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# "REVIEW OF BILWADI TAIL KARNAPOORAN IN KARNANAD( TINNITIS) : A SINGLE CASE STUDY"

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**Abstract:**

**Background:** Tinnitus, known as *Karnanada* in Ayurveda, is characterized by the perception of ringing, buzzing, or other sounds in the absence of an external auditory stimulus. It is a common condition that can significantly impair quality of life by affecting concentration, sleep, and emotional well-being. According to Ayurvedic principles, *Karnanada* is predominantly caused by vitiated *Vata Dosha*, often associated with *Kapha* obstruction in the auditory pathways. *Karnapoorana*, the therapeutic instillation of medicated oil into the external auditory canal, is a well-established treatment modality for managing ear disorders.

**Case Presentation:** A 26-year-old female presented with complaints of persistent ringing in the ear, intermittent ear discomfort, dryness of the external auditory canal, and subjective hearing blockage. Based on Ayurvedic clinical assessment, she was diagnosed with *Karnanada*.

**Intervention:** The patient underwent *Karnapoorana* using lukewarm Bilwadi Taila once daily for seven consecutive days following standard Ayurvedic therapeutic procedures.

**Results:** At the end of the treatment period, the patient showed a marked reduction in tinnitus intensity, improvement in ear discomfort and dryness, and relief from the sensation of ear blockage. No adverse events or treatment-related complications were observed during the study.

**METHODOLOGY**:

The diagnosis is established based on the presence of the Vata-Kalpha predominant symptoms described in the classical texts (Sushruta Samhita):

1.Karnanada (Subjective Ringing/Noises): The cardinal sign where the patient perceives various phantom sounds—such as ringing, buzzing, or whistling—in the absence of an external acoustic stimulus, primarily due to aggravated Vata Dosha in the auditory channels (ShrotovahaSrotas).

2.Karnakshweda (Sound of a Flute/Specific Tones): A distinct variation characterized by a constant high-pitched or blowing sound, closely mimicking the acoustic variations found in clinical tinnitus.

3.Badhirya (Associated Hearing Loss): Gradual decrease in auditory acuity, which often coexists with Karnanada due to the progressive tissue depletion (Dhatu Kshaya) of the auditory apparatus.

4.Karna-Shoola / Rookshata (Otalgia or Dryness): Intermittent pricking pain or a sensation of dryness and stiffness within the external auditory canal, resulting from the loss of natural Sneha (moisture/cerumen).

These symptoms are highly comparable to Tinnitus and its associated neuro-otological pathologies in modern medicine:

1.Neurosensory Hyperactivity: Aberrant neural firing within the cochlea and auditory cortex, correlating to the erratic, chala (mobile) nature of vitiated Vata.

2.Conduction Obstruction: Impeded sound conduction or altered pressure within the middle ear, caused by Kapha blocking the micro-channels (Srotas) or Eustachian tube dysfunction.

3.Vascular & Nerve Degeneration: Microvascular insufficiency to the inner ear (cochlea) and auditory nerve, leading to cellular ischemia and subsequent phantom noise generation.

Karnapoorana (local instillation of medicated oils into the ear) is a specialized Kriya Kalpa uniquely indicated for Karnanada, especially when using a formulation like Bilva Taila.

Because Karnanada is fundamentally a Vata-driven degenerative disorder often accompanied by Kapha obstruction, the treatment methodology focuses on:

* Snehana (Oleation) &Brimhana (Nourishment): To directly counteract the Rooksha (dry) and Chala (unstable) qualities of Vata, thereby soothing the auditory nerve.

* Srotoshodhana (Channel Cleansing): Utilizing the Deepana (appetizer) and Pachana (digestive) properties of ingredients like Bilva to clear local Kapha blockages, restoring normal acoustic conduction.

**INTRODUCTION :**

Tinnitus is a common otological symptom characterized by the perception of sound, such as ringing, buzzing, hissing, or roaring, in the absence of an external auditory stimulus. It affects individuals across all age groups and can adversely influence communication, sleep, concentration, and overall quality of life. Despite advances in modern medicine, the management of tinnitus remains challenging because of its multifactorial etiology and the absence of a universally effective treatment. Consequently, there is increasing interest in exploring traditional systems of medicine, including Ayurveda, for safe and effective therapeutic approaches.

