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**Case Report** 

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# AYURVEDIC APPROACH IN THE MANAGEMENT OF STYE: A CASE REPORT.

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# ABSTRACT

Stye is an infection of the sebaceous glands of Zeis located at the base of the eyelashes or the apocrine glands of Moll. Stye can be correlated to *Anjananamika* in *Ayurveda*. Signs and symptoms such as a boil with a red (Tamra varna) appearance and burning and pricking sensations around the eyelid (*Vartma pradesha*) will be present. Additionally, the condition is marked by mild pain with a soft, swollen eyelid (*Mridvimandaruja*). The treatment in Ayurveda involves various therapies like *Swedana* (hot compress), *Nishpidana* (applying pressure to drain pus), *Bhedana* (incision), *Pratisarana* (rubbing medicaments on the eyelids) and Anjana (collyrium). The main objective of this study is to assess the efficacy of *Bidalaka* (local application) and *Ashchyotana* (eye drops) along with oral medicines in treating the disease *Anjananamika*. A 26-year-old female patient presented at the *Shalakya Tantra* outpatient department of Jeevan Jyoti Ayurveda Medical College and Hospital, Aligarh, with complaints of multiple swelling in the right eyelid for eight days, pain and redness. Upon examination, the right eyelid showed oedema along the entire edge, with an abscess at the *apanga desha* (outer canthus). Based on these clinical signs and symptoms, the patient was diagnosed with *Anjananamika* and treated with *Kriyakalpas* tailored to the *roga Bala-condition's* severity. After a week of treatment, the symptoms entirely resolved, emphasising the effectiveness of the Ayurvedic approach in managing *Anjananamika*.

Keywords: Stye, Anjananamika, Kriyakalpas, Bidalaka, Ashchyotana

# INTRODUCTION

Ayurveda, an ancient comprehensive system of medicine, takes a holistic approach to treating various diseases. Over time, the knowledge of Ayurveda has expanded and been categorised into eight branches, known as the Ashtanga's of Ayurveda. Shalakya Tantra is a branch that specifically addresses diseases related to the eyes, ears, nose, and throat, specifically the diseases above the clavicle.1 Acharya Sushruta made significant contributions to the field of ophthalmology within Shalakya Tantra.

Stye, also known as Hordeolum Externum, is an infection that occurs in the sebaceous glands of Zeis, located at the base of the eyelashes or in the apocrine sweat glands of Moll. External styes appear as small, red boils on the outer eyelid, while internal ones develop inside the eyelids, affecting the meibomian sebaceous glands. In the latter case, the infection creates a red boil beneath the eyelid, with general redness and swelling on the exterior of the lid.<sup>2</sup>

Styes typically require medical intervention to resolve, are often painful, and tend to be chronic. The primary cause of the disease is usually a bacterial infection, most commonly caused by Staphylococcus aureus or the obstruction of an oil gland at the base of an eyelash. Although styes are frequently seen in infants, they can affect individuals of any age. Poor diet, lack of sleep, and eye rubbing are common triggers for developing styes.

Styes progress through two stages. In the first stage (stage of cellulitis), the stye begins as a small, red, and painful boil on the eyelid, along with swelling and tenderness. This is due to an infection of the eyelash follicle or sebaceous gland. As the infection progresses, the stye becomes more noticeable and can lead to the development of pus. In the second stage (stage of abscess), the stye reaches its full size, often forming a yellowish or white tip at the center, a sign of pus accumulation. The stye may eventually rupture and drain, relieving swelling and pain.

Treatment includes typically hot compresses during the cellulitis stage and in abscess drainage of pus, and rare cases, surgical excision is required. Other medical interventions include antibiotics such as eye drops or ointments, systemic anti-inflammatory medications, and analgesics to alleviate pain and reduce swelling.<sup>3</sup>

According to Acharya Sushruta, the symptoms of *Anjananamika* include *Dahatodavati*—a condition characterised by a small, soft, copper-colored boil with a burning sensation, pricking sensation and mild pain at the eyelid. This condition is associated with *Mridvi* (softness) and *Mandaruja* (dull pain) at the site of the eye's edge (*Vartma pradesha*).<sup>4</sup>.

Acharya Vagbhata has described the characteristics of *Pidika* as a type of pustule formed by the vitiation of *Rakta* (blood), typically located at the middle or end of the eyelids. In addition to *ruja* (pain) and *daha* (burning sensation), *Pidikas* are also accompanied by *kandu* (itching). These *Pidikas* are firm and fixed to the eyelid, resembling the size and shape of *mudga* (green gram). Acharya Adamalla further emphasises that these *Pidikas* are *Komala* (delicate) in nature.<sup>5</sup>

The treatment for *Anjananamika* follows specific treatment guidelines, which include various therapeutic techniques like *Swedana* (hot compress), *Nishpidana* (gentle pressure to drain the pus), *Bhedana* (incision), *Pratisarana* (application of medicaments over the lids) and *Anjana* (collyrium).<sup>6</sup>.

