

AYURVEDIC APPROACH ON CYSTOID MACULAR OEDEMA - A CASE REPORT

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ABSTRACT

Cystoid Macular Oedema or CME is a painless disorder that affects the central retina or macula. It refers to the accumulation of fluid in the outer plexiform and inner nuclear layer of the retina with the formation of a fluid-filled cyst. The primary symptom of macular oedema is blurry or wavy vision near or in the centre of your field of vision. **Materials and Methods:** A male patient of 48 yrs. presented in *Shalaky* OPD of GAMC Bengaluru with symptoms of diminished vision in his right eye for one year. The patient was diagnosed with cystoid macular oedema in the right eye for which he was given photocoagulation therapy but did not find much relief. So, he approached our OPD. After thorough examination patient was started with Ayurvedic Medicines. **Result:** The subject showed marked improvement both subjectively and objectively. **Discussion:** Oedema which is the terminus of the pathology in this condition has to be understood as *Ekanga Shophya*. Though *Kapha* is the predominant *dosha* involved in forming *Shophya* here, the *lakshanas* manifesting are that of *Vataja Timira*. So, in this case study, *Kapha Vata Hara* followed by *Shophya Hara* line of treatment is adopted.

Keywords: Cystoid macular oedema, *Shophya*, *Vataja Timira*, *Nasya*, *Punarnavadi Kashaya*.

INTRODUCTION

The macula is the central part of the retina that plays an important role in acute and detailed vision and thus helps with tasks involving fine details such as reading and driving. Cystoid Macular Oedema refers to the collection of fluid in the outer plexiform (Henle's layer) and an inner nuclear layer of the retina, centred around the foveola like changes¹. Presentation is with the blurring of vision especially for near tasks, and sometimes distortion. To correlate Cystoid Macular Oedema exactly to the disease mentioned in *Ayurveda* is difficult but it can be categorised under *Drishtigata Roga* with *Vata Kapha* involvement. The treatment is given based on *Doshas* involved.

CASE REPORT

Basic information of the patient, Age: 48, Sex: male, Religion: Hindu, Occupation: Engineer

Chief Complaints: Patient complaints of diminished vision in his right eye for one year.

History of present illness: The patient was said to be asymptomatic 1 year before. Then he gradually developed blueness of vision in the right eye. For this complaint, he approached an ophthalmologist and was diagnosed with cystoid macular oedema in the right eye for which he was given photocoagulation therapy, but did not find much relief. So he approached *Shalakya* OPD of GAMC Bengaluru.

History of past illness: The patient is a known case of Diabetes Mellitus for 5 years for which he was taking medicines and was under control.

Family history: Nothing significant.

Examination

Systemic examination: No abnormalities

examination

Head posture	Normal posture
Visual acuity	Distant vision PH Near Vision
	RE 6/36 6/36P N8
	LE 6/12P 6/12P N6

Distant direct ophthalmoscopic examination		
LE	Normal	
RE	Cystoid macular oedema	
	Fundus	Pale
	Optic disc	No demarcation in disc margin
	Macula	Macular oedema
	Fovea	Loss of foveal contour

Investigations

Hb	13.4 gm/dl
FBS	120 mg/dl
PPBS	150 mg/dl
HbA1C	6.9%

OCT imaging was done. Given in figure number 1.

Diagnosis: Cystoid macular oedema.

Treatment given

S no	Treatment	Drug and Dosage	Duration
1	<i>Deepana & Pachana</i>	<i>Chitrakadi Vati</i> 1 tid b/f	3 days
2	<i>Sadyo Virechana</i>	<i>Gandharvahastadi taila</i> ² (30 ml)	1 day
3	<i>Nasya</i>	<i>Anutaila</i> 8 drops in the morning	7 days

4	Seka	Triphala & Punarnavadi Kashaya	7 days
5	Shiro Talam	Asanamanjistadi Taila & Kachooradi Choorna	7 days
6	Takradhara	Musta + Amlaki Kashaya Sadhita Takra	7 days
7	Shamanoushadi	1. Punarnavadi Kashaya ³ + Varunadi Kashaya ² (20 ml BD b/f) 2. Chandraprabha Vati ⁴ 2 BD A/f 3. Shiva Gutika 1 BD A/f	During the treatment time, the following drugs were administered at appropriate times.
8	Rasayana	Dashamoola Haritaki Lehya ⁵ 1 tsp at night after food	1 month

Result: Much improvement was observed both subjectively and objectively as shown below the table.

