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Case Study

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# A CASE STUDY OF AAMRADI TAILA KARNAPOORANA IN **OTOMYCOSIS**

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#### **ABSTRACT**

Otomycosis is a fungal infection of the ear canal which is very common disease, especially in tropical and subtropical areas with the symptoms of intense itching, pain in the ear, watery discharge and ear blockage. These fungi are commonly Aspergillus and Candida. According to Ayurveda, Karnasrava i.e., discharge from Karna is one of the symptoms of otomycosis. Treatment of *Karnasrava* is explained by Sushruta i.e. Karnadoopana, Karnapoorana, Prakshaalana etc.

**KEYWORD:** Otomycosis, Karnasrava, Karnapoorana, Aamradi Taila.

#### INTRODUCTION

Otomycosis, a fungal infection of the external auditory canal. In the last few years the participation of fungi in external otitis has increased, mainly because of the use of broadspectrum antibiotics and corticosteroids for the treatment of bacterial otitis and to factors relating to changes in immunity. Its prevalence is greatest in hot, humid & dusty areas of the tropics. Otomycosis is one of the common conditions encountered in a general otolaryngology clinic setting and its prevalence has been quoted to range from 9% [1] to 27.2%<sup>[2,3]</sup> among patients who present with signs and symptoms of otitis externa.

Karnasrava i.e., discharge is one of the symptoms of otomycosis. Aacharya Sushruta describes many types of Karnasrava in Vranasrav Vigyaniya Adhyay in Sutrasthana out of which Twakagata and Mansagata srava symptoms are much similar as otomycosis. [4] Thus otomycosis is correlated with Karnasrava condition in Ayurveda. Generalised treatment of Wakode et al.

Karnasrava includes Shirovirechana, Dhupana, Karnapurana, Pramaarjana, Dhaavana, Prakshaalana etc.<sup>[5]</sup>

In modern medicine clotrimazole, fluconazole and ketoconazole are commonly used local drugs in otomycosis out of which clotrimazole is the most widely used topical azole. But it is having side effects like burning sensation, stinging sensation etc. The treatment of this particular disease has never been satisfactory and recurrence is very common therefore, a number of treatments were advised to relive this condition. So, to overcome above problems there is a need to find cheaper and easily available Ayurvedic medicine.

#### CASE REPORT

A 35 years old male patient visited to ENT OPD of *Shalakyatantra* department, G.A.C And Hospital, Nanded on 26/06/2023 with chief complaint of pain and itching in left ear since 5 days.

#### **Personal History**

Diet –Non vegetarian

Appetite - normal

Bowel -regular

Habits – no any

Ashtavidha pariksha:

Nadi –vata pradhan pitta

Mala –prakrut

Mutra –prakrut

Jivha – Niram

Shabda –prakrut

Druka -prakrut

Akruti –Madhyam.

#### • Samanya Parikshan

Pulse: 76/min

Blood Pressure: 110/70 mm Hg

#### • Vishesh Parikshan

#### Ear examination

- Post Auricular, Pre-Auricular, pinna was normal in both ears.
- EAC of right ear was normal and left ear was occluded with

Fungal mass which is black and white in colour.

- The skin of EAC was hyperaemic after Aural Toileting.
- Tympanic Membrane of both ears was Intact.

**Table No: 1 Showing Grading of Subjective and Parameters.** 

| Symptoms            | Grade 0              | Grade 1           | Grade 2   | Grade 3   |  |
|---------------------|----------------------|-------------------|---|---|--|
| Karnashoola         | No earache           | Occasional        | Intermittent  | Continuous  |  |
| Karnakandu          | No itching           | Occasional        | Intermittent  | Continuous  |  |
| Nature of discharge | No discharge.        | Dry flaky         | Mucopurulent<br>discharge with black<br>or white flakes | Purulent discharge with black or white flakes                       |  |
| Amount of discharge | Absent.              | Mild              | Moderate  | Severe  |  |
| Inflammation        | Skin coloured<br>EAC | Redness In<br>EAC | Redness in EAC with Oedematous otitis externa.          | Redness in EAC with<br>Oedematous otitis<br>externa with tenderness |  |

#### Diagnostic criteria

- 1. Fungal mass seen in Otoscope.
- 2. Positive KOH preparation (by 20% KOH)

**Line of treatment:** Aural Toileting followed by *Aamradi Taila Karnapurana*. 16 days of treatment with follow up on 4<sup>th</sup>, 8<sup>th</sup>, 12<sup>th</sup>, 16<sup>th</sup> day.

#### **Preparation of Drug**

Preparation of research drug *Aamradi Taila* will be prepared according to reference of *Bhavaprakasha* using young leaves of *Amra*, *Jmabu*, *Madhuk* and *Vata*.<sup>[6]</sup> All the drugs (*Kalka*) will be taken in equal amount that is 1 part, *Tila Taila* will be taken 4 part and water 16 part. *Taila* will be prepared by *Snehapaka Vidhi* where the *Paka* will be *Kharapaka*.

#### **Procedure administrated to patient**

**Poorvakarma-:** All the discharge and debris will be removed from the ear by dry mopping with absorbent cotton buds before *Aamradi Taila Karnapurana*.

Sthanik snehan swedan

**Pradhankarma-**: 5-6 drops of Aamradi Taila in ears will be instilled.

Paschatkarma-: Mopping of ear with ear buds after Karnapurana

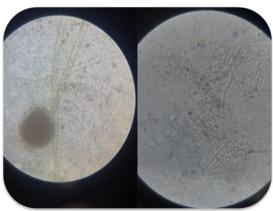
Table No. 2: Showing Improvement in signs and symptoms.

| Sign and symptoms   | 0 day | 4 <sup>th</sup> day | 8 <sup>th</sup> day | 12 <sup>th</sup> day | 16 <sup>th</sup> day |
|---------------------|-------|---------------------|---------------------|----------------------|----------------------|
| Karnashoola         | 3     | 1                   | 0                   | 0                    | 0                    |
| Karnakandu          | 3     | 1                   | 0                   | 0                    | 0                    |
| Nature of discharge | 2     | 1                   | 0                   | 0                    | 0                    |
| Amount of discharge | 1     | 1                   | 0                   | 0                    | 0                    |
| Inflammation        | 2     | 1                   | 1                   | 0                    | 0                    |

# BEFORE TREATMENT AFTER TREATMENT







**KOH MOUNT** 

### **DISCUSSION**

Karnasrava is explained as a symptom and as a disease in Ayurveda. While describing the etiological factors of Karnasrava, Aacharya have given special emphasis to Jalanimanjjana and Karnakanduyana which is commonly found in otomycosis.

By assessing the symptoms, it can be said that *Kapha Aavrita Vata Dosha* is responsible for the manifestation of clinical features like discharge, pain, itching, etc. of otomycosis. In otomycosis, mainly watery and purulent type of discharge is present which shows the condition of Paka. While removing the fungal mass, ulceration of external auditory canal is likely to happen. Considering these points otomycosis can also be treated in the line of *Dushtavrana*. In *Uttaratantra*, *Acharya Sushruta* considered *Karnasrava* as *Sadhyaroga*.

The properties of Aamradi Taila are Katu, Tikta, Kashaya Rasa, Katu vipaka and having qualities of Vranaropan, Twakdoshhar, Vedanasthapan, Karnashoolprashaman. Hence, by these qualities Aamradi Taila Karnapoorana reduces the growth of fungal mass and helps to reduce pain, aural blockage and inflammation. By these properties it is very much useful in otomycosis (Karnasrava).

#### **CONCLUSION**

Thus it can be concluded that, *Aamradi taila Karnapoorana* can be advised for successful treatment in patients of otomycosis (*Karnasrava*) as it is cost effective, ease of administration and given better efficacy in treatment. By following this line of treatment one can avoid ototoxicity as it is caused by Modern Antifungal and Antibiotic steroid Ear drops.

#### REFERENCE

- 1. T. Mugliston and G. O'Donoghue, Otomycosis—a continuing problem, Journal of Laryngology and Otology, 1985; 99(4): 327–333.
- 2. Z. B. V. D. S. Pontes, A. D. F. Silva, E. D. O. Lima et al., Otomycosis: a retrospective study, Brazilian Journal of Otorhinolaryngology, 2009; 75(3): 367–370.
- 3. J. Fasunla, T. Ibekwe, and P. Onakoya, Otomycosis in western Nigeria, Mycoses, 2008; 51(1): 67–70.
- 4. Shastri A.- Sushruta Samhita Purvardha, Sutrasthana, Vranasravavidyaniya 22/4,5, publisher Chaukhambha Sanskrit Sansthan, Varanasi, Reprint, 2018; 123.
- 5. Shastri A.- Sushruta Samhita Uttartantra, Chapter no-21/40, publisher Chaukhambha Sanskrit Sansthan, Varanasi, Reprint, 2018; 131.
- 6. Mishra B. Bhavaprakasha Samhita, Vidyotinee Teeka, Chapter no-64/42, Chaukhambha Sanskrit Sansthan, Varanasi, Reprint, 1993; 682.