



ANUVASANA VASTHI IN KRISHNAGATA ROGA- CASE SERIES

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ABSTRACT:

Vasti is considered as *ardha chikitsa*, and is *agrya upakrama* in *vatika* disorders. *Doshas* in the body are maintained in a balanced state by *vatadosha*. *Vatadosha* plays an important role in manifestation of diseases. This paper discusses about *anuvasana vasti*, which is specially indicated in *rooksha* condition and *kevala anila vyadhi*. A study was conducted in Govt Ayurveda College hospital, thiruvananthapuram to assess the efficacy of *anuvasana vasti* with *gritha manda* processed with *satahva* and *yashti* mentioned in painful condition of *savrana sukla* in Astanga samgraha. Four cases with corneal diseases presented with pain, photophobia, watering, and dryness were studied. Decrease in pain and photophobia was observed in these cases after treatment. Vagbhata explained the importance of *anuvasana vasti* with *gritha manda* processed with *satahva* and *yashti* in painful condition of *krishnagata roga* (corneal diseases) and painful inflammatory conditions of eye-ie *akshipaka* and is found to be beneficial.

Key words: *Anuvasana vasti, gritha manda, krishnagata roga, satahva, yashti.*

INTRODUCTION

As per Ayurveda *vikruta vata* is the prime *nidana* of *sakhagata*, *koshtagata* and *urdhwangaja roga* and *agrya upakrama* in *vatika* disorders is *vasti*, hence *vasti* is considered as *ardha chikitsa*^[1]. *Vasthi* is also beneficial in diseases associated with *raktha dosha* ^[2]. *Indriya dharana* is function of *vata* and *kupita vata* cause *indriya upahanana*^[3]. *Vasti* plays an important role in the management of *netraroga*. *Netra roga* occurs due to the upward movement of *dosha* from *koshta* through *sira* and its *sthanasamsraya* in *netra*^[4]. Prime factor responsible for the movement of *dosha* is *vata*^[5]. *Vasthi* plays an important role in pacifying *vata* and hence *vasti* is important in *netra chikitsa*. Properly administered *vasti* helps in *chakshu preenana*^[6].

Anuvasana vasthi is specially indicated in *rooksha* and extreme *vatika* conditions ^[7]. Properly administered *anuvasana vasthi* will provide excellence in function of body and sense organs (*rakthadi budhi indriya prasada*) ^[8].

Cornea is a transparent structure covering the front portion of the eye, is the most densely innervated tissue in the body ^[9]. Corneal sensory nerves originate from the ophthalmic division of the trigeminal nerve,

traveling in the nasociliary nerve and its long ciliary nerve branches, and ultimately branching into nerve fibers that penetrate the cornea. These branches divide and run parallel to the superficial surface of the cornea between the basal epithelium and Bowman's layer, forming the subbasal nerve plexus (SBNP) that supplies the overlying corneal epithelium ^[10], which is responsible for increased sensitivity of cornea and this plays an important role in maintaining structural integrity of cornea. Ayurveda classical text books provides firm basis for a physiological and functional link between *vata dosha* and nervous system ^[11].

As per *shalakyatantra*, cornea is structure predominated by *vayu mahabhuta*^[12]. *Vata kopa* in a *vatika* structure will be very severe. Highly sensitive cornea is one of *netra patala* which is mentioned as *twak vishesha* ^[13]. *Sparsana* or corneal sensation is function of *twagasritha vata*. Hence features of hypersensitivity of cornea such as pain, watering, foreign body sensation etc. are the results of *vikruta vata*. So, to control *sthanika dosha vikriti*, and to control *vata* at its site, *vasti* is the best option. *Anuvasana vasthi* is specially indicated in *rookshavastha* and *kevala anila vyadhi*.

The paper discusses about *anuvasana vasti* with *grita manda* processed with *satahva* and *yashti* which is advised in management of *suskakshipaka* and painful stage of *savranasukla*^[14].

OBJECTIVES

- To assess the effectiveness of *Anuvasana vasti* with Grita-manda processed in *Yasti kashaya* and *Satahwa choorna* in cases of corneal involvement.

