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Role of Gambhari, Amalaki, and Haritaki Aschyotana in Shuktika with specific reference (W.S.R.) to conjunctival xerosis

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Abstract

The xerosis of the conjunctiva is a symptomatic condition in which the conjunctiva becomes dry, lusterless, and nonwetttable. These patches almost always involve the interpalpebral area of the temporal quadrants and often nasal quadrants as well. Typical xerosis may be associated with conjunctival thickening, wrinkling, and pigmentation. Xerosis is correlated with *Shuktika* as the per Ayurvedic reference. In this disease, a small elevated blackish spot resembling shell appears in *Shukla mandala*. There are various noninvasive as well as safe treatment modalities mentioned in Ayurvedic classics for the treatment of *Shuktika*. *Gambhari*, *Amalaki*, and *Haritaki Aschyotana* are some of the medicines mentioned in *Sushruta Samhita* in the management of *Shuktika*. Hence, an attempt has been made in this regard to review the role of these drugs, i.e. topical instillation of *Gambhari*, *Amalaki*, and *Haritaki* eye drops in *Shuktika*. *Ashchyotana* is one among the seven *Netra kriya kalpa*. *Gambhari*, *Amalaki*, and *Haritaki* are found useful in treating *Shuktika*, i.e. conjunctival xerosis. As per *Sushruta Samhita*, the causative dosha in *Shuktika* is *Pitta*, and hence, the treatment involves in mitigating the *Pitta dosha*. It is told in *Sushruta Samhita* that the causative dosha should be eliminated. *Gambhari*, *Amalaki*, and *Haritaki Ashchyotana* have properties to eliminate *Pitta dosha*. The medicines mentioned in the present review are *Pittahara* and are considered best for the eyes. *Gambhari*, *Amalaki*, and *Haritaki Ashchyotana* are cost-effective, safe, and easy procedures which can be done by the patient himself/herself in their own homes.

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Full Text

Introduction

Shalakya is an important branch of Ayurveda which deals with disease manifesting above the clavicular region. Acharya Nimi is considered as the supreme authority in Shalakya tantra, but it was Acharya Sushruta who explained the subject in a systematic manner in Uttaratantra of Sushruta samhitha.

The xerosis of the conjunctiva is a symptomatic condition in which the conjunctiva becomes dry, lusterless, and nonwetable. These patches almost always involve the interpalpebral area of the temporal quadrants and often nasal quadrants as well. Typical xerosis may be associated with conjunctival thickening, wrinkling, and pigmentation.[1] It occurs in two groups of cases: (i) as a sequel of a local ocular affection and (ii) associated with general disease.

Based on a deficient serum retinol, there are more than 125 million preschool aged children with Vitamin A deficiency, among whom close to 4 million have an ocular manifestation of some kind, termed broadly as xerophthalmia. Management as per the modern medical science includes oral and intramuscular supplementation of Vitamin A.[2]

In children being treated for Vitamin A deficiency according to the protocols, transient bulging of fontanels occurs in 2% of infants and transient nausea, vomiting, and headache occur in 5% of preschoolers. Acute toxicity of Vitamin A can result in increased intracranial pressure, vertigo, diplopia, bulging fontanels in children, seizures, and exfoliative dermatitis; it may result in death.[2]

Xerosis is correlated with Shuktika as per the Ayurvedic reference. In this disease, a small elevated blackish spot resembling shell appears in Shukla mandala.[3] There are various noninvasive as well as safe treatment modalities told in Ayurvedic classics for the treatment of Shuktika. These can be done on the outpatient department level as well as by the patient himself/herself and are cheap and convenient.

Materials and Methods

Aschyotana

[INLINE:1]

Ashchyotana is one among these seven Netra kriya kalpa, which plays an important role in the treatment of eye diseases in general.

