

# Rapid Vision Recovery in a Patient with Acute Central Serous Chorioretinopathy Following Yoga Prana Vidya (YPV) Distant Healing: A Case Study

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## Abstract

**Introduction:** Central Serous Chorioretinopathy (CSCR) is an eye condition in which fluid builds up under the retina, the light-sensitive layer at the back of the eye. This fluid accumulation causes a small detachment of the retina, leading to blurred or distorted vision. Many individuals with CSCR recover their vision completely, but some may experience persistent or recurrent problems depending on the type and duration of the condition. This paper presents a case of CSCR treated successfully using Yoga Prana Vidya healing protocols. **Method:** A 44-year-old male who is a US resident came with a history of blurred vision which became a distorted vision within 2 days underwent Yoga Prana Vidya (YPV) distant healing sessions by an Associate Certified YPV Healer for 12 days continuously and once in 3 days for next 15 days and once in a week till date. **Results:** The patient reported noticeable improvement in his vision after the healing sessions, which was subsequently confirmed by ophthalmological evaluation. **Conclusion:** Yoga Prana Vidya (YPV) healing may be a helpful complementary approach for managing central serous chorioretinopathy by reducing stress and supporting natural healing.

**Keywords:** Yoga Prana Vidya System®, Central serous chorioretinopathy; stress-related eye disease, retinal disorder.

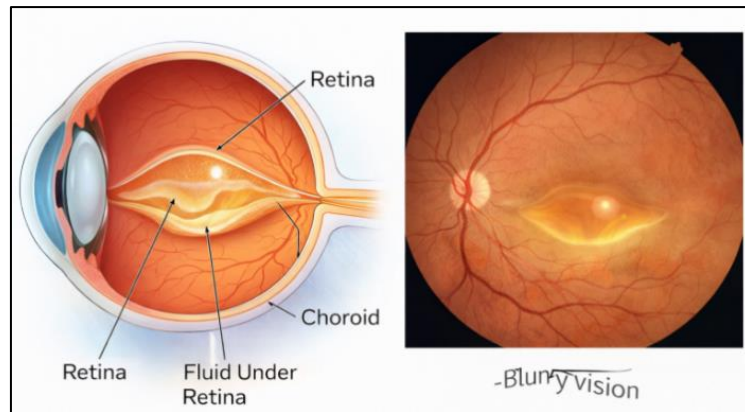
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## INTRODUCTION

Central serous chorioretinopathy (CSC) is the fourth most common non-surgical retinopathy associated with fluid leakage (figure-1) [1] and is characterized by serous retinal detachment most commonly involving the macula, often accompanied by retinal pigment epithelial (RPE) detachments, RPE dysfunction, and features of choroidal thickening, hyperpermeability, and venous overload.[2-4] Patients typically present with symptoms such as blurred vision, central scotoma, micropsia, or metamorphopsia due to subretinal fluid accumulation and RPE compromise [1]. CSC most frequently affects males between 20 and 50 years of age, with incidence rates reported around 9.9–27 cases per 100,000 in men and a significantly lower incidence in women with 1.7 to 15 per 1000,000, reflecting a clear male predominance. [1] Acute CSC generally has a good prognosis. Moreover, acute CSC is usually self-limiting and

resolves spontaneously within 3–4 months. In this period, resorption of the SRF is observed in most patients within 3–4 months with the recovery of visual acuity. [5,6] Patients with acute CSC complain of blurry vision, metamorphopsia, and micropsia, but severe vision loss is rare following the condition has resolved. However, recurrent or chronic CSC results in severe visual loss related to atrophy of the RPE and neurosensory layers. Therefore, observation with modification of risk factors is an appropriate treatment for patients with acute CSC.[4]

Chronic CSC is characterized by persistent SRD for longer than 4–6 months, as observed by optical coherence tomography (OCT). In some patients with chronic CSC, permanent atrophy and disruption of the RPE and photoreceptor layer lead to long-term visual impairment, secondary to progressive retinal damage. [7-9]



