



An Ayurvedic Management on Giant Pappilary Conjunctivitis- A Case Report

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ABSTRACT

Background: Giant papillary conjunctivitis is a severe form of papillary conjunctivitis predominantly affecting superior tarsal conjunctiva usually as a result of mechanical injury followed by antigenic reaction. The condition is mostly associated with contact lens wear, but in some instances, it also presents with chronic use of irritant ocular cosmetics e.g. kajal, mascara etc. This condition can be associated with excessive mucus production, itching, blurry vision, and diminished contact lens tolerance. Although the exact pathophysiology of GPC remains incompletely understood, it likely develops from the combination of mechanical trauma to the superior tarsal conjunctiva and an immunologic response by the conjunctiva to deposits on the anterior surface of the contact lens As per Ayurveda classics this condition can be correlated with *Pittaja Abhisya* which is usually associated with generalised vitiation of Pitta Dosha. **Objective:** To observe the efficacy of *Ayurveda* treatment in the management of Giant papillary conjunctivitis. **Material & Methods:** An 22 year old male patient presented to eye OPD of ITRA, Jamnagar with gradual onset of foreign body sensation in eyes, burning sensation, itching in eyes, watering from eyes and photophobia with a history of two year. History and examinations lead to the diagnosis of Giant papillary conjunctivitis. Patient was treated according to principles of treatment of *Pittaja Abhisya* with *Aschyotana* therapy, *Anjana* therapy and *Shamana Chikitsa* using various *Ayurveda* formulations. **Results:** Remarkable results were observed in the form of improvement in all the symptoms and signs in the patient. **Conclusion:** *Ayurveda* treatment has valuable effect in the management of Giant papillary conjunctivitis.

Keywords- *Pittaja* , *Abhisya*, *Aschyotana*, *Anjana*

Introduction –

Giant papillary conjunctivitis (GPC), is a form of ocular inflammatory disease which is characterized by the presence of “giant” papillae on the superior tarsal conjunctiva. Originally, the term “giant” papillae represented any papillae of 1.0 mm or greater in diameter; however, more recent literature considers that GPC may be characterized by any papillae with diameter of 0.3 mm or larger.

Giant papillary conjunctivitis is a severe form of papillary conjunctivitis, characterised by formation of large number of prominent papillae in upper tarsal conjunctiva along with symptoms of itching and increased mucous discharge from conjunctival sacⁱ. As per *Ayurveda* classics, the signs and symptoms of Gaint papillary conjunctivitis simulate that of *Abhisya*ⁱⁱ which results due to aggravated pitta. As per *Sushruta samhita*, these signs and symptoms are burning sensation (*Daha*), severe inflammation (*Prapaka*), longing for cold (*Sisira Abhinanda*), smokiness (*Dhumayana*), warm lacrimation (*Usanasruta*) and yellowish discoloration (*Pitaka Netrata*). [2] Acharya *Vagabhata*ⁱⁱⁱ also mentioned all these symptoms and signs with presence of *Shyavata* (grey discoloration of external surface of eye lids) and (*Raga*) [3] redness of eyes. Therefore the treatment principle given by Acharya *Sushruta* mainly concentrates on Pitta pacification i.e. *Snehana* and *Swedana*, *Rakta Moksana*, *Sramsana*, *Pariseka*, *Iepa*, *Nasya*, *Anjana* and treatment of *Visarpa*^{iv} is to be followed. In modern sciences, steroids antihistamines and NSAIDS^v are mainstay of the treatment of this disease, yet the disease follows a chronic course and frequent relapses. Keeping in view all the particular reasons, the case study had been carried out to analyze the effect of *Aschyotana* therapy, *Anjana* therapy along with *Shamana* therapy.

CASE REPORT

A 22 years old male patient came to the eye OPD at ITRA, Jaipur with complaints of. Foreign body sensation for 2 year, Discharges from eyes for 2 year, Itching of lids for 2 year, Redness of eyes for 2 year, Photophobia both eyes for 2 year. He came in OPD of Shalakya Tantra in ITRA for Ayurvedic management.

Examination

Diffuse examination by torch light shows congestion and giant papillae in upper tarsal conjunctiva of both the lids. These findings were further verified by the slit lamp examination. His visual acuity was examined by Snellen's chart and it was found to be 6/9 in both the eyes. Intra ocular pressure was measured by schiotz tonometer; it was 14 mmHg in both eyes.



After treatment



BEFORE TREATMENT

Treatments

In this case treatment line was mainly aimed at *Pitta-Vata Shamana* and *Rakta Shodhana*; because vitiated Dosha were Pitta and vata. Thus following drugs were selected for the present condition. A. *Aschyotana* therapy which comprises. 1. *Triphala Churna* 1gm, *Yashtimadhu Churna* 1gm and *Lodhra* 1gm 8-8 drop *aschyotana* for 3 months. B. *Shamana Chikitsa* with. 1. *Haridra Khanda* 3gm twice a day for 3 month. 2. *Triphala Guggulu* 2 tab. twice a day for 1 month. 3. *Avipatikar Churna* 3gm and *Shankha Bhasma* 250mg twice a day for 2 month

DISCUSSION

Triphaladi Netra Aschyotana

Triphaladi Netra Aschyotana^{vi} with luke warmed decoction was done. *Triphalādi Netra Aschyotana* contains equal quantity of powder of *Terminalia berelica* (*Vibhitaka*), *Terminalia chebula* (*Haritaki*), *Glycyrrhiza glabra* (*Yashtimadhu*) and *Symplocos racemosa* (*Lodra*). *Lekhan Aschyotana* matra 8-8 drop is given to patient both eyes daily 2 times a day for 2 month It is one among the seven types of *Kriyakalpa* therapies. Further these drugs consist with *Chakshushya Dravaya*^{vii viii ix}(eg. *Triphala*, *Lodhra* and *Yashtimadhu*), anti inflammatory and antimicrobial substances.

