



ISSN: 0976-3031

Available Online at <http://www.recentscientific.com>

CODEN: IJRSFP (USA)

International Journal of Recent Scientific Research
Vol. 10, Issue, 05(C), pp. 32328-32333, May, 2019

**International Journal of
Recent Scientific
Research**

DOI: 10.24327/IJRSR

Research Article

CONCEPT OF *DRISHTI*: A LITERARY REVIEW

¹Gunjan Sharma, ^{*2}Priyanka Rani and ³Ranjana Negi

¹Professor and Head, PG Department of Shalakyia Tantra, Rishikul Campus,
Uttarakhand Ayurved University, Dehradun, Uttarakhand, India

^{*2}Assistant Professor, PG Department of Shalakyia Tantra, Rishikul Campus,
Uttarakhand Ayurved University, Dehradun, Uttarakhand, India

³P G Scholar, PG Department of Shalakyia Tantra, Rishikul Campus,
Uttarakhand Ayurved University, Dehradun, Uttarakhand, India

DOI: <http://dx.doi.org/10.24327/ijrsr.2019.1005.3447>

ARTICLE INFO

Article History:

Received 4th February, 2019

Received in revised form 25th
March, 2019

Accepted 18th April, 2019

Published online 28th May, 2019

Key Words:

Drishti, Controversy, Functional entity,
Structural unit, *Ayurveda*

ABSTRACT

Ayurveda is a wide and deep science which itself is full of knowledge and many scientific facts. With time these facts have been established by the great pioneers of *Ayurveda*. Their contributions for establishing various concepts create milestone in the history of *Ayurveda*. Innumerable researches and experiments are going on in the field of *Ayurveda* but some controversies are still remaining. *Drishti* is one of the controversial terminologies in *Shalakyia Tantra* and there are many concepts which have been given time to time and are still evolving. At some places *Drishti* is taken as a functional entity and at other places as a structural unit. It also appears to have both structural and functional properties in few contexts. In the present study attempts are made to clarify the concepts regarding properties of *Drishti* on the basis of *Ayurvedic* texts and modern ophthalmology and conclusions have been drawn accordingly.

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INTRODUCTION

Ayurveda is an ancient medical science which envisages complete regimen for both healthy as well as diseased one, guarding health at all ages. It is divided into eight branches and *Shalakyia Tantra* is one of them dealing with diseases of supraclavicular region including eyes, ear, nose, throat, head and neck. Out of these; eyes have been given prime importance because of dealing with vision. *Acharya Sushruta* has first given the detailed description of *Netra Sharira* (eye anatomy), well organized classification of eye diseases and their management both by medical and surgical means.¹

Netra Sharira deals with three major portions of eye-*Mandala*, *Sandhi* and *Patala*.² Among five *Mandala Drishti Mandala* is one which is situated in the innermost aspect of eyeball and in context with this all *Drishtigata rogas* have been described. *Drishti* is an important part of eye and in classics it is interpreted in various aspects. It is considered as a controversial entity in *Ayurveda* till today and debates are going on over its structural and functional properties. In the present study attempts are made to elaborate *Drishti* and its relation in different aspects according to *Ayurvedic* and modern sciences.

Aim and Objective

To understand the concept of *Drishti* in different aspects according to *Ayurvedic* and modern classics.

MATERIALS AND METHODS

Various texts including *Ayurvedic* literature, Sanskrit literature and other modern literatures were studied and all the related points have been elaborated in this study.

Literary Review

Ayurvedic Review

Etymology of *Drishti*

Different types of etymology for *Drishti* are given in Indian classical texts and these can be summarised as follows:

Drish-to see + *KtinKarane* means source or tool with which one sees.

Drishbhava + *Ktin* mean seeing, viewing, intellect³.

*Corresponding author: Priyanka Rani

Assistant Professor, PG Department of Shalakyia Tantra, Rishikul Campus, Uttarakhand Ayurved University, Dehradun, Uttarakhand, India

