REVIEW ARTICLE

A Review on Management of Ardhavabhedaka with Kumkum Nasya with Special Reference to Migraine

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1. INTRODUCTION

Today, the people of modern civilization have absolutely changed the concepts of diet and life styles, leading to various disagreeable acute and chronic ailments. Due to frequent indulgence in Mithya Aahara, Vihara and Pragyaparadha, that is, unusual food habits and lifestyles, the incidence of various psychosomatic disorders is increasing very rapidly. Ardhavabhedaka/Migraine is one of the frustrating chronic illnesses, which is widespread in the population with varying severity. It creates a significant and chronic burden for the patients in terms of pain and its effects on functional capacity and quality of life during and between attacks. Ardhavabhedaka has severe pain such as pricking and churning, appearing in intervals of either 15 or 10 days, with or without any known cause, this disease known as Ardhavabhedaka. Similarly Migraine is often defined a unilateral headache or bilateral at onset, throbbing and pulsating in nature that is intensified by routine physical activity, often accompanied by nausea, vomiting, photophobia, phonophobia, and aura (Migraine Auras are the sensory symptoms [Neurologic, Gastrointestinal, and Autonomic] that can occur before or during a migraine episode. These symptoms

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ABSTRACT

The lifestyle of the people of the modern era has changed due to rapid urbanization. Due to changes in lifestyle, stress is causing an increased incidence of acute and chronic disorders like *Ardhavabhedaka*. *Ardhavabhedaka* (Migraine) is a condition associated with moderate-to-severe headaches with a throbbing type of pain that lasts from hours to days. It begins on one side of the head and spread to both temporal and occipital regions and is frequently accompanied by symptoms such as nausea and vomiting, tiredness, and sometimes giddiness. *Ardhavabhedaka* can be correlated with migraine, due to its cardinal features of a half-sided headache. According to Acharya Charaka, *Ardhavabhedaka* have *Vata-Kapha dosha*. The management of these Dosha can be done through *Kumkum Nasya Karma*.

can include flashes of light, blindspots, or tingling in the hands or face) in the form of neurological symptoms. Migraine is more common in women than men and occurs most commonly in the second and third decade of life.

Why is it better to relate *Ardhavabhedaka* with Migraine rather than Hemicrania Continua- "Hemicrania Continua" affects only one half of the head and face. Hemicrania headaches are also constant while migraine symptoms come and go.

Acc. to Acharya Sushruta, he also mentioned that *vega* of *Ardhavabhedaka* comes with the interval of 10 days or 15 days.

1.1. Aims and objectives

- To approach *Ardhavabhedaka* and Migraine in a critical literary and conceptual manner
- To evaluate the efficacy of *Kumkum Nasya* in Ardhavabhedaka w.s.r. Migraine
- To study Ardhavabhedaka and Nasya.

2. MATERIALS AND METHODS

• The concept and procedure of *Nasya* and its effect on *Ardhavabhedaka* are studied

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• All the references about *Ardhavabhedaka* and *Nasya* are collected from *Bruhatrayi*, *Laghutrayi*, journals, and various textbooks.

2.1. Disease Review

2.1.1. Literature review

In Ayurveda classics, *Ardhavabhedaka* is mentioned under the heading of *Shirorogas*. The word *Ardhavabhedaka* has three components, namely,

Ardha (half or half side) + Ava (bad prognosis) + Bhedaka (breaking pain). Thus, the actual meaning of Ardhavabhedaka is breaking type of pain in one half of the head either right or left.

2.1.1.1. Charaka Samhita^[1]

Various references regarding *Shiroroga* are available in samhitas classified into five types, namely, *Vataja Shiroroga, Pittaja Shiroroga, Kaphaja Shiroroga, Sannipatika Shiroroga,* and *Krimija Shiroroga in Sutrasthana*; Four additional types of *Shiroroga* which are *Shankhaka, Suryavarta, Ardhavabhedaka,* and *Anantavata* are described in Sidhdhisthana.