In Ayurveda, tinnitus is correlated with **Karnanada**, one of the **Karnarogas** (ear diseases) described in the **Sushruta Samhita**. It is predominantly caused by the aggravation of **Vata Dosha**, either alone or associated with **Kapha Avarana**, leading to functional impairment of the **Shabdavaha Srotas** (auditory pathways). The disease is characterized by the perception of abnormal sounds such as ringing, buzzing, roaring, or flute-like noises, often accompanied by dryness of the external auditory canal, ear discomfort, ear blockage, and diminished hearing.

These features closely resemble the clinical presentation of subjective tinnitus described in contemporary medicine. Sushruta has included *Karnanada* among the important ear disorders while describing **Karnaroga** as follows:

घोषो नादः क्ष्वेडिका च बाधिर्यं प्रतिनूक्तिका ।कर्णस्रावः कर्णकण्डूः कर्णशूथास्तथैव च ॥

*Suśruta Saṃhitā, Uttara Tantra 21/3*

The pathogenesis of *Karnanada* is also explained in the **Sushruta Samhita**, where aggravated **Vata Dosha** localized in the auditory passages produces different sounds in the absence of an external source:

कर्णस्रोतःस्थिते वाते शृणोति विविधान् स्वनान् ।भेरीमृदङ्गशङ्खानां नादं वा कर्णनादतः ॥

*Suśruta Saṃhitā, Uttara Tantra 21/5*

Among the various treatment modalities described in **Shalakya Tantra**, **Karnapoorana** is considered an important local therapeutic procedure for diseases caused predominantly by aggravated **Vata Dosha**. The procedure involves the instillation and retention of lukewarm medicated oil in the external auditory canal to provide lubrication, reduce dryness, pacify aggravated Vata, and improve the physiological function of the ear. The importance of this therapy is

highlighted in the **Sharangadhara Samhita**, which states:

हन्ति मन्याशिरःकर्णशूलं कर्णामयान् जयेत् ।पूरणं कटुतैलेन हितं वातघ्नमेव च ॥

*Śārṅgadhara Saṃhitā, Uttarakhanda 11/1*

**Bilwadi Taila** is a classical Ayurvedic formulation possessing **Vata-Kapha Shamaka**, **Snehana (oleating)**, **Brimhana (nourishing)**, and **Srotoshodhana (channel-cleansing)** properties. When administered through **Karnapoorana**, it is believed to alleviate abnormal auditory sensations, improve local tissue nourishment, and restore the normal functioning of the auditory pathways. Although this therapy has been traditionally advocated for the management of ear disorders, scientific evidence regarding its effectiveness in tinnitus is still limited. Therefore, the present case study was undertaken to evaluate the therapeutic effect of **Bilwadi Taila Karnapoorana** in the management of **Karnanada** with special reference to tinnitus and to contribute further clinical evidence supporting this classical Ayurvedic intervention.

**Aim**: To review the efficacy of bilwadi tail karnapooran in Karnanad with special reference to Tinnitus

**MATERIALS AND METHODS:**

Study design:

An open label clinical study

Source of data:

Patient attending the Shalakyatantra OPD diagnosed with Karnanad (Tinnitus )

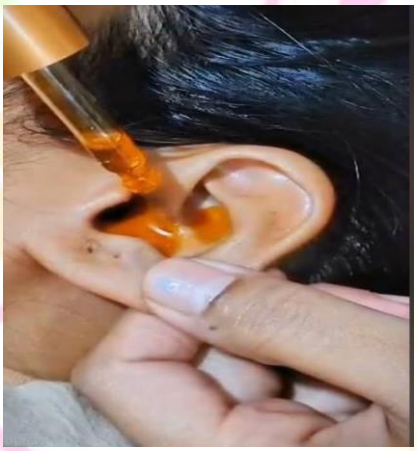
Sample Size: A single patient diagnosed with signs and symptoms of Karnanad / Tinnitus disease.

