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CASE STUDY

Ayurvedic Management of *Karnashoola* W.S.R. to Otalgia – A Single Case Study

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ABSTRACT

Karnashoola is a traditional *Ayurvedic* term that corresponds to the modern medical diagnosis of otalgia, characterized by ear pain that can result from various *doshic* imbalances, particularly involving *Vata* and *Kapha*. It is a common issue in clinical settings and can significantly impact an individual's quality of life due to ongoing pain, discomfort, discharge, and reduced hearing ability. While contemporary medicine typically uses antibiotics, pain relievers, and surgical methods for complex cases, Ayurveda offers a holistic, non-invasive, and personalized approach to treatment. This case study details the effective Ayurvedic management of a 28-year-old male diagnosed with *Vata-Kaphaja Karnashoola*, utilizing the internal administration of *Panchatiktaghrita Guggulu* and the local application of *Vachalasunadi Taila* in a *karna pichu* format. The treatment adhered to principles aimed at balancing doshas, cleansing the channels, and alleviating pain. Significant symptom relief was noted within a few days, culminating in complete recovery by the 15th day. This study highlights the efficacy of traditional *Ayurvedic* methods for treating ear pain without side effects or recurrence. It adds to the growing body of evidence that supports an integrative approach to managing ENT disorders through Ayurveda and emphasizes the need for further extensive clinical validation.

1. INTRODUCTION

Ear pain, known in medical terms as otalgia, is a prevalent symptom experienced by both children and adults. It can manifest as sharp, dull, or throbbing sensations in one or both ears. In contemporary medicine, the causes of otalgia are categorized as primary, stemming from the ear structures themselves (such as in cases of otitis externa or media), or secondary, which involves pain that is referred from other areas, such as dental, pharyngeal, or cervical conditions. Typical treatment methods include the use of analgesics, antibiotics, anti-inflammatory medications, and, in instances of chronic or severe pain, surgical options. Nevertheless, if patients experience recurrent otalgia or do not respond effectively to standard treatments, they may explore alternative healing practices like *Ayurveda*.[1]

In *Ayurvedic* literature, *Karnashoola* is categorized under *Urdhwajatrugata Vikaras*, which refers to ailments located above the clavicle. This condition is primarily identified by ear pain, which may be associated with symptoms such as discharge (*karnasrava*), itching, a feeling of heaviness, reduced hearing capability, and a burning sensation.[2] The manifestation of this disease varies depending on the predominance of *doshas*, including *Vataja, Pittaja, Kaphaja, Sannipataja, and Raktaja Karnashoola.* Among these variations, *Vata-Kaphaja Karnashoola* is the most frequently observed in clinical settings, typically presenting symptoms such as radiating pain, nasal congestion, mucoid discharge, and a sensation of fullness or blockage in the ear.[3]

Ayurveda focuses on addressing not only symptoms but also on eliminating underlying causes through *shamana* and *shodhana* treatments, complemented by specific lifestyle and dietary practices. Internal medications such as *Panchatiktaghrita Guggulu* are recognized for their strong *tridoshahara* effects (balancing the three doshas), as well as their analgesic (pain-relieving) and anti-inflammatory properties. Similarly, *Vachalasunadi Taila* is a beneficial herbal remedy utilized for ear diseases (*karna rogas*), demonstrating effective warming, piercing, and *vata-kapha* balancing effects when administered locally through methods such as *karna pichu or karna purana*.[4] This case study explores the *Ayurvedic* management of *Karnashoola* in a young adult male using a combined approach of oral medication and local oil application. The study highlights the clinical efficacy of this classical Ayurvedic intervention and its potential as a safe and effective alternative in the management of otalgia.

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1.1. Aims and Objectives

- To assess the efficacy of *Panchatiktaghrita Guggulu* and *Vachalasunadi Taila karna pichu* in the management of *Karnashoola.*
- To demonstrate the effectiveness of *Ayurvedi*c interventions in reducing symptoms of otalgia.

