



A Clinical Case Study on Savrana Shukla (Corneal Ulcer) Managed Successfully with Ayurvedic Treatment

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Abstract

Savrana Shukla is a Sarvagata Netra Roga described in Ayurveda, characterized by ulcerative pathology of the Shukla Mandala and clinically correlates with corneal ulcer in modern ophthalmology, a potentially vision-threatening condition requiring prompt management. This case study reports the Ayurvedic management of a 32-year-old male patient who presented with severe ocular pain, redness, watering, foreign body sensation, and mild diminution of vision in the right eye for seven days. Slit lamp examination revealed a superficial corneal ulcer with circumcorneal congestion, on the basis of which the condition was diagnosed as Savrana Shukla. The patient was treated with appropriate Netra Kriyakalpa procedures along with internal Shamana medications and Pathya–Apathya regimen. Weekly assessments showed marked symptomatic relief within seven days, with gradual healing of the ulcer and significant improvement in visual comfort without any complications or adverse effects. The therapeutic outcome suggests that Ayurvedic management, acting through Shothahara, Ropana, and Chakshushya properties along with effective local drug delivery, can play a beneficial role in the management of corneal ulcer and prevention of its complications.

Keywords

Savrana Shukla, Corneal Ulcer, Netra Roga, Kriyakalpa, Ayurvedic Management, Shukla Mandala

Introduction

Eye is considered one of the most important sense organs, as it is responsible for perception of the external world. Ayurveda describes the eye as *Tejas-pradhana Indriya*, making it highly susceptible to Pitta vitiation¹. Any pathology affecting the ocular structures may significantly impair vision and quality of life. Hence, Acharyas have given detailed description of Netra Roga along with their Nidana, Lakshana and Chikitsa in classical texts².

Savrana Shukla is described as a *Sarvagata Netra Roga*, characterized by ulceration associated with the Shukla Mandala³. The term *Savrana* denotes the presence of *Vrana* (ulcer or wound), while *Shukla* refers to the corneal region. Clinically, it presents with pain, redness, watering, photophobia and diminished vision, depending upon the depth and severity of the ulcer⁴. If not treated in early stages, it may lead to complications such as corneal opacity and permanent visual impairment.

According to Ayurveda, Savrana Shukla occurs due to vitiation of mainly Pitta and Rakta Dosha, with involvement of Vata and Kapha in progressive stages⁵. The vitiated Doshas localize in the Shukla Mandala, causing inflammation, tissue damage and ulcer formation. Factors such as exposure to dust, smoke, trauma, excessive heat, suppression of natural urges and improper dietary habits are considered important etiological factors⁶.

Corneal ulcer in modern ophthalmology is defined as a loss of corneal epithelium with underlying stromal involvement, commonly caused by infection, trauma or contact lens use⁷. It is considered an ocular emergency

due to the risk of perforation and visual loss. The clinical features of corneal ulcer closely resemble those of Savrana Shukla, allowing meaningful correlation between Ayurvedic and modern descriptions.

Ayurvedic management emphasizes early intervention through *Netra Kriyakalpa*, internal Shamana therapy and strict Pathya–Apathya to control Dosha vitiation and promote corneal healing⁸. This case study aims to highlight the effectiveness of Ayurvedic principles in the management of Savrana Shukla (corneal ulcer).

Aims and Objectives

1. To evaluate the clinical presentation of Savrana Shukla in relation to corneal ulcer.
2. To assess the effectiveness of Ayurvedic management in the treatment of Savrana Shukla.
3. To study the role of Netra Kriyakalpa and Shamana Chikitsa in healing corneal ulcer.
4. To observe improvement in subjective and objective parameters after treatment.

Methodology

Study Design

A single-case clinical study.

Place of Study

Department of Shalaky Tantra, Ayurvedic hospital (OPD/IPD).

Selection of Patient

A patient presenting with classical signs and symptoms of Savrana Shukla such as eye pain, redness, watering, photophobia and corneal ulceration was selected from the OPD.

