

IJAYUSH

International Journal of AYUSH AYURVEDA, YOGA, UNANI, SIDDHA AND HOMEOPATHY http://internationaljournal.org.in/journal/index.php/ijayush/ International Journal Panacea Research library ISSN: 2349 7025

Review Article

Volume 11 Issue 4

July-August 2022

NETRA SHARIR OF AYURVEDA IN THE MODERN PERSPECTIVE: A REVIEW ARTICLE

Dr. Abhishek Gupta^{1,} Dr. Sakshi², Dr. Subhas Upadhyay³

¹PG Scholar, Dept of Rachana Sharir ²Associate Professor, Dept of Rachana Sharir, ³Professor and HOD, Dept of Rachna Sharir Sriganganagar College of Ayurvedic Science & Hospital, Tantia University, Sriganganagar – 335001, INDIA

ABSTRACT

The Indian system of Ayurvedic medicine has described three basic physiological constituents of human body, viz., dosha, dhatuand mala. Acharya Sushruta was a great surgeon in ancient India known today as the "Father of ShalyaTantra (Surgery)" for inventing and developing surgical procedures. AcharyaSushrutahas elaborately described the defining characteristic of Shalakyatantra. It comprises of the disease of shalakya tantraas narrated by king of Videha (the author of NimiTantra). Acharya Sushruta first ever has described the anatomy of eye in relation to their shape, size of various anatomical components. Acharya Sushruta has also described the Netrarogain a very systematic manner. In the Uttaratantram, Sushrutarecites an elaborated classification of eye disease complete with signs, symptoms, prognosis and medically surgical interventions. In the foetus, the parts of eye are originated fromakasha, vayu, agni, apa and prithvimahabhuta. Acharya Sushruta has described all anatomical structures of the eye in terms of madala, patala, sandhis, peshi, marma, sira and Dristi. Susrutadelineated fine anatomical divisions mandala of eye. Different Acharyashave their own view in the utpatti (origin) of Netraduringgarbhawastha kala.Increased demand of Ayurveda science in the present society is required to understand the depth of Ayurvedic principle in an easy mode. Hence an effort has been made to ascertain and establish the knowledge regarding anatomical structure of Netra sharir.

Keywords: Ayurveda, Netra, Field of vision, Mandala, Patala, Sandhi

INTRODUCTION

Acharya Susruta has described durdhva-jatrugataroga elaborately which deals with the causes, diagnosis and curative procedures of the diseases pertaining to the body above the clavicles, i.e., ear, eye, mouth, nose. Acharya Susrutahas described gross ocular anatomy in first chapter of uttara-tantra. In this article we intended to identify anatomical considerations of the eye are described in many topics like the Netrautpatti (embryology development of the eye), Netra-sharir(anatomical considerations of the eye), Panchbhautika concept of embryogenesis of the eye, Measurements and appearance of the eyeball, Sources of origin of its constituents the eyeball, Colors of eye and Effect of Tejodhatuon eye, Mandala, Sandhi (junctional area), Patala (layer of eyeball), concept of Dristiand Akshi Bandhana (contents of orbit that binds the eyeball). So, there is a need of proper understanding the anatomy in modern prospective. It cannot be characterized by a single entity at all the time because Ayurveda is the science based on the concept of structure and functional understanding. For this study, the basic materials have been collected from the Ayurvedic classics with the available commentaries, as well as text books of modern science have been referred for better understanding of the concept and its comparison with modern science.

Field of Vision

According to Astang-Hridaya Samhita the eyes of kaphajprakriti people are red at the angle, unctuous, wide, long with well-designed white and black spheres (sclera and cornea) with more eyelashes. AcharyaSusruta has mentioned the eyes of kaphajprakriti people are red at the angle, white eyes. In the classical text of Ayurveda it has been mentioned there are different types of eyes based on the dominance of dosha in the prakriti like small eye, big eye, round eye, elongated eye, sunken eye, rough eye, steady gaze eye, unsteady gaze eye, normal and healthy eye and these are the factors which can influence the field of vision. The field of vision is the visual area seen by an eye at a given instant. Visual field testing is a common procedure in almost every eye practice. The visual field is a three-dimensional area of a subject's surroundings that can be seen at any one time around an object of fixation. The visual field can be divided into well as text