DRUG:

फलंबिल्वस्यमूत्रेणपिष्ट्वातैलंविपाचयेत्।आजक्षीरंतद्वितरेत्बाधिर्येकर्णपूरणे॥

— भैषज्यरत्नावली, कर्णरोगचिकित्सा (६२/२९)

Used a GMP-approved drug for the clinical trials.



**KARMA PROCEDURE:**

1. Preparation

* Temperature: Warm the Bilwadi Taila indirectly via a water bath until lukewarm (Sukhoshna). Test on your wrist first to prevent vertigo.

* Cleaning: Gently clean the patient's external ear canal with sterile cotton.

2. Positioning

* Position: Have the patient lie in a lateral recumbent (side-lying) position with the affected ear facing upward.

3. Application

* Canal Straightening: Pull the pinna upward and backward (for adults) to straighten the canal.
* Instillation: Administer 5 to 10 drops along the canal wall. Hold the dropper 1–2 cm above the ear; do not touch the skin.
* Massage: Gently press the tragus in a pumping motion to help the oil penetrate deeply and release air bubbles.

4. Post-Care

* Retention: Keep the patient still for 5 to 10 minutes to allow maximum absorption.
* Drainage: Place a cotton ball at the ear opening, have the patient turn their head to the opposite side to drain excess oil, and wipe clean.

**Mode of Action of Bilwadi Taila Karnapoorana**

According to Ayurvedic principles, Karnanada is predominantly a Vata-pradhana disorder, often associated with Kapha obstruction in the auditory pathways. The clinical features such as ringing, buzzing, dryness of the ear canal, discomfort, and subjective hearing blockage indicate derangement of Vata Dosha along with impaired function of the Shabdavaha Srotas. Bilwadi Taila, when administered through Karnapoorana, acts locally on the affected auditory structures and helps restore the balance of Vata and Kapha.

The formulation possesses Snigdha (unctuous), Ushna (warming), and Vata-Kapha shamaka properties. The oil base provides lubrication to the external auditory canal, thereby reducing Rukshata (dryness), which is considered a major manifestation of aggravated Vata. The warming property of the medicated oil may improve local circulation and facilitate better nourishment of the auditory tissues.

Bilva and other ingredients of Bilwadi Taila are traditionally described as Srotoshodhaka (channel-cleansing) and Brimhana (nourishing). These actions may help remove localized obstruction, improve tissue nutrition, and support normal auditory conduction. From a modern perspective, the lukewarm oil may exert a soothing effect on the external auditory canal and tympanic membrane, reduce local irritation, and promote relaxation of surrounding tissues. Improved local blood flow and

maintenance of a protective lipid layer over the canal epithelium may further contribute to reduction in the perception of abnormal sounds.

Thus, the therapeutic effect of Bilwadi Taila Karnapoorana in this case may be attributed to Vata pacification, reduction of dryness, improvement of local tissue nourishment, clearance of auditory channel obstruction, and restoration of normal auditory function, resulting in relief from tinnitus-related symptoms.

**OBSERVATION:**

| Before t/t | After t/t |
|---|---|
| Karnanad (ringing/buzzing sound )+++ | Significant reduction in Karnanad .- |
| Karnashool(earache/discomfort ) +++ | Marked decrease in Karnashool .- |
| Karnarukshata(dryness of canal) +++ | Marked decrease in roughness and rukshata in ear canal .- |
| Karnabadhirya( subjective hearing block) +++ | Decreased in karnabadhirya- |

No adverse reactions observed.

**RESULTS:**

Bilwadi Taila Karnapurana showed statistically significant improvement in:

1.Reduction in subjective ringing and buzzing sounds (Karnanada).

2.Improvement in sound perception clarity and reduction of ear block (Karna-Avarodha).

