ejpmr, 2021,8(2), 464-466

SJIF Impact Factor 6.222

EUROPEAN JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.ejpmr.com

Case Study

ISSN 2394-3211

EJPMR

SUCCESSFULLY TREATED CASE OF *ARMA* (PTERYGIUM) WITH THE HELP OF *PIPPALYADI ANJANA* AND *TRIPHALA GHRITAM* – A CASE STUDY

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Article Received on 26/11/2020 **Article Revised on 16/12/2020** **Article Accepted on 06/01/2021**

ABSTRACT

Arma is disease of *Shukla Mandal* (White part of eyeball) described by all *Acharyas* in Ayurvedic Text. It contributes several type of treatment for *Arma*. Though in our *Samhitas*, *arma* is mainly explained as a *Chedan Sadhya vyadhi*, along with that there are so many *Aushadi yogas* explained for *arma* in the form of *Aschyotana, Anjana, Nasya karma, lepa*, etc. By considering this fact, this case of *Arma* was the successfully treated by "*Pippalyadi Anjana*" and "*Triphala Ghritam*". With the help of Anti-inflammatory, Anti-bacterial, Antioxidant, *Sukshma Guna* and *Lekhana Karma* of the formulation, the classical and associated symptoms of *Arma* gets pacify and it gives significant effect in *Arma* condition.

KEYWORD: Arma, Anjana, Lekhana, Chedana, etc.

INTRODUCTION

In Ayurveda *shalakya tantra* is the branch dealing with sense organs. Among all the *jyanendriyas, Chakshu* is considered as *pradhana*. *Arma* is one among *shuklagata roga* that is explained by both *acharya sushruta*[1] and *vagbhata*. *Arma* is a membrane like growth developing either from *kaneenika or apanga sandhi*, may or may not progress into *Krishna bhaga*.[2]

On the basis of signs and symptoms described in modern medical science, the disease '*Arma*' can be correlated to 'pterygium' which is a degenerative condition of subconjuctival tissues which proliferates as vascularised granulation tissues to invade cornea destroying the superficial layers of stroma and bowmans membrane, within inter palpebral fissure.[3] The epidemiological studies around the world have shown that the prevalence rates ranges from .3% to 37.46%.[4] Pterygium is common in hot climate, dusty and dry environment. Due to global warming pterygium is becoming a burning problem as it is mainly causing ozone layer depletion. It is a major public health issue in rural areas.

As per *acharyas* in *netraroganidana Rajonishevana, dhoomanishevana* etc can be the cause of arma.[2] Different treatments are explained for the management of *arma* mainly *lekhana, chedhana, anjana, ghrithapana* and *lepa*. *Arma* is a type of *Mamsavriddhi* (muscle like growth) hence *Acharyas* have indicated *Lekhana* and *Chedana* as the mainstay of treatment. Hence for the present study "*Pippalyadi Anjana*" is one among *lekhana anjana* which is explained in *Bhaishajya Ratnavali*[5] having *Vilekhana* property it can arrest further progression and also helps in the removal of *dushita kaphadi doshas* which causes *mamsa dushti* and "*Triphala Ghritam*" is one of the *ghrita* preparation explain in *Yogaratnakar*[6] having anti-inflammatory and anti-bacterial action were proposed.

CASE REPORT

The present case study is successful Ayurvedic management of a case of *Arma (Pterygium)*. A 32 year old Male patient came to SHIVMALHAR Ayurvedic Clinic who presented with the classical signs and symptoms of *Arma* which were told in classics like, *Mansa Vriddhi* (fleshy growth of conjunctival tissue), *Raga* (Redness/congestion of conjunctiva), *Vedana* (Pain in eyes), *Daha* (Burning Sensations), *Sopha* (Swelling of conjunctival tissue/ chemosis), *Prakash Ashahisnuta (*Photophobia), *Gharsha (*Foreign body sensation) etc. for 1 years was selected for the study.

History of present illness

The patient was having normal eyesight before 1 year. But then patient was gradually got symptomatic appearance of *Arma* and diagnosed during routine check-up at Ophthalmologist. Patient was also psychological upset since last few years due to fear of loss of eyesight. For which he took many local as well as oral medication. But there was no any significant relief. Hence, he came to SHIVMALHAR Ayurvedic Clinic for better management.

Past history: Not significant.

Personal history
Name- xyz
Age- 32 years
Sex- Male
Marital status- Married
Occupation- Housewife
Addiction - Tea
Bowel habit- Regular
Appetite- Poor
Sleep- Inadequate

Table No. 1 - Ashtavidh Pariksha.

Nadi (Pulse)	80/min
Mala (Stool)	*Saam*
Mutra (Urine)	*Niram*
Jivha (Tongue)	*Saam*
Shabda (Speech)	*Spashth*
Sparsha (Touch)	*Anushna*
Drika (Eye)	Pallor+
Akriti (Built)	*Madhyam*

Table No. 2 – Other.

