

Journal of **Ayurveda and Integrated Medical Sciences**

www.jaims.in



An International Journal for Researches in Ayurveda and Allied Sciences



No start

Journal of

Ayurveda and Integrated Medical Sciences

REVIEW ARTICLE

August 2023

A review of *Karnapaligata Rogas* with possible contemporary correlation and pictorial representation

Gudipudi V.S.S.N Sarvabhouma¹, Aswathy Narayanan²

¹Assistant Professor, Dept of Roga Nidana and Vikruti Vignana, Guru Gorakshnath Institute of Medical Sciences, Faculty of Ayurveda, Mahayogi Gorakhnath University Gorakhpur, Uttar Pradesh, India.

²Assistant Professor, Dept of Shalakya Tantra, Guru Gorakshnath Institute of Medical Sciences, Faculty of Ayurveda, Mahayogi Gorakhnath University Gorakhpur, Uttar Pradesh, India.

ABSTRACT

Shalakya Tantra, one of the Asthangas of Ayurvade deals with anatomical, physiological, pathology, and therapeutic aspects pertaining to Gyanendriyas. The ears are one of the Gyanendriya and hearing is one of the important senses to gain knowledge. It enables us to take forward our existence without limitations and helps us to express, socialize and communicate with the world. The ear is not only the organ of hearing but also maintains balance. In Ayurvedic classics, Karna is the word that represents the organ ear. Karna is divided into 3 parts Bahya Karna (Outer ear), Madhya Karna (Middle ear), and Abhyanthara Karna (Inner ear). Karnapaligata Rogas are those which occur to the outer ear i.e., Bahya Karna. Acharya Susruta laid down the principles of plastic surgery centuries ago, which are relevant even in the present era of advanced plastic surgery. Karna Sandhana is one of the techniques Acharya has mentioned as a treatment modality for Karnapaligata Rogas. This article is aimed to compile various opinions on Karnapaligata Rogas by different Acharya and exhibit the nearest correlation in the contemporary view of the disease.

Key words: Ayurveda, Karnapaligata Rogas, Bahya Karna

INTRODUCTION

Karna originated from Akasha Mahabhoota. According to Madhava Nidana, Karna apart from other Indriyas is so minute that it is neither perceived with eyes nor can it be touched. Charaka Acharya has explained that Karna Indriya can be divided into two i.e., Karna Shashkuli which is the Karnagata Avarta, and Karna Putraka which can be compared to Bahya Karna.

Address for correspondence:

Dr. Gudipudi V.S.S.N Sarvabhouma

Assistant Professor, Dept of Roga Nidana and Vikruti Vignana, Guru Gorakshnath Institute of Medical Sciences, Faculty of Ayurveda, Mahayogi Gorakhnath University Gorakhpur, Uttar Pradesh, India.

E-mail: sarvabhoumag0@gmail.com

Submission Date: 10/06/2023 Accepted Date: 23/07/2023

Access this article online

Quick Response Code

Website: www.jaims.in

DOI: 10.21760/jaims.8.8.13

Allopathy ear is divided into 3 parts namely the External, middle, and internal ear. External ear is again divided into two parts namely the auricle or pinna and the external acoustic meatus. Auricle is the part that can be compared to *Karnapali* where *Karnapaligata Rogas* occur. Descriptions regarding *Karnapaligata Roga* including *Chikitsa* can be found in *Karnaroga Vignaneeyam Adhyaya* in *Uttara Tantra* of *Ashtanga Hrudaya*^[3] and *Mishraka Chikitsa Adhyayam* in *Chikitsa Sthana* of *Susruta Samhita*.^[4] *Karnapaligata Rogas* are 10 and 5 in number according to *Ashtanga Hrudaya* and *Susruta Samhita* respectively.

Karnapaligata Rogas

Karnapaligata Rogas mentioned by Acharya Susruta are Paripota, Utpata, Unmantha, Gallira, Dukhavardhana and Parilehi. In addition to the above diseases, Acharya Vagbhata has mentioned 5 more diseases which include Kuchikarna, Karnapippali, Palisosha, Tantrika and Vidarika.

