



A REVIEW ARTICLE ON ABHISHYANDA VYADHI(NETRA-ROGA)

¹ Dhudhat Sarala ,

²Padavi Dilip

¹Professor and HOD Shalaykatantra Dept. R. A. Podar Medical (Ayu) College, Worli
Mumbai-18

²P. G. Scholar (M.S) R. A. Podar Medical (ayu) College, Worli Mumbai-18

ABSTRACT

Ayurveda is one of the great gifts of the ancient India to mankind. It is one of the oldest scientific medical systems in the world, with a long record of clinical experience. However, it is not only a system of medicine in the conventional sense of curing disease but also dealing with day to day life. Our eyes are the most important organs in *UrdhawajatrugataSthana*. We must protect and take care of these delicate organs. *Urdhawajatrugatavyadis* means the diseases above the clavicle including the eye. SJOGREN'S SYNDROME and VATAJA ABHISHYANDA can be correlated according to their signs and symptoms mentioned in Samhita as well as in modern science. Indications, probable mode of action and IMPORTANCE of Ayurveda treatment for SJOGREN SYNDROME will be discussed in this present review article.

Keywords: *VatajaAbhishyanda* ,Sjogren's syndrome, *Snehan, Swedan* ,*Tarpan* ,*Netrabasti, Samprapti, ashchotana, Raktamokshan*, conjunctivitis.

INTRODUCTION:In *ayurveda*, *Abhishyanda* is main cause of all diseases of *NETRAROGA* ^{su. Uttar 6-5}

Sjogren's syndrome is due to aqueous deficiency. It is an autoimmune chronic inflammatory disease with multi system involvement. It typically occurs in women between the age group of 40 to 60yrs. Incidence is 3 - 6 per 100,000 per year; and its estimated prevalence is upto 3% of population

Female: male ratio is 9:1 with average age of onset between 40 - 60 years

In primary sjogren's syndrome, patients presents with sicca complexa combination of keratoconjunctivitis and xerostomia(dryness of mouth)

In secondary sjogren's syndrome patients presents with dry eye, dry mouth. These all are associated with an autoimmune disease commonly present rheumatoid arthritis.

MATERIAL AND METHODS :

Protocol

This review was conducted with reference to the Preferred Reporting Items for reviews. The review focused on studies which highlighted aetiological and pathological components of the disease, as well as potential therapeutic targets and interventions.

Eligibility Criteria: Published data on Sjogren's syndrome from 1980 onwards were searched. To be eligible, studies had to have a focus on SS with regards to at least one of the following: clinical manifestations, pathophysiology and treatment. Case reports, reviews, editorials and letters were excluded.

1)Pathophysiology -

1.Ayurvedic samprapti-vitiated (KUPIT) *Doshas* moves upward direction towards the eyes ,invades through various channels and lead to malfunctioning of various sub-structures of eye .Vitiated *Doshas* propagates through the channels or vessels (*siras*) towards the head regions .

They enter various part of the eye such as lids, conjunctiva, sclera, cornea, iris ,pupil , choroid, ciliary body , and retina causes diseases of eye.

Pathogenesis of Abhishyanda : su. Uttar.1-20.21

Samprapti (pathogenesis) is the process which occurs in the body in between *NidanaSevana* and the stage of *Rupa* of the diseases.

The knowledge of the disease process is important from the treatment view point, because without proper knowledge of “*Anshaanshakalpana*” of *Dosha*, one cannot get success in the treatment, hence the knowledge of *samprapti* is essential to cure the disease. Maximum importance has been given by all the *Acharyas* on the stage of Pathogenesis as it helps in the presentation of the disease.

- 1).*SampraptiGhataka*
- 2).*Dosha - vatapradhanaTridoshadushti.*
- 3).*Dushya - Rasa and Rakta*
- 4). *Agni –ras,raktdhatu,Mandagni*
- 5).*Srotasadushti- Rasavaha and Raktavaha*
- 6).*Rogamarga - Madhyamamarg*
- 7)*Adhishthana - Sarvaakshi*

Abhishyanda is of four types *vataja ,pittaja ,kaphaja ,raktaja* .su. 5-6

VATAJ ABHISHYAND:

VatajaAbhishyanda is characterized by *Nistoda* [Pricking pain], *Sangharsha* [Foreign body sensation], *Shishirashruta*[Watery discharge/ Cold lacrimation],*AlpaShopha* [Mild chemosis],*Vishushka Bhava* [Feeling of dryness], *Parushya* [Dryness] which are very similar to the most of signs and symptoms of the SJOGREN SYNDROME . So, *VatajaAbhishyanda* can be co-related with SJOGREN’S SYNDROME.In the current era human beings are highly exposed to pollution

SJOGREN’S SYNDROME-

Sjogren’s syndrome is an autoimmune disorder caused by the lymphocytic infiltration of exocrine glands resulting in glandular dysfunction, preferentially of the salivary and lacrimal glands.¹

It can be classified into two types, namely

1. PrimarySjogren’s syndrome and
- 2.Secondary Sjogren’s syndrome.

Primary Sjogren’s syndrome occurs in the absence of other autoimmune diseases and is characterized by keratoconjunctivitis sicca means dry eyes and xerostomia(dry mouth), collectively called the sicca syndrome.

In contrast, secondary Sjogren’s syndrome presents along with other autoimmune diseases such as rheumatoid arthritis and systemic lupus erythematosus (SLE)². The prevalence of SS is estimated to be approximately 3% in subjects 50 years or older, with a female to male ratio of 9:1³. Conditions associated with SS include rheumatoid arthritis, lupus erythematosus⁴ and scleroderma⁵. The clinical manifestations are often vague and mistakenly interpreted and attributed to other medical conditions or iatrogenic disorders. As such, incorrect diagnosis of SS is common and approximately half of all patients are thought to be undiagnosed.⁶

This study aims to review the etiology of Sjogren’s syndrome, highlight aspects that contribute to the pathophysiology of the disease and *vatajaabhishyand* to explore treatment options that target different mediators of pathogenesis.

Pathology features; include focal accumulation and infiltration by lymphocytes and plasma cells with destruction of lacrimal and salivary glandular tissues.

Clinical features- symptoms of sjogren’s syndrome includes,

- 1) Irritation
- 2) foreign body sensation
- 3) feeling of dryness
- 4) ocular discomfort

Treatment -

As for the cure of the sjogren syndrome disease, there is at present no definitive treatment .Artificial tears , lubricant eye drop are only treatment ,For arthritis only NSAIDS drug can be used. For dry mouth only sip of water can be taken, this modern treatment is expensive & it should be life long. Ayurveda can provide better relief in such manifestation .

Modern science doesn't have any effective and definite treatment on this disease .In Ayurveda, there is no direct reference, while searching solution for Sjogren's syndrome.In such condition where the name of disorder such as s'jogren syndrome is not mention in Ayurveda , Acharya advised to study pathophysiology of disorder & management of the the patient logically . Some similar symptoms of sjogren's syndrome shows some disease like *VatajaAbhishyanda* General line of treatment explained by our Acharyas for *VatajaAbhishyanda* are *Snehanswedan*, *SnigdhaAnnapana*, *Snehavirechana* ,*Basti* , *Siravedhana*, *Tarpana*, *Putpaka*, *Dhoompana*, *Nasya*, *Aschyotana* and *SnehaParisheka* .Acharya Sushruta has recommended 'Kriyakalpa' for the management of *VatajaAbhishyanda*, along with other forms of treatment.The term *Kriyakalpa* refers to the treatment, which can be applied for almost all types of eye diseases; and it comprises of *Tarpana*, *Putapaka*, *Anjana*, *Ashchyotana* and *Seka*. Among these *Ashchyotana* is a simple, safer, most economical procedure, which is indicated in the initial stage of the eye diseases. The drugs having *Vatashamaka*, *Vedanasthapana*, *Vranaropana* and *Chakshushya* properties may be helpful in

the treatment of the disease *VatajaAbhishyanda*.

Snehan

Snehan is a process wherein the body is lubricated with the help of oil or medicated ghee (clarified butter). The person is advised to consume medicated oil or ghee in large quantities. After this, the person is instructed to observe restrictions such as drinking only lukewarm water throughout the day, eating only when hungry and refraining from sleeping during day time. Even the food has to be very simple - as advised by the doctor.

Snehan is a pre cursor to the main procedure of *panchakarma*.

