

A Case Report on Shushkakshipaka

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ABSTRACT

Shushkakshipaka is Vata Pitta predominant disease. In this condition there will be cutting, pricking type of pain in Eyes, turbid vision, lids will become dry and there will be difficulty in opening and closing of eye lids. Dry Eye is the symptom complex occurring as a sequel in deficiency or any abnormalities in the integrity of tear film. A 46-year-old male patient of Hassan approached with a complaint of foreign body sensation, pricking sensation and dry feeling both eyes since two years. Patient was given with Shareera shodhana and Urdwanga shodhana Netra kriyakaplas and shaman oushadhis. Patient showed significant improvement after treatment symptom wise and also objectively. The treatment protocol was aimed at restoration of integrity and homeostasis of Tear film both were achieved before the combination of both internal and external therapies was capable producing satisfactory results in the patient.

KEYWORDS: *Shushkakshipaka, Dry Eyes, Virechana, Schirmer's Test, Aschotana*

INTRODUCTION

Sense organs are the specially privileged organs that help to perceive the external world around us. They are the organs that respond to external stimuli by conveying the impulses to sensory nervous system. Among the Five sense organs Eyes are an integral part of our lives. Eye care is very important as Eyes are very essential for day-to-day activities.^[1] Ayurveda also advocated the importance of eye care.^[2] Acarya Sushruta has described 17 Sarvagata netra rogas and one among them is Shushkakshipaka.^[3] It is Vata Pitta predominant disease. In this condition there will be cutting, pricking type of pain in Eyes, turbid vision, lids will become dry and there will be difficulty in opening and closing of eye lids.^[4] Modern science describes a condition called Dry Eye Syndrome which is having similar features as that of Shushkashipaka. It is symptom complex occurring as a sequel in deficiency or any abnormalities in the integrity of tear film. Based on etiology it is divided into aqueous deficiency dry eye and evaporative dry eye The major causes of Dry eye are Entropion and Ectropion, Blepharitis, Lagophthalmos, obstruction in lacrimal duct, lacrimal gland deficiency, Meibomian gland

dysfunction, defective eye blinking, increased screen time at computer or mobile, using contact lenses for long time and exposure to smoke, wind or very dry climate for long duration.^[5] The studies have also shown that certain diseases such as Rheumatoid arthritis, Sjogren's syndrome, Thyroid diseases and Lupus, taking certain medicines such as diuretics, beta blockers also act as causative factors.^[6] It is managed by treating causative disorder, Vitamin a supplementation, supplementing tear substitutes in the form of varieties artificial tear drops, ointments and soft release inserts.^[7] In extreme dry eye cases surgical management is the choice in the form of transplantation of Submandibular gland.^[8] In this condition Tear film will not be capable of providing sufficient lubrication to Eyes.

As per classics of Ayurveda, Shushkashipaka can be better managed medically rather than surgical treatment. It can be treated with Nasya karma, Seka, Aschotana and Snehiaka Anjana and Ghrutapana.^[9]

CONSENT:

A written informed consent was taken from the patient prior to case study.

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CASE REPORT:

A 46 year old male patient of Hassan approached Shalaky Tantra Netra Out Patient Unit of Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan on 10/11/2022 with a complaint of foreign body sensation, pricking sensation and dry feeling both eyes since two years. He had complained of ocular discomfort occasional blurring and non specific itching. He was an Engineer cum building contractor by his profession.

History of present illness

The patient was apparently healthy two years back and then gradually he developed pricking sensation and foreign body sensation in both the eyes. Initially he ignored it but later the symptoms started aggravating. Slowly he developed sense of discomfort in eyes, occasional blurring and itching in eyes. The symptoms used to aggravate on exposure to Computer work and dusty atmosphere. He consulted Ophthalmologist and diagnosed to have Dry Eyes and artificial tear drops were prescribed. After using that for a period of nearly two years patient consulted our OPD in search of better solution.

History of Past Illness:

Nothing relevant past illness

Personal History

Appetite: Good

Bowels: Regular

Micturition ; 5-6 times a day and 1 time in night

Sleep: Disturbed

Medical Vitals

Pulse rate; 80/min

Body Temperature; 98.6 °F

Blood Pressure: 130/82 mm of Hg

Ashtasthana Pareeksha

Nadi: 80/min

Mutra: Prakritha ,5-6 times a day and 1 time in night

Mala: Regular

Jihwa: Alipta

Shabda : Prakrutha

Sparsha : Anushna Sheeta

Drik : Vikrutha

Akruthi : Madhyama

Systemic Examinations

CVS, CNS, RS and all the systemic examinations were done and no abnormalities revealed.

