

A Conceptual Study on Karnasrava W.S.R. Chronic Suppurative Otitis Media

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ABSTRACT

Karnasrava is a disease mentioned by *Acharya Sushruta* in the chapter of *Karnaroga Vigyaniya* under twenty eight *Karnarogas*. It is the condition characterized by discharge from *Karna* and occurs mainly due to *Avarana* of *Vata Dosha*, Therefore *karna Srava* (CSOM) is the one of the most common complaint encountered in clinical practice of ENT. Every year 60–300 million individuals with draining ears, 50 -60% of whom (39–200 million) suffer from significant hearing impairment.

On the basis of similarity between the etiological factors, symptoms, complications, prognosis, and treatment modalities tubotympanic type of CSOM can be correlated with *Karna Srava*. This disease can be correlated to chronic suppurative otitis media C.S.O.M. on the basis of sign and symptoms. CSOM is chronic infection of the middle ear and mastoid. It is characterised by a permanent perforation in Tympanic membrane. Any perforation which persists for more than 12 weeks is considered as permanent and leads to CSOM.

and Perforation of Tympanic membrane seen in active mucosal COM can be compared with *Yapya/Krichchha Sadhya*, *Twaka-Mamsa Gata*, and *Pitta-Kaphaja Dushta Vrana*. The treatment of this particular disease has never been satisfactory and therefore, a number of treatments were advised to relieve this condition. Thus the study is about understanding *Karna srava* in its depth which can be helpful in managing the disease.

KEYWORDS: *Karna srava*, *CSOM*, *Tympanic membrane*, *Avarana*

INTRODUCTION

Urdhvajatrugata (ENT) *Roga* is described very vastly in classics. It is also a fact that systematic description of *Karnarogas*¹ are available in all the ancient treatises. In *karnasrava* discharge of pus from a *Vata* afflicted ear may result from head injury or due to immersion in water or else due to suppuration of an abscess². This disease can be correlated to chronic suppurative otitis media, because of perforation of Tympanic membrane seen in active mucosal COM can be compared with *Yapya/Krichchha Sadhya*, *Twaka-Mamsa Gata*, and *Pitta-Kaphaja Dushta Vrana*. Any perforation which persists for more than 12 weeks is considered as permanent and leads to CSOM³.

Nirukthi of Karnasrava

"*Karnasrava*" word is made up of two words:

1. *Karna* which means the ear.
2. *Srava* which means flow, flowing, oozing, dropping, exudate or discharge. So

Karnasrava literary means any type of oozing, discharge or exudates from ear.

Nidana Pancaka of Karnasrava:

1. *Nidana* (Causes)
2. *Purvarupa* (Premonitory symptoms, prodromal)
3. *Rupa* (Signs and symptoms, clinical features).
4. *Upashaya* (Diagnostic tests).
5. *Samprapti* (Process of manifestation pathogenesis).

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NIDANA

Charaka Samhita

Acharya Charaka has not mentioned any kind of Nidana regarding Karnaroga but he has described Karna shoola, Badirya under Vataja vyadhis and uttpatti of Karnaroga from Shiroroga in Kiyantahshirasiyam adhyaya⁴.

