Ayurvedic management of subconjunctival hemorrhage – a case study

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ABSTRACT:
Redness in eye draws an attention of people which makes them to rush OPD. Conjunctiva is a translucent mucous membrane which lines the posterior surface of the eyelids and anterior aspect of eyeball where subconjunctival hemorrhage is small petechial hemorrhage to an extensive one spreading under the whole of bulbar conjunctiva. In Ayurveda it can be compared to arjuna which comes under shuklagata roga. In this present study case of sub conjunctival hemorrhage is managed with kriyakalpa procedures and internal medication.

I. INTRODUCTION:
Subconjunctival hemorrhage also called ecchymosis, is due to rupture of small vessels beneath the conjunctiva. This can occur spontaneously in elderly people with fragile vessels or those with systolic hypertension. Causes of subconjunctival hemorrhage includes increased blood pressure, diabetes, hyperlipidemia, trauma by contact lenses which are used for cosmetic purpose or any foreign body, vigorous rubbing of eye. Among this hypertension has been shown to be major risk factor. It is usually symptomless except reddish discoloration which patient consider it as major symptom. It can be correlated to arjuna in Ayurveda. Symptom are shasharudhiropamstu bindu draws attention of people to approach opd soon. It is better managed with Ayurveda classical approach which is aimed at to treating the dosha which is mainly involved. Here the treatment principle is told by acharyas is pitta raktachhishyandavat chikitsa.

Presenting concern:
A 58 year old woman, with a history of raised blood pressure on medication who is having no previous history of any ophthalmic complaints approached shalakya department SKAMC OPD section with complaint of sudden redness in left eye without pain observed after getting up from the bed with mild difficulty in seeing bright light.
On slitlamp examination there was no ocular foreign body and it was revealed localized hemorrhage under conjunctiva which was extending from outer chuckus upto the limbus in left eye and right eye findings were normal. As she was hypertensive which was one of the major cause of subconjunctival hemorrhage the treatment was planned with regular control of hypertension.
Associated complaints: Raised blood pressure, internal haemorrhoids

On examination: visual acuity in right eye was 6/9 and 6/12p in left eye.
On slit lamp examination

<table>
<thead>
<tr>
<th>Organ</th>
<th>Right eye</th>
<th>Left eye</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eye lids and lashes</td>
<td>Normal</td>
<td>Normal</td>
</tr>
<tr>
<td>Eye lashes</td>
<td>Normal</td>
<td>Normal</td>
</tr>
<tr>
<td>Conjunctiva (bulbar conjunctiva)</td>
<td>Normal</td>
<td>Sub conjunctival hemorrhage present</td>
</tr>
<tr>
<td>Cornea</td>
<td>Normal</td>
<td>Normal</td>
</tr>
<tr>
<td>Lens</td>
<td>Normal</td>
<td>Normal</td>
</tr>
</tbody>
</table>
Systemic examination:
BP: 150/90 mmHg.
G C: moderate, afebrile
R/S: RR: 22/min, airways normal, no added sound.
CVS: S1, S2 heard.
CNS: conscious, oriented to time, place and person.

Treatment given:
1. Bidalaka with triphala yastimadhu for 5 days.
2. Seka with yastimadhu ksheerapaka for 5 days.
3. Netrapichu with triphala gritha for 5 days.
4. Vasa guduchyadi kashaya 3 tsp BID with 6 tsp of warm water for 10 days.

II. RESULTS:

<table>
<thead>
<tr>
<th>Date</th>
<th>Photophobia</th>
<th>Sub conjunctival hemorrhage</th>
<th>Chemosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>21/9/21</td>
<td>+++</td>
<td>+++</td>
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<td>22/9/21</td>
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</table>
III. DISCUSSION:
The disease subconjunctival hemorrhage is self limiting which will resolve within 7 to 21 days⁶, but as redness will reflect on society attention and also patient who consider this redness in eye is the major symptom will bring them to ophthalmic ODP. Moreover the fibrous connective tissue under the conjunctiva become more fragile with age, and the systemic hypertension causes microvascular changes in conjunctival vessels, which can be the reason for easy spread of hemorrhage in older hypertensive patients nevertheless if the blood pressure is controlled with medications. Hence wholesome reformatory care is needed to promote conjunctival tissue integrity, restoration of capillary anastomosis, and to accelerate the haemorrhagic decongestion mechanism.

The present case being hypertensive has the similar presentation of arjuna (subconjunctival haemorrhage) and treated using different modalities of kriyakalpa and oral medication which helped in resolving the hemorrhage in shorter duration.

Kriyakalpas are the special therapeutic procedures mentioned in shalakyatantara exclusively for ocular disorders. In this case bidalaka, seka and netrapichu have given apparent results within 5 day course of treatment and the internal administration of vasaguduchyadi kashaya helps to restore the integrity of conjunctival blood vessels.

Bidalaka: application of medicaments in the form of thin paste over the lid excluding the eye lashes constitutes bidalaka. In this case bidalaka was done using triphala and yashtimadhu. Triphala is tridoshahara and rasayana in nature having the property of anti oxidant , anti inflammatory and is rich in vit C. Yasti madhu being pitta rakta hara acts as potent anti inflammatory and wound healer thus reducing the congestion and chemosis.

Seka: Here yashtimadhu being chakshushya and both yastimadhu and ksheera has madhura rasa, snigda guna sheeta veerya and pitta rakta shamaka property helps to absorb the haemorrhage in short duration, and helps to maintain the tissue integrity of conjunctiva.

Netra pichu with tripha gritha: Triphala is tridoshaghna and gritha is pitta shakama in nature which is used for pichu . triphala is anti oxidative , immunomodulatory ,capillary strengthening,amalaki helps to absorb the hemorrhage.

Mode of action of procedures: The drugs used in these ocular procedures readily penetrate the eye lids as the skin over the eye lid is extensively thin .and helps to increase cutaneous blood flow there by enhancing better vascular absorption and helps in decongesting action thus mitigating the hemorrhage in short term.

Vasa guduchyadi kashaya: the combination of drugs used in this medicine is tikta kashaya rasa , laghu ruksha guna,sheetaveerya does rakta stambaka thus relieves the hemorrhage .The drugs with their anti oxidant propery prevents from
oxidative stress damage to the endothelium of conjunctival vasculature helps in proper nourishment of capillaries.

IV. CONCLUSION
Treatment of subconjunctival hemorrhage (arjuna) which is planned here is barirparimarjana with minimal internal medication which has given more better results within 5 days, but always caution should be taken on systemic cause which is causing the condition i.e. hypertension.

REFERENCES
[4]. Sushruta, Sushrutha samhita with nibandha samgraha commentary by Dalhanaacharya Uttar sthana shuklagata roga adhyaya, chowkamba surabhi prakashana; Varanasi: reprint 2013
[5]. Sushruta, Sushrutha samhita with nibandha samgraha commentary by Dalhanaacharya Uttar sthana raktabhishtya chikitsa adhyaya, chowkamba surabhi prakashana; Varanasi: reprint 2013