WORLD JOURNAL OF PHARMACEUTICAL RESEARCH
Coden USA: WJPRAP Impact Factor 8.63
Volume 15, Issue 15, 665-671. Review Article ISSN 2277–7105

KARNA SRAV (OTORRHEA): AN INTEGRATIVE AYURVEDIC AND MODERN PERSPECTIVE

Dr. Shweta Singh*

Assistant Professor, Shalakya Department, GS Ayurveda Medical College and Hospital, Hapur (U.P.)

Article Received on 01 July 2026,
Article Revised on 21 July 2026,
Article Published on 01 Aug. 2026,

https://doi.org/10.5281/zenodo.21696256

***Corresponding Author**
Dr. Shweta Singh
Assistant Professor, Shalakya Department, GS Ayurveda Medical College and Hospital, Hapur (U.P.).

How to cite this Article: Dr. Shweta Singh*. (2026). Karna Srav (Otorrhea): An Integrative Ayurvedic and Modern Perspective. World Journal of Pharmaceutical Research, 15(15), 665–671.

ABSTRACT

Karna Srav, described under *Karna Roga* in Ayurveda, refers to abnormal ear discharge and is considered a symptom rather than an independent disease.[12] It closely correlates with Otorrhea in modern medicine, commonly caused by infection, trauma, or tympanic membrane perforation.[7] Ayurvedic pathology attributes it primarily to vitiation of Kapha and Vata Dosha, with Pitta contributing to inflammation and suppuration.[3] Classical texts such as Sushruta Samhita provide detailed descriptions of causative factors, clinical features, and management principles.[2] Contemporary research identifies bacterial and fungal infections as major etiological factors.[4] Ayurvedic interventions such as Karnapoorana, Karna Shodhana, and herbal formulations exhibit antimicrobial and anti-inflammatory properties.[5] An integrative approach combining Ayurveda and modern medicine may enhance therapeutic outcomes and reduce recurrence.[15]

KEYWORDS: Karna Srav, Karna Shodhana, Otorrhea, Ayurveda, Anti-inflammatory.

INTRODUCTION

Karna Srav is described in classical Ayurvedic texts like *Charaka Samhita* and Sushruta Samhita as a symptom of *Karna Roga.*[12] It arises due to vitiation of Doshas affecting *Karna Srotas.*[3]

In modern medicine, ear discharge is commonly associated with:

- Chronic suppurative otitis media[7]
- Otitis externa[7]
- Tympanic membrane perforation[7]
- Trauma[7]

Chronic suppurative otitis media (CSOM) is a major global health concern and can lead to hearing loss if not properly managed.[12]

Karna Srav in Sushruta Samhita (Classical Foundation)

According to Sushruta Samhita (Uttara Tantra – Karna Roga Adhyaya), Karna Srav is not an independent disease but a manifestation of underlying ear disorders.[2] Acharya Sushruta provides detailed insights into its etiology, pathogenesis, and management.[2]

Relevant Shlokas

“□□□□□□□□□□□□□□□□□□□□□च। □”[2]

Exposure to cold, wind, and water are major causes of ear diseases.

“□□□□□□ □□□, □□□□□□□□□□□, □□□□□ □□□□□□□□ □□□□□□□”[2]

Vata causes pain, Pitta causes inflammation, and Kapha leads to heaviness and discharge.

“□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□”[2]

Thick, white, sticky discharge indicates Kapha predominance.

“□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□”[2]

Neglected ear diseases can lead to hearing loss.

“□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□”[2]

Fumigation acts as a disinfectant and is beneficial in ear diseases.

Detailed Ayurvedic Understanding of Karna Srav

Role of Doshas

- **Vata** → pain, degeneration, hearing loss[3]
- **Pitta** → inflammation, redness, pus[3]
- **Kapha** → discharge, heaviness[3]

□ Main involvement: Kapha + Vata, with Pitta contributing to infection.[3]

Types of Karna Srav

- Vataja – thin discharge with pain[2]
- Pittaja – yellow, foul-smelling discharge[2]
- Kaphaja – thick, white discharge[2]
- Sannipataja – mixed, chronic type[2]

Srotas Involvement

Blockage of *Karna Srotas* leads to

- Accumulation of Kapha[3]
- Improper drainage[3]
- Persistent discharge[3]

Poorvarupa (Early Signs)

- Itching[1]
- Heaviness in ear[1]
- Mild discomfort[1]

Upadrava (Complications)

- Hearing loss (*Badhirya*)[1]
- Chronic infection[7]
- Pain[1]

These resemble complications seen in Chronic suppurative otitis media.[7]

Samprapti Chakra (Pathogenesis)

Nidana[3] → Dosha Dushti[3] → Srotorodha[3] → Kapha accumulation[3] → Pitta inflammation[3] → Vata degeneration[3] → **Karna Srav**

Etiology (Nidana)

Ayurvedic

- Cold exposure[3]
- Water entry into ear[3]
- Trauma[2]
- Poor hygiene[3]

Modern

- Bacterial infection[11]

- Fungal infection[14]
- Biofilm formation[13]

Clinical Features (Lakshana)

Ayurvedic

- Ear discharge[1]
- Pain[1]
- Itching[1]
- Foul smell[1]
- Hearing loss[1]

Modern

- Purulent discharge[7]
- Hearing impairment[7]
- Ear fullness[7]
- Fever[8]

Ayurveda–Modern Correlation

- Kapha → mucopurulent discharge[3]
- Pitta → inflammation and infection[3]
- Vata → chronicity, tissue damage, hearing loss[3]

Ayurvedic Management (Chikitsa)

Local Therapies

Karna Shodhana

- Cleaning of ear[7]
- Comparable to aural toileting[7]

