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SUCCESSFUL MANAGEMENT OF *SIROTPATA* THROUGH AYURVEDIC INTERVENTION: A SINGLE CASE REPORT

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ABSTRACT

Background: *Sirotpata* is described in Ayurvedic classics as a *Vedhya Netraroga*, which are diseases of the eye that are treated by incision, puncture and other types of surgical procedures. It is defined by dilated and engorged conjunctival vessels, which occur due to aggravation of *Rakta* and *Pitta Dosha*. Clinically it shows redness, itching, burning sensation, watery discharge and irritation in the eye and resembles ocular hyperaemia and conjunctival congestion from the viewpoint of contemporary ophthalmology.

Case Presentation: In the present case, a middle-aged male patient reported with sudden onset redness of left eye with irritation and mild discomfort. On ocular examination, it showed localised conjunctival vascular congestion at the temporal aspect of the bulbar conjunctiva. Visual acuity was maintained and no major systemic abnormality was noted.

Intervention: The patient was subjected to *Viddha Karma* at the *Shankha Keshanta*, *Apanga*, and *Bhrumadhya* points twice daily for 5 days continuously. Along with this *Viddha Karma*, *Saptamruta Loha* was administered orally throughout the course of the treatment.

Results: Progressively decreasing tendency of ocular congestion and vascular prominence was observed. On the fifth day of treatment, reduction of the congestion was marked, thus symptomatic improvement was found. No complications were observed.

Conclusion: The present case study supports the utility of *Viddha Karma* and oral *Saptamruta Loha* in the successful management of *Sirotpata* and ocular vascular congestion within 5 days

with marked reduction in signs and symptoms without any complication. Further well-designed clinical trials with large sample size are recommended.

KEYWORDS: *Sirotpata, Viddha Karma*, Ocular Hyperaemia, *Netraroga*, Ayurvedic Ophthalmology, *Saptamruta Loha*.

INTRODUCTION

The eyes are among the most important sensory organs and are regarded in Ayurveda as the principal gateway for perception of the external world. Owing to their vital role in vision and overall quality of life, Ayurvedic classics have described numerous preventive and therapeutic measures for maintaining ocular health. Acharya Sushruta, recognized as the pioneer of ophthalmic surgery, has elaborately described various *Netrarogas* along with their etiopathogenesis, clinical features, and management principles. Among these, *Sirotpata* is included under the category of *Vedhya Netrarogas* and is characterized by dilatation, engorgement, and prominence of ocular blood vessels resulting predominantly from the vitiation of *Rakta* and *Pitta Dosha*.[1]

Classically, *Sirotpata* manifests with *Raga* (redness of the eye), *Kandu* (itching), *Daha* (burning sensation), *Ashrusrava* (watering), *Toda* (pricking sensation), and visible vascular prominence within the ocular structures. The pathogenesis involves vitiated *Rakta* and *Pitta* circulating through the ocular channels, leading to vascular congestion and inflammatory manifestations. If left untreated, progressive involvement of ocular tissues may result in persistent discomfort and impairment of normal visual function.[2]

From the perspective of contemporary ophthalmology, the clinical features of *Sirotpata* closely resemble ocular hyperaemia and conjunctival vascular congestion. Ocular hyperaemia is characterized by dilatation of conjunctival and episcleral blood vessels, producing visible redness of the eye and associated symptoms such as irritation, burning sensation, watering, and foreign body sensation.[3] These conditions are frequently encountered in ophthalmic practice and may arise secondary to inflammatory, allergic, infectious, traumatic, or environmental causes. Although modern treatment modalities such as lubricants, antihistamines, vasoconstrictors, and anti-inflammatory medications provide symptomatic relief, recurrence and persistence of symptoms are not uncommon in susceptible individuals.[4]

Ayurveda emphasizes correction of the underlying *Dosha* imbalance rather than merely alleviating symptoms. Therefore, the management of *Sirotpata* primarily aims at *Rakta-Pitta*

Shamana, purification of vitiated *Rakta*, and restoration of normal ocular physiology. Among the various therapeutic modalities described in Ayurveda, *Viddha Karma* is a para-surgical procedure involving controlled puncturing at specific anatomical sites. Traditionally, it has been employed in conditions associated with localized pain, swelling, vascular congestion, and stagnation of *Doshas*.[5] The procedure is believed to improve local circulation, relieve vascular stasis, and facilitate normalization of physiological blood flow.

