

**A RANDOMIZED COMPARATIVE CLINICAL STUDY TO EVALUATE
THE EFFICACY OF KARNASHOOLHAR TAIL AND KSHAR TAIL
KARNAPURAN IN THE MANAGEMENT OF KARNASHOOL W.S.R.
TO OTITIS EXTERNA**

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ABSTRACT

Background: Karnashool (Ear pain) is one of the common ear disorders described in ayurveda, which can be correlated with Otitis Externa in modern medicine. It is characterized by pain, inflammation and discomfort in the external auditory canal. Ayurveda recommends Karnapuran (Instillation of medicated oil into the ear) as a highly effective therapy. Karnashoolhar Tail and Kshar Tail are two formulations through their Vata - kapha shamak, shothahara and vedanasthapaka properties.

KEYWORDS: Karnashool, Otitis externa, karnapuran, karnashoolhar Tail, kshar Tail, Ayurveda, comparative clinical study.

INTRODUCTION

Shalakya is an important branch among eight branches of Ayurveda which deals with the disease manifesting above the clavicular region. Maharshi Nimi is the pioneer at specialty

ShalakyaTantra. Sushruta Samhita is the foremost text of Ayurveda which explains ophthalmology and ENT in a systemic manner. In Uttartantra of Sushrut Samhita total 28 ear disease are described and Karnshoola is one among the diseases of ear. Karnshoola by word itself indicates that pain at ear can be precipitated even due to trivial etiological factors.

Maharshi Sushruta also described about Karnshoola that Kapha, Pittadi dosha is responsible

for Karnashoola. The disease Karnashoola considerably attracted the ancient physicians, which is evident from their detailed description classification symptomology complications and management written in Samhitas though it has been said that the disease. Karnashoola is the initial phase, is a curable entity, but if takes A chronic course may lead to many associated complications.

Karnashoola is one at the most common and most prevalent ailment, familiar to all with an equal distribution more or less throughout the world rather without any exception to the developed and under developed countries. Various drugs have been explored scientifically so far. While reviewing the literature, it was observed that. “A randomized comparative clinical study to evaluate the efficacy of karnashoolhar tail and kshar tail karnapuran in the management of karnashool w.s.r. to otitis externa” was not studied hence hoping this study contributes further to public health, we have decided to do “A randomized comparative clinical study to evaluate the efficacy of karnashoolhar tail and kshar tail karnapuran in the management of karnashool w.s.r. to otitis externa”.

Ashtang Hrudayakar Maharshi Vagbhata had described those five types of Karnashoola Vataj, Pittaj, Kaphaj, Raktaj and Sannipataj.

AIM

A randomized comparative clinical study to evaluate the efficacy of karnashoolhar tail and kshar tail karnapuran in the management of karnashool w.s.r. to otitis externa.

OBJECTIVES

Primary Objectives

1. A Randomized controlled comparative clinical study to evaluate efficacy of karnashoolhar tail and kshar tail karnapuran in the management of karnashool of karnashool w.s.r to otitis externa.
2. To establish new concept of karnashool management using Ayurvedic formulation and to minimize the complication.

Secondary Objectives

1. To study of Ayurvedic as well as modern aspect of karnashool
2. To study the efficacy of karnashoolhar tail in kandu.
3. To study if karnashoolhar tail works as shothaghna.

MATERIALS AND METHODS

Patient selection criteria

40 patients from OPD/IPD of this concerned hospital, fulfilling assessment & inclusion criteria, having completed all the follow ups were selected.

- I) Type of study design – comparative, clinical study.
- II) Setting (location of study) - OPD and IPDS section of the department Shalakyatantra in our institute attached hospital.
- III) Duration of study - Duration: for 15 days FOLLOW UP: Day 0, Day5, Day 10, and Day 15.
- IV) DOSE: 5 drops twice a day.

A) Inclusion criteria

- 1) Patients of the age group 18 to 50 years.
- 2) Patients irrespective of sex and religion.
- 3) Patients with signs and symptoms of Otitis Externa.
- 4) Patients with complaints of karnashool.
- 5) Patients with intact tympanic membranes.
- 6) Patients with itching in the ear.
- 7) Patients with swelling in and around the ear canal.

