

# Case Study

### www.ijrap.net

(ISSN Online:2229-3566, ISSN Print:2277-4343)



# AYURVEDIC APPROACH IN THE MANAGEMENT OF SUBCONJUNCTIVAL HAEMORRHAGE WITH RESPECT TO ARJUNA: A CASE STUDY

Adarsh Varma R 1\*, Drishya H Bhat 2

<sup>1</sup> Assistant Professor, Shalakya Tantra department, Vaidyaratnam Ayurveda College, Thrissur, Kerala, India 
<sup>2</sup> House Surgeon, Vaidyaratnam Ayurveda College, Thrissur, Kerala, India

Received on: 13/6/24 Accepted on: 27/7/24

#### \*Corresponding author

E-mail: dradarshbudhanoor@gmail.com

DOI: 10.7897/2277-4343.154106

#### ABSTRACT

Redness of the eye is a common symptom that draws patients to OPD. Subconjunctival haemorrhage is a symptomless condition, but the redness of the eyes grabs society's attention. The condition can be compared with Arjuna, a suklagata roga (conditions affecting the sclera and conjunctiva). A female teenager presented with the complaint of redness of the left eye with features of inflammation of the conjunctiva, and no other systemic findings were observed. The patient was treated in Shalakya tantra OPD with a single procedure of aschotana (instillation) using medicines told in Arjuna chikitsa in Ashtanga Hridaya. Internal medication was prescribed by focusing on the inflammation of the conjunctiva. The haemorrhage was easily absorbed within five days. All symptoms were reduced, and the patient was satisfied. Thus, subconjunctival haemorrhage can be managed easily with respect to Arjuna using simple OPD medicines and procedures. Conjunctiva is a translucent membrane which lines the posterior surface of eyelids and the anterior aspect of the cornea where subconjunctival haemorrhage as small petechial haemorrhage to an extensive one spreading under the whole of the bulbar conjunctiva occurs. Even though hypertension is the major risk factor, there are so many causative factors which contribute to haemorrhage.

Keywords: Subconjunctival haemorrhage, Arjuna, Aschotana.

#### INTRODUCTION

Subconjunctival haemorrhage or Ecchymosis is a common condition due to the rupture of small vessels spontaneously beneath the bulbar conjunctiva. Conjunctiva is a translucent membrane which lines the posterior surface of eyelids and the anterior aspect of the cornea where subconjunctival haemorrhage as small petechial haemorrhage to an extensive one spreading under the whole of the bulbar conjunctiva occurs. Thus, make the white sclera red. Subconjunctival haemorrhage may be associated with trauma, inflammation of the conjunctiva, local vascular abnormalities, blood disorders, and febrile systemic conditions<sup>1</sup>. Hypertension is found to be a major risk. Ecchymosis is symptomless except for red discolouration of the sclera, which the patient noted as a serious symptom. The condition can be compared with Arjuna, a suklagata roga (conditions affecting sclera and conjunctiva) in Ayurveda. According to Ashtanga Hridaya, Arjuna is a condition with features neeruk (without pain), shlakshna (smooth), and shashabindunibha (colour of the blood of rabbit)<sup>2</sup>. This is a sadhya roga (easily curable)<sup>3</sup> and can be managed easily with an Ayurvedic classical approach.

#### **Patient Information**

A female patient aged 11 years and 5 months presented in Shalakya Tantra OPD Vaidyaratnam Ayurveda College Hospital, Thrissur, Kerala, India, with a unilateral (Lt) red eye for one day. It was associated with mild discharge, watering of the eyes and mild irritation. There is no history of trauma and no fever or visual disturbances. Informed consent was taken from the patient before the study.

Family history: Nil Past intervention: Nil

#### **Timeline**

- The patient was asymptomatic two days before.
- One day, when she woke up, she found mild discharge and irritation of the left eye.
- The next day, the left eye became red without fever or visual disturbances.
- The next day, as the condition didn't subside, she came to Shalakya Tantra OPD for consultation.

## **Personal History**

- Appetite- Good
- Bowel- Satisfactory, once a day
- Micturition- Normal
- Sleep- Sound

#### Clinical findings

- Build- Moderate
- Nourishment- Moderate
- Gait- Normal
- Height- 124 cm
- Weight- 21Kg
- BMI- 13.6 kg/sq.m
- Vitals-
  - HR- 78 bpm
  - o PR- 78 bpm
  - o RR- 18 /min

All systemic examinations were normal except for the left red eye. Eye examination revealed diffuse hyperaemia of the left eye with mild discharge and photophobia and without limitation of ocular movements. Fundus findings and visual acuity were found to be normal.

#### **Therapeutic Intervention**

#### **Internal Medicines**

 Guduchyadi Kashaya Choorna – 2 tsp choorna boiled in 1 litre water frequently throughout the day.  Avipathy Choorna – 1 tsp at night before bed with lukewarm water.

#### **Procedure**

Aschothana (instillation) with sharkara (sugar), mastu (whey of curd), and kshoudra (honey) on the left eye, 2 drops six times a day (9 am - 10 am - 11 am - 3 pm - 4 pm - 5 pm)

Table 1: Signs and symptoms before treatment and 5 days after starting treatment during follow-up

Before treatment	After treatment
Redness of the left eye	Clear left eye
Irritation and discharge	No irritation or discharge



Figure 1: Left eye before treatment

#### ---

# RESULTS AND DISCUSSION

After 5 days of treatment, the eye became clear without any redness, and irritation and discharge completely subsided.

