



PRATISHYAYAVAT AYURVEDIC MANAGEMENT OF VATAJA KARNASHOOLA – A CASE REPORT

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ABSTRACT

Vataja karnashoola is one of the karna rogas mentioned in Ayurveda. In various texts the number of karna rogas vary. As per Charakaacharya^[1], these are of 4 types. Acharya Sushruta^[2] said 28 types whereas 25 types are told by Acharya Vagbhata^[3]. Karnashoola is explained in detail along with their causes by both; Sushrutaacharya and Vagbhataacharya. As per the critical analysis of the text, it can be a disease itself, and also can be a symptom or lakshana of some other diseases. Based on all this, it can be related to otalgia. As per Vagbhataacharya, 5 types of karnashoola are there and one of the types is vataja karnashoola. Otolgia or pain in the ear, can be a consequence of ear disease (primary otalgia), or it may arise from any pathology of structures other than the ear (secondary otalgia).^[4] In this current study, a 51 years old male patient of vataja karnashoola was treated on Ayurvedic line of treatment given in pratishyaya (common cold) along with follow-up medication for a total duration of 15 days. There was significant improvement in the case and he was advised the aahara-vihara to be followed thereafter.

KEYWORDS: ear, karna, otalgia, karnashoola, karnaroga

INTRODUCTION

Shalaky Tantra deals with Urdhva-jatrugata Vikaras which means disorders of Supra-clavicular region. This includes diseases of eye, ENT and head & scalp.

As per Ayurveda there are 5 gyanendriyas (sense organs). One of these is Shraavanendriya (sense of hearing) which resides in karna (ear). Shraavanendriya is made up of panchmahabhutas, but predominantly Aakash mahabhuta is associated to it^[5]. The vitiation of doshas in Karna Pradesh results in various karna rogas mentioned by Acharyas.

One of the karna rogas (ear disorders) mentioned in Ayurveda is karnashoola. The word 'Karnashoola' is made of two words; karna and shoola, which means Shoola or pain in karnapradesha. It can be taken as a separate disease entity and also can be a lakshana mentioned in purvarupa and rupa avastha of other karnarogas. Similarly, it's modern correlation i.e otalgia can be a disease itself or it may also be a feature of other diseases. Acharya Vagbhata has further subdivided karnashoola into five types of which one is vataja karna roga. Acharyas have

mentioned various nidanas (causes) for the same. Some of these are pratishyaya, jala-kreedha etc. Pratishyaya is a nasaroga yet, its mentioned as one of the nidana for karnashoola.

CASE REPORT

A 51 years old male patient who was a local shopkeeper, came to the OPD with complaints of severe pain in left ear and mildly reduced hearing - from a duration of one week. On taking detailed history, he informed that he was apparently well about 12 days back before coming to the OPD when he started having nasal blockage and running nose on waking up in the morning. These symptoms were mild for 2 days initially, in the morning hours only and were not bothering the patient. After that, the symptoms worsened for the next 3 days and subsided thereafter. Next morning after that he noted that after entry of some soapy water into the left ear and also blowing his nose while bathing, he started having sudden pain in his left ear which was irregular and of pulsating type in nature. By evening of the same day, there was severe pain in left ear. When the pain was persistent, he visited the OPD for management of his condition and in sought of relief from the pain.



MATERIALS AND METHOD

LOCAL EXAMINATION –

On otoscopic examination the left ear canal, the skin was moist and mildly congested near TM. The tympanic membrane was

retracted and congested with a small tympano-sclerotic patch. On valsalva maneuver, no movement of tympanic membrane was there. Also cone of light reflex was absent. On examination of right ear and ear canal, all structures were absolutely normal.

