

A CLINICAL STUDY ON THE CONCEPT OF *KARNANADA* & *KARNAKSHVED* WITH SPECIAL REFERENCE TO TINNITUS

Hemangi Shukla¹, Nileshkumar Chabhadiya²

¹M.D. Ph.D. Associate Professor &HOD, ²2nd year P.G. Scholar,
Department of Shalakyatantra, Govt. Akhandanad Ayurved College, Ahmedabad, Gujarat, India

Email: drhemangishukla@gmail.com

ABSTRACT

Objective: The study was conducted to establish the specific *Ayurvedic* line of treatment in the management of *Karnanada* and *Karnakshveda*. **Method:** A prospective, open-label study method was followed. Sixty patients of either sex, between the age group of 18 – 75 yrs were selected randomly for the study after thorough informed consent. Patients with *Karnanada* and *Karnakshveda* were placed into 2 groups. Group KN and Group KS. Both the groups are treated by two line of treatment. Plan – 1 is *vatvyadhivatchikitsa* and Plan – 2 is *Pratishyayvatchikitsa*. The effect of both the Therapy was observed for 2 months including weekly follow up. Observation of Clinical symptoms, signs of *Karnanada* and *Karnakshveda* were carried out. **Results:** The clinical observations showed better improvement in *Karnanada* with plan – 1 and significant improvement in *Karnakshveda* with plan – 2. **Conclusion:** *Vatvyadhivatchikitsa* is effective more in *Karnanada* and *Pratishyayvatchikitsa* is effective in *Karnakshveda*.

Key words: *Karnanada*, *Karnakshveda*, Tinnitus, *Vatavyadhivat*, *Pratishyayvat*

INTRODUCTION

Ayurved is a complete medical science. It is known as *panchamveda*. It is narrated in *Sutratmak* form. So there are many hidden concepts which are still to be understood, elaborate and research. *Shalakyatantra* is the branch of *Ayurved* which deals with all the diseases above clavicle¹. *Acharyasushruta* have mentioned 28 *karnaroga* in *Uttartantra*.² *Karnanada* and *Karnakshveda* are among them. The cardinal symptom of both the diseases is sound heard in the ear. But the characteristics of the sounds are different. In *Karnanada*, different kinds of sound like the sounds emerge from *mridanga*, *bheri*,

*konchaetc*³. Whereas, in *Karnakshveda*, *venug-hoshavat* sound (like flute) is heard.⁴

According to modern science, both the disease can be correlated with tinnitus. It is very enormous disease and difficult to treat. Now a day, in the era of noise pollution and faulty lifestyle, number of the patients suffering from tinnitus is increasing. There is no permanent cure in modern science for tinnitus. So, *ayurveda* is the only answer.

AcharyaSushruta has mentioned same treatment for *Karnashoola*, *Karnanada*, *Badhira* and *Karnakshveda*.⁵ Now it is our duty to

understand the hidden concept of the treatment. Here in this study and attempt has been done to highlight the ‘*vatavyadivatchikitsa*’ and ‘*pratishyayvatchikitsa*’⁶ clinically in the management of *Karnanada* and *Karnakshveda*.

Aims and Objectives:

- To establish the role of *ayurvedic* line of treatment according to etiopathology of *Karnanada* and *Karnakshveda*.
- To explore a correlation of *Karnanada* and *Karnakshveda* with Tinnitus.
- To evaluate the role of *Vatvyadhaivatchikitsa* in the management of *Karnanada*.
- To evaluate the role of *Pratishyayvatchikitsa* in the management of *Karnakshveda*.

Materials and Methods:

The patients having the symptoms of *Karnanada* and *Karnakshveda*, of either sex and between the age of 18 – 75 have been included in the study. Patients of Hypertention, Diabetes, Pregnancy, COPD, Otitis media, epistaxis have been excluded from the study. Patients have been selected from the OPD of Govt. Akhandanand Ayurved hospital after inform concern. Patients have been divided into two groups.

Group KN diagnosed as *Karnanada* and Group KS diagnosed as *Karnakshveda*. All the patients of each group have given two types of the therapy i.e. Plan – 1(*Vatavyadivatchikitsa*) and Plan – 2 (*Pratishyayvatchikitsa*).

TREATMENT PLAN – 1

1. *Rasayanchurna* – 3 gm with warm water.
2. Tab. *Ashwagandha* – 2 BD
3. *Nasyakarma* – *Anutaila*
4. *Karnapurana* – *Bilvadiaila*

TREATMENT PLAN – 2

1. *Sitopaladichurna* – 3 gm. With honey twice a day.
2. Tab. *Vyoshadivati* – 2 BD
3. *Nasyakarma* – *Anutaila*
4. *Karnapurana* – *Bilvadiaila*

All the patients have been observed weekly up to 2 months and assess during the treatment and after the treatment.

