



DRISHTI: A POLYSEMOUS CONCEPT IN SHALAKYA-TANTRA

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ABSTRACT

Ayurveda is a science that is a boon of knowledge and consists of many scientific facts which are established by the great pioneers of *Ayurveda*. Despite being full of knowledge, there are still many controversies left to talk about. Among the five sense organs, the eye has its prime importance as "*Sarvendriyaanam Nayanam Pradhanam*". In *Shalaky-Tantra*, *Drishti* is one of the controversial terminologies present. Many concepts have been explained once and again but it is still an evolving entity present in *Ayurveda*. Numerous aspects of *Drishti* have been explained in the *Ayurvedic* texts. In some places, it is considered as an anatomical or structural unit and in other places, it is taken as a functional entity. This study attempts to address the different concepts of *Drishti* explained on the basis of *Ayurvedic* as well as modern literature and to properly enlighten this controversial terminology.

Keywords: *Drishti*, *Sushruta*, Vision, *Netra*.

INTRODUCTION

Ayurveda is a science of health and healthy living that is scientifically designed to relieve diseases and

healthy as well as guards the health of all ages. It is divided into eight branches also known as *Ashtang*

Ayurved. Among the *Ashtang Ayurved*, *Shalakya-Tantra* is one out of the eight branches dealing with the diseases of *Urdhwajatru* i.e., a supraclavicular region including eye, ear, nose, throat, head, and neck. Eyes (*Netra*) have been given prime importance in *Ayurveda*. *Acharya Sushruta* has given a meticulous description of *Netra Sharira* (Anatomical consideration of the eye). *Netra Sharira* deals with three major portions i.e., *Mandala*, *Sandhi*, and *Patala*.^[1] A total of five *Mandalas* are explained among which *Drishti Mandala* is situated in the innermost aspect of the eyeball and in context with this all the *Drishtigata Rogas* are described. The structure and the process of seeing both are inbuilt meanings of the word *Drishti*. *Drishti* is an integral part of the eye and numerous aspects have been mentioned in classical texts about it. Despite such diverse information, it is still a controversial entity in *Ayurveda* today. Hence, anatomical, physiological, and pathological aspects as well as the arrant meaning of the word *Drishti* need a clear understanding of all relevant references in *Shalakya* literature. This study attempts to address the different concepts of *Drishti* explained on the basis of *Ayurvedic* as well as modern literature and to properly enlighten this controversial entity.

1.1 AIM AND OBJECTIVES

To thoroughly address the multifarious aspects of *Drishti* according to *Ayurvedic* and modern literature.

1.2 MATERIALS AND METHODS

Material – Various *Ayurvedic* texts such as *Sushruta Samhita*, *Charak Samhita*, *Ashtang-Hridayam*, *Ash-tang-Sangraha*, etc., modern literatures, medical journals, published research articles were studied and all the relevant points have been explained in this study.

Method – Study Type- Review.

1.3 ETYMOLOGY OF DRISHTI

Drishti = *Drish Dhatu* (to see) + *Ktina Krite Pratyaya* = which literary means “to see things” or another meaning which can be described is “the source or tool with which one sees”. There are multitudinous meanings of the word “*Drishti*” mentioned such as the faculty of seeing, knowledge, viewing, sight, etc. and when it is added with other adjectives

it gives a particular meaning.^[2] If we conclude all the meanings, it reflects that the word *Drishti* has two meanings viz. one is the structural part of the organ, and the other meaning is the process of seeing or viewing.

1. *Drishti* as a Structural Entity

In *Ayurveda*, there is a description of various *Nidanas* (causes) which lead to the manifestation of various eye diseases. As *Acharya Sushruta* has mentioned in *Uttartantra* that the consumption of these *Nidanas* leads to vitiation of the *doshas*. These vitiated *doshas* then travel through the *Siras*, reaches the *Urdhwabhaga*, and then get localized in various parts of the eyes to manifest various eye disorders.^[3]