Ear examination	Right ear	Left ear
Auricular	Normal	Normal
Para-auricular	Normal	Normal
EAC	Normal	Moist and mildly congested skin near TM
TM	Normal	Retracted, congested, small sclerotic TM, Cone of light absent

Hearing tests were done the results of which were as follows –

1. **Rinne's test** – BC > AC in left ear
2. **Weber's test** – lateralised towards left (very mildly)
3. **Audiometry** – mild conductive hearing loss in left ear (upto 15 db), right ear hearing WNL

UTTAMANGA PAREEKSHA

Karna – aardra twak, manda ruja, alpa shravana-karma

Mukha – prakrita

Jihwa – alpa sama

Netra – prakrita

Nasa – ardra nasa

(Para nasal sinuses – non-tender)

SAMPRAPATI GHATAKA-

1. *Dosha – vata, kapha*
2. *Dushya – rasa*
3. *Agni – dhatwagni*
4. *Srotas – shabdavaha, pranavaha*
5. *Srotodushiti – sangha, vimarga-gamana*
6. *Utpatti-adhishthana – shiro pradasha*
7. *Vyakti-adhishthana – karna*

DIFFERENTIAL DIAGNOSIS –

S. No	Diseases	Shoola	Srava	Other symptoms
1	<i>Vatika karnashoola</i>	✓	✓ <i>alpa, lasika-vata</i>	<i>Chirapaka, akasamaata shunyam, sheeta aniccha</i>
2	<i>Pittaja karnashoola</i>	✓	✓ <i>peeta-lasika srava, paka at site of contact</i>	<i>Tapa, daha, sheetaiccha</i>
3	<i>Kaphaja karnashoola</i>	✓	✓ <i>ghana, accha(white) srava</i>	<i>Shira-hanu-greevagaurav, mandaruja, kandu, ushnecha</i>
4	<i>Raktaja karnashoola</i>	✓	✓ <i>peeta-lasika or raktavarni srava</i>	<i>Tapa, daha, sheetaiccha</i>
5	<i>Sannipataja karnashoola</i>	✓	✓ <i>sita-asita rakta ghana pooya</i>	<i>Shotha, jwara, teevra-peeda, ushnasheeta iccha</i>
6	<i>Karna-sraava</i>	✓	✓ <i>pooya srava</i>	<i>Nidana- shiroghata, jalamajjana, vidradhipaka</i>
7	<i>Karna-vidradhi</i>	✓	✓ <i>rakta-peeta srava</i>	<i>Nidana- shiroghata, kshata</i>
8	<i>Karnapaka</i>	✓	✓ <i>karna-kinna, alpa srava</i>	<i>Sthanika kotha</i>
9	<i>Pootikarna</i>	+/-	✓ <i>ghana, durgandhita srava</i>	

As the main feature was pain in the ear and moist ear probably with some discharge from the skin of ear canal, differential diagnosis was made based on this feature along with other symptoms.

1. Source of disease –

Entry of soapy water in left ear canal probably caused some irritation of the skin. Also, blowing nose during bathing can also be a cause of pain (it might have caused further movement of retracted TM which could have been due to previous history of cold 2-3 days before the onset of earache)

2. Onset - sudden
3. Intensity – mild
4. Nature of pain – sharp tearing, pulsating type
5. Frequency – on and off, irregular
6. Duration – since past 7 days
7. Aggravating factors – cold exposure
8. Relieving factors – hot *patta*(cloth) *sweda*
9. Site – *karna*(left)

The probable *nidana* involved could have been *pratishyaya*(prior to the onset of earache) and *jala-pravesha* in *karna* while bathing. The differential diagnosis made was as follows based on which final diagnosis thus made was of *vataja karnashoola*.



After taking history, examination and diagnosis, the patient was advised to undergo *sthanika chikitsa* along with oral medication. The oral medication and *sthanika chikitsa* was broadly

pratishyaya-vat chikitsa, based on the line of treatment mentioned by *Acharyas*. Patient was also advised to avoid head bath. This was as follows –

Oral Medications			
S. No.	Medicines (14 days)	Dose	Anupana and instructions
1.	<i>Sarivadi Vati</i>	1 tab BD	With lukewarm water after food
2.	<i>Triphala Guggulu</i>	1 tab BD	With lukewarm water after food
3.	<i>Vyoshadi Vati</i>	1 tab BD	With lukewarm water before food
4.	<i>Haridrakhanda</i> (2g)+ <i>Sitopaladi ch</i> (1.5g)+ <i>talisadi ch</i> (1.5g)+ 1 pinch <i>Pippali ch</i>	1 tsp BD	Half hour before food with honey
Local Procedures			
S. No.	Procedure	Medicine used	Duration
1.	<i>Karnapramarjana</i>	Dry aural moping was done to wipe off the discharge	SOS or before the local procedure
2.	<i>Karnadhupana</i>	<i>Haridradi Dhooma</i>	~10 mins, all 7 days
3.	<i>Shirovirechana</i>	<i>Shadbindu Taila</i>	6-6 drops, all 7 days
4.	<i>Gandusha dharana</i>	<i>Triphaladi Kashaya</i>	Mouthful, all 7 days

