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Transforming Migraine Pain into Peace: An Ayurvedic Approach Using Marma Chikitsa, Nasya, and Panchakarma

Case Report

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Abstract

Migraine, characterised as a centrally-mediated pain disorder, signifies a dysfunction in the central nervous system (CNS), encompassing the brain and spinal cord. This disorder involves the complex interaction of nerves and blood vessels, concluding in the display of pain and neurological symptoms associated with migraine. Key features include a unilateral location, often manifesting on one side of the head; a pulsating quality to the pain; moderate to severe intensity, which can significantly impair daily functioning; and exacerbation with routine physical activity. The management strategy involves a multifaceted approach, incorporating *Snehana* (Therapeutic Massage), *Swedana* (Sudation Therapy), *Shashtika Shali Pinda Sweda (Swedana)*, *Nasya* (errhine therapy), *Marma Chikitsa*, and oral medication. After a single treatment session, a significant improvement in the patient's health was evident as early as the second day of treatment, highlighting the prompt and positive response to the therapeutic interventions. This case serves as a compelling illustration of the crucial role played by Ayurveda in positively transforming the patient's health. Ayurveda's method provided a natural approach that addressed the root cause of patients' symptoms, balanced *doshas*, and provided relief to the patient in a short period.

Keywords: Snehana, Swedana, Ardhavabhedaka, Marma Chikitsa, Nasya, Migraine.

Introduction

A migraine is categorised by the occurrence of moderate to severe attacks considered by throbbing head pain localised to one side. These incidents are often accompanied by symptoms including nausea, vomiting, sensitivity to sound (phonophobia), and sensitivity to light (photophobia). The typical duration of a migraine episode spans from 4 to 72 hours (1). The prevalence of chronic migraine exhibits a significant gender difference, with a higher occurrence among women ranging from 1.7% to 4.0%, compared to a lower prevalence in men falling within the range of 0.6% to 0.7%(2). The factors of this disease encompass a change in hormone levels during a woman's menstrual cycle, drinking alcohol, continuous stress, consistent sleep deprivation, challenges in maintaining regular meals, often involving frequent instances of skipping either lunch or dinner, along with the consumption of certain foods like chocolates, citrus fruits, bananas, processed and fermented foods. The Sanskrit term "Ardhavabhedaka" derives from "Ardha" meaning "half" and "Bhedak" meaning "split," highlighting its nature as a condition causing piercing, tearing pain on

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one side of the head. Acharya Sushruta classified it under Shiroroga (head diseases), describing symptoms like sharp pain (Bheda), tearing pain (Toda), giddiness (Bhram), and distress (Shool), which can occur suddenly or every 10-15 days due to Tridosha imbalance. Similarly, migraines in modern medicine are characterised by severe, throbbing, one-sided head pain. Both conditions share similar symptoms and involve complex internal and external triggers. In Ayurveda, Ardhavabhedaka is linked to Vata and Pitta imbalances, aligning with modern views of migraines, which involve neurovascular and neurotransmitter disruptions. This emphasises the value of Ayurvedic insights in managing these severe headache episodes. According to Charak, this condition presents itself with an intense pain concentrated on a side of the head, affecting specific regions including Manya (chin), Bhru (eyebrow), Shankha (temples), Karna (ears), Akshi (eyes), and Lalaat (forehead)(4). The nature of this pain is vividly depicted as resembling the sharp, piercing sensation like the impact of a Shastra (weapon) against an Arani (a type of grinding tool). Headaches can be effectively managed through modern medicine. Acetaminophen (Paracetamol) and nonsteroidal Anti-Inflammatory Drugs (NSAIDs) can be effective in reducing pain and inflammation associated with headaches. It is important to note that common side effects of these medications for a long time may include gastrointestinal discomfort, heartburn, and nausea. In this detailed case study, the condition of Ardhavabhedaka has been clinically correlated with migraine, and a thorough treatment plan was created to

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attain a complete impact on the patient's health. Chronic health problems are caused by the imbalances in *Tridoshas* impacting on the left side of the head including *doshic* balance, lifestyle, diet, and environment.