In the present case, *Viddha Karma* was performed at *Shankha Keshanta*, *Apanga,* and *Bhrumadhya* points, which are anatomically related to the head and ocular region and are traditionally considered beneficial in diseases affecting the eye. In addition, *Saptamruta Loha* was administered internally. *Saptamruta Loha* is a well-known Ayurvedic formulation indicated in various ocular disorders owing to its *Chakshushya* (vision-promoting), *Rasayana* (rejuvenative), and *Pittahara* (Pitta-pacifying) properties. The formulation contains *Triphala*, *Yashtimadhu*, and *Lauha Bhasma*, ingredients reported to possess antioxidant, anti-inflammatory, tissue-protective, and immunomodulatory activities.[6][7]

Although *Sirotpata* has been described extensively in Ayurvedic literature, published clinical evidence regarding the role of *Viddha Karma* in its management remains limited. Therefore, documentation of such cases is important for generating clinical evidence and exploring the therapeutic potential of Ayurvedic interventions in ocular vascular disorders. The present case report highlights the successful management of *Sirotpata* affecting the left eye through a combination of *Viddha Karma* and oral *Saptamruta Loha*, resulting in significant reduction of ocular congestion and symptomatic improvement within a short duration.

CASE REPORT

A male patient, aged 45 years, reported in the outpatient department of Kayachikitsa section, PDEA's Ayurved Rugnalaya and Snowbell Multi Speciality Hospital, Pune, with chief complaints of sudden onset of redness of the left eye since 3 days. Along with redness of eye, the patient also complained of mild irritation and ocular discomfort and occasionally excessive watering. Patient did not give history of trauma or surgery and no diminution of vision was noticed.

Clinical Findings

Local Examination

Marked localized conjunctival vascular congestion at the temporal aspect.

Visible dilatation of conjunctival vessels.

Pupillary reaction: Conserved.

Corneal examination: Normal.

Visual Acuity: Maintained in both eyes.

Ayurvedic Assessment:

Hetu: Prolonged digital screen exposure.

Ratri Jagarana

Excessive exposure to dust and sunlight.

Consumption of spicy food

Dosha: Predominantly *Pitta- Rakta Dushti*.

Dushya: *Rakta*.

Strotas: *Raktavaha Strotas*.

Rogamarga: Madhyama.

Vyadhi: *Sirotpata.*

INTERVENTION

Viddha Karma

Treatment Duration: 5 days.

Frequency: Twice daily.

Needle used : 26G hypodermic needle

Sites for *Viddha*:[8]

1. *Shankha Keshanta.*

2. *Apanga.*

3. *Bhrumadhya*.

(Sites Pricked: 1/2 *Vrihi*)

Internal Medicine:

Saptamruta loha + Honey.

Dose: 500mg BD

Anupana: lukewarm water.

Duration: 5 days.

OBSERVATIONS AND RESULTS

Day 1: Conjunctival vessels looked prominent and intensely congested.

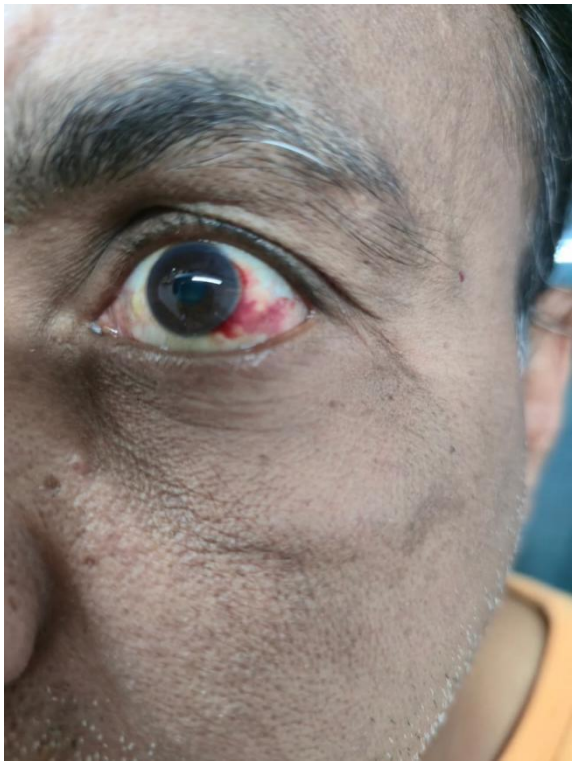

Image 2 ": Condition before the treatment

Day 3: Signs and symptoms of redness were reducing and vascular engorgement becoming less prominent.

