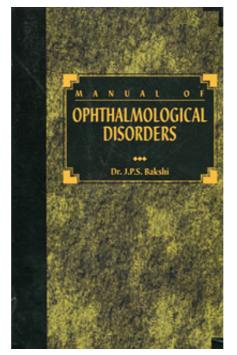
J.P.S. Bakshi Manual of Ophthalmological Disorders

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4. Diseases of Sclera

- A. Inflammation of the Sclera
- B. Staphyloma

A. Inflammation of the Sclera

Types

- 1. Superficial (Episcleritis)
- 2. Deep (Scleritis)

1. Episcleritis

Introduction

It is the inflammation of the subconjunctival episcleral tissue, along with the superficial lamellae of the sclera. It occurs in the elderly.

Etiology

- Episcleritis may be associated with:
- 1. Rheumatism or gout
- 2. Collagen disorder
- 3. As an allergic reaction to an endogenous toxin tubercular or streptococcal, from a septic focus.

Clinical Features

- 1. Pain and tenderness in the eye
- 2. No discharge, lacrimation or photophobia
- 3. A hard, pinkish red nodule appears underneath the conjunctiva 2-3mm away from the limbus. It is fixed to the deeper structures and is tender to touch.

Complications

The lesion may extend into the deeper layers of the sclera, causing scleritisand uveitis.

Management

Pharmacological Treatment

1. Hydrocortisone acetate 1%

- 2. Elimination of septic focus or tubercular focus
- 3. Salicylates by mouth

Homeopathic Repertorial References

Direct references

Eye; INFLAMMATION; sclerotics

Eye; INFLAMMATION; sclerotics; superficial

On the basis of etiology

associated with rheumatism or gout

Extremity Pain; JOINTS; rheumatic Extremity Pain; JOINTS; gouty-allergic reaction to an endogenous toxin

Generalities; ALLERGY Generalities; TUBERCULOSIS Generalities; STREPTOCOCCUS infection

On the basis of clinical features

pain in the eye

Eye; PAIN; General

hard, pinkish red nodule

Eye; DISCOLORATION; redness; stripe; sclerotics, on

On the basis of complications

scleritis Eye; INFLAMMATION; sclerotics uveitis Eye; INFLAMMATION; iris, iritis

2. Scleritis

Introduction

It means inflammation of the sclera and it is usually bilateral. The women are frequently affected than men.

Etiology

1. Toxic and allergic influences

2. Endogenous infections - tuberculosis, syphilis, leprosy and viral infections may cause scleritis

- 3. Secondary infections from the peri-ocular or intra-ocular tissues may affect the sclera
- 4. Exogenous infection as a result of ulceration or injury
- 5. Systemic and metabolic disturbances like rheumatoid arthritis or gout are frequent causes of scleritis.

Clinical Features

- 1. Marked pain in the eye, which may radiate to the frontal region.
- 2. Lacrimation but no discharge
- 3. Pinkish red area appears with hyperaemia of the surrounding conjunctiva
- 4. Anterior part of the sclera is affected in one sector.

Complications

- 1. The inflammation may spread into cornea
- 2. Associated uveitis is common
- 3. Thinning of the sclera causes bulging of the uveal tract, known as staphyloma which may lead to secondary glaucoma

Management

Pharmacological Treatment

- 1. Analgesics to relieve pain
- 2. Salicylates by mouth
- 3. Hydrocortisone acetate 1%

Homeopathic Repertorial References

Direct references

Eye; INFLAMMATION; sclerotics

On the basis of etiology

allergic influences

Generalities; ALLERGY

endogenous infections

Generalities; TUBERCULOSIS Generalities; SYPHILIS Generalities; HANSEN'S disease Skin; LEPROSY

ulceration or injury

Eye; ULCERATION; conjunctiva Eye; INJURIES, from

associated with rheumatism or gout

Extremity Pain; JOINTS; rheumatic Extremity Pain; JOINTS; gouty

On the basis of clinical features

pain in the eye

Eye; PAIN; General; extending; forehead; to

lachrymation

Eye; LACHRYMATION

hyperaemia of the conjunctiva

Eye; DISCOLORATION; redness

On the basis of complications

keratitis

Eye; INFLAMMATION; cornea, keratitis

- uveitis
 - Eye; INFLAMMATION; iris, iritis

staphyloma

Eye; STAPHYLOMA; inflammation, after suppurative Eye; STAPHYLOMA

B. Staphyloma

Introduction

It is the ectasia or bulging of the wall of the eyeball along with uveal tissue.

