Impact Factor 3.025

Refereed And Indexed Journal

AAYUSHI INTERNATIONAL INTERDISCIPLINARY RESEARCH JOURNAL (AIIRJ)

Monthly Publish Journal





CHIEF EDITOR – PRAMOD PRAKASHRAO TANDALE

Aayushi International Interdisciplinary Research Journal (AIIRJ)

Issue-II FEBRUARY 2017 ISSN 2349-638x Impact Factor 3.025

" To Study the Efficacy of Kasisadi Rasakriyanjan in Puyalasa With Special Reference to Chronic Dacryocystitis" **Vd. Annasaheb Mahadeo Shinde** PG Scholar, (M.S Shalakya Tantra) Vd. Kavitha Vishwanathan Guide, (M.S Shalakya Tantra) Reader, P.G. Dept. of Shalakya Tantra.

Abstract :-

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Every disease in Ayurveda, the science of life has a different view in understanding a disease in a systematic way.

Among the Astangas of Ayurveda, Shalakya tantra is given importance equally by all Acharyas. Acharya Sushruta has explained seventysix eye diseases with their medical and surgical management in detail. Puyalasa, one of the Sandhigataroga can be correlated to dacryocystitis based on the symptomatology which includes swelling in Kaninika sandhi, which later on undergoes suppuration causing thick purulent discharge.

Dacryocystitis is the inflammation of the lacrimal sac is not an uncommon condition, which is an important cause of ocular morbidity, both in children and adults.

The management constitutes of simple topical medication to surgery and with certain amount of recurrences. Though Puyalasa is due to Tridosha it is considered as a curable disease and the treatment includes Siravyadha, Upanaha and Anjana kriya and internal medication which can reduce the recurrence rate and other secondary diseases in eyes.

The clinical features and the treatment of Dacryocystitis has similarities with the disease Puyalasa which has been told by our ancient seers. The Kasisadiraskriyanjan mentioned in the treatment of the disease Puyalasa are mainly having Doshahara guna, Vrana shodhaka guna and are Chakshushya.

Introduction :-

Panchendriyas are present in the uttamang, and hence one should be alert to protect the uttamang. Acharya Sushrut has given the importance to netra than rest of the Indriyas by explaining Netragat in the beginning of Uttartantra.

Acharya Sushruthas mentioned a total 76 numbers of Netra Roga, in which 9 Sandhigatroga are explained. Puyalasa is one of the Sandhigatrog, occurring at KaninikaSandhi. According to AncientAcharyasthe Lakshna of Puyalasa are-

पक्वः शोफः सन्धिजः सांस्रवेद्यः सान्द्रं पुयं पूति पूयालसः सः ।

(सु.उ.अ. २/४)

A swelling in the fornics which when ripe exudes thick foul smelling pus is known as puyalasa.

Justification for selection of topic and need of study:-

In modern science, a disease with similar signs and symptoms is Dacryocystitis. Dacryocystitis is more common between the age group of 40-60 years. It is more predominant in females (80%). Its heredity plays an indirect role as affects the facial configuration, length and width of the naso-lacrimal duct. It is common in people with lower socio-economic groups, persons with poor hygiene and especially the pond bathing people.

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Dacryocystitis is a common condition found in general ophthalmic practice. It is found in all age groups, races and in both the sexes. Secondary phenomenon of untreated or ill managed Dacryocystitis may lead to complications like corneal ulceration, recurrent conjunctivitis, acute or chronic Dacryocystitis, lacrimal abscess and fistulae formation.

Specific Concept :- Shotha at Kaninika sandhi, which after Pakotpatti secrets foul smelling discharge.'

Aim :-

To study the efficacy of Kasisadi Rasakriyanjan in Puyalasa with special reference to Chronic Dacryocystitis.

Objectives of the Study :-

- 1. To study the 'Chronic Dacryocystitis' as per Ayurvedic literature.
- 2. To study the efficacy of 'KasisadiRasakriyanjan' in 'Chronic Dacryocystitis'.
- 3. Detailed study of 'ChronicDacryocystitis'.

