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ROLE OF GHRIT *WITH SAINDHAV LAVAN* BY *NASYA KARMA* IN THE EMERGENCY MANAGMENT OF *HIKKA* -A CASE REPORT

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ABSTRACT

Hikka and shwasa vyadhis are shighra pranaharak as compared to other vyadhis. vata and kapha dosha are major factors in samprapti of hikka. This disease should be treated immediately to avoid further consequences as there is possibility of death of patient in some cases. Acharya charak has also guided treatment of Hikka and shwasa as early as possible. it is difficult to treat and shighra pranaharaka as no specific line of treatment available for hiccups is modern science. Ayurveda is one of the most preferable health sciences to give solution. it is observed many times that the disease like Hikka is relieved immediately by certain ayurvedic drugs. Ayurvedic classical texts had described different kalpa as well as ekaldravya for managment of Hikka.
In this present case study the treatment of a male patient having feature of hikka treated with a ghrut with saindhav lavan by Nasya karma During veg kal. after the treatment the patient experienced significant relief and observed visible reduction in predominant symptoms like Hiccup. No adverse effect was observed during this treatmenttreatment

KEYWORDS: *Nasya, Hikka,* Hiccup, *saindhav lavan, ghrut, Nasya karm*, Emergancy mangment of *Hikka.*

INTRODUCTION

Hikka disease is explained in context of disease of *pranvaha srotas* (Respiratory System).

Hikka is named due to Hik-Hik sound produced during the attack. The *samprapti* is given as vitiated vata along with kapha block the channels carring prana, udaka and Anna this producing the mainly kapha and vata dominance and said to emanate at the site of pitta. Acharya charak asked to treat Hikka as early as possible because it is Shighra pranaharak.

Acharya charak describes Five types of hikka like kshudrahikka, Annajahikka, Gambhira hikka, Maha hikka, Vyapeta hikka.

According to Bributrays the line of treatment of Hikka emphasizes on the pacification of kapha dosha and vata Anulomana for which abhyanga by using saindhv mixed til tail and swedan along with many ayurvedic formulation in form of suppresive drugs are used. Acharya charak has mention the use of saindhav ghrut for as a nasya and Acharya vaghbhatbhas mentioned nasya chikitsa for hikka. Following the above protocol abhyanga and swedan followed by nasya of saindhav Ghrit is performed.

In modern science hiccups can be defined as involuntary and persistent contraction of diaphragm and respiratory muscles. Following abrupt closure of glottis, they can be classified as temporary which subsides before 48hrs. persistent which remains for

10 days to 1 month and intractable existing for more than 1 month hiccups are usually precipitated by the irritation of the diaphragm most commonly due to gastric distention or inflammation following rapid excessive eating or drinking.

CASE REPORT

A male patient of age 40 yrs having *Hikka* since10 day with 10-20 *vega* within 5 min, episodes repeat after 5-10 minutes. Came to Kayahcikitsa OPD at B R Harne Ayurvedic Medical College & Hospital, Thane.

Associated symptoms were abdominal Distention and constipation. This made the patient very much uncomfortable to sit or lie down. He felt discomfort in chest and throat unable to take food and drink and not able to sleep well.

On examination
General Examination
Afebrile
No pallor
Body weight -60kg
Pulse-78/min Regular
Blood pressure-130/90 mm/Hg
Respiratory rate-20-25/min
SPO2-95% on room air

Dashvidha parikshan
Prakruti- Vataj
Vaya-Madhyam
Satva-Avar
Sara-Avar
Samhanan-Avar
Aahar shakti -Madhyam
Satmya-Madhyam
Praman-Avar
Vyayam shakti-Avar
Rog prakruti -Vataj

Previous investigation
1. USG Abdomen -No significant abnormality detected
2. Urine examination -Normal
3. CBC-Normal
4. ESR -10mm
5. Reactive protein -Normal
6. Serum creatine -0.7m

MATERIAL

Drug Review
Ghrit with saindhav lavan

Table No.1

Ras	Madhur
Viry	Sheet
Vipak	Madhur
Gun	Laghu, Snigdh, Sheet, Ruchikar
Karma	Agnidipan, chedan, suksham strotogami

Treatment
Line of treatment was followed by abhyanga, swedan and nasya karma.

