

AN AYURVEDA APPROACH IN THE MANAGEMENT OF GIANT PAPILLARY CONJUNCTIVITIS: A CASE STUDY

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ABSTRACT

Background: Giant papillary conjunctivitis is a severe form of papillary conjunctivitis predominantly affecting superior tarsal conjunctiva usually as a result of mechanical injury followed by antigenic reaction. The condition is mostly associated with contact lens wear, but in some instances, it also presents with chronic use of irritant ocular cosmetics e.g. *kajal*, mascara etc. As per *Ayurveda* classics this condition can be correlated with *Pitattja Abhisyananda* which is usually associated with generalised vitiation of *Pitta Dosha*. **Objective:** To observe the efficacy of *Ayurveda* treatment in the management of Giant papillary conjunctivitis. **Material & Methods:** An 18 year old male patient presented to eye OPD of NIA, Jaipur with gradual onset

of burning sensation, itching in eyes, foreign body sensation in eyes, watering from eyes and photophobia with a history of one year. History and examinations lead to the diagnosis of Giant papillary conjunctivitis. Patient was treated according to principles of treatment of *Pittaja Abhisyananda* with *Parisheka* therapy and *Shamana Chikitsa* using various *Ayurveda* formulations. **Results:** Remarkable results were observed in the form of improvement in all the symptoms and signs in the patient. **Conclusion:** *Ayurveda* treatment has valuable effect in the management of Giant papillary conjunctivitis.

KEYWORDS: Giant papillary conjunctivitis, *Pittaja Abhisyananda*, *Netra Parisheka* therapy.

INTRODUCTION

Giant papillary conjunctivitis is a severe form of papillary conjunctivitis, characterised by formation of large number of prominent papillae in upper tarsal conjunctiva along with symptoms of itching and increased mucous discharge from conjunctival sac.^[1]

As per *Ayurveda* classics, the signs and symptoms of Giant papillary conjunctivitis simulate that of *Pittaja Abhisyanda* which results due to aggravated *pitta*. As per *Sushruta samhita*, these signs and symptoms are—burning sensation (*Daha*), severe inflammation (*Prapaka*), longing for cold (*Sisira Abhinanda*), smokiness (*Dhumayana*), warm lacrimation (*Usanasruta*) and yellowish discoloration (*Pitaka Netrata*).^[2] *Acarya Vagabhata* also mentioned all these symptoms and signs with presence of *Shyavata* (grey discoloration of external surface of eye lids) and (*Raga*)^[3] redness of eyes. Therefore the treatment principle given by *Acharya Sushruta* mainly concentrates on *Pitta* pacification i.e. *Snehana* and *Swedana*, *Rakta Moksana*, *Sramsana*, *Pariseka*, *Alepa*, *Nasya*, *Anjana* and treatment of *Visarpa*^[4] is to be followed.

In modern sciences, steroids antihistamines and NSAIDS^[5] are mainstay of the treatment of this disease, yet the disease follows a chronic course and frequent relapses.

Keeping in view all the particular reasons, the case study had been carried out to analyze the effect of *Parisheka* therapy along with *Shamana* therapy.

CASE REPORT

An 18 years old male patient came to the eye OPD at National Institute of Ayurveda, Jaipur with complaints of.

- Burning sensation in eyes for 1 year
- Itching of lids for 1 year
- Foreign body sensation for 1 year
- Redness of eyes for 1 year
- Discharges from eyes for 1 year
- Photophobia both eyes for 1 year

Examinations

Diffuse examination by torch light revealed congestion and giant papillae in upper tarsal conjunctiva of both the lids. These findings were further verified by the slit lamp examination.

On slit lamp examination by flouroceine stain, cornea took punctuate staining indicating superficial punctuate keratitis. His visual acuity was examined by Snellen's chart and it was found to be 6/9 in both the eyes. Intra ocular pressure was measured by non contact tonometer; it was 11 mmHg in both eyes.

Treatments

Patient was taking steroids prednisolone and dexamethasone topically for the disease for a long time, therefore steroids were gradually tapered along with addition of Ayurvedic treatment. Subsequently steroid eye drops were stopped altogether.

In this case treatment line was mainly aimed at *Pitta-Vata Shamana* and *Rakta Shodhana*; because vitiated *Dosha* were *Pitta* and *vata*. Thus following drugs were selected for the present condition.

