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Effect of *Samudraphena Churna Pratisarana* and Oral Aushadha Yogas on *Vartma Sharkara* with special reference to Conjunctival Concretions - A Case Study

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ABSTRACT

Vartma Sharkara is a Sannipataja Vartmagata Roga which is correlated with conjunctival concretions. These are a type of degenerative changes occurring in conjunctiva which can cause ocular discomfort and even corneal abrasions. Modern treatment includes surgical removal which often results in conjunctival hyperaemia and injuries with chances of recurrence. Although concretions are very commonly seen in clinical practice but till date no modality has been successful in treating them satisfactorily, hence it is imperative to find an effective, economic and safe solution for the management of concretions through Ayurvedic Upkramas and Aushadhi Yogas. The present study was designed incorporating Pratisarana Karma with Samudraphena Churna along with Kaishore Guggulu and Panchkola Churna as Aushadhi, the combination of a local para surgical procedure along with oral medications proved effective in removal of concretions with no adverse effects and no recurrence.

KEYWORDS

Pratisarana, Vartma Sharkara, Samudraphena, Kaishore Guggulu, Panchkola Churna, Conjunctival Concretions



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INTRODUCTION

- *Vartma Sharkara* or *Sikta Vartma*¹ is considered as a *Sannipataja Vartmagata Roga* and is considered *Sadhya* by *Lekhana Karma*² i.e. *Pratisarana*.
- It is characterised as a large rugged nodule surrounded by minute thickly packed granules³ having modern parlance with a degenerative condition called as conjunctival concretions.
- They appear as small, typically multiple, yellow-white lesions commonly found on palpebral conjunctiva of elderly individuals and those with chronic inflammation⁴.
- Concretions are mostly composed of the mucinous secretion of the transformed conjunctival glands admixed with the degenerative products of the epithelial cells⁵, these are hard raised areas of varying sizes from pin point to pin head⁶.

Causes and risk factors:

1. Ageing
2. Chronic conjunctival inflammation
3. Tear film deficiency

4. Severe atopic keratoconjunctivitis
5. Meibomian gland dysfunction
6. Re-crystallisation of certain eye drops (e.g. sulphadiazine)
7. It is also associated with post-trachomatous degeneration⁷.

Once they grow in size and become big enough to protrude palpebral tissue, they erode the overlying epithelium of conjunctiva and cause foreign body sensation, lacrimation and redness, rough coalesced concretions may cause abrasions on the delicate cornea.

Such concretions require excision and they are surgically removed with a hypodermic needle of 30 gauge or less or with a needle point forceps, due to the invasive nature of these instruments conjunctival injuries occur often.

It has been observed that concretions are usually found in patients which are potentially affected with Dry eye disease⁸, in this disease as the tear film is affected therefore, due to insufficient lubrication patients blinks often making the concretion to rub on an already dry cornea again and again causing abrasion which may transform into an ulcer when ignored.



CASE REPORT

- A 54 years old female patient visited Eye OPD of National Institute of Ayurveda, Jaipur presenting with chief complaint of pricking sensation in right eye and associated complaint of watering in both eyes for 1 year.
- Slit lamp examination revealed multiple concretions in right upper palpebral conjunctiva and lenticular changes bilaterally with no other pathology.
- Her medical history included removal of concretions with hypodermic needle in upper eyelid of right eye by an ophthalmologist one and a half month back with recurrence.

1. Personal History

Age	54years
Sex	Female
Marital Status	Married
Occupation	Home maker
Bowel Habit	Irregular
Appetite	Less
Micturition	Normal
Sleep	Adequate
Blood Pressure	130/90 mmHg
Pulse	72/min

EXAMINATIONS

1. Slit Lamp Examination:

- Lids** - Within normal limits
- Lashes** - Within normal limits
- Conjunctiva** - Multiple concretions in right upper palpebral conjunctiva, rest within normal limits
- Sclera** - Bilateral within normal limits
- Cornea** - Bilateral within normal limits

vi. **Lens Bilateral** – Early Lenticular Changes

vii. **Pupil Bilateral** - Round, Regular, Reactive

viii. **Anterior Chamber** - Bilateral Normal Depth

2. Vision Test:

Distance visual acuity	Right Eye	Left Eye
With aids	6/9	6/9
Spherical	+2.00	+2.00
Near visual acuity	Right Eye	Left Eye
With aids	N/6	N/6
Addition	+2.50D	+2.50D

3. Ophthalmoscopic Examination:

Bilateral Fundus within normal limits

Treatment administered:

1. *Samudraphena Churna Pratisarana* on right eye's upper palpebral conjunctival surface once a week for 2 sittings.
2. *Kaishore Guggulu* – 500mg bid after meals for 15 days.
3. *Panchkola Churna* – 3g bid before food with lukewarm water for 15 days.

Procedure:

- *Mridu Swedana of Vartma with Ushna Jala Plota and Mardana to loosen the Vartma Sharkara*⁹.
- *Pratisarana Karma over Vartma Sharkara*.
- Irrigation with normal saline was done and *Madhu-Ghrta* was applied over *Vartma*⁹.



FOLLOW UP

It was done on 3rd day, 7th day, 15th day, 30th day, 60th day after completion of procedure and no recurrence was observed.

