

SUCCESSFUL AYURVEDIC MANAGEMENT OF VATAJA ABHISHYANDA W.S.R. TO SIMPLE ALLERGIC CONJUNCTIVITIS – A CASE REPORT

Dr. Mahima Choudhary*¹, Prof. Gulab Chand Pamnani², Dr. Sunil Kumar Chahil³, Dr. Aanchal Sharma⁴

¹Ph.D. Scholar, Department of *Shalaky Tantra*, National Institute of Ayurveda Deemed to be University, Jaipur.

²Professor, Department of *Shalaky Tantra*, National Institute of Ayurveda Deemed to be University, Jaipur.

³P.G. Scholar, Department of *Shalaky Tantra*, National Institute of Ayurveda Deemed to be University, Jaipur.

⁴U.G. Scholar, National Institute of Ayurveda Deemed to be University, Jaipur.



*Corresponding Author: Dr. Mahima Choudhary

Ph.D. Scholar, Department of *Shalaky Tantra*, National Institute of Ayurveda Deemed to be University, Jaipur.

DOI: <https://doi.org/10.5281/zenodo.20444250>

How to cite this Article: Dr. Mahima Choudhary*¹, Prof. Gulab Chand Pamnani², Dr. Sunil Kumar Chahil³, Dr. Aanchal Sharma⁴. (2026). Successful Ayurvedic Management of Vataja Abhishyanda W.S.R. To Simple Allergic Conjunctivitis - A Case Report. World Journal of Pharmaceutical and Life Sciences, 12(6), 178–181.

This work is licensed under Creative Commons Attribution 4.0 International license.



Article Received on 27/04/2026

Article Revised on 18/05/2026

Article Published on 01/06/2026

ABSTRACT

Vataja Abhishyanda is described in Ayurveda as a type of *Abhishyanda* which is a *Sarvagata Netraroga* and the root cause of many eye disorders and it closely resemble with Simple Allergic Conjunctivitis described in modern ophthalmology. Conjunctivitis refers to inflammation of the conjunctiva resulting from infectious, allergic or environmental causes and is among the most common eye disorders worldwide. In *Abhishyanda*, inflammation primarily affects the conjunctiva and may spread through *Rakta* and if left untreated, it can progress to *Adhimantha*, which is associated with severe ocular pain. In this case, a Forty-year-old male patient presented with complaints of itching, watering, redness and foreign body sensation (irritation) in both eyes. Based on the clinical features, the condition was diagnosed as *Vataja Abhishyanda* (Simple Allergic Conjunctivitis). The patient was managed with Ayurveda interventions which include *Chitrakadi Vati*, *Ksheer Saindhava Netra Pariseka*, *Punarnavadi Kashaya* over a specific treatment period of two months. After completion of therapy, marked improvement was observed in symptoms such as itching, redness, watering and ocular discomfort, with no recurrence noted during the follow-up period.

KEYWORDS: *Vataja Abhishyanda*, Simple Allergic Conjunctivitis, *Ksheer Saindhava Netra Pariseka*, *Chitrakadi Vati*, *Punarnavadi Kashaya*.

INTRODUCTION

In *Shalaky Tantra*, *Abhishyanda* is described as one of the Seventeen types of *Sarvagata Netra Rogas*. According to the classics, *Abhishyanda* is classified into four types as *Vataja*, *Pittaja*, *Kaphaja* and *Raktaja Abhishyanda*. The condition involves excessive *Kledana* of *Doshas* and *Dhatus* leading to profuse ocular discharge, which is considered a key clinical feature of the disease. *Vataja Abhishyanda* is explained in classics under *Abhishyanda* type and its *Lakshanas* include *Nistoda* (pricking pain), *Stambhana* (stiffness), *Sangharsha* (foreign body sensation), *Parushyata* (roughness), *Vishushkabhava* (dryness), *Shishirashutha* (cold discharge) and *Shirobhitapa* (headache).^[1] Simple Allergic Conjunctivitis is a common but often overlooked condition.^[2] Simple Allergic conjunctivitis

can be caused by several factors, such as genetic predisposition, inflammation, air pollution, atopy, exposure to pollen, and contact with pets. It is estimated to affect around 10% to 30% of people in the general population. It typically begins before the age of 20, with lower rates seen in older age groups. Although Allergic Conjunctivitis may occur on its own, it is often linked with other Allergic disorders such as Allergic Rhinitis, Atopic Dermatitis and Asthma.^[3] *Acharya Sushruta*^[4] classified *Abhishyanda* under *Aupsargika Roga* (communicable diseases). He explained that the disease can spread through factors such as direct contact with an infected person, inhalation of air exhaled by the affected individual, and sharing food, bedding, clothes, or cosmetics with someone suffering from the disease.

