



## Shigru Kalka Pindi in Management of Kaphaj Abhishyanda: A Case Report

<sup>\*1</sup>Dr. Pratiksha Suresh Admane and <sup>2</sup>Dr. Sumedha Y Kotangale

<sup>\*1</sup> PG. Scholar, Department of Shalakya Tantra, Sumatibhai Shah Ayurved College, Hadapsar, Pune, Maharashtra, India.

<sup>2</sup>Associate Professor, Department of Shalakya Tantra, Sumatibhai Shah Ayurved College, Hadapsar, Pune, Maharashtra, India.

### Abstract

*Abhishyanda* is a very common infectious disease which affects the whole eye. 5 to 22% Population are affected by ocular allergies. The eye is *Tejomayi* therefore; it has always had threat by *Shleshma* (*Kapha dosha*). *Kaphaja abhishyanda* is a disease which arises due to various *Kapha* aggravating factors and due to contact with an infectious person. The patient suffers from intense itching, grittiness, discharge, redness, lacrimation, photophobia etc. <sup>[1]</sup>. Mast cell stabilizers, topical Non-steroidal anti-inflammatory drugs (NSAIDs), and steroids are the available treatment options that too with symptomatic relief and potential side effects, which limits the long-term use of these medicines <sup>[6]</sup>. *Ayurvedic* management of Bacterial conjunctivitis has shown some effective results in overcoming the disease with no such effects. According to *Acharya Sharangdhara*, *Shigru Kalka Pindi* was done on the patient, who had symptoms of *Kaphaj Abhishyanda* (Bacterial Conjunctivitis) for 7 days <sup>[2]</sup>. *Kapha* is said to be the predominant *Dosha* of *Kaphaj Abhishyanda*, *Shigru Kalka Pindi* has *Kaphaghna* properties (pacify *Kapha Dosha*); thus, will reduce the symptoms. The assessment of the condition was done before and after treatment.

**Keywords:** *Abhishyanda*, *Kaphaj Abhishyanda*, *Pindi*, *Kalka pindi*, Bacterial Conjunctivitis, Conjunctivitis.

### Introduction

Ayurveda has described *Abhishyanda* which is similar to conjunctivitis the word *Abhishyanda* is derived from to word: *ABHI* + *SHYANDAN*.

*Abhi* means to profuse or more and *Shyandan* means discharge or secretion its combined meaning is profuse discharge from the eyes.

*Abhishyanda* is the root cause of almost all the eye disorders and must be treated as soon as possible.

*Abhishyanda* is classified as the eye disease affecting all parts of the eye. The disease *Kaphaja Abhishyanda* is *Sarvagat Netra Rog* explain by *Sushruta Samhita* <sup>[3]</sup>. In developing countries, bacterial conjunctivitis is commonest type of conjunctivitis. It can occur as sporadic and epidemics cases during monsoon season. Prevalence for chronic bacterial conjunctivitis is 25% of the general population". There are so many treatment of *Kaphaj Abhishyanda* in *Ayurveda* like *Anjana*, *Pindi*, *Tarpana*, *Putpak*, *Aschyotan*, *Nasya*, *Parishek*, etc.

But *pindi kalpana* is very effective, safe, easily available, so I have selected *Shigru churna pindi*.

*Pindi* is a line of treatment explained by *Acharya Sharangdhara* for all *Abhishyanda*. *Pindi* is medicated gauze that is applied to the eye. *Shigru churna Pindi* was done on the patient having symptoms of *kaphaj Abhishyanda*. The treatment of bacterial Conjunctivitis in modern ophthalmology is costly, and it gives temporary relief.

Continued use of these drugs has lots of side effects and may develop resistance too <sup>[2]</sup>.

*Acharya Sushruta* described that *Netrabhishyanda* (Conjunctivitis) is a contagious (*Aupsargic*) disease, which means it may be transmitted through contact with the infected person <sup>[3]</sup>. This explains the urgency of treating the disease to avoid further spread. *Acharya Sushruta* has described *kaphaja Abhishyanda* (bacterial Conjunctivitis) in one of the four types of *Abhishyanda* (Conjunctivitis) that can be differentiated in patients with symptoms like *Netra Shophya*, (oedema of eyes) *Guruta* (heaviness), *Kandu* (itching), *Pichchil Strav* (sticky discharge)<sup>[4]</sup>Can be correlated with the symptoms of bacterial conjunctivitis which is characterized by conjunctival congestion due to dilation of vessels, resulting in hyperemia, chemosis, lid oedema and typically associated with mucoid or mucopurulent discharge. Viral conjunctivitis followed by bacterial conjunctivitis is most common cause of infectious conjunctivitis. Bacterial conjunctivitis is the second most common cause of infective conjunctivitis. The most common pathogen for bacterial conjunctivitis in adults is staphylococcus <sup>[5]</sup>

