

An Ayurvedic management of Raktaja Abhishyanda – A case Report

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ABSTRACT

Introduction: *Abhishyanda* is one of the seventeen *SarvagataRogas* described under the heading of *NetraRoga* in *ShalakyaTantra*. According to *Acharya Sushruta* *Abhishyanda* is the main cause for all the *Netrarogas*. If we don't treat it on time, it will cause *Adhimantha*. And *Adhimantha* will latter progresses in *AsadhyaVyadhis* like *Hataadhimantha* and leads to *Drushtinasha*. On the basis of Signs and symptoms *Abhishyanda* can be correlate with Conjunctivitis. Conjunctivitis is defined as an inflammation of the conjunctiva. Treatment of *Raktaja Abhishyanda* includes *Shodhana*, *Raktamokshana*, *Aschyotana*, *Seka*, *Bidalaka* etc. **Materials and Methods:** A 27 years old male patient came to the eye OPD, ITRA, Jamnagar with the complaints of Redness, Burning sensation, Excessive watering and mild itching in both the eyes since last 5 to 7 days. Majority of the symptoms are same as the *Raktaja Abhishyanda* mentioned in the classics. Hence it is diagnosed as *Raktaja Abhishyanda*. The Patient was intervened with *ShadangaPaaniya*, *AvipattikaraChurna*, *ShreeparniyadiChurnaAschyotana*, *UshiradiChurnaBidalaka* and *BruhatmanjishthadiKwatha*. **Result:** Patient showed gradual improvement in symptoms over a period of 2 weeks. Along with proper treatment and *PathyaSevana*, complete relief in the symptoms has been achieved. **Conclusion:** It shows that the *Ayurvedic* treatment protocol described by the classics is a good choice of intervention for the management of *RaktajaAbhishyanda*.

Keywords: *Aschyotana*, *Bidalaka*, Conjunctivitis, *Raktaja Abhishyanda*

1. INTRODUCTION:

Abhishyanda is one of the seventeen *SarvagataRogas* described under the heading of *NetraRoga* in *ShalakyaTantra*.ⁱ *Netra* is very important organ as it is the *Adhishtana* of *ChakshuIndriya* and is responsible for *RupaGnana* (Vision). *Acharya Sharangadhara* gave a significant importance to the *Netra* by saying that, "A person should keep trying to protect his eyes till the end of his life because if he gets blind, the whole world will become wastage as the days and nights will be equal for him."ⁱⁱ *Acharya Vagabhatta* also gave similar description saying that "Whole world will become *Tamomaya* if one lost the *Drishti* (vision).ⁱⁱⁱ Keeping that in the mind we choose *Abhishyanda* case report here. According to *Acharya Sushruta* *Abhishyanda* is the main cause for all the *Netrarogas*.^{iv} If we don't treat it on time, it will cause *Adhimantha*. And *Adhimantha* will latter progresses in *AsadhyaVyadhis* like *Hataadhimantha* and leads to *Drishhtinasha*.^v Hence it should be treated as early as possible. *Abhishyanda* is one of the *SankramakaVyadhi* described by *Acharya Sushruta*.^{vi}

In classics four types of *Abhishyanda* has been described which are, 1) *VatajaAbhishyanda*, 2) *PittajaAbhishyanda*, 3) *KaphajaAbhishyanda*, 4) *RaktajaAbhishyanda*. On the basis of Signs and symptoms *Abhishyanda* can be correlate with Conjunctivitis. Conjunctivitis is defined as an

inflammation of the conjunctiva.^{vii} Many types of conjunctivitis have been described in modern science on the basis of onset, exudates, response and aetiology.

In presented case report, the patient was having signs and symptoms like *LohitaNetrata* (Redness of eyes), *RaajiSamantadaAtilohita* (Congestion), *Netra Daha* (Burning sensation in eyes), *BashpaSamucchayata* (Excessive lacrimation), *AntahaKledaashruta* (Watering from eyes), *Dhumayana* (Feeling of hotness in eyes), *Kandu* (Itching). On the basis of these presenting complaints, it can be correlate with *Raktaja Abhishyanda*.^{viii} The treatment protocol described in the classics has been selected here which includes, *Deepana-Pachana, KoshthaShodhana, Aschyotana, Bidalakand Pitta- RaktaShamaka Chikitsa*.^{ix}

2. CASE REPORT:

A 27 years old Male patient came to Eye OPD, ITRA Jamnagar with the complaints of *LohitaNetrata* (Redness of eyes), *Netra Daha* (Burning sensation in eyes), *BashpaSamucchayata* (Excessive lacrimation), *AntahaKledaashruta* (Watering from eyes), *Dhumayana* (Feeling of hotness in eyes), *Kandu* (Itching) in both the eyes since last 5 to 7 days.

