INTERNATIONAL AYURVEDIC MEDICAL JOURNAL



Review Article ISSN: 2320 5091 Impact Factor: 5.344

A REVIEW ON KARNAPICHU - A BETTER ALTERNATIVE TO KARNAPOORANA

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ABSTRACT

Karnapoorana, a major treatment modality in the management of diseases of ear; is the process of filling external auditoy canal with medicines like taila, swarasa or mutra for a stipulated time. Though having mentioned in various diseases it may not be suitable for all patients because of the small drug contact time and lengthy procedure. This makes necessity to find some other simplified yet effective procedure to get the desired benefits. Karnapichu; a method of inserting a pichu (cotton wick) soaked in medicine into the external auditory canal is a best alternate for the karnapurana procedure. Karnapichu is a very simple procedure and gives results same as that of karnapoorana. Perhaps it has some added benefits like more tissue contact time, as it holds the drug (taila/swarasa) for longer duration and the cotton wick absorbs the discharge (in case of otitis media or externa) present in ear canal. So this study was conducted to evaluate and validate the benefits of karnapichu.

Keywords: Karnaroga, Karnapoorana, Karnapichu.

INTRODUCTION

Acharya Sushruta has explained 28 karnaroga in the chapter Karnaroga Vigyāniya of uttaratantra¹ and various treatment procedures like Karnaprakshalana, Karnapramarjana, Karnapoorana and Karnadhupana in Karnagataroga pratishedha adhyaya.² Out of which karnapurana, the procedure of filling medicine into ear canal has been advised for wide range of karnaroga like karna nada, badhirya, karnashula, karnasrava, pootikarna, karna arsha etc.

Acharya Vagbhata explained that vaidya should use Sneha dravya (unctous medicines) according to Yukti for Bhakshana, Basti, Nasya, Abhyanga, Gandusha, Murdhni Taila, Karna Poorana and Akshi Tarpana³.

With this concept there is practice of administering sneha dravya using pichu varti into the ear canal by many Shalaki vaidya. Karna pichu is the procedure, basically evolved from the concept of shiropichu a type of murdni taila; wherein a wick like cotton swab is dipped in required medicine and kept in ear canal for a stipulated time.

Though *karnapoorana* procedure is widely practiced, it needs an upgradation and improvisation to make it ease for administration and comfortable to the patient. Considering all these points this study was made to evaluate effect of *pichu* in *karnaroga chikitsa*.

AIM & OBJECTIVES

- 1. To findout better alternative of karnapoorana.
- 2. To study karnapoorana and karna pichu in detail.

KARNAPOORANA

Definition: *Karnapoorana* is the procedure of filling taila or other liquid medicines into ear canal.⁴ Indicated for *karna roga*, *kantha roga* and *shiro roga* for 100, 500, and 1000 *matrakala* respectively.

Procedure: Patient made to lie down in lateral position. *Sthanika snehana* and *swedana* should be done (to the pinna, pre auricle and post auricle region). Then the disease specific medicine is made lukewarm and instilled into ear canal with the help of *gokarna* or dropper or cotton. Then after stipulated time the medicine is taken out with the help of cotton wick.

Limitations:

- This process takes time of 20-30 minutes.
- It is difficult to clean the ear canal completely after the procedure; the reminant may cause irritation to the patient or may act as source of secondary infection.
- The quantity of medicine is not fixed.
- Administration of this procedure in case of tympanic perforation is ambiguous.

With the above limitations of *karnapoorana* an alternative method *karna pichuvarti* is being practiced by many *shalakis*.

KARNAPICHU:

There are many references available regarding *pichu* in *Ayurveda* but the description of *karna pichu* is very less. *Pichu varti* is a cotton swab soaked in medicine, particularly *taila*. When it is placed in *karna*, the procedure is called *karnapichu*.

Nirukti of pichu:

- Pechatiti Pichu⁵ that which spreads is called as pichu.
- "Pichu sthoola kavalika" ⁶ A thick swab or a cotton pad is called *pichu*.

Acharya Vagbhata mentioned karna pichu varti in the treatment of pakwa karna. He told that the puss filled ears should be first cleaned with pichu varti (dry mopping) and after that the ear should be filled with pichu varti dipped in medicine. It has to be carried out

twice daily. But there is no hint of duration of its administration.⁷ Similar explanation is available in *karnaroga pratishedha adhyaya* of *Chikitsa Manjari* (an ancient *Ayurveda* text in *Malayalam*).⁸ *Sharangadhara* mentioned *Shiro pichu* as a part of *moordha taila* in the management of all kinds of *shiroroga* including *karna*, *nasa* and *anya roga*.⁹

Indications: All *karnarogas* where *Karnapoorana* is mentioned for treatment.