The patient should be comfortably lying down in the supine position in Kriyakalpa theater. The eye is opened by stretching and pressing apanga pradesa (lateral end) by the left hand. In the right hand, medicine is instilled to the open eye. These drugs can be held either in a conch shell, small vessels, or in a piece of cotton.[4]

[INLINE:2]

Ashchyotana is to be done in day time only but not at nights, with the eye open, with drops of medicine being instilled from a height of two angulis.[5]

[INLINE:3]

[INLINE:4]

Eight drops for Lekhana action, ten drops for Snehana action, and 12 drops for Ropana action are the indicated doses. The medicine should be made warm during cold seasons and cold during hot season. This rule applies always.[6]

[INLINE:5]

In disorders of Vata, the medicine should be bitter and oily. In Pitta disorders, it should be sweet and cold, and in Kapha disorders, warm and dry (viscid).[7]

[INLINE:6]

Ashchyotana is to be retained for a period of one hundred syllables; the time required for one winking of the eyelids, the head going round the knee once, or uttering a long consonant is the unit called as one vakmatra.[8]

[INLINE:7]

According to Sushruta, Aschyotana has three types viz. Lekhana, Snehana, and Ropana. Seven to eight drops for Lekhana, ten

drops for Snehana, and 12 drops for Ropana are indicated.[9]

Shuktika

Shuktika is a disease of Netra, comes under the classification of Shukla Gata Roga according to Sushruta Samhita. Shuktika is correlated to "Conjunctival Xerosis".

The symptoms are:

Raised, silvery white, foamy, triangular patch of the keratinized epithelium, situated on the bulbar conjunctiva in the interpalpebral area[10] Multiple spots/dots resembling oyster shell (shukti) on sclera[11] Burning sensation in eyes[12] Pain in eyes[12] Diarrhea[12] Thirst[12] Fever.[12]

Drug review

A wide variety of yogas are described in Ayurveda to treat the various eye diseases. The formulations, i.e., Gambhari, amalaki, and haritaki Ashchyotana, selected in the clinical study to establish its therapeutic efficacy in treating Shuktika are from Sushruta Samhita Uttartantra and Pittabhishyanda pratishedham vyakhyasyama.

The ingredients of the above said formulation are easily available and moreover its mode of preparation and application is very easy. Further due to low cost, lower economic strata can also easily afford it.

Detailed descriptions of drugs are as follows:

Gambhari (fruit)[13]

Gambhari consists of dried fruit of *Gmelina arborea* Roxb. (Family – Verbenaceae), an unarmed tree found scattered in deciduous forests throughout the greater part of the country up to an altitude of 500 m, planted in gardens and also as an avenue tree.

Synonyms

Sanskrit: Kashmari, Kashmarya, Pittakarohini, Shriparni, and Bhadrarni Assamese: Gomari Bengali: Gamargachha and Gambar English: Beech Wood Gujarati: Seevan Hindi: Gambhari Kannada: Seevani, Shivani, and Hannu Malayalam: Kumbil, and Kumizhu Marathi: Sivan Oriya: Gambhari and Bhodroparnni Punjabi: Khambhari Tamil: Perunkurmizh and Komizhpazham Telugu: Gumaditeku Urdu: Gambhari.

Constituents

Butyric acid, tartaric acid, alkaloid, resin, and saccharine.

Properties and action

Rasa: Madhura, Amla, and Kshaya Guna: Guru, Sara, and Snigdha Virya: Shita Vipaka: Madhura Karma: Shukrala, Hrudya, Keshya, Medhya, Pittahara, Rasayana, Vatahara, and Brumhana.

Amalaki (dried fruit)[14]

Amalaki consists of pericarp of dried mature fruits of *Emblica officinalis* Gaertn. Syn. *Phyllanthus emblica* Linn. (Family – Euphorbiaceae), mostly collected in winter season after ripening and in Kashmir in summer, a small or medium sized tree, found both in a natural state in mixed deciduous forests of the country ascending to 1300 m on hills, and cultivated in gardens, homeyards, or grown as a roadside tree.

Synonyms

Sanskrit: Amritaphala, Amalaka, and Dhatriphala Assamese: Amlakhi, Amlakhu, and Amlaku Bengali: Amla, and Dhatri English: Emblic Myrobalan Gujarati: Ambala and Amala Hindi: Amla and Aonla Kannada: Nellikayi, Bela nelli, and Pottadenollikayi Kashmiri: Amla and Embali Malayalam: Nellikka Marathi: Anvala and Avalkathi Oriya: Ainla and Anala Punjabi: Aula and amla Tamil: Nellikai and nelli Telugu: Usirika Urdu: Amla and Amlaj.

Constituents

Ascorbic acid and gallotannins.

