



Case Study

A CASE STUDY ON ANJANANAMIKA W.S.R TO STYE

Nisarga M S¹, Prakruthi G^{2*}

¹UG Scholar, ²Assistant Professor, Department of Shalakya Tantra, Sri Paripoorna Sanathana Ayurveda Medical College, Hospital and Research centre, Arjunabettahalli, Bangalore Rural.

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ABSTRACT

Stye is an infection of the sebaceous glands of zeis at the base of the eye lashes, or an infection of the apocrine glands of moll. In Ayurvedic science, based on clinical signs and symptoms, stye can be correlated to *Anjananamika* where the symptoms include *Dahatodavatitamrapidaka*— i.e., boil which will be in *Tamravarna* associated with burning sensation and pricking sensation at *Vartmapradesha* i.e., in the lid and the other symptoms includes *Mridvimandaruja*— it will be soft and associated with mild pain. The line of treatment of the disease *Anjananamika* (stye) includes *Swedana* (hot compress), *Nishpidana* (pressure applying to drain out pus), *Bhedana* (incision), *Pratisarana* (rubbing of medicaments over the lids), *Anjana* (collyrium). The objective of the present study is to evaluate the effect of *Bidalaka* and *Aschyotana* along with internal medicines. A 19-year female patient approached the *Shalakya tantra* OPD of Sri Paripoorna Sanathana Ayurveda Medical College, Hospital and Research centre, Nelamangala, Bangalore with the complaints of swelling in the left eye lid since 3 days with mild pain and redness of the eyes. On examination, the whole edge of the left eye lid was oedematous along with the presence of an abscess in outer canthus. On these signs and symptoms, the patient was diagnosed as a case of stye and advised *Kriyakalpa* based on the *Roga* and *Rogibala* along with internal medicines which have given promising results with the complete absence of the symptoms within 10 days.

***Address for correspondence
Dr.Prakruthi G.**

Assistant Professor,
Department of Shalakya Tantra,
Sri Paripoorna Sanathana
Ayurveda Medical College,
Hospital and Research Centre,
Arjunabettahalli, Bangalore
Rural, Karnataka.
Email:
prakruthikalpana@gmail.com
Mobile: 8951895583

INTRODUCTION

Ayurveda, one of the world's oldest holistic healing systems has a unique approach in treating every disease. The growth of knowledge of Ayurvedic medicine attained such proportions that it has classified into *Ashtangas*. *Shalakya tantra* (branch of Ayurveda deals with diseases of EYE and ENT) is one among the *Ashtangas* of Ayurveda,^[1] where Acharya *Sushruta*, the ancient surgeon has contributed to a maximum extent in the field of ophthalmology. Stye (*Hordeolum Externum*) is an infection of the sebaceous glands of Zeis at the base of the eyelashes, or an infection of the apocrine sweat glands of Moll. External styes form on the outside of the lids and can be seen as small red bumps. Internal styes are infections of the meibomian sebaceous glands lining the inside of the

eyelids. They also cause a red bump underneath the lid with only generalized redness and swelling visible on the outside.^[2]

Styes are more painful and are chronic in nature. They usually do not resolve without intervention. The disease is commonly caused by a *Staphylococcus aureus*-bacterial infection, or by the blocking of an oil gland at the base of the eyelash. Although they are particularly common in infants, styes are experienced by people of all ages. Styes can be triggered by poor nutrition, sleep deprivation, or rubbing of the eyes. Using the same razor to shave hair both near the eyes and moustache should be avoided to prevent spreading the infection between individuals.

The 2 stages of stye are:

Stage of cellulitis	Stage of Abscess
Localised, hard, red tender swelling at the lid margin associated with marked oedema.	Visible pus point in relation of the affected cilia.

