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SHOBHANA VARTI ANJANA IN THE MANEGMENT OF ARMA - A PILOT STUDY

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ABSTRACT

Arma is very common ophthalmic ailment in temperate environment like India. It has been described under shuklagta sadhya vyadhi in Ayurveda it is disease in which wing like growth is gradually developing from either Kaneenika Sandhi or Apanga sandhi towards cornea. On the basis of signs and symptoms described by the modern medical science, the disease 'Arma' can be correlated with conjunctival degenerations including 'Pterygium'. Arma is Chedhan Sadhya vyadhi. However in the initial stage having thin membranous growth can be treated by lekhana Anjanas. It is widely used to prevent the speedy growth of the membrane. Likewise, it is also highly beneficial after the surgical treatment for prevention of relapse after surgery. Shobhana Varti anjana is one of the Lekhanajana explained in Gadanigraha, in the present trail 10 patients of Arma were selected and administrated 'Shobhana varti' as Anjana. A significant relief was found in various signs and symptoms of Arma.

Keywords: Shobhanavarti Anjana, Arma, Pterygium.

INTRODUCTION

Shalakya tantra is one of the Ashtangas of Ayurveda deals with the diseases affecting the Urdhwajatrugata Vyadhies. It is very difficult to imagine the existence of mankind without eyesight. Thus one has to admit the sayings-"SARVENDRIYANAM NAYAN PRADHANAM". Even through our eyes are one of most important organs in our body, people neglect to care about them and rarely pay attention until there is some serious vision threatening problems.

Pterygium which is common ocular surface disorder characterized by triangular fold of conjunctiva encroaching upon the cornea from either side within the interpalpebral fissure. The pathogenesis of Pterygium is not fully understood. Various studies have implicated as environmental factors, such as ultraviolet rays, smoke, dust, hot environment and chronic irritation. Pterygium has a moderate to high prevalence 30° above & below equator. Pterygium is fairly common in our country, which is located within the tropics.

Cosmetic intolerance also forces the patient to turn towards surgical management which is not devoid of complication. These have only evoked passing interest in the treatment of pterygium. There is no proper effective medical management; surgical management is the only line of treatment in conventional system of medicine. Recurrence is commonest in either method of treatments. Hence, these hindrances of modern science have stressed upon the need for the study for effective measure which can cure the

condition and prevent recurrence keeping these things in mind this study has been taken up.

Kriyakalpas are the main mode of management in all types of nethra rogas and Anjana is simple and very effective method in treating Arma. For the medical management of Arma, Lekhnanjanas are extensively quoted by our Acharyas. Shobhanavarti Anjana is also one of the lekhanajana yoga mentioned in Gadanigraha in Netrarogadhikara.

Considering the above factors, in this study an effort has been made to evaluate the efficacy of *Shobhanavarti anjana* in the management of *Arma*

OBJECTIVES OF THE STUDY:

To evaluate the efficacy of *Shobanavarti Anjana* in the management of *Arma*.

MATERIALS & METHODS

Source of data

Patients were selected from the outpatient and inpatient department of Sri. Jayachamarajendra Institute of Indian Medicine, Bengaluru.

Selection of patient:

The selection was done on the basis of clinical examination. A careful clinical history of all those patients complaining of *Netra daha, ragata, Ashrus-rava* and *Toda* were considered. The patients were then subjected to a thorough examination and after establishing the diagnosis; the patients were taken for the clinical study.

Inclusion criteria

- ➤ Patient age group 20-60 years
- Clinical features of Prasthari Arma as per classics
- > Pterygium which is limited to limbus.

Exclusion criteria

- Arma with any other ocular pathogenesis.
- Pseudopterygium.
- > Those contra indicated for anjana.

STUDY DESIGN

The study was purely Clinical with 3 phases.

- Diagnostic phase
- Interventional phase
- Assessment phase

DIAGNOSTIC PHASE

Diagnosis was established on the basis of History, Symptoms mentioned in the texts.

INTERVENTIONAL PHASE:

Preparation of Shobhana varti anjana.