2.1 *Drishti* as *Mandala* – *Acharya Sushruta* while describing the gross anatomy of the eye mentioned five types of *Mandalas* (circular areas) in the eyeball i.e., *Pakshma*, *Vartma*, *Shweta*, *Krishna*, *Drishti*. The measurement/dimension of *Drishti* is mentioned as 1/7th of the *Krishnamandala* (cornea) and 1/9th of *Taraka* (iris). Also, he has mentioned the measurement of *Drishti* as *Masurdala matrantu* (size equivalent to the cotyledon of a lentil) while *Acharya Sharangdhar* has mentioned it as the half of it (*Masurdaha dalonmita*). The shape of the *Drishti* is mentioned as *Vivarakriti* i.e., a round hole or aperture. The appearance of *Drishti* is mentioned as that of a firefly (*Khadhyota*) or like a minute fire particle (*Visfulingabha*).^[4] In the *Krishnagata Roga Vigyaniam* chapter, *Acharya Sushruta* has mentioned that when the *Savrana Shukra* (Corneal ulcer) is near the *Drishti* or against the centre of cornea i.e., *Drishti-mandala*, then its prognosis is bad and if it is away from the *Drishti* or the central part the prognosis is good. The relation of some pathological conditions can only be predicted in a structural way and not of the physiological structure. *Acharya Vagbhata* has also mentioned the measurement of *Drishti-mandala* with a ratio to *Krishna mandala*. The measurement and features can only be described for a structural entity and not a physiological one.

2.2 *Drishti* as Eyeball – *Acharya Sushruta* in *Chikitsa sthana* has mentioned the use of *Srotoanjan* (Antimony sulphide). He described that *Srotoan-*

jana is *Uttam* and it combats the *Drishtikleđa* i.e., more specifically *Netrakleđa* (discharges from the eye) which gives us a clue of the indication towards *Drishti* as Eyeball.^[5] In the general management of *Nayanabhighata* (Ocular Injury), *Acharya Sushruta* has mentioned the use of *Snigdhadri Drishti prasada janana vidhi* (nourishing eye therapies).^[6] *Acharya Charak* has mentioned the use of *Mridu sweda* in *Drishti* (*Drishti swedyen mridu naiva va*). He further described the procedure by covering it with *Padma* and *Utpala patra*.^[7] Also, *Acharya Sushruta* mentioned that while doing thermal cautery (*Agnikarma*) on the eyelids, it is indicated that *Drishti* should be covered with a wet gauze piece. As we can only cover an anatomical structure, it means that the whole eyeball except the lid area where the thermal cautery is being done is to be covered with a wet gauze piece. This indicates the consideration of *Drishti* as an eyeball. *Acharya Sushruta* has mentioned the term *Drishti visharda* means Ophthalmologists (Eye physicians). This gives us the clue that the term *Drishti* is used for *Netra* (Eyeball). In the commentary of *Sushruta Samhita*, it is mentioned that the *Drishti* is covered with an outer coat (*Avratam patalena akshano bahyen*). Out of the six *Patalas*, two *Vartama patala* (eyelids) which are outside the eyeball covers and protect the eyeball which also gives an indication towards considering *Drishti* as an eyeball. *Acharya Sushruta* has mentioned *Hatadimantha* as a complication of *Adimantha* (Glaucoma) in which *Drishti pratikshipan*^[8] is mentioned as a clinical feature. *Acharya Dalhana* further explained *Pratikshipan nishkasyati* (meaning to push out). The signs and symptoms of glaucoma may include bulging eyes if the intraocular pressure is persistently increased. Hence, *Drishti* can be considered as eyeball.

