## AN OBSERVATIONAL STUDY ONSIDDHA DIAGNOSTIC TOOLSINCLUDING LINE OF TREATMENT AND DIETARY REGIMEN OF KABAALA KARAPPAN

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GOVT. SIDDHA MEDICAL COLLEGE **ARUMBAKKAM, CHENNAI-106** 

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I hereby declare that this dissertation entitled An Observational Study on

Siddha Diagnostic Tools including line of treatment and dietary regimen of

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the award of any degree, diploma, fellowship or other similar title.

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Diagnostic Tools including line of treatment and dietary regimen of KABAALA

KARAPPAN is submitted to the Tamilnadu DR.M.G.R. Medical University in partial

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bonafide and genuine research work done by Dr.P.THIRUVENGADAM under my

supervision and guidance. The dissertation has not formed on the basis for the award

of any degree, diploma and fellowship or other similar title.

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Diagnostic Tools including line of treatment and dietary regimen of KABAALA

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## **INTRODUCTION**

#### **INTRODUCTION:**

Siddha system of medicine is formerly sponsored and developed by the Siddhars in Tamil land. The word Siddha comes from the word "Siddhi", which means perfection or great supernatural powers.

Siddha system of medicine is one of the most traditional systems of medicine. It has been developed by the Siddhars, who engaged in pursuit of knowledge on physical, chemical and biological phenomena of the universe. In Siddha system of medicine described about anatomy, physiology, and body constitutions of human body,

```
"பராபரமாகிய பரமேசுவரன்
தராதலம் படைக்கத் தானினைற் தருளி"
```

Siddha system elaborates the connections between body, mind, and soul. Siddha system is the valuable gift of natural healthy, life styles. In the basic theory of Siddha system consist of 96 thathuvam three uyir thathukal (vaatham, pitham, kabam) and they are related to arusuvaigal and panchaboothams.

```
"பாரப்பா பூதமைந்து மண்நீர் தேயு
பரிவாயு வாகாய மைந்தினாலே...."
- சதக நாடி
```

They classified the diseases principles for vital humors. They exist in a ratio 1:1/2:1/4 respectively in normal conditions.

```
"மெய்யளவு வாதமொன்று
மேல்பித்த மோரரையாம்
ஐயங்காலென்றே அறி"
```

- கண்ணுசாமியம்

Derangement of these three kuttrams causes the dissease. This is what, the saint Thiruvalluvar says,

```
மிகினும் குறையினும் நோய்செய்யும் நூலோர்
வளிமுதலா எண்ணிய மூன்று
```

- திருக்குறள்

Most of the current modern scientists say about the etiology of the disease, as incoherent life style. This idea is not one, just a reiteration of siddhars thought.

The Siddha medicine is not only deal with medicine but also includes Astrology, Alchemy, Physiology and Pathology. Siddha system is an evolution of daily life style, thereby preventing major diseases by correcting day to day life activities. The Siddha system is developed with culture of Tamilnadu.

Siddha system was established by ancient saints. Siddhars made an extensive research in various medical fields like diagnostic methodology, disease classification, complication & prognosis.

Their most important aim was before treating disease to target the deranged kutram. The deranged kutram was detected by simple diagnostic methodologies like all these methodologies to gather were group to form a branch of science is called NOI NAADAL, which mainly targets the root cause of a disease. In the traditional medical practices, we can see different methods of diagnosis which are not their consuming.

Kabaala karappan affected 1 to 5% of the general population. It is slightly more common in men but affected women kind to have more severe symptoms. Kabaala karappan can occur in any age group but usually starts at puberty and peaks in incidence at around 40 years at age. It can reportedly affected as many as 31% of older people. Severity is worse in dry climate.

The prevalence rate of Kabaala karappan is 3 to 5% with worldwide distribution. And also the special OPD had the prevalence. This would cause the interest in the study with siddha parameters.

# AIM AND OBJECTIVES

#### **AIM AND OBJECTIVE**

#### AIM:

To evaluate Naadi, Sparisam, Niram, Moothiram (Neerkuri and Neikuri) in patients of **Kabaala karappan**.

#### **OBJECTIVE:**

#### PRIMARY OBJECTIVE:

To elucidate Naadi, Sparisam, Niram, and Moothiram (Neerkuri and Neikuri) in patients of **Kabaala karappan.** 

#### **SECONDARY OBJECTIVE:**

- To elucidate Naa, Mozhi, Vizhi, Malam, and Manikkadai nool in patients of **Kabaala karappan**.
- To elucidate the collection of Yakkai and Panchapatchi Sasthiram in patients of **Kabaala karappan**.
- To elucidate the line of treatment and dietary regimen of **Kabaala karappan**.

### REVIEW OF LITERATURE

#### REVIEW OF LITERATURE

#### SIDDHA ASPECT

#### KABAALA KARAPPAN:

"Kabaala karappan" is one of the seven types of "Karappan Noi". This karappan disease is described by various Siddhars in detail about is general aetiology, signs and symptoms and prognosis of karappan.

#### KARAPPAN DISEASE

Karappan is a skin diseases characterized by clinical features of Thinavu, Sori, Thadippu, Vedippu, Pun, Neerkachithal, followed by changes in skin colour.

#### நோய் வரும் வழி [AETIOLOGY]:

#### According to yugi vaidhya Chinthamani

ஏழான கரப்பானின் உற்பத்தி கேளாய் ஏற்றமாய் மாமிசங்கள் புசிக்கையாலும் கூழான கம்பு தினை வரகு சாமைக் கொடிதான கிழங்குவகை யருந்தலாலும் பாழான பெண்மாயை தன்னிற் சிக்கும் பாங்கான விரதத்தின் முயற்சியாலும் தாழான பண்டங்கள் சமைத்து தின்னல் தாக்குமே கரப்பான் தன்சாயல் தானே சாயலாய்த் தனக்குதான் மூத்த பெண்ணைத் தாவினோர் தாழ்ச்சியாந் சாதிதன்னில் காயலாய்க் கலந்துண்டோர் கலகம் செய்தோர் கற்புடைய மங்கையரைக் கருதினோர்கள் மருத்துவர்கள் வண்ணார் நாவிதர்கள் கூலிக் கூயலாக் கொடாதோர்கள் குருநிந்தித்த கொடும்பாவி கரப்பானிற் குறிகொள்வாரே"

According to yugimuni, excessive intake of meat, fish, cereals such as Kambu, Thinai, Varagu and Saamai, some tubers, excessive indulgence and many antisocial activities that cause psychological disturbances may cause karappan.

#### **According to Pararaasasegaram**

வாதபித்தங் கபமிவை மூன்றவர் ரேது வாயில் வெளியால் மிடியாதுவீனர் கோதையார்டிய பார்வையர் வார்குளீர் பேதநீரிவை யாலுன பேசு கேள் வேகக் கற்றதினர் பனைவெல்லத்தால் பாக மிக்கலான் மேதிப்பா வெய்யால் தாகமான் வருக்கதி சார்தலால்

போக வாழை வழுதலை முள்ளிக்காய் காயும் பல்விடத் தாற்சுரந் தாற்கனில் ஏயும் வண்டெலியால் வருமேது வெளி குடி நல்லறிவான எருவினார் யாயுமான கரப்பான் வகைகளே"

- பரராச சேகரம் சிரரோக (பகுதி-1, பக்கம் – 67)

Living in torrid climate, using contaminated water, excessive intake of palm jaggery, fish, mangoes and some poisonous bites are are the factors that may cause the disease.

#### According to Agasthiyar kanma kandam-300

உண்மையென்ற கரப்பானோடு வண்டுகடி குட்டம் உலகிலுள்ளோர்க் கிதுவத்த உண்மை கேளு தண்மையென்ற தில்லாமல் உதாசினங்கள் பேசல் சற்குருவைத் தூடணித்த சண்டாளத்தால் வண்மையென்ற வழியிலே முன்னிட்டு வைத்தல் மரந்தழைகள் பூவுதிர வடித்த பாவம் பெண்மயிலே வண்டுகடி விடமுஞ் சேர்ந்து பலத்த சொறி குட்டமது பிலத்தவாறே"

- **அகஸ்தியர் கன்ம காண்டம்**-300, ப**க்கம்-**37

It is clear from the above poem that all types of bad mannerisms, anti social activities and some poisonous bites cause this disease.

#### **Dietary factors**

பெருகுஞ் சோள மிறுகும் பெருங்கம்பு வரகு காருடன் வாழையின் கனியோடு உரைகொள் பாகற் கெளிற்றுமீன் உண்டிடல் விரிவதாய்க் கரப்பானு மிகுந்ததே"

-பாலவாகடம் திரட்டு, பக்கம்-241

Choolam, Kambu, Kar arisi, Unriped banana, Bitter guard, and certain types of fish aggravate the cause of disease.

#### Kanmam

விரல் குறுகுங் கால் நிமிறும் விஷம் போலேறும் மெய்யழுந்துஞ் தலை சுழலும் வெருக்கு மேனி பரமான தேகமெல்லாந் தடித்து காணும் பாதமெல்லாம் வெடித்து மிகப்புண்ணுங் காணுந் சரசமுடன் சொறிகரப்பான் புண் போல் தோணுந் சாந்தையதே விந்தை கெடுத்தடி வீங்கும் நாருலகிலிந் நோய்க்கு மருந்தீயாமே"

அகஸ்தியர் பரிபூரணம் - 400

According to the above poem, kanmam is also the causes for this disease.

#### பிறக்கும் போதே நோயும் பிறந்தது

```
திங்கள் பத்தாகிற் தேய்வோடு வாயுஞ் சேர்ந்து
தங்கி மலர்த்தி யமனியாய்க் கீழ்நோக்கிப்
பொங்கிப் பிறந்தநாள் புகழ் பார்பெறுவீணர்
தங்கி செனிக்கையிற் நோயு முற்றதே"
```

நோய் நாடல் நோய் முதல் நாடல்

The cause for the disease is attributed to entering the gene at the time of fertilization itself.

#### பொது குறிகுணங்கள்; [General signs and symptoms]

```
எண்பது கரப்பான் தன்மையியம்பிடுமாறு கேளீர்
நண்பிடும் வாதம் நலம்கெட்டுத் தானம் வீங்கும்
புண்படும் கரப்பான் சந்து புலைத்தடங் கடுத்து நோகும்
வன்மையுடன் வெடித்துச் சூலை வருவது ரணமீதென்ன
```

```
உளைஞ்சுமே வயிறுதான் சீதங்காணும்
உஷ்ணமாய் மூத்திரந்தான் முறுக்கிவீழும்
அனைஞ்சுமே யங்கமெல்லாம் சொறியுண்டாம்
அடிவாக வெதுப்பலாய்க் காக்க யோவும்
புகைஞ்ச மேனியங்கத்திற் புண்பொலருக்கிப்
பொடி பொடியாய் சுண்ணாம்பு கற்போல் வீழும்
களைஞ்சுமே நீரொடு மலமுஞ் சிக்கும்
கசியுமே கரப்பானாம்"
```

அகஸ்தியர் இரண நூல் (பக்கம் – 3)

Apart from generalized itching the signs and symptoms of karappan are ulceration, pain in the joints, constipation, and scanty micturation.

#### 3. NOI ENN-CLASSIFICATIONS

Various siddhars have classified the varieties of karappan differently in their literature.

#### In Yugi vaidhya Chinthamani

```
ஆமென்ற கரப்பபான் தான் ஏழுவிதமாகும்
அடங்காத வாதத்தின் கரப்பானோடு
காமென்ற கண்டமாங் கரப்பானாகும்
கருதியதோர் வறட்சியாங் கரப்பானோடு
தோமென்ற திமிர் வாதக் கரப்பான்றானும்
சிரசினிலே யெழுகபாலக் கரப்பான்
போமென்ற பித்தமாங் கரப்பானோடு
பெரிய சேத்துமக் கரப்பான் பெயர்தானேழு
```

யூகி வைத்திய சிந்தாமணி -800

Karappan is classified in 7 types. They are

- 1. Vatha karappan
- 2. Pitha karappan
- 3. Kaba karappan

- 4. Thimirvatha karappan
- 5. Kanda karappan
- 6. Kabala karappan
- 7. Varachi Karappan

#### In Balavakada Thirattu

The 18 types of karappan are noticed in children,

செங்கரப்பான் அனற்கரப்பான் தானும்மண்டைச் சிரங்கு பண்ணும் அரிகரப்பான் தானும்மிக்க அனராம் உதிரக் கரப்பான் கட்டியோடு பொங்கமாய் வீங்கி கரப்பானுந் தான் புகலரிய சட்டை தடிவெடி கரப்பான் சிங்கமுக எரிகரப்பான் பித்தக்கரப்பான் சேத்துமத் தோடே கரப்பான் பதினெட்டாமே எண்வகைக் கரப்பான் இசைந்திடக் கேளு

பாலவாகடத் திரட்டு, பக்கம்-24

#### The 18 varieties of Karappan are

- 1. Vatha karappan
- 2. Pitha karappan
- 3. Soolai karappan
- 4. Vedi karappan
- 5. Mandai karappan
- 6. Sattai karappan
- 7. Oodu karappan
- 8. Karung karappan
- 9. Pori karappan

- 10. Ari karappan
- 11. Oouthu karappan
- 12. Seng karappan
- 13. Sethuma karappan
- 14. Kolli karappan
- 15. Thoda karappan
- 16. Vali karappan
- 17. Veenku karappan
- 18. Varal karappan

#### In agasthiyar 2000

விளம்பிடு வாத நோவு எண்பத்து நாலு மிக்க உள்ளங்கள் சன்னி முப்பதோங் குடல்வாயு மெட்டு கழங்கமு முப்பத்தேழு கரப்பானும்மறுபத்தாறு தனங் கொள்ளிப் புருதி நாலு சாற்றுளைகுறவையெட்டே

**அகஸ்தியர்** 2000 (ப**க்கம்**-46)

According to this poem karappan are 66 in numbers.

In Agasthiyar Rana Nool

எண்பது கரப்பான் தன்னை யியம்பிடுமாறு கேளிர் நண்பிடும் வாதம் பித்தம் நலங்கெட்டுத் தானம் வீங்கும் புண்படும் கரங்கள் சந்து புலைந்திடல் கழுத்து நோகும் வன்மையுடன் வெடித்துச் சூலை வருவது ரணமிதென்னவே

அகஸ்தியர் இரணநூல் (பக்கம்-3)

It is stated that there are 80 varieties of karappan

#### In Guru Nadi Sasthiram

Karappan is classified into 85 types as follows

படுவண் முப்பதிரண்டு பருவெளு நாற்பத்தொன்று முடிகிடும் விஷபமாறு மற்று மோஷசி மூன்னூர் திடுக்கிடும் பீலீ மூன்று சிரசினிற் சிவந்து சொல்லில் குடுகிடு மைடம் பத்தாறு கரப்பானு மென்பத்தைந்து

- குருநாடி சாஸ்திரம் (பக்கம்-11)

#### In Agasthiyar Rathina Surukka Naadi Nool

It was mentioned that karappan are 90 in numbers.

பீலியுடனுறு வசியமஞ்சதாகும் பொரிகரப்பான் தொண்ணூறு கொண்டை பத்து

#### In Siddhar Aruvai Maruthuvam

Karappan is classified into 6 types

- 1. Vatha karappan
- 2. Ven karappan
- 3. Pitha karappan
- 4. Sen karappan
- 5. Kaba karappan
- 6. Karung karappan

S.NO	NAME OF THE SIDDHA TEXT	TYPES
1.	YUGI VAIDHIYA CINTHAMANI	7
2.	BALAVAKADA THIRATTU	18
3.	AGASTHIYAR 2000	66
4.	AGASTHIYAR RANA NOOL	80
5.	GURU NAADI SASTHIRAM	85
6.	AGASTHIYAR RATHINA SURUKKA NAADI NOOL	90
7.	SIDDHAR ARUVAI MARUTHUVAM	6
8.	T.V.SAMBASIVAM PILLAI TAMIL AGARATHI	48

#### SIDDHA PHYSIOLOGY

#### SUHARANA NILAI (PHYSIOLOGY) IN SIDDHA MEDICINE:

According to Siddha system, the evolution of universe and the living beings are by same phenomenon (Panchabootha panchikaranam). Panchaboothas are the most fundamental properties of physical creation. The human body and the universe are constituted by the combination of panchaboothas.

The first element is Aagayam (Space) and is evolved from Oungaram, from that Vayu (Air), Theyu (Fire), Appu (Water), Prithivi (Earth) are formed. Each of the elements cannot act independently and they can act in coordination with other four elements. Any change in the universe reflects in the human body.

#### உலகம் பஞ்ச பூதம்:

"நிலம் நீர் தீவளி விசும்போடைந்தும் கலந்தமயக் கமுலகம் இது"

- தொல்காப்பியம்

#### தேக பஞ்ச பூதம்:

"பாரப்பா பூதமைந்து மண்நீர் தேயு பரிவாயு வாகாய மைந்தி னாலே சேரப்பா சடமாச்சு மண்ணின் கூறு செறிமயிர்தோல் என்பிறைச்சி நரம்பைந் தாகும் நேரப்பா அப்புவின்கூ றுதிர மச்சை நீர்மூளை சுக்கில மோடைந் தாகும் காரப்பா தேயுக்கூறு பயமாங் காரங் கடுஞ்சோம்பல் நித்திரைமை துனங்க ளஞ்சே"

- சதக நாடி

#### **BASIC PRINCIPLES:**

According to Siddha system of medicine, "Thathuvam" is considered as a science that deals with basic functions of the human body. Siddhars described 96 thathuvas as the basic constituents of human body.

#### **UYIR THATHUKKAL:**

The Physiological units of the human body are Vali (Vaatham), Azhal (Pitham) and Iyyam (Kabam). They are also called as the life forces or humours. These three humours are in equilibrium in the ratio of 1:1/2:1/4 mathirai in an healthy state. These humours are formed by combination with five elements (Panchboothas).

"வாதமாய்ப் படைத்துப் பித்த வன்னியாய்க் காத்துச் சேட்ப சீதமாய்த் துடைத்து பாராந் தேகத்திற்குடியா மைந்து" - தேரையர் மருத்துப் பாரதம்

- வாதம் = வளி + விண் = படைத்தல்
- பித்தம் = தீ = காத்தல்
- கபம் = மண் + நீர் = அழித்தல்

#### FORMATION OF UYIR THATHUKKAL:

#### உயிர்தாதுகளின் தோற்றம்

"இருப்பான நாடி ஏழுபதோ டீரா ஈரமான தேகத்தில் ஏலப் பெருநாடி ஒக்கதசமத் தொழிலை ஊக்கதச வாயுக்கள் தக்கபடி என்றே சாரும் சாருந்தச நாடிதன்னில் மூலம் மூன்று பேருமிடம் பிங்கலையும் பின்னலுடன் மாறும் உரைக்கவிரற் காற்றொட் டுணத்துமே நாசி வரைச்சுழியோ மையத்தில் வந்து வந்தகலை மூன்றில் வாயுவா மபானனுடன் தந்த பிராணன் சமானனுக்குஞ் சந்தமறக் கூட்டுறவு ரேகித்தல் கூறும்வாதம் பித்தம் நாட்டுங் கபமேயாம் நாடு"

#### - கண்ணுசாமியம்

தேகத்திலுள்ள மூன்று மூலாதார நாடிகளாகிய இடகலை, பிங்கலை, சுழிமுனை நாடிகள், நாசித்துவாரத்தின் வழியாய் பிராணவாயுவை இயக்கும்போது மூன்று வாயுகளோடு (அபானன், பிராணன், சமானன்) முறையே இணைந்து தொழில்புரிந்து வாதபித்த கபத்தை பிறப்பிக்கும்.

- வாதம் = இடகலை+ அபானன்
- பித்தம் = பிங்கலை+ பிராணன்
- கபம் = சுழிமுனை+ சமானன்

Different forms and types of Vaatham, Pitham and Kabam are

- Vaatham = 10 types
- Pitham = 5 types
- Kabam = 5 types

#### I. VALI (VAATHAM):

The term "vaatham" denotes vayu, pain, dryness and flatulence. Vaatham is responsible for respiration and control of all movements.

Location	Abaanan, faeces, Idakalai, Pelvic bone, spermatic cord, skin, nerves, joints, hairs and muscles.
Characters	It governs the other two basic elements and responsible for all physical process in general. For this reason, disturbance in vaatha tend to have more severe implication than the other two humors and other affect the mind as well as entire physical body and also responsible for respiration.
Functions	Pain in the whole body, twitching, pricking pain, inflammation, reddish complexion, roughness of skin, hardness of limbs, astringent sense of taste in the mouth, constipation, oliguria, blackish discolouration of skin, stool, urine and muddy conjunctiva.