**Figure-1: Showing acute Central serous chorioretinopathy**

Yoga Prana Vidya (YPV) is a no-touch, no-drug, integrated, holistic, and complementary energy-healing system that works on both the visible physical body and the invisible energy body by cleansing and energizing the aura, chakras, and affected areas. YPV healing is combined with supportive practices such as Rhythmic Yogic Breathing, Planetary Peace Meditation, and forgiveness techniques to promote physical, emotional, and energetic wellbeing by enhancing the body's natural self-healing capacity. YPV operates on the principle that systematic balancing of the body's subtle energy (prana) through structured protocols can positively influence physiological and psychological health. This approach has been explored as a complementary therapy in several published studies, including randomized trials on wellbeing, [10] outcomes of community health camps which documented benefits in vision and eye-related conditions. Notably, a two-week YPV eye-healing camp reported significant improvements in visual acuity among most participants, with several individuals able to read without spectacles following daily YPV healing sessions and prescribed practices. [11-13] In addition, clinical case reports have documented improvements in specific ocular conditions, including myopia and diabetic retinopathy, following the application of structured YPV healing protocols. [14,15]

## CASE HISTORY

A 44-year-old male presented with a sudden onset of blurred vision in the right eye on 17 October 2025, which worsened the following day. He sought ophthalmic consultation in the United States, where he was diagnosed with acute central serous chorioretinopathy (CSC). The condition was attributed primarily to stress, and no pharmacological treatment was advised, as acute CSC is typically self-limiting and expected to resolve spontaneously within 3–4 months.

As the persistent blurring of vision significantly affected his professional responsibilities and personal life, the patient subsequently approached an Associate Certified Yoga Prana Vidya (YPV) healer in Sirsi for distant healing support. The healer initiated appropriate YPV healing protocols and advised the patient to follow

YPV Sadhana components, which included Rhythmic Yogic Breathing, Planetary Peace Meditation, and forgiveness techniques, aimed at reducing stress and promoting holistic healing from YPV Sadhana App.

### YPV Healing Protocol:

The patient underwent Yoga Prana Vidya (YPV) healing sessions daily for 12 consecutive days, followed by sessions once every three days for the next 15 days, and subsequently once weekly until the present. The healing program included YPV Psychotherapy, YPV Advanced Healing using color prana, and the Healer Development Program (HDP) Level 1, with a special focus on eyesight regeneration.

### YPV Level 3 (Psychotherapy):

Recognizing that stress is not only a psychological response but also an energetic phenomenon, psychotherapy was considered a foundational aspect of the healing process. In the Yoga Prana Vidya system, prolonged stress generates dense and congested energy that accumulates in the aura and chakras, particularly those governing emotional regulation and mental activity. This energetic congestion disrupts the normal flow of prana to various organs and systems, eventually manifesting as physical symptoms. <sup>(16)</sup> Therefore, cleansing and balancing the stress-laden energy through YPV psychotherapy was undertaken prior to physical healing to restore energetic harmony and support the body's natural healing response

- The YPV Psychotherapy protocol involved systematic cleansing and energizing of the following chakras:
- Front and back Heart chakra, Front and back Solar Plexus chakra, Throat chakra, Ajna chakra, Crown chakra, Sex chakra and Basic chakra.
- This psychotherapy protocol was consistently followed during healing sessions.
- Advanced healing techniques employing specific color pranās were applied to intensify the healing effects. The protocol included:
  - General cleansing of the energy body
  - Blood cleansing technique

- Internal organ healing technique
- Thorough cleansing, energizing, and balancing of all relevant chakras
- These procedures were performed during each healing sessions.

### Healer Development Program (HDP) – Level 1

As part of HDP Level 1, a specialized eyesight regeneration technique was applied to the patient. This technique was incorporated into all healing sessions with the objective of supporting retinal and visual recovery.

## RESULTS

The patient's condition was clinically attributed to stress, and no pharmacological treatment was initiated, as acute central serous chorioretinopathy is often self-limiting. The treating ophthalmologist had informed the patient that visual recovery might be gradual or uncertain and that laser treatment could be considered if spontaneous resolution did not occur. (figure-2)

Following the initiation of Yoga Prana Vidya (YPV) healing, the patient reported progressive and rapid improvement in visual clarity. By the third healing session, the patient experienced approximately 50% improvement in vision in the affected eye. With continued daily healing, visual function improved further, and by the eighth day of healing, the patient reported approximately 95% restoration of vision, with marked reduction in blurring and significant improvement in daily functional activities.

Importantly, the subjective improvement in vision was objectively corroborated by ophthalmological examination conducted on 10<sup>th</sup> November, 2025 (figure 3), which confirmed 95% significant improvement in the vision. These improvements occurred without medical or surgical intervention, during a period when spontaneous recovery is typically expected to take several months. In parallel, the patient reported substantial reduction in stress levels and improvement in overall emotional wellbeing.