Abhyantarsnehana

This process comprises consumption of prescribed amounts of warm herbal ghee. The ghee is consumed first thing in the morning. The dose is increased gradually, depending on your body's requirements. The patient is unable to eat until the ghee is digested, which is signaled by return of the patient's appetite.In order to prepare for the main eliminative procedures, the patient receives internal and external oleation each day. The time needed for the oleaginous substances to reach all the dhatus takes 5 - 7 days. Hence these treatments can continue for up to 7 days. There are signs which indicate that the *snehan* therapy has been successful. For example, the skin displays a soft and shiny appearance and feels slightly unctuous. After this *shodhan* has to be followed.Due this *shodhan*,obstruction in srotas will be relieved and normal functions of eye will get improved.

BahyaSnehan

This procedure employs a specific form of massage (*abhyanga*). The therapist applies herbal oil to the skin before starting the massage. There is great significance to the

strokes used in *bahyasnehan*, for they regulate the movements of five types of *vata*. It also improves circulation. It is helpful in *vatajnetravayadhi*.

Swedan

In *netravayadhi swedan* is avoided ,but in several conditions *swedan* can be given in *netravayadhi* with expert supervision .Mostly *sarvangswedan* can be preferred for *netravayadhi* .For ocular *swedan* ,mild *swedan* can be applied.

Tarpan

Tarpan means giving strength to the eyes. The medicated ghee is poured over the eyelids in an enclosure built around the eye out of wheat flour. It is said to be an excellent treatment to improve vision and clarity of the mind.This treatment aims to provide optimum rejuvenation to eyes. Dough of Urad (black gram) is put around the eye ball in such a way that a dam like appearance is seen. Then herbal medicated healing ghee is put in this groove to lubricate the eye and surrounding areas which will be kept warm for 30 – 35 minutes. This provides improved vision with beautiful eyes and strengthening of eye tissues.

Benefits:

- 1) Cleanses eyes by removing dust from the cornea.
- 2) Moisturizes the dry eye.
- 3) Improvises blurred vision.
- 4) Reduces burning of eyes.
- 5) Aids in the improvement of eye disturbances and thus improves clarity of the mind.

Indication:

Dry eyes syndrome
 Burning in the eyes
Vataj diseases of eyes
 Conjunctivitis
 Pain in the eyes
 Watering eyes

Night blindness

Squinting

Myopia

Reduces Dark circles if regularly done

ASHCHOTANA

The unique therapy of dropping medicines in liquid form on the eyes with the eyes kept open is known as *ashchotana*.

TYPES OF ASHCHOTANA

Quite similar to the *akshiseka* the *ashchotana* therapy is also classified into three as *snehana*, *ropana* and *lekhanaashchotana*. Medicine that are bitter in taste are used in the *snehanaashchotana*. Cold medicines that are sweet in taste are used for the *ropanaashchotana*.

Likewise warm medicines having *ruksha* (dry) property and are bitter in taste are used in *lekhanaashchotana* in general.

PROCEDURE

Ashchotana therapy is done during the day time, employing this procedure at night is contraindicated. There is no specific preparation of the patient to carry out this therapy. The patient is made to lie down on the treatment table in supine position. The body is draped up to the neck. Both the eyes are treated one after the other. The lower lid is retracted with one hand.

The liquid medicine is poured drop by drop on the cornea of the eye from a height of 2 *angula*. While dropping the medicine the patient is asked to keep his eye open. In the cold weather warm medicine is dropped into the eyes, but in hot weather there is no need to make the medicines warm.

DOSE OF MEDICINE

Dose varies according to the type of *ashchotana* therapy. 8 drops is the dose of *lekhanaashchotana*. In case of *ropanaashchotana* 10 drops of the medicine is dropped into the eyes. Further

in the *snehana* type of *ashchotana* 12 drops of the medicine is dropped into each eyes.

Duration of Ashchotan

Installation of the medicines.

It is left undisturbed for 100matra (30seconds)

INDICATIONS: *Aschotana* is the first line of treatment in the eye diseases. *Aschotana* is contraindicated in night & should be done only during day time: Morning in *Kaphaja* diseases Afternoon in *pittaja* diseases Evening in *vataja* diseases
Benefits: This will relieve-*Ruk, todha* - Painful conditions .*Kandu*-Scratching.*Kharsha* - Irritation or foreign body sensation in eyes. *Asru* - Excessive watering. *Dhaha* - Burning sensation of eyes. *Raga* - Redness or congestion. *Paka, soph* - Features of inflammation in eyes.

PROBABLE MODE OF ACTION: The drug mixes with tears, distributes uniformly over the eyes, giving lubrication, smoothening effect and surface which protect the eyes.