Treatment in modern science includes hot compresses in the stage of cellulitis, evacuation of pus, rarely surgical excision, antibiotics eye drops, eye ointment, systemic anti-inflammatory and analgesics to relieve pain and reduce odema.^[3]

According to Acharya *Sushruta*, the symptoms of *Anjananamika* are *Dahatodavati-Tamrapidaka* with *Mridvi* and *Mandaruja* at *Vartmapradesha* i.e., a soft small coppery coloured boil associated with burning sensation, pricking sensation and slight pain in the lid.^[4]

Acharya *Vagbhata* has described the characters of *Pidika* as: *Pidikas* produced by *Rakta* which are situated in the middle or at the end of the eye lids. In addition to pain and burning sensation, there will be itching sensation also. *Pidikas* are fixed to the eyelids (*Sthira*) and resemble green gram (*Mudgamatra*) in the shape and size. Acharya *Adhamalla* has described that these *Pidika* are fragile –*Komala*.^[5]

The line of treatment of *Anjananamika* (stye) includes:

- *Swedana* (hot compress), *Nishpidana* (pressure applying to drain out pus), *Bhedana* (incision), *Pratisarana* (rubbing of medicaments over the lids), *Anjana* (collyrium).^[6]

Treatment

S.No	Chikitsa	Dravya	Matra
1	<i>Bidalaka</i>	<i>Triphalachurna</i> and <i>Yashtimadhuchurna</i>	2 times for first 2 days and 1 time per day for next 5 days.
2	<i>Aschyotana</i>	<i>Ophthocare</i> eye drops	2 drop every 3 hourly for 8 days.
3	Internal medicines	a. <i>Triphalaguggulu</i> b. <i>Gandhakarasayana</i>	1 Tab-BID-AF for 10 days. 1 Tab-BID-BF for 10 days.

Procedure of *Bidalaka*

- ❖ Patient should lie down in supine position
- ❖ Depending on the disease, medicine is selected and made to *Kalka* form
- ❖ After *Mrudusweda*, the medicine should be taken and applied over eyes excluding eye lashes for 30 minutes
- ❖ After 30 minutes, *Lepa* has to be removed followed by *Mrudusweda*, using lukewarm water

- If it ruptures spontaneously, it should be well pressed and the pus should be drained out carefully. After removing the pus, a mixture containing *Manashila* (realgar), *Ela* (*Elettaria cardamomum*), *Tagara* (*Valeriana wallichii*), *Saindhavalavana* (rock salt) and *Madhu* (honey) should be used for *Pratisarana*.^[7]
- If it will not rupture on its own, the eye lids should be rubbed using *Rasanjana* (aqueous extract of *Berberis aristata*) and *Madhu* (honey) then *Bhedanakarma* (incision) should be done.^[8]
- *Seka* (ocular irrigation- one among ocular) using *Haridra* (*Curcuma longa*), *Madhuka* (*Glycyrrhiza glabra*), *Patola* (*Luffa acutangula*), *Iodhra* (*Symplocos racemosa*) and *Madhu* (honey) is advised by Acharya *Vagbhata*.^[9]
- *Anjananamika* is considered as a disease caused due to the vitiation of *Raktadosha* (one of the fundamental units of body as per Ayurveda) and hence Acharya *Yogarajnanaka* has advised *Raktamokshana* by using *Jalouka* (Leech).^[10]

Case history

A 19-year female patient with OPD number 30442 approached the *Shalakyata* OPD of Sri Paripoorna Sanathana Ayurveda Medical College, Hospital and Research centre, Nelamangala, Bangalore with the complaints of swelling in the left eye lid since 3 days with mild pain and redness of the eyes. On examination, the whole edge of the left eye lid was oedematous along with the presence of an abscess in outer canthus. Visual acuity was 6/9 in left eye and 6/6p in right eye. Other external ocular examination was found to be normal.

Procedure of *Aschyotana*

- ❖ Patient can be seated in supine/ sitting position
- ❖ From 2 *Angulas*, *Aschyotanadravya* has to be instilled into the eyes and patient is asked to rotate eyeball with closed eyes for 60 seconds
- ❖ 2 drops for 4 times in a day is the prescribed dosage and varies according to disease

Observation and results

Signs and symptoms	Before treatment	After treatment
Pain	Present	Absent
Lid swelling	Present	Absent
Watering of eyes	Present	Absent
Visual activity (left eye)	6/9	6/6

**Before treatment****after treatment****Bidalaka****DISCUSSION**

The signs and symptoms of sty are similar with the signs and symptoms of *Anjananamika* where there will be *Dushana* of *Rakta dhatu* along with *Mamsadhatu*. In later stages it may lead to several complications where in the patient may have visual impairment. In the present case the patient was examined thoroughly and prescribed appropriate *Kriyakalpa* along with suitable internal medicines which has given a promising result.