Date of Service: 10-17-2025

Scotopic: 3mm.  
Shape: Round.  
RL: Sluggish.  
APD: Absent

Scotopic: 3mm.  
Shape: Round.  
RL: Sluggish.  
APD: Absent

EOM  
EOM = please double check- possible eso or exo

| EXTERNAL |                                                | OS |                                                |
|----------|------------------------------------------------|----|------------------------------------------------|
| OD       | Normal facies with good symmetry, no proptosis | OS | Normal facies with good symmetry, no proptosis |

| L & A           |                            | OS |                            |
|-----------------|----------------------------|----|----------------------------|
| OD              | WNL                        | OS | WNL                        |
| Lids            | None                       | OS | None                       |
| Lesion          | Good position and symmetry | OS | Good position and symmetry |
| Lid Position    | WNL                        | OS | WNL                        |
| Lacrimal System |                            | OS |                            |

| IOP/GONIO |                   | OS |                   | Time           |  |
|-----------|-------------------|----|-------------------|----------------|--|
| OD        | iCare: 14 11:15AM | OS | iCare: 15 11:15AM | iCare: 11:15AM |  |

Anesthetic: Proparacaine .05% OU 11:16AM  
Dilation: OU Rev-Eyes: No  
Mydracil 1%/Phenylephrine 2.5% 11:16AM

| SLIT LAMP EXAM |                                                      | OS |                                                      |
|----------------|------------------------------------------------------|----|------------------------------------------------------|
| OD             | White and quiet                                      | OS | White and quiet                                      |
| Conjunctiva    | Normal tear film, epithelium, stroma and endothelium | OS | Normal tear film, epithelium, stroma and endothelium |
| Cornea         | Deep and quiet                                       | OS | Deep and quiet                                       |
| Chamber        | WNL                                                  | OS | WNL                                                  |
| Iris & Pupil   | Clear lens capsule, cortex and nucleus               | OS | Clear lens capsule, cortex and nucleus               |
| Lens           |                                                      | OS |                                                      |

| FUNDUS EXAM  |                      | OS |                      |
|--------------|----------------------|----|----------------------|
| OD           | 0.25 C:D             | OS | 0.25 C:D             |
| C:D          | Fiat, sharp, pink    | OS | Fiat, sharp, pink    |
| Opt.Nev      | WNL                  | OS | WNL                  |
| Vitreous     | WNL periphery normal | OS | WNL periphery normal |
| Retinal Exam |                      | OS |                      |

| ASSESSMENT & PLAN                                       |     |                                                                                                                                                                                              |
|---------------------------------------------------------|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Assessment                                              | Eye | Plan                                                                                                                                                                                         |
| 1 CENTRAL SEROUS CHORIORETINOPATHY; Right Eye (H35.711) | OD  | Onset 2 days.<br>(-)medications, nasal sprays, steroid injections. Takes no medication<br>Will initially observe since there is a good chance the fluid will resolve over the coming months. |

https://bennett.mycareimw.com/interface/patient\_info/common/print\_function.php 3/5

Figure -2: Showing examination report before YPV Intervention

Date of Service: 11-10-2025

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**FUNDUS EXAM**

|                           |                      |
|---------------------------|----------------------|
| <b>OD</b>                 | <b>OS</b>            |
| C:D 0.25 C:D              | 0.25 C:D             |
| Opt.Nev Flat, sharp, pink | Flat, sharp, pink    |
| Vitreous WNL              | WNL                  |
| Retinal Exam Central CSR  | WNL periphery normal |

---

**FUNDUS (EXAM DATE: 11-10-2025)**

**Disc Photo OU**

**Performed By:** JASMINE SWEETING **Patient Understanding & Cooperation:** Good

**Physician Interpretation:** Reliability **OD** Good **OS** Good

**Test Results**

|                                     |                     |
|-------------------------------------|---------------------|
| <b>OD</b>                           | <b>OS</b>           |
| C:D 0.25                            | C:D 0.25            |
| <b>Description:</b> Central CSR     | <b>Description:</b> |
| <b>Interpreted By:</b> ADAM MUELLER |                     |

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**ASSESSMENT & PLAN**

|   | Assessment                                            | Eye | Plan                                                                                                                                             |
|---|-------------------------------------------------------|-----|--------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | CENTRAL SEROUS CHORIORETINOPATHY; Right Eye (H35.711) | OD  | Greatly improved. 95% resolved. (-)medications, nasal sprays, steroid injections. Takes no medication Pt aware of recurrent possibility. Monitor |
| 2 | AMBLYOPIA REFRACTIVE; Left Eye (H53.022)              | OS  | Longstanding, childhood.                                                                                                                         |

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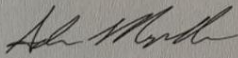
**FOLLOW UP**

