EFFICACY OF NASYA WITH BALAGUDUCHYADI TAILA IN THE MANAGEMENT OF ARDHAVABHEDAKA W.S.R. TO MIGRAINE: A CASE STUDY

by Jana Publication & Research

Submission date: 17-Oct-2025 09:43AM (UTC+0300)
Submission ID: 2769517103
File name: IJAR-54380.pdf (508.29K)
Word count: 1996
Character count: 11623

EFFICACY OF NASYA WITH *BALAGUDUCHYADI TAILA* IN THE MANAGEMENT OF *ARDHAVABHEDAKA* W.S.R. TO MIGRAINE: A CASE STUDY

ABSTRACT

Introduction

Ardhavbhedaka is a *Vata Pradhan Tridoshaj UrdhavjatrugataVyadhi*which is well correlated to Migraine.Itmanifests as severe, unilateral, penetrating pain involving neck (*Manya*), eyebrows (*Bhru*), temples (*Shankha*), ears (*Karna*), eyes (*Akshi*), or forehead (*Lalata*). Conventional treatments often have limited efficacy and significant side effects demanding alternative therapies. *Nasya* is a classical therapy indicated in *Urdhavjatrugata*disorders including migraine.

Clinical findings:

A 24-year-old female presented with severe throbbing pain localized to the right half of the head, worsened in the mornings, on neck movement and sneezing accompanied by nausea, vomiting and blurred vision.

Primary Diagnosis, Interventions and Outcomes:

Based on Ayurvedic assessment and symptomatology, diagnosis was *Ardhavabhedaka*.*Nasya* therapy using *Balaguduchyadi Tail*6 *Bindu* (3 ml) in each nostril daily for 14 days. Marked reduction in headache severity and duration; vomiting was eliminated; frequency modestly reduced by the end of treatment. Painkillers were no longer required after treatment.

Conclusion:

This case illustrates that *Nasya*with *Balaguduchyadi Tail*significantly reduce intensity, frequency, and associated symptoms of migraine with minimal side effects. Given its *Vata*-Pacifying, *Sheeta* and*Rasayana* effects this approach could represent a safer, effective adjunct in migraine management.

INTRODUCTION

Ayurveda places *Shiroroga*on high priority. All types of headaches have been described under the heading of *'Shiroroga'*.One of the significant types of *Shiroroga* is *Ardhavabhedaka*.The words *Ardha* and *Avbhedhaka* make up the word *Ardhaavbhedhak*. *Ardha* means half side and *Avbhedhaka* means penetrating/breaking pain. The commentator of the *CharakSamhita*, *AcharyaChakrapani*, made it obvious by stating that *Ardhavbhedhaka* implies "*ArdhaMastaka Vedana*."[1]According to *AcharyaCharaka*,*Vata*,whether acting alone or in conjunction with *Kapha*, grips the affected side of the head and causes *Ativedana* (acute neuralgic pain) in the *Manya* (neck), *Bhru* (eyebrow), *Shankha* (temple), *Karna* (ear), *Akshi*(eyes) or *Lalatardhe* (one-sided forehead). This pain is excruciating, comparable to that of a burning needle. The disease could also affect the *Nayana* (eye) and *Shrotra* (ear) capabilities if it worsens[2].According to *SushrutaAcharya'*, a headache that affects either the right or left side of the head, is splitting, pricking, or churning in nature and manifests at intervals of seven, ten, fifteen, thirty or any other amount of time due to *TridoshajParkopa*is known as *Ardhavabhedaka*[3].

When compared to modern medical literature, the symptoms of *Ardhavabedhaka*, are the same as those of migraine.Migraine is usually an episodic headache associated with certain features such as nausea, vomiting and/or other neurological dysfunctional symptoms in a variety of admixtures, such as photophobia and phonophobia.[4]Since migraine is a clinical diagnosis based on symptoms that are purely

subjective and verifiable by the patient, it can be difficult to diagnose. Migraine is frequently identified by its triggers, which includes stress (both psychological and physical), lack of sleep, anxiety, red wine, menstruation, oestrogen, etc.

