

A Comprehensive Review Article on Impact of Netra Kriya Kalpa in the Management of Netra Diseases an Ayurvedic Perspective.

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Abstract—The Shalakya Tantra's comprehensive explanation of Dosha, Dhatu, and Srotasa is the basis of Ayurvedic treatment of Netrarogahs (ocular illnesses). Kriyakalpas have a unique position among the many therapy methods because they are localised therapeutic procedures created especially for ocular applications. Depending on the type of Dosha imbalance, chronicity, and the tissue (Dhatu) involved, these therapies-which include Tarpana, Putapaka, Aschyotana, Anjana, Seka, Bidalaka, and Pindi are used. The application of these Kriyakalpas in a number of ailments, including Abishyandah (conjunctivitis), Timirah (refractive errors and juvenile cataract), Arma (pterygium), and Sukthi (xerosis of the conjunctiva), is described in depth in classical works including Sushruta Samhita, Ashtanga Hridaya, and Bhavaprakasha. These treatments are important for the preservation and renewal of eye health in addition to their goal of reducing illness. The effectiveness of Kriyakalpas is being supported by more and more recent research. Anjana in Arma, Aschyotana in infectious diseases, and Tarpana in dry eye syndrome have all shown better symptom reduction and patient satisfaction in clinical trials with less side effects. These treatments work pharmacodynamically by delivering medication straight to the surface of the eye, avoiding systemic metabolism, and promoting the nourishing, detoxifying, and repairing of ocular tissue. The conceptual framework, therapeutic mechanisms, and real-world uses of Kriyakalpas in relation to Netrarogahs are highlighted in this review paper, which also connects traditional Ayurvedic knowledge with current clinical research. Because of its therapeutic, preventative, and promotional properties, it highlights the necessity of incorporating Kriyakalpas into ophthalmic therapy. In order to demonstrate their applicability in contemporary eye healthcare, it also promotes evidence-based validation through carefully planned clinical trials.

Index Terms—Shalakya tantra, Netrarogah, Kriyakalpsa, Tarpana, Putapaka, Aschyotana, Anjana, Ophthalmic therapy

I. INTRODUCTION

The human eye (Netra) is considered one of the most vital sense organs in Ayurveda. Its preservation is not only crucial for maintaining vision but also for enhancing the quality of life. Classical Ayurvedic texts unanimously declare the eye as the most important among all sense organs. Acharya Sushruta emphasizes:

क्रियाणां तर्पणपुटपाकादीनां कल्पनं कारणं क्रियाकल्पः ॥

“Sarvendriyanam Nayanam Pradhanam”¹ According to Ayurveda, there are 76 different kinds of Netrarogahs, which are categorised by Dosha predominance and anatomical location, including Vartma (eyelid), Shukla (sclera), Krishna (cornea), Sandhi (canthus), and Drishti (pupil region). The pathophysiology, diagnosis, and therapy of eye illnesses are governed by the concepts of Tridosha (Vata, Pitta, Kapha), Dhatu (tissues), and Srotasa (channels). Shalakya Tantra, or Ayurvedic ophthalmology, provides a sophisticated knowledge of the anatomy, physiology, and pathology of the eyes. The branch encompasses therapeutic (Chikitsa), promotive (Rasayana), and preventative (NidanaParivarjana) approaches. Using Kriyakalpas, which are specialized local therapies for eye care, is one of the unique aspects of Shalakya Tantra.

Acharya Sushruta describes Kriyakalpas as vital tools in managing Netrarogahs, categorized based on their action and therapeutic utility. These include Tarpana (retention therapy), Putapaka (medicated eye

steaming), Anjana (collyrium), Aschyotana (eye drops), Seka (ocular douche), Bidalaka (external paste), and Pindi (eye poultice). These procedures are carefully selected based on the stage of disease (Ama, Pachyamana, Pakva) and Dosha predominance.

Localised ocular drug administration has become more popular in modern ophthalmology due to its direct action and decreased systemic problems. Kriyakalpas are still very significant now since they have comparable therapeutic potential. Research has demonstrated that treatments such as Tarpana enhance ocular surface integrity and tear film stability in cases of dry eye syndrome⁴ and Anjana has been shown to be successful in treating Timirah and Arma.

