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Management of Homologous Hemianopia through Ayurveda- A Case Report

Harikrishnan N Menon^{1*}, Sudhakar T² and Syed Munawar Pasha³

¹⁻³Department of PG studies in Shalaky Tantra Government Ayurveda Medical College, Bangalore India

ABSTRACT

Introduction: Right Homonymous hemianopia is asymmetrical field defect involving right half of visual field of both eyes due to left optic tract lesion, visual field loss on the same side of both eyes. It is characterized by symptoms of blurriness of vision, diplopia, vision that appears dimmed. The symptoms of homonymous hemianopia can be correlated to Tritiya Patalagata Timira which is one among the Drishtigata rogas affecting visual pathway of the eye as explained in Ayurvedic texts. A patient with the signs and symptoms of homonymous hemianopia was treated according to the treatment principles of Timira as explained in Ayurvedic classics and the same has been presented in the article.

Materials and Methods: A patient was selected from Shalaky Tantra OPD of Sri Jayachamarajendra Institute of Indian Medicine Hospital, Bangalore with signs and symptoms homonymous hemianopia for the study. He was treated according to Chikitsa sutra of Timira i.e. Snehapana, Akshi Tarpana, Nasya and Chakshushya Basti mentioned in the classics.

Results: Subject showed marked improvement subjectively and in diagnostic tests like perimetry and visual acuity in both eyes.

Discussion: The Homonymous hemianopia disease can be considered as Tritiya Patala Gata Timira and can be treated according to its treatment principles

KEYWORDS

Homonymous hemianopia, *Anu taila*, *Chakshushya Basti*, *Drishti gata netra roga*



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INTRODUCTION

Incongruous homonymous hemianopia, i.e. asymmetrical field defect involving either right half of the visual field or left half of the visual field of both eyes¹. Visual field deficits on one side often occurs as a result of stroke syndrome². It involves one or more sensory or neurologic deficits. Even after the cessation of stroke, there will be sensory disabilities leading to difficulty in reading and vision. Since there is no efficient treatment for this disease only rehabilitation can be helpful for the patient. Here comes the role of Ayurvedic treatment so as to improve the quality of life by improving the vision of the patient.

It can be compared to *Tritiya Patalagatha Timira* according to Ayurvedic classics. The vitiated *Doshas* when enters the *Mamshashrita patala*, the symptoms of *Tritiya Patalagata Timira* occurs. If the vitiated *Dosha* is present at the *Parshwa* i.e on the side of the *Drishti* patient cannot visualize the objects present on that side of visual field³. Hence the treatment of principle of *Tritiya Patalagata Timira* i.e. *Virechana*, *Nasya* and *Basti* was adopted here⁴. Since the disease is *Yapya*⁵, we can manage it by the above said treatments and improve the visual capacity of the patient.

AIMS & OBJECTIVES

- 1) To study homologous hemianopia under the purview of *Tritiya Patalagata Timira*.
- 2) To improve the vision of patient by using treatment principles of *Tritiya Patalagata Timira*.

MATERIALS AND METHODS

Case Report: A male aged 52 years consulted Shalaky Tantra OPD of Sri Jayachamarajendra Institute of Indian Medicine Hospital, Bengaluru on 02/08/2019 complaining of blurring of vision and double vision in both eyes since 1 ½ years.

History of Present Illness: The subject was apparently normal 1 ½ years ago, he suddenly developed loss of strength in left side of the body, slurring of speech and blurring of vision. For which he took treatment and he was alright. But blurring of vision and double vision persisted. Since he was able to do his routine work he did not take any treatment for this. But gradually his vision complaints increased. So he approached Shalaky Tantra OPD of Sri Jayachamarajendra Institute of Indian Medicine Hospital, Bengaluru to get Ayurvedic treatment.

History of past illness: No history of systemic diseases like Asthma,



Hypertension or Diabetes. No history of any surgery.

Family History: Nothing significant.