Nagarjuna Varti^x

It is consist of *Chaksusya* Drugs like *Rasanjana*, *Prapoundarika*, *Yashtimadhu*, *Lodhra*, *Tamra Bhasma* *Haritaki*, *Bibhitaki*, *Amalaki*, *Saindhava Lavana*, *Shunti*, *Maricha*, *Pippali*, *Yashtimadhu*, *Suddha Tutta*, *Rasanjana*, *Lodhra*, *Tamra bhasma*. *Nagarjuna Varti* is a herbo-mineral preparation with unique combinations of drugs which are *Netrya*, *Jantugna*, *Lekhana*, *Chedana*, *Nadi Balya*, *Rakta Prasadaka*, *Netra Shodhaka*, and *Sukshma Strotogami*, which help in deep penetration of ocular tissues. The presence of *Ushna* and *Shita Virya* drugs have mainly *Kaphapittagna* action and help to treat many ocular diseases. *Bhavana* with *Nabho Jala* may give a smoothening to the eyes.

Haridra Khanda

It contains *Haridra*, *Ghrta*, Milk, Suger, *Trikatu*, *Triphala*, *Trijata*, *Vidanga*, *Trivrita*, *Kesara*, *Musta* and *Lauha Bhasma*. It is excellent remedy for *Kandur*^{vi} *Haridra* is best blood purifier, remove toxins from blood. *Shunthi* is one of best herb to rejuvenate and revitalize all body system and *Trivrita* has anti-inflammatory properties.

Avipatikara Churna^{xii} and *Shankha Bhasma*

It contains *Trikatu*, *Triphala*, *Musta*, *Lavanga*, *Vidanga*, *Vida Lavana*, *Ela*, *Trivrita*, *Suger*. [13] It has anti-inflammatory and purgative properties, which acts on Pitta Dosha and *Shankha Bhasma* have *Chakshushya*, *Daha Nashaka*, *Pitta*, *Rakta*, *Kapha Nashaka* [14,15] properties.

Triphala Guggulu^{xiii}

It consists of Terminalia berelica (*Vibhitaka*), Terminalia chebula (*Haritaki*), Phyllanthus emblica (*Āmla*) and Commiphora mukul (Shuddha Guggulu). It Cures wound accompanied with swelling (Shota), suppuration (*Paka*), discharge (*Kleda*), foul odour (*Gandha*). On the basis of these properties, it helps in relieving the inflammation, antioxidant of giant papillary conjunctivitis.

CONCLUSION

This case study reveals that patient with Giant papillary conjunctivitis can gain significant relief in symptoms through Ayurveda management. The study concludes that this line of treatment enhances the speed of recovery with minimal risk and high patient acceptance in preference to other methods of treatment. Despite the limitations of this case study, the therapy may be an effective option in the treatment of Giant papillary conjunctivitis. Further study should be carried out in larger sample group.

References –

- 1.ⁱ Dutta LC, Modern ophthalmology, vol-1, 3rd edition, Jaypee brothers medical publishers(P) Ltd., New Delhi, 2005; 97.
- 2.ⁱⁱ Sushruta samhitha, Uttara tantra 6/7, English translation by P V Sharma, Vol III, 1st edition, Chaukhambha Vishvabharati, Varanasi, 2010; 133.
- 3.ⁱⁱⁱ Ashtanga Hridayam, Uttara sthana 10/8,9, English Translation by K R Srikantha Murthy, Vol III, 6th edition, Chokhamba Krishnadas Academy, Varanasi, 2012; 90
- iv . Sushruta samhitha, Uttara tantra 10/3, English translation by P V Sharma, Vol III, 1st edition, Chaukhambha Vishvabharati, Varanasi, 2010; 156.
- v . Sushruta samhitha, Uttara tantra 10/3, English translation by P V Sharma, Vol III, 1st edition, Chaukhambha Vishvabharati, Varanasi, 2010; 156.
- vi Susrutha, Susrutha samhitha with Nibandha samgraha commentary by Dalhanaacharya, Chaukhambha surabharati prakashan, Varanasi, Reprint 2012, Uttara Stana.
- vii Bhavaprakasha Purva Khanda, 6/43, English Translation by Srikantha Murthy K R, Vol I, Chaukhambha Krishnadas Academy, Varanasi, 2011; 164
- viii Bhavaprakasha Purva Khanda, 6/146, English Translation by Srikantha Murthy K R, Vol I, Chaukhambha Krishnadas Academy, Varanasi, 2011; 181.
- ix Bhavaprakasha Purva Khanda, 6/216, English Translation by Srikantha Murthy K R, Vol I, Chaukhambha Krishnadas Academy, Varanasi, 2011; 194
- x Govinda Das Sen. Bhaishajya Ratnavali Hindi Commentary By Ambika Datta Shastri. ED/18 Th Varanasi: Chaukhambha Prakashan;2007:P1007
- xi Bhaisajya Ratnavali, Urdha Sita Pitta, 55/13-17, English Translation by K Lochan, Vol III, 1st edition, Chaukhambha Sanskrit Sansthan, Varanasi, 2006; 105-106.
- xii Bhaisajya Ratnavali, Amla Pitta, 56/25-29, English Translation by K Lochan, Vol III, 1st edition, Chaukhambha Sanskrit Sansthan, Varanasi, 2006; 117-118.
- xiii Cakradatta, Vranashota chikitsa 59, English translation by P V Sharma, Chaukhambha Publishers, Varanasi, 2007; 367