



# MANAGEMENT OF ALLERGIC CONJUNCTIVITIS-A CASE REPORT

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## ABSTRACT

Allergic conjunctivitis is common condition caused by allergic reaction to an environmental allergens. Ayurveda describes conjunctivitis as abhishyanda. It is the main cause of all eye disease which is characterized by lohitha netratha (redness) ashru(watering). Kandu (itching). Management of Allergic Conjunctivitis includes the elimination of allergens, local palliative eyedrops like vasoconstrictor, steroids, mast cell stabilizer, which have common side effects like increased sensitivity of eye, Blurring of vision, etc.

A diagnosed case of allergic conjunctivitis was treated with virechana followed by Seka, Bidalaka for 7days and shamana oushadis for 1 month along with Netra prakshalana was adopted. Visual acuity, diffuse light examination, slit lamp examination were performed before and after the treatment. The results showed improvement in both subjective and objective parameters. The kaya shodana, Netrakriyakalpas and oral medication after the vyadhi Samprapti of abhishyanda .and reduces the symptoms of allergic conjunctivitis

**KEY WORDS:** Allergic conjunctivitis, Abhishyanda, Virechana, Netrakriya kalpas.

**INTRODUCTION:** The term allergic conjunctivitis refers to a collection of hypersensitivity disorder that effects the conjunctiva various clinical forms are included in classification of ocular allergy; seasonal allergic conjunctivitis (SAC), Perennial allergic conjunctivitis, Vernal kerato conjunctivitis (VKC), Atopic keratoconjunctivitis, Giant papillary conjunctivitis, phlyctenular kerato conjunctivitis<sup>1</sup>. Prevalence of Allergic conjunctivitis was 12.22%, occurrence was more in males than females conventional treatment have limitation, cost effect,less desired effect. In this case study, a male patient of *abhishyanda* presented *Raktapradhana tridoshaja* symptoms that is, pricking sensation pain, redness of eye, watery discharge,itching and signs of allergic conjunctivitis, patient was diagnosed as perennial allergic conjunctivitis, more in left eye then right eye.

**CASE REPORT**

A male patient aged about 21years visited outdoor patient department of Shalakyta tantra. SJGAMC and Hospital Koppal, presented with complains of watery discharge pain, redness, mild blurring of vision in left eye, for these complaints patient had undergone treatment by local doctor.

Patient was given Ocusert AH BD, Mahaoflox D eye drops twice daily for 15days which doesn't relived the condition.Hence he approached us for ayurvedic treatment.

**On examination****Table -01:****A] Visual status**

	<b>DV</b>	<b>PH</b>	<b>NV</b>
<b>RIGHT EYE</b>	6/6	6/6	N6
<b>LEFT EYE</b>	6/12P	6/9	N6

**B] Diffuse light examination**

-B/L palpebral conjunctival hyperemia

-B/L conjunctival congetion

-Mild photophobia

**C]Slit lamp examination**

-B/L conjunctival chemoses

-B/L mild papillary reaction

Based on clinical picture patient was diagnosed periennieal allergic conjunctivitis. Ayurvedic point of view, it was diagnosed as *Rakta Pradhana tridoshaja Abhishyanda* and treated on the line of *abhishyanda chikitsa*.

The following treatment was administered

**Table- 02: PANCHAKARMA**

	Medicine	Duration
<i>Deepana pachana</i>	<i>Agnitundi vati</i>	3days
<i>Snehapana</i>	<i>Saptasara ghrita</i>	3days
<i>Abhyanga</i>	<i>Murchita tila taila</i>	3 days
<i>Virechana</i>	<i>Trivruth lehya</i>	80 ml-10 vegas

**Table-03: NETRAKRIYAKALPA**

	Medicine	Duration
<i>Seka</i>	<i>Triphala,yastimadhu,haridra kashaya</i>	7 days
<i>Bidalaka</i>	<i>Triphala</i>	7 days

A] *Doshapratyanika chikitsa*

**Table -04: 1<sup>ST</sup> Follow up**

Medicine	Dosage	Duration
<i>Tab Histantin</i>	BD/AF	15 Days
<i>Yastimadhu ksheerapaka eyewash</i>	BD	15 Days
<i>Pindi with Alovera</i>	OD	15 Days

