

To Evaluate the Efficacy of *Mukkadi Bidalaka* and *Patoladi Kashaya Parisheka* in the management of *Anjananamika* (External Hordeolum) – A Single case study

Case Report

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Abstract

Anjananamika is a *Raktapradhana Vartmagata Sadhya Netra Vikara* caused by the vitiation of *Rakta* and *Mamsa* of *Vartma* due to improper *Ahara* and *Viharas*. The *Lakshanas* of *Anjananamika* appears to be similar to that of *Hordeolum externum*, acute suppurative inflammation of the eyelash follicles and its associated glands of *Zeis* or *Moll*. It is a *Raktapradhana Vyadhi* along with the involvement of other *Doshas*, *Pittahara* and *Doshahara* treatment can be done. All the drugs in *Mukkadi Bidalaka* and *Patoladi Kashaya Parisheka* are *Chakshushya* and have *Pitta Shamaka* properties. The case selected in this study, patient has been suffering from pain, foreign body sensation, discomfort, congestion, mild watering and photophobia in the upper palpebral conjunctiva of the left eye. *Mukkadi Bidalaka* and *Parisheka* was administered twice a day for 5 days, with follow up of one week in *Anjananamika*. Here, a sincere effort is made to evaluate the effect of *Mukkadi Bidalaka* and *Patoladi Kashaya Parisheka*. Clinical data collected in 5 days course shows complete relief from the symptoms.

Key Words: *Anjananamika*, *External Hordeolum*, *Bidalaka*, *Netraparisheka*.

Introduction

According to *Acharya Sushruta*, *Anjananamika* is a small abscess on the lid margin which is soft, moderately painful, copper red in color and characterized by burning and pricking sensations. (1) In addition to this, *Acharya Vagbhatta* mentioned *Anjananamika* situated in the middle or the end of the eye lids, and the shape and size of the *Pitaka* resemble green gram. (2) It can be compared to as External hordeolum or *Stye* or *zeis* gland cyst. The causative organism involved is *Staphylococcus aureus*. (3)

Hordeola are very common, So the worldwide incidence of External hordeolum is unknown. In India more than one million cases of *Stye* is reported per year. *Stye* is more common in children and young adults (though no age is bar) and in patients with eye strain due to refractive errors or muscle imbalance. Constant rubbing of the eyes or fingering of the lids and nose, chronic blepharitis and diabetes mellitus are usually associated with recurrent *Stye*. The Ayurvedic intervention of *Anjananamika* includes *Swedana* (Hot compresses), *Nishpeedana* (If spontaneously burst open, it should be well pressed and rubbed), *Bhedana* (Puncturing of the *Pitaka*), *Pratisarana* (Paste should be

applied with the pressure of the fingers) and *Raktamokshana* by *Jaloukavacharana*. (4,5)

In modern medicine the signs of *stye* have two stages. Stage of cellulitis is characterized by localized swelling at the lid margin associated with marked edema and Stage of abscess formation is characterized by a visible pus point at the lid margin in relation to the afflicted cilia. It is treated with hot compresses 2-3 times a day, Antibiotic eyedrops (3-4 times a day), Systemic anti-inflammatory and analgesics relieve pain and reduce edema, and eye ointment at bed time, which may have many side effects. These may cause temporary stinging, swelling, burning sensation and irritation to the eyes. In addition to that, these drugs should be used frequently at a gap of 1-2 hours which may not be convenient for the student's group and working class also takes its own time to act and provides results. Its prolonged use can cause irritation and dryness to the eyes.

Due to the prevalence of the disease and the effect of the topical antibiotics and ointments, an attempt has been made to evaluate the effect of *Mukkadi Bidalaka* and *Patoladi Kashaya Parisheka* in *Anjananamika*.

Aims and Objectives

To evaluate the effect of *Mukkadi Bidalaka* and *Patoladi Kashaya Parisheka* in *Anjananamika*.

Materials and Methods

Study setting

OPD (Outpatient Department) of *Shalakyta Tantra* department, I.T.R.A., Jamnagar, Gujarat, India.

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Case Study

A 33 years old male patient having symptoms of pain, foreign body sensation, discomfort, congestion, mild watering and photophobia in the upper palpebral conjunctiva of the left eye for 04 days, had chosen for the study.