DISCUSSION

The *Lakshana* of *Vartma Sharkara* (Conjunctival concretions) coincide with the symptoms produced by conjunctival concretions, which are a type of degenerative change occurring in the eye

Table 1 Pharmacological properties of *Samudraphena Churna*

Name of Drug	Botanical Name	Rasa	Guna	Virya	Vipaka	Dosha Karma
<i>Samudraphena</i> ¹⁰	Sepiida	Kashaya	Lekhana	Sheeta	-	Chakhushya

And these properties are further enhanced by its *Shodhana* from *Nimbu Swarasa*²³ as it has *Ushna Guna* as explained in Table-2, lemon juice contains oxalic acid, coumarins

Table 2 Pharmacological properties of *Nimbu Swarasa*

Name of Drug	Botanical Name	Rasa	Guna	Virya	Vipaka	Dosha Karma
<i>Nimbu</i> ¹¹	Citrus Limon (Linn.) Burm. f.	Amla	Guru, Tikshna	Ushna	Amla	Kapha Vata Shamaka, Pittavardhaka

• *Kaishore Guggulu* is mainly indicated for *Vata Rakta*²⁵ hence it is capable of treating associated *Shotha* and *Ruja* since most of its

Table 3 Pharmacological properties of *Kaishore Guggulu*

Name of Drug	Botanical Name	Rasa	Guna	Virya	Vipaka	Dosha Karma
<i>Guggulu</i> ¹²	Commiphora wightii (Arn.) Bhand.	Tikta, Katu	Laghu, Ruksha, Tikshna, Vishada, Sookshma,	Ushna	Katu	Tridosahara
<i>Guduchi</i> ¹³	Tinospora cordifolia (Willd) Miers	Tikta, Kashaya	Guru, Snigdha	Ushna	Madhura	Tridosahara

which is associated with increasing age and chronic inflammatory conditions, it is problematic condition which causes ocular discomfort to the sufferer and even harm the cornea exposing to it further infections. *Samudraphena Churna* is primarily a calcium compound and possesses cleansing, wound healing and cooling properties and is considered beneficial for eyes²² as mentioned in Table-1.

and **bioflavonoids** which help in purification of tissues and repair the inner lining of blood vessels²⁴.

ingredients are *Ushna Virya* with the capability of *Tridosha-Shamana* as mentioned in Table-3.



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<i>Amalaki</i> ¹⁴	<i>Embolica officinalis</i> Gaertn.	<i>Pancharasa (Lavana rahita)</i>	<i>Guru, Ruksha, Sheeta</i>	<i>Shita</i>	<i>Madhura</i>	<i>Tridosahara</i>
<i>Bibhitaki</i> ¹⁵	<i>Terminalia bellirica</i> Roxb.	<i>Kashaya</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Tridosahara, Vishesh Karma on Kapha</i>
<i>Haritaki</i> ¹⁶	<i>Terminalia Chebula</i> Retz.	<i>Pancharasa (Lavana varjita)</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Tridosahara</i>
<i>Shunthi</i> ¹⁷	<i>Zingiber officinale</i> Rosc.	<i>Katu</i>	<i>Laghu, Snigdha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Kapha-Vata Shamaka</i>

Table 4 Pharmacological properties of *Panchkola Churna*

Name of Drug	Botanical Name	Rasa	Guna	Virya	Vipaka	Dosha Karma
<i>Pippali</i> ¹⁸	<i>Piper longum</i> Linn.	<i>Katu</i>	<i>Laghu, Snigdha, Tikshna</i>	<i>Anushnasheeta</i>	<i>Madhura</i>	<i>Kapha-Vata Shamaka</i>
<i>Pippalimula</i> ¹⁹	<i>Piper longum</i> Linn.	<i>Katu</i>	<i>Laghu, Ruksha, Pachana</i>	<i>Ushna</i>		<i>Kapha-Vatoudarapaham</i>
<i>Chavya</i> ²⁰	<i>Piper retrofractum</i> Vahl.	<i>Katu</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kapha-Vata Shamaka</i>
<i>Chitraka</i> ²¹	<i>Plumbago zeylanica</i> Linn.	<i>Katu</i>	<i>Laghu, Ruksha, Tikshna</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kapha-Vata Shamaka</i>
<i>Nagara</i> ¹⁹	<i>Zingiber officinale</i> Rosc.	<i>Katu</i>	<i>Laghu, Snigdha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Kapha-Vata Shamaka</i>

Panchkola Churna was given for *Ama Pachana* as it removes *Srota Avarodha* by its *Deepana* property since it has *Kapha-Vata Shamaka* property as stated in Table-4, preventing recurrence²⁶.

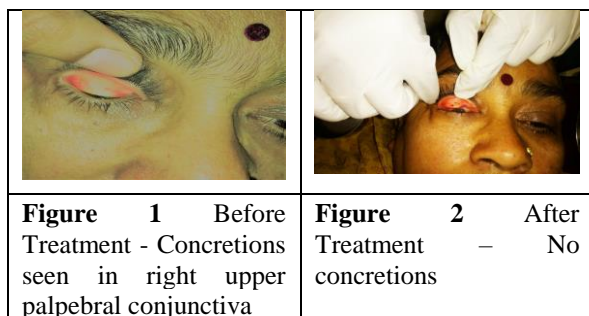


Figure 1 Before Treatment - Concretions seen in right upper palpebral conjunctiva

Figure 2 After Treatment - No concretions

CONCLUSION

It can be concluded that *Samudraphena Churna Pratisarana* along with internal administration of *Kaishore Guggulu* and *Panchkola Churna* provided complete relief in complaint of *Vartma Sharkara* as seen in Figure 1 and Figure 2 without causing any conjunctival injury or recurrence, hence it can be interpreted that this procedure is efficient, cost-effective



and safe for the management of *Vartma Sharkara*. A study with large sample size should be conducted to obtain more inferences for the development of a proper protocol.



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