Indian J. Applied & Pure Bio. Vol. 41(3), 1570-1573 (2026). **ISSN: 0970-2091**

Integrative Ayurvedic Management of Karnanada (Tinnitus): A Case Study

[1]Darshan Sakariya and [2]Mrunal Bhoir

[1,2]Department of PG & Ph.D. Studies in Roganidana Evum Vikriti Vigyan, Parul Institute of Ayurveda, Parul University, Vadodara - 391760 (India)
[1]sakariyadarshan5@gmail.com
[2]mrunal.bhoir24537@paruluniversity.ac.in

Abstract

Karnanada, described under Jatru-Urdhwagata Vikara in Ayurveda, is primarily caused by vitiated Vata Dosha affecting the Shabdavaha Srotas, leading to the perception of abnormal auditory sounds. It closely correlates with tinnitus in modern medicine, a condition characterized by hearing sound without external stimuli. This case study presents a 27-year-old male patient with complaints of persistent ringing in the right ear for six months, associated with disturbed sleep and irritability. Clinical examination revealed no structural abnormalities, and hearing tests were within normal limits.

The patient was managed with a combined Ayurvedic approach including Nasya with Ksheerabala Taila, Karnapoorana with Bilwadi Taila, internal administration of Bilwadi Ghrita, Sarivadi Vati, and Arogyavardhini Vati. These interventions aim to pacify aggravated Vata and Pitta doshas, improve circulation, and nourish auditory pathways. After one month of treatment, the patient reported approximately 90% relief in symptoms along with improved sleep quality and overall well-being.

This case highlights the effectiveness of Panchakarma and internal medications in managing Karnanada. The holistic approach not only alleviates symptoms but also addresses the underlying doshic imbalance, suggesting a promising role of Ayurveda in the management of tinnitus.

Key words : Ayurveda, Detoxification, Karnanada, Nasya, Tinnitus.

Karnanada is a type of Karnaroga described under Jatru-Urdhwagata Vikara. It occurs when aggravated Vata Dosha either deviates into improper pathways (Vimargagamana) or becomes obstructed by Kapha and other Doshas within the

[1]PG Scholar, [2]Associate Professor

Shabdavaha Srotas (auditory channel). This vitiated Vata produces various abnormal sounds[1] in the ear, such as those resembling Bheri (drum), Mrudanga, and Shankha, and the condition is also referred to as Karna Pranada.[7] When the disturbed Vayu becomes lodged in the auditory passages, it leads to the perception of different internal sounds, which characterizes Karnanada.[2]

According to Yogaratnakara,[8] etiological factors for Karna Roga include Avasyaya (exposure to cold or snow), Jalakreeda (swimming or diving), Karna Kandooyana (probing or scratching of the external auditory canal), and Mithya Yogena Shastrasya (improper use of instruments during examination or treatment of the ear). Acharya Haritha explained that Karnanada may arise due to the vitiation of different Doshas, and the nature of the perceived sound varies accordingly. Sounds resembling teeth grinding or flute-like tones accompanied by a burning sensation indicate Pitta predominance, whereas thunder-like sounds suggest Kapha involvement.[6] The Hetus described under Nidana primarily aggravate Vata, which then localizes in the Shabdavaha Srotas and produces the abnormal auditory perceptions characteristic of Karnanada.

Karnanada can be correlated with tinnitus, defined as the perception of ringing or noise in the absence of external stimuli. Nearly one-third of individuals experience tinnitus at some point in their lives.[4] Tinnitus is classified into subjective and objective types, as well as pulsatile and non-pulsatile, vascular and non-vascular, or idiopathic categories. Diagnosis is based on detailed history-taking, physical and audiological examinations, tinnitus-specific assessment, imaging studies, and relevant blood investigations. Various treatment approaches—such as masking, counseling, psychotherapy, pharmacotherapy, acoustic therapy, and tinnitus retraining therapy—are employed, though outcomes are often not fully satisfactory.

The clinical presentation of Karnanada closely resembles that of tinnitus. The general line of management for Karna Roga includes Ghritapana (intake of medicated ghee), Rasayana therapy (rejuvenation), Avyayam (avoidance of strenuous exercise), Ashirasnana (avoiding head bath), Brahmacharya (celibacy), and Akathana (refraining from excessive speaking).[5] Among the various ear disorders, the treatment principles for Karnashoola, Pranada, Karnakshweda, and Badirya are described as being similar.[3]

Case Report

Age - 27 years

Occupation - student

Sex - Male

Religion – Hindu

Chief Complaints :

The patient reports experiencing a ringing sound in the right ear for the past six months, along with disturbed sleep and irritability for the last four months.