Classification of the 10 diseases based on *Dosha* predominance and *Sadhyasadhyata* has been tabulated in Table 1 and 2 respectively.

Table 1: Dosha-wise classification

Vyadhi	Dosha
Kuchikarnaka	Vata
Pippali	Vata
Vidarika	Sannipataja
Tantrika	Vata
Paripota	Vata
Palisoha	Vata
Unmatha / Gallira	Vata Kaphaja
Parilehi / Lehika	Kapha Rakta
Utpata	Pitta Rakta
Dukhavardhana	Sannipataja

Table 2: Prognosis-wise classification

Sadhyasasdhyata	Vyadhi
Asadhya	Pippali, Vidarika, Kuchikarnaka
Yapya	Tantrika
Sadhya	Rest 6

1. Kuchikarnaka

Vitiated *Vata* in intra uterine/ prenatal life causes contraction of *Karnashashkuli* i.e., pinna, and the condition is called *Kuchikarnaka*.^[5]

Treatment: It is stated as Asadhya Vyadhi.

Contemporary correlation: Atresia of EAC or Microtia

Microtia is a congenital deformity of the outer ear where the ear does not fully develop during the first trimester of pregnancy. The word "microtia" means "little ear", from the Latin words "micro" and "otia". Microtia ears vary in appearance, and are usually smaller in size, often only consisting of a tiny peanut-shaped lobe. Microtia describes the outer ear but is often associated with the absence of the ear canal

(called canal atresia or aural atresia), or an extremely narrow ear canal (canal stenosis).

4 grades of microtia have been explained which are:

Grade 1 - Ear is smaller than normal ear

Grade 2 - Ear with very narrow ear canal (Canal stenosis)

Grade 3 - Peanut shaped ear lobe with complete absence of ear canal (Aural atresia)

Grade 4 - Complete absence of external ear without any remnant (Anotia)^[6]



PC:https://i0.wp.com/microtiaandatresiacare.com/wp-content/uploads/2017/04/four-earsa.jpg?w=952&ssl=1

2. Karna Pippali

During intra-uterine life one or more painless, immobile, and sprout muscular outgrowths resembling *Pippali* develop on the pre-auricular region due to vitiated *Vata* which are known as *Karna Pippali*.^[7]

Treatment: It is explained as Asadhya Vyadhi.

Contemporary correlation: Accessory auricle

Accessory auricles (AAs) are abnormal auricular appendages remaining after the formation of the anterior auricle in early embryonic development. Their location can be anywhere along the migration tract within a curved triangle from the oral commissure groove to the anterior auricle between the helical spine and the ear lobe. Simple surgical excision is curative. The skin is peeled off the extra-auricular tissue and protruding cartilage remnants are trimmed.^[8]



PC:https://media.sciencephoto.com/image/c0296460/800wm/C0296460-Accessory_auricle.jpg

3. Vidarika

A painful, static, skin-colored swelling is seen on *Karna Sashkuli* due to the vitiation of *Tridoshas*. Acharya has explained there are 2 stages of disease namely *Amavastha* and *Pakvavastha*. If neglected in the initial stage i.e., *Amavastha* it leads to suppuration and discharge of fluid resembling Mustard oil. Even though its healing takes time, when healed the *Karnashashkuli* becomes constricted/contracted or deformed and this disease is known as *Vidarika*. ^[9]

Treatment: Amavastha – Karna Vidradhi Chikitsa

Pakvavastha: Asadhya

Contemporary correlation: Perichondritis

Perichondritis results from infection secondary to lacerations, Haematoma, or Surgical incisions. It can also result from an extension of infection from diffuse otitis externa or a furuncle of the meatus. Pseudomonas and mixed flora are the pathogens responsible. Initial symptoms are red, hot, and painful pinna which feels stiff. Later abscess may form between the cartilage and perichondrium with necrosis of cartilage. If blood collects in this space, it may organize and form hard scar tissue, giving the appearance of a cauliflower ear. If left untreated, it can also progress to a serious soft tissue or systemic infection. If an abscess is present an incision and drainage of the pinna to remove the collection of pus or hematoma should be performed. If there is no abscess present, both oral and topical antibiotics should be initiated.[10]