Eye Examination

Examination of Eye is presented as follows in Table No 1

Table No 1 Examination of Eye

STRUCTURE	RIGHT EYE	LEFT EYE
Eye brows	No abnormality detected	No abnormality detected
Eye lashes	No abnormality detected	No abnormality detected
Eye lids	Normal in position No abnormality detected	Normal in Position No abnormality detected
Conjunctiva	Congestion in Lower palpebral conjunctiva , Dry lusterless conjunctiva	Congestion in Lower palpebral conjunctiva , Dry lusterless conjunctiva
Sclera	No abnormality detected	No abnormality detected
Cornea	Dry lusterless Cornea	Dry lusterless Cornea
Pupil	Round, Regular, Reactive	Round, Regular, Reactive
Lens	No abnormality detected	No abnormality detected
Anterior Chamber	Normal	Normal
IOP	14 mm Hg	12 mm Hg
Fundal Findings	No abnormality detected	No abnormality detected

The details of Visual acuity examination are tabulated in Table No 2

Table No 2 Visual Acuity before treatment

VISUAL ACUITY	BOTH EYES	RIGHT EYE	LEFT EYE
DISTANT VISION	6/6	6/6	6/9
NEAR VISION	N8		

Values of Schirmer's Test before treatment are mentioned in Table No 3

Table No 3 Schirmer's Test before treatment

	VALUES BEFORE TREATMENT
RIGHT EYE	5 mm
LEFT EYE	6 mm

Treatment Protocol

The patient was given with Pancha kola phanta 50 ml three times a day before food for the purpose of ama pachana for two days. Snehapana with Triphala Ghruta was given for four days in arohana krama, 30 ml, 45 ml, 60 ml and 90 ml. The patient was given Virechana with Trivruth lehya 50 gms and patient had 19 purgatory vegas. Later the patient was administered with 10 -10 drops of Anu taila Nasya for seven consecutive days in empty stomach. Simultaneously he was given with Netra kriyakalpas. Seka with Yasti triphala kashaya for seven days, Aschotana with Yashtimadhu Ghruta for seven days, Vidalaka with Yashtimadhu and Ksheera for seven days, and Tarpana with Yashtimadhu Ghruta for three days were administered.

The patient was also administered with few internal medicines. Ashtavarga Kashayam, Amalaki rasayana and Yashtimadhu Ghruta internally in dose of shamanaga sneha were prescribed.

RESULTS

Patient showed significant improvement after treatment symptom wise and also objectively. Foreign body sensation, pricking sensation, ocular discomfort, itching and occasional blurring of vision reduced considerably. Results of Visual acuity and Schirmer's test are summarized in Table no 4 and Table No 5

Table No 4 Visual Acuity after treatment

VISUAL ACUITY	BOTH EYES	RIGHT EYE	LEFT EYE
DISTANT VISION	6/6	6/6	6/6
NEAR VISION	N6 P		

Table No 5 Schirmer's Test after treatment

	VALUES AFTER TREATMENT
RIGHT EYE	21 mm
LEFT EYE	19mm

DISCUSSION

The Tear film is conjugation of lipid, aqueous and mucus layers. In Shushkashipaka the normal integrity of these layers and homeostasis of Tear film is lost. The treatment protocol was aimed at restoration of the same. The administration of Shareera shodhana through Virechana after proper Amapachana and samyak snehapana was a key in producing detoxification effect. Vitiated Pitta was effectively managed by Virechana and it was also prerequisite for Urdhwa shodhana i.e Nasya. Anu taila Nasya was potent enough to mitigate vata dosha from Urdhwa jatrugata region and reduce Shushkata in Akshi. Seka the Kriyakalpa therapeutic procedure done with Triphala and Yashtimadhu kashaya acts as Pittahara and Chakshushya. Vidalaka with Ksheera and Yashtimadhu helps to reduce local dryness in eye lid region and helps to reduce foreign body and pricking sensation. Aschotana and Tarpana with Yashtimadhu Ghruta helps to restore the integrity of Lipid and aqueous layer. Ghruta and Yashtimadhu are rejuvenative, vata-pittahara and helps to increase the vitality of Tear film by restoring homeostasis. Virechana, Nasya Aschotana and Tarpana also produce positive influence on vision. Ashtavarga Kashaya given internally helps to mitigate Vatadosha systematically. Yashtimadhu Ghruta and Amalaka Rasayana acts as bruhmana, rasayana, chakshushya, In take of Ghruta and Rasayana takes care of Nutritional deficiencies. The combination of both internal and external therapies was capable of producing satisfactory results in the patient.

CONCLUSION:

Shushkashipaka is vatapittaja manifestation where there will be loss of integrity and homeostasis of Tear film. Kaya shodhana, Urdhwa shodhana, Netra Kriyakalpas like Seka, Aschotana, Vidalaka and Tarpana along internal supplementation through Ghruta and Rasayana helped in marked reduction of signs and symptoms of Shushkashipaka. The therapeutic modalities rejuvenated whole system especially Eyes to work with more enthusiasm and vigour

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