According to Acharya Charaka, *Ardhavabhedaka* is *Vataja* or *Vatkaphaja vikara*.

Vayu vicious due to intake of rough food, over indulge, eating thro is seizes by *vata* and *kapha* and then intense pain such as cutting and churning is produce in half of the of the head is seizes by vata and kapha and then intense pain such as cutting and churning is produce in half of the carotid region, temporal, eyebrow, eye, ear, and forehead, which is known as *Ardhavabhedaka*. If the *Ardhavabhedaka* is far extreme, it may destroy the sightened and hearing.

2.1.1.2. Sushruta Samhita^[2]

In Uttartantra, there are eleven types of Shiroroga.

According to Acharya Susruta, the Ardhavabhedaka is Tridoshaj vyadhi.

According to Sushruta, severe pain such as pricking and churning on half of the head appearing in intervals of either 10 Days or 15 Days with or without any known cause, known as *Ardhavabhedaka*.

2.1.1.3. Vagbhatta – Ashtanga Sangraha and Ashtanga Hridaya^[3]

Ashtanga Sangraha describes *shiroroga* in two chapter of *Uttartantra* (27th and 28th) and classify *shiroroga* into ten types. *Ashtanga Hridayakara* also describes *shiroroga* in 23rd chapter of Uttartantra where he also classifies the shiroroga into ten types. Acharya Vagbhatta has said that *Ardhavabhedaka* is *Vataja vyadhi*.

2.1.1.4. Madhava Nidana^[4]

Acharya Madhavakar in his literature mentions eleven types of *Shiroroga* in 60th chapter.

2.1.1.5. Sharangdhara Samhita^[5]

According to Acharya Sharangdhara, there are ten types of *Shirorogas* describe in the 7th chapter of *Purvakhanda*. Acharya Sharangdhara has said that *Ardhavbhedaka* is *Vataja vyadhi*.

2.1.1.6. Bhavaprakasha^[6]

In the 63rd chapter of *Madhyamakhanda* of Bhavaprakasha Samhita, Acharya Bhavamishra has reported eleven types of *Shirorogas* and its management.

2.1.1.7. Nasya Karma

The administration of medicine through the nose is known as *Nasya*. *Nasya Karma* is the main line of treatment for disease above the clavicle and it is the only *Shodhana Krma* for *Urdhvanga*.^[7]

According to Classification of *Nasya* given by Acharya Charaka's. It is of five types, namely, *Navana, Avapeeda, Dhmapana, Dhuma, and Pratimarasa*.

2.1.2. Procedure review

2.1.2.1. Poorvakarma

Before Nasya proper, Snehana with Tila taila and Swedana with Dashmool kwatha will be carried out.

Preparation of Medicine:^[8]

- A-heat the spoon by the uses of spirit lamp
- B-take *Kumkum* into the spoon which is taken away from the lamp
- C-pour Goghrita on Kumkum
- D-stir it by spoon and fry up to Kumkum gets hard
- E-add fried Kumkum in hot Godugdha
- F-add sharkara in Godugdha
- G-macerate kumkum till godugdha gets yellow egg yolk like colour
- H-then get it filtered
- I-take *Kumkum nasya* in heated spoon so it gets lukewarm and ready for nasya procedure.

After preparation of medicine, *Abhyanga* with Tila Taila and *Nadi Sveda* with Dashamoola kwatha on *Urdhwang Pradesh. Nadi sweda* should be given and covering the eyes with a cotton cloth until light sweda utpatti on the face is observed.

2.1.2.2. Pradhan Karma

After *Poorvakarma*, the patient is asked to lie on the table in supine position.

Patient head's is lowered by 45° angle from the edge of the table.

2.1.3. Mode of action

Drug administered through nose-doorway to shiras

Reaches Sringataka marma of shiras spreads to moordha

Acts over *dosha sanghata* and subside the morbid *doshas* through *siras* and *dhamanis* of *Nasa, Karna, and Akshi.* Hence, action takes place in *urdhwajatru.*

2.1.4. Drug review^[9]

The following content is to be used for Nasya for the above-mentioned disease Ardhavabhedaka.

