AYURLOG



National Journal of Research in Ayurved Science A peer-reviewed open access Indexed e-journal of Ayurved



ISSN: 2320-7329

http://www.ayurlog.com

January- 2020 | Volume 08th | Issue: 1st

A clinical study to evaluate efficacy of *Daruharidra kwath Aschotan* in comparison to Ciprofloxacin eye drop on *Netrabhishyanda* with special reference to acute bacterial conjunctivitis.

Pankaj K. Shete*¹, Shailesh M. Kinge², Vivek V. Dasare ³

- 1. Associate Professor in Dept. Shalakya Tantra,
- 2. Associate Professor in Dept. Rognidan Vikrutivigyan,
- 3. Professor in Dept. Kriyasharir,

S.R.C. Ayurved College, Tq. Chikhli, Dist. Buldhana, Maharashtra

*Corresponding author: Email: drpankajshete15@gmail.com Mob: 9822732533

ABSTRACT:

Abhishyanda can correlate to Conjunctivitis. It is the common cause of ocular morbidity that may ultimately lead to Redness, ocular pain, discomfort, watering etc.

Objective of the present study was "To evaluate the efficacy of daruharidra kwath aschotan in the management of abhishyanda."

Key words:

Ayurveda, Shalakya, Daruharidra, Makshik,kwath, Abishyanda, Conjuctivitis, Ciprofloxacin eye drop.

INTRODUCTION:

The eyes are said to be most important than all other Indriyas. They are

considered as the reflectors of the mind. Eyes are most precisely developed portions of the brain seen outside the skull. It is unique organ in the body where the course as well as patho physiology of disease process is visible, effect of therapeutic agents can very well be assessed and if needed documented. According to modern science Netrabhishyanda can be correlated with conjunctivitis. Conjunctiva is translucent mucous membrane covering the ant. surface eye ball and post. surface of eye lid. Conjunctivitis is the inflammation of conjunctival membrane caused by any infective organism, allergy, injury or secondary some skin disease.

Doshas oozed from all urdwajatrugata strotasas is called Abhishyanda. Abhishyanda is the main disease which is responsible for many other netrarogas. So immediate treatment of abhishyanda is important, that's why Abhishyanda is described in detail & treated as early as possible.

Conjunctivitis is a disease of eye in which inflammation of bulbar & palpebral conjunctiva occur. Automobile pollution, unhygienic conditions are main causes for it. It is contagenous and comes with epidemics. Negligence in treating the conjunctivitis become chronic & may cause serious eye complication like blindness. Four types of conjunctivitis are

- 1. Vataj
- 2. Pittaj
- 3. Kaphaj
- 4. Raktj

AIMS AND OBJECTS:

Aim: -

To study the efficacy of daruharidra kwath aschotan in Netrabhishyanda

Objective: -

- A study of Abhishyanda as per Ayurvedic text.
- To study the daruharidra kwath aschotan in details
- Detail study of Spring Catarrh according to allopathic science

• To assess the efficacy of daruharidra kwath aschotan in Netrabhishyanda.

MATERIAL AND METHOD:

- 1) Inclusive Criteria: -Patient suffer from Netrabhishyanda (acute-bacterial conjunctivitis)
 - Age between 10 to 60 years
 - Both male and female.

2) Exclusive Criteria:

- Known allergy to any of the content of Ciprofloxacin eye drop.
- Skin Infection
- Allergic conjunctivitis, viral conjunctivitis,
- Traumatic conjunctivitis
- K/C/O DM, HTN, AIDS

Duration: 7 day's

Follow up: up to 7 day's

SAMPLING METHOD AND RESEARCH DESIGN:

60 diagnosed patients of Abhishyanda were admitted in Shalakya ward and randomly divided into 2 groups. I.e. A Group and B Groups each comprising of 30 patients.

Daruharidra kwath (A) group:

The patients of this group were given by Daruharidra kwath on the affected eye every morning for 7 days. No other medicine was given internally and externally

Ciprofloxacin Eye Drop (B) Group:

Patients of this group had given Ciprofloxacin eye drop in the affected eye every day three

times for seven days. The routine diet was advised to the patients of both the groups during the treatment.

OBSERVATONS AND RESULTS

Overall effect of therapies after 7 days of treatment showed that in Group A (Daruharidra Kwath) complete improvement was found in 36.66%,

marked improvement was found in 46.66%, moderate 16.16%. In patients of Group B (Ciprofloxacin eye drop) complete improvement in 3.33%, marked relief and 40% moderate relief and 53% patients. Hence A group had high significant result than B group comparatively.

