



Case Study

A CASE REPORT ON *SUTIKA JANYA SHRIRASHOOLA* WITH SPECIAL REFERENCE TO MIGRAINE

Anita Sharma¹, Jyoti Rani^{2*}, Sunita Yadav³, Rinkesh Vishnoi⁴

¹HOD, ²PhD Scholar, ⁴PG Scholar, Department of Agad Tantra, National Institute of Ayurveda, Jaipur, Rajasthan.

³Assistant Professor, Department of Agad Tantra, MLR Ayurveda Medical College and Hospital, Charkhi dadri, Haryana.

Article info

Article History:

Received: 26-11-2023

Accepted: 18-12-2023

Published: 31-12-2023

KEYWORDS:

Shiroroga, Shirodhara, Sutika paricharya, Migraine.

ABSTRACT

In all *Samhita* different chapter is devoted to *Shiro-Roga* and detailed explanation about causes, clinical symptoms and treatment are discussed. In *Shiro-Roga, Shirashoola* is the main symptoms. In India, headache is the most common problem and found in maximum females. Causes can be anything from wrong diet, digestive problem, or stress of daily life. In present case, a 28 years female suffering from severe headache since last five years whose all diagnostic reports were normal. She had taken allopathic treatment for past five years but did not get significant relief. After taking detailed history, it was concluded that the headache was due to improper follow up of *Sutika paricharya. Abhayanga-swedan, Nasya and Shirodhara* along with oral medication was prescribed for 15 days. Patient gets relief in headache as well as associated symptoms within four days. Treatment was continued for two months and no reoccurrence was held after follow up also.

INTRODUCTION

Headache are of many types- migraine, tension headache, cluster headache, exertional headache, hypnic headache, due to medication overuse, sinus headache, caffeine related headache etc.^[1]

Migraine is the second most common and aggravated condition found in population. Associated symptoms with migraine are nausea, vomiting and photophobia but maximum people suffer from vomiting. It can last from hours to days. Usually start mildly but increase in intensity. Migraine usually happens in side of head, can be in frontal and sometimes in entire head. ^[2]

Acharya Charak has described *Vattika Shirashoola's* causes like- excess and loud speaking, waking up whole night, excessive fasting, excess purgation etc all causes aggravate the *Vaata Dosha* and causes throbbing pain in head and neck, vertigo, feels like all joints of head are separating, different sound is heard.^[3] This *Vattika Shirashoola* can be co-related with migraine.

Published by Mahadev Publications (Regd.)
publication licensed under a Creative Commons
Attribution-NonCommercial-ShareAlike 4.0
International (CC BY-NC-SA 4.0)

Patient Information

A 28-year-old female patient aged 28, height- 5.6" feet, weight 65kg, housewife, came to OPD on 20 June, 2022, with the chief complaint of headache in bi-frontal region. She was suffering from severe headache for five years. Associated symptoms were disturbed sleep, giddiness, nausea, burning sensation in stomach and constipation. Patient was also suffering from photophobia and phonophobia.

History

The patient visited to many allopathic doctors in past five years and diagnosed as case of migraine. Many diagnostic tests were done to diagnose the cause but all tests were within normal range like- Non-contrast CT- Brain, MRI Brain, CT Angio of rain, CT venography of Brain, Electroencephalograph. With these test other hematological and biochemical tests were also done, for eg-Complete Blood count, Liver Function test, HIV, Erythro- sedimentation rate, Creatinine serum, C-reactive protein, Thyroid test (T3, T4, TSH), Vitamin B12, Vitamin D3, Serum uric acid, Serum calcium but all these tests were within normal range. Patient was advised with oral painkiller but with increase in intensity of headache, she was not

Access this article online	
Quick Response Code	
	https://doi.org/10.47070/ijapr.v11i12.3023

getting relief with oral painkiller. So, Patient was taking injection Tramadol, injection Phenergan, injection pantoprazole and injection ondansetron in 100ml normal saline drip as treatment of headache every third day.

