

**A CLINICAL STUDY OF BALA TAILA AND MAASHBALADI KASHAYA IN THE  
MANAGEMENT OF KARNA NADA W.S.R. TINNITUS****Dr. Kirti Gupta<sup>\*1</sup>, Dr. Vijayant Bhardwaj<sup>2</sup> and Dr. Satish Sharma<sup>3</sup>**<sup>1</sup>PG Scholar of Shalaky Tantra, R.G.G.P.G. Ayu. College and Hospital, Paprola, Himachal Pradesh, India.<sup>2</sup>Sr. Lecturer, R.G.G.P.G. Ayu. College and Hospital, Paprola, Himachal Pradesh, India.<sup>3</sup>Reader R.G.G.P.G. Ayu. College and Hospital, Paprola, Himachal Pradesh, India.**\*Corresponding Author: Dr. Kirti Gupta**

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**ABSTRACT**

Ayurveda is the God gifted very ancient and the first medical science and composed by the originator Brahma and treated as Panchama Veda. Vata Dosha is responsible for normal hearing procedure. Vitiated Vata Dosha either entering into other channels and produces different types of sounds in the ear like Bheri, Mrudanga, Venughosha, Shankha etc. It can be correlated with tinnitus according to symptoms. Bala Taila and Maashbaladi Kashaya having Vata Shamak properties is taken as the drug of choice to control Karna Nada. Aim and objectives were to evaluate the efficacy of Bala Taila and Maashbaladi Kashaya on Karna Nada. All the selected patients fulfilling the criteria were taken in single group (8 patients) and was advised to take Bala Taila as Karnapoorana, Nasya, Paana and Maashbaladi Kashaya Paana for one month. The effect of treatment was assessed by asking TSIQ. Eight patients completed their trial out of which two patients showed moderately relief. Three patients showed slight relief and three patients showed no improvement. No patient was reported with complete cure of the disease.

**KEYWORDS:** Karna Nada, Bala, Nasya, Karnapoorana.**INTRODUCTION**

The term Karna Nada is basically derived from two root words Karna and Nada. The term Karna refers to organs which is responsible for the perception of the sound. The term Nada refers to that which produces rhythmic sounds in the ear. Karna being one of the Adhithana of Vata Dosha<sup>[1]</sup> Vata affecting the canals of the ears makes the patient to hear sounds as that is generated by kettle drum or a conch. This is known as Karna Nada. The ringing in the ears<sup>[2]</sup> Vata Prakopa is attributed as the prime aetiological factor. Madhavakara describes Poorvarupa as expression of Roopa Lakshanas with less intensity. Vividhan Shabda like Bheri, Mrudanga, Shankha, Bhrungaara, Kauncha, Mandoora, Tantri, Saamturyasvanam are heard in Shabdavaha Srotas as Roopa Lakshanas in Karna Nada.<sup>[3]</sup> If Karna Nada is ignored then it results in Badhirya.<sup>[4]</sup> According to symptomatology it can be co-related with Tinnitus. Tinnitus derived from the Latin word "Tinnier" meaning to ring.<sup>[5]</sup> Tinnitus is a chronic or psychological disease and is managed and not cured. Prevalence of tinnitus clearly increases with age, and this does not seem to be influenced by noise exposure.<sup>[6]</sup> A blind person or a lame person can easily be visualized as a handicap and thus they get sympathy but no one sympathizes with a person suffering from ear problem as his handicap is not

noticeable. Tinnitus is a ringing, buzzing, whistling, hissing, or other noise, heard in the ear during absence of environmental noise.<sup>[7]</sup> The prevalence of tinnitus increases with hearing loss 74%.<sup>[8]</sup> Estimates of patients with tinnitus range from 10-15% of the population (30-40 million people).<sup>[9]</sup> As per modern science tinnitus is difficult to diagnose and treat. In contrast Ayurveda has a systematic line of treatment in the management of Karna Nada. The use of sneha especially Taila helps to subside Vata Dosha<sup>[10]</sup> and clears the Srotas of the Karna and drug formulation having rejuvenator and Vata Shamak property.

**AIMS AND OBJECTIVES**

1. To evaluate the efficacy of Bala Taila and Maashbaladi Kashaya on Karna Nada- Tinnitus.
2. To see any side effects of trial drugs.

**MATERIALS AND METHODS**

The patients suffering from Karna Nada-Tinnitus were randomly selected from O.P.D of Shalaky Tantra Department of R.G.G.P.G.Ayu.College & Hospital paprola (H.P).

**Criteria for Inclusion**

Patients were selected on the basis of signs and symptoms of Karna Nada-Tinnitus described as per Ayurvedic and modern literature.