PC: Bechara Ghorayeb, MD

4. Tantrika

Due to *Vata Prakopa*, the pinna / ear lobule transforms into a hard and strong wire-like emaciated structure which is known as *Tantrika*. It can be either in the intranatal or post-natal life.^[11]

Treatment: It is explained as *Yapya Vyadhi*. Treatment principles of *Palishosha* are to be adopted.

Contemporary correlation: Thinning of Ear lobule

The ear lobe has special importance among facial structures. It is particularly important due to the practice in many parts of the world of piercing it to wear earrings. The ear lobe consists of skin and fat. Unlike the rest of the ear, it does not have any thick cartilage. Hence, it is easy to perforate an ear lobe. Piercing the ear lobe adds to the possibility of ear lobe rupture. Most of the time, the cause is due to damage induced by wearing heavy earrings or other such jewelry. In some cases, it may be because of someone (mostly a child) tugging on the earlobe/earring. [12]



PC:https://chernoffcosmeticsurgery.com/wp-content/uploads/2020/05/Gauging-and-Earlobe-Repair-Example.jpg

5. Paripota

When the *Karna Vyadhana* or ear puncturing is delayed for a long period due to tender *Karna Pali* and then puncturing is done suddenly it leads to a tender black and reddish swelling on the lobular part. Such a condition that occurs due to *Vata* vitiation is known as *Paripota*.^[13]

Treatment: It is explained as Asadhya

Contemporary correlation: Irritant contact dermatitis

Irritant contact dermatitis is a dose-dependent reaction to chemicals commonly found in soaps, turpentine, household detergents, solvents, cleaners, and strong alkali and acidic compounds. These chemicals have a direct toxic effect on the skin. Chemicals found in soaps, shampoos, and jewelry cleaners more commonly affect the ears. Erythema and edema, small (< 0.5 cm) fluid-filled lesions (vesicles), and larger blister-like lesions (bullae) typically characterize irritant contact dermatitis. Treatment involves avoidance of the offending agent. In severe cases, cool compresses and topical corticosteroids may be used to relieve symptoms. [14]



PC:https://imagesprod.healthline.com/hlcmsresource/images/topic_ce nters/3694-swollen_earlobe-1296x728-slide1.jpg

6. Palisosha

Vitiated *Vata* (either in the pre-natal or post-natal period) occupies *Sira* causing the drying up of *Karna Pali* which is known as *Palisosha*.^[15]

Treatment: Treatment modalities include Nasya, Lepa, and Swedana followed by Udwartana and Abhyanga

with *Bruhmana Thaila* like *Shatavaryadi, Jeevanthyadi* etc. has been advised. If not found effective with the above procedures *Acharya* has advised to perform *Chedana Karma* followed by *Seevana Karma* and repeat the nourishing procedures.^[16]

Contemporary correlation: Lobule atrophy / Microtia (3rd grade)

Microtia is a congenital deformity of the outer ear where the ear does not fully develop during the first trimester of pregnancy. The word "microtia" means "little ear", from the Latin words "micro" and "otia". Microtia ears vary in appearance, and are usually smaller in size, often only consisting of a tiny peanut-shaped lobe. Microtia describes the outer ear but is often associated with the absence of the ear canal (called canal atresia or aural atresia), or an extremely narrow ear canal (canal stenosis).





PC:https://elegantplasticsurgery.com/wp-content/uploads/2019/07/ear-reconstruction-surgery.jpg

7. Unmantha/Gallira

Forceful stretching or elongation of the ear lobule (to promote growth) causes *Vata* and *Kapha* vitiation which leads to a colorless painful or painless, static, hard, and itchy swelling over the entire pinna. Such a condition is termed *Unmantha*. *Acharya Vagbhata* has given the term *Gallira* as a synonym for the same.^[17]

Treatment: Sadhya in nature. Nasya and Karna Abhyanga are the explained treatment.

