

CLINICAL MANEGEMENT OF AMBLYOPIA AND CORRECT EYE VISION

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Amblyopia

Definition Amblyopia, by definition, refers to a partial loss of vision in one or both eyes, in the absence of any organic disease of ocular media, retina and visual pathway.

Pathogenesis: Amblyopia is produced by certain amblyogenic factors operating during the critical period of visual development (birth to 6 years of age). The most sensitive period for development of amblyopia is first six months of life and it usually does not develop after the age of 6 years. Amblyogenic factors include: Visual (form sense) deprivation as occurs in anisometropia, Light deprivation e.g., due to congenital cataract, and Abnormal binocular interaction e.g., in strabismus.

Types: Depending upon the cause, amblyopia is of following types

1. Strabismic amblyopia results from prolonged uniocular suppression in children with unilateral constant squint who fixate with normal eye.
2. Stimulus deprivation amblyopia (old term: amblyopia ex anopsia) develops when one eye is totally excluded from seeing early in life as, in congenital or traumatic cataract, complete ptosis and dense central corneal opacity.
3. Anisometropic amblyopia occurs in an eye having higher degree of refractive error than the fellow eye. It is more common in anisohypermetropic than the anisomyopic children. Even 1-2D hypermetropic anisometropia may cause amblyopia while upto 3D myopic anisometropia usually does not cause amblyopia.
4. Isoametropic amblyopia is bilateral amblyopia occurring in children with bilateral uncorrected high refractive error.

5. Meridional amblyopia occurs in children with uncorrected astigmatic refractive error. It is a selective amblyopia for a specific visual meridian.

Clinical characteristics of an amblyopic eye are

1. Visual acuity is reduced. Recognition acuity is more affected than resolution acuity.
2. Effect of neutral density filter. Visual acuity when tested through neutral density filter improves by one or two lines in amblyopia and decreases in patients with organic lesions.
3. Crowding phenomenon is present in amblyopics i.e., visual acuity is less when tested with multiple letter charts (e.g., Snellen's chart) than when tested with single charts (optotype).
4. Fixation pattern may be central or eccentric. Degree of amblyopia in eccentric fixation is proportionate to the distance of the eccentric point from the fovea.
5. Colour vision is usually normal, may be affected in deep amblyopia with vision below 6/36.

Ayurvedic approach of Amblyopia (Timira)

According to Acharya Sushrut

- 1) In prathama patala gata timira the vitiated doshas spreads to siras and get confined to the prathama patala causing blurring of vision. Ref (Su. uttar 7/6-7).
- 2) When doshas gets localized in second patala, the vision becomes more blurred. Patient saw non existing objects such as mosquitoes, hair, webs, rounded objects, flags, different types of rays, whirlpool, moving objects like stars, clouds & darkness. The real objects seem virtual. Far off objects appear nearer and near objects appear far. There is confusion in perception of images. Patient is unable to see the hole of a needle even with great effort. Ref (Su uttar 7/8-10)

According to Acharya Vagbhatta

(1) The vitiated doshas gets localized in prathama patala through their respective siras. The patient becomes unable to see the objects clearly but sometimes he saw objects clearly without any reason. Ref (Austang haridaya Uttar 12/1).

(2) If the doshas get localized in second patala, nonexisting objects are seen. Objects present near are seen only with efforts and distant small objects are not seen by the patient. Distant objects are seen nearer & vice versa. Visual field defects depends on the location of the doshas. If the doshas localized in circular manner in drashti, objects appear circular. If the doshas localized in the middle of drashti, single objects appear double i.e. diplopia. If the doshas localized in multiple areas of drashti, single objects appear multiple i.e. polyopia. If

the doshas localized inside the drashti, small objects appear big & vice versa. If the doshas localized in the lower part of drashti, near objects cannot be seen. If the doshas localized in the upper part of drashti, distant objects cannot be seen. If the doshas localized in the sides of drashti, objects in the periphery cannot be seen. The disease with above features is known as Timira. Ref (Austang haridaya Uttar 12/2-5).

Treatment: We Describe a patient with age of 22 male with AMBLYOPIA (TIMIRA) Since 3 to 4 months in Right eye and Headach Since a month and watering of eyes from Right eye last 15 days. In General examination Redness on Sclera in middle side of Right eye and Vision aquaty Right eye 6/12 and Left 6/6p Associated Complaint Sneezing in early morning every day since 2 years. We start Treatment All oral and Local Ayurveda medicines.

Vision Rt eye	6/12
Vision Lt eye	6/6 p

Rx

Sitopladi Churna	2 Gm.
Musktashukti Bhasma	250 Mg
Saptamrut Loha	250 Mg
Amalaki Rashayan	3 Gm.
Trikatu Churna	1 Gm.
	1*2 उष्ण जल से

Chitrakadi Vati 2-2-2 TDS

After 7 days Va Rt eye 6/9

Va Lt eye 6/6.

Vision Rt eye	6/9
Vision Lt eye	6/6p

Rx

Sitopladi Churna	2 Gm.
Trikatu Churna	1 Gm.
Tankan Bhasma	250Mg
Saptamrut Loha	250Mg
Amalaki Rasayan	2 Gm.
	1*2 उष्ण जल से

Eye Drop Ophthcare 1' 1' TDS

Nasya karma - Cow ghrit 2' - 2' drop, after 10 days

Va Right eye 6/6p, left eye 6/5

Vision Rt eye	6/6
Vision Lt eye	6/5p

MOA Sitopaladi Churna: The key ingredients in sitopaladi churna work as a potent immunomodulator. Pippali and cinnamon act as bio enhancer, while cardamom exhibit strong antioxidant characteristic by increasing the glutathione. As per Ayurveda mishri has strengthening power and calms Vatta and Kapha Doshas and promotes Pitta dosha.

MOA Tankan Bhasma: To treat productive cough, wheezing, bronchitis, abdominal pain, menstrual pain, dandruff, poor breath, and foul-smelling urine.

MOA Saptamrut Loha: It treats appetite problem, eye related disorders, vomit, abdominal diseases, fever, fatigue, anemia, hyperacidity.

MOA Amalaki Rashayan: treatment of Hair Loss, Antioxidant, Skin Disorders, Diseases, Diabetes, and Eye Disorders. Specially Amalaki has numerous therapeutic properties like immunomodulation, antioxidant, antiulcerogenic, anticarcinogenic, antimicrobial, and antiallergic.

MOA Trikatu Churna: Trikatu churna may help in managing sinusitis and chronic rhinitis.

MOA Chitrakadi Vati: Mainly Use of Aama pachak. Elevation of Vata & Pitta level and decrease of Kapha level in the body leads to Mukha Shosha (Mouth dryness) and arise Trishna (Thirst).

RESULT

After whole medication Patient Vision is normal 6/6 in both eyes, Headach and sneezing symptoms is Removed form body. Patient feel gud.

CONCLUSION

According to Ayurved Timira (amblyopia) can cure with ayurvedic medicine, pathya - apathya aahar vihar and associates symptoms are also cure with ayurved.

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