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RESEARCH ARTICLE

A CASE STUDY- TO EVALUATE THE EFFECT OF JALOUKAVCHARANAIN MANAGEMENT OF PISTAKA (PINGUECULITIS)

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Abstract

Introduction: A pinguecula is a yellowish non malignant lump that develops on the conjunctiva. It is a common degenerative condition of the conjunctiva. Yellowish white patch on the bulbar conjunctiva near the limbus. It swelled up due to deposition of fat, calcium, and protein will cause irritation leading to pingueculitis. Pingueculitis is the condition where the pinguecula remain inflamed and is vascularised. In our samhitas there is no direct reference available regarding the symptoms of Pingueculitis but by studying Sushruta Samhita the signs, symptoms and aetiology of Pistaka Netrarogamuch correlated with Pingueculitis. According to Acharya Sushruta and Yogratnakar Raktamokshana and the treatment of kaphabhishanda useful in pistaka.

Aim: To study the role of Jaloukavacharana in the management of Pistaka (Pingueculitis).

Objectives: To study the role of jaloukavacharana to reduce the sign and symptom of pistaka with special reference to pingueculitis.

Methodology –

- 1) Nidanparivarjana
- 2) Ahara - Vihara
- 3) Jaloukavacharana procedure.

Result: The procedure Jaloukavacharana to reduce the sign and symptom of pistaka (pingueculitis).

Conclusion: Ayurvedic procedure like Jaloukavacharana can help in pistaka (pingueculitis).

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Introduction:-

- A pinguecula is a yellowish non malignant lump that develops on the conjunctiva. It is a common degenerative condition of the conjunctiva. Yellowish white patch on the bulbar conjunctiva near the limbus. Derived from pinguis (meaning fat) considered a precursor of pterygium. It swelled up due to deposition of fat, calcium, and protein will cause irritation leading to pingueculitis.¹ It is more common conjunctival disorders with the prevalence rate ranging from 22.5% to 90%.²
- Pingueculitis is the condition where the pinguecula remain inflamed and is vascularised. The cause of pingueculitis is too much exposure to sun, frequent exposure to environmental factors like- wind, dust, sunlight, Prolong hours of exposure to infrared and uv radiation and Stay in extremely dry environment like desert or

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equatorial countries etc. the symptoms of pingueculitis is A small yellow patch appear on the sclera part of the eye, Formations of yellowish growth on the conjunctiva, Severe irritation and redness of the eye, Itchy feel due to severe dryness, Inflamed conjunctiva, sometimes blurred vision. (Severe condition).

According to Acharya Shushruta Pistaka is Shuklagata Netra Roga. Pradhana Dosh Dushti- kapha Dosha and Dushya- Rakta, Mansa, Meda and Sthana- Shuklamandala and it is Sadhyaroga.

Rupa or sign and symptom of pistak (pingueculitis)

1. Utsannah – Elevated
2. Salil Nibho Bindu - Resembling water droplet.
3. Pista Suklo - Rice cake like white coloured.
4. Suvrrita- perfectly rounded bubble.

In our samhitas there is no direct reference available regarding the symptoms of Pingueculitis but by studying sushruta sahita the signs, symptoms and etiology of pistak netra roga much correlated with Pingueculitis. According to Acharya Shushruta and Yogratnakar Raktamokshana and the treatment of kaphabhishanda useful in pistak. So we can use Raktamokshana therapy in the treatment of Pingueculitis.

Case Report

1. Name of patient- xyz
2. Age / sex- 30 yrs / Male
3. OPD No- 82544
4. Place- Nagpur
5. Occupation- Bus Driver
6. Date of consultation- 10/12/2021

Chief complaints

1. A small yellow patch appear on the sclera part of the right eye.
2. redness of right eye
3. Foreign body sensation in right eye
4. Pricking pain in right eyes since 1 month.

Associated complaint is-

1. Burning sensation
2. Feel itchy and dryness in the right eye.

Past History -

1. No H/o systemic hypertension
2. No H/o Diabetes mellitus
3. No H/o any major illness or bleeding disorder

Ophthalmic Examination-

Visual Acuity -

RE 6/6 (p) LE 6/6

IOP RE- 14.6 mmHg

LE- 17.3 mmHg

Slit Lamp Examination-

1. A small yellow patch appear in limbal region of the right eye.
2. Inflamed conjunctiva.
3. Rest anterior segment was normal.

General health examination

1. BP- 120 / 70 mmHg
2. Pulse- 76/min

Diagnosis –

pistak (Pingueculitis).

Investigation –

1. RBS- 98mg/dl
2. Urine –Sugar –Nil
3. Albumin-Nil
4. Hb%- 13.6 gm%
5. BT- 02 mins
6. CT- 03 mins
7. RVD- Negative.

Treatment-

Raktmokshan by jaloukavacharan1 in number at outer cantus of right eye for three times with interval of 7 days.

Purvakarman of jaloukavcharana

1. Written informed consent was taken for jaloukavacharan
2. Pulse, BP and IOP was taken before and after procedure.
3. Patients (Rogi) to be treated with Jaloukavacharana should be placed in a comfortable position i.e. supine position and the part should be cleaned.
4. Shodhana of jalouka- jalouka should be kept in Curcumin water (water with Haridra powder) for few mints.

Pradhana Karma

1. Application of jalouka-
2. Jaloukas were put at outer canthus of right eye.

Paschata Karma

1. Vomiting of leech-
2. Haridrachurna was applied at the site of prick to remove jalouka after sucking the blood.
 - o Approx. 2.5-3 ml blood was sucked by jalouka in each setting

Dressing of lesion-

1. Pressure was applied at the site of prick
2. After applying Haridrachurna at the bleeding site sticking was applied
3. Patient was told to give follow up on next day.
4. Same procedure was repeated at 8th day and 15th day.
5. Preservation of leech-The leech is then returned to fresh water immediately.

Result:-

| Sin and symptom | 2 nd day follow up | 9 th day follow up | 16 th day follow up |
|-------------------------------|-------------------------------|--------------------|---------------------|
| Yellow patch at limbal region | moderate | mild | no patch seen |
| Pricking pain | moderate | mild | No pain |
| Foreign body sensation | moderate | mild | No FB sensation |
| Redness | moderate | mild | No redness |
| itching | moderate | mild | No redness |

Mild – symptom present once or twice a day

Moderate- more than 4 to 5 times a day

Sever- symptom present continues a day

Conclusion:-

In these case study jaloukavcharna showed significant results on treating the most of the cardinal signs and symptoms of pistak (pingueculitis). So we claim that jaloukavcharna is clinically effective in the management of pistakNetraroga (pingueculitis).

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