ISSN: 2322 - 0902 (P)
ISSN: 2322 - 0910 (O)

International Journal of Ayurveda and Pharma Research

Research Article

EVALUATING THE EFFICACY AND SAFETY OF EYE MANTRA DROPS: A COMPREHENSIVE POST-MARKETING SURVEILLANCE STUDY IN OCULAR DISORDERS

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Article info

Article History:
Received: 24-02-2024
Accepted: 20-03-2024
Published: 04-04-2024

KEYWORDS:
Eye Mantra Drops, Conjunctivitis, Iritis, Dry Eyes, Efficacy, Safety and Clinical Trial.

ABSTRACT

Objectives: This study aimed to systematically evaluate the efficacy and safety of Eye Mantra Drops, a modern formulation integrating Ayurvedic principles and medicinal plant extracts, in addressing various ocular conditions, including conjunctivitis, iritis, dry eyes, eye strain, itchiness, and watery eyes. **Methods:** The study adopted a single-center, open-label, non-randomized, post-marketing surveillance approach, involving 120 subjects with diverse ocular conditions. Eye Mantra Drops, comprising thirteen traditionally used ingredients, were administered to the participants for 7 days. Frequency and severity of symptoms, vital signs, and adverse events were assessed at screening and at the end of study to evaluate the safety and efficacy of Eye Mantra Drops. **Results:** The study revealed a significant reduction in frequency and symptom severity across diverse ocular conditions, including conjunctivitis, iritis, dry eyes, itchiness, watery eyes, and eye strain. No adverse events were reported, and vital signs remained stable, indicating the safety of Eye Mantra Drops. **Conclusion:** Eye Mantra Drops emerged as a promising and well-tolerated intervention for various ocular conditions including conjunctivitis, iritis, dry eyes, eye strain, itchiness, and watery eyes.

INTRODUCTION

Ophthalmic conditions, ranging from mild discomfort to severe inflammation, represent a substantial global health challenge characterized by diverse causes and clinical manifestations [1]. Conjunctivitis, iritis, dry eyes, eye strain, itchy eyes, and watery eyes are commonly occurring conditions that impact individuals across various age groups. These ocular conditions may lead to a decrease in quality of life and impaired productivity [2,3]. Despite significant technological advancements in ophthalmic medicine and surgery, conventional treatments remain integral for managing various eye disorders. Despite extensive research and technological utilization, challenges persist in addressing conditions such as conjunctivitis, iritis, dry eyes, and watery eyes.

Access this article online

Quick Response Code

https://doi.org/10.47070/ijapr.v12i3.3090

Moreover, synthetic medications frequently result in adverse effects, causing discomfort and morbidity among patients [4]. In response of persistent challenges in managing eye conditions, researchers are actively exploring the potential of medicinal plants to promote long-term eye health. Traditional herbal medicines, specifically, are gaining attention for their ability to overcome the limitations of conventional drugs. Many cultures have relied on botanical remedies to alleviate symptoms such as conjunctivitis, iritis, dry and watery eyes [5]. Additionally, the long-standing integration of Ayurvedic principles and traditional medicinal plants have made a significant contribution to the collective understanding and treatment of eye disorders [6]. Recent scientific evidence has shown diverse therapeutic properties of traditional medicines, including antifungal, antiviral, antibacterial, antioxidant, anti-allergic, anti-inflammatory, immuno-modulatory, and wound-healing effects [7].

Amid this landscape, Eye Mantra Drops have emerged as a modern formulation that integrates Ayurvedic principles and medicinal plant extracts to offer a contemporary approach to address the complex

and multifaceted nature of eye disorders. The drops consist of thirteen traditionally used ingredients, namely *Rosa centifolia, Terminella chebula, T. belerica, Embelica officinalis, Ocimum sanctum, Boerhaavia diffusa, Berberis aristata, Curcuma longa, Azadirachta indica, Mentha avensis*, glycerine, and honey. The drop claims to be effective in treating a wide range of eye disorders, including conjunctivitis, iritis, dry eyes, eye strain, itchy eyes, and watery eyes. However, the integration of traditional knowledge into modern therapeutic modalities warrants thorough scientific investigation through clinical study to validate these claims and ascertain the safety profile of this product. Hence, the objective of the single-centric, open-label, non-randomized study was to systematically evaluate the efficacy and safety of Eye Mantra Drops in healthy subjects who had experienced conjunctivitis, iritis, dry eyes, eye strain, itchy eyes, and watery eyes.

MATERIAL AND METHODS

Study Design and Ethics

This was a single-center, non-randomized, open-label, post-marketing surveillance study designed to evaluate the safety and efficacy of "Eye Mantra Drops," a polyherbal ophthalmic suspension, in the management of conjunctivitis, iritis, dry eyes, eye strain, itchy eyes, and watery eyes. The study was conducted at Care Multispecialty Hospital in Pune, Maharashtra, adhering to ethical guidelines such as the Declaration of Helsinki, ICMR for Biomedical Research, Good Clinical Practice (GCP) principles, ASU-GCP, AYUSH, and relevant government regulations.