Types

- 1. Anterior Staphyloma
- 2. Ciliary Staphyloma
- 3. Intercalary Staphyloma
- 4. Equatorial Staphyloma
- 5. Posterior Staphyloma

1. Anterior Staphyloma

Introduction

It occurs as a result of sloughing of the corneal ulcer.

Homeopathic Repertorial References

Direct references

Eye; STAPHYLOMA

On the basis of etiology

sloughing corneal ulcer

Eye; ULCERATION; cornea Eye; ULCERATION; cornea; destructive Eye; ULCERATION; cornea; perforating

2. Ciliary Staphyloma

Introduction

It occurs due to bulging of the ciliary body due to thinning of the sclera, This occurs in the area, extending up to 8mm from the limbus. It is bluish in colour and irregular in appearance.

Homeopathic Repertorial References

Direct references

Eye; STAPHYLOMA

3. Intercalary Staphyloma

Introduction

It occurs at the limbus immediately in front of the ciliary body.

Homeopathic Repertorial References

Direct references

Eve; STAPHYLOMA

4. Equatorial Staphyloma

Introduction

It occurs at the region of sclera which are perforated by vertex veins and also at the equatorial region of the sclera.

Homeopathic Repertorial References

Direct references

Eye; STAPHYLOMA

5. Posterior Staphyloma

Introduction

It occurs in high myopia due to bulging out of the sclera at the posterior pole of the eyeball.

Homeopathic Repertorial References

Direct references

Eye; STAPHYLOMA

On the basis of etiology

Vision; MYOPIA, nearsightedness

8. Metabolic Diseases

The following metabolic disease bring about marked changes in the eye function.

1. Gout and Rheumatism

Clinical examination

- Ophthalmoscopic examination reveals the following changes:
- a. Episcleritis and scleritis
- b. Uveitis

Homeopathic Repertorial References

On the basis of etiology

goof and rheumatism

Eye: RHEUMATISM of Eye: RHEUMATISM of: right, then left Eye: STIES: rheumatism, after attack of Eye: GOUT Eye: INFLAMMATION: arthritic, gouty, rheumatic

On the basis of clinical examination

uveitis

Eye: INFLAMMATION: choroid

2. Diabetes Mellitus

Clinical Features

Hypermetropia when the blood sugar falls and myopia when the blood sugar rises

Clinical Examination

- a. Haemorrhagic iritis
- b. Diabetic cataract mainly in juvenile diabetes
- c. Diabetic retinopathy-microaneurysms in the retina
- d. Palsies of extra-ocular muscles
- e. Optic neuritis

Homeopathic Repertorial References

On the basis of clinical examination

retinitis

Eye; INFLAMMATION; retina; diabetic

hypermetropia and myopia

Vision; HYPERMETROPIA, hyperopia, farsightedness Vision; MYOPIA, nearsightedness

On the basis of clinical features

hemorrhagic iritis Eye; INFLAMMATION; iris, iritis cataract Eye; CATARACT, opacity of lens optic neuritis Eye; INFLAMMATION: optic nerve ocular palsies Eye; PARALYSIS of; muscles of eyeball

C. Diseases of the Kidney - Nephritis

Clinical Features

i. Passive oedema of eyelids

Clinical Examination

i. Renal retinopathy similar to hypertensive retinopathy (i.e. flame shaped retinal haemorrhages and wooly exudates in retina).

Homeopathic Repertorial References

On the basis of clinical features

edema of eyelids Eye; SWELLING; lids; edemcitons

On the basis of clinical examination

hypertensive retinopathy Eye; HYPERTENSIVE retinopathia

D. Toxaemia of Pregnancy

Clinical Examination

- i. Sudden black out of vision due to spasm of retinal arteries
- ii. Retinopathy similar to hypertensive retinopathy with added signs of detachment of retina.

