Ayurvedic aspect of Stye: Anjananamika

Snehal Kawatwar¹, Firake KT¹

¹Dept. of Shalakyatantra, SMBT Ayurveda College, Nashik

Corresponding Author

Snehal Kawatwar

Email ID: smkawatwar26@gmail.com

OPEN ACCESS

Abstract:

Introduction: Stye (External hordeolum) is an acute suppurative inflammation of glands of Zeis or Moll at lash follicle; commonly caused by bacterial infection (Staphylococcus aureus). *Anjananamika* is *Vartmagata Bhedya Vyadhi* caused due to vitiation of *Rakta Dhatu*.

Aim and objectives:

Aim-

To study the disease stye in Ayurvedic literature with special reference to Anjananamika

Objectives-

To study the signs-symptoms and treatment of stye in modern texts and as that of Anjananamika in Ayurvedic literature.

Purpose: To study the stye in Ayurvedic literature with special reference to *Anjananamika*.

Methods: Based on clinical signs and symptoms, stye can be correlated with *Anjananamika* having symptoms of swelling associated with mild pain, burning and pricking sensation at *Vartmapradesha* that is near lid margin. Symptomatic stages of stye of cellulitis and of abscess formation are correlated with *Amavastha*, *Pachyamanavastha* and *Pakwavastha* of *Anjananamika*. The line of treatment of *Anjananamika* includes *Swedana*, *Nishpidana*, *Bhedana*, *Pratisarana*, *Anjana* and *Jalaukavacharana* also. It has similarity with treatment of stye containing hot fomentation, pus evacuation, surgical incision, antibiotic eyedrops eye ointment. *Jalaukavacharana* followed by *Padmakashtha Lepa* is effective by its wound healing properties. Also *Triphala Guggulu*, *Gandhaka Rasayana* are effective internal medications as they have anti-inflammatory, antibacterial properties.

Results: The signs, symptoms and treatment of *Anjananamika* are same as that of stye.

Conclusion: So it can be concluded that stye can be *Anjananamika* in Ayurveda.

Keywords: Stye, *Anjananamika*.

Introduction:

Eyes are one of the Gyanendriyas i.e., sense organs of which study is done in Shalakyatantra, a branch of Ashtanga Ayurveda. So to take care of eyes is essential. Stye⁽¹⁾ is one of the most common diseases of eyelid which is more common in children, young adults. It is also called as external hordeolum which is caused by Staphylococcus aureus. It is the acute suppurative inflammation of lash follicle and its associated gland of Zeis or Moll. It is a painful oedematous swelling at lid margin. Anjananamika is one among the Vartmagata Vyadhis illustrated by many Acharyas in Ayurveda. It is a Sadhya Vyadhi and it's main chikitsa is Bhedana. It is caused due to vitiation of Rakta Dhatu. In Anjananamika, a Tamravarni, Mridu Sparshayukta Pidaka appears at Vartmapradesha having symptoms of Daha, Toda. (2) It can heal itself without any treatment. But many times, it transforms into an abscess which gets bursts causing ulcers. Thus infection spreads over eyelid which will be complicated for treatment.

Materials And Methods:

This article is a review article based on a review of Ayurvedic as well as modern text material related to *Anjananamika* and stye. The *Sushruta Samhita*, *Sartha Vagbhata*, *Yogaratnakara*, *Sharangadhara Samhita*, modern texts, research papers are referred to collect information about the above topic.

Signs and symptoms -

Stye^[1] has symptoms like acute pain associated with eyelid swelling, mild watering and photophobia. The symptomatic stages of stye are two: stage of cellulitis and stage of abscess formation. In stage of cellulitis, there is localized, firm, red, tender swelling at lid margin associated with marked oedema present. Visible pus point on lid margin in relation to affected cilia present in stage of abscess formation.