Five years back, patient was pregnant and delivered a baby by normal delivery. During the postpartum period, she did not follow the regimen and she used to sleep in front of air cooler. After that she started developing headache symptoms. In starting, headache occur twice or thrice in one month and patient took pain killer but after six months, intensity and frequency of headache increased. Headache intensity was so severe that patient cry every time and later she developed sensitivity to light and noise with increased episode.

Clinical Finding

BP- 130/80mmHg
Pulse rate of 78/min

Dashvidha pariksha

Prakriti - kaphaj
Vaya -yuva
Satva -Avar
Sara -Madhyam
Samhanana -Madhyam
Aahar Shakti – Madhyam
Satmya - Madhyam
Praman -Madhyam
Vyayam Shakti -Madhyam

Rog prakrti- Vaataj

Timeline, Follow Up and Outcome

First two days, patient did not get any relief and had to take injection Tramadol, but after 4 days, patient started getting relief in headache, insomnia and other associated complaint also got subsided. All procedures were continued for seven days. After that patient was discharged and called weekly for follow up. Treatment was continued for two months and no reoccurrences were reported. Patient was healthy and no insomnia or constipation was reported during follow up. The timelines of the case are depicted in table 1.

Diagnosis

By seeing the history, condition falls under the *Sutika Janya shirashoola* (puerperal induced headache).^[4]

Therapeutic Intervention

Therapeutic intervention and follow up are following (Table 2) and oral medication is given in table 3.

Pathya and Apathya (wholesome and unwholesome)

Patient was advised to take light food such as - *khichadi* with more quantity of green gram cereal and mix with butter. Only green vegetable for curry was advised. Patient was advised to avoid heavy meals, day sleep, late night awakening and late waking up in morning.

Table 1: Timeline

Date	Summary including presenting concern (Chief complaints during first visit) and follow-up details of previous visit	Diagnostic testing carried out on each visit	Interventions suggested on each visit
20/06//2022	Headache, disturbed sleep, constipation	ESR-34mm/hr Hb-10.6gm RBS- Within normal range TSH- Within normal range Blood Urea- Within normal range Serum, Creatinine- Within normal range	<i>Shirodhara</i> (therapeutic oil-streaming over forehead), <i>Nasya</i> (medication through nasal route), <i>Abhyanga swedan</i> (therapeutic massage and sudation), <i>Padabhyanga</i> (feet massage) Oral Medication <i>Shirashoola vajra rasa,</i> <i>Mahavat vidhawansana rasa,</i> <i>Godanti bhasma,</i> <i>Sarswatarist,</i> <i>Pathyadi kwath,</i> <i>Avipattikarchurna,</i> <i>Pittantak yoga, Brahmi capsule,</i> <i>Aargyavardhini vati,</i> <i>Tarunikusumakar churna</i>
11/07/2022	No reoccurrence of headache, No fresh	----	<i>Shirashoola vajra rasa</i> <i>Mahavat vidhawansana rasa</i>

	complaint		<i>Godanti bhasma, Sarswatarist, Brahmi capsule, Pathyadi kwath, Avipattikarchurna Pittantak yoga</i>
25/07/2022	No fresh complaint	----	<i>Shirashoola vajra rasa Mahavat vidhawansana rasa Godanti bhasma, Pathyadi kwath Brahmi capsule</i>
8/08/2022	No fresh complaint	----	<i>Shirashoola vajra rasa Mahavat vidhawansana rasa Godanti bhasma, Pathyadi kwath Brahmi capsule</i>
22/08/2022	No fresh complaint	----	<i>Pathyadi kwath Brahmi capsule</i>
5/09/2022	No fresh complaint	----	<i>Pathyadi kwath Brahmi capsule</i>

Table 2: Therapeutic intervention & follow-up

	Procedure	Medication	Duration
1	<i>Shirodhara</i> (therapeutic oil-streaming over forehead)	<i>Brahmi taila</i>	21-27 June, 2022 Timing- 9-11 am
2	<i>Nasya</i> (medication through nasal route)	<i>Anu Taila</i> (4 drops in each nostril)	
3	<i>Abhyanga swedan</i> (therapeutic massage & sudation)	<i>Dashmoola taila</i>	
4	<i>Padabhyanga</i> (feet massage)	<i>Dashmoola taila</i>	21-27 June, 2022 Timing- 9-10pm

