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Trikatu and Madhu Pratisarana in Kukunaka- A Review

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ABSTRACT

Kukunaka is a particular type of inflammatory disease of eye seen in Ksheerapa avastha, mostly this disease is caused during the infancy period of around 8 months of age. It may occur as a secondary complication to Dantotpatti. Acharya Kashyapa the pioneer in kaumarbhritya opines this disease as ksheer doshaja one. Kukunaka is explained as the Netra vartam gata Kapha-Raktaj vyadhi. It is a bala Netra rog associated with weakness of eyes with photophobia. Kukunaka is the most common eye disease of newborns and is correlated to Ophthalmia neonatorum or neonatal conjunctivitis. Inflammation is caused by a local irritant or by bacteria & herpes simplex virus. It occurs due to maternal infections during labour and delivery and post-delivery complications or infections. It is an allergic manifestation and the child goes on rubbing the forehead, eyes, nose and throat. This disease is associated with watering & purulent discharge from both eyes, there may be an associated keratitis or uveitis. As per the Acharya Sushruta the Pratisarana of Trikatu and Madhu is useful in Kukunaka. Pratisarana is a sthanika chikitsa in which the medicine is taken with index finger and applied at site of infection.

KEYWORDS

Trikatu, Madhu, Pratisaran, Kukunaka, Opthalmia Neonat



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INTRODUCTION

Kumarbhritya is an important branch of Ayurveda which deals with Kumarbharan, Ksheerdosh shodhan kriya of dhatri, treatment of dusta stanyaj vyadhis and treatment of grahaj vyadhi¹. Acharya Kashyapa is considered as the supreme authority in Kumarbhritya tantra and he has considered this branch to be the best among the 8 angas of Ayurveda². The branch has been compared to the excellence of Agnideva among other devas. Kukunaka eye diseases has been described in infants by various authors. This disease occurs in infants due to various causes. Kukunaka disease is found in the eyelids due to intake of vitiated Breast milk by doshas.

Table 1 Causative factors of *Kukunaka* as per various *Samhitas*

S. no	Name of Samhitas	Causative Factor	
1.	Sushruta Samhita ³	Dusta Stanya due to vitiated Vata, Pitta, Kaph & Rakta	
2	Kashyapa Samhita ⁴	Dusta Stanya due to vitiated Kapha, Rakta	
3	Ashtanga Hridaya ⁵	Dantotpatti Nimitaj Vyadhi	
4	Yogratnakar ⁶	Ksheer Dosha janya	
5	Harita Samhita ⁷	Kshaar Yukta Dugdha	
6.	Ravana krita Kumartantra	Ksheer Dosha janya	
~			

Samprapti of Kukunaka as per Acharya Kashyapa:

Due to various causative factors, *doshas* of Mother gets aggravated and causes obstruction of the *strotas* including *Stanya*

Vaha strotas, hence *stanya* gets vitiated with *doshas*⁸. When baby consumes this breast milk, vitiated doshas enters inside the baby's body causes *akshep* (convulsions) and *ushanata* (rise in body temperature), thus it vitiates *Kapha* and *Rakta* to cause disordes of eye by name *Kukunaka*⁹.

Hence mother who consumes causative factors in excess results in her breast milk vitiation and same is transferred to the baby.

Table 2 Clinical features of *Kukunaka* as per different *Samhitas*

S.no.		of	Clinical features		
	Samhita				
1.	Sushruta Samhita		Ati mardan of Akshikut, nasa & lalata due to ati kandu, Photophobia, Excessive exudates with tears, Adhered		
2.	Kashyapa Samhita		eyelids ¹⁰ . Excessive lacrimation, absence of sneezing, discomfort, frequent rubbing of nasal area, forehead & eyeballs, itching in the eyes, intolerance to light, swelling over eyelids ¹¹ .		
3.	Ashtanga Hridaya		Vartma shoola, Pachilayta, karna nasa akshi mardana ¹² .		
4.	Yogratnakar		Netra kandu, Netra srava, lalata akshi kantha nasa gharshanam ¹³ .		
5.	Ravanakrita Kumartantra		Netra atikandu, srava, Mastakakshikuta, Nasagharshanam, Netronmilankshaya		

OPHTHALMIA NEONATORUM

Ophthalmia Neonatorum or Neonatal Conjunctivitis is characterized by inflammation of conjunctiva in newborn.



