

An Ayurveda Management of *Vataja Abhishyanda* vis a vis Allergic Conjunctivitis : A Case Report

Dr. Bharath R¹, Dr. Sarbeswar Kar^{2*}, Dr. Gavimath Shivanand³, Dr. Madhusudhan B G⁴, Dr. Kushal A S⁵, Dr. Ramyashree H S⁶, Dr. Anil Kumar K M^{7*}

^{1,5,6}PG Scholar, Department of PG Studies in Shalaky Tantra, JSS Ayurveda Medical College, Mysuru

²Principal, Professor & Guide, Department of PG Studies in Shalaky Tantra, JSS Ayurveda Medical College, Mysuru.

³Professor & Head, Department of PG Studies in Shalaky Tantra, JSS Ayurveda Medical College, Mysuru.

⁴Professor & Head, Department of PG Studies in Roganidana & Vikruthi Vigyana, JSS Ayurveda Medical College, Mysuru.

⁷Department of Environmental Science, JSS Academy of Higher Education and Research, Mysuru - 570015. India

Corresponding author

Dr. Sarbeswar Kar

Email:ID: drskar2007@rediffmail.com

Email:ID: Anilkumareni@jssuni.edu.in

ABSTRACT

Vataja Abhishyanda (Allergic Conjunctivitis) falls under the category of the *Sarvagata Netraroga* (Eye Disease), *Vataja Abhishyanda* is considered as a root cause for all the diseases of Eye and if not treated leads to visual loss and vision impairment. *Vataja Abhishyanda lakshanas* can be compared with signs and symptoms of Allergic Conjunctivitis, which affects up to 40% of the population. This article presents a case study of a 38 year old Male patient with the symptoms of allergic conjunctivitis treated with *Yastimadhu Rasakriya Anjana* and *Parnayavani Swarasa Abhyantara prayoga*. This treatment modalities showed highly significant results in improving the signs and symptoms of disease with no adverse reaction. By this we can conclude that, *Ayurveda* management helps in treatment of Allergic Conjunctivitis.

Keywords: *Vataja Abhishyanda*, Allergic Conjunctivitis, *Anjana*, Eosinophils

How to cite this article: Bharath R, Kar S, Shivanand G, Madhusudhan BG, Kushal AS, Ramyashree HS, Anil Kumar KM. An Ayurveda Management of *Vataja Abhishyanda* vis a vis Allergic Conjunctivitis: A Case Report. Int J Drug Deliv Technol. 2026;16(57s): 887-893. DOI: 10.25258/ijddt.16.57s.93

Source of support: Nil.

Conflict of interest: Nil.

INTRODUCTION

Eye is considered as *pradhana* (prime) *Indriya*. *Vataja Abhishyanda* (Allergic Conjunctivitis) is one among *Sarvagata Netraroga*⁽¹⁾ that is explained by all *Acharyas*. *Vataja Abhishyanda* is considered as a root cause for all the diseases of Eye and if not treated leads to vision impairment and visual loss.

Vataja Abhishyanda lakshanas can be compared with signs and symptoms of Allergic Conjunctivitis. Allergic Conjunctivitis is a prevalent ocular condition encountered frequently by ophthalmologists and cornea specialists, affecting up to 40% of the population. Allergic conjunctivitis results from various factors, including genetics, inflammation, air pollution, pollen exposure and contact with pets⁽²⁾. Allergic Conjunctivitis prevalence has increased over the past decade, with recurrence 41-62%⁽³⁾ making it one of clinical practice's most frequently encountered conditions.

According to *Acharya Susrutha*, *Vataja Abhishyanda Lakshanas* include *Nistoda* (pricking pain), *Stambhana* (stiffness), *Romaharsha* (Horripulation), *Sangharsha* (foreign body sensation), *Parushyata* (roughness),

Vishushkabhava (dryness), *Shishirashrutha* (cold discharge) and *Shirobhitapa* (headache)⁽⁴⁾

The treatment for Allergic Conjunctivitis typically involves topical antihistamines, mast cell inhibitors and steroids. However, the long term use of medications leads to complications like Cataract and Open Angle Glaucoma. To avoid such complication, it is necessary to explore the safe and effective medication for the management. In this case *Yastimadhu Rasakriya Anjana*⁽⁵⁾ (A collyrium extract prepared by *Glycyrrhiza glabra*, *Terminalia chebula*, *Berberis aristate*, *Cedrus deodara*, *Goat Milk*), as a line of treatment is chosen for the effective management, which has been explained as *sresta* (potent therapeutics) by *Acharya Susrutha* in the treatment of *Vataja Abhishyanda*. Along with *Parnayavani*⁽⁶⁾⁽⁷⁾ (*Coelus aromaticus*) *Swarasa Abhyantara prayoga* (Internal administration).