books of modern science have been referred for better understanding of the concept and its comparison with modern science. Field of Vision According to Astang-Hridaya Samhita the eyes of kaphajprakriti people are red at the angle, unctuous, wide, long with well-designed white and black spheres (sclera and cornea) with more eyelashes. AcharyaSusruta has mentioned the eyes of kaphajprakriti people are red at the angle, white eyes. In the classical text of Ayurveda it has been mentioned there are different types of eyes based on the dominance of dosha in the prakriti like small eye, big eye, round eye, elongated eye, sunken eye, rough eye, steady gaze eye, unsteady gaze eye, normal and healthy eye and these are the factors which can influence the field of vision. The field of vision is the visual area seen by an eye at a given instant. Visual field testing is a common procedure in almost every eye practice. The visual field is a three-dimensional area of a subject's surroundings that can be seen at any one time around an object of fixation.

The visual field can be divided into central and peripheral field. The extent of normal visual field with a 5mm white color object is superiorly 50°, nasally 60°, inferiorly 70°, and temporally 90°. The field for blue and yellow is roughly 10° less and that for red and green color is about 20° less than that for white. The part of the external world visible to one eye when a person fixes his gaze on one point is called the field of vision for that eye. To diagnose blindness in specific portions of the retina, one charts the field of vision for each eye with an instrument called Lister perimetry. The process of charting the monocular field of vision is called Perimetry. It is employed for the diagnosis of various lesions of the visual pathways. All visual fields are designed to measure the entire peripheral vision. In fact, most commonly ordered visual fields only test the central portion of a patient's field of vision. The amount of the field tested depends on which test you perform.

NETRAUTPATTI (Embryology Development of the Eye)

In the foetus, the parts originated from akasha mahabhutaare-sound, auditory sensation, lightness, fineness and space; the parts from vayumahabhutaare –tangibility, sense of touch, roughness, impulsion, structuring of body tissues and maintaining

of movements of the body and dosha; the parts belonging to agni mahabhutaare visible form, vision, brightness, digestion and heat; those belonging toapamahabhutaare taste, sense of taste, coldness, softness, unctuousness and moisture; those belonging to Prithvi mahabhutaare odour, sensation of smell, heaviness, steadiness and material form. Acharya Sushruta has explained the subtle form of all the Indriy as is present during the formation of Garbha. Eleven indriy as are originated from the vaikarika ahamkara with all its qualities with the help of taijas ahamkara. These eleven indriyasare as follows: ear, skin, eye, tongue, nose, speech organ, hand, sex organ, rectum, feet and mind. The former five are the organ of perception the next five are effector organ and the mind are common to both.

The five tanmatrasare created out of bhootadi ahamkarawith all its qualities with the ahamkara. These tanmatras are as follows; sabda, help of tejas sparsh, rupa, rasandgandhatanmatra. These tanmatrapossess special qualities of sound, touch, vision, taste and odour. From these tanmatras the bhutaslike akash, vayu, agni, jal and prithvi respectively are originated. Netras are agni predominant sense organ. All theindrivas become unambiguous during the third month. Charakaand Kashyap has opined the same that the genesis of all sense organs including eyes and organogenesis occurs in third month of intrauterine life. According to Janaka of Videha, sense organs existence the seat of senses is first formed. After discussion with the various expert of Ayurvedaon the topic of formation of embryo, detailing the manner in which the foetus is formed in the uterus of the mother and the mode of manifestation of its various organs Punarvasu Atreya concluded that all the sense organs are developed simultaneously. Both Charaka and Sushruta consider Indrivas as Atmaja bhava. The clearness of senses (Indrivaprasada) is attributing of Satmyaja bhava.

Mandala

Acharya Sushruta has enumerated the anatomical parts of the eye consists of mandalsare five in number and sandhiand patala are six in number.

1. **Pakshma Mandala**: This is the first and outermost mandala of the eye formed by the pakshmaor eyelashes. Pakshmanimeans chakshuaachadanaromani. Pakshmaare situated

in lid margins called pakshmashayaorpakshmasadana. Paksmaisaform of kesaand considered as upadhatuofmajja and malaofasthi. It serves to heighten the protection of the eye from dust and foreign bodies.