**1 Year for Annual dil exam, mac oct, optos + AF with Mueller, Adam T**

**Scribed By:** Desimber, Riley

---

**SIGNATURE**

Signature: 

Signer: Mueller, Adam T OD, FAAO (Physician)

Signed on: 11-10-2025 11:13:58

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**CARE TEAM MEMBERS**

|                                                         |                            |                               |
|---------------------------------------------------------|----------------------------|-------------------------------|
| <b>Primary Provider</b>                                 | <b>Referring Physician</b> | <b>Primary Care Physician</b> |
| Dr. Mueller, Adam T                                     | OD Harder, Tiffany A       |                               |
| SE Bluegrass Ave Louisville, 1935 Bluegrass Ave Ste 200 | Vision Works Dupont        |                               |
| Louisville, KY 40215                                    | 1001 Breckinridge Lane     |                               |
| 502-895-0040                                            | Saint Matthews, KY 40207   |                               |
|                                                         | 502-893-2015               |                               |

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**PROVIDERS NAME AND OFFICE CONTACT INFORMATION**

SE Bluegrass Ave Louisville  
1935 Bluegrass Ave Ste 200

[https://bennett.mycareimw.com/interface/patient\\_info/common/print\\_function.php](https://bennett.mycareimw.com/interface/patient_info/common/print_function.php)

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Figure -3: Showing examination report after YPV Intervention

## DISCUSSION

Central serous chorioretinopathy (CSC) is a disease of the retina characterized by serous detachment of the neurosensory retina secondary to one or more focal lesions of the retinal pigment epithelium (RPE). CSC occurs most frequently in mid-life and more often in men than in women. Major symptoms are blurred vision, usually in one eye only and perceived typically by the patient as a dark spot in the center of the visual field with associated micropsia and metamorphopsia. Normal vision often recurs spontaneously within a few months. The condition can be precipitated by psychosocial stress

and hypercortisolism. Ophthalmoscopic signs of CSC range from mono- or paucifocal RPE lesions with prominent elevation of the neurosensory retina by clear fluid - typical of cases of recent onset - to shallow detachments overlying large patches of irregularly depigmented RPE. The spectrum of lesions includes RPE detachments. Granular or fibrinous material may accumulate in the subretinal cavity. Serous detachment often resolves spontaneously. After 3 months without resolution of acute CSC or in chronic CSC, treatment should be considered. [17]

In the present case, despite being advised observation alone, the patient demonstrated rapid and marked visual improvement within eight days of initiating Yoga Prana Vidya (YPV) healing. This improvement—approximately 95% restoration of vision—was objectively confirmed by ophthalmological examination and occurred considerably earlier than the typical natural course.

YPV healing emphasizes stress reduction and restoration of energetic balance through systematic cleansing and energizing of the aura and chakras. When combined with rhythmic yogic breathing, meditation, and forgiveness practices, YPV healing helps maintain optimal energy levels by reducing the accumulation of stress-related energetic congestion and pent-up emotional patterns. Given that a substantial proportion of illnesses are understood to have a psychosomatic basis, frequently precipitated by sustained psychological stress, addressing stress to restore psychological equilibrium is a critical prerequisite for effective management of physical pathology; accordingly, YPV psychotherapy is regarded as a foundational component of the healing process.

Supporting evidence from published YPV studies indicates significant reductions in perceived stress, anxiety, and psychological distress, along with improvements in emotional wellbeing and quality of life following YPV interventions. [18-20] In addition, a published case report described an epileptic patient who developed persistent blurring of vision following brain surgery, where conventional management offered limited benefit; the visual impairment showed marked improvement following structured Yoga Prana Vidya (YPV) healing interventions, highlighting YPV's potential role in managing complex, post-surgical neurological and vision-related conditions. [21] The present case is consistent with these findings and suggests that stress reduction and energetic rebalancing may facilitate faster functional recovery in acute CSC.

## CONCLUSION

This case report suggests that Yoga Prana Vidya (YPV) healing may serve as an effective complementary approach in the management of acute central serous chorioretinopathy by addressing stress and restoring energetic balance. The patient demonstrated rapid and substantial visual improvement within a short duration, which was objectively confirmed by ophthalmological examination, without pharmacological or surgical intervention. Given the strong association between stress and acute CSC, integrative approaches such as YPV that focus on psychological and emotional regulation may offer meaningful support alongside conventional ophthalmic care. Further systematic and controlled research is warranted to validate these findings.

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**Conflicts of Interest:** There are no conflicts of interest.

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