

Role of Ama And Nirama in the Pathogenesis and Management of Netra Roga: An Ayurvedic Perspective

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ABSTRACT

In Ayurveda, Ama is considered a fundamental pathological factor responsible for the initiation and progression of various diseases. It is formed due to impaired functioning of Agni, leading to vitiation of Doshas, disturbance of Dhatu-samya, and obstruction of Srotas. The understanding of disease based on the presence or absence of Ama is explained through the concepts of Sama and Nirama Avastha, which serve as essential diagnostic and therapeutic parameters. In the context of Netra Roga, ocular disorders may manifest either in Ama Avastha, characterized by inflammatory features such as pain, redness, edema, lacrimation, and irritation, or in Nirama Avastha, marked by subsidence of these symptoms and restoration of ocular comfort.

Kriyakalpa constitutes a unique group of localized therapeutic procedures described in Ayurveda for the management of eye diseases. Selection of appropriate Kriyakalpa is primarily based on the stage of the disease. Procedures such as Seka, Aschyotana, Bidalaka, and Pindi are preferred during Ama Avastha, whereas Anjana, Tarpana, and Putapaka are indicated in Nirama Avastha. Proper assessment of the disease stage and timely application of Ama-pachana and Dosha-shamana measures play a crucial role in achieving therapeutic success. This review emphasizes the clinical importance of differentiating Sama and Nirama states in Netra Roga and highlights the rational use of Kriyakalpa in achieving effective and safe ocular management

Keywords: Ama, Nirama Avastha, Sama Avastha, Netra Roga, Kriyakalpa, Agni, Ayurvedic Ophthalmology

INTRODUCTION

Ayurveda primarily aims at preserving the health of healthy individuals and alleviating disease in the afflicted. A deeper understanding of both objectives reveals the central role of Ama, which is regarded as the fundamental cause of most diseases¹. Consequently, disease itself is termed Amaya, denoting its association with Ama². In healthy individuals, prevention of Ama formation is essential, whereas in diseased conditions, elimination of already formed Ama becomes the therapeutic priority. According to various Acharyas, Ama originates due to Mandagni and circulates throughout the body via Srotas, leading to Srotovaigunya and disease manifestation³.

Similar to systemic concepts of Sama and Nirama, classical texts also describe these states specifically in relation to Netra Roga. Kriyakalpa, the specialized topical therapeutic modality for ocular disorders, comprises procedures where “Kriya” denotes therapeutic action and “Kalpana” refers to specific formulations⁴. Different Acharyas have described seven types of Kriyakalpa, with Acharya Sushruta explaining five and Acharya Sharangdhara adding Bidalaka and Pindi⁵.

Types of Kriyakalpa

- **Tarpana** involves retention of medicated ghee over the eyes for a stipulated duration based on Dosha predominance⁶.
- **Putapaka** follows a similar method, utilizing medicated juice instead of ghee⁷.
- **Aschyotana** refers to instillation of medicinal drops from a height of two *Angula*⁸.
- **Seka (Parisheka)** involves pouring medicated liquids over closed eyes from four *Angula* height⁹.
- **Anjana** is the application of medicated paste or powder to the inner margin of the eyelids¹⁰.
- **Pindi (Kavalika)** is a medicated poultice applied over the eyes¹¹.
- **Bidalaka** consists of applying medicinal paste over eyelids and peri-orbital region, excluding eyelashes¹².

Concept of Ama

Ama is defined as an improperly processed state of **Rasa Dhatu**, resulting from hypofunctioning of **Agni**, where partially digested food undergoes fermentation within the **Amashaya**¹³. Several Acharyas describe Ama as foul-smelling, sticky, heavy, and capable of producing lethargy and disease¹⁴. It may arise at the level of **Jatharagni, Bhutagni, or Dhatvagni** due to etiological factors, ultimately behaving like toxic metabolites or free radicals that obstruct micro-channels¹⁵.

Nidana of Netra Roga

Etiological factors contributing to Ama-related Netra Roga are broadly classified as **Aharaja, Viharaja, Manasika, and Others**, including improper diet, visual strain, emotional disturbances, and suppression of natural urges¹⁶.

Poorvarupa of Netra Roga

Prodromal symptoms include blurred vision (*Avilata*), watering (*Ashru*), itching (*Kandu*), heaviness (*Guruta*), burning sensation (*Usha*), redness (*Raga*), pricking pain (*Toda*), and reduced blinking movements¹⁷.

Samprapti of Netra Roga

Due to indulgence in causative factors, Doshas become aggravated and spread through **Sira** and **Srotas**, eventually localizing in ocular structures and producing disease manifestations¹⁸.

Lakshanas of Ama and Nirama Avastha

In **Ama Avastha**, symptoms such as intense pain, redness, edema, lacrimation, and irritation predominate, indicating inflammation¹⁹. Conversely, **Nirama or Pakwa Avastha** is marked by reduction in pain, discharge, edema, and a pleasant appearance of the eyes¹⁹.

Therapeutic Approach

Management of Ama in Netra Roga emphasizes **Langhana, Seka, Swedana, Lepa, Dhumapana**, and intake of **Madhura-Tikta Ahara**¹⁹. Procedures like **Anjana, Tarpana, and Putapaka** are contraindicated during Ama Avastha but are indicated once Nirama state is achieved¹⁹. Appropriate selection of Kriyakalpa based on disease stage is essential to prevent complications.

CONCLUSION

Ama plays a pivotal role in the pathogenesis of Netra Roga by obstructing channels and disturbing ocular homeostasis. Differentiation between **Sama** and **Nirama Avastha** is crucial for selecting suitable therapeutic interventions. Proper understanding of this concept ensures effective management and avoidance of treatment-related complications¹⁹.

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