Furthermore, in line with modern demands, Ayurvedic principles place an emphasis on preventive treatments for eye health, such as Netra Tarpana for people exposed to pollution and screen light. Triphala and Ghrita preparations are examples of Rasayana medicines that improve vision and postpone degenerative disorders like Timirah (refractive errors or early cataract). Thus, comprehending Kriyakalpas function in Netrarogahs enhances therapeutic treatment and unites conventional and contemporary methods of ocular care. The purpose of this review is to examine the scientific evidence, clinical use, and traditional foundation for using Kriyakalpas to treat different Netrarogahs.

II. CONCEPT AND CLASSIFICATION OF KRIYAKALPAS

Two Sanskrit roots “Kriya” meaning therapeutic activity and “Kalpa” indicating technique or procedure are the origin of the phrase Kriyakalpa. 8 Kriyakalpa, then, refers to the collection of specific local practices used to treat eye disorders. These techniques, which are intended to administer therapeutic chemicals directly to the ocular region, are the cornerstone of Shalakya Tantra in the treatment of Netrarogahs. Acharyas have mentioned various types of Kriyakalpas. (Table 1), (Table 2)

Table 1: Kriyakalpa types according to various Acharyas

Sr. No.	Name of Acharya	Number of Kriyakalpas
1.	Acharya Sushruta	5
2.	Acharya Sharangdhara	7

3.	Acharya Vagbhatta	4
4.	Acharya Charaka	4
5.	Acharya Bhavprakash	7
6.	Acharya Chakradatta	4

तर्पणं पुटपाकश्च सेक आश्च्योतनाञ्जने ।

सेक आश्च्योतनं पिन्दि विद्वानस्तर्पणं तथा ।

पुटपाको ऽञ्जनं पैभिः कल्पनैर्ननुपाधरेत् ॥

Each Kriyakalpa is chosen based on the Dosha predominance and phase of the disease. For instance:

1. In the Ama Avastha (early stage with immature toxins), Aschyotana, Seka, Bidalaka and Pindi are preferred.
2. In the Pakva Avastha (matured stage), Tarpana, Putapaka, and Anjana are commonly employed.

Kriyakalpas are also classified based on their therapeutic effects:

1. Lekhana (scraping or removing excess Kapha) – e.g., Lekhana Anjana in Arma.
2. Ropana (healing) – e.g., Ropana Anjana in corneal ulcers.
3. Prasadana (soothing) – e.g., Triphala Anjana for daily use.

Table 2: Types of Kriyakalpas

Sr. No.	Name of Kriyakalpa	Description
1.	Tarpana	Retention of medicated ghee or oil in a dam constructed around the eyes.
2.	Putapaka	Application of freshly extracted herbal juices processed through a traditional fire-packing technique
3.	Aschyotana	Therapeutic eye drops using herbal decoctions or medicated liquids.
4.	Anjana	Application of herbal collyrium in the lower conjunctival fornix
5.	Seka	Continuous pouring of medicated decoction or fluid over closed eyes.
6.	Bidalaka	Application of medicated paste over the external surface of eyelids.
7.	Pindi	Bandaging of herbal poultices over the eyes or lids for prolonged effect.

Furthermore, the Ayurvedic Formulary of India (AFI) has included standard operating procedures and classical formulations for these Kriyakalpas, ensuring their relevance in contemporary clinical settings.

Table 3: Major characteristics of each Kriyakalpa

Sr. No.	Kriyakalpa	Form of application	Therapeutic aim
1.	Tarpana	Retention of Ghrita	Nourishment, Rasayana
2.	Putapaka	Herbal juice instillation	Rejuvenation, vision
3.	Aschyotana	Eye drops	Cleansing, anti-inflammatory
4.	Anjana	Collyrium application	Scraping healing
5.	Seka	Stream pouring	Soothing, cooling
6.	Bidalaka	Lid paste	Swelling reduction
7.	Pindi	Medicated bandaging	Absorption, detox

This rich classification and scientific logic make Kriyakalpas a unique and comprehensive system of ocular therapy in Ayurveda. Their precise indications and doshic targeting highlight the personalized medicine approach of Ayurveda long before the concept emerged in modern medicine. (Table 3)