Materials and methods

Patient information

A 17-year-old female patient, a student of Indian ethnicity, who is a non-alcoholic and non-smoker, registered under O.P.D. Reg. no: R323644, sought medical attention at the outpatient department of *Kayachikitsa* (OPD) at Dr. D.Y. Patil College of Ayurved and Research Centre, Pimpri, Pune.

The patient reported experiencing severe unilateral head pain, accompanied by symptoms such as nausea, vomiting, heightened stress, discomfort in noisy environments, and sensitivity to light. The patient presents with headaches accompanied by eyelid-associated symptoms such as oedema, ptosis, and lacrimation. The patient reports occasional feelings of depression.

Migraine Triggers Factors

- Sleep Inadequacy.
- Irregular meals due to a disordered lifestyle.
- Consumption of eatables like:
 - Chocolates
 - Citrus Fruits
 - Processed and fermented foods.

The patient experiences pain triggers 4 to 5 times daily, leading to increased stress, especially given her age. The pain usually intensifies in the evening, and she occasionally feels discomfort in her hand, neck, and back. A sports-related chin injury a few years ago coincides with these symptoms' onset. Additionally, The Patient reports pain in the occipital region and Anaemia is also noted. Notably, there is no reported family history of migraine in the patient's medical background. The patient, who had previously been admitted to a hospital and was prescribed allopathic medications, did not experience significant improvement in her condition. Discontent with the results, The Patient decided to pursue Ayurveda treatment as an alternative and visited the Outpatient Department (O.P.D.) at Dr. D.Y. Patil College of Ayurved and Research Centre, Pimpri, Pune. Upon examination, her pulse was normal, her blood pressure was within the expected range, and her BMI was as anticipated. There is no history of critical illnesses such as diabetes, hypertension, or thyroid disorders. All prior medications were discontinued before initiating Ayurveda treatment. Detailed results of the patient's laboratory tests are provided in Table 1.

MRI Description:

- MRI brain reveals few non-specific hyperintensities in the right parietal parenchyma.
- MR Venography reveals no obvious abnormality.

Table 1: Laboratory Investigations

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Type	Value	Unit
Haemoglobin	10.7	gm/dL
WBC	12800	per cmm
DLC		
Neutrophils	73	%
Lymphocytes	22	%
Monocytes	3	%
Eosinophils	2	%
Basophils	0	%
Platelet Count	260000	lac/cumm
RBC morphology	Microcytic Hypochromic	
RFT		
UREA	20	gm/dL
Creatinine	0.7	mg/dL
SERUM Electrolyte		
Sodium	140	mEq/L
Potassium	4.1	mEq/L
Chloride	102	mEq/L
Thyroid		
Т3	1.89	nmol/L
T4	119	nmol/L
TSH	0.73	IU/mL
B12	>1000.0	
LFT		
Bilirubin Total:	0.4	mg/dL
Bilirubin Direct:	0.2	mg/dL
Bilirubin Indirect:	0.2	mg/dL
SGOT/AST:	24	IU/L
SGPR/ALT:	20	IU/L
Alkaline Phosphatase:	82	U/L
Total Protein:	6.0	g/dL
Albumin:	3.5	g/dL
Globulin:	2.5	g/dL
Alb/GLB ratio:	1:4	
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Note: gm - gram, dl - decilitre, cmm - cubic millimetre, WBC - White Blood Cells, DLC - Differential Leukocyte Count, % - Percent, RBC - Red Blood Cells, RFT - Renal Function Test, mg - milligrams, mEq - milliequivalents, L - Litre, TSH - Thyroid Stimulating Hormone, LFT - Liver Function Test, SGOT - Serum Glutamic-Oxaloacetic Transaminase, AST - Aspartate Aminotransferase, IU - International Unit, SGPR - Serum Glutamic Pyruvic Transaminase, ALT - Alanine Aminotransferase, U - Units, g - gram, Alb - Albumin, GLB - Globulin