History of present illness

Patient was apparently normal before 4 days, due to his overtime work in the factory near fire more than 8 hours at night, led the patient to felt pain and irritation in the left eye associated with foreign body sensation, discomfort, mild watering and photophobia, later the patient noticed marked congestion in upper palpebral conjunctiva with mild swelling. Being a factory worker, the disease in the patient had been aggravated by prolonged exposure to fire, excessive mobile phone usage, inadequate sleep. Patient was willing to take Ayurvedic medication, so he came to Eye OPD of *Shalaky Tantra* department, I.T.R.A., Jamnagar, for better management.

History of past illness:

No history of Diabetes mellitus, Hypertension and Thyroid disorders.

Personal history:

Personal history has mentioned in Table 1.

Table 1: Personal history

Micturition	Day time 3-4 times, At night -0 times
Bowel habit	Regular -2 times/day
Sleep	Disturbed sleep due to overtime work in factory At night 2-3 hours Day time-no
Addiction	No any
Blood Pressure	120/80 mmHg
Pulse rate	74/min
Respiratory rate	18/min

Clinical findings

Ashtavidha pariksha

Ashtavidha pariksha (Eight-fold classifications) has been mentioned in Table 2.

Table 2: *Ashtavidha pariksha*

<i>Nadi</i>	<i>Dosha -Vatapittaja</i> , Regular
<i>Mutra</i>	Day time 3-4 times, At night -0 times
<i>Mala</i>	1-2 times in a day/ <i>Prakruta</i>
<i>Jihva</i>	<i>Nirama</i>
<i>Shabda</i>	<i>Spashta</i>
<i>Sparsha</i>	<i>Ruksha</i>
<i>Drik</i>	<i>Vikruta</i>
<i>Akriti</i>	<i>Madhyama</i>

Diagnostic focus and Assessment

On Examination:

On Examination has been mentioned in Table 3.

Table 3: On Examination

Structures	Right Eye	Left Eye
Eyelids	NAD	Generalized swelling in the upper eye lid. Pus point with marked congestion visible on the lid margin in the center cilia of upper eyelid.
Palpebral Conjunctiva	NAD	Swelling with marked Congestion
Bulbar conjunctiva	NAD	NAD
Cornea	Clear	Clear
Pupil	NS/NR	NS/NR
Lens	Transparent	Transparent

Gradation of signs and symptoms of *Anjananamika* (External Hordeolum) is according to *Ayurvedic* and Modern signs and symptoms.

Assessment Criteria

Subjective Parameters

Table 4: Grading of *Daha* (Burning Sensation)

	<i>Daha</i> (Burning Sensation)	Score
Absent	No Burning sensation	0
Mild	Occasionally present Burning sensation not disturbing daily routine	1
Moderate	Frequently present Burning sensation, disturbing daily routine	2
Sever	Present throughout the day Burning sensation, disturbing daily routine	3

Table 5: Grading of *Toda* (Pricking Pain)

	<i>Toda</i> (Pricking Pain)	Score
Absent	No Pricking Pain	0
Mild	Occasionally present Pricking Pain	1
Moderate	Frequently present Pricking Pain, disturbing daily routine	2
Severe	Present throughout the day Pricking Pain, disturbing daily routine	3

Table 6: Grading of *Kandu* (Itching)

	<i>Kandu</i> (Itching)	Score
Absent	No Itching	0
Mild	Occasionally present Itching, not disturbing daily routine	1
Moderate	Frequently present Itching disturbing daily routine	2
Severe	Present throughout the day Itching, disturbing daily routine	3

Table 7: Grading of Swelling

	Swelling	Score
Absent	No Swelling	0
Mild	Swelling present not disturbing daily routine	1
Moderate	Swelling with minute opening present not disturbing vision	2
Severe	Swelling with minute opening present disturbing the vision	3

Table 8: Grading of Tenderness

Tenderness		Score
Absent	No Tenderness	0
Mild	Mild Tenderness	1
Moderate	Moderate Tenderness	2
Severe	Severe Tenderness	3

Table 9: Grading of Congestion

Congestion		Score
Absent	No Congestion	0
Mild	Congestion over the swelling	1
Moderate	Congestion over and nearby swelling	2
Severe	Congestion involves whole palpebral conjunctiva	3

Therapeutic intervention

Treatments given to the patient have been enlisted in Table 10. Patient was advised to avoid direct sunlight, UV light and wind. Also, patient was advised to take proper sleep, avoid work near fire, dust and smoke.

