Praklinna Vartma or Klinna Vartma

It is Kaphaja Sadhya vyadhi

अरुजं बाह्यतः क्लिन्नं स्रवत्यपि ।
कण्डूनिस्तोदबहुलं क्लिन्नवर्त्म तदुच्यते ॥
(Su. U-3/21)

painless, swelling which is arised at the external aspect of eyelid, ε itching ε sticky discharge

Chikitsa ⇒

1. Anjana —
   - Triphala / ~~Patol~~ palash pushpa / apamarga rasakriyanjana is prepared in copper vessel.
   - varti anjan
     Kaseesa, Samudraphena rasanjana, Jati sushpa + Honey.
   - Srotonjana + Honey.

2. Amlaki phala swarasa for Aschyotana or rasakriyanjana.

3. Abhisyanda Chikitsa.

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Vata hata Vartma

Lagophthalmos (Ptosis)

It is Vataja Asadhya Vyadhi.

~~विमुक्तक~~

विमुक्त सन्धि निश्चेष्टं वर्त्म यस्य न मील्यते ।
एतद्धि लक्षणं विद्यात् सकलं यदि वाऽकलम् ॥

(Su. U- 3/23)

Due to vitiation of vata the kaneenika, apanga and vartma Sukla Sandhi are paralysed so that the patient is unable to close his eye lid properly. Here pain may or may not associated

Chikitsa →

- Asadhya
- Tarpan, Snehan, anjan etc. can be tryed to strengthening the muscles and nerves.

Pakshma Kopa or Pakshmoparoda (trachiasis or entropion)

It is Sannipataja Yapya vyadhi.

दोषाः पक्ष्माशयगता सौक्ष्म्याग्राणि खराणि च
निर्वर्तयन्ति पक्ष्माणि तैर्दुष्टं चक्षि दूयते ।

(Su. U- 3/29)

vitiated doshas, vitiates the root of cilia and causes the eye lashes hard sharp and misdirected ∴ inverted lidmargin

The hard sharp misdirected cilia prick and injures the cornea.

Chikitsa ⇒

(1) Snehan
(2) Uttana shayana (sleeping on back)
(3) eye has to close

Shastra Karma –

2 part from the base, 1 part from margin of eye has to leave and cut the remaining middle part of the skin of eye lids in yava shape. Then suture it with horse hair then apply ghrita and madhu.

The sutured horse hair should tie to the fore head, after 5 days suture has been removed and apply gairika churna.

(4) Agni Karma.

A/c to yoga ratnakara –

cilia are burned by loha shalaka
↓
Anjana made up by pushpa kaseesa got bhavana in tulasi swaras and kept in copper vessel for 10 days.

Ptosis

Abnormal ~~droop~~ drooping of upper eyelid is called Ptosis.

Congenital ptosis

Associated ~ congenital weakness of ~~to~~ levator palpebrae superioris (LPS)

C/F →

- Drooping of one or both upper eyelid
- Lid crease, either diminished or absent
- LPS function is poor
- Lid lag on downgaze – (Ptotic lid is higher than normal)
- Congenital forms may occurs in following forms:–
  - (a) Simple congenital ptosis
  - (b) Congenital ptosis.
  - (c) Blepharophimosis syndrome
    associated ~ blepharophimosis telecanthus, epicanthus inversus
  - (d) congenital synKinetic ptosis
    reaction of ptotic lid ~ jaw movements, ie. stimulation of ipsilateral pterygoid muscle.

Acquired ptosis

Depending upon the cause it can be neurogenic, myogenic, aponeurotic or mechanical.

1. Neurogenic ptosis —

Caused by
- 3rd nv. palsy
- Horner's syndrome
- opthalmoplegic migraine
- Multiple sclerosis
- mill ptosis
- miosis, ipsilateral sweating
- Reduced

2. Myogenic ptosis —

Defect in LPS muscle and myoneural junction.

3. Aponeurotic ptosis —
Due to defect of levator aponeurosis

(- post operative
- Trauma)

4. Mechanical ptosis —

Due to excessive weight on the upper eye lid

Treatment ⇒

(a) For congenital

1. Tarso-Conjunctivo-Mullerectomy —

In case of mild ptosis and good levator function.

upper lid is everted and upper tarsal border along ~~&~~ its attached Muller's muscle and conjunctiva are resected

2. Levator resection —

for moderate and severe ptosis.

3. Frontalis sling operation (Brow suspension)

for severe ptosis & no levator function.

(b) For Acquired

1. Treat the underlying cause.

2. Conservative treatment in case of neurogenic ptosis.

then surgery

3. Surgical procedures —

Lagophthalmos

It is the condition where inability to close the eyelids voluntarily.

Etiology –

- occurs in patients ∈ paralysis of orbicularis oculi muscle.
- Severe ectropion
- Proptosis
- following over resection of levator muscle for ptosis.
- coma.
- physiologically some ~~patient~~ people sleep ∈ open eyes (nocturnal lagophthalmos)

C/F – characterized by incomplete closure of palpebral aperture associated ∈ underlying disease

Treatment –

1. To prevent exposure keratitis –
   - artificial tear drops
   - antibiotics –
     topical.
   - Tarsorrhaphy

2. Treat the cause of lagophthalmos.

Kukunaka

(opthalmia neonatorum)

It is an eye lid disorder of children, arises during dentation (दन्तोद्भेदज नेत्र विकार) due to stanya dosha or prakopa.