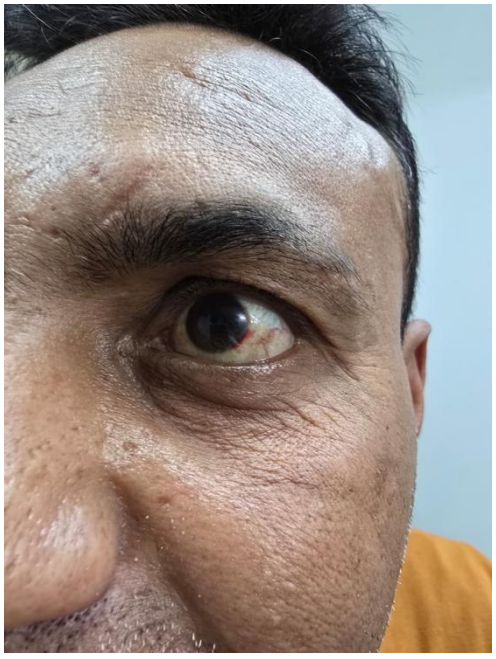

Image 2 ": Condition at 5th Day of treatment

Day 5: Marked improvement in the eye as indicated by significant reduction in vascularity and absence of red streaks and subjective symptoms. No complications or side effects of the procedure noted.

DISCUSSION

Sirotpata is described by Acharya Sushruta among the *Vedhya Netrarogas* and is characterised by dilatation and congestion of ocular blood vessels due to vitiation of *Rakta and Pitta Dosha*. Classical features such as *Raga* (redness), *Daha* (burning sensation), *Kandu* (itching), *Ashrusrava* (watering), and vascular prominence closely resemble ocular hyperaemia and conjunctival congestion described in modern ophthalmology.[9] In the present case, the patient exhibited localized conjunctival congestion and redness, which correlated well with the classical description of *Sirotpata.*

According to Ayurveda, *Rakta* and *Pitta* have a close *Ashraya–Ashrayi* relationship, and their vitiation leads to inflammatory changes and vascular congestion.[10] Therefore, management should aim at *Rakta-Pitta Shamana* and restoration of normal ocular circulation.

Viddha Karma is a para-surgical procedure indicated in conditions associated with pain, swelling, and vascular stasis.[11] In the present case, *Viddha Karma* was performed at *Shankha Keshanta, Apanga,* and *Bhrumadhya* points, which are traditionally used in disorders of the head and eye region. The procedure may help relieve local vascular congestion by improving circulation and reducing stagnation of vitiated Doshas.

Saptamruta Loha was administered as an adjuvant therapy owing to its *Chakshushya*, *Rasayana,* and *Pittahar*a properties.[12] The ingredients such as *Triphala* and *Yashtimadhu* possess antioxidant and anti-inflammatory activities, which support ocular health and enhance therapeutic outcomes.

The combined intervention resulted in marked reduction of redness, vascular prominence, irritation, and discomfort within five days without any adverse effects. Although the findings are encouraging, larger clinical studies are required to establish the efficacy and mechanism of action of this treatment approach in *Sirotpata*.

CONCLUSION

The present case demonstrates the successful management of Sirotpata through Viddha Karma at Shankha Keshanta, Apanga, and Bhrumadhya points along with oral administration of Saptamruta Loha. The intervention resulted in significant reduction of ocular congestion, vascular prominence, and associated symptoms within five days without any adverse effects.

These findings suggest that this Ayurvedic treatment approach may be a safe and effective option in the management of Sirotpata and related ocular vascular disorders. However, further well-designed clinical studies with larger sample sizes are required to validate these observations and establish their therapeutic efficacy.

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