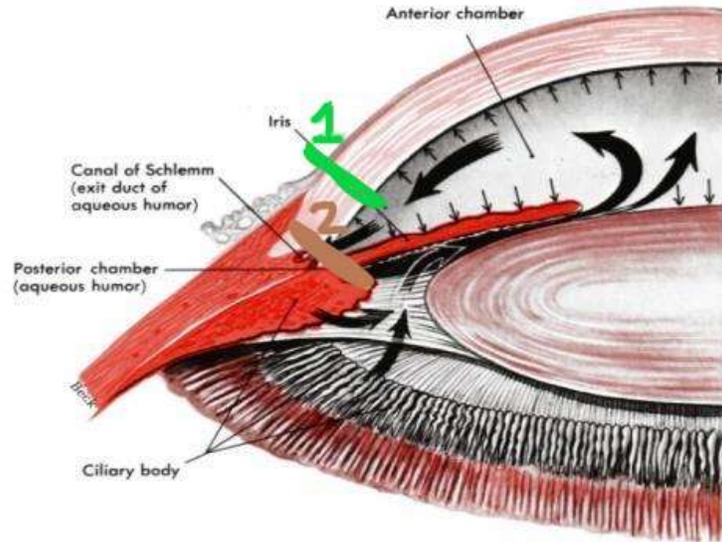
2.3 *Drishti* as Inter-pupillary distance – *Acharya Sushruta* has mentioned in *Sutrasthana* that *Drishtyantara* i.e., the distance between *Drishti-mandala* is 4 *Angula*.^[9] Out of the five *Mandalas*, *Drishti-mandala* is the circle made by the pupillary margin, so *Drishtyantara* refers to the distance between the pupils. The normal average inter-pupillary distance in an adult male has a range from 50-75 mm.

^[10] If the conversion is considered, then one *angula* is about 17.63 mm and which gives *Drishtyantara* as 70.52 mm. Hence, *Drishti* can be considered as Inter-pupillary distance which explains the structural entity of *Drishti*.

2.4 *Drishti* as Cornea – *Acharya Sushruta* while describing the prognosis of *Savřana Shukra* explained that if the disease involves *Drishti* the prognosis is not good. ^[11] In modern ophthalmology, the analogous condition is seen when the corneal ulcer if not treated then it spreads into the deeper tissues (any damage to corneal stroma always leaves behind opacity) inducing blurring of vision and in further advanced cases may lead to complete loss of vision.

2.5 *Drishti* as Pupil – In the elucidation of *Kaphaja Lingnasha*, it is mentioned that *Drishti-mandala* constricts in sunlight and dilates in dark/shadow. ^[12] It indicates the consideration of *Drishti* as Pupil because of the variation of its diameter with respect to the intensity of light. Also, in the prognosis of *Savřana Shukra*, *Acharya Sushruta* has explained that the prognosis is good when it is not near to *Drishti* which can be understood as the peripheral part of the pupil. *Drishti* is said to be covered by *Bahaya Patala*. In *Ayurveda* literature, *Bahaya patala* is considered *Tejo-Jala Ashrita* and *Dalhana* further explained that this *Patala* needs to be clear so that the light rays can enter the eye and *Roopa grahanam* (vision) is established. Modern texts enlighten us that the cornea is a clear and transparent structure through which light rays can pass and it covers the pupillary circle which suggests the expression of considering *Drishti* as pupil. The dimension of *Drishti* is said to be equivalent to *Masoordala Matra* (cotyledon of lentil) which is nearly 3-4 mm in diameter and similarly, the pupil is about 2-4 mm in diameter. The measurement of *Drishti* is described as 1/7th of the *Krishan-mandala* (Circle made by cornea) and 1/9th of *Taraka*. *Acharya Dalhana* has further elaborated that *Taraka* is the *Krishan Bhaga* (Black part). It is visible that whether *Drishti* is 1/7th of the *Krishan-mandala* or 1/9th of the *Taraka*, the dimension of *Drishti* is constant i.e., *Masoordala Matra*. If we properly understand, then one is *Krishan-mandala* which is lying inside the

white circle i.e., cornea, and another is *Krishna* (Black) i.e., *Taraka* which is again inside the white circle but the proportionate dimension of *Drishti* to *Krishna mandala* and *Taraka* is disparate advising Figure I showing the Angle of the Anterior Chamber



Mark 1 indicates the extent of the cornea and mark 2 indicates the extent of the iris. The root of the iris is more than that of the cornea. Thus, proving that the iris circle is larger than that of the cornea. (See Figure I)

