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## ROTI UPANAHA AN INNOVATIVE TREATMENT MODALITY IN THE MANAGEMENT OF KAPHAJA SHIRASOOLA: A CASE SERIES

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### ABSTRACT

The prevalence of *Shirorogas* such as *Shirasoola* (*Kaphaja Shirasoola*), *Suryavartha soola* (Migraine) has increased. *Shirashoola* is prime most symptom included in the category of *Shirorogas*. *Acharya Sushrutha* has mentioned 11 types of *Shiro-rogas* in *Uttaratantra* and *Kaphaja Shirasoola* is one among them. It is characterized by *Shiro-gurutha*, *Mandaruja*, *Suptam*, *Karnakandu*, *Alasya*, *Tandra*, *Shoonakshikoot vadhana*. *Upanaha* is an independent therapeutic measure for the management of many diseases particularly those of *Vata* and *Kapha* origin.

The aim of the study is to evaluate the efficacy of *Roti Upanaha* in the management of patients suffering from *Kaphaja Shirasoola*. This study was conducted on five patients of *Kaphaja Shirasoola*, in whom *Roti Upanaha* was done for seven days. Use of *Roti Upanaha* with *Pippali*, *Shunti*, *Maricha*, *Devadaru*, *Kushta*, rice floor as a base, *Ushnajala* and oil as q.s, etc. showed significant improvement in the symptoms like *Shirogurutha*, *Mandaruja*, *Suptam*, *Tandra* and *Aalasya* of patients with *Kaphaja Shirasoola* without any adverse effects in seven days. For pre and post-assessment of patient's visual analog scale was used. Hence the use of *Roti Upanaha* helps in alleviating the symptoms of patients with *Kaphaja Shirasoola*.

**Keywords:** *Upanaha, Kaphaja Shirasoola, Shiras, Roti Upanaha, Shirashoola*

**INTRODUCTION:**

*Shiras* (head) is one of the most vital organ of body. In *Ayurveda* it is listed under *Dashavidha Pranayatanas* and three *Marmas* [1]. *Shiras* is the seat of all *Gyanendriyas* and controls the function of *Karmendriyas*. In *Ayurvedic* classics ten types of *Shirorogas* are mentioned and *Kaphaja Shiroroga* is one among them explained by Aacharya *Vagbhata* [2]. *Kaphaja Shirasoola* may occur at any age and both sexes may be affected equally. Symptoms According to Acharya *Charaka* [3], *Sushrutha* [4], *Vagbhata* [5] may include *Shiro-gurutha*, *Mandaruja* and *Suptam*, other symptoms include *Karnakandu*, *Alasya*, *Tandra*, *Shoonakshikoot vadana*.

**Case Report:**

This case series included participants who visited the *Panchakarma* OPD of SDM, Hassan, Karnataka, with a primary history of the *Shirogurutha* (heaviness of head), *Mandaruja* (pain in head), *Suptam* (numbness of head), *Tandra* (drowsiness) and *Aalsaya*. Cases that were evaluated initially included the history and physical examination. Demographic data collected included age, gender, personal and medical history with duration since the onset of condition. Pre and Post-assessment was done by the Visual Analogue Scale.

All demographic data that include age, gender, occupation, *Shirogurutha*, *Mandaruja*, *Suptam*, *Tandra*, *Aalsaya* and duration of all patients are described in **Table 1**.

**Case Presentation:****Case 1**

A 20- year- old female patient came with a complaint of *Shirogurutha*, *Mandaruja* and *Suptam* since 4 years but *Tandra* and *Aalasya* since 1 year. The patient received medical management, which include analgesic and antibiotic drugs but signs and symptoms were not reduced. For better management patient admitted in SDM college of Ayurveda and Hospital, Hassan, Karnataka.

**Case 2**

A 40- year-old female patient reported with *Shirogurutha*, *Mandaruja* and *Suptam* (numbness of head) since 1 year, *Tandra* and *Aalasya* since 6 months. she used to sleep in day time. No diagnostic imaging was performed. She took oral medication for few days but no relief. For better treatment patient took admission here.

**Case 3**

A 45-year-old Male patient reported with *Shirogurutha*, *Mandaruja*, *Suptam* (numbness of head), *Tandra* and *Aalasya* since 1 month. He didn't get relief after painkiller, for better

management he took treatment in this hospital.

#### Case 4

A 50-year-old female patient reported with *Shirogurutha*, *Mandaruja*, *Suptam* (numbness of head), *Tandra* and *Aalasya* since 20 days. pain increased in night since 10 days. She took oral medications but symptoms not relieved. To get relief patient came here.

#### Case 5

A- 55-year- old female patient reported with *Shirogurutha*, *Mandaruja*, *Suptam* (numbness of head), *Tandra* and *Aalasya* since 15 days. pain increased in night since 1 week. She took oral medications but didn't get relief, for better management patient approached SDM, hospital, Hassan.