MATERIALS AND METHODS

Case report-

A 38 years old Male patient came to *Shalaky OPD*, JSS Ayurveda Hospital, Mysuru with chief complaints of redness, pain, itching, watering, foreign body sensation in both eye since 3 days.

*Author for Correspondence: drskar2007@rediffmail.com

History of present illness-

Patient was apparently healthy 3 days back, then suddenly developed with redness, pain, itching, watering, foreign body sensation in both eye. As the Symptoms worsened day by day and interrupting the daily routine activity patient approached *Shalaky Tantra* OPD of JSS Ayurveda Hospital, Mysuru for the better management.

History of past illness- No history of systemic illness or trauma to eyes

Family history- Nothing contributory

Previous History- No history of previous illness.

Personal history

Appetite – Normal

Bowel – Normal

Sleep – Disturbed

Diet – Vegetarian

Ashtavidha pareeksha

Nadi – Vata-pittaja

Mala – Prakrutha

Mutra – 4-5 times/ day

Jihva – Alipa

Shabda – Prakrutha

Sparsha – Anushnasheetha

Drik – Vikrutha

Akruti – Madyama

General examination

BP- 130/80 mmHg

PR – 80/min

R.R – 16/min

Temperature: 98.2°F

Systemic examination:

Central Nervous System – Conscious and well oriented.

Respiratory system – B/L NVBS heard

Cardiovascular system – S1 S2 Heard.

EXAMINATION OF EYE

Visual Acuity

V/A	Distant Vision (Unaided)	Near Vision (Unaided)
OU	6/9	N6
OD	6/6	N6
OS	6/9	N6

Table 1: Visual Acuity

SLIT LAMP EXAMINATION

Ocular Examination	OD	OS
Eye Lashes	Normal	Normal
Eye Lids	Normal	Normal
Lacrimation Apparatus	Normal	Normal
Conjunctiva		
Bulbar Conjunctiva	Congestion +	Congestion +
Upper Palpebral Conjunctiva	Papillae +	Papillae +
Lower Palpebral Conjunctiva	Papillae & Follicle +	Papillae & Follicle +
Conjunctiva Of Fornix	Discharge +	Discharge +
Conjunctiva Of Limbus	Circumcorneal Congestion +	Circumcorneal Congestion +
Sclera	Normal	Normal
Cornea	Clear, Transparent	Clear, Transparent
Anterior Chamber	Normal Depth	Normal Depth
Iris	Normal	Normal
Pupil	3mm Round, regular, reactive	3mm Round, regular, reactive
Lens	Clear, Transparent	Clear, Transparent

Table 2: Slit Lamp Examination

Diagnosis Tool (Conjunctival Cytology):

Conjunctival Smear for Eosinophils & Mast cells count by May-Grunwald Giemsa(MGG) Staining. Through the brush cytology method, The lower palpebral conjunctiva of eye is

scrapped with sterile cytobrush 5-6 times. The collected sample is transfer into the frosted glass slide on positive side in a circular manner. Then the glass slide is stained in 3 steps accordingly:

Ayurvedic management of Vataja Abhishyanda vis a vis Allergic Conjunctivitis : A Case Report

1. Methanol for first 10 mins
2. May-Grunwald stain for 5 mins
3. Giemsa stain for 15 mins

Then the slide is taken out for drying. After the slides a dried the slide is mounted with cover slip and examined in high power magnification of 100x for cytological examination.

