

AN AYURVEDIC APPROACH IN THE MANAGEMENT OF KARNASRAVA W.S.R. CSOM – A CASE REPORT

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ABSTRACT

Karnasrava is a common condition described under Karna Roga in Ayurveda which is characterized by continuous ear discharge with pain, heaviness, and hearing impairment. It is almost identical to CSOM as understood in modern medicine. Despite advances in antimicrobial therapy, recurring infections and discharge persist as significant therapeutic challenges. Ayurveda recommends local treatments combined with internal treatments to treat the infection, alleviate symptoms and promote tissue repair. This report focuses on the effective management of Karnasrava by Karna Dhoopana and traditional Ayurvedic formulations. **Case Presentation:** A female patient attended the Shalakya Tantra Outpatient Department of Mai Bhago Ayurvedic Medical College and Hospital with complaints of right ear pain, purulent ear discharge, and heaviness for two months. Clinical evaluation confirmed the diagnosis of Karnasrava (CSOM). The patient did daily ear

mopping followed by Karna Dhoopana using Yashtimadhu, Haridra, and Vidanga Churna for 7 days. Internal medications were Sarivadi Vati (2 tablets twice daily) and Triphala Guggulu (2 tablets twice daily) for seven days. **Outcome:** The patient demonstrated marked reduction in ear discharge, pain, and heaviness without any adverse effects. No recurrence was observed during the short-term follow-up. **Conclusion:** This case highlights the potential role

of Karna Dhoopana as an effective local therapy when combined with appropriate Ayurvedic internal medicines in the management of uncomplicated Karnasrava.

KEYWORDS: Karnasrava, CSOM, Karna Dhoopana, Ayurveda, Ear discharge, Shalakya Tantra.

INTRODUCTION

Chronic Suppurative Otitis Media (CSOM) is one of the most common chronic ear diseases worldwide and is a leading cause of preventable hearing impairment in developing countries. It is characterized by persistent or recurrent ear discharge (otorrhoea) through a perforated tympanic membrane with chronic inflammation of the middle ear cleft. The disease affects people of all ages and if untreated can cause conductive hearing loss, mastoiditis, facial nerve paralysis, labyrinthitis, and meningitis, and brain abscess. The burden of CSOM is significantly greater in low and middle-income countries with recurrent upper respiratory tract infections, poor hygiene, overcrowding, malnutrition, and inadequate access to timely healthcare.^[1,2]

In Ayurveda, ear disorders are described in detail in the Suśruta Saṃhitā, Aṣṭāṅga Hṛdaya and Aṣṭāṅga Saṅgraha as Karna. Among these, Karnasrava is distinguished by continuous or intermittent discharge from the ear accompanied by pain (Karnashoola), heaviness (Gaurava), itching (Kandu), foul smell and varying degrees of hearing impairment. It results from vitiation of Kapha and Pitta Doṣa, involving Rakta and Māṃsa Dhātu. Aggravated Kapha causes discharge and blockage while Pitta brings inflammation, suppuration, pain, and tissue damage. Classical Ayurvedic literature supports the use of local treatments and internal medications to eradicate infection, reduce inflammation, promote wound healing, and restore ear physiology.^[3,4]

Clinically, Karnasrava is similar to the tubotympanic variety of Chronic Suppurative Otitis Media, both conditions exhibiting symptoms of persistent ear discharge, pain, heaviness and impaired hearing. Today, management of CSOM consists of aural toileting, topical/systemic antibiotics, and surgery (e.g., tympanoplasty or mastoidectomy). But growing antimicrobial resistance, repeated infections, cost of treatment, and the requirement of long-term therapy have prompted search for alternative safe and economical therapies that can enhance long-term outcomes.^[1,5]

Through both Sthānika Chikitsā (local therapies) and Śamana Chikitsā (internal drugs), Ayurveda provides a comprehensive approach to managing Karnasrava. Karna Dhoopana, or medicated fumigation of the ear, is one of the local treatments that has been reported to be successful in treating diseases related to infection, excessive discharge, and persistent irritation. Because of the medicinal vapors' Krimighna (antimicrobial), Śothahara (anti-inflammatory), Ropaṇa (wound-healing), and Kapha-Pitta Śāmaka qualities, they help control local infection, minimize discharge, and promote tissue repair. By addressing the underlying Doṣa imbalance, lowering inflammation, and encouraging the regeneration of damaged tissues, internal medicines support local therapy.^[3,4,6]

In this instance, Yaṣṭimadhu (*Glycyrrhiza glabra*), Haridrā (*Curcuma longa*), and Vidanga (*Embelia ribes*)—drugs well-known in Ayurveda for their Krimighna, Śothahara, and Ropaṇa properties—were used to execute Karna Dhoopana. Triphala Guggulu, known for its anti-inflammatory, antibacterial, and wound-healing properties, and Sarivadi Vati, a traditional composition recommended in several Karna Rogas, were given to the patient at the same time. The mixture was chosen to accomplish local cleaning, lessen suppuration and inflammation, promote tissue repair, and stop recurrence.^[7-11]