Contemporary correlation: Initial stage of perichondritis

8. Parilehi / Lehika

Painful, exudating mustard like eruptions (pustules) associated with itching, and burning sensation will be present on the ear lobule initially which later spreads to the pinna. If neglected the ear lobule with pinna will be destroyed. Causative factors are explained as vitiated *Kapha*, *Rakta* and *Krimi*.^[18]

Treatment: *Swedana, Lepa, Abhyanga,* and *Jaloukavacharana* are explained as treatment principles.

Contemporary correlation: Leprosy of the pinna or Tuberculosis of the pinna

Mycobacterium leprae preferentially affects the cooler body sites such as the pinna and lobule. External ear manifestations of Hansen's disease include infiltration, nodule formation, ulceration with "nibbled" or "ratbitten" defect, mega lobule, and auricular chondritis. [19]

Cutaneous Tuberculosis (CTB) can exclusively affect the pinna in varied presentations. The ear lobules and the helix are the usual sites of affection. It is rare for both ears to be affected with CTB, unlike bacilliferous leprosy.^[20]



PC: https://doi.org/10.1111/ijd.15249

9. Utpata

Constant usage of heavy ornaments or earrings, friction, or any traumatic injury causes vitiation of *Pitta* and *Rakta* that leads to blackish or reddish painful edema on pinna associated with burning sensation, the

eruption of vesicles, ulcerations, suppuration, and fluid discharge which in total is known as *Utpata*. [21]

Treatment: Raktamokshana with Jalouka, Seeta Lepana Karma, and Abhyanga with Ghruta explained in Visarpa Chikitsa can be adopted.^[22]

Contemporary correlation: Metal allergy

Metal hypersensitivity is a disorder of the immune system. It is a common condition that affects 10% to 15% of the population. It can produce a variety of symptoms, including rashes, swelling, or pain due to contact with certain metals. In addition to the local skin reactions, metal hypersensitivity can also manifest itself as more chronic conditions such as fibromyalgia and chronic fatigue syndrome. [23]

10. Dukhavardhana

Selecting an improper site for *Karna Vyadhana* (ear lobule puncturing) and attempting to shift the position leads to a localized painful swelling in the lobule associated with itching, burning sensation, and suppuration which is known as *Dukhavardhana*. All *Tridoshas* are vitiated in this disease.^[24]

Treatment: *Sechana, Abhyanga,* and *Avachurnana* are advised. [25]

Contemporary correlation: Perichondritis (mild)

DISCUSSION

Ear diseases are common among all age groups. Diseases pertaining to ears and their management are documented years back by *Aacharyas* of *Ayurveda* in the *Samhitas*. According to *Ayurveda*, *Karna* is divided and understood in four parts. *Karnapaligata Rogas* which are 10 in number are the diseases that affect the outermost part i.e., *Bahya Karna*. Contemporary science does have documentation regarding diseases related to the external ear with all possible explanations. This article is an overview of the 10 diseases found in classics with possible contemporary correlations.

CONCLUSION

Karnapaligata Rogas are those diseases that affect the part of the external ear i.e.; pinna and lobule due to

various causes. These diseases lead to both physical and mental discomfort, as the pinna is one of the structures that enhance and complete the features of the face. The sufferer may develop a social stigma and mental stress due to cosmetic concerns. The diseased would also develop hearing difficulties as the structure of the pinna also helps in directing the sound waves towards the acoustic meatus. Collecting the available information from different sources and placing them in one place with possible correlation will help knowledge seekers to gain knowledge and further work on it. Physicians can serve patients better with add-on information with probable correlations by opting for best-suited methods to produce results.

