

A COMPREHENSIVE ANALYSIS OF NIDANA FOR NETRA ROGAS

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INTRODUCTION

The eye is the most important and most complex organ of the human body. The functions of the human eye are no less than that of a camera. Proper efforts should be made to protect the eyes. Vata, Pitta, and Kapha, which are responsible for the body's normal functioning, lead to disease when vitiated. Many Nidanas have been stated in different texts and for the manifestation of the disease it has several.

Etiological factors that contribute. These Nidanas hold good to understand not only the existing disorders, but also the trending new diseases and changing pattern of old diseases. The human senses are our contact to environment. We perceive upto 80% of all impressions by means of sight. If all other senses like taste, smell etc. stop working it's the eyes that protect us from danger. So proper eye care and eye wear at every stage of life is important in order to avoid curable blindness and preventable blindness a part of global initiative 'Vision 2020' which starts from avoidance of causative factors itself.

Analysis of Nidana of Netra Rogas from the clinical aspects There are specific group of Nidanas which are responsible for vitiation of Doshas in the eyes likewise the vitiation of Doshas which are specific to particular organ. The Nidanas as explained in the classics can be further grouped as follows,

1. Aharaja
2. Viharaja
3. Ritu Viparyaya
4. Manasika
5. Agantuja
6. Bhashaja
7. Nidanarthakara
8. Sankramika

Aharaja Nidana Pittakopakara Ahara

The Agneya Bhavas of Pitta Kopakara Ahara deranges eye. These Aharas possess Katu and Amla Rasa, Teeksha, Vyavayi, Visada and Sara Guna, Ushna Veerya and Katu Vipaka that afflicts Pitta and Rakta and results in Daha, Paka and Raga which can be understood as inflammatory changes.

a. Excess intake of Shuktha and Aranala: Shuktha and Aranala are Sandhana Dravya produced by fermentation. They contain histamines and thereby produce more histamines, acts as vasodilator leading to allergic manifestations.

b. Excess intake of Amla: Causes "Akshibruva Nikochana" (constriction of eyes and eyebrows). Causes ciliary muscle strain and sudden involuntary actions of lids.

c. Excessive intake of Kulatha: It is also a Vidahi Ahara. It has high level of crude proteins that can effect on energy concentration and impair the overall metabolism. Pentosan present in Kulatta can even lead to inflammatory changes.

d. Excessive intake of Madya: Madya is toxicating in nature. It increases the amounts of methyl alcohol in body. Methyl alcohol metabolizes very slowly and oxidised into formic acid and formaldehydes in tissues, causing degeneration of ganglion cells, a main factor to cause toxic amblyopia.

e. Excess intake of Kshara, Teekshna, Ushna, Katu Aharas: Kshara increases the body pH there by increasing the pH of eye also. Excessive intake break down into hydroxyl ion and cation which saponifies the cell membrane and interacts with collagen and glycosaminoglycans producing the stromal haze. They also cause epithelial defect and ciliary body irritation.

Ahara Vidhi

a. Virudha Ahara: results in Dosha Utklesha and increases Guru, Snigdha and Picchila Gunas, further leads to Abhisyandi Srotas, Srotorodha and Netramala Sanchya with Kapha predominant Netrarogas. The Viruddha Aharas causes Dhatu Utklishta and deranges the vasculature and permeability of the vessels.

b. Asatmya Ahara: Intake of Asatmya Ahara results in Ama Uttipatti. Further it causes Jataragni Mandya leading to Kapha Utkleshana and Srotorodha,. The vitiated Kapha inturn vitiatesPitta causing Netra Rogas. The Ama Lakshanas of Netra as explained in texts are Raga, Shopha, Srava, Shola, Daha which indicates the inflammatory changes.

2. Viharaja

Nidana Vatakara Vihara: Due to Vatakara Vihara the Ruksha, Khara Guna increases and does Shoshana, impairs the Pranavata and Vyana Vata and Indriya Grahana Shakti is altered. Eg: Timira [Hypermetropia, Accomodation problem, Cataract, macular degeneration, Toxic amblyopia, Valsalva retinopathy], Shushkakshipaka (Dry Eyes), Arma (Pterygium), Abhisyaanda (Allergic conjunctivitis, Uveitis), Balasagrathita (pingueculae).