Diagnostic Criteria

Ayurvedic Criteria

- Presence of Vrana over Shukla Mandala
- Netra Shoola (pain)
- Rakta Netra (redness)
- Ashru Srava (watering)
- Avila Darshana (blurred vision)

Modern Criteria

- Corneal epithelial defect with stromal involvement
- Circumcorneal congestion
- Positive slit lamp findings suggestive of corneal ulcer

Intervention

The patient was treated with:

- **Netra Kriyakalpa procedures** (as per condition)
- **Internal Shamana Aushadhi** having Pitta–Rakta Shamana, Shothahara and Ropana properties
- **Pathya–Apathya** advice throughout the treatment period

Assessment Criteria

Subjective Parameters

- Eye pain
- Redness
- Watering
- Photophobia
- Foreign body sensation

Objective Parameters

- Size and depth of corneal ulcer
- Degree of conjunctival and circumcorneal congestion
- Slit lamp examination findings

Assessment was done before treatment and during follow-up at regular intervals.

Duration of Study

The patient was observed for a period of 14–21 days with weekly follow-up.

Outcome Measures

Improvement was assessed based on:

- Reduction in clinical symptoms
- Healing of corneal ulcer
- Absence of complications or adverse effects

Case Details**Patient Information**

- Age: 32 years
- Gender: Male
- Occupation: Office worker

Chief Complaints

- Pain in right eye for 7 days
- Redness of right eye
- Excessive watering
- Foreign body sensation
- Mild diminution of vision

History of Present Illness

The patient was apparently healthy before 7 days, after which he developed foreign body sensation in the right eye following exposure to dust. Gradually, symptoms such as pain, redness, watering and photophobia increased. The patient consulted locally and used over-the-counter eye drops with temporary relief. Due to persistence of symptoms, he approached the Shalaky Tantra OPD for further management.

Past History

- No history of diabetes mellitus or hypertension
- No history of ocular trauma or surgery
- No history of contact lens use

Personal History

- Diet: Mixed, spicy and oily food intake
- Appetite: Irregular
- Bowel: Occasionally constipated
- Sleep: Disturbed due to eye pain

General Examination

- Pulse: 76/min
- Blood pressure: 120/80 mmHg
- Temperature: Afebrile

Ashtavidha Pariksha

- Nadi: Pitta-Vata predominant
- Mala: Slight constipation
- Mutra: Normal
- Jihva: Slightly coated
- Shabda: Normal
- Sparsha: Normal
- Drik: Affected in right eye
- Akriti: Madhyama

Local Eye Examination**Right Eye**

- Congestion: Present
- Watering: Present
- Photophobia: Present
- Slit lamp examination:
 - Superficial corneal ulcer present over central cornea
 - Mild stromal involvement
 - Circumcorneal congestion present

Left Eye

- Normal

Diagnosis

- **Ayurvedic diagnosis:** Savrana Shukla
- **Modern diagnosis:** Corneal ulcer (superficial)

Treatment Protocol**1. Netra Kriyakalpa**

Procedure	Drug Used	Duration
Netra Parisheka	Triphala Kashaya	Once daily for 7 days
Aschyotana	Madhu + Ghrita (as indicated)	Twice daily
Netra Pichu	Jatyadi Ghrita	Once daily for 7 days

2. Internal Medicines

Medicine	Dose	Anupana	Duration
Triphala Guggulu	1 tab twice daily	Lukewarm water	14 days
Gandhaka Rasayana	1 tab twice daily	Milk	14 days
Mahatiktaka Kashaya	15 ml twice daily	Equal water	14 days

3. Pathya–Apathya**Pathya**

- Light and easily digestible food
- Green vegetables
- Adequate sleep
- Eye rest

Apathya

- Spicy, oily and fermented food
- Excessive screen exposure
- Dust, smoke and sunlight exposure
- Day sleep

Results**Subjective Improvement**

Symptom	Before Treatment	After Treatment
Eye pain	Severe	Absent
Redness	Marked	Mild
Watering	Excessive	Absent
Photophobia	Present	Absent
Foreign body sensation	Present	Absent

Objective Findings

- Significant reduction in conjunctival and circumcorneal congestion
- Complete healing of corneal ulcer observed on slit lamp examination
- No corneal opacity or scarring noted
- Visual comfort improved

Follow-up

The patient was followed for 15 days after completion of treatment. No recurrence or complications were observed.