Properties and action

Rasa: Madhura, Amla, Katu, Tikta, and KshayaGuna: Laghu and RukshaVirya: ShitaVipaka: MadhuraKarma: Chakshushya, Rasayana, Tridoshajit, and VrushyaDOSE – 3–6 g of the drug in powder form.

Haritaki (fruit)[15]

Haritaki consists of the pericarp of mature fruits of Terminalia chebula Retz. (Family – Combretaceae), a moderate sized or large tree found throughout India, chiefly in deciduous forests and areas of light rainfall, but occasionally also in slightly moist forests, up to about 1500 m elevation, throughout India, flowers appear from April to August and fruits ripen from October to January.

Synonyms

Sanskrit: Abhaya, Kayastha, Shiva, Pathya, and VijayaAssamese: ShilikhaBengali: HaritakiEnglish: MyrobalanGujrati: Hirdo, Himaja, and Pulo-hardaHindi: Harre, Harad, and HararKannada: AlalekaiKashmiri: HalelaMalayalam: KatukkaMarathi: Hirda, Haritaki, Harda, and HiredaOriya: HaridaPunjabi: Halela and HararTamil: KadukkaiTelugu: Karaka and KarakkayaUrdu: Halela.

Constituents

Tannins, anthraquinones, and polyphenolic compounds.

Properties and action

Rasa: Madhura, Amla, Katu, Tikta, and KashayaGuna: Laghu and RukshaVirya: UshnaVipaka: MadhuraKarma: Chakshushya, Dipana, Hrudya, Medhya, Sarvadoshaprashamana, and Rasayana,AnulomanaDOSE – 3–6 g of the drug in powder form.

Discussion

Discussion on mode of action of Ashchyotana

In Ashchyotana, medicines are allowed to flow. This should be used in the initial stages and can be used in acute conditions. The medicine is poured in the required dosage at the inner canthus. The medicine thus used flows through the conjunctival sac and passes to the nose. The volume of the conjunctival sac is 7 µl and the volume of 1 drop is 50 µl. Obviously, the medicine is either wasted or reaches the nose for the transnasal absorption. Acharyas have described dharanakala of ashchyotana. These are 200 matras for snehana, 100 matras for lekhana, and 300 matras for Ropana. Eye drops cannot be retained, so this dharanakala means instilling appropriate. Now, if we consider 100 matra is equal to 1½ min as mentioned by Kasturishastri, the Lekhana drop should be used every 10–15 s into 8 times. In the same way, each drop every 18 s for 10 times for Snehana and each drop every 22–24s for Ropana is used.

Basically, the idea behind this procedure is to use medicine by the use of fat- and water-soluble extracts from the herbs and other ingredients and keep them in contact with the epithelium of conjunctiva and cornea, thereby transferring essential elements to them.

Discussion on action of medicine

As per Sushruta Samhita, the causative dosha in Shuktika is Pitta, and hence, the treatment involves mitigating this Pitta dosha. It is mentioned in Sushruta Samhita that the causative dosha should be eliminated. Gambhari, Amalaki, and Haritaki Ashchyotana have properties to eliminate Pitta dosha. The medicines mentioned in the present review are Pittahara and are considered best for the eyes.

Gambhari, Amalaki, and Haritaki Ashchyotana are used in the treatment of eye diseases. Gambhari is a drug which is pittahara, hrudya and rasayana and Amalaki is tridoshahara, rasayana, and chakshushya. Haritaki is a drug mentioned in the treatment of eye diseases and has properties such as tridoshahara and chakshushya.

Conclusion

Shuktika can be compared to conjunctival xerosis in which the conjunctiva becomes dry, lusterless, and nonwetable. These patches almost always involve the interpalpabral area of the temporal quadrants and often nasal quadrants as well. Typical xerosis may be associated with conjunctival thickening, wrinkling, and pigmentation accompanied by pain in the eyes, burning sensation in the eyes, diarrhea, thirst, and fever. Most common etiology of Shuktika is improper ahara and vihara causing chaya

followed by prakopa and sthana samsraya of pitta dosha in the eyes. Etiological factors concerned with conjunctival xerosis are Vitamin A deficiency. In the present study, Shuktika was found to be more prevalent in preschool aged children, students, women in reproductive age, and alcoholics. Gambhari, Amalaki, and Haritaki Aschyotana are cost-effective, safe, and easy procedures which can be done by the patient himself/herself in their own homes.

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Conflicts of interest

There are no conflicts of interest.

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