Personal History:

Appetite: Good

Sleep: Sound

Bowel: Once a day

Micturition: 4-5 times/day

Habits: Smoking and Alcoholism

Occupation: Businessman

Ashta Stana Pareeksha:

Nadi: 68/min

Mutra: 4-5 times/day

Mala: Prakrutha

Jihwa: Alpa lipta

Shabda: Prakrutha

Drik: Vikrutha

Akriti: Krisha

Vitals:

Pulse Rate: 68/min

Respiratory rate: 16/min

Temp: 98.6⁰F

Systemic Examination:

All the systemic examinations revealed no abnormalities.

Ophthalmic Examination:

Findings explained in Table no 1

Examination of Fundus:

Findings explained in Table no 2

Investigations: Perimetry was done prior to the treatment as shown in figure 1 & 2.

Diagnosis: *Tritiya Patalagata Timira*, Right Homonymous Hemianopia.

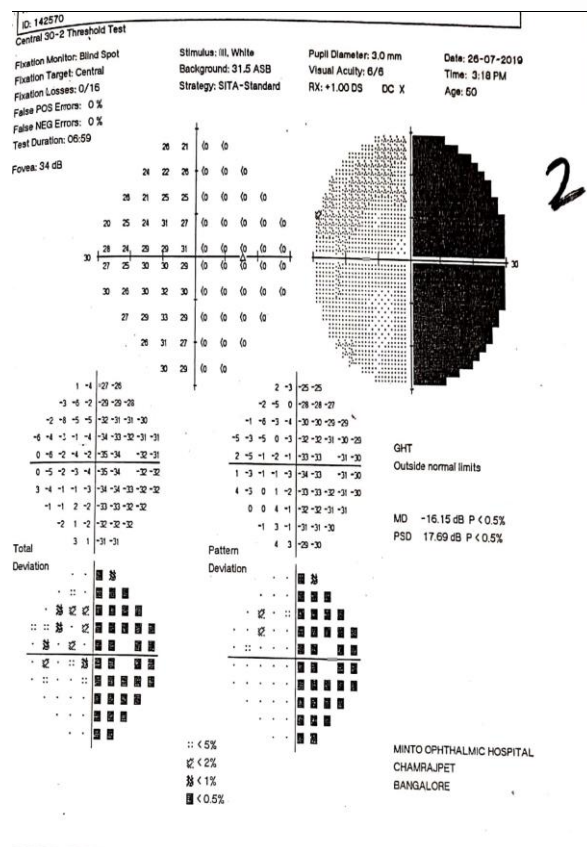


Figure 1 Perimetry result before treatment (RE)

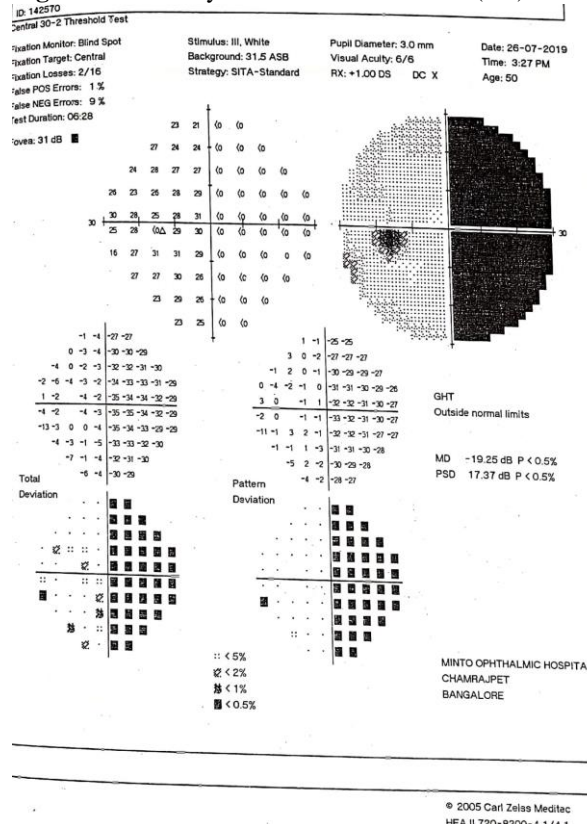


Figure 2: Perimetry result before treatment (LE)

