ORIGINAL RESEARCH PAPER
Volume - 11 | Issue - 11 | November - 2022 | PRINT ISSN No. 2277 - 8179 | DOI : 10.36106/ijsr
INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

A COMPARATIVE CLINICAL STUDY ON THE EFFECT OF BHRAMARI PRANAYAM AND PRATIMARSHA NASYA IN THE PREVENTION OF ARDHAVABHEDAKA

Ayurveda

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ABSTRACT

Due to change in life style, faulty dietary pattern, inadequate time for relaxation, suppression of natural urges, stress and strain causes diseases like headache, hypertension, anxiety, agitation etc. Headache or migraine is one among those most common diseases. Migraine can also be correlated to Ardhavabhedaka which is one of the shiroroga. Ardhavabhedaka is described as the Urdhvajaturgatavyadhi. The pain is elicited on the half side of the head due to the vitiation of vata and vatakapha. It is elaborated the general description of Ardhavabhedaka in our classical text. Prevention is better than cure, so in case of Ardhavabhedaka Bhramari Pranayam and Pratimarsha Nasya is one of the best preventive measures for relieving of episodic pain. Thus 'A healthy mind resides in a healthy body', which sounds quite true.

KEYWORDS

Ardhavabhedaka, Bhrmari Pranayama, Pratimarsha Nasya, Shiroroga, Migraine

INTRODUCTION

Migraine can also be correlated to Ardhavabhedaka which is one of the shiroroga. Ardhavabhedaka is mainly characterized by pain in half part of the head and also some people have disturbed vision. Migraine is a common disabling paroxysmal headache usually characterized by severe pain on one or both sides of the head .Though vascular changes are the evidence of migraine, the cause of the headache is neurological.

According to Acharya Charaka Ardhavabhedaka is as Vataja or vatakaphaja. Acharya Susrut opines it as a Tridoshaja disease and Acharya Vagbhatta states it as Vataja.

The Nidan of Ardhavabhedaka are mentioned in Madhava Nidan such as excessive intake of rookshya padartha, Adhyasana, Purva vata sevana, Ati maithuna (excessive coitus) Vegadharana (suppression of natural urges), Ati shrama (excessive work) through which pain is appreciable in one half of the shiras, sankha, bhru, manya, akshi, and karna pradesha.

As per classical text, the attacks of Ardhavabhedaka will be once in seven days, once in fifteen days, once in a month and so on. Thus it can be correlated with migraine based on the etiology, symptoms and treatment principle.

DISCUSSION

Comprises of general description about the anatomy, physiology and marma of Nasa and Nasyakarma and brief description of property and procedure.

Bhramari Pranayama is selected for Ardhavabhedaka, it reduces stress and strain along with calm down of mind which is the main causative factors of this disease due to busy life schedule. The breathing process is directly connected to the brain and CNS and it is one of the most vital processes in the body system. It also has some connection with the hypothalamus, the brain center, which controls emotional responses. The hypothalamus is responsible for transforming perception into cognitive experience. So Mind becomes calm, quiet and mental stress is relieved and feels fresh and energetic. Overall functioning of Nervous, respiratory system & Heart are improved which is effective in controlling high blood pressure.

Anu tail as Pratimarsha Nasya is selected. The composition of the indigenous compound drugs in Anu Tail is detailed in the Drug contrives. The properties of the individual herbs used in the preparation of the medicinal compound are briefed in the context. Anu tail has the Tridoshahara property with tikshna guna and vrihana karaka which elicited the morbid doshas.
So, an effort is made to evaluate and compare the efficacy of BhramariPranayama with and without Pratimarsha Nasya in Ardhavabhaka.

SOURCE OF DATA:

The review of literature includes screening of classical literatures, contemporary Ayurveda literature, and relevant internet sources to collect sufficient data for the study.

1. Madhava Nidan has explain the Nidana, samprapti, Lakshana of Ardhavabhedaka.
2. Susruta has explain the Lakshan and sadhyasadhyata of Ardhavabhedak.
3. Charaka has mentationedAnutaila in the management of Ardhavabhedaka.
4. Bhramari pranayam is mentioned in Yoga and kriya book.

Clinical Sources:

Subjects were selected from OPD, IPD and special camps conducted by S.J.G.A.M. College Hospital and Research Centre; Koppal.