Table 4: Therapeutic Summary

Kriyakalpa	Main action	Indications	Common medicines/dravyas
Tarpana	Nourishing, Rasayana	Timirah, Shushkakshipaka, Kacha	Triphala Ghrita, Jeevantyadi Ghrita
Putapaka	Rejuvenating	Akshiklama, Rasashrayi Timirah	Jeevantika, Punarnava, Yashtimadhu
Aschyotana	Cleansing, anti-inflammatory	Abishyandah, Suktih	Triphala Kashaya, Darvi Kashaya
Anjana	Lekhana, Ropana, Prasada	Arma, Netra Vrana, Kaphaja Abishyandah	Marichadi, Eladi, Triphala Anjana

Seka	Cooling, soothing	Akshi Daha, Vata-Pittaja Abishyandah	Chandanadi, Patoladi Kwatha
Bidalaka	Anti-inflammatory	Vartma Shotha, Blepharitis	Haridra, Gairika, Daruharidra
Pindi	Detoxifying, absorptive	Netra Shotha, Krichchraonmeela	Dashamoola, Nimba, Arka Patra

III. TYPES OF KRIYAKALPAS AND THERAPEUTIC APPLICATIONS (TABLE 4)

Each Kriyakalpa has its own unique mechanism of action and is chosen based on the clinical presentation, Dosha involvement, and stage of the disease. Below is a detailed description of each type:

3.1 Tarpana

Tarpana entails keeping medicinal Ghrita (ghee) around the eyes for a predetermined amount of time inside a black gram dough border. Timirah, Krichchraonmeelana, Shushkakshipaka (dry eye syndrome), and the early stages of Kacha (immature cataract) are among the Vata and Pitta-dominant conditions for which it is recommended. Tarpana enhances eye lubrication, nourishes the visual nerves, and fortifies the ocular muscles. Commonly used include Mahatriphala Ghrita, Jeevantyadi Ghrita, and Triphala Ghrita.

3.2 Putapaka

Putapaka involves instillation of freshly extracted juices of herbs (often used post-Tarpana) that are processed through a specific heating method (Putapaka vidhi). It is a rejuvenating therapy indicated in chronic Vata-Pittaja Raktaja Netrarogahs and fatigue-related ocular complaints like Akshiklama (ocular fatigue) and Rasashrayi Timirah. Putapaka enhances clarity of vision and ocular nourishment, especially in degenerative conditions.

3.3 Aschyotana

Aschyotana is the administration of medicated drops directly into the eyes. It is considered the first line of management in Ama Avastha (acute stage) of Netrarogahs. It is used in conditions like Abishyandah, Adhimantha, Suktih, and early infections. Triphala

Kashaya, Darvi Kashaya, and ChandanaSatavari Drava are effective. The cooling, anti-inflammatory, and antimicrobial actions are immediate and soothing.

अथाश्च्योतनं कार्यं निशायां न कथंचन ।
उन्मीलिते अक्षिण द्रुड्मध्ये बिन्दुभिः द्वयङ्गुलत् हितम् ॥
सर्वेषां अक्षिरोगिणां आदौ आश्च्योतनं हितम् ।
रुक् तोद कण्टू घर्ष अश्रु दाह राग निर्वहणम् ॥

3.4 Anjana

वक्त्ररूपेषु दोषेषु शुद्धकायस्य केवले ।
नेत्रे पव स्थिते दोषे प्राप्तमञ्जनमाचरेत् ॥
लेखनं रोपणं चापि प्रसादनमथापि वा ॥

लेखनं रोपणं दृष्टिप्रसादनमिति त्रिधा अञ्जनम् ॥

Anjana refers to application of medicinal collyrium inside the lower conjunctival sac. Based on action, it is of three types:

1. Lekhana Anjana – for Kapha disorders (e.g., Arma, Kaphaja Abishyandah)
2. Ropana Anjana – for healing (e.g., Netra Vrana)
3. Prasadana Anjana – daily use for eye health maintenance

Drugs like Nayanamrita Anjana, and Nagarjuna Anjana are used depending on the disease and Dosha.

