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Ayurvedic Management of *Timira* (Simple Myopia) Through *Kriyakalpa* and *Shamana Chikitsa*: A Case Report

[1*]Dipak Ajalsonde, [2]Khemchandra Mahajan and [3]Prasenjit K. More

[1,2]Department of Shalakya Tantra, Parul Institute of Ayurved and Research,
Parul University, Vadodara - 391760 (India)
[1]Email: deepak.ajalsonde@gmail.com
Phone No.: 7588351243
[2]Email: drklmahajan64@gmail.com
Phone No.: 9763443730
[3]Department of Dravyaguna VIgyan, Parul Institute of Ayurved and Research,
Parul University, Vadodara - 391760 (India)
Email: prasenjit1999more@gmail.com
Phone No.: 8850913707

Abstract

Simple myopia is one of the most prevalent refractive errors among young adults. In Ayurveda, early-stage visual blurring can be associated with *Vatika Timira*, a *Drishtigata Roga* characterized by indistinct vision due to *Dosha* vitiation.

A 25-year-old female presented with defective distant vision in both eyes for two months, associated with intermittent frontal headache and ocular itching.

The patient was treated with *Nasya, Tarpana*, internal *Chakshushya* medications, and *Vata-pacifying* measures for 21 days. Post-treatment evaluation showed improvement in visual acuity from 6/ 9 (P) to 6/6 in the right eye and 6/6 (P) in the left eye, along with complete relief in associated symptoms.

Ayurvedic management aimed at *Vata* pacification and ocular nourishment demonstrated functional improvement in early simple myopia.

Key words : *Timira*, Simple myopia, *Nasya, Tarpana, Chakshushya,* Case report

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[1*]Final Year PG Scholar, [2]Professor, [3]Final Year PG Scholar

Simple Myopia, commonly known as near-sightedness, is one of the most prevalent refractive errors affecting children, adolescents, and young adults worldwide. It is characterized by the inability to clearly visualize distant objects due to the anterior focusing of parallel light rays before they reach the retina[5]. The global burden of myopia has shown a steep rise over the last two decades, largely attributed to increase near-work activities such as prolonged screen exposure, academic stress, reduced outdoor activity, and urban lifestyle patterns. Although optical correction through spectacles or contact lenses remains the primary management strategy, these approaches merely compensate for refractive error without addressing the underlying pathophysiological mechanisms. In progressive cases, untreated or high myopia may predispose individuals to retinal degeneration, macular changes, and other structural complications[7].

In Ayurvedic classics, visual disturbances are described under the broad category of *Drishtigata rogas*[9]. Among these, *timira* represents a progressive disorder of vision characterized by indistinct or blurred perception. The term "*Timira*" literally denotes darkness or gloom, implying gradual diminution of visual clarity. According to *Acharya Sushruta* and *Vagbhata*, vitiation of *Doshas*, particularly *Vata*, affects the successive *Patalas* (layers) of the eye, leading to progressive impairment of vision[13]. When the vitiated *Doshas* localize in the first *Patala*, the patient experiences *Avyakta Darshana* (indistinct vision), which closely resembles the early manifestations of simple myopia. If untreated, the pathology may advance to deeper ocular structures, eventually leading to severe visual disability.

Ayurveda emphasizes preservation of vision as a lifelong priority. *Acharya Vagbhata* has highlighted that among all sense organs, the eyes are most vital, and their protection is essential for meaningful existence. The Ayurvedic approach to Timira focuses not only on symptomatic relief but also on pacifying vitiated *Doshas*, nourishing ocular tissues[1], enhancing microcirculation, and improving the functional strength of the visual apparatus. Therapeutic modalities such as *Nasya* and *Tarpana* are specifically indicated in *Urdhwajatrugata Rogas* and are believed to exert both local and systemic effects. Considering the rising incidence of myopia and limitations of purely corrective approaches, evaluation of classical Ayurvedic interventions in early simple myopia becomes clinically relevant. The present case report aims to assess the efficacy of ayurvedic management in a patient diagnosed with *Vatika Timira* corresponding to simple myopia.

Case presentation :

A 25-year-old female patient presented to the *Shalakya Tantra* outpatient department with complaints of gradually progressive blurring of distant vision in both eyes for the past two months. The blurring was painless and more noticeable while viewing distant objects such as classroom boards and road signs. The patient also reported intermittent frontal headache, particularly after prolonged visual tasks, and occasional itching in both eyes. There was no history of redness, watering, photophobia, diplopia, or trauma.

The patient had no known systemic illness such as diabetes mellitus, hypertension, thyroid dysfunction, or bronchial asthma. There

was no history of ocular surgery or long-term medication usage. Family history was not contributory. Her diet was mixed, her appetite was normal, bowel and bladder habits were regular, and sleep was adequate.

Ashtasthana Pareeksha :

Table-1. Ashtavidha Pariksha assessment

Nadi	72/bpm
Mutra	Prakruta
Mala	Prakruta
Jihwa	Anupalipta
Shabda	Prakruta
Sparsha	Prakruta
Druk	Avyakta Darshana
Akruti	Madhyama

Vitals
Pulse rate – 76/min
Respiratory rate – 20/min
Temp. – 98.6 ^{0}F
BP – 118/78/mmHg

Systemic examination :

All systemic examinations revealed no abnormalities.

