

Case Study

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Siddha Treatment regimen for Autism spectrum disorder (Manthasanni)– Case series

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Abstract

Keywords

Manthasanni,
Autism spectrum
Disorder,
Siddha medicine,
kuruverkudineer and
mysatchipugai.

Mantha Sanni is a paediatric disorder mentioned in the Siddha textbook balavagadam. The clinical features are compared to autism. It starts on early childhood. The child has a repetitive and stereotyped behaviour. Very difficult to communicate. In this study, I have to present 2 case reports of ASD children based on the assessment scale. The main course of treatment are kuruverkudineer as internal and Mysatchipugai as External therapy in the recommended dose as per Siddha pharmacopeia for 3 months. After 3 months, ASD children improve the eye to eye contact and Hyperactivity reduced well. It is well established that the drugs to have its action on is recommended for ASD in children. External therapy like pugai is to enhance the good eye to eye contact and to reduce hyperactivity. All the ingredients in both Internal medicines are herbal. So in this case study reveals the good and alternate treatment for autistic Patients. It will be definitely efficacy in treating ASD children.

Introduction

Manthasanni is a paediatric disorder, which one of the type of mantham in 21 categories. It is defined as indigestion in Siddha literature Balavagadam. The mantham is occurred on 4 stage of paediatric age group. It is classified as thalaparuvam, sappaniparuvam, muthaparuvam, varugaiparuvam. In that lactation period mother should avoid some foods like banana, mango, coconut, etc... if mother gets regular diet baby

gets worse about these symptoms like fever, diarrhoea, etc.. And the condition continues to autism spectrum disorder. Manthasanni is compared to autism spectrum disorder. 78 million people worldwide are affected by autism and the impact on the individual and families are enormous. ASD prevalence across five States in north and west India was as high as one in 125 children between 2-6 years age group and one in 80 among them children I 6-9 years age. overall prevalence in India is estimated to be in 89.A

major concern of patients of a child with ASD is dealing with risk of disease in a unborn sibling, in a family which has 1 child with ASD, has 7% and 4% risk of having similar disease in case of a girl and a boy respectively. Manthasanni is disorder which the child withdraws from people but relates to inanimate objects. The inability to relate to other people from very early in life is characteristic of this condition. The child does not smile at all. He spends hours playing by himself, performs compulsive ritualistic actions, if interrupted, indulges in an outburst of aggressive behaviour. His responsiveness are in extreme, either much too sensitive, he is totally unresponsive to any kind of stimulation, including pain. May speak late after (4 years) or never. May have odd parrot- like repetition of phrases, sentences or whole poems without apparent understand or meaning. Abnormalities of mood temper tantrum, irritational fears, periods laughing for no apparent reason, lack of fear of real danger. For children identified with ASD, in siddha medicine has a separate ad individual medicine named as kuruveer kudineer (Internal) and mysatchipugai (External). In this study, we have select 5 cases of ASD children which are all based on the assessment scale and followed by o day to 60 days. After 2 months, ASD has improves on his cognitive skills and eye to eye contact and hyperactivity reduced well. The kudineer which has a content of 5 ingredients named as *Vettiver zaizanoides*, *Plectranthus*

vettiveroids, *Zingiber officinalae*, *Hedyotis corymbosa* *Clerodenum serrattum*. It have the anti depressant activity and anti oxidant activity. And the mysatchipugai therapy is enhance the mind calming activity and good eye to eye contact. It reduce the aggressive behaviour. The prepared medicine are only a Polyherbal and it might be safe and good efficacy to treat ASD children. The results were assessed by computing the scores of assessment form of Autism Clinical Assessment Parameters.

Aim

To evaluate the efficacy of Siddha treatment regimen for Autism spectrum disorder (Manthsanni)

Objective

-) To observe the efficacy of Siddha medicine kuruveerkudineer as internal medicine
-) To Observe the efficacy of mysatchipugai as external therapy
-) To analyze the assessment tools of Autism spectrum disorder
-) To explore the new pathway for Autism children using siddha therapeutic management.

Materials and Methods

Study and Practical Place	OPD
Kuzhanthai Maruthuvam	A.A.G.H.I.M
Study period	2 months
Sample size	5 ASD patient
Dose	3-6 years (15ml), 6-12 yrs (30ml) twice a day after food.