**Criteria for Exclusion**

1. Congenital deformity.
2. Blockage due to stenosis of external auditory canal.
3. Established diabetes mellitus and hypertension.
4. Pregnant, immune-compromised patients.
5. Patients not willing to be registered for the trial.
6. Cases which required surgical intervention.

**Plan of Work**

The study was planned in different steps as mentioned below:-

1. **Proforma:** A special proforma was prepared to maintain the records of the entire observations regarding the disease.
2. **Investigations:** The following laboratory investigations were carried out to assess the condition and to exclude any other pathologies of the patients.

**Ingredients of Drug Used****Ingredients**

| Sr. No. | Name of plant        | Botanical name        | Family      | Part used | Quantity |
|---------|----------------------|-----------------------|-------------|-----------|----------|
| 1.      | Til                  | Sesamum indicum Linn. | Pedaliaceae | Taila     | 4 parts  |
| 2.      | Bala moola for Kalka | Sida cordifolia Linn. | Malvaceae   | Moola     | 1 part   |
| 3.      | Bala moola for kwath | Sida cordifolia Linn. | Malvaceae   | Moola     | 8 parts  |

**Method of preparation:** This process involves two steps. Firstly Murchana of Til Taila is carried out with the drugs mentioned in table above followed by Sneha

**3. Haematology:** Hb%, TLC, DLC, ESR, Lipid profile.

- a. Otoscopy.
- b. Tuning fork test.
- c. Audiometry.

**Grouping and Posology**

All the selected patients fulfilling the criteria were taken in single group (08 patients).

Patient was given Bala Taila for Karnapoorana, Nasya, Paana & Maashbaladi Kashaya for Paana.

**Duration of trial:** 1month.

**Follow up:** Two follow up at every 10 days during treatment.

One follow up after completion of trial.

**Drugs**

1. Bala Taila<sup>[11]</sup>
2. Maashbaladi Kashaya<sup>[12]</sup>

Paaka of the Til Taila along with Bala Kalka until the appearance of Lakshanas of Samyaka Sneha Siddhi.<sup>[13]</sup>

**Ingredients of Maashbaladi Kashaya as Follows**

| Sr.No. | Name of plant         | Botanical name                     | Family        | Part used | Qty.   |
|--------|-----------------------|------------------------------------|---------------|-----------|--------|
| 1.     | Maash                 | Phaseolus mungo Linn               | Leguminosae   | Beeja     | 1 part |
| 2.     | Bala                  | Sida cordifolia Linn.              | Malvaceae     | Moola     | 1 part |
| 3.     | Kevanch (shuk shimbe) | Mucuna prurita Hook.               | Leguminosae   | Beeja     | 1 part |
| 4.     | Katrin (Rohish grass) | Cymbopogon Martini Roxb.           | Gramineae     | Pantra    | 1 part |
| 5.     | Rasana                | Pluchea lanceolata Oliver & Hiern. | Compositae    | Patra     | 1 part |
| 6.     | Ashwagandha           | Withania somnifera Dunal.          | Solanaceae    | Moola     | 1 part |
| 7.     | Erand                 | Ricinus communis Linn.             | Euphorbiaceae | Moola     | 1 part |

Coarsely powdered drug is boiled with 16 parts of water in an earthen pot, over a mild fire till the liquid is reduced to 1/8 of the original quantity. This liquid is known as Shrta, Qwath, Kasaya or Niryuha<sup>[14]</sup> (decoction).

**Criteria of Assessment****A. Tinnitus Severity Index Questionnaire**

| Sr. No. | Does your tinnitus  | Never (0) | Rarely (1) | Sometimes (2) | Usually (3) | Always (4) |
|---------|---|-----------|------------|---------------|-------------|------------|
| 1.      | Still make you feel irritable or nervous  |           |            |               |             |            |
| 2.      | Still make you feel tired or stressed   |           |            |               |             |            |
| 3.      | Still make it difficult for you to relax  |           |            |               |             |            |
| 4.      | Still make you uncomfortable to be in a quiet room or setting                       |           |            |               |             |            |
| 5.      | Still make it difficult to concentrate  |           |            |               |             |            |
| 6.      | Still make it harder to interact pleasantly with others                             |           |            |               |             |            |
| 7.      | Intefere with your required activities (work, home, care or other responsibilities) |           |            |               |             |            |
| 8.      | Interfere with your social activities/ other things you do in leisure time          |           |            |               |             |            |
| 9.      | Does your tinnitus still interfere with sleep                                       |           |            |               |             |            |

The effect of treatment was assessed by asking Tinnitus Severity Index Questionnaire and was graded mild 1-9, moderate 10-18, marked 19-27, severe 28-36. And grading of hearing loss was indicated by 0-25dB (Grade 0), 25-40dB (Grade 1), 40-60dB (Grade 2), >60dB (Grade 3).