Material :-

सैन्धवार्द्रक कसीसलोहताम्रैः सुचूर्णितैः ॥५॥

चूर्णाज्जनंप्रयुज्जीत सक्षौद्वैर्वा रसक्रियाम् ।

(वा.उ.११/५)

Anjana's are very fine semisolid on the drug to be applied with Netra Shalaka.

Saindhav, Ardrak (Swaras), Shudha Kasisa, Tambra, Loha, Filling all nicely powdered and mixed with honey (Madhu-Kshoudra) should be applied as Anjan or Rasakriya (Thick decoction) of this drug may be used for this purpose.

Shudha Kasisa–1 g<mark>m</mark> 🤇

Saindhav Lavan– 1 gm Adrak (Swaras) – 1 ml

Tamra Churna – 1 gm

Loha Churna – 1 gm

Madhu (Shoudra) – Madhu (Kshoudra) 10 times (50 gm) will be added to the given mixture and drops will be prepared for each patient's for consequently 21 days

Preparation :-

Above mentioned drugs are mixed in equal quantity and homogenous mixture will be prepared than 50 gm of honey (Madhu) will be added to make it in applicable Churna form.

Methods :-

अनक्ति अनेन इति अञ्जनम् ।

Application of medicine in the eye is called as Anjan.

All drugs according to textual sequence will be added one by one and fromed Anjan will be added with 10 times honey (Madhu) and then fromed 10% drops of the drug will be administer to the patients with applied by Netra Shalaka.

Study design :-

Pre-test & post-test single blind comparative study, where All the patients in the present study have been divided into two groups, each group containing 30 patients of either sex fulfilling the inclusion criteria will be put in a single group.

Group	Drug	Type Of Drug
А	Kasisadi Rasakriyanjan	Trial Drug
В	Chloramphenicol Eye Ointment	Control Drug

Drug administration details :-

1) Group a-trial group :-

30 patients will be treated with 'Kasisadi Raskriyanan at Sayankaal (evening) for 21 days.

2) Group b-control group :-

30 Patients will be treated with 'Chloramphenicol Eye Ointment' at Sayankaal (evening) for 21 days.

Follow up of the patients :-

Follow up will be taken on 0 day' 5th day, 10th day , 15th day and 21th day. 0 day will be the day of examination. After completion of the treatment, the patients will be called for the follow up after 48 days. In case of any recurrence of the swelling, the patients will be advised to visit even before the scheduled follow up. During treatment patients complaining of recurrence, they will be called. **Inclusion Criteria:**-

1) Patients having Lakshana's of Puyalasa (Chronic Dacryocystitis).

2) Patients of the age group between 18-60 years.

3) Patients will be selected irrespective of sex, religion, and occupation.

Exclusion criteria:-

1) Patients with Acute Dacryocystitis as per Modern Science.

2) Patients with Congenital Dacryocystitis as per Modern Science.

3) Patients with other ocular diseases.

4) Recently eye operated patients.

5) Patients with other systemic disorders like diabetes etc.

Investigation:-

1.Blood,BSL(Fasting and PP) Urine, Elisa test, HBsAg& Refraction Test.

2.Opthalmoscopic examination.

Observations and Results :-

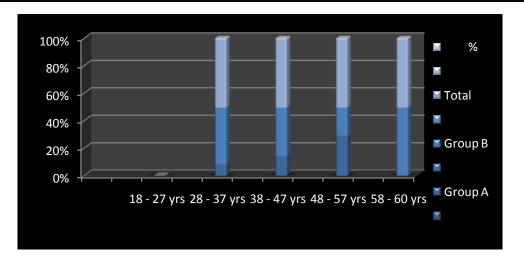
Showing classification of patients as per age group :-

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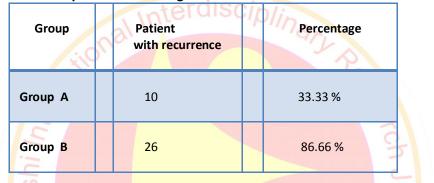
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Age group	Group-A	Group-B	Total	%
18 – 27	00	00	00	00 %
28 - 37	01	05	06	10.00%
38 - 47	02	05	07	11.66 %
48 - 57	27	19	46	76.66 %
58 - 60	00	01	01	01.66 %

