

Yoga Prana Vidya Healing as a Complementary Approach in Pill-Induced Esophagitis: A Case Report

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ABSTRACT

Background: Pill-induced esophagitis is a painful condition caused by improper ingestion of medications, often requiring prolonged recovery. Conventional management is limited to supportive care.

Case Presentation: A 26-year-old female was admitted to the hospital, presenting with severe chest pain, dysphagia, and fever following inadequate water intake with oral medication. Endoscopy revealed multiple oesophageal ulcers. Conventional medical advice emphasised symptomatic management only.

Intervention: Yoga Prana Vidya (YPV) healing protocols were administered, including YPV psychotherapy, chakra and affected part cleansing & energising, stress-energy removal, and fever treatment. Seventy-one healing sessions were conducted over one month, supplemented by daily YPV sadhana practices such as breathing and forgiveness from the free YPV Sadhana App.

Results: Pain reduction was reported within the first hour of healing. Fever subsided by the second day, and liquids were tolerated by day three. The patient was discharged on day four, discontinued medications, and achieved complete recovery within two weeks, despite the medical prognosis of months.

Conclusion: This case highlights the potential of YPV healing as a complementary modality in accelerating recovery from pill-induced esophagitis.

Integration of energy-based practices with conventional care may enhance patient outcomes.

Keywords: Pill esophagitis, Yoga Prana Vidya System ®, YPV ®, Complementary medicine, Energy healing.

Introduction

Pill Esophagitis

Pill-induced esophagitis (PE) means injury to the oesophagus from medications getting stuck, dissolving, and causing damage, often occurring in the mid-oesophagus. Common causes include certain antibiotics, NSAIDs, bisphosphonates, iron supplements, and potassium chloride, with risk factors like taking pills with inadequate water or while lying down. Symptoms typically include painful or difficult swallowing and chest pain. Diagnosis is often based on history, and treatment involves discontinuing the offending medication, with prevention focused on taking pills with water while upright [1]. A study by Pemmada et al (2023) [2] found that OTC (Over-the-counter) medication and antibiotics such as doxycycline are the leading cause of PE. Prompt recognition and discontinuation of the causative drug are crucial in preventing complications. Patient education is vital in preventing PE regarding the usage of OTC medicines in developing countries [2]. Medical management of moderate to severe cases includes sucralfate to coat, protect, and promote healing of ulcerated oesophageal mucosa, and acid-suppressing therapy if gastroesophageal reflux disease is felt to have played a role in the pathogenesis of the illness. Rare cases may require therapeutic endoscopy or surgical intervention early in the disease course. Late complications include oesophageal strictures that may require therapeutic endoscopy or bougienage [3].

Yoga Prana Vidya System

Yoga Prana Vidya (YPV) is an integrative and holistic healing system that emphasises pranic energy regulation, chakra and

affected part cleansing & energising, and psychosocial practices such as forgiveness and breathing exercises [4]. YPV healing works by cleansing diseased energy from affected chakras and organs, energising them with specific pranic colours, and addressing psychological stressors. Patients are often instructed to practice YPV sadhana, which includes rhythmic breathing, forgiveness meditation, and affirmations [5-6]. These practices are believed to enhance immune function, reduce stress, and promote faster tissue healing. It has been applied in diverse conditions ranging from dermatological disorders to systemic illnesses [7-9]. Literature search shows that there are more than 150 published case reports that demonstrate YPV's effective role in accelerating recovery in conditions such as psoriasis, alopecia areata, osteoporotic pain, bacterial pharyngitis, and Ménière's disease [10-14]. This paper presents a case of Pill esophagitis suffered by a 26-year-old female healed complementarily, achieving faster relief.

Case Presentation

The patient, a 26-year-old female, developed pill-induced esophagitis after taking fever medication without sufficient water.

Medical management

Endoscopy confirmed multiple oesophageal ulcers. Conventional management included hospitalisation and pain relief, with no specific pharmacological treatment available. See Annexure 1 Hospital discharge summary.

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YPV Intervention

YPV healing was initiated on December 3, 2025, with 71 sessions over one month. Protocols included YPV psychotherapy, chakra and affected part cleansing & energising, stress-energy removal, and fever treatment. The patient also practised YPV sadhana daily from the YPV Sadhana App.

Results

The patient reported a 10% reduction in pain within the first hour of healing. By the second day, her fever subsided, though she remained unable to eat solid food. On the third day, she experienced approximately 50% improvement, enabling her to tolerate liquids. By the fourth day, she was discharged from the hospital, discontinued medications, and relied solely on YPV healing. Over the following two weeks, her symptoms resolved completely. She regained normal swallowing ability, resumed daily activities, and reported no recurrence of fever or chest pain. Continued YPV healing for one month consolidated her recovery, which was notably faster than the medical prognosis of several months. Patient feedback is in Annexure 2.

Discussion

This case demonstrates accelerated recovery with YPV healing compared to conventional expectations. The rapid improvement suggests that energy-based interventions may play a role in modulating stress, enhancing immune function, and promoting mucosal healing.

Several published YPV case reports support its efficacy in several issues of the oesophagus. For example, Literature shows that YPV healing protocols facilitated recovery in oesophageal varices [15], reflux esophagitis [16], oesophageal cancer [17], gastroesophageal malignancy [18], etc. These findings align with the present case, where YPV accelerated healing in a condition typically managed with supportive care alone.