References for Drishti in Ayurveda

Drishti in Anatomical Point of view

According to Ayurveda the vitiated doshas travel through siras and reach the eye then get localized in the *vartmapradesha_sita-asitamandala, sarvakshi* or *drishti* and different diseases of eye are manifested. It is described in *Sushruta Samhita* that *Drishti* as a structure itself is covered externally with outer coat (*Avrataam bahayen patalen akshi*). It has also been told by *Acharya Sushruta* that while doing *Agnikarma* (thermal cauterization) on *vartma* (lids), *Drishti* should be covered with wet gauze (***Drishti achchhadana***).⁴ According to *Acharya Charaka* also there is indication for *Mridusweda* (mild fomentation) for *Drishti* by covering it with *padma, utpalapatra* (leaves of lotus) (***Drishti swedayeta mridu naiv va***).⁵ Here *Drishti* can be considered as an anatomical entity. Appearance of *Drishti* has been described as glow like a lightning bug or that of minute particle of fire (*Khadhyota visfulingabha*). Structure of *Drishti* has been explained as a hole or aperture (*Vivarakriti*).⁶

The measurement (*pramana*) of *Drishti* is described as 1/7th of *Krishnamandala*, 1/9th of *Taraka*, *Masoordala matra* (size equivalent to the cotyledon of Lentil) in Ayurvedic classics.^{7,8,9} ***Drishtyantara*** term has been used to measure distance between two *Drishti* (inter pupillary distance) as four *angulas* is narrated.¹⁰

Drishti Mandala is said to be derived from both paternal and maternal factors in *Ayurveda*.¹¹ Formation of *Drishti* occurs with *sara* of *Panchamahabhuta-akasha, vayu, agni, jala* and *prithvi* (***Panchabhuta prasadjam***) as explained in *Sushruta Uttaratantra*. According to *Ayurveda* *Drishti* never increases in size during whole lifetime.¹² Daily use of *Anjana* and *Ashchyotana* are said to be beneficial for eyes making *Drishti* as clear as a moon appears in the sky.¹³ While explaining prognosis and treatment of many diseases, term *Drishti* has been used as an anatomical entity. When *Savrana shukla* affects *Drishti*, its prognosis becomes poor.¹⁴ *Acharya Vagbhata* explained *Shukla roopata* (whitish discoloration) on involving *Krishna mandala* as well as *Drishti* as an *asadhya* (incurable) *lakshana* of *Shukra*.¹⁵ When *Arma* reaches upto *Drishti, chedana karma* (excision) is advised as a treatment by *Acharyas*.¹⁶ While explaining *Linganasha* changes in colour of *Drishti* are given according to involvement of *Doshas* by *Acharya Sushruta* and *Acharya Vagbhata*.^{17,18} According to *Acharyas* colour of *Drishti* changes when *Doshas* affect *Tritiya Patala*, finally *Doshas* further progress to *Chaturtha Patala* and completely block the vision.¹⁹ *Drishti* gets shrunken in ***Gambhirika*** due to constriction of *Sira* by *Vata*.²⁰ All the above references indicate towards *Drishti* being an anatomical entity.

Drishti In Physiological Point of View

Properties of *Drishti*- It performs better in shade and cold atmosphere (*Sheet satmya*).

Drishti as knowledge-*Drishti visharada* is a term used for persons having extreme knowledge.

Drishti as Vision- In Ayurvedic classics there are several references which indicate that *Drishti* term is used for vision. Few textual references are as following

- When *Tejo Dhatu* does not reach *Drishti*, congenital blindness (*Jatyandha*) is developed.²³
- If poison is given in *Anjana* form (*Visha Samsrishta Anjana*) then blurring of vision (*Drishti vibhrama*) occurs.²⁴
- Controlling *vega* (natural urges) like *Kshudha* and *Adhovaayu* leads to defective vision.^{25,26}
- If *Adhimantha* is not treated properly it leads to loss of vision (*Drishtihanana*).²⁷
- *Acharya Vagbhata* used term *Drishti Mushita darshanam* for loss of vision in *Aupsargika Lingnasha*.²⁸ *Acharya Sushruta* used term *Drishti runaddhi* for loss of vision in *Linganasha*.²⁹
- *Drishtiprada Varti* is mentioned by *Acharya Charaka* in *Trimarmiya adhyaya* for treatment of *Netrarogas* and it