Table 3: Oral Medication given

	Medication	Dose	time interval/ <i>Anupaana</i> (co-administers with medicine)	Duration
1	<i>Shirashoola vajra rasa Mahavat vidhawansana rasa Godanti Bhasma</i>	250mg 250mg 500 mg	Twice a day (around 8 am and 8pm/warm water)	21 June-5 July 2022
2	<i>Sarswatarist</i>	20ml	Twice a day (around 9am and 8 pm)/normal water	
3	<i>Pathyadi kwath</i>	20ml	Twice a day around 8 am and 8pm/ warm water/normal water	
4	<i>Avipattikarchurna Pittantak yoga</i>	3gm 500mg	Twice a day (around 7am and 7.30pm/normal water)	
5	<i>Aargyavardhini vati</i>	500 mg	Twice a day (in between meal)/ warm water	
6	<i>Brahmi capsule</i>	500mg	Twice a day (around 7am and 7pm/warm milk)	
7	<i>Tarunikusumakar churna</i> ^[22]	3 gm	Once in a day (around 10pm)/ before bed	21 st to 24 th June 2022

DISCUSSION

In *Ayurveda Samhita*, detailed explanation about *Sutika paricharya* (puerperal regimen) has been given in all *Samhita*. Due to *Garbhavridhi* (fetus growth) and labor pain- female suffer from *Dhatukshya* (diminution of *Dhātu*). In labor procedure-

due to bleeding, female body becomes *Shunya*. That is why specific and healthy food and regimen are explained which should be followed by female. [5]

If one does not follow the regimen or *Mithyachar* (contradictory food and lifestyle), she

would suffer from *Sutika roga* (puerperal disorders) and these are *Krich-sadhya* (disease curable with difficulty) or *Asadhya* (incurable disease).^[6] *Bhavamishra* have explained the *Sutika Rog Nidana* (etiology of puerperal diseases) as^[7] *Mithyopchar-* (wrong regimen, (eg- cold food and regimen), *Sanklesha-* (the factor which aggravate the *Doshas*), *Visham-* (mixing of *Pathya* (wholesome) and *Apathya* (unwholesome) and *Ajeerrna-* (indigestion).

Acharya Kashyapa has explained the 64 puerperal disorders in *Sutikopakramaniya adhyaya* which occur due to unhealthy food and regimen. In these 64 disorders, *Ardhshiroruja* (headache in half part) is one.^[4] *Acharya Sushruta* says that for these 64 puerperal disorders, treatment explained in *Chikitsasthana* should be adopted^[8] specially *Vaatahara* (pacify the *Vatta*) *Chikitsa* should be done.^[9]

Abhyang (therapeutic massage) is explained in *Ayurveda Samhita* in treatment for the management of puerperal diseases and it is best procedure to pacify the aggravated *Vaata*. For therapeutic massage) – *Dashmoola taila* was selected because the symptoms of patient as a result of aggravated *Vaata* and *Dhatkshyajanya Vikara* as earlier stated. *Dashmoolataila* is best indicated for *Vaatashaman* and indicated in *Sutika Rog Chikitsa* (treatment of puerperal diseases)^[9] as well as in *Shiroroga* (disorder of the head) ^[10] and therapeutic massage correct the diminution of *Dhatu*. So, it was a *Naidanika Chikitsa* (treatment according to etiology) here. After therapeutic massage, sudation with *Dashmoola Kwath* was done as sudation also pacify the *Vaata*.

Nasya (medication through nasal route) is said to be the route for *Shira Pradesh* (head) and it is indicated in *Urdhajatrugata vikara* (disease of head)^[11]. For management of any disease with the selection of drug, route of administration is very important for easy absorption and action of drug. For *Nasya* (medication through nasal route)- *Anu Taila* was selected because this formulation is indicated for *Shirashoola* (headache) and in other diseases.^[12]