குணங்கள்			எதிா்குணங்கள்		
1. Dry	-	வறட்சி	1. Unctuous	-	பசுமை
2. Cold	-	குளிர்ச்சி	2. Hot	-	அக்னி
3. Light	-	இலகு	3. Solid	-	கெட்டி
4. Rough	-	கடினம்	4. Soft	-	மிருது
5. Unstable	-	அசைத்தல்	5. Stable	-	ஸ்திரம்
6. Subtle	-	அணுத்துவம்	6. Heavy	-	பளுவு

#### வாதத்தின் 10 பிரிவுகள்:

According to Periya Gnana Kovai,

- உயிர்க்காற்று (பிராணன்)
- மலக்காற்று (அபானன்)
- தொழிற்காற்று (வியானன்)
- ஒலிக்காற்று (உதானன்)
- நிரவுக்காற்று (சமானன்)
- விழிக்காற்று (நாகன்)
- இமைக்காற்று (கூர்மன்)
- தும்மல் காற்று (கிருகரன்)
- கொட்டாவி காற்று (தேவதத்தன்)
- வீங்கல் காற்று (தனஞ்செயன்)

- 1. **UYIR KAATRU** (**PIRAANAN**): This is responsible for the respiration of the tissues, controlling knowledge, mind and five sense organs and digestion of the food taken in.
- 2. MALAK KAATRU (ABAANAN): It lies below the umbilicus. It is responsible for the downward expulsion of stools and urine, ejaculation of semen and menstruation.
- 3. **THOZHIL KAATRU (VIYAANAN):** This is responsible for the motor and sensory function of the entire body and the distribution of nutrients to various tissues.
- 4. **OLI KAATRU (UTHAANAN):** It originates at Utharakini. It is responsible for digestion, absorption and distribution of food. It is responsible for all the upward movements.
- 5. **NIRAVU KAATRU (SAMAANAN):** This is responsible for the neutralization of the other 4 Valis i.e. Piraanan, Abaanan, Viyaanan and Uthaanan. Moreover it is responsible for the nutrients and water balance of the body.
- 6. **VIZHILI KAATRU** (**NAAGAN**): It is a driving force of eye balls responsible for movements.
- 7. **IMAI KAATRU** (**KOORMAN**): It is responsible for the opening and closing of the eyelids and also vision. It is responsible for yawning.
- 8. **THUMMAL KAATRU** (**KIRUGARAN**): It is responsible for the salivation of the tongue and also nasal secretion. Responsible for cough and sneezing and induces hunger.
- 9. **KOTTAVI KAATRU (DEVATHATHTHAN)**: This aggravates the emotional disturbances like anger, lust, frustration etc. As emotional disturbances influence to a great extent the physiological activities, it is responsible for the emotional upsets.
- 10. **VEENGAL KAATRU** (**DHANANCHEYAN**): Expelled three days after the death by bursting out of the cranium. It is responsible for edema, plethora and abnormal swelling in the body in the pathological state. Dhanancheyan will occupy the places where the praanan reduced.

#### II. AZHAL (PITHAM)

Location	Piraana vayu, bladdar, moola agni, Heart, Umbilical region, abdomen, sweating, saliva, blood, eyes and skin.		
Characters	It governs digestion, heat, visual perception, hunger, thirst, luster, complexion, understanding, intelligence courage, softness of the body.		
Functions	Acidity, burning sensation in the throat, stomach, yellowish discoloration of skin, eye, urine, sense of defecation, profuse sweating, dizziness etc.		

1. Hot	-	அக்கினி	1. Cold	-	குளிர்ச்சி
2. Mobile	-	அசையுந்தன்மை	2. Immobile	-	நிலைத்திருத்தல்
3. Acute	-	குரூரம்	3. Harmless	-	சாந்தம்
4. Liquid	-	சலருபம்	4. Solid	-	கெட்டி
5. Acid	-	புளிப்பு	5. Sweet	-	இனிப்பு
6. Pungent	-	காரம்	6. Bitter	-	கசப்பு

எதிர்குணங்கள்

#### <u>பித்ததின் 5 பிரிவுகள்:</u>

According to Maruthuva Thani Paadal,

- ஆக்கனல் (அனற்பித்தம் / பாசக பித்தம்)
- வண்ண எரி அனல் (இரஞ்சக பித்தம்)
- ஒள்ளொளித்தீ (பிராசக பித்தம்)
- நோக்கனல் (ஆலோசக பித்தம்)
- ஆற்றலங்கினல்(சாதக பித்தம்)
- **1. AAKKANAL** (**ANALA PITHAM OR PAASAGA PITHAM**): It lies between stomach and intestine. It helps in digestion and dries up the moist ingested substance.
- **2.** VANNA ERI ANAL (RANJAGA PITHAM): It lies in the stomach. It gives colour to the cheme and blood. It improves blood.
- **3. OLLOLI THEE** (**PRASAGA PITHAM**): It lies in skin. It gives colour, scomplexion and brightness to the skin.
- **4. NOKKANAL (AALOSAGA PITHAM):** It lies in eyes. It is responsible for vision.
- **5.** AATRALANGI ANAL (SAATHAGA PITHAM): It lies in joints. It gives energy to the joints for various activities of the body.

#### III. IYYAM (KABAM)

Kabam is life representation of Appu and Mann pootham. It is responsible for maintenance of body structure and also responsible for the defence mechanism.

Location	Samaanan. Suzhumunai, Vinthu, head, fat, bone marrow, blood, nose, colon, joints, chest, tongue etc.		
Characters	It governs stability, lubrication, holding together of the joints, ability to cope with hunger, thirst, worry, heat ect.		
Functions	Fair complexion, itching, dullness, cold, heaviness, loss of sensation. sweetness in mouth, indigestion etc.		

குணங்கள்			எதிர்குணங்கள்		
1. Unctuous	-	ஈரம்	1. Hot	-	உட்டிணம்
2. Sweet	-	இனிப்பு	2. Pungent	-	காரம்
3. Heavy	-	பளுவு	3. Light	-	இலகு
4. Cold	-	குளிர்ச்சி	4. Dry	-	வநட்சி
5. Soft	-	மிருது	5. Rough	-	கடினம்
6. Immobile	-	அசைவின்மை	6. Mobile	-	அசைதல்
7. Viscid	-	ഖழഖழப்பு	7. Sandy	-	கரகரப்பு

#### <u>கபத்தின் 5 பிரிவுகள்:</u>

According to Maruthuva Thani Paadal,

- அளியையம் (அவலம்பகம்)
- நீர்ப்பியையம் (கிலேதகம்)
- சுவைகாணையம் (போதகம்)
- நிறைவையம் (தற்பகம்)
- ஒன்றியையம் (சந்திகம்)
- **1. ALI IYYAM** (**AVALAMBAGAM**): Its lies in heart. It controls all other types of iyyam.
- **2. NEERPI IYYAM (KILETHAGAM):** It lies in stomach. It gives moisture and softness to the ingested food.
- **3. SUVAIKAAN IYYAM (BOTHAGAM):** It lies in tongue. It is responsible for the sense of taste.
- **4. NIRAIVAIYYAM (THARPAGAM):** It lies in head. It gives coolness to heads and eyes.
- **5. ONDRI IYYAM (SANTHIGAM):** It lies in joints. It is responsible for the movements of joints by giving lubrication.

#### **UDAL THATHUKKAL**

There are seven physical constituents situated in the body. It maintains the function of different organs, systems and vital parts of the body. They play a very important role in the development and nourishment of the body

The Udal kattukkal are also part of the biological protective mechanism with the help of the agni, they are responsible for the immune mechanism. When one thathu is defective, it affects the successive thathu, as each thathu receives its nourishment from the previous thathu.

