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CLINICAL MANIFESTATION OF MEDHYA GHRITA
IN THE MANAGEMENT OF SHIRA SHULA

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Abstract:

Medhya Rasayanas described in *Samhitas* are primarily meant for the enhancement of the Dhee (Intelligence power), *Dhriti* (Grasping Power), *Smriti* (memory power) like intellectual function. If we can successfully enhance these functions, it may help to combat against various causes of headache like stress, tension, anxiety, fear, grief, anger etc. by which it can help a lot in the management of *Vatika Shirahshula* also.

Keywords - *Medhya, Dhee, Dhriti, Smriti, Shira Shula, Anxiety* etc.

INTRODUCTION:

It has been stated in Charaka Samhita - the oldest epic of Ayurveda, that when mankind started to suffer from various diseases due to *Pragnaparadha*, *Asatmyendriyarth* *Samyoga* etc.. Maharshis were compelled to think in the direction of the search for cure of such ailments. In this manner *Ayurveda* came in the existence. (Cha. Su. 1/6). Medicines administered through the nose, goes into the *Mastishka* and expels out the vitiated Doshas. So considering this view, some known *Medhya Rasayana* drugs like *Mandukparni*, *Shankhpushpi* and *Jyotishmati* in *Ghrita* form were employed by Nasal route (*Nasya*) to evaluate the efficacy in this particular disease comparing with *Medhya Ghrita* given by oral route (*Snehapana*).

AIM:

Clinical Manifestation of *Medhya Ghrita* in the Management of *Shira Shula*.

OBJECTIVES:

To Study the etio pathogenesis of *Shira Shula/ Ardhavbhedak*. To Study the role of *Medhya Ghrita* in the

treatment of *Shira Shula/ Ardhavbhedak*.

Drug Review:

Contain of *Medhya Ghrita* - Generally, Ayurvedic medicines (*Aushadha*)

are the combinations of various drugs selected on some rational basis and are manufactured under different pharmaceutical process in order to get not only their typical form i.e. *Swarasa*, *Kalka*, *Churna*, *Kwatha*, *Avaleha*, *Sneha kalpana*, *Sandhana kalpana* etc. but also to modified and intensified their inherent Preparation of the *Medhya Ghrita* : Follow the standard operating system mentioned in AFI. The prepared *Medhya Dravya* Like *Mandukaparni*, *Shankhpushpi* & *Jyotishmati* was used for the preparation *Ghrita*. *Medhya Ghrita* was made by *Sneha Kalpana* by *Sharangadhar Samhita* using Standard Operating Procedure. Review of Literature □ Disease review – *Shirahshoola* Word *shirahshoola* denotes the painful condition of the head. Different terminologies given by different *Acharyas* are as follows *Charaka Shiroroga* *Sushruta* & *Bhavamishra Shirobhitapa* *Vagbhatta Shirastapa*

Synonyms :

□ *Shiroruja - Shiropida – Shirastapa*

- *Shiroruk - Shirobhitapa*

□ *Shirovedana Charaka* has

described five types of *Shiroroga*,

whereas *Sushruta, Bhavamishra* and *Yogaratanakara* have classified eleven types of *Shiroroga* which are as follows-

Types:

Vataja, Pittaja, Kaphaja, Sannipataja, Raktaja, Kshayaja, Krimija, Shankhaka, Ardhavabhedaka, Suryavarta, Ananatavata, Shirah Kampa.

Purvarupa:

Though, no specific *Purvarupas* are mentioned in Ayurvedic classics, for *Vatika Shiroroga*, but one reference regarding *Shiroroga* is available in *vaidya vinod*. It means restricted movements in head extension and flexion along with heaviness in head which may be present in *Kapha* dominant *Shiroroga*.

Rupa:

Due to the previously mentioned etiological factors the *Vatadominant Tri Dosha* get aggravated and creates

following symptoms of *Vatika*

Shirahshoola.

Samprapti Ghataka:

I. *Dosha - Vatapradhana TriDosha*

II. *Dushya - Rasa, Rakta*

III. *Srotasa - Rasavaha, Raktavaha, Manovaha*

IV. *Sroto Dushti Prakara - Sanga, Vimargagamana*

V. *Agni – Jatharagnimandya*

VI. *Udbhava Sthana - Pakvashaya*

VII. *Prasara - Rasa-Raktavahini*

Sadhyasadyatva :

In *Samhitas*, the *Sadhyasadyata* of *Shirahshoola* is not described specifically. The prognosis is usually dependant upon its severity. The *Shirahshoola* which is not chronic than one year and devoid of any major complications can be termed as *Sukhasadhya*. On the contrary, when *Shiroroga* is having history of long chronicity with chances of replaces and is of chronic in nature, no improvement even after undergoing all sorts of

treatment can be termed as *Asadhya*.

1) Panchakrama - Swedana

(heating), *Nasya*, *Dhumpana*,
Virechana (purgation), *Lepa*,

Vamana (vomiting), *Langhana*
(fasting),

Shirobasti, *RaktaMokshana*,

Cautery on the frontal and supra
orbital region, *Upanaha*

2) Diet - Consuming old

Ghrita, *Shali*, *Shashtik*
Shali, *Yusha* (soup), *Milk*,
Dhanvamansa,
Madhumusta, *Sanyyab*,
Ghritapura.

