

AYURVEDIC MANAGEMENT OF PTOSIS (VATAHATA VARTMA)- A CASE STUDY

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Article Received on
23 April 2025

Revised on 11 May 2025
Accepted on 31 May 2025

DOI: 10.20959/wjpr202511-37056



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ABSTRACT

Introduction: Among the sense organs, the eye is considered one of the most vital and supreme. Ptosis, commonly known as drooping of the upper eyelid, is a condition that can affect one or both eyes. It may be congenital or acquired due to various causes like muscle weakness, nerve damage or age-related changes. It can be correlated to *Vatahata vartma*, told by *Acharya Vagbhata*^[1], wherein the aggravated *vata dosha* localises in the *vartma*(eyelid), leading to dryness, roughness and stiffness in eyelids, along with difficulty in eye movements. The conventional system of medicine mostly involves surgical correction of ptosis^[2], whereas in Ayurveda, *Brumhana*, and *Tarpana* line of management is beneficial. **Methods and Materials:** 65-year-old man presented with gradual, painless drooping of the right upper eyelid and visited Shalakya Tantra OPD of GAMC Bengaluru. The subject was

thoroughly examined and diagnosed with Ptosis (*Vatahata vartma*). He underwent *Nasya* with *Anutaila* and *Shashtika shali Annalepa* for the next 7 days. Patient was assessed before and after treatment. It has become evident that the treatment has helped the patient immensely.

KEYWORDS: Ptosis, *Vatahata vartma*, *Nasya*, *Annalepa*.

INTRODUCTION

Case Report

Chief Complaint- A 65 year old patient visited OPD of Shalakya tantra, GAMC, Bengaluru and presented with chief complaints of gradual painless drooping of right upper eyelid since 2 years

History of present illness- A 65 year old man not a known case of Hypertension and Diabetes mellitus was apparently normal before 2 years. Gradually he noticed drooping of right upper eyelid which he neglected initially. Over the years, patient developed difficulty in vision and consulted nearby hospital for the same. He was recommended with surgery which he refused to undergo and thus for the same complaint, patient visited GAMC Bengaluru.

Family History- Nothing contributory

Personal history

- Appetite- Good
- Bowel- Regular
- Micturition- 4-5 times/ day, 2 times/night
- Sleep- Disturbed (3-4hrs)

Ashtavidha Pareeksha

- Nadi- 74/min
- Mutra – 4-5 times/day, 2 times/night
- Mala- Prakruta
- Jihwa- Alipa
- Shabda- Prakruta
- Sparsha- Prakruta
- Drik- Vikruta
- Akriti- Madhyama

General Examination

BP- 130/80 mmHg

Pulse Rate- 80/ min

Respiratory Rate- 14/min.

Systemic Examination

- Cardiovascular system – S1-S2 normal
- Respiratory system - NAD
- Gastrointestinal system - P/A soft, non-tender
- Nervous system – NAD
- Motor functions – NAD

EXAMINATION OF EYE.^[3]

Parameter	Right Eye	Left Eye
MRD-1	0mm	4mm
MRD-2	-	5mm
Levator function	1mm	8mm
Palpebral fissure height	0mm	9mm
Lid crease Height	16mm	7mm
Bells phenomenon	Absent	Absent
Lagophthalmos	Absent	Absent
Fatigue test	Negative	Negative
Visual Acuity	-	6/18

SLIT LAMP EXAMINATION

Note: Right eye examination was done by manually everting upper eyelid with the help of cotton bud.