A. *Parisheka* therapy which comprises.

i. *Triphala Churna* 1gm, *Yashtimadhu Churna* 1gm and *Lodhra* 1gm for 4 month.

B. *Shamana Chikitsa* with.

1. *Haridra Khanda* 3gm twice a day for 4 month.

2. *Triphala Guggulu* 2tab. twice a day for 2 month.

3. *Avipatkar Churna* 3gm, *Pittantaka Yoga* 500mg and *Shankha Bhasma* 250mg twice a day for 4 month.

1, 2 and 3 treatments were continued for 1 month. After that, *Triphaladi Netra Parisheka* was added, applied once a day. All other medicines were continued for another 1 month. After 1 month *Triphaladi Netra Parisheka* was stopped. *Triphala guggulu* was stopped after 2 months of treatment. All other medicines were continued for another 2 month.

RESULTS

After 4 month of therapy there was significant improvement in the complaints like- burning sensation, Itching in eyes, foreign body sensation in eyes, discharge from eyes, photophobia and redness. Clinical assessments were made from the subjective symptoms and gradation of

scoring pattern. Before starting the treatment, papillae were of Grade IV severity and after completion of 4 month treatment it was Grade I.

There was overall noteworthy progress in symptoms of giant papillary conjunctivitis. No side effects were observed during the treatment as well as after the completion of treatment.

DISCUSSION

In this case firstly performed *Shaman Chikitsa* (for 1 month) as slit lamp examination revealed superficial punctuate keratitis. After that *Triphaladi Netra Parisheka* with lukewarmed decoction was applied. *Triphalādi Netra Parisheka* contains equal quantity of powder of *Terminalia berelica* (Vibhitaka), *Terminalia chebula* (Haritaki), *Glycyrrhiza glabra* (Yashtimadhu) and *Symplocos racemosa* (Lodra).

Parisheka is one among the seven types of *Kriyakalpa*^[6] therapies. It was helpful for removing micro-organisms and enhances blood circulation which is helpful for the quick and easy absorption of drugs. Further these drugs consist with *Chakshushya* Dravaya^[7,8,9] (eg. *Triphala*, *Lodhra* and *Yashtimadhu*), anti inflammatory and antimicrobial substances.^[10,11]

Haridra Khanda contains *Haridra*, *Ghrita*, *Milk*, *Suger*, *Trikatu*, *Triphala*, *Trijata*, *Vidanga*, *Trivrita*, *Kesara*, *Musta* and *Lauha Bhasma*. It is excellent remedy for *Kandu*.^[12] *Haridra* is best blood purifier, remove toxins from blood. *Shunthi* is one of best herb to rejuvenate and revitalize all body system and *Trivrita* has anti-inflammatory properties.

Avipatikara Churna contains *Trikatu*, *Triphala*, *Musta*, *Lavanga*, *Vidanga*, *Vida Lavana*, *Ela*, *Trivrita*, *Suger*.^[13] It has anti-inflammatory and purgative properties, which acts on *Pitta Dosh*.

Pittantaka Yoga contains *Shudda Swarna Gairika*, sugar and *Amrita-dhara*. *Shudda Swarna Gairika* and *Shankha Bhasma* have *Chakshushya*, *Daha Nashaka*, *Pitta*, *Rakta*, *Kapha Nashaka*^[14,15] properties.

Triphala Guggulu consists of *Terminalia berelica* (Vibhitaka), *Terminalia chebula* (Haritaki), *Phyllanthus emblica* (Āmla) and *Commiphora mukul* (Shuddha Guggulu). It Cures wound accompanied with swelling (*Shota*), suppuration (*Paka*), discharge (*Kleda*), foul odour (*Gandha*).^[16]

On the basis of these properties, it helps in relieving the symptoms of giant papillary conjunctivitis.

CONCLUSION

This case study reveals that patient with Giant papillary conjunctivitis can gain significant relief in symptoms through *Ayurveda* management. The study concludes that this line of treatment enhances the speed of recovery with minimal risk and high patient acceptance in preference to other methods of treatment. Despite the limitations of this case study, the therapy may be an effective option in the treatment of Giant papillary conjunctivitis. Further study should be carried out in larger sample group.

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