Table 1: Demographic data of all patients

	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5
Age	20 year	40 year	45 year	50 year	55 year
Gender	Female	Female	Male	Female	Female
Occupation	Student	Teacher	Private job	House wife	House wife
<i>Shiro-gurutha</i> ,	4 years	1 year	1 month	20 days	15 days
<i>Mandaruja</i> ,	4 years	1 year	1 month	20 days	15 days
<i>Alasya</i>	1 year	6 months	1 month	20 days	15 days
<i>Tandra</i> ,	1 year	6 months	1 month	20 days	15 days
<i>Suptam</i>	4 years	1 year	1 month	20 days	15 days

## TREATMENT

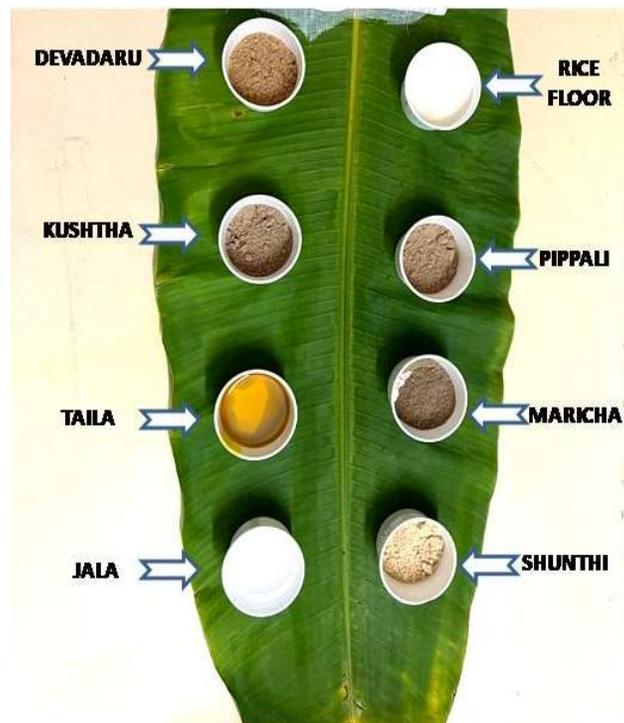
After observing all signs and symptoms, the following treatment were advised for 7 days.

## MATERIALS AND METHODS

### Method of preparation of *Roti Upanaha*:

Table 2: Ingredients Required in preparation

S. No.	Ingredients	Quantity
1	Rice flour as a base	15 grams
2	<i>Pippali, Shunti, Maricha, Devadaru and Kushta</i>	Each 5 grams
3	Warm water	q.s
4	Oil	10 ml
5	Banana leaf	q.s



Pic. a: Ingredients of Roti Upanaha

#### METHOD OF PREPARATION:

##### Step 1. Knead a smooth dough

Firstly, take a large-sized bowl as per requirement. Put Rice flour as a base and *Churnas* like *Pippali*, *Maricha*, *Shunti*, *Devadaru* and *Kushta* along with 10 ml oil in it.

Then add warm water little by little, mix well, and start kneading a dough. Make sure that the dough is not too thick or too thin. It has to be of a soft and pliable consistency. keep kneading for a while till all ingredients mix properly.

##### Step 2: Flatten the dough

Place the dough ball on a neatly clean flat surface, and flatten it further with the help of a rolling pin. Keep using the flour in order to prevent the rolls from sticking to the surface. Once Roti gets the perfect round shape, place a pan on medium flame.

##### Step 3: Cook the Roti

When the pan is hot enough, lay the roti on it and cook from one side. Maintain a medium flame since a high heat might burn it. When the roti is halfway cooked, it is ready to be used as a *Roti Upanaha*.



Pic. b: Preparation of Roti



Pic. c: Roti Upanaha

### Mode of Application:

Take a banana leaf and make it round shape as size of the vertex region of the head and heat it. Put the cooked one-sided Roti on the leaf and first check the temperature of the roti on the dorsal aspect of the hand, then apply it to the vertex region of the head with the help of

a bandage. The bandage should not be too tight or too loose.

**TIME OF APPLICATION:** 12 hrs.

*Upanaha* applied in the evening should be removed in the morning and if applied in morning, should be removed in the evening [6].



Pic. d: Application of Roti Upanaha

**ASSESSMENT CRITERIA:****Table 3: Parameter before and after Treatment**

Parameters	Before Treatment	After Treatment
<i>Shiro-gurutha</i>	Present	Absent
<i>Suptam</i>	Present	Absent
<i>Mandaruja</i>	Present	Absent
<i>Alasya</i>	Present	Absent
<i>Tandra</i>	Present	Absent

**VISUAL ANALOGUE SCALE:**

All patients were having vas scale before treatment 8 and after treatment it was 0 except 1 patient who was having vas before treatment 10 and after treatment 2.