Ocular Structures	Right Eye	Left Eye
Eyelids	Ptotic	Normal
Conjunctiva	NAD	NAD
Sclera	Normal	Normal
Cornea	Clear	Clear
Anterior chamber	Normal depth	Normal depth
Lens	SIMC Present	SIMC Present
Pupil	Round, Regular, Reactive to light	Round, Regular, Reactive to light

TREATMENT

Treatment	Drug/Yoga	Dose	Duration
<i>Nasya</i> ^[4]	<i>Anutaila</i>	10 drops into each nostril in the morning in empty stomach	7 days
<i>Annalepa</i> ^[5]	<i>Shashtika Shali</i> + <i>Balamula ksheerapaka</i>	Quantity sufficient	7 days

Shashtikashali Annalepa- Take 1 part of *Balamula*, add 8 parts of milk and 32 parts of water. Boil the mixture until water evaporates and only milk remains. Filter it and add quantity sufficient *Shashtikashali* powder and make it into paste. *Mukha abhyanga* with *Ksheerabalataila* was done followed by *Annalepa* around the eyes.

FOLLOWUP & RESULT

Total treatment duration was for 14 days. Subject showed improvement both subjectively and objectively. The degree of ptosis improved and patient could feel the clarity in vision. First assessment was done after completion of 7 days of *nasya* and 2nd assessment was done after completion of 7 days of *Annalepa*.

Parameters	1 st Assessment		2 nd Assessment	
	Right Eye	Left Eye	Right Eye	Left Eye
MRD-1	2mm	4mm	3mm	4mm
MRD-2	5mm	4mm	4mm	5mm
Levator function	6mm	8mm	7mm	8mm
Palpebral Fissure Height	6mm	9mm	7mm	9mm
Lid Crease Height	12mm	7mm	8.5mm	7mm
Visual Acuity	6/36	6/18	6/36	6/18



Fig.1 -Before Treatment.



Fig 2- After 7 days of Nasya.



Fig 3- After 7 days of Annalepa.

DISCUSSION

Ptosis, or drooping of the upper eyelid, represents a condition with both functional and cosmetic implications. In the classical Ayurvedic texts, this condition corresponds to *Vatahata vartma*, a type of *Vartmagata roga* caused predominantly by the vitiation of *vata dosha* affecting the ocular structures involved in eyelid movements.

From a modern perspective, ptosis may be congenital or acquired, and its pathophysiology involves dysfunction of the Levator palpebrae superioris, Muller's muscle, or their neural supply.

Among the acquired forms, involutional (Senile) ptosis is most common, typically resulting from disinsertion or dehiscence of the levator aponeurosis due to age-related changes. Other forms include neurogenic, myogenic, mechanical and traumatic ptosis.^[6]

Old age is considered to be *vata*-dominant.^[7] The diseases of eyelid that affect movement are predominantly because of *vata*. This similarity in dosha dominance makes the disease *Asadhya*.^[8] according to *Acharya Vagbhata*. The major complaint is drooping of eyelid, it also affects vision. *Nasya*, being *Brimhana*, *Snigdha* and *Rasayana*, helps in strengthening the *snayu*(~ligaments), *mamsa* (~Muscles) and *sira*(~vessels and nerves). *Bala* being told as best in strengthening and pacifying vitiated *vata dosha* in *Agrya prakarana* of *charaka*.^[9] and Milk being *Jivaniya*.^[10] the *ksheerapaka* when used with *Shashtika shali* to prepare *lepa*, will not only pacify the *vata dosha* but will also provide strength to the muscles and other ocular structures. Because of these properties, the treatment was planned, and the patient showed significant improvement by the 14th day of treatment.

CONCLUSION

The Ayurvedic management of ptosis through *Nasya* and *Annalepa* offers a holistic and non-invasive therapeutic approach. *Nasya*, by stimulating the cranial nerves and enhancing the

function of the *Urdhvajatru* region, supports neuromuscular rejuvenation.^[11] while *Annalepa* provides localised nourishment and promotes muscle tone through transdermal absorption and stimulation.^[5] Thus, these therapies can lead to significant improvement in eyelid function, reduction of drooping, and enhanced quality of life for patients. Further clinical studies with larger sample sizes are recommended to validate and standardise these interventions for broader clinical application.

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