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## **To Study The Effecacy Of lodhra & Nimba Aashchyotana In Vataj Abhishyanda W.S.R. to Simple Allergic Conjunctivitis**

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### **Abstract**

*Simple allergic conjunctivitis is the most common form of ocular allergy (prevalence 5 – 22 %). It is a hypersensitivity reaction to specific airborne antigens. The disease Vataja Abhishyanda, which is due to vitiation of Vata Pradhana Tridosha is comparable with this condition. The management of simple allergic conjunctivitis in modern ophthalmology is very expensive and it should be followed lifelong and Ayurveda can provide better relief in such manifestation. This is the first research study on Vataja Abhishyanda. Patients were selected from the Outpatient Department (OPD), Inpatient Department (IPD), of the Shalaky Tantra Department and were randomly divided into two groups.*

*In Group-A LODHRA and NIMBA AASHCHYOTANA  
in Group-B OLOPETADINE eye drops were instilled .*

*Total 60 patients were registered for course of treatment. LODHRA AND NIMBA Ashchyotana gave better results in, Nistodana (Pricking pain in the Eye) Shishirashrutha (Cool Lacrimation) Shofa (Conjunctival Hyperemia and vihushkabhava*

**Keywords:** Ashchyotana, eye drops, simple allergic conjunctivitis, Vataja Abhishyanda

### **Introduction**

Abhishyanda is the root cause of almost all the eye disorders and must be treated as soon as possible, otherwise its complications will become severe and difficult to save the eye sight.If Abhishyanda takes a chronic course it may lead to Vataja Adhimantha, Hatadimantha, Akshipakatyaya, Avranashukla, and so on.

Vataja Abhishyanda is characterized by Toda (Pricking pain), Sangharsha (foreign body sensation), Achchashruta (watery discharge), Alpa Shopha (mild chemosis), Vishushka Bhava (feeling of dryness), Parushya (dryness), and so on, which are very similar to most of the signs and symptoms of Simple Allergic Conjunctivitis. Based on the similarities of signs and symptoms, Vataja Abhishyanda can be co-related with Simple Allergic Conjunctivitis. The prevalence is 5 – 22% in the general population and recurrence found in 41 – 62% of the cases.

Simple allergic conjunctivitis is the most common form of ocular allergy. It is a hypersensitivity reaction to specific airborne antigens basically it is an urticarial reaction. Although serious sequels as a result of corneal involvement are rare, the distressing signs and symptoms may cause extreme discomfort to the patients

Allergic conjunctivitis affects up to 40% of general population and is a common clinical problem for ophthalmology. Allergic conjunctivitis presents and even greater public health challenge epidemiologically. Conjunctivitis is most common eye condition, according recent prevalence study in March 2011-12, percentage of allergic conjunctivitis 14.7% found mostly in urban and slum population.

Among many efficient preparation being described in our classics, the therapeutic efficacies of Lodhra & Nimba Aashchyotana is taken for study in the management of Vataj Abhishyanda, because Lodhra is chakshushya, shothhar, sheetal and Nimba having antibacterial, antiallergic properties.

Eye Drops formulation is the most common form of local drug use in ophthalmic practice. Because standard dose of the eye drops is easy to maintain and patients can easily carry it with them and instill it whenever required by them. By keeping this point in mind Lodhra & Limba Eye Drops formulation has been selected in Vataja Abhishyanda.

So an alarming rise in the incidence of the disease Vataj Abhishyandya and unknown satisfactory remedies evolved so far, has given an importance to find out a suitable solution, with better results. This is the reason that sufficient work is going on in this direction in many institutes by Ayurvedic scholars throughout the country.

Therefore it is necessary to find out an economical, effective, easily available and acceptable medicine to treat Vataj Abhishyandya. Keeping all the above points in mind a study was conducted in Hospital.