Children were assessed for improvement on 0 day, 30th day, 60th day of treatment and the results were filled in the assessment forms. The results

were analysed by computing the scores of assessment form of Autism Clinical Assessment Parameters.

Experimental Formulation& Procedures

Kuruveer kudineer (Internal medicine)

1. *Vettiver Zaizanoides* - Vettiver
2. *Plectranthus Zaizanoides* – Vilamichu Ver
3. *Zingiber officinalae* - Chukku
4. *Hedyotis corymbosa* - Parpadagam
5. *Clerodenrum serrattum* - Siruthaeku

External therapy:

Mysatchipuzgai

1. *Shorearo busta* - Mysatchi
2. *Styrax benzoin* - Sambirani
3. *Aquillari agalocha* - Agirkattai
4. *Nigella sativum* - Karunjeergam
5. *Cleome viscose* – Velaiver
6. *Trianthema decandra* – Sathisaraivaiver

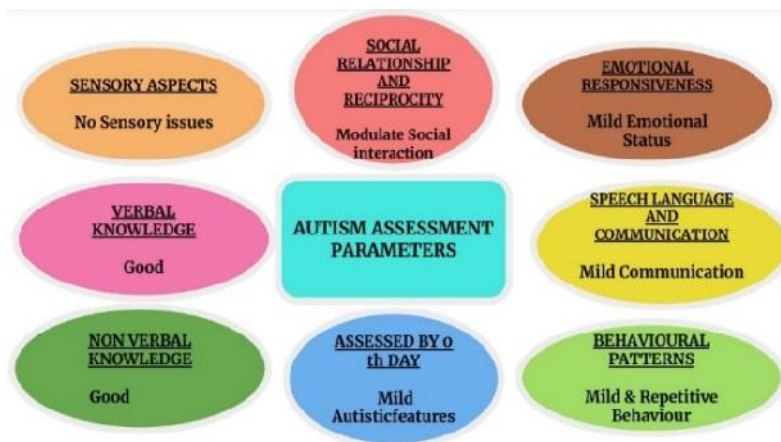
Autism clinical assessment parameters

-) Social relationship and reciprocity
-) Emotional responsiveness and behavioural patterns.
-) Sensory aspects
-) Verbal knowledge
-) Non Verbal knowledge

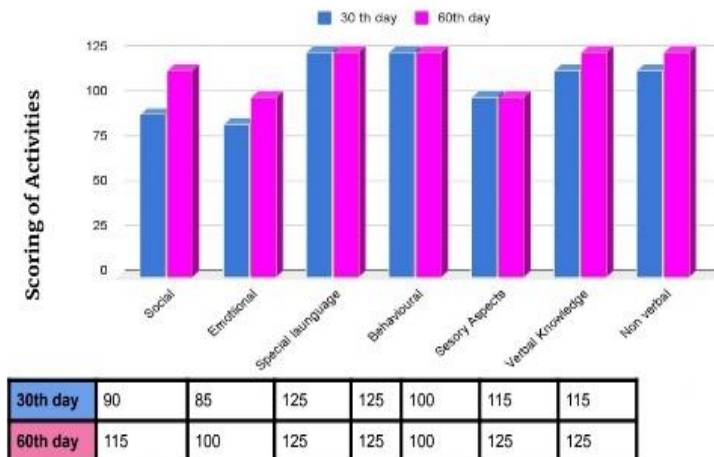
Results and Observations

Case study 1. Baby- Tharani - op no: 1683

Tharani is a 4 year old Female Child was born by normal delivery, Birth weight 2.9 kg. Child had cried immediately after birth. There was no history of Seizure. Global developmental Milestones are normal. At the age of 2 years parents were noticed he had difficulty to challenged day to day life activities.