#### According to "Thirumoolar Thirumanthiram",

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"ரசம் உதிரம் இறைச்சி தோல் மேதை
மருவிய வத்தி வாழும் பொடு மச்சை
பரவிய சுக்கிலம் பாழாம் உபாதி
உருபம லாறுடல் ஒன்றுனலாமே"
```

திருமந்திரம்

The seven Udal kattukkal are as follows,

- சாரம்
- செந்நீர்
- ஊன்
- கொழுப்பு
- என்பு
- மூளை
- சுக்கிலம்/சுரோணிதம்

#### 1. Saaram - Chyle

It contains nutrients from digested food which enriches the blood and nourishes all the tissues, organs and systems.

#### 2. Chenneer - Blood

It governs oxygenation in all tissues in vital organs. It is responsible for the nourishment, strength and colour of the body.

#### 3. Oon - Muscle

It gives shape to the body as needed for the physical activity by covering the bones. It performs the movements of the joints and maintains the physical strength of the body.

#### 4. Kozhuppu - Fat

It maintains the lubrication of joints and other parts of the body which also gives energy to the body.

#### 5. Enbu - Bone

It support and protect the organs which maintains the posture and movement of the body.

#### 6. Moolai – Bone marrow, Brain

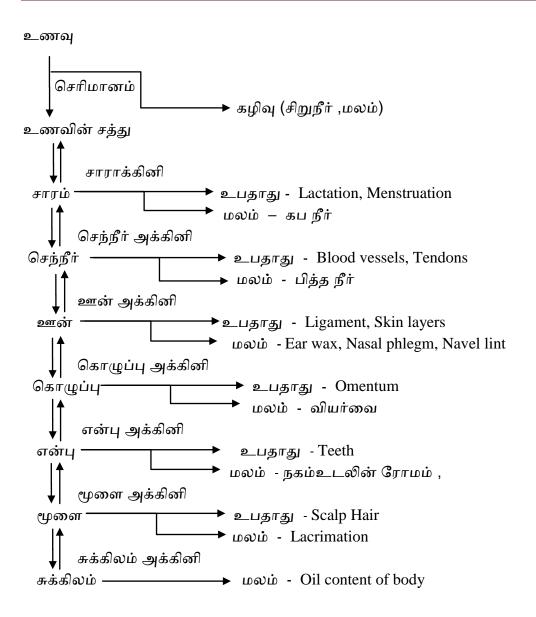
It occupies the bone marrow and nourishes the bone, which gives strength and softness.

#### 7. Sukkilam (or) Suronitham – Sperm (or) Ovum

It is responsible for reproduction.

#### PROCESS OF UDAL THATHUKKAL IN DIGESTION:

ஏழு உடற்கட்டுகள் நன்றாக இருக்க குடல் அக்கினி நன்றாக இருக்க வேண்டும். குடலக்கினி கூடுதல் குறைதலுக்கு ஏற்றவாறு உணவு உட்கொள்ளல் வேண்டும். உடற்கட்டுகளின் அளவில் குறைந்தால் உபதாது அல்லது மலத்தின் அளவு அதிகரிக்கலாம்.



#### **THINAI**

S. NO	THINAI	LAND	HUMORS
1.	Kurinchi	Mountain and its surroundings	Kabam
		(Hilly terrain)	
2.	Mullai	Forest and its surroundings	Pitham
		(Forest ranges)	
3.	Marutham	Farm land and its surroundings	All three humors are in
		(Cultivable lands)	equilibrium
4.	Neithal	Sea shore and its adjoining areas	Vatham
		(Coastal belt)	
5.	Paalai	Desert and its surroundings	All three humors are
		(Arid zone)	affected.

#### KAALAM

In Siddha system of medicine Sidhars have classified a year into six seasons, called Perum Pozhudhugal, each having two months.

#### PERUM POZHUDHUGAL

A year is divided into six seasons. They are as follows:

- Kaar kaalam Monsoon season (August 16 October 15)
- Koothir kaalam Postmonsoon season(October 16 December 15)
- Munpani kaalam Early winter season (December 16 February 15)
- Pinpani kaalam Late winter season (February 16 April 15)
- Illavenil kaalam Early summer season (April 16 June 15)
- Mudhuvenil kaalam Late summer season(June 16 August 15)

#### SEASONAL CHANGES OF MUKKUTRAM

S.no	Kuttram	Thannilai valarchi	Vaetrunilai valarchi	Thannilai adaidhal
1	Vaadham	Mudhuvaenirkaalam	Kaarkaalam	Koodhirkaalam
2	Pitham	Kaarkaalam	Koodhirkaalam	Munpanikaalam
3	Kabam	Pinpanikaalam	Elavaenirkaalam	Mudhuvaenirkaalam

#### KOSAM – 5

- 1. ANNAMAYA KOSAM (PARU UDAMBU): Formed by 7 Udal thathukkal
- **2. PRANAAMAYA KOSAM (VALI UDAMBU)**: Formed by the combination of Pranaan and Kanmenthiriyam.
- 3. MANOMAYA KOSAM: Formed by the combination of Manam and Gnanenthiriyam.
- **4. VIGNAANAMAYA KOSAM:** Formed by the combination of Buthi and Gnanenthiriyam.
- 5. **AANANTHAMAYA KOSAM:** Formed by the combination of Pranavayu and Suluthi.

#### MANDALAM – 3

- 1. **THEE MANDALAM or FIRE ZONE** (Moolaadhaaram to Naabi): It is found two fingers above the Moolaathaaram
- **2. GNAYIRU MANDALAM or SOLAR ZONE** (Thummni to Naabi) It is located four finger above the umbilicus.
- 3. **THINGAL MANDALAM or LUNAR ZONE** (Utchi to Thummi) It is situated at the center of two eye brow.

#### YAKKAI (SOMATIC TYPES):

Characters	Vatha constitution	Pitha Constitution	Kaba Constitution
Build and appearance	Lean and lanky, lengthy built	Moderate build	Short, uniform thickness, broad build.
Skin - colour &	$\mathcal{E}$	Red and Yellow.	Yellowish white.
Complexion	admixed complexion. Dry skin	Wrinkles and shiny	Fleshy, floppy and shiny
Bones and Joints	Cracking sound of joints on walking with prominent joints	Thin covering of bones and joints by soft tissue	Plumpy joints and limbs
Hair and eyelashes	Split hair and dark eyelashes	Sparse hair with graying	Dark and Dense hair
Appearance of Eyes	Lengthy Eyes	Easily suffering eyes due to heat and alcohol	Sparkling eyes
Vision	Long sight	Short sight	Clear sight
Voice	Clear and high pitched voice	Clear and medium pitched voice	Husky and unclear. Low pitched voice
Tongue	Lengthy, sharp ended tongue with black patches	Medium and yellow or red coloured	Blunt, thick tongue with white coated
Appetite	Scant appetite for cold food items	Increased appetite and intolerance to hunger, thirst, heat	Less appetite and tolerant to hunger, thirst, heat
Taste	Desire for pungent, salt, sweet, heat	Desire for bitter, sweet, astringent	Desire for sour, bitter, astringent
Sleep	Sleeping with half closed eyes	Medium sleep	Deep sleep
Dreams	Flying in dreams around the hills, sky. Walking around the dense forest.	Seeing like yellow colour flowers, fire, sun, thunder.	<u> </u>
Strength	Poor strength	Medium strength	Immense strength
Character	Unstable mind, change of mood according to situation	Medium, discipline, Good habits, Eagerness	Stable mind. Discipline and increased knowledge
Knowledge	Oscillation mind	Brilliance	Genius
Sexual activity	Loss of libido	Desire in sexual activity	Loss of libido

#### SIDDHA PATHOLOGY

#### KUGARANA NILAI (PATHOLOGY) IN SIDDHA MEDICINE

உடலின் உணவாதிச்செயல்களால் முக்குற்றங்களும் மிகுதிப்படுவதினால் உடற்தாது,உயிர்தாதுவில் ஏற்படும் மாற்றங்களின் காரணகாரியமே **நோய்** எனப்படும். இதனையே **பிணி, வியாதி, வினை, தாதுதோட வேறுபாடு, அசவுக்கியம்** என்பர்.

#### நோய் உண்டாவதற்கு காரணம்:

- 1) ஒழுங்கற்ற ஆகாரத்தினால் ஏழு உடற் தாதுக்களாலான சரீரத்திற்கு பாதிப்பு வரும்.
- 2) வளி, அழல், ஐயம் மிகுதல், குறைதலுக்குக் காரணமான தொழில் செய்தாலும்.
- 3) சரீரத்திற்கு அன்னியமான வாதம், பித்தம், கபம் போன்ற ஆகாரச்சத்துக்கள் அளவுக்கு மிஞ்சியும், குறைந்தும் உட்சென்றாலும் **நோய்** வரும்.

மூன்<u>ங</u> இவை அளவக்க மிஞ்சியிருப்பின், தேகத்தி<u>ல</u>ுள்ள சக்கிகள் அன்னியமான Сипппи மிகுதியை வெளிபடுத்த முயலும். அவை அதனுடன் பலவீனப்பட்டிருப்பின் எளிதில் போக்கியும், மிகுந்திருப்பின் சப்த தாதுக்களின் தொழிலை மாறுபடச் செய்தும் மிகுந்தும் குறைந்தும் போகும். அப்போது தேகத்தின்கன் உண்டாகும் குணங்களின் காரியமே "நோய்" எனப்படும்.

இதனை தெய்வப்புலமை **திருவள்ளுவநாயனாா்**,

"மிகினும் குறையினும் நோய்செய்யும் நூலோர்

வளிமுதலா வெண்ணிய மூன்று"

உணவு பொருள்களை வேண்டிய அளவு கொள்ளாது அளவு கடந்து உண்ணல் அல்லது சிறு உணவு கொள்ளல், தன் வன்மைக்கு மிகுந்து உழைத்தல், சோம்பிக்கிடத்தல் இவற்றால் வளி,அழல்,ஐயம் மூன்றும் மிகுந்தேனும் குறைந்தேனும் பிணிக்கப்பட்டு **நோய்** உண்டாகும்.

#### **OUANTITATIVE CHANGES OF UYIR THATHUKKAL**

HUMOUR	INCREASED	DECREASED
VALI (Vaatham)	Wasting, blackish discoloration, affinity to hot foods, tremors, distended abdomen, constipation, weakness, insomnia, weakness in sense organs, giddiness and laziness.	Body pain, feeble voice, and diminished capability of the brain, decreased intellectual quotient, syncope and increased kaba condition.
AZHAL (Pitham)	Yellowish discoloration of conjunctiva, skin, urine and faeces, polyphagia, polydypsia, dyspepsia, burning sensation all over the body and decreased sleep.	Loss of appetite, cold, pallor and features of increased kabam.
IYYAM (Kabham)	Loss of appetite, excessive salivation, diminished activity, heaviness, pallor, cold, decreased physical constituents, dyspnoea, flatulence, cough and excessive sleep.	Giddiness, dryness of the joints and prominence of bones. Profuse sweating in the hair follicles and palpitation.

#### QUANTITATIVE CHANGES OF UDAL THATHUKAL

UDAL KATTUKKAL	INCREASED FEATURES	DECREASED FEATURES
1.SAARAM	Loss of appetite, excessive salivation, diminished activity, heaviness, pallor, cold, decreased physical constituents, dyspnoea, flatulence, cough & excessive sleep.	Dryness of skin, tiredness, loss of weight, lassitude and irritability while hearing louder sounds.
2.CHENNEER	Boils in different parts of the body, Spleenomegaly, tumours, pricking pain, loss of appetite, haematuria, hypertension, reddish eye and skin, leprosy and jaundice.	Affinity to sour and cold food, nervous, debility, dryness and pallor.
3.00N	Tubercular adenitis, venereal diseases, extra growth around neck, cheeks, abdomen, thigh and genitalia.	Lethargic sense organs, pain in the joints, muscle wasting in mandibular region, gluteal region, penis and thighs.
4.KOZHUPPU	Identical feature of increased flesh, tiredness, dyspnoea on exertion, extra musculature in gluteal region, external genitalia, chest, abdomen and thighs.	Loins pain, spleenomegaly and emaciation.
5.ENBU	Excessive ossification and dentition.	Joint pain, falling of teeth, falling and splitting of hairs and nails.
6.MOOLAI	Heaviness of the body and eyes, swollen interphalangeal joints, oliguria and non-healing ulcers.	Osteoporosis &Blurred vision.
7.SUKKILAM (OR) SURONITHAM	Increased sexual activity, urinary calculi.	Dribbling of sukkilam/ suronitham or senner during coitus, pricking pain in the testis & inflammed and contused external genitalia.

#### **REVIEW OF KABAALA KARAPPAN:**

Kabala karappan is one of the vatha influenced disease and it is one of the 7 types of karappan, which is due to increased vatha humour in the body.

#### கபாலக் கரப்பான்

காணவே காதெல்லாந் தினவுண் டாகும் கண்தினவாங் கண்டந்தான் கரகரக்கும் பூணவே கண்ணீரும் பீளை யுண்டாம் பேச்சுமந்த மூக்கமெனில் நீரோ பாயும் தோணவே சிரசுதனிற் சொறித லுண்டாந் தும்பல்மிக வுண்டாகுந் துடிக்கு நெற்றி ஆணவே அண்ணாக்கில்ழருண் டாகும் அடநிகாத கபாலகப் பான்றானாமே.

- யூகி வைத்திய சிந்தாமணி-772

காது, கண்களில் அரிப்பு உண்டாகி தொண்டை கரகரப்பு,கண்களில் பீளை சேர்தல்,குரற்கம்மல், மூக்கில் நீர் வடிதல், தும்மல் உண்டாகும்.சிரசில் சொறி, நெற்றி துடிப்பு, உள்நாக்கில் எரிச்சல் போன்றவை காணும்.மேற்கண்ட குறிகுணங்கள் கபாலக் கரப்பான் என்னும் நோயில் காணலாம் என யூகிமுனி கூறியுள்ளார்.

#### CLINICAL SYMPTOMS OF KABAALA KARAPPAN:

- Itching present in the ear, eye, scalp.
- Sore throat
- Rheum of the eyes
- Laryngitis
- Running nose
- Sneezing
- Head ache
- Tonsillitis

#### ETIOPATHOGENESIS OF KABAALA KARAPPAN:

அகக்காரணங்கள்	புறக்காரணங்கள்	கன்ம • •
● அடிக்கடி	● அழுகிய மீன், நண்டு, நத்தை	காரணங்கள்
சினம்	போன்றவை உண்பதால்,	• பெண்
கொள்ளுதல்	• நெருப்பு,வெய்யில்,ஆகியவற்றில்	போகம்
	மிகுதியும் ஈடுபடுதல்,	மிகுதலா
	● புளிப்பு,கார்ப்பு,உப்பு ஆகிய	லும்
	சுவையுள்ள பாண்டங்களை	
	அளவுக்கு மிஞ்சி உட்கொள்ளுதல்	
	உயிர் தாதுக்களில் ஏற்படும் மாற்றம்	
(தன்னளவில் மி	குந்த வாதகுற்றம் பித்த குற்றத்தினை அதிகரிக	க்க செய்யும்
வாதம்↑	பித்தம்↑	கபம்
• உதானன்	• பிராசகம் (தோலில் ஒளி குறைதல்)	
(தும்மல்,	• இரஞ்சகம் (அரிப்பு)	
குரற்கம்மல்)	<ul> <li>சாதகம் (உடல் சோர்வு)</li> </ul>	
• வியானன்		
(தோலில்		
அரிப்பு)		
● கூர்மன்		
● கூர்மன் (கண்களில்		
(கண்களில்		
(கண்களில் நீரை விழ		
(கண்களில் நீரை விழ பண்ணும்)		
(கண்களில் நீரை விழ பண்ணும்) ● கிருகரன்		
(கண்களில் நீரை விழ பண்ணும்) ● கிருகரன் (நாசிற்கசிவு)		

உயிர் தாதுக்களில் ஏற்பட்ட மாற்றத்தினைத் தொடர்ந்து உடற்தாதுக்களில் குறைகுணங்களை ஏற்படுத்தி இந்நோயை பிறப்பிக்கும்

• **சாரம்**↓: உடல் சோர்வு, தோல் சுரசுரப்பு

• **செந்நீர்** ↓ : உடல் சோர்வு,வறட்சி

• **ஊன்**↓ : ஐம்பொறிகளுக்கு சோர்வு

● கொழுப்பு ↓ : தோல் வறட்சி

#### **CHANGES IN MUKKUTRAM:**

Due to internal causes like increased anger, anxiety, stress, insomnia and external causes like increased intake of salt, sour and pungent taste, there are some changes in both Uyir thathukkal as well as in Udal thathukkal in our body.

#### **CHANGES IN UYIR THATHUKKAL:**

Increased Vaatham leads to increases in Pitham, where Kabam is decreased.

#### In Vaatham,

- OLI KAATRU (UTHANAN)-Sneezing, Running nose, Laryngitis
- THOZHIL KAARRU (VIYANAN)-Scalp, ear and eye itching
- IMAI KAATRU (KOORMAN)-Rheum of eye, water discharge from eyes.
- THUMAL KAATRU (KIRUKARAN)-Tonsilitis
- NIRAVU KAATRU (SAMANAN)-Body tirednesss

#### In Pitham,

- OLLOLI THEE (PRASAGA PITHAM) Redness of skin.
- VANNA ERI (RANJAGA PITHAM) Itching present in scalp, ear.
- AATTRAL ANGI (SAATHAGA PITHAM) General body tiredness.

#### **CHANGES IN UDAL THATHUKKAL:**

#### In Udal thathukkal,

- SAARAM ↓ General body tiredness, redness of skin.
- CHENNEER ↓ General body tiredness, scaly patches.
- OON ↓ General body tiredness.
- KOZHUPPU ↓ Dryness of skin.

Affected Uyir thathukkal and Udal thathukkal leads to the disease, "KABAALA KARAPPAN"

## **MODERN ASPECTS**

#### MORDERN ASPECTS

#### THE SKIN

The skin is the largest organ of the body. The average thickness of the thin is about 1 to 2 mm. The skin made up of two layers.

- 1. Outer layer epidermis,
- 2. Inner layer dermis.

#### STRUCTURE OF SKIN

The epidermis of the skin is formed by stratified epithelium. It consists of five layers.

- 1. Stratum corneum,
- 2. Stratum lucidam,
- 3. Stratum granulosum,
- 4. Stratum spinosum,
- 5. Stratum germinativum.

The epidermis of the skin is composed of three basic cell types.

- 1. Keratinocytes,
- 2. Melanocytes,
- 3. Langerhans cell.

#### **KERATINOCYTES**

The keratinocytes plays a role in immune functioning of skin. In allegic contact dermatitis the express Ia antigen. Also keratinocytes release interlukin - 1 for t-cell activation. A varity of skin diseases are manifestations of abnormal keratinization.

#### **MELANOCYTES**

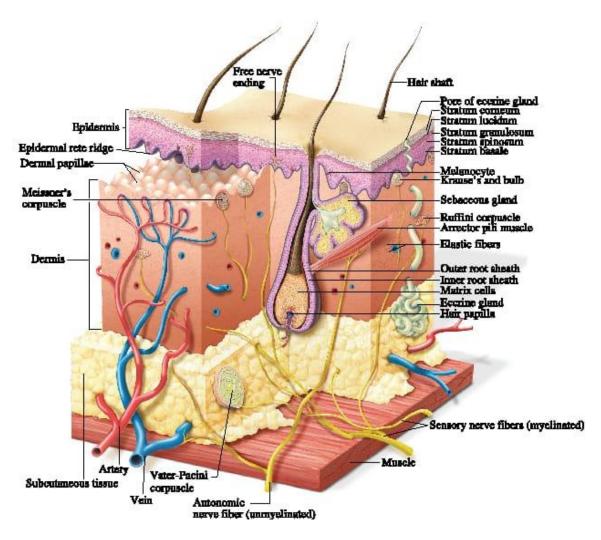
Cell of the skin contain a brown pigment called melanin synthesized from melanocytes. Skin becomes dark when melanin content increases.

#### LANGERHANS CELL

When the skin is depleted by exposure to ultraviolet radiation it loses the ability to sensitize until its population of langerhans cells is replenished. The langerhans cells also produce some interlukin-1 to aid in T cell activation.

Figure 1.

ANATOMY OF NORMAL SKIN



#### **DERMIS**

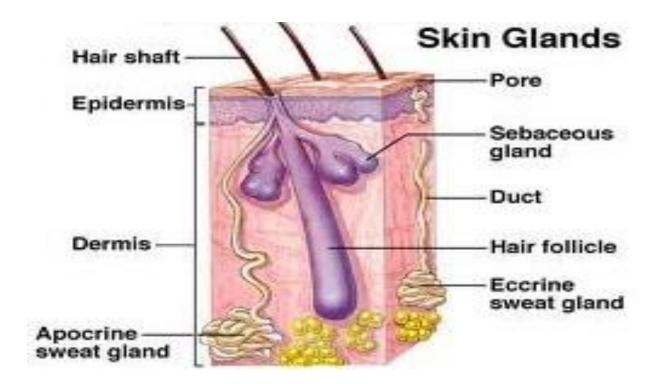
Dermis of the skin is a connective tissue layer made up of dense ,stout collagen fibers,fibroblasts and histiocytes.Dermis is made up of two layers.

- 1. Superficial papillary layer
- 2. Deeper reticular layer

## **GLANDS OF SKIN**

The skin contain two types of glands

- 1. Sebaceous glands
- 2. Sweat glands



## **FUNCTIONS OF SKIN**

- > Protection
- ➤ Body temperature regulation
- > Cutaneous sensations
- ➤ Metabolic functions
- ➤ Blood reservoir
- > Excretion of wastes

#### **ECZEMA**

It is a non –contagious inflammatory oedema of the skin. It is characterized by itching, erythema, papule, macule, pustule, vesiculation with oozing, crusting, scaling, lichenification. The antigen antibody reaction takes place and the antigen involved is IgE.

#### **ETIOLOGY**

Eczema is caused by two factors

- 1. An allergic or a sensitive skin
- 2. Exposure to an allergen or an irritant

The general predisposing factors are age, familial predisposition, allergy, debility, climate and psychological factors.

#### **CLINICAL FEATURES**

Eczema is a specific type of allergic cutaneous manifestation of antibody reaction, It is characterized by itching, erythema, papule, macule, pustule, vesiculation, with oozing, crusting, scaling, lichenification. Itching varies from mild to severe paraoxysms which may interfere with work and scalp.

#### STAGES OF ECZEMA

They are 3 stages of eczema

- 1. Acute stage
- 2. Sub acute stage
- 3. Chronic stage

#### **ACUTE STAGE**

It is characteristed by itchy erythema, edema, papules, vesicles, oozing, and crusting. This stage does not last long. In a couple of week the lesions start to heal.

#### SUB ACUTE STAGE

Papules and scaling, with edema and erythema.

## **CHRONIC STAGE**

The eczema lasts over months or years, it becomes chronic. In such cases, the integument appears thickened and pigmented with prominent marking. It is the cause for all long standing eczema. The thick, dark, Asiatic skin has a tendency to early lichenification.

## **CLASSIFICATION OF ECZEMA**

## **Exogenous causes**

- > Irritant contact eczema
- ➤ Allergic contact eczema
- > Photo dermatitis

## **Endogenous cause**

- ➤ Atopic eczema
- > Seborrhoeic eczema
- Discoid eczema
- > Aseatotic eczema
- > Gravitational eczema
- > Dyshidrotic eczema
- > Neuro dermatitis
- > Infectious dermatitis

#### SEBORRHEIC DERMATITIS

Seborrheic dermatitis is a fungal disease of the skin, occurring in areas rich in sebaceous glands. It is thought that an association exists between Malassezia yeasts and seborrheic dermatitis. This may, in part be due to an abnormal or inflammatory immune response to these yeasts.

In can also occur on oily areas of the body, such as the face, upper chest and back.

## **CAUSES**

- > Stress
- > Your genes
- ➤ A yeast that normally lives skin
- > Certain medical conditions and medicines
- ➤ Cold, dry weather

#### **SYMPTIOMS AND CLINICAL FEATURES:**

Several patterns recognized

- Infantile seborrheic dermatitis
- Adult seborrheic dermatitis

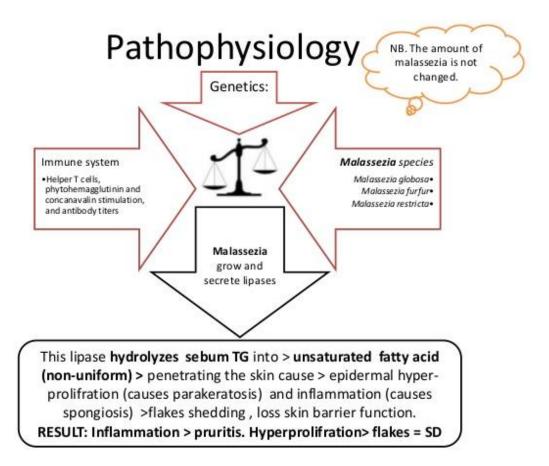
## Infantile seborreic dermatitis

- Asymptomatic
- Begins as cradle cap, usually at birth
- Self limiting

## **Adult seborrheic Dermatitis**

- Dandruff usually earliest
- Perifollicular redness
- Scalling
- Retroauricular erythema, scaling, crusted fissuring.

## **PATHOPHYIOLOGY**



## **DIAGNOSIS**

Diagnosis is based on

• Morphology:

Folliculocenteric lesions, flexural plaques surmounted with typical yellow, greasy scales.

Typical distribution:

Seborrheic distribution`

## **EXCLUSION OF SEBORRHEIC DERMATITIS**

#### 1. Psoriasis

Distinctive red, scaling papules that coalesce to form round to oval plaques.

# 2. Tinea capitis

Dermatophyte infection of the scalp or body. Leading edge scaly, red, elevated with central clearing, vesicles appear at active border when inflammation is intense, classic ringworm pattern.

## 3. Acne Rosacea

Erythematous, edematous eruptions of papules and pustules on forehead, cheeks, nose, eyes.

# **MATERIALS AND METHODS**

## **MATERIALS AND METHODS**

#### **MATERIALS:**

The observational study on **Kabaala karappan** was carried out in the out patients in post graduate department of Noi Naadal at Aringnar Anna Government hospital for Indian medicine and Homoeopathy (AAGHIM), Chennai - 106.

100 cases with clinical signs and symptoms of Kabaala karappan of both sexes of different ages were studied under the guidance of faculties of post graduate department of Noi Naadal.

#### **SELECTION OF PATIENTS:**

The observational study was done in 120 cases, Out of that, 100 cases were selected on the basis of clinical symptoms indicated in the Siddha text.

#### **CRITERIA FOR INCLUSION:**

- 1. Age: Both Children and Adults
- 2. Sex: Both male and female
- 3. Patients willing to give sample for investigation whenever necessary.
- 4. Patients with clinical features like,
  - Itching over the scalp and ear.
  - Erythema
  - Papule/Macule
  - Sneezing.
  - Running nose.
  - Headache.
  - Rheum of eye.
  - Hairfail.

## **CRITERIA FOR EXCLUSION:**

- 1. Any skin disease other than Kabaala karappan.
- 2. HIV patients
- 3. Patients irregular to OPD
- 4. Unwilling for any investigations.
- 5. Pregnant women and lactating mother.

#### 6. Symptoms associated with

- Scalp psoriasis
- Tinea capitis
- Actinic keratosis.

#### **METHODOLOGY:**

#### STUDY DESIGN:

Observational type of study

#### STUDY ENROLLMENT:

- ➤ In the study, patients reporting at the P.G Noi Naadal O.P.D of Aringar Anna Government Hospital for Indian medicine and Homoeopathy (AAGHIM), Arumbakkam, Chennai-106. With the clinical symptoms of "Kabaala karappan" will be referred to the Research group. Those patients will be screened using the screening proforma and examined clinically for enrolling in the study based on inclusion and exclusion criteria. Based on the inclusion criteria the patients will be included first and excluded from the study on the same day if they hit the exclusion criteria.