CASE DETAILS: Four Patients diagnosed as having eye disease with corneal involvement were selected from Inpatient Department of Salakyantra, Govt. Ayurveda college hospital, Trivandrum based on the presenting complaints.

- Two cases of Steven Johnson Syndrome with corneal involvement presented with pain and photophobia. Both had dry eye and corneal ulceration.
- A case of recurrent corneal erosion with pain, photophobia and watering

with mild corneal thinning [504µm(right) 508 µm(left)]

- A case of bullous keratopathy, presented with severe pain, foreign body sensation, watering, photophobia.

Procedure

- Deepana pachana: Vaiswanara choornam* 6 gram twice daily with hot water-3 days
- Snehapana: Thikthaka gritha* 10gram morning 6am and during bed time-5 days
- Ushnambu snanam*
- Virechana with avipathi choorna* 25 gram with milk
- Anuvasana vasthi* in small dose as of *matra vasthi*: 80 ml for a period of 7 days.

Drug review

Medicine was prepared based on *snehapaka vidhi* with *satahwa* as *kalka*, *gritamanda* and *yasti kashaya* as *dravadravya* in the ratio 1:4:16.

Table no:1 Properties of component drugs

Drug	Properties
<i>Satahwa</i> ^[15]	<ul style="list-style-type: none"> <i>Vrana hara</i>(ulcer healing property), <i>Netrya</i>(beneficial to eyes), <i>Soolagna</i>(analgesic).
<i>Yashti</i> ^[16]	<ul style="list-style-type: none"> <i>Vata pittahara, raktha prasdana</i>

	<ul style="list-style-type: none"> • <i>chakshushya</i>
Sarpimanda^[17]	<ul style="list-style-type: none"> • <i>Madhura</i>(sweet) • <i>Srothra akshi sirasam soolagnam</i> (Analgesic action especially in ear disease, eye disease and headache) • <i>Vasthi nasya akshipooraneshu upadishyathe.</i>

RESULTS

Assessment was made before treatment, after *virechana*, and 1 week after treatment. visual Analog Scale was used to assess change in pain, photophobia and watering

- In the first case of Steven Johnsons Syndrome Pain and photophobia reduced by 10% after *sodhana* and 20% after *anuvasana vasti*, but there was no change in dryness.
- In second case of SJS also pain and photophobia reduced by 10% after *virechana* and 20% after *anuvasana vasti*.
- In bullous keratopathy, Pain and photophobia reduced by 10% after *virechana* and 33% after *anuvasana vasti*.
- In recurrent corneal erosion, there was no marked improvement just after *virechana* but pain, watering and photophobia reduced to 33% after *anuvasana vasti*.

DISCUSSION

Observations showed that along with *virechana*, *anuvasana vasti* played a significant role in reducing pain, photophobia, and watering. *Vata kopa* when associated with *pitta rakta dushti* causes pain and photophobia. *Sodhana chikitsa* done before *anuvasana vasti* helped in addressing the *pittaraktha dusthi*. *Vasti* is the main treatment to control *vata vikruti*. *Anuvasana* was done with *gritamanda* processed with *yasti kashaya* and *satahwa kalka*. Constituents present in the interventional drug have *chakshushya*, *soolahara*, *vranahara* and *vata samana* property which helped to pacify symptoms. *vikrutha vata* is the primary factor causing increased sensitivity of nerve endings in the cornea and results in manifestation of pain, watering, photophobia. So, the main aim of treatment is to control *vata* which is the prime factor causing symptoms. *Anuvasana vasti* is specially indicated in *rooksha* and *vatika* disorders. Thus, *anuvasana* done with drugs having *chakshushya* property helped in

breaking the pathogenesis and control symptoms.

CONCLUSION

In *rooksha* and extreme *vatika* condition doing *anuvasana* daily for long period in small dose will not produce any complication. Observations showed that *anuvasana vasti* plays an important role in *netra chikitsa*, especially in *krishnagatha roga* which is a *vata* predominant structure. Further research works have to be carried out in large sample size to substantiate the result.

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