Follow up

After completion of treatment, the patient was followed up for 7days. Patient was completely free from the previous signs and symptoms and no any new complaints were found during the 7th day of follow up.

Results

After 5th day of assessments, variations in results were found on each symptom associated with *Anjananamika*. Results of the treatment were tabulated and analyzed. Patient got relief in signs and symptoms

with gradual improvement. Effects of the treatment on the patient are presented in Figure 1,2 and 3. Assessment on each considering symptom of *Anjananamika* has been presented in Table 11.

Outcome

It was observed that after 5 days of treatment, all the signs and symptoms were relieved completely.

Table 10: Posology of treatment protocol

Sr. No	Drug	Dose	Mode of Administration	Duration
1	<i>Patoladi Kashaya</i>	500ml for 10 minutes / twice daily.	<i>Parisheka</i> (Eye wash)	5 Days
2	<i>Mukkadi Yoga</i>	Quantity sufficient for <i>Bidalaka</i> for 10 minutes / twice daily.	<i>Bidalaka</i> (Ocular anointment)	5 Days

Table 11: Assessment on considering symptoms of *Anjananamika*.

Sr. No	Signs and Symptoms	1 st Day (Before Treatment)	7 th day After treatment
1	<i>Daha</i> (Burning Sensation)	2	0
2	<i>Toda</i> (Pricking Pain)	3	0
3	<i>Kandu</i> (Itching)	1	0
4	Swelling	3	0
5	Tenderness	2	0
6	Congestion	3	0

Figure 1 Before Treatment

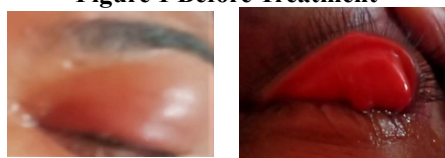


Figure 2 During Treatment (3rd day)

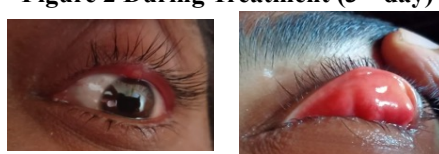


Figure 3 After Treatment (5th day)

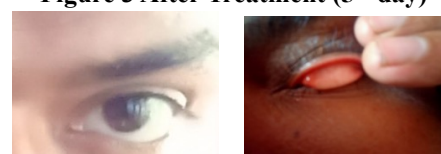


Table 12: Rasa Panchaka of *Mukkadi Yoga*(6)

No	Drug	Botanical names	Rasa	Guna	Virya	Vipaka	Karma
1	<i>Hareetaki</i>	<i>Terminalia chebula</i> Retz.	<i>Pancha rasa</i> (<i>Kashaya pradhana</i> and <i>Lavana varjita</i>)	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Tridoshaghna</i> <i>Chakshushya</i> <i>Rasayana</i> <i>Lekhana</i>
2	<i>Amalaki</i>	<i>Embilica officinalis</i> Gaertn.	<i>Pancha rasa</i> (<i>Amla pradhana</i> and <i>Lavana varjita</i>)	<i>Laghu, Ruksha</i>	<i>Sheeta</i>	<i>Madhura</i>	<i>Kapha</i> <i>Pittahara</i> <i>Chakshushya</i> <i>Rasayana</i> <i>Bhedana</i>
3	<i>Bibhitaka</i>	<i>Terminalia bellerica</i> Roxb.	<i>Kashaya</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Kapha</i> <i>Pittahara</i> <i>Chakshushya</i> <i>Rasayana</i> <i>Bhedana</i>
4	<i>Gairika</i>	Red ochre feo.	<i>Kashaya</i> <i>Madhura</i>	<i>Snigdha</i> <i>Vishada</i>	<i>Sheeta</i>	<i>Madhura</i>	<i>Pitta nasaka</i> <i>Vrnaropaka</i> <i>Kaphahara</i> <i>Netrya</i>

