

Bhagadatta: The First Case Report of Ocular Palsy

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It is often said that the Mahabharata is a complete encyclopedia. In this communication, we explore a case of neuro-ophthalmology, as described in the epic. Bhagadatta, the King of Pragjyotisha, took part in the Mahabharata, fighting on the side of the Kauravas. Riding his war elephant, Supratika, he was one of the most feared generals of the war¹.

Bhagadatta, is described as an old man, with a wrinkled face and drooping eyelids. To prevent these from obstructing his vision, he tied thin folds of a silken handkerchief over his forehead. On the 12th day of the 18-day long Mahabharata war, Bhagadatta fought with Bhima. He had almost defeated him, when Lord Krishna and Arjuna came to support their brother. Arjuna aimed his arrows at the King’s handkerchief, tearing it and blinding him successfully. This allowed Arjuna to kill Bhagadatta and Supratika, and contributed to the victory of the Pandavas¹.

This nugget from our history raises significant issues. The author of the Mahabharata, Rishi Ved Vyas, was astute and discerning enough to note the wrinkles and drooping eyelids of one of the characters. He described them accurately, including details about how Bhagadatta managed his limitation.

Did the elderly King have third nerve palsy?² Or was it myasthenia gravis? Was it a congenital anomaly, or an event associated with old age? The seemingly bilateral and symmetrical nature of eyelid drooping suggests an ischemic or metabolic etiology, rather than a localized lesion. The commonest cause of eyelid droop is senility³, also known as senile involution. There is no mention of a diurnal variation in the severity of Bhagadatta’s symptoms. However, the explanation that he became almost blind towards the end of the day, suggests that he may have had myasthenia gravis. Table 1 lists other possible differential diagnoses of drooping eyelids.

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Table 1. Differentials of Bhagadatta’s Condition

| Etiology | Bilateral | Eyelid crease margin | Other clinical feature |
|--|-----------|----------------------|--|
| Congenital abnormality of the levator muscle | Sometimes | Crease often absent | Associated with amblyopia, strabismus |
| Oculomotor nerve palsy | Rarely | Normal | Impaired extraocular movement in ipsilateral eye; may be due to aneurysm |
| Myasthenia | Sometimes | Normal | Variable; associated with fatigue |
| Aponeurotic ptosis | Sometimes | Often increased | Isolated ptosis |
| Horner’s syndrome | Rarely | Normal | Ipsilateral miosis |
| Myopathy | Yes | Normal | Orbicularis oculi, other extraocular or bulbar muscles may be affected |

Epics and classic literatures are a useful platform to explore and learn the complexity of medicine in an interesting and fun-filled manner⁴.

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