The ingredients of Shobhana varti anjana are trikatu, kusta, haritaki, rasanjana, neelotphala are taken in equal quantity in fine powdered form & pounded in khalva yantra till it becomes fine powder. Vastraghalana is done to get fine powder. This fine powder is taken, and then subjected to bhavana with sufficient quantity of water till it become soft in consistency. This is then made into varthi form of about 2cm length and dried in sun shade and preserved in air tight container

DURATION AND MODE OF ADMINISTRATION OF THE YOGA

Shobhanavarti anjana

- ➤ **Purvakarma** The patient is explained about the entire procedure, and then patient is made to lie down supine position.
- ➤ **Pradhana karma**: The eye of the patient is opened with left hand. Then holding the *shalaka* dipped in anjana having *harenu matra* with right hand *anjana* is smeared from *kaneenika sandhi* to *apanga sandhi* on the inner side of the eyelid uniformly.
- ➤ It was applied once daily in the morning for 30days.
- > Paschat Karma: When tears start flowing out of the eye, the eye is washed with lukewarm water or *triphala kashaya*.

Follow up period:

Follow up study will be undertaken once in a month for 2 months after the completion of treatment.

ASSESSMENT PHASE

Effect of the therapy was compared before and after the treatment on the basis of self formulated scoring scale to signs and symptoms in Subjective and Objective parameters.

Subjective Parameters:

1. Burning sensation

- 2. Watering of the eyes
- 3. Redness
- 4. Foreign body sensation
- 5. Thickness

As thickness is considered under subjected parameter no tool is measured for its measurement.

Objective Parameters

1. Pictorial Presentations.

ASSESSMENT OF RESPONSE

The net result obtained by various parameters of assessment both before and after treatment was taken into consideration to assess the overall effect of the therapy. Then they were graded in terms of percentage of relief in subjective and objective parameters.

ASSESSMENT OF TOTAL EFFECT OF THERAPY

Table 1: Effect of treatment

EFFECT OF TREATMENT					
Class	Grading	No of patients			
0-25%	Poor Response	0			
26% -50%	Moderate Response	2			
51% - 75%	Good Response	3			
76% - 100%	Excellent response	5			

Graph 1: Overall effect of treatment

0% 15%

50%

35%

▼ Poor Response ▼ Moderate Response ▼ Good Response ▼ Excellent response

Table 2: Comparative results of treatment

Parameters	Mean Score								
	BT	AF	SD	SE	t-value	p-value	Remark	%	
Burning Sensation	2.75	0.70	0.887	0.198	8.95	< 0.05	Significant	74.55	
Watering Of Eyes	2.65	0.73	0.858	0.192	8.41	< 0.05	Significant	72.64	
Redness	2.43	0.65	0.801	0.179	7.60	< 0.05	Significant	73.20	
Foreign Body Sensation	2.38	0.65	0.851	0.190	8.19	< 0.05	Significant	72.63	
Thickness	2.45	0.60	0.718	0.718	9.32	< 0.05	Significant	75.51	

By seeing the above parameters all have shown significant result in burning sensation, watering of eyes, redness, foreign body sensation and thickness. In

Ptergyium thickness is major parameter in dealing with this disease. *Shobhana Varti Anjana* is one of the *Lekhana Anjana* by the actions of its ingredients.

This *anjana* having more bioavailability and control or constant release of the drug delivery, because precorneal factors, anatomical barriers and systemic absorptions are negatively affect the bioavailability. Mainly affected precorneal factors include solution, drainage, blinking, tear film, tear turn over and in-

duced lacremation. Mucin present in the tear film plays a proactive role by forming a hydrophilic layer that moves over the glycocalyx of the ocular surface and clear debris and pathogens including ocular drug also.

Patients' pictures Shobhanavarti Anjana

Before Treatment





DISCUSSION

Probable mode of action of *Shobhanavarti anjana* drugs:-

The ingredients of *Shobhanavarti Anjana* are – *Tri-katu, aritaki, kusta, rasanjana* and *neelotphala*.

✓ *Pippali* - Having *katu rasa*, *laghu*, *snigdha*, *teekshna*, *pramathi guna*, *anushna sheetha veerya* does *lekhana* action. By its *madhura vipaka* has *rasayana* and *chakshushya* property also act has anti-inflammatory, anti-allergic, immune stimulatory.

By virtue of their action of *tridhosha shamaka*, *lekhana*, *raktashodaka chakshushya & rasayana*. Formulation has a potency to relieve the clinical features.

