



## ROLE OF *ERANDADI TAILA NASYA* AND *KARNAPURANA* IN THE MANAGEMENT OF *KARNA NADA* - A CLINICAL STUDY

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### ABSTRACT

Tinnitus is perception of sound that was no external source. It can be constant or intermittent and is heard in one ear, both ear (behind the eardrum) or in sensory neural auditory system tinnitus is real neural activity in brain. In *Ayurveda* it is correlated with *Karna Nada* which is *Vata-Kapha* dominant in nature.

**Aim:** To evaluate the effect of proposed *Ayurvedic* treatment protocol in the patients of tinnitus.

**Materials and Methods:** The studies were conducted in 15 patients of *Karna Nada* and were treated with *Erandadi Taila* in form of *Nasya* and *Karnapurana* for 1 month.

**Results:** It revealed statistically extremely significant relief in tinnitus. Furthermore, sustained relief was found in follow-up.

**Conclusion:** *Ayurvedic* treatment protocol is effective in the management of tinnitus.

**Keywords:** *Nasya*, *Karnapurana*, Tinnitus, *KarnaNada*

**INTRODUCTION:** Tinnitus stands for the perception of sound (ringing or noise), which has no external stimulus. Approximately one-third people experience tinnitus sometime in their lives. The etiology of this common ear symptom is poorly understood. The severity of sound ranges from nearly undetectable to severe and debilitating. Though there is no cure for chronic tinnitus, there are various modalities of management, which significantly improve the quality of patients' life<sup>[1]</sup>.

According to the National Centre for Health Statistics 32 percent of all adults in the United States have had tinnitus at sometime, and approximately 6.4 percent characterized the tinnitus as debilitating or severe Davis and Rafeie have summarized seven large studies from four different countries in the last 35 years and concluded that the prevalence of tinnitus in adults ranges between 10.1 and 14.5 percent<sup>[2]</sup>.

This disease can be correlated to tinnitus on the basis of sign and symptoms. The vitiated *Vayu* gets lodged in the *Shabdavaha Shrotas*, thereby causing different types of sounds in the ear called as *Karna Nada*<sup>[3]</sup>.

*Urdhvanga Chikitsa* is one of the important branches of *Astanga Ayurveda* and *Nasya Karma* is the main therapeutic measure of *Urdhvajatrugata Rogas*. Hence, *Nasya* is the treatment of choice for this type of disease, by reaching actual site of pathogenesis.

*Karna* being one of the *Adhithana* of *Vata-Dosha*, *Snehana* becomes important to control the localised increased *VataDosha*. Hence, *Karnapurana* also gains importance in the management of the disease.

The efficacy of the *Erandadi Taila* in *Karna Nada* as mentioned in the *Ashtanga Hridaya* is well known<sup>[4]</sup>.

### MATERIAL AND METHODS:

**Selection of patients:** Patients attending the O.P.D. and I.P.D. of P.G. Department of *Shalakyta Tantra*, N.I.A., Hospital Jaipur Rajasthan, with signs and symptoms of *Karna Nada* (Tinnitus).

**Number of patients:** 15

**INCLUSION CRITERIA**

- Patients presenting with symptoms of *Karna Nada* irrespective of sex, caste and religion.
- Patients in the age group of 20 - 80 years with intact tympanic membrane.

**EXCLUSION CRITERIA:**

- Congenital deformity.
- Perforation of tympanic membrane.
- Patient of Otosclerosis and fluid in the middle ear.
- Blockage due to stenosis of external auditory canal/wax.
- Pregnant, immuno compromised patients.
- Tinnitus due to non otologic factors (Diabetes mellitus, Hypertension, Thyroid disease etc) and glomus tumour, aneurysm of carotid artery, palatal myoclonus and tumour of auditory nerve.

**Investigations**

Haemoglobin and blood sugar before treatment were carried to rule out any other disorder.

**Drug:** *Erandadi Taila*

**Route of administration by:** *Nasya*

**Dose:** 6 drops in each Nostril

**Duration:** 3 courses of *Nasya* of 7 days each with an interval of 5 days in between.

**Route of administration by:** *Karnapurana*

**Dose:** 10-12 drops in each canal

**Duration:** 3 courses of *Karnapurana* of 7 days each with an interval of 5 days in between.

After completing the treatment, follow-up was carried out for 1 month. All the test drugs were prepared and procured from pharmacy, National Institute of Ayurveda, Jaipur.

**Criteria of assessment:** Both subjective and objective parameters were employed for the assessment of the effect of the treatment.

**Subjective criteria**

The effect of treatment was assessed by asking following questionnaire form the patients<sup>[5]</sup> -

S. No.	Does your tinnitus	Never (0)	Rarely (1)	Sometimes (2)	Usually (3)	Always (4)
1.	Still make you feel irritable or nervous					
2.	Still make you feel tired or stressed					
3.	Still make you uncomfortable to be in a quiet room or setting					
4.	Still make you difficult to concentrate					
5.	Interfere with your required activities (work, home, care or other					

	responsibilities)					
6.	Interfere with your social activities/ other things you do in leisure time					
7.	Does your tinnitus still interfere with sleep					

**Objective criteria**

**Hearing loss**

**Grade**

0 – 25 db	0
25 – 40 db	1
40 – 60 db	2
> 60 db	3

**Laboratory criteria**

- It includes Hb%, FBS/RBS.
- Blood pressure of all the patients was measured.

**Criteria for assessment of results**

The efficacy of the therapy was assessed on the basis of subjective criteria.

**Statistical analysis**

**Karna Nada with Badhira in 15 patients**

The associated complaint (*Badhira*) of the patients in the present study was recorded, 66.67% patients had SNHL, 20.00% were having normal hearing, 13.33% were having CHL and no any patients had mixed hearing loss.

**Table no 2**

S. No.	Associated Complaint ( <i>Badhira</i> )	No. of Patients	Percentage
1	SNHL	10	66.67%
2	CHL	02	13.33%
3	Mixed	00	00.00%
4	Normal	03	20.00%

**Table .3 Effect of therapy in 15 patients of Karna Nada (Tinnitus) and Badhira (Hearing Loss).**

S. No	Symptoms	Mean		Dif.	% of Change	SD	SE	W	P	Results
		BT	AT							
1	<i>Karna Nada</i>	8.4	4.0	4.4	52.38%	1.35	0.34	120	< 0.0001	E.S.
2	<i>Badhira</i>	1.46	1.33	0.33	22.60%	0.48	0.12	15	0.062	N.S.

**Effect of therapies on chief complaint- Karna Nada**

Relief in the symptom of sound in the head and ears was observed 52.38% (p<0.0001) which was statistically extremely significant.

**Effect of therapies on associated symptom- Badhira**

Relief in the symptom of hearing loss was observed 22.60% (p>0.05) which was statistically insignificant.

**Overall effect of therapy**

The overall effect was decided on the basis of improvement in subjective parameters.

**Table No 4 Overall effect of therapy**

S. No.	category	No. of patients	% relief
1	Complete remission	00	00.00%
2	Marked relief	01	06.67%
3	Moderate relief	05	33.33%
4	Mild relief	09	60.00%
5	Unchanged	00	00.00%

60.00% patients showed mild improvement, 33.33% patients showed moderate improvement and 06.67% patients showed marked improvement. None of the patients found complete remission and unchanged result.

#### ON SELECTION OF THE PROCEDURE

Tinnitus is not a single, well-defined disease, but a symptom of many pathologies. Sometimes in one patient, several pathological mechanisms may coexist<sup>[6]</sup>.

#### Nasya

Nasya Karma specially recommended for the *Urdhvajatrugta Vikara* and it can be classified in many way according to its mode of action i.e. *Shodhana Shamana* etc.

In *Purva Karma Sthanika*, *Abhyanga* and *Swedana* is given with *Erandadi Taila* which helps in stimulation of vasodilation and increases the blood circulation.

When the *ErandadiTaila* is administered through the nasal cavity, it absorbed by the cell membrane by passive process due to lipophilic nature.

Then the later transversion may be carried through capillaries and veins which stimulate olfactory nerve which is connected with the higher centres of the brain like Limbic system, basal ganglia and hypothalamus which inturn stimulates endocrine and nervous system.

*Karna Nada* is *Urdhvajatrugata Vikara* and caused by vitiated *Vata-Kapha*

*Dosha* and *Erandadi Taila* having *Vata-Kaphahara* properties which combate the effect of vitiated *Vata-Kapha* and break the pathogenesis of disease

**Karnapurana:** *Karnapurana* is advocated in all *Karna Rogas* in form of *Taila Ghrita* etc. In *Karna Nada Erandadi Taila* is used for *Karnapurana*.

In *Purva Karma* luke warm *Erandadi Taila* gentle massage was given around the ear and pinna, which increase blood circulation in the ear. After this, *Swedana* was given around the ear that cause vasodilation and thus increase permeability of capillaries. As a result, *Abhyanga* and *Swedana* facilitate more absorption of drug.

The medicated *Erandadi Taila* is used in *Karnapurana* and it gets absorbed by skin, lining external auditory meatus and tympanic membrane and reaches systemic blood flow.

*Erandadi Taila* has *Vata Shamaka* properties but it does not aggravate *Kapha*. So the *Karnapurana* eliminates disease of ear which occurs due to vitiation of *Vata*. In addition medicine is used luke warm so its beneficial effect not only *Vata Shamana* but also it removes *Avarana* of *Kapha* and break the pathogenesis of disease.

As a combine effect of *Nasya* and *Karnapurana* with *Erandadi Taila* is useful in *Karna Nada*.

**CONCLUSION:** In the present study, *Erandadi Taila* was found to be effective in tinnitus. Statistically extremely

significant results were seen. No adverse and toxic effects were observed during and after the completion of study. Therefore *Erandadi Taila* can be used safely and effectively in the treatment of *Karna Nada* (Tinnitus).

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