### **Aims & Objectives**

#### **Aim:**

To study the efficacy of Lodhra & Nimba Aashchyotana in Vataj Abhishyanda

#### **Objective:**

1. To Study details of Vataj Abhishayanda from the Ayurvedic classics.

### **Materials & Methods**

Patients will be selected from OPD & IPD of Shalaky Tantra, L.K.R. Ayurvedic Dharmadaya Rugnalaya, Gadhinglaj, Kolhapur-416502

### **Preparation of Drug:-**

- Lodhra&Nimbapatrawill be taken in equal quantity.
- Apply Nimbapatra, kalka onLodhratwaka.
- After this Swedan would be done.  
(Autoclave for 30 minutes at (115 mb per square inch) pressure then cools down at room temperature)
- Then juice of above will be extracted and then filtered from muslin cloth.
- This extracted juice will be diluted upto.100 ml with WFI [ over the duration of period ]
- After centrifuge will be done for 30 min.
- After that sedimentation will be done for 1 hour.
- Then decantation will be done (filter through whatman filter paper no. 44)
- Again all these extract will be diluted to avoid crystallization process over the duration of period and any environmental condition.
- Then application will be prepare.
- Trial drug concentration = 10% v / v ( Stock Solution)
- Trial drug PH value =7.4

### **Inclusion Criteria**

- 1) Patients showing the classical sign and symptoms of VatajAbhishyanda (simple allergic conjunctivitis.)will be selected for the study.

- 2) Patients of age group between 16-55 years will be taken.
- 3) Patients irrespective of sex, occupation & socio-economic status will be selected.

**Exclusion Criteria:**

- 1) Patients of age group below 16 year and above 55 year.
- 2) Patients with other ocular diseases.
- 3) Recently orbicular surgical patients.
- 4) Patients with Corneal Diseases.

The study was approved by Institutional Ethics Committee. Written consent was taken from the patients.

**Grouping**

- Group A :-
  - 1) Lodhra & Nimba Aaschyotan
- Group B:-
  - 1) Olopetadine 0.1% eye drops

**Criteria For Assessment Of Treatment**

The improvements in the patients were assessed mainly on the basis of the relief in signs and symptoms. For this purpose the main signs and symptoms were given a score grades according to their severity.

- Absent - 0
- Mild - 1
- Moderate - 2
- Severe - 3

1. Nistodana (Pricking pain in the Eye)

- Absent - No pain
- Mild - Present but not distressing
- Moderate - Distressing but not interfering daily life
- Severe - Distressing and interfering daily life

2. Shishirashrutha (Cool Lacrimation)

- Absent - No discharge
- Mild - Occasional discharge
- Moderate - Intermittent discharge need to wipe
- Severe - Frequent discharge need to wipe

3. Shofa (Conjunctival Hyperemia)

- Absent - No redness
- Mild - Eyes bright red
- Moderate - Eyes red
- Severe - Eyes dark red

4. Vishushkabhava (Dryness)

Using by schirmer's I-test

- Absent - (Above 10 mm)
- Mild - Some feel dry eyes (8-10 mm)

Moderate - Persistent feels dry eyes (5-8 mm)  
 Severe - Continuous feels dry eyes (Below 5 mm)

Total effect of Drugs for both groups-

Age wise distribution of all sixty patients showed that in the age group of 21-30 years 13 (21%) patients were reported, 31-40 years 17 (28.33%) patients, 41-50 years 21 (35%) patients, 51-60 years 9 (15%), patients were reported.

Sex wise distribution of all sixty patients showed that 36(60%) male and 24(40%) female patients underwent treatment

Marital Status wise distribution of all sixty patients showed that, there are 32 (53.33%) married and 28(46.66%) unmarried patients underwent treatment

Occupation wise distribution of all sixty patients was Agriculturists 17(28.33%), Laborers 13(21.66%), service workers 6(10%) patients, and house wives 9(15%) and Students 5(8.33%) patients. businessman were 10 (16.66%).

Socio economic status wise distribution of all sixty patients showed that, 14(23.33%) patients from poor class, and middle class 44(73.33%) patients, and rich class 2 (3.33%) patients

Dietary wise distribution of all sixty patients showed that, 16(26.66%) patients having Vegetarian diet, mixed diet having 44(73.33%) patient.