Homeopathic Repertorial References

On the basis of clinical examination

retinitis

Eye; INFLAMMATION; retina; albuminuria. with; pregnancy, during

Eye; INFLAMMATION; retina; pregnancy, during

hypertensive retinopathy

Eye; HYPERTENSIVE retinopathia Eye; PAIN; Stitching; kidney complaints of pregnancy

E. Cardiovascular System

Clinical Features

Benign and malignant hypertension

Clinical Examination

The changes may occur in retina as in retinopathy of hypertension

Homeopathic Repertorial References

On the basis of clinical features

hypertensive retinopathy

Eye; HYPERTENSIVE retinopathia

F. Blood Diseases

The following blood disorders lead to eye manifestations:-

1. Leukemia

Clinical Examination

a. Dilatation of retinal vessels

tye Changes in Systemic Diseases 223

b. Retinal hemorrhages with central white areas

Clinical Features

Subconjunctival hemorrhages

Homeopathic Repertorial References

On the basis of clinical features

retinal hemorrhages

Eye: HEMORRHAGE: retina Eye: HEMORRHAGE: retina: blindness, with Eye: HEMORRHAGE: retina: cough, from

Subconjunctival hemorrhages

Eye: HEMORRHAGE: eyes, bleeding from Eye: HEMORRHAGE: eyes, bleeding from: absorption of intra-ocular hemorrhage, hastens Eye: HEMORRHAGE: eyes, bleeding from; blowing nose, on

Eye: HEMORRHAGE; eyes, bleeding from; burning, with Eye; HEMORRHAGE; eyes, bleeding from; coughing, from Eye; HEMORRHAGE; eyes, bleeding from; coughing, from; whooping Eye; HEMORRHAGE; eyes, bleeding from; opening eyes Eye; HEMORRHAGE; canthi Eye; HEMORRHAGE; lids Eye;

Eye; HEMORRHAGE; canthi Eye; HEMORRHAGE; lids Ey HEMORRHAGE; Subconjunctival

2. Purpura and Haemophilia

Clinical Features

Subconjunctival, retinal and orbital hemorrhages

Homeopathic Repertorial References

On the basis of etiology

hemophilia

Generalities; HEMORRHAGE; tendency or actual; blood; coagulate, does not, hemophilia Generalities; HEMORRHAGE; tendency or actual; blood; coagulate, does not, hemophilia; intermittent Generalities; HEMORRHAGE; tendency or actual; blood; coagulate, does not, hemophilia; thin, dark

purpura

Generalities: HENOCH schoulein purpura

On the basis of clinical features

subcorijunctival, retinal and orbital hemorrhage

Eye: HEMORRHAGE: retina Eye; HEMORRHAGE: retina: blindness, with Eye: HEMORRHAGE: retina: cough, from Eye: HEMORRHAGE: eyes, bleeding from Eye: HEMORRHAGE: eyes, bleeding from; absorption of intra-ocular hemorrhage, hastens Eye: HEMORRHAGE; eyes, bleeding from; blowing nose, on Eye; HEMORRHAGE; eyes, bleeding from; burning, -with Eye; HEMORRHAGE; eyes, bleeding from; coughing, from Eye; HEMORRHAGE; eyes, bleeding from; coughing, from Eye; HEMORRHAGE; eyes, bleeding from; coughing, from; whooping Eye; HEMORRHAGE; eyes, bleeding from; opening eyes Eye; HEMORRHAGE; canthi Eye; HEMORRHAGE; lids Eye: HEMORRHAGE; subconjunctival

3. Pernicious Anaemia

Clinical Examination

Retinal haemorrhages with central white spots are seen ophthalmoscopically.

Homeopathic Repertorial References

On the basis of clinical examination

Retinal haemorrhages with central white spots

Eye; HEMORRHAGE; retina Eye; HEMORRHAGE; retina; blindness, with

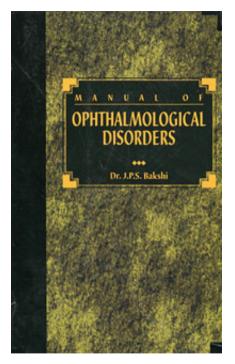
G. Intracranial Lesions

The following intra-cranial lesions are responsible for bringing about changes in the eye function-

I. Subdural Haematoma

Clinical Examination

Papilloedema is seen ophthalmoscopically.



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