The present case report describes the successful management of Karnasrava corresponding to Chronic Suppurative Otitis Media through an integrative Ayurvedic approach comprising daily ear mopping, Karna Dhoopana, and classical oral formulations. The report aims to highlight the therapeutic potential of these interventions and contribute to the existing clinical evidence supporting Ayurvedic management of chronic suppurative ear diseases.^[3-11]

PATIENT INFORMATION

PARAMETER	DETAILS
Gender	Female
Age	29 years
Occupation	Teacher
OPD	Shalakya Tantra
Hospital	Mai Bhago Ayurvedic Medical College & Hospital
Chief complaints	Right ear pain, pus discharge, heaviness
Duration	2 months

CLINICAL FINDINGS

• GENERAL EXAMINATION

BP – 130/90mmHg

Pulse- 86/min

Respiratory rate – 18/min

Temperature – 98.6 Celsius

Within normal limits.

LOCAL EXAMINATION

• OTOSCOPIC FINDINGS

Right ear

- External auditory canal filled with mucopurulent discharge.
- Mild congestion of canal wall.
- Tympanic membrane could not be completely visualized initially because of discharge.
- No evidence of mastoid tenderness.

Left ear

Normal.

TIMELINE

Date	Clinical Event
Day 1	Patient reported to OPD
Day 1	Diagnosis of Karnasrava
Day 1–7	Ear mopping daily
Day 1–7	Karna Dhoopana daily
Day 1–7	Sarivadi Vati + Triphala Guggulu
Day 7	Clinical reassessment
Day 21	Follow-up

• DIAGNOSTIC ASSESSMENT

AYURVEDIC DIAGNOSIS- KARNASRAVA

MODERN DIAGNOSIS- CHRONIC SUPPURATIVE OTITIS MEDIA

• SAMPRAPTI GHATAKA

Factor	Finding
Dosha	Kapha-Pitta
Dushya	Rakta, Mamsa
Agni	Mandagni
Ama	Present
Srotas	Rasavaha, Pranavaha
Adhisthana	Karna
Roga Marga	Bahya

DIFFERENTIAL DIAGNOSIS

- Karnapaka
- Karnashoola
- Otitis externa
- Acute suppurative otitis media

THERAPEUTIC INTERVENTION**LOCAL THERAPY- EAR MOPPING**

Performed daily under aseptic precautions before every sitting.^[12]

KARNA DHOOPANA**INGREDIENTS**

- Yashtimadhu Churna
- Haridra Churna
- Vidanga Churna

Duration

Daily for seven days.

INTERNAL MEDICINES

Medicine	Dose	Frequency	Duration
Sarivadi Vati	2 tablets	Twice daily	7 days
Triphala Guggulu	2 tablets	Twice daily	7 days

ASSESSMENT CRITERIA

Symptom	Grade 0	Grade 1	Grade 2	Grade 3
Pain	None	Mild	Moderate	Severe
Ear discharge	None	Mild	Moderate	Profuse
Ear heaviness	None	Mild	Moderate	Severe
Hearing difficulty	None	Mild	Moderate	Severe

CLINICAL OUTCOME**SYMPTOM SCORE**

Symptom	BT	AT
Pain	2	0
Ear discharge	3	1
Heaviness	2	0
Hearing loss	1	1

OTOSCOPIC IMPROVEMENT

Before treatment

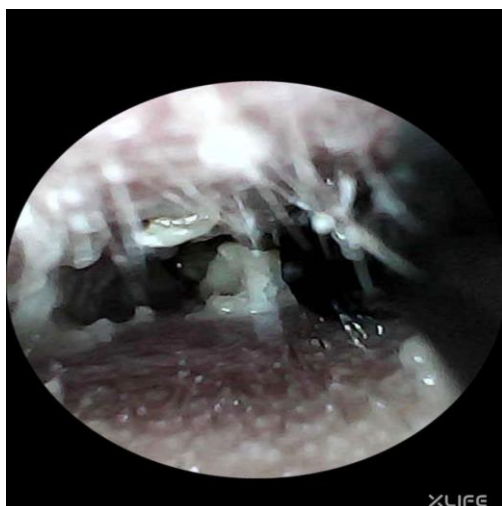
- Profuse mucopurulent discharge.