- ➤ The patients who are to be enrolled would be informed about the study and the objectives of the study in the language and terms understandable for them.
- After ascertaining the patient's willingness, a written informed consent would be obtained from them in the consent form.
- All these patients will be given unique register card in which patients Register number of the study, Address, Phone Number and Doctors Phone Number etc., will be given, so as to report to research group easily if any complication arises.
- ➤ Complete clinical history, complaints and duration, examination findings all would be recorded in the prescribed proforma in the history and clinical assessment forms and lab investigation forms.

#### INVESTIGATIONS DURING THE STUDY

The patients will be subjected to basic laboratory parameters during the study.

#### **Blood:**

- > Total WBC count
- > Differential count
- > Erythrocyte sedimentation rate
- ➤ Haemoglobin estimation
- ➤ Blood Sugar [F, PP/R]
- ➤ Blood urea
- > Serum cholesterol

#### **Urine:**

- ► Albumin
- > Sugar
- Deposit

#### OTHER SPECIAL INVESTIGATIONS:

➤ Immunoglobin E (IgE)

#### TREATMENT DURING THE STUDY

Normal treatment procedure followed in Aringar Anna Government Hospital for Indian medicine and Homoeopathy (AAGHIM), Chennai - 106 will be prescribed to the study patients and the treatment will be provided at free of cost.

#### STUDY PERIOD:

Total Period : 12 Months
 Recruitment for the study : 9 Months
 Data entry analysis : 2 Months
 Report preparation and submission : 1 month

#### **DATA MANAGEMENT:**

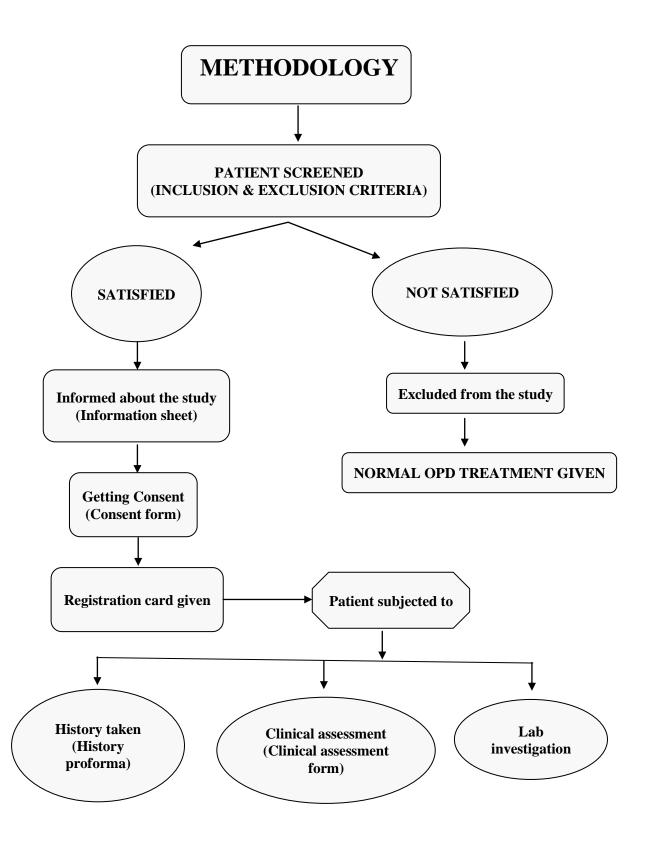
- After enrolling the patient in the study, a separate file for each patient will be opened and all forms will be filled in the file. Study Number and Patient Number will be entered on the top of file for easy identification and arranged in a separate rack at the concerned O.P.D unit. Whenever study patient visits O.P.D during the study period, the respective patient file will be taken and necessary recordings will be made at the assessment form or other suitable form.
- The screening forms will be filed separately.
- The Data recordings will be monitored for completion and adverse event by H.O.D and Faculty of the department. Any missed data found in during the study, it will be collected from the patient, but the time related data will not be recorded retrospectively.
- All collected data will be entered using MS access / excel software.

#### STATISTICAL ANALYSIS

All collected data will be entered into a computer using MS access / MS excel software by the investigators. Descriptive analysis will be made and necessary tables / graphs generated to understand the profile of patients included in the study.

## **OUTCOME OF THE STUDY:**

- > Cost effective and early diagnosis
- > It helps to promote the Siddha diagnosing methods.
- > It is very useful for remote areas



# SIDDHA DIAGNOSTIC METHODOLOGY

## SIDDHA DIAGNOSTIC METHODS

#### REVIEW OF SIDDHA DIAGNOSTIC PROCEDURES:

The diagnostic procedure in Siddha system is unique as it is made purely on the basis of clinical acumen of the physician.

#### **ENN VAGAI THERVUGAL:**

Various aspects of Siddha, regarding "Enn vagai thervugal"

"நாடிப்பரிசம் நாநிறம் மொழிவிழி மலம் மூத்திச்ரமிவை மருத்துவராயுதம்" "மெய்க்குறி நிறந்தொனி விழிநாவிருமலம் கைக்குறி" - தேரையர்

As per sage Therayar, the eight methods of diagnosis are Naadi (pulse), Naa (tongue), Niram (color), Mozhi (voice), Vizhi (eyes), Malam (faeces), Neer (urine) and Sparisam (touch and palpation).

"பாரீர்நாடி யறிந்து உணர்ந்து பரமன் செயலும் பிணிமுறையும் நீரேயோடு மலசலமும் நிறமுங் குணமு முகக்குறியும் சாரே யிணங்குங்குழல் மடவீர்காலன் றேகம் வயதிளமை தேரேயறியுமுகநாடி நெறிங்குறியுஞ் செறியுஞ் சொல்வோமே" - பதிணென் சித்தர் நாடி சாஸ்திரம்

As per sage Agasthiyar, Naadi (pulse), Malam (stools), Salam (urine), Niram (complexion), Gunam (character), Mugakuri (facies), Thegam (constitution) and Vayathu (age) are the eight Siddha diagnostic tools

#### அட்டவிதப் பரீட்சை

தொகுக்கலுற்றஅட்டவிதப் பரிட்சைதன்னை துலக்கமுறும் பண்டிதரேதெளிவதாகப் பகுக்கரியநாடியைநிபிடித்துப் பாரு பகாகின்றவார்த்தையைப்பார் நாவைப்பாரு வகுக்கரியதேகமதைத் தொட்டுப் பாரு வளமானசரிரத்தின் நிறத்தைப் பாரு சகிக்கரியமலத்தைப்பார் சலத்தைப் பாரு சார்ந்தவிழிதனைப்பார்த்துத் தெளிவாய்க் காணே

கண்ணுசாமி பரம்பரை வைத்தியம்.

## 1. நாடித் தேர்வு (PULSE EXAMINATION):

The 'Pulse Diagnosis' is unique in Siddha Medicine, which was then introduced to other Indian Systems of Medicine later. The pulse should be examined in the Right hand for male and the left hand for female. The pulse can be recorded at the radial artery.

Naadi is nothing but, the vital energy that sustains the life with in our body. Naadi plays a most important role in Ennvagaithervu and it has been considered as foremost thing in assessing the prognosis and diagnosis of various diseases. Any variation that occurs in the three humors is reflected in the naadi. These three humors organize, regularize and integrate basic functions of human body. So, Naadi serves as a good indicator of all ailments.

#### நாடிப் பார்க்கும் வகை:

"இடுமென்ற நாடிகள்பார்க்கும் வகையைக் கேளு என்னவென்றால் நடுவிரல் நீவிப் பின்னே அடுமென்ற அடுத்தவிரல் மோதிரமாம் விரலை அப்பனே இழுத்த பின்புசுண்டு விரலிளுத்து உடுமென்ற தூண்டு விரலிளுத்து அப்பால் உத்ததொரு அங்குட்ட விரலைநீவிக் கரத்தில் படுமென்ற சீயோதி அங்குல மோதள்ளி பார்தடவி மூன்றுதரம் சரம்பார்க்கும் வகையை வகைஎன்ன வாதமது ஒன்னரையாம் பித்தம் வளமையென்று அய்யங்கால் வளமாய் நிற்கில் பகையில்லை நாடிகளுந் தொந்த மில்லை பண்பான் சுகரொசருருபக் கூறு சொன்னேன்"

- அகத்தியர் கனகமணி 100

"கரிமுக னடியை வாழ்த்திக் கைதனி னாடிபார்க்கில் பெருவிர லங்குலத்திற் பிடித்தடி நடுவே தொட்டால் ஒருவிர லோடில் வாத முயர்நடு விரலிற் பித்தந் திருவிரல் மூன்றி லோடிற் சேத்தும நாடியாமே"

- அகத்தியர் வைத்திய இரத்தினச் சுருக்கம்

#### Naadi is felt by,

Vali - Tip of index finger
 Azhal - Tip of middle finger
 Iyyam - Tip of ring finger

#### மூவகையும் மாத்திரை அளவும்:

"வழங்கிய வாதம் மாத்திரை ஒன்றாகில் வழங்கிய பித்தம் தன்னில் அரைவாசி அழங்கும் கபந்தான் அடங்கியே காலோடில் பிழங்கிய சீவற்குப் பிசகொன்று மில்லையே"

குணவாகட நாடி

The pulse is measured in wheat/grain expansible heights. The normal units of pulse diagnosis are,

- Vali (Vaatham) 1 maathirai
- Azhal (Pitham) ½ mathiarai
- Iyyam (Kabam − ¼ mathirai

## 2. ஸ்பரிசத் தேர்வு (EXAMINATION OF TOUCH):

"நேயமுடன் வாதத்தின் தேகந் தானும் நோமையாய்க் குளிர்ந்துசிலவிடத்திலேதான் மாயமுடனுட்டணமுந் துடிதுடிப்பு மருவுதலாம் பித்தத்தின் தேகந் தானும் தோயவே வுஷ்ணமதாயிருக்குந் தெளிவாய் சேத்துமத்தின் தேகமதுகுளிர்ந்திருக்கும் பாயதொந்ததேகமதுபலவாறாகும் பரிந்துதொட்டுத் தேகத்தைப் பார்த்துப் பேசே"

- கண்ணுசாமி பரம்பரை வைத்தியம்

The deranged kutram can be calculated depend upon the following touch examination of skin,

- Vali (Vaatham) hot or cold
- Azhal (Pitham) hot
- Iyyam (Kabam chillness

## 3. நாத் தேர்வு (TONGUE EXAMINATION):

"பலமான ருசியறியும் நாவின் கூற்றைப் பகாகின்றேன் வாதரோகி யின்றன் நாவு கலமாக வெடித்து கறுத்திருக்கு முட்போல் கண்டு கொள்வாய் பித்தரோகியின்றன் நாவு நலமுற சிவந்து பச்சென் றிருக்கும் நட்பிலா சிலேத்துமரோகி யின்றன் நாவு தலமத னிலுந்ற முதியோர்கள் சொன்ன தன்மையடி தடித்து வெளுத்திருக்கும் பாரே"

கண்ணுசாமி பரம்பரை வைத்தியம்

The derangement kutram will be calculated depend upon the following tongue examination,

- Vali (Vaatham) tongue fissured with black patches
- Azhal (Pitham) tongue red in colour
- Iyyam (Kabham) tongue pallor

## 4. நிறத் தேர்வு (EXAMINATION OF COMPLEXION):

"மூன்றாகும் வாதபித்த சிலேத்து மத்தால் மிகுந்தமுறத் தொந்தித்த ரோகி தேகம் தோன்றாத சீதள வுஷ்ணங் காலமூன்றுந் தொகுத்தேன்யான் திரேகத்தி னிறத்தைக் கேளு ஊன்றாா வாதவுடல் கறுத்துக் காணும் ஊரியபித்த முடல் சிவப்புப் பசுமைகாணும் போன்றாத வையவுடல் வெண்மை தோன்றும் பொருந்துந்தொந்த ரோகவுடற் கிவற்றை யொக்கு"

- கண்ணுசாமி பரம்பரை வைத்தியம்

The derangement kutram will be calculated depend upon the following examination of complexion,

- Vali (Vaatham) colour of the body will be dark
- Azhal (Pitham) colour of the body will be yellow
- Iyyam (Kabham) colour of the body will be fair or white

## 5. மொழித் தேர்வு (VOICE EXAMINATION):

பார்ப்பதுதான் வாதரோகியின்றன் வார்த்தை பக்குவமாய் சமசத்தமாயிருக்கும் சோப்பதுதான் பித்தரோகியின்றன் வார்த்தை சேப்பக்கேள் பெலத்துமேயுறத்திருக்கும் ஏற்பதுதான் ஐயரோகியின்றன் வார்த்தை ஏளிதாகச் சிறுத்திருக்குமியல்பிதாகும் தேசற்கவேயிபமூன்றுந் தொந்தமாகில்

- கண்ணுசாமி பரம்பரை வைத்தியம்

The derangement kutram will be calculated depend upon the following voice examination,

- Vali (Vaatham) normal voice (sama ozhi)
- Azhal (Pitham) high pitched voice (uratha ozhi)
- Iyyam (Kabham) low pitched voice (thazhtha ozhi)

## 6. விழித் தேர்வு (EYE EXAMINATION):

"உண்மையாய் கண்கள்குறிப் பதைக்கேள் வாதம் உற்றவிழிகறுத்துநொந்துநீருங் காணும் தண்மையிலாப் பித்தரோகியின்றன் கண்கள் சார்பாகப் பசுமைசிவப் பேறுங் காணும் வண்மையிலாவையரோகிவிழிகள் தானும் வளமானவெண்மைநிறமேதாநாதம் திண்மையிலாத் தொந்தரோகியின்றன் கண்கள் தீட்டுவாய் பலநிறமென் றூையலாமே"

- கண்ணுசாமி பரம்பரை வைத்தியம்

The derangement kutram will be calculated depend upon the following eye examination,

- Vali (Vaatham) eye tears are dark and excessive
- Azhal (Pitham) eye tears are yellow in colour
- Iyyam (Kabham) eye tears are white in colour
- Thondam (Thrithodam) eye tears are multicoloured

## 7. மலத் தேர்வு (STOOL EXAMINATION):

"மேவுவாதமுடையவர் மெய்மலம் சீவிதாகக் கறுத்திடுஞ் செம்மியே பாவையேபித்தத் தோர்மலம் பார்த்திடில் ஆவியேயெழுமன்னிறமஞ்சளே மூன்றுஞ் சேற்பனத் தார்மலம் வீழ் குறி வின்னதீரவிழும்வெளுப் போங்கியே சொன்னகுணமின்றிமுத் தொந்தத்தே நின்றிடில் மூன்றுநிறுமலமெய்துமே"

கண்ணுசாமி பரம்பரை வைத்தியம்

The derangement kutram will be calculated depend upon the following stool examination,

- Vali (Vaatham) hard and black coloured stool
- Azhal (Pitham) hot and red coloured stool
- Iyyam (Kabham) cool and watery coloured stool
- Thondam (Thrithodam) multicoloured stool

#### 8. மூத்திரத் தேர்வு (URINE EXAMINATION):

"ஓங்கிய வாதத்தோர்க்கு நீர்விழுங் குணந்தா நுரைக்கிற பூங்கொடி கறுத்துநொந்து சிறுத்துடன் பொருமி வீழும் பாங்குடன் பித்தத்தோர்க்கும் பசியநீர் சிவந்து காட்டி ஏங்கவே கறுக்கதாக எரித்துடன் கடுத்து வீழும்: வீழுமே சிலேற்பனத்தோர் நீர்க்குணம் விளம்பக் கேளாய் நாளுமே வௌத்துறைந்து நலம்பெற வீழுங் கண்டாய் வாள்விழி மானேதொந்த ரோகமா னிடர்க்குத் தானே தாளுநீர் பலநிறந்தா னெனவே சாற்றி னோமே"

- கண்ணுசாமிபரம்பரைவைத்தியம்

The derangement kutram will be calculated depend upon the following urine examination,

- Vali (Vaatham) urine will be black in colour and less in quantity
- Azhal (Pitham) urine will be red or yellow in colour with burning sensation
- Iyyam (Kabham) urine will be white in colour and foamy in appearance
- Thondam (Thrithodam) urine will be multicoloured

## நீர்க்குறி நெய்க்குறியின் இலக்கணம்:

"அருந்துமாநிரதமும் அவிரோதமதாய் அ. ்.கல் அலர்தல் அகாலவூன்தவிர்ந்தழற் குற்றளவருந்திஉறங்கிவைகறை ஆடிகலசத் தாவியேகாதுபெய் தொருமுகாத்தக் கலைக்குட்படுநீரின் நிருக்குறிநெய்க்குறிநிருமித்தல் கடனே"

- தேரையர்

Theraiyar, one of the renowned authors of Siddha medicine described urine examination and stages of health. He had explained about the colour and consistency of urine in vitiated humour and disease. He also emphasized the spreading nature of a single drop of oil on the surface of urine indicating the imbalance of specific humour and prognosis of a disease. Normal urine is straw coloured and odourless. The time of the day and food taken will have an impact on the colour of the urine.

Colour of the urine also indicates some symptoms as follows,

- Yellow colour (similar to straw soaked in water) indigestion
- Lemon colour good digestion
- Reddish yellow colour heat in body
- Red or flame colour (similar to flame of forest) excessive heat in body
- Saffron colour extreme heat in body

Colour of the urine also indicates the prognosis of the disease as follows,

- Ruby red or milky white coloured urine indicates poor prognosis
- Honey coloured urine indicates slow prognosis
- Golden yellow coloured urine indicates Good prognosis

# நெய்க்குறியின் சிறப்பு:

"ஐக்குறி கொடுவட வானிழ லமர்ந்தோர் ஐக்குறி தெரித்த நங்கடவுளைத் துதித்தே மெய்குறி நிறந்தொணி விழிநா இருமலம் கைக்குறி முழுவதூஉங் கற்றார் தம்மினும் பொய்க்குறி மெய்க்குறி புகலு மெவர்க்கும் நெய்குறி அதனை இந்நீணீலத் துரைப்பாம்"

- தேரையர்

## எண்ணெய் விட்டுப் பார்க்கும் நீரின் விதி:

"நிறக்குறிக் குறைத்த நிருமான நீரிற் சிறக்க வெண்ணெய்வோர் சிறுதுளி நடுவிடுத் தென்றுறத் திறந்தொலி ஏகாதமைத்ததி னின்றதிவலை போம் நெறிவிழியறிவும் சென்றது புகலும் செய்தியை யுணரே"

- தேரையர்

The spreading pattern of oil drop is the indication of Vali, Azhal and Iyyam diseases

- Aravu (Snake Pattern of spread) indicates Vali (Vaatham)
- Mothiram (Ring Pattern of spread) indicates Azhal (Pitham)
- Muthu (Pearl Pattern of spread) indicates Iyyam (Kabham)

In Neikkuri analysis, the rapid spread of oil drop, Pearl beaded and Sieve type of spreading pattern indicates Asathiyam (incurable) state of a disease. So, we can assess the prognosis of the disease and its treatment by using Neikkuri technique.

#### MANIKKADAI NOOL (WRIST CIRCUMETRIC SIGN)

#### -Agathiyar soodamani kayaru soothiram

"கமலக்கைமணிக்கையில் கயறு சூத்திரம் விமலனேநோக்கியேவேடமாமுனி திமிலாம் பிணியதுசேரச் செப்பியே அமலனாமுனிக்குமுன்னருளிச் செய்ததே"

- பதினெண் சித்தர் நாடி நூல்

According to the Pathinen Siddhar Naadi nool, Manikadai nool is also helpful in diagnosis. This manikkadai nool is a parameter to diagnose the disease by measuring the circumference of the wrist by means of a thread and then dividing the measured circumference with the patient's finger. By this measurement the disease can be diagnosed.

# MEASUREMENT OF MANIKKADAI NOOL AND ITS INFERENCE

MEASUREMENT OF	INFERENCE	
MANIKKADAI		
10 fbs	Pricking pain in chest and limbs, gastritis and ulcer may occur.	
9 3⁄4 fbs	Fistula, venereal swelling, carbuncle, dry cough may occur. Within one year, spleenomegaly will occur.	
9 ½ fbs	Anaemia, increased body heat, burning sensation of eye, fever, venereal diseases (mega noi), anorexia and weight loss may occur.	
9¼ fbs	Burning sensation of eye, painful oliguria, insomnia and sinusitis may occur.	
9 fbs	Pricking pain in the ear, impaired hearing, pain around waist, pain in both thighs and difficulty in walking may occur.	
8¾ fbs	Increased body heat, skin rashes due to insect bite, tumour like pricking pain in the abdomen, cataract and sinusitis may occur.	
8½ fbs	Leucorrhoea, Venereal disorder and infertility will occur	
8¼ fbs	Stout and painful body, Headache, sinusitis, leucorrhoea, toxins induced cough, head disorders within one year may occur.	
8 fbs	Abdominal discomfort, indigestion, gastritis, anorexia, sinusitis and throat pain.	
7¾ fbs	Haemorrhoids, burning sensation of limbs, tremors in head and numbness occur. Within 2 years, cervical adenitis followed by epistaxis may occur.	
7½ fbs	Osteoporosis, abdominal discomfort, burning sensation in the face and eyes, increased body temperature may occur. Within 6 days pain in lower limbs and tumours in thighs may occur.	
7¼ fbs	Lumbar pain, increased heat (pitham) in head, anaemia, dropsy, burning sensation in limbs and insomnia may occur.	
7 fbs	Heat (pitham) ascends to head, hematemesis, phlegm, abscess, burning sensation of limbs and constipation may occur.	
6¾ fbs	Testicular disorder, redness of eye, giddiness may occur. Within 3 years, anuria, pain in limbs, sweating in face may occur.	
6½ fbs	Thirst, anorexia, pricking pain, increased body heat and pain (vaatham) may occur.	
6¼ fbs	Diarrhoea, belching, insomnia, vomiting and mucous dysentery may occur.	
6 fbs	Reduced weight, phlegm in chest, fainting may occur. It results in death.	
5¾ fbs	Delirium, dizziness, loss of consciousness may occur. It results in death, if the patient even takes gruel diet.	
5½ fbs	Severity of illness is increased. Toxins spread to the head. Tooth darkens. Patient may die within 10 days.	
51/4 fbs	Patient seems to be sleepy and death results on the next day.	

5 fbs	Pallor and dryness of the body may occur. Phlegm engorges the throat leads to death.
4¾ fbs	Fatigue, dryness of tongue and tremors may occur. Patient may die within 7 days.
4½ fbs	Dropsy and shrunken eyes may present and death results within 9 days.
41/4 fbs	Tremors, weakness of limbs and darkening of face, tachypnea may occur. Finally, death may occur within 2 days.
4 fbs	Fatigue with pedal oedema will be present. Patient will die in 5 days.

**NOTE:** When the MANIKKADAI ALAVU ranged between 5 3/4 fbs and 4 fbs, the severity of the illness will be increased which leads to death.

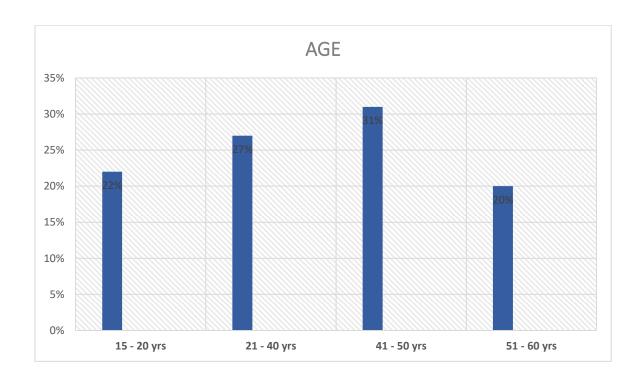
# **OBSERVATION AND RESULTS**

## 7. OBSERVATION AND RESULTS

## 7.1. AGE DISTRIBUTION

**TABLE-7.1** 

Sl. No.	Age	No. of Cases	Percentage
1.	15 - 20yrs	22	22%
2.	21 – 40 yrs	27	27%
3.	41 – 50 yrs	31	31%
4.	51 – 60 yrs	20	20%
	Total	100	100%



## **OBSERVATION**

Among the 100 cases, 22% of cases came under below 15-20 yrs.27% of cases came under 21-40. 31% of cases came under 41-50. 20% of cases came under 51-60.

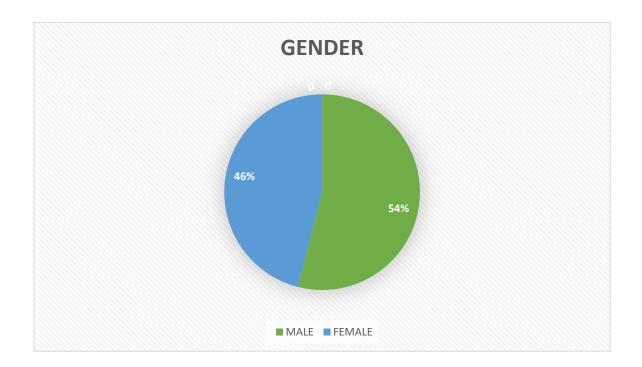
## **INFERENCE**

31% of cases came under 41-50 years.

## 7.2. DISTRIBUTION OF GENDER

**TABLE-7.2** 

ntage



## **OBSERVATION**

Among 100 cases, 54% of cases came under Male, 46% of cases came under Female.

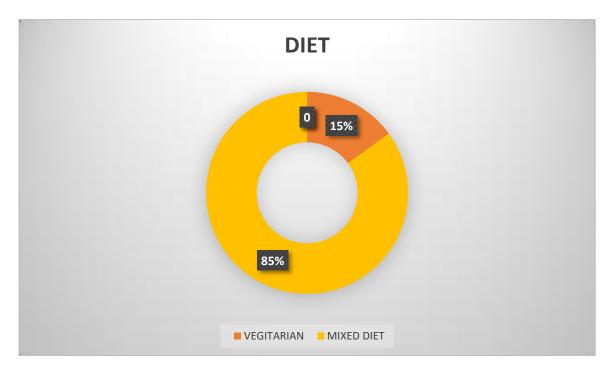
## **INFERENCE**

54% of cases came under Female.

## 7.3. DISTRIBUTIONOF DIET

**TABLE-7.3** 

Sl. No.	Diet	No. of Cases	Percentage
1.	Vegetarian	15	15%
2.	Mixed diet	85	85%
	Total	100	100%



## **OBSERVATION**

Among 100 cases, 15% of cases came under vegetarian, 85% of cases came under mixed diet.

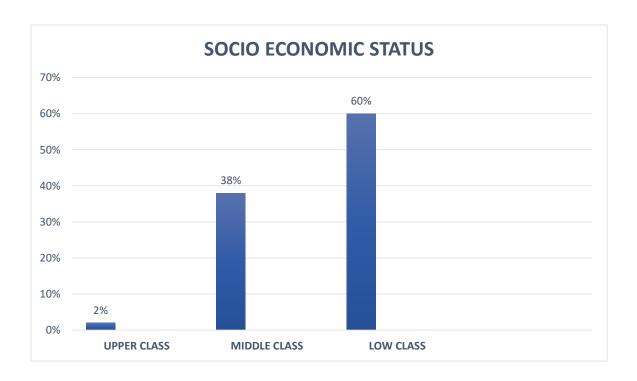
## **INFERENCE**

85% of cases came under mixed diet.

## 7.4. SOCIO ECONOMIC STATUS

**TABLE-7.4** 

SOCIO	ECONOMIC	PATIENTS	
STATUS		NO	PERCENTAGE(%)
Upper class		2	2%
Middle class		38	38%
Low class		60	60%
Total		100	100%



## **OBSERVATION**

Among 100 cases, 60% of case came under low class, 38% of cases came under middle class, 2% of cases came under upper class.

## **INFERENCE**

60% of cases came under low class

#### 7.5. DISTRIBUTION OF CASES BY SYMPTOMS

**TABLE-7.5** 

Symptoms	No. of Patients
Itching in head	100
Scaling in head	97
Itching in ear	29
Itching in eye	23
Sore throat	13
Rheum of eye	3
Rhinitis	10
Sneezing	27

## **OBSERVATION:**

On Observation, Among 100 cases, 100% of cases had itching in scalp, 97% of cases had scaling, 29% of cases had itching in ear, 27% of cases had sneezing, 23% of cases had itching in eye, 13% of cases had sore throat, 10% of cases had rhinitis, 3% of cases had rheum of eye.

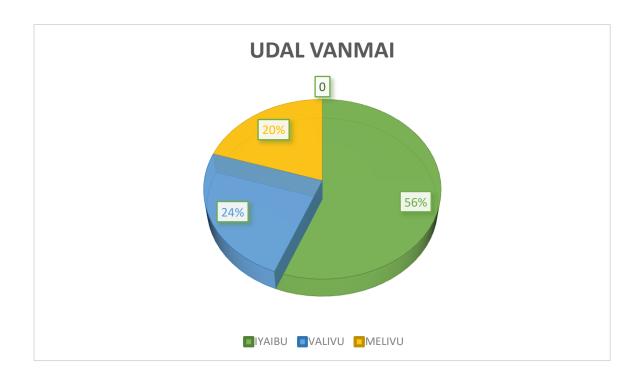
#### **INFERENCE:**

Among 100 cases, 100% of cases had itching in scalp, 97% of cases had scaling.

## 7.6. DISTRIBUTION OF CASES BY UDAL VANMAI

**TABLE-7.6** 

S.No	Udal vanmai	No. of cases	Percentage (%)
1	Iyalbu	56	56%
2	Valivu	24	24%
3	Melivu	20	20%
	Total	100	100%



## **OBSERVATION**

Among 100 cases, 56% of case came under iyalbu, 24% of cases came under valivu, 20% of cases came under Melivu.

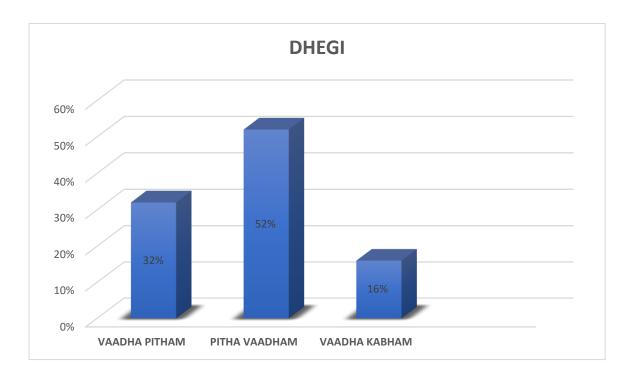
#### **INFERENCE**

56% of cases came under Iyalbu.

## 7.7. DISTRIBUTION OF DHEGA NILAI:

**TABLE-7.7** 

S.No	Dhegi	No. of cases	Percentage (%)
1	VAADHA PITHAM	22	22%
2	PITHA VAADHAM	52	52%
3	VAADHA KABHAM	16	16%
	Total	100	100%



## **OBSERVATION**

Among 100 cases, 52% of cases came under Vaadha Pitham, 32% of cases came under Pitha Vaadham, 11% of cases came under Pitha Kabam. 9% of cases came under Vaadha Kabam.

