

“A COMBINED EFFECT OF SHIRODHARA AND TIKATAK KSHEER BASTI IN THE MANAGEMENT OF PARKINSON’S DISEASE w.s.r. TO KAMPVAAT”

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ABSTRACT

Neurological disorder is the speedily spreading disorder in all over the world.

Parkinson disease is one of them characterized by rest tremors, stiffness, and gait dysfunction with postural in stability.

The prevalence of Parkinson disease according to WHO has dabbled in the past 25 year .in 2019,8.5 million individuals are living with Parkinson disease globally . Disability and death due to the Parkinson disease are increasing faster than any other neurological disorder.

In Ayurveda classics Kampvaat is the condition which closely resembles with Parkinson disease. According to acharya Charak endogenous disease caused by single vaat dosha described in 80 types of vaat nanatamaj vikar named as VEPATHU .means shaking for trembling. According to Madhav Nidan tremors in all over body and specific organ due to aggravation of vaat called KampVaat. Longer use of modern medicine use in treatment this disease having more side effect like excessive day time sleepiness, hallucinations, delusions ,confusion etc.

Shirodhara is one of the best Panchkarma Procedure which act of the cerebral system help in the relaxing the nervous system and balancing the Pran Vayu around the head .Basti is the one of Panchkarma procedure described as “Ardhchikitsa” by Acharya Charak for all type of vaat Roga .This Paper is being Presented to state the effect of combined therapy of shirodhara and swa anubhoot Titak Ksheer Basti in the management of Parkinson disease w.s.r. to Kampvaat

Keywords: *Parkinson’s disease,Kampvaat,Shirodhara,swa anubhoot Tiktak Ksheer basti*

INTRODUCTION

Parkinson’s disease is a long term progressive degenerative neurological disorder that mainly affects motor system. The mean age of onset of this disease is 50 years. It is estimated that, there are 10 million people all over the world suffering from this disease.¹

The clinical features are resting

tremors, cog wheel rigidity, bradykinesia & postural instability. It is caused by degeneratives changes of neurons in an area of brain known as substantia nigra. These neurons produce dopamine which helps in communication between substantia nigra and other areas of brain. The communication (upper &ordinates smooth and balanced muscle

impairment, difficulty in walking are seen and in later stages dementia, sleep disturbances, dysphagia speech difficulties, constipation, urinary func- tion, disturbance nocturia , urge incontinence and are seen.

In Ayurveda due to similar disease presentation

Parkinson’s can be co-related with *kampavata*.

Kampavata has been described under 80types of vataja *nanatmaja vyadhi* in *Ayurveda* text².

Kampavata was first narrated by *acharya Madhavkara* under the name of *vepathu*.

Kampavata is described with

Lakshan like *kara padatala* *Kampa*

lower limbs

tremors), *Stambha* (rigidity),

Continued Lack of dopamine results in abnormal.

Dosha Dushya Sambandha

Kampa, Nidranasha –Vaata prakopa, Stambha – Kapha vata prakopa, Gatisangha & chestanasha -kapha avruth vyana vayu, Swara sangha- kaphaavruth udana vayu.

CASE REPORT

A 70 year old male patient came to OPD of Rama Ayurveda medical college and hospital rama university mandhan Kanpur utter Pradesh 5 july 2023 .

Patient name – xyz, Age/ sex – 70/F,UHID no- RAMC-2300075908, IPD no – 164, Address –

Juhi baradevi Kanpur, Uttar Pradesh

Chief Complaints –

- Difficulty in walking
- Involuntary tremors
- Sleep disturbances
- Slugish in speech

since 7 years

H/O of present illness - Patient was asymptomatic since 7 years ago, he develops tremors in right side of upper limb & then right lower limb, difficulty in walking without support, and gradually he develops difficulty in sleep initiation & wakefulness and incomplete evacuation.

H/O of past illness & family history –No significant history was found.

DISEASE PRESENTATION

General

examination Weight

– 80 Kg Height –

5.11 ft.

BP – 130/90 mm of

hgPulse – 80/min

Respiratory rate –

17/min Pallor – no

Appetite –

reduced

gradually

Bowel/bladder habit – incomplete evacuation /with increased micturition

Sleep-Gradually reduced sleep with increased episodes of wakefulness

Systemic Examination

Gastro intestinal system – soft abdomen, no tenderness and organomegaly was found.

Respiratory system – symmetrical chest, no added sound

Cardio vascular examination – S1, S2 was normal, no murmur was found

Loco motor examination – Patient was unable to walk properly without support. Fascinating gait with tremors in right upper and lower limb was found.

CNS Examination

Higher mental function – slow, slurred speech

Muscle movements
Coordination – poor Tandem walking - abnormal

Knee heel test – normal

Finger to nose test –Negative, patient was not able to do it perfectly due to tremors.

Signature writing-in appropriate

Involuntary movements – resting tremors in right upper & lower limb were found.