Approval for the study was obtained from the Care Multispecialty Hospital Institutional Ethics Committee (Protocol No.: SBS/DIV/001/2022) on March 8, 2023. The study was registered with the Clinical Trials Registry of India (CTRI No: CTRI/2023/03/050741) on March 15, 2023. A total of 120 subjects participated in the study, each providing signed informed consent before the commencement of study procedures.

The study spanned 7 days with two assessment points: day 1 and day 7. On day 1, subjects underwent screening, baseline assessments, and instillation of the investigational product. The site staff administered the first dose, followed by self-administration of 2-3 drops in each eye, thrice daily, for 7 days. The final follow-up visit concluded the study on day 7.

Inclusion and Exclusion Criteria

The study enrolled adult males and females aged 18 to 80 with a clinical diagnosis of conjunctivitis, iritis, dry eyes, eye strain, itchy eyes, watery eyes, or tired eyes. All participants agreed to discontinue wearing contact lenses for the duration of the study and provided written informed consent.

This study excluded pregnant and lactating women, individuals with uncontrolled diabetes mellitus, those with a history of ocular trauma or corneal complications, and subjects with clinically significant optic nerve defects. Subjects with a recent history of eye surgery or plans for future eye surgery were also excluded. Furthermore, subjects who had participated in another clinical study involving devices or drugs within 30 days, persistent users of contact lenses, and those unwilling to provide informed consent were not included in the study.

Study Interventions

The investigational product "Eye Mantra Drops," is a polyherbal Ayurvedic formulation developed for ophthalmic use. This herbal eye drop is comprised of a blend of botanical ingredients, including *R. centifolia* (flower), *T. chebula* (fruits), *T. berlerica* (fruits), *E. officinalis* (fruits), *O. sanctum* (leaves), *B. diffusa* (root), *B. aristata* (wood), *C. longa* (rhizome), *A. indica* (leaves and bark), *M. avensis* (aerial part), glycerin, and honey. The manufacturing of this eye drop is carried out by Divisa Herbals Pvt. Ltd., Chandigarh. This product is claimed to be efficacious in the treatment of various ocular conditions, including conjunctivitis, iritis, dry eyes, eye strain, itchy eyes, and watery eyes.

Study Endpoints

Primary Endpoints

The primary outcomes of the study were evaluated by assessing changes from screening in symptom assessment scores for severity and frequency, including conjunctivitis, iritis, dryness, itchiness, strain, and watery eyes, at day 7 of treatment. Additionally, alterations from screening in sign and symptom assessment scores related to ocular inflammation and allergy were examined on day 7 of treatment.

Conjunctivitis

The assessment of conjunctivitis in the study involved grading ocular symptoms on a 0–4 scale, where 0 indicated absence, and 4 signified severe symptoms. These symptoms included itching, photophobia, gritty sensations, and blinking. Ocular signs such as papilla, follicles, conjunctival congestion, and conjunctival edema were graded on a similar 0–3 scale [8]. The scoring system reflected the severity of symptoms and signs, with 0 indicating absence and 3 representing severe manifestations. Evaluation was conducted by the same investigator through direct questioning or observation, maintaining consistency in measurement standards.

Iritis signs

The evaluation of iritis signs involved a thorough examination using direct slit-lamp

biomicroscopy of the anterior eye segment [9]. The severity of these signs was graded on a scale ranging from 0 to 4. A grade of 0 indicated a normal state with no signs, while Grade 1 represented slight iris vessel dilatation and a few anterior chamber (AC) cells (less than 10 per field). Grade 2 included iris hyperaemia, some limitation in pupil dilation, freely moving AC cells (10-20 per field), and slight flare. For Grade 3, the iris was miotic, irregular, hyperaemic, and occasionally slightly damaged, with considerable AC flare and cells. The highest grade, Grade 4, described a seriously damaged and hyperaemic iris, mitotic pupil often filled with protein, and cloudy, gel-like aqueous humour.

Dry eyes

Dry eyes were assessed using the standardized Patient Evaluation of Dry Eye (SPEED) Questionnaire and Scoring System[10]. Participants answered the SPEED questionnaire, which included items related to the type, frequency, and severity of dry eye symptoms over different time frames (during visits, past 72 hours and past 3 months). The questionnaire employed a rating list to capture the frequency (0 = never, 1 = sometimes, 2 = often, and 3 = constant) and severity (score 0 to 4) of symptoms, facilitating a comprehensive evaluation of dry eye symptoms, from occasional discomfort to potential interference with daily activities.