Clinical Findings Physical examination

When the patient visited the hospital, she reported experiencing severe pain on the left side of her head, which intensified during examination and manipulation. She also experienced eyelid heaviness. Additionally, she had pain and stiffness in the cervical region. Neurological tests, including the Romberg, finger-nose, and hand-tapping tests, revealed no



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significant abnormalities. The patient's body temperature was normal.

Asthasthana pariksha /Eightfold examination

Nadi (Pulse) - Vata Pitta dominant, Mutra (Urine) -Normal, Mala (Bowels) - Constipation, Jivha (Tongue) - Coated, Shabda (Speech) - no any abnormality, Druka (Eyes) - No any abnormality, Aakruti (Built) - Lean built, Sparsha (Skin) - Dry.

Systemic examination

- Central Nervous System Conscious oriented
- Cardiovascular System S1S2 audible

Timeline

Respiratory System - Air entry bilaterally equal Cerebellar - No Gait ataxia, No Tandem gait, No Dysmetria, No Dysdiadochokinesia.

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Over the past couple of years, the patient has been grappling with this disease, undergoing various allopathic treatments that have proven ineffective. However, implementing traditional Ayurveda medication and therapies has shown remarkable effectiveness for the patient in a relatively short period.

Table 2: Timelines

Year/Date	Clinical events and interventions
2021	Diagnosed with migraine
2021-2023	The patient has complaints of unilateral on-and-off headache, pricking pain, nausea and vomiting, which happens occasionally.
24 Oct 2023 - 28 Oct 2023	The patient was admitted to a multi-specialist hospital for treatment of fever, loose motions, nausea, vomiting and headache. Took allopathic medications for 5 days.
28 October 2023	After getting discharged, there was relief in fever and motion but no major relief in nausea, vomiting,
30 October 2023	The patient visited the <i>Kayachikitsa</i> outpatient department with the above complaints and was examined. After examination, the patient was admitted to IPD for further treatment.
30 Oct 2023 - 3 Nov 2023	The patient was prescribed <i>Snehana</i> , <i>Swedana</i> , <i>Pinda Sweda</i> , and <i>Nasya</i> procedures. <i>Shaman Chikitsa</i> and <i>Marma Chikitsa</i> were also included in the treatment. The patient felt major relief after this
03 November 2023	Discharged with a prescription to continue <i>Shaman Chikitsa</i> and <i>Nasya Karma</i> for the next 7 days. A 3-day gap was recommended, followed by another 7-day course of <i>Nasya Karma</i> to ensure lasting relief.

Diagnostic assessment Diagnostic Criteria

The diagnosis of migraine was further developed based on the assessment of the frequency of Monthly Migraine Days (MMDs) and Monthly Headache Days (MHDs).

Characterised as (5,6):

- MMD>=8 and MHD>=15, chronic migraine
- MMD<15 or MHD<15, episodic migraine

In this case, the patient experienced symptoms for more than 15 days, indicative of chronic migraine.

Therapeutic intervention

In Ayurvedic management of migraines, therapies focus on balancing doshas and relieving symptoms. Given the predominance of *Vata* vitiation, the chronic nature of the condition, adolescence, and the associated symptoms, a holistic treatment approach followed, combining Shodhan, Shaman, and Marma Chikitsa. Amapachak Vati eliminates Ama. Shirashula Vajra Ras controls pain by pacifying *Vata* and providing strength. Pittashamak Vati balances Pitta, reducing nausea and vomiting. Guduchi Ghanavati balances Tridosha, promotes digestion, removes toxins, and relieves pain. Gandharva Haritaki treats constipation, preventing Vata aggravation. A decoction of Ashvagandha, Shatavari, and Bhunimba nourishes tissues and strengthens the body, while Shatavari Ghrita calms the nervous system. Snehana, Swedana, Marma therapy, and Nasya further balance doshas and ease migraines. Refer to Table 3. Table 4 and the Discussion section for further details.

