Research Abstract

Clinical study on evaluation of anti-cataract effect of Triphaladi Ghana Vati and Elaneer Kuzhambu Anjana in Timira (immature cataract)

Bhati H and R. Manjusha

Abstract: Senile cataract is the leading cause of blindness according to the World Health Report, 1998. In Ayurveda visual disturbances are described in the context of Timira, Kacha and Linganasha. Timira is an early stage characterized by blurring of vision and Linganasha is end stage where complete loss of vision occurs. Ayurveda has advocated different Anjana application and oral medications in the Timira and Kacha stage.

Aim: To study the efficacy of test drugs Triphaladi Ghana Vati and Elaneer Kuzhambu Anjana in immature cataract.

Materials and Methods: Patients having Senile Immature Cataract were randomized with equal probability to one of the two treatment Groups A and B (n = 20 each). In Group A Triphaladi Ghana Vati 500 mg internally for 3 months and in Group B Triphaladi Ghana Vati 500 mg internally and Elaneer Kuzhambu Anjana for local application were given. Assessment was done on the basis of blurring of vision, visualization of non-existing things, difficulty in bright light and dim light or night vision, distant visual acuity, pinhole vision, best corrected visual acuity and cataract grading on slit lamp.

Results: Both groups showed statistically significant changes in blurring of vision, difficulty in glare, daytime and bright light, distant visual activity, pinhole vision, and best-corrected visual acuity. Group B also showed significant changes in difficulty in night time, visualization of nonexisting things and in nuclear cataract.

Conclusion: The study establishes that test drugs can reduce and control the progress of immature cataract, and combined therapy with systemic and topical administration was found more effective management of Timira (senile cataract). Chakshushya Rasayana, early diagnosis and proper management on Doshic lines can prevent arrest or delay senile cataract.

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Cushing’s Syndrome – An Ayurvedic Approach

Hormones are chemical messengers released from endocrine glands that coordinate the activities of multiple organs and systems (srotas) from Central Nervous System to Excretory System. Srotas has been defined as channels in which parinamana (metabolism) and abhihvanah (circulation) takes place. The coordination between the different Srotas is brought about by nervous system and endocrine system. Both have the capacity to initiate and inhibit the action, thus maintaining the coordination. Nervous system coordinates with the help of nerve impulse whereas the endocrine coordinates with the help of hormones that are secreted within the intestinal fluid surrounding the secretory cells, which through blood vessels reach the target organs where they carry out the initiatory or inhibitory action.

Hormone release in the hypothalamus and pituitary is regulated by numerous stimuli and through feedback control by hormones produced by the target glands (thyroid, adrenal cortex and gonads). These integrated endocrine systems are called ‘axes’. Caraka has explained integration with the help of Vata (deham tantrayate samayak) & it’s five types. Although mula sthana (root) of 5 types of Vata has been explained at different sites in the body, all are interrelated.

A stressor is a chemical or biological agent, environmental condition, external stimulus or any event that causes stress to an organism. Stressors have physical, chemical and mental responses inside the body. Physical stressors produce mechanical stresses on skin, bones, ligaments, tendons, muscles and nerves that cause tissue deformation and in extreme cases tissue failure. Chemical stressors also produce biomechanical responses associated with metabolism & tissue repair. Stressor stimulates the hypothalamus. Astanga Sangrahakaro has mentioned dhri, dhriti, smriti, mano bodhana as karma of Udana i.e. to analyze a situation. For example, if snake is far away from the body there is no fight or flight situation whereas if it is next to the body there is sudden fight or flight condition. It means Udana vayu helps mones (mind) to get avabodhodana (realization) of the surroundings. It can be compared with analyzing the feedback signal received from various body organs and systems. The situation is analyzed and signal is sent to hypothalamus where Prana vayu takes the decision for inhibitory or initiative action to be taken - this is understood by the dharana karma (disposition) of buddhi and chitta i.e. Manas. Hypothalamus secretes the Corticotropin

Releasing Hormone (CRH), which stimulates the pituitary gland to release Adrenocorticotropic Hormone (ACTH). Udana Vayu by its prayatna (efforts) & urja (energy) karma helps in the secretion. ACTH is taken to adrenal cortex with the help of Vayana Vayu. Vayana Vayu is said to be fast acting i.e. within fraction of seconds ACTH reaches the adrenal cortex. Adrenal Cortex secretes various stress hormones, which is stimulated by Samana Vayu. It signals for the samana anayat karma i.e. to maintain homeostasis thereby releasing the hormones into the blood stream. The stress hormone released in blood is again taken by Vayana Vayu to various organs like heart, intestine etc. to cause the fight-or-flight response. After the response the Apana Vayu comes into action to excrete the hormones and neutralize the effect.

