

A Review Article on Abhishyanda

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Abstract: Allergic conjunctivitis is one of the most common eye disorders that affect people of all age groups and can be correlated to Vatajaabhishyanda (Allergic Conjunctivitis) in Ayurvedic medicine based on their signs and symptoms. Abhishyanda (Conjunctivitis) is the root cause for most of the eye disorders and must be treated early with effective interventions or it might lead to severe complications and would be very perplexing to save the eyesight. If Abhishyanda (Conjunctivitis) takes a chronic course, it may lead to dreadful complications making the disease unmanageable. In Modern medicine, this is managed with the administration of eye drops and anti-Allergic medicines associated that are associated with some adverse effects. Ayurvedic management of Allergic conjunctivitis has shown some effective results in overcoming the ailment with no such effects and non-recurrence. Hence here an effort has been made to elucidate about Vatajaabhishyanda and its management that is outlined in Ayurvedic classics.

Keywords: Vatajaabhishyanda, Allergic conjunctivitis, Ayurveda, Shalaky Tantra

INTRODUCTION

Netra Abhishyanda is one of the Sarvagata Roga (disease) as described by Acharya Sushruta . All the Netra Rogas are mainly caused by Abhishyanda. According to Ayurvedic text, it is an “Aupsargic” Vyadhi (communicable disease) caused by Contamination of discharge. Netrabhishyanda is classified into four types according to Doshic predominance viz. Vataj, Pittaj, Kaphaj and Raktaj Abhishyanda. In Kaphaja Abhishyanda, Kapha is a predominant Dosha and Rasa and Rakta (blood) are the Dushyas. In this condition the Netra Srotas (channel) are vitiated by Kapha, Snigdha (smooth), Sheeta (cold), Guru, Pichchila (slimy), gunas (quality) are increased and the fluid system of the eye becomes denser and heavier. This affects intraocular circulation and the drainage slows down. conjunctivitis / spring catarrh is a variety of exogenous allergic conjunctivitis, which is a very trouble some ocular disease of childhood and in the adolescent age group . The child suffers from intense itching, grittiness, discharge, redness, lacrimation, photophobia, and so on, thereby, decreasing his learning hours. The troublesome features are aggravated in the spring

season / hot climate that lasts for years together and rarely persists after adolescence . The signs and symptoms mainly are itching, heaviness of the eye, watering, edema of lids, dense white slimy discharges, photophobia, burning sensation and conjunctival congestion. Heredity is one of the major distinguishing factors. As scientific research has found, the risk of developing allergies increases by approximately 30% if one of the parents is allergic. If both the parents have allergies, offspring’s risk is greater than 60% . In Ayurveda hereditary disorders are explained under Janmabala Pravrutta Roga (hereditary disorders) in addition to inherited tendencies, whether a person experiences an allergic reaction or not for that several other key factors are there which determine it, and how severe that will react. These include the strength of the individual’s digestive fire known as Agni (heat), the quantity and strength of allergen that enters the body, and a person’s current state of balance or imbalance of Doshas in the body. Fortunately, there are techniques to strengthen our Agni and avoid allergen exposure means, and improve state of Doshic balance. This article compiles conceptual study of vernal keratoconjunctivitis and Kaphaja Abhishyanda and it bridges between them.¹⁻⁷

AIM AND OBJECTIVES

To understand the concept of Kaphaja Abhishyanda in relation with vernal kerato conjunctivitis according to ayurvedic and modern sciences.

MATERIALS AND METHODS

Various texts including Ayurvedic literature, Sanskrit literature and other modern literatures were studied and all the related points were considered regarding this study.

IMPORTANCE OF ABHISYANDA

- Uncontrolled Abhishyanda can lead to serious disease like Adhimantha which is characterized by acute pain.

Types of Abhishyanda

- 1) Vataj Abhishyanda 2) Pittaj Abhishyanda 3) Kaphaj Abhishyanda 4) Raktaj Abhishyanda

KAPHAJA ABHISHYANDA

Nidana (Aetiology) –

Separate Nidana for Abhishyanda are not mentioned in any classical texts by our Acharyas, so general Nidana of Netra Rogas can be considered as the Nidanas of Abhishyanda. Among all Nidana, Ushna-abhitaptasya (feeling of hotness), Raja Nishevana, Dhuma Nishevana, Mithya Aahara, Mithya Vihara and Ritu Viparyaya (seasonal variation) can be considered as special Nidana for it.

vataj Netra Roga Samanya Nidana: A. Ahara Sambandhi: Atisheeta, Guru, Ati Ambu/ Dravapana B. Vihara Sambandhi: Rajo Sevana, Dhuma Sevana, Swapna Viparyaya, Mootra Graha, Vata Graha, C. Kala Sambandhi (Environmental factors): Ritu Viparyaya. Etiology of Vernalkerato conjunctivitis In modern ophthalmology, there is presence of a conjunctival hyperreactivity when sun, dust, wind, smoke, pollution, seasonal variation, pollens, mites and pet danders come in contact with the conjunctival mucosa. This hyperreactivity, which is also known to be frequently associated with asthma and other allergic diseases, may actually be considered as etiological factors of the disease conjunctivitis.