Bidalaka is one among the *Kriyakalpa* where in the drugs are applied in the form of paste over the eye excluding eye lashes. In the present case *Triphala churna* and *Yashtimadhu churna* were used based on the *Lakshanas*. Skin is one of the routes of drug administration. The drugs used in *Bidalaka* readily penetrate the eyelids which help to increase cutaneous blood flow thereby enhancing better absorption and reduce inflammation.

In *Aschyotana kriya kalpa*, the drops are instilled into the eyes from 2 *Angulas*. In early stage of any disease there will be redness, swelling and

pain, in this regards Acharyas have clearly explained the importance of *Aschyotana kriya kalpa*. Immediate instillation of the eye drops prepared out of combination of medicaments will certainly give instant relief. In this case, Ophthocare eye drops were given. The ingredients are *Madhu* (honey), *Amalaki* (*Emblica officinalis*), *Haridra* (*Curcuma longa*), *Tulasi* (*Ocimum sanctum*), *Shatapatri* (*Rosa damascene*), *Vibhitaki* (*Terminalia bellirica*) and *Yawani* (*Carum copticum*).

Most of the drugs are having *Chakshushya*, *Shothahara*, *Vranaropana*, *Rasayanakarmas* which have given added effects along with the procedural effects to counteract the disease.

Internally, *Triphalaguggulu* (Sha. Ma. Kha – 7/82-83) and *Gandhakarasyana* (Ayu. Pra. 2/46-48) was given. *Triphalaguggulu* contains *Haritaki* (*Terminalia chebula*), *Vibhitaki* (*Terminalia bellirica*), *Amalaki* (*Emblica officinalis*), *Pippali* (*Piper longum*), *Guggulu* (*Commiphora mukul*). Recent research says *Triphala guggulu* acts as a

potent anti-inflammatory along with wound cleansing and wound healing.^[11] *Gandhakarasyana* contains *Shudha Gandhaka*, *Godugdha*, *Chaturjataka* (*Twak- Cinnamomum zeylanicum*, *Ela- Elettaria cardamomum*, *Teja patra- Cinnamomum tamala*, *Nagakesara- Mesua ferraea*), *Guduchi* (*Tinospora cordifolia*), *Haritaki* (*Terminalia chebula*), *Vibhitaki* (*Terminalia bellirica*), *Amalaki* (*Emblica officinalis*), *Shunti* (*Zingiber officinale*), *Bringaraja* (*Eclipta prostrata*), *Sita*. *Gandhakarasyana* has proven anti-bacterial and anti-fungal activities.^[12] The drugs in *Gandhakarasyana* are having *Chakshushya*, *Shotaghna*, *Ropana karmas* also.

Stye has to be treated at the earliest as it may cause complications like multiple styes leading to visual impairment. Appropriate *Kriyakalpa* at the specific stage of the disease has aimed at giving good result. The new ocular drug delivery system has supported the view of ancient Acharyas. An applied drug on the skin should traverse the several layers of the skin encountering lipophilic and hydrophilic domains on the way to the dermis where absorption into systemic circulation is rapid due to the large capillary bed. Hydrophilic compounds can reach the dermis via shunt pathways such as hair follicles, sweat glands, nerve endings and blood and lymph vessels. It acts as the systemic absorption site for drugs.^[13]

CONCLUSION

Application of *Bidalaka* in appropriate form has increased the bio-availability of drugs administered. Overall effect of the drugs like antiseptic, antimicrobial, antibacterial along with its anti inflammatory actions has given good results by reaching the target tissue thereby giving promising results.

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