



Case Report

ISSN: 2454-5023

J. Ayu. Herb. Med.

2018; 4(2): 53-56

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www.ayurvedjournal.com

Received: 14-04-2018

Accepted: 13-06-2018

Efficacy of a combined therapy in *Shaqiqa* (Migraine without aura) - A Case Report

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ABSTRACT

Migraine is a type of headache characterized by episodic throbbing or pulsating pain usually occurring in one side of the head. According to the prevalence report, it is the third most prevalent disorder worldwide. In Unani Medicine, it is called *shaqiqa* derived from an Arabic word '*shaq*' meaning 'half part'. The condition is difficult to treat by medication only. Unani system of medicine has a theory of *imala* (diversion of morbid matters) and *tanqia-e-mawad* (evacuation of morbid matters) by using different modes of *ilaj bit tadbeer* (regimenal therapy) and pharmacotherapy. A therapy including regimenal therapy and pharmacotherapy has been used in this case for 23 days. *Nutool* (irrigation therapy) and *Dalak* (massage therapy) by *Rogan-e-Kaddu* (medicated oil) were given as regimenal mode and *Itrifal Ustkhuddus*, *Itrifal Kishnizi* and *Jawarish Shahi* were given orally as pharmacotherapy. Signs and symptoms were assessed by Visual Analogue Scale (VAS) and result was assessed as per grading system, such as complete relief, relief, partial relief and no relief. After completion of the treatment and post treatment follow up, complete relief from the sign and symptoms was observed. The study suggested the authenticity of principles of treatment of Unani Medicine.

Keywords: Therapeutic efficacy, *Shaqiqa*, Migraine, Unani Medicine.

INTRODUCTION

Migraine is a common headache characterized by episodic moderate-to-severe throbbing or pulsating pain usually occurring in one side of the head; however it may occur in whole head^[1, 2]. Those suffering from migraine headache cannot concentrate on their work and seem to be absent from duties^[3]. The Global Burden of Disease Study 2010 (GBD 2010), ranked migraine as the third most prevalent disorder in the world. The International Headache Society (IHS) has classified migraine into several types, among them two are common viz. (1) Migraine without aura (earlier known as common migraine), (2) Migraine with aura. The IHS has given criteria for the diagnosis of common migraine such as (1) headache phase lasting 4-72 hrs (when untreated or unsuccessfully treated), (2) unilateral location, (3) pulsating quality, (4) moderate to severe pain, (5) aggravation by or causing avoidance of routine physical activity, (6) nausea and/ or vomiting, (7) photophobia and/ or phonophobia^[4]. Earlier, it was regarded that vascular phenomenon play main role to produce headache in migraine but recent studies have shown that migraine occurs due to disturbance in brain where both nerves and neurotransmitters such as nitric oxide (NO), serotonin (5-HT) and calcitonin gene-related peptide (CGRP) are also involved in the pathophysiology of migraine^[3, 4].

In Unani Medicine, it is referred as *Shaqiqa* derived from an Arabic word '*shaq*' meaning 'half part'. It is called 'Hemi crania' in Greek. *Shaqiqa* is mostly accompanied with nausea and vomiting. Pain presents in either half part of the head^[5, 6, 7, 8]. According to Unani medicine, it is caused by *su-e-mizaj maddi* (imbalance in temperament due to change in matter). Such morbid matters sometimes present in the meninges or in the scalp muscles^[7, 9, 10]. Tabri (9th century AD) stated that the amount of morbid matter found in the arteries of scalp muscles is low, hence unable to produce pain in the entire head^[8, 11]. Some Unani physicians ascribed that the pain is due to *bukharat* (gaseous) or *rutubat-e-ghaleeza* (viscid matters) which accumulate in the weaker part of the head^[12, 13]. Galen (129-210 AD) stated that such pain examines the weakness of one side of the head^[13, 14]. According to involvement of *khilt* (humour), *shaqiqa* is classified into four types viz. *shaqiqa-e-damvi* (migraine due to dominant of blood), *shaqiqa-e-balghami* (migraine due to dominant of phlegm), *shaqiqa-e-safravi* (migraine due to dominant of bile) and *shaqiqa-e-saudavi* (migraine due to dominant of black bile). These four types are classified into two broad

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categories according to temperament of morbid matters viz. (1) *shaqiqa-e-har* (migraine due to hot temperament of morbid matters) and (2) *shaqiqa-e-barid* (migraine due to cold temperament of morbid matters). The diagnosis of *shaqiqa* is being made according to symptomatology and changes in *nabz* (puls) and *qaroora* (urine) [5, 7, 15]. The treatment for *shaqiqa* (migraine) is given according to presence of dominant *khilt* (humour) and their temperament.