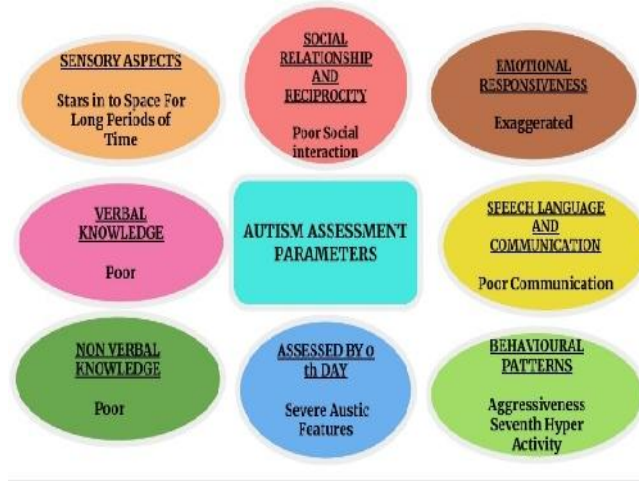
Summary of Tharani activities from 0th day to 60th day



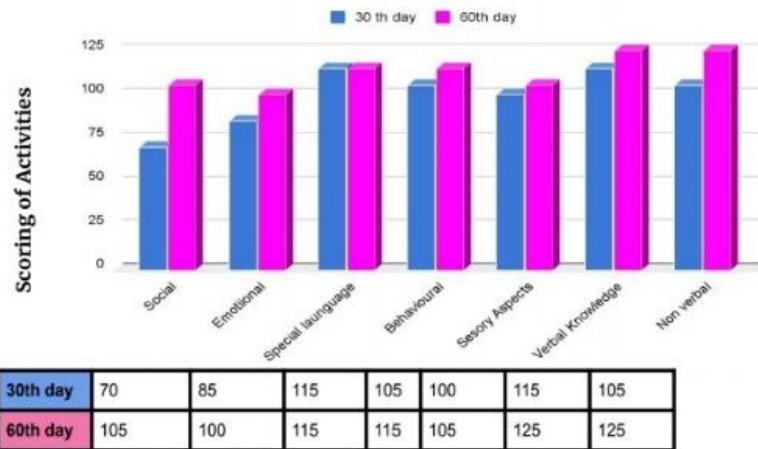
Case study 2. Mast –Disanth- op.no: 9640

Disanth is a 4 year old male Child was born by L.S.C.S. Birth weight 3kg. Child had cried

immediately after birth. There was no history of Seizure. Global developmental Milestones are normal. At the age of 3 years parents were noticed he had difficulty to challenged day to day life activities.



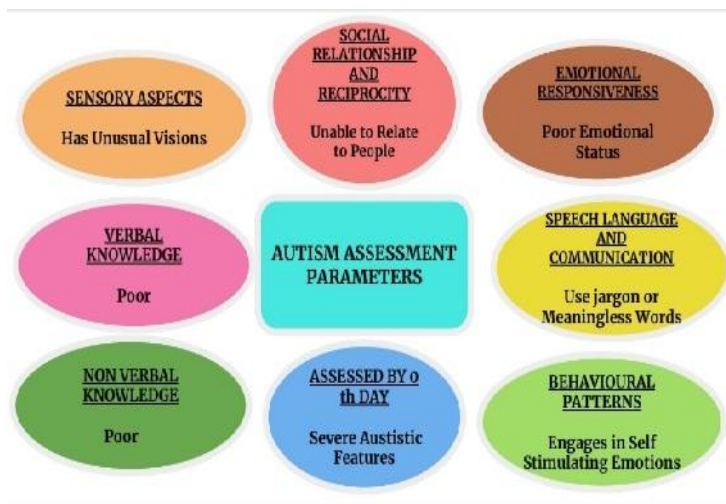
Summary of Disanth activities from 0th day to 60th day



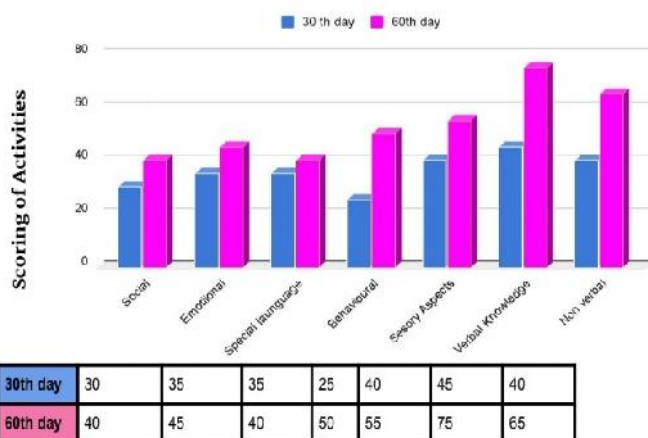
Case study 3. Baby- Nivitha-op.no: 5816

Nivitha is a 3 year old Female Child was born by normal delivery, Birth weight 3.1 kg. Child had cried immediately after birth. There was no

history of Seizure. Global developmental Milestones are normal. At the age of one and half years parents were noticed he had difficulty to challenged day to day life activities.