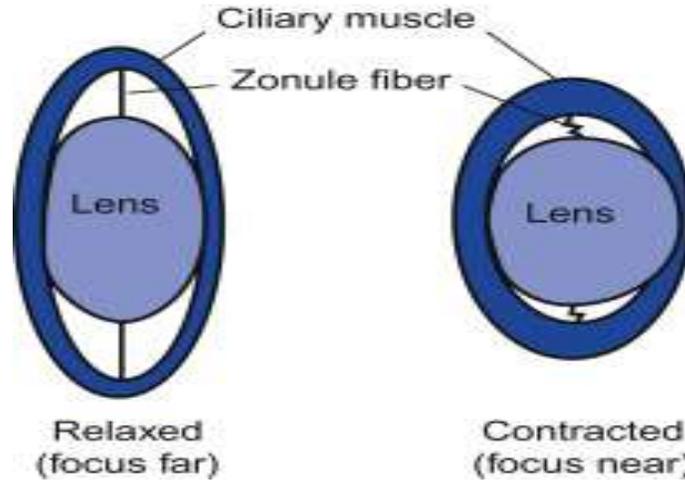
- *Krishan-mandala* (Cornea) X 1/7
= *Drishti-mandala* (Pupil) (*Masoordala Matra*).
- *Taraka* (Iris) X 1/9

Acharya Sushruta has mentioned a disorder *Gambhirika* in which *Drishti* becomes *Viroopa*, *Sankuchit*, and *Abhyantara*.^[13] *Gambhirika* is correlated with Anterior uveitis in modern science. *Drishti* is *Vivara-kriti* (circular) but in *Gambhirika* it gets *Viroopa/Vikrit* (distorted). In iridocyclitis, adhesions of the pupillary margin occur with the anterior lens capsule which is called Posterior synechia which further causes irregular pupil accounting for the *Drishti Viroopa*. In iritis, the iris becomes oedematous and sluggish. Both sphincter pupillae muscle and dilator muscles of the pupil are irritated but as the sphincter pupillae is more powerful, the pupil becomes con-

stricted hence accounting for *Drishti Sankuchyate*. Also, the pupillary margin sinks inside (*Drishti abhyantaras cha*) due to posterior synechia.

2.6 *Drishti* as Lens – The shape and size of *Drishti* is described as *Masoordala Matra* i.e., cotyledon of lentil which is biconvex in shape. In modern ophthalmology, the shape of the lens is also biconvex. The lens is suspended by the suspensory ligaments from the ciliary body and the ciliary body has ciliary muscles. In *Ayurvedic* texts, it is mentioned that *Drishti-mandala* constricts in sunlight and dilates in shadow/dark. Similarly, the thickness of the lens varies with the intensity of light as well as in focusing far and near objects (see Figure II). In a dark environment, focusing on distant objects is rather difficult than focusing on near objects. The ciliary muscles allow the lens to change shape to focus depending on the purpose and environment.

Figure II shows the Accommodation of the Lens

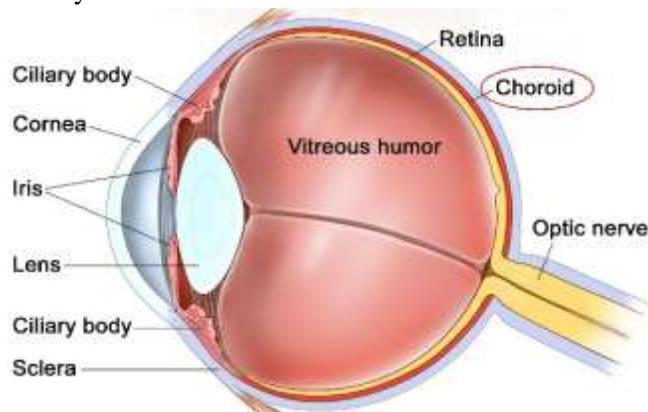


In *Ayurvedic* literature, *Shadvida Lingnasha* suggests that the colour of *Drishti* changes according to the vitiated *Doshas*. The vitiation of *Vata*, *Pitta*, *Kapha*, *Rakta*, and *Tridoshaja* results in *Aruna* (Brown), *Nila* (Bluish), *Seeta* or *Shankha varna*, *Rakta* or *praval varna* and *Vichitra rupa* of the *Drishti* respectively. ^[14] This can be compared with the colour of the nucleus of the lens as a marker of its hardness as per SPONCS (Simple Pre-operative Nuclear Classification Score). In the *Shastra karma* of *Sleshmika Lingnasha*, a prior examination of *Drishti* is indicated. The surgical procedure should not be carried out if, half-moon-shaped, sweat drop-like, pearl-

shaped, and linear spots appear on the *Drishti* (Lens). In *Ayurvedic* literature, the *Shastra karma* of *Sleshmika Lingnasha* and the *Lekhana karma* of *Drishti mandala* are done with the help of a *Shalaka* which is comparable with the modern methods of cataract surgery. ^[15] Hence, *Drishti* can be considered as the lens.