Shamana Chikitsa

Table 3: Internal Medication (Shamana Chikitsa)

Medicine	Contents	Dosage & Anupana	Time of administration	Duration
Aampachan vati	Haritaki (Terminalia chebula Retz), Shunthi (Zingiber officinale Roscoe), Marica (Piper nigrum linn.), Pippali (Piper longum linn.), Shuddha Karaskara (Cinnamomum verum J.Presl.), Hingu (Ferula assafoetida L.), Goghrta (Commiphora wightii (Arn.) Bhandari), Saindhava namak (Sodium chloride (L.)), Kumari Swarasa (Aloe vera (L.) Burm.f.) (7)	2 tablets of 250 mg each should be administered twice daily with lukewarm water.	After Meals	30 Oct 2023 to 10 Nov 2023

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Poonam Agrawal et.al., Transforming Migraine Pain into Peace: An Ayurvedic Approach Sootashekhar Sadha, Shuddha Gairika, Vasa 2 tablets of 250 (Justicia adhatoda L.), Guduchi (Tinospora mg each should 30 Oct 2023 Pittashamak vati cordifolia (Willd.) Miers), Bhavana:Ringani be administered Before Meals to 10 Nov (Solanum xanthocarpum Schrad. & H. Wendl.) twice daily with 2023 lukewarm water. Shuddha Parad, Shuddha Gandhak, Loha Bhasma, Tamra Bhasma, Shuddha Guggul (Commiphora wightii (Arn.) Bhandari), Amalaki (Emblica Officinalis Gaertn.), Bibhitaki (Terminalia Bellirica (Gaertn.) Roxb.), Haritaki (Terminalia chebula Retz.), Shunthi (Zingiber officinale Roscoe), Kustha (Saussurea lappa (C.B. Clarke) Sch. Bip.), Yashtimadhu (Glycyrrhiza glabra L.), Kana 2 tablets of 250 (Piper longum L.), Vidanga (Embelia ribes mg each should 30 Oct 2023 Shirashool Bajra ras Burm.f.), Bilva (Aegle marmelos (L.) Corrêa), be administered After Meals to 10 Nov Agnimantha (Premna corymbosa Rottl.), twice daily with 2023 Shyonaka (Oroxylum indicum (L.) Kurz), lukewarm water. Gambhari (Gmelina arborea Roxb.), Patala (Stereospermum suaveolens (Roxb.) DC.), Shalaparni (Desmodium gangeticum (L.) DC.), Prishniparni (Uraria picta (Jacq.) DC), Brihati (Solanum indicum Linn.), Kantakari (Solanum surattense Burm. f.), Gokshura (Tribulus terrestris L.) (9) 2 tablets of 250 mg each should 30 Oct 2023 Extract of the stem of Guduchi (Tinospora to 10 Nov Guduchi ghana vati be administered After Meals cordifolia (Willd.) Miers) (10) twice daily with 2023 lukewarm water. Shatavari (Asparagus racemosus Willd.), Water for Decoction, Ghrita, Ksheera, 1 teaspoon of 01 Nov 2023 Chandana (Santalum album L.), Yashti ghrita with Shatavari ghrita Before Meals to 10 Nov (Glycyrrhiza glabra L.), Musta (Cyperus lukewarm water 2023 rotundus L.), Madhu twice a day (11)Decoction-Bhunimba (Phyllanthus niruri L.), Shatavari 30 Oct 2023 Bhunimba+Shatavari+A (Asparagus racemosus Willd.), Ashvagandha 20 ml twice a day After Meals to 10 Nov shvagandha 2023 (Withania somnifera (L.) Dunal) (12) Bal Haritaki (Terminalia chebula Retz.), 2 Tablets of 250 Eranda Taila (Ricinus communis Linn.), mg each should 30 Oct 2023 Gandharv haritaki to 10 Nov Shunthi (Zingiber officinale Roscoe), Saindhav be taken at night Before Sleeping Namak, Sauvarchal Namak, Pippali (Piper with lukewarm 2023 longum linn.) (13) water Note: mg- milligram, tsp- teaspoon, ml- millilitre