Acharya Vagbhata described several general symptoms, including nasal blockage and swelling, pain in the temples, eyebrows, and forehead that may be sharp or pricking in nature, and a sensation of dryness and coldness in the eyes. He also mentioned the feeling of a foreign body in the eye, either fixed like a stone or moving like an insect, along with painful movements of the eyelids and eyeballs caused by swelling. These manifestations indicate marked ocular discomfort and irritation, often associated with disturbances in the nasal and frontal regions. For both Seasonal and Perennial Allergic Conjunctivitis, in allopathy science combination of eye drops containing antihistamines and mast cell stabilizers are commonly preferred and widely used as the primary treatment option in current practice but they does not provide permanent relief. The management measures included in Ayurveda Samhita for *Abhishyanda* are *Langhana* (fasting), *Alepana* (application of medicated paste over the eyes), *Sweda* (sudation therapy), *Virechana* (purgation), *Siravyadha* (venepuncture), *Nasya*, *Seka* and *Aschyotana*.^[5] Acharya Sushruta has also described intake of *Tikta Ahara*, *Snehana* with *Purana Sarpi*, *Siramokshana*, *Snaihika Virechana* followed by *Basti* along with *Tarpana*, *Putapaka*, *Aschyotana*, *Nasya*, *Sneha Pariseka*, and *Shirobasti* as beneficial therapies. For the elimination of vitiated *Dushya*, *Raktamokshana* is advised initially, followed by treatments aimed at pacifying the aggravated *Doshas*. Acharya Vagbhata, in *Ashtanga Hridaya*, also emphasized certain lifestyle restrictions in *Abhishyanda*, advising patients to avoid fasting (*Upavasa*), night awakening (*Ratri Jagarana*), anger (*Krodha*), and grief (*Shoka*). Allergic Conjunctivitis can progress to Keratoconjunctivitis and potentially lead to reduced vision^[6] therefore its early and permanent management is of prime importance.

MATERIALS AND METHODS

Case Report

A Forty-year-old male patient, presented with complaints of itching, watering, redness and foreign body sensation

(irritation) in both eyes since 6 months.

History of Present Illness

The patient was apparently healthy 6 months earlier gradually, he developed symptoms such as itching, watering, redness and foreign body sensation (irritation) in both eyes which sometime become serious and sometimes resolve on its own so he came to NIA Jaipur, Shalaky Tantra, OPD for consultation.

Past History

There was no history of systemic illness or ocular trauma.

Family History

No significant family history was reported.

Personal History

- Appetite – Reduced
- Bowel habits – Irregular
- Sleep – Normal
- General examination
- BP- 122/78 mm hg
- PR – 78/min
- R.R – 22/min

Physical Examination

Ashtavidha Pareeksha: According to Ayurveda assessment, the *Ashtavidha Pariksha* findings are summarized in below table:

• Nadi (Pulse)	V-P
• Mootra (Urine)	Normal
• Mala (Stool)	Irregular
• Jihwa (Tongue)	Coated
• Shabda (Speech)	Normal
• Sparsha (Touch)	Normal
• Drika (Vision)	Vikrutha
• Akruti (Body build)	Normal

Examination of Eye (Slit Lamp Examination and Snellen chart)

Ocular Examination	Right Eye	Left Eye
Lid	Presence of papillae	Presence of papillae
Conjunctiva	Congested	Congested
Sclera	Normal	Normal
Cornea	Clear	Clear
Anterior chamber	Normal depth	Normal depth
Iris	Normal	Normal
Lens	Clear	Clear
Visual Acuity (Unaided Far)	6/6	6/6

Assessment Criteria of the Case

Subjective Parameters

S. N.	Symptoms	Grading's
1.	Nistoda (Pricking sensation)	0 - Absent 1 -Mild / Not Continuous 2-Moderate / Continuous but patient can manage routine work with discomfort 3-Severe / Continuous and routine work is hampered

