

## **A case Report: Jivantyadi Ghrit Tarpana In Shushkakshipaka (Dry Eye Syndrome)**

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### **ABSTRACT**

Tear secretion provides continuous moisture and lubrication on the ocular surface to maintain comfort, corneal and conjunctival health and vision. Shushkakshipaka (sarvagatropa) maintained in ayurveda resembles with dry eye syndrome in which Vata-Pitta/Rakta vitiation is there. A clinical case of Shushkakshipaka in which patient Who is suffering from SULPHA drug allergy with symptoms of dry eye, foreign body sensation, burning and whitish discharge in both eyes who was regularly taking medicines and seeking consultation for the problem for a period of 6-7 months,

which included antibiotics orally and topically, artificial tear supplements, and lubricating eye ointment. However, even after that patient no ophthalmic relief and turned to Ayurvedic medicines for treatment. is recorded in which through history and clinical examinations are carried out and appropriate ayurvedic treatment is given for the samprapti bhagna. A systemic approach to treat the disease Shushkakshipaka and managing this humeral imbalance, along with local/ topical therapeutical procedures, the condition could be managed well rather than allopathic treatment which consists of artificial tear drop, lubricating eye drops. Jivantyadi ghrita contends all drugs which

are included in Jivaniya gana. In Shushkakshipaka there is increase in Vata – Pitta – Rakta dosha s which is decreased by Madhura Rasa of the Jivantyadi Ghrita and give more effect than others.

**KEYWORD:** Jivantyadi Ghrita , Shushkakshipaka, Vata-Pitta-Rakta

## INTRODUCTION

Tear secretion provides continuous moisture and lubrication on the ocular surface to maintain comfort, corneal and conjunctival health and vision. The lacrimal gland, goblet cells, and meibomian glands produce different secretions, which compositely form a layer on the eye termed as a tear film. Abnormalities of any of the components of the secretion (quantitatively or qualitatively) lead to the instability of the tear film, resulting in drying of the ocular surface and the syndrome. Ayurveda describes a similar condition called Shushkakshipaka, which matches etymological derivation and clinical picture. Shushkakshipaka is mentioned in the classical literature of Ayurveda under Sarvagata Netraroga. As per Ayurveda,

each patient of dry eye needs a different approach as the etiology and pathology are variable. Vata-Pitta/Rakta vitiation in shushkaksipaka is the basic pathology due to disturbed system biology which needs an ayurvedic approach to deal with the problem.

## AIM AND OBJECTIVES:

**AIM:-** To study the efficacy Jivantyadi Ghrita Tarpana in Shushkakshipaka i.e. Dry Eye Syndrome.

## OBJECTIVE:

- Detail study of Shushkakshipaka.
- Detail study of Dry Eye Syndrome.
- Detail study of Tarpana
- Detail study of Jivantyadi Ghrita

## CASE STUDY

We describe a patient The patient, a 28-year-old man, Hindu by religion, living presently in Belpada, Navi Mumbai (sadharan desha) presented at the OPD of Netraroga (Shalakya department) Y.M.T Ayurvedic Medical College and Hospital, Kharghar, Navi Mumbai on 17 october 2014. Who is suffering from SULPHA drug allergy with

symptoms of dry eye, foreign body sensation, burning and whitish discharge in both eyes who was regularly taking medicines and seeking consultation for the problem for a period of 6-7 months, which included antibiotics orally and topically, artificial tear supplements, and lubricating eye ointment. However, even after that patient no ophthalmic relief and turned to Ayurvedic medicines for treatment. He had poor vision i. e. on examination he had distant visual acuity is PLPR in both eyes. He later complained of foreign body sensation, burning and whitish discharge in both eyes. At that time his eye examination revealed greasy lid margins in both eyes, locked meibomian orifices with foamy discharge on outer surface. A diagnosis of evaporative dry eye due to chronic meibomitis was made and treatment was given with doxycycline, hot compression over lids, and eyemist eye drops. Later a further diagnosis of generalized Xerosis was made for which local application of Aquasol capsules once a day was prescribed. There was no tear meniscus present and a lot of mucous debris was seen. On fluorescein staining corneal and conjunctival epithelial defects were seen.

**SAMPRAPTI GHATAK**

Dosha – Vata and Pitta

Dhatu - Rasa, Meda, and Majja dhatus

Dushya – Rakta, Ashru (tear film)

Strotas – Ashruvaha strotas

Sadhyasadyatwa – Sadhya

Upashaya – Shita upachar

**TREATMENT**

All oral and local modern medicines were stopped. Considering this condition as Shushkakshipaka (dry eye) wherein vitiation of Vata and Pitta doshas is described, he was treated with following medicines.

**PRINCIPLE-**

In vata predoinance chikitsa is similar to vataj abhishyanda. In pitta predominance chikitsa is similar to pittaj abhishyanda.