Cytology	Before Treatment	After Treatment
Eosinophils	3	1
Mast Cells	3	0

Table 3: Grading of Cytology of Conjunctival Smear⁽⁹⁾

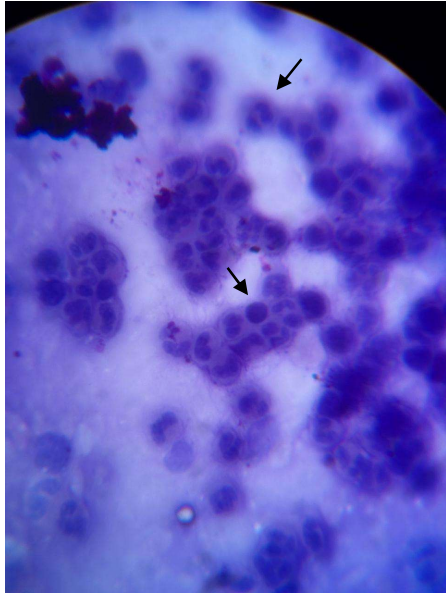


Fig 1 : Presence of Eosinophiles Mast cells, Neutrophils & Epithelial cells



Fig 2 : Absence of Eosinophiles, Mast cells, Neutrophils. Presence Epithelial cells.

Nidana Panchaka

<i>Nidana Panchaka</i>
<i>Nidana</i> (Etiology): <i>Raja Dhooma Vihara</i> (Exposure to dust and smoke)
<i>Purvaroop</i> (Prodromal Symptoms): <i>Raga</i> (Redness)
<i>Roopa</i> (Signs & Symptoms): <i>Nistoda</i> (Pricking pain), <i>Sangharsha</i> (foreign body sensation), <i>Shishiasrutha</i> (Lacrimation)
<i>Samprapthi</i> : <div style="text-align: center;"> <p><i>Nidana Sevana</i>(Exposure to dust and smoke)</p> <p>↓</p> <p>Vitiation of <i>vatadi tridosha</i></p> <p>↓</p> <p>Vitiated <i>vata dosha</i> moves upwards towards <i>Netra Avayava</i>(Parts of Eye)</p> <p>↓</p> <p><i>Sathanasamshraya</i> in <i>Netra</i>(Conjunctiva)</p> <p>↓</p> <p><i>Vataja Abhishyanda</i> (Allergic Conjunctivitis)</p> </div>

<p><i>Samprapti Ghatakas :</i> <i>Dosha: Vata Pradhana Tridosha</i> <i>Dushya: Rasa and Rakta</i> <i>Agni: Mandagni</i> <i>Srotasa: Rasavaha and Raktavaha</i> <i>Sroto Dushti: Atipravriti</i> <i>Rogamarga: Madhyama</i> <i>Adhishtana: Prathama Patala (TejoJalashrita Patala)</i> <i>Vyadhi Svabhava: Aashukaari</i></p>
--

Table 4: Nidana panchaka of Vataja Abhishyanda

Diagnosis: Vataja Abhishyanda (Allergic Conjunctivitis)

TREATMENT

Treatment	Dose and Duration(05/05/2026 to 11/05/2026)
<i>Yastimadhu Rasakriya Anjana</i>	1 <i>Vidanga Matra(60mg)</i> twice a day for both eye for 7 days
<i>Parnayanavi Swarasa</i>	12ml BD after food for 7 days followed by warm water.

Table 5: Treatment Schedule

Yastimadhu Rasakriya Anjana a collyrium is advised to apply 1 *vidaga matra* approximately 60mg from the *kaninika sandhi*(inner cantus) to *apanga sandhi*(outer cantus) into the lower palpebral conjunctiva twice daily for 7 days. A *Swarasa*(fresh juice) extracted from *Parnayavani* Leaf are advised to take orally 12ml twice a day after the meal.

Subjective Parameters:

The assessment was made based on the following signs and symptoms by adopting standard scoring methods before, after treatment and after follow up

1. *Nistoda* (Pricking pain in eye)
2. *Sangharsha* (Foreign body Sensation)
3. *Parushya* (Rough ocular surface)
4. *Shishirashruta* (Lacrimation)

Symptoms	Before Intervention	During Intervention	Follow up Schedule	
	Day 0 (05/05/26)	Day 7 (12/05/26)	Day 14 (19/05/26)	Day 21 (26/05/26)
<i>Nistoda</i>	4	1	1	0
<i>Sangharsha</i>	4	0	0	0
<i>Parushya</i>	4	1	0	0
<i>Shishirashruta</i>	4	0	0	0