Visual acuity	R E	L E
After 15 days	6/24	6/12
After 1 month	6/18P	6/12
After 2 months	6/12P	6/9P
HbA1C	6.1%	
Distant Direct Ophthalmoscopy	Oedema in the macular region reduced. No cystic space around the foveal region.	

DISCUSSION

We can't find a direct correlation of Cystoid Macular Oedema in *Ayurveda*. Oedema which is the terminus of the pathology in this condition has to be understood as *Ekanga Shopha*. Though *Kapha* is the predominant *dosha* involving in forming *Shopha* here, the *lakshanas* manifesting are that of *Vataja Timira*.

Probable mode of action:

Chitrakadi Vati: - was given for *Ama Pachana* and *Vatanulomana* action. **Virechana Dristi** is *pitta sthana*. Hence *Virechana* is the first line of treatment for most *Drishtigata Rogas*. Here it clears the *avarana* of *Kapha* and *Pitta* to *vata dosha*. **Nasya:** *Nasya* is given to bring *Pitta Vata Shaman* in *Drishti* and does *Indriya Dridakarana*. **Seka:**-with *Chakshushya Dravyas* like *Punarnava* and *Triphala* reduces oedema by mechanical pressure and increases the bioavailability of drugs. **Shirotalam:** - with *Kachooradi Choorna* (*Tridosha shamaka, Raktapitta hara, Sukshma Srotogami*) and *Asana Manjistha Taila* (which does *Pitta Samana* in *Drishti*). The active ingredients of the medicinal paste which is covered over the scalp will cross the cell membrane and enter into the circulation. **Takradhara:** *Takradhara* on *Shiras* is claimed to be a unique remedy for disorders of *Shiras, Karna* and *Netra*. Hence it is employed here for added benefit. **Shamanoushadis:** *Punarnava Kashaya* is *Tikta Rasa*

Pradhana, Shothahara, Rasa Rakta Prasadana. Varunadi Kashaya is *Kapha Medo Hara, Antarvidradhi Hara. Chandraprabha Vati* is *Balya, Rasayana, Tridoshahara, Vatanulomana, Medohara, Sopha Hara. Shiva Gutika* is *Balya Rasayana*, having *Lekhana* action *Dashamoola Haritaki Lehya* is *Rasayana*, which is having *Sarvanga Sopha Hara* action.

CONCLUSION

Cystoid macular oedema is considered a major vision-threatening disease. But *ayurvedic* medicines have a good role in many ophthalmic diseases. A well planned combined therapy can result in good outcomes with patient satisfaction. *Ayurvedic Panchakarma* therapies along with *Netra Kriya Kalpas* and *Shamanoushadis* in a planned way is found to be effective in treating Cystoid Macular Oedema with a better visual outcome.

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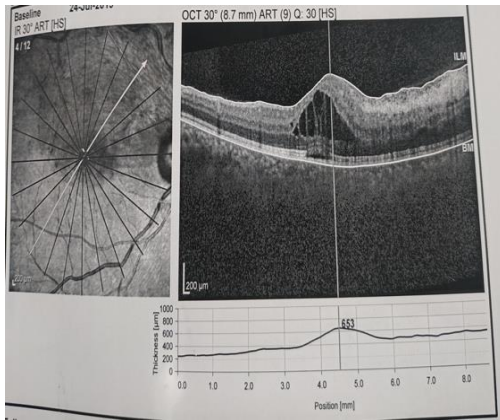


Figure 1: OCT BEFORE TREATMENT

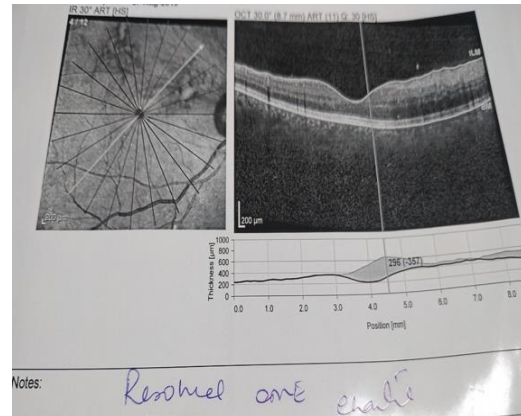


Figure 2: OCT AFTER TREATMENT

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