Observations:

Total 60 patients were treated in this study. Among 30-30 patients of *Karnanada* and *Karnakshveda*, 15 have been treated with plan – 1 and 15 with plan – 2.

	PLAN-1	PLAN-2	TOTAL
GROUP-KN	15	15	30
GROUP-KS	15	15	30

Table 1: Age wise distribution

TABLE - 1			
AGE	KARNANADA	KARNAKSHEVED	TOTAL
18 - 25	0	1	1
26 - 35	1	12	13
36 - 45	2	8	10
46 - 55	9	5	14
56 - 65	11	2	13
66 -75	7	2	9
TOTAL	30	30	60

The age wise observation shows Karnanada was found more between the age of 46 – 65 and Karnakshveda was found in early age i.e. between the ages of 26 – 65.

Table 2: Gender wise distribution

TABLE - 2			
SEX	KARNANADA	KARNAKSHVEDA	TOTAL
MALE	18	16	34
FEMALE	12	14	26
TOTAL	30	30	60

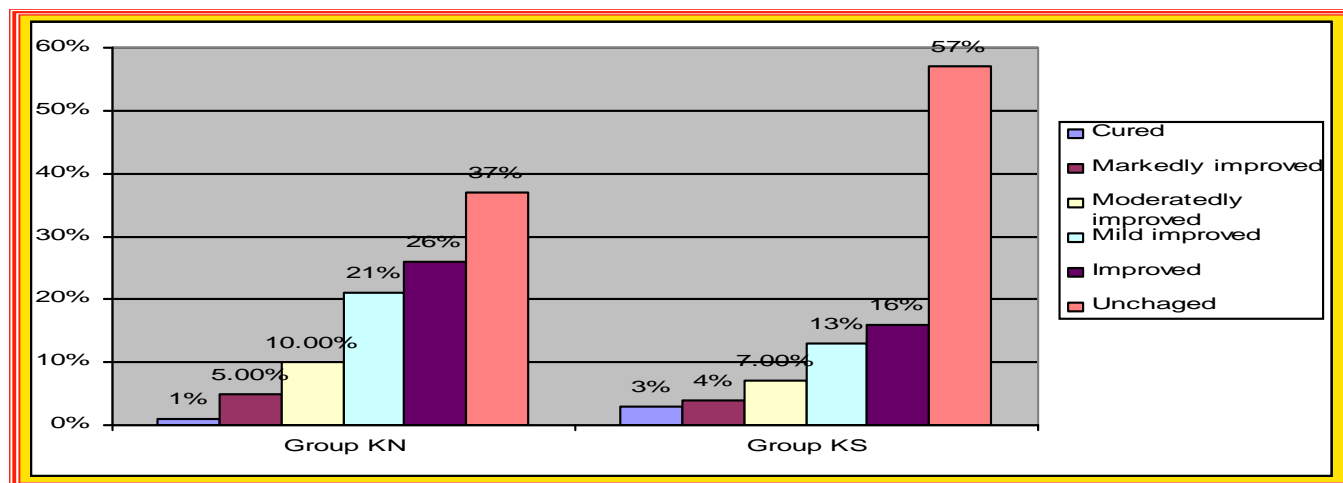
The gender wise observation shows almost equal number of patients of either gender was found in both the groups.

Table 3: Associated symptoms

TABLE - 3		
	KARNANADA	KARNAKSHVED
DEAFNESS	23	18
RHINITIS	2	22
OTITIS EXTERNA	0	1
OTITIS MEDIA	1	12
LABYRINTHITIS	4	2
ANXIETY	20	17
HYPERTENTION	2	0
NONE	8	5

Deafness and anxiety were found more with Karnanada. Rhinitis, Deafness, Otitis media and anxiety were found more with *Karnakshveda*.

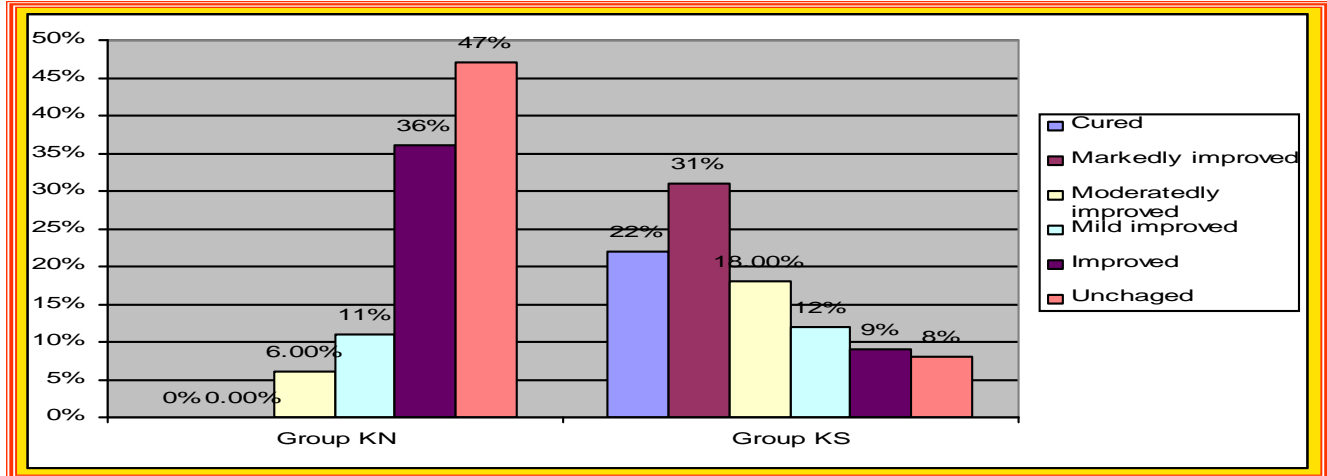
EFFECT OF PLAN - 1 THERAPY



There was a lesser amount of effect of the therapy found by the treatment plan -1 in both the groups. 37% unchanged in group KN and 57%

unchanged in group KS was found. In case of improvement there were 26% and 16% improvement found.

EFFECT OF PLAN 2: THERAPIES



The total effect of the therapy of the treatment plan – 2 shows that it was effective in group KS not in the KN. There were 22% and 31% patients got cured and markedly improvement respectively in the KS group. But there were no cure and markedly improvement in the group KN. On the other hand there were 47% patients were got no relief in group KN.

DISCUSSION

Acharya Sushruta has mentioned *Karnanada* and *Karnakshveda*, two different diseases with the similar characteristic i.e. sound heard in the ear. But the characteristics of the sounds are different.

The dictionary meaning of *Karnanada* is the sound heard in the ear.⁷

Samprapti of Karnanada:

The *vimaragata*, vitiated *shirogata-Vayu* get obstructed by *Kaph*, *pitta* etc, *doshas*. This *Vayu* is then become *aavrutta* by the *Avarana* of *Kaphadidosha*. This *Avvuttavayu* get *sthanasamsraya* in *Shabdabhivahanadi* and

produced different kind of sound which is known as *Karnanada*.⁸

Hearing of different kind of sound is the cardinal symptom of *Karnanada*. In, the characteristic of this sound are mentioned in the commentary of *AshtangaSangraha* like the sound of *bhrungara*, *kronch*, *mrudanga*, *bheri* etc.⁹ All these sounds are generated by the *Avvuttavata* so as mentioned in the *samprapti* of *Karnanada*. *Karnakshveda* is also defined as sound in the ear and the characteristic of sound is like *venughoshavat* (like blowing the flute).¹⁰

Samprapti of Karnakshveda :

The *nidanas* like *Shrama*, *kshaya*, *ruksha-kashaya*, *Bhojana*, *Shirovirechanapachatshitasevana* leads to vitiation of *Vata*, *Kapha* and *Raktadosha*. The *shirogatavimargagamevayugetsanshrushta* i.e. mixed with these *prakupitadoshas*. The *srnshrushtavat* get *sthanasamsraya* in *Shabdapatha* and produced the sound like *Venughosha* (flute like) which is known as *Karnakshveda*.¹¹

Chikitsa:

Acharya Sushrut has mentioned the similar treatment for *Karnashoola*, *Karnanada*, *Badhirya* and *Karnakshveda*¹² He has also mentioned the two kinds of *chikitsasutra Sutras*. ‘*Pratishyayvatchikitsa*’ and *Vatvyadhivatchikitsa*’.¹³ Here *Karnanada* is *Kaphadiavaranaa-vruttakevalavatarabdhapradhanavyadhi* so as *Vatavyadhi*. So, *Karnanada* can be treated by *Vatavyadhivatchikitsa*. And *Karnakshveda* is *Kaphadidoshasanshrushtavatapradhanavyadhi*. So, *Karnakshveda* can be treated by *Pratishyayvatchikitsa*.