Itchiness

Itchiness was assessed using the Visual Analogue Scale (VAS), a widely employed tool for gauging itching intensity. Subjects were instructed to mark a vertical line on a 10cm horizontal scale, ranging from "no itch" to "worst imaginable itch." The distance from the left end to the marked point was measured in millimetres, with scoring categories ranging from "No Itching" to "Very Severe" based on specific thresholds: 0, < 3, ≥ 3 - < 7, ≥ 7 - < 9, and ≥ 9, respectively.

Watery eyes

The assessment of watery eyes in the study involved evaluating the severity through a combination of historical tearing data and a Slit Lamp biomicroscopic examination [11]. Symptom severity was graded on a scale of 0 to 3, with corresponding descriptions ranging from no tearing (Grade 0) to constant watering (Grade 3). The grading system facilitated a nuanced evaluation, including distinctions such as mild tearing in windy conditions (Grade 1) and constant tearing with occasional wiping required (Grade 2).

Eye strain

Eye strain assessment was conducted through a self-assessment questionnaire, employing a validated instrument consisting of 16 items designed for computer vision syndrome evaluation [12]. Participants reported the frequency of symptoms as never, occasionally, often, or always, with corresponding scores (0, 1, or 2). The intensity of symptoms was categorized as moderate (score 1) or intense (score 2). This approach provided a detailed analysis of eye strain symptoms, including burning, itching, foreign body sensation, tearing, excessive blinking, eye redness, eye pain, heavy eyelids, dryness, blurred vision, double vision, difficulty focusing for near vision, increased sensitivity to light, coloured halos around objects, feeling that sight is worsening, and headaches.

Ocular inflammation

Ocular inflammation was assessed by quantifying cells or flare using summed ocular inflammation scores (SOIS). Anterior chamber cells were evaluated with a slit lamp biomicroscope, with cell counts measured twice and converted to a grade [13]. An anterior chamber flare was graded using the ocular inflammation grading scale, and the SOIS was calculated as the sum of cell and flare grades. The grading scale included categories for anterior chamber cells and flare, with corresponding grades based on cell count and flare intensity, providing a comprehensive evaluation of ocular inflammation.

Ocular allergy

Common symptoms of eye allergy, including itching, redness, tearing, and chemosis, were assessed using the Visual Analog Scale (VAS). The intensity of itching was rated on a scale of 0 to 4 points, while ocular redness, tearing, and chemosis were evaluated on a 0–3-point scale graded by the physician. A Total Ocular Symptom Score (TOSS) was computed by summing the values, with a test considered negative if TOSS was less than 5. Severity of subjective ocular allergy symptoms was rated as follows: itching (0 = none to 4 = very severe), redness (0 = none to 3 = severe), tearing (0 = none to 3 = severe), and chemosis (0 = none to 3 = severe).

Secondary Endpoints

Secondary endpoints included evaluating changes from baseline in eye fatigue sign and symptom scores for both severity and frequency, assessed at day 7 of the study. Additionally, participants' tolerability of Eye Mantra Drops was assessed through self-reported adverse events, providing insights into the product's safety profile.

Eye fatigueless

Eye fatigue was assessed using a validated questionnaire [14,15], with the level of fatigue scored on a 7-point Likert scale (0 = none, 1-2 = slight, 3-4 = moderate, and 5-6 = severe). Higher scores were indicative of a heightened perception of eye fatigue.

Safety measures

Safety assessments were conducted by examining vital signs and self-reported adverse events. From screening (day 1) to end of the study (day 7), ocular and non-ocular adverse events were systematically evaluated for frequency, severity, and their relationship to the investigational product. Additionally, clinically significant changes in vital signs from screening to the end of the study were carefully assessed.

Statistical Analysis

Descriptive statistics were used to analyse the characteristics of the study population. All variables related to efficacy and safety were summarized through descriptive statistics, including arithmetic means, SDs, percentages, minimum and maximum values for quantitative variables, and frequencies for qualitative variables, across different evaluation time points. A t-test was used to compare data between baseline and final visits. The outcomes were expressed in terms of means, SDs, 95% confidence intervals (CIs), and p-values, with statistical significance set at a p-value of 0.05.

RESULTS

Demographics

A total of 122 subjects were screened, of which 2 were lost to follow-up and 120 subjects were enrolled in the study. The average age of the subjects was 47.58 years (SD = 14.81 years), with a range of 19 to 76 years. Of the enrolled subjects, 62 (51.67%) were male and 58 (48.33%) were female. The average weight and height of the subjects were 64.46kg (SD = 10.50kg) and 168.71cm (SD = 6.33 cm) respectively.

Efficacy Analysis

Assessment of conjunctivitis

In this study involving 120 subjects, a subgroup of 32 patients with conjunctivitis underwent evaluation of symptoms and signs at the screening visit and at the end of study. The results revealed a substantial reduction in both severity scores for conjunctivitis symptoms and signs at the end of study, as presented in Tables 1 and 2. Total severity scores for both symptoms and signs exhibited a significant reduction from screening (7.47 ± 1.68 to 3.94 ± 2.05) and (5.25 ± 1.55 to 1.53 ± 1.24), respectively ($p < 0.0001$). These findings highlight the effectiveness of Eye Mantra Drop in significantly alleviating both the symptoms and signs of conjunctivitis, suggesting its potential to offer relief and improve outcomes for individuals affected by this condition.