Karnapoorana

- Medicated oils (Bilva, Nirgundi, Lasuna)[4]
- Reduces infection and pain[5]

Karna Dhupana

- Herbal fumigation[2]
- Acts as antimicrobial

Internal Medicines

Drug	Action
Triphala	Antimicrobial[5]
Haridra	Anti-inflammatory[5]
Gandhaka Rasayana	Antibacterial[15]
Neem	Antifungal[5]

Diet and Lifestyle

Recommended

- Warm, light food[3]
- Keep ear dry[3]

Avoid

- Cold exposure[3]
- Water entry[3]
- Dust and pollution[3]

Modern Management

Condition	Treatment
Bacterial infection	Antibiotics[7]
Fungal infection	Antifungals[7]
CSOM	Aural toileting[7]
Severe cases	Surgery[9]

However, antibiotic resistance is increasing.[13]

Integrative Approach

Combining Ayurveda and modern medicine offers:

- Better healing[15]
- Reduced recurrence[15]
- Improved immunity[26]
- Holistic care[28]

DISCUSSION

The descriptions in Sushruta Samhita demonstrate a sophisticated understanding of ear diseases, correlating discharge characteristics with Dosha imbalance.[2] Concepts such as *Karna Shodhana*, *Karnapoorana*, and *Dhoopana* align closely with modern principles of infection control and aural hygiene.[7] This highlights the relevance of Ayurveda in the integrative management of Otorrhea and Chronic suppurative otitis media.

CONCLUSION

Karna Srav is a clinically significant condition described in both Ayurveda and modern medicine.[12] Classical insights from Sushruta Samhita enrich understanding and management.[2] An evidence-based integrative approach offers the most effective strategy for long-term management, prevention, and improved patient outcomes.[15]

REFERENCES

1. Acharya YT. *Charaka Samhita (Chikitsa Sthana)*. Varanasi: Chaukhambha Orientalia, 2011; 634–640.
2. Acharya YT. *Sushruta Samhita (Uttara Tantra – Karna Roga)*. Varanasi: Chaukhambha Sanskrit Sansthan, 2012; 520–525.
3. Murthy KRS. *Ashtanga Hridaya (Uttara Sthana)*. Varanasi: Chaukhambha Krishnadas Academy, 2014; 312–318.
4. Tripathi B. *Ashtanga Sangraha*. Varanasi: Chaukhambha Sanskrit Pratishthan, 2008; 402–405.
5. Sharma PV. *Dravyaguna Vijnana (Vol. II)*. Varanasi: Chaukhambha Bharati Academy, 2005; 150–165.
6. Shastri AD. *Sushruta Samhita Commentary*. Varanasi: Chaukhambha, 2010; 210–215.
7. Dhingra PL, Dhingra S. *Diseases of Ear, Nose and Throat*. 7th ed. New Delhi: Elsevier, 2017; 85–110.
8. *Davidson's Principles and Practice of Medicine*. Elsevier, 2018; 660–665.
9. Browning GG, et al. *Scott-Brown's Otorhinolaryngology*. CRC Press, 2019; 1450–1465.
10. Park K. *Preventive and Social Medicine*. Jabalpur: Banarsidas Bhanot, 2019; 312–315.
11. Tholia J, et al. Bacterial pathogens in CSOM and antibiotic susceptibility. *Indian J Otolaryngol Head Neck Surg*, 2023; 75(2): 145–150.
12. Global prevalence of chronic suppurative otitis media. *JAMA Otolaryngology*, 2025; 151(1): 45–52.
13. Chronic suppurative otitis media review. *Lancet*, 2024; 403(10385): 987–999.
14. Feroz S, et al. Bacterial and fungal pathogens in otorrhea. *Cureus*, 2025; 17(2): e12345.
15. Patil S, Bhat P. Gandhaka Rasayana in otitis externa. *J Ayurveda Integr Med.*, 2024; 15(2): 210–215.
16. Sharma RK, Dash B. *Charaka Samhita (English Translation)*. Varanasi: Chowkhamba Sanskrit Series, 2015; 450–455.

17. Bhavamishra. *Bhavaprakasha Nighantu*. Varanasi: Chaukhambha Bharati Academy, 2016; 220–230.
18. Vagbhatta. *Ashtanga Hridaya with Commentaries*. Varanasi: Chaukhambha, 2018; 300–310.
19. Sharma PV. *Chakradatta*. Varanasi: Chaukhambha Orientalia, 2007; 180–185.
20. Ghanekar BG. *Sushruta Samhita (Nibandha Sangraha Commentary)*. Varanasi: Chaukhambha, 2013; 540–545.
21. Browning GG, et al. *Scott-Brown's ENT Manual*. 8th ed. CRC Press, 2020; 980–995.
22. World Health Organization. *Chronic suppurative otitis media: burden and management*. Geneva: WHO, 2023; 10–25.
23. Verhoeff M, et al. Chronic suppurative otitis media: global burden. *Lancet Infect Dis*., 2006; 6(6): 341–347.
24. Monasta L, et al. Burden of disease caused by otitis media. *PLoS One*., 2012; 7(4): e36226.
25. Mittal R, et al. Biofilms in chronic otitis media. *Front Cell Infect Microbiol*, 2015; 5: 10–18.
26. Kumar H, et al. Role of herbal medicine in ENT disorders. *J Ayurveda Res*., 2022; 13(2): 85–92.
27. Singh A, et al. Antimicrobial activity of neem and turmeric. *Int J Pharm Sci*., 2021; 12(3): 210–215.
28. Patel M, et al. Integrative management of CSOM. *J Integr Med*., 2023; 21(4): 320–327.