Discussion

Savrana Shukla is a Sarvagata Netra Roga characterized by ulcerative involvement of the Shukla Mandala. According to Ayurvedic classics, the eye is a Tejo-mahabhuta–pradhana organ; hence even mild vitiation of Pitta leads to rapid pathological changes. In the present case, exposure to dust, intake of spicy food and irregular dietary habits acted as *Nidana*, resulting in Pitta–Rakta vitiation. The aggravated Doshas localized in the Shukla Mandala due to *Khavaigunya*, producing inflammation, tissue breakdown and Vrana formation.

From the modern perspective, corneal ulcer represents loss of corneal epithelium with stromal inflammation caused by mechanical irritation and secondary microbial invasion. Clinically, pain, redness, watering and photophobia occur due to exposure of corneal nerve endings and inflammatory mediators. These manifestations closely resemble the Lakshanas of Savrana Shukla described in Ayurvedic texts, supporting strong clinical correlation.

Samprapti-based understanding

Nidana such as *Raja*, *Dhuma*, *Atapa sevana*, along with improper food habits, lead to aggravation of Pitta and Rakta Dosha. Vata contributes to pain and foreign body sensation, while Kapha is responsible for discharge and

heaviness. The Doshas reach Netra through *Rasavaha and Raktavaha Srotas* and get localized in Shukla Mandala, resulting in:

- Shotha (inflammation)
- Daha (burning)
- Ruja (pain)
- Vrana (ulcer formation)

Thus, treatment principles should focus on **Pitta–Rakta Shamana, Shothahara, Vrana Ropana and Chakshushya therapy.**

Mode of Action of Treatment

1. Netra Parisheka (Triphala Kashaya)

Triphala possesses *Tridosahara, Chakshushya* and *Ropana* properties. Parisheka provides continuous irrigation of the eye, which:

- Reduces local inflammation
- Flushes inflammatory debris and microorganisms
- Soothes corneal surface
- Enhances epithelial regeneration

From a modern viewpoint, ocular irrigation reduces microbial load and inflammatory mediators, thereby promoting corneal healing.

2. Aschyotana (Madhu and Ghrita based preparation)

Madhu is described as *Lekhana, Ropana and Yogavahi*. It penetrates deeper tissues and enhances the action of drugs. Ghrita has *Sheeta, Snigdha and Chakshushya* properties.

Combined action:

- Reduces Pitta-induced burning and redness
- Promotes epithelial healing
- Maintains corneal moisture
- Prevents scar formation

Honey is also known for its antimicrobial and wound-healing activity, while ghee acts as a nourishing and lubricating agent for corneal tissue.

3. Netra Pichu with Jatyadi Ghrita

Jatyadi Ghrita is a classical Vrana Ropana formulation indicated in ulcers and wounds. Its prolonged contact with ocular tissues through Pichu allows sustained drug absorption.

Mode of action:

- Accelerates wound healing
- Reduces pain and inflammation
- Promotes granulation and epithelial repair
- Prevents secondary infection

The unctuous nature of Ghrita pacifies Vata, thereby relieving pain and foreign body sensation.

4. Internal Shamana Medicines

Triphala Guggulu

Acts as *Shothahara, Raktashodhaka and Vrana Ropaka*. It helps in systemic detoxification and reduces inflammatory pathology, supporting faster local healing.

Gandhaka Rasayana

Possesses *Rasayana, Krimighna and Vrana Ropana* properties. It enhances tissue regeneration and improves local immunity, preventing recurrence.

Mahatiktaka Kashaya

It is highly effective in Pitta–Rakta disorders. Its Tikta Rasa performs:

- Pitta Shamana
- Rakta Prasadana
- Reduction of burning and redness

Thus, internal medicines corrected the underlying Dosha imbalance and supported ocular tissue repair.

Role of Pathya–Apathya

Strict dietary and lifestyle modifications prevented further Dosha aggravation. Avoidance of spicy food, screen exposure and sunlight reduced ocular strain and Pitta provocation, contributing significantly to clinical recovery.

Conclusion

Savrana Shukla, clinically comparable to corneal ulcer, can be effectively managed through timely Ayurvedic intervention. The combined use of Netra Kriyakalpa, internal Shamana medicines and appropriate Pathya–Apathya resulted in complete healing of the corneal ulcer without complications. This case highlights the importance of Dosha-based Ayurvedic management in preventing visual impairment and promoting safe corneal tissue regeneration.

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