History of present complaints:

A nondiabetic, normotensive, 27 years old male patient came to the Eye OPD in afebrile and conscious state. He was apparently normal before 3 months ago, then he had suffered from Redness, burning sensation, excessive lacrimation and mild itching. He took allopathy medications for the same. But the recurrence of the complaints has been noticed after that. Since last 3 to 5 days, he is having the same complaints. He approached us with these complaints at the OPD and treatment was further started.

Personal & Demographic Data:

Age: 27 years

Sex: Male

Occupation: Cloth store

Diet: Mixed

Appetite: Moderate

Bowel: Irregular

Micturition: Normal (5-6 time/ day)

Sleep: Normal

Addiction: Paan-Masala chewing

Prakruti: Vata-Pitta

Examination: (Before Treatment)

❖ Torch Light Examination: (Table-1)

Site	Right eye	Left eye
Eye Lid	Normal	Normal
Conjunctiva	Congestion in Bulbar and Palpebral conjunctiva	Congestion in Bulbar and Palpebral conjunctiva

Cornea	Normal	Normal
Pupil	Normal sized normal reactive	Normal sized normal reactive
Lens	Normal	Normal

❖ **Slit Lamp Examination:(Table-2)(figure- 1,2,3,4)**

Right eye	Left eye
Conjunctival hyperaemia present (Bulbar and palpebral conjunctiva)	Conjunctival hyperaemia present (Bulbar and palpebral conjunctiva)

❖ **Visual Acuity:**

DVA- 6/6 (B/L), PH- 6/6 (B/L), NVA- N6 (B/L)

❖ **IOP:** Right eye- 12.2 mm/hg, Left eye- 12.2 mm/hg

Intervention:(Table-3)

Date	Drug	Dose		Route of administration	Duration
2/9/2022	1.Shadanga Paaniya	10 ml	Twice (BM)	Oral	3 days
	2.Avipattikara Churna	5 gms	HS	Oral	
	3.Shreeparniadi Churna	10 gms	Four times	LA (Aschyotanaarthe)	
5/9/2022	Rep. 3				5 days
	4.UshiraadiChurna	5 gms		LA (Bidaalakaarthe)	
	5.BruhatManjishthadiKwatha	10 ml		Oral	
12/9/2022	Rep. 2,3,4,5				7 days
	Rep.5				15 days

Pathya- Apathya:(Table-4)

<i>Pathya</i>	<i>Apathya</i>
Langhana	Vegadharana

<p><i>Mudga-Masha-Yava-LohitaShali</i> <i>Patola, Karvellaka- Karkotaka</i> <i>Tikta- LaghuAahara</i></p>	<p><i>Krodha- Shoka</i> <i>DadhiSevana</i> <i>Amla- Lavana-Katu- Vidahi</i> <i>Tikshna- UsnaAhara</i> <i>MatsyaMamsaSevana</i></p>
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3. **RESULT AND OBSERVATION: (Table-5)**

Treatment sitting	Symptoms	Examination
After 3 days	Watering of eyes decreased (- 40%) Itching decreased in both eyes (60%) Burning sensation decreased in both eyes (-40%)	Conjunctival hyperaemia decreased (Bulbar and palpebral conjunctiva) (-30%)
After 8days	Burning sensation decreased (-80%) Redness decreased (-70%) Watering from eyes absent Itching absent	Conjunctival hyperaemia decreased (-75%)
After 15 days	Burning sensation absent Watering from eyes absent Redness decreased (-95%)	Conjunctival hyperaemia decreased (-90%)

❖ **Visual Acuity: (After Treatment)**

DVA- 6/6 (B/L), PH- 6/6 (B/L), NVA- N6 (B/L)

❖ **IOP:** Right eye- 12.2 mm/hg, Left eye- 12.2 mm/hg

4. **DISSCUSSION:**

In this case report, the patient showing symptoms like Redness in eyes, burning sensation in eyes, Excessive watering from the eyes and mild itching in both the eyes has been selected. Majority of the symptoms are same as the *Raktaja Abhishyanda* mentioned in the classics. Hence it is diagnosed as *Raktaja Abhishyanda*. The treatment selected here are, *MruduVirechana* after *Deepana- Paachana* with *ShadangaPaniya*, *ShreeparniadiAschyotana*, *UshiradiBidalaka* and *BruhatamanjishthadiKwatha*.