### Patient Information

#### Case Report

A 16-year-old female patient visited the OPD of *Shalakya Tantra*, with complaints of itching, heaviness over eyelids, redness, and sticky discharge from both the eyes.

since the last seven days. No any medical history. No allergy known till today. After assessing the symptoms diagnosis was made as *Kaphaj Abhishyanda*.

### Clinical Findings

**Table 1:** On the first day of examination the clinical findings are:

Sr. No.	Heading	Right Eye	Left Eye
1.	lids	Normal	Normal
2.	Conjunctiva, sclera	Congestion	Congestion
3.	cornea	Clear	Clear
4.	Pupil	Normal	Normal
5.	lens	Normal	Normal
6.	Anterior chamber	Normal	Normal
7.	Lacrimal sac	Sticky discharge	Sticky discharge
8.	Distant vision	6/9	6/9
9.	Colour vision	Normal	Normal
10.	Near vision	N/6	N/6

### Timeline

**Table 2:** Observation table:

Sr. No	Signs and Symptoms	Day 0	Day 4	Day7
1.	<i>Akshi shoppha</i>	02	01	0
2.	<i>Kandu</i>	03	02	0
3.	<i>Gurutva</i>	02	0	0
4.	<i>Pichlstrava</i>	02	01	0

### Diagnostic Assessment

The patients will be assessed on the following subjective and objective parameters.

#### Subjective Parameters <sup>[8]</sup>

##### 1. *Netra Guruta* (Heaviness in eyes)

- No heaviness
- 1-Heaviness is present and patient does not want regular movement of eyeball willingly.
- 2-Heaviness is present and patient does not want regular movement of eyeball unless it is necessary.
- 3-Heaviness is present but patient does not want regular movement of eyeball a little even if it is very necessary.

##### 2. *Kandu* (Itching in Eyes)

- 0-No incidence of itching
- Occasional itching.
- Frequent itching.
- Continuous itching.

##### 3. *Picchil Strav* (Sticky Discharge)

- 0-No discharge
- 1-Small amount of mucoid discharge
- 2-Moderate amount of mucoid discharge
- 3-Eyelids tightly matted together on awaking

##### 4. *Akshi Shoppha* - (Oedema)

- 0-No oedema.
- 1-Oedema present at 1/4th part of eye.
- 2-Oedema present at 1/2 part of eye.
- 3-Oedema present at 3/4th part of eye.
- 4-Oedema present in whole eye

Observations will be carried out before treatment, during the treatment i.e. during each follow up and after completion of treatment.

### Objective Parameters

Pre and Post treatment photography of eye of patient to assess the congestion, oedema and amount of discharge.

### Therapeutic Intervention

**Treatment:** The patient was treated with *Shigru Kalka Pindi* once a day for 7 days after taking written informed consent. Routine follow-up after every 3 days was taken, and regression the symptoms was noted.

### Material Used For the Procedure:-

*Shigru Patra Churna*, Gauze piece, sterile water.

Standard Operating Procedure:-

### Preparation of *Pindi*-

*Shigru Churna* paste was prepared by mixing a sufficient amount of water in *Churna* and then it was covered by a gauze piece.

The procedure of application:-

#### A) *Poorvakarma*:

Wash hands with water.

Clean both eyes and the surroundings with a wet gauze.

#### B) *Pradhan Karma*:

The patient is given a supine position with closed eyes. *Shigru patra kalka Pindi* is applied under aseptic precaution on both eyes.

#### C) *Panchatkarma*:

*Pindi* is removed after 10-15 minutes.

Both eyes were cleaned with sterile water.



**Fig 1:**

### Follow Up and Outcome

A patient presented with the complaints of *Netra Guruta* (Heaviness in eyes), *Kandu* (Itching in eyes), *Picchil Strav* (Sticky discharge), *Akshi Shoppha* - (oedema), *Netra Lalima* (redness).