Everyone is concerned about its rising prevalence around the world, which has prompted researchers to start looking for a viable treatment for this difficult illness. The majority of medications used in contemporary medicine to treat this disease exclusively aim to reduce symptoms.Such medicines have been shown to have major side effects such as memory loss, gastrointestinal problems, weight gain, etc. and are known to be habit-forming when used frequently and over an extended period of time. Therefore, it is crucial to look for a safer management.The following is a case of migraine successfully managed with *Nasya* therapy,demonstrating satisfactory clinical improvements.

CASE REPORT

A 24 yrs old female patient visited*Panchakarma* OPD with complaint of severe throbbing pain in right side of head with a frequency of 3 attacks/month.The symptoms used to get worsen during morning hours,on neck movements and while sneezing. The pain was followed by nausea and vomiting. Patient also complained of blurry vision when pain got aggravated.Patient was taking various NSAID's and triptans during attack.

Past history- She had history of DNS .

Table No. 1. Personal history

Appetite	Reduced
Bowel	Constipation
Urine	Normal
Sleep	Disturbed

Table No. 2. General physical examination

Blood pressure	110/70 mmhg
Pulse rate	76/min
Temperature	98.3 degrees
Respiration rate	18/min
Pallor	Absent
Cyanosis	Absent
Edema	Absent
Lymphadenopathy	Absent

Table No. 3. DashavidhaPareeksha

Prakriti	*Vata-kaphaj*
Vikriti	*Tridoshaj*
Pramana	*Madhyama*
Satmya	*Sarvarasa*
Sara	*Madhyama*
Samhanana	*Madhyama*
Satva	*Avara*

Aharashakti	*Avara*
Vyayamashakti	*Avara*
Vaya	*Yuva*

Consent was obtained from patient prior to the treatment. Patient was assessed on subjective parameters before treatment and on every follow up.

Treatment protocol

The patient was administered *Nasya*with *BalaguduchayadiTaila* with a dose of 6 *Bindu*(3 ml) in each nostril daily for a duration of 14 days. The therapeutic response and progress were monitored through follow-up assessments conducted on the 14th, 21st, and 28th days after initiation of the treatment.

Table No. 4. Drug review of *Balagudhuchyadi Tail*[5]

Srno	**Name ofDrug**	**Botanical name**	**Properties**	***Karma***
	KwathDravya			
1	*Bala*	*Sidacordifolia (Mill.)*	*Rasa-MadhurGuna-Laghu,Snighdha,PichilaVirya-SheetaVipaka-Madhura*	*Vatasamshaman , Balya, Vrihana*
2	*Amrita*	*Tinosporacordifolia (Wlld.)*	*Rasa-Tikta,KashayaGuna-Guru,Snighdha Virya-UshanVipaka-Madhur*	*Tridoshshamak,Medhya, Rasayan.*
3	*Ksheer*			
	Kalka Dravya			
5	*Ushira*	*Vetiveriazizanioides (Linn.)*	*Rasa-Madhur, Guna-Tikat, Laghu,RukshVirya-Sheet Vipaka-Katu*	*Kaph-pittahara, Vednasthapan, Dahshamak*
6	*ShvetaChandhan*	*Santalumalbum (Linn.)*	*Rasa-Tikta,Madhur Virya-Sheet Vipaka-Katu*	*Pittshamak, Daahshaamak,Trishnahar, Vrishya*
7	*Mustak*	*Cyperusrotundus (Linn.)*	*Rasa-Tikt,Katu,KashyaGuna-Laghu,Rooksh Virya-Sheet Vipaka-Katu*	*Pitta-kaphaghana, Vatvardhak, Deepan,Pachan, Medhya*

8	*Yashtimadhu*	*Glycyrrhizaglabra (Linn.)*	*Rasa-MadhurGuna-Guru,Snighdha Virya-Sheet Vipaka-Madhur*	*Tridoshhara,Rasayan*
	Tila tail	*Sesamumindicum (Linn.)*	*Rasa-Madhur,Tikat Guna-Guru,Snigadh Virya-Ushan Vipak-Madhur*	*Tridoshhar, Yogavahi, Keshya,Balya , Twachya*

