

AYURVEDIC MANAGEMENT OF AGE RELATED MACULAR DEGENERATION, A
CASE STUDYNisar Ali Khan^{1*} and Dolly Chhabilal Zade²¹Associate Professor, Head of Department of Shalakyatantra Government Ayurved College, Nanded.²P.G. Scholar, Shalakyatantra Department Government Ayurved College, Nanded.***Corresponding Author: Dr. Nisar Ali Khan**

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ABSTRACT

Netra is one of the precious sense organ, there by our *Acharyas* have described the *Netra shareera*, *kriya*, *Netra rogas* and their management in detail, *Vataja Timira* is one such *Netra Roga* which resembles to symptoms of Dry ARMD. Age related macular degeneration (ARMD) is the leading cause of irreversible blindness among individuals over the age of 65 in industrialized countries. In *Ayurvedic* texts, *Vataj Timir* occurs due to imbalance of three *Doshas* either individually or in combination. In majority of cases, *Ayurvedic* treatment helps to control the progressive degeneration so that present vision status can be stabilized. *Panchakarma* and *kriyakalpa* medicines in *Ayurveda* give strength to the retina and improve vision. A diagnosed case of dry ARMD with complaints of diminished vision both eyes, flashes of light in both eyes, scotoma since 6 months approached to our patient department and was managed by *Virechan*, *Tarpan* and systemic medicines. Significant improvement was noticed in vision, after the treatment.

KEYWORDS: *Netra*, *Tarpana*, *Vataj Timir*, ARMD.**INTRODUCTION**

Shalakyatantra is one of the branches of “*Ashtang Ayurved*” specifically for diagnosis and treatment of all the diseases occurring above the neck organs such as eyes, nose, ear, mouth and head. Among this, eye is an important sense organ of our body. There are different diseases of macula, the age related macular degeneration (dry ARMD) is selected for study because incidence in is higher probably due to low nutritious diet, over exposure to sunlight etc. Visual loss is irreversible and satisfactory treatment is not available. In *Ayurveda* *Vataja Timira* is one such *Netra Roga* which resembles to symptoms of Dry ARMD. As per reference of *Astang Hrudya* *virechan Tarpan* is treatment for *Vataj Timir*.

Age-related macular degeneration (ARMD) dry type is a degenerative disorder affecting the macula. It is characterized by the presence of specific clinical findings, including drusen and retinal pigmentary epithelium changes. Later stages of the disease are associated with impairment of vision Dry (non-exudative, non-neovascular) ARMD is the most common form, comprising around 90% of diagnosed disease. Geographic atrophy (GA) is the advanced stage of dry ARMD.

In this case study of dry age related macular degeneration, the patient was selected from OPD of

Shalakyatantra Department Government Ayurvedic College and Hospital Nanded. Detail history of patient was taken, examinations were done. *Virechan* treatment was given with prior *Snehan*, *Swedan* and followed by *Sanasarjan Kram* and then *Mahatriphaladighrita Tarpan* is done for 7 days. Assessment was done after complete treatment.

CASE REPORT

A 55 years old male patient visited to ophthalmology OPD of Shalakyatantra department, G.A.C And Hospital, Nanded on 8 /3/2022 with chief complaint of diminished vision of both eyes, flashes of light and central scotoma. Patient was suffering from all these symptoms since 6 months.

He consulted other nearby ophthalmologists, went for OCT (optical coherence tomography) of both eyes. He was diagnosed as case of dry age related macular degeneration both eyes and took medicine but not satisfied, and then he came to G.A.C. Hospital Nanded.

Personal history

Diet –Non vegetarian

Appetite – normal

Bowel –regular

Habbits – tobacco chewing, alcohol

Ashtavidha pariksha:

Nadi –vata pradhan pitta
Mala –prakrut
Mutra –prakrut
Jivha – niram

Shabda –prakrut
Druka –prakrut
Akruti –madhyam.

| Visual examination – | Right eye | Left eye |
|-------------------------------|-----------|----------|
| DVA unaided - | F.C 3 ft | F.C. 3ft |
| With best corrected glasses – | 6/18 | 6/18 |
| Near vision | N/10 | N/10 |

Ocular examination:- Eyelid, conjunctiva, sclera, cornea, anterior chamber were normal with both lenses within normal limit, intra ocular pressure by Schiottz tonometer was 17.3 mmHg. Direct Ophthalmology revealed age related macular degeneration with geographic macular changes with vitreous floaters.