**Showing the response over significant level subjective criteria Nistodana (Pricking pain in eye) in Group A and Group B.**

Day	mean		S.D		S.E	T VALUE	P VALUE	RESULT
	Gr A	Gr B	Gr A	Gr B				
B.T	1.8	1.76	0.83	0.85	0.217	0.18	0.8518	N.Sig*
05th	1.3	0.6	0.66	0.67	0.172	4.0	0.0001	H.Sig*
10th	0.53	0.13	0.57	0.34	0.122	3.30	0.0017	H.SIG*
15th	0	0	0	0	0	0	0	0
20th	0	0	0	0	0	0	0	0

**Showing the response over significant level subjective criteria shishirashrutha (cool lacrimation) in Group A and Group B .**

Day	mean		S.D		S.E	T VALUE	P VALUE	RESULT
	Gr A	Gr B	Gr A	Gr B				
B.T	1.53	1.73	0.86	0.73	0.206	0.97	0.3355	N.SIG
05th	0.43	0.46	0.62	0.68	0.168	0.17	0.85	N.SIG
10th	0.53	0.06	0.68	0.25	0.132	3.5	0.0008	H.SIG
15th	0	0	0	0	0	0	0	0
20th	0	0	0	0	0	0	0	0

**Showing the response over significant level Objective criteria Shofa(Conjunctival Hyperemia) in Group A and Group B.**

Day	mean		S.D		S.E	T VALUE	P VALUE	RESULT
	Gr A	Gr B	Gr A	Gr B				
B.T	1.16	1.76	0.37	0.89	0.0176	3.4	0.0012	H.SIG
5th	1.36	0.26	0.49	0.52	0.130	8.4	0.0001	H.SIG

10th	1.36	0.1	0.49	0.30	0.105	12	0.0001	H.SIG*
15th	0.2	0.03	0.4	0.18	0.080	2.1	0.0381	S.SIG*
20th	0	0	0	0	0	0	0	-

**18 Showing the response over significant level Objective criteria Vishushkabhava (Dryness) in Group A and Group B.**

day	mean		S.D		S.E	T value	P value	Result
	GrA	Gr B	GrA	Gr B				
B.T	1.5	1.73	0.86	0.73	0.206	1.1	0.2687	N.SIG
5th	0.5	0.43	0.68	0.67	0.174	0.40	0.6894	N.SIG*
10th	0.4	0.03	0.62	0.18	0.118	3.13	0.0027	H.SIG*
15th	0	0	0	0	0	0	0	-
20th	0	0	0	0	0	0	0	-

\*N.SIG- statistically non-significant  
 \*H.SIG- statistically highly significant

**Overall effect of this study:**

Considering the all above response of the patients in Group A and group B, there were all patients cured completely after completing treatment.

On the basis of above results it can be concluded that in both the Groups Lodhra and NimbaAaschotana and olopetadine application helps in vatjabhishyandya, and provides significant relief in all its symptoms. From observation and Statistical analysis of these findings indicate that response to treatment was significant after comparing means of two Groups

Showing Total effects of Drugs for both groups over 30 patients-

Effect	Group A Control Group	Group B Trail Group	Total
Cured	30	30	60
Marked improved	00	00	00
improved	00	00	00
No improved	00	00	00

Group A

Overall effect over group A showed 30 patients were cured.

Group B

Overall over group B showed 30 patients were cured.

TOTAL

Overall effect over 60 patients showed cured.

**Discussion**

Highly polluted environment has an effect on lifestyle. Simple allergic conjunctivitis is one of the outcomes of this changing lifestyle, food habits, and polluted environment.

Simple allergic conjunctivitis has an equal distribution, more or less, throughout the world, without any exception to the developed and under-developed countries

Probable mode of action of LODHRA and NIMBA AASCHOTANA ( eye drops)

According to Ayurveda the instilled medicine will penetrate into the Akshikosha Srotas, Shira Srotas, Ghrana Srotas, and Mukha Srotas of the Urdhvanga Bhaga and remove the Mala present there. This happens because, Lodhra is chakshushya, shothhar, sheetal and Nimb does antibacterial, antiallergic having all properties.

**Conclusions**

- Among all the Nidana of Netra Roga, Raja Sevana, Dhuma Sevana, and Ritu Viparyaya can be considered as specific Nidana for Vataja Abhishyanda.
- Among all the symptoms of Vataja Abhishyanda, Toda can be correlated with pricking pain, shishirashrutha can be correlate with cool lacrimation, and Shofa with conjunctival hyperemia, vishushkabhava can be correlate with dryness in simple allergic conjunctivitis.
- LODHRA AND NIMBA Ashchyotana gives better results in the symptoms of NISTODANA, SHISHIRASHRUTHA, SHOFA, VISHUSHKABHAVVA in Vataja Abhishyanda.
- No adverse effects were found during the study in both the groups.