Between this flow there is an alternate path that can be taken after the stressor is transferred to the hypothalamus (Udana and Prana karma), which leads to the stimulation of sympathetic nervous system (Vayana Vayu), after which, the Adrenal Medulla secretes epinephrine (Samana Vayu) into the blood and with the help of Vayana Vayu it spreads throughout the body to cause the fight or flight response.

Pathophysiology of Cushing’s syndrome: Paraventricular nucleus (PVN) of the hypothalamus (Prana Vayu) analyze the situation, Udana Vayu by its prayatna & urja karma along with Prana Vayu helps in the release of CRH which stimulates the pituitary gland to release ACTH that travels via the blood to adrenal gland (vayana rasa dhatu vikshepa uchita karmanah). ACTH stimulates the release (Samana Vayu) of Cortisol. Elevated levels of cortisol if able to analyze by Udana vayu exerts a negative feedback. If unable to analyze by Udana Vayu, hypercortisolism occurs leading to Cushing’s syndrome. Normally Apana Vayu excretes and neutralizes the effect of Cortisol in the blood.

Case Study

How Ayurveda benefits in a chronic case of Amoebic Dyentery -

Key words: Ayurveda, Amoebic Dyentery, Grahani, Agni, Vata, Ama.

Amoebic Dyentery or Amoebiasis is an infection of the colon caused by the parasite Entamoeba histolytica and it is a health concern worldwide. The spread is through contaminated water and food. This infection can remain asymptomatic or present with mild or severe symptoms like abdominal pain, diarrhea, bleeding per rectum, bloating, belching etc. It affects the inner lining of the intestines causing inflammation and in severe cases perforation and peritonitis. If the infection gets into the blood stream it can spread to the liver causing complications of the disease like liver abscess, anemia and even death due to blood loss.

Objective of this case report is to show that Ayurveda benefits in chronic cases of Amoebic Dyentery.

Case study: An Indian male aged 67 years, retired banker, walked into the clinic with complaints of bloating and urja for defecation immediately after intake of any type of food at any time of day. Dietary history included several days of undigested food particles 4-6 times per day, burning in the epigastrium and lower part of the abdomen. Similar episodes repeated almost twice a month for which he was treated with antibiotics every time for past 20 years. The symptoms are continuous since 1 year. He was diagnosed of amoebic dysentery 20 years back during the first severe episode and a few subsequent reports were positive for the parasite. The endoscopy and colonoscopy reports 2 years old showed multiple scattered erosions. During the patient’s visit, abdominal examination revealed grade II tenderness in the epigastrium, umbilical, left lumbar and right iliac regions. Blood parameters, mainly hemoglobin (11.5g%) and white blood cell counts (8,500/cu.mm) were within normal, erythrocyte sedimentation rate (35 mm at 1 h) was higher than the normal, Liver Function parameters were within normal range and stool examination did not show presence of the organism but was positive for presence of the organism but was positive for presence of mucus.

Due to chronicity of the infection to the body

Discussion: In this case the jatharagni was hampered along with Samaana and Apana Vata causing Ama and Aitihaa (diarrhea). The correction of these with medicines having the qualities of aha pachana, agni deepana along with shamshanaka effect is the ideal treatment. Such that food is retained in the stomach until the time of digestion and then passes through a healthy gut for better absorption of nutrients.

Conclusion: Ayurvedic medicines can help prevent the recurrence of amoebiasis in a previously infected person and also help reverse the damage caused by the infection to the body.

Ambika P. Nayak Masters In Ayurveda Ph.D.