MANAGEMENT OF BAHALA VARTMA - A CASE STUDY

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ABSTRACT
Acharya Susrutha has described 21 diseases afflicting the eyelids. One among them is Bahala Vartma characterized by multiple pidakas (swellings) filling the inner aspect of eyelids caused due to the vitiation of tridosha. This can be compared to multiple Chalazia afflicting the eyelids. Bilwadi gutika is a formulation mentioned in Ashtanga Hrudaya uttarasthana and can be used for Pana (internal administration), anjana (collyrium) and nasya (nasal instillation). In the present study Bilwadi gutika is used in the form of anjana in the management of a case of Bahala Vartma.

Keywords: Vartma, Anjana, bahala Vartma, chalazion

INTRODUCTION
Vartma rogas (diseases of eyelids) are caused when aggravated dosha localize in vartmagata sras (blood vessels) and vitiate the mamsa and rakta portions of vartma. Bahala vartma is one such vartmagata roga which presents with multiple savarna pidakas (same coloured swellings) producing heaviness of the lids. According to ayurvedic classics it is grouped under lekhana (scraping) sadhya vyadhi. Chalazion is a chronic granulomatous inflammation of the meibomian gland and is the commonest of all eyelid swellings. It is caused due to the retention of secretions of meibomian glands thereby resulting in enlargement of gland. The collected material acts like an irritant and excites a lipogranulomatous inflammation of the blocked meibomian glands.

Bahala vartma can be compared with multiple chalazia presenting with several non suppurative cystic lesions in the upper and lower lid producing heaviness of the lids.

A single case study was carried out in the department of Shalakya Tantra, SDMAH Udupi. Patient complained of watering, discomfort and marked swelling in left lower eyelid for 3 months. Treatment was tried with mrudu swedana (mild fomentation) followed by application of Bilwadi gutika anjana.

Materials and Methods
Place of Study- SDM Ayurveda Hospital, Udupi
Case Study: Management of a case of Bahala vartma by Bilwadi gutika in the form of anjana for a period of 1 month. A 50 yr old male patient presenting with swelling in the left lower eyelid and watering since 3 months was chosen for the study.
History of present illness – Patient was apparently normal before 3 months. Gradually patient noticed watering from left eye along with swelling in lower eyelid which was increasing in size. He also experienced mild heaviness of lower eyelid after a few days. He also complained of mild discomfort due to the swelling. For all the above complaints he visited Shalakya Tantra OPD at SDM Hospital at Udupi.

History of past illness: No history of hypertension, Diabetes mellitus.

On examination:

Left eye:
Eyelids- 3 firm cystic non tender nodules were palpable in the lower eyelid
Palpebral conjunctiva- Reddish purple area in the lower palpebral conjunctiva over the swellings
Bulbar conjunctiva- appears normal
Cornea- clear
Pupil – round, regular, reactive

Right eye:
Eyelids – eyelashes and margins appear normal
Palpebral conjunctiva - no congestion
Bulbar conjunctiva- appears normal
Cornea- clear
Pupil – round, regular, reactive

Assessment criteria
The assessment was done before treatment and after treatment. The signs and symptoms were assessed by self-designed scoring system, described below.

Scoring system for the assessment.
1. Discomfort or irritation
   Absent (Grade 0) - No discomfort or irritation
   Mild (Grade 1) - Occasionally present and not disturbing daily routine
   Moderate (Grade 2) - Frequently present and disturbing daily routine
   Severe (Grade 3) - Present throughout the day and disturbing daily routine

2. Lacrimation
   Absent (Grade 0) - No lacrimation
   Mild (Grade 1) - Occasionally present
   Moderate (Grade 2) - Frequently present, but not disturbing daily routine
   Severe (Grade 3) - Present throughout the day and disturbing daily routine

3. Swelling
   Absent (Grade 0) - No swelling
   Mild (Grade 1) - 1-2 localized nodular swellings present in either upper or lower eyelid
   Moderate (Grade 2) - 2-4 localized nodular swellings in either upper or lower eyelid
   Severe (Grade 3) - 2-4 nodular swellings in both the eyelids

4. Congestion
   Absent (Grade 0) - No congestion
   Mild (Grade 1) - Congestion over the swelling
   Moderate (Grade 2) - Congestion over and nearby swelling
   Severe (Grade 3) - Congestion involves whole palpebral conjunctiva

Treatment Protocol- Bilwadi gutikanjana in the dose of 1 Harenu Matra (~40mg) applied in the lower fornix for 30 days.