Inflammation is caused by a local irritant (chemical conjunctivitis) or by bacteria (Neisseria gonorrhoeae, Chlamydia trachomatis, Staphylococci, Streptococci and Gram negative sp.) and Herpes simplex virus¹⁴. The risk in newborns depends on maternal infections, circumstances during labor and delivery, prophylactic measures and post-delivery exposures to infections¹⁵. *Chemical conjunctivitis* most commonly seen is associated with silver nitrate which usually resolves within 48 hrs.

Gonococcal conjunctivitis characterized by bilateral conjunctival oedema, lid edema with thick & purulent exudates which begins 1-4 days after birth. There may be corneal ulceration or panophthalmitis with loss of vision.

Chlamydial conjunctivitis presents with inflammation, eye discharge and eye lid swelling 5- 14 days after birth¹⁶.

Epidemiology:

Neonatal Conjunctivitis is usually acquired during vaginal delivery which reflects the sexually transmitted infections. *Chlamydia trachomatis* is the most common cause of Ophthalmia Neonatorum in the United States, where incidence rate is 8.2/1,000 births¹⁷. The prevalence of this infection in India is 0.5 to 33 % ¹⁸.

Clinical features:

Ophthalmia neonatorum is characterized by congestion and chemosis of the

conjunctiva, edema of the eyelids and purulent discharge¹⁹. Watering and purulent discharge from both eyes in neonates, there may be an associated keratitis or uveitis in Gonococci infection the sign and symptoms are severe, there are systemic features like fever, urethritis, arthritis, endocarditis, meningitis and septicemia²⁰.

After birth the inflammation in eyelids caused by silver nitrate drops occurs within 6–12 hours. The incubation period Gonococcal conjunctivitis is 2–5 days, and for that due to *C. trachomatis* is 5–14 days. Gonococcal infection is present from birth or may be lingered by 5 days due to ocular prophylaxis.

Gonococcal conjunctivitis with starts serosanguineous discharge and inflammation. The discharge becomes purulent and thick with eyelid inflammation and chemosis in one day. The infection may reach the further layers of the conjunctiva & the cornea if the patient treatment is lingered. Complications include iridocyclitis, corneal ulceration perforation and panophthalmitis. Conjunctivitis caused by C. trachomatis may vary from mild inflammation to severe inflammation of the eyelids with thick purulent discharge. Conjunctiva is chiefly affected in this disease while the cornea is rarely affected .Nursery acquired conjunctivitis is severe disease presented by



presence of eyelid edema, thick & purulent discharge & further may lead to the septicemia & shock.

Diagnosis:

A conjunctival swab will help identify the

organism.

Conjunctivitis appearing after 48 hr should be evaluated for a possibly infectious cause. Culture test of purulent discharge & Gram staining helps in proper diagonosis. The differential diagnosis includes Dacryocystitis caused by con-genital lacrimal duct obstruction with lacrimal sac

DRUG REVIEW

Shunthi (Rz.)²²

Shunthi consists of dried rhizome of Zingiber officinale Roxb. (Fam.

Zinglberaceae)

SYNONYMS:

Sanskrit: Aushadha, Muhaushadha, Nagara, Vishva, Vishvabheshaja,

shringavera, Vishvaushadha

distention (dacryocystocele)²¹.

Assamese: Adasuth, Aadar Shuth

Bengali: Suntha, Sunthi English: Ginger root

Gujrati: Sundh, Suntha

Hindi: Ardraka Kannada: Shunthi Kashmiri: Shonth

Malayalam: Chukku

Marathi: Sunth

Oriya: Sunthi

Punjabi: Sund

Tamil: Sukku, Chukku

Telugu: Sonthi, Sunti

Urdu: Sonth, Zanjabeel

CONSTITUENTS - Essential oil, pungent

constituents (gingerol and shogaol),

resinous matter and starch.