Ophthalmic examination :

On torch light and slit lamp examination, eyebrows, eyelids, conjunctiva, cornea, pupil, and lens were normal bilaterally.

Table-2. Baseline Visual Acuity Assessment (Before Treatment)

Parameter	Right Eye	Left Eye
DV Unaided	6/9 (P)	6/9 (P)
Pinhole	6/6	6/6
Near Vision	N/6	N/6

Dilated Fundoscopy :

Optic Disc – Normal

CDR – 0.3 (B/L)

Macula – Normal

Fundal Glow – Normal

Diagnosis :

Vaitik Timira (correlating with simple myopia)

Treatment :

Table-3. Treatment Protocol Administered for Vatika Timira

Sr. No.	Medicine	Dose	Anupana	Kaala	Duration
1.	*Saptamruta Lauha*	250 mg	*Madhu* and *Ghrita*	Twice daily	21 days
2.	*Amalaki Rasayana*	5 gm	*Godugdha*	Twice daily	21 days

External medicine :

1. *Tarpana* with *Triphala Ghrita* for 7 days
2. *Marhsa Nasya* with *Anu Taila* – 6 drops in each nostril for 7 days
3. *Pada Abhyanga* with *Triphala Ghrita* for 21 days

Figure 1. Improvement in Distant Visual Acuity Following Ayurvedic Management

Total treatment duration – 21 days

Table-4. Comparison of Visual Acuity and Associated Symptoms Before and After Treatment

Parameter	Before treatment	After treatment
Right Eye DV	6/9 (P)	6/6
Left Eye DV	6/9 (P)	6/6
Headache	Present	Absent
Itching	Present	Absent

The present case was diagnosed as *Vatika Timira* based on classical symptomatology and clinical findings. The primary manifestation was defective distant vision, with no structural abnormalities on slit-lamp and fundoscopic examination, indicating functional impairment rather than organic pathology. According to Ayurvedic understanding, *Vata Dosha* plays a predominant role in disorders characterized by degeneration, dryness, and functional disturbance[3]. Excessive near work, prolonged screen exposure, irregular sleep patterns, and mental strain aggravate *Vata* in the *Urdhwaja-trugata* region, particularly affecting the ocular *Patalas*[4]. This functional disturbance manifests clinically as *Avyakta Darshana,* correlating with early myopic changes.

The management in this case was directed toward pacifying aggravated *Vata Dosha*, enhancing ocular nourishment, and improving neuro-ocular coordination. *Nasya Karma*, being the principal *Panchakarma* Procedure for diseases above the clavicle, facilitates the elimination of vitiated *Doshas*

from the *Shiras* and improves the functioning of *Indriyas*[5]. *Anu Taila,* possessing *Tridoshahara* properties, enhances local circulation and supports sensory organ function. Through nasal mucosal absorption, the therapeutic components may influence intracranial and orbital vascular pathways, thereby improving functional ocular response[3].

Tarpana with *Triphala Ghrita* was selected as the primary local therapy. *Tarpana* is considered the most specific *Kriyakalpa* procedure for *Drishtigata Rogas*[10], as it allows sustained contact of medicated *Ghrita* with ocular structures. *Triphala* is widely recognized for its *Chakshushya* (vision-promoting), *Rasayana* (rejuvenative), and anti-inflammatory properties[8]. The lipophilic nature of *Ghrita* enhances trans-corneal penetration and increases tissue contact time, thereby improving bioavailability of active constituents[2]. From a contemporary perspective, oxidative stress and accommodative strain play contributory roles in early myopic progression; *Triphala* and *Amalaki* possess antioxidant properties that may counteract such mechanisms.

Saptamrita Lauha[6] was administered as an internal *Chakshushya* formulation. It is traditionally indicated in *Timira* and other visual disorders. The presence of *Lauha* (iron) supports *Rakta Dhatu* and improves microcirculation, while the herbal components contribute to *Vata-Pitta* balance. *Amalaki Rasayana*[4] further supports tissue rejuvenation and provides antioxidant benefits. *Pada Abhyanga*, though seemingly distant from ocular therapy, plays a significant role in pacifying systemic *Vata*. Classical texts describe a neurological linkage between the feet and eyes, and regular foot massage is said to enhance visual clarity by stabilizing Vata and reducing neuromuscular strain.

The observed improvement in visual acuity from 6/9 (P) to 6/6 suggests enhancement of functional visual capacity. It is important to interpret this outcome cautiously; Ayurvedic management may not structurally shorten axial length or permanently eliminate refractive error, but it can improve accommodative efficiency, reduce eye strain, and stabilize early functional myopia. The resolution of associated symptoms such as headache and itching further supports the *Vata*-pacifying and nourishing effect of the treatment.

This case highlights the potential of Ayurvedic multimodal therapy in early simple myopia. However, as this is a single case observation with short follow-up duration, larger clinical trials with objective refractive measurements and long-term monitoring are necessary to substantiate these findings scientifically.

The present case demonstrates that Ayurvedic management, including *Nasya, Tarpana,* and internal *Chakshushya* medications, can provide functional improvement in early simple myopia corresponding to *Vatika Timira*. The multimodal approach aimed at pacifying *Vata Dosha* and nourishing ocular tissues resulted in measurable improvement in visual acuity and symptomatic relief. Although encouraging, these findings are based on a single case observation. Larger controlled clinical trials with objective refractive measurements and long-term follow-up are necessary to validate the role of Ayurvedic interventions in refractive errors.

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