REFERENCES

- 1. Madhavakara; Madhava nidana: Shastri Sri Sudarshan, Chaukambha Sanskrit sansthan. Varanasi,2000. p472.
- Acharya Yadavji Trikamji. Caraka Samhitha by Agnivesha Revised by Caraka and Dridabala with Ayurveda Dipika Commentary of Chakrapani Datta: Varanasi: Chaukambha Oriantalia; Reprint 2015. Shareerasthana
- Acharya Vagbhata, Ashtanga Sangraha, translated by Prof KR Srikanthamurthy, Vol 3,9th edition 2005, Chaukhamba Orientalia, uttarastana, 21.
- Sushruta, Sushruta Samhita, Commentary by Kaviraj Ambikadutta Shastri, Reprint edition, Chaukhamba Sanskrit Sansthan Varanasi, Chikitsa Sthana, Chapter 25, Mishraka Chikitsitham, Verse 3, 2013.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 16, 2009, p836.
- Andrews J, Hohman MH. Ear Microtia. 2023 Mar 1. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan–. PMID: 33085390.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 16, 2009, p836.
- 8. Hwang, J., Cho, J., & Burm, J. S. (2018). Accessory auricle: Classification according to location, protrusion pattern and body shape. *Archives of Plastic Surgery*,

45(5), 411-417. https://doi.org/10.5999/aps.2018.00430

- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 14-15, 2009, p836.
- Khan N, Cunning N. Pinna Perichondritis. [Updated 2023
 Jan 2]. In: StatPearls [Internet]. Treasure Island (FL):
 StatPearls Publishing; 2023 Jan. Available
 from:https://www.ncbi.nlm.nih.gov/books/NBK572081
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 19, 2009, p836.
- Pardue AM. Repair of tom earlobe with preservation of the perforation for an earring. *Plast Reconstr Surg.* 1973;51:472. doi: 10.1097/00006534-197304000-00031.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 20-21, 2009, p837.
- Conde-Taboada A, Roson E, Fernandez-Redondo V, Garcia-Doval I, De La Torre C, Cruces M, et al. Lymphomatoid contact dermatitis induced by gold earrings. Contact Dermatitis. 2007 Mar. 56(3):179-81.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 19, 2009, p836.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 18 Karnaroga prathishedha adhyayam, Verse 39-42, 2009, p839.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 22-23, 2009, p837.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 24-25, 2009, p837.

- Narayanan A, Akshay SP. Infiltrated and nodular pinna –
 A distinctive feature of lepromatous leprosy. Cosmo Derma 2022; 2:3.
- 20. Ramesh, V., & Gupta, J. (2021). Cutaneous tuberculosis of the pinna. *International Journal of Dermatology*, 60(3), 363-367. https://doi.org/10.1111/ijd.15249.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17 Karnaroga vignaneeyam, Verse 21-22, 2009, p837.
- Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 18 Karnaroga prathishedha adhyayam, Verse 43-44, 2009, p840.
- Yoshihisa, Y., & Shimizu, T. (2012). Metal Allergy and Systemic Contact Dermatitis: An Overview. Dermatology Research and Practice, 2012. https://doi.org/10.1155/2012/749561

- 24. Vagbhata, Ashtanga Hridaya, Reprint 10th edition 2019, Chaukhambha Orientalia Varanasi, Uthara Sthana, Chapter 17, Karnaroga vignaneeyam, Verse 23-24, 2009, p837.
- Vagbhata, Ashtanga Hridaya, Reprint edition, Chaukhambha Surbharati Prakashan Varanasi, Uthara Sthana, Chapter 18, Karnaroga Prathishedha Adhyayam, Verse 46-48, 2009, p840.

How to cite this article: Gudipudi V.S.S.N Sarvabhouma, Aswathy Narayanan. A review of Karnapaligata Rogas with possible contemporary correlation and pictorial representation. J Ayurveda Integr Med Sci 2023;08:90-96

http://dx.doi.org/10.21760/jaims.8.8.13

Source of Support: Nil, **Conflict of Interest:** None declared.

Copyright © 2023 The Author(s); Published by Maharshi Charaka Ayurveda Organization, Vijayapur (Regd). This is an open-access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by-nc-sa/4.0), which permits unrestricted use, distribution, and perform the work and make derivative works based on it only for non-commercial purposes, provided the original work is properly cited.
