



USE OF KUMARI AND SPHATIKA NETRABINDU ASCHOTAN IN OPHTHALMALGIA

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ABSTRACT

Today's era, due to change in the life style eye disease increases gradually. Pain in the eye (ophthalmalgia) may be described as a dry eye, watering, burning, throbbing, aching, or stabbing sensation in or around the eye. These all symptoms are found in younger generation also. So with an aim to reduce these general sign and symptoms related to eye with the help of *Kumari* and *Sphatika Netrabindu Aschotan*. For this study patients were selected according to inclusion criteria. *Aschotan* use to minimize the pain in eyes.

KEYWORDS: *Kumari, Sphatika, Aschotan, Ophthalmalgia.*

INTRODUCTION

Eye of the fifth senses, it is extremely important sense. Since the ancient time. Considering the importance of eye the legislation of eye has been mentioned. As, *Nihar* is best in *ghan*. Sun is best of sky and *jyoti* (light) in the same way. Eye is regarded as the best in *shairiasth* of all senses. *Ashtang Sangeah* described its important in following way. As long as the humans have wikk to live by then human must try to protect the eye forever because despite the money for blinds leaving source days night's life is in vain.

It is duty of doctor to the eyes to remove eye disease and protected the eye. *Abhishand* is the reason of blindness. It has been seen in 50% of blind people the main Reason of blindness is *aabhishyand*. *Abhishayand* disease occurs more after than the other eye disease. Due to avoidance, it will result in *aadhimanyadi kashtasadhaya* eye disease. The symptoms of *abhishayand* is pain, conjunctivitis. For the treatment of *abhishayan* disease there are many *ayurvedic* medicines are available in the market but they are very costly due to its high cost lots of poor people are digalate the disease.

In modern medicine the cost of the collyrium is less but there is a highly chances of side effect and bacterial infection. Alovera is universally available and it is used by the people for *abhishyandkankshi* is easily available and also is less costly. In Research Alovera are usead. Add a *Kankshi Churna* in *Kumariswars* than form a Ark with the help of *Arkpatan yantra*. The product is Ark is found the name is given as *Arkko A2 Netrabindu* (Eye drop). *A-2 Netrabindu* (eye drop) is safe for the eyes.

Profitable and are less expensive. This eyedrop (*Netrabindu*) are usual in a M.A. Podar hospital.

MATERIALS AND METHODS

Materials

Kumari and Spatika netrabindu

Kumari - Synonyms

Hindi – Dhikuar, Dwarpatha

Plarathi – Korfad

English – Indian Aloe

It is available eyerysher in India. It is small perennous fleshy shrub of 1 to 2 feet height. Leaves are fleshy, thick green and jancet shape. Projection are 1 to 2 feet long and 4 inches brood. Inside the leaf there is butter like yellowish pulp. Flower stem arises in between leaves and flowers from which reddish yellow coloured flowers arises:

1. As per British pharmacopeia, 4 types of Alovera are state recognized.
2. Barb door Aloe
3. Sectoring Aloe
4. Zangibar Aloe
5. Cape Aloe

2-3 Species of kumara are found in India:

1. Species from south and Central India- Its leaves have violet lines over it.
2. Pidras- Species of Rameshwaram area Its leaves are very small.
3. Species in Maharashtra

It has long leaves having white lines on its surface and having sharp projections.

For this research of Netrabindu A2- This species of shrub is used.

Characteristics and action

Aloe Contain - Constituent Main part of aloe is barbaloin Leucosidewhich is soluble in water. It is effective in Vibandhnashak Pandu and Liver disorders. Local application of aloevera juice is useful in stanyajshoth (Inflammation of breast), netrabhishyand (Conjunctivitis) and skin diseases. Kumari is tikta rasatmak, viryatmak, guru, snigdha, picchilgunatmak, It is balyaandvrushya due to its picchil and snigdghuna. It is bhedaniand good for eyes. It is effective in pitta and raktavikarand helpful in granthi, visphotgulma diseases as well as in splenic and hepatic disorders.