Table no.2

Sr.No	Treatment	Medication	Days
1	Sarvang Abhyang	Til tail	3 days
2	Sarvan swedan	Peti sweda by Dashmoola kwath	3days
3	Nasya	Ghrit with saindhav lavan (8 drop in each nostril)	3days (Vegakalin avstha)

Administration of the drug
1.Ghrit 10ml + saindhav lavan 10 mg
2.Route of administration -Nasadhwar
3.Aushadh sevan kala -Vegakali

Drug Dose - 8 Drop each nostril
Pathya and Apathya
Laghu Ahar like kichadi, Daliya, Green gram, laja Manuka

METHODS

a.Center of study -B .R Harne Ayurvedic Medical College,Thane.
b.Type of study -Random singal case study

Assesment criteria
Subjective parameters

Table No. 3.

Sr.No	Hikka Vega	Gradation
1	Vega sankhya	0-No Hikka/30 min 1-One to Ten attacks/30min 2-Eleven to Tweenty or more than attacks/30 min
2	Vega avadhi	0-Vega subsides within 5 minutes 1 - Vega persists for an hour 2 - Veg persist more than two hours

3	Vega swarup	0- Vega subsid without any medicine 1- Vega subside after eating or drinking water 2- Some medicine has to be taken
4	Vega punaravartana	0- No punaravartan 1 - Punaravartan once in a month 2 - Punaravartana one in a week

Grade 0.reflex -Excellent improvement 75 % to 100%
Grade 1.reflex-Good improvment 50% to 75%
Grade 2.reflex – moderate to poor improveme

RESULTS

Table no. 4.

S. N.	Signs and Symptoms	Before Treatment	After Treatment	Relif in %
1	Vegsankhya	2	0	100 %
2	Vega avdhi	2	0	100 %
3	Vega swarup	2	0	100 %
4	Vegapunaravartana	2	0	100 %

At the very first Nasya administration patient got relief in the hiccup reflexes and his episodes were also declined on further treatment and on continuing were also declined on further treatment and healthy after following the routine for 3 days

DISCUSSION

As per the line of treatment given in the classical text snehana and swedan should be administered. The snehana and swedan will liquify the kapha dosha which canal and expelled out by shirovirechan karma and thus clarifying all the strotas which further result in vatanuloman. In present case the patient was advised for bahya snehan by til tail which is helpul for vatanulam and sarvang swedan for kapha vilayan which is act an srotas mukh vikshepan.

Acharya vagbhatta say that “Nasa Hi sirso Dwarum”

According to him the medication ghrut, oils or swaras, administered in form of drops as nasya dravya reaches to shrungatak marma brain (Murdha) through the cannular pathway situated at the topmost region of the body in the brain it reacts with the excess slimy and sticky mucoid accumulation in form of kapha dosha leading them towards the nasal canal and thus clean the srotus and further evacutiing it by shirovirechan karma.

The medicines given are absorbed through the plasma membrane of nasal mucosa and for the absorption through the capitlaries and latter flow in the larger vessels, it is necessary to follow the abhynga procedure as it allows the vessels to dilate for the proper flow of blood along with swedan which not only help in further dilation but also helps to ablate the solidified kapha dosha which creates the abstraction and thus hamper the flow of vata dosha since the main cause of hikka disease is due to situation of vat kapha dosha leading to accumulation of Ama with further causing stroto avrodh combination of the ghrut with saindhav lavan. Which has property of vatanuloman, saindhav is help in kapha chhedan this then saindhav lavan and Ghrit is also uselfull for pitta shaman and hikka vyadi is pttasthanashrit so break the samprapti of disease by nasya karma is explained as main treatment line for Hikka.

In above case study we observed the result of ghrut with sandhav lavan in which ghrut is act on pitta sthan to shaman of pitta dosh and on vata dosh as a vatashamak and vatanuloman due to madur ras and shit virya. Saindhav lavan is strotovahi gunatamak which is used to deep penetrations of medicine and kapha chedhan karma done by saindhav lavan so overall result of this ghrut with saindhav lavan is pitta saman vatanuloman and kapha chedan.

CONCLUSION

Hikka diisease can easily be treated by Ayurvedic drugs and its principles without any complications. Therefore, it can be concluded they the ayurvedic treatment is quite effective and safe in hikka disease based on the classical treatment protocols mentioned by acharyas.

DECLARATION OF PATIENT

Authors certify that they have obtained patient consent form B R Harne Ayurvedic medical collage for reporting the case along with the images and other clinical information in the journal. The patient understands that his name and initials will not be published and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

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