

MANAGEMENT OF PRIMARY OPTIC ATROPHY W.S.R TO VATAJ TIMIR – A CASE STUDY

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ABSTRACT

Optic nerve shrinkage from any process that produce degeneration of axons in anterior visual (Retino-geniculate) pathway i.e. from retinal ganglion cells to lateral geniculate body, manifesting with disturbance in visual function. Primary optic atrophy refers to the simple degeneration of the nerve fibers without any inflammatory conditions within the eye. Primary Optic Atrophy can be co-related with the *Vataj Timir* in *Ayurveda*. Optic atrophy treatments in *Ayurveda* are aimed at preserving vision, slowing down or reserving the degeneration in the retina and optic nerve and treating the cause^[1] The line of treatment of Primary Optic Atrophy (*Vataj Timir*) involves *Netratarpan*, *Nasya*, *Basti (Majjabasti)*, *Mrudu Virechana*, *Abhayantarh Snehapan*, with systemic *Dashamularishta*, *Ashwagandhasiddha dugdha*, *Saptamrit Loha*.^[2] These are curative measures for *Vata dosha*, which nourish nervous tissues and improve axoplasmic transport.

KEYWORDS: *Vataj Timir*, Primary Optic Atrophy, *Netratarpan*, *Nasya*, *Basti (Majjabasti)*.

INTRODUCTION

Ayurveda is the one and only medical system which gives the way of perfect living with nature. It gives equal importance to preventive and curative aspects of diseases. In our classics, it is mentioned “*Sarvendriyaanam Nayanam Pradhanam*” i.e. eye stands first where we want to see and perceive knowledge. Since efforts should be made by every individual to preserve his/her vision till last breath of life. Many eye diseases have been enumerated in *Ayurveda*. This science of life has given prime importance to the total eye care. Now a days visual impairment is a significant health problem worldwide, major cause of blindness includes cataract, uncorrected refractive errors, glaucoma, ARMD, corneal opacity, diabetic and other retinopathies.^[3]

Aim and objectives

- To preserve the vision.
- Slowing down or reserving the degeneration in the retina and optic nerve.
- To treat the underlying cause.
- To establish the *Ayurvedic* line of treatment in Primary optic atrophy with special reference with *Vataj Timir*.

CASE STUDY

- A Female 26 years visited to our *Shalakyatantra*'s OPD on dated 6/6/2019
- c/o: Diminished vision for distance Headache: since 2 – 3 yrs.

H/O: CT Brain on 2016

IMPRESSION: Parietal portion of Superior Sagittal sinus-changes of thrombosis.

Patient had taken treatment in private hospital for neurological pathology on 2016.

V/A – Rt eye - CF 2ft PH – NI Lt. eye - 6/60 PH – 6/24 P

O/E	OD	OS
Conjunctiva	No any deformity	No any deformity
Sclera	No any deformity	No any deformity
Cornea	Transparent	Transparent
AC	Normal	Normal
Pupil	RAPD	NSRL
Lens	WNL	WNL
IOP	17.3mmHg	17.3mmHg

BCV=6/60

	OD	OS
Media	Clear	Clear
O.D	Pallor of disc(white chalky), Disc margin is sharply defined, No cupping	Pallor of disc(whitish), Disc margin is sharply defined, No cupping
Macula	F.R absent	F.R Absent
P.R	NAD	NAD

Bilateral funduscopy

Dignosis: Bilateral Primary Optic Atrophy (Vataj Timir)

MATERIALS AND METHODS

T/t on 6/6/19

Day- 1st

- *Netratarpana with Triphala Ghrit* for 7 days.
- 3 settings with 7 days gap in between them. *Nasya: Anutaila* 6 drops in both nostrils daily for 7 days.
- *Abhyantartah: Triphala Ghrit* – 10 ml at Morning
- *Triphala Churna* – 5gm with luke warm water H.S

On 1st follow up – 13/7/2019Day -37th T/t: *Dashamularishta* 10ml BD,

- Tab.*Saptamrit Loha* + 5ml *Ghrita* BD before meals for a month.
- *Ashwagandhasiddha dughdha*: 10gm of *Ashwagandha churna* + 1cup of milk

On 2nd follow up – 8/8/2019 Day- 62nd

- Tab. Neurokind OD (Mythylcobalamine) for 20 days.
- *Dashamularishta* 10ml BD.
- Decided to plan for *Shodhan Basti (Yog Basti)*.

On 3rd follow up - 27/8/2019 Day- 83rd

- Planned for *MajjaBasti*. On 4th follow up – 9/9/2019 Day- 95th

- Planned for *Shodhan Basti (Yog Basti)* for 7 days.
- Alternate *Sarvang snehan swedanpurvak Anuvasan, Niruh* was given.
- *Anuvasan with Tila taila* – 70-80 ml
- *Niruh – Madhu* 30 gm, *Lavan-* 5-10 gm, *Sneha* – 80ml, *Kalka- Triphala churna* 20-30gm, *Kwath – Dashmoola Kwath* 500ml.
- On 5th follow up – 10/9/2019 Day- 96th
- *Shodhan basti* was given from 10/9/2019 to 16/9/2019
- Day 106th
- *Majja Basti* was started from 20/9/2019 but had stopped on day 6th due to menses.