PROPERTIES AND ACTION

Rasa: Katu

Guna: Snigdha, laghu

Virya: Ushna

Vipaka: Madhura

Karma: Anulomana, Deepana, Hridya, Pachana, Vatakaphapaha, amadoshahara

THERAPEUTIC USES - Agnimandya,

shvasa, adhmana, amavata, Pandu,

Udararoga

Maricha (Frt.)²³

Marica consists of dried fruit of Piper

nigrum Linn. (Fam. Piperaceae)

SYNONYMS -

Sanskrit: Vellaja, Krishna, Ushna

Beng.: Golmorich, Kalamorich, Morich

Eng.: Black Pepper

Guj. : Kalimori

Hindi.: Kalimirch

Kan.: Karimonaru, Menaru

Mal. : Kurumulaku

Mar. : Kalamiri

Punj.: Galmirich, Kalimirch

Tam.: Milagu

Tel.: Miriyalu, Marichamu



CONSTITUENTS - Alkaloids (Piperine,

Chavicine, Piperidine, Piperetine and

Essential Oil.

PROPERTIES AND ACTION -

Rasa: Katu, Tikta

Guna: Laghu, Ruksha, Tikshana

Virya : Ushna Vipaka : Katu

Karma : Shleshmahara, Deepana,

Medohara, Pittakara, Ruchya,

Kaphavatajit

Vatahara, Chedana, Jantuasanna, Chedi,

Hridroga, Vataroga.

IMPORTANT FORMULATIONS

Marichyadi Gutika, Marichyadi Taila,

Trikatu Churna

THERAPEUTIC USES - Shvasa, Shoola,

Krimiroga, Tvagroga.

Pippali (Ft.) ²⁴

Pippali consists of the dried fruits of Piper

longum Linn. (Fam. Piperaceae)

SYNONYMS

Sanskrit: Kana, Magadha, Saundi,

Krishna, Magadhi,

Assamese : Pippali

Bengali: Pipul

English: Long Pepper

Gujrati: Lindi Peeper

Hindi: Pipar

Kannada: Hippali

Malayalam: Pippali

Marathi : Pimpali

Oriya : Pipali, Pippali

Punjabi : Magh, Magh Pipali

Tamil: Arisi Tippali, Thippili

Telugu: Pippalu

CONSTITUENTS - Essential Oil and

Alkaloids

PROPERTIES AND ACTION

Rasa: Madhura, Katu, Tikta

Guna: Snigdha, Laghu

Virya: Anushna

Vipaka: Madhura

Karma: Deepana, Hridya, Kaphahara,

Ruchya, Tridoshahara, Vatahara, Vrishya,

Rasayana, Rechana

THERAPEUTIC USES - Shoola, Arsha,

Gulma, Hikka, Kasa, Krimi, Kshaya,

Kushtha, Pliha

Roga, Prameha, Shvasa, Trishna, Udara

Roga, Ama Vata, Amadosha, Jvara.

Madhu²⁵

Madhu is a Sugary secretion deposited by

honey bees.

Synonyms: Madhu, Kshodra, Makshika,

Madhvika, Pushpasava, Kusumasava

English Name: Honey

Hindi Name: Shahad

Types: Pauttika, Bharamara, Kshaudra,

Makshika, Chhatara, Aarghya, Auddalaka,

Dala

Chemical constituents: Fructose, glucose,

Sucrose, Dextrine, formic acid, volatile oil,

enzymes, maltose, amino acids.

