. Hari Sadashiva Sastri, Astanga Hridaya with Sarvangasundari and Ayurved Rasayana commentary. Sutra Sthana 20/20-22, Varanasi: Chaukhamba Sanskrit Sansthan; Reprint, 2014. Page No. 291.
12. 143/Vaidya Jadavaji Trikamji Acharya, Charaka Samhita by Agnivesa, Ayurveda Dipika commentary of Chakrapani Datta. Siddhi Sthana – 9/108, Varanasi: Chaukhamba Sanskrit Sansthan; Reprint, 2014. Page No. 723.
13. 108//Pt. Hari Sadashiva Sastri, Astanga Hridaya with Sarvangasundari and Ayurved Rasayana commentary. Sutra Sthana 20/1, Varanasi: Chaukhamba Sanskrit Sansthan; Reprint, 2014. Page No.

CORRESPONDING AUTHOR

Dr Suresh N Hakkandi
HOD, Department of Panchakarma,
SJG Ayurvedic Medical College
Koppal-Karnataka.
Email: sureshhakkandi@gmail.com

Source of support: Nil,
Conflict of interest: None Declared

Cite this article as

Suresh N Hakkandi: A Comparative Study to Evaluate the Efficacy of ksheerabala Taila Nasya and Sahachara Taila Nasyain Vatika Shirahshoola w. s. r. to Tension-Headache; ayurpub; IV(1): 1154-1161