Shirodhara treatment was selected because patient was suffering from disturbed sleep. Due to *Prajajagrana* (waking up whole night) vitiate the *Vaata* which is the main reason for headache.^[13] *Shirodhara* does relaxation of body due to supine posture of patient as seen in *Shava-asana*. In *Shirodhara*, lukewarm oil is poured on head for about 45 minutes. This maintains slight pressure on forehead. This continuous pressure along with heat of oil, helps body to release its natural pain killer; the endorphin and act as analgesic. For *Shirodhara*, *Tila Taila* and *Brahmi Taila* was used which are very beneficial to pacify the *Vatta*. As in therapeutic massage procedure, oil penetrate the skin and nourishes the cell of body, in

the same way, *Taila* used in *Shirodhara* show same effect along with *Vednashaman* (pain killer).^[14]

Shirashoola Vajra Rasa is having *Shoolahara* (pacify pain) property and it is indicated in all type of *Shiroroga*.^[15] *Godanti Bhasma* is said to be of cold potency and also *Shoolahara* as indicated in *Shirashoola*.^[16] *Mahavatavindhaskarasa* is made of combination of different *Bhasma* like- *Sudha* (purified) *Parad* (mercury), *Sudha Gandhak* (sulphur), *Naagbhasma* (lead) *Vangabhasma* (tin), *Loha* (iron) *Bhasma*, *Tamra* (copper) *Bhasma* and other ingredients and indicated in *Vaata Vikara* specially in *Shirashoola* (headache).^[17]

Pathyadi Kwatha^[18] is explained in *Sharangdhar Samhita* in *Kwath Kalpana* (decoction) context. It is indicated in all type of *Shirashoola* like *Ardhsiroruja*, *Suryavrata*, *Sankhak* etc. This *Kwatha* is having ingredients of *Triphala*, *Amrita*, *Bhunimba*, *Haridra*. *Sarswatarista* was selected because it is having *Rasayan* (rejuvenating), *Balavardhaka* (increase the body stamina), and indicated in person who are doing *Vatta Vardhak* action for example- studying a lot, singing in excess.^[19] *Tarunikusumakar churna*^[20] was used for correcting the bowel habit only for 3 days. *Aargyavardhini vati* does *Deepan* (enhancing metabolic fire)- *Pachan* (enhancing digestion) and *Malsudhikara* (clear bowel) so that the aggravated *Vayushaman* can take place and said to always beneficial in all diseases.^[21] *Brahmi* capsule contain the extract of *Brahmi*. *Brahmi* act as anti-oxidant and beneficial in insomnia, anxiety, and other depressive disorder.^[22]

CONCLUSION

Migraine is the second most common headache. In present case, the patient was suffering from migraine for five years. All the diagnostic tests were normal. Patient was on pain killers but did not get any result. After taking history, the exact cause was known as it was due to improper puerperal regimen. *Shirodhara* and therapeutic massage and sudation with *Dashmoola* along with internal medication give very good result. So, history taking should be proper because a proper history gives the exact cause and help in making the treatment plan.

Declaration of Patient

Authors certify that they have obtained patient consent form, where the patient/caregiver has given his/her consent for reporting the case along with the images and other clinical information in the journal. The patient/ caregiver understands that his/her name and initials will not be published and due efforts will be made to conceal his/her identity, but anonymity cannot be guaranteed.