**OBSERVATIONS**

Total 8 patients in single group were registered. It was found that maximum number of patients 3 (37.50%) were between the age group 51-60 years. Maximum registered patients 7 (87.5%) were females and were Hindu 8 (100%) religion wise. As per socio-economic group upper middle class patients were obtain 4 (50%). As per occupation maximum number of patients were Housewives 4 (50%). Maximum no. of patients were of Vata Kaphaja Prakriti 5 (62.50%) and were having Visham Agni 6 (75%). Maximum patients had Madhyam Satva 6 (75%) and Rajsik Prakriti 5 (62.50%). Maximum patents were of All day diurnal variation 5 (62.50%). And hearing loss as associated complaint 3 (37.50%) . Maximum patients were of bilateral distribution of sound 7 (87.50%). Maximum patients were of noise 3 (37.50%) and monotonous 3 (37.50%) nature of sound.

**RESULTS****1. Effect of Therapy on TSIQ**

Patients treated with; Bala Tail Karna Poorana, Nasya, Paana and Maashbaladi Kashaya Paana the mean score of TSIQ, before treatment was 19.37 and after treatment it came down to 13.25 giving 31.7% relief which was moderately significant statistically ( $p > 0.001$ ).

**2. Effect of Therapy on Hearing loss**

Patients treated with, Bala Tail Karna Poorana, Nasya, Paana and Maashbaladi Kashaya Paana ; the mean score of Hearing loss, before treatment was 2 which it came down to 1.3 after treatment, giving 33.00% relief which was statistically insignificant ( $p > 0.05$ ).

**Over All Effect of Therapy on Tsiq**

| Sr. No. | Assessment          | Single Group    |        |
|---------|---------------------|-----------------|--------|
|         |                     | No. of patients | %age   |
| 1.      | Cured               | 0               | 0      |
| 2.      | Markedly Improved   | 0               | 0      |
| 3.      | Moderately Improved | 2               | 25.00% |
| 4.      | Mild Improved       | 3               | 37.50% |
| 5.      | Unimproved          | 3               | 37.50% |

Two patients has showed moderately improvement. Three patients has showed mild improvement and three patients has showed un-improvement. No patient was found completely cured.

**DISCUSSION**

Rasa Panchak of Bala Tail having Ushan Virya (54.54%) and Tridoshar property (50.00%). Tila<sup>[15]</sup> and Bala<sup>[16]</sup> having Vataharanaam property. Bala Taila makes it potent in alleviating Vata dosha which is responsible for Karna Nada. In Vata disease and weakness oil massage is done with this Bala Tail is used as eardrops in ear disease and also as Paana. Nasya can directly influence Indriyas. Better chance of absorption through blood vessels. Karnapoorana has a unique quality of getting absorbed easily by the pores in the skin and thereby acts as a catalyst.

The ingredients of Maashbaladi Kashaya consists of Madhura Rasa (38.46%), Snigdha Guna (31.25%), Ushna Virya (85.71%) which helps in alleviating the Kshya of Dhatus occurred as a result of Vata Dosha. Maash having Madhura Rasa<sup>[17]</sup> and Vatashamaka property.<sup>[18]</sup> Madura Rasa alleviates Vata Dosha and nourishes different Dhatus thereby reducing the symptoms of Vata Kshaya. It improves the general condition of the body and acts as a rejuvenator of the body. Thus helps in the Samprapti Vighatana of the Karna Nada.

## CONCLUSION

Analysis of the study reveals that Karna Nada is a disease which mostly affects the people who are having Visham Agni and incidence increases with age both condition are Vata dominant conditions and impaired digestion which is due to predominance of Vata Dosha which further result in Dhatukshaya due to improper nutrition. This disease is more common in upper middle class and literate people who are more attentive towards their mental and physical health, because tinnitus effects the mental status of a person.

Regarding aetiological factors it is confirmed that poor nutrition, Patients of Vata-Kaphaja and Vata-Pittaja Prakriti are more common to this disease.

Drugs used in single group, in which result of Bala Tail and Maashbaladi Kashaya was moderately significant according to TSIQ and was insignificant in hearing loss.

Present study requires to be repeated on large samples and observation of results should be done for longer period to assess duration of the effect and side effects of the drugs if any, so that drugs can be established for treatment of Karna Nada.

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**“He gave me the sky and said ‘fly’.  
When I sought rest, He gave me strength.  
When I lost sight, He showed me the way.  
When I had just about stopped...., He made it my day.”**

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