2.	Vishuskabhava (Feeling of Dryness)	0 -Absent / >15 mm wetting 1 -Mild / 10-15 mm wetting 2 -Moderate / 5 - 10 mm of wetting 3 -Severe / < 5 mm of wetting
3.	Shishirashruta (Lacrimation)	0- Absent / No Watering 1- Mild / 2-4 Times / Day 2 - Moderate / 5-10 Times / Day 3 - Severe / More than 10 times
4.	Kandu (Itching)	0 - Absent 1 - Mild / Not Continuous 2- Moderate / Continuous but patient can manage routine work with discomfort 3- Severe / Continuous and routine work is hampered

Objective Parameters

S. N.	Symptoms	Grading's
1.	Presence of Papillae	0 - Absent 1- Micro Papillae (Tiny slightly elevated red dots that give rise to a smooth velvety appearance) 2 - Macro Papillae (Less than 1 mm in diameter) 3 - Giant Papillae (More than 1 mm in diameter)
2.	Congestion of conjunctiva	0 - Absent 1- Mild Congestion in either Palpebral or Bulbar Conjunctiva 2 - Moderate Congestion in Bulbar and Palpebral Conjunctiva less than ½ part of Eye 3-Severe Congestion in Both Palpebral and Bulbar Conjunctiva more than ½ part of Eye

Treatment

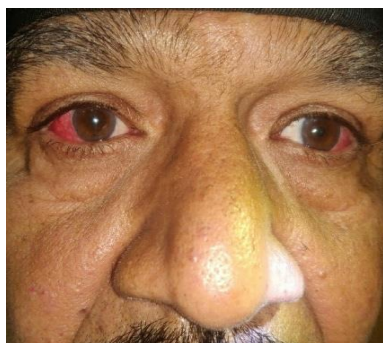
The patient was advised to follow a two-month treatment plan, after which a significant improvement in his condition was noted. The regimen included *Chitrakadi Vati* (500 mg) twice a day BD before food for 7 days, *Ksheer Saindhava Netra Pariseka* twice a day for 600 *Matra Kala* (6 minutes) and *Punarnavadi Kashaya* (45 ml) twice a day before food for 30 days. This

comprehensive treatment protocol was continued for two consecutive months.

RESULT

Total treatment duration lasted for two months, at the end of treatment, the patient's *Vataja Abhishyanda*, symptoms got improved with no further progression observed during follow-up.

S. N.	Symptoms	Grade before treatment		Grade after treatment	
		Right Eye	Left Eye	Right Eye	Left Eye
1.	<i>Nistoda</i> (Pricking sensation)	2	1	0	0
2.	<i>Vishuskabhava</i> (Feeling of dryness)	2	2	1	1
3.	<i>Shishirashruta</i> (Lacrimation)	2	2	0	0
4.	<i>Kandu</i> (Itching)	2	2	0	0
5.	Presence of Papillae	2	2	1	1
6.	Congestion of conjunctiva	2	2	0	0



Before Treatment



After Treatment

DISCUSSION

The general treatment principles for *Abhishyanda* described by the *Acharyas* include *Langhana*, intake of

Tikta Anna (bitter foods), *Alepana* (local application), *Swedana* (sudation therapy), *Siravedhana* (bloodletting), *Virechana* (purgation therapy), *Anjana* (application of

medicated collyrium) and *Aschyotana* (instillation of medicated eye drops).^[7] *Chitrakadi Vati* prescribed to the patient has *Chitraka*^[8] which is *Katu, Tikta, Laghu, Ruksha, Tikshna, Ushna, Katu, Deepana, Pachana* properties and also most of the drugs of *Chitrakadi Vati* has same properties therefore they collectively help in balancing *Kapha* and *Vata dosha*. *Chitrakadi Vati* also by reducing *Ama*, enhances *Jatharagni* (digestive fire) and improves digestion^[9] so cope up *Kledana* of *Doshas* and *Dhatu*s which is present in *Vataja Abhishyanda*.