REFERENCES

1. Stephen Gill, Medically reviewed by Deena Kuruvilla, What different types of headaches are there? Available from <https://www.medicalnews.com/articles/320767>
2. Amaal Starling, Migraine, Available from <https://www.mayoclinic.org/diseases-conditions/migraine-headache/symptoms-causes/syc-20360201>
3. The Caraka Samhita, Sutra sthana; Kiyant shirsiya, 17/16-21, <https://niimh.nic.in/ebooks/ecaraka>
4. P.Hemaraja Sharma, editor, Kashyap Samhita by Vriddha Jivaka, Sutikopkarmariya Adhyay, verse-9-13, Chaukhamba Publications 2006, p.- 305
5. The Caraka Samhita, Sharir sthana; 8/49, <https://niimh.nic.in/ebooks/ecaraka>
6. E-Sushruta Samhita, Sharir sthana, chapter-10/19, <https://niimh.nic.in/ebooks/esushruta>
7. P.Shri Brahma Shankar Mishra, editor, Bhavaprakasha of shri Bhav Mishra (Utrardh), yoniroga adhikar, V Chapter, Verse- 147 chowkhamba Sanskrit series office, Varanasi, edition-7th, 1969, page no-783
8. Sushruta chikitsa Uttartantra, Dalhana teeka-38/32 available from <https://niimh.nic.in/ebooks/esushruta>
9. P.Shri Brahma Shankar Mishra, editor. Bhavaprakasha of shri Bhav Mishra (Utrardh), yoniroga adhikar, V Chapter, verse- 151 chowkhamba Sanskrit series office, Varanasi, edition-7th, 1969, page no-784
10. Prof.Siddhi Nandan Mishra, editor. Bhaishya Ratanawali of Kaviraj Govind das Sen, chapter-Shirorohadhikara 65 versus 81-82, Chaukhamba Surbharati Prakashan, Varanasi, edition-1-2005, page no-1021
11. Astanga hridayam, Sutrasthana Nasya vidhi/ 1, <http://vedotpatti.in/samhita/Vag/ehrudayam>
12. Astang hridaya, sutra sthana Nasya vidhi/37 <http://vedotpatti.in/samhita/Vag/ehrudayam>
13. The Caraka Samhita, Sutra sthana; Kiyant shirsiya /16, <https://niimh.nic.in/ebooks/ecaraka>
14. Anuradha, Comparative study to evaluate the effect of Tailadhara and jaladhara in the management of Vatika Shirashoola with special reference to chronic daily headache, Int. J. Res. Ayurveda Pharm. 2017; 8 (Suppl 2): 105-108 <http://dx.doi.org/10.7897/2277-4343.08291>
15. Prof.Siddhi Nandan Mishra edited, Bhaishya ratanawali of Kaviraj Govind das Sen, chapter-Shirorohadhikara 65 versus 52-56, Chaukhamba Surbharati Prakashan, Varanasi, edition-1-2005, page no-1018
16. Prof.Chandrabhushan Jha, Ayurvediya Rasa shastra, chapter- 9 (Sudha-Sikta evum Kshardarvya parkaran), Chaukhambha Publishing House, print-2013, page no-435
17. Late Swami Krishananand, Rasatantrasara & Sidhaprayog Sangrah, chapter- Kharaliya Rasayana Krishan Gopal Ayurveda Bhawan Publisher, edition-16, page no-459-460
18. Pt.Parasuram Shastri Vidyasagar editor, Sharangdhar Samhitaof Sri Sharangdhar acharya, Madhyam khanda chapter-2 versus 143-145, Chaukhamba Surbharati Prakashan, Varanasi, edition first-2006, page- 162-163
19. Prof.Siddhi Nandan Mishra edited, Bhaishya ratanawali of Kaviraj Govind das Sen, chapter-Rasayanadhikara versus 178-192, Chaukhamba Surbharati Prakashan, Varanasi, edition-1-2005, page no-1123
20. Ranvaidya Bhattshree R. Kaladhar kaviratnen, Sidhabhaishyamanimala- udarvrat chikitsa chapter versus 8, Chaukhamba Krishandas Academy, Varanasi, print-2008, page no-257
21. Acharya Sidhinanadan misra, Abhinav Bhaishya Kalpana vigyan, Chuakambha surbharati- print 2018 chapter- mishra Kalpana- vati Kalpana, page no- 186
22. 7 emerging effect on Bacopa monnieri (Brahmi) <https://www.healthline.com/nutrition/bacopa-monnieri-benefits>

Cite this article as:

Anita Sharma, Jyoti Rani, Sunita Yadav, Rinkesh Vishnoi. A Case Report on Sutika Janya Shrirashoola with special reference to Migraine. International Journal of Ayurveda and Pharma Research. 2023;11(12):106-110.

<https://doi.org/10.47070/ijapr.v11i12.3023>

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

***Address for correspondence**

Dr. Jyoti Rani

PhD Scholar,
Department of Agad Tantra,
National Institute of Ayurveda,
Jaipur.

Email: jyotisurya2014@gmail.com

Disclaimer: IJAPR is solely owned by Mahadev Publications - dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. IJAPR cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of IJAPR editor or editorial board members.