Table 6: Grading of the Subjective parameter⁽⁸⁾



Fig 3 : Redness of Both eye Before Treatment

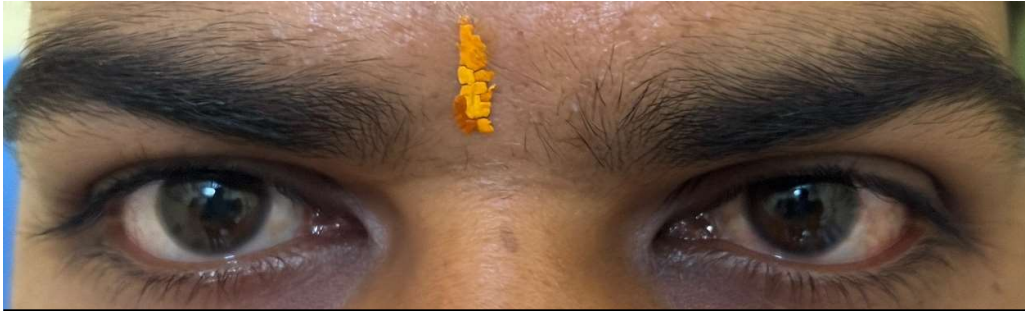


Fig 4 : Redness of Both eye reduced after treatment

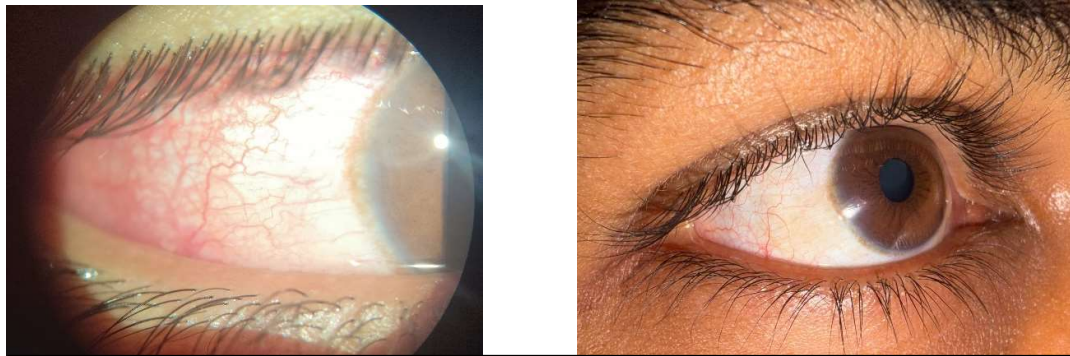


Fig 5 : Congestion of Conjunctiva Right eye a.Before Treatment b.After Treatment(Reduced)



Fig 6: Congestion of Conjunctiva Left eye a. Before treatment b. After Treatment(Reduced)

DISCUSSION

Based on the clinical features and *Ayurvedic* assessment, this case was diagnosed as *Vataja Abhishyanda*. According to *Acharya Sushruta*, *Abhishyanda* is considered the root cause of most ocular disorders, and timely intervention is essential to prevent complications. The present case study highlights the successful management of *Vataja Abhishyanda*(Allergic Conjunctivitis) presenting with classical symptoms such as *Raga* (redness), *Nistoda* (pricking pain), *Sangharsha* (foreign body sensation),

Parushya (roughness of ocular surface), and *Shishirashruta* (lacrimation). Allergic conjunctivitis is an IgE-mediated hypersensitivity disorder characterized by conjunctival inflammation secondary to exposure to environmental allergens such as dust, smoke, and pollen. In the present case, the patient had a history of exposure to dust and smoke during travel, which may have acted as triggering factors. Conjunctival swab cytology revealed infiltration of eosinophils and mast cells, which are considered hallmark inflammatory cells in allergic conjunctivitis. Conjunctival

cytology using May–Grünwald Giemsa (MGG) staining demonstrated eosinophils with bilobed nuclei and granular cytoplasm along with densely granulated mast cells. The presence of these cells confirms the allergic pathology and serves as an objective diagnostic and prognostic marker in allergic conjunctivitis. Following 7 days of treatment, a remarkable reduction in eosinophils and mast cells was observed, indicating significant control of the allergic inflammatory response.