**Table 1** Ophthalmic Examination

Ocular Structures	Right Eye	Left Eye
Adnexa	No Abnormalities Detected	No Abnormalities Detected
Conjunctiva	No Abnormalities Detected	No Abnormalities Detected
Sclera	No Abnormalities Detected	No Abnormalities Detected
Cornea	Clear	Clear
Anterior Chamber	Normal Depth	Normal Depth
Pupil	Round, Regular, Reactive to light	Round, Regular, Reactive to light
Lens	SIMC changes seen	SIMC changes seen
IOP	15mmHg	15mmHg
Visual acuity	Distant vision	6/12p
	Near vision	N10

Table 2 Fundal Examination

On Examination	Right Eye	Left Eye
Media	Clear	Clear
Vessels	Normal	Normal
Macula	No abnormalities detected	No abnormalities detected
Foveal Reflex	Present	Present
Optic Disc	Normal	Normal
Cup Disc Ratio	Normal	Normal

Treatment: *Ama Pachana* with Chitrakadi vati thrice a day with warm water for 3 days before food.

1. *Snehapana* with Patoladi Ghrita 10ml, 30ml, 60ml, 90ml, 120ml, 150ml, 170ml (7 consecutive days)
2. *Sarvanga Abhyana* with Ksheerabala taila followed by *Bashpa sweda* for 3 days.
3. Trivrut leha in dosage 60gms and hot water *Anupana*.
4. *Samsarjana karma* for 7 days with appropriate diet plan.
5. *Nasya* with Anutaila for 7 days
6. *Shirodhara* with Ksheerabala taila for 7 days.
7. *Chakshushya Basti* was given for 8 days.

8. *Tarpana* with Jeevantyadi Ghrita for 7 days.

9. Internal medications:

- Saphamrutha loha 2 tablets with honey and ghee in unequal quantities.
- Triphala choorna 5gms at night after food.
- Vasaguluchyadi Kashayam 20ml twice daily before food.

RESULTS

Total duration was 6 months, patient showed improvement both subjectively and objectively as shown in table 3 and figure 3&4.

Table 3 Result

Parameters		Before Treatment		After Treatment	
		Right Eye	Left Eye	Right Eye	Left Eye
Visual Acuity	Distant vision	6/12p	6/12p	6/6p	6/6p
	Near vision	N10	N10	N10	N10

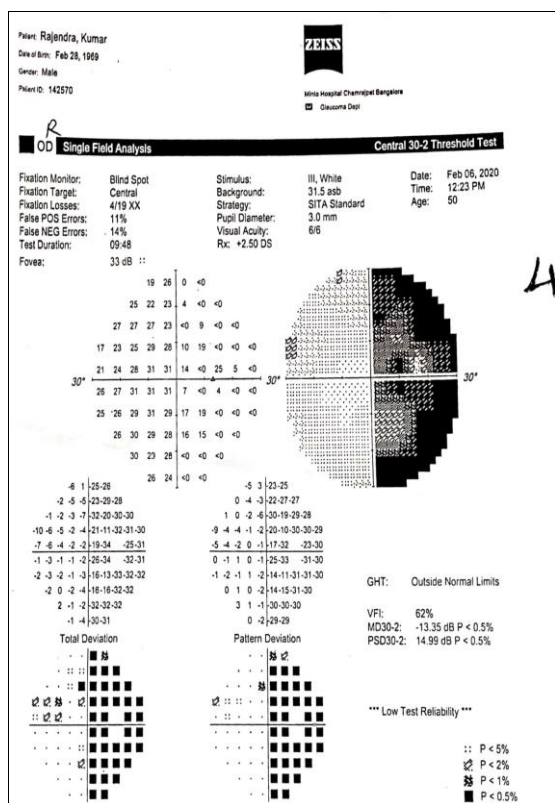


Figure 3 Perimetry result after treatment (RE)