2.VartmaMandala: TheUpper and Lower eyelids together form a circular structure in front of the eyeball called as vartma mandala. The eyelids are mobile tissues curtains placed in front of the eyeballs. VartmaMandalais also known as AksiKoshaconsidering its protective function. There are twotarunasthiin the eye lids. It is of elliptical space between the upper and lower eyelids. The eyelids feature a row of eyelashes along the eyelid margin. The two eyelids meet each other at medial and lateral angles (two sandhisaskaninikaand apanga). The nimesha-unmeshafunction (blinking) is controlled by vyanavayu. The moement of the vartma(nimesha-unmesha) is regulated by motor nerves are facial (orbicularis muscle), oculomotor (levator palpebrae superioris muscle) and sympathetic fibers. Sensory nerve supply is derived from branches of trigeminal nerve such as lacrimal, supraorbital and supra ocular nerves for upper lid and infraorbital nerve with infra-trochlear branch for lower lid. Each evelid consists (from anterior posterior) of following many layers:

i.The skin

ii.The subcutaneous areolar tissue

iii.The layer of striated muscle

iv.Submuscular areolar tissue

v.Fibrouslayervi.Layer of non-striated muscle fibresvii.Conjunctiva

3.Shukla Mandala:

This mandalais present exactly inside of the vartammandalaand beyond the krishnamandala. The Shukla mandalaappears white incolor. The Shukla mandalacan be allied with the scleral part of the external fibrous coat of the eyeball. Sclera forms the posterior five-sixth opaque part of the exterior fibrous tunic of the eyeball. Its entire outer surface is covered by Tenon's capsule. In the anterior part it is also covered by bulbar conjunctiva. Thickness of sclera varies considerably in dissimilar

individuals and with the age of the person. It is normally thinner in children than the adults and in females than the males. Sclera is thickest posteriorly (1mm) and progressively becomes thin when traced anteriorly. Lamina cribrosa is a sieve-like sclera from which fibres of optic nerve pass. Sclera consists of following three layers:

I.Episcleral tissue

II.Sclera proper

III.Laminafusca

4.Krishna Mandala:

The krishana mandala of eye (cornea) is forms one-third of the transverse extent of the eyeball. In modern perspective, cornea is forms anterior one-sixth of the outer fibrous coat of the eyeball. The krishnamandala can be similar with the cornea; seems as blackish because of the iris. Cornea is a transparent, avascular, watch-glass like structure. The uveal tissue constitutes the middle vascular coat of eyeball. From anterior to posterior it can be separated into three parts, namely, iris, ciliary body and choroid. Iris is the anterior most part of uveal tract. Iris is a tenuos circular disc corresponding to the diaphragm of a camera. The definitive color of iris be contingent on the anterior limiting layer. In blue iris this layer is thin and contains few pigment cells. While in brown iris it is thick and compactly pigmented

DISCUSSION

In this literary study we collected various data from the Ayurvedic classics with the available commentaries, as well as text books of modern medical sciences, various articles for better understanding of the Netra sharer and its comparison with contemporary science. Acharyas have explained prakriti also influences eyes in terms of size, shape of eyes, appearance of eyes, dryness or roughness of eyes, color of eyes, lashes of eyes, movement of eyes and some specific features of eye. These relates to the constitutional variations of the individuals. Acharya Sushrutahas described "Sarvendriyaanam Nayanampradhanam". Acharya Sushruta first ever has described the anatomy of eye in relation to their shape, size of various anatomical components.

Sushruta has explained seventy-six different kinds of eye diseases and their treatment in uttara tantra. The Netra execute both physiological functions roopagrahanaand buddhigrahanaas it is the seat of Alochakapitta. It is predominant of tejomahabhuta so, there is always dread of kaphato eye.