Anjananamika is a Vartmagata Bhedya Vyadhi. According to Acharya Vagbhata, Anjananamika is a localized, red-coloured pitika resembling shape and size of mudga (green gram) which is present at middle or at the end part of eyelid having Kandu (itching sensation), Daha (burning sensation),

Review Article

Ruk (pain) like symptoms. (3) It has Amavastha, Pachyamanavastha and Pakwavastha as seen in Vranashotha. Thus Acharya Sushruta said that to do the treatment of Anjananamika according to Vranaropana Vidhi. (4) The symptoms of Ama Vranashotha are Mandoshma (mild warm), mild oedema, Kathinya (hardened surface), Manda Vedana (mild pain). In Pachyamana Vranashotha, Daha (burning sensation), pricking type of pain, discoloration, etc. symptoms seen. Vedanopasham (minimized pain), Alpa lohita varna (faint red colour), Utsedha (reduced swelling), Kandu (itching sensation), filled with pus are the symptoms of Pakwashotha. (5)

Treatment-

According to modern texts, the hot compresses at the site of stye for 2-3 times a day are useful in stage of cellulitis. Normally it is relieved in this stage. If it is not cured in beginning stage i.e., stage of cellulitis, then there forms an abscess. It's treatment is to evacuate the pus. That is done by epilating the involved cilia or by surgical horizontal incision. The antibiotic eye drop, anti-inflammatory eye drop, antibiotic eye ointment is used to control infection. Also the systemic anti-inflammatory, analgesics are used to reduce the oedema, pain. (1)

Acharya Sushruta said that the treatment of Anjananamika includes Swedana (hot fomentation), Bhedana, Nishpeedana (evacuation of pus by pressure with fingers), then Pratisarana with the help of Manashila-Ela-Tagar-Saindhava churna mixed with Madhu (honey). Generally Bhedana happens itself after Swedana. If it does not happen, then Bhedana can be done with the help of Shastra (surgical incision). After that Pratisarana of Rasanjana-Madhu can be done on wound. (4) Acharya Yogaratnakara (6) that on Anjananamika, Swedana should be given by index finger after rubbing it on hand. Then Jalaukavacharana (blood letting by leeches) and applying the Lepa of Padmakashtha repeatedly on that site. (7) Jalaukavacharana can be done in the stage of Amavastha. This reduces itching and burning sensation. The Lepa of Padmakashtha acts as Kandunashaka, Dahashamaka, Vedanasthapaka as well as Raktastambhaka. (8)

Results And Discussion:

The clinical signs-symptoms and treatment of *Anjananamika* have similarity with that of stye. Now-a-days many people have eye strain due to refractive errors which is a cause of stye. In some cases of stye treatment is unnecessary because frequently it resolves itself. This resolution can be promoted early by treatment. The symptomatic stage of cellulitis resembles the *Amavastha* and *Pachyamanavastha* of *Anjananamika*. The stage of abscess formation of stye resembles the *Pakwavastha* of *Anjananamika*. The line of treatment of *Anjananamika* includes *Swedana*, *Nishpeedana*,

Bhedana and *Pratisarana* which are similar as the treatment of stye containing hot fomentation, evacuation of pus, surgical incision, antibiotic eye ointment.

The Jalaukavacharana with Padmakashtha Lepa in Amavastha is very effective. (7) Jaloukavacharana is the best treatment for Pitta-Raktaja Vyadhi as Anjananamika is Raktaja Vyadhi. (9) The Jalaukavacharana helps in letting out of stagnant blood which relieves the state of congestion within the tissue immediately resulting into cessation of exudates and also various other symptoms of Anjananamika. The blood letting with leeches reduces inflammation by withdrawing blood. The tremendous negative pressure exerted by Jalauka while sucking improves microcirculation at tissue level to great extent. Due to blood letting further suppuration stage will be arrested and abscess will not form containing pus. Due to letting out of impure blood, the redness and pain subsides instantaneously. (10) This removes the non-required pathological substance and provides a fresh blood supply to the tissue resulting in cure of disease. The drug Padmakashtha (8) has Tikta-Kashaya rasas, Katu Vipaka, Sheeta Veerya, Laghu-Snigdha gunas. It has Vedanasthapaka prabhava. It is Kaphapittashamaka. It acts locally as Vranaropaka, Shothahara, Varnya. The principle active agent of Jalauka is Hirudine which acts as anticoagulant. There forms the Vrana (wound) after Jalaukavacharana. So Padmakashtha Lepa at the site where bloodletting is done acts as Raktastambhaka, Varnya, Kandunashaka, Dahashamaka. The Jalaukavacharana is done on one alternate day for 7 days for 8-10 minutes (as required). The Lepa is done immediately after Jalaukavacharana and repeatedly.⁽⁷⁾

