

CASE STUDY: AYURVEDIC MANAGEMENT OF *DRISHTI NASHA* AND *NISHAANDHYA* THROUGH *PANCHAKARMA* THERAPY

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ABSTRACT

Drishti Nasha is defined in Ayurveda, as visual disorders due to *Dosha* vitiated in the eyes. This case study describes the Ayurvedic management of a 17-year-old female patient, who presented with *Drishti Nasha* and *Nishaandhya*. *Panchakarma* management plan was developed over a period of intervention, involved a regime of *Snehana*, *Swedana*, *Netra Tarpana*, *Rakta Mokshana* and *Swarna Shalaka Karma* and supportive therapies. Therapeutic outcomes produced significant improvements, with 70–80% recovery of visual clarity and 80% relief of night blindness, all without adverse side effects. The treatment pacified vitiated *Vata–Pitta Dosha*, nourished *Majja* and *Rakta Dhatus*, supported strength of ocular tissues through *Netra Tarpana* and *Nasya*. This case study illustrates the promise of conventional Ayurvedic treatments in a degenerative ocular disorder. Additional studies with larger sample sizes are needed to validate the outcomes of this study.

KEYWORD: Ayurveda, *Drishti Nasha*, *Nishaandhya*, Eye, *Panchakarma*.

INTRODUCTION

Ayurveda described vision disturbances under the umbrella of *Drishtigata Rogas*. *Drishtigata rogas* begins with the simple blurring of vision, that may lead to *Linganasha* if ignore. The classification of various eye diseases according to their location is depicted in **Figure 1**.^[1-3] According to Ayurveda, *Drishtigata rogas* having a systemic origin of eye problems brought on by

underlying physical imbalances or systemic ailments. For instance, *Dhoomara*, which shows up as filthy, dusky eyes, is brought on by conditions including sadness, fever, and headache. Similar to this, *Timiraabhaasa*, which causes pseudo-visual blurring, can be brought on by physical trauma, emotional stress, poor sitting position, or issues with *Panchakarma* treatments.^[3-5]

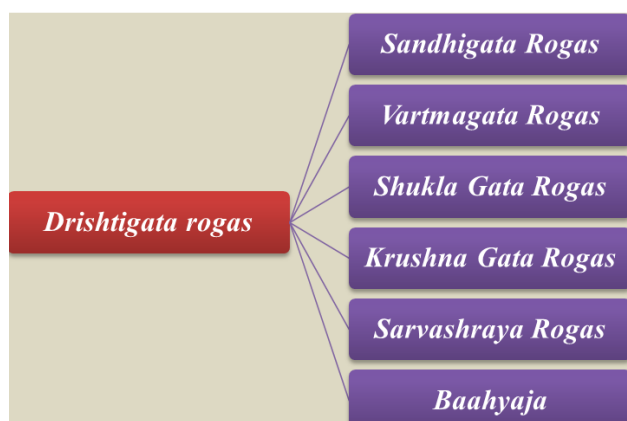


Figure 1: Classification of various eye diseases.

There is the concept of *Chakchusya*, and many drugs, and the therapeutic procedures described in Ayurvedic classics that enhance visual clarity as well as enhance health of the eye. *Panchakarma* especially *Nasya Karma* is one of the procedures which targets *Urdhwajatrugata* diseases. Procedures like *Nasya*, *Netra pariseka* and *Tarpana* etc; helps remarkably in the management of *Drishtigata rogas*. Considering importance of Ayurveda in *Netra Roga*; here a case report is presented demonstrating role of Ayurvedic approaches and *Panchakarma* therapies in the management of *Drishti Nasha* and *Nishaandhya*.^[4-6]

CASE REPORT

In present case a 17-year-old female patient, reported with severe conditions of *Drishti Nasha* and *Nishaandhya*. She experienced progressive visual impairment characterized by difficulty in vision, particularly at night. Daily clinical observations consistently noted the persistence of these ocular symptoms. On systemic examination, no abnormalities were detected in the central nervous system, cardiovascular system or respiratory system. Throughout her hospital stay, the patient remained conscious, well-oriented, and did not exhibit any signs of acute distress. The vital parameters were identified as follows:

✚ Blood Pressure (BP):	110/70–130/80 mmHg
✚ Pulse Rate (PR):	72–80 bpm
✚ SpO ₂ :	97–98% (room air)

CONSENT AND DOCUMENTATION

All therapeutic procedures were performed under close supervision, with daily monitoring of vital parameters and careful documentation of the patient's feedback. Written informed consent was obtained from the patient and her family, which included approval for admission, *Panchakarma* procedures, acceptance of treatment-related costs and risks, and permission to use anonymized photographs for academic purposes.

TREATMENT PROTOCOL (PANCHAKARMA CHIKITSA)

Detailed record of Ayurvedic lifestyle and dietary assessment (*Ahara–Vihara*), family history and *Rajahpravritti* was maintained to ensure a comprehensive evaluation of the present case. Patient underwent a comprehensive therapeutic regimen as mentioned below:

- ✓ *Snehana* (Oleation/*Abhyanga* with medicated oil)
- ✓ *Swedana* – *Nadi Swedana* (herbal steam fomentation)
- ✓ *Netra Pariseka*
- ✓ *Basti* (medicated oil)
- ✓ *Netra Tarpana* (retention of *Triphala Ghrita* over eyes for rejuvenation of *Drishti*)
- ✓ *Kansya Thali Abhyanga* (massage with bronze plate)
- ✓ *Rakta Mokshana* – *Jalaukavacharana*
- ✓ *Viddhakarma*
- ✓ *Neurotherapy* (supportive nerve stimulation techniques)

RESULT AND OBSERVATIONS

Following the completion of the treatment, the patient reported a 70–80% improvement in *Drishti Nasha* and nearly 80% reduction in *Nishaandhya* symptoms after receiving the prescribed therapy. Throughout the therapy, her overall condition remained stable, with no adverse reactions, and a noticeable enhancement in visual performance was observed. *Netra Priseka*, *Nasya* and *Tarpana*, etc. had shown favourable improvements in visual acuity and improvement in symptoms and reduction in spectacle power.