The shape of Netra is like suvrittam means spherical from all sides and gostanakarameans shaped like that teat of the cow (oval shape). Acharya Sushruta described the anatomical parts of the eye consists of mandalsare five in number and sandhiandpatalaare six in number. Sandhi is the "Junctional Areas" between two Mandalas. The Sandhiare 6 in number. Acharya sushruta has described the patala are most important structure of netrasharir. The first patalaisthe seat of tejas and jala and it can be taken as cornea and aqueous humour; the second patala is the seat of mamsa and it can be taken as iris and ciliary body. The third patalais the seat of medo and it can be taken as vitreous humour, it is a jelly like structure which resembles medas. The fourth patalais the seat of asthi and it can be taken as lens and retina, as it is the seat for linganasha. These are the parts where doshas get localized and produce various types of netrarogas. When doshasinvade gradually deeper in the patalait causes timira, KachaandLinganasa. Netra also consists of Akshibandhana, sira, pesi, dhamani, marma, snayuand other accessory parts. Thus, whole of patala Mandala, Sandhi, Akshibandhana, sira, pesi, dhamani, marma, snayu completes the netrasharira. To conclude, we can say that Patalawere described by Ancient Acharyas in order to show the severity of the diseases when they involve deeper tissues and no single structure can be correlated with specific Patalaaccurately. Patalacan be taken as different structures in different contexts.

CONCLUSION

For the proper diagnosis of netrarogas, the detailed study of netrasharira is necessary. Vititated Doshas when get accumulated in netra produce 76 types of netrarogas manifested as Sandhigatarogas, Vartmagatarogas, Shuklagatarogas, Krishnagatarogas, Sarvagatarogas and Drustigatarogas.When doshas invade gradually deeper in the patala it causes timira, Kacha and Linganasa. Netra also consists of Akshibandhana, sira, pesi, dhamani, marma, snayu and other accessory parts. Thus, whole of patala Mandala, Sandhi, Akshibandhana, sira, pesi, dhamani, marma, snayu completes the netrasharira.

REFERENCE

1.Hall, J.E., & Guyton, A.C. (2010). Visual Pathway and Central Processing. In Anura K (Eds.), Guyton & Hall Textbook of Medical. India: Elsevier Health Sciences; 779-790

2.Ghai, C.L. (2013). Perimetry (charting the field of vision). In Ghai C.L.(Eds.), A Textbook of Practical Physiology. Jaypee Brothers Medical Publishers(P) Ltd; 200-204

3.Chakrapanidatta. SharirSthana, MahatigarbhavakrantiShariradhyaya. In: Kushwaha H.C. (Eds.), Ayurveda deepika on Charaka Samhita: Revised edition.. Varanasi, India: Chaukambha Orientalia; 2009; 788-813.

4.Sushrut. SharirSthana, Sarvabhuta-chintaShariradhyaya. In: Shastri A.D. (Eds.), AyurvedTatvasandipika on Susruta Samhita.

5. Shastri Ambika Dutta. SusrutaSamhit Maharshi Susruta. Varanasi: Chaukhamba Sanskrit Sansthan; 2017.

6. Shukla Vidhyadhara Tripathi Ravi Dutta. Caraka Samhita of Agnivesa: New Delhi: Chaukambha Sanskrit Pratishthana; 2012.

7. Murthy Srikantha K R. AstangaSamgraha of Vaghbhata: Varanasi: Chauk 2012.

8. Murthy Srikantha K R. Illustrated Susruta Samhita: Varanasi: Chaukhamba Orientalia;

9. Shankar Udaya. Text Book o Tantra(Illustrated): ChaukhambaVisvabharathi; 2012.

10. Biswal AdikandaRoutrayRasmita. A Text Book of Shalakya Tantra. New Delhi: Chaukhamba Publications; 2015.

11.Madhukar, L., &Nivrutti, B. (2018). An Imperative Review Study on Concept of Ophthalmology in Ayurveda in the Purview of Rachana Sharir (Human Anatomy). World Journal of Pharmaceutical Research, 7(08), 140–151. 1

12. Dalhan. (2009). Sutra Sthana, Chayavipratipattiadhyaya. In: Trikam Y. (Eds.), NibandhaSangraha on Sushrut Samhita. Revised edition. Varanasi, India: Chaukhamba Sanskrit Sansthan; 139-148 13. Dalhan. (2009). SharirSthana, DhamanivyakaranaShariradhyaya. In: Trikam Y, (Eds.), NibandhaSangraha on Sushrut Samhita. Revised edition. Varanasi, India: Chaukhamba Sanskrit Sansthan, 363-369

14. Mohrana, P., &Roushan, R. (2018). A Critical Review Of Vyana Vayu In Modern Physiological Perspective. International journal of basic and applied research, 8(11), 75-82.