is said to be potent enough to provide vision to even blind persons.³⁰

- There are several references for *Ahara sevana* affecting *Drishti* (vision). Food prepared in *ghrita*, as well as intake of *Mudga* is said to be *Drishti Prasadaka* (helpful for vision).^{31,32} Food materials which are prepared in *Taila* are said to be *Drishtighna* (harmful for vision).³³ Intake of *Kalinda* is said to be *Drishti kshyakara* (harmful for vision).³⁴ *Drishti Dushana* (Vision impairment) occurs due to intake (*sevana*) of *Viruddha dhanya*.³⁵
- *Putapaka Kriyakalpa* is considered as *Drishti balartha parama* by *Acharya Sushruta* whereas *Acharya Vagbhata* described *Putpaka* as *Driga baladhana*, both of which indicate improvement in vision by *putapaka*.^{36,37} *Nasya* procedure is also said to be *Drishti prasdana*.³⁸ As a result of *Mukhalepa*, strengthening of vision (*Drishtibala*) occurs.³⁹
- *Taila-abhyanga* and *Padabhyanga* are also said to be helpful in improving vision (*Drishti Prasada*) according to both *Acharya Vagbhata* and *Acharya Charaka* respectively.^{40,41}

All the above references denote that *Drishti* term has come mainly for functional outcome –vision.

Drishti in Both Physiological and Anatomical View

- *Ropana anjana* is considered as *Drishti Varnya* and *Bala Vardhanam* that means eyes become clean externally along with improvement in vision.⁴²
- In *Pitta Vidagdha Drishti, Kaphavidagdha Drishti* and *Nakulandhya* structural and functional both deformities occur in *Drishti*.⁴³
- In *Abhigataja linganasha* structural and functional both deformities occur (*Drishti Vidiryate, sidati, hiyate*).⁴⁴
- In *Animittaja Linganasha* there is loss of vision (*Drishtihanyate*) but *Drishti* appears clear (*Vaidurya varna/Vimala varna*) which shows vision is hampered in spite of intact structural integrity.⁴⁵

Above are the references of *Drishti* indicating for anatomical as well as physiological aspect.

Modern Review⁴⁶

In Modern Ophthalmology there are few structures related to vision which can be comparable to the description given in Ayurvedic texts for *Drishti*. Structures related to visual axis and vision are as following-

Cornea: Cornea is a clear, transparent and elliptical structure with a smooth shining surface.

Aqueous humor: The aqueous humour is a clear watery fluid filling the anterior chamber (0.25 ml) and posterior chamber (0.06 ml) of the eyeball. It plays an important metabolic role by providing substrates and by removing metabolites from the avascular cornea and lens. It maintains optical transparency.

Pupil: Pupil is central opening in the iris and its size varies between 1 and 8 mm. Constriction of pupil regulates the entry of light inside the eye and allows the retina to adapt to the changes in the illumination.⁴⁷

Lens: The lens is a biconvex and transparent structure. The lens has nodal point (optical centre of lens) on its posterior part through which rays of light passes to retina.

Retina: It is the innermost tunic of the eyeball and the most highly-developed tissue and consists of 10 layers. Grossly it is divided into two distinct regions: Posterior Pole and Peripheral Retina separated retinal equator. Posterior pole refers to the area of the retina posterior to the retinal equator. The posterior pole of the retina includes two distinct areas: the optic disc and macula lutea.

Optic disc: It is a circular area of 1.5-mm diameter. At the optic disc all the retinal layers terminate except the nerve fibres, which pass through the lamina cribrosa to run into the optic nerve. Physiological cup is a depression seen in the disc.

Macula lutea: It is about 5.5 mm in diameter. Fovea centralis is the central depressed part of the macula. It is about 1.5 mm in diameter and is the most sensitive part of the retina. In its centre is a shining pit called Foveola (0.35-mm diameter) which is situated about 2 disc diameters (3 mm) away from the temporal margin of the disc and about 1 mm below the horizontal meridian. An area about 0.8 mm in diameter (including foveola and some surrounding area) does not contain any retinal capillaries and is called foveal avascular zone (FAZ). Surrounding the fovea are the parafoveal and perifoveal areas. Peripheral retina refers to the area bounded posteriorly by the retinal equator and anteriorly by the ora serrata.

Areas of brain: The visual cortex is the primary cortical region of the brain that receives, integrates, and processes visual information that is relayed from the retinas. It is located in the occipital lobe of the primary cerebral cortex which is in the most posterior region of the brain.

Visual Axis: Visual axis is the line joining the fixation point (O), nodal point (N), and the fovea (F).

