“Critical review on Adhimantha and its Ayurvedic Management.”

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Abstract:
Adhimantha is sarvagata netraroga explained in Ayurvedic texts in which there is an excessive churning type of pain in the eye and it afflicts all the parts of the eye hence called Sarvagata Netraroga. Half-sided headache (Shiraso-arsham vedana), excessive hot lachrymations, cloudy vision, and redness of the eye are associated symptoms of Adhimantha. It can be correlated to Glaucoma in modern science which is a group of eye conditions that damage the optic nerve due to increased intraocular pressure. Glaucoma can cause permanent blindness within a few years. According to Sushrutacharya, Adhimantha is sadhya when diagnosed and treated early but if the patient does not take proper treatment and continues Hetu seven, then there is loss of vision occurs. Abhishyanda (Conjunctivitis) is the main cause of Adhimantha. When Abhishyanda is not treated, then it gets complicated into Adhimantha, Hence the same course of treatment in Abhishyanda is given for Adhimantha which includes Tarpana, Putapaka, Aschotana, Bidalaka, lepa, Nasya, Shirobasti and Raktamokshan.

Key words: Adhimantha, Glaucoma, Siravedh, Aschotana, Tarpan.

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INTRODUCTION:

Shalakya Tantra is one of the branches of Ashtang Ayurveda which deals with the diseases of Urdhva-jatrugata Vikar, that is diseases of Netra (Ophthalmology), Karna- Nasa-Shira (ENT) Mukha (Dentistry).[^1] Adhimantha is one of the Netra rogas and it is a condition where there is excessive pain in the eye like a churning type of pain.

Adhi = Excessive  
Manth= Churning type of pain[^2]

Samprapti:

Due to Hetu like Abhighata (injury to eyes), Atisukshma-nirikshanat (seeing objects very far), Ratri jagarana (avoiding sleep), Krodha (anger), shoka(sorrow), etc. dosha get aggravated, and goes into sira over the eyes leads to diseases in all parts of the eye.[^3]

Acharya Sushruta and Vagbhata have described 4 types of Adhimantha as a result of Upadrava (complication) of 4 types of Abhishyanda as follows,[^4],[^5]

1. Vataja Adhimantha  
2. Pittaja Adhimantha  
3. Kaphaja Adhimantha  
4. Raktaja Adhimantha

1. Vataja Adhimantha:

In the Vataja type of Adhimantha, the eye becomes cloudy (Avila Netra- corneal haziness due to edema) and seems as if being torn out (Utpatyavata vedana) and churned (Mathyavata vedana) as with an Arani (fire-producing wooden stick) attended with an irritating, piercing (Todavata) and cutting (Bhedavata) pain, as well as with a swelling of the local flesh, and a half of the head on the side of the affected eye (Shiraso-ardham tivra vedana) is afflicted.[^6] Kampana (shivering), Karnanada (ear pain), and Bhrama(giddiness) are symptoms described by Acharya vagbhata.[^7]

2. Pittaja Adhimantha

The symptoms which mark the Pittaja type of Adhimantha are Agnidagdhavata vedana (a sensation therein of being burnt with fire), Shiro-daha (a burning sensation in the head) as well as Shotha (swelling), Sa-Sweda (perspiration), and Paaka (suppuration) in the affected organs, Pita-Darshana (yellowish vision), Murchha (fainting fits).[^8]

3. Kaphaja Adhimantha:

In the Kaphaja Adhimantha, there is shotha (the eye is swollen), Srava-Kandu (discharges with a sensation of itching), shaitya (coldness), Gauravrava (heaviness), Shiroshoola (headache), and Avila (the sight becomes cloudy, all objects seem to be full of dust), Harsha (horripilation). The eye becomes picchhilata (slimy) with a deposit of mucous matter.[^9]

4. Raktaja Adhimantha:
The eye becomes painful and incapable of bearing the least touch or contact, and the objects of vision seem as if enveloped in flames, prickling pain and a blood-streaked secretion from the affected organ which looks (bright red) like a Bandhujiva flower, are the symptoms that mark the type of Raktaja Adhimantha (due to the vitiated blood). The extremities of the eye become red and the whole origin of the cornea (Krushna-mandala- black coat of the eye) looks like an Arishta fruit submerged in blood.

Glaucoma:

Adhimantha can be correlated to Glaucoma in Modern science. Glaucoma is a condition where the eye's optic nerve, which provides information to the brain, is damaged with or without raised intraocular pressure. If untreated, this will cause gradual vision loss. The symptoms are eye pain, headache, foreign body sensation, lacrimation, redness of the eye and difficulty in vision, etc. Aqueous humour is the fluid inside the eye, that nourishes the lens and the cells of the cornea, which allows the cornea to maintain its convex shape which is necessary for good vision. The pressure inside the eye called the intraocular pressure is maintained at a constant due to the drainage of excess fluid out of the aqueous humor.

