

## EFFICACY OF JALAUKAVCHARANA IN THE MANAGEMENT OF PUYALASA WITH SPECIAL REFERENCE TO ACUTE DACRYOCYSTITIS, A CASE STUDY

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### ABSTRACT

*Puyalasa*, one among the *Sandhigatharoga* can be correlated to dacryocystitis based on the symptomatology which includes swelling in inner canthus (*Shopha* on *Kaninika Sandhi*) which later undergoes suppuration causing thick purulent discharge (*Puyastrava*). Dacryocystitis, is an inflammation of lacrimal sac of eye, is common occurrence in rural area of India, recurrent attacks of acute dacryocystitis lead to Lacrimal abscess, cellulitis or chronicity, where surgical removal of sac is an only option in children & adults. Though *Puyalasa* is due to *Tridosha* and *Rakta* & it is considered as *Sadhya* (curable) disease. The Treatment includes *Siravedh*, *Upanaha* & *Anjana kriya* & internal medication which can reduce the recurrence

rate & other complications in eyes. A diagnosed case of acute dacryocystitis with complaints of pain, sticky discharge from eye, inflammation near right inner canthus since 10 days approached to OPD & was managed by *Jalaukavcharana*, significant improvement was noticed in pain, redness, purulent discharge from eye & swelling. In present study, aim is to find an alternative or conjugate method to reduce inflammation of acute dacryocystitis, which may also decrease complications i.e. cellulitis, lacrimal abscess or fistula.

**KEYWORDS:** *Puyalasa*, *Jalaukavacharana*, Acute Dacryocystitis.

### INTRODUCTION

*Shalakyatantra* is one of the branches of “*Ashtang Ayurved*” specifically for diagnosis and treatment of all the diseases occurring above the neck organs such as eyes, nose, ear, mouth

and head. All the sense organs are present in the head & hence one should be alert to protect it. *Aacharya Sushruta* has given the importance to eye than rest of the sense organs by explaining eye disorders in the beginning of *Uttartantra*.

*Acharya Sushruta* has mentioned total 76 number of *Netraroga*, in which 9 *Sandhigatarogas* are explained. *Puyalasa* is among these 9 *Sandhigata Netrarogas* which occurs specifically in *Kaninika Sandhi*. It is said to be *Sadhya Vyadhi* though it is *Tridoshaja* and *Rakta*. Acute dacryocystitis is a suppurative inflammation of the lacrimal sac, characterized by presence of painful swelling in the region of sac associated with purulent discharge from eye. Out of many etiological factors of dacryocystitis, poor hygiene has a major contribution to the disease development. In India, lower socioeconomic status is a major aggravating factor for dacryocystitis.

In this case study of acute dacryocystitis, the patient was selected from OPD of *Shalakyatantra* Department Government Ayurvedic College and Hospital Nanded. Detail history of patient was taken, examinations were done. *Jalaukavcharana* treatment was given for three times in period of 7 days. Assessment was done after complete treatment.

## CASE REPORT

A 55 years old female patient visited to ophthalmology OPD of *Shalakyatantra* department, G.A.C and Hospital, Nanded on 05/06/2022 with chief complaint of swelling and severe pain near inner canthus, purulent discharge from right eye. Patient has recurrent attacks of same in the last 1 year with an interval of 3-4 month between two episodes.

She was diagnosed, by nearby ophthalmologists, as case of acute dacryocystitis and given medicine but not satisfactory results, hence she came to G.A.C. Hospital Nanded.

### Personal history

Diet – Vegetarian

Appetite – Normal

Bowel –Regular

Habbits – No

*Ashtavidha pariksha:*

*Nadi –Vata pradhan pitta*

*Mala –Prakrut*

*Mutra –Prakrut*

*Jivha – Niram*

*Shabda –Prakrut*

*Druka –Prakrut*

*Akruti – Madhyam.*

| Visual examination | Right eye | Left eye |
|--------------------|-----------|----------|
| DVA unaided        | 6\6       | 6\6      |
| Near vision        | N/10      | N/10     |

### Ocular examination

Eyelid - Swelling over right lower lid

Conjunctiva- Mild congestion near inner canthus sclera, cornea, anterior chamber normal, media clear and fundus within normal limit.

Examination of nasal cavity – Right side Deviated nasal septum

Local\Examination – *Shopha* (Oedema), *Puyastrav* (Mucopurulent discharge from right eye), *Sarambha* (Redness), *Vedana* (Inflammation and tenderness) at *Kaninika Sandhi*

### Photograph Pre – Treatment



### Procedure administrated to patient

2 *Jalaukas* were applied near *Kaninika Sandhi* on day 1, day 4 and day 7.

### Follow up finding

Local\Examination – *Shopha* (Oedema), *Puyastrav* (Mucopurulent discharge from right eye), *Sarambha* (Redness), *Vedana* (Inflammation and tenderness) at *Kaninika Sandhi* these symptoms are markedly reduced.

**Photograph post treatment****DISCUSSION**

Dacryocystitis, an inflammation of lacrimal sac, is a common condition found in general ophthalmic practice. It is found in all group, races and in both sexes. Secondary phenomenon of untreated or ill managed dacryocystitis may lead to complication like recurrent conjunctivitis, non-healing corneal ulcer, chronic dacryocystitis, lacrimal fistula formation. Due to recurrent attacks of acute dacryocystitis lacrimal abscess and lacrimal fistula may occur. In present study significant difference found in symptom like *Puyastrava*, *Shoppha*, *Sarmbha* and *Vedana*. *Jalaukavcharana* ceases the further advancement in the disease pathogenesis.

***Jalaukavcharana***

The probable mode of action of *Jalaukavcharana* as per Ayurveda text suggest that it is due to it's capacity of removing vitiated *Rakta Dosha*. Although there are three *Sharir Doshas* but according to *Shushruta*, *Rakta* is also considered as fourth *Dosha*. *Rakta Dhatu* is the prime carrier of vitiate *Pitta* in whole of the body. When this *Rakta Dhatu* is expelled from the body it carries the vitiated *Pitta* with itself and purifying the body by removal of waste product. i.e *Pitta* and *Rakta* has *Ashraya-Ashrayi* relation. Out of different methods of *Raktamokshna* like *Jalaukavcharana* is used for *Pittaj Raktadushti*. Hirudin secreted from saliva of *Jalauka* have thrombolytic, anticoagulant, blood and anti-inflammatory and pain reliving property.

**CONCLUSION**

It can be concluded that *Jalaukavacharana* is effective in the treatment of *Puyalasa* with special reference to acute dacryocystitis and significant in reducing *Puyastrava*, *Shoppha*, *Vedana* and *Sarambha*. It can also be concluded that, *Jalaukavacharana* helps in prevention of recurrence of *Puyalasa* and helping to avoid the surgical management of *Puyalasa*. Patient

did not get any side effect during treatment. Further study will be continued on number of patients.

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