

Research Article

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Clinical Management of *Santhuvatham* W.S.R to Poly arthritis in Siddha

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Abstract

“*Santhu Vatham*” is correlated with “Arthritis” in modern medicine. Arthritis is characterized by increasing pain and stiffness with decreasing physical competence, bodily joy and ease. When more than one joint involved it is known as “Poly Arthritis”[1]. The occurrence increased in recent times. Patients are continuously looking with a hope towards Siddha to overcome this challenge. Here is an attempt to know the “Clinical management of *Santhuvatham*” so as to make the sufferer free from clinical signs & symptoms. In the present study 10 patients were selected then carried out RA factor test, haematological and biochemical investigations and routine urine tests. All patients were administered *Seenthil chooranam*, *muthuchippi parpam* tablet internally and *vathakesari thailam* externally for 60 days. For the assessment of results, the clinical parameters were followed. At the end of the study 30% of patients showed good clinical improvement and 60% of patients showed fair clinical improvement and 10% of patients showed poor clinical improvement.

Keywords

Santhuvatham,
Siddha medicine,
polyarthritis.

Introduction

Santhuvatham is one among 80 vaatha diseases, which is described in “*Yugi Vaithya Chinthamani*”. The term *Santhuvatham* denotes all kinds of joint disease caused by the derangement of one of the *uyirthatthus* “*Vatham*”[5]. In *TV Sambasivampillai* medicinal dictionary *Santhuvatham* is described as, inflammatory disease acute or Chronic of the whole or greater part of the fibrous structures that constitute the formation of a joint-

Arthritis[4]. ‘*Santhuvatham*’ is correlated with **polyarthritis** in modern medicine.

Polyarthritis is the chronic inflammation of the synovial membrane of several joints, it involves 5 or more joints simultaneously. It may be experienced at any age and is not gender specific. It is characterised by, difficulty in walking and inability to do the works with hands and legs as usual due to stiffness of joints and pain of the body[1].

The Author has selected “*Seenthil Chooram*” and *Muthuchippi parpam* tablet as internal medicine and “*Vathakesari thilam*” as external medicine for this study[2].The reason for choosing above medicines is their efficacy mentioned in Siddha therapeutics and the easily available ingredients.

Materials and Methods

Sample size: 10 patients

Study type: Interventional Study

Study Place: Sirapu Maruthuvam OPD, National Institute of Siddha, Chennai

Study Period: 60 days

Inclusion criteria:	Exclusion criteria:
Age: between 20- 60 years Sex: Both male and female Joints pain: more than 5 joints Swelling Stiffness Restricted movements in affected joint. Willing to attendOPD.	Rheumatic Fever Rheumatoid arthritis Other systemic illness Gout Pregnancy and Lactation Tuberculosis

Withdrawal criteria:

-) Intolerance to the drug and development of adverse reactions during drug trial.
-) Poor patient’s compliance and defaulters.
-) Patient turned unwilling to continue in the course of clinical trial.
-) Occurrence of any serious illness.

Clinical assessment:

-) Pain in more than five joints
-) Tenderness, Numbness
-) Stiffness
-) Restriction of movements of affected joints
-) Effect of treatment will be evaluated on the basis of changes in the signs and symptoms after the treatment.

Pain assessment

1. Universal pain assessment scale (Table-1)

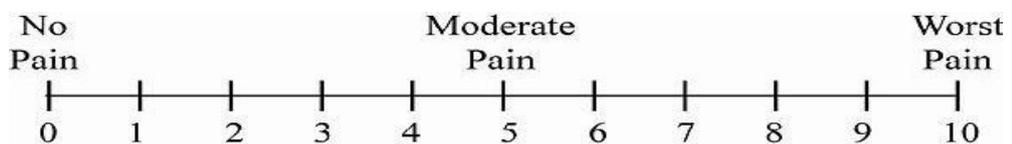


Table-1

A	0	No Pain
B	1-3	Mild Pain
C	4-6	Moderate Pain
D	7-10	Severe Pain

Reference: Clinical Manual for Nursing Practice. (National Institute of Health Warren Grant Magnuson Clinical center)

2. Gradation:

Table-2

Grade 1	Fit for all activities to do their work without support (Normal):
Grade 2	Mild Pain and Mild restriction of Movements
Grade 3	Moderate Pain and Moderate restriction of Movements:
Grade 4	Severe Pain and Severe restriction of Movement

Investigations

The symptoms of *santhuvatham* were more or less correlated with polyarthritic conditions of Rheumatological and collagen diseases in modern medicine. Investigations meant for such diseases were done for *santhuvatham*. Some of these are routine blood tests, urine tests, stool examination and specific tests such as rheumatoid arthritis factor, radiographic evaluation etc. Besides this

blood sugar, blood urea, serum cholesterol also investigated [6]. The investigations were done in all selected patients in the laboratory of NIS, Chennai.

Administration of Medicines: Following drugs (table-3) were administered to the all patient from NIS Pharmacy. The patient is advised to follow certain precautions regarding diet and physical activities[2].