B) Exclusion Criteria

- 1) Patients age below 18 years and above 50 years.
- 2) Continuing history of alcohol and /or drug abuse.
- 3) Patients with K/c/o HTN, DM.
- 4) Subjects having perforated tympanic membranes.
- 5) Patients having malignant otitis externa.

Subjective parameters

1) Karnashool (pain)

Assessment will be done as follows:

Grade 0	No Pain
Grade 1	Mild Pain
Grade 2	Moderate Pain
Grade 3	Severe Pain

2) Itching in ear (Kandu)

Grade 0	No Itching
Grade 1	Mild Itching
Grade 2	Moderate Itching
Grade 3	Severe Itching

Objective criteria can be considered as per patient

3) Shwayathu (Swelling)

- 0 – No Swelling (Lumen of external canal remains Patent)
- +
- ++ – Lumen of external ear canal reduced by 10-20%
- +++ – Lumen of external ear reduced by 20-40%
- ++++ – Lumen of external canal reduced by 40-60 %
- +++++ – Lumen of external canal reduced by 60-80%

VAS (Visual analogue Scale) for pain measurement

- i. No pain - 0
- ii. Moderate pain - 5
- iii. Severe Pain - 10

Selection of Drugs

Karnashoolhar tail Will be prepared under the guidance of experts from the department of Rasashastra and Bhaishajya kalpana of our college and Kshar tail will be purchased from the market.

Karnapurana Procedure

The entire procedure of Karnapurana broadly can be divided into 3 steps.

1. PURVA KARMA

Patients should be made to lie down on right or left lateral position depending on the affected side. Gentle massage with lukewarm oil around the ear for a short period should be done. Mild hot fomentation around the ear should be done.

2. PRADHANA KARMA

The medicated liquid (oil) should be gently warmed by keeping in luke warm water. The external auditory canal should be straightened by pulling the pinna backward and upwards. The liquid (oil) should be poured in drops till the ear canal is filled up.

3. PASHCHATA KARMA

The excess oil should be taken out of the external auditory canal by dry cotton. After retaining the medicated oil for the prescribed time, The ear should be cleaned with dry cotton mopping.

OBSERVATIONS AND RESULTS

The present study is based on 80 cases divided in two groups as Trial Group and Control Group. 40 cases were registered in each group.

They were registered in college O.P.D. and completed the study. The present study is based on the patients who came for regular follow-up and completed study satisfactorily. So the demographic and clinical data is based on 80 patients.

DISCUSSION

Primarily results were assessed with the subjective parameters like karnashoth, karnashoola, karnakandu. All the patient selected for studies were present with karnashool, karnashoth, karnakandu. Clinical trial revealed significant improvement in patients.

CONCLUSION

The disease Karnashool discuss with special reference of Otitis externa from its derivation to line of treatment.

The diagnosis was made on the basis of signs and symptoms described in Ayurvedic and Modern texts, the symptoms present in otitis external.

The present research was conducted in small samples with limited parameters available. There is need for further research for large samples adopting various parameters like culture and sensitivity that would benefit humanity. At large is the further scope of this studying.

REFERENCE

1. Charak Samhita; ed 2009; Yadavji Trikamji Acharya, Chaukhambha Publication.
2. Sushrut Samhita; 2010; Vd. Anantaram Sharma; Chaukhambha Surbhartiprakashan.
3. Sharangdhar Samhita; Ed-2008; Acharya sharangdhar; Chaukhambhasurbharati publication.
4. Research methodology and medical statistics 1st ed.; 2006; Dr. Sarpotdar and Dr. Bhor; Manikarnika publication.
5. Methods in biostatistics 7th edition; 2010; Dr. B. K. Mahajan; Jaypee brothers.

MODERN

- 1) A short textbook of ENT, Diseases by K. B. Bharagava, S. K. Bhargava & T. M. Shah, 7th Edition.

- 2) Disease of Ear Nose & Throat by P. L. Dhingra, 5th Edition.
- 3) Scott Brown's Otolaryngology 5th Edition.
- 4) Otorhinolaryngology –Zakir Hussain, Editor-Sasi kumaran Nair 2nd Edition.
- 5) Textbook of Ear Nose & Throat diseases by Dr. Mohd. Maqbool 4th Edition.
- 6) Essential of medical pharmacology by K.D. Tripathy, 5th edition.