Here in this study, Plan – 1 is based on *vathvyadhivatchikitsasutra* and Plan – 2 is based on *pratishyayvatchikitsasutra*. *Shodhananasya* and *Karnapurana* were included in both the plans.

Shodhana Nasya was administered with *Anutaila*.¹⁴ The *Tikshana*, *Ushana*, *Shirovirechanik* properties of all the drugs of *Anutaila* counter on the vitiated *Kaphadidoshas*. As a result, it relieves the *Avarana* as well as the obstruction created by the *KaphadiDoshas* which facilitate the *vimargagatavayu* to be *margastha*.

Karnapurana of *Bilvaditaila* is indicated specifically in the treatment of *Badhirya*. *Karnapurana* with *Bilvaditail* directly effect on *vatadosha*.¹⁵ *Bilva* is *Vatashamaka* and *taila* is also indicated in *vataroga*. In the etiopathogenesis of *Karnanada* and *Karnakshveda*, *vatadosha* plays major role. Besides this, *Karna* is the seat of *Vayu*. So, in *Karnaroga*, including *Karnanada* and *Karnakshveda*, emphasize should be given to treat the vitiated *Vayu*. *Karnapurana* with *Bilvaditaila* gives palliative effect on *Vatadosha*.

Plan – 1: The therapy selected in plan – 1 was based on *Vatavyadhivatchikitsa*. *Rasayanachurna* and *Tab. Ashvagandha* were given. The content of *rasayanchurna* i.e. *Guduchi*, *Gokshura* and *Amalki*, are *tridoshashamaka* as well as give the benefits of *Rasayanchikitsa*. Whereas, *ashvagandha* is *balya* and *vatashamaka* also. *Ashvagandha* also considered as neuro tonic. So, it

is beneficial for the repair of *Shabdabhivahana*. Thus, Plan – 1 is more effective in *Karnanada* which is *kevalavatapradhanavyadhi*. Results also show the same.

Plan – 2: The therapy selected in plan – 2 was based on *Pratishyayvatchikitsa*. *Sitopaladichurna* and *Vyoshadivati* were given. The ingredients of *Sitopaladigive kaphapittashamaka* effect. *Ushnaguna* of *pippali* act as *Kaphashamak*, *madhurrasa* and *madhurvipaka* act as *pittashamaka* which leads to break the *Samprapti*. Whereas, *sragiguna* of *Sharkara* facilitates separating the *Sanshlishtadosha*. In the other hand *tikshana-ushna* property of *Vyoshadivati* give effect of *kaphashamaka* and relieve the obstruction created by the *doshas*. Thus, Plan – 2 is more effective in *Karnakshved*. Results also show the same.

Overall effect of therapy:

In this study, the results show that the overall effect of therapy is less in group KN. It may possible that the duration of the therapy for the *Karnanada* in this study is short. So, there will be the possibilities of further research in *Karnanada* with longer duration by *Vatvyadhivatchikitsa*. The results show better improvement in group KS.

CONCLUSION

Karnanada should be treated as per ‘*Vatvyadhivatchikitsa*’ *siddhant*.

Karnakshveda should be treated as per ‘*Pratishyayvatchikitsa*’ *siddhant*.

REFERENCES

1. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji Trikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi, 2015, sutrasthana 1/7
2. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by VaidyaJadavjiTrikam-

1. jiAcharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/3,4,5
3. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by VaidyaJadavjiTrikamjiAcharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/7
4. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya JadavjiTrikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/9
5. Acharya Sushruta, “SushrutaSamhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by VaidyaJadavjiTrikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 21/4
6. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji Trikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 21/38
7. Vamanshivram “the practical Sankrit- English dictionary” revised and enlarged edition of prin V. S. Apte.
8. Acharya Sushruta, “SushrutaSamhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji Trikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/7
9. Vagbhatta, “A t ng Sa graha”, with hindi commentary, kavirajatrivedgupta, with Chaukhambhakrishnadas academy, Varanasi, reprint 2005, uttarsthan 21/7
10. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji TrikamjiAcharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/9
11. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji Trikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 21/4
12. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji TrikamjiAcharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/38
13. Acharya Sushruta, “Sushruta Samhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji Trikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/38
14. Acharya Sushruta, “SushrutaSamhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji TrikamjiAcharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra.
15. Acharya Sushruta, “SushrutaSamhita” with sanskrita commentary “nibandhsangraha-vyakhya” edited by Vaidya Jadavji Trikamji Acharya, Chaukhambha Sanskrit Sansthan, Varanasi,2015, uttaratamtra, 20/3,4,5

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