**Table -05: 2<sup>nd</sup> follow up**

Medicine	Dosage	Duration
<i>Mahatriphaladi Ghrita</i>	1tsp -0-0 (B/F) With warm water	15 Days
<i>Cap Netramrita</i>	BD	15 Days
<i>I tone eye drops</i>	TID	15 days

**Result**

**Discussion:** General line of treatment of abhishyanda includes *Langhana, Tikta anna sevana* like *tikta ghritapana, Virechana<sup>2</sup>, Pradeha, Pariseka, Nasya, Dhumapana, Anjana, Aschotana Abhyanga, Tarpana, Snigdha putapaka<sup>3</sup>*. Considering the dosha involvement the treatment should be Rakta pittahara. In this disease *virechana* with *Trivruth leha, Seka with Triphala, Yastimadhu, Haridra kwatha and Bidalaka with Triphala churna* followed by oral medication which includes *Mahatriphaladi Ghrita<sup>4</sup>, Cap Netramrita, yastimahdu ksheerapaka netra prakshalana* was adopted which gave a better result.

**Action of virechana**

Vitiated *Dosha* is the basic factor in the manifestation and progress of the disease. *Virechana* is one of the *samshodhana* which aims at the elimination of vitiated *Doshas* from the body so that the disease could be treated most effectively.

*Trivruth leha* acts as *mrudu Virechana* and also *Pitta Rakta Shamaka* and *Vatanulomaka*. *Abhishyanda* occurs because of vitiation of *Pitta Rakta*<sup>5</sup> dosha and *chakshu* is seat of *pittadosha* by keeping that in our mind we planned for *Trivruth lehya virechana*.

*Seka*<sup>6</sup>: *Seka karma* is *Kriyakalpa* procedure, in which instillation of medicated kwatha is done in closed and relaxed eyes for fixed time period. It is done in *Raga, Daha, Kandu* etc.

*Bidalaka*<sup>7</sup>: External application of medicated paste over eyelids is called *Bidalaka*. Transdermal pathway for absorption will be takes place.as the eyelid skin is very thin helps to enter the microcirculation reaches the Palpabrel arteries i.e: Lat & Medial Palpabrel artery.which inturn reaches the conjunctiva there by produceses the effective result.

*Triphala* is the main ingredient in *seka, Bidalaka*.which possess *Chakshushya* property.being predominantly *kashaya rasa* may have contributed in reducing congestion. *Triphala* is helpful in breaking the *abhishyandatwa* of *srotas* by virtue of its *Prabhava*.*Tridoshahara* property of *Triphala* is helpful in preventing pathogenesis of *abhishyanda*. further *Triphala* is reported to be potent free radical scavengers & possess antibacterial property .antioxidant, antiinflammatory ,immunomodulatory properties.



*Yastimadhu ksheerapaka Netraprakshalana*: Allivates *Vata Pittadosha*, it is *Vedanastapana, Shothahara, Madurarasa & sheetavirya* gives *Soothing effect*.

**Action of *ghritapana***: *Mahatriphaladi Ghrita* which acts as *vatadoshashama, Chakshushya* in nature. Thus the *shodhana, netrakriyakapa, sirovirechana*, and oral therapy were done with the prescribed medicine. Which acts as *Vata pittahara, Rasayana, and bhrumhana* medicine worked well in relieving the ocular discomfort.

**Action of other *Shamanoshadha***: Tab *Histantin* helps in allergic reaction. It targets mast cells of human body that produces histamine causing an allergic reactions.

*Cap Netramrita* acts as *Tridoshahara* and *Chakshushya*.

## Conclusion

Abhishyanda is one among the Sarvagata roga. *Rakta pradhana tridosha plays important role while producing disease.* hence *Pitta raktahara, Chakshushya, rasayana* line of treatment adopted for the management of abhishyanda was found beneficial. Since it includes single case study it needs to be evaluated further and research should be conducted with more sample size, so further study is needed in this regard.

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