Rasa – madhura

Anurasa- Kashaya



Guna- laghu, Ruksha, picchila

Virya- Sheeta

Vipaka- Katu

Karma- Vrana Shodhan, Vrana Sandhan, Vrana Ropana, Krimihara, Kasa-Swash hara, Raktapitta nashak

Doshagnata- Tridosh Nashak

Table 3 Rasa Panchaka of Trikatu & Madhu

Lubic	Trasa I anen	circa of 1 trees	ti & main				
Sr.	<i>NAME</i>	GUNA	RASA	VIRYA	<i>VIPAKA</i>	<i>DOSHAGHNATA</i>	KARMA
No.							
1	Shunthi	Laghu,	Katu	Ushna	Madhura	Kapha - Vataghna	Shothhar
		Snigdha					Deepana,
							Pachana, Vrishya,
							Hridya,
2	Maricha	Laghu,	Katu	Ushna	Katu	Kapha - Vataghna	Deepana,
		Tikshana					Pachana,
							Shulaghna
							Lekhan
3	Pippali	Laghu,	Katu	Ushna	Madhura	Kapha - Vataghna	Shoolagna,
		Snigdha					Shothhara
							Deepana,
							Pachana,
							Rasayana,
							Vrishya,
4	Madhu	Laghu,	Madhura	Sheeta	Madhura	Tridoshaghna	Vrana Shodhan
		Ruksha,				,	Ropana,
		Sheeta					Sandhana,
							Chakshushya,
							Chedan

Pratisarana:

Pratisarana Chikitsa is explained in most of the samhitas.

"Pratisaryate Gharshyate aneneti pratisaranam" 26

"Shanairgharshanam Angulya TaduktamPratisaranam"²⁷

"Angulya Gharshanam" 28

Pratisarana is a gentle massage done with the finger for shorter duration on teeth, tongue or buccal cavity in the form of Kalka, Churna, Rasakriya or Avaleha²⁹.

Acharya Sushruta has mentioned it as one of the Upkarmas of Vrana and also it is described in Netra roga chikitsa as

paschata karma to remove the lesions.

Pratisarana is done mainly in kapha

Pradhana vyadhi with expected lekhana

effect.

Table 4 Classification of Pratisarana according to Different Acharyas

Types
Kalka, Rasakriya,
Kshaudra, Churna
Kalka, Rasakriya,
Churna
Kalka, Rasakriya,
Churna
Kalka, Churna, Avaleha
Kalka, Churna, Avaleha
Kalka, Churna, Avaleha

Churna is the upkalpana of kalka. It is a dried powdered form of drug ³⁶. Trikatu Churna mixed with Madhu Pratisarana is explained in Sushruta uttara tantra as a



treatment modality of *Kukunaka*. *Trikatu Churna* is powder of *Shunthi*, *Maricha* & *Pippali*³⁷.

DISCUSSION DISCUSSION ON MODE OF ACTION OF PRATISARANA:

Pratisarana is a mechanical approach, which is gentle rubbing with index finger. It mainly possesses shodhan and ropan properties. By pratisarana mechanical pressure is exerted over and around the eye which remove desquamated epithelial cells, infected debris and bacterial colonies and increases inhibition of bacterial diffusion into the tissues. Pratisarana also enhances absorption of active principles of dravyas i.e. Shunthi, Marich, Pippali and Madhu. Based the above information on Pratisarana helps in healing of tissues and has excellent Shodhan Kriya.

DISCUSSION ON MODE OF ACTION OF DRUGS

As per the Acharya Sushruta the Pratisarana of Trikatu and Madhu is useful in Kukunaka. Trikatu consist of shunthi, maricha & pippali, so these have different properties which are vrana shodhaka & vrana ropaka, Shunthi is having shothhara & hrudya properties, Maricha is having shulaghana & lekhana properties Pippali is having shulahar & shothaghana properties

Madhu is having Vrana Shodhaka,ropaka & chedan properties. It is essential to remove the dushti by the virtue of shodhan & vranaropan to achieve healing.

Trikatu & madhu both are having these properties which are alleviating these inhibitory factors

Hence it is concluded that *trikatu* with *madhu* possess high efficacy in *vrana shodhan* ,fine healing so it can be recommended as cost effective, effective therapy & easy to prepare in treatment of *Kukunaka*.

CONCLUSION

By the above review of each drug we conclude that *trikatu* with *madhu* have *shodhan* & ropan properties and different formulations of *trikatu* and *madhu* needs to be tried as anti-inflammatory application for *kukunaka*. Local Application of *trikatu* & *ghrita* provided good results by reduction of *kukunaka* & promotion of healing.



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