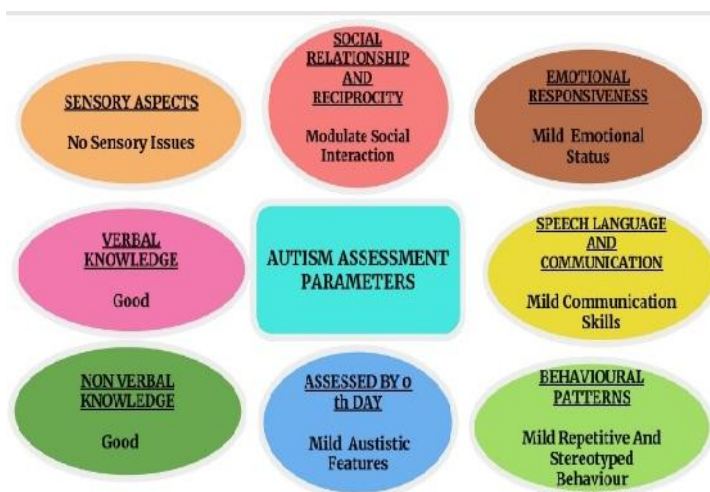
Summary of Nivitha activities from 0 day to 60th day



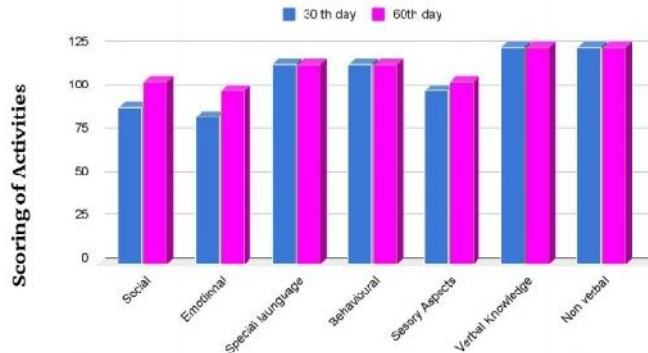
Case study 4. Mast –Lingesh-op.no: 244

Lingeshis a 4 year old male Child was born by L.S.C.S, Birth weight 2.8 kg.Child had cried immediately after birth. There was no history of

Seizure. Global developmental Milestones are normal. At the age of 2 years parents were noticed he had difficulty to challenged day to day life activities.