विशदं लघ्वनासावि क्रियापटु सु निर्मलम् ।
संशान्तोपद्रवं नेत्रं विरिक्तं सम्यगादिशेत् ॥

3.5 Seka

Seka is the continuous pouring of medicated decoctions or fluids over closed or open eyes. It is indicated in acute burning, redness, pain, and watery discharges. Commonly used decoctions include Chandanadi Kashaya, Triphala, and Patoladi Kwatha. Seka is helpful in Abishyandah, Akshi Daha, and Vata-Pitta Netrarogah.

सेकस्तु सूक्ष्मधाराभिः सर्वस्मिन्नयते हितः ।
मलिताक्षस्य मर्त्यस्य प्रदेयश्चतुरङ्गुलात् ॥

Types

स चापि स्नेहनो वाते रक्ते पित्ते च रोपणः ।
लेखनश्च कफे कार्यः तस्य मात्रा ऽधुनोच्यते ।
षट्वाक्शतैः स्नेहनेषु चतुर्भिश्चैव रोपणे ।
वाक् शतैश्च त्रिभिः कार्यः सेको लेखन कर्मणी ।
कार्यस्तु दिवसे सेको चात्ययिके गदे ।

3.6 Bidalaka

Bidalaka is the application of a fine herbal paste on the eyelids. It helps reduce swelling, itching, and irritation. Herbs such as Haridra, Daruharidra, Gairika, and Shunthi are used. It is effective in Vartma Shotha, Pakshmathata, and blepharitis.²⁶

3.7 Pindi

पिण्टि कावलिका प्रोक्ता वध्यते पट्टवस्त्रकैः ।

वस्त्रवद्धं प्रकुपितमात्रे अवगण्ठनं नेत्रे ।

नेत्राभिष्यन्दयोग्या सा व्रणेष्वपि निबध्यते ।

अभिष्यन्देऽप्यु सर्वेषु बध्नीयात् पिण्डिकां बुधः ॥

Pindi is the procedure of bandaging medicated poultices around the eyes. These act over a longer duration and facilitate deeper absorption of medicine. Indicated in Netra Shotha, Kandua and Vedana. Substances like Shunthi, Nimba, Eranda Patra, and medicated oils are commonly used.²⁷ This detailed understanding of each Kriyakalpa ensures that the treatment is precisely tailored, promoting quicker recovery, enhanced comfort, and minimal complications. These therapies provide both acute management and long-term prevention, thus acting as holistic tools in the Ayurvedic management of Netrarogahs.

IV. REVIEW

According to Ayurvedic texts, Kriyakalpas are not only therapeutic interventions but also health activities that promote and protect eye health. They are superior to traditional systemic therapy in many ways, particularly when it comes to localized eye problems.

4.1. Targeted and localized action

The majority of Kriyakalpas are applied directly to the eye area, including Tarpana, Aschyotana, and Anjana. This guarantees a quicker beginning of action and greater therapeutic efficacy by enabling direct drug transport to the afflicted tissues.^[11] Kriyakalpas avoid systemic dilution and first-pass hepatic metabolism, in contrast to oral drugs.

4.2. Few systemic adverse reactions

Kriyakalpas localized nature minimizes systemic absorption, which lowers the possibility of systemic

side effects, which are frequently seen with oral medications. Patients who are young, elderly, or immune compromised will especially benefit from this.

4.3. Tailored Based on Disease Stage and Dosha

Kriyakalpas have a great deal of individuality. Dosha, Dushya, and Avastha (stage) of the disease influence the choice of medication and application method, providing a customized therapeutic strategy. For example, Seka is chosen in Vataja-Pittajadominant diseases,²⁵ but Lekhana Anjana is employed in Kapha-dominant illnesses.

4.4. Rasayana Effect and Nourishment Rejuvenating techniques include Tarpana and Putapaka. Rasayana, Chakshushya, and neuroprotective properties of ghee-based Tarpana preparations (such as Triphala Ghrita and Jeevantiyadi Ghrita) improve vision and postpone ocular degeneration.

4.5. Potential for prevention

Even in healthy people, regular usage of periodic Tarpana and Sauviranjana is advised as part of Dinacharya for Netra protection.²⁸ By strengthening ocular tissues, these workouts help avoid lifestyle-related conditions including digital eye strain and dry eye syndrome.