Contraindications: It should not be administered without performing *karna pramarjana* and *puya nirharana*.

Procedure:

Purvakarma: The exact procedure of *karnapichu* is not mentioned. Only *Vagbhata* has given the description that the pus filled ear should be cleaned with *pichuvarti* before its administration with the drug. This can be considered as the *poorvakarma* of *karnapichu*.

Pradhanakarma: Ear canal is made straight by pulling the pinna upward and backward. Then the *pichuvarti* dipped in medicine is inserted into ear canal with the help of probe and forceps.

Paschat karma: After removing the *pichu*, *Karna pramarjana* (dry moping) and *dhupana karma* should be done.

Dharana kala: Depending on condition and severity of disease it can be changed once or twice daily.

Benefits of karnapichu:

- This is easy to administer and Cost effective.
- The procedure is not messy and is well accepted by patients.
- This uses less medicine and gives more drug tissue contact time.

Example for karnapichu varti usage:

- Nada, Badhirya: Karnapichu varti can be administered overnight, which gives prolonged snehana (nourishment) and helps in correction of vatadushti in karnanada and badhirya.
- *Karna srava, kandu, pooti karna*: compared to *karnapoorana, karna pichu* is best in these conditions, as it provides
- Sustained release of drug.
- Longer drug tissue contact time

 The karnapichu absorbs fluid discharge in ear canal.

As *Karna pichu* provides increased rate of absorption of medicine in the affected area and good healing is facilitated because of increased contact time. Hence *karana pichu* is very effective in the management of *karnasrava*.

DISCUSSION

Selection of *Karna pichu* in present study:

Karnapoorana is the treatment advised in the management of pootikarna, karnasrava etc. But, perforated tympanic membrane and the fear of residual in the ear after the procedure are the points which make shalaki obstinate to administer karnapoorana. Where as in karnapichu, these factors are ruled out and it has added benefits as it provides increased rate of absorption of the medicine in the affected area due to which good healing is facilitated. Though principle of both procedures is to allow the medicine in ear canal for a stipulated time, where karnapichu is found to be better choice.

Table: Comparison of *karna purana* and *pichu varti*.

1. Procedure duration More Less 2. Drug consumption More Less 3. Drug contact time Less More Absorption of ear discharge 4. No Yes Administration in infants and children Difficult Easv 6. Administration in perforated ear drum Ambiguous Easy to administer

Karnapurana

CONCLUSION

Particulars

Sl.no

Karnapichu has same principle of karnapoorana with added benefits of easy to administer, well acceptance by patients, cost effectiveness, longer drug tissue contact time, absorption of any discharge of ear canal (in ASOM, CSOM otitis externa), requires less quantity of medicine and can be done at OPD level. Hence, karnapichu is a better alternative to karnapoorana.

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Probable mode of action of karna pichu:

Karnapichu is a procedure where in cotton wick dipped in luke warm medicated oil is inserted into the external auditory canal. In the present study *karnapichu* is used in patients with ASOM, CSOM, and traumatic perforation of tympanic membrane, reduced hearing and tinnitus.

Purvakarma: Ear canal is cleaned thoroughly to remove the discharge and other debris which facilitates the drug absorption.

The drug: The lukewarm oil used acts as, *sthanika snehana* and *swedana*, thus causes increased local warming, pseudo-inflammation and increased blood circulation there by helping in better absorption. Also causes pseudo-congestion of TM and enhances drug absorption to affected sites.

Pichuvarti: It will facilitate longer residence time of the drug in ear canal, there by increases availability of drug to the tissues. Local action of *pichu* is based on cellular absorption of medicine. It also absorbs the discharge or exudates from the ear which helps in quick healing process.

Karnapichu varti

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Source of Support: Nil Conflict Of Interest: None Declared

How to cite this URL: Shashikala D Khadabadi et al: A Review On Karnapichu – A Better Alternative To Karnapoorana. International Ayurvedic Medical Journal {online} 2019 {cited November, 2019} Available from: http://www.iamj.in/posts/images/upload/2049_2052.pdf