



INTEGRATING SHALAKYA TANTRA IN THE MANAGEMENT OF COMPUTER VISION SYNDROME: A CLINICAL CASE STUDY

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ABSTRACT

Computer vision syndrome, also referred to as digital eye strain, describes a group of eye- and vision-related problems that result from prolonged computer, tablet, e-reader and cell phone use.^[1] Indians, on average, spend a significant amount of time on screens, with some reports indicating an average of 7.3 hours per day on smartphones alone. This is higher than the average screen time in countries like the US and China.^[2] This can be correlated to *Shushkakshipaka* characterised by *Gharsha* (Pricking sensation), *Toda* (Eye strain/pain), *Vishushkatava* (Dryness) in the eye.^[3] It is a *Vata* dominant disease according to *Acharya Sushruta*, and *Vagbhata* opines it as a *Vata-Pitta* dominant disease.^[4] In this case study, a 31-year-old IT Professional complaining of pricking type of eye pain, eye strain, dryness and occasional headache typically during evening and night hours since 2 years was treated with *Nasya* with *Anutaila* followed by *Tarpana* with *Jeevantyadi Ghrita* for 7 days. Internal medicines and *Aschottana* with *Jeevantyadi Ghrita* was given for one month. The patient showed significant results during each follow-up.

KEYWORDS: *Shushkakshipaka*, Computer Vision Syndrome, CVS, *Tarpana*.

INTRODUCTION

The eye is a vital special sense organ that enables vision by receiving light and transmitting visual signals to the brain for interpretation. Digital screens are essential tools in modern life, enhancing productivity. However, prolonged screen use can strain the eyes, leading to issues like dryness, eye fatigue, blurring of vision, collectively called as Computer Vision Syndrome (CVS). Excessive or improper use of *Indriyas* is the major *Nidana*^[5] for vitiation of *Vata dosha* resulting in *Gharsha* (pricking pain), *Vishushktavta* (dryness) in the eye. The treatment is similar to *Vataja Abhishyanda* treatment, with *snigdha dravyas*. Additionally, patients should be educated on making lifestyle changes to prevent the recurrence of the disease.

CASE REPORT

Chief Complaint- A male patient of 31 year old, complaints of recurrent eye strain/ fatigue, mild pain and dryness in both eyes, especially during evening hours, since 2 years. He also complains of occasional blurring of vision since 3 months.

History of Present Illness- A male patient of 31 year, not a known case of any systemic illness, was apparently normal before 2 years. Gradually, he experienced eye strain, dryness, pricking sensation in both eyes, mild

headache which used to aggravate whenever he had increased screen time. He works as an IT professional since 9 years. The symptoms were mild at first, and the patient ignored them. After 6 months, he started using Anti-glare spectacles but found no relief. The symptoms were transient and used to improve with rest. The recurrence of the abovesaid complaints increased since 3 months, along with occasional blurring of vision for which he consulted *Shalakya* OPD of GAMC, Bengaluru.

Occupational History

Occupation- IT employee since 9 years
Average screen time- 7-8 hrs/day – Laptop usage
1-2 hrs/day- Mobile and Television

Personal History

Diet- Mixed
Appetite- Good
Bowel & Micturition- Regular
Sleep- Sound (6-7 hrs/day)

Vitals

Pulse Rate- 78/min
Respiratory rate- 20/min
BP- 120/80 mmHg
Temperature- 98.6 F

General Examination

Pallor-Absent
Icterus-Absent
Clubbing-Absent
Lymphadenopathy- Absent
Oedema- Absent

Jihwa- Alipta
Shabda- Prakruta
Sparsha- Prakruta
Drik- Vikruta
Akrti- Madhyama

Ashta Sthana Pareeksha

Nadi- 78/min
Mutra- Prakruta, 4-5 times/day, once at night
Mala- Prakruta

Systemic Examination

Respiratory System- NVBS hears
Cardiovascular System- S1, S2 heard, no murmur
CNS- Conscious, CN intact
GIT- P/A soft, non-tender

Local Examination

- External Eye Examination

Structure	Right Eye	Left Eye
Lids	Normal	Normal
Conjunctiva	Mild superficial congestion	Normal
Cornea	Normal	Normal
Anterior Chamber	Normal	Normal
Pupil	Round, Regular, Reactive 3mm	Round, Regular, Reactive 3mm
Lens	Clear	Clear

Visual Acuity

UAVA – OD- 6/9
OS- 6/6
BCVA- OD- 6/6 (OS- 6/6)

Blink rate- 7-8 blink/min, Incomplete Blink
Schirmer's test- RE- 9mm at 5 min, LE- 15mm at 5 min
TBUT – RE- 7 sec LE- 13sec