According to yogratnakar, vartak (brinjal) Karvellak (bitter melon), new radish, punarnavaand kumara are good for eyes in netrarog chikitsaadhyay. Local application of Haritaki, shunthi, Dadim, Patra, Vacha, Haridra, Nimba and Kumari as a lepa on eyes is very useful in eye diseases. Description about yananiopathy is given in the book "Yunani Gunadarsh" In this book an experiment for Abhishyanda treatment is given. As kumara swaras + Sphatika taken in equal quantity in a cotton bag, by making pottaliand doing ashotan in Netrabhishyanda disease gives relief. From above description, it is clear that kumara is used in eye diseases. Hence it is called 'Netryo' in ancient manuscript.

General Information and Characteristics of Sphatika

Alum is used in eye diseases from ancient time. It is white coloured, shiny and slightly transperant as well as it is soluble in water. According to classification of dhatu Alum is included in 'Maharas'. As it is originate from sand of 'Saurashtra' it is known as 'Saurashtri' Description of sphatika is available in CharakSamhita, SushrutSamhita, VruddhaVagbhat, Rastarangini, Rasratnasamucchaya, DhanvantariNighantu etc.

Characteristics of Alum (Sphatika) is described in book as follows

It is astringent, spicy and bitter in taste. It basically removes toxic effects, Also useful in treatment of itching and eczema. It also used for leucoderma, (shwitra), wound healing and in hair treatment. Its use in eye diseases is useful. It is antimalarial. It has water absorbing and scraping properties. It is snigdha (oily) in touch andantihemorrhagic. It gives relief inflammation andsuppurative conjunctivitis if its solution drops are powred in eyes. Yogratnakar also mentioned use of Alum in netrarogSamanyachikitsa in Nayanashanmanjanandtochanshulaghnipttali. Shushrut called it as *chakshushya*. Alum (*Sphatika*) is very effective and known medicine for eye diseases.

Methods

On the basis of this study 30 patients will be examine agter examining the patient specific reports, will be made for the examination permission will be taken from every patient. When choosing the patient who have serious disease like *Abhimanth*, *HTN*, *Timir Pothaki* will not added for examination. The Patient who do not Co-operate will not be included. Those patients who take medicine continuously for 7 days and each and every day comes for the RE-Examination will be indicated. The dissertation work will be conducted in M.A. Podar hospital, OPD, Shalkyantra Mumbai-18. After Completion of 7 days examination on the basis of the symptoms, Upashay and AnupashayPt patients will seen.

OBSERVATION AND RESULT

Abhishand Treatment (Conjunctivities) - According Sushrut conjunctivitis is contagious disease, due to its contagious Nature staying together, sharing same bed over contact with disease. Over contact with diseased person, their clothing malady *Alankar* and *Pralep* are the reason for generating *abhishand* disease.

1. Vatay Abhishand

Firstly do the *snehan* with *puranghruta* and then *swedan*. *Siraved* done on the *upasanica*, *Apang* and *Lalat* region. After the *snehanvirechan*, *Snehabasti*, *Niruhbasti* is given.

Local treatment

Tarpan, *Putpak*, *Dhumrpan*, *Aachotana*, *Nasya*, *Sneha*, *Parishek*, *Sirobasti* or *Pradeh*, *Abhayang* are usead. In *vatay AbhishandShunthi* (*Cingiberofficinalis*), *Sendhav*, added in *ghrut* and local applied on the eye. Ricinious cominophera root, sesbaniasesban, solanumzanthocarpum, moringoolifera, Eagalmarmesapanchamulkwath are good in *vatajabjishand*.

2. Pitaj abhishand

Pitajabhishand and *pitajabhimanth*

- a. Raktmokshan
- b. Virechanetc

Local treatment

Shek, *Aalep*, *Nasya*, *Anjan*. *Aalep* :*Berberisaristata*, *Rubiaccordifolia*, *Lakshas* are usead in *aalep*.