Shodhana Chikitsa

Table 4: Shodhana Chikitsa

Procedure	Medicine	Content	Duration
Snehana (Therapeutic Massage)	Tila Taila (Sesamum indicum L.) (14)	Dried seeds of Sesamum indicum L. (Fam, Pedaliaceae)	30 Oct 2023 to 3 Nov 2023 (5 Days)
Swedana (Sudation Therapy)	Dashmool Kwath (15,16,17)	Bilva (Aegle marmelos (L.) Corrêa), Gambhari (Gmelina arborea Roxb.), Agnimantha (Premna serratifolia L.), Patala (Stereospermum colais (BuchHam. ex Dillwyn) Mabb), Shyonaka (Oroxylum indicum (L.) Kurz), Brahati (Solanum indicum L.), Gokharu (Tribulus terrestris L.), Kantakari (Solanum xanthocarpum Schrad. & Wendl.), Prishniparni (Uraria picta (Jacq.) Desv. ex DC.), Shalaparni (Desmodium gangeticum (L.) DC.)	30 Oct 2023 to 3 Nov 2023 (5 Days)
Swedana	Shashtika Shali	Bala (Sida cordifolia L.), Ksheera	1 Nov 2023 to
(Sudation	Pinda Sweda		3 Nov 2023 (3
Therapy)	(18)		Days)



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Nasya	Panchendriya Vardhan Taila (19)	Jivaka (Leptadenia reticulata (Retz.) Wight & Arn.), Sharkara (Sugar), Rishabhaka (Malaxis muscifera (L.) Kuntze), Anshumati (Desmodium gangeticum (L.) DC.), Draksha (Vitis vinifera L.), Meda (Polygonatum multiflorum (L.) All.), Madhuka (Glycyrrhiza glabra	30 Oct 2023 to 10 Nov 2023 (12 Days)
		L.), Vidanga (Embelia ribes Burm.f.), Pippali (Piper longum L.), Sendhava, Bala (Sida cordifolia L.), Neelkamal (Nymphaea stellata Willd.), Prapaundarika (Nelumbo nucifera (Gaertn.) Assaad), Svadamstra (Tribulus terrestris L.), Brihati (Solanum indicum L.), Rasna (Pluchea lanceolata (Roxb.) H. Rob.), Manjistha (Rubia cordifolia L.), Nidigdhika (Solanum surattense Burm.f.), Twaka (Cinnamomum zeylanicum Blume.), Tila oil (Sesamum indicum L.), Punarnava (Boerhavia diffusa L.), Ksheera	And 14 Nov to 20 Nov 2023(7 Days)

Marma Chikitsa

Marma points are the centres of prana/ source of energy or strotas. Vata Dosha is associated with Prana, by applying pressure to these important points, Vata is channelled, especially Vyan-Vata, which is associated with autonomic activity (10 to 15) and reduces sensations like pain (Toda, Vedana, and Bheda). As per Sushruta Samhita, the cause of pain is Vata and the seat of pain is Mana (psyche) and Sharir (body). Shankha, Utshepak, Sthapani, Simanta, Shringataka, Adhipati, and Krakatika were the points that were stimulated by applying pressure multiple times for 0.8 seconds at each instance continuously for 1 minute. This stimulation was performed twice daily for five consecutive days, October 30 to November 3, 2023.

