Abstract

Pishtak is one of the shuklagata netraroga described by Ayurveda Acharyas in texts like Sushruta Samhita, Ashtang Hridaya etc. Pishtak can be compared to Pinguecula which is formation of yellowish white patch on bulbar conjunctiva near limbus. The disease is more common in outdoor workers and people living in hot climates. In modern science there is no specific treatment. Only lubricating drops are given which temporary give relief but recurrence occurs frequently. According to Ayurveda Pishtak is aushadhisadyavyadhi. Acharya Sushruta described many Anjana Kalpas in Uttartantra for various eye diseases. Pathyadi Anjana Varti is one of them which is used to treat Kaphaja Vyadhi. Pishtak (Pinguecula) is also Kaphaja Vyadhi. The formulation Pathyadi Anjana contains drugs Pathya, Haridra, Yashtimadhu which all are Chakshushya. Pathyadi Anjana Varti is the lekhananjana. Hence the formulation Pathyadi Anjana is selected for clinical study from Sushrut Samhita.

Keywords

Pishtak, Pathyadi Anjana, Pinguecula, Sushruta Samhita
INTRODUCTION

Eyes are gods greatest gift and window to our soul. In Ayurveda Acharya Sushruta has described 76 netrarogas among that Pishtak is one of the shuklagat netraroga\(^1\). Clinical feature of Pishtak is that it appears like a elevated circular dot and is as white as rice cake on white coat of eye\(^2\). In Pinguecula symptoms that mainly found are dry eyes, itching, burning feeling or scratchy sensation. According to modern science it can be compared with Pinguecula. It is a response to prolonged effect of environmental factors such as exposure to sun, dry heat, high wind and abundance of dust. Pinguecula is more commonly found in adults and older people who constantly expose to sunlight. Pinguecula seldom gives symptoms but its progression may cause inflammation, intraepithelial abscess formation and may develop into a pterygium which grows on to cornea and affects vision\(^3\).

In modern science there is no specific treatment. Only lubricating eye drops are given which temporary give relief but recurrence occurs frequently.

A wide variety of Kalapas are described in Ayurveda to treat various eye diseases. Anjana is one of the Kriyakalpa described by our great ancient Acharyas. Acharya Sushruta described many Anjana Kalpas in Uttartantra for various eye diseases. Hence it is decided to do research on medical treatment of Pishtak based on references described in Ayurvedic Samhita.

The formulation Pathyadi Anjana is selected for clinical study from Sushruta Samhita which contains drugs Pathya (Terminalia chebula), Haridra (Curcurma longa), Yashimadhu (Glycyrrhija glabra)\(^4\). Pathyadi Anjana is used for kaphaja Netraroga. Pishtak is also kaphaja Vyadhi. Along with this the ingredients of above formulations are easily available and its mode of preparation as well as application is easy. Further due to low cost lower economic strata can easily afford it.

Taking into all considerations I choose simple remedy for the treatment of Pishtak.

PREVALENCE

The prevalence of Pinguecula a South Indian population were 9.5% to 11.3%. Rural residences were associated with presence of Pinguecula. Higher lifetime UV exposure was associated with the presence of Pinguecula the first stage of Pterygium\(^5\).

CASE STUDY
Patient details: A 45yr old female patient, Hindu by religion, working as farmer came to OPD of our hospital with complains of right eye.

- Yellowish white prominence in white coat of eye (since one month)
- Ocular discomfort-continuous sensation of foreign body with every blink (since last one month)
- Redness-Localised to Pinguecula along with surrounding vessels (since last one month)

Patient was thoroughly examined and his detailed history was taken. Patient was farmer by occupation and did not have history of any major illness. Before coming to our hospital Patient has taken modern treatment i.e. eye drop containing carboxymethyl cellulose for above complaints. She has got temporary relief but developed same complaints later. Therefore she came to our hospital for alternative treatment. Local examination revealed redness in right eye and yellowish white elevated region in bulbar conjunctiva. Systemic examination revealed no abnormality.