TRIAL GROUP

Sign. & symptoms	M 1	M 2	S. D. M1	S. D. M2	T. Cal	P-value	Result
Sarambha	2	0.37931	0.587	0.48522	20	8E-19	SIGNI FICANT
Ashrusrava	1.767	0.333	0.616	0.471	16.1	3E-16	SIGNI FICANT
Kandu	1.667	0.367	0.83	0.547	11	3E-12	SIGNI FICANT
Daha	1.2	0.167	0.833	0.373	8.03	4E-09	SIGNI FICANT
Toda	1.5	0.033	0.619	0.18	10.44	1E-11	SIGNI FICANT
Sparshasahatva	1.167	0.167	0.86	0.373	7.03	5E-08	SIGNI FICANT
Shookapoornavastha	0.8	0.133	0.792	0.34	5.62	2E-06	SIGNI FICANT
Prakashantaka	1.2	0.2	0.748	0.4	8.66	8E-10	SIGNI FICANT

CONTROL GROUP:

Sign. & symptoms	M 1	M 2	S. D.	S. E.	T. Cal	P-value	Result
Sarambha	2.233	1.2	0.496	0.4761	31.53	2.707E- 24	SIGNI FICANT
Ashrusrava	2.133	0.067	0.618	0.249	16.65	1E-16	SIGNI FICANT

Kandu	1.833	0.033	0.969	0.18	3.605	6E-04	SIGNI FICANT
Daha	1.233	0.533	0.761	0.562	8.367	2E-09	SIGNI FICANT
Toda	1.7	0.567	0.823	0.496	10.04	3E-11	SIGNI FICANT
Sparshasahatva	1.633	0.5	0.836	0.563	10.04	3E-11	SIGNI FICANT
Shookapoornavastha	1.133	0.367	0.763	0.482	8.474	1E-09	SIGNI FICANT
Prakashantaka	1.667	0.667	0.83	0.699	8.66	8E-10	SIGNI FICANT

- M 1 indicates mean of symptom grades of before treatment
- M 2 indicates mean of symptom grades of after treatment
- S. D. denotes standard deviation of the data.
- S. D. denotes standard deviation of the data.
- T. Cal means t value calculated of the TRIAL GROUP data by applying Students T test. Here P-Value is less than 0.05.

hence the result obtained of the TRIAL GROUP WAS <u>STATISTICALLY</u> SIGNIFICANT.

DISCUSSION:

Abhishyanda is one among the 17 types of Sarvagata Netra Roga. Ashtang sangraha has mentioned the use of Daruharidra Kwath in the treatment of Abhishyanda. Daruharidra Kwath was prepared in water

as per Sharangdhara samhita,thus obtained the Kwath named as Daruharidra Kwath for the use as Aschotan.

Authentication Study of daruharidra Kwath shows that Obtained Values of study are the same as that of standard values.

In this study 60 patients of Abhishyanda were studied by dividing them randomly into two groups. Group A was given Daruharidra Kwath aschotan 10 drops for 7 days. Group B was given Ciprofloxacin eye drop 2 drops tds day for 7 days. The results obtained were statistically analyzed and compared with each other to draw logical conclusions.

In Sarambha and Daha more amount of relief in Group A than B.

In Ashrusrava and Kandu more amount of relief in Group B than A.

In Toda, Sparshasahatva, Shookapoornavastha and Prakashantaka same amount of relief in Boath group.

From ststistical analysis it can be conclude that both the treatments are equally effective but in clinical study it was observed that in group A relief in all the symptoms were much faster than in group B in the observed period of 7 days.

CONCLUSION:

- The clinical features of Abhishyanda are closely related to conjunctivitis.
- Values of Laboratory and Daruharidra kwath and makshik match with standard values, suggest that ingredient of Daruharidra Kwath were pure.
- Daruharidra Kwath is proved to be cost effective, safe and better drug.
- Effect of Daruharidra Kwath in reduction of clinical symptoms is well appreciated within 7days.
- So, the drug Daruharidra Kwath is better option in comparison to the Ciprofloxacin eye drop.

REFERENCES:

- Bharat Bhaishajya ratnakar Part 4,
 Shri Nigindas Shah B. Jain
 Publisher Pvt. Ltd. New Delhi 2nd
 edition
- Sushrut samhita, Kviraj Dr. Ambikdatta shastri Chukhamba Sanskrit sansthan, varanashi 3rd edition
- Bhavprakasha (Purvardha), Shri lalchandraji vaidya Motilal ababarasidas 3rd edition
- Sharangadhar Samhita, Pandit parshuram shastri vidyasagarKrishnadas Academy, varanasi, 1st edition
- Parsons Diseases of eye, Stephen J. H. Miller, Logman singapur publishers Pvt. Ltd. Churechil Livingston, 8th edition
- Clinical Ophthalmology, Jack J. Kanski Butter worth Heinemann, 4th edition
- 7. Ophthalmology, A.K. Khurana, New Age International (P) Ltd. 3rd edition
- Indian Herbal Pharmacopoeia, Indian Drug Manuf. Assoc. Mumbai, Revised Ed.Nov.02
- Database on Medicinal Plants Used in Ayurveda, Central Council for Research in Ayu. & Siddh. New Delhi. 2001
- Indian Medical Plants, Kirtikar & Basu, International Book Distributors, Dehradun.2nd edition.

Conflict of Interest: Non

Source of funding: Nil

E- ISSN: 2320-7329

Cite this article:

A clinical study to evaluate efficacy of Daruharidra kwath Aschotan in comparison to Ciprofloxacin eye drop on Netrabhishyanda with special reference to acute bacterial conjunctivitis.

Pankaj K. Shete, Shailesh M. Kinge, Vivek V. Dasare

Ayurlog: National Journal of Research in Ayurved Science-2020; (8) (1): 1-5