

EUROPEAN JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.ejpmr.com

Review Article
ISSN 2394-3211
EJPMR

APPLICATION OF BIDALAKA IN PRAKLINNA VARTMA WITH REFERENCE TO BLEPHARITIS – A REVIEW

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Article Received on 22/12/2022

Article Revised on 12/01/2023

Article Accepted on 02/02/2023

ABSTRACT

Shalakya Tantra is among one of specialities of Ashtanga Ayurveda which deals with diseases occurring above clavicle. Eyes are one of the most sensitive and vulnerable organs in the body as it is exposed to airborne infectants, pollutants, dust and other particles, which can directly land on the surface of eye. Acharya Sushruta described the 76 Netraroga with their symptom and treatment. Praklinnavartma is one among 21 types of diseases of Vartma. The disease Praklinnavartma can be correlated with Blepharitis based on their origin, site, pathogenesis, signs and symptoms. Praklinna vartma is one among the beshaja sadhya vyadhi. The kriya kalpa is the special therapeutic procedures which are the basis of the treatment of eye disease. Acharyas were aware of the importance of the topical route in treating the ocular ailments. Any ocular disorder or condition can be classified as either Amavastha (with inflammatory signs) or Niramavastha (without inflammatory signs) based on its signs & symptoms there by dividing Kriyakalpas broadly into two categories. Bidalaka is one such therapeutic procedure which can be done ama as well as nirama avastha.

KEYWORDS: Praklinna Vartma, Kriyakalpa, Bidalaka, Ama Avastha, Nirama Avastha.

INTRODUCTION

Eye is the most precious organ. The cascade of beautiful and healthy eyes mesmerizes everyone. Eyes are the crowning glory of any person and it is an element vital for beauty. The eyes are one of the most sensitive and vulnerable organs in the body as it is exposed to airborne infectants, pollutants, dust and other particles, which can directly land on the surface of eye. These may lead to various kinds of eye diseases. Shalakya Tantra is among one of specialities of Ashtanga Ayurveda which deals with diseases occurring above clavicle. [1] so, it mainly deals with sense organs, the disease affecting them and their management. Among these sense organs, eyes are one among them. [2] Eye is unarguably most important of the five sense organs. One should make all sincere efforts to protect eyes and treat eye diseases. Acharya Sushruta described the 76 Netraroga with their symptom and treatment. Praklinnavartma is one among 21 types of diseases of Vartma, it is characterized by predominance of Klinnata (congestion) due to Kapha Dosha.[3]

The disease Praklinnavartma can be correlated with Blepharitis based on their origin, site, pathogenesis, signs and symptoms.^[4]

Blepharitis is a sub-acute or chronic inflammation of lids margin. Symptoms include chronic irritation, itching, mild lacrimation, gluing of cilia and mild photophobia. [5] It is a common clinical condition seen in general ophthalmic practice in all age groups, races and in both the sexes. It is not contagious, generally does not cause any permanent damage to eyesight, but may become an uncomfortable and irritating problem. The poor correlation between symptoms and signs, the uncertain etiology and mechanisms of the disease process, conspire to make management difficult. [6] Therefore, it has high and frequent recurrence. So, to find out the better management and to establish the correlation of this disease with disease having maximum similarity i.e., Praklinnavartama in Ayurvedic ophthalmology. [7]

The kriya kalpa is the special therapeutic procedures which are the basis of the treatment of eye diseases. [8] In the field of ophthalmology Acharyas have given equal importance to systemic and local administration of the drugs. It clearly indicates that during ancient time, Acharyas were aware of the importance of the topical route in treating the ocular ailments. Prashasta bheshajam or an ideal drug of medicament is one which keeps away an individual from diseases and maintains in healthy condition.

Any ocular disorder or condition can be classified as either Amavastha (with inflammatory signs) or

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Niramavastha (without inflammatory signs) based on its signs & symptoms there by dividing Kriyakalpas broadly into two categories. That is, those that can be done during both Amavastha & Niramavastha and others which can done only during Niramavastha. Bidalaka can be done during Ama as well as Niramavastha. [9]

AMA NETRA ROGA LAKSHANA AND $CHIKISTA^{[10]}$

Intense of disease, discoloration, swelling, foreign body sensation, pricking type of pain, pain, discharge these are the symptoms developed in ama avastha of netra.

In eye diseases associated with ama the following six act as pachana — fomentation sweda, pralepa (past application), bitter diet (tiktha anna and pana), pouring of liquid medicine(seka), fasting (langhana) for period of four days.

Collyrium(anjana), eye drops(aschyothana), and intake of decoction(kwatha) are contraindicated in ama stage.

APPROCH OF CONCEPT OF LANGHANA IN NETRA ROGA^[11]

Eye diseases, gastro intestinal disorder, rhinitis, wound and fever- these five diseases are pacified by fasting for five days.

Langhana – aguru bhojana, upvasa for triratra, naktha ashana, apyashana

CONTRAINDICATION IN AMA NETRA

Anjana, gritha pana, kashaya pana, guru ahara sevana, sana, purana(tarpana)

In ama avastha one can think of seka, bidalaka, pindi and aschyothana

NIRAMA NETRA ROGA LAKSHANA AND CHIKISTA

Reduction in symptoms such as pain, itiching, swelling, discharge, prasatha varna of netra (normal texture and color of eye) these are the nirama lakshana

The treatment that can be followed in nirama avatha are anjana, puttapaka and tarpana

Bidalaka It is the application of medicated pastes over eye lids excluding eye lashes. Thickness of Bidalaka is similar to Mukhalepa. Bidalaka relieves burning sensations, discharge, excessive tears, swelling, redness, itching. [12]

Types of Bidalaka	Thickness of Bidalaka
Doshaghna	4 times more than varnaya
Vishaghna	3 times more than varnya
Varanya	1/2 Angula

According to A.F.I. (part 1, second revised English edition, pg no-483) 1 Angula- 1.95cm i.e., 19.5mm. Average measurement of 1 angula was found to be 20 mm. So, the lowest thickness of Bidalaka was taken as

equal to 5.0mm Likewise medium thickness 6.5mm & maximum thickness 10mm.

TIME OF APPLICATION

It can be applied any time during the day and in the pain phase of the disease.

INDICATION^[13]

Burning Sensation, Discharges, Lacrimation, edema, congestion etc.

CONTRAINDICATION[14]

- Excessive speaking, jokes, anger, grief, weeping.
- Wandering under the sun,
- Day sleep,
- Produces itching, dryness, running nose and disturbed vision,
- After paste gets dried up, it should be moistened with water and removed,
- Later oil should be anointed over the lids,
- Contraindicated at night.

SAMYAK LAKSHANA

Free from Burning sensation, Discharge, Lacrimation, Edema & Congestion.

MODE OF ACTION[15]

The medicine are absorbed through akshikosha (the eye lid and orbit), sandhi (junctional area, sira- the blood vessel, sringataka marma(vital point), grahana-(nasal region), asya (oral cavity), and srotas(minute channels) reach the upper region. This absorption of medicine will expel vitiated doshas.

PRAKLINNA VARTMA AND BIDALAKA

The disease Praklinnavartama is included in the vartmagata roga., Acharya Sushruta has described this disease as Kapha dominating presentation and the prognosis of disease is sadhya and it can be treated with aushadha (ashastrakrita).

Niruktee

Pra+ Klinna -klinna adram iti

The word 'pra' is a prefix means pradhana (chiefly).

The word 'Klinna' means which is having kleda i.e adrata (moisture)

The vartma disease which is chiefly characterised by moistening of lid is called Praklinnvartama.

It is characterized by predominance of Klinnata (congestion) due to Kapha Dosha, painless or mild pain with swollen lid externally, discharge, itching and pricking sensation.

Praklinnavartma having similar symptomatology as told in ama avastha of Netra roga. Hence one can administer bidalaka as prime line of treatment.

The disease Praklinnavartma can be correlated with Blepharitis, it is a generalized term that refers to

inflammation of eyelid margins and associated eyelash follicles, apocrine and meibomian glands. It can be broadly classified into staphylococcal blepharitis affecting the anterior eyelid margin and meibomian gland dysfunction affecting posterior eyelid margin.

Blepharitis also causes secondary changes in ocular surface including tear film. The lid margin are the transient zone between the skin of lids and palpebral conjunctiva; hence they share pathologies of both. It is lined by inter marginal strip of transient epithelium that has characteristics of both the skin and the conjunctiva. The infection of lid margin can be caused by a myriad of organisms.

Blepharitis is one of the commonest infectious diseases of eye. The symptom Burning sensation, Itching, Matting of lashes, Photophobia, Lacrimation, Flakes. If Blepharitis is not treated the following sequelae may occur Chronic Conjunctivitis, Madarosis, Trichiasis, Tylosis, Epiphora, Ectropion^[17]

Bidalaka is useful to control acute symptoms and instant relief. It is user friendly and economic. Patient can carry on the treatment at home if once demonstrated. The side effects are comparatively less or negligible as there is no actual contact with ocular structures like conjunctiva or cornea. Thus, Bidalaka treatment can be used widely in various eye diseases. It gives excellent result in acute symptoms seen in praklinna vartma.

Drugs applied locally directly gets absorbed through blood stream and acts on target tissue. This makes bidalaka selective line of treatment over systemic one. Oral drugs need to face various barriers like blood aqueous barrier, blood-vitreous barrier, blood-retinal barrier etc while local therapy provides higher concentration in less time. In bidalaka, potency of drugs can be increased by altering temperature, concentration, tissue contact time and way of application while in systemic drug delivery one should treat according to Pachaka pitta and jatharagni.

DISCUSSION

As bidalaka is a modified form of lepa or external application of medicated past over the eye lids. It increases the tissue contact time of the drug. Lepa is one of best line of treatment in ama avastha the symptomatology developed in praklinna vartma are similar to ama lakshana of netra. Most of the absorption occurs via epidermal route. Vidalaka can improve the eyelids disorders. Deep penetrating properties of the drugs can easily penetrate across the skin of eyelid through the appendageal roots. The thickness and integrity of stratum corneum is an important factor determining the transdermal drug absorption. The drug also improves the vascular supply of the eyelid which in turn helps in faster and effective absorption.

CONCLUSION

Ayurvedic literature on Blepharitis and Praklinna vartma revealed that the clinical features of Blepharitis can be somewhat correlated with Praklinna vartma. Bidalaka is useful to control acute symptoms and instant relief. It is user friendly and economic. Patient can carry on the treatment at home if once demonstrated. The side effects are comparatively less or negligible as there is no actual contact with ocular structures like conjunctiva or cornea. Thus, Bidalaka treatment can be used widely in various eye diseases. Absorption of drug has regional variation at different body sites. Skin thickness takes a large part in skin permeability. Periorbital skin and skin over lids are thinnest of all over body. Hence paste applied over this skin gets absorbed more rapidly than any other part of body. The tissue contacts time and bioavailability of the drugs used in procedure like Bidalaka is more, so large absorption of drugs take place therefore, it provides quick relief in subsiding the symptoms.

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