If the *Anjananamika* ruptures spontaneously, it should be carefully pressed to drain the pus. Following this, a mixture consisting of *Manashila* (realgar), *Ela* (cardamom), *Tagara* (Valeriana wallichii), *Saindhava lavana* (rock salt) and *Madhu* (honey) should be used for *Pratisarana* (rubbing on the lid margin).<sup>7</sup> If it does not rupture naturally, then *Pratisarana* with a combination of drugs like *Rasanjana* (aqueous extract of Berberis aristata) and *Madhu* (honey), and if necessary, *Bhedana karma* (incision) is performed.<sup>8</sup>

*Seka* (ocular irrigation), as suggested by Acharya Vagbhata, involves the use of medicinal plants like *Haridra* (turmeric), *Madhuka* (licorice), *Patola* (Luffa acutangula), *Lodhra* (Symplocos racemosa) and *Madhu* (honey).<sup>9</sup>

Since *Anjananamika* is primarily a condition caused by the vitiation of *Raktadosha* (blood), Acharya Yogaratnakara recommends *Raktamokshana* (bloodletting) using *Jalauka* (leech therapy) as a treatment principle.<sup>10</sup>

#### **Case History:**

A 26-year-old female patient presented at the *Shala-kya Tantra* OPD Jeevan Jyoti Ayurveda Medical College and Hospital, Aligarh, with complaints of multiple swelling in the right eyelid for eight days, pain, and redness. Upon examination, the right eyelid showed oedema along the entire edge, with an abscess at the *apanga desha* (outer canthus). Visual acuity was 6/6p on the right and 6/6 on the left. Other aspects of the external ocular examination were normal.

The treatment plan involved a combination of *kriya-kalpa* and internal medicines. For the *Bidalaka* (*lepa* – external application on the eye), a mixture of *Triphala churna* and *Yashtimadhu churna* was applied 2 times a day for the first 3 days, followed by 1 time per day for the next 4 days. For *Ashchyotana* (eye drops), *Ophthacare* eye drops were administered twice every 3 hours for 10 days. The internal medicines include *Triphala guggulu*, one tablet, twice a day (BID), after food (AF) for 10 days and *Gandhaka rasayana*, one tablet, twice a day (BID), before food (BF) for 15 days. The treatment protocol is designed to address eye care and balance the body's *doshas*.

# Procedure of Bidalaka:

The patient should lie in a supine position.

Depending on the condition, the *specified dravyas* must be selected and made into a *Kalka* (paste) form. After performing *Mrudu sweda* (gentle fomentation), the *lepa* has to be applied over the eyelids, excluding the eyelashes, for 20 - 30 minutes, depending on the condition of the *lepa* applied.

Before the *lepa* gets dried, the paste has to be removed, followed by *Mrudu sweda* using lukewarm water.

#### The procedure of Ashchyotana:

The patient can sit or lie down.

The *drava dravya* has to be instilled into the eyes from a distance of 2 *Angulas* (fingers' width).

The patient has to be asked to rotate their eyeballs while keeping their eyes closed for 60 seconds.

The dosage will be two drops, four times daily, depending on the disease's severity.

#### **Observation and Results:**

Before treatment, the patient presented pain, lid swelling, and watering of the eyes in the right eye. Additionally, the visual acuity in the right eye was 6/6p. However, after the treatment, these symptoms were completely resolved. The pain, lid swelling, and watering of the eyes had all disappeared, and the visual acuity in the left eye had improved to 6/6.

#### DISCUSSION

The signs and symptoms of *Anjananamika* in the present case are similar to those described in the classics. The condition involves the vitiation of Rakta (blood) and Mamsadhatu (muscle tissue), leading to swelling, pain, and possible complications if left untreated. In the present case, the patient was thoroughly examined, and a combination of external and internal treatments was prescribed, which led to positive results.

*Bidalaka* is a kriyakalpa in which a medicinal paste is applied to the affected area. In this case, Triphala churna and Yashtimadhu churna were used based on the symptoms presented. These drugs, when applied topically, penetrate the skin, increasing blood circulation and enhancing the absorption of the active ingredients. This helped reduce inflammation and provided relief to the patient's pain and swelling.

In Ashchyotana, eye drops were instilled into the eyes. This form of therapy is often used during the early stages of diseases such as Anjananamika, where symptoms like redness, swelling, and pain is present. The eye drops contain a mixture of ingredients with Chakshushya (eye health), Shothahara (antiinflammatory), and Vrana ropana (wound healing) properties. These helped reduce the symptoms and promote faster recovery.

Internally, the patient was prescribed *Triphala gug-gulu* and *Gandhaka rasayana*. *Triphala guggulu*, which includes herbs like *Haritaki*, *Vibhitaki* and *Amalaki*, is known for its anti-inflammatory and wound-healing properties.<sup>11</sup> *Gandhaka rasayana*, which contains ingredients like *Shudha Gandhaka* 

(purified sulfur), *Guduchi* (Tinospora cordifolia) and *Haritaki*, which is known for its antibacterial and antifungal actions, which further helped in treating the condition at the earliest.<sup>12</sup>

# CONCLUSION

The application of *Bidalaka* and *Ashchyotana*, along with the oral medicines, significantly enhanced the bioavailability of the drugs and provided effective relief from the symptoms of *Anjananamika*. The overall effect of the drugs includes antiseptic, antimicrobial, antibacterial, and anti-inflammatory, which help address the condition's root cause and provide promising results. This case supports the efficacy of Ayurvedic therapeutic techniques in managing eye disorders like *Anjananamika*, as described by ancient Acharyas. The modern ocular drug delivery system complements these traditional methods by enhancing the penetration and absorption of active compounds into deeper layers of the skin, facilitating better treatment outcomes.

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