After treatment

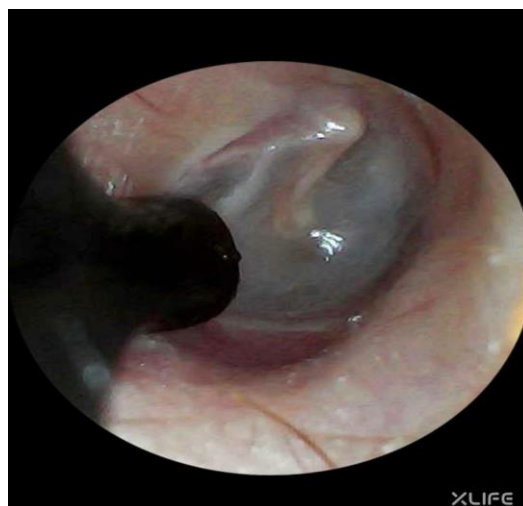
- Ear canal dry.
- Congestion reduced.
- No fresh discharge.

FOLLOW-UP

The patient was reviewed two weeks after completion of therapy. No recurrence of ear discharge or pain was reported. The ear remained dry, and the patient was satisfied with the treatment. No adverse drug reactions were noted.



Before Treatment



After Treatment

DISCUSSION

This section should be the strongest part of the paper (approximately 1200–1500 words). Discuss.

- Ayurvedic concept of Karnasrava.
- Dosha involvement.
- Mechanism of Karna Dhoopana.
- Pharmacological actions of:
 - Yashtimadhu
 - Haridra
 - Vidanga

- Sarivadi Vati
- Triphala Guggulu
- Correlate Ayurvedic concepts with the pathology of CSOM.
- Compare your findings with published Ayurvedic studies on Karna Roga or CSOM.

Patient Perspective

"The patient reported satisfactory relief in pain and ear discharge after completing the treatment. She expressed satisfaction with the Ayurvedic management and reported no discomfort during the treatment procedures."

Informed Consent

Written informed consent was obtained from the patient for publication of this case report. Patient anonymity has been maintained.

CONCLUSION

REFERENCES

1. Bhutta MF, Leach AJ, Brennan-Jones CG. Chronic suppurative otitis media. *Lancet*, 2024; 403(10441): 2339-2348. doi:10.1016/S0140-6736(24)00259-9.
2. World Health Organization. Chronic suppurative otitis media: burden of illness and management options. Geneva: World Health Organization, 2004.
3. Sushruta. Sushruta Samhita of Sushruta with Nibandhasangraha commentary of Dalhanacharya. Edited by Yadavji Trikamji Acharya. Varanasi: Chaukhamba Surbharati Prakashan, 2014.
4. Vagbhata. Ashtanga Hridaya with Nirmala Hindi commentary. Edited by Brahmanand Tripathi. Delhi: Chaukhamba Sanskrit Pratishthan, 2022.
5. Chong LY, Head K, Walters JA, Schilder AGM, Burton MJ, Brennan-Jones CG. Topical versus systemic antibiotics for chronic suppurative otitis media. *Cochrane Database Syst Rev*, 2021; 2(2): CD013053.
6. Head K, Chong LY, Bhutta MF, Morris PS, Vijayasekaran S, Burton MJ, et al. Topical antiseptics for chronic suppurative otitis media. *Cochrane Database Syst Rev*, 2020; 1(1): CD013055.
7. Wahab S, Annadurai S, Abullais SS, Das G, Ahmad W, Ahmad MF, et al. Glycyrrhiza glabra (Licorice): a comprehensive review on its phytochemistry, biological activities,

- clinical evidence and toxicology. *Plants (Basel)*, 2021; 10(12): 2751. doi:10.3390/plants10122751.
8. Memarzia A, Khazdair MR, Behrouz S, Gholamnezhad Z, Jafarnejhad M, Saadat S, et al. Experimental and clinical reports on anti-inflammatory, antioxidant, and immunomodulatory effects of *Curcuma longa* and curcumin, an updated and comprehensive review. *Biofactors*, 2021; 47(3): 311-350. doi:10.1002/biof.1716.
 9. Sahu R, Kannan GM. Embelin and its role in chronic diseases. *Phytother Res*, 2016; 30(11): 1732-1742. doi:10.1002/ptr.5684.
 10. Muguli G, Gowda VD, Dutta V, Jadhav AN, Mendhe BB, Paramesh R, et al. A contemporary approach on design, development, and evaluation of Ayurvedic formulation—Triphala Guggulu. *Ayu*, 2015; 36(3): 318-322. doi:10.4103/0974-8520.182748.
 11. Muruganandam AV, Kumar V, Pandey R, et al. Triphala promotes healing of infected full-thickness dermal wound. *J Surg Res*, 2007; 142(1): 45-51.
 12. Bhutta MF, Head K, Chong LY, Daw J, Schilder AGM, Burton MJ, et al. Aural toilet (ear cleaning) for chronic suppurative otitis media. *Cochrane Database Syst Rev*, 2020; 9(9): CD013057.