Table-3

1	For normalizing thrithodam	Purgation drug-Day-1 <i>Agasthiyar Kulambu</i> -100 mgs were given in early morning with ginger juice on the first day of treatment.	Siddhar's had advised to prescribe purgatives for balancing the deranged mukkutram on the first day of the treatment.[3]
2	Internal Medicine :	<i>Seenthil Chooranam</i> + <i>Muthuchippi</i> tablet	1 tsp BD with honey after food 2 BD after food
3	External Medicine :	<i>Vathakesari Thilam</i> -Externally	Application on affected area
4	Oil bath	<i>Sukku thilam</i> - Externally	Weekly 2 times

Observations and Results

For the clinical study 10 patients were selected and treated in OPD Sirappu Maruthuvam Department, NIS Results were observed with respect to the following criteria. Patients were advised to visit every week for dispensing medicine and for assessment.

Clinical Symptoms

After 60 days of treatment 20% of cases had pain, 50% had difficult in walking and morning stiffness, 40% had restrict in walking 20% of cases had easy fatiguability (Table-4) (Fig-1)

Table-4

S.No.	Symptoms	Before treatment		After treatment	
		No of cases%	Percentage %	No of cases%	Percentage %
1	Joint Pain	10	100 %	2	20%
2	Difficulty to walk	8	80%	5	50%
3	Morning stiffness	7	70%	5	50%
4	Restricted to walk	6	60%	4	40%
5	Easy fatiguability	9	90%	2	20%

CLINICAL SYMPTOMS

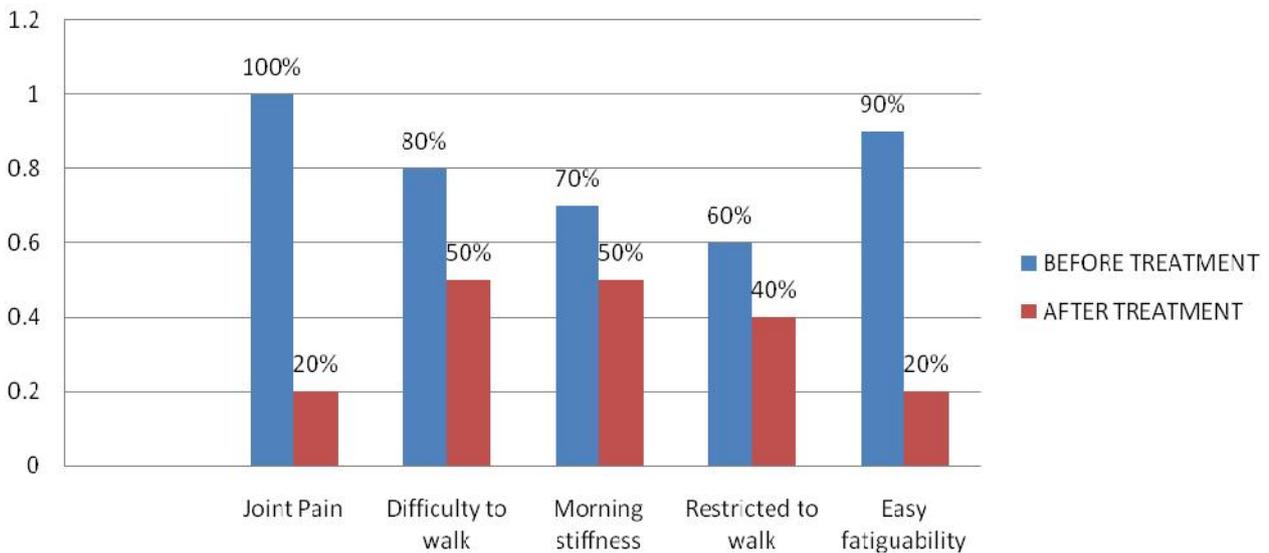


Fig-1

Involvement of upper and lower extremities

Inference 30% cases show lower extremity, 20% cases show upper extremity and 50% cases show both (Table-5) (Fig-2)

Table-5

S.No	Involvement of upper and lower extremities	No of cases	Percentage %
1	Upper extremity	2	20
2	Lower extremity	3	30
3	Both upper and lower extremity	5	50