The line of treatment adopted in the present case was mainly aimed at *Vatahara* (Pacifying Vata Dosha), *Shophahara* (Reducing Swelling), *Ropana* (Healing), and *Chakshushya* (Beneficial for eye) actions. *Yastimadhu Rasakriya Anjana* (A collyrium extract prepared by *Glycyrrhiza glabra*, *Terminalia chebula*, *Berberis aristata*, *Cedrus deodara*, Goat Milk), mentioned in *Sushruta Uttaratantra* for the management of *Vataja Abhishyanda*, was selected as the topical therapy. The formulation contains *Yastimadhu* (*Glycyrrhiza glabra*), *Haritaki* (*Terminalia chebula*), *Daruharidra* (*Berberis aristata*), *Devadaru* (*Cedrus deodara*), and *Aja Dugdha* (Goat Milk).

Yastimadhu (*Glycyrrhiza glabra*) is described in Ayurveda as *Chakshushya* (Beneficial to eye), *Vatapittahara*, *Shophahara* (Reduces Swelling), and *Vranahara* (Healing property on the Ocular surface). It contains glycyrrhizin and glycyrrhizic acid, which have established anti-inflammatory, anti-allergic, antioxidant, and immunomodulatory properties⁽¹⁰⁾. These actions help in reducing conjunctival inflammation, suppressing allergic responses, and promoting tissue healing.

Haritaki (*Terminalia chebula*) is a potent *Tridoshaghna* drug known for its anti-inflammatory, antioxidant, antimicrobial, and wound-healing activities⁽¹¹⁾. Phytoconstituents such as chebulic acid, gallic acid, and ellagic acid contribute to reduction of inflammation and restoration of damaged ocular tissue.

Daruharidra (*Berberis aristata*) possesses *Tridoshaghna* and *Kandughna* (Anti-Itching) properties. Berberine, its major alkaloid, exhibits antimicrobial, anti-inflammatory, antioxidant, and immunoregulatory effects⁽¹²⁾. These properties may help in reducing allergic inflammation and preventing secondary microbial infection on Ocular surface.

Devadaru (*Cedrus deodara*) is predominantly *Kapha-Vata Shamaka* and contains bioactive compounds such as cedrene, flavonoids, quercetin, and glycosides, which exhibit anti-inflammatory and antimicrobial activities⁽¹³⁾. Its inclusion in the formulation supports reduction of ocular irritation and inflammation.

Aja Dugdha (Goat's milk) is regarded as *Vatapitta Shamaka* and possesses nourishing and soothing properties. Its proteins and fatty acids are reported to have anti-inflammatory and healing effects, which may aid in restoration of the conjunctival surface and reduction of irritation.⁽¹⁴⁾

The mode of ocular drug of *Yastimadhu Rasakriya Anjana* delivered a therapeutic efficacy as by application of *Anjana* (Collyrium) in the lower fornix allows prolonged

contact of the medicine with the conjunctival surface. The fine particles deposited in the conjunctival cul-de-sac enhance ocular bioavailability and facilitate better absorption through the tear film and conjunctival vasculature. This may help in achieving localized anti-inflammatory action and faster symptomatic relief.

Internal administration of *Parnayavani* (*Coleus Aromaticus*) *Swarasa* further complemented the treatment. *Parnayavani* possesses *Vata-Kapha Shamaka*, anti-inflammatory, antioxidant, and immunomodulatory properties due to the presence of flavonoids, tannins, glycosides, and phenolic compounds⁽¹⁵⁾. Internal medication may have helped in controlling systemic allergic responses and reducing recurrence.

The significant improvement observed in both subjective symptoms and objective cytological findings suggests that the combined administration of *Yastimadhu Rasakriya Anjana* and *Parnayavani Swarasa* effectively controlled allergic inflammation and promoted healing of the conjunctiva. The study also highlights the importance of conjunctival cytology as an economical and minimally invasive investigative tool to assess disease severity and therapeutic response in allergic conjunctivitis.

CONCLUSION

Allergic conjunctivitis is one of the most commonly encountered ocular disorders in ophthalmology, particularly due to increasing exposure to environmental allergens such as dust, smoke, and pollution.

In the present case, treatment with *Yastimadhu Rasakriya Anjana* externally along with *Parnayavani Swarasa* internally showed significant improvement in the signs and symptoms of *Vataja Abhishyanda*. Objective improvement was also evidenced by a considerable reduction in eosinophils and mast cells on conjunctival cytology after treatment.

