



A case report: “efficacy of *jeevantyadi ghrita netratarpana* in diabetic retinopathy”

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ABSTRACT:

Background:

Diabetic Retinopathy is a condition in which prime involvement is of blood vessels. *Netratarpana* is localized treatment procedure for inner pathological changes in eye disease, it is a noninvasive and very effective measure compare to other treatment procedures available in other *pathies*. Therefore effort for reassessment of *Netratarpana* has been done to understand the efficacy of *Jeevantyadi Ghrita* in diabetic retinopathy.

Objectives:

Detail study of Diabetic Retinopathy.
Detail study of *Jeevantyadi Ghrita Netratarpan* and *Raktapittahara* medicine

Methods: A case study of 48yr/male patient showing signs and symptoms of NPDR who is treated with *Jeevantyadi Ghrita Netratarpana* along with oral

medication for Diabetes.7 days *Netratarpana* with a follow up for every 15 days upto 2 months.

Result: Patient showed improvement in vision along with concern sign and symptoms. Vision improved from C.F 3 feet to 6/36 in Right Eye and in Left Eye from 6/60 to 6/18.

Conclusion: It is observed that *Jeevantyadi Ghrita Netratarpana* in the patients of diabetic retinopathy plays a potential role and provides immense information with its therapeutic use in wide range of eye disorders especially in the case of diabetic retinopathy

Keywords: *Netra, Jeevantyadi Ghrita, Netratarpana, Diabetic Retinopathy*

INTRODUCTION:

Diabetic eye diseases caused by diabetes which is a leading cause of blindness and vision loss. Among the diabetic eye



diseases diabetic Retinopathy has major contribution for vision loss.¹ According to WHO all people with diabetes age above 30 years should undergo eye checkup periodically.² The retinal damage probably originates from a state of hypoxia which results in an increased permeability of the capillaries, the formation of multiple micro aneurysms and local degenerative changes leads to the development of oedema, simultaneously the closure of areas of retinal capillary bed leading to retinal hypoxia and the subsequent risk of neovascularisation.³

Retina is the layer of tissue at the back of the inner eye and having dedicated blood vessels which nourishes the retinal tissue. Diabetes weakens those blood vessels further breakdown, leak and become blocked affecting and impairing vision.⁴

Modern medicine has sophisticated therapeutic agents and procedures but in patient do not show much improvement, therefore patient have to suffer with impaired vision. More over modern drugs or procedures cannot be used repeatedly as well as prolonged use may leave toxic effect on the tissue. Procedures like photo coagulation may damage underline tissue permanently.⁵ eventually the patients are looking at the alternative medicines which will sub serve the demands. With this view there is a need to find a safer drug and procedure to control the diabetic retinopathy.⁶ Ayurvedic texts, classics provide wide references on herbal and

herbo-mineral preparations which can be safely used initially as well as externally for longer period.

SYMPTOMS:

- a. Double vision.
- b. Cannot see in dim light and blind spots.
- c. Impaired field of vision
- d. Blur vision.
- e. Spots floating

SIGNS:

- a. Microaneurysms.
- b. Hemorrhage
- c. Cotton – wool spots.
- d. Hard exudates
- e. Macular edema.



AYURVEDIC VIEW

- According to Ayurveda it may considered as *Netragata Raktapitta*⁸ as describe in Ayurvedic text.

AIM

- To study the efficacy of *Jeevantiyadi Ghrita Netratarpan* on Diabetic Retinopathy and pathogenesis in detail.

OBJECTIVES

- Detail study of Diabetic Retinopathy.

- Detail study of *Jeevantyadi Ghrita Netratarpan* and *Raktapittahara* medicine

CASE REPORT

- A 48 year old /Male patient came to O.P.D of Netraroga (Shalakya Department) Y.M.T Ayurvedic Medical College &Hospital, kharghar, Navi Mumbai on 12 January 2017, with the complain of diminished of vision.
- He is k/c/o DM since last 15 years was regularly taking anti-diabetic oral medicine.
- On examination his visual acuity was Rt. eye (CF 3 feet) and Lt Eye 6/60 with normal IOP.
- Fundoscopy showing classical sign of NPDR

SAMPRAPTI

- Indulgence in Atiyoga of *Mithya aahar* and *vihara* resulting in vitiation of *pitta dosha* which leads to *sthana sanshraya* in *shareere* (Specially in *netra*) which leads to loss of vision.

METHOD

- *Jeevantyadi Ghrita Netratarpana* 7 days along with oral medication for Diabetes.
- Repeat sitting of *Netratarpana* with *Jeevantyadi Ghrita* after 7 days.

- Follow up after every 15 days upto 2 months.
- In between patient was instructed to do *Netra-Pichu* of *Jeevantyadi Ghrita* daily at home.

RESULT

- Patient showed improvement in vision along with concern sign and symptoms.
- Vision improved from C.F 3 feet to 6/36 in Right Eye and in Left Eye from 6/60 to 6/18.
- Fundus Examination of Left eye showed reduction in cotton wool-spots.
- Fundus Examination of Right eye showed diminished Hard Exudates.

DISCUSSION

- *Jeevantyadi Ghrita* contains *Jeevanti, Ksheer, Ghrita, Prapaundarika, Kakoli, Ksheer-Kakoli, Pippali, Lodhra, Saindhav, Shatavaha, Madhuka, Draksha, Sita, Daruharidra and Triphala.*
- *Ghrita* is poly unsaturated fat and lipid soluble hence rapidly absorbed across the tissue, easily synthesized and arrest the pathological changes of the retinal tissue and also it is one among the best Rasayan.
- *Jeevanti* is one among the best



chakshushya drug & most of the content of *Jeevantydi Ghrita* has tridosha pacifying action.

- *Tarpan* procedure in posterior segment disease of eye Diabetic Retinopathy is of great importance as most of the drug permeation to intra-ocular tissues occurs through the cornea to the aqueous humour and ciliary vessels.

CONCLUSION

The patient had symptomatic relief with significant improvement in visual acuity, in addition to that marked improvement seen in Fundoscopy. It can be concluded from this study, Diabetic Retinopathy can be treated with *Sthanik Kriyakalpa* i.e *Tarpan* along with systemic medicines. However, the pharmacodynamics and pharmacological action of *Tarpan* on Diabetic Retinopathy needs further study.

REFERENCES

1. Comprehensive Ophthalmology, A.K.Khurana, New Age International Publication, Fourth edition
2. Dravyaguna Vigyana Vol II, Prof.P.V.Sharma, Chaukhambha Bharti Academy, 1999.
3. Netra prakashika, Dr.Udaya Shankar, Chaukhambha visvabharati Varanasi, 2013.
4. Charak Samhita Vol. I and II, Acharya Vidhyadhar shukla, Chaukhambha Sanskrit Prakashan, 2008.
5. Sushrut Samhita, Kaviraj Ambikadutta Shastri, Chaukhambha Sanskrit Sansthan Varanasi, 2006
6. Kayachikitsa, Vd. Y.G.Joshi, Sau. Sampada Koptekar, 2001
7. Parson's Diseases of the Eye, RanjitShiota, RadhikaTandon, Saunders Elsevier, 21st edition.
8. Ashtang Sangraha, Ravidutta Tripathi, Chaukhambha Surbharti, 1999.
9. Clinical Ophthalmology, Jack Kanski, Saunders Elsevier, Eighth edition.

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