1) **Deepana-Pachana&KoshthaShodhana:**

In Ayurveda *KoshthaShuddhi* is primary treatment as all the *Vyadhis* originate from the *Kosthadushti*. Also, *Acharya Sushruta* describe the *Shodhana Karma* in *RaktajaAbhishyand*. *AvipattikaraChurna* has been selected for it. Before *ShodhanaDeepana-Pachana* was done with *ShadangaPaniya* described by *Acharya Charaka*. The main ingredient of *AvipattikaraChurna* is *Trivrutta* and *Lavanga*. *Trivrutta* is a *MudurechakaDravya* and it has some other qualities too like, *Shothahara*, *Vata-Pitta-KaphaDoshahara*, *Madhura* and *Ruksha Guna*. *Lavanga* Has properties like, *Katu-Tikta Rasa*, *Lagu- Sheeta Guna*, *Kapha-Rakta-Pitta Doshahara*, *Netra Hitakara*, *Deepana- Paachana-Rochana*. Also, it contains *Sharkara*

which is *Pitta-Raktahara*. With all these properties it can act as *MruduVirechaka* and *Pitta-RaktaShamana* and *Shodhana*. *Pitta Rechana* will lead to *RaktaShodhana Karma* due to its *Ashraya Ashrai Bhava*. With *KosthaShodhana* property *Samaavastha* will be removed. Patient got approx. 50% relief in the symptoms like itching, burning and watering from the eyes. It shows the importance of *Agni Chikitsa*.

2) *Aschyotana*:

ShreeparniadiChurna has been selected for the *AschyotanaKarma*. This combination of *Churna* is described in *RaktajaAbhishyana* by *Yoga Ratnakara* for *Anjana Karma*. *Anjana Karma* is contraindicated in *Sama Avastha* of *Netraroga*. According to *Acharya Vagbhatta* *Aschyotana Karma* is the prime most procedure to be performed in *Netraroga Chikitsa*. Hence, *Aschyotana Karma* has been selected here with these drugs. Contains and properties of *ShreeparniadiChurna* are mentioned in table-6. Majority of the drugs are of *SheetaVirya*, *Madhura-Tikta-Kashaya Rasa*, *Pitta-RaktaShamaka*, *Shothahara*, *Dahahara* etc. All these properties can help in *Rakta-Shamana Karma*.

Contains of *ShreeparniadiChurna*: (Table-6)^x

Drugs	Rasa	Virya-Vipaka	Guna	Dosh karma	Other properties
<i>Shreeparni</i>	<i>Kashaya-Tikta</i>	<i>Madhura, Sheeta</i>	<i>Guru, Sheeta</i>	<i>Vata- Pitta-Rakta hara</i>	<i>Daha Shamaka</i>
<i>Dhataki</i>	<i>Katu-Kashaya</i>	<i>Sheeta</i>	<i>Sheeta, Laghu</i>	<i>Pitta- Rakta Hara</i>	<i>Mrudukaraka</i>
<i>Lodhra</i>	<i>Kashaya</i>	<i>Sheeta</i>	<i>Laghu, Grahi</i>	<i>Kapha-Pitta Hara</i>	<i>Chakshushya Shothahara Raktavikara Hara</i>
<i>Patala</i>	<i>Kashaya, Madhura</i>	<i>Sheeta</i>	<i>Sheeta</i>	<i>Kapha-RaktaHara</i>	<i>Hradhya Kanthya</i>
<i>Amalaki</i>	<i>Pancharasa</i>	<i>Sheeta</i>	<i>Ruksha</i>	<i>Tridosahara</i>	<i>Vrushya, Rasayana, MruduRechaka</i>
<i>Arjuna</i>	<i>Kashaya</i>	<i>Sheeta</i>	-	<i>Kapha-Pitta Nashaka</i>	<i>Vranahara Pramehahara</i>
<i>Manjishtha</i>	<i>Madhura-Tikta-Kashaya</i>	<i>Ushna</i>	<i>Guru</i>	<i>Raktashodhaka</i>	<i>Shothagna Akshirogahara</i>

3) *Bidalaka*:

According to *Acharya Vagbhatta* and *SharangadharaSamhita* *Bidalaka* is one of the *Kriyakalpa* procedure. *Acharya Sushruta* described *UshiradiChurna* for *Lepana Karma* in *Raktaja Abhishyanda*. Contains and properties of *UshiradiChurna* are in table-7. *Bidalaka Karma* can be used on *Sama Avastha* of *Doshas*. Majority of the drugs are of *SheetaVirya*, *Madhura-Tikta-kashaya Rasa*, *Pitta-*

RaktaShamaka, Shothahara, Dahahara etc. All these properties can help in *RaktaShamana Karma*. *Shothahara* Property will help reduced the inflammation in conjunctival capillaries which will reduce the congestion.