Sushruta Samhita

According to Sushruta⁵ the Nidaana of Karnasrava are

1. Shiroabhighata (Head injury)
2. Jala Krida (Immersion in water)

Yogaratanakara⁶

Common causes of Karanrogas are

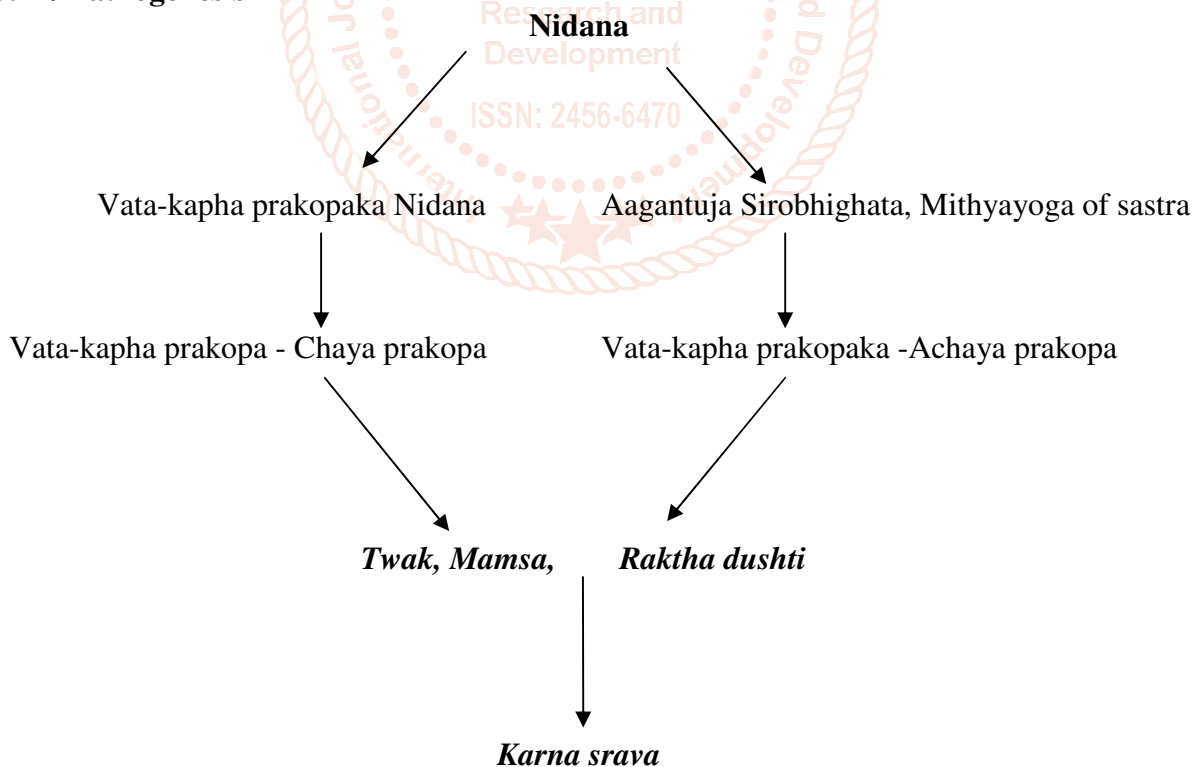
1. Avasyava
2. Jalakrida

Rupa⁸

Karnasrava itself is the Rupa for this disease. The various characteristics of Srava according to involvement of Dosh are mentioned by Acharya Charak in following table

Vatika Karnasrava	Kaphaja Karnasrava
Tanusrava (thin discharge)	Shukla-Snigdha Sruti (White and sticky)
Ashravana (Inability to hear)	Sthirata (stiffness)
Karnanaada (Tinnitus)	Alpa Ruka (Dull pain)
Atiruka (Excessive pain)	Visrutha (Defective hearing)
Karnamalasya Shosha (Drying of earwax)	Kandu (Itching)

Samprapthi / Pathogenesis



Samprapti Ghatakas

Dosha - Vata
 Dushya - Karnagata Siras, Rasa
 Shrotas - Shabdavaha
 Shroto dushti - Vimargagamana of Vata
 Adhishthana - Karna

3. Karnakandu
4. Mithya Yoga Shastrasya

Ashtanga Sangraha and Ashtanga Hridaya⁷

Acharya Vagbhata has considered common Nidaana of Karnaroga as Nidaana of Karnasrava i.e.7

1. Pratishyaya
2. Jalakrida
3. Karnakandu
4. Mithyayogen Shabdasya (sound pollution)

Purvarupa

Acharya Madhavakara describes Purvarupa as expression of Rupa (Lakshanas) with less intensity i.e. less intensity of sound in the ear, may be considered as the Purvarupa of Lakshanas, therefore no specific purvroopa are found for Karnasrava in the classical literature.

Chikitsa:**Samanya Chikitsa⁹**

Acharya Sushruta described general treatment of ear disorders as *Snehapana* (Especially during night in urdwajatru vyadis), *Rasayana* (rejuvenation therapy), maintaining celibacy (avoiding Sexual intercourse) avoidance of physical exercise and head bath, and not speaking too much.

Vishesh Chikitsa

Acharya Sushruta mentioned some procedures in the treatment of Karnasraava which is shirovirechna, Dhupana with krimigna dravyas like varthaka, Lodra, Triphala, Nimba, Guggulu, Dhavana with Triphala kwatha. Pramarjana (Aragvadadikwatha, Surasaadigana) Avachurna (Tankana Bhasma)¹⁰.