**Refrances:-**

- i. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita (U) ,Pratham Adhyaya, 13 Chaukhamba Prakashan Varanase , 2010.
- ii. Dr. Bramhanand Tripathi, Calaka-Samhita (I) , (II) Chaukhamba Surbharati Prakashan Varanasee, 2004.
- iii. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita, uttartaantra), Chaukhamba Prakashan Varanase , 2010
- iv. KavirajAtridevGupt, Ashtangtidayamcvidyatineetika(v), Chaukhamba Prakashan, Varanasee 2012.
- v. Acharya Raghuvveerprasad Trivedee, Ashtang Sangraha (Uttartaritra), Ekadash Adhyaya, Shri. Baidhanath Ayurvedbhavan, Nagpur 1988.
- vi. Dr. Bramhanand Tripathi, Caraka Samhita, Chaukhamba Surbhartee Prakashan Varanasee, 2004.
- vii. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita (U) ,Pratham Adhyaya, 13 Chaukhamba Prakashan Varanase , 2010
- viii. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita (U) ,Pratham Adhyaya, 19 Chaukhamba Prakashan Varanase , 2010
- ix. Kaviraj Atridev Gupta, Ashtanghridayam, Third adhyaya, Chaukhamba Prakashan, Varanasee 2012
- x. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita (U) ,Pratham Adhyaya, 12 Chaukhamba Prakashan Varanase , 2010
- xi. A.K. Khurana, comprehensive ophthalmology, New age International 5th Edition 2012.
- xii. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita (U) , Six Adhyaya, Page No. 34, Chaukhamba Prakashan Varanase , 2010
- xiii. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita (U) , First Adhyaya, Page No. 14, Chaukhamba Prakashan Varanase , 2010
- xiv. Kaviraj Dr. Ambikadatta Shashtree, Shushrut Samhita (U) , First Adhyaya, Page No. 13, Chaukhamba Prakashan Varanase , 2010
- xv. Dr. Bramhanand Tripathi, Sharangdhar-Samhita (U) ,Trayodash Adhyaya , Page No. 424, 425, 426 Chaukhamba Prakashan Varanase , 2010

- xvi. Vaidya Shri. YadavjeeTrikamjee Acharya Chaukhamba Sanskrit Santhan Varanases, 1999.
- xvii. Dr. R.C. Chaudhury, Shalakyavijnayana Chaukhamba Orientalia 21st Edition.
- xviii. Prof. Narayan J. vidwansa (English Translation), A textbook of Ayurved Opthamology Shalaky –
- xix. Sihota Tandon, Parsons, Disease of the eye, ELSEVIER Reed Elsevier India Private limited , New Delhi 22nd Edition 2015.
- xx. Vaidaraj Datto BALLal Borkar, Sarth Yogratnakar, Shree Gajanan Book Depo.Pune 1984.
- xxi. Ayurvedacharya Purushottam Ganesh Nanal Vaidya, Sartha Bhavprakash, Raghuvanshi Prakashan Pune, 1929.
- xxii. Ayurvedacharya shriyadnandanopadhyay madhavnidanam II, Chaukhamba Sanskrit Sansthan Varanase.
- xxiii. Dr.Narandra Pandey, Nayan amrutam Netraroga Aushadhi Vidnyanam. Chaukhamba Orientalia Varanase , 2010.
- xxiv. M.L. Agarwal, Sanjeev Agarwal clinical Examination of ophthalmic cases. CBC publishers and distributors 1992.
- xxv. C.P. khare, Indian, Medicinal plants 75 , 2007.
- xxvi. En.Wikipedia.org/wiki/ site
- xxvii. <https://en.wikipedia.org>
- xxviii. ophthalmology life 20/21/13
- xxix. [Emedicine.medscape.com](http://Emedicine.medscape.com)
- xxx. [www.thearyrway.com](http://www.thearyrway.com)>home>ayurveda
- xxxi. [www.healthline.com](http://www.healthline.com)
- xxxii. Methods in Biostatistics – B.K. Mahajan, Jaypee Brothers medical publishers pvt., ltd Daryagani .New Delhi 6th edition 1999.