Fundus examination:- Revealed drusens, pigmentary anomalies on macula and central retina, characteristic of dry age related macular degeneration.

Optic disc – NAD

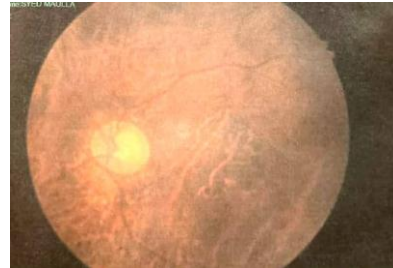
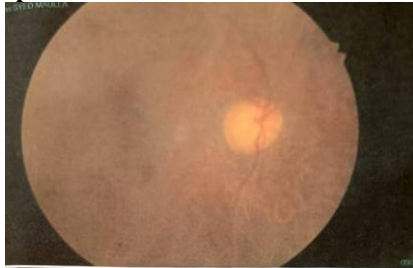
CD ratio – Normal

FR (foveal reflex) – absent

Retinal vessels- NAD

Background retina- Irregular patches of Hyperpigmentation and drusen in parafoveal area and central retina. Peripheral retina showed marked tessellation.

Fundus photograph Pre –treatment



Procedure administrated to patient

Poovakarma –Administration of internal *Snehapan (Ghritapan)* as per the *Koshta* of patient for 3 days in the quantity of 30ml, 40ml and 50ml respectively. This is followed by *Abhyang* (external *Snehan*) and *Swedan*.

Pradhankarma

Virechan given with *Dugdha Mishrit Erandtail* 30 ml followed by *sansarjan karma*.

Mahatriphaladi Ghrita Tarpan done for 7 days.

Internal medicine

1. *Triphala Churna* -1 tsf HS with luke warm water.
2. *Saptamrut Loha* 250 mg. OD with one teaspoon *Ghrita* before meals. (One month)

Follow up finding

| Visual examination – | Right eye | left eye |
|-------------------------------|-----------|----------|
| DVA unaided | 6/60 | 6/60 |
| With best corrected glasses – | 6/9 p | 6/9 p |
| Near vision | N/8 | N/8 |

Fundas photograph. Post treatment



DISCUSSION

ARMD is nothing but *vataj timira* caused mainly due to vitiation of *Vata with Pitta Dosha*, affecting *Rasa, Rakta, Mansa, Meda, and Majja, Dhatu of Drishti mandala*. The line of treatment in dry type of ARMD cases should be *Vata Pitta Shamaka, Srotas Shodhan* and *Rasayanachikita*.

Virechan- Is effective for *Strtoshodhan* and *pitta shaman* by eliminating the *Dosha* out of body and further *Anulomana* of *Pittadosha* leading to normalization of function of *aalochak pitta*. *Triphala churna* given at night is recommended in management of *Timira*. It is *tridosha shaamak, anulomana* and *rasayana*. Hence it pacifies *vaata-pitta*, normalizes *gati* of *doshas* and performs nourishing effect by helping formation of healthy *rasa dhatu*.

Tarpana- is the therapeutic and effective in ARMD brightens and strengthens the eyes, improves vision, calms the brain and nervous system. In *Vata Pittaja* disease of eyes i.e. caused due to aggravation on *Vata* and *Pitta*, *Tarpana* plays important role by performing *vata-pitta shaman* and nourishing intraocular *dhatu*s and restricting, somewhat reverting degenerative process.

Medications given were without any other allopathic treatment. Hence, in the entire treatment period patient underwent *Ayurvedic* treatment purely for Dry ARMD. No adverse events were noticed during the course of treatment and follow up period too.

CONCLUSION

Nowadays people believe in *Ayurvedic* treatment, Dry Age Related Macular Degeneration can be correlated to *Vataj Timir* in *Ayurveda*. It is characterized by diminished vision, central scotoma, flashes of light. *Ayurveda* recommend that *Virechan, Tarpan* is highly effective in *Vataj Timir* with special reference to dry ARMD. Patient got relief from symptoms and signs of disease, vision improved, and flashes of light decreased, patient tolerated *Virechan* and *Tarpan* followed, responded very well to it. Patient did not get any side effect during treatment. Further study will be continued on number of patients.

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