Criteria for Assessment

Table no. 5. Criteria for Assessment

SeverityofHeadache(halfsidedpainin*Manya ,Bhru,Sankh,Karna,Akshi,Lalata*)	**Score**
Noheadache	0
Mildheadache,patientisawareonlyif he/shepays attention to it	1
Moderate, but does not disturb the routinework	2
Severeheadachecantignorebuthe/shecandohis/herusual activities	3
Excruciatingheadachecantdo anything	4

Nausea	**Score**
Nil	0
Occasionaly	1
Moderateheadache,canignoreattimes	2
Severe,disturbingroutinework	3
Severeenough,smallamountoffluidregurgitationfrom mouth	4

FrequencyofHeadache	**Score**
Nil	0
>20days	1
15days	2
10days	3
<5days	4

Vomiting	**Score**
Nil	0
Onlyifheadachedoes notsubside	1
Vomiting1-2 times	2

Vomiting2-3 times	3
Forcedto takemedicinetostop vomiting	4

DurationofHeadache	**Score**
Nil	0
1-3hours/day	1
3-6hours/day	2
6-12hours/day	3
Morethan 12hours/day	4

Vertigo	**Score**
Nil	0
Feelingofgiddiness	1
Patientfeelsasifeverythingisrevolving	2
Revolvingsigns+blackouts	3
Unconscious	4

Aura	**Score**
Nil	0
Lastsfor5minutes	1
Lastsfor15minutes	2
Lastsfor30minutes	3
Lastsfor60minutes	4

RESULTS

Changes in severity of various symptoms after completion of treatment has been presented in table no 5

Table NO. 5. Assessment Score for each criteria

Parameters	Day 0	Day 14	Day 21	Day 28
Severity of headache	4	2	1	1
Nausea	2	3	1	1
Frequency of headache	2	2	1	2
Vomiting	1	0	0	0
Duration of headache	4	4	1	1
Vertigo	2	2	0	0
Aura	4	4	4	0
Total score	19	17	08	05

Patient was dependent of painkillers before initiation of treatment,but after the treatment patient did not require any painkillers.

DISCUSSION

The data demonstrates a progressive reduction in the overall symptom severity following the administration of *Nasya*with *BalaguduchayadiTaila*. The total assessment score decreased markedly from 19 at baseline (Day 0) to 5 by Day 28 indicating significant clinical improvement.Specifically, the severity and duration of headache showed a consistent decline from grade 4 to 1by the end of the observation period. Associated symptoms such as vomiting and vertigo are also completely subsided, while nausea and frequency of headachealso showed notable improvement. The aura which persisted until Day 21, resolved entirely by Day 28.

The pathogenesis of migraine involves vitiation of *PranaVata*, resulting in vascular instability and pain perception.Administration of *NasyaDravya* into the nasal cavity enables it to reach the *ShringatakaMarma*—an anatomical and functional junction of the channels supplying the head, eyes, ears and throat. Through this route, *Nasya* helps in the expulsion of accumulated *Doshas* and restoration of *Tridosha* equilibrium. *Nasya*provides a non-invasive and efficient drug delivery system thatallows direct transport of active compounds to the brain through olfactory and trigeminal pathways, bypassing the blood–brain barrier. This mechanism may explain the observed improvement in headache severity and frequency following *Nasya* therapy.

BalaguduchayadiTaila is an Ayurvedic formulation described in *Sahastrayoga* and is indicated for *Shiroruja*[6]. The formulation primarily contains *Bala, Guduchi, Chandana, Ushira, Yashtimadhu*and*Mustaka*.*Bala and Mustaka* being predominantly *Vataharaa*re particularly effective in *Ardhavabhedaka*which is a *Vata*-dominant *Tridoshaj*disorder.These herbs help to reduce neural excitability and alleviate pain in the head. Both *Bala* and *Yashtimadhu* are *Balya* in action, thus strengthen the nervous system and potentially reducesheadache severity. These herbs also contain bioactive compounds believed to modulate serotonin pathways, which may prevent migraine onset or attenuate its intensity.*Guduchi*and *Yashtimadhu* act as *Rasayana*, enhancing overall immunity and reducing the frequency and intensity of migraine episodes. *Chandana, Ushira and Mustaka*with their *SheetaVirya* alleviate throbbing, burning or pulsating pain which is characteristic of *Ardhavabhedaka*. Additionally, *Guduchi* and*Mustaka*possess *Ama-Pachana*property, facilitating the clearance of *Ama*and opening the obstructed *ShirogataRaktavahaSrotas*, a key factor in migraine pathogenesis. *Mustaka* is further recognized for its *Shoolahara* and *Shirorogahara*actions,contributing directly to headache relief.