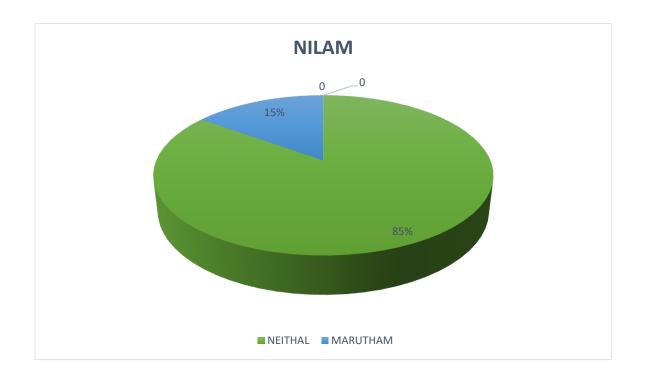
#### **INFERENCE**

100% of cases came under 52% of Vaadha Pitham.

## **7.8. NILAM**

**TABLE -7.8** 

NILAM	PATIENTS		
NILAM	NO	PERCENTAGE(%)	
NEITHAL	85	85%	
MARUTHAM	15	15%	
Total	100	100%	



## **OBSERVATION**

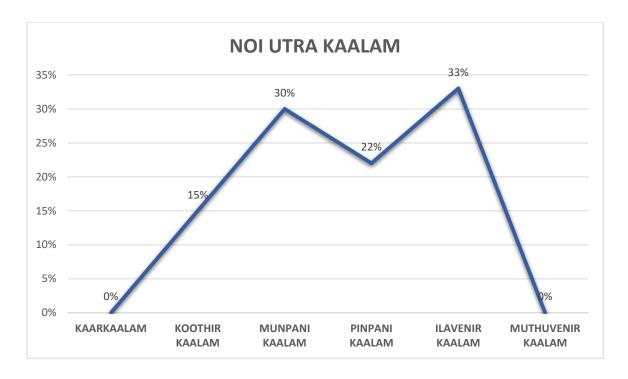
Among 100 cases, 15% of case came under Marutham, 85% of cases came under Neithal.

## **INFERENCE**

85% of cases came under Neithal.

# 7.9. NOI UTRA KAALAM DISTRIBUTION: TABLE-7.9

DADIMAKATAM	PATIENTS		
PARUVAKAALAM	NO	PERCENTAGE(%)	
Kaarkaalam	0	0%	
Koothirkaalam	15	15%	
Munpanikaalam	30	30%	
Pinpanikaalam	22	22%	
Ilavenirkaalam	33	33%	
Muthuvenirkaalam	0	0%	
TOTAL			



#### **OBSERVATION**

Among 100 cases, 15% of cases came under koothirkaalam, 30% of cases came under Munpanikaalam, 22% of cases came under Pinpanikaalam, 33% of cases came under Ilavenil.

#### **INFERENCE**

33% of cases came under Ilavenilkaalam.

#### 7.10. DISTRIBUTION OF VAADHAM:

**TABLE-7.10** 

VADHAM	PATIENTS	
	NO	PERCENTAGE(%)
UTHANAN	30	30%
VIYANAN	98	98%
KOORMAN	8	8%
KIRUGARAN	12	12%
SAMANAN	18	18%

#### **OBSERVATION**

Among 100 cases, in 30%, Uthanan is affected, in 98%, Viyanan is affected, in 8%, Koorman is affected, in 12%, Kirukaran is affected, in 18%, Samanan is affected.

#### **INFERENCE**

In majority of cases, Viyanan is affected.

## 7.11. DISTRIBUTION OF PITHAM:

**TABLE-7.11** 

Sl. No.	Azhal	No. of Cases	Percentage (%)
1.	PIRASAGAM	57	57%
2.	RANJAGAM	98	98%
3.	SATHAGAM	18	18%

## **OBSERVATION**

Among 100 cases, 57% of cases had Pirasagam, 98% of cases had Ranjagapitham, 18% of cases had Sathagapitham are affected.

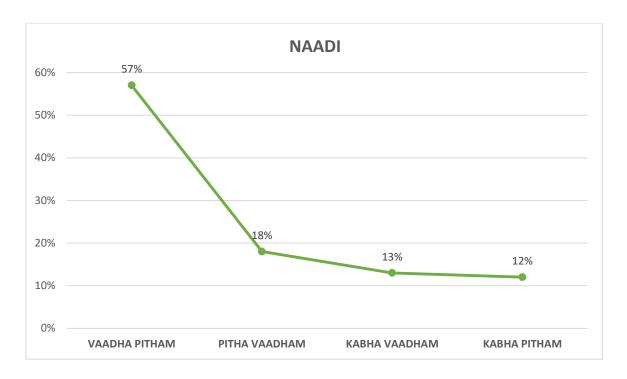
#### **INFERENCE**

In majority of cases, Ranjagapitham is affected.

#### 7.13. DISTRIBUTION OF NAADI:

**TABLE-7.12** 

S.No	Naadi	No. of cases	Percentage (%)
1	VaadhaPitham	57	57%
2	PithaVaadham	18	18%
3	KabhaVaatham	13	13%
4	Kabhapitham	12	12%
	Total	100	100%



## **OBSERVATION**

Among 100 cases, 57% of cases came under vaadha pitham, 18% of cases came under pitha vaadham, 13% of cases came under kabha vaadham, 12% of cases came under kabha pitham.

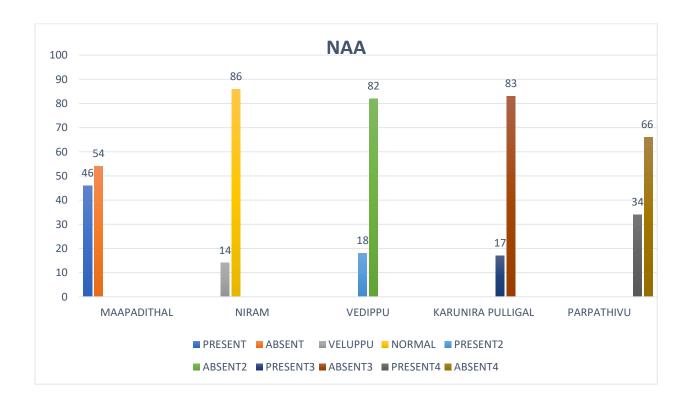
## **INFERENCE**

57% of cases came under vaadha pitham.

# 7.14. DISTRIBUTION OF NAA:

**TABLE -7.13** 

NAA		NO OF PATIENTS	PERCENTAGE(%)
	PRESENT	46	46%
MAAPADITHAL	ABSENT	54	54%
	TOTAL	100	100%
	VELUPPU	14	14%
NIRAM	NORMAL	86	86%
	TOTAL	100	100%
	PRESENT	18	18%
VEDIPPU	ABSENT	82	82%
	TOTAL	100	100%
	PRESENT	17	17%
KARUNIRA	ABSENT	83	83%
PULLIGAL	TOTAL	100	100%
	PRESENT	34	34%
PARPATHIVU	ABSENT	66	66%
	TOTAL	100	100%



## **OBSERVATION**

Among 100 cases, in Maapadithal, 46% of cases came under present, 18% of cases came under vaedippu. 14% of cases came under Vellupu. 17% of cases came under Karunirapulli, 34% of cases came under Parpathivu.

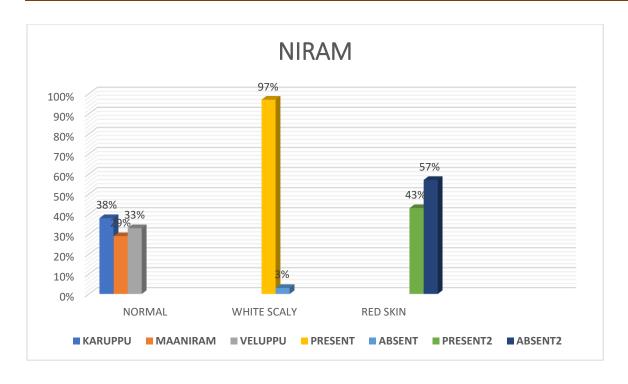
## **INFERENCE**

46% of cases came under Maapadithal.

# 7.15. DISTRIBUTION OF NIRAM:

**Table – 7.14** 

NIRAM		NO OF PATIENTS	PERCENTAGE
NORMAL	KARUPPU	38	38%
	MAANIRAM	29	29%
	VELUPPU	33	33%
	TOTAL	100	100%
	ABNORM	AL	1
WHITE SCALY	PRESENT	97	97%
	ABSENT	3	3%
	TOTAL	100	100%
RED SKIN	PRESENT	43	43%
	ABSENT	57	57%
	TOTAL	100	100%



Among 100 cases, 38% of cases came under Karuppu, 29% of cases came under maaniram, 33% of cases came under veluppu, 97% of cases came under white scaly, 43% of cases came under red skin.

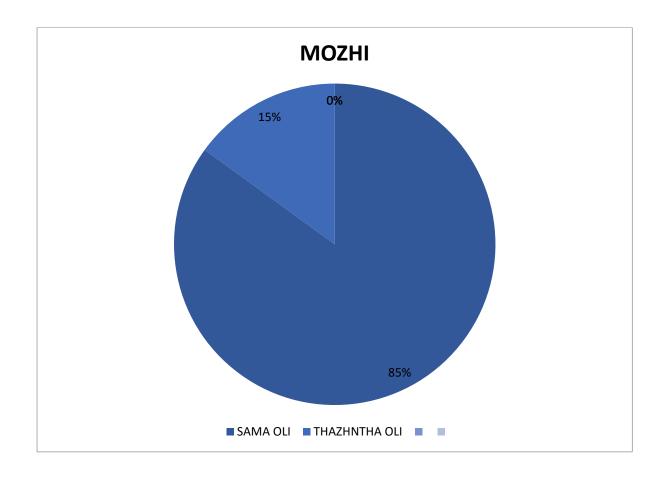
#### **INFERENCE:**

97% of cases came under white scaly.

#### 7.16. DISTRIBUTION OF MOZHI:

**TABLE-7.15** 

S.No	Pitch	No. of cases	Percentage (%)
1	Samaoli	85	85%
2	Thaazhndhaoli	15	15%
	Total	100	100%



Among 100 cases, 85% of cases came under moderate pitch, 15% of cases came under low pitch.

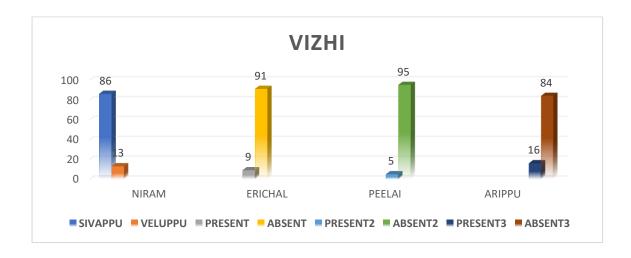
#### **INFERENCE**

85% of cases came under Moderate pitch.

#### 7.17. DISTRIBUTION OF VIZHI:

**TABLE-7.16** 

VIZHI		NO OF	PERCENTAGE
NIRAM	SIVAPPU	87	87%
	VELUPPU	13	13%
	TOTAL	100	100%
ERICHAL	PRESENT	9	9%
	ABSENT	91	91%
	TOTAL	100	100%
PEELAI	PRESENT	5	5%
	ABSENT	95	95%
	TOTAL	100	100%
ARIPPU	PRESNT	16	16%
	ABSENT	84	84%
	TOTAL	100	100%



#### **OBSERVATION**

Among 100 cases, 13% of cases came under Veluppu, 9% of case came under Erichal, 5% cases came under Peelai, 16% cases came under Arippu

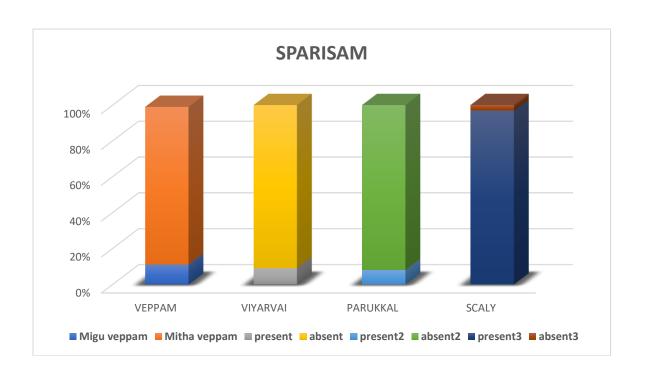
#### **INFERENCE**

16 of cases came under Arippu.

#### 7.18. DISTRIBUTION OF MEIKURI-SPARISAM:

**TABLE-7.17** 

MEIKURI (PHYSICAI	SIGNS)	PATIE	NTS
WEIKOKI (TITISICA)		NO	PERCENTAGE(%)
	MIGU VEPPAM	11	11%
VEPPAM (WARMTH)	MITHAVEPPAM	88	88%
	TOTAL	100	100%
	PRESENT	9	9%
VIYARVAI	ABSENT	91	91%
	TOTAL	100	100%
	PRESENT	97	97%
SCALY	ABSENT	3	3%
	TOTAL	100	100%
	PRESENT	8	8%
PARUKKAL	ABSENT	92	92%
	TOTAL	100	100%



Among 100 cases, 89% of case came under mithaveppam, 11% of cases came under miguveppam.9% cases came under Viyarvai, 8% came under Parukkal, 97% came under Scaly.

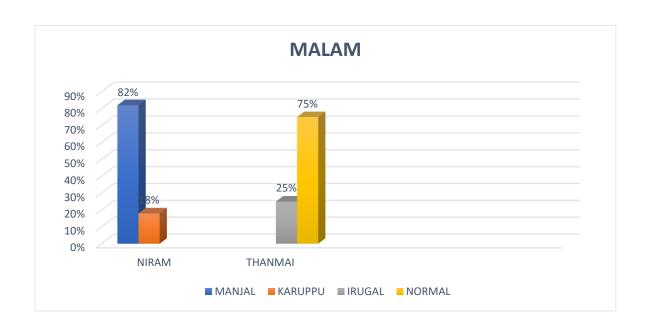
#### **INFERENCE:**

97% of cases came under Scaly.

#### 7.19. DISTRIBUTION OF MALAM:

**TABLE-7.18** 

MALAM		NO OF PATIENTS	PERSENTAGE
NIRAM	MANJAL	82	82%
	KARUPPU	18	18%
	TOTAL	100	100%
THANMAI	IRUGAL	25	25%
	NORMAL	75	75%
	TOTAL	100	100%



Among 100 cases, 75% of case came under Normal, 25 % of cases came under Irugal.

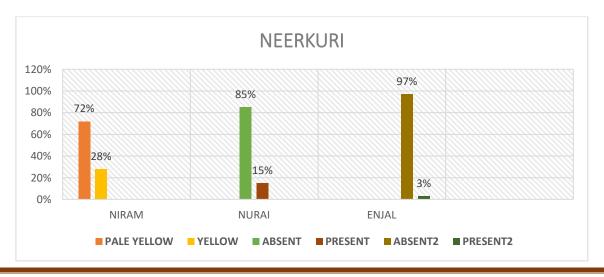
#### **INFERENCE**

In thanmai, 75%% of cases came under iyalbu. In niram, 82% came under manjal and 18% came under karuppu.

#### 7.20. DISTRIBUTION OF NEERKURI:

**TABLE-7.19** 

NEERKURI	PROPERTIES	PATIENT	S (%)
NEERRORI	IROTERTIES	NO	%
	Pale yellow (Ila Manjal Niram)	72	72%
Niram	Yellow	28	28%
Titum	TOTAL	100	100%
	Absent	85	85%
Nurai (Frothy)	Present	15	15%
	TOTAL	100	100%
	Absent	97	97%
Enjal (Deposits)	Present	3	3%
	TOTAL	100	100%



Among 100 cases, In niram, 72% of cases came under pale yellow, 28% of cases came under yellow. In nurai, 85% of case came under absent, 15% of cases came under present. In enjal, 3% of cases came under present and 97% of cases came under absent.

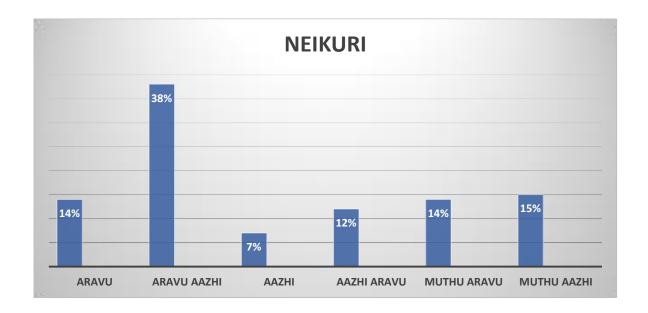
#### **INFERENCE**

In niram, 72% of cases cames under pale yellow. In nurai, 85% of cases came under absent. In enjal, 94% of cases came under absent.

#### 7.21. DISTRIBUTION OF NEIKURI:

**TABLE-7.20** 

S.No	Neikuri	No. of cases	Percentage (%)
1	Aravu	14	14%
2	AravuAazhi	38	38%
3	Aazhi	7	7%
4	AazhiAravu	12	12%
5	Muthu Aravu	14	14%
6	Muthu Aazhi	15	15%
	TOTAL	100	100%



Among 100 cases, 14% of cases came under Aravu, 38% of cases came under Aravu Aazhi, 7% of cases came under Aaazhi, 12% of cases came under Aazhi Aravu, 14% of cases came under Muthu Aravu, 15% of cases came under Muthu Aazhi.

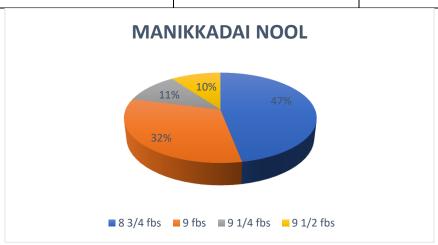
#### **INFERENCE**

38% of cases came under Aravu Aazhi.

#### 7.22. DISTRIBUTION OF CASES BY MANIKADAI ALAVU

**TABLE-7.21** 

S.No	Manikadaialavu (fbs)	No. of cases	Percentage (%)
1	8 3⁄4 fbs	47	47%%
2	9 fbs	32	32%
4	9 ¼ fbs	11	11%
5	9 ½ fbs	10	10%
	Total	100	100%



#### **OBSERVATION:**

Among 100 cases, 47% of cases had  $8\frac{3}{4}$  fbs wrist circumference, 10% of cases had  $9\frac{1}{2}$  fbs and 17% of cases had 9fbs .32% of cases had 9,11% of cases had  $9\frac{1}{4}$ fbs .

#### **INFERENCE:**

Majority of cases had 8 3/4 fbs.

# **ENVAGAI THERVU**

## **TABLE-7.22**

Sl.	Reg	Op	Age/	Naadi	<b>N</b> T	Nirar	n	N. M 1. *	<b>*</b> 7*_1.*	N/I a la sas	Mootl	niram	Sparism	Manikadai
N.	No:	no	Sex		Naa	ETN	PTN	Mozhi	Vizhi	Malam	Neer kuri	Neikuri	-	Alavu
1	1	8283	30/M	VP	Mp	Karuppu	White scaly	Sama oli	Sivappu	Manjal, sikkal	Ilamanjal	Aravu+aazl	Mithaveppam, scaly	8 3⁄4
2	2	9406	21/M	PV	Pp	Maaniram	White scaly, red skin	Sama oli	Sivappu	Manjal	Ilamanjal	Aazhi	Mithaveppam, scaly	9
3	3	1125	21/M	PV	Mp,Vd	Maaniram	Red skin	Sama oli	Sivappu	Manjal sikkal	Manjal	Aazhi+arav	Mithaveppam	9
4	4	1853	31/F	VP	Мр	Vellupu	White scaly	Sama oli	Sivappu, erichal	Manjal	Ilamanjal	Aravu+aazl	Miguveppam, scaly	8 3⁄4
5	8	2776	22/M	VP	Pp	Karuppu	White scaly	Sama oli	Sivappu,	Manjal	Manjal, nurai	Aravu+aazl	Mithaveppam, scaly	9 1/4
6	9	3786	19/M	KV	Pp	Vellupu	White scaly	Thazhtha oli,	Sivappu,	Karuppu sikkal	Ilamanjal	Muthu+ara	Mithaveppam, scaly	8 3⁄4
7	10	4353	48/M	PV	Vd,Bp	Karuppu	White scaly, red skin	Sama oli	Sivappu,	Manjal	Manjal	Aazhi+arav	Mithaveppam, scaly	9
8	11	8042	22/F	KP	Pp	Veluppu	White scaly, red skin	Thazhtha oli	Sivappu, erichal	Manjal	Ilamanjal	Muthu+aaz	Thatpam, Miguviyarvai	8 3⁄4
9	12	9602	22/F	VP	Vl	Karuppu	Red skin	Sama oli	Vellupu	Manjal sikkal	Ilamanjal	Aravu	Mithaveppam, scaly	9

10	15	1533	42/M	VP	Mp,Pp	Maaniram	White scaly,	Sama oli	Sivappu,	Karuppu	Manjal	Aravu+aaz	Miguveppam,	8 3⁄4
11	16	5547	19/F	VP	PP, Bp	Karuppu	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Aravu+aaz	Mithaveppam, scaly, parukkal	9
12	17	5210	45/F	PV	Mp,Bp	Maaniram	White scaly,re d skin	Sama oli	Sivappu	Manjal	Manjal	Aazhi+arav	Mithaveppam scaly	9 ½
13	18	5866	30/M	KV	Mp,Vd	Veluppu	Red skin	Thazhtha oli	Sivappu,	Manjal sikkal	Ilamanjal nurai	Muthu+ara	Mithaveppam, scaly	8 3⁄4
14	19	6862	19/F	VP	Vl, Bp	Karuppu	White scaly	Sama oli	Vellupu	Karuppu	Ilamanjal	Aravu+aazl	Miguveppam, scaly	8 3/4
15	20	7866	30/F	PV	Mp,	Veluppu	White scaly	Sama oli	Vellupu	Manjal	Ilamanjal	Aazhi	Mithaveppam, scaly	8 3/4
16	21	8251	24/F	VP	Рр	Veluppu	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Aravu	Mithaveppam, scaly	9
17	22	8357	24/M	PV	Mp,Pp	Maaniram	White scaly	Sama oli	Sivappu,	Manjal	Manjal	Aazhi+arav	Mithaveppam, scaly	8 3⁄4
18	23	9052	48/F	VP	Mp,Bp	Karuppu	White scaly, red skin	Sama oli	Sivappu, erichal	Manjal	Ilamanjal	Aravu+aaz	Miguveppam, scaly	9
19	24	9017	12/FC	KV	Pp	Maaniram	White scaly, red skin	Thazhtha oli	Sivappu arippu	Manjal sikkal	Ilamanjal	Muthu+ara	Mithaveppam, scaly, parukkal	8 3⁄4
20	25	9139	40/M	KP	Vd, Pp	Veluppu	White scaly	Sama oli	Sivappu	Manjal	Ilamanjal	Muthu+Aal	Mithaveppam scaly, parukkal	9 ½

21	26	4113	30/M	KP	Mp,Vd	Karuppu	White scaly, red skin	Sama oli	Vellupu	Manjal	Manjal nurai	Muthu+aaz	Mithaveppam, scaly	8 3/4
22	27	4621	35/M	VP	Pp,Vd	Veluppu	White scaly	Sama oli	Sivappu	Manjal sikkal	Ilamanjal	Aravu	Mithaveppam, scaly	9
23	28	4887	26/F	PV	Mp,	Maaniram	White scaly	Sama oli	Sivappu	Manjal	Ilamanjal	Aazhi+aravu	Miguveppam, scaly	8 3/4
24	29	5191	22/M	KP	Mp,	Karuppu	White scaly	Sama oli	Sivappu	Karuppu	Ilamanjal	Muthu+aaz	Mithaveppam, scaly	9
25	30	7992	29/F	PV	Pp	Veluppu	White scaly, red skin	Sama oli	Sivappu, erichal	Manjal	Ilamanjal	Aazhi	Mithaveppam, scaly	8 3/4
26	31	8175	31/M	VP	Vd, Pp	Karuppu	White scaly, red skin	Sama oli	Sivappu,	Manjal sikkal	Ilamanjal	Aravu+aaz	Mithaveppam, scaly	9
27	35	8157	29/M	VP	Mp,	Vellupu	White scaly	Sama oli	Sivappu, arippu	Manjal	Manjal	Aravu+aaz	Thatpam, scaly	8 3/4
28	36	8357	20/M	VP	Мр,Вр	Maaniram	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal nurai	Aravu	Mithaveppam, scaly	9
29	37	8583	30/M	KV	Pp	Karuppu	White scaly, red skin	Sama oli	Sivappu	Manjal sikkal	Manjal	Muthu+ara	Mithaveppam, scaly	8 3/4
30	38	7740	43/M	VP	Vd,Mp	Vellupu	White scaly, red skin	Sama oli	Sivappu,	Manjal	Ilamanjal	Aravu+aaz	Mithaveppam, scaly	9 ½
31	31	9300	31/M	VP	Mp,BP	Karuppu	White scaly	Sama oli	Sivappu	Manjal	Manjal	Aravu+aaz	Mithaveppam, scaly	8 3/4

32	39	203	50/F	VP	Mp,Vl,	Karuppu	White scaly, red skin	Sama oli	Sivappu, Arippu	Manjal	Ilamanjal	Aravu	Mithaveppam, scaly	9
33	40	488	25/M	VP	Vd,Bp	Vellupu	White scaly, red skin	Sama oli	Sivappu	Manjal	Ilamanjal	Aravu+aaz	Mithaveppam	8 3/4
34	41	821	21/F	VP	Мр	Karuppu	White scaly	Thazhtha oli	Sivappu	Manjal	Ilamanjal	Aravu	Mithaveppam	8 3/4
35	42	1223	37/M	VP	Мр,Вр	Maaniram	White scaly	Sama oli	Sivappu	Karuppu sikkal	Manjal nurai	Aravu+aaz	Mithaveppam, scaly	9 ½
36	43	1518	41/F	KP	Mp,	Veluppu	White scaly, red skin	Sama oli	Sivappu, erichal	Manjal sikkal	Ilamanjal	Muthu+Aal	Mithaveppam, scaly	8 3/4
37	44	1813	43/F	VP	Vd,Mp	Karuppu	White scaly, red skin	Sama oli	Sivappu,	Manjal	Ilamanjal nurai	Aravu	Mithaveppam, scaly	8 3/4
38	45	2857	42/F	VP	Вр	Veluppu	White scaly, red skin	Sama oli	Sivappu, erichal	Manjal	Ilamanjal	Aravu+aaz	Thatpam	9 ½
39	46	1225	27/F	KV	VI, Pp	Maaniram	White scaly, red skin	Sama oli	Vellupu, arippu	Manjal sikkal	Ilamanjal	Muthu+arav	Mithaveppam, scaly	8 3/4
40	47	1284	33/F	VP	Mp,Vd	Karuppu	White scaly	Sama oli	Sivappu, arippu	Karuppu	Manjal	Aravu+aazhi	Mithaveppam, scaly	9
41	48	1622	23/M	VP	Мр,Рр	Karuppu	White scaly	Sama oli	Sivappu,	Manjal, sikkal	Ilamanjal	Aravu+aazl	Mithaveppam scaly, parukkal	8 3/4

42	49	5668	32/F	VP	Vl	Veluppu	White scaly red skin	Thazhtha oli	Vellupu, arippu	Manjal	Ilamanjal	Aravu	Mithaveppam, scaly	9 1/4
43	50	5603	28/M	VP	Mp	Karuppu	White scaly	Sama oli	Sivappu	Manjal	Manjal	Aravu+aazl	Mithaveppam, scaly	9 ½
44	51	1930	32/M	VP	Mp,Vd	Vellupu	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Aravu	Miguveppam, scaly	8 3⁄4
45	52	2193	28/M	PV	Mp	Maaniram	White scaly	Sama oli	Sivappu,P eelai	Manjal	Manjal, nurai	Aazhi	Mithaveppam, scaly	9
46	53	2858	45/M	KV	Мр	Maaniram	White scaly, red skin	Sama oli	Sivappu	Karuppu sikkal	Ilamanjal	Muthu+aali	Mithaveppam, scaly	8 3/4
47	56	8803	15/FC	KV	Мр	Vellupu	White scaly	Thazhtha oli,	Sivappu,A rippu	Manjal sikkal	Manjal	Muthu+aaz	Mithaveppam, scaly	9
48	57	5264	36/F	VP	Vl Mp	Karuppu	White scaly, red skin	Sama oli	Sivappu, arippu	Manjal	Ilamanjal nurai	Aravu	Thatpam, viyarvai	8 3⁄4
49	58	5466	24/F	VP	Pр	Vellupu	White scaly	Thazhtha oli	Sivappu, arippu	Karuppu sikkal	Ilamanjal	Aravu+aazl	Mithaveppam, scaly	9 ½
50	59	5589	20/F	PV	Pp	Maaniram	White scaly	Sama oli	Veluppu	Manjal	Manjal	Aazhi	Miguveppam, scaly	8 3⁄4
51	60	7292	29/F	VP	P p,Vd	Karuppu	White scaly	Sama oli	Sivappu	Manjal	Ilamanjal	Aravu+aazl	Mithaveppam, scaly	9
52	61	7922	36/M	KP	Mp	Vellupu	White scaly	Sama oli	Sivappu, erichal	Manjal	Manjal	Muthu+aaz	Mithaveppam, scaly	8 3⁄4

53	62	8014	31/M	PV	Pp, Bp	Karuppu	White scaly, red skin	Sama oli	Sivappu	Karuppu	Ilamanjal	Aazhi+arav	Mithaveppam, scaly	9 ½
54	63	4125	27/M	KP	Vd	Vellupu	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Muthu+Aali	Miguveppam, scaly	8 3/4
55	64	6753	52/M	VP	Mp,Vd	Maaniram	White scaly	Sama oli	Sivappu,ar ippu	Manjal sikkal	Ilamanjal ,nurai	Aravu+aaz	Mithaveppam, scaly	9
56	65	4271	15/FC	VP	Pp	Vellupu	White scaly, red skin	Sama oli	Sivappu,	Manjal	Ilamanjal	Aravu	Mithaveppam, scaly	8 3⁄4
57	66	4031	23/M	VP	Мр	Karuppu	White scaly, red skin	Thazhtha oli	Sivappu	Manjal	Manjal	Aravu+aaz	Mithaveppam, scaly	9
58	67	6368	50/F	VP	Мр,Вр	Maaniram	White scaly	Sama oli	Sivappu, erichal	Manjal	Ilamanjal enjal	Aravu+aaz	Miguveppam, viyarvai	8 3⁄4
59	68	8208	38/F	KV	Мр	Vellupu	White scaly red skin	Thazhtha oli	Sivappu,	Manjal sikkal	Ilamanjal	Muthu+Ara	Mithaveppam, scaly	9 ½
60	69	8360	23/F	PV	Мр	Vellupu	White scaly, red skin	Sama oli	Sivappu	Manjal	Ilamanjal	Aazhi+arav	Mithaveppam, scaly	9 1/4
61	70	7702	31/M	KP	Мр,Вр	Karuppu	White scaly	Sama oli	Sivappu, erichal	Manjal	Manjal nurai	Muthu+aazhi	Mithaveppam, scaly	8 3/4
62	73	9894	25/F	PV	Vl,Mp	Vellupu	White scaly	Sama oli	Sivappu,P eelai	Manjal	Ilamanjal	Aazhi+aarav	Mithaveppam, scaly	8 3/4
63	74	674	15/M	KP	Pp	Maaniram	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Muthu+aali	Miguveppam, scaly	9 1/4

64	75	853	30/M	KV	Vd, Pb	Maaniram	White scaly	Sama oli	Sivappu	Karuppu sikkal	Ilamanjal	Muthu+Ara	Mithaveppam scaly	8 3/4
65	76	852	26/M	VP	Vd, Bp	Karuppu	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Aravu+aaz	Mithaveppam scaly	9
66	77	1439	45/F	VP	Vl,Mp	Karuppu	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Aazhi	Mithaveppam scaly	9 1/4
67	78	1621	15/MC	KP	Mp,Pp	Vellupu	White scaly, red skin	Thazhtha oli	Sivappu,	Manjal	Manjal enjal	Muthu+aaz	Thatpam, viyarvai, parukkal	9
68	80	1851	22/M	VP	Pp, Bp	Maaniram	White scaly, red skin	Sama oli	Sivappu,	Manjal sikkal	Ilamanjal nurai	Aravu+aaz	Mithaveppam, scaly, parukkal	8 3/4
69	81	1730	18/F	PV	Pp	Karuppu	White scaly, red skin	Sama oli	Sivappu	Manjal	Manjal	Aazhi+arav	Mithaveppam scaly	9
70	81	1854	28/M	KP	Мр	Veluppu	White scaly	Sama oli	Sivappu,	Manjal	Ilamanjal	Muthu+aaz	scaly, parukkal	8 3/4
71	82	402	25/M	VP	Pp, Bp	Manjal	White scaly	Sama oli	Sivappu,	Manjal	Manjal	Aravu+aazl	Mithaveppam scaly, viyarvai	9 1/4
72	83	3781	33/F	VP	Pp	Karuppu	White scaly	Sama oli	Sivappu,ar ippu	Manjal	Ilamanjal	Aravu+aazl	Mitha veppam, scaly	9
73	84	4832	33/F	PV	Vl	Maaniram	White scaly	Sama oli	Vellupu	Manjal	Ilamanjal	Aazhi+arav	Thatpam, viyarvai	8 3/4
74	85	4692	19/F	KV	Vl	Vellupu	White scaly	Sama oli	Vellupu	Manjal	Ilamanjal	Muthu+ara	Miguveppam, scaly	8 3/4

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75	86	4916	35/M	VP	Мр	Veluppu	White scaly, red skin	Sama oli	Sivappu	Manjal, sikkal	Ilamanjal	Aravu+aali	Mithaveppam scaly	9
76	87	2230	27/F	KV	Vd,Pp	Karuppu	White scaly	Sama oli	Sivappu,p eelai	Manjal	Ilamanjal	Muthu+ara	Thatpam, scaly, parukkal	9 1/4
77	88	9617	20/F	VP	Vl	Maaniram	White scaly	Sama oli	Vellupu	Manjal	Ilamanjal	Aravu+aazl	Mithaveppam scaly	8 3⁄4
78	89	533	26/F	KP	Pp	Veluppu	White scaly	Sama oli	Sivappu	Manjal	Ilamanjal	Muthu+aaz	Miguveppam, scaly	9 1/4
79	90	1055	38/M	PV	Mp,Pp	Karuppu	White scaly, red skin	Sama oli	Sivappu	Manjal	Ilamanjal nurai	Aazhi	Miguveppam scaly	9
80	94	1107	27/M	VP	Мр	Maaniram	White scaly, red skin	Sama oli	Sivappu	Karuppu	Ilamanjal	Aravu+aazl	Mithaveppam, scaly, parukkal	9
81	95	1108	30/M	PV	Pp	Veluppu	White scaly	Sama oli	Sivappu	Manjal	Ilamanjal	Aazhi+arav	Mithaveppam, scaly	8 3⁄4
82	96	1109	24/M	KP	Pp	Vellupu	White scaly	Thazhtha oli	Sivappu,p eelai	Manjal	Ilamanjal enjal	Muthu+aaz	Mithaveppam, scaly	9
83	97	1247	25/M	VP	Pp	Karuppu	White scaly, red skin	Sama oli	Sivappu	Karuppu, sikkal	Ilamanjal	Aravu+aali	Thatpam, scaly, Miguviyaraivai	9
84	98	1379	22/F	VP	Мр	Karuppu	White scaly	Sama oli	Sivappu	Manjal	Ilamanjal	Aravu+aazl	Mithaveppam scaly	8 3/4
85	99	1895	16/M	KP	Мр	Vellupu	White scaly, red skin	Thazhtha oli	Sivappu	Vellupu	Ilamanjal	Muthu+ara	Miguveppam, scaly, parukkal	9 1/4

			T							1		1	1	
86	102	1971	17/F	VP	Mp	Karuppu	White scaly	Sama oli	Sivappu	Karuppu, sikkal	Ilamanjal	Aravu	Mithaveppam, scaly	8 3⁄4
87	103	1770	20/F	VP	Mp,vd	Karuppu	White scaly	Sama oli	Vellupu	Manjal	Ilamanjal	Aravu+aaz	Mithaveppam, scaly, parukkal	8 3/4
88	104	2243	28/F	VP	Pp	Vellupu	White scaly, red skin	Sama oli	Sivappu	Karuppu	Ilamanjal	Aravu	Mithaveppam, scaly	9
89	105	2762	19/M	VP	Pp	Karuppu	White scaly	Sama oli	Sivappu,ar ippu	Manjal	Ilamanjal nurai	Aravu+aaz	Thatpam, scaly, parukkal	9 1/4
90	106	2706	50/M	KV	Мр	Maaniram	White scaly, red skin	Sama oli	Sivappu	Manjal	Ilamanjal	Muthu+ara	Mithaveppam, scaly	9
91	107	3179	42/M	KV	Mp,Vd	Vellupu	White scaly	Thazhtha oli	Vellupu	Manjal	Ilamanjal	Muthu+ara	Thatpam, viyarvai	8 3/4
92	108	3100	20/M	VP	Vl	Karuppu	White scaly ,red skin	Sama oli	Sivappu,ar ippu	Karuppu	Ilamanjal	Aravu+aazl	Mithaveppam, scaly	9
93	109	2976	18/F	VP	Vl	Karuppu	White scaly, red skin	Thazhtha oli	Vellupu	Manjal	Ilamanjal	Aravu	Mithaveppam, scaly	8 3/4
94	111	2969	23/M	KV	Vl,Pp	Karuppu	White scaly, red skin	Sama oli	Sivappu	Manjal	Ilamanjal nurai	Muthu+ara	Mithaveppam, scaly	9
95	112	6563	20/M	PV	Мр	Vellupu	White scaly, red skin	Sama oli	Sivappu,ar ippu	Manjal	Ilamanjal	Aazhi+arav	Mithaveppam, scaly	8 3/4

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96	11 4	6925	38/F	VP	Pp	Karuppu	White scaly	Sama oli	Sivappu	Karuppu, sikkal	Ilamanjal	Aravu+aazl	Thatpam, Miguviyarvai	9 1/4
97	116	6928	50/F	KV	Vl	Maaniram	White scaly, red skin	Sama oli	Vellupu, arippu	Manjal	Ilamanjal	Muthu+ara	Mithaveppam, scaly	8 3/4
98	118	7971	17/F	VP	Vd	Karuppu	White scaly	Sama oli	Sivappu	Karuppu, sikkal	Ilamanjal	Aravu+aazl	Thatpam, Miguviyarvai	9