Treatment

Sl.No	Treatment	Dose	Duration
1.	Nasya with Anutaila	8 drops into each nostril in empty stomach in the morning	7 days (Day 1- Day 7)
2.	Tarpana with Jeevantyadi Ghrita	Quantity Sufficient	7 days (Day 8- Day 14)
3.	Aschottana with Jeevantyadi Ghrita	2 drops into each eyes at bedtime	30 days (Day 15- Day 45)
4.	Triphala churna + Yashtimadhu churna+ Ashwagandha Churna	0-0-1tsp with honey A/F	30 days (Day 15- Day 45)

As patient could not avoid complete use of the screen, he was adviced with following modifications in his daily life^[1]

- Location of the computer screen- Optimally, the computer screen should be 15 to 20 degrees below eye level (about 4 or 5 inches) as measured from the center of the screen and 20 to 28 inches from the eyes.
- Lighting- Position the computer screen to avoid glare, particularly from overhead lighting or windows. Use blinds or drapes on windows and replace the light bulbs in desk lamps with bulbs of lower wattage.
- Anti-glare screens- If there is no way to minimize glare from light sources, consider using a screen glare filter. These filters decrease the amount of light reflected from the screen.
- Rest breaks- To prevent eyestrain, try to rest eyes when using the computer for long periods. Resting the eyes for 15 minutes after two hours of

continuous computer use. Also, for every 20 minutes of computer viewing, look into the distance for 20 seconds to allow the eyes a chance to refocus.

- Blinking. To minimize the chances of developing dry eye when using a computer, try to blink frequently.

OBSERVATION AND RESULTS

Patient had a significant reduction in complaints during each follow-up. Visual Acuity and Dryness of eye improved after Tarpana. The patient had no recurrence of symptoms even after 8-9 hrs of screen time post-treatment.

Parameter	Before Treatment	First followup (After completion of Tarpana)	2 nd Followup (After 30 days of internal medicines)
External Eye Examination	Conjunctiva- RE- Mild superficial congestion seen All other structures- Normal	No congestion in conjunctiva All other structures- Normal	No congestion in Conjunctiva All other structures- Normal
Visual Acuity	RE-6/9, LE-6/6	RE-6/6, LE-6/6	RE-6/6, LE-6/6
Schirmer's Test	RE- 9mm at 5 min LE-15mm at 5 min	RE- 16mm at 5 min LE- 25mm at 5 min	RE- 18mm at 5 min LE- 25mm at 5 min
TBUT Test	RE- 7 sec LE- 13 sec	RE- 12 sec LE- 16 sec	RE-14 sec LE- 16sec

DISCUSSION

The eye is one of the most vital special sense organs, responsible for the perception of vision, which plays a key role in interpreting the external world. Due to its intricate structure and constant exposure to environmental stimuli, the eye requires delicate care and balance for maintaining healthy vision. In today's world, computers and digital gadgets play a crucial role in almost every aspect of life. However, their prolonged and improper use can adversely affect eye health, leading to conditions like Computer Vision Syndrome, characterized by eye strain, dryness, blurred vision, and headaches. While the treatment consists of Artificial tears, visual hygiene and ergonomic practices^[1], it does not completely justify to patient's complaints.

In *Ayurveda*, it is clearly stated that *Mithya Yoga* (Improper use) and *Atiyoga* (Excessive use) of *Indriya* leads to the manifestation of different diseases. This vitiates *vata dosha* and in turn leads to symptoms which are seen in Computer Vision Syndrome. In this case, *Nasya* with *Anutaila* was advised as it helps to pacify *Tridosha*. *Tarpana* was done with *Jeevantiyadi Ghrita*^[6] which acts as *Balya* (Strengthening), *Brihmana* (Nourishing) and *Rsayana* (Rejuvenating). *Aschottana* was given with same *ghrita* as it contains vitamin A, D, E, K and carotene in it. Vitamins A and E are antioxidants, and vitamin A also preserves the outer lining of the eyeball moist.^[7] Drugs like *Triphala*, *Yahtimadhu* and *Ashwagandha* are *Chakshushya* in nature and act as *Rasayana*.

CONCLUSION

The increasing reliance on digital devices has led to a rise in visual strain and dryness, commonly seen in Computer Vision Syndrome (CVS). In this case, the Ayurvedic approach focusing on *Nasya*, *Netra Tarpana*, and *Aschotana* effectively alleviated symptoms by nourishing the ocular tissues and balancing vitiated *Vata* and *Pitta doshas*. Internal administration of *Chakshushya* and *Rasayana dravyas* further supported systemic rejuvenation and eye health. The treatment not only provided symptomatic relief but also enhanced the patient's visual comfort and work efficiency. Ayurveda offers a safe, holistic, and sustainable management approach for CVS.

Timely intervention with proper lifestyle and ocular hygiene can prevent progression and recurrence.

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