3. Kaphaj Abhishand

Netraabhishand and *Adnimanth* disease are formed due to excess accumulation of *Kapha*.

Siramokashan is done in *Raktushti* patient. After the *Raktmokshan swedan*, *Avpidan Nasya*, *Amjan*, *Dhumrapan*, *Sek*, *Pralep*, *Kavalgrah* are done. After the *apatarpanantileprotictiktaghruta* are used in 3 days interval. *Vitexnegunda*, *Eagle marmesa* root, *Calaropisigiantae*, *Limoniaaccdissima*, leaf is usead in *swedan*. *Alovera* leaf, *plumbagoceylanica* are also used in *swedan*. *Zingiberofficinale*, *cedrusdeodara* or *sasussarealeppa* are used in *lep* on eye.

4. Raktabhishand

Raktajabhishand, Adhimanth, Biraharsha, siravtpal are have same treatment. After the taking for old medicated *ghrut* and *masrassiramokshan* is done. After the Removal of impure blood *virechan* is given. After the *virechanshriravirechan, pradeh, Parishek, nasya, dhum, anjan, tarpan, putpaka* are usead.

Pralep: Nilotpal, Vertiveria Zizaniodus, Berberisaristatia, glycerizedGlabra, Sumplocusrecemosa, Cypeusrotunds. This drug is usead in pralep.

Therefore sleeping with *abhishand* disease patients etc are reduced this is *nidanparivarjanchikitsa*. Due to the various reasons of *abhishand* it causes eye disease Hence if theirany symptoms appeared then immediately should be treated by pyrotechnic treatment. Due to ignorance of Aeolincatarch (VatajAbhishand) causes Aeolin glaucoma (VatajAbhlhimanth). Due to Biliary catarrh (PitajAbhishand) Causes Biliary glaucoma. Sence way due to kaphaj and Raktajabhishand causes kaphaj and raktajadnimanth. Langhanchikitsa is mentioned in all abhishand. In *Sahita* mentioned 4 days *langhan* is essential in *abhishand, swed, pralep, tikta, rasatmak* medicine uses, *Aachotan, Tarpan, Basydhumrapan* are usead in treatment of *tarpan. Langhan, lep, swead, virechan, Anjan Aachotanetc* are also usead in *abhishaynd*.

Result of Clinical profile

Following symptoms are observed in 30 patients which are selected for this study:

1. Netrastrav (watering of eyes)- This symptom is noted in 30 patients i.e. in 100% patients.
2. Itching of eyes- In 26 patients (88\%.66%) this symptom is observed.
3. Pain in eyes – This symptom was present in all the 30 (100%) patients.
4. Burning in eyes- observed in 28 (96.33%) patients.
5. Inflammation of eyes- noted in 28 pt's
6. Redness of eyes- Noted in all 30 (100%) Pt's.
7. Netragaurav (Heaviness of eyes) Observed in 16 (53.33%) Patients.
8. Netrasangharsh- Observed in 12 (40%) patients.
9. Photophobia – Observed in 12 (40%) Patients.
10. Blurred Vision- This symptom is observed in only 5 (16.66%) Patients.
11. Difficulty in eye closing- 6 patients (20%) observed.
12. Headache- Observed in 25 Patients (83.33%)

From above observation, pain in eyes, inflammation of eyes, inflammation of eyes, watering of eyes, itching, redness and burning sensation in eyes symptoms are found in almost every patient.

CONCLUSION

Kumari and sphatika Netrabindu aschotan pain in eyes, watering of eyes, headache and blurred vision these symptoms are relieved in just 7 days. Burning and redness of eyes etc. symptoms are also not seen by using

these *netrabindu*, Hence, it is sale to use in all the conjunctivitis patients. 100% relief has seen in conjunctivitis by this treatment. Hence by this research, we conclude that *netrabindu* is best treatment for *Abhishyand* (Conjunctivitis).

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