Summary of Lingesh activities from 0 day to 60th day

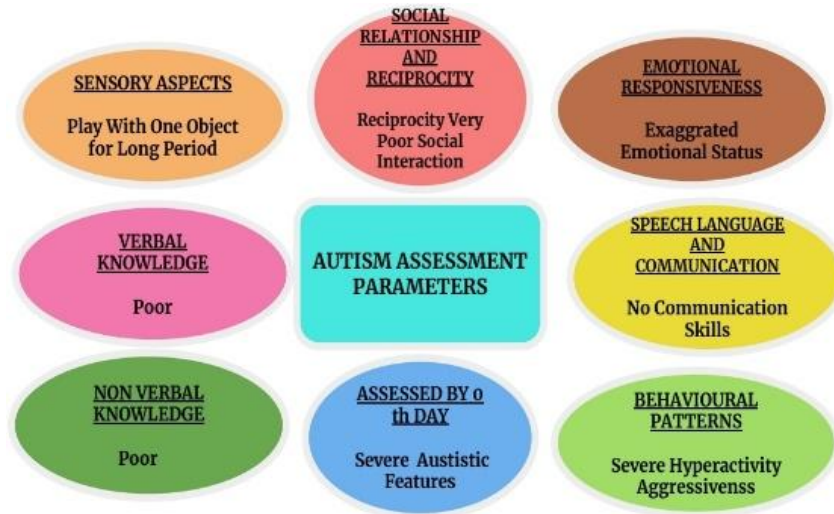


30th day	90	85	115	115	100	125	125
60th day	105	100	115	115	105	125	125

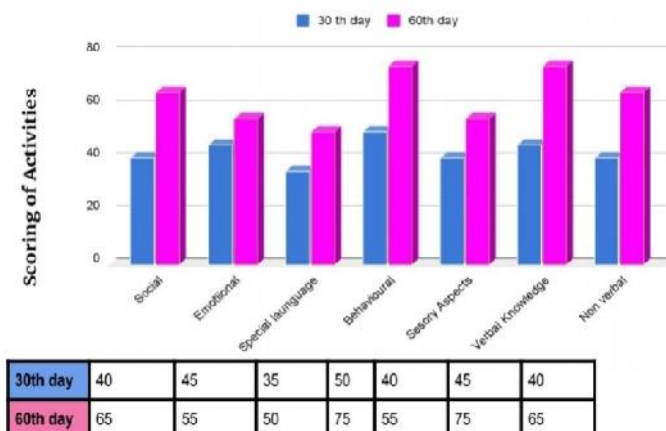
Case study 5. Mast –Krithik- op.no: 3668.

Krithik is a 5 year old male Child was born by normal delivery, Birth weight 3kg. Child had cried immediately after birth. There was no

history of Seizure. Global developmental Milestones are normal. At the age of 3 years parents were noticed he had difficulty to challenged day to day life activities.



Summary of Krithik activities from 0 day to 60th day



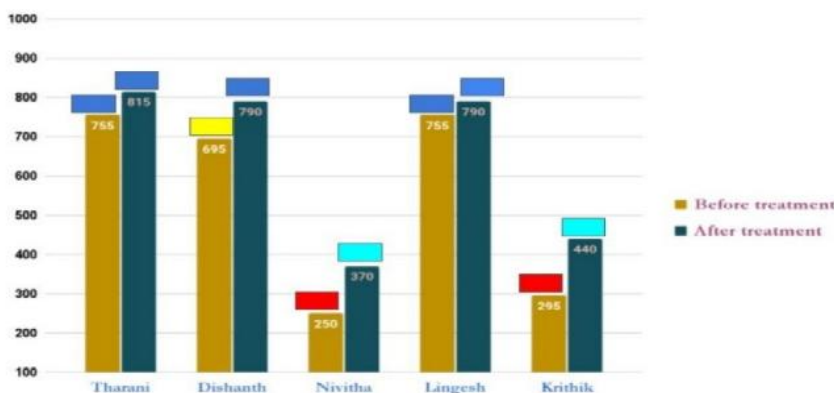
Summary of Case Study

After the treatment period of 2months the results were shown in all the 5 ASD children are:

-) Improvement in cognitive skills
-) Improvement in eye to eye contact
-) Reduction in hyperactivity behaviour
-) Improved in sitting tolerance
-) Enhancing the mind calming activity
-) Able to try to speak the verbal with limited language skills.

-) Able to mingle the other children.
-) Giving a good sound to sleep.
-) Able to understand the situation.
-) Able to sit calm in outdoors
-) Able to try to reading, writing, drawing, sketching in school.
-) Patient gets immediate good response after the pugai therapy.

So the Siddha internal and external therapies are enhancing the quality of life of ASD children.



Discussion

The kudineer or kashym which is decoction in English. As external Siddha literature generally kudineer are prepared by boiling fresh or dried drugs with the addition of specified volume of

water till the water is reduced to one fourth and then filtered. Kudineer is quickly on the digestive tract and have the strongest action compare to all traditional preparation. The pugai therapy it stimulate the olfactory nerve and it reduce the aggressiveness and improve eye contact.

Conclusion

Autism was first described in 1943. But in our siddha literature gives the complete symptomatic detail about ASD(Manthasanni) and medicine also on before 2000 years ago. The neuro behavioural disorder (ASD) cases are increased day by day. The article clearly gives the knowledge for autistic children treatment on siddha. It improves the child's cognitive skill and reduce the parents stress. Every April 2 is marked as world Autism awareness Day to create awareness for this disorder. This article also gives a good positive results for autistic child and eventhough the medicine present in ancient medicine and ancient literature this topic need more research for further strong belief to all.

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