On examination:
- General condition - Fair, afebrile
- Dehbhar (weight)- 57 kg
- Dehprakriti- kapha
- Right eye examination=

Conjunctiva- congestion localised to pinguecula

Pupil –round, reactive to light

Cornea- clear

Visual acuity – 6/6

As per Ayurvedic text the signs of Pishtak are:

Utsannah (elevated)

Vruttabindushuklabhage (round)

➢ Diagnosis: Pishtak (Pinguecula)

**ASSESSMENT CRITERIA**-

<table>
<thead>
<tr>
<th>Subjective Criteria</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
</table>
Table 2 Objective criteria

<table>
<thead>
<tr>
<th>Objective criteria</th>
<th>0</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Castroviejo calliper</td>
<td>Flat Pinguecula.</td>
<td>Mild or moderate pinguecula (yellowish white or slightly elevated lesion with max. diameter of &lt; 3 mm.).</td>
<td>Severe pinguecula (Highly vascular and elevated lesion or large pinguecula with 3 mm or more).</td>
</tr>
</tbody>
</table>

Table 3 Blood/Urine Exam

<table>
<thead>
<tr>
<th>Blood</th>
<th>Value</th>
<th>Urine</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hb%</td>
<td>11 gm%</td>
<td>Albumin</td>
<td>Nil</td>
</tr>
<tr>
<td>TLC</td>
<td>7600/cumm</td>
<td>Sugar</td>
<td>Nil</td>
</tr>
<tr>
<td>ESR</td>
<td>18mm</td>
<td>Micro</td>
<td>NAD</td>
</tr>
<tr>
<td>BSL-R</td>
<td>90 mg/dl</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MANAGEMENT AND OBSERVATIONS

Considering this condition as Pishtak having vitiation of kapha dosha treated with-

Pathyadi Anjana Varti- It is Lekhana Anjana

Fine powder of Pathya, Haridra and Madhuka equally mixed together and triturated along with water and desired size Varti is prepared and used for application on eyes as Anjana. Varti is prepared at Rasashala of my institute.

Time & duration –in morning for 15 days.

Application – In lower fornix with Glass rod.

With application of Pathyadi Anjana Varti patient has marked relief in symptoms of burning sensation ocular discomfort and redness.
**Table 4** Assessment After Treatment

<table>
<thead>
<tr>
<th>Assessment criteria</th>
<th>Before Treatment</th>
<th>After Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ocular discomfort/foreign body sensation</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Redness</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Castroviejo calliper</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

**RESULTS AND DISCUSSION**

In above case study patient got complete relief from symptoms of Pishtak. Patient had got good result. *Kriyakalpa* described in Ayurveda has its unique specialty. *Pathyadi Anjana* described in *Shleshmabhishyanda pratishedham Adhyay* in Uttartantra of *Sushrut Samhita* shows good result in Pishtak. *Pathaydi Anjana Varti* used for Anjanakarma acts as a *Lekhana anjana*. It expels the *doshas* from eye to make eye clean, light free from discharge. All the three drugs i.e. *Pathya, Haridra* and *Yashtimadhu* have *Kaphghna* property. The drug *Pathya* has *laghu, ruksha guna* and *Ushnaveerya* and drug *Haridra* also has same *guna* and *veerya*. Due to this *laghu ruksha guna* and *ushna veerya* both drug causes *chedana* of vitiated *dosha*.

*Yashtimadhu* has *guna –guru, snigdha* and *vipaka-sheeta* hence potentially offers some relief from ocular discomfort and foreign body sensation. It also has a *Netrya* and *Vranropana* activity thus helps to decrease congestion. *Pathyadi Anjana Varti* also gives lightness and pristine cleanness of the eye marked by the improved power of vision and decreases all other distressing symptoms.

**CONCLUSION**

*Pathaydi Anjana Varti* is effective in *Pishtak* as its marked relief over symptoms. The contents of drug are easily available. An attempt of study is to provide safe and effective treatment to the patient. The study concludes that *Pathaydi Anjana Varti* is effective in management of Pishtak. Study opens the doors for shalakya specialist to manage the disease from root cause.

**REFERENCES**