Table 1: ASHTAVIDHI PARIKSHA

1 Nadi	Vataj kaphaj	5 Drik	Samanya
2 Mala	Aam Yukta	6 Shabda	Ksheena
3 Mutra	Atipravruati	7 Sparsha	Khara
4 Jiwha	Saam	8 Akruthi	Madhyam

Diagnosis – *Kampavata* (Parkinson's disease stage – 4) Intervention

Table 2: Shamana chikitsa**Table 3: Shodhana chikitsa Panchkamra**

S no	Panchakarma	Observation
1	<i>Sarvanga abhyanga</i> * 16	<ul style="list-style-type: none"> From the very first day resting tremors reduced. He started walking without support after 1 week of therapies. After 2 sittings of <i>Shirodhara</i> her sleep index also improved.
2	days <i>Sarvanga baspa</i>	
3	<i>swedana</i> * 16 days Karma	
4	<i>basti patterna</i> (yapan	
5	<i>basti</i>)* 16 days(Swaanubhoot tiktak ksheer basti-) <i>Shirodhara</i> * 16 days	

Total duration of treatment – 16 days

Assessment criteria

- Hoehn & Yahr scale
- Athens insomnia scale

Results

The condition of the patient improved gradually during the treatment. Before the onset of treatment he was unable to walk without support and after the treatment completion, he could walk easily without support, his sleep quality also improved. Improvement in the patient was assessed on behalf of following given scale.

Table 4: Hoehn and Yahr Scale**Table 5: Athens Insomnia Scale**

nantamaj vyadhi. The main line of treatment was to pacify *vata* by *vata hara chikitsa* (improve the degeneration is conduction) and remove *kapha avarana* by *deepana pachana chikitsa*. As *kraunchbeej churna* is *madhur rasa, tridosha nashaka* and *ushna in virya*; hence it helps in pacification of *vata*. *kraunch beej* having N-propanol extract has highest response in neuro protective test which involve the growth of DA neurons in culture. Use whole extract of *kraunch beej* is superior to pure L-DOPA with regards to treatment of Parkinsonism. L-DOPA is the precursor of Dopamine which can cross the BBB. In *Ajmodadi churna* having *usna tikshana* and *vaat anuloman* properties⁵; it helped in pacification of

DISCUSSION

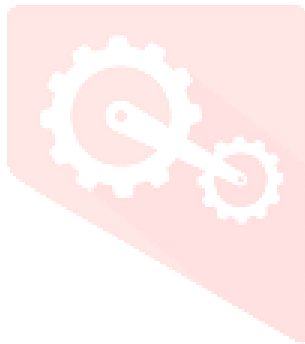
According to Ayurveda the disease *kampavata* is described under the 80 types of *vaat*

vata dosha prakopa. In *Jatamansi churna* having the properties of tridosha balancing and unique properties of nidra janan. It helped in improving sleep index of the patient.⁷ Shankhpuspi churna is tikta rasa Pradhan, tridhosh balancing and vatahara .Shankhpuspi holds high significant properties like anti depressive, anti stress, anxiolytic properties extremely used for balancing the brain chemicals that is neurotransmitter and ups the secretion of dopamine which in turn keeps the serotonin level under the control and helps to reduced various symptoms of anxiety. Brahmi churna is one of the best cognitive, enhancing medicine due to its sheeta virya. It helped balancing the tridosha. The main chemical active constituent(alkaloids) present in Brahmi (Bacopa) are *Brahmine, Monnierin, B-sitosterol* etc. are very effective in producing release of neurotransmitter hormone from cerebrum, cerebellum for the coordinating action of brain, tongue and limbs.⁹ *Sarvanga Abhyanga* with *Balaashwagandha Tailawas* used here due to its properties of *VataPittahara, madhura vipaka, snigdha pichila guna*, also *Abhyanga* has been told as *Vata Shamaka* by *Acharya Shushrut*.¹⁰ Also according to *charka vayu* dominates *sparshaendriya*, *abhyanga* is extremely beneficial for vata vyadhi as per *charka*.⁸ *Swedana* is *vata hara(dashmool kwath chunra)*, cures stiffness and heaviness. *Swedana* is *ushna, tikshnaand suksham in guna* hence helps in pacifying vata dosha.⁹ *Anuvansan Basti* has been described as *Vatarognashak*.¹⁰ *Ksheerbala taila* has also been told as *vatapitta shamaka* by *acharya* and *Valiya sahchardi tail* is best for *vaat har and nervine strenthing*. *Swa anubhoot Tikatak ksheer basti* having content is *patol, chirayata, giloy, yasthimadhu and kraunch beej kwath churna*.¹¹ *Shirodhara* has been described by *acharya vagbhata* in *anidra*; *Shirodhara* stimulates *sthanpani, sankha, and utkshepa and adipati marma*. Pouring hot oil causes vasodilation, brings improvement in

circulation of hypothalamus, pituitary gland, pineal body and sub-cortical structures of mid



brain which improves the autonomic nervous system function. Taila has been described as *vatahara* but not *kapha vardhaka* in Ayurvedatext. Tila (*sesamum indicum*) being ushna in virya has been taken to pacify vata dosha. The decoction made in *ksheerpaaka* which having *Madhur* and *Snigdha* properties which help to control *Vata* Dosha and due to *Sukshma* gunna of *Saindhava* it reaches up to micro channels of the body and helps to open fresh blood supply to bone tissue. In this basti Tikta dravyas are having tikta rasa, ushna virya, madhura Rasa and katu vipaka favours normal functions of Dhatvagni facilitating increased nutrition to Asthi and Majja Dhatu. Basti mostly contains drugs (godugdha, panchtikta guggulu ghrita) which having madhur rasa, madhur vipak, snigdha and pichhila guna, which helps to reduced Achunavedhna (flexion) at affected joint



CONCLUSION

Based on clinical signs and symptoms Parkinson's disease can be correlated with *kampavata*. Ayurvedic oral medications and *panchakarma* therapies are found to be beneficial in improving the quality of life of the patient. Line of treatment must be from removing *avarana* to *Shodhana* followed by *shamana* to pacify *vikrutha vata*, although prognosis is not so good but it can be a ray of hope for bed ridden geriatric patients. The results attained were encouraging and were worth documenting.

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