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LITERARY REVIEW OF *Abhishyanda* AND IT'S CORRELATION WITH CONJUNCTIVITIS

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ABSTRACT

Abhishyanda, a severe eye disorder, is equivalent to conjunctivitis in modern medicine. Characterized by conjunctival inflammation, it can spread through the bloodstream (*Rakta*) and lead to complications like *Adhimanth* (acute pain) and other ocular diseases. If left untreated, *Abhishyanda* can cause *Sandhigat roga* (joint disorders), *Shuklagat roga* (reproductive issues), *Krishnagat roga* (skin diseases), *Vartmagat roga* (skin lesions). So Ayurvedic classics categorize *Abhishyanda* into four types is Vataja *Abhishyanda*, Pittaja *Abhishyanda*, Kaphaja *Abhishyanda* and Raktaja *Abhishyanda*. Excessive eye discharge is a hallmark symptom of *Abhishyanda*, resulting from *Kledana* (imbalance) in *Doshas* and *Dhatus*.

Ayurvedic management approaches for *Abhishyanda* include *Anjana* (collyrium), *Pariseka* (liquid pouring), *Pralepa* (paste application), *Aschyotana* (eye drops), *Tarpana* (nourishment), *Sweda* (sweating), *Putpaka* (fumigation) and specific Ayurvedic formulations and herbs offer relief. This article aims to analyze the concept of *Abhishyanda* as described in Ayurveda and correlate it with conjunctivitis based on etiology, pathogenesis, clinical features, and classification.

KEYWORDS: Ayurveda, Netraroga, *Abhishyanda*, Shalakyatantra

Introduction:

Ayurveda provides a comprehensive description of ocular diseases under the branch of Shalakyatantra. Among all eye disorders, *Abhishyanda* holds a pivotal position. Acharya Sushruta states that *Abhishyanda* is the root cause (*Moola Roga*) of almost all *Netra Rogas* and that improper or delayed management can lead to severe ocular complications. The disease is characterized by excessive discharge and inflammation

affecting the entire eye. In modern medicine, conjunctivitis is one of the most frequently encountered ocular conditions, affecting individuals across all age groups.

It is a major cause of outpatient ophthalmology .it posses a significant public health burden. Despite differences in terminologies and explanatory models, *Abhishyanda* and conjunctivitis show remarkable similarity in their clinical presentation. Exploring this correlation is essential for validating *Ayurvedic* concepts and developing integrative approaches to ocular health.

Materials and Methods:

Classical *Ayurvedic* references from *Sushruta Samhita*, *Astanga Hridaya*, *Madhavanidana*, and *Charaka Samhita* were reviewed, along with modern ophthalmological literature on *Abhishyanda* Key focus was given to *Nidana* (etiological factors), *Samprapti* (pathogenesis), and *Chikitsa* (treatment modalities). Emphasis was placed on *Ayurvedic* therapies such as *Anjana* (collyrium), *Pariseka* (liquid pouring), *Pralepa* (paste application), *Aschyotana* (eye drops), *Tarpana* (nourishment), *Sweda* (sweating), *Putpaka* (fumigation) and specific *Ayurvedic* herbs that offers relief.

DISESES REVIEW :

Nirukti (Definition):

Abhishyanda is derived from the Sanskrit root “*Syand*”, meaning excessive flow or discharge.

It is classified under *Sarvagata Netra Roga*, indicating involvement of all ocular structures

Bheda (Classifications):

Based on *Dosha* predominance, *Abhishyanda* is classified into:

1. *Vataja Abhishyanda*
2. *Pittaja Abhishyanda*
3. *Kaphaja Abhishyanda*
4. *Raktaja Abhishyanda*

Nidana (Causative factors):

The causative factors of *Abhishyanda* include:

- Exposure to dust, smoke, wind, and sunlight (*Raja, Dhuma, Vayu, Atapa*)
- Excessive crying, eye strain, and improper visual habits
- Consumption of incompatible, spicy, sour, or heavy food
- Suppression of natural urges
- Seasonal variations and environmental irritants

Samprapti (Pathogenesis):

In the *Samprapti of Abhishyanda* Vitiated *Doshas* affect the *Rakta Dhatu* and *Ashru Vaha Srotas*, leading to congestion, inflammation, and excessive ocular discharge. If untreated, *Abhishyanda* may progress to more severe eye disorders such as *Adhimantha* and *Drishtigata Rogas*.