1.7 *Drishti* as Retina and Optic Nerve – *Netra* consists of *Panch* (five) *mandalas* i.e., *Pakshma*, *Vartma*, *Shweta*, *Krishna*, *Drishti*. Out of the five, the last 4 lies in the sequence from outward to inward. This gives us the clue of *Drishti-mandala* is the innermost *Mandala*.

Figure III shows the Layers of the Eyeball



According to modern science, the retina is the innermost layer of the eyeball (see **Figure III**).

The appearance of *Drishti* is mentioned as that of a firefly (*Khadhyota*) or like a minute fire particle (*Visfulingabha*). In modern ophthalmology, red reflex

from the retina is a quick and non-invasive test used to identify opacities in the visual axis. Red reflex refers to the reddish-orange reflection of light from the back of the eye (fundus) using an ophthalmoscope or retinoscope. The red reflex is analogous to the description of the appearance of *Drishti* in *Ayurveda*.

The measurement of *Drishti* in *Ayurvedic* texts reveals that *Drishti-mandala* is 1/7th of the *Krishna-mandala* (~11.7 mm as Horizontal diameter and ~10.6 mm as Vertical diameter). The numerical calculations suggest that the *Drishti mandala* measures approximately 1.51 mm which is equivalent to the dimension of the most sensitive part of the retina i.e., the Fovea. [16]

The diseases described in *Drishtigata roga* also give us a clue for the consideration of *Drishti* as Retina.

1. The complete absence of functioning cones in the retina results in Hemeralopia (Day-Blindness) which can be correlated with the symptoms of *Pit-tavidagdha Drishti*, a disorder of *Drishti*.
2. The dystrophy of rods or pigmentary retinal atrophy leads to Retinitis pigmentosa which has a symptom of night-blindness (Nyctalopia). Night-blindness is also a symptom of *Kaphavidagdha Drishti*.
3. *Nakulandhya* is a *Drishtigata roga* in which a patient suffers from night-blindness which is a feature of Retinitis pigmentosa i.e., a disease of the retina.
4. *Haraswajadaya* is another *Drishtigata roga* that has symptoms such as day-blindness and micropsia. Macular degeneration, which is a retinal defect, typically produces micropsia due to the swelling or bulging of the macula. Day-blindness and macular degeneration are the defects of the retina which suggests that this *Drishtigata roga* can be correlated with retinal disorders.

2. *Drishti* as a Functional Entity

3.1 *Drishti* as Vision – There are definite references in the *Ayurvedic* texts which indicate that the term *Drishti* is used in the context of the vision process.

- *Acharya Sushruta* has mentioned that *Vega dharan* of *Kshudha* (Hunger) leads to *Krishta chadrishte* (Low vision). [17] *Acharya Vagbhata* ex-

plained that *Adhovata vega dharan* leads to *Drishtyagnivadha* which is further elaborated in the commentary by *Acharya Arundatta* as *Drishte Ragneshcha Vadho* i.e., *Nasha of Drishti* (loss of vision).