99	119	480	38/M	KP	Mp,Vd	Maaniram	White scaly	Sama oli	Sivappu, peelai	Manjal	Ilamanjal	Muthu+aaz	Mithaveppam, scaly	8 3⁄4
100	120	4125	27/M	KV	Vd	Vellupu	White scaly	Sama oli	Sivappu,ar ippu	Manjal	Ilamanjal nurai	Muthu+ara	Mithaveppam, scaly	9 ½

### **NOTE:**

- In Naadi, VP Vaatha Pitham; PV Pitha Vaatham; KV Kabha Vaatham and KP Kabha Pitham;
- In Naa, Mp Maa padithal; Vd Vedippu; Vl Veluppu; Pp Parkal padivu;
- ETN Eyalbana Tholin Niram; PTN Paathikkapatta Tholin Niram

# PANCHAPATCHI TABLE-7.23

S. No	Reg No	OPD No	Age / Sex	Visiting Time	Visiting Date	Pirai	Patchi (Saavu)
				<b>(AM)</b>			
1	1	8283	30/M	07.45	08/11/2018	Valarpirai	Aanthai
2	2	9406	21/M	07.55	08/11/2018	Valarpirai	Aanthai
3	3	1125	21/M	09.30	12/11/2018	Valarpirai	Kaagam
4	4	1853	31/F	08.45	16/11/2018	Valarpirai	Kaagam
5	8	2776	22/M	11.45	18/11/2018	Valarpirai	Kaagam
6	9	3786	19/M	10.30	19/11/2018	Valarpirai	Mayil
7	10	4353	48/M	11.40	24/11/2018	Thaeipirai	Kaagam
8	11	8042	22/F	08.15	26/11/2018	Thaeipirai	Kaagam
9	12	9602	22/F	09.20	04/12/2018	Thaeipirai	Kaagam
10	15	1533	42/M	09.30	08/12/2018	Valarpirai	Mayil
11	16	5547	19/F	07.55	13/12/2018	Valarpirai	Mayil
12	17	5210	45/F	08.05	24/12/2018	Thaeipirai	Mayil
13	18	5866	30/M	09.25	24/12/2018	Thaeipirai	Mayil
14	19	6862	19/F	10.35	25/12/2018	Thaeipirai	Kozhi
15	20	7866	30/F	11.45	27/12/2018	Thaeipirai	Kozhi

16	21	8251	24/F	08.55	30/12/2018	Thaeipirai	Kozhi
17	22	8357	24/M	10.30	31/12/2018	Thaeipirai	Kozhi
18	23	9052	48/F	11.05	31/12/2018	Thaeipirai	Kozhi
19	24	9017	12/FC	08.20	03/01/2019	Thaeipirai	Mayil
20	25	9139	40/M	10.45	03/01/2019	Thaeipirai	Mayil
21	26	4113	30/M	09.15	04/01/2019	Thaeipirai	Mayil
22	27	4621	35/M	10.50	20/01/2019	Valarpirai	Aanthai
23	28	4887	26/F	11.15	22/01/2019	Valarpirai	Kaagam
24	29	5191	22/M	11.30	22/01/2019	Valarpirai	Aanthai
25	30	7992	29/F	07.55	28/01/2019	Valarpirai	Valluru
26	31	8175	31/M	10.52	29/01/2019	Valarpirai	Valluru
27	35	8157	29/M	09.15	31/01/2019	Valarpirai	Aanthai
28	36	8357	20/M	10.25	31/01/2019	Valarpirai	Aanthai
29	37	8583	30/M	11.50	31/01/2019	Valarpirai	Aanthai
30	38	7740	43/M	08.20	01/02/2019	Thaeipirai	Kozhi
31	31	9300	31/M	09.20	01/02/2019	Thaeipirai	Mayil
32	39	203	50/F	10.10	03/02/2019	Thaeipirai	Mayil
33	40	488	25/M	11.20	05/02/2019	Valarpirai	Mayil
34	41	821	21/F	11.05	06/02/2019	Valarpirai	Kaagam
35	42	1223	37/M	11.35	06/02/2019	Valarpirai	Mayil
36	43	1518	41/F	11.55	06/02/2019	Valarpirai	Valluru
37	44	1813	43/F	12.00	06/02/2019	Valarpirai	Valluru

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Aanthai	Valarpirai	07/02/2019	11.20	42/F	2857	45	38
Aanthai	Valarpirai	08/02/2019	09.25	27/F	1225	46	39
Aanthai	Valarpirai	08/02/2019	09.55	33/F	1284	47	40
Aanthai	Valarpirai	09/02/2019	10.15	23/M	1622	48	41
Aanthai	Valarpirai	09/02/2019	11.25	32/F	5668	49	42
Valluru	Valarpirai	10/02/2019	11.45	28/M	5603	50	43
Mayil	Valarpirai	10/02/2019	11.20	32/M	1930	51	44
Mayil	Valarpirai	11/02/2019	10.50	28/M	2193	52	45
Valluru	Valarpirai	13/02/2019	09.25	45/M	2858	53	46
Aanthai	Valarpirai	13/02/2019	1035	15/FC	8803	56	47
Kaagam	Valarpirai	18/02/2019	07.40	36/F	5264	57	48
Aanthai	Valarpirai	19/02/2019	11.05	24/F	5466	58	49
Aanthai	Valarpirai	19/02/2019	10.50	20/F	5589	59	50
Kozhi	Thaeipirai	20/02/2019	11.30	29/F	7292	60	51
Mayil	Thaeipirai	27/02/2019	09.25	36/M	7922	61	52
Mayil	Thaeipirai	27/02/2019	10.20	31/M	8014	62	53
Mayil	Thaeipirai	27/02/2019	11.00	27/M	4125	63	54
Kozhi	Thaeipirai	28/02/2019	08.30	52/M	6753	64	55
Aanthai	Valarpirai	19/03/2019	11.20	15/FC	4271	65	56
Aanthai	Valarpirai	19/03/2019	11.30	23/M	4125	66	57
Aanthai	Valarpirai	19/03/2019	11.50	50/F	4031	67	58
Kozhi	Thaeipirai	26/03/2019	09.10	38/F	6368	68	59

60	69	8208	23/F	08.10	01/04/2019	Thaeipirai	Kozhi
61	70	8360	31/M	09.05	01/04.2019	Thaeipirai	Aanthai
62	73	7702	25/F	11.15	01/04/2019	Thaeipirai	Valluru
63	74	9894	15/M	08.10	04/-4/2019	Valarpirai	Kaagam
64	75	674	30/M	10.40	17/04/2019	Valarpirai	Mayil
65	76	853	26/M	07.55	11/04/2019	Valarpirai	Aanthai
66	77	852	45/F	08.35	11/04/2019	Valarpirai	Aanthai
67	78	1439	15/MC	09.55	12/04/2019	Valarpirai	Aanthai
68	80	1621	22/M	11.10	12/04/2019	Valarpirai	Aanthai
69	81	1851	18/F	08.15	13/04/2019	Valarpirai	Aanthai
70	81	1730	28/M	10.55	13/04/2019	Valarpirai	Kozhi
71	82	1854	25/M	11.40	13/04/2019	Valarpirai	Mayil
72	83	402	33/F	07.55	20/04/2019	Thaeipirai	Kaagam
73	84	3781	33/F	08.25	22/04/2019	Thaeipirai	Kaagam
74	85	4832	19/F	08.10	25/04/2019	Thaeipirai	Mayil
75	86	4692	35/M	09.55	25/04/2019	Thaeipirai	Aanthai
76	87	4916	27/F	10.30	25/04/2019	Thaeipirai	Kozhi
77	88	2230	20/F	11.45	27/04/2019	Thaeipirai	Kozhi
78	89	9617	26/F	10.40	12/05/2019	Valarpirai	Kozhi
79	90	533	38/M	10.55	13/05/2019	Valarpirai	Aanthai
80	94	1055	27/M	09.55	16/05/2019	Valarpirai	Aanthai
81	95	1107	30/M	07.30	18/05/2019	Valarpirai	Aanthai

82	96	1108	24/M	08.05	18/05/2019	Valarpirai	Aanthai
83	97	1109	25/M	08.15	18/05/2019	Valarpirai	Kozhi
84	98	1247	22/F	09.00	18/05/2109	Valarpirai	Mayil
85	99	1379	16/M	09.33	19/05/2019	Thaeipirai	Kaagam
86	102	1895	17/F	09.50	20/05/2019	Thaeipirai	Mayil
87	103	1971	20/F	10.15	21/05/2019	Thaeipirai	Aanthai
88	104	1770	28/F	07.30	21/05/2019	Thaeipirai	Kaagam
89	105	2243	19/M	10.55	21/05/2019	Thaeipirai	Valluru
90	106	2762	50/M	11.53	22/05/2019	Thaeipirai	Kozhi
91	107	2706	42/M	11.15	22/05/2019	Thaeipirai	Kozhi
92	108	3179	20/M	08.00	24/05/2019	Thaeipirai	Aanthai
93	109	3100	18/F	07.41	25/05/2019	Thaeipirai	Aanthai
94	111	2976	23/M	08.37	25/05/2019	Thaeipirai	Mayil
95	112	2969	20/M	09.43	25/05/2019	Thaeipirai	Valluru
96	114	6563	38/F	10.45	25/05/2019	Thaeipirai	Kaagam
97	116	6925	50/F	12.00	07/06/2019	Valarpirai	Mayil
98	118	6928	17/F	07.45	08/06/2019	Valarpirai	Aanthai
99	119	7971	38/M	09.50	08/06/2019	Valarpirai	Aanthai
100	120	480	27/M	10.57	12/06/2019	Valarpirai	Kozhi

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### **PANJAPATCHI:**

- Among 100 cases, 57 cases are in Valarpirai, while 43 cases in Thaeipirai.
- In Valarpirai, 29 cases of Aandhai (Air); 11 cases of Mayil (Space); 7 cases of Kagam (Earth); 6 cases of Valluru (Fire) and 4 cases of Kozhi (Water) are affected i.e in Saavu nilai.
- In Thaeipirai, 15 cases of Kozhi (Air); 13 cases of Mayil (Space); 8 cases of Kaagam (Fire); 4 cases of Aandhai (Water); and 3 cases of Valluru (Earth) are affected i.e in Saavu nilai.
- Among 100 cases, 44 cases of Air (Vaayu); 24 cases of Space (Aagayam); 14 cases of Fire (Thee); 10 cases of Earth (Mann) and 8 cases of Water (Neer) are affected.

### **INFERENCE**:

• Among 100 cases, 29 cases of Aandhai (Air) in Valarpirai and 15 cases of Kozhi (Air) are affected. So totally 44 cases of Vaayu (Air) element is affected.

# LAB INVESTIGATIONS

TABLE - 7.24

									BLOOD	ANA	LYSIS					URINE A	NALYSIS
	DEG	OPP		TC		DC		ES	SR	НВ			~				
S. NO.	REG. NO.	OPD. NO.	AGE / SEX	(Cells / Cu.m m)	P ( % )	L (% )	E (% )	mm/30 min	mm/60 min	G	CHO (mg%)	Urea (mg %)	Sugar F/PP/R (mg %)	IgE (UI/ml	Albumi	Sugar	Deposits
1	1	8283	30/M	9200	56	36	8	6	12	11.5	182	40	95/114	450	Nil	Nil	1-2 epithelial cells
2	2	9406	21/M	7800	54	37	9	8	15	12	192	45	90/125	360	Nil	Nil	0-2 epithelial cells
3	3	1125	21/M	8400	62	28	10	5	10	14.4	130	42	124	700	Nil	Nil	0-3 pus cells
4	4	1853	31/F	6100	57	35	8	6	14	9.4	150	50	122	550	Nil	Nil	0-2 epithelial cells
5	8	2776	22/M	9700	54	37	9	9	16	13	170	42	96/124	150	Nil	Nil	0-3 pus cells
6	9	3786	19/M	9900	50	38	12	8	15	11.8	160	48	118	760	Nil	Nil	1-3 epithelial cells
7	10	4353	48/M	10200	65	25	10	4	8	14	130	50	103/130	880	Nil	Nil	0-2 pus cells
8	11	8042	22/F	9000	68	24	8	3	6	10	150	54	115	786	Nil	Nil	0-1pus cells
9	12	9602	22/F	10100	58	42	10	4	7	9.2	150	53	112	489	Nil	Nil	1-2 epithelial cells
10	15	1533	42/M	8400	60	39	11	5	12	13.8	120	43	102/132	356	Nil	Nil	Nil
11	16	5547	19/F	7000	67	28	9	8	16	13.6	160	46	122	347	Nil	Nil	0-1epithelial cells
12	17	5210	45/F	8900	53	33	14	9	18	13.4	124	54	145	898	Nil	Nil	Nil
13	18	5866	30/M	8800	65	25	10	7	13	14.2	130	48	132	1196	Nil	Nil	Nil
14	19	6862	19/F	7200	59	29	12	5	9	9.0	160	40	98	723	Nil	Nil	2-3pus cells
15	20	7866	30/F	5100	55	28	17	6	12	9.8	120	50	114	960	Nil	Nil	2-3pus cells
16	21	8251	24/F	11000	60	41	9	3	6	13.2	140	43	110	935	Nil	Nil	2-4epithelial cells

17	22	8357	24/M	13500	65	22	13	4	9	14.4	140	47	77/114	669	Nil	Nil	2-3epithelial cells
18	23	9052	48/F	10600	62	28	10	6	14	13.4	170	45	105/138	802	Nil	Nil	Nil
19	24	9017	12/FC	8900	58	31	11	4	9	11.8	130	48	85	668	Nil	Nil	Nil
20	25	9139	40/M	8000	60	25	15	7	14	13.8	170	45	125	576	Nil	Nil	0-2 pus cells
21	26	4113	30/M	8700	50	39	11	8	15	12.6	150	48	105/134	487	Nil	Nil	Nil
22	27	4621	35/M	8400	80	15	03	8	20	16	132	24	80	398	Nil	Nil	1-2 epithelial cells
23	28	4887	26/F	9700	59	31	10	5	9	13.2	160	53	118	376	Nil	Nil	2-3epithelial cells
24	29	5191	22/M	5300	63	25	12	5	9	14.4	190	54	130	487	Nil	Nil	1-2 epithelial cells
25	30	7992	29/F	8400	64	26	10	7	13	13.6	120	57	98/128	967	Nil	Nil	0-2epithelial cells
26	31	8175	31/M	6900	62	25	13	3	7	14	145	54	120	670	Nil	Nil	Nil
27	35	8157	29/M	11200	44	40	8	4	9	14.6	120	45	84/118	590	Nil	Nil	1-3 epithelial cells
28	36	8357	20/M	7400	55	35	15	7	15	14.2	134	53	110	400	Nil	Nil	2-5 epithelial cells
29	37	8583	29/M	8700	70	25	02	3	8	16	130	24	80	560	Nil	Nil	2-4 pus cells
30	38	7740	43/M	7000	64	26	10	6	11	15	130	48	128	300	Nil	Nil	3-4 epithelial cells
31	31	9300	31/M	5100	60	25	15	7	15	14.4	104	49	128	600	Nil	Nil	1-3 epithelial cells
32	39	203	50/F	7600	58	30	12	9	18	11.2	96	60	119	340	Nil	Nil	Nil
33	40	488	25/M	6600	50	40	10	8	16	15	133	45	96	586	Nil	Nil	1-2 epithelial cells
34	41	821	21/F	11000	56	34	8	6	10	13.2	104	43	88	350	Nil	Nil	1-3 pus cells
35	42	1223	37/M	8200	65	25	15	4	9	14.6	130	43	96/114	548	Nil	Nil	0-1 epithelial cells
36	43	1518	41/F	8600	50	36	14	7	14	14.8	132	47	107/138	650	Nil	Nil	2-4 epithelial cells
37	44	1813	43/F	11000	62	37	11	9	17	13.2	88	50	115	760	Nil	Nil	Nil
38	45	2857	42/F	10400	53	35	12	11	20	14.6	94	45	89	496	Nil	Nil	1-2 pus cells

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39	46	1225	27/F	7400	56	36	8	5	9	13.5	120	46	86/105	523	Nil	Nil	0-3 epithelial cells
40	47	1284	33/F	8200	60	26	14	8	15	14.2	98	48	118	887	Nil	Nil	Nil
41	48	1622	23/M	7400	61	30	9	4	8	14.8	134	42	95/120	465	Nil	Nil	1-3 epithelial cells45
42	49	5668	32/F	8600	55	30	15	4	9	14.2	195	41	86/138	369	Nil	Nil	1-3 epithelial cells
43	50	5603	28/M	6600	59	30	11	6	12	14.2	167	54	103	402	Nil	Nil	1-4 epithelial cells
44	51	1930	32/M	9400	65	22	13	8	17	14.6	150	56	128	868	Nil	Nil	0-2 epithelial cells
45	52	2193	28/M	8400	60	28	12	7	14	15.2	124	51	115	676	Nil	Nil	0-3 epithelial cells
46	53	2858	45/M	10400	57	30	13	4	9	15.8	104	50	101/135	657	Nil	Nil	0-2 epithelial cells
47	56	8803	15/FC	10900	62	29	9	5	10	12.6	108	47	108	398	Nil	Nil	1-3 epithelial cells
48	57	5264	36/F	9800	59	30	11	9	18	14.6	92	48	134	576	Nil	Nil	1-2 pus cells
49	58	5466	24/F	7900	50	36	14	7	10	13.6	108	50	120	487	Nil	Nil	1-2 epithelial cells
50	59	5589	20/F	9800	60	25	15	9	18	12.6	110	54	94	367	Nil	Nil	0-1 epithelial cells
51	60	7292	29/F	10700	55	32	13	7	13	14	102	40	93	670	Nil	Nil	Nil
52	61	7922	36/M	7400	65	25	10	5	10	15.2	160	45	80	490	Nil	Nil	0-3 epithelial cells
53	62	8014	31/M	6700	69	22	9	10	20	14.8	102	42	110/117	300	Nil	Nil	1-2 epithelial cells
54	63	4125	27/M	6100	64	26	10	6	13	15.6	86	50	80/139	800	Nil	Nil	1-4 epithelial cells
55	64	6753	52/M	9700	69	20	11	4	8	14.4	122	42	130	700	Nil	Nil	0-2epithelial cells
56	65	4271	15/FC	8600	58	30	12	3	7	12.4	140	48	103/140	453	Nil	Nil	1-3 epithelial cells
57	66	4125	27/M	9000	62	30	8	5	10	13.8	120	46	98/130	650	Nil	Nil	0-2 pus cells
58	67	4031	23/M	8500	67	20	13	5	10	14.8	113	50	260	450	Nil	Nil	1-2 epithelial cells
59	68	6368	50/F	7800	60	31	9	6	12	13.8	171	54	114	453	Nil	Nil	1-3 epithelial cells
60	69	8208	38/F	9400	66	20	14	4	7	14.8	130	53	22	567	Nil	Nil	2-3 epithelial cells

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61	70	8360	23/F	8100	67	20	13	6	13	13.5	93	43	20	600	Nil	Nil	1-2 epithelial cells
62	72	7702	31/M	10000	71	20	9	10	18	14.4	76	46	103	653	Nil	Nil	0-1 epithelial cells
63	73	9894	25/F	8000	58	32	10	7	15	14.8	72	54	90	435	Nil	Nil	2-4 epithelial cells
64	74	674	15/M	7900	65	20	15	12	24	13	160	48	92	325	Nil	Nil	1-2 epithelial cells
65	75	853	30/M	9700	64	21	15	6	12	15	84	40	104	340	Nil	Nil	0-1 epithelial cells
66	76	852	26/M	8800	59	30	11	8	15	14.8	76	50	98	670	Nil	Nil	2-3 epithelial cells
67	77	1439	45/F	8400	65	31	14	9	18	13.4	150	43	108	415	Nil	Nil	0-3 pus cells
68	78	1621	15/M C	9400	64	20	16	4	8	13	120	47	110	350	Nil	Nil	0-1 epithelial cells
69	80	1851	22/M	7400	68	22	10	6	12	14.4	125	45	100/125	670	Nil	Nil	0-2 epithelial cells
70	81	1730	18/F	9800	62	28	10	2	4	13.6	88	48	103	546	Nil	Nil	0-3 epithelial cells
71	82	1854	28/M	9600	58	29	13	6	12	14.2	92	45	102	840	Nil	Nil	1 -2epithelial cells
72	83	402	25/M	7300	60	29	11	8	16	13.8	84	48	110	540	Nil	Nil	0-2 epithelial cells
73	84	3781	33/F	8400	64	26	10	7	14	14.5	134	49	130	320	Nil	Nil	0-1 epithelial cells
74	85	4832	33/F	9400	70	20	10	3	6	9.2	98	53	104	549	Nil	Nil	0-3 epithelial cells
75	86	4692	19/F	6800	66	20	14	5	10	9.6	96	54	82	434	Nil	Nil	2-4 epithelial cells
76	87	4916	35/M	7400	62	28	10	3	6	14	114	57	140	458	Nil	Nil	0-2 epithelial cells
77	88	2230	27/F	9500	58	30	12	9	17	12.2	82	54	104	640	Nil	Nil	0-1 epithelial cells
78	90	9617	20/F	7200	63	20	17	10	20	10.4	98	45	108	645	Nil	Nil	2-4 epithelial cells
79	91	533	26/F	10400	55	30	15	6	12	13.8	94	53	98	700	Nil	Nil	0-1 epithelial cells
80	92	1055	38/M	9000	59	30	11	8	16	14.4	120	57	140	659	Nil	Nil	2-3 epithelial cells
81	94	1107	27/M	8200	70	20	10	6	12	14.6	115	48	94	453	Nil	Nil	2-3 epithelial cells
82	95	1108	30/M	9500	57	33	10	2	4	15	182	49	100/120	653	Nil	Nil	1-3 epithelial cells

83	96	1109	24/M	7200	62	25	15	7	14	14	192	60	90/120	780	Nil	Nil	2-4 epithelial cells
84	97	1247	25/M	8600	57	30	13	5	11	13.4	130	45	131	543	Nil	Nil	1-3 epithelial cells
85	98	1379	22/F	8100	63	27	10	7	14	13.8	150	43	125	450	Nil	Nil	3-4 epithelial cells
86	99	1895	16/M	8400	59	32	9	3	6	11	170	43	140	658	Nil	Nil	1-3 epithelial cells
87	102	1971	17/F	9700	59	31	10	5	10	13	160	47	120/140	879	Nil	Nil	1-4epithelial cells
88	103	1770	20/F	7200	70	22	8	7	14	10.2	130	50	110/130	546	Nil	Nil	1-2 epithelial cells
89	104	2243	28/F	8000	66	34	10	9	18	13.4	150	45	98/120	450	Nil	Nil	0-2 pus cells
90	105	2762	19/M	8000	60	31	9	11	22	13.2	150	46	135	653	Nil	Nil	0-1 epithelial cells
91	106	2706	50/M	8700	59	31	10	2	4	14.2	120	48	150	780	Nil	Nil	2-3 epithelial cells
92	107	3179	42/M	9000	50	39	11	4	8	12.2	160	42	140	564	Nil	Nil	2-4 epithelial cells
93	108	3100	20/M	8500	57	30	13	6	12	14	124	41	160	659	Nil	Nil	1-2 pus cells
94	109	2976	18/F	7800	57	33	10	8	16	12.8	130	54	80/120	450	Nil	Nil	0-1 epithelial cells
95	111	2969	23/M	6500	59	30	11	10	20	11.2	160	56	90/125	470	Nil	Nil	2 -4epithelial cells
96	112	6563	20/M	5900	62	27	11	12	24	14.8	120	51	135	546	Nil	Nil	1-3 epithelial cells
97	114	6925	38/F	7000	60	30	10	5	10	13.2	140	50	123	780	Nil	Nil	1-2 pus cells
98	116	6928	50/F	8500	65	22	13	3	6	14.4	140	47	110	1040	Nil	Nil	1-2 epithelial cells
99	118	7971	17/F	5600	64	26	14	7	14	13.6	170	48	102/135	980	Nil	Nil	0-2 epithelial cells
100	120	480	38/M	7600	80	15	03	5	10	13.7	130	26	145	945	Nil	Nil	1-2 epithelial cells

## **NOTE:**

- HB Haemoglobin;
- TC Total count of WBC;
- DC Differential count; P Polymorphs, L Lymphocytes, E Eosinophils;

- ESR Erythrocyte sedimentation rate;
- CHO Cholesterol;
- F Fasting;
- PP Prandial;
- R Random

#### **NORMAL RANGE:**

- 1. Haemogloblin concentration:
  - Men: 13 18 gms/dl
  - Women: 12 16.5 gms/dl
  - Children (> 1 year): 11 13 gms/dl
  - Children (> 12 years): 11.5 14.5 gms/dl
- 2. Total WBC count:
  - Adults: 4000 10,000 cells/cu.mm
  - At birth: 10000 25000 cells/cu.mm
  - 1-3 years: 6000 18000 cells/cu.mm
  - 4-7 years: 6000 15000 cells/cu.mm
  - 8-12 years: 4500 13000 cells/cu.mm
- 3. WBC (differential count): Polymorph: 40 75 %; Lymphocyte: 20 40 %; Eosinophil: 1 6 %; Monocyte: 2 10 %; Basophil: 0 1 %
- 4. ERYTHROCYTE SEDIMENTATION RATE (ESR): Male: 0 15 mm/1 hour; Female: 0 20 mm/1 hour
- 5. SERUM CHOLESTEROL: Less than 200 mg/dl
- 6. BLOOD UREA: 7 20 mg/dl
- 7. BLOOD GLUCOSE: FASTING: 70 100 mg/dl; POST PRANDIAL: <140 mg/dl; RANDOM: 80 160 mg/dl
- 8. IMMUNOGLOBULIN E (IgE): 150 300 UI/ml

REG NO: 22, OPD. NO: 4621, AGE/SEX :35/M KABAALA KARAPPAN - SPARISAM:

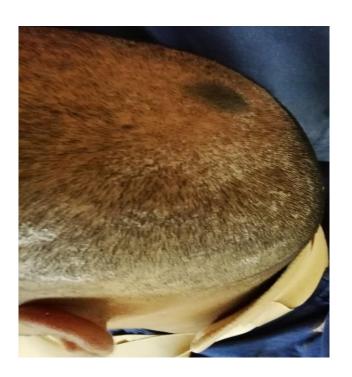


VAATHA PITHA NEIKURI



ARAVU + AAZHI = VAATHA PITHAM

### REG NO: 29, OPD. NO: 8583, AGE/SEX: 29/M KABAALA KARAPPAN - SPARISAM:



PITHA VAATHA NEILURI



AAZHI + ARAVU = PITHA VAATHAM

REG :NO: 120, OPD NO: 480, AGE/SEX : 38/M KABAALA KARAPPAN-SPARISAM



KABAVADHA NEIKURI



MUTHU+ARAVU=KABAVADHAM

V 0000FF		Sid Date: 11/01/201
SID.No. : 000075		Reg Time: 23:03:41
Referrer : Dr. SENTHILVEL A	MS., MCH.,	Rpt Date: 12/01/201
		Page # :1 of 3
	Result	Reference Value
Test BIOCHEMISTRY	Kesuit	Weigiende Anide
GLUCOSE (RANDOM)  Method : GOD POD	: 85 mg/dl	80 - 140 mg/dl
UREA	: 26 mg/dl	10 - 45 mg/dl
Method : Modified Berthlot		
CREATININE	: 0.8 mg/dl	Men: 0.6 - 1.3 mg/dl
Method : Modified Jaffe's		Women: 0.5 - 1.0 mg/dl
HAEMATOLOGY		
CBC ,		
Total WBC Count	: 8400 Cells/cmm	4000 - 11000
Differential Count		
Neutrophils	: 80 %	Adult :47 - 75 %
		Children: 33 - 45 % infants : 21 - 81 %
Lymphocytes	: 15 %	Adult :16 - 39 %
Hymphocy ces		Children:33 - 45 %
		Infants :08 - 38 %
Eosinophils	: 03 %	Adult :00 - 05 %
		Children:00 - 05 %
		Infants :00 - 05 %
Monocytes	: 02 %	02 - 04 %
Basophils	: 00 %	00 - 01 %
ESR		
1/2 Hr	: 08 mm	
1 Hr	: 20 mm	Male : 1 - 7 MM
		Female : 2 - 10 MM
Haemoglobin	: 13.7 gm/dl	New Born :16-25
320211	. 201. gm, 42	Infant:11-14
		Child upto10 yrs:12-1
		Adult (M) :13.5-18.0
		Cond

patient : Mr. MAHESH KU	MAR	Age :35 Sex :Male
SID. No. : 000075		Sid Date: 11/01/201
Referrer : Dr. SENTHILVEL A	MS., MCH.,	Reg Time: 23:03:41
		Rpt Date: 12/01/201
mant.		Page # :2 of 3
Test	Result	Reference Value
		Adult (F) :11.5-16.5
RBC Count	: 4.14 Millions/cm	nm Male : 4.6-6.0
		Female: 4.2-5.4
Haematocrit (PCV)	200	
	: 36.9 %	Male : 40-52%
MCV	00.1	Female : 38-45%
MCH	: 89.1 fl	76 - 96 fl
MCHC	: 33.0 pg	27 - 31 pg
Hene	: 37.1 %	32 - 36 %
Platelets Count	: 1.69 Lakhs/cu.mr	m 1.5 - 4.0
CLINICAL PATHOLOGY URINE ROUTINE ANALYSIS		
Color	: Straw yellow	
Appearance	: Clear	
Reaction	: Acidic	
Sp.Gravity	: 1.020	
PH	: 6.0	
Albumin	: Nil	
Sugar Microscopy	: NIL	
Pus cells/hpf		
RBCs/hpf	: 2 - 4	
Epi.Cells/hpf	: 5 - 10	
Casts	: 1 - 2	
Crystals	: Nil	
Bacteria	: Nil	
Others	: Nil	
	: No bacteria or Fur	lgi seen
		Cond

Patient : Mr. MANIVANNAN	Sid Date: 29/01/2019				
SID.No. : 000253	Reg Time: 15:41:28				
Referrer : Dr. SENTHILVEL A	Rpt Date: 29/01/201				
		Page # :1 of 3			
Test	Result	Reference Value			
BIOCHEMISTRY					
GLUCOSE (RANDOM) Method : GOD POD	: 80 mg/dl	80 - 140 mg/dl			
UREA	: 24 mg/dl	10 - 45 mg/dl			
Method : Modified Berthlot					
CREATININE	: 1.1 mg/dl	Men: 0.6 - 1.3 mg/dl			
Method : Modified Jaffe's		Women: 0.5 - 1.0 mg/dl			
HAEMATOLOGY					
CBC					
Total WBC Count	: 8,700 Cells/cmm	4000 - 11000			
Total Web Count	. 0,700 0011570	1000			
Differential Count					
Neutrophils	: 70 %	Adult :47 - 75 %			
		Children:33 - 45 %			
Lymphocytes	: 25 %	infants :21 - 81 %			
nymphocy tes	. 25 5	Adult :16 - 39 % Children:33 - 45 %			
		Infants :08 - 38 %			
Eosinophils	: 03 %	Adult :00 - 05 %			
		Children:00 - 05 %			
Managarahan		Infants :00 - 05 %			
Monocytes Basophils	: 02 %	02 - 04 %			
Basopiiiis	: 00 %	00 - 01 %			
ESR					
1/2 Hr	: 03 mm				
1 Hr	: 8 mm	Male : 1 - 7 MM			
		Female: 2 - 10 MM			
Haemoglobin	: 16.0 gm/dl				
	, 20.0 gm/ al	New Born :16-25 Infant:11-14			
		Child upto10 yrs:12-16			
		Adult (M) :13.5-18.0			
		(,			