2. MATERIALS AND METHODS

Study design: Single case observational study.

2.1. Patient Profile

- Age/Sex: 28-year-old male
- Chief complaint: Severe pain in the left ear for 4 days, radiating to the temporal region, with mild discharge
- Associated Symptoms: Heaviness in the ear, mild hearing difficulty
- History: No trauma, no recent upper respiratory infection.

Diagnosis: *Vata-Kaphaja Karnashoola* based on classical signs and symptoms.

2.2. General Examination

Pulse: 78/min, regular

BP: 122/78 mmHg

Temperature: Afebrile

Respiratory Rate: 16/min

Pallor/Icterus/Cyanosis/Edema/Lymphadenopathy: Absent

Build: Medium

Appetite: Moderate

Sleep: Disturbed due to pain

Bowel/Bladder: Normal.

2.3. Clinical Examination

1. Ear (Left)
    - Tenderness present over the tragus and mastoid area
    - Mild congestion in the external auditory canal
    - Thin mucoid discharge observed
    - Tympanic membrane intact but mildly retracted
    - Weber test lateralized to the left; Rinne's negative on the left (suggesting conductive hearing loss).
2. Right Ear: Normal

2.4. Investigations

- CBC: Normal
- ESR: Slightly raised (24 mm/h)
- Pure-tone audiometry (PTA): Mild conductive hearing loss on the left
- Otoscopy: No perforation, mild canal inflammation
- Blood Sugar: Normal.

2.5. *Dashavidha Pariksha* (Tenfold Examination)

Mentioned in Table 1.

2.6. *Rogamarga* and *Srotas* Involved

- *Rogamarga: Bahya marga* – Since the ear is considered an external or *bahya* organ, the disease falls under *bahya rogamarga.*
- *Srotas* Involved: *Pranavaha* and *Udakavaha srotas* are primarily affected due to associated symptoms of pain, heaviness, and discharge.

2.7. Treatment Protocol

Mentioned in Table 2.

2.8. *Pathya-Apathya* (Do's and Don'ts)

- *Pathya* (Recommended Diet and Lifestyle)
- Warm, light, easily digestible food (*yusha, manda, peya*)
- Use of warm water for drinking and bathing
- Use of cotton in the ears while going out in the cold wind
- Mild head fomentation (as advised)
- Adequate rest and stress-free environment.

2.9. *Apathya* (To Avoid)

- Cold, heavy, and oily foods such as curd, ice cream, and deep-fried snacks
- Exposure to cold wind or water
- Loud speech, shouting, or excessive yawning
- Suppression of natural urges (*vega dharana)*

3. OBSERVATIONS AND RESULTS THE SYMPTOMS AND INTENSITY ARE MENTIONED IN TABLE 3

3.1. Comparison of Symptom Severity Before and After Treatment mentioned in table 4 and fig 1 below

No recurrence was observed in follow-up after 1 month.

4. DISCUSSION

Karnashoola, as described in Ayurvedic classics, is a condition resulting from the vitiation of one or more of the *Tridoshas*, most commonly *Vata* or *Vata-Kapha*. In this case, the clinical presentation of radiating ear pain, mild mucoid discharge, heaviness, and conductive hearing loss pointed toward a diagnosis of *Vata-Kaphaja Karnashoola*. The doshas cause obstruction (*sanga*) and abnormal movement (*ati pravritti)* in the *karnamarga* (auditory pathway), leading to the accumulation of ama and pain.[5] From a modern perspective, this condition could be correlated to early or resolving otitis media with effusion or eustachian tube dysfunction.[6] The inflammation and accumulation of secretions in the middle ear contribute to the symptoms observed, including conductive hearing loss. While modern treatments target infection and inflammation using antibiotics and analgesics, they may not always resolve the underlying *dosha* imbalance or prevent recurrence.[7]