- In *Adhimantha sadhyasadhyta*, it is mentioned that taking *Mithya ahara-vihara* or if the management of *Adhimantha* is not proper then it further leads to *Drishtihanana* (Loss of vision). [18]
- The use of *Visha* in *Anjana* (*Anjane Vishasamshriste*) induces *Drishti Vibhram* (optical illusion) i.e., rather than the original object the person sees a different object or shape. [19] This clearly indicates the functional entity of *Drishti* as vision.
- *Acharya Charak* has mentioned that if any person intakes *Visha yukta* food and that food reaches the *Amashaya* then it leads to *Drishti uprodha* i.e., hinderance in the visual process. In the case of methyl alcohol toxicity, the optic nerve is affected which leads to optic neuropathy.
- *Drishtiprada Varti* is described by *Acharya Charak* as the management of *Netra rogas* and is said to be robust enough to provide vision power even to a blind person. [20]
- *Drishti visha* as mentioned in *Sushruta Samhita* is the symptom of *visha* occurring due to the sight of *Divya sarpa*. This explains the meaning of the word *Drishti* as the vision itself. [21]
- When the *Siddhi* of *Yoga* takes place, a person is able to see the minute and the invisible objects i.e., *Atindriya darshan* by *Drishti*.
- When the person is able to see the *Arishtasuchak lakshana* by *Indriyas* without *Gyan shakti* it indicates that the person is not able to survive.
- *Acharya Sushruta* has explained that when *Tejo-dhatu* does not reach the *Drishtibhaga* it leads to congenital blindness (*Jatyandha*). [22] This indicates towards *Drishti* is the seat of *Chakshu Indriya*.
- As mentioned in *Lingnasha* by *Acharya Sushruta*, when the doshas which developed *Timir* enter the fourth *Patala Sarvato Drishti runnadh* occurs i.e., complete blockage of the vision. *Acharya*

Vagbhata in *Aupsargika Lingnasha* described *Drishti mushita darshanam* ^[23] i.e., loss of the visual power of the eye.

- There are numerous references for the effect of *Ahara sevana* on *Drishti*:
- ❖ *Acharya Vagbhata* has mentioned that the use of *Pinyak* (*Kalka* of *Tila*) leads to *Drishti dushana* i.e., loss of visual power. ^[24]
- ❖ The properties of *Mudga* and the food that is prepared in *Ghrita* include *Drishti prasadan* ^[25] i.e., improving the visual power, and the food that is processed in *Taila* is mentioned as *Drishtighana* (harmful for the vision).
- ❖ The products made from *Viruddha Dhanya* are *Drishti pradushaka* (impairment in vision).
- ❖ Intake of *Kalinda* causes *Drishti Kshayakaram* i.e., damage to the visual power.
- Various references for the effect of therapeutic procedures on *Drishti* are also present:
- ✓ *Acharya Sushruta* has mentioned *Putpaka* (a *kriyakalpa* procedure) to be *Drishti balartha parama* and *Acharya Vagbhata* described *Driga baladhana* as the effect of *putpaka* ^[26] both indicating improvement in the vision process.
- ✓ *Acharya Sushruta* mentioned *Drishti prasdana* as the effect of the *Nasya* procedure.
- ✓ According to *Acharya Vagbhata*, the use of *Mukhalepa* leads to *Drishti balam/Drishti samarthyam* (improves the vision power). Talking or

laughing when *Mukhalepa* is applied leads to *Drishtiyupghata*.

- ✓ Both *Acharya Charak* and *Vagbhata* have mentioned that *Taila-abhyanga* and *Pad-abhyanga* are helpful in *Drishti prasdana*. ^[27]
- ✓ The effect of *Prasadan Anjana* has been explained as *Drishti dosha prasadanartha* i.e., improvement in the visual defect.

All above-mentioned references indicate the functional entity of the term *Drishti* i.e., Vision.

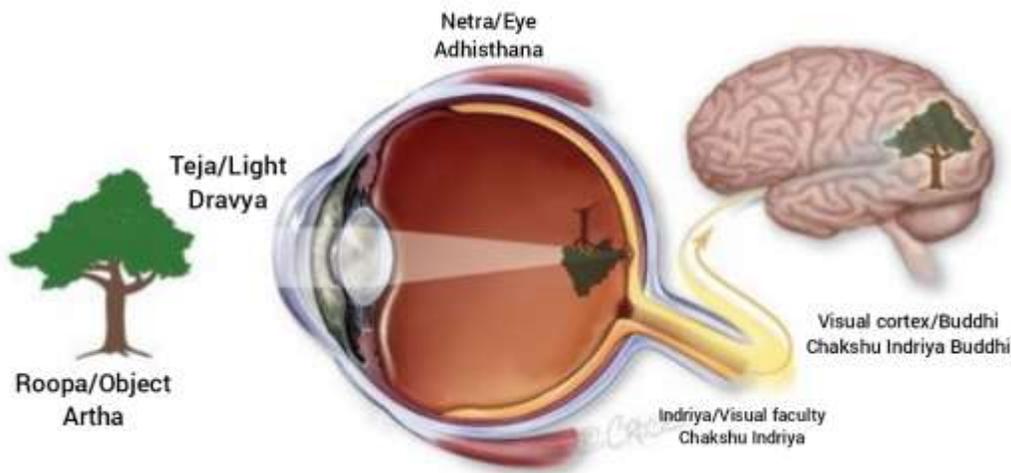
The property of *Drishti* consists of that it is naturally accustomed to cold from the very nature of its temperament i.e., *Sheeta satmaya*.