In Conventional medicine, migraine is treated by non specific drugs like NSAIDs, and specific drugs such as ergot, 5-HT receptor agonist, beta blockers, calcium channel blockers, anticonvulsant drugs etc [16]. But, these drugs cause dependence, drug withdrawal symptoms and side effects such as coronary vasospasm and risk of myocardial infarction [17]. In contrast to this, the Unani system of medicine provides a variety of effective procedures and medications with no or minimal adverse effects.

CASE PRESENTATION

Brief history

A 40 year old male patient belonging to poor socio-economic condition came to the OPD at Regional Research Institute of Unani Medicine, Srinagar, J & K, in the month of March 2018 with the main complaint of episodic throbbing and pulsating headache in one side of the head alternating the side for more than 10 years. The episode of pain came almost every week persists for several hours; it was subsided when the patient took tablet such as headset or vasograin. The intensity of pain was moderate to severe. The pain was aggravated during empty stomach, travelling, exposure to sun light and in inadequate sleep condition. The patient also had nausea and vomiting, photophobia and phonophobia during the headache phase. He was interrogated about fever, infections, sinusitis, meningitis, encephalitis, hypertension, diabetes mellitus, epilepsy and other disorders but these were not present except had family history of headache including his sister and other family members. Few years back, his headache was subsided by using simple analgesic such as NSAIDs but now the condition had become worsen and he was fully dependent on specific drug such as headset or vasograin.

Examination of the patient

The general condition of the patient was good. The patient was examined for meningitis, encephalitis, brain tumor, glaucoma, cervical spondylosis and other cause of headache. Systemic examination also did not show any abnormality. *Mizaj* (temperament) of the patient was recorded in a proforma found to be *safravi* (bilious). The history of moderate headache and lightness of head, hotness of scalp, rapid pulse suggested that the presence of *har madda* (hot morbid matters). The disease was diagnosed only clinically.

MANAGEMENT OF THE PATIENT

Ilaj bit tadbeer (Regimenal therapy)

The patient received *nutool* (irrigation therapy) and *dalak* (massage therapy) with *Roghan-e-Kaddu* (medicated oil) which was procured from Hamdard laboratories, New Delhi.

Roghan-e-Kaddu

This is a pharmacopoeial formulation of medicated oil prepared by aqueous extract of *Lagenaria siceraria* (4 parts) and sesame oil (1 part) [18, 19, 20, 21, 22].

Method of *Nutool* (Irrigation therapy)

Before application of *nutool* the patient was explained about the procedure and his oral consent was taken. This therapy was done at 0, 3rd, 5th, 7th, 11th, 15th, 19th, and 23rd day of the treatment period. The patient was advised to lie in supine position on the specially designed table for the *nutool* and his eyes were covered by cotton pad to prevent entering of drug into eye, 20 ml of *Roghan-e-Kaddu* was put in the specially designed equipment. The irrigation was done drop by drop from one and half feet height over the forehead of the patient and scalp till oil finished.

Dalak (Massage therapy)

The patient was advised to perform massage by *Roghan-e-Kaddu* over the scalp at bed time daily for 23 days.

Pharmacotherapy

Itrifal Ustkhuddus

Itrifal Ustkhuddus pharmacopoeial formulation [21] was obtained from Indian Medicines Pharmaceutical Corporation Limited (IMPCL) and 5 gm was given to the patient daily in the morning for 23 days.

Itrifal Kishnizi

Itrifal Kishnizi is a pharmacopoeial formulation [21] obtained from IMPCL and 5 gm was given to the patient at bed time daily for 23 days.

Jawarish Shahi

Jawarish Shahi is a pharmacopoeial formulation [23] obtained from IMPCL and 5 gm was given to the patient once in a day for 23 days.