The internal medications like *Triphala Guggulu*, *Gandhaka Rasayana* are effective. *Triphala Guggulu*⁽¹¹⁾ contains *Haritaki* (Terminalia chebula), *Bibhitaki* (Terminalia belerica), *Amalaki* (Emblica officinalis), *Pippali* (Piper longum), *Guggulu* (Commiphora mukul). It acts as potent anti-inflammatory along with wound cleansing and wound healing. (12) It can be taken as 1 Tab twice a day after food. (13)

Gandhaka Rasayana⁽¹⁴⁾ contains Shuddha Gandhaka, Godugdha, Twak (Cinnamomum zeylanicum), Ela (Elettaria cardamomum), Tejapatra (Cinnamomum tamala), Nagakesara (Mesua ferraea), Guduchi (Tinospora cardifolia), Haritaki, Bibhitaki, Amalaki, Shunthi (Zingiber officinale), Bhringraja (Eclipta protrata), Sita. It has antibacterial, antifungal activities.⁽¹⁵⁾ The drugs in it are having Chakshushya, Shothaghna, Ropana Karmas also. It can be taken as 1 Tab twice a day before food.⁽¹³⁾

Conclusion:

The main aim is to review the disease stye in modern texts and *Anjananamika Vyadhi* in Ayurvedic *Samhitas* and also to see whether there is any similarities or not. Based on the given

Review Article

description, it can be concluded that stye can be correlated with *Anjananamika* in Ayurveda.

Conflict of Interest: Nil Source of Support: Nil

Copyright © 2022 The Author. This is an open access article, it is free for all to read, download, copy, distribute, adapt and permitted to reuse under Creative Commons Attribution Non Commercial-ShareAlike: CC BY-NC-SA by 4.0 license.

References:

- Khurana AK, Khurana AK, Khurana B. Comprehensive Ophthalmology. 6th ed. New Delhi:Jaypee Brothers Medical Publishers;2015,367-368.
- Sushruta. Vartmarogavidnyaniya adhyay. In: Shastri A, editor. Sushruta Samhita (Ayurvedatattvasandipika Hindi Commentary) Vol 2 Uttaratantra. Varanasi: Chaukhambha Sanskrit Sansthan; 2018,22.
- Garde GK,ed editor. Sartha Vagbhata Uttarasthana. Reprint ed. Varanasi: Chaukhamba Surbharti Prakashan; 2019,377.
- 4. Sushruta. Bhedyarogapratishedha adhyay. In: Shastri A, editor. Sushruta Samhita (Ayurvedatattvasandipika Hindi Commentary) Vol 2 Uttaratantra. Varanasi:Chaukhambha Sanskrit Sansthan; 2018,67.
- 5. Shastri B,editor. Yogaratnakara Uttarardha. Reprint ed. Varanasi:Chaukhambha Prakashan;2013,169.

- Shastri B,editor. Yogaratnakara Uttarardha. Reprint ed. Varanasi:Chaukhambha Prakashan;2013,382.
- 7. Firake KT. To study the efficacy of Jalaukavacharana with and without Padmakashtha Lepa in Anjananamika w.s.r.to Stye.
- 8. Deshpande AP, Javalagekar RR, Ranade S. Dravyagunavidnyana. Reprint ed. Pune:Proficient Publishing House;2015-2016,955.
- 9. Jayesh R. Katrodiya et al : A Case Report of Recurrent Stye (Anjananamika) treated by Jaloukavacharana along with Internal Medicine.
- 10. Amol Kadu, Jalukavacharan (Leech) in Anjananamika (External Hordeolum), Joinsysmed vol 3(1), 44-47.
- 11. Tripathi B. Sharngadhara samhita of Pandita Sharngadharacharya Madhyama Khanda. Varanasi:Chaukhambha Surbharti Prakashan;2019,206.
- 12. Prakruthi G., Santosh Kumar Shaw, Hamsaveni V., Sujathamma K.,An Expeditious Recovery from Stye A Case Study.DJO 2018;29:61-64
- 13. Nisarga MS, Prakruthi G. A Case Study on Anjananamika w.s.r.to Stye. AYUSHDHARA,2020;7(4):2815-2818
- 14. Shastri B,editor. Yogaratnakara Uttarardha. Reprint ed. Varanasi:Chaukhambha Prakashan;2013,501.
- Saokar RM, Sarashetti RS, Kanthi V, Savkar M, Nagthan CV. Screening of antibacterial and antifungal activity of gandhaka rasayana – an ayurvedic formulation. www.medpulse.in, 2016.