Table 1: list of ingredients and rasapanchaka (factors determining the function of this formulation) of Bilwadi gulika

<table>
<thead>
<tr>
<th>Name of the drug</th>
<th>Rasa</th>
<th>Guna</th>
<th>Virya</th>
<th>Vipaka</th>
<th>Dosha karma</th>
<th>actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bilwa</td>
<td>Kashaya, tikta</td>
<td>Laghu, ruksha</td>
<td>Ushna</td>
<td>Katu</td>
<td>Vata kaphahara</td>
<td>Shothahara, deepana, pachana</td>
</tr>
<tr>
<td>Surasa</td>
<td>Katu tikta</td>
<td>Laghu, ruksha</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha vatahara</td>
<td>Krimighna, vrana ropana</td>
</tr>
<tr>
<td>Karanja</td>
<td>Tikta katu kashaya</td>
<td>Laghu, teekshna</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha vatahara</td>
<td>Shothahara, bhedana, vrana ropana</td>
</tr>
<tr>
<td>Tagara</td>
<td>Tikta katu</td>
<td>Laghu snigdha</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha vatahara</td>
<td>Vishaghna</td>
</tr>
</tbody>
</table>
Table 2: Scoring before and after treatment

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discomfort or irritation</td>
<td>Grade 1</td>
<td>Grade 0</td>
</tr>
<tr>
<td>Lacrimation</td>
<td>Grade 2</td>
<td>Grade 0</td>
</tr>
<tr>
<td>Swelling</td>
<td>Grade 2</td>
<td>Grade 0</td>
</tr>
<tr>
<td>Congestion</td>
<td>Grade 3</td>
<td>Grade 0</td>
</tr>
</tbody>
</table>

**DISCUSSION**

Bahala vartma is categorized as tridoshaja lekhana sadhya vyadhi. Bilwadi gutika anjana has ushna veerya (hot potency), laghu (light), ruksha (dry), teekshna guna (penetrating) due to which it acts as a potent lekhana anjana. Mrudu swedana (fomentation) acts as dosha vilayana which relieves the blocked Meibomian glands. Anjana causes amapachana and shaman (pacification) of vitiated doshas.

Bilwa⁶ (Aegle marmelos), Devadaru (Cedrus deodara), pippali (Piper longum) maricha (Piper nigrum) Shunti (Zingiber officinale), Karanj (Pongamia pinnata) are mainly ushna veerya, kapha vatahara and have amapachana, Shothahara (anti-inflammatory) properties thereby reducing inflammation in the ducts of meibomian glands, relieving the blockage and reducing the swelling. Haridra (Curcuma longum), Daruharidra (Berberis aristata), aja mutra are ushna veerya, have lekhaniya property (scrapping action). Suras (Ocimum sanctum), Haritaki (Terminali chebula), vibheetaki (Terminalia bellerica), Amalaki (Emblica officinalis) Karanja (Pongamia pinnata), Haridra (Curcuma longum), Daruharidra (Berberis aristata) produce vrana ropana (wound healing) in the affected site. Haridra and Suras possess Krimighna (anti infective) properties which prevent secondary infection and help in the quick resolution of the disease process. The highly vascular conjunctival surface also aids in easy and optimal absorption of drugs applied in the form of anjana which is further enhanced by application of local heat in the form of mrudu swedana.
CONCLUSION

Bilvadi gulika is a formulation mentioned in Astanga hridaya visha chikitsa. It can be used in the form of anjana, pana and nasya. Though it is popularly used to treat toxicity its ushna veerya, teekshna guna, lekhana karma renders it beneficial in the management of inflammatory swellings of the lid as it brings about amapachana and shaman (pacification) of vitiated doshas in the vartma. In the present case study of bahala vartma consisting of bahu savarna pidakas, the application in the form of anjana resulted in disintegration of accumulated meibomian secretions and resolution of disease.

REFERENCES


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