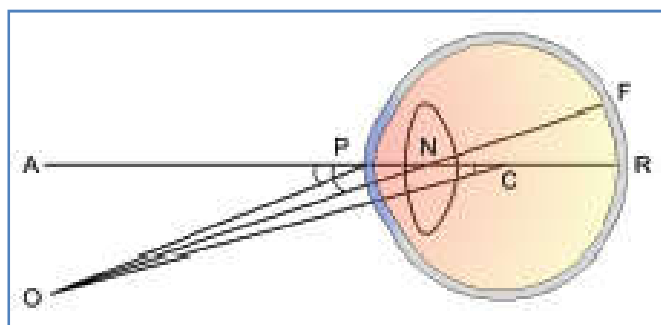
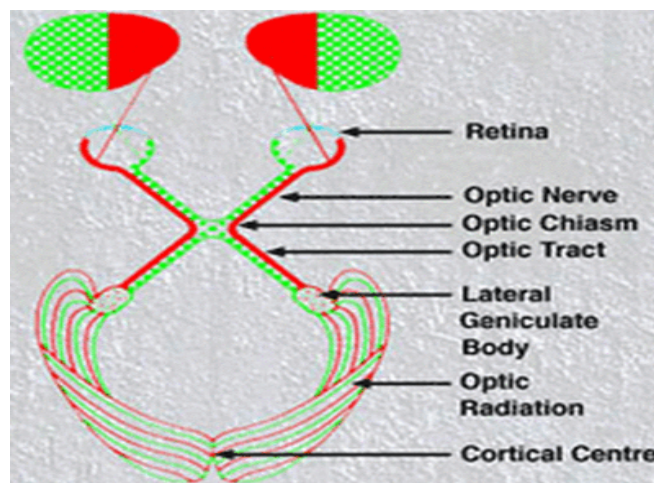


Figure 1 Visualaxis (OF); fixation axis (OC)

Visual pathway system: The visual pathway consists of: Optic Nerve, Optic Chiasma, Optic Tract, Lateral Geniculate Body, Optic Radiations and Visual Cortex.



DISCUSSION

All the *Ayurvedic* texts imply that *Drishti* can be taken as an anatomical entity (eyeball, central part of cornea, pupillary aperture, lens, retina or optic nerve) as well as a physiological outcome -vision.

Discussion on Anatomical aspect of Drishti

Drishti as Eyeball: There is description regarding protection of *Drishti* during *Agnikarma* and also while doing *Mridusweda* (mild fomentation) of *Drishti*, covering it with different leaves has been advised. Since all these objects can only be applied only externally to a body part and thus here *Drishti* can be considered as eyeball.

Drishti as Cornea: While describing prognosis of *Savranashukra* it is said to be *asadhya* (incurable) when this disease involves *Drishti*. In modern texts similar type of condition is seen in corneal ulcer and corneal opacity where central as well as deeper layers of cornea are involved, it results into blurring of vision and in advanced cases it may lead to even blindness.

Drishti is said to be covered by *Bahayapatala*. As per *Ayurvedic* classics *Bahya patala* is *Tejo-jala ashrita* which is further explained in *Dalhana* commentary that this *patala* is considered as *Accha* (clear) that helps in *Roopa grahanam* (vision) by *Drishti*⁴⁸. It indicates towards transparent structure which is helpful in vision also. In modern ophthalmology Cornea is explained as a clear and transparent structure through which light rays pass and reach upto retina. Any disturbance in its transparency causes defective vision. It is also a fact that all ocular structures related to vision are helpful in vision provided cornea is healthy. Hence here *Drishti* can be considered as cornea.

Drishti as Pupil: *Drishti* is said to have glow-worm like appearance as per *Ayurveda*; it can be due to the fact that eyes reflect some amount of light and this is visualized in pupil. The feature of *Vivarakriti* implies a hollow structure as explained in *Ayurveda* as well as modern ophthalmology⁴⁹. According to modern ophthalmology pupil is a hollow aperture in the centre of the iris that allows light to pass into retina.

Measurement of *Drishti* is given as 1/7 of *Krishnamandala* (cornea) and 1/9th of *Taraka*(iris) which can be clarified taking into consideration that pupil constrict or dilate according to the amount of light received and hence changes in size occur. It is

also regarded as *Masoordalaprmana* which again signifies the same dilating or constricting actions of pupil. In the description of *Kaphajalinganasha*, constricting and dilating feature of *Drishti* to light and dark comes, which signifies the property of pupil as *Drishti*. In context to Arma, surgery (chedanakarma) is avoided if it is situated near *Drishti*.⁵⁰ Here *Drishti* can be considered for pupil and pupillary margins. All these points indicate towards close resemblance of *Drishti* to pupil.