The integration of YPV with conventional medicine may provide a holistic approach, addressing both physiological and psychological dimensions of illness. While conventional medicine emphasises symptomatic relief, YPV focuses on energy regulation and emotional balance, potentially complementing biomedical interventions. Future research should explore controlled trials to evaluate YPV's efficacy in gastrointestinal conditions, including pill-induced esophagitis. Such studies could establish standardised protocols and validate outcomes across larger patient populations.

Conclusion

YPV healing may serve as a valuable complementary modality in pill-induced esophagitis, expediting recovery and improving patient well-being when integrated with conventional care.

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Conflicts of Interest

None declared.

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Annexures

Annexure 1: Hospital Discharge Summary



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 For Appointments : +91 95910 35258
 E-mail : ccarenbv.opd@fortishealthcare.com
 www.fortishealthcare.com

Date : 06/Dec/2025

DEPARTMENT OF GASTROENTEROLOGY
Discharge Summary

Patient Name	Ms. Prateeksha S H	UIID Old UIID	14244439
Age / Gender	26 Years / Female	Episode No	87048/25/3963
Contact No	9632364495	Date of Admission	01 Dec 2025
Discharge Type	ROUTINE	Date of Discharge	06 Dec 2025
Address	NAGARABHAVI, Bengaluru, Karnataka, India, 560072		
Name of Consultant	Dr.Santhosh Kumar S C		
Doctor Team			

*Follow up
13/12/25*

Diagnosis

. PILL INDUCED ESOPHAGITIS.

Chief Complaints

Ms. Prateeksha S H aged 26 years came with the complaints of retrosternal pain, difficulty swallowing and fever since 4 days.

Past History:

Nothing significant.

Physical Examination

GPE: MODERATELY BUILT AND NOURISHED

TEMP: Afebrile

BP: 120/80mmHg

PULSE:78/min

RR:18/min

CVS: S1S2+

RS: Bilateral NVBS+

PA: Soft, mild epigastric tenderness+

CNS: Conscious, oriented.

Course In The Hospital

Ms. Prateeksha S H aged 26 years came with the complaints of retrosternal pain, difficulty swallowing and fever since 4 days. Relevant investigations were done. Dr. Ramesh D K (General Physician) opinion was taken and advice followed. Dr. Pranav (surgical gastroenterologist) opinion was taken in view of ulcer and advice followed. Upper GI endoscopy done on 03.12.2025 which showed, esophageal ulcers- 7pill induced. Patient was treated with IV fluids, IV antibiotics, IV antacids, IV analgesics and other supportive medications and is being discharged in stable state with the following advice.

TREATMENT GIVEN IN WARDS:

IV FLUIDS

INJ PCT 1GM IV STAT

INJ MONOCEF 1GM IV 1-0-1

INJ EMESET 4MG IV 1-1-1

INJ OPTINEURON IV 0-0-1

INJ MVI IV STAT

TAB LESURIDE 25MG IV 1-0-1

TAB REBAHEAL 100MG 1-1-1

TAB ZINCOVIT 1-0-0

TAB NUROKIND 500MG 1-0-0

SYP SUCRAFIL 2TSP 1-1-1

ZUPINOR PATCH 5MCG

Discharge Advice

DIET: SOFT DIET.

SI No	Medications	Dosage	Frequency	Duration	
1	TAB TAXIM O	200MG	1-0-1	5 DAYS	AFTER FOOD
2	TAB LESURIDE	25MG	1-0-1	TO CONTINUE TILL NEXT REVIEW	AFTER FOOD
3	TAB NEXPRO RD	40MG	1-0-1	TO CONTINUE TILL NEXT REVIEW	AFTER FOOD
4	SYP SUCRAFIL	10ML	1-1-1	10 DAYS	AFTER FOOD
5	SYP ZYNCOVIT	10ML	0-0-1	TO CONTINUE TILL NEXT REVIEW	AFTER FOOD

INSTRUCTIONS AS TO WHEN TO OBTAIN URGENT CARE



24*7 EMERGENCY HELPLINE 96360 96860

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Annexure 2: Patient feedback

Here is my feedback for the healing sessions,

I had a fever for four days before I started the healing sessions. Along with the fever, I was experiencing severe chest pain. On December 3rd, I was admitted to the hospital because the chest pain became unbearable, and I was unable to drink water or swallow food.

After several tests and an endoscopy, the doctors found that my esophagus was damaged due to tablets I had taken during the fever without drinking enough water. That area had burned and turned into an ulcer. It was pill induced Esophagus Ulcer. By then, I had become extremely weak, so hospitalization was necessary. The doctors told me that there was no specific medicine for this condition and that it would heal on its own over time. They only gave me painkillers and Paracetamol (for fever), but I was still going through severe pain, which kept triggering fever.

I received my first healing session, which included psychotherapy and physical healing for the affected area and the fever. Within the first hour, I felt about a 10% reduction in pain. After that, healing was given every half hour.

On the second day, my fever came down, but I was still unable to eat. The doctors again said that there was no medicine and that I would have to bear the pain as healing would take time. However, by the third day, I felt around 50% better and was able to start having liquids. On the fourth day, I was discharged from the hospital.

After discharge, I stopped all medications and continued only with healing. Within two weeks, I was completely cured, even though the doctors had said it might take couple of months. I continued healing for one month, and I fully recovered. I am very happy with the healing process, as it helped me come out of this condition much faster than expected.

Thank you,