No concomitant therapy was allowed during the treatment period.

ASSESSMENT OF EFFICACY

The signs and symptoms were assessed according to Visual Analogue Scale (VAS) (Scale: 0 – 10).

MEASURES AND OUTCOME

The headache, nausea and vomiting, photophobia and phonophobia were assessed according to Visual Analogue Scale (VAS) for 30 days including post treatment follow up only once after 7 days of discontinuation of therapy and it was found that complete relief (Table 01). No adverse reactions of any drug used in this regimen were recorded during the treatment period.

Table 1: Assessment of migraine by using VAS (0-10 scale)

Sign/ Symptoms	VAS on 0 day	VAS on 3 rd day	VAS on 5 th day	VAS on 7 th day	VAS on 11 th day	VAS on 15 th day	VAS on 19 th day	VAS on 23 rd day	VAS on 30 th day
Headache	10	6	4	2	2	0	0	0	0
Nausea & vomiting during headache phase	6	4	2	2	0	0	0	0	0
Photophobia & phonophobia during headache phase	6	4	2	2	0	0	0	0	0

DISCUSSION

Ilaj bit tadbeer is a concept of Unani Medicine that includes more than 50 regimens can be applied for the treatment of various diseases including migraine. The *nutool* and *dalak* among them are being used by Unani physicians since centuries for the treatment of *shaqiqa*. In *nutool* therapy, the drug in liquid form is irrigated to the diseased part from some distance. Some amount of drug can penetrate into body through the skin and produce the mechanism of *imala* (diversion of morbid substances) [26]. Massage of scalp muscles by oil also diverts the morbid matters from the disease part to the healthy part. Following *imala* the morbid substances may be detoxified either by the body or it may be evacuated through excretory routes. In Unani Medicine, *Itrifal Ustkhuddus* and *Itrifal Kishnizi* are being used as brain scavenger which may evacuate the diverted morbid matters from the body via excretory routes. *Itrifal Kishnizi* has also *musakkin* (sedative) effect which may relieve headache. *Jawarish Shahi* is being used as *muqavi-e-aza-e-raeesa* (tonic for vital organs) [23] and recommended to the patient to potentiate vital organs as well as to increase the strength of *tabiyat* (physic) that play major role for curing of diseases.

Several scientific studies have been carried out on plant drugs which are being ingredients of compound formulations given in this case. The active constituents of *Emblica officinalis* viz; phyllembin exhibits CNS depressant and nembutal shown hypnotic action. Phloroglucinol and pyrogallol have been isolated from *Terminalia chebula* and showed antioxidant effect [24]. A study has been reported that lavender oil at different dose level in mice showed reperfusion of cerebral tissues. Another study showed that lavender oil has antioxidant property in the presence of six active chemical constituents such as linalyl acetate, linalool, 1-8 cineole, γ -terpinene, and camphor [25]. Terpeneol and acetyl terpeneol, active constituents present in cardamom seeds, showed synergistic action [24].

CONCLUSION

Specific drugs for the treatment of migraine such as triptans and ergotamine tartrate are often expensive and not affordable by poor people. Though, the Unani Medicine is popular for the treatment of several ailments including migraine, no reports are available on the efficacy of combined regimenal and pharmacotherapy. In this case, the patient was completely relieved from the sign and symptoms of migraine without aura after using combination therapy. Hence, it is recommended that migraine can be treated by regimenal therapy including *nutool* and *dalak* by *Roghan-e-Kaddu* and pharmacotherapy by using *Itrifal Ustkhuddus*, *Itrifal Kishnizi* and *Jawarish Shahi*.

Declaration of patient consent

The written consent was obtained from the patient to publish his case in the Journal. In the consent form, the patient was given his consent for clinical information to be reported in the journal. The patient understand that his name and initial will not be published and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

Financial support and sponsorship: Nil.

Conflicts of interest: None.

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HOW TO CITE THIS ARTICLE

Ansari AP, Islam N, Wadud A, Arif M. Efficacy of a combined therapy in *Shaqiqa* (Migraine without aura) - A Case Report. J Ayu Herb Med 2018;4(2):53-56.