Samprapti (pathogenesis)

- Above said Nidana when taken in excess quantity causes Agnimadya (indigestion) which leads to vitiation of Dosha. When these Doshas migrate in whole body through Srotas and Sira, they get localized in Netravaha Srotas leading to Netra Roga; vataj Abhishyanda. Acharya Vagbhata quotes that the Achakshushya Nidana lead to aggravation of Pitta predominant Dosha and spread to Urdhva Jatru Bhaga through Sira and Manifests Akshi Roga.

1. Samanya Samprapti of Netra Roga: The Samanya Samprapti of Netra Roga explained in classics can be considered as the base to understand the Samprapti of Abhishyanda. According to Acharya Susruta, the vitiated Dosha spreads to Jatru Urdhva Bhaga through the Sira and manifest the eye diseases.

Samprapti Ghataka

Dosha - Vataphradhana Tridosha Dushya - Rasa and Rakta Agni – Mandagni Srotasa - Rasavaha and Raktavaha Strotas Dushti – Sanga, Vimargamana and Atipravriti. Rogamarga – Madhyama Adhishthana

- Sarvaakshi-Tejojalashrita Patala Vyadhi Svabhava-Chirakari.

Poorvarupa

– No specific Poorva Rupa of Kaphaj Abhishyanda is mentioned in classical texts, but Acharya Charaka quoted that, whenever Poorva rupa of the disease is not mentioned, weak manifestation of Roopa can be considered as Poorva Rupa. So, all the cardinal features like Toda (pricking pain), Shopha (Swelling), Kandu, Stravo Muhu of Kaphaj Abhishyanda in mild form can be considered as Poorvarupa.

Rupa (Clinical feature)-

Abhishyanda is characterized by Ushnabhinandana: longing for warm Guruta: heaviness Kandu: itching Upadeha: stickiness due to increased exudates Sitata: whiteness Ati saityam: excessive coldness Stravo muhuh: frequency of discharge increased Pichila: slimy A/C to Vagbhata (Ashtanga Sanghaha) Jadhya: feeling of lethargic Mahan shopha: severe swelling

Nindra:

sleep in excess Anannabhinandana: loss of appetite Symptoms of conjunctivitis According to modern ophthalmology, symptoms are burning and itching sensation, which is usually intolerable, other associated symptoms include: mild photophobia, lacrimation, stringy (ropy) discharge and heaviness of lids. Signs of Vernalkerato conjunctivitis can be described in three clinical forms:

1- Palpebral form- upper tarsal conjunctiva of both eyes may get involved. The typical lesion is the presence of hard, flat topped, papillae arranged in a 'cobble stone' or pavement stone', fashion along with conjunctival hyperemia. In severe cases, papillae may hypertrophy to produce cauliflower-like excrescences of 'giant papillae'.

2- Bulbar limbal form: characterized by

- Dusky red triangular congestion of bulbar conjunctiva in palpebral area
- Limbal papillae occur as gelatinous, thickened confluent accumulation of tissue around the limbus, and
- Presence of discrete whitish raised dots along the limbus (horner trantas spots).

3- Mixed form- it shows combined features of both palpebral and bulbar form.

Sadhyata-asadhyata (Prognosis)

Sadhyasadhayata gives the clear picture of prognosis of the disease. It depends upon many factors like nature of disease, severity of disease, Vaya (age), Prakriti, Bala (strength) of patient etc. Abhishyanda is a Vyadhana Sadhya Vyadhi. Prognosis of Vernal keratoconjunctivitis²⁰ - Prognosis for VKC patients is generally good and the disease is self-limiting with appropriate treatment.

Upadrava (complications):

In the classics, there is no reference available regarding the Upadrava of Abhishyanda but there are references opining that it can lead to Adhimantha (glaucoma) and all other Netra Rogas especially Avrana Shukla (corneal opacity), Akshipakatyaya (uveitis).