Subconjunctival haemorrhage is a condition that resolves naturally within 7-21 days. However, as the condition looks terrible due to the appearance of a bright red sclera, immediate resolution would be more beneficial. The condition can be easily resolved using Arjuna's management protocol in classical texts. Along with this, managing the cause will help subside the condition quickly.

Internal medicines include Guduchyadi Kashaya as pana jala (water with less medicine concentration), which is Kapha Pitta shamana (alleviates Kapha and Pitta dosha)<sup>4</sup> and Avipathy choorna<sup>5</sup> which is also Pitta shamana (alleviated Pitta)<sup>5</sup>. These two medicines helped to subside the inflammation of the conjunctiva with the symptoms of discharge and irritation.

According to Ashtanga Hridaya, Arjuna can be managed by aschothana (instillation) with sharkara (sugar), mastu (whey of curd) and kshoudra (honey)<sup>6</sup>. Sharkara and kshoudra have the properties of Raktha Pitta shamana (alleviate kapha and Pitta)<sup>7</sup> and are hence used in subconjunctival haemorrhage. Mastu (whey of curd), which is lakhu (light) and kashaya rasa (astringent taste), helps in srotoshodhana (relieves obstructions)<sup>8</sup> and hence is beneficial here. Aschothana is done with 2 drops 6 times daily, so 12 drops daily. According to Sharangdhara Samhita, for Pitta pradhana vyadhi, the ropana type of aschothana should be used, which is 12 bindu (drops)<sup>9</sup>. Aschothana was used only during the daytime, as it is contraindicated during night<sup>10</sup>.



Figure 2: Left eye after 5 days of OPD management

#### CONCLUSION

The treatment of subconjunctival haemorrhage is done using the classical approach with a single procedure and minimal internal medicines, and the results are better within five days. However, caution should be taken in cases of systemic symptoms. So, it is evident here that subconjunctival haemorrhage could be managed easily with minimal procedure and medicines in minimal days.

#### REFERENCES

- AK Khurana, Comprehensive Ophthalmology, 7th edition, Jaypee Brothers Medical Publishers, New Delhi, chapter 5, Diseases of Conjunctiva, 2019; p 92
- KR Srikantha Murthy, Vagbhata's Ashtanga Hridaya, 11th edition, Chaukhamba Krishnadas Academy, Varanasi, Volume 3, chapter 10, Sandhi-Sita-Asita roga vijnaneeya, Verse 17a, 2020; p. 91
- 3. KR Srikantha Murthy, Vagbhata's Ashtanga Hridaya, 11th edition, Chaukhamba Krishnadas Academy, Varanasi, Volume 3, chapter 10, Sandhi-Sita-Asita roga vijnaneeya, Verse 20, 2020; p. 92
- T. Sreekumar, Ashtanga Hridaya Vagbhata, 6th edition, Harisree Publications, Thrissur, Sutrasthana-1, Chapter 15, Shodhanadi gana Sangrahaneeya, Verse 16, 2017; p. 339
- KV Krishnavaidyan, S. Gopalapilla, Sahasrayogam, 38th edition, Vidyarambham Publications, Alappuzha, Choornayogas, 2022; p. 165
- KR Srikantha Murthy, Vagbhata's Ashtanga Hridaya, 11th edition, Chowkhamba Krishnadas Academy, Varanasi, Volume 3, Chapter 11, Sandhi-Sita-Asita roga Prathishedha, Verse 11b, 2020; p. 97
- T. Sreekumar, Ashtanga Hridaya Vagbhata, 6th edition, Harisree Publications, Thrissur, Sutrasthana-1, Chapter 5, Dravadravya Vijnaneeya, Verse 49, 51, 52, 2017; p. 122-123

- T. Sreekumar, Ashtanga Hridaya Vagbhata, 6th edition, Harisree Publications, Thrissur, Sutrasthana-1, Chapter 5, Dravadravya Vijnaneeya, Verse 34b, 2017; p. 119
- Brahmananda Tripathi, Sharangdhara Samhita, Chaukhamba Surbharati Prakashan, Varanasi, Uttar Pradesh, Chapter 13, Netraprasadhana Vidhi, Verse 13a, 2019; p. 279
- Brahmananda Tripathi, Sharangdhara Samhita, Chaukhamba Surbharati Prakashan, Varanasi, Uttar Pradesh, Chapter 13, Netraprasadhana Vidhi, Verse 12b 2019, p. 279

#### Cite this article as:

Adarsh Varma R and Drishya H Bhat. Ayurvedic approach in the management of Subconjunctival haemorrhage with respect to Arjuna: A Case Study. Int. J. Res. Ayurveda Pharm. 2024;15(4):12-14

DOI: http://dx.doi.org/10.7897/2277-4343.154106

Source of support: Nil, Conflict of interest: None Declared

Disclaimer: IJRAP is solely owned by Moksha Publishing House - A non-profit publishing house, dedicated to publishing quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. IJRAP cannot accept any responsibility or liability for the site content and articles published. The views expressed in articles by our contributing authors are not necessarily those of the IJRAP editor or editorial board members.