3) Vegetables - Patolam, Shighru,

Vastuka, *Karvellaka*

4) Fruits - Mango,

Amalaki, *Dadima*,
Matulunga, *Lemon*,
Grape, *Coconut*

5) Liquid diet - Milk, Oil, Coconut

water, *Kanji*, *Takra* (Churned
curd)

6) Medicines - Pathya,

Kushta, *Bhringaraj*,
Kumari, *Musta*, *Ushira*,
Karpura, *Gandhasara*.

**Chikitsa Sutra (Principle of
Treatment):**

In the classical texts of Ayurveda,
the approach of treatment has been
made in the following way.

Specific Management of Shiroroga

In *Bhaishajya Ratnavali*, General
line of treatment for Shirahshula
has been described which is
Svedana, *Nasya*, *Dhumapana*,
Virechana, *Lepa*, *Vamana*,
Langhana, *Shirobasti*,
Raktamokshana, *Agnikarma*,
Upanaha, *Purana Ghrita* &
Shashtika Shali.

Material & Methods: This was a
non-blind randomized controlled
clinical trial. Total 10 patients were
taken for study; sample was
collected from OPD & IPD.

Inclusion Criteria:

- 1) Patient showing classical
symptoms of *Shira Shula*.
- 2) Patient's age group above 35
& below 55 years old.
- 3) Patients with single or
recurrent episode for minimum
2 weeks.
- 4) Patients who had mild or
moderate or major symptoms.

Exclusion Criteria:

1) Patients of age group less than 35 & More than 55 years.

2) Pregnant, breast feeding or planning to become pregnant, during the study.

3) Current history of illness with hepatic, renal, gastroenterological, respiratory, Cardiovascular (Including IHD), Neurological, haematological disease.

Method of Nasyakarma

(Posology):

Patients were advised to attend Panchakarma hospital in the morning hours for *Nasya karma*. They were given following instruction.

I. To take bath with warm water 2 to 3 hours earlier to *Nasya karma* and not to take head bath daily.

II. To avoid suppression of natural urges.

III. Light breakfast half an hour before the *Nasya karma* in the morning and other regimen for *Nasya* mentioned in texts was also advised to the patients.

The procedure of *Nasya Karma* was performed in following three division

Probable Mode Action of Drug:

Mode of Inaction - The term *Vatik Shirahshula* itself suggests that main Dosha taking part in Samprapti is Vata. In the present study *Vatika Shirahshula* is studied in reference to tension headache. So, *Manasika Nidanas* like *Bhaya, Shoka, Chinta* etc. also has been studied. The all *Manasa Nidanas* ultimately cause *Vataprakopa*. So the line of management should include *Vatahara and Medhya* drugs which can provide stability to mental function to cure tension headache (*Vatik*

Statistical Data :

Sr. No.	n	Symptoms	Mean Score		% of Relief	SD	SE	t	P
			B.T.	A.T.					
1.	10	Shankha Nistoda	3.7	1.9	48.64	1.31	0.41	4.32	P<0.001
2.	10	Bhrumadhya Tapanam	1.2	0.2	83.33	0.47	0.14	6.70	<0.001
3.	10	Lalata Tapanam	1.4	1	28.57	0.51	0.16	2.44	<0.05
4.	10	Shirostambha	1.5	0	100	0.52	0.16	9	<0.001
5.	10	Bhavanti Tivra Nisli	1.8	0	100	0.91	0.29	6.19	<0.001
6.	4	Prakashasahyayata	3	0.3	90	0.5	0.25	11	<0.01
7.	2	Ghranastrava	1	0	100	-	-	-	-
8.	8	Sudden Relief It self	1.75	0	100	0.46	0.16	10.69	<0.001

Shirahshula). Therefore, the drugs Shankhpushpi, Mandukparni and Jyotishmati were selected for the Ghrita preparation. The results obtained from the study are clarifying the mode of action which is as follows : Chief complaints like *Shankhanistoda*, *Ghatasambheda*, *Bhrumadhya* Evam *Lalatatanam*, *Shrotra & Akshi Nishkasanavat Pida*, *Sandhimokshanavat Pida* were improved highly significantly with healthy change of percentage which was due to Vatahara properties of drugs helped to cure the Shula. So it can be said that *Medhya Ghrita* prepared for the present study was capable to normalize *Vata dosha* by its *Madhura Vipaka & Snigdha, Guru, Vatahara*,

Vedanasthapana properties. *Sukshma Guna* of *Ghrita* helps to reach the drug in microchannels so drug easily comes into systemic circulation and break the *Dosha-Dushya-Samurchhna*.

DISCUSSION:

Overall effect of Nasya therapy was better than oral group. As excess severity or chronic condition may need long term therapy for better results and to remove reoccurrence. So in future, same topic should be taken for further research to overcome some lacunas if found, for better results and for better conclusions. The above results imply that the *Medhya Ghrita* was better on the *Vatika Shirahshula* particularly in tension headache by both oral and nasal route, but it was more effective on chief complaints, associated complaint, severity, frequency and duration of headache by nasal route. This is a first and primary work to

study Vatika Shirahshula in reference to tension headache. So, further exploration for concrete conclusions is always desired.

Conclusion : Result of the study of group showed that Medhya Ghrita was having highly significant effect on the cardinal symptoms like Shankha Nistoda, Bhrumadhya Tapanama, Shirostambha, Ghranastrava etc. also Result of the study of group showed that Medhya Ghrita was having highly significant effect because of Ingredients are having Shankha Nistoda, Bhrumadhya Tapanama, Shirostambha, Ghranastrava etc.

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