Ksheer Saindhava Netra Pariseka was given to the patient as *Ksheera* has properties like *Snigdha, Guru Guna, Madhura Rasa, Sheeta Veerya* and is *Vata-Pittahara*.^[10] *Saindhava*^[11] is also *Chakshushya dravya* helpful in betterment of Eye. *Parisheka* is given as mode of action of *Parisheka* is quick and efficient as the absorption through thin layer of Eyelid skin is enhanced by heat and continuous exposure to the liquid drug for a short period of time as the thickness of eyelid skin is 0.05cm which is the thinnest skin in our body and increased temperature of skin increases the penetration by direct effect on diffusion within the skin. The temperature affects stratum corneum causing higher permeability and enhancing dermal absorption, thereby use of *Parisheka* drug at a specific temperature over the Eyelids for a proper time of *Dhara* gives good absorption of medicines. *Punarnavadi Kashaya* is advised in *Samhitas* for *Abhishyanda* and it exhibits *Tridosha shamaka* properties. Most of the drugs of *Punarnavadi Kashaya* possess *Madhura, Katu* and *Kashaya Rasa* along with *Snigdha Guna, Ushna Veerya* and *Madhura Vipaka*. These characteristics help interrupt the pathogenesis of *Vataja Abhishyanda*, thereby reducing symptoms such as pain (*Toda*), stiffness (*Stambha*), irritation (*Sangharsha*), itching (*Kandu*), burning sensation (*Daha*) and redness (*Ragata*). In addition, *Punarnavadi Kashaya* have *Rasayana, Chakshushya, Shothahara, Raktastambhaka, Deepana, Pachana, and Vat anulomana* actions. They help reduce inflammatory changes, thereby improving clinical signs like conjunctival hyperemia, swelling, papillae, and follicles. *Punarnavadi Kashaya* also reduces *Kapha* and *Vata Dosh*a.

CONCLUSION

Simple Allergic conjunctivitis is among the most frequently seen conditions in ophthalmology OPD. Classical Ayurveda texts describe several specialized treatment approaches for *Abhishyanda* such as *Langhana, Alepana, Sweda, Virechana, Siravyadha, Nasya, Seka,* and *Aschyotana*. Clinical management using *Chitrakadi Vati, Ksheer Saindhava Netra Pariseka* and *Punarnavadi Kashaya* has shown notable improvement in the signs and symptoms of Simple Allergic Conjunctivitis. Overall, this treatment approach resulted in significant subjective relief as well as objective clinical improvement. Hence, it can be inferred that Ayurveda management is beneficial in the treatment of *Vataja Abhishyanda*.

REFERENCES

1. Acharya YT, ed, Sushruta Samhita of Sushruta with the Nibandhasangraha Commentary of Sri Dalhanacharya and the Nayanachandrika Panjika of Sri Gayadasacharya on Nidanasthana, Uttarantra, 6th Chapter Sloka 6, Varanasi: Chaukambha Surabharati Prakashan, 2019; 603.
2. La Rosa M, Lionetti E, Reibaldi M, Russo A, Longo A, Leonardi S, Tomarchio S, Avitabile T, Reibaldi A. Allergic conjunctivitis: a comprehensive review of the literature. Ital J Pediatr, Mar. 14, 2013; 39: 18.
3. Villegas BV, Benitez-Del-Castillo JM. Current Knowledge in Allergic Conjunctivitis. Turk J Ophthalmol, Feb. 25; 2021; 51(1): 45-54.
4. Sushruta Samhita of Maharishi Sushruta: With English translation by K.L. Bhishagaratna Vol.-III: (1991); Chaukhambha Orientalia, Varanasi.
5. Acharya YT, ed, Sushruta Samhita of Sushruta with the Nibandhasangraha Commentary of Sri Dalhanacharya and the Nayanachandrika Panjika of Sri Gayadasacharya on Nidanasthana, Uttarantra, 9th Chapter Sloka 3-4, Varanasi: Chaukambha Surabharati Prakashan, 2019; 611.
6. Labib BA, Chigbu DI. Therapeutic Targets in Allergic Conjunctivitis. Pharmaceuticals (Basel), Apr. 28, 2022; 15(5).
7. Indradev tripathi, Gadanigraha 3rd Vol, Chaukhambha Sanskrit Sansthan, Varanasi, 2016; 95.
8. Deshpande A, Dravyagunavidyan, Proficient public house pune, 641.
9. Laksmipati Sastri, Yogaratnakar, Purvardha, Grahani adhya, Chaukhamba prakashan varanasi, 284.
10. Charya Shukla Vidyadhar, Prof. Tripathi Ravi Dutt. Caraka samhita of Agnivesa (Vol-1), Chaukhamba sanskrit pratishthan, Delhi, Ch.-27/233, 412.
11. Yadavji Trikamaji Acharya, Sushruta Sssssamhita, reprint edition, Nidhandhasangraha Sanskrit Commentary by Dalhanacharya and Nyayachandrika Panjika of Gayadasa, Uttarantra, by Chaukhamba Surbharati Sansthan, Varanasi, 2008.