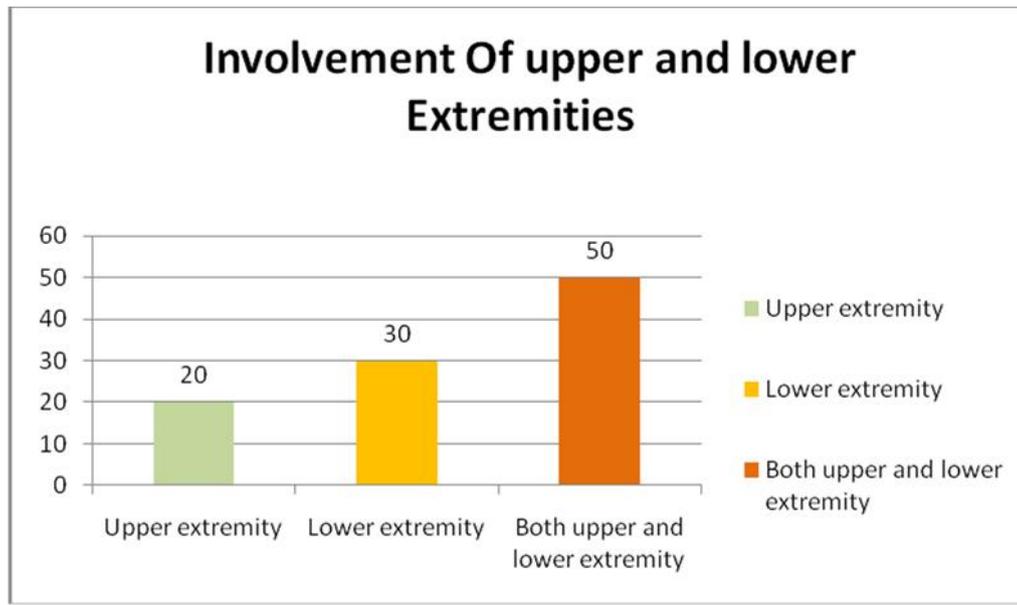


Fig-2

Effect of treatment

All patients were administered *Seenthil chooranam*, *Muthuchippi parpam* tablet internally and *Vathakesari thilam* externally for 60 days. For the assessment of results, the clinical

parameters were followed. At the end of the trial study 30% of Patients showed good clinical improvement and 60% of Patients showed fair clinical improvement and 5% of patients showed poor clinical improvement.

Table -5

S.No	Effect of treatment	No of cases	Percentage
1	Good	3	30
2	Fair	6	60
3	Poor	1	10

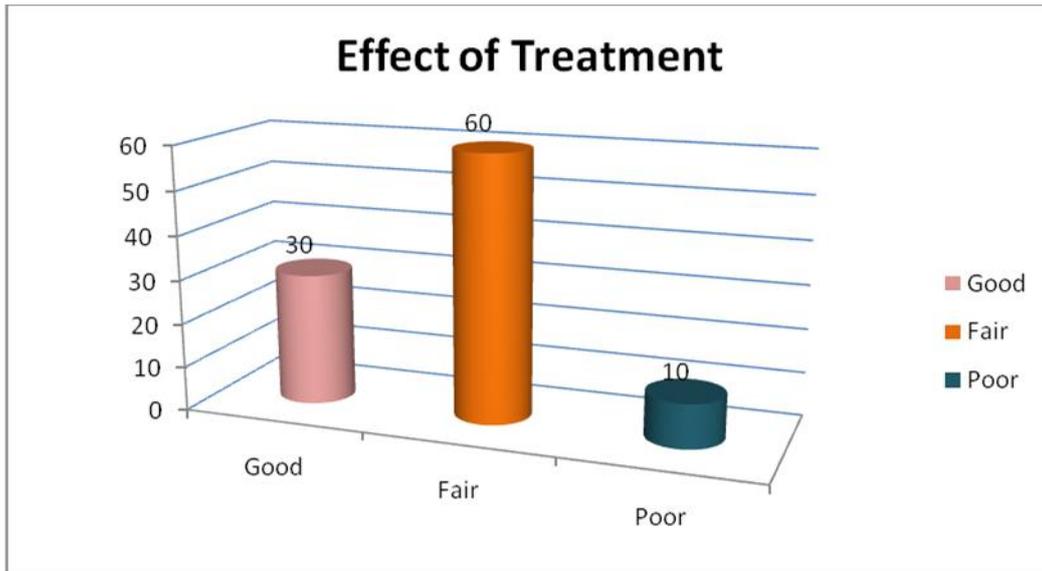


Fig-3

Discussion

The peak age incidence of *Santhuvatham* was found 51-60 years age group.

Clinical diagnosis of the above disease was done on the basis of clinical features described in *Yugi Vaidhya Chinthamani* and *Siddha Maruthuvam*.

Before admission for study their detailed history of the sufferings, duration, their occupation, native etc. are elicited from the 10 selected patients.

During treatment, all the patients keep under strict *pathiyam*, a specific dietary regimen, all the patients were advised to exercise regularly.

The pain score by VAS was 6/10 before treatment for most of the patients, come down to 3/10 after treatment. Swelling and joint line tenderness also reduced after treatment, the application of *Vathakesari thylam* during the treatment period reduces the stiffness and provide lubrication to the joints. *Seenthil Chooranam* and *Muthuchippi Parpam* helps to reduce pain, swelling and restricted joint movements in the disease and found to be effective in treating *Santhuvatham*.

Conclusion

All the cases were treated with *Seenthil Chooranam*, *Muthuchippi parpam* tablet (internal) and *Vathakesari thylam* (external). Clinical results were found to be satisfactory. The follow up of these patients for a period varying from 1-2 months showed moderate relief and improvement and a state of well being. The medicines were free from adverse effects clinically. So it is concluded that *Santhuvatham* is a connective tissue disorder with a chronic course that can be controllable in early diagnosis and treatment with *Seenthil Chooranam*, *Muthuchippi parpam* table and *Vathakesari thylam* along with the diet and regimen stated in Siddha medicine. For more results further studies should be continued with large population and along with external therapies.

Acknowledgments

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Conflict of interests

Declared none

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