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Viddhakarma In The Ayurvedic Management Of Kaphaja Shirashoola – A Case Study

¹Dr.Karun.A.P, ²Dr.Ashwathi K, ³Dr.Satheesha Shankara B

¹Final year PG Scholar, ²Assistant Professor, ³Professor and HOD

¹Department of Shalakya Tantra,

¹Alvas Ayurveda Medical College, Moodabidire, Karnataka, India

Abstract: **Introduction:** Kaphaja shirashoola is one among the 11 types of Shirashoolas explained in Ayurveda. As there is kapha prakopa, dull aching pain, heaviness of the head, and lethargy are common symptoms of Kaphaja Shirashoola. Kaphaja Shirashoola can be compared with sinusitis due to similarities in symptoms. Ayurvedic management of Kaphaja Shirashoola involves internal medicines along with Kriyakalpas like Nasya, Gandusha etc. Acharya Sushruta has mentioned about Raktamokshana for Shirorogas in Siravyadhavidhi Adhyaya.

Materials and methods: A 49-year-old female visited the department of Shalakya Tantra OPD with complaints of severe headache and heaviness of the head associated with nasal obstruction. She received Viddhakarma procedure at specific sites, which helps in Samprapti Vighatana and immediate symptomatic relief. Internal medicines were also prescribed.

Result: Viddhakarma helped in relieving the symptoms and along with internal medicines yielded significant improvement within 7 days.

Conclusion: Kaphaja shirashoola symptoms can be managed through Viddhakarma. When given in combination with internal medicines helps in treating the disease faster.

Index Terms - Kaphaja shirashoola, Viddhakarma, sinusitis, Dashamoolakatutrayam Kashayam, Chitrakadi Vati

I. INTRODUCTION

Headache, or Shirashoola, is a commonly encountered symptom in clinical practice and may arise from a variety of etiological factors. Kaphaja Shirashoola is one among the 11 types of Shirashoola. In Kaphaja Shirashoola^[1], Kapha dosha gets aggravated, which leads to heaviness in the head, dull aching pain, nasal congestion, and lethargy^[2]. The symptomatology of Kaphaja Shirashoola often overlaps with condition recognized in modern medicine, such as sinusitis. Sinusitis is an inflammation or the swelling of the tissues which are lining the sinuses, sinuses are the air filled structures in head. Viral, bacterial infections and allergies can irritate these sinuses causing them to be blocked and filled with fluid which causes pressure and tenderness in those sinuses regions which can be exhibited in acute, subacute and chronic forms^[3]. The treatment principle includes two main modalities Shodana and Shamana chikitsa in which Shodhana includes Deepanapachana, Shiro virechana, Vamana, Kavala, Abhyanga and Swedana. Shamana chikitsa includes Kashaya, Lepa, Pratimarsha nasya and Rasayana. By integrating Ayurvedic principles with contemporary understanding of headache mechanism, this study highlights holistic approach to managing Kaphaja Shirashoola through Viddhakarma and internal medications. Viddhakarma is a modified form of siravyadha.

II. CASE HISTORY:

A 49 yrs old female presented to *Shalakya Tantra* OPD with chief complaints of severe headache on forehead region since 3 days. She also reported associated complaints of heaviness of head and nasal blockage.

History of Present Illness:

Patient was apparently normal 3 days back then started experiencing frontal headache and heaviness of head associated with nasal obstruction after exposure to cold wind. The symptoms gradually aggravated with time. So patient has visited AAMC, *Shalakya Tantra* OPD for the management of the same.

Family History: nothing significant

Surgical History:

Underwent complete tonsillectomy – 25yrs ago

Personal History:

Bowel: once/day

Appetite: Reduced - Does not feel hungry on time

Micturition: 4-5 times/day

Sleep: Disturbed

Diet: Mixed diet, sweet and oily food, regular curd intake

III. Examination:**Ashtasthana Pareeksha:**Table 1: *Ashtasthana Pareeksha*

<i>Nadi</i>	<i>Vikruti – Pitta predominance in Kaphaja Sthana</i>
<i>Mutra</i>	<i>Anavilam</i>
<i>Mala</i>	<i>Abadha</i>
<i>Jihwa</i>	<i>Lipta</i>
<i>Shabda</i>	<i>Prakrutha</i>
<i>Sparsha</i>	<i>Anushnasheeta</i>
<i>Druk</i>	<i>Prakrita</i>
<i>Akriiti</i>	<i>Madhyama</i>

Vitals:

Pulse rate: 72b/m

BP: 120/80mmHg

Respiratory Rate: 18 breaths/m

Systemic Examination:

All systemic examination revealed no abnormalities

IV. Local Examination:**Ear examination:**Table 2: *Ear Examination*

External Auditory Canal	Normal - Bilaterally
Tympanic Membrane	Mildly retracted Bilaterally