**OBSERVATION AND RESULT**

The current case series was assessed after administering seven days of Roti Upanaha in patients. Significant relief was observed in *Shirogurutha*, *Mandaruja*, *Suptama*, *tandra* and *aalsaya*. Among these five cases, four patients recovered completely and one patient showed improvement in grade. Studies suggest that the outcome is significantly good if medical management is commenced early after the disease. *Acharya Charaka* [7] explained specific Nidanas for *Kaphaja Sirashoola Asya sukha*, *Swapana sukha*, *Guru bhojana*, *Snigdha bhojana*, *Ati bhojana* which includes continuous day sleep, intake of curd and kapha vardhaka aahara may aggravate *Kaphadoshas*, which is prime cause for *kaphaja Shirorogas*. Here it was observed that all patients developed their symptoms after continuous day sleep, intake of curd and

*Kaphavardhaka aahara*. During treatment, all patients avoided day sleep, intake of curd and *Kapha vardhaka aahara* except patient 1 so this may be the reason for improvement as compared with others.

**DISCUSSION**

*Kaphaja Shirasoola* is *KaphaVata* dominant condition which needs proper administration of therapy to prevent irreversible changes; hence in conventional therapy, the administration of Analgesics is the first line of management. Here without any analgesics and other conventional drugs, we use the *Roti Upanaha* (A type of *Saagni Sweada*) [8] having *Vatakaphahara* drugs which alleviates the main causative factor for *Kaphaja Shirasoola*. *Acharya Caraka* [9] and *Sushruta* [10] mentioned *Svedana* as a *Chikitsa* for *Kaphaja Sirasoola*.

**MODE OF ACTION**

The effect of *Upanaha Swedana* has a broader scope of action based on dravya used, thickness and the thickness of the paste should ideally be equal to the thickness of *Ardra Mahisha Charma* [11] (buffalo skin), which is

usually 3mm to 5mm thick and completely cover the affected area etc. this can be explained as among the *Panchamahabhuta*, *Vayu Mahabhuta* is mainly predominant in the skin, Hence the *Sparshindriya* is capable of perceiving many different types of sensations. *Brajaka Pitta* (one of the five types of Pitta) is present in Twaka and its function is Twaka *Brajana*. *Abhyanga* and *Swedana* applied externally are digested and processed by this *Brajaka Pitta* [12].

*Aacharya Susruta* explains that the *Tiryak Dhamani* that divides into numerous branches covers the entire body like a complex network and their opening are attached to the *Roma Koopa*. *Veerya of Upanaha* enter through the *Roma Koopa* of the head region after undergoing *Paka* by *Bhrajaka Pitta* in the skin. *Kapha* and *vata* are the prime pathological factors involved in *samprapti* of the *Kaphaj shirosoola*.

#### DRUGS USED FOR ROTI UPANAHA:

Table 4: Rasa Panchaka of Ingredients

Drugs	Rasa	Guna	Veerya	Vipaka	Doshakarma
<i>Pippali</i>	<i>katu</i>	<i>Laghu,snigdha, Tikshna</i>	<i>Unushnasheeta</i>	<i>madhura</i>	<i>Kaphavatashamaka</i>
<i>Maricha</i>	<i>katu</i>	<i>Laghu,tikshna</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kaphavatashamaka</i>
<i>Shunti</i>	<i>katu</i>	<i>Laghu, snigdha</i>	<i>Ushna</i>	<i>madhura</i>	<i>Kaphavatashamaka</i>
<i>Devadaru</i>	<i>tikta</i>	<i>Laghu, snigdha</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kaphavatashamaka</i>
<i>Kushta</i>	<i>Tikta,katu, madhura</i>	<i>Laghu,ruksha, Tikshna</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kaphavatashamaka</i>

All the Drugs like *Pippali*, *Maricha*, *Shunthi*, *Devadaru*, *Kushta* having properties *laghu*, *Snigdha* and *Tikshna* *Guna*, *Katu-Tikta* *Rasa*, *Ushna* *Veerya* can counter act on the *Samprapti* of the *Vata* and *Kapha*. This is how the systemic absorption of drugs applied on the skin produces an effect, the *Veerya* of the drugs used in *Upanaha* *Swedana* has the desired effect after being absorbed in the Skin.

#### CONCLUSION

*Upanaha Swedana* can be utilized as a Simple yet effective topical measure for relieving pain and heaviness. The current case is based on the management of patients on an IPD

basis who are diagnosed with *Kaphaja Shirasoola*. Application of *Upanaha*, which was easy to use and cost-effective. No other conventional medicines were given during the course of treatment. The *Upanaha dravya* due to their *Veerya*, enter into the body through the *Roma koopa*, then undergo *Paka* by *Brajaka Pitta* and produced the desired effect based on the *Dravya* selected for use. Metabolic wastes at the local site are removed through the increased blood circulation and sweating caused. This can be understood as *Sroto-Mukha Vishodhana*, due to the *Guna* of the *Upanaha Swedana Dravya* used, the *Leena*

*Dosha* are liquefied and expelled pores of the sweat glands. It can also cause a reflex dilation of arterioles by the stimulation of superficial nerve endings [13]. Therefore *Upanaha Swedana* is a procedure that can be used at both OPD and IPD levels depending on the nature of the disease and patient compliance. The current study provides a way for more clinical trials to evaluate the effect of *Upanaha*.

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