The anti-inflammatory, anti-allergic, wound-healing, and immunomodulatory properties of the drugs used in the study have contributed to the Anti-allergic therapeutic effect on Ocular surface. The study suggests that *Ayurvedic* management can provide safe and effective relief in Allergic Conjunctivitis and may help reduce recurrence and dependency on long-term conventional medications.

However, further clinical studies with larger sample sizes and longer follow-up periods are required to scientifically validate the efficacy of these interventions and establish their role in the standard management of Allergic Conjunctivitis

REFERENCE

1. *Vaidya Jadavji Trikamji Acharya, Susrutha samhitha, Sri.Dalhanacharya* Comm with *Nibandasangraha* Comm, editor Chaukhamba Oriental, Varanasi 2019, Uttar tantra chapter 6, verse 5.
2. Allergic Conjunctivitis - StatPearls - NCBI Bookshelf (nih.gov)
3. Shodhganga@INFLIBNET: A Controlled Clinical Study of *Punarnavadi Yoga Aschottana* in the

- Management of *Vataja Abhishyanda* W R T Allergic Conjunctivitis Seasonal Perennial
4. *Vaidya Jadavji Trikamji Acharya, Susrutha samhitha, Sri.Dalhanacharya* Comm with *Nibandasangraha* Comm, editor Chaukhamba Oriental, Varanasi 2019, *Uttar tantra* chapter 6, verse 6.
 5. *Vaidya Jadavji Trikamji Acharya, Susrutha samhitha, Sri.Dalhanacharya* Comm with *Nibandasangraha* Comm, editor Chaukhamba Oriental, Varanasi 2019, *Uttar tantra* chapter 9, verse 14.
 6. Dr.V G Neginhal- Handbook of Medicinal Plants Soumya prints Bengaluru 2003 P.no 206-207
 7. https://www.researchgate.net/publication/285096996_Pathorchur_Coleus_aromaticus_A_review_of_the_medicinal_evidence_for_its_phytochemistry_and_pharmacology_properties
 8. Shashi Prakash Gupta- Management of *Vataja abhishyanda* (Allergic conjunctivitis) with *Gutika anjana* and *Punarnavadi* eye drops: A comparative clinical study
 9. Kazuo tsubota, toshihiko Hasegawa, tadi kobayashi- Detection by brush Cytology of mast cells and eosinophils in allergic and vernal Conjunctivitis - Cornea 10(6) , Raven Press Ltd, New York 1991, P.no.525-531.
 10. (PDF) A Critical Appraisal on Phytochemical Constituents and Therapeutic Effect of *Yashtimadhu* (*Glycyrrhiza glabra*) (researchgate.net)
 11. Dr. Shalu Sharma, Dr. Bhavna Singh, Dr. Hement Kumar. A Critical Review of Pharmacological Actions of *Haritaki* (*Terminalia chebula* Retz) In Classical Texts. J Ayurveda Integr Med Sci [Internet]. 2019 Aug. 31 [cited 2026 May 29];4(04):258-69.
 12. Choudhary, Shailja & Kaurav, Hemlata & S., Madhusudan & Chaudhary, Gitika. (2021). *Daruharidra* (*Berberis aristata*): Review based upon its Ayurvedic Properties. International Journal for Research in Applied Sciences and Biotechnology. 8. 98-106. 10.31033/ijrasb.8.2.12.
 13. Dr. Man Singh Meena- Exploring the Untapped Potential of *Devadaru* (*Cedrus deodara*): A Comprehensive Review of Its Therapeutic Benefits in Ayurveda IJNRD | Volume 9, Issue 9 September 2024
 14. Badal, Robin & Singh, Rohit & Arushi, & Upadhyay, Anjali. (2023). An Insight into Therapeutic and Nutritional Profile of *Aja Dugdha* (Goat's Milk): A Review. International Journal of Ayurveda and Pharma Research. 87-96. 10.47070/ijapr.v11i6.2844.
 15. Vandana Murali, Vivek P, "*Parnayavani* [*Plectranthus amboinicus* (Lour.) Spreng.] - Pharmacological and Ethnomedicinal Uses - A Review." International Journal of Science and Research (IJSR), vol. 10, no. 9, 2021, pp. 66-73.