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Study the Efficacy of Shatavaryadi Churna and Goghрут Tarpan in the Management of computer vision syndrome

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Abstract-

The prolonged use of digital devices has contributed to an increase of 'computer-related' ocular symptoms called computer vision syndrome (CVS), also known as digital eye fatigue. Research has found that around 75% of the population working in front of a screen for 6–9 hours daily complain of some ocular discomfort[1]. Office-based studies have shown the prevalence of CVS to be higher in women than men, but similar between contact lens and spectacle wearers.

CVS broadly relates to ocular discomfort associated with prolonged computer use, but the time spent using screens, especially handheld devices, is increasing inexorably in our day-to-day activities, and avoiding screen use is not a possibility for many people. *Acharya Vagbatta* has indicated cooling and rejuvenating therapies for eyes affected by bright light, high-voltage electric spark, and heat exposure. This phenomenon is also close to the *etiopathology* of CVS. So, local therapy in the form of Tarpana Kriyakalpa and

systemic santarpana (anabolic nutritional supplement) with *Shatavaryaadi Churna* has been studied in the management of CVS. It shows significant effect on computer vision syndrome.

Keywords: computer vision syndrome, Tarpana Kriyakalpa, santarpana

Introduction

Eye is the important organ. Eyes are the most precious gift of God to the living beings. Today, in the 21st century, where we are living in a highly sophisticated environment, computer is one of the most developed technologies which are used presently by the children, the young and the old. More and more men are sitting in front of the computer for longer hours, which is a highly vision demanding task. But the eyes are still structured according to the old hunting days and are unable to cope up with the demand of computer work, leading to ocular and systemic discomfort coined as Computer Vision Syndrome (CVS).

No remedial measures for the prevention and cure of this pathology prevail in the domain of modern

medicine except using ocular surface lubricants, computer glasses, and counseling for judicious computer users.

Ayurveda suggests experiments and contribute alternative modalities to alleviate or to check the sufferings of the computer users.

Ayurveda, the first systematic health system on this planet, has kept the doors open to prospective/ undescribed health problems to be incorporated in the system on the fundamental grounds.

Acharya Vagbatta has indicated cooling and rejuvenating therapies for eyes affected by bright light, high-voltage electric spark, and heat exposure. This phenomenon is also close to the etiopathology of CVS. So, local therapy in the form of Tarpana Kriyakalpa and systemic santarpana (anabolic nutritional supplement) with Shatavaryaadi Churna has been studied in the management of CVS.

Aims and Objectives

- To study the CVS in Ayurvedic perspective.
- To know the effects of Shatavaryaadi Churna, Go-Ghrita Tarpana in the treatment of CVS.

Materials and Methods:

1. Selection of patients-

Patients were selected from the Shalakyia Tantra (eye unit) OPD of the hospital affiliated to PMT's Ayurved college shevgaon, Distt. Ahmednagar.

A total of 30 patients of CVS were registered irrespective of age, sex, caste, and religion.

2. Inclusion criteria-

All patients using computer at least 2 h/day presenting with following clinical features of CVS were included in this study:

- Eye strain - Blurred vision
- Dizziness/ nausea - Headache
- Redness - Burning sensation
- Dry eye - Changed color perception
- Slow refocusing - Excessive fatigue (neck/ shoulder/ back pain)

3. Exclusion criteria

Patients not willing for registration.

Cases complicated with acute, chronic, infective conjunctivitis, any specific eyelid disorders, corneal ulcers, dacryocystitis, and lagophthalmos.

Patients suffering from any systemic or metabolic disorders.

3. Method of study

- By random sampling technique, the diagnosed patients, who fulfilled the inclusion criteria, were selected.
- Shatavaryaadi Churna with Ghrita and Madhu Anupana orally and Tarpana Karma with Go-Ghrita was given.
- Shatavaryaadi Churna was given orally in a dose of 3 g twice daily with Ghrita and Madhu Anupana
- Tarpana Karma with Go-Ghrita was given 5 days in a week, followed by a gap for 15 days and then the same was repeated again.
- The dose of Go-Ghrita for Tarpana was customized, i.e., to

the level of drowning the eye lashes in it.

- The trial of therapy was carried out up to 1 month for all groups.
- Follow-up
Follow-up was done fortnightly to assess the changes and patients were followed up for the next one month for withdrawal of

symptoms.

Results and Observations

Demographic data have been presented for 30 patients, while clinical data and observations were made on 22 patients who completed the trial, and similarly the results were analyzed and are presented in following table.

Cardinal Feature	No. of Patients	Mean		D	% of relief	± SD	± SE	“t”	P
		BT	AT						
Eye strain	9	2.22	0.22	2.0	90.09	0.5	0.166	12	<0.001
Blurred Vision	8	2.0	0.22	1.77	88.88	0.85	0.28	6.24	<0.001
Dizziness / nausea	7	1.33	0.22	1.11	83.70	0.78	0.36	4.26	<0.01
Headache	9	1.55	0.33	1.22	79.06	0.84	0.28	4.37	<0.01
Redness	7	0.88	0.11	0.77	88.38	0.68	0.23	3.41	<0.05
Burning sensation	9	1.66	0.22	1.44	86.61	0.74	0.25	5.86	<0.001
Dry eye	1	0.11	0.0	0.11	100	0.33	0.11	1.0	<0.05
Change in color perception	6	1.22	0.22	1.0	81.96	0.87	0.29	3.46	<0.05
Slow refocusing	8	2.33	0.22	2.11	90.48	0.60	0.20	6.28	<0.001
Excessive fatigue (neck / shoulder / back pain)	9	1.77	0.22	1.55	87.50	0.74	0.25	10.53	<0.001

Discussion:

In dry eye which was the only subjective feature, because objectively (i.e., Schirmer-I test and T-BUT) they had no findings, the percentage of relief was 100%, which was statistically insignificant ($P > 0.05$) owing to the reason that 'n' was 1, i.e., <6.

- Eye strain The percentage of relief was 90.09%
- Blurred vision 88.88%,
- Burning sensation 86.61%
- Slow refocusing 90.43%
- excessive fatigue (neck or shoulder or back pain) 87.50%

relief was observed, which were statistically highly significant ($P < 0.001$)

- Dizziness/nausea the percentage of relief was 83.70%
- Headache 79.06% relief was observed, which were statistically significant ($P < 0.01$).
- Change in color perception the percentage of relief was 81.96%
- Redness 88.38% relief was observed, which were statistically significant ($P < 0.05$).

Conclusion:

The discussion on ocular and non-ocular symptoms of CVS in the

perspectives of Ayurveda is clearly suggestive of Vata dominating Pittaja vitiation in eye and body as a whole. These pathological factors give rise to Vata-Pittaja ocular surface symptoms like Vataja, Pittaja Raktaja Abhishyanda, as well as Shushkakshipaka (dry eye syndrome). Not only ocular surface discomfort but also Vata-Pittaja dominating disorders of vision, i.e., Timira, are manifested in CVS patients. The generalized or physical symptoms of CVS are also the manifestations of vitiated Vata and Pitta.

Shatavaryaadi Churna with Ghrita and Madhu Anupaan, along with Tarpana Karma with Go-Ghrita was effective in relieving the different ocular as well as non-ocular features of CVS.

During the course of study, no significant adverse effects were observed. However, this is only a preliminary study conducted as a part of postgraduate research training program, and further clinical and experimental studies of longer duration on larger sample of patients with follow-up are required to establish the curative effect of Shatavaryaadi Churna and Tarpana Karma.

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