3.2 Functional aspect of *Drishti* through *Darshan kriya* (Figure IV)

The functional aspect of *Drishti* is manifested by *Chakshu-Indriya* with the help of its 5 components also known as *Indriya Panch-panchak*.

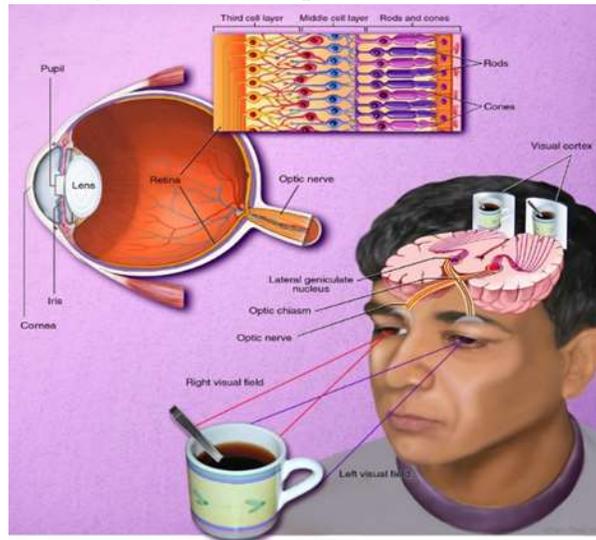
The formation of *Drishti* arises from the *Panchmahabhuta* (*Akash, Vayu, Agni, Jala, Prithvi*) sara (*Panchmahabhuta prasadajam*). *Roopa/object* (*Indriyarth*) when comes in contact with *Adhisthan* i.e., *Netra* through *Teja/jyoti/agni mahabhuta* (*Indriyadravya*) then it is perceived by *Chakshuindriya* and further interpreted/ascertained by *Chakshubuddhi* and the final outcome i.e., the vision-related knowledge is conveyed to *Atma/spirit*. This whole process is coordinated by *Mana*. This process can be considered as visual transduction or the vision process.

Figure IV shows the *Darshan Kriya*



The visual pathway is the pathway over which a visual sensation is transmitted from the retina to the brain. (Figure V)

Figure V shows the process of the vision.



3. *Drishti* as both a structural and functional entity

- Acharya Sushruta has mentioned *Ropana Anjana* which is described as *Drishti bala vardhnam* [28] (improvement in the visual power) which is counting for the functional matter and *Drishti varnya vardhnam* i.e., clearing the colour of *Drishti* which indicates us towards *Drishti* as a functional matter.
- In *Pittavidagdha-Drishti* the *Drishti* gets of *Peet-varna* hence the change in colour indicates a structural entity, not a functional one. Along with that Acharya Sushruta has explained that if the *dosha* invades the *Tritiya patala* then the day vision gets hampered which explains the functional task.
- As in the above-mentioned detail, in *Sleshmavidagdha Drishti*, the *Varna* gets *Shweta* and also the night vision gets hampered.
- In the symptoms of *Nakulandhya*, it is explained that the *Drishti* of the patient shines like the pupillary area of the mongoose at night. Along with that, there is night-blindness.
- In *Animittaja Lingnasha*, there is *Vaiduryavarna vimala cha Drishti* (*Drishti* gets clean and clear and of the natural colour) and *Drishti hanayate* (loss in the vision). There is the involvement of both the structural and functional entities.

- In *Abhigataja Lingnasha*, due to some external trauma, there is *Drishti vidiryate* [29] (*Drishti* gets torn) accounting for the structural unit. After that, *Drishti hiyate* (loss of vision) is explained which counts for the functional unit.