Raktamokshan

It prevents skin diseases, swollen glands, general swellings, blood diseases. If done at regular interval, *siravedh* and *jalavkavcharan* are useful in eye diseases too .In sjogren syndrome *jalavkavcharan* useful for *raga* and *vishushkbhava* complaints. In *abhishyands* there is *raktgatsamata* means *kledopatti* in the eyes. So *sthanik raktmokshan* helps to remove the *dushtrakt*. So it is very much helpful in *vatajabhishyand* as it is *vatavyadhi*.

Basti

Basti therapy means medicated enema. *Basti* is one of the five main *panchakarma* procedures for the loosened *vatadoshas* are eliminated from the body through the rectum. The *vata* is mainly located in the

colon and bones. It is thus mainly used to treat *vatadosha* related conditions.

During the treatment medicinal substances such as, herbal oils and decoctions in a liquid medium are administered into the rectum.

Basti therapy is an effective treatment for people who wish to rejuvenate the body and provide it with strength and longevity. Moreover, diseases such as common cold, problems such as in *netravvyadhi*, constipation, distention, arthritis and backache can be treated with the help of *basti* therapy. .

Types of *basti* include *niruha, anuvasan, karma, kaal, yoga*, etc. .

In sjogrens syndrome *basti* can be given for arthritis, and removes *kleda* from eye.

DISCUSSION

Ayurveda can also be useful in SJOGREN SYNDROME (dry eye) conditions.

1. Treatment of *VATAJA ABHISHYANDA* in this paper to justify that *ayurvedic* treatment can be useful in DRY EYE conditions.
2. The study of literature reveals that *ayurvedic* treatments in *vatajaabhishyanda* are the appropriate management in sjogren syndrome. So has best to be prescribed.
4. *Tarpan* is the herbal medicated healing ghee is put in this groove to lubricate the eye and surrounding areas.
5. *Aschotana* giving lubrication, smoothening effect and surface which protect the eyes.
6. *Basti* therapy is an effective treatment for people who wish to rejuvenate the body and provide it with strength and longevity.
7. *Sthanik raktmokshan* helps to remove the *dushtrakt*. So it is very much helpful in *vatajabhishyand* as it is *vatavyadhi*

CONCLUSION

General line of treatment explained by our Acharyas for VatajaAbhishyanda are Snehanswedan, SnigdhaAnnapana, Snehavirechana ,Basti , Siravedhana, Tarpana, Putpaka, Dhoompana, Nasya, Aschyotana andSnehaParisheka .Acharya Sushruta has recommended 'Kriyakalpa' for the management of VatajaAbhishyanda Here it may be concluded that Ayurveda medicine is useful in management of SJOGREN SYNDROME (DRY EYE conditions).

References

1. Borchers AT, Naguwa SM, Keen CL, Gershwin ME. Immunopathogenesis of Sjogren's syndrome. Clin Rev Allergy Immunol. 2003;25(1):89-104.
2. Waterman SA, Gordon TP, Rischmueller M. Inhibitory effects of muscarinic receptor autoantibodies on parasympathetic neurotransmission in Sjogren's syndrome. Arthritis Rheum. 2000;43(7):1647-54.
3. Gaubitz M. Epidemiology of connective tissue disorders. Rheumatology (Oxford). 2006;45 Suppl 3:iii3-4.
4. Harley J, Scofield R, Reichlin M. Anti-Ro in Sjogren's syndrome and systemic lupus erythematosus. Rheumatic diseases clinics of North America. 1992;18(2):337-58.
5. SHEARN MA. Sjögren's syndrome in association with scleroderma. Annals of internal medicine. 1960;52(6):1352-62.
6. Kassan SS, Moutsopoulos HM. Clinical manifestations and early diagnosis of Sjogren syndrome. Archives of internal medicine. 2004;164(12):1275-84.

Corresponding Author:

Dr. Sarala Dhudhat, Professor and HOD
Shalaykatantra Dept. R. A. Podar Medical
(Ayu) College, Worli Mumbai-18
Email: dilippadavi@gmail.com

Source of support: Nil

Conflict of interest: None

Declared

Cite this Article as : [Dhudhat Sarala et al : A Review Article on Abhishyanda Vyadhi(Netra-Roga)] www.ijaar.in : IJAAR VOLUME III ISSUE X SEP-OCT 2018 Page No:1471-1476