3.Complete relief of Karna Rukshata (dryness) and localized Karna Shoola

**DISCUSSION**

Karnanada is a chronic, debilitating auditory condition characterized by subjective ringing, buzzing, or roaring sounds in the ear, primarily driven by a Vata-Kapha imbalance within the Shabda-vahaSrotas (auditory pathway). Bilwadi Taila Karnapurana (local instillation of

medicated oil) works through the following mechanisms:

* Balancing Vata-Kapha: The Ushna (warming), Tikshna (penetrating), and Snigdha (unctuous) properties of the formulation directly counteract the Ruksha (dry), Sheeta (cold), and Chala (unstable) qualities of aggravated Vata, while simultaneously liquefying and clearing obstructing Sama Kapha.

* Acoustic Nerve & Dermal Absorption: Provides an exogenous lipid medium (Tila Taila base) that easily penetrates the lipophilic layers of the tympanic membrane and external auditory meatus, delivering fat-soluble phytoconstituents directly to the deeper auditory structures and local nerve endings.

* Srotoshodhana (Channel Cleansing) Action: The active bio-ingredients of Bilva and the alkaline, sharp nature of Gomutra act as potent Srotoshodhaka agents. They dissolve cellular debris and clear localized blockages (Avarana) in the ear canal and micro-channels.

* Snehana and Brimhana (Nourishment & Healing): The Tila Taila combined with Aja Ksheera (goat's milk) acts as a deeply nourishing Brimhana agent. It rejuvenates degenerated auditory tissue, improves local cellular integrity, and strengthens the acoustic conduction mechanism.

* Enhancing Tympanic Flexibility: Restores the natural moisture and elasticity of the tympanic membrane by counteracting localized Rukshata (dryness). This ensures optimal vibration and conduction of sound waves, thereby reducing subjective sound distortions.

* Vata-Shamaka (Nervous Soothing): Calms hyper-excited nerve pathways within the Karna Shaskuli (auditory canal). Lubrication of the local acoustic nerve endings significantly reduces Karnachshweda (buzzing), Toda (pricking pain), and the distressing sensation of fullness.

* Thermal and Circulatory Stimulation: The Sukhoshna (lukewarm) application acts as a localized thermal stimulant. It induces mild vasodilation, increasing peripheral blood circulation to the inner ear and cochlear apparatus, which accelerates metabolic healing and relieves somatic tinnitus.

**CONCLUSION:**

BilwaditailaKarnapooran is an effective and safe external therapeutic modality for managingKarnanad . It significantly reduces rukshata and discomfort and Karnanad without adverse effects, making it a cost-effective alternative for long-term audiological health.

All the symptoms are pacified.

1.Limitations of study:

Only one patient studied

2.Scope of Study:

We can do this same study on greater sample size.

1. Ayurvedic Pharmacodynamics (SamraptiVighatana)

* Vata-Kapha Hara Property: Karnanada is primarily a Vatika disorder characterized by Rukshata and Chalatva in the Shabda-vahaSrotas (auditory pathway), often accompanied by Kapha obstruction (Avarana).

* Ushna & Tikshna Virya: The ingredients of Bilwadi Taila—specifically Bilva pulp and Gomutra—possess strong Ushna (heating) and Tikshna (penetrating) qualities. This effectively digests local Sama Kapha, dissolves obstructions, and clears the Srotas.

* Snehana&Brimhana: The base oil (Tila Taila) and Aja Ksheera (goat's milk) provide deep Snehana (nourishment) to the acoustic nerve and local tissues. This pacifies the aggravated Vata, restores the tissue elements (Dhatu-upachaya), and reverses Rukshata.

2. Modern Pharmacological Mechanism

* Local Lipophilic Absorption: The tympanic membrane and external auditory canal lining are highly lipophilic. Warm Tila Taila acts as an efficient vehicle, facilitating rapid dermal absorption of the active fat-soluble phytoconstituents of Bilva.

* Neuromuscular Relaxation via Thermal Effect: Administering the oil as Sukhoshna (lukewarm) stimulates local thermoreceptors. This increases peripheral blood circulation to the inner ear, relaxes the tympanic muscles (tensor tympani and stapedius), and reduces localized somatic tinnitus.

* Softening & Protection: The oil acts as an emollient, softening dry epithelial debris within the canal and creating a protective lipid barrier. This minimizes hyper-reactivity of the tympanic membrane to external atmospheric changes, lowering subjective noise perception.

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