Table 1: Mean change in conjunctivitis symptoms severity from screening visit to end of the study (n=32)

Symptoms	Screening (mean ± SD)	End of Study (mean ± SD)	Mean diff.	95% CI	p-value
Itching	2.66± 0.70	1.47± 0.88	1.188	1.018 to 1.357	< 0.0001***
Photophobia	0.56± 1.01	0.31± 0.59	0.250	0.091 to 0.409	0.0030**
Gritty sensation	2.19± 0.64	1.06± 0.80	1.125	0.973 to 1.277	< 0.0001***
Blinking	2.06± 0.95	1.09± 0.86	0.969	0.824 to 1.113	< 0.0001***
Total score	7.47± 1.68	3.94± 2.05	3.531	3.132 to 3.930	< 0.0001***

Note: Statistical comparison: Screening (day 1) vs End of Study (Day 7). **P < 0.01 and ***P < 0.001

Table 2: Mean change in severity of conjunctivitis signs from screening visit to end of the study (n=32)

Symptoms	Screening (mean ± SD)	End of Study (mean ± SD)	Mean diff.	95% CI	p-value
Conjunctival papilla	1.38± 0.49	0.34 ± 0.48	1.031	0.968 to 1.095	< 0.0001***
Conjunctival follicle	1.47± 0.51	0.47 ± 0.51	0.969	0.905 to 1.032	< 0.0001***
Conjunctival congestion	1.53± 0.67	0.47 ± 0.57	1.063	0.906 to 1.219	< 0.0001***
Conjunctival edema	0.88± 0.75	0.25 ± 0.44	0.625	0.448 to 0.802	< 0.0001***
Total Score	5.25± 1.55	1.53 ± 1.24	3.719	3.509 to 3.928	< 0.0001***

Note: Statistical comparison: Screening (day 1) vs End of Study (Day 7). ***P < 0.001

Assessment of iritis signs

Within the total cohort of 120 subjects, 50 were suspected to have iritis, with 27 displaying no iritis symptoms and the remaining 23 exhibiting iritis signs. The assessment of iritis signs at both the screening visit and end of the study revealed a significant reduction in severity by the end of the study, illustrated in Figure 1. The

total sign severity score showed a substantial decrease from the initial screening (0.50 ± 0.58) to the study's end (0.02 ± 0.14), with p-values indicating statistical significance (p<0.0001) and a mean difference of 1.043 (95% CI: 0.953 to 1.134).

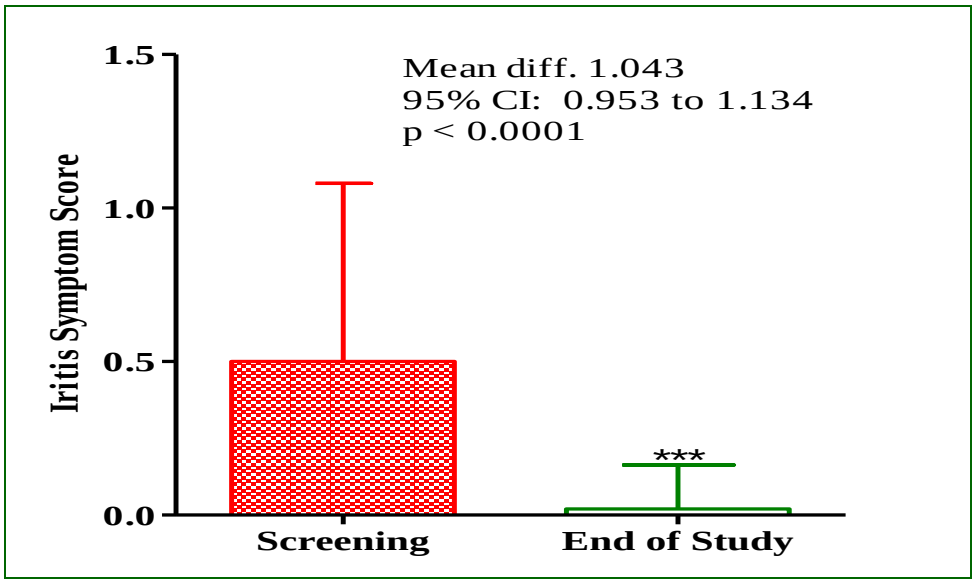


Figure 1: Mean change in Iritis signs score from screening visit to end of the study (n=23). Statistical comparison was performed as screening (Day 1) vs end of study (Day 7). ***P < 0.0001.