OBSERVATIONS

The patient was given oral medication along with local therapeutic procedures. In oral medicine, he was advised to take *sarivadi vati* and *triphala guggulu* along with *vyoshaadi vati* and a powder combination of *haridrakhanda*, *sitopaladi churna*, *talisadi churna* and *pippali churna* for 14 days. Local therapeutic procedures done were *karna pramarjana* followed by *karnadhupana*, *shirovirechana* and *gandusha-dharana* for a total duration of 7 days. Within a week of starting the treatment, the symptoms were reduced. Oral medication was yet continued for the second week also; so as to prevent any further recurrence. Also, the patient was advised to avoid head bath and exposure to cold and windy weather.

DISCUSSION

The local therapeutic treatment given for a week included *karna-pramarjana*, *Karna-dhupana*, *shiro-virechana* and *gandusha-dharana*. The patient was examined daily for any discharge in his left ear and after *pramarjana*; *karna-dhupana* was done with *haridraadi dhuma*. This had anti-microbial effect and helped to reduce and dry up the discharge. *Shiro-virechana* was done with *shudbindu taila* 6-6 drops in each nostril followed by *triphalaadi gandusha*. Apart from its anti-microbial action, it mainly helped to remove the blockage of eustachian tube, thus, removing the negative pressure and TM retraction and hence resolving the earache or *karnashoola*.

Sarivadi vati is a formulation explained in *Bhaishhya Ratnavali*. It is said to be used in *Karnaroga* (Ear disease) and other disorders. *Vataja karnashoola* is a *Vata* dominant *Roga*. The contents of *Sarivadi Vati* are predominantly *Vata-Kapha*

Shamaka, work on vitiated *Vata* and *Kapha Dosha*.^[6] So it was advised to be taken for 14 days.

Triphala guggulu is directly indicated in *Shotha chikitsa* (Inflammation). In *shotha*, not only *Guggulu* (*Commiphora wightii* Arnott Bhandari) but also *Triphala* (*Terminalia chebula* Retz., *Terminalia bellerica* Gaertn. Roxb. and *Emblica officinalis* Gaertn.) and *Pippali* (*Piper longum* Linn.) contribute to its anti-inflammatory action. Also, all its constituents exhibit a notable potent anti-microbial activity making it an ideal drug of choice in inflammatory and infectious diseases.^[7] Also *triphala* is *Kashaya rasa pradhana* and is helpful in the *shoshana* of *srava*. As the probable *nidana* was considered to be *pratishyaya* and there was probably mild mucosalization of the eustachian tube and middle ear cavity because of which the TM was retracted. Because of its anti-inflammatory and anti-microbial activity *Triphala guggulu* was advised to the patient.

In the *chikitsa sutra* of *karnashoola*, *pratishyaya-vata chikitsa* is advised as it is considered to be one of the *nidanas*. *Vyoshadi vati* is well known for the management of *pratishyaya*. Most of its ingredients are *ushna guna pradhana dravyas* and it may prove helpful in the management of *shula* along with prevention of recurrence of *Pratishyaya*. The powder combination of *haridrakhanda*, *sitopaladi churna*, *talisadi churna* and *pippali churna* was given for the same.

All these medications were continued for 2 weeks even though the symptoms were relieved after 1st week so as to prevent any recurrence.



CONCLUSION

Otalgia or *vataja karnashoola* is a common condition and can be frequently found in cases of *Pratishyaya* or in case of entry of any foreign particle or object in ear canal. Only after proper examination of the case and condition, treatment should be advised. According to the case study, as previous history of *Pratishyaya* was there, so *Pratishyayavat shodhana* and *shamana chikitsa* was advised and proved to be effective in the management of *vataja karnashoola*.

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