

REVIEW OF SHUSHKAKSHIPAKA W.S.R. TO DRY EYE DISEASE**1. Dr. Neeta Patil¹,**

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ABSTRACT :

Shushkakshipaka is a common ocular condition in the present era. It is included under sarvakshigata roga, which is caused due to the vitiation of vata-pitta doshas and supported by the vitiation of Rakta dhatu leads to Dryness of the eyes, irritation, foreign body sensation, burning sensation, blurred vision and difficulty in lid movements which are the main clinical features of this disease². Shushkakshipaka is a beshaja sadhya vyadhi³.

Patients with dry eye often complain of pain, heaviness, foreign body sensation, redness, photophobia and reflex watering due to corneal irritation. Patients experience the symptoms of discomfort associated with dry eye, which are burning, stinging, grittiness, foreign body sensation, tearing, ocular fatigue, and dryness⁶. The resultant damage to the eye surface increases discomfort and sensitivity to bright light.⁷

Considering all these lacunas of established regimen and increasing no. of patients affected by dry eyes, it is necessary to look for an alternative therapy which is safer, cheap, easily available effective in dry eyes.

Keywords: *Shushkakshipaka, Dry eye Syndrome, Vata pitta dosha*

INTRODUCTION

The eyes are said to be most important than all other Indriyas¹. They are considered as the reflectors of the mind. Eyes are the most precisely developed portions of the brain seen outside the skull. It is unique organ in the body where the course as well as patho-physiology of disease process is visible, effect of therapeutic agents can very well be assessed and if needed documented.

Shushkakshipaka is a common ocular condition in the present era. It is included under sarvakshigata roga, which is caused due to the vitiation of vata-pitta doshas and supported by the vitiation of Rakta dhatu leads to Dryness of the eyes, irritation, foreign body sensation, burning sensation, blurred vision and difficulty in lid movements which are the main clinical features of this disease². Shushkakshipaka is a bhashya sadhya vyadhi³.

Dry eye is not a disease entity but symptom complex, occurring as a sequel of deficiency or abnormality of tear film⁴. The term dry-eye syndrome according to Dry Eye Work Shop (DEWS) has been defined as “a multifactorial disease of the tears and ocular surface that results in symptoms of discomfort, visual disturbance, and tear-film instability with potential damage to the ocular surface⁵.

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Because blinking coats the eye with tears; symptoms are worsened by activities in which the rate of blinking is reduced due to prolonged use of the eyes.⁷ These activities include prolonged reading, computer & smart phone usage, driving, or watching television.^{7 8} Symptoms increase in windy, dusty or smoky (including cigarette smoke) areas, in dry environments high altitudes including airplanes, on days with low humidity, and in areas where an air conditioner (especially in a car), fan, heater, or even a hair dryer is being used.^{7 8 9 10}

Most people who have dry eyes experience mild irritation with no long-term effects. However, if the condition is left untreated or becomes severe, it can produce complications that can cause eye damage, resulting in impaired vision or (rarely) in the loss of vision.⁸ Scarring of the cornea may occur in some cases without treatment.¹¹ To avoid these complications, it should be treated as early as possible.

The symptoms of dry eye like pain, blurry visions, foreign body sensation, scratchiness, burning sensation, sensitivity to light are similar to that seen in Shushkakshipaka. So according to modern ophthalmology Shushkakshipaka can be correlated with dry eye disease.

Considering all these lacunas of established regimen and increasing no. of patients affected by dry eyes, it is necessary to look for an alternative therapy which is safer, cheap, easily available effective in dry eyes.

CLASSIFICATION¹²

Dry eye is classified mainly into two types

1. Aqueous deficient
2. Evaporative dry eye.

1. Aqueous Deficient dry eye- has two major groupings Sjogren's syndrome dry eye and non-Sjogren's syndrome dry eye. Tear deficient dry eye is caused by either a failure in transporting lacrimal fluid to the conjunctival sac (resulting in a decreased amount of tears in the conjunctival sac) or a disorder in lacrimal gland function

2. Evaporative dry eye- may be either intrinsic or extrinsic. Intrinsic refers to situations where the regulation of evaporative loss from the tear film is directly affected and extrinsic evaporative dry eye includes those etiologies that increase evaporation by their pathological effects on the ocular surface. Evaporative dry eye can be due to either intrinsic disease factors (affecting lid structures or dynamics) or it may be extrinsic, where ocular surface disease occurs due to some extrinsic factor. Intrinsic factors are further classified into oil deficient (due to meibomian gland disorders), lid related, blink rate related and surface change. Extrinsic factors include ocular surface disorders caused due to vitamin A deficiency, use of topical drugs and effects due to their preservatives, contact lens wear and ocular allergies.

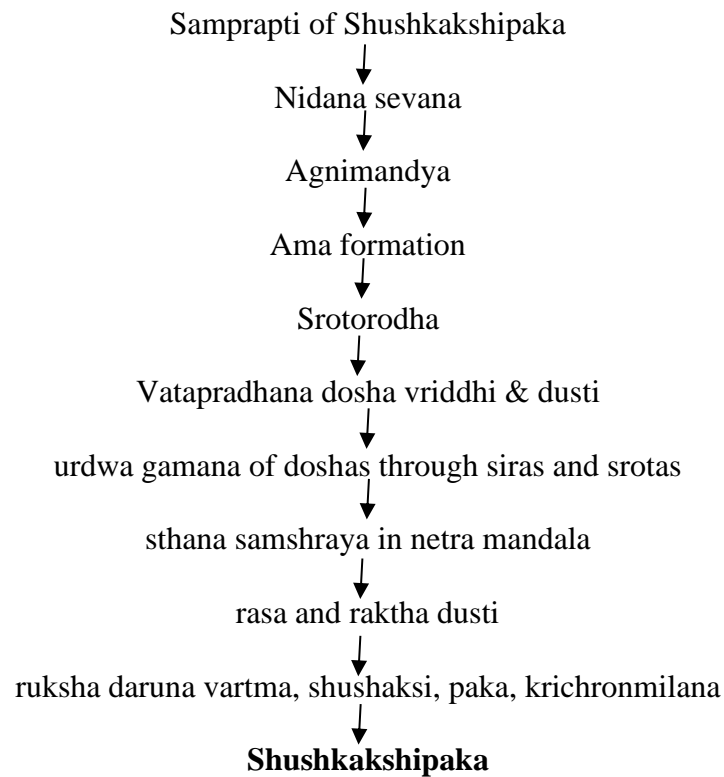
3. Etiological Factors: Menopause, Aging, RA-associated with Sjogren's syndrome, exposure to wind, smoke, heat, allergens, low Humidity, indoor environment like Air conditioned rooms,

reduction in blink rate due to Visual Display Terminal (VDT) use, Exposure to various other factors like food habits, daily regimen, seasonal regimen, if not followed properly, hot climates, certain systemic drugs like anti-histamines, antispasmodics, diuretics or steroids and Lifestyle changes¹³.

Specific nidanas for Shushkakshipaka has not been mentioned in samhita, so samanya nidana mentioned for netra roga can be taken here which is Vata Pittakara:

Vegavinigraha or suppression of natural urges, that causes vata vitiation- adhovata, mala, mutra and nidra, Rajo dhoomanishavana (inhalation of dust and smoke), Sookshma nireekshanath, Atisheegrayanath, Atisheethasevanath, Vriddhavastha. Intake of food predominantly katu, Kashaya, tikta rasa Kulatta (Horsegram) shuktha, amlaandarana, Swapnaviparyaya (altered sleep pattern), Prasakta Samrodana (continuous weeping), Kopa and Shoka (excessive anger and grief) Asatmendriyarth samyoga especially athiyoga and mithya yoga of chakshu indriya.¹⁴

Pathogenesis: Samprapti in Ayurveda can be understood in this way



CLINICAL FEATURES:

The most common clinical features are irritation, a foreign body sensation, burning, excessive secretion, redness, photophobia, blurred vision, itching, pain and inability to tear in response to irritation or emotions. There may be crusting of eyelids and sticking. This is commonly seen in the morning on waking up.

Acharyas have mentioned similar lakshanas like Ruksha daruna vartma and akshi (Dryness), Garsha (foreign body sensation), Toda (Pricking sensation), Daha (Burning sensation), Raga (redness) and Krichronmilana nimilana (Painful blinking)

DIAGNOSIS¹⁵

The tests measure the following parameters: .

- Stability of the tear film (break-up time)
- Tear production (Schirmer's test, Fluorescein clearance and tear osmolarity)

Sadhya Asadhyata: Shushkakshipaka is a Sadhya Vyadhi.

MANAGEMENT OF DRYEYES: The management in general consists of Drops and gels, Mucolytic agents, Punctal occlusion, Anti-inflammatory agents, Contact lenses.

Ayurvedic treatment principles consist of Seka, Bidalaka, Tarpana, Nasya and Brimhana. All Acharyas said that shuskakshipaak is ashastrakruta ausadha sadhya vyadhi. In this disease vitiated doshas i.e. vata and pitta affects rasa, rakta dhatu and ashru and akshi sneha hence aim of treatment should be vata pitta shamaka and rasa rakta dhatu prasadana along with sneha vardhana effect.

In Sarvagata netra roga chikitsa adhyaya in contest of treatment of shuskakshipaak, acharya sushruta suggested following treatment modalities.

1. Anjana should be done, which is made up of powder of saindhav lavana, daruharidra, sunthi along with lemon juice and mixed with ghruta, it should be applied with stanya and small amount of water.
2. Jivaniya ghruta paan and akshi tarpana with similar ghruta should also be done preceded by anu taila nasya.
3. Cold water parisheka mixed with saindhav lavana should be done.
4. Rajanyadi ghruta can also be used for anjana.

Acharya vagbhata also said almost similar yogas; as ghruta paana, jivaniya ghruta tarpana, anu taila nasya, netra parisheka. Besides these all remedies he also suggests application of keshanjana.¹⁵

CONCLUSION

Dry eyes a tear film disorder has a close resemblance with the clinical entity of Shushakakshipaka. Dry eye is the most common disease in the present days because of its recurrence, chronicity and lack of potential treatment in contemporary science. Seka, Tarpana, Nasya, Anjana, and Sarpi pana are the treatment modalities explained as vishesha chikitsa for shushkakshipaka.

References:

1. Vd. Jadavji Trikamaji Acharya , Sushrutasamhita Uttarantra with commentary of sri dalhanacarya , Choukhamba Surbharati Prakashan Dalhana Comentary Sholka no 1/10 Page No 596
2. dr. Ganesh k Garde , Sarth Vagbhat, Anmol prakashan,Pune, 1st Edition Reprint 2004 uttarsthan chapter no15/16 page.no 398
3. Vd. Jadavji Trikamaji Acharya , Sushrutasamhita Uttarantra with commentary of sri dalhanacarya , Choukhamba Surbharati Prakashan Sholka no 1/29-30 Page No 597
4. A K Khurana Comprehensive ophthalmology New Age International (p) Ltd Publihers 4th edition Reprint 2008 page no. 365
5. The definition and classification of dry eye disease: Report of the Definition and Classification Subcommittee of the International Dry Eye WorkShop (2007) Ocul Surf. 2007; 5:75–92. [PubMed]
6. Gayton JL. Etiology, prevalence, and treatment of dry eye disease. Clin Ophthalmol. 2009;3:405–12.[PMC free article] [PubMed]
7. "Keratoconjunctivitis Sicca". The Merck Manual, Home Edition. Merck & Co., Inc. 2003-02-01. Archived from the original on 2006-11-12. Retrieved 2006-11-12.
8. Michelle Meadows (May–June 2005). "Dealing with Dry Eye". FDA Consumer Magazine. U.S. Food and Drug Administration. Archived from the original on February 23, 2008
9. "Keratoconjunctivitis, Sicca". eMedicine. WebMD, Inc. January 27, 2010. Archived from the original on March 7, 2010. Retrieved September 3, 2010.
10. "Dry eyes". Mayo Clinic. Mayo Foundation for Medical Education and Research. 2006-06-14. Archived from the original on 2007-03-24. Retrieved 2006-11-17.
11. "Facts About Dry Eye". NEI. February 2013. Archived from the original on 28 July 2016. Retrieved 29 July 2016.

12. The Definition and Classification of Dry Eye Disease: Report of the Definition and Classification Subcommittee of the International Dry Eye Work Shop (2007),pg-75
13. The Definition and Classification of Dry Eye Disease: Report of the Definition and Classification Subcommittee of the International Dry Eye Work Shop (2007), pg-77
14. Classification Subcommittee of the International Dry Eye Work Shop (2007), pg-77
15. Susruta, SusrutaSamhita, Nibandhasamgrahatika of Dalhana and Nyaya Chandrikatika of Gayadasa, Chowkhamba Krishnadas Academy Varanasi, Edition – 2009, Uttarantra, Chapter1, Verse 14, pp - 824, pg -65
16. Shastri Ambikadutta, Sushruta Samhita. Ayurveda Tattva Sandipika Hindi commentary, Uttara Tantra 9/24, Chaukhambha Sanskrit Sansthan Varanasi. Reprint, 2002, 41.