Assessment of dry eyes

The assessment of dry eyes in this study, which included 51 participants, revealed a notable improvement in the severity of dry eye symptoms from the screening visit to the end of study (day 1 to day 7). The incidence of dry eye symptoms was documented during both at the screening visit and at the end of study (Table 3). The data demonstrated significant reductions in various dry eye symptoms, including dryness, grittiness or scratchiness, soreness or irritation, burning or watering, and eye fatigue. The mean differences in symptom severity scores were all highly significant with p-values less than 0.0001, highlighting the effectiveness of the treatment or intervention (Figure 2). The total symptom severity score, which includes all these symptoms, demonstrated a substantial reduction from 6.80 ± 1.51 at the screening visit to 2.80 ± 1.35 at the end of the study, indicating a significant improvement in the overall dry eye condition among the participants.

Table 3: Frequency of dry eyes symptoms during screening visit and at the end of study (n=51)

Frequency	Screening				End of Study			
	Dryness, grittiness or scratchiness n (%)	Soreness or irritation n (%)	Burning or watering n (%)	Eye fatigue n (%)	Dryness, grittiness or scratchiness n (%)	Soreness or irritation n (%)	Burning or watering n (%)	Eye fatigue n (%)
Never	4 (7.84)	2 (3.92)	3 (5.88)	4 (7.84)	35 (68.63)	22 (43.14)	26 (50.98)	29 (56.86)
Sometimes	31 (60.78)	20 (39.22)	23 (45.10)	18 (35.29)	16 (31.37)	29 (56.86)	24 (47.06)	20 (39.22)
Often	16 (31.37)	29 (56.86)	21 (41.18)	27 (52.94)	0 (0)	0 (0)	1 (1.96)	2 (3.92)
Constant	0 (0)	0 (0)	4 (7.84)	2 (3.92)	0 (0)	0 (0)	0 (0)	0 (0)

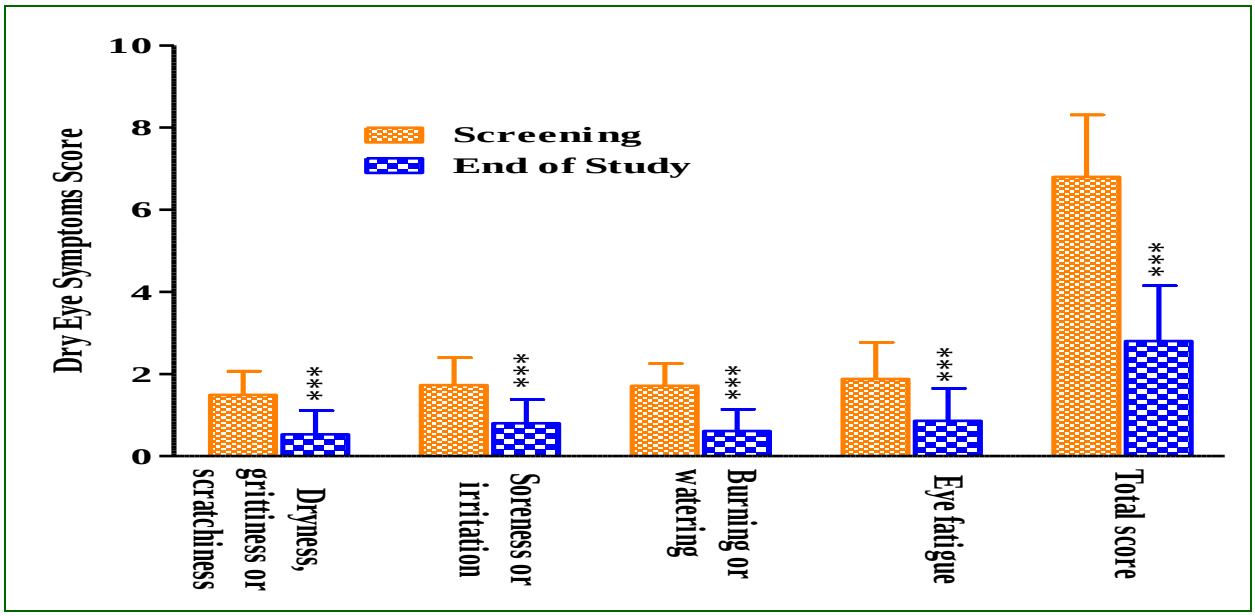


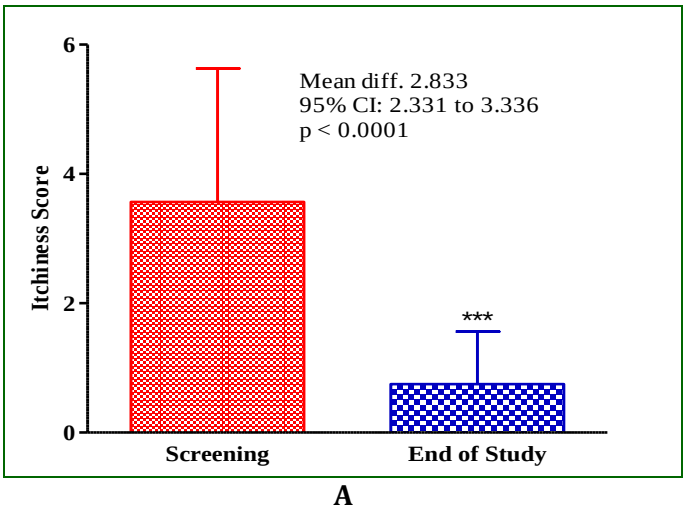
Figure 2: Mean change in Dry Eye Symptom scores from screening visit to end of the study (n=51). Statistical comparison was performed as screening (Day 1) vs end of study (Day 7). ***P < 0.0001

