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REVIEW OF PAKSHMAKOPA VYADHI

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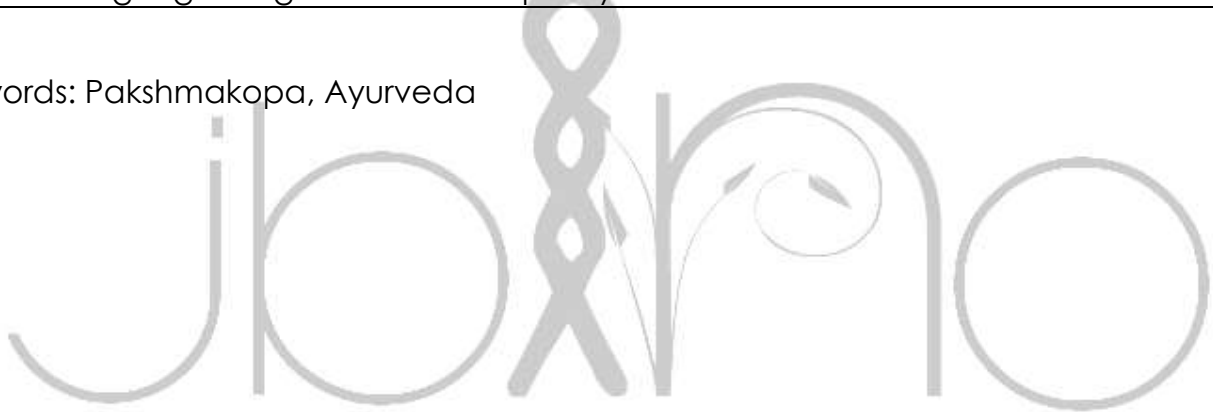
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ABSTRACT

Ayurveda, a science of life is the oldest treasure of medical science where many diseases have been described in detail with prognosis, internal medications and surgical interventions which is gradually achieved by western medicine and following the same with the aid of advanced technology. In the present article we are discussing regarding the Paksmakopa Vyadhi

Keywords: Pakshmakopa, Ayurveda



INTRODUCTION

A type of vartmaroga where the vitiated doshas causes inward turning of eye lashes (Nirvartayantipakshmani)⁸ The lashes directed inwards will damage both shukla and krishna mandala (sclera and cornea) hence surgical intervention (shastra, agni and kshara karma) is mentioned in ancient literature Surgical procedure of Pakshmakopa⁹ : POORVA KARMA After proper Snehana and shodhana, Patient should sit in proper position (Upavishta) PRADHANA KARMA The bulky part of the eyelid with an incision at two parts below the Bru (eyebrow), one part above the Pakshma (eyelashes), equidistant from the Apanga sandhi (outer canthi) and the Kaninika sandhi (inner canthi) should be excised obliquely in the shape & size of a barley-corn (Yavakarachedana) with the help of a sharp instrument. Then the surgeon should stitch the margins with (horse) hair and the part should be treated with ghrita and Madhu. PASCHAT KARMA Two end of the stitch should be fixed by a bandage over the forehead. When the surgeon has ascertained the scar is firmly united and lid has become stable (sthira) he should remove the stitches of hair. In case the above measure fails, the lid should be everted & the fold afflicted with the doshas be treated by agni karma and Ksara karma. Trichiasis surgery¹⁰ Epilation: Mechanical removal of eye lashes with forceps Electrolysis and cryoepilation: Method of destroying the lash follicles by electric current by double freeze thaw technique. Tarsal wedge resection and Transposition of tarso conjunctival wedge: When many cilia are misdirected Bick procedure modified by

Reeh: An inverted house shaped lid shortening is performed. We could see the reference of cutting the eye lashes with Badishayantra in case of extra line of lashes (Pakshma mala) and cut properly and it can be exactly correlated to Epilation technique (Mechanical remove of eye lashes with forceps). The reference of Agni karma (Cautery) in pakshmakopachikitsa draws one's attention towards Electrolysis technique of destroying the lash follicles what contemporary medicine practicing now Shuklagataroga³) ARMA It is a disease of Shukla Mandala (White part of eyeball) described by all Acharyas in Ayurvedic Text. The gradually spreading extra membrane in shuklamandala is known as arma (IyarthigacchathiithiArma) Five types of Arma have been described in the Ayurvedic text which is an example of fine elaboration of disease in ancient science are follow: PrastariArma- It is wide and thin structure having red colour mixed with blue, situated on the white part of eye ball. Shukla Arma- It is a soft, white structure progressing slowly and evenly on the white part of eye ball. KshatajArma- It is a developing muscle on the white part of sclera resembling in colour of lotus flower. It has been called RaktajaarmabyVagbhata. AdhikamamsajaArma- It is wide, soft, thick structure on the white part of eye ball resembling to the colour of liver i.e. brown. SnayuArma- It is progressing muscular growth in stripe shape, rough and pale in colour on white part of eye ball. Indications for Surgical treatment - When Armais fleshy, thick (charmabha) highly elevated (bahala), fleshy growth covered by tendon and muscle (snayumamsaavrita) which encroaching

cornea (krishnamandalaga) is indicated for chedana (excision). Surgical procedure for Arma: POORVA KARMA Patient should give oily food and gritha before surgery and is made to lie down in a bed, where head is slightly in a downward position or he can sit comfortably. The eyes should be given fomentation with a cotton cloth dipped in warm water. The powder of saindhava should be pasted with the juice of Bijapooraka and applied to the eyes (akshisamroshana). PRADHANA KARMA Paricharaka (attendant) should hold both the eyelids firmly to keep eye widely open and Patient is asked to look laterally towards apanga (outer canthus), hold the pterygium with Badishayantra at wrinkled area then lift the Arma for its clear separation with thread after passing the thread under its surface and elevate it gently with muchutyantra. The arma thus weakened should be cut at krishnamandala (cornea) leaving 1/4th part remain on shukla mandala (sclera) with mandalagrashastra then flap is lifted towards kanikasanghi. The residue should be scraped with the application of lekhananjana. For the next 5 days gritha should be given internally with warm water as anuupana. Bandage should be removed and fomented with karanjabeejaksheerapaka. Aschothana with lodra, yashtimadhu, palasha, patola, haridra, daruharidra mixed with honey. In conventional medicine it can be compared to Pterygium, a degenerative and hyperplastic condition of conjunctiva, where sub conjunctival tissue undergo degeneration and proliferates as vascularised tissue under the epithelium which graft. 4. Postoperative use of

antimitotic drugs such as mitomycin-C or thiotepa.

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