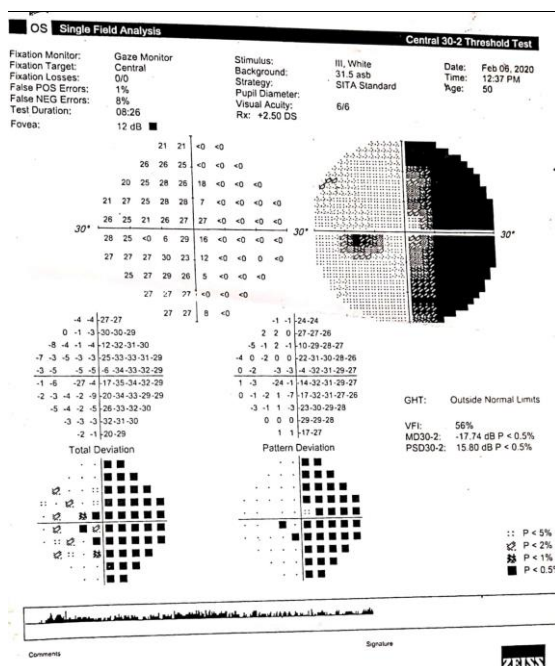


Figure 4 Perimetry result after treatment (LE)

DISCUSSION

Homologous hemianopia in the present case occurred due to stroke syndrome. The aim of treatment was to achieve

Srotosangharatva, Dushita Rakta & Pittaharana and eventually *Dhridhatwa* of *Chakshurindriya*. *Shodhana chikitsa* i.e. *Virechana* was first adopted to remove *Srotosangha* as well as to do *Rakta* and *Pitta shamana*. The *Amapachana* was done to remove the *Avarana* of *Kapha dosha*. *Patoladi ghruta* was selected for the *Snehapana* because of its *Tikta rasa* and *Rakta pitta hara* property⁶. The *Ghruta* (lipids) will have the property of crossing the cell membrane barrier thereby it increases cellular affinity and thus loosens the *Dosha* at cellular level. *Abhyanaga* will help move these *Dosha* from extremities to gut so that it can be easily excreted out. The *Swedana* will cause vasodilatation and thus increased flow of blood which will help in expelling out the *Doshas* mixed in lipids in the blood stream into gut. *Virechana* is adopted here because it does *Rakta-Pittaharana* as well as *Vatahara* action. The *Trivruth leha* will stimulate the mucosal lining of gut and increases its permeability, thus the *Doshas* brought to *Koshta* by *Snehana* and *Swedana* will be expelled out. *Nasya* was later adopted to remove the vitiated *Doshas* from the *Urdhwajatru pradesha* and the medication used for it was *Anutaila* which improves the *Dhruvatwa* of *Indriya*⁷. It is told “*Nasa Hi Shiraso Dwaram*”⁸ The drug administered through *Nasya* will act on limbic system



through olfacto-hypothalamo pituitary pathway and thus help in acquiring desired action. After this there is a need for rejuvenation. The patient belongs to middle age as well as the disease was *Chirakari* i.e. long term hence *Rasayana* therapy which helps in rejuvenating *Indriya* is required and to remove the neurological and sensory deficit caused by ischemia. *Shirodhara* causes *Netraprkashata* i.e. improves vision⁹. It will cause relaxation and revitalization of central nervous thus resulting in regularizing the normal function of the body. The Ksheerabala taila was selected as it is *Balya* and *Indriyaprasadana* in nature it will get absorbed through the scalp and does action over the required area¹⁰. *Basti* is administered through rectum, which is considered as *Moola* for all the *Siras* in the body hence the medicine administered through rectum reaches up-to head and nourishes the body. *Chakshushya basti* acts as *Rasayana* and *Chakshushya* hence it was selected for the treatment¹¹. Internally *Triphala choorna* was given as it is *Tridoshahara* as well as *Chakshushya* and helps in rejuvenation¹². *Sapthamrutha loha* is specially indicated in *timira roga*¹³. *Vasaguluchyadi kashaya* was given internally to pacify *Rakta* and *Pitta dosha*¹⁴.

CONCLUSION

In present study of homologous hemianopia, it was considered as *Tritiya Patalagata Timira* and was treated accordingly. Since the disease was secondary to stroke, the first step of treatment was aimed at removing the *Avarana* of *Srotas* by *Shodhana* and *Amapachana*. Later *Rasayana chikitsa* was adopted to normalize the sensory deficit i.e. hemianopia caused by the stroke. Thus improving the visual capacity of the patient.



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