Assessment of Itchiness

Among the total 120 subjects, 51 were assessed for itchiness, with 9 reporting no itchiness and the remaining 42 experiencing mild to severe itchiness during the screening visit. At day 1, participants exhibited varying levels of itching severity, including 9 reporting no itching, 13 with mild itching, 28 with moderate itching, and 1 reporting severe itching. Remarkably, on day 7, a significant transformation was evident, with 25 subjects reporting no itching and the remaining 26 experiencing only mild itching; no participants reported moderate, severe, or very severe itching. Statistical analysis confirmed this remarkable change, demonstrating a highly significant ($P < 0.0001$) reduction in itching severity scores from screening (3.57 ± 2.06) to end of the study (0.75 ± 0.81) (Figure 3A).

Assessment of watery eyes

The evaluation of watery eyes in this study, involving 31 out of 120 subjects, revealed considerable improvements in symptom severity throughout the trial duration. Results showed that the subjects with no tearing increased from 0 at the screening to 26 at the end of the study, while the cases of mild and moderate tearing significantly decreased, from 12 to 5 and 18 to 0 subjects, respectively. Additionally, constant tearing, reported by one subject initially, was completely resolved by at the end of study. Figure 3B illustrates a significant mean reduction in the severity of watery eyes symptoms from the screening visit (1.31 ± 0.83) to the end of the study (0.13 ± 0.34), with a p-value of less than 0.0001.



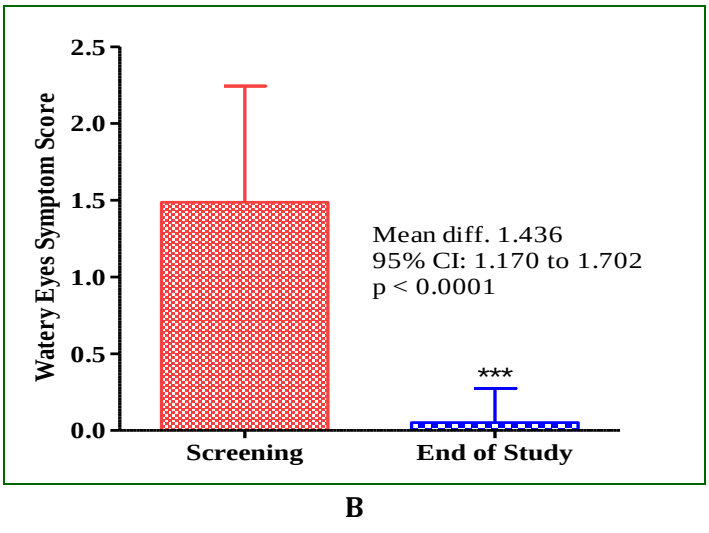


Figure 3: Mean change in (A) itching severity and (B) watery eyes symptoms severity scores from screening visit to end of the study. Statistical comparison was performed as screening (Day 1) vs end of study (Day 7). ***P < 0.0001

Assessment of eye strain

The assessment of eye strain, involving 31 participants out of the total 120 subjects, conducted a thorough analysis of the intensity of eye strain from the screening visit to end of the study. Various symptoms, including itching, a feeling of a foreign object, tearing, excessive blinking, eye redness, eye pain, heavy eyelids, dryness, blurred vision, difficulty focusing for near vision, increased sensitivity to light, coloured halos around objects, feeling that sight is worsening, and headache, all exhibited significant reductions in severity from the screening visit to the end of the study (Figure 4). The total intensity score for eye strain demonstrated a remarkable reduction, decreasing from 10.74 ± 4.17 at the screening visit to 3.90 ± 2.61 at the end of the study, indicating a substantial improvement in overall eye strain symptoms (mean difference 6.839, 95% CI: 5.190 to 8.487, $p < 0.0001$).