BP	130/90 mmhg
Bala	*Madhyam*
Prakriti	*Pitta-Kaphaj*
Height	162 cm
Weight	66 kg

Table no. 3 – Assessment Grade for Subjective & Objective Criteria.

1	Redness	**G0**	No Redness
		G1	Slight Redness
		G2	Moderate Redness
		G3	Severe Redness
2	Foreign Body Sensation	**G0**	No Foreign body sensation
		G1	Mild Foreign body sensation (1-3)
		G2	Moderate Foreign body sensation (4-6)
		G3	Severe Foreign body sensation (7-10)
3	Watering	**G0**	No watering
		G1	2-3 times/day
		G2	5-10 times/day
		G3	More than 10 times/day
4	Length	**G0**	Beginning of the growth (0.5cm)
		G1	In between the canthus and limbus(0.75cm-1cm)
		G2	In between the canthus and limbus (1.1cm- 1.5 cm)
		G3	Up to limbus (>1.5cm)
5	Thickness	**G0**	Nil
		G1	Clearly visible episcleral vessels under the body of Pterygium
		G2	Partially visible episcleral vessels under the body of Pterygium
		G3	Totally obscured episcleral vessels underlying the body of Pterygium

Test Performed
- Visual Acuity Test
- Slit lamp bio microscopy

Trial drugs
- ***Pippalyadi Anjana:*** - *Pippali, Triphala, Laksha, Loha bhasma, Saindhav Lavan, Bringaraj Swaras,* etc
- ***Triphala Ghritam:*** - *Triphala, Goghrita*, etc

Table No. 4 - Intervention Chart.

Sr. No.	DRUG	ANUPANA	DURATION & DOSE
1.	*Pippalyadi Anjana*	Rose Water	2 *Shalakha* Morning & Evening 30 days
2.	*Triphala Ghritam*	Warm Water	10 ml Morning & Evening 30 days

RESULTS

The progress will be noted on the basis of assessment parameters, parametric test before treatment & after treatment

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Table No. 5.

Sr. No.	Assessment Parameters	Before Treatment	After Treatment
1	Redness	**G3**	**G1**
2	Foreign Body Sensation	**G2**	**G1**
3	Watering	**G3**	**G0**
4	Length	**G1**	**G0**
5	Thickness	**G2**	**G0**
6	Visual Acuity	**6/9**	**6/6**
7	Slit lamp bio microscopy	**Macular Degeneration**	**Nil**

DISCUSSION

Arma is one among 11 *netra vikara* studied under *shulagata roga* by *acharya sushrutha* and 13 explained by *vagbhata*. It's mainly classified into 5 types i.e. *Prasthari, Shuklarma, Khatajarma, Adhimamsa arma, Snayu arma*. It is nothing but membranous growth that forms in *shuklamandala*. Tere are different treatments are explained for the management of *arma* mainly *lekhana, chedhana, anjana, ghrithapana* and *lepa*. It is also explained in *bhavaprakasha madhyama khanda*,[7] *netra roga chikistadhikara* of *yogaratnakara*[8] and in 3 chapter of *gada nigraha. Madhava kara* explained about *arma* in *madhyama khanda*, also *netra roga* and *chikitsa* explained in *sahasra yoga* and *chikitsamanjari*.

Anjana is one of *kriyakalpas* used widely in the treatments of *netra vikaras*. It is mainly of 3 types; *lekhana, ropana* & *snehana*. Again it's preserved as *gudika, rasakriya* & *choorna, Netra, vartma, sirakosha, srotasa* and *srungataka marmaasrita doshas* are taken out by *anjana*.

Mode of Action of *Pippalyadi Anjanam and Traiphalam Ghritam*

In this case study, *Pippalyadi Anjana* and *Traiphala Ghritam* having ingredients like *Pippali* and *Triphala* possess Anti-inflammatory, Anti-bacterial and Antioxidant property. *Daruharidra* having Anti-inflammatory, Anti- bacterial, Anti-tumour and Anti-oxidant property. *Saindhava Lavana* is having *Sukshma Guna* and *Lekhana Karma* properties hence commonly used as drug for *Pratisarana*. Honey has Anti-inflammatory and Anti-bacterial properties.

CONCLUSION

In *Shalakya Tantra* among all "*Netrakriyakalpa*", "*Anjana*" is also a unique and effective therapy for treating and preventing eye diseases. In the present clinical study, *Pippalyadi Anjana* locally and *Traiphala Ghritam* orally were found to be effective in reducing signs and symptoms of *Arma*. No adverse and toxic effects were observed during and after the completion of treatment. Therefore *Pippalyadi Anjana* and *Traiphala Ghritam* can be used safely and effectively in the treatment of *Arma* (pterygium).

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