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5	Chandana	<i>Santalum album</i> Linn.	Tikta Madhura	Laghu, Ruksha	Sheeta	Katu	Kapha Pittahara Daha prasamana Kandughna
6	Raktha Chandana	<i>Pterocarpus santalinus</i> L.f	Tikta Madhura	Guru	Sheeta	Katu	Kapha Pittahara Chakshushya
7	Haridra	<i>Curcuma longa</i> Linn.	Tikta Katu	Laghu, Ruksha	Ushna	Katu	Rakta Vikara Shodha
8	Daruharidra	<i>Berberis aristata</i> DC.	Fruit-Madhura Amla, Kashaya, Bark-Tikta, Kashaya	Laghu, Ruksha	Ushna	Katu	Netra Rogahara Deepana Pachana
9	Lodhra	<i>Symplococcus racemosus</i> Roxb.	Kashaya	Laghu, Ruksha	Sheeta	Katu	Kapha Pittahara Chakshushya Shodhahara
10	Sariba	<i>Hemidesmus indicus</i> R Br	Tikta Madhura	Guru Snigdha	Sheeta	Madhura	Vishanasana Tridoshahara
11	Vata	<i>Ficus bengalensis</i> Linn.	Kashaya	Guru Ruksha	Sheeta	Katu	Vranahara Dahaghna
12	Durva	<i>Cynodon dactylon</i> Linn.	Kashaya Madhura	Laghu	Sheeta	Madhura	Kapha Pittahara Dahagna Raktapittahara
13	Usheera	<i>Vetivera zizanoidis</i> Linn.	Tikta Madhura	Laghu, Ruksha	Sheeta	Katu	Rakta Vikarahara
14	Nimba	<i>Azadirachta indica</i> Juss.	Tikta, Kashaya	Laghu, Ruksha	Ushna	Katu	Tridosha Shamaka

Table 12: Rasa Panchaka of Patoladi Kashaya (Anubhoota yoga)

No	Drug	Botanical names	Rasa	Guna	Virya	Vipaka	Karma
1	Patola	<i>Trichosanthes dioica</i> Roxb.	Tikta, katu	Laghu, ruksha	Ushna	Katu	Tridosha Shamaka
2	Nimba	<i>Azadirachta indica</i> A.Juss.	Tikta, Kashaya	Laghu	Sheeta	Katu	Vranahara, Dahahara, Kandughna
3	Jambu	<i>Syzigium cumini</i> Linn.	Kashaya, Madhura, Amla	Laghu, Ruksha	Sheeta	Katu	Raktasrava Hara, Vranaghna, Stambhaka
4	Amra	<i>Mangifera indica</i> Linn.	Kashaya	Laghu, Ruksha	Sheeta	Katu	Kaphapittashamaka, Vranaghna
5	Malati	<i>Aganosma heynei</i> (Spreng.) ined.	Tikta, Kashaya	Laghu, Snigdha , Mrudu	Ushna	Katu	Tridosha Shamaka, Vranaropana, Vranashodhana, Vedanasthapana

Observations

It was observed that the patient got complete relief from *Anjananamika* (Stye) in 5 days. He was asked to come for follow-up after 7 days, Patient was not on any medication at that time. There was no recurrence during the time of follow up.

Discussion

Effect of treatment on Daha (Burning Sensation)

The patient had complained of a frequent Burning sensation of both eyes, disturbing daily routine at first day of treatment, gradually it has been decreased to occasionally feeling of Burning sensation after 3 days and was completely cured after 5 days.

Effect of treatment on Toda (Pricking Pain)

The patient had complained of Pricking Pain throughout the day, disturbing daily routine at first day of treatment, gradually it has been decreased to

occasionally feeling of Pricking Pain after 3 days and was completely cured after 5 days.

Effect of treatment on Kandu (Itching)

The patient had complained of Occasionally present Itching, not disturbing daily routine at first day of treatment, gradually it has been completely cured after 3 days.

Effect of treatment on Swelling

The patient had complained of Swelling with minute opening present disturbing the vision at first day of treatment, gradually it has been decreased to mild Swelling present not disturbing daily routine after 3 days and was completely cured after 5 days.