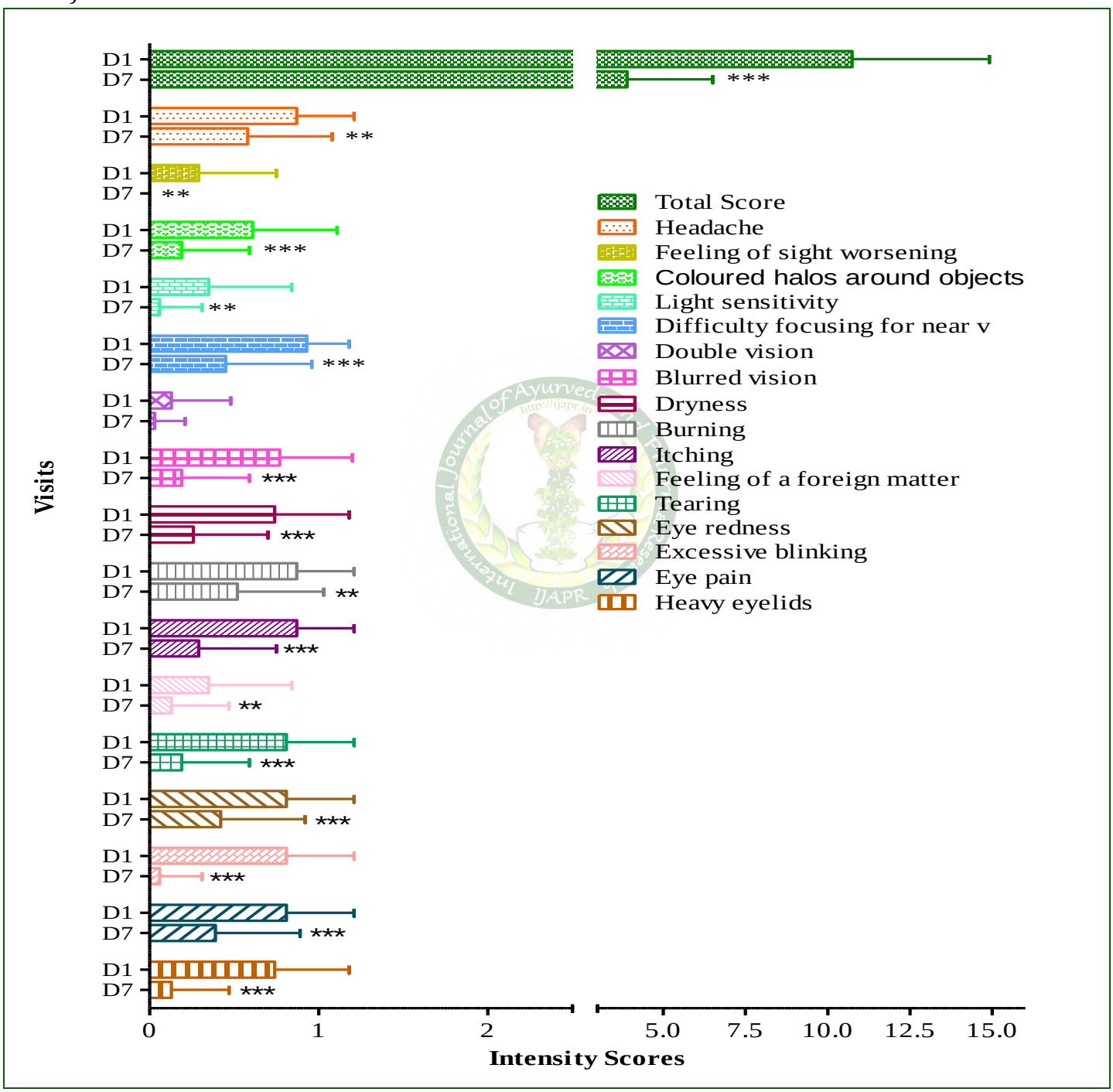


Figure 4: Mean change in intensity of eye strain score from screening visit to end of the study (n=31). Statistical comparison was performed as screening (Day 1) vs end of study (Day 7). $^{**}P < 0.01$ and $^{***}P < 0.0001$

Assessment of ocular inflammation, ocular allergy, and eye fatigueless

Among the participants, there were no instances of reported ocular inflammation. Only one individual mentioned experiencing ocular allergies, characterized by moderate symptoms such as itching, redness, tearing, and chemosis. Significantly, all these allergy-related symptoms had completely subsided by the end of the study. Conversely, another participant initially reported mild to moderate eye fatigue, encompassing symptoms like tired, watery, and irritated eyes, dryness, eyestrain, a sensation of heat or burning, blurred vision, difficulty focusing, and general discomfort. Interestingly, at the end of the study, there were no indications of any eye fatigue symptoms.

Safety and Tolerability

The results of the vital sign assessment, which included body temperature and pulse rate, revealed no significant changes in these parameters by the end of the study compared to the screening. Analysis of data from the 120 subjects who successfully completed the study revealed no reported or observed adverse events throughout the entire study period. These findings strongly indicate the safety and high tolerability of Eye Mantra Drops for clinical use.