Observations and results

Clinical assessed outcomes

The patient underwent comprehensive assessments at three key junctures: initially during the diagnostic phase before any treatment, followed by evaluations during discharge, post the first follow-up and second (telephonic) follow-up. Substantial improvements were noted across these assessments. The diagnostic stage identified multiple symptoms, which were systematically measured using specific instruments.

After the first treatment, the patient reported a drastic health improvement. Despite this improvement, it was advised to continue Shaman Chikitsa for an additional 7 days. Furthermore, a treatment of Nasya Karma was recommended to be followed for the same duration. The patient was also counselled on integrating yoga into their daily routine. Following these recommendations, the patient experienced significant relief. Consequently, it was advised to solely continue with Nasya Karma for an additional 7 days after a gap of 3 days, aiming for the permanent eradication of the disease.

Post-treatment, there has been a remarkable reduction in key indicators: MIDAS scores decreased from 18 to 3, HIT-6 scores reduced from 63 to 38, NRS scores decreased from 8 to 1, and MIBS scores decreased from 4 to 0. These significant improvements underscore the efficacy of the treatment approach and the positive impact on the patient's health.

Table 5: Assessment Before and After Treatment

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S.No.	Instrument	Before Treatment	After 1st Treatment	After 2 nd Treatment
1	MIDAS	18 (Moderate Disability)	9 (mild or infrequent disability)	3 (Minimal or infrequent disability)
2	HIT-6	63 (Severe)	48 (Moderate)	38 (Mild)
3	NRS	8 (Severe)	5 (Moderate)	1 (Mild)
4	MIBS	4 (Moderate)	1 (Mild)	0 (None)

Note: MIDAS – Migraine Disability Assessment, HIT – Headache Impact Test, NRS – Numeric Pain Rating Scale, MIBS- Migraine Interictal Burden Scale

Discussion

This study suggests migraines are primarily due to a Tridoshas (Vata, Pitta and Kapha) imbalance. Drawing from Ayurvedic texts, particularly Sushruta and Yogaratnakar, treatment was structured around symptoms resembling Ardhavabhedaka. The patient's condition was addressed using a combination of Shamana, Shodana, and Marma Chikitsa, resulting in recovery. The patient received Sthanika Snehana with Tila Taila, Sthanik Swedana with Dashmool Kwath, and Nasya Karma with Panchendriya Vardhan Taila, along with Shashtika Shali Pinda Sweda and Marma Chikitsa. Additionally, Aampachan Vati, Shatavari Ghrita, Pittashamak Vati, Shirshool Vajra Ras, Guduchi Ghanvati, Mixture of Bhunimba Churna, Ashvagandha Churna, and Shatavari Churna (with lukewarm water), and Gandarva Haritaki were administered.

Panchakarma

The application of *Tila Taila* (Sesame Oil) during *Sthanik Snehana* is highly effective for *Shiroabhyanga* (head massage) in managing migraines by balancing *Vata* and *Kapha* doshas. Its *Madhura* (Sweet), *Tikta* (Bitter), and *Kashaya* (Astringent) properties calm the nervous system, reducing inflammation and discomfort, and alleviating *Vata*-related pain and anxiety while addressing *Kapha*-related heaviness, while its *Ushna* (hot) *Virya* relaxes muscles, helping to reduce migraine frequency and intensity.

Vashpa Swedana (medicated steam) using Dashmoola Kwath (decoction) is a treatment modality specifically indicated for conditions where Vata Dosha or a combination of Vata-Kapha Dosha predominates.



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This therapy helps disintegrate the morbid *Doshas* and facilitates their movement from the periphery (*Shakha*) to the central region (*Kostha*). This process aids in the elimination of *Ama* (toxic waste) from the *Sleshmasthana* (sites of *Kapha* accumulation), thus alleviating symptoms such as stiffness and pain (*Shoola*) commonly experienced in migraines. By addressing these *Doshas*, *Vashpa Swedana* helps to alleviate the associated symptoms and provide relief.