DISCUSSION

Netra Roga, according to classical Ayurvedic texts, often related to the vitiation of the *Pitta Dosha* and the involvement of the *Rakta* and *Majja Dhātu*. Procedures like *Netra Tarpana* directly nourishes ocular tissues, *Majja Basti* helps to replenish deficient *Majja Dhātu* and *Rakta Mokshana* resolves localized vitiated *Pitta* and *Rakta*. *Snehana* and *Swedana* assisted with systemic *Dosha Shamana*, facilitate circulation and nutrition to sense organs.

Snehana, *Raktamokshana*, *Nasya*, *Anjana* and *Tarpana*, etc. are utilized to treat present case of eye problem. *Nasya* was conducted with *Shatbindu taila*; the ingredients of *Shadbindu taila* act in *Vata* and *Kapha dosha shamaka*, and destroy the pathology of disease. *Nasya* is an important *Karma* of *Panchakarma* and is used in all diseases of the *Urdhwajatrugata*.^[7-9]

Probable Mode of Action of Therapy

In the *Netra Pariseka* procedure technique, a fine stream of liquid is poured about four inches above the eyes. It may provide benefit in the destruction of the pathology of disease associated with eye. *Tarpana* appears to be predominantly *Vatashamaka* followed *Pitta* and *Kaphashamaka*. Therefore, the overall outcome of this therapy is *Vata Pradhan Tridosha Shamaka* and therefore it destroys the pathology of *Drishti Nasha* and *Nishaandhya*. The medicated ghee held in the eyes, recommended for improvement of the *Drishtibala* of the eyes, as it has *Roga Nivrtti* and *Vyadhi Vinashakar* properties.

Nasya improves the efficacy of *Indriya*, it has *Tridosahara* property. *Tarpana* is *Vata Pithahara* and *Brumhana* action, thus metabolically breaking down the pathology of *Drishti Nasha* and *Nishaandhya*. The lipophilic nature of *Ghrita* allows the drugs to penetrate through the eyeball and through the corneal epithelium regardless of their molecular surface. Contact time with their tissues and bioavailability latter is great, therefore a therapeutic concentration can be achieved via *Akshi Tarpana*.^[7-10]

CONCLUSION

This study demonstrates the efficacy of *Panchakarma chikitsa* in addressing *Drishti Nasha* and *Nishaandhya*. The fact that documented improvement of vision by 70-

80% and 80% relief of night blindness within a week illustrated the power of ancient Ayurvedic techniques like *Netra Tarpana*, *Majja Basti*, and *Jalaukavacharana*. The current case inferred that Ayurvedic approaches can be considered helpful to manage *Drishti Nasha* and *Nishaandhya*. *Nasya* and *Tarpana* can be done as needed to help with maintaining visual acuity. This is a single case study that is showing the effectiveness of Ayurveda treatment. The management approach and simple lifestyle changes can be furthered in a larger sample size and sustained over a length of time to get validated efficacy of prescribed treatment. This case report outlined the integrated protocol of *Shodhana Chikitsa* which provided significant results in a relatively short time. This shows the potential for Ayurveda to contribute to degenerative ocular disorders.

REFERENCES

1. Ashtanga Hridayam Srikantha Murthy K.R. Uttar Tantra 31/98. Varanasi: Krishnadas Academy, 2002; 130.
2. Harisadashiva Sastri Paradakara Bhisagacarya. Ashtanga Hridaya. Reprint 2014. Chaukhambha 2014. Uttarasthana; Timira Pratishedha, chapter 13/47.822pp.
3. Vagbhata, Brahmanand Tripathi, Ashtanga Hridayam Delhi: Chaukhambha Sanskrit Pratishthan; Suthrastana 20/37-8 7.
4. Vagbhata, Brahmanand Tripathi, Ashtanga Hridayam Delhi: Chaukhambha Sanskrit Pratishthan; Uttar sthana 13/12.
5. Dr Anant Ram Sharma, Susruta Samhita, Susrutavimarsini Hindi commentary, Chaukhambha Surbharti Publication Varanasi, Reprint 2015, Uttartantra Page No. 55.
6. Dr A.K. Khurana, Comprehensive Ophthalmology, Jaypee brothers, Reprint 2015; 38.
7. Kaviraj Atridev Gupta, Ashtanghridyam, Vidyotani Hindi commentary, Chaukhambha Publication Varanasi, Reprint vi. sam. 2065, Uttartantra, Page No.671.
8. Dr Shrimati Shailaja Shrivastava, Sharangadhara Samhita, Jivanprada Hindi commentary, Chaukhambha Orientalia, Reprint 2017, Madhyamakhanda, Page No.205.
9. Dr Shrimati Shailaja Shrivastava, Sharangadhara Samhita, Jivanprada Hindi commentary, Chaukhambha Orientalia, Reprint 2017, Madhyamakhanda, Page No.477.
10. Dr Anant Ram Sharma, Susruta Samhita, Susrutavimarsini Hindi commentary, Chaukhambha Surbharti Publication Varanasi, Reprint 2015, Uttartantra Page No. 124.