DISCUSSION

Conjunctivitis, iritis, dry eyes, eye strain, itchiness, and watery eyes collectively contribute to the spectrum of ophthalmic disorders, affecting individuals of various age groups. Conjunctivitis, commonly known as pink eye, involves inflammation of the conjunctiva, resulting in redness and discomfort [1]. Iritis, an inflammation of the iris, can lead to severe eye pain and vision impairment [16]. Dry eyes, characterized by insufficient tear production, cause discomfort, blurred vision, and irritation [2]. Eye strain, often associated with prolonged screen use, manifests as fatigue, discomfort, and headaches [17]. Itchiness, a common symptom across various ocular conditions, can be attributed to allergic responses or irritants [18]. Watery eyes, resulting from excessive tear production, may indicate irritation or underlying issues[3]. Understanding these conditions and exploring effective interventions is crucial for improving ocular health and overall well-being.

The polyherbal formulation, Eye Mantra Drops, is a carefully crafted blend of thirteen traditionally used ingredients, each contributing unique pharmacological activities beneficial for ocular health. These ingredients include *Rosa centifolia*, known for its anti-inflammatory and antibacterial properties[16]; *Terminella chebula*, recognized for its diverse range of activities such as antibacterial, antiviral, antifungal, antioxidant, anti-inflammatory, and neuroprotective effects[19]; *T. belerica*, acknowledged for its antioxidant, anti-inflammatory, and immuno-modulatory attributes, among others[20]; *Embelica officinalis*, which boasts antioxidant, anticancer, and wound-healing properties [21]; *Ocimum sanctum*, contributing to wound healing, radio-protective, and anti-inflammatory actions [22]; *Boerhaavia diffusa*, offering anti-inflammatory, antioxidant, and anticancer effects[23]; *Berberis aristata*, with reported anti-bacterial, anti-inflammatory, and antioxidant activities[24]; *Curcuma longa*, known for its antioxidant, anti-cancerous, and anti-inflammatory properties[25]; *Azadirachta indica*, recognized for antioxidant, anti-inflammatory, and immunomodulatory effects[26]; *Mentha avensis*, providing antimicrobial, antioxidant, and immunomodulatory benefits[27]; Glycerine, functioning as an osmotic dehydrating agent and contributing to lowering intraocular pressure in glaucoma [28]; and Honey, with antioxidant, wound healing, and immunomodulatory properties [29]. These diverse pharmacological activities align with the reported potential benefits of Eye Mantra Drops in managing various ocular conditions, including conjunctivitis, iritis, dry eyes, itchy eyes, and watery eyes.

This study evaluated the safety and efficacy of Eye Mantra Drops in treating various ocular conditions, including conjunctivitis, iritis, dry eyes, eye strain, itchiness, and watery eyes, on human volunteers. The evaluation of conjunctivitis symptoms demonstrated a substantial reduction in severity scores, highlighting the effectiveness of the Eye Mantra Drops in alleviating both symptoms and signs associated with this condition. Similarly, the assessment of iritis indicated a significant decrease in severity, showcasing the potential of the intervention in mitigating iritis signs. Notably, participants experiencing dry eyes reported a remarkable improvement in symptom severity, as evidenced by significant reductions in various dry eye symptoms. Additionally, the study showcased the effectiveness of Eye Mantra Drops in addressing itchiness, with a significant decrease in severity scores observed by the end of the trial. The assessment of watery eyes indicated a noteworthy reduction in symptom severity, with a substantial decrease in tearing reported by the participants. Moreover, the evaluation of eye strain demonstrated a remarkable improvement in the overall severity of symptoms associated with eye strain, further emphasizing the positive impact of Eye Mantra Drops on ocular well-being.

Importantly, the study highlighted the safety and tolerability of Eye Mantra Drops, with no significant changes observed in vital signs and no reported adverse events throughout the study period. These results suggest that Eye Mantra Drops are not

only effective in treating various ocular conditions but also exhibit a favourable safety profile.

CONCLUSION

In conclusion, the study highlights the promising therapeutic potential of Eye Mantra drops in effectively addressing conjunctivitis, iritis, dry eyes, itchiness, watery eyes, and eye strain. The notable decrease in symptom severity, combined with outstanding safety profile, demonstrated by minimal alterations in vital signs and the absence of adverse events, highlights its potential value in clinical applications. Overall, the study establishes Eye Mantra drops as a promising and well-tolerated remedy for diverse ocular conditions. These findings advocate for ongoing exploration, suggesting the potential incorporation of Eye Mantra drops into standard clinical practice.

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Cite this article as:
Shreya Verma, Amrish Verma, Jaspal Singh, Hasan Ali Ahmed, Chetan Jaykar. Evaluating the Efficacy and Safety of Eye Mantra Drops: A Comprehensive Post-Marketing Surveillance Study in Ocular Disorders. International Journal of Ayurveda and Pharma Research. 2024;12(3):28-37.
https://doi.org/10.47070/ijapr.v12i3.3090
Source of support: Nil, Conflict of interest: None Declared

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