In Shashtika Shali Pinda Sweda, the use of Bala and Godugdha provides Snigdha (unctuous), Balya (strengthening), Rasayana (rejuvenating), and Vatahara (Vata-pacifying) properties. This therapy enhances blood circulation, nourishes muscles (Brumhana), and supports tissue health (Dhatu Poshana), effectively alleviating migraine symptoms like severe head pain, and stress. Additionally, the patient's daily yoga practice contributed to significant relief from unilateral head pain (18).

Nasya Karma is an Ayurvedic therapy where medicated oil is administered through the nasal route, as the nose is considered the gateway to the head (Nasa Hi Shiraso Dwaram)(19). When combined with Panchendriya Vardhan Taila, it effectively balances Doshas by utilizing Teekshna (sharp) herbs for Srotoshodhana (channel cleansing). The oil's Vata-hara (Vata-pacifying), Snigdha (unctuous), and Ushna (hot) qualities help alleviate Vata and clear accumulated Kapha, making it beneficial for Ardhavabhedaka (migraine), sinusitis, and mental stress. This integrated approach purifies the head, promotes Prana Vayu flow, and is highly effective in relieving head pain(20).

Marma Chikitsa is an effective Ayurvedic therapy for managing Ardhavabhedaka (migraine) by stimulating specific Marma points rich in nerves and blood vessels. This treatment balances Vata or Vata-Kapha dosha by guiding Prana to clearing blockages (Srotosanga), enhancing energy flow, and relieving pain. Stimulating head Marma points reduces the severity, frequency, and duration of migraines. By addressing blockages in channels carrying Rasa and Rakta, Marma Chikitsa restores the smooth flow (Anulomana) of Vata, treating the root cause of migraines.

Internal Medications

Aampachan Vati plays a crucial role in Amapachana (digesting toxins) and enhancing digestive function. It helps eliminate Ama (undigested food toxins), By stimulating Agni (digestive fire), it regulates metabolism and balances Vata and Kapha Dosha, often disturbed in conditions like Ardhavabhedaka (migraine). A study published in the World Journal of Pharmaceutical and Medical Research reported significant improvements in patients with Ama when treated with Aampachan Vati, highlighting its role in alleviating symptoms such as pain and stiffness. (21)

Pittashamak Vati is an Ayurvedic formulation used to pacify Pitta Dosha. Pittashamak Vati also supports Deepan (appetite stimulation) and Pachan (digestion). It's Tikta (bitter) and Madhura (sweet) Rasa, along with Laghu (light) and Snigdha (unctuous)

qualities, effectively alleviate migraines and reduce nausea by addressing *Pitta's* excess heat. Previous research has highlighted the efficacy of *Pittashamak Vati* in balancing *Pitta Dosha* and treating related conditions. For instance, a study published in the *World Journal of Pharmaceutical Research* discussed the use of *Pittashamak Vati* in managing hyperacidity, vomiting, heartburn, headache, and vertigo(22).

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Shirashooladi Bajra Rasa properties of Ushna (hot) Virya pacifies Vata, improves circulation, and relieves stagnation in the head. This formulation alleviates pain, reduces inflammation, and supports brain health, making it effective for headache relief. A case report published in the Journal of Emerging Technologies and Innovative Research discussed its use in managing migraine (Ardhavabhedaka). The study emphasized its effectiveness in reducing the severity and frequency of headaches by balancing Vata, Pitta, and Kapha doshas.(23)

Guduchi Ghanavati(24) effectively manages migraines through its Rasapanchaka properties. It also offers Agnideepan (digestive stimulant), Balya (strengthening), and Rasayana (rejuvenating) benefits. By balancing Tridoshas and exhibiting antiinflammatory properties. Its Tikta Rasa stimulates Ranjak Pitta, enhancing the conversion of Rasa (nutrients) into Rakta (blood), which aids digestion, and migraine relief. Previous research has highlighted the potential benefits of Guduchi Ghanavati in managing migraines. For instance, a study published in the Journal of Emerging Technologies and Innovative Research explored its efficacy in reducing the frequency and severity of migraine attacks. The study emphasized Guduchi Ghanavati's role in balancing doshas and its anti-inflammatory properties, which help alleviate migraine symptoms.(25)