Effect of treatment on Tenderness

The patient had complained of Moderate Tenderness at first day of treatment, gradually it has been decreased to mild feeling of Tenderness 3 days and was completely cured after 5 days.

Effect of treatment on Congestion

The patient had complained of Congestion involves whole palpebral conjunctiva at first day of treatment, gradually it has been decreased to mild Congestion over the swelling after 3 days and was completely cured after 5 days.

Mode of action of Patoladi Kashaya

If the symptoms are mild then Hot compression is enough to reduce the disease. If the symptoms are severe, incision and drainage is the only choice which is performed under local anaesthesia. (7) *Ayurveda* also advices to perform *Bhedana Karma*. *Netra Seka* with *Patoladi Kashaya* having *Mrudu Swedana Tridosha Shamaka* property may act as *Dosha Vilayana* which relieves the blockage of Meibomian glands. So, *Patoladi Kashaya* can perform *Shamana* and *Shodana* of *Doshas*.

Patola-has an excellent quality which purifies the *Raktadhatu*. It also possesses qualities like *Sarvadoshaghna*, *Kandughna* (which reduces itching), *Krumighna* (anti-microbial). It also supports the body's immune system and also good for eyes. (8)

Nimba- The chemical constituent Nimbidin present in this drug is having anti-inflammatory action and many extracts are having anti-microbial property. (9)

Jambu- Dihydromyrecitin present in this drug is having anti-biotic, anti-inflammatory as well as anti-pyretic property. (10)

Amra- Good for eyes, having anti-bacterial property, enhances immune power. (11)

Malati- Leaf juice of *Malati* is having antibiotic effect. (12)

Probable mode of Action

Instillation of medicated solution in to the partially opened eye, continuously for a stipulated time period. It is indicated in the acute phase of inflammation whereas in the corneal and conjunctival epithelia permeability is high, hence the absorption is more. Disposal and tissue contact time is more in *Parisheka* than in *Aschyotana*. Absorption of drug through conjunctival epithelia reduces the sign and symptoms of *Anjananamika* (Stye).

Mode of action of Mukkadi Yoga

In *Bidalaka* topical application of drugs in the form of paste over the skin of lids are indicated in acute inflammatory conditions of the lids. *Mukkadi Yoga* is one such formulation explained in *Sahasrayogam*, a very popular medical text in Malayalam language. *Mukkadi Yoga* is a *Bidalaka Yoga* told in *Urdwanga Roga Chikitsa* under the *Vartmarogachikitsa Prakarana* of *Sahasrayogam* text which is said to be useful in inflammatory signs and symptoms of eye i.e. *Sopha*, *Ruja*, *Daha*, *Raga* etc.(13) The drug is absorbed through the skin acts locally, as well as by the vasodilation and

drainage of toxins from the site of application. The contents are predominantly cooling, works on vitiated *Pitta* and *Rakta* and majority have haemostatic activity. Hence it has been selected for trans-dermal absorption as a *Pittashamaka* action. Slight acidic nature of *Mukkadi Yoga* which may help in augmenting the function of *Brajaka Pitta* ultimately work as a transdermal action.

Conclusion

Mukkadi Bidalaka and *Patoladi Kashaya Parisheka* in *Anjananamika* found to be effective in reducing signs and symptoms of *Anjananamika* and significant results were seen. No adverse and toxic effects were observed during and after the completion of treatment. Modern ophthalmologists suggest Systemic anti-inflammatory and analgesics relieve pain and reduce edema, and eye ointment at bed time, which may have many side effects. These may cause temporary stinging, swelling, burning sensation and irritation to the eyes. But in *Ayurveda*, *Anjananamika* (Stye) can be treated with *Netra Kriyakalpa* like *Parisheka* and *Bidalaka* to prevent the recurrence of the disease. Therefore, *Mukkadi Bidalaka* and *Patoladi Kashaya Parisheka* can be used safely and effectively in the treatment of *Anjananamika* (Stye). The recovery in the present case was promising and worth documenting. Further, more trials with these medicines for a large number of patients can be done since enough studies have not carried out with this combination of the drugs.

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