History of present illness:

History past illness:

No history of Nasal allergy.

Not a known case of DM and Hypertension

Personal History:

Diet: Vegeterian

Appetite: Moderate

Koshta: *Madhyama*

Micturition: Regular and Normal

Bowel habits: Regular and Normal

Sleep: Disturbed sleep

Vitals:

Blood pressure : 128/76 mm/hg

Temperature: 97.3°F

Respiratory rate: 21/min

Pulse-83/min

Ashta Sthana Pareeksha

Nadi: 83/miin

Mutra: 5-6 *Vega*/day

Mala: 1 *Vega*/day

Jihwa: *Alipta*

Shabda: *Prakruta*

Sparsha: *Prakruta*

Drik: Prakruta

Akriti: Madhyama

Systemic examination

RS - Normal

GIT - Normal

CVS - Normal

CNS – Normal

Examination of ear

Pinna- Normal

Pre and post auricular area- Normal

External auditory canal- Normal

Tympanic membrane- no discharge, no perforation, bilateral TM is intact

Qualitative test for hearing by tuning fork

Rinne's test - AC>BC (B/L)

Weber's test - Lateralized to both ears

ABC - Normal(B/L)

The oral cavity proper, Larynx and Nose –Normal

Treatment :

Nasya-with Ksheerabala Taila 8 drops into each nostril,with proper Mukha Abhyangaand Swedana with Karpasyadi taila.

Karnapoorana-with Bilwadi Taila after proper KarnaAbhyanga.

Bilwadi Ghrita 1TSP bd

Sarivadi vati 2tds

Arogyavardhini vati 1 tds

Observatin and Outcome :

At each follow-up visit, the patient reported progressive comfort and noticeable improvement. After one month, the patient returned for follow-up and stated that the condition was almost completely resolved, with approximately 90% relief. The patient's overall condition had improved significantly, including restoration of sound sleep. Previously, sleep was disturbed due to irritation, but the patient now feels relaxed. The patient was advised to continue maintaining a healthy lifestyle and to avoid stressful situations.

Approximately 30% of the population experiences tinnitus at some point in their lives. This case highlights the effectiveness of a comprehensive treatment approach in managing tinnitus, where the interventions helped correct the patient's doshic imbalance, alleviate

symptoms, and enhance overall quality of life.

According to Ayurveda, tinnitus arises primarily due to an imbalance of Vata and Pitta doshas, often associated with disturbances in the Shiras (head region) and Karna (ear). Additionally, the condition may involve vitiation of Ama (toxins), Rasa (lymph), and Rakta (blood).

Vata Dosha imbalance: Aggravated Vata causes dryness and instability in the auditory and nervous systems, leading to sensations such as ringing or buzzing in the ears.

Pitta Dosha imbalance: Elevated Pitta generates heat and inflammation, resulting in symptoms like ear fullness, pressure, or abnormal sounds.

Rakta and Rasa imbalance: Impaired circulation and accumulation of toxins can disrupt auditory function, thereby contributing to tinnitus.

References :

1. Ambikadatta Shastri, (2011). Sushruta Samhita of Sushruta with Ayurveda Tatva Sandipika Hindi Commentary, Uttartantra, Varanasi: Chaukhambha Sanskrit Sansthana, *115:* 20 – 7.
2. Atrideva Gupta, (2012). Ashtanga Hridaya of Vagbhata with Vidyotini Hindi Commentary, Utharasthana, Varanasi: Chaukhambha Prakashan, *692:* 17–9.
3. Kashinath Shastri and Gorakha Nath Chaturvedi, (2009). Charaka Samhita of Charaka with Vidyotini Hindi Commentary, Sutrasthana Varanasi: Chaukhambha Bharati Academy, *128:* 5–84.
4. Mohan Bansal, (2021). Diseases of Ear, Nose and Throat 3rd Edition, New Delhi: Jaypee Brothers Medical Publishers, 111.
5. Schleuning AJ. (1991). *Med Clin North Am, 75*(6): 1225-37.
6. Vaidya Jaymini Pandeya, (2016). Harita Samhita of Harita with Nirmala Hindi Commentary Varanasi: Chaukhambha Visvabharati, *449:* 3 – 4.
7. Yadunandana Upadhyaya, (2019). Madhava Nidana of Madhavakara with Madhukosha Commentary by Shri Vijayarakshita and Shrkanthadatta with Hindi Vidyotini Commentary, verses Chaukhambha Prakashan, *286:* 2-3.
8. Yogaratnakara, (2013). Yogaratnakara, Karnarogadhikara, edited by Shree Laxmipati Shashtri, Chaukhambha Prakashan Varanasi, *309:* 1 – 2