Contains of *Ushiradichurna*: (Table-7)^{xi}

Drug	Rasa	Virya-Vipaka	Guna	Dosh Karmata	Other Properties
<i>Ushira</i>	<i>Madhura-Tikta</i>	<i>Sheeta</i>	<i>Laghu</i>	<i>Pitta-Rakta-Kapha hara</i>	<i>Dahahara Raktaprakop hara</i>
<i>Daruharidra</i>	<i>Katu-Tikta</i>	<i>Ushna</i>	<i>Ruksha</i>	<i>Kapha-Pittahara</i>	<i>Shothahara Astraroga Nteraroga Hara</i>
<i>Agaru</i>	<i>Katu-Tikta</i>	<i>Ushna</i>	<i>Laghu</i>	<i>Vata-Kpha hara</i>	<i>Vataraktahara</i>
<i>Yashtimadhu</i>	<i>Madhura</i>	<i>Sheeta</i>	<i>Guru, snigdha</i>	<i>Vata-Pitta-Rakta hara</i>	<i>Shotha, Vranahara</i>
<i>Musta</i>	<i>Katu-Tika-Kashaya</i>	<i>Sheeta</i>	<i>Grahi</i>	<i>Kapha-Pitta-Rakta hara</i>	<i>Paachana, Deepana</i>
<i>Lodhra</i>	<i>Kashaya</i>	<i>Sheeta</i>	<i>Laghu, Grahi</i>	<i>Kapha-Pittahara</i>	<i>Chakshushya Shothahara Raktavikara Hara</i>
<i>Padmaka</i>	<i>Madhura</i>	<i>Sheeta</i>	-	<i>Kapha-Pittahara</i>	<i>Daaha Shothahara</i>

4) *BruhatManjisthadiKwath*:^{xii}

According to *Sharangdhara Samhita BruhatManjisthadiKwatha* can be used in *Netrarogas*. Also, the contains work on the *Raktadosha* and purify the *Raktadosha*. *Kwatha* is contraindicated in *Sama AvasthaofNetradosha*, that's why the *Kwatha* has been prescribed to the patient after *NiramaAvasthaof Netraroga*. It has been prescribed after complete remission of the disease for fifteen days for the blood purification purpose.

5. Conclusion:

It shows that the *Ayurvedic* treatment protocol described by the classics is a good choice of intervention for the management of *Raktaja Abhishyanda*. Since the study includes only one case it needs to be evaluated further and research should be conducted with more sample size, so further study on this treatment protocol in the management of *Raktaja Abhishyanda* is needed in this regard.



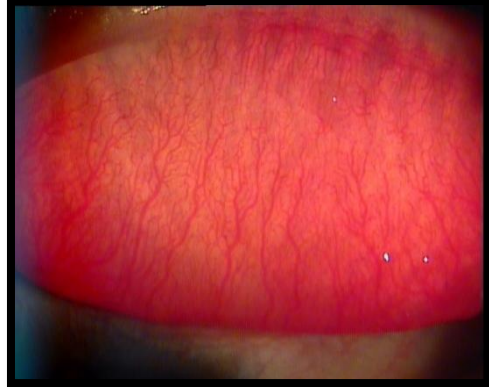
[Figure -1 Showing congestion in temporal side bulbar conjunctiva of the right eye]



[Figure -2 Showing congestion in upperpalpebral conjunctiva of the right eye]



[Figure -3 Showing congestion in temporal side bulbar conjunctiva of the left eye]



[Figure -4 Showing congestion in upperpalpebral conjunctiva of the left eye]



[Figure -5 Showing normal temporal side bulbar conjunctiva of the right eye]



[Figure -6 Showing normal palpebral conjunctiva of the right eye]



[Figure -7 Showing normal temporal side bulbar conjunctiva of the left eye]



[Figure -8 Showing normal palpebral conjunctiva of the left eye]

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