Causes of Glaucoma:

1. Increased pressure inside the eye due to the obstructed flow of aqueous humour may lead to glaucoma.
2. Family history
3. Association with other diseases like systemic hypotension, diabetes mellitus
4. Burn or chemical injury to the eye or trauma to the eye
5. Severe eye infection or inflammation (uveitis)
6. Diseases of the retina leading to abnormal vessels on the iris that may cause glaucoma

Most people with glaucoma have no early symptoms or pain. Glaucoma can cause permanent vision loss or even total blindness within a few years. Worldwide, glaucoma is the second leading cause of blindness which causes loss of vision over a long period.

AIM:

To study the concept of Adhimantha and its Ayurvedic Management.

MATERIALS AND METHODS

Acharya Sushruta has described types and Lakshana of Adhimantha in Uttartantra chapter no. 6 Sarvagataroga Vidnyaniya adhyaya and chikitsa in the 9th, 10th, 11th, and 12th chapters. In Ashtanga Hridaya, a detailed description of Adhimantha is given in uttarsthan chapter 15, Sarva-Akshiroga Vidnyanam adhyaya and its treatment in 16th chapter Sarva-Akshiroga Pratishedham adhyay.

RESULTS:

Ayurvedic Management of Adhimantha:

1. Vataja Adhimantha Chikitsa:
Vataghna drugs are used for the various procedures for the treatment of Vataja Adhimantha as follows,

<table>
<thead>
<tr>
<th>Treatment/Procedure</th>
<th>Drugs used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Snehan/Snehapana</td>
<td>Shatavari, Shringavera Siddha milk and rice, Puran ghrtapana, Vataghna drugs like Dashmoola, rasna Siddha ghruta or dugdha (milk), Triphaladi ghrtapana.</td>
</tr>
<tr>
<td>Swedan</td>
<td>Netra is Aswedya means Sweden should be avoided in Netra, hence Upanaha Sweda is given to the area around Netra by keeping cold cotton over the eyes.</td>
</tr>
<tr>
<td>Raktamokshan</td>
<td>If pain is not relieved by snehan Swedan then Raktamokshan should be done by siravedha at Upanasika, Lalayt, or Apanga Pradesh.</td>
</tr>
<tr>
<td>Snehavirechana</td>
<td>Tilvak ghruta</td>
</tr>
<tr>
<td>Basti</td>
<td>Anuvasana Basti of Vataghna drugs to pacify Vata prakopa.</td>
</tr>
<tr>
<td>Shiro Basti</td>
<td>Tila, Bela, Jeshthamadh siddha milk</td>
</tr>
<tr>
<td>Nasya</td>
<td>Rasna, Shatavari, Dashmoola, Kulithha, Badar siddha taila or ghruta.</td>
</tr>
<tr>
<td>Dhoompana</td>
<td>Agaru, Guggulu, Vala, Ghruta, Vasa</td>
</tr>
<tr>
<td>Tarpan and Putapaka</td>
<td>Kashmari, Madhuka, Kushta, Bruhati, Eranda, Jatamansi,</td>
</tr>
<tr>
<td>Parisheka</td>
<td>Eranda-patra or root, Kantakari root siddha milk.</td>
</tr>
<tr>
<td>Aschotana</td>
<td>Rhiber, Manjishtha, Udumbar Siddha milk</td>
</tr>
<tr>
<td>Anjana</td>
<td>Madhuka, Haridra, Hirada siddha milk</td>
</tr>
<tr>
<td>Pindika</td>
<td>Sakttu</td>
</tr>
</tbody>
</table>

2. Pittaja Adhimantha Chikitsa: [16]

Pittaja Adhimantha is generated when pittaja abhishyanda is neglected. First-line treatment for pittaja adhimantha is pittashamaka tikta, Madhura, Kashaya rasatmaka drugs having properties like sheeta, mrudu, guru, etc.

<table>
<thead>
<tr>
<th>Treatment/Procedure</th>
<th>Drugs used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Snehan/Snehapana</td>
<td>Mahatiktaka ghruta</td>
</tr>
<tr>
<td>Raktamokshan</td>
<td>siravedha at Upanasika, Lalayt, or Apanga Pradesh</td>
</tr>
<tr>
<td>Snehavirechana</td>
<td>Triphala, Kashmari kwath + Sharkara+ Trivrutta churna</td>
</tr>
<tr>
<td>Nasya</td>
<td>Ksheera-Sarpi, Sariva+sharkara+Kakoli+ kashmari swarasa, Yashti+ Ekshurasas</td>
</tr>
<tr>
<td>Tarpan and Putapaka</td>
<td>Drugs used in Nasya are useful.</td>
</tr>
<tr>
<td>Parisheka</td>
<td>Lodhra, Daruharidra, Yashti+Madhu(honey), Raktachandan+Sariva+Jatamansi+kumud siddha Ksheer(milk),</td>
</tr>
</tbody>
</table>
3. Kaphaja Adhimantha Chikitsa: [17]

When Kaphaja Abhishyanda is not treated and the person continues to take Kaphprakopaka ahar vihar then dosha gets more aggravated which causes Kaphaja Adhimantha. Hence all the Kaphaghna drugs are used for the treatment of Kaphaja Adhimantha.