3. DISCUSSION

Ardhavabhedaka has severe pain such as pricking and churning, appearing in intervals of either 15 or 10 days, with or without any known cause. Based on signs and symptoms, it may correlate with migraine. In *Ardhavabhedaka*, Charak said that it is *Vataja* or *Vata-Kaphaj* property. *Nasya Karma*, one of the five types of *Shodhana* therapy, is the best Chikitsa for the management of *Urdhavajatrugata Roga*. There is no dependable remedy except *Nasya Karma* for *Shirorogas* because *Nasa* (Nostrils) is considered as the entrance of the head according to the principles of Ayurveda. According to Acharya Charaka, *Nasa* is the portal (gateway) of *Shirah*, the drug given through the nose as *Nasya* enters

the brain and removes only the morbid Doshas responsible for creating the disease. According to all Acharyas, Nasa is said to be the portal of Shira, it does not mean that any anatomical channel connects directly to the brain, but it might be connected pharmacodynamically through blood vessels or the nervous system (olfactory nerve, etc.). Kumkum Nasya is shown as effective management in Ardhavabhedaka. Kumkum has katu, tikta rasa, snigdha guna, and ushna virya and has katu vipaka. The drug has Vata kapha shamak properties. Ardhavbhedaka is Vata Kaphaja disease; hence, Kumkum nasya will affect Ardhavbhedaka. The drug used for Nasya Karma helps in the stimulation of vasodilator nerves which are spread out on the superficial surface of Urdhwanga, this increases the blood circulation to the brain. With all these factors being considered, it can thus be said that Nasya Karma brings effective relief to the patient suffering from Ardhavabhedaka. The walls of the nasal chamber and the accessory sinuses are lined almost entirely by pseudo-stratified columnar ciliated epithelium converted into microvillus, and this region has been suggested as a site for drug absorption. The nasal mucosa is supplied by the sphenopalatine branches of the maxillary artery and the anterior and posterior ethmoidal branches of the ophthalmic artery spaced interosseously, which, further, branch out to form a fine subepithelial plexus. The active ingredients in the Kumkum Nasya might be absorbed via the same route. As per the pathophysiology of vascular theory, ischemia induced by intracranial vasoconstriction is responsible for the aura of migraine, and the subsequent rebound vasodilatation and activation of the perivascular nociceptive nerve results in the headache. This theory is based on the following three observations: Extracranial vessels become distended and pulsatile during a migraine attack. Stimulation of an intracranial vessel in an awake person induces headache; while vasoconstrictors improve the headache, vasodilators provoke the attack. The diffuse intracerebral vasoconstriction that is initially observed resolves after the aforesaid treatment. The beneficial properties of Kumkuma (Crocus sativus L.), such as anti-nociceptive, anti-inflammatory, and anti-convulsant effects, in neurodegenerative disorders accompanying memory impairment have been proven in mice when administered through other routes.

4. CONCLUSIONS

Kumkum Nasya has significant effect in symptoms of Ardhavabhedaka Roga. Sufficient increment or increasing trend in caloric values of Vatavriddhi (pain model) values was observed. Therefore, this model is suitable and conclusive for assessment of Vatavriddhi. Significant reduction is observed in pain level (Ativedana) in patients of Ardhavabhedaka Roga (Migraine) by use of Kumkuma Nasya. Kumkuma Nasya is effective for Vata Shamana (Vata pacify) based on caloric values.

5. ACKNOWLEDGMENTS

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6. AUTHORS' CONTRIBUTIONS

All the authors contributed equally in design and execution of the article.

7. FUNDING

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8. ETHICAL APPROVALS

This study not requires ethical clearance as it is a review study.

9. CONFLICTS OF INTEREST

Nil.

10. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from principal investigators.

11. PUBLISHERS NOTE

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S. No.	Drug name	Botanical name	Part used	Rasa	Guna	Virya	Vipaka
1.	Kumkum	Crocus sativus	Keshar	Katu, Tikta	Snigdha	Ushna	Katu