Shatavari Ghrita, an Ayurvedic ghee formulation infused with Shatavari(26) (Asparagus racemosus), offers a promising approach to managing migraines. This preparation combines the nourishing and rejuvenating properties of Shatavari with the therapeutic benefits of ghee. Shatavari is known for its Vatapacifying and stress-relieving effects, which help calm the nervous system and reduce the tension that can trigger migraines(11). Additionally, ghee has its own nourishing and lubricating properties, which support brain health and reduce dryness and inflammation, potentially alleviating migraine symptoms. Regular use of Shatavari Ghrita, may contribute to a more balanced and resilient nervous system, helping to reduce the frequency and severity of migraines while supporting overall well-being.

Ashvagandha (Withania somnifera), Bhunimba (Andrographis paniculata), and Shatavari (Asparagus racemosus) effectively manage migraines by balancing Vata, Pitta, and Kapha doshas. Ashvagandha(27) soothes Vata with its Madhura Rasa and Ushna Virya, and its Tikta and Kashaya Rasa help clear Kapha blockages. Bhunimba acts as a Deepan (digestive stimulant), Pittasaraka (bile stimulator), and Rechana (mild purgative), reducing excess Pitta and Kapha. Shatavari(26) pacifies Raktagata Pitta with its



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Madhura and Tikta Rasa, enhances Agni (digestive fire), and rejuvenates Rasa and Rakta dhatus. The study explores Bhunimba's role in reducing inflammation and its potential benefits for migraine management. (28) Another study demonstrates Ashvagandha's stress-reducing properties, which may help manage migraines linked to stress and anxiety (29). Also, research highlights Shatavari's benefits in balancing hormones and reducing symptoms related to hormonal imbalances, which can be relevant for managing migraines associated with such fluctuations. (30)

Gandharva Haritaki, combining Haritaki (31) (Terminalia chebula) and Erand(32) (Ricinus communis), acts as a laxative (Anulomak), promoting toxin (Ama) elimination and improving digestion, helping alleviate migraine triggers. Haritaki's Tikta and Katu tastes, with its (Ushna) potency, balance Pitta and reduce Shothahara. Erand provides pain relief and balances Vata. Together, they relieve migraines by enhancing digestion, clearing Kapha blockages, and addressing doshic imbalances. Previous research examines Gandharva Haritaki's role in Ayurvedic medicine, focusing on its laxative, digestive, and antioxidant properties. These may contribute to migraine relief by addressing digestive issues(33).

Conclusion

Migraine (Ardhavabhedaka) often results from stress, poor diet, lack of routine, and insufficient sleep. Despite trying various modern medications, the patient experienced notable improvement with an Ayurvedic approach only in a short time. The Ayurvedic treatments, including Shamana, Shodana, and Marma Chikitsa, showed significant effectiveness. Encouraged by these positive results, the patient is advised to continue Ayurvedic treatment, Yoga and regular followups. This approach ensures ongoing care and provides valuable data for assessing the effectiveness of Ayurvedic interventions over a larger sample size and longer period. The success of this case highlights Ayurveda's potential in effectively managing and alleviating migraines.

Acknowledgement / Patient perspective

The patient expressed immense satisfaction with the treatment, finally finding relief from years of persistent pain. The patient reported significant improvement, with a complete absence of headaches. Initially experiencing severe pain on the left side of the head, the patient now enjoys a noticeable reduction in discomfort and has resumed a more comfortable daily routine. The treatment has profoundly alleviated physical distress and restored a sense of comfort and happiness.

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