



A CASE STUDY: AYURVEDIC MANAGEMENT OF SHUSHKAKSHIPAKA W.S.R TO DRY EYE SYNDROME

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ABSTRACT

Suskāksipāka is one of the *Sarvagatha Netra Roga* characterised by *Daruna*, *Ruksksha Varthma*, *Avila Darshanam*. Tears are clear liquid which keep the eyes wet, smooth, lubricant and help to see clearly by focusing the light. Dry eye syndrome is a condition when the tears aren't able to provide adequate lubrication for eyes. Shushkakshipaka can be correlated with dry eye syndrome. This is a case report of 38 years old woman who approached Shalakyta Tantra eye OPD of Government Ayurveda medical College, Bengaluru with feeling of dryness on both eyes associated with blurring of vision, redness of eyes since 6 months. The subject was thoroughly examined and diagnosed as Shushkakshipaka. The treatment was planned according to the Chikitsa Sutra of Shushkakshipaka. The subject was treated with Nasya, Tarpana, Kriyakalpa and Shamanoushadhis. The subject had shown good improvement both subjectively and objectively. Discussion: The conventional and effective treatment of dry eye are artificial tear drops and lubricants which gives a temporary relief from the symptoms. Here the Ayurvedic treatment are adopted which are effective and not having side effects.

KEYWORDS: *Shushkakshipaka*, *nasya*, *tarpana*, *seka* and *shamanoushadhi*.

INTRODUCTION

Dry eye syndrome (DES) is a multifactorial disorder of the tears and ocular surface^[1] have clinical features like irritation, foreign body sensation, feeling of dryness, itching, non specific ocular discomfort, chronic sore eyes and photophobia etc³¹. For treatment the lubricating drops like- Carboxy methyl cellulose 0.5%, used which reduces the effects of Dry Eye, but its preservatives are harmful to eye. So long term use is not possible and effects of artificial drops are temporary. Also other treatment modalities or surgery are not accessible and not so effective. Therefore these limitations make us think about effective and alternative treatment for dry eye. This opens the door to other systems of medicine including Ayurveda to suggest and contribute alternative treatment modalities to check the suffering from dry eye.

Suskāksipāka is one of the classification given by *Acārya Suśruta* for eye diseases is "Diseases affecting all parts of eye ball i.e. *Sarvagata Netraroga*; includes disease *Suskāksipāka*- a very similar to Ocular surface disease i.e. Dry Eye Syndrome in modern ophthalmology. *Suskāksipāka* described as a *Vāta* disease in *Suśruta Samhita*^[2], *Vātapitta* vitiated condition by *Vāgbhata*^[3]

and *Śārangadhara* considered this as *Vātaraktaja*.^[4] By analyzing these different opinions it is clear that vitiation of *Vāta*, *Pitta*, and *Rakta* play the major role in the disease pathology which makes the eye dry by reducing tear secretion or by changing the quality of tears, (Tear film defect). The disease is characterised by features such as *Kunita vartma* (inability to close lids), *Dāruṇa and Ruksa vartma* (hard, rough lids), *Avila darsana* (blurring of vision) and *Daruna Pratibodhana* (difficulty in opening the lids).^[5]

The *Suskāksipāka* mentioned in *Suśruta Samhitā* is seem to be its early stage but description of *Acārya Vāgbhata* is that of well established advanced disease state with preponderance of *Pāka* - inflammation and it is mainly due to vitiated *Vāta* and *Pitta* dosas. The disease is characterised by features such as *Kuṇita vartma* (inability to close lids), *Dāruṇa and Ruksa vartma* (hard, rough lids), *Avila darsana* (blurring of vision) and *Daruna Pratibodhana* (difficulty in opening the lids).^[6] The signs and symptoms of *Suskāksipāka* frame a picture of dry eye syndrome in modern science. Hence the treatment principle adopted here are the treatments told in *Shushkashipaka* with some *Kriyakalpa* which reduces

the *Vata Pitta Doshas*. i.e., *Nasya, Tarpana, Seka and Vidalaka*.

CASE REPORT

A 38 year old female patient presented to *shalakya tantra* OPD of GAMC and Sri jayachamrajendra Government ayurveda and unani hospital Bengaluru- 09 [OPD registration NO- 13654] with complaints of feeling of dryness on both eyes since 6 months. She also complains of redness of eyes and blurring of vision since 6 months. Previously she was taking allopathic medications but it was giving temporary relief and symptoms aggravates once she stops taking medication hence patient approached our hospital.

Chief complaints

Dryness of both eyes, redness of eyes and blurring of vision since 6 month.

Previous history

Patient was using methyle cellulose eye drops.