Complications of conjunctivitis

Modern literature describes it as chronic, vision threatening complications superficial keratopathy, shield ulcer and neovascularization, Cataract and steroid induce glaucoma are major complications.

Abhishyanda Chikitsa

Snigdhor ushnadrugs used for Vataj abhishyanda, Mrudu and shitala therapy recommended for Pittaja abhishyanda while Tikshna, Ruksha and Vishada drugs advised for Kaphaja abhishyanda. Snehan, Swedana, Anjana, Seka, Ruksha Aschyotan & Ruksha Putpaka, etc. are useful for Kaphaj Abhishyanda. Local application of paste of drugs to eyelids externally, here drugs like Rasanjan, Shunthi, Vacha, Haridra and Murungi, etc. can be used for the purpose of local application in case of Abhishyanda. Tikshnagandusha & Nasya also advised when symptoms are manifested, Snehana with Ghee, Sneha virechana, Snehana nasya and Sirobasti, etc. also advocated to relives symptoms of Abhishyanda

- Oral administration of Sahacharadi ghruta or Taila
- Sneha Virechana of Tilwak ghrita with Tilwak kashay
- Sneha basti or Anuvasana basti to remove vitiated Doshas.
- Nasya with Shatavari, Dashmula, Balamula and Siddha Tail, etc.
- Tarpana with Shriparni, Erand and Nagarmotha, etc.
- Snehik putpaka also advised.
- Ascyotana of goat's milk boiled with the bark of Tagara, Manjishta & Hribera, etc.

- Anjana formed due to the mixture of Haridra, Jeshtamadha and Haritaki, etc. with goat's milk.
- Aanupves varena shiro vadana lepais considered useful.
- Saktu pindika is used for Vataj Abhishyanda.
- Granny leaf paste relieves pain and swelling.
- Chirchite paste reduces inflammation.
- ajmoda juice when applied externally then helps in conjunctivitis.
- Chandi milk provides soothing effect
- Rose-paste mixed with butter relieves symptoms of conjunctivitis.
- Tulsileaves help to reduce inflammation
- Triphala Churnais considered good for spurring allergic inflammation and burning sensation.
- Chandroyati Vati improves allergy resistance, thus can be advised for conjunctivitis.

DISCUSSION

The diagnosis of allergic diseases has increased in the last few decades and allergic conjunctivitis has emerged as a significant problem, which can cause severe ocular surface disease. Patients complain of itching, watering and redness. It can result in decreased quality of life, as patients with severe symptoms, if left untreated or treated poorly, may become school dropouts, unable to work outdoors and sometimes fail to sleep. The symptoms are aggravated by exposure to dry and windy climates. Though some authors have described management protocols, there are no universally accepted protocols of management for allergic eye diseases. Various drugs are available, and the treatment options vary based on the severity of the disease. It is important to avoid any known allergen or reduce exposure to it by using wrap around glasses, by changing the environment, replacing allergen harboring items such as pillows and carpets. However, such recommendations may be challenging for patients. In addition, cool compresses can be done to prevent rubbing of the eye. Ocular lubricating eye drops can be used to dilute the inflammatory agents in tears and wash away the allergen to reduce itching and to prevent further worsening of symptoms. The mainstay of treatment is the use of lubricants, antihistamines and mast cell stabilisers. These are indicated in all forms of disease. Steroids are to be given under proper medical care when the cornea is involved, or the disease is very severe with itching. Allergic conjunctivitis being the most painful disease affecting

the eye is the one that makes us cover our self to avoid the spread of the disease. In the process of covering and avoiding the contact, people try to find out an immediate and a fast solution to overcome the problem. Therefore, different practices are being followed around the world and still no medicine has bestowed the immediate relief for the same. Ayurvedic system of Medicine being the oldest traditional medicine of India has the vast description of the disease abhishyanda with its various types. Vatajaabhishyanda is one among them that can be contemplated as allergic conjunctivitis. Varieties of therapeutic procedures including aushadadravyas, pathya and apathya have been described in detail in the science. Incorporating the same would help the patient in providing the relief from its root and in turn the recurrence.

CONCLUSION

The present study provides the complete comprehension about the disease named Vatajaabhishyanda, the Allergic conjunctivitis including its etiology, signs, symptoms and management that are explained in Ayurveda system of medicine. The detailed in-depth knowledge of Vatajaabhishyanda and its management helps in providing an alternative, safe and an affordable treatment to the modern conventional management of Allergic conjunctivitis with no adverse effects.

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