<table>
<thead>
<tr>
<th>Treatment/Procedure</th>
<th>Drugs used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apatarpan/Langhana</td>
<td>For 3 days</td>
</tr>
<tr>
<td>Snehan/Snehapana</td>
<td>Tikta ghruta, Trikatu ghruta</td>
</tr>
<tr>
<td>Swedana lepa</td>
<td>Shweta arka, bilva, Kapitha</td>
</tr>
<tr>
<td>Rakamokshan</td>
<td>siravedha at Upanasika, Lalayt, or Apanga Pradesh</td>
</tr>
<tr>
<td>Snehavirechana</td>
<td>Kaphaghna dravya Siddha ghruta</td>
</tr>
<tr>
<td>Nasya</td>
<td>Avapidan nasya, Tikshna dravya nasya</td>
</tr>
<tr>
<td>Dhoompana</td>
<td>Madanphala, Bhojapatra, shami,</td>
</tr>
<tr>
<td>Kavalagraha</td>
<td>Tikshna dravya</td>
</tr>
<tr>
<td>Tarpan and Ruksha Putapaka</td>
<td>Kushta, Tagar, Darvi+ madhu+ghruta</td>
</tr>
<tr>
<td>Parisheka</td>
<td>Nimbapatra, lodhra, Kantakari, Sunthi</td>
</tr>
<tr>
<td>Aschotana</td>
<td>Ruksha dravya kwath</td>
</tr>
<tr>
<td>Anjana</td>
<td>Hlrada+Haridra+yashti, Saindhav+triphala+trikatu</td>
</tr>
<tr>
<td>Lepa/Bidalaka</td>
<td>TRIkatu+shigru+Kushta+Devdaru,</td>
</tr>
</tbody>
</table>

4. Raktaja Adhimantha Chikitsa: [18]

In Raktaja Adhimantha, most of the symptoms are similar to Pittaja Adhimantha, hence same treatment is the only difference is that in Pittaja Adhimantha Swedan is not followed by snehan but in Raktaja Adhimantha Rakta dushti is compared compare to Pittaja so after siravedha, there is Vataprakopa and this praVatata Vata mixes with Rakta and causes severe pain. HenceSwedau Sweda or Jalaukavacharana should be given. Rest of treatment as per Pittaja Adhimantha.

**DISCUSSION:**

Adhimantha as one of the Sarvagata Netrarogas mainly occure due to the negligence of Abhishyanda. According to symptoms, there are 4 types of Adhimantha and all these types if ignored or not treated it can cause vision loss as follows,
➢ All Adhimantha are Sadhya i.e. can be manageable if not ignored and treated on time along with Nidan parivajan and pathyapathya.

➢ According to Acharya Charaka, Bidalaka is very useful to relieve the redness of eyes, Netra-Daha (burning sensation of eyes), Netra-srava (Lacrimation) shotha (swelling/edema) in newly developed Netraroga called Taruna Netraroga. [19]

➢ According to Yogaratnakar, In Poorvarupa avastha Tikshna Shiro-virechan, Kavala-Gandush, Dhoompana, lepa, and Bidalaka is effective. In Saam Avastha Acharya has mentioned Aamapachana treatments like Langhana, Seka, Bashpasweda, Lepa of Tikta rasatmaka dravya, s, etc. Saam avastha lasts for 4 days hence all above treatments should be continued for 4 days. [20]

➢ In Nirama avastha after snehan-swedana Sarvadehika shodhana that is Vaman, Virechana, Basti and Raktamokshan should be done so that Sthanika dosha in Netra will not get increased.

➢ Ayurvedic treatments and formulations break the samprapti of the Adhimantha and relieve pain, improving vision.

CONCLUSION:

Adhimantha is Sarvagata netraroga caused due to complications of Abhishyanda and mainly characterized by churning type of pain and cloudy vision. At an early stage it can be treated by various Netra roga procedures like Aschotana, Anjana, Tarpana, Putapaka, Lepa, Bid, alaka, etc. Raktamokshan by Siravedha at Upanasika, Lalata, Apanga Prade sh is a more beneficial treatment for all types of Adhimantha. If Adhimantha is ignored and the patient does not follow the Pathyapathya and continues hetu sevan, it can cause loss of vision. Hence it is important to follow the basic principles of management of Netraroga Adhimantha that is Care of eyes, Nidan parivarjan, Management of Poorvarupa avs, atha, and treatment for recently developed Netraroga.

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