4.6. Cost effectiveness

Simple herbal ingredients that are readily available and reasonably priced, such as triphala, daruharidra, haridra, etc., are used by many Kriyakalpas. This makes the therapies affordable and available in low-resource and rural areas.

4.7. Integration with modern ophthalmic practice

Several studies have shown clinical effectiveness of Kriyakalpas in managing chronic and recurrent eye diseases. For example, Triphala Ghrita Tarpana was shown to improve Schirmer's test scores in dry eye patients, and Guduchayadi Anjana showed reduction in size of Arma.

4.8. Holistic healing and patient comfort

Kriyakalpas not only treat the physical disease but also promote mental relaxation. Procedures like Seka and Tarpana induce a soothing effect, which reduces stress-related ocular symptoms such as eye strain and photophobia.

V. DISCUSSION

While Kriyakalpas offer significant therapeutic benefits, their improper administration or application in contraindicated conditions may result in complications. Therefore, a practitioner must carefully evaluate various factors before recommending and performing these procedures.

5.1. General Precautions

1. Hygiene and sterility: To prevent iatrogenic infections, all hands, eye drops, Ghrita, and tools must be sterile. Microbial keratitis or secondary Abishyandah might result from contaminated formulations.
2. Proper placement and setting: For therapies like Tarpana and Seka, the process needs to be performed in a quiet, well-lit, and wind-free space.
3. Medication selection: To prevent agitation or ineffective outcomes, medications should be chosen based on the patient's Prakriti, disease stage (Avastha), and Dosha.
4. Avoidance in unfit patients: According to traditional rules, people who are weak, exhausted, drunk, hungry, or overly full shouldn't have Kriyakalpas.

5.2. Procedure-Specific Precautions

1. Tarpana: It should not be performed in cases of acute inflammation or infection. It should not be used for conjunctivitis, corneal ulcers with active discharge, or Pittaja Abishyandah.
2. Aschyotana: Avoid abrupt, forceful instillation as it may worsen inflammation or cause corneal damage. Unless instructed otherwise, use lukewarm drops.
3. Anjana: Steer clear of extreme redness or Akshi Daha. Because it can exacerbate symptoms, Lekhana-type Anjana should not be used in eyes with Pitta or Vata vitiation.
4. Seka: To avoid shock or overcooling of the ocular tissues, the water's temperature and pouring height should be standardized.
5. Putapaka: Only done when there are no symptoms of acute inflammation, following Tarpana. Make sure the fresh juice is lukewarm and filtered.

5.3 Contraindications

1. Acute infective eye conditions with purulent discharge and photophobia (e.g., Kaphaja Abishyandah, acute Suktih) Tarpana, Putapaka, and Anjana are contraindicated.
2. Systemic illnesses like high-grade fever, uncontrolled diabetes, or immune-suppressions should avoid prolonged Tarpana or Bidalaka.
3. Very young children (<5 years) and uncooperative psychiatric patients should avoid prolonged therapies like Tarpana or Pindi due to risk of contamination and injury.
4. Hypersensitivity to herbal ingredients like Haridra, Maricha, or Guggulu alternative formulations should be selected.

5.4 post-procedural care

1. The eyes should be kept closed for a few minutes post therapy.
2. Direct exposure to sunlight, cold wind, screen light, or dust should be avoided.

Proper adherence to classical guidelines and modern safety protocols ensures effective, safe, and reproducible outcomes in Ayurvedic ocular therapy. Educating the patient and monitoring for adverse events is key to successful administration of Kriyakalpas.

VI. CONCLUSION

Kriyakalpas are a unique and integral part of Ayurvedic ophthalmology that exemplify the classical approach to localized, personalized, and holistic treatment of Netrarogahs. Rooted in centuries-old knowledge and backed by practical efficacy, these procedures represent a fine balance between curative and preventive eye care.

Kriyakalpas are not merely therapeutic measures but a holistic framework for maintaining and restoring eye health. Their systematic incorporation in clinical practice can offer sustainable, safe, and effective solutions to a wide range of ocular disorders while honoring the Ayurvedic principles of Tridosha Samyata, Dhatu Samya, and Chikitsa Siddhanta. With proper standardization, training, and clinical validation, Kriyakalpas have the potential to enrich the global eye care system as a complementary therapeutic modality.



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