METHOD OF COLLECTION OF DATA:

Patients were selected according to the classical signs and symptoms irrespective of sex, religion, occupation and socio-economic status.

STUDY DESIGN (Plan of Study):

(a) Study Design:
Open randomized comparative clinical trial
(b) Sample Size and Grouping:
Total 40 patients were randomly selected and distributed in two groups.

Group-A;
No of Patient -20
Dosage of pratimarsha Nasya – 2drops in each nostril
Timing of Pratimarsha Nasya –Twice daily (Morning, evening)
Cycles of Bhramari Pranayama – 10 cycles
Timing of Bhramari Pranayama – Twice daily (Morning ,evening)
Group- B
No of the Patient -20
Cycles of Bhramari Pranayama – 10 cycles
Timing of Bhramari Pranayama – Twice daily (Morning, evening)

(c) Inclusive Criteria:

- Patients having the classical signs and symptoms of Ardhavabhedaka.
- Patients age between 16-50 years of either sex.
- Patients fit for Nasya.

(d) Exclusive Criteria:

- Patients having Suryavarta, sankhaka and other shiroroga etc.
- Patients having a history of head trauma,
- Patients unfit for Nasya.
- Migraine having acute attack .
- Patient unfit for Bhramari Pranayam like Ardita ,Pakshyaghata etc

VisheshaPareeksha (Subjective Parameters)

1. Sambhedatodavatshoola (severity of headache)

GRADE 0	GRADE 1	GRADE 2	GRADE 3	GRADE 4
Absent	Mild headache, pt. is aware only if he/she attention to it.	Moderate headache, can ignore at times.	Severe headache can't do his/her usual activities.	Excruciating headache can't do anything.

2. Pakshatkupyatimasadwa (frequency of headache)

GRADE 0	GRADE 1	GRADE 2	GRADE 3	GRADE 4
Nil	≥20days	≤15days	≤10days	≤5days

3. Duration of headache.

GRADE 0	GRADE 1	GRADE 2	GRADE 3	GRADE 4
Nil	1-3hrs	3-6hrs	6-12hrs	≥12hrs/day

OBJECTIVES PARAMETERS:

Grading parameters	Grade-0	Grade-1	Grade-2	Grade-3
Ardha-parshwasula	No Pain	Mild headache,patient is aware only if he/she attention to it	Moderate headache, can ignore at time.	Sever headache,Can't ignore
Bhedatodavatsula	No Pain VASpoint (0)	Very little pain-VAS points(1-2)	Moderate pain-VAS points(5-6)	Severepain-VAS-points(9-10)
Prakasha asahishnuta	Can tolerate bright light	Tolerate dim light	Cannot tolerate light	Can't tolerate bright light

Diagnostic Criteria:

Diagnosis were made according to the classical signs and symptoms like sambheda, toda, bhramavat Sula.

(e) STUDY DURATION:

- Total study duration: 90 days.
- Treatment duration: 30 days

Readings or assessment will be done for every 30 days i:e on 0,30th,60th,90th day.

ASSESSMENT CRITERIA

The data were collected and analyzed by various statistical tools through Repeated measures of ANOVA and Man whitney –U Test.

Diagnostic Criteria:

Assessment was done based upon the improvement in the signs and symptoms of patient mentioned in subjective2 And Objective parameters

Subjective parameters :-

1. Severity of headache
2. Frequency of headache
3. Duration of headache

Objective parameters:-

1. Ardhaparswasula
2. Bhedatodavatsula
3. Prakashaasahishnuta

OBSERVATION AND RESULTS

The results obtained during clinical study of the registered Patients were analyzed statistically before and after treatment. Among 42Patients, 40patients completed the duration of research protocol. In Group B, 02 patients discontinued the treatment schedule due to several reasons. The data was recorded in special research Performa designed, the result were assessed on the basis of changes in parameters recorded accordingly during the study.

RESULTS

After treatment, 12 Subjects mild Response and 8 Subjects showed mild change in Group A and 13 Subjects showed unchanged, 7 Subjects showed mild Response in Group B. After follow up 2, 9 subjects Moderate Response, 11subjects marked Response, changes in Group A and 1 subject showed mild response, 18 subjects showed Moderate Response, 1 subject showed Good Response change in Group B.

CONCLUSION

In this study conducted that Bhramari Pranayama with Pratimarsha Nasya was found to be better than only Bhramari Pranayama in Arddhvabhedaka.

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