- Doorekshanath: Looking at very distant objects for a long time like drivers, shooters, archery, working with telescopes.
- Sukshmanireekshanath: Watching minute objects for longer duration like in tailors, embroidery workers, computer users etc where there is the focusing of the eyes for prolonged periods on a fixed object which are held very close.
- Vividha Roopa Prekshana: On continuos observation of different kinds of objects.
- Sakampenapi Karmana: Working with vibrating hands like drillers, drivers driving on bad roads. Pitta causing Netra Rogas. The Ama Lakshanas of Netra as explained in texts are Raga, Shopha, Srava, Shola, Daha which indicates the inflammatory changes.

3. Rutunam Viparyayena (Seasonal Variations)

The seasonal eye diseases are produced when the person is not following proper Rutucharya. Eg: Person indulging more in Pittakara Ahara Vihara in Varsharutu Rutu causes Abhisyaanda (Kerato conjunctivitis). Seasonal eye changes are produced due to change in the climatic conditions. The conjunctiva of eye is more sensitive than skin. In the warm climate, there will be hyperplasia of epithelium of conjunctiva and it sends downward projections to sub epithelial tissues. Cold climate can constrict the blood vessels in the eyes and can even restrict the normal metabolism of cornea according to many researches. Both these conditions can be painful and compromises to the visual clarity. In addition to the causation of pain caused, both the cold and hot weather can even lead to dry eyes (tear film evaporates quickly).

4. Manasika Nidana

Manasika Bhavas are also other set of etiological factors involved in the manifestation of Netra Rogas. Either of the emotional factors such as Bhaya, Krodha and Shoka cause vitiation of Doshas both at physical and psychological level leading to manifestation of disease. These emotional factors cause derangement of Saririka Dosha.

- Prasakta Samrodhana (continuos weeping), Bhaya (Fear), Shoka (grief), Klesha (stress) causes Vata Prakopa.
- Kopa (anger) causes Pitta Prakopa.

5. Agantuja Nidana

- Abhighaatha: Minute irritating injuries like abrasions and lacerations to severe injuries like penetrating and perforating injuries. If proper care is not taken can also lead to blindness.
- Salilakreeda: (No protection to eyes while playing water games.) Chance of entry of contaminated water into eye leading to inflammatory changes. [Eg: Abhisyaanda (Swimming pool Conjunctivitis), Savrana sukra (Corneal abrasions)]
- Keetamakshika Sparshadibhi: (Bite of insects, mosquitos etc.) Causes injury, may release toxin, act as foreign body.
- Chandragraha, Nakshatra Kramana: By visualising lunar eclipse, constallations it can lead to ciliary muscles strain in eyes. The penetrating and high illuminating rays can lead to retinal damage.
- Divakara Agni Tejasa, Ratnanam Vilokanacha: (By the glare of sun and by visualising the Tejas of Agni, looking into precious stones.).

6. Bhesaja

(Mithya and Athiyogas of certain treatment procedures result in development of eye diseases.

7. Nidanarthakara

- Jwaropatapa: (High fever or Sun stroke) Due to high fever or sun stroke along with Shiras even Netra is also affected. Acharya Charaka in Chikitsasthana 3rd chapter has clearly metioned “Deha Indriya Manastapi” and “Indriya Tapina Timiradaya”. Since the cardinal feautre of Jwara is Santapa it affects eyes also. Eg: Netra Raga (Congetstion), Daha (Burning sensation), Timira (Blurred vision).
- Granthi: Glandular disorders have impact on eyes like Swelling around the eyes in Hypothyroidism.
- Meha: As a complication of Meharoga, eyes can also be affected. Diabetes mellitus leading to diabetic retiopathy.

CONCLUSION

Understanding the Nidana helps to asses the Dosha vitiation, helps to decide Sadhya Asadhyata of the Vyadhi, analyse the Samprapti and proper planning of the treatment. If the Nidanans are not addressed and avoided the best treatment modalities adopted to manage the condition will not be beneficial and thus our Acharyas have clearly stated “Sanksepataha Kriyayoge Nidana Parivarjanam”. Nidana may work individually, work together cause Dosha Prakopa leading to new disease, aggravates an existing disease and stimulates Doshagati. The prime objectives includes expanding comprehensive integrated eye care services that respond to the major causes of visual impairment and creating awareness for

proper care of eyes as by which the prevalence of visual impairment can be reduced to a extent.

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