***Drishti* as Lens:** *Drishti* plays an important role in pathogenesis and progression of *Timira roga* as there is wide description of this *roga* under the umbrella of *Drishtigaroga*. All three forms of this *roga-Timira, Kaacha* and *Linganasha* are found in different *patalas* of *Drishti*. All these features given for changes in colour of *Drishti* in *Timira* or *kacha* or *linganasha* can be depicted in modern texts and can be correlated with the disease of lens called as cataract. In cataract various colour changes along with different pattern of lens opacification are seen, these can be correlated with colour of *Drishti* in different types of *Timira*. Taking these facts into consideration, lens as an anatomical entity has a resemblance with *Drishti*.

***Drishti* as Retina:** *Drishti* has origin from *sara* of *panch mahabhuta* with predominance of *tejomahabhuta* which is considered as light media for eye. *Roopa* with the help of *teja* travels into *chakshu* and then reached to *chaksurendriya* and then to *chakshubudhhi* where perception of the object occurs and finally perceived by *atma* which provide information of the object and all this can be considered as pathway for visual impulse received by eyes and thus enabling it to see.

IndriyaArtha (object has form)



IndriyaDravya (light media)



IndriyaAdhisthana (eyes)



Indriya (photoreceptor cells of retina (rods and cones))



IndriyaBuddhi (transmission of image via visual pathway)



Atma (higher centre i.e. visual cortex)

Flow Chart - Processing of vision according to *Ayurveda*

The diseases explained in *Drishtigaroga* like *Pittavidagdha Drishti*, *Kaphavidagdha Drishti*, *Nakulandhya* or *Hriswajadya* have features of night blindness, day blindness, distorted vision and loss of vision. Here *Drishti* can be considered as retina because in all these diseases the retinal involvement is present which affects the visual outcome.

***Drishti* as Optic Nerve:** In a disease *Hatadhimantha*, which is a complication of *Adhimantha*, *Drishti pratikshipan* (shrinkage of *Drishti*) is found as a clinical feature. In *Gambhirika roga* also feature of shrunken eyeball is given by *Acharyas* which can be correlated with a condition of *Pthisis bulbi* according to

modern science which is defined as shrunken, non-functional eye. Thus *Drishti* can be correlated with atrophy of optic nerve in modern ophthalmology.

In a previous study it was concluded that *Drishti* should be referred as pupil in context of anatomy, intraocular lens in context to *Kaach, Timira, Linganasha* and it can be taken as optic nerve or retina as a whole in context to *Pittavidaghdhadrishti, shleshmavidaghdhadrishti*.⁵¹ In another study *DrishtiKacha* term was compared to Lens, *DrishtiPatala* to Retina, *Drishtinadito* Optic Nerve and *DrishtiMarga* to Visual Pathways System.⁵²

Discussion on Physiological aspect of *Drishti*

***Drishti* as visual outcome:** In some disease like *Animittaja Linganasha* and *Aupsargikalinganasha* there is no structural deformity but there is physiological dysfunction in eye (vision loss). It indicates that vision can be hampered even when eye appears quiet as seen in few conditions like retrobulbar neuritis in modern ophthalmology.

Discussion on Anatomical as well as Physiological aspect of *Drishti*

In *Abhigatajalinganasha* there is destruction of structure as well as loss of vision, which implies that *Drishti* can be taken as an anatomical and physiological unit both. In modern ophthalmology also it is seen that when there is any trauma occurs in eye, structural as well as physiological loss is seen.

CONCLUSION

In *Ayurveda*, *Drishti* is used as a broad terminology and is used accordingly in different aspects. From the present study it can be concluded that *Drishti* is not just a single entity but composed of many structures that can be correlated in modern ophthalmology. The structures which come across visual axis and their functional output in total can be taken as *Drishti*. In view of this definition the structures i.e. central part of Cornea, Pupil, Lens, Vitreous, Retina, Visual pathway all come under the broad view of *Drishti* along with functional outcome i.e. vision. For treating the diseases related with *Drishti* there should be proper knowledge of different terminologies and their practical implementation so that the basic aim of *Ayurveda*- to maintain the health of healthy person and to cure the unhealthy person can be achieved.

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How to cite this article:

1 Gunjan Sharma, Priyanka Rani and Ranjana Neg., 2019, Concept of Drishti: A Literary Review. *Int J Recent Sci Res.* 10(05), pp. 32328-32333. DOI: <http://dx.doi.org/10.24327/ijrsr.2019.1005.3447>