In this case, the treatment plan was based on the classical *Ayurvedic* principles of *Shamana Chikitsa*, aimed at pacifying the aggravated *doshas*, especially *Vata and Kapha. Panchatiktaghrita Guggulu*, a potent herbal formulation, is widely indicated in inflammatory, suppurative, and obstructive conditions of the *Shrotras*. The *panchatikta* group of herbs (including *neem, guduchi, patola, vasa, and kantakari*) provides a synergistic anti-inflammatory and detoxifying effect.[8] The presence of *guggulu* enhances *srotoshodhana* and promotes tissue healing, while *ghrita* acts as a carrier to enhance bioavailability and pacify *Vata*. The combined effect led to the reduction of pain, congestion, and discharge in this case.[9]

Vachalasunadi Taila was administered as *karna pichu*—a therapeutic method where a sterile wick soaked in medicated oil is inserted into the ear canal. This method ensures prolonged local action, unlike simple ear drops.[10] *Vacha* (Acorus calamus) is known for its *vedanahara, vatahara*, and *krimighna* properties, while *Lasuna* (garlic) is a renowned *shothahara, vata-kapha nashaka,* and *srotoshodhaka.* The oil base provides unctuousness to soften ear secretions and reduce *rukshata* (dryness), facilitating natural drainage and healing.[11]

The use of *karna pichu* here follows the *Bahya Sneha* principles outlined in classical texts, which also mention *Karna Purana* for *Karnashoola.*[12] The local application relieved pain, reduced congestion, and softened the accumulated secretions, enabling their clearance. The *ushna, tikshna* nature of the oil counteracted the cold and stagnant *Kapha*, while the *snigdha* and *vatahara* qualities alleviated pain and dryness.[13,14] Improvement in clinical parameters was noted within 3 days, with near-total relief by day 7 and complete resolution of symptoms by day 15. The absence of recurrence at 1-month follow-up highlights the potential for long-term benefit.

This case exemplifies how *Ayurvedic* principles like *Dashavidha Pariksha* (tenfold examination) allow for individualization of treatment. The choice of medicines was guided by *prakriti, vikriti, vaya, and satmya*, ensuring compatibility and effectiveness.[15] Unlike generalized symptomatic treatment, Ayurveda's root-cause approach–targeting both systemic imbalance and local pathology–offers holistic relief without side effects.[16,17]

In addition, avoiding cold exposure and advising light, easily digestible, and warm food helped prevent further aggravation of *Vata-Kapha.*[18,19] This lifestyle integration is a crucial component of *Ayurvedi*c management and contributed to sustained recovery. Thus, this case supports the notion that traditional *Ayurvedic* therapies, when applied judiciously, can manage even acute ENT conditions such as *Karnashoola* effectively, safely, and economically.[20]

5. CONCLUSION

This case study illustrates the potential benefits of *Ayurvedic* treatment for *Karnashoola* (Otalgia), particularly when it originates from *Vata-Kaphaja* imbalances. The application of traditional *Ayurvedic* formulations–specifically, *Panchatiktaghrita Guggulu* for internal use and *Vachalasunadi Taila* for local application through *karna pichu*–led to significant symptom relief, resolution of discharge, and restoration of hearing comfort within a short timeframe. There were no adverse effects or recurrences noted during the treatment or follow-up period. These findings support the effectiveness of *Ayurveda's dosha*-specific and *srotoshodhana* methodologies in addressing localized ENT issues. Unlike the symptomatic focus often seen in modern medicine, *Ayurveda* aims to rectify the root *doshic* imbalance, potentially resulting in longer-lasting relief and reduced chances of recurrence. The incorporation of *Dashavidha Pariksha*, along with personalized dietary and lifestyle suggestions, highlights the thorough and patient-centric approach characteristic of *Ayurvedic* practice. In addition, the study showcases the value of traditional techniques such as *karna pichu*, which is non-invasive, easy to implement, and effective, whether in clinical settings or at home with proper guidance. The selected *Ayurvedic* formulations are well-established, readily accessible, affordable, and free from systemic side effects. While the outcomes from this single case are promising, they should be regarded with caution due to the inherent limitations of evaluating a single subject. Conducting larger clinical trials with objective measures, standardized methods, and comparative studies alongside modern treatments is advisable to confirm the reproducibility and clinical significance of these *Ayurvedic* strategies for managing otalgia and its associated conditions. Ultimately, the holistic approach of *Ayurveda* presents a safe and effective option for treating *Karnashoola,* reinforcing the relevance of traditional knowledge in modern medical practice.