Discussion:

CSOM (Chronic Suppurative Otitis Media) is the term given to the middle ear discharging problem in the modern medical literature. Both *Ayurveda* and Modern science agrees unanimously that nose (Rhinitis) and nasopharynx are the main culprits for *Karna Srava/CSOM*.

Due to the etiological factors which are of *Vata - Kapha* provocative in nature, gradual vitiation of *Doshas* will occur. After vitiation they get accumulated (*Sthaana samsraya*) in the middle part of ear. On other hand, when *Aagantuja Nidana* like water entry, scratching, head injury and itching leads to *Achaya Purvaka Dosh Prakopa*. These *Dosha* causes *Twaka* and *Mamsa Dhaatu Dushti* which leads to formation of *Vidradhi* i.e. accumulation of pus behind the TM in middle ear. When inflammation occurs in *Vidradhi* it gets suppurated and causes serous\ to purulent discharge to come out from ear, according to the involvement of *doshas*. Now *Vidradhi* get converted into *Vrana*. The vitiated *Vata* will produce the symptoms like pain, tinnitus, hearing impairment and vitiated *Kapha* is responsible for the clinical features like itching, discharge, heaviness and blockage.

Conclusion:

On the basis of similarity between the etiological factors, symptoms, complications, prognosis, and treatment modalities tubo tympanic type of CSOM can be correlated with *Karna Srava*. *Samanya chikitsa* of *Karna Roga*, *Rasayana*, *Ghritha Pana*, *Avayayama*, *Bramchariya*, *Asnana* etc. Specific treatment of *Karna Rogas-Nasya*, *karnapurana*, *shirovirechan* which is alleviating *Vata Dosha* along with gives nourishment of nervous system. According to *Acharya Sushruta*, *Karnasrava* is treated by *shirovirechana* (*nasya*), *dhupana*, *poorana*,

pramarjana, *dhaavana*, *avachoorana* and oral drug therapy etc. The principles of *Dushta Vrana Chikitsa* can be adopted in treatment of *Karnasrava*.

Reference:

- [1] Kaviraja Ambikadutta Shastri; Sushruta Samhita of Maharsi Susruta with the Ayurveda tattva Sandipika hindi Commentary; Chaukhambha Sanskrit Sansthan Varanasi, reprint 2010; Uttartantra.20/3, pg.No.111.
- [2] Kaviraja Ambikadutta Shastri; Sushruta Samhita of Maharsi Susruta with the Ayurveda tattva Sandipika hindi Commentary; Chaukhambha Sanskrit Sansthan Varanasi, reprint 2010; Uttartantra20/10, pg. No. 117.
- [3] Sakshi Arora Hans; Self-assessment & review ENT; J.P. Brothers medical publishers (P) Ltd. Seventh edition 2016; 07, pg.No. 95.
- [4] Charaka Samhita with the Vidyotini Hindi Commentary; Chaukhambha Bharati Academy Varanasi, reprint: 2005 sutra sthana, 17/13, pg. No. 332.
- [5] Kaviraja Ambikadutta Shastri; Sushruta Samhita of Maharsi Susruta with the Ayurveda tattva Sandipika hindi Commentary; Chaukhambha Sanskrit Sansthan Varanasi, reprint 2010; Uttartantra20/10, pg. No. 117.
- [6] Vaidya Shrilakshmi satri, Yogratnakara, Vidyotini Hindi Commentary; Chaukhambha Bharati Academy Varanasi, reprint: 2009 karna roga dhikar pg. No. 309.
- [7] Astangahrdayam, edited by Dr. Brahmanand Tripathi, Chaukhamba Sanskrit Pratishthan Prakashana, Delhi, uttarsthanam, 2009; 17/1, Pg.No.999.
- [8] Charaka Samhita with the Vidyotini Hindi Commentary; Chaukhambha Bharati Academy Varanasi, reprint: 2005 chikitsa sthana, 26/127, pg. No. 742.
- [9] Kaviraja Ambikadutta Shastri; Sushruta Samhita of Maharsi Susruta with the Ayurveda tattva Sandipika hindi Commentary; Chaukhambha Sanskrit Sansthan Varanasi, reprint 2010; Uttartantra 21/3, pg. No. 127.
- [10] Kaviraja Ambikadutta Shastri; Sushruta Samhita of Maharsi Susruta with the Ayurveda tattva Sandipika hindi Commentary; Chaukhambha Sanskrit Sansthan Varanasi, reprint 2010; Uttartantra 21/40, pg. No. 131.