**On first follow up at 4<sup>th</sup> day:** There was decrease in above symptoms.

**On Last follow up at 7<sup>th</sup> day:** There was significant decrease in above sign and symptoms.

## Outcome

*Shigru Kalka Pindi* is significantly effective in Management of *Kaphaj Abhishyanda* (Bacterial conjunctivitis)

## Discussion

As *Pindi* is external application of medicated paste over eye lids, mode of action of these therapies follows the transdermal pathway for absorption. As the eye lids skin has a thinner stratum corneum, there by showing lower impedance which could be a reason for higher drug permeation through eye lid skin. Since the appendages are not significantly present over the eye lid skin. Most of the absorption occurs via epidermal route. Almost in all *Yogas of Pindi* is a paste of medicated drugs is usually made in water or in any other liquid medium. Hence, hydrophilic portion absorbs intra cellular domain whereas if any lipophilic part present absorptions take through inter cellular route and enters the micro circulation. That is palpebral arteries (lateral and medial palpebral artery) which in turn reaches conjunctiva via conjunctiva arteries as these are derived from arterial arcade of eye lids.

Regarding the duration of these procedures, there is no direct reference for the exact time period. It is mentioned as; as soon as the *Lepa* gets dried it should be removed carefully by moistening. This clearly indicates that hydration is very important for the absorption of molecules transdermally [7].

### Series of Steps in Sequence

Absorption of a penetrant molecule on surface layer stratum corneum.



Diffusion through it and viable epidermis and finally reaches to dermis.



The molecule is taken up into the micro circulation for systemic distribution.

*Shigru* has *Kapha Shamaka* and *Laghu*, *Ruksha Guna*, it works as *Shothahara* it relieves swelling, and edema, acts as an anti-inflammatory, and is *Shulahara* (reduces pain) and helps in reducing symptoms of bacterial conjunctivitis. So, the patient was advised for *Shigru Kalka Pindi* for 7 days, having *Kaphaghna* (Pacify *Kapha Dosha*) which reduces the signs and symptoms of *kaphaj Abhishyanda* like *Netralalima* (Redness), *Netra Shopha* (oedema of eyes), *Guruta* (heaviness), *Kandu* (itching), *Pichchil Strava* (sticky discharge). *Shigru Kalka Pindi* provides quick absorption of the drug along with soothing effect, so it is very effective in this condition, so patient get relief from the symptoms of *Kaphaj Abhishyanda* (Bacterial Conjunctivitis).

## Informed Consent

The purpose of the study, nature of the study drugs, the procedure to be carried out and potential risk and benefits were explained to the patients in detail in non-medical terms. Thereafter their written consent was taken before starting the procedure.

## References

1. <https://doi.org/10.52783/tjjpt.v44.16.3404>
2. Tripathi B. (no date) Sharangdhar Samhita, Uttarkhanda, Adhyaya 13. sloke no 27. Varanasi, UP: Chaukhamba Subharati Prakashan. Page no 280

3. Ghanekar AASBG (1975) Sushruta Samhita. 4th edn. Delhi: Motilal Banarasidas, Nidansthan 5/33-34
4. Shashtri KA (2018) Ayurveda tattva Sandipika, Hindi Commentary. Varanasi, U.P: Chaukhamba Sanskrit Sansthan. Page no 34.
5. Khurana A. (no date) Comprehensive Ophthalmology Diseases of conjunctiva. 9th edn. New delhi: Jaypee brothers medical publishers. page no 75.
6. Azari AA & Barney NP. Conjunctivitis: a systematic review of diagnosis and treatment. *JAMA*. 2013; 310(16):1721-1729. <https://doi.org/10.1001/jama.2013.280318>
7. Sivasankari N, BS, N., Viswam A, & Namboodiri GK. Pindi and Bidalaka - A Review. *Journal of Ayurved Integrated Medical Sciences*. 2021; 6(5):210214. <https://doi.org/10.21760/jaims.v6i5.1373>
8. Theassociationofshalaki.com. 2022. Internet. [online] Availableat:<[http://theassociationofshalaki.com/downloads/GRADATION\\_OF\\_DISEASES\\_OF\\_SHALAKYA\\_TANTRA\\_PART\\_-\\_1NETRA\\_1.pdf](http://theassociationofshalaki.com/downloads/GRADATION_OF_DISEASES_OF_SHALAKYA_TANTRA_PART_-_1NETRA_1.pdf)>[Accessed9September 2022].