CONCLUSION

The present case study highlights the role of *Nasya* therapy in the treatment of Chronic Migraine.Clinical observations suggest that regular administration of *Nasya*not only alleviates acute symptoms, but also reduces recurrence by maintaining *Tridoshik* balance and promoting overall neurological stability.*Nasya Karma* acts locally and systemically by clearing vitiated *Doshas*, improving cerebral circulation, and modulating neurovascular function through its action on the *ShringatakaMarma*. Hence, *NasyaKarma* emerges as a holistic therapeutic approach that integrates local, systemic and neurovascular mechanisms, offering both preventive and curative benefits in migraine management. *BalaguduchayadiTaila* complements this effect by strengthening the nervous system, enhancing immune response and alleviating pain with its *Vata-Pitta Shamana*, *Rasayana ,Medhya,Balya*and*Ama-Pachana* action. Together, they address both the root cause and manifestations of migraine, offering a holistic, safe and effective

therapeutic strategy. This combined approach highlights the clinical relevance of *Balaguduchayadi Tail* in the management of Migraine and encourages the further studies with a larger sample size and longer follow up period.

REFERENCES

1. CharakaSamhita of Chakrapani, edited with Ayurvedadipika commentary by YadavjiTrikamjiAcharya and Singh RH. Sutrasthana 7/16. Varanasi: ChaukhambhaOrientalia 2023

2. CharakaSamhita Siddhi Sthana, edited with Vaidyamanorama Hindi commentary by Shukla V, Tripathi RD. Siddhi Sthana 9/74–76. Varanasi: Chaukhambha Sanskrit Sansthan; 2005

3. SushrutaSamhitaUttartantra with SusrutavimarsiniHindi commentary by Sharma AR. Uttartantra 25/15. Varanasi: ChaukhambhaSurbharatiPrakashan2004

4.Braunwald E, Fanci AS, Hauser SL, Kasper DL, Longo DL, Jameson JL, Harrison's Principles of Internal Medicine.17th ed. New York: McGraw-Hill Medical Publishing Division; 2008. p. 85.

5. Kamat SD, Studies on Medicinal Plants and Drugs in BhavaprakasaNighantu.Vol. 1. With 'Vaishali' English Commentary. Delhi: ChaukhambhaSanskritaPratishthana 2018

6.Sharma R, Sharma S.Sahasrayogam.Hindi translation. Taila Yoga Prakaran.p. 79.Delhi: ChaukhambhaSanskritaPratishthana 2004

EFFICACY OF NASYA WITH BALAGUDUCHYADI TAILA IN THE MANAGEMENT OF ARDHAVABHEDAKA W.S.R. TO MIGRAINE: A CASE STUDY

ORIGINALITY REPORT

8%	8%	4%	1%
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS

PRIMARY SOURCES

1	jaims.in Internet Source	4%
2	Shital Bolkuntwar. "Clinical Efficacy of Pathyadi Kwath Arka & Katphala Churna Nasya in the Management of Ardhavabhedaka with special reference to Migraine - A pilot Study", International Journal of Ayurvedic Medicine, 2021 Publication	2%
3	uk.wikipedia.org Internet Source	1%
4	saspublisher.com Internet Source	1%
5	synapse.koreamed.org Internet Source	1%
6	api-uilspace.unilorin.edu.ng Internet Source	<1%

Exclude quotes	On	Exclude matches	Off
Exclude bibliography	On		