Efficacy of *Dhoopana Karma* in the Management of *Pootikarna* with Special Reference to Active Tubotympanic CSOM

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Abstract

Objectives: To treat Active Tubotympanic CSOM (*Pootikarna*) case with *Ayurveda* Therapeutic Procedures and Shamanoushadhis. *Method:* The present case of Active Tubotympanic CSOM approached to OPD of KAHER BMK *Ayurveda* hospital with a complaints of Otorrhoea, Otalgia, Deafness, in Right ear Since 2 years and Headache, Running nose since one month. Symptoms were transient and severity increased since last 1month. Oto-scopic findings were documented in the form of the photographs. *Ayurvedic* Treatment Protocol is planned as per the disease condition which was included local therapy in the farm of Karna and Nasa *Dhoopana* with Haridra and Ghrita varti along with Steam inhalation for 7 days along with *Haridrakhanda* (2tsf) and *Triphala Guggulu* (2 tabs) orally twice daily after food. *Results:* There is significant decrease in the symptoms of CSOM viz. Otorrhoea, Otalgia, Deafness etc. and also major clinical changes pertaining to the size of perforation of Tympanic membrane seen in Otoendoscopy images. *Conclusion:* Chronic Suppurative Otitis Media (CSOM) causes recurrent or persistent discharge (Otorrhoea) through a perforation in the tympanic membrane and can lead to thickening of the middle ear mucosa and may lead into complications such as mucosal polyps & cholesteatom. CSOM can be correlated with the *Pootikarna* which can be cured through *Ayurvedic* therapeutic procedures and oral medications, which is cost effective and without any adverse drug reactions.

Keywords: CSOM; Pootikarna; Dhoopana; Haridra Khanda; Triphalaghrita & Triphala Guggulu.

Introduction

Chronic Suppurative Otitis Media (CSOM) is persistent inflammation of the middle ear or mastoid cavity. Synonyms include "chronic otitis media (without effusion)", chronic mastoiditis, and chronic tympanomastoiditis. CSOM is characterized by recurrent or persistent ear discharge (Otorrhoea) over 2–6 weeks through a perforation of the tympanic membrane. Typical findings may also include thickened granular middle ear mucosa, Mucosal polyps, and Cholesteatoma within the

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media with effusion, in which there is an intact tympanic membrane with fluid in the middle ear but no active infection and discharge from ear [1].

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middle ear. CSOM is differentiated from chronic otitis

The worldwide prevalence of CSOM is 65–330 million people, and 39–200 million (60%) suffer from clinically significant hearing impairment [2]. Chronic suppurative otitis media (CSOM) causes recurrent or persistent discharge (otorrhoea) through a perforation in the tympanic membrane, and can lead to thickening of the middle ear mucosa, mucosal polyps, and cholesteatoma. CSOM is a common cause of hearing impairment, disability, and poor scholastic performance, and can occasionally lead to fatal intracranial infections and acute mastoiditis, especially in resource-poor countries [3].

Shalakya branch deals with the diseases of Ear, Nose, Throat, Eyes, Head & Neck. *Pootikarna* is the disease mentioned under the heading of the Karna roga (Diseases of the Ear), which is characterised

by the Symptoms of Nirantara Puyasrava with or without vedana (Pus discharge from the ear with or without pain), where the symptoms are matching with that of CSOM.

Ayurveda has mentioned the treatment in the form of local, systemic and oral medications. *Dhoopana* karma is one of the *Ayurvedic* local therapy indicated in the Ear diseases to achieve relief from the disease. Oral drugs selected here are contained the drugs which are known for their Anti-inflammotroy, Antimicrobial, and immuno-modulatory effect.

Case Details

A female patient aged 23 years came to our care at 17/01/15, complained of Otorrhoea, Otalgia, Deafness, in Right ear Since 2 years and Headache, Running nose since one month. Symptoms were transient and severity increased since last 1month. Patient has approached many treatment centres and taken treatment from alternate system of medicine. The symptoms were relieved with oral and

topical medicines for time being and again same complaints were reoccurred, so for further management patient came to OPD of *Shalakya*, KAHER, *Ayurveda* Hospital, Shahapur, Belagavi.

Examination and Treatment

Patient Examined With Oto-endoscopy. Patient was having mucopurulent discharge which is tenacious and Tympanic membrane was showing the central perforation in Right ear and Tympanic membrane findings were as shown in Figure 1. Patient is advised the treatment Schedule as mentioned in the Table 1.

Results

There is complete relief from otorrhea, otalgia and the reduction in size of perforation of tympanic membrane which as shown in Figures 1 & 2. Also the associated complaints also completely reduced without any adverse reactions.

Table 1:

Treatment Day	Finding on otoscopic examination	Treatment
1 st Day	Mucopurulent discharge and Central perforation	Aural toileting done with <i>Nimbataila</i> F/b <i>Dhoopana</i> karma and Steam inhalation. Oral medicines 1. <i>Haridrakhanda</i> 2tsf/BD/After food 2. T. <i>Triphala</i> Guggulu 2tabs/BD/After food
2 nd Day	Mucopurulent discharge and Central perforation	Same
3rd Day	Reduction in Discharge Perforation +	Same
4th Day	Reduction in discharge	Same
5 th Day	Reduction in discharge	Same
6 th Day	Reduction in discharge	Same
7 th Day	Completely reduced Discharge	Dhoopana karma stopped, Only oral medicines continued. For one more week
14 th day	Completely reduced Discharge, Perforation size reduced	Same Oral medicines continued for one more week.



Fig. 1: TM before Treatment



Fig. 2: TM after Treatment

Discussion

Patient approached to the OPD with complaints of Otorrhea, Otalgia, Reduced hearing and Associated with Rhinorrhea, Headache. The symptoms and Clinical findings were of Active Tubotympanic variety of CSOM which can be considered as the Poootikarna where the samprapti was with Pitta and Kapha predominance and symptoms as mentioned above. Hence Haridradi Dhoopana karma and Steam inhalation is selected as the local therapy and Haridra khanda and Triphala Guggulu. Dhoopana karma is indicated in the treatment of the Pootikarna according to classical texts of Ayurveda. Inhalation of steam is beneficial in improving the aeration to the middle ear [4]. The ingredients in the Haridrakhanda, and Triphala Guggulu are known for their Antimicrobial and Anti-inflammatory actions as the formulations contains the drug which are known for their Antimicrobial and Anti-inflammatory, might have reduced the inflammation in the middle ear mucosa there by reducing symptoms and Healing the perforation of the Tympanic menmbrane. Haridra khanda is also act as Immuno-modulator [5,6]. One more local procedure i.e Aural toileting might have helped to reduce the microbial load. The CSOM is the disease which has the tendency to reoccur and Repeated antibiotic therapy may land up in the resistance from the microbes. But Ayurvedic drugs don't have evidences for such limitations of developing the resistance. The healing of the tympanic membrane is again plus point of the *Ayurvedic* management as the Tympanic membrane contributes for the hearing.

Conclusion

The present study strong evidence that, Active Tubotympanic CSOM can be managed through *Ayurvedic* medicines very effectively. Otorrhea, Otalgia, Headache, Rhinorrhea can be decreased through *Ayurvedic* medicine without any complication, and with cost effective intervention without any adverse drug reactions.

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