Preparation of *Majja Basti**Dashmool kwath* – 400 ml

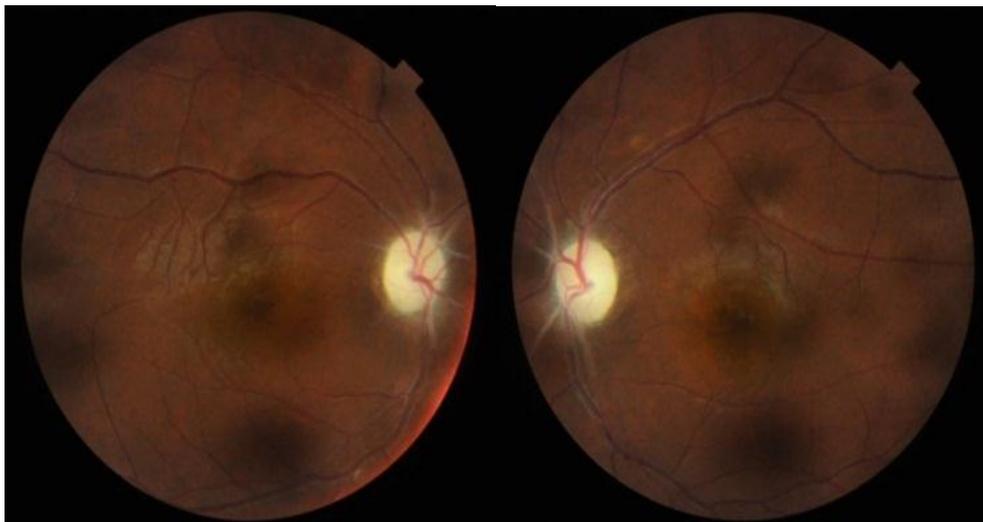
- *Majja Pradhan mansarasa*– 100 ml

Ksheerpak: Sariva, vidari, kavach beej, shatavari, ashvagandha, yashtimudhu – each 5gm + 400ml jala 100ml ksheerpak 100ml ksheerpak + 100ml mansarasa 50ml majja basti.

OBSERVATION AND RESULT

	Visual acuity	Pin hole
1 st Day	RT- CF – 2ft LT- 6/60	RT - NI LT-6/24p
2 nd follow up	RT- CF – 2ft LT- 6/60	RT - NI LT-6/24p
3 rd follow up	RT- CF – 3ft LT- 6/36p	RT - NI LT-6/36
4 th follow up	RT- CF – 5ft LT- 6/36	RT - NI LT-6/36
5 th follow up	RT- CF – 5ft LT- 6/36	RT - NI LT-6/36
6 th follow up	RT- CF – 6/60p LT- 6/36	RT - 6/60p LT-6/24p

V/A With specs on 7/11/2019 Day- 121st
 OD-6/36 OS-6/18p (1 letter read) BCV=6/18.



Fundus photograph

DISCUSSION

The drug used in *tarpana* crosses corneal barrier also due to more contact time and bioavailability, the active components of drug get absorbed more to cure the disease. *Snehan* of surface mucosa of eyeball and lids skin help performing *vaataashaman* by soothing and oleating surface skin. The pharmacodynamics of *Nasya karma* can be explained by neurological pathway which is concerned with olfactory stimuli and the olfactory nerves are more close relation with the brain. *Tarpan* and *preenana* of *phana marma* area and nasal mucosa help in *urdhvajatrugat vaataashaman*. *Basti* may prove to be effective therapy to treat *vaataj* disorders of posterior segment of the eye as it has all the properties to perform systemic *vaataashaman* and help rejuvenating neural tissues. *Sarvadehic vaataashaman* is achieved by *basti* which indicates nourishing and revitalizing debilitated or degenerated tissues.

Majjabasti is more effective as a phenomenon '*Vridhhi samane sarvesham*' as CNS i.e. optic nerve is made up of *Majja dhatu*.^[4] *Mrudu Virechana* is given because "*Pittadhara kala sa eva Majjadhara kala*". *Triphala* is used, which contains polyphenols and tannins which are responsible for the antioxidant and radioprotection properties. *Saptamrit Loha* is *Chakshushya*, detoxifier and has antioxidant properties. *Dashmularishta* possess antioxidant, analgesic, anti-inflammatory along with rejuvenator, revitalizer and restorative activities.

CONCLUSION

Vataj Timir can be co-related with Primary Optic Atrophy. *Netratarpana*, *Nasya*, *Shodhan basti*, *Majja basti*, *Abhyantar snehapana*, *Dashmularishta*, *Saptamrit Loha*, *Ashwagandhasiddha dugdhapana* is effective line of treatment of *vataj timir*.

These are curative measures for *vata dosha*, nourish nervous tissues preserving vision, slowing down and possibly reserving the degeneration in the retina and optic nerve and treating the cause. This treatment module has given positive result in otherwise incurable condition.

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