Pharmacological Action: Antifungal, Antiamoebic, Antimicrobial

Antioxidant Anti-cancer Immunomodulatory Antiinflammatory

✓ Maricha — Having katu rasa, laghu, teekshna, pramathi guna, ushna veerya, katu vipaka,and kaphavatahara property. Chemical Composition

contains Piperine, alkaloid, Sesanin, Pipalsetrol and acts as *chakshushya*, *Rasayana*, *deepana*.

Pharmacological action: Anti inflammatory, Anti cancer, Anti oxidant, Anti microbial, Antidiarrhoeal, Antispasmodic, Analgesic and Antipyretic

✓ **Sunti**: Having *katu rasa*, *guru*, *snigdha*, *rukshsaguna*, *ushna veerya* does *lekhana* action. By its *madhura vipaka*, *vatakaphahara* and having *deepana* and *bhedhana karma*. α-curcumene, β-D- curcumene, citral, zinziberol, ginger glycolipids A, B and C, gingerols.

Pharmacological action-Ginger has significant anti inflammatory, anti-emetic and chemo-protective effects.

✓ Haritaki: Having lavana vatjit rasa, laghu, ruksha guna, ushna veerya does lekhana action. By its madhura vipaka,tridosha shamaka and it contains

Chebulinicacid, gallicacid, tannin, anthraquinone, lindric, oleic, palmitic and stearic acids.

Pharmacological Action: Antioxidant, Antibacterial, Antifungal, Anticonvulsant, Antiviral, Antidiabetic and Anticancer

✓ Kusta: Having tikta, katu, madhura rasa, laghu, ruksha, teekshna, ushna veerya does lekhana action. By its katu vipaka, kaphashamaka. Essential oil, Costol Taraxas-terol, Costunolide, Dehydroconstuhactone, alpha- Cyclocostunolide, sitosterol, Sesquiterpenes etc explained in lekheniya gana.

Phamacological Action: Antifungal activity: Antiamoebic activity: Antimicrobial

Antioxidant Anti- Cancer Immunomodulatory and Anti-inflammatory.

✓ Rasanjana: Having tikta,kashaya rasa, laghu, rooksha, ushna veerya does lekhana action. By its katu vipaka and kaphapitta shamaka and chakshushya.contains Berberin, Oxyanthin, Umballitine

Phamacological Action: Plant is useful as antipyretic, anti-bacterial, anti-microbial, antihepatotoxic, anti-hyperglycaemic, anti-cancer, antioxidant and anti-lipidemic agent.

Neelotphala: Having madhura,tikta and kashaya, laghu, snigdha, pichila guna, sheetha veerya does lekhana action. By its madhura vipaka and pittakapha shamaka and it contains Flower-Nymphalin (glucoside), Quercetin, Kaempferol etc.

Pharmocological action; Anticarcinogenic effect, hyperproliferative activity, antimicrobial, anti tyrosinase, antiolytic activity

All drugs in *Shobhanavarti Anjana* are anti inflammatory, anti oxidant, these property helps in reduces the size of growth, also cease the further growth and degeneration of the disease by its *rasayana* and *chakshusya* properties and also reduces redness, foreign body sensation, burning sensation and watering of eyes by its anti inflammatory action.

CONCLUSION

In the present trail, *Shobhana varti* was found to be effective in reducing sign and symptoms of *Arma* and statistically significant result were seen. No adverse and toxic effects were observed during and

after the completion of trail. Modren ophthalmologist does not treat the ptergyuim in initial stage, but in *Ayurveda*, *Arma* which is an initial stage can be treated with *Netra Kriyakalpa* like *anajans* to prevent the speedy growth of the membrane. Likewise, it is highly beneficial after surgery. Therefore *shobhana varti* can be used safely and effectively in the treatment of *Arma*. *Rasayana* property of all these drugs helps in arresting the further degeneration of the tissue. Better results can be obtained, if patients do *Nidana parivarjana*

Recommendation for further study:

- Present study pattern can be contributed in the form of prospective clinical study with increased sample size.
- Other drugs mentioned for *Arma* can be selected for the study.
- The same study can be done in large number of patients with a long term of treatment and follow up.

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