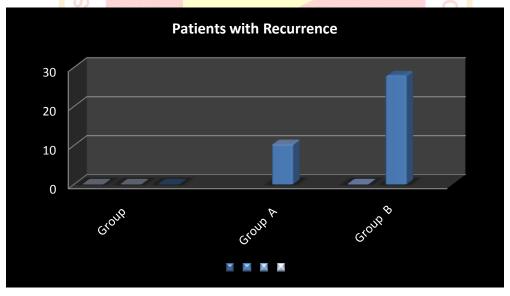
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Showing comparison of the patients according to recurrence of the disease :-





From the above data, it is observed that, out of the 60 patients 36 patients showed recurrence (60.00 %). More number of patients showing recurrence of the disease were found in the control group i.e. 26 patients (86.66 %) than those in the trial group i.e. 10 patients (33.33 %).

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Relief %	Group A	Group B			
Netra Alpa Vedana	80.00 %	53.33 %			
Netra Srava	83.33 %	53.33 %			
Netra Shoth	73.33 %	50.00 %			
Kaninika Lalima	83.33 %	66.66 %			

Showing Comparison of patients as per change in % relief :-

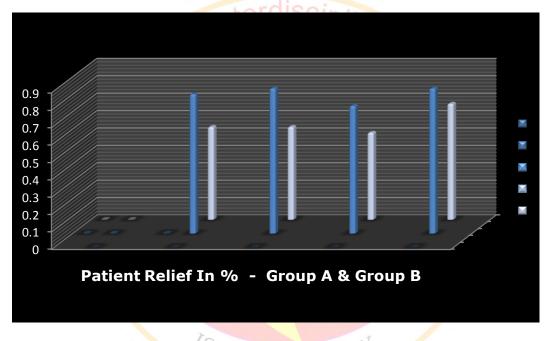


Table shows that the Study group treatment Kasisadi raskriyanjan, and Control group treatment Chloramphenicol eye ointment provide highly significant relief 83.33 %, and 66.6 % in Kaninika Lalima in Group A and B respectively.

The relief in Netra Alpa Vedana was found to be 80.00 % and 53.33 %, in the Group A and B, respectively.

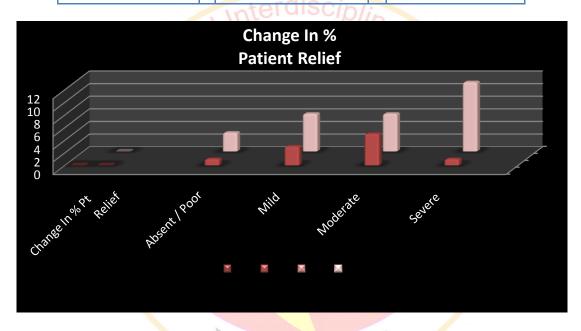
The relief in Netra Srava was found to be 83.33 % and 53.33 %, in the Group A and B, respectively.

The relief in Netra shoth was found to be 73.33 % and 50.00 %, in the Group A and B, respectively.

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Change In % Pt Relief	Group A	Group B		
Absent / Poor	01	03		
Mild	03	06		
Moderate	05	06		
Severe	01	11		

Showing Comparison of two treatments as per overall effect :-



From the above data, poor relief i.e 1 pt having all symptoms were found in Group A and 3 pt having all symptoms found in Group B after treatment, mild relief i.e 3 symptoms found in group A in 3 patient and group B in 6 patient after treatment. Moderate relief i.e 2 symptoms were found in the 5 Patients of the trial group and in 6 Patient of control group. Excellent/severe relief i.e. 1 symptoms were found in 1 patient in trial grup and 11 patients found in control group after treatment.

20 Patient having complete relief after treatment in study group (Kasisadi raskriyanjan) and 4 Patient having good relief in Control group (Chloramphenicol eye Ointment).

Discussion :-

All the patients related to observation made during the study and results will be discussed depending upon follow ups, sex predominance etc. Also the Karyakaranbhaav and Samprapti Vighatan with Kasisadi Rasakriyanjan will be discussed. On the basis of collected data and observations conclusion will be carried out.

Conclusion :-

The study will be concluded with concrete conclusion derived from study of symptoms and sings before and after trial.

Summary :-

On the basis of results, observations, and discussion, summary will be made.

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