Anu taila : Pratimarsha nasya (two drops) twice daily, morning and evening.

Jivantyadi Ghrita Tarpana

Goghrit orally 1tsp bds

Rasayana choorna : 3 g

Saptamrita Lauha: 1 g

Praval Pishti: 125 mg

Two times mixed with honey and ghrita in unequal amount followed by milk twice a day.

Along with the above medicines, he was advised simple lifestyle modifications.

Drinking 8–10 glasses of water each day to keep the body hydrated and flush out impurities, making a conscious effort to blink frequently, especially when reading or watching television and avoiding rubbing the eyes as this only worsens the irritation.

#### **Content of Jivantyadi Ghrita:**

Jivanti, Yashtimadhu, Munakka, Indrajava, Karkura, Pushkara Mul, Kantakari, Gokshura, Bala, Nil Kamal, Bhumyamlaki, Pippali, Dhanvayas, goghrita, water, etc.



#### **JIVANTYADI GHRITA**

#### **FOLLOW UP**

The patient took this treatment for alternate 10 days in 3 setting, with marked relief in symptoms of pain and foreign body sensation. He was advised to continue the same treatment for 2 months.

After 1<sup>st</sup> setting complete the treatment, he had marked relief in symptoms but with occasional irritation. With vision HM 2 feet.

After 2<sup>nd</sup> setting completion, he had no complaint of pain. With visual acuity CF 3 feet. Occasional irritation and photophobia were present. Slit lamp examination revealed very few mucus debris.

After 3<sup>rd</sup> setting completion, patient had no pain and no irritation with marked

relief in symptoms. Visual acuity was 6/60p  
Partial in both eyes.

### DISCUSSION:

In shushkakshipaka i.e. Dry Eye Syndrome there is dryness in eyes due to increase in Vata-Paitta-doshas prakopa, vitiated Vata and Pitta reach upto netra (prasara-sthanasanshraya) by the sira. At netra they vitiated Rakta dhatu to form Shushkakshipaka, which results in the scanty ashru. So as to form dry eye. The ingredients in Jivantyadi Ghrita are Madhura and Sheeta so acts as Vata-Pitta shamaka. The drugs included in jivaniya mahakashaya explained by Charakacharya is Vata and Pitta shamaka also Raktashamaka . Ghrita kalpana is Vata-Pitta shamaka . Hence Jivantyadi Ghrita tarpana is one of the best modalities to cure Shushkakshipaka.

### CONCLUSION

In the present case, understanding of the disease shushkakshipaka (dry eye syndrome) and planning the treatment protocol accordingly; has proved much effective than the prevailing management modalities.

Subjective and objective parameters clearly indicates that this condition of dry eye, in which the three components of tear film were involved, was due to chronic mebomitis. Hence a systemic approach to treat the disease Shushkakshipaka, (Sarvagata Vata-Pitta/Raktaja Netra Roga) and managing this humeral imbalance, along with local/ topical therapeutical procedures, the condition could be managed well. According to Ayurveda, dry eye is not merely an ocular surface disorder, rather this is one of manifestation of the deranged metabolism of body tissues. Ashru (tear film) is the by product of Rasa, Meda, and Majja dhatus and without normalizing/altering them we cannot treat dry eye syndrome optimally. Vata-pittahara oral, local nasya and tarpana (Snehana) therapy was initiated with the prescribed medicine. But Vata was managed first with Anutaila nasya and a close watch on Jatharagni (digestion) was kept and corrected as well. With this treatment, ocular discomfort was relieved. Thus, as we can conclude that the dry eye is a condition for which modern medicine has no treatment except for the symptomatic management; the treatment and approach of Ayurvedic

system of medicine according to the doshas provided both subjective and objective relief to the patient.

**REFERENCES:**

1. Dravyaguna Vijnana-K.Nishteswar and K.Hemadri, Chaukhamba Sanskrit pratishthan, Delhi.
2. Sushrut samhita Vol 1, 2 by Dr, Ambikadattashastri, Chaukhamba Publications, Varanasi, Edition- Reprint,2010.
3. Ashtang Hridayam – Krishnadas Ayurveda Series: 27, Vagbhatacharya's-Astanga
4. Hridayam, translated by-Prof. K.R.Srikantha Murthy, Chaukhamba Krishnadas Academy, Varanasi, (Vol.1, 3).
5. Essential of Ophthalmology – Samar K. Basak, Second Edition, 1'1999 Published by Current Books International 60; Lenin Saranee, Calcutta-700013.
6. Clinical Ophthalmology Jack J. Kanski, Elsevier, 6th Edition, Reprinted, 2008.
7. Handbook of Ophthalmology: B. M. Chatterjee Edn. By J. S. Roy, CBS, publisher and distributor shahdara, 4<sup>th</sup> Edition, Delhi- 110032.

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