C/F →

- अक्षि शोफ (oedema of eye ball)
- रक्ताक्षि (red eyes)
- photophobia
- pain in lids.
- sticky discharge from eye
- itching in nose, ears, eye

Chikitsa →

- Rakta mokshana ē Jalauka
- lekhana ē Sephalika patra.
- Local application of Trikatu + madhu
- vamana by Apamarga beeja + Maricha Saindhava lavan + madhu + Stanya
- If child o can't take medicine it should given to mother,
- ~~prakshalana~~ Parisheka ē the decoction of amra, Jambu, Amalaki, ashmantaka leaves.

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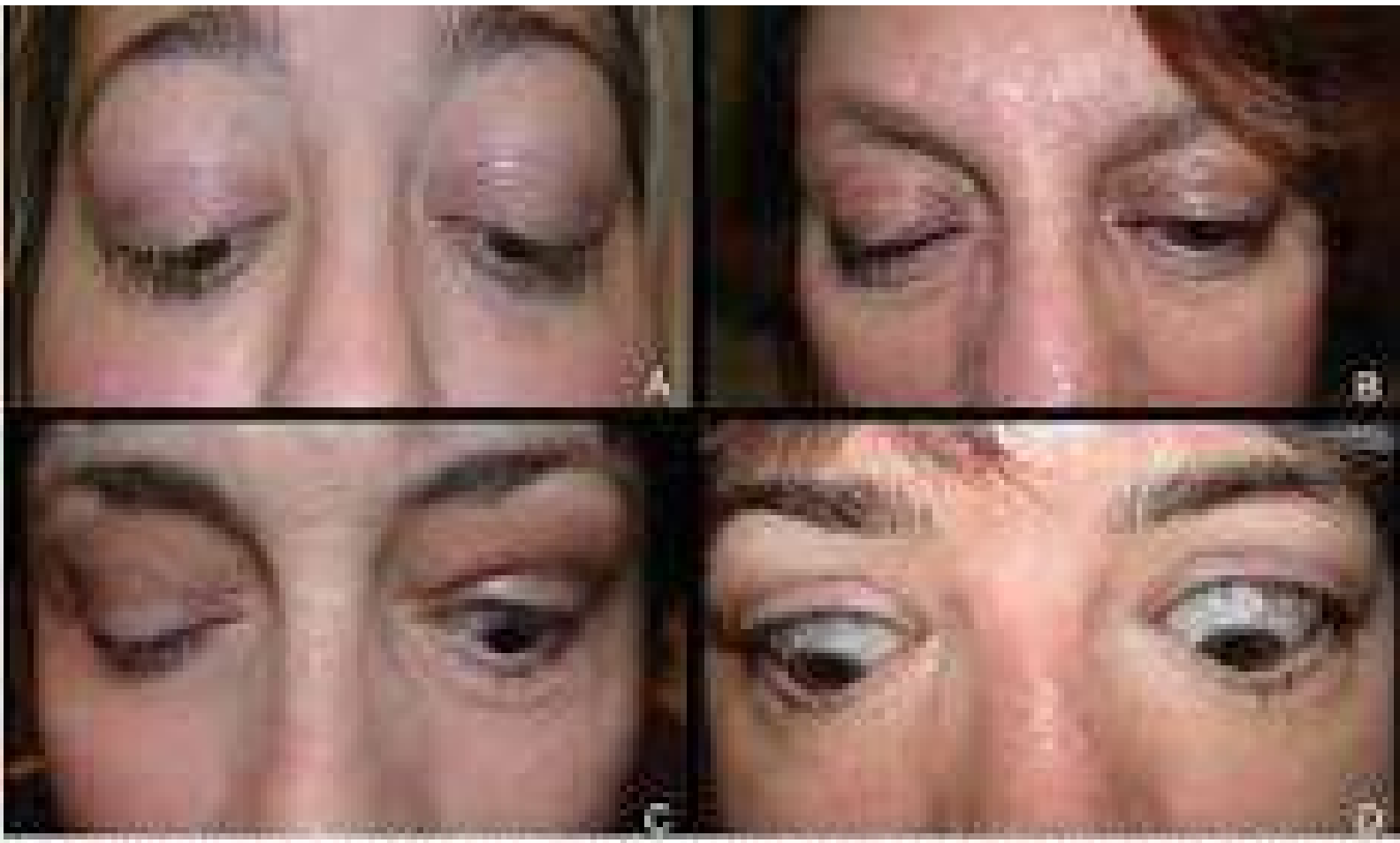
- Ashchyotana by Triphala ghrita, guduchi ghrita
- ~~vasti Anjana~~
- Gutikanjan ē trikatu, palandu, yastimadhu saindhava, ~~guda~~, madhu, lakasha, gairika.
- Varti anjan ē nimbapatra, yastimadhu, daruharidra tamra bhasma, lodhra, madhu
- Churnanjana - Kanta lauha bhasma + ghrita or madhu or dugdha.

medicine to mother →

- Sneha pana
- Vamana ē pippali, Sarshap, Saindhav-lavan yastimadhu
- Rechan ē Haritaki, pippali, draksha kwath.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