History of present illness

Patient was apparently normal 6 month ago and she gradually dryness on both eyes associated with redness

of eyes and blurring of vision since 6 months. Previously she was taking allopathic medications like methyle cellulose eye drops but it was giving temporary relief and symptoms aggravates once she stops taking medication hence patient approached our hospital.

History of Past Illness- Nothing significant.

Family history: Nothing significant.

Personal history

- Bowel: Regular
- Appetite: Good
- Micturition: 4-6 times/day
- Sleep: Sound

Ashtasthana Pareeksha

Nadi: 76/min

Mutra: 3-5times/day

Mala: Regular

Jihwa: Aliptha

Shabda: Prakrutha

Sparsha: Anushna Sheetha

Druk: Vikrutha

Akruthi: Madhyama

Table 1: On Slit lamp Examination.

Ocular structure	Right eye	Left eye
Eye brows	No abnormalities detected	No abnormalities detected
Eye lashes	No abnormalities detected	No abnormalities detected
Eye lid	No abnormalities detected	No abnormalities detected
conjunctiva	Congestion was present	Congestion was present
Sclera	No abnormalities detected	No abnormalities detected
Cornea	No abnormalities detected	No abnormalities detected
Anterior chamber	No abnormalities detected	No abnormalities detected
Pupil	Round,regular,reactive	Round regular reactive
Lens	No abnormalities detected	No abnormalities detected
IOP	Normal	Normal

Table 2: Visual Acuity.

Visual acuity	Without spectacles			With spectacles		
	OD	OS	OU	OD	OS	OU
Distant vision	6/18	6/18	6/18	6/6	6/6	6/6
Near vision	N6	N6	N6	N6	N6	N6

Table 3: Schirmer's Test Before Treatment.

Schirmer's test before treatment	
OD	7mm
OS	8mm

DIAGNOSIS- *Shushkakshipaka*.

INTERVENTION

- 1) *Nasya* with *anutaila* 8 drops in each nostril for seven days.
- 2) *Tarpana* with *drakshadi ghrita* for 5 days
- 3) *Seka* with *eranda moola ksheerapaka* for 7 days.

4) *Vidalaka* with *daruharidra* and *yashtimadhu churna* for 7 days.

5) Internal medicines

- *Jeevantyadi ghrita* 3 tsf with milk HS.

- *Tab saptamrita loha* 1 bd.

RESULTS

Total treatment duration was 26 days, subject showed improvement both subjectively and objectively. After treatment Schirmer's test result are shown in table no: 4. After treatment Visual acuity are shown in table no: 5.

Table no 4: Schirmer's Test After Treatment.

Schirmer's test after treatment	
OD	25mm
OS	28mm

Table no 5: Visual acuity After Treatment.

Visual acuity	Without spectacles			With spectacles		
	OD	OS	OU	OD	OS	OU
Distant vision	6/12	6/12	6/12	6/6	6/6	6/6
Near vision	N6	N6	N6	N6	N6	N6

DISCUSSION

The present case was *shushkakshipaka* and the aim of treatment was to achieve *vata pitta shamana* through *shodhana*, *shamana chikitsa* and certain *kriyakalpas*.

Mode of action of treatment

Urdhwajatrugata shodhana was done with *anutaila*. *Anutaila nasya* is indicated in *shushkashipaka* and *urdhwajatrugata roga*. *Tarpana* was done with *drakshadi ghrita*. Most of the drugs in *Drakshadi Ghrita* are having *Vata-Pittahara and Raktaprasadana* (blood purifier) properties. Thus it may prove beneficial in treatment protocol of Dry eye syndrome. *Seka* was selected for *Sthanika Brumhana*. Here, the formulation used are *Erandamoola Ksheerapaka*. *Eranda moola* is having *Vatha Pittahara* in action. *Erandamoola* in *Ksheerapaka* form helps the tear film to maintain the homeostasis by providing lipids and aqueous. *Vidalaka* was done with *yashti* and *daruharidra*. This helps in mitigating *Vatha* and *Pitha Dosha*. *Jeevanyadi ghrita* was given internally which is having *vata pittahara* and *brumhana action*. *saptamrita loha* is a compound herbomineral formulation used specifically to improve eyesight by its *chakshushya* property.

CONCLUSION

Tear film has three layers mucous, aqueous and lipid layer produced by goblet cells, Lacrimal gland and Meibomian gland respectively. In dry eye, homeostasis of this layer is lost due to different reasons. In *Ayurveda*, *Netra Snehamsa* is the *Mala* of *Majja Dhadhu*. So, *Snehana* and *Brumhana* line of treatment is essential for increasing the *Snehamsa*. Thus, *nasya* with *anutaila*, *tarpana* with *drakshadi ghrita*, *seka*, *vidalaka* along with *shamanoushadhi* helps to maintain the homeostasis of tear film and improve the vision by rejuvenating the damaged and inflamed ocular surface and stabilising the tear film.

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