4. The pathological aspect of *Drishti*

The symptoms with which a disorder is known are called *Lakshana*. *Chakshu indriya shakti* (*Drishti*) is the *Lakshana* of *Chakshu indriya* and the *Nasha* of this *Lakshana* is *Lingnasha*. By this, we can assume that any disorder leading to *Chakshu indriya shakti nasha* or the loss of power of vision can be termed *Lingnasha*. Hence, *Drishtigata rogas* can be taken as a disease that affects vision. [30] *Lingnasha* is a broad term and is not only restricted to the understanding of cataracts. *Drishtigata rogas* is an extensive heading covering various disorders which is responsible for disturbing the vision. The diseases of the retina, optic nerve, vitreous, visual pathway, uveal tract, cataract, hypervitaminosis, and avitaminosis all come under the broad heading of *Drishtigata rogas*. This leads to the indication of the umbrella term "*Drishti*" as the retina, optic nerve, vitreous, visual pathway, uveal tract, and lens.

DISCUSSION

As described in *Ayurvedic* texts, the term *Drishti* has boundless meanings and is used in different aspects accordingly. This present study explains that *Drishti* is not merely a term in the *Ayurvedic* texts but has different structural and functional meanings. Along with that, this study enlightens the pathological aspect of *Drishti*. *Drishti* as a term has both meanings viz, structural and functional. From the various references explained in *Ayurvedic* texts, it is indicated that anatomical entity such as the eyeball, cornea, pupil, lens, retina, and optic nerve can be considered under the broad view of the term *Drishti* as well as *Drishti* also has a functional outcome i.e., vision process. The proper understanding of the term *Drishti* helps in the better understanding of its pathological aspects *Drishtigata rogas* so that an effective management protocol can be planned and implemented for the amelioration of the human condition. *Drishti* being a structural entity has its own dimensions which are appealingly explained in the *Ayurvedic* texts. There are various references such as the protection of *Drishti* while performing various therapeutic procedures or the use of mild therapy on *Drishti* indicating the estimation of *Drishti* as an eyeball. The measurement between *Drishti-mandala* is approximately similar to the interpupillary distance pointing to its relevance with IPD. The proper understanding of the dimensions of *Drishti*, its expansion and compaction in response to the intensity of light and the prognosis of *Savrana Shukra* enlightens *Drishti* as Pupil. *Drishti* can be considered as lens on the basis of its shape like a biconvex lentil, variation in thickness according to the light intensity in the environment, various colours of *Drishti* in *Shadvidha Lingnasha* and *Shashtra karma* of *Sleshmika Lingnasha*. The appearance of *Drishti* like a firefly and the various diseases explained under *Drishtigata rogas* clues about the cogitation of *Drishti* as Retina. Apart from its structural description, there are definite references in the *Ayurvedic* literature that illuminate us about the functional description of *Drishti* i.e., vision. There are numerous quotations regarding the effect of various types of *Ahara*, and therapeutic procedures on *Drishti* which helps us in understanding its functional aspect. Along

with that, other references such as the use of *Visha* in *Anjana*, *Drishtiprada varti*, *Visha yukta* food, *vega dharan* of hunger also contribute to the same. The functional aspects of *Drishti* can also be understood by the *Darshan kriya* or the process of vision. Although, in some therapeutic references such as the use of *Ropana Anjana* and description of diseases such as *Animittaja lingnasha*, *Abhigataja lingnasha* both the functional and structural facet of *Drishti* is also hinted.

CONCLUSION

For the proper management of any pathology, vast knowledge of the terminologies related to the pathology and its multiple meanings described in the texts is required. In *Ayurveda*, *Drishti* is used as a broad terminology and is used accordingly in different aspects. The present study concludes that the term *Drishti* is an amphotomous word. All the structures which come across the visual axis i.e., cornea, pupil, lens, retina, optic nerve, and their functional outcome i.e., vision comes under the preview of *Drishti*. The proper management of disorders related to *Drishti* needs a thorough knowledge of the term and suitable practical implementation of multiple meanings of *Drishti* used in different places according to the need should be established. Together it will fulfil the prior and basic aim of *Ayurveda* i.e., *Swasthasya swasth rakshanam* (to maintain the health of healthy) and *Aturasya vikar prashmanam* (to get rid of the disease in a diseased person).

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