

## STUDY THE EFFECT OF RAKT-MOKSHAN WITH JALAUKA ON ANJANNAMIKA

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### ABSTRACT

*Ayurveda* has an eluciative discourse on *Anjananamika* with a distinct approach. An effort of framing a fast and effective management, which may reciprocate prognosis, is standing at par in present era. It is compared with Sty or External hordeolium in which recurrence is more concern. A prompt attempt was made to provide better relief in a shorter span to *Anjananamika* by *Jalaukavacharana* as suggested by *Ayurveda*. With this objective, a clinical study was carried out under the title “to study the effect of *raktmokshan* with *jalauka avcharan* on *Anjananamika*.” In the present study, references were collected from Veda, *Samhitas*, Commentaries and related dissertations. It was observed that *Anjananamika* was emphasized in all texts and treatment was much stressed because of its severe pain and discomfort. Its pathogenesis, clinical features and treatment procedures are elaborately dealt in *Brihatrayi* & *Laghutrayi*. Though detailed descriptions are available in Ayurvedic texts regarding *Anjananamika*, objective parameters are not vivid. Among the various treatments explained in

*Ayurveda jalaukavacharana* is one that could able to provide maximum relief, as it is considered as *samshodana* therapy and useful in *pittaja* and *raktaja* diseases. This present study was an attempt to bring *raktamokshana* with *Jalaukavacharana* as a routine OPD procedure.

**KEYWORDS:** Anjananamika, Raktmokshan, Jalaukavacharan.

## INTRODUCTION

*Anjananamika*, a *vartmagata roga*, is a painful swelling in eyelid margin. Though it does not have major incidence worldwide, it is more vulnerable in developing countries like India, presented with the symptoms, *toda, daha, ruja and shoth and kandu* on the eyelid. Main problem of this disease is its recurrence and acute discomfort. This could not be solved in spite of the medical and surgical therapies. Verily speaking *Shalakyta tantra* provides principally the science of sight and also explores the disorders of the organ with minute details as well as loss of vision, let it be partial or complete has been described vividly under *vartmagata rogas*. The number of the diseases of this group comprises twenty-one.

Amongst these twenty-one diseases, the disease *anjananamika* is one that ultimately leads to impairment of the movements of the eyelids with ease. Keeping this gravity in view, ancient *acharyas* have warned over looking this disease in its early stage. The very fact is that this subject is being studied from the days of *Sushruta* to date denotes its magnitude.

Regarding the remedies available so far, Ayurveda has suggested *swedana, ghristana, pratisarana, anjana, jalaukavacharana* etc. in its management. Some treatises like *yogaratanakara, chakradatta and bhaishajya ratnavali* advised a special type of treatment called as '*jalaukavacharana*'.

## MATERIALS AND METHODS

Patients diagnosed with *Anjananamika* was taken for the study from OPD and IPD of Hospital. Literary data was collected from Samhitas (Classical texts) respective journals and articles, internet and other reliable sources. A special case proforma was prepared with all points of history taking, physical signs and symptoms and lab investigations. Accordingly, selected patients was subjected to detailed clinical history and examination.

Patients of the *Anjananamika* observed carefully throughout treatment. Results was observed and recorded accordingly and analyze statistically and study was concluded.

### a) Inclusion criteria

1. Patients suffering from classical *anjananamika lakshanas* are selected.
2. Patients between 18 to 60 years of age.

### b) Exclusion criteria

1. *Anjananamika* associated with other ocular infections.

2. *Anjananamika* associated with other systemic disorders.
3. Patients, *ayogya* for *Jalaukavacharana*.

**c) Treatment plan**

- 60 diagnosed patients of *Anjannamika* on the basis of the *lakshana* was selected from OPD and IPD of *Shalakya Tantra* department.

**d) Duration of treatment:-** All of them received *Jalaukavacharana* once and follow up taken from nextday and there after alternate days for 7 days. (On 1<sup>st</sup>, 3<sup>rd</sup>, 5<sup>th</sup>, 7<sup>th</sup> day).

**e) Follow up:-** For 07 days, all the patients are followed and observed for improvement in clinical signs and symptoms. And observations was noted in tabular form in separate case record form. Patients are followed on 1<sup>st</sup>, 3<sup>rd</sup>, 5<sup>th</sup> & 7<sup>th</sup> days after *jalaukaavacharana*.

**f) Advice:** Hygienic precautions.

**g) Assessment criteria:** Effect of *Jalaukaavacharana* is assessed by classical improvement of *Lakshanas*. Assessment was done based on Subjective / Objective parameters, before and after treatment.