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7. AUTHOR'S CONTRIBUTIONS

All authors have contributed equally to conception, design, data collection, analysis, drafting, and final approval of the manuscript.

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9. ETHICAL APPROVALS

This study does not require ethical clearance as it is a case study.

10. CONFLICTS OF INTEREST

Nil.

11. DATA AVAILABILITY

This is an original manuscript, and all data are available for review purposes only from the principal investigators.

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Table 1: Dashavidha Pariksha (Tenfold Examination

Pariksha	**Observations**
Prakriti	*Vata-Kapha*
Vikriti	Vitiation of *Vata and Kapha*
Sara	*Madhyama* (medium tissue excellence)
Samhanana	*Madhyama* (moderate body compactness)
Pramana	Height 168 cm, weight 64 kg
Satmya	Mixed (milk, ghee, rice)
Satva	*Madhyama* (moderate mental strength)
Aharashakti	Good
Vyayamashakti	Moderate
Vaya	*Yuva* (young adult)

Table 2: Treatment protocol

S. No	**Medicine/Procedure**	**Dose/Quantity**	**Route**	**Frequency**	**Duration**
1	*Panchatiktaghrita Guggulu*	2 tablets	Oral	Twice a day	15 days
2	*Vachalasunadi Taila karna pichu*	5 drops per ear wick	Local application	Once daily	7 days
3	Dietary Advice	*Laghu, ushna bhojana*	-	As needed	Throughout
4	Lifestyle Advice	Avoid cold exposure, head bath	-	As needed	Throughout

Table 3: Symptoms and their intensity

Day	**Symptom**	**Intensity (0–10 scale)**	**Remarks**
0	Ear pain	9	Severe pain, disturbed sleep
3	Ear pain	5	Noticeable relief in pain
5	Discharge	Minimal	Reduced thickness and frequency
7	Ear pain	2	Occasional discomfort only
10	Heaviness	1	Almost negligible
15	All symptoms	0	Complete relief reported

Table 4: Comparison of symptom severity before and after treatment

Symptom	**Before treatment (day 0)**	**After treatment (day 15)**	**% Improvement**
Ear pain (*Karna Shoola*)	9	0	100
Ear discharge (*Srava*)	6	0	100
Ear heaviness (*Gourava*)	7	1	85.7
Hearing difficulty	5	1	80
Local tenderness	8	0	100
Sleep disturbance	6	0	100

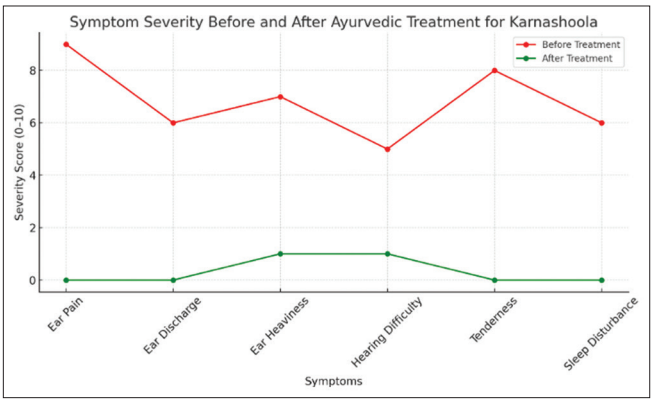

Figure 1: Comparison of symptom severity before and after treatment