Lakshanas (Clinical features):

congestion, inflammation, and excessive are common features.

Types Lakshanas

Vataja Abhishyanda: Pain, foreign body sensation, dryness

Pittaja Abhishyanda: Redness, burning sensation, yellowish discharge

Kaphaja Abhishyanda: Itching, heaviness, thick white discharge

Raktaja Abhishyanda: Severe congestion, burning, intolerance to light

Chikitsa:

Snigdha or *ushna* drugs used for *Vataja abhishyanda*. *Mrudu* and *shitala* therapy recommended for *Pittaja abhishyanda* while *Tikshna*, *Ruksha* and *Vishada* drugs advised for *Kaphaja abhishyanda*.

Snehan, *Swedana*, *Anjana*, *Seka*, *Ruksha Aschyotan* & *Ruksha Putpaka*, etc. are useful for *Kaphaj Abhishyana*.

Local application of paste of drugs to eyelids externally, here drugs like *Rasanjan*, *Shunthi*, *Vacha*, *Haridra* and *Murungi*, etc. can be used for the purpose of local application in case of *Abhishyanda*. *Tikshna gandusha* & *Nasya* also advised when symptoms are manifested, *Snehana* with *Ghee*, *Sneha virechana*, *Snehana nasya* and *Sirobasti*, etc. also advocated to relives symptoms of *Abhishyanda*

Oral administration of *Sahacharadi ghruta* or *Taila Sneha Virechana* of *Tilwak ghruta* with *Tilwak kashay Sneha basti* or *Anuvasana basti* to removes vitiated *Doshas*.

Nasya with *Shatavari*, *Dashmula*, *Balamula* and *Siddha Tail*, etc.

Tarpana with *Shriparni*, *Erand* and *Nagarmotha*, etc.

Snehik putpaka also advised.

Ascyotana of goat's milk boiled with the bark of *Tagara*, *Manjishta* & *Hribera*, etc.

Anjana formed due to the mixture of *Haridra*, *Jeshtamadha* and *Haritaki*, etc. with goat's milk.

Aanupves varena shiro vadana lepa is considered useful.

Saktu pindika is used for *Vataja Abhishyanda*.

Granny leaf paste relieves pain and swelling.

Chirchite paste reduces inflammation. *Prajmoda* juice when applied then helps in conjunctivitis. *Chandi* milk provides soothing effect.

Rose-paste mixed with butter relieves symptoms of conjunctivitis.

Tulsi leaves helps to reduce inflammation.

Triphala Churna is considered good for spurring allergic inflammation and burning sensation.

Chandroyati Vati improves allergy resistance, thus can be advised for conjunctivitis.

Discussion:

Ayurveda views *Abhishyanda* as a systemic disorder influenced by diet, lifestyle, and environmental exposure, while modern medicine primarily focuses on local inflammatory pathology. The *Ayurvedic* classification based on *Dosha* dominance allows individualized treatment and preventive strategies. Concepts such as *Dinacharya*, *Ritucharya*, and *Netra Kriya Kalpa* emphasize prevention and long-term ocular health. Integrating these principles with modern diagnostic and therapeutic measures may help reduce recurrence and improve outcomes in conjunctivitis.

Conclusion:

Abhishyanda described in *Ayurveda* shows strong conceptual and clinical correlation with conjunctivitis of modern ophthalmology. Both conditions share maximum similarities in etiology, clinical features, discharge from eyes, and disease progression. Understanding this correlation provides a scientific basis for integrative ophthalmic approach.

DISEASE REVIEW AS PER MODERN SCIENCE

Definition:

Conjunctivitis is defined as inflammation of the conjunctiva characterized by redness, discharge, irritation, and discomfort of the eyes.

Etiology:

Infectious (bacterial, viral)

Allergic condition

Chemical or environmental irritants

Classifications:

Based on Onset:

1. Acute conjunctivitis
2. Chronic conjunctivitis

Based on infection & Allergy:

1. Bacterial conjunctivitis

2. Viral conjunctivitis
3. Allergic conjunctivitis

Other types:

1. Giant papillary conjunctivitis (GPC)
2. Chemical conjunctivitis
3. Neonatal conjunctivitis

Clinical Features:

- Conjunctival hyperemia
- Watery or mucopurulent discharge
- Itching and burning sensation • Photophobia in severe cases.

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