**1. Subjective parameters**

- *Daha*
- *Toda*
- *Ruja*
- *Kandu*

**2. Objective parameters**

- *>Shotha* –length and breadth With measuring scale (Measured in millimeters) by Castro Viejo caliper.

**h) Grading**

**1. Subjective criteria**

- 0- no symptoms-no disturbance in routine work
- 1-mild – disturbance in routine work
- 2-moderate –routine work with difficulty
- 3- severe – cant do routine work

### 3. Objective criteria

Length and breadth of pidika in mm. Measured by Castro Viejo calipers.

i) **Statistical analysis:** The data was collected and statistically analyzed by using appropriate tests, by consulting a statistician.

### j) Diagnostic criteria

1. Patients was assessed before and after treatment as per assessment criteria.
2. The nature of study was explained to patients in detail and pre treatment consent was taken.
3. Patients have full rights to withdraw from the study at any time.
4. The data was maintained confidentially and subjected to statistical analysis.

### k) Investigations

CBC

RBS

HIV 1&2

HBsAg

## OBSERVATION AND RESULT

Clinical Measures was analyzed and the results directed to the following conclusion about the efficacy of *Rakt Mokshan* with *Jalauka* on *Anjannamika*

1. *Daha* – The *Rakt-Mokshan* treatment with *Jalauka* is significantly effective on *Daha* in *Anjannamika*.
2. *Toda* – The *Rakt-Mokshan* treatment with *Jalauka* is significantly effective on *Toda* in *Anjannamika*.
3. *Ruja* – The *Rakt-Mokshan* treatment with *Jalauka* is significantly effective on *Ruja* in *Anjannamika*.
4. *Kandu* – The *Rakt-Mokshan* treatment with *Jalauka* is significantly effective on *Kandu* in *Anjannamika*.
5. Length of *Pidika* – The *Rakt-Mokshan* treatment with *Jalauka* is significantly effective on Length of *Pidika* in *Anjannamika*.
6. Breadth of *Pidika* – The *Rakt-Mokshan* treatment with *Jalauka* is significantly effective on Breadth of *Pidika* in *Anjannamika*.

## DISCUSSION

The aim of taking up the study is its pain and discomfort i.e *toda* (Pricking pain), *daha* (Burning sensation), *kandu* (Itching sensation), *ruja* (Pain) and a swelling over the eyelid that makes the patient unable to visualize the objects. Once the disease occurs, gives lot of trouble to the patient to carry out the daily routine work. However, the same problem needs pain killer and antibiotics regime and then also it takes several days to get relief and even then it continues with symptoms repeatedly then there is need to think regarding the etiology, symptomatology and management of Anjananamika. *Jaloukavacharana* is a unique line of treatment in para-surgical procedures. Both therapeutic and prophylactic approaches bestowed by this principle, which can eradicate the disease from its root. Moreover it is an OPD procedure and cost-effective as well.

As the disease Anjananamika is grouped under *Raktaja Vartmagata vyadhi*, first choice of treatment is *Jaloukavacharana*. A view on *dosha-dushya sammurchana* reveals pathological involvement of *pitta* and *rakta* in the manifestation of Anjananamika. This fact is well supported by the signs and symptoms exhibited in Anjananamika. *Raktamokshan* is an ideal approach in *raktadushana*. All the scholars adopt it as basic management in the *anjananamika*.

## CONCLUSION

Based on the literature and observations made in this clinical study, the following conclusions are drawn.

1. Anjananamika is a cystic swelling of *vartma*, in the root of eye lash (The eyelid).
2. The vitiating factor of *anjananamika* is *rakta* and *pitta*
3. *Anjananamika* can be correlated to stye.
4. Role of *raktmokshan* with *jaloukavacharana* in *samprapti vighatana* of *Anjananamika* seemed to be significant.
5. *Jalaukavacharana* is more effective in acute condition of pain and swelling.
6. *Jalaukavacharana* was found effective in controlling the recurrence of *Anjananamika* as no patient reported again during the period of study.
7. *Jalaukavacharana* is a simple, painless, harmless procedure and can be practiced even in OPD.

## AIMS AND OBJECTIVES

1. To study in details *Anjannamika*.
2. To evaluate efficacy of *Jalaukavacharan* on *Anjannamika* in single sitting.
3. Can it be helpful in acute management of pain in the disease?
4. To find the remedy without modern drugs which are used in the disease.
5. As it may require surgical interference sometimes according to modern medical books, it may be avoided or not?

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