Nasal Examination:Table 3: *Nasal Examination*

Nasal Mucosa	Sticky and pale
Nasal discharge	Mild Mucopurulent
Anterior rhinoscopy	Bilateral Hypertrophied Inferior Turbinates
Posterior rhinoscopy	N.S

PNS Examination:

Table 4: PNS Examination

Sinus	Tenderness
Frontal sinus	Severe tenderness – bilaterally
Ethmoidal sinus	Severe tenderness – bilaterally
Maxillary sinus	Severe tenderness - bilaterally

V. Nidana Panchaka:

Table 5: Nidana Panchaka

Nidana	Madhura, guru ahara sevana, ajeerna, exposure to cold wind
Poorvaroopo	Shirogurutva
Roopa	Shirashoola in Lalata, bruh region
Upashaya	Following hot regimens

Samprapthi:

Nidana sevana will lead to Agnimandhya which cause Prakopa of Kapha and Rakta. Followed by Sthana Samshraya in Shiras leading to Kapha Pradhana Prakopa and Srotorodha hence resulting in Shirashoola.

SAMPRAPTHI GHATAKA:

Table 6: SAMPRAPTHI GHATAKA

Dosha	Kapha
Dushya	Rasa, Rakta
Srotas	Rasavaha Raktavaha
Srotodushti	Sanga and vimargagamana
Rogmarga	Madyama
Agni	Mandagni
Amatva	Saama
Adhishtana	Shira
Uthbavasthana	Amashya
Vysktashtana	Shira-Lalata, bruh
Swabhava	Chirakari
Sadhyasadyata	Sadhya

VI. Diagnosis: Kaphaja Shirashoola**VII. Therapeutic Intervention:****External therapy:**

Table 6: External Therapy

Procedure	Site	Materials Required	Number of sittings
Viddhakarma	Lalata, Apanga, Sthapani, Nasaagra, Nasasamipa ^[4]	26 ½ Gauge needle, sterile cotton pad, gloves, spirit.	3 (once per day)

Internal Medications:Table 7: **Internal Medications**

Medicine	Dose	Duration
<i>T.Chitrakadi Vati</i> ^[5]	1 TID	3 days
<i>Dashamoola Katutrayam Kashayam</i> ^[6]	15ml BD With luke warm water	7 days

VIII. Result:

Chief complaints were assessed before *Viddhakarma*, after 1st sitting of, after 2nd sitting, after 3rd sitting of *Viddhakarma* and after 7 days.

Table 8: **Result**

	Before Treatment	Immediately after 1 st sitting	After 2 nd sitting	After 3 rd sitting	Follow up (on 7 th day)
Heaviness of head	Moderate	Mild (lightness of head)	No heaviness	No heaviness	No heaviness
Headache	severe	No headache	No headache	No headache	No headache
Nasal obstruction	moderate	Air way opened up	No obstruction	No obstruction	No obstruction
PNS Tenderness	severe (over frontal, maxillary, ethmoidal sinus)	Persist (severe)	moderate	Mild tenderness only over frontal sinus	No tenderness

IX. Discussion:

Kaphaja Shirashoola is one among the 11 types of *Shirashoola*. Here in this case we have adopted *Viddhakarma* (a modified form of *Raktamokshana*) as mentioned by Acharya Sushruta in *Siravyadhavidhi Adhyaya* for *Shirorogas*, along with internal medications.

Mode of action (*Viddhakarma*):

Viddhakarma → dose *Sthanika Rakta Mokshana* → *Sthanika Ama Pachana*
 → removes the *Srotoavarodha* → *Samprapthi Vighatana* → instant symptomatic relief and *Roga shamana*

***Chitrakadi vati*:**

Chitraka, *Ajamoda*, *Maricha*, *Chavya*, *Pippali moola*, *Pippali*, *Sonth*, *Hingu*, *Samudra Lavana*, *Sauvarchala Lavana*, *Saindhava Lavana*, *Vida Lavana*, *Sarjikashaar*, *Yavkshaa* are the main contents of *Chitrakadi Vati*. These drugs have *Deepana Pachana* property hence dose *amapachana* and improves *Agni*.

***Dashamoola katutrayam Kashayam*:**

Dashamoola and *Trikatu* being the main ingredients of the *Kashayam*, has anti-inflammatory properties and is indicated in *Urdwajatrugata* conditions. Hence it helps in tackling the inflammation of the sinuses.

X. Conclusion:

Kaphaja shirashoola is a *Sadhya Vyadhi*. Acharya Sushruta has mentioned *Siravyadha* as a treatment for *Kaphaja Shirashoola*. *Viddhakarma* is a modified form of *Siravyadha*, which can help in *Samprapthi Vighatana* and fasten the healing process. Proper ayurvedic internal medications, along with *Kriyakalpas*, can help in treating *Kaphaja Shirashoola*. This study also highlights the efficacy of *Viddhakarma* in providing instant relief from headache and nasal congestion.

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