```
patient : Mr. MANIVANNAN
                                                 Age :29
                                                             Sex : Male
                                                         Sid Date: 29/01/2019
SID.No. : 000253
                                                         Reg Time: 15:41:28
Referrer : Dr. SENTHILVEL A MS., MCH.,
                                                         Rpt Date: 29/01/2019
                                                        Page # :2 of 3
Test
                               Result
                                                  Reference Value
                                                  Adult (F) :11.5-16.5
     RBC Count
                            : 4.75 Millions/cmm Male : 4.6-6.0
                                                 Female: 4.2-5.4
                      : 45.9 %
     Haematocrit (PCV)
                                                 Male : 40-52%
                                                 Female : 38-45%
     MCV
                             : 96.6 fl
                                                 76 - 96 fl
     MCH
                             : 33.6 pg
                                                 27 - 31 pg
                                                 32 - 36 %
     MCHC
                             : 34.8 %
     Platelets Count
                            : 2.68 Lakhs/cu.mm 1.5 - 4.0
CLINICAL PATHOLOGY
URINE ROUTINE ANALYSIS
     Color
                          : Pale yellow
     Appearance
                            : Clear
     Reaction
                            : Acidic
     Sp. Gravity
                            : 1.020
     PH
                            : 6.5
     Sugar
                            : NIL
    Microscopy
    Pus cells/hpf
                            : 2 - 4
    RBCs/hpf
                           : Nil
    Epi.Cells/hpf
                           : 1 - 2
    Casts
                           : Nil
    Crystals
                              Nil
    Bacteria
                          : Nil
    Others
                           : No bacteria or Fungi seen
                                                            Cond..
```

Patient : Mr. ARUN		
SID.No. : 001663		Age :33 Sex :M
		Sid Date: 01/0
Referrer : Dr. SENTHILVEL A	MS., MCH.,	Reg Time: 18:5
		Rpt Date: 01/0
Test	Result	Page # :1 of
BIOCHEMISTRY	Kesuit	Reference Value
UREA	: 26 mg/dl	10 - 45 mg/dl
Method : Modified Berthlot		
CREATININE	: 1.4 mg/dl	Men: 0.6 - 1.3 mg/dl
Method : Modified Jaffe's		Women: 0.5 - 1.0 mg/c
HAEMATOLOGY		
CBC		
Total WBC Count	: 7600 Cells/cmm	4000 - 11000
	· · · · · · · · · · · · · · · · · · ·	4000 - 11000
Differential Count		
Neutrophils	: 80 %	Adult :47 - 75 %
		Children:33 - 45 %
		infants :21 - 81 %
Lymphocytes	: 15 %	Adult :16 - 39 %
		Children:33 - 45 %
Eosinophils		Infants :08 - 38 %
2002HOPH228	: 03 %	Adult :00 - 05 %
		Children:00 - 05 %
Monocytes	: 02 %	Infants :00 - 05 %
Basophils	: 00 %	02 - 04 %
		00 - 01 %
ESR		
1/2 Hr	: 05 mm	
1 Hr	: 10 mm	Male : 1 - 7 104
		Female : 2 - 10 10
Haemoglobin	: 13.7 gm/dl	New Born :16-25
		Infant:11-14
		Child upto10 yrs:1
		Adult (M) :13.5-16
		Adult (F) :11.5-1

```
Patient : Mr. ARUN
                                               Age :33 Sex :Male
 SID. No. : 001663
                                                      Sid Date: 01/07/2019
 Referrer : Dr. SENTHILVEL A MS., MCH.,
                                                      Reg Time: 18:56:43
                                                      Rpt Date: 01/07/2019
 Test
                                                      Page # :2 of 2
                              Result
                                                Reference Value
     RBC Count
                             : 4.93 Millions/cmm Male : 4.6-6.0
                                                Female: 4.2-5.4
     Haematocrit (PCV)
                            : 42.8 %
                                               Male : 40-52%
                                               Female : 38-45%
     MCV
                            : 86.8 fl
                                                76 - 96 fl
     MCH
                             : 27.7 pg
                                               27 - 31 pg
     MCHC
                             : 32.0 %
                                                32 - 36 %
     Platelets Count
                            : 2.02 Lakhs/cu.mm 1.5 - 4.0
CLINICAL PATHOLOGY
URINE ROUTINE ANALYSIS
    Color
                          : Pale Yellow
    Appearance
                            : Clear
                            : Acidic
    Reaction
    Sp. Gravity
                            : 1.020
    PH
                            : 6.0
    Albumin
                            : Nil
    Sugar
                            : Nil
    Microscopy
    Pus cells/hpf
                          : 2 - 4
    RBCs/hpf
                            : Nil
    Epi.Cells/hpf
                            : 1 - 2
                            : Nil
    Casts
                            : Nil
    Crystals
                          : Nil
   Bacteria
   Others
                           : No bacteria or Fungi seen
                                                             Lab InCharge
                         * End Of Report *
```

#### WE CARE WITH PASSION

#### **HEALTH PLUS CLINIC & DIAGNOSTICS**

(An ISO 9001:2015 Certified)
Plot No.26/27, Sumeru Square, Kanaka Nagar, Agaram Main Road, Selaiyur, Chennai - 59

Ref. No : 2010 Date: 10/02/2018

Patient Name : MR. Magesh kumar Age /Sex: 35/ Male

Referred By : Dr.Thiruvengadam

Test	Result	Reference value
BLOOD-IMMUNOLOGY		

IgE (IMMUNOGLOBULINE) : 398.0 IU/ml Adult: Negative<160IU/ml

(Method-ECLIA) Childrens:

<1 years:1.5-52.0IU/ml

1 -4 years: 0.4 -350.0 IU/ml

5-10 years: 0.5-393.0 IU/ml

11-15 years:1.9-170 IU/ml

DR. A.V.M. Balaji, M.D. DR. KOMALA G. MD CONSULTANT MICROBIOLOGIST **CONSULTANT BIOCHEMIST** 

#### Please Note:

\*Laboratory values vary with the age, gender and the time of collection of sample. Suggested to correlate with other clinical findings.

\*The laboratory reports should be interpreted only by the Medical Personnel.

#### WE CARE WITH PASSION

#### **HEALTH PLUS CLINIC & DIAGNOSTICS**

(An ISO 9001:2015 Certified)

Plot No. 26/27, Sumeru Square, Kanaka Nagar, Agaram Main Road, Selaiyur, Chennai - 59

Ref. No : 2510 Date: 5/02/2019

Patient Name : MR.MANIVANNAN Age /Sex: 29 / Male

Referred By : Dr. Thiruvengadam

Test	Result	Reference value
BLOOD-IMMUNOLOGY	L'	
IgE (IMMUNOGLOBULINE)	: 560.0 IU/ml	Adult: Negative<160IU/ml
(Method – ECLIA)		Childrens:
		<1 years: 1.5 -52.0IU/ml
		1 -4 years: 0.4 -350.0 IU/ml
		5 -10 years: 0.5 -393.0 IU/ml

11-15 years: 1.9-170 IU/ml

DR. A.V.M. Balaji, M.D.
CONSULTANT MICROBIOLOGIST

DR. KOMALA G. MD CONSULTANT BIOCHEMIST

#### Please Note:

\* Laboratory values vary with the age, gender and the time of collection of sample. Suggested to correlate with other clinical findings.

\*The laboratory reports should be interpreted only by the Medical Personnel.

# **DISCUSSION**

#### 8.DISCUSSION

**Kabaala karappan** is one of the seven types of karappan disease described by spiritual giant Yugi in the literature YugiVaithyaCinthamani 800.

Out of 120 cases, screened in OPD of Government Siddha medical college in AringarAnna Govt hospital, Chennai-106.100 cases where recruited for the study.

The sample size of 100 cases for the study on the topic kabaala karappan is approved by screening and IEC committee members.

#### Disrtribution of cases by clinical symptoms

- ➤ 100% Itching in head
- > 97%Scaling in head
- ➤ 29% Itching in ear
- ➤ 23% Itching in eye
- > 27% Sneezing
- > 13% Sore thorat
- ➤ 10% Rhinitis
- ➤ 4% Head ache
- ➤ 3% Rheum of eye
  Majority of patients of Kabaala Karappan had itching and scaling.

#### Distribution of cases by age and kaalam

Among the 100 cases, 22% of cases came under below 15-20 yrs.27% of cases came under 21-40. 31% of cases came under 41-50. 20% of cases came under 51-60.

In kabaala Karappan majority of cases had 41-50 years and Ilavenil kaalam.

#### Distribution of cases by food habits

Among the 100 cases, 85% of the cases were mixed diet, 15% of cases come under vegetarian.

In kabaala Karappan majority of cases had mixed diet.

#### Distribution of cases by dhegi

Among 100 cases, 52 % of cases come under Vaadha pitham, 32% of cases comes under Pitha vadham,11% 0f cases comes under Pitha kabam, 9% of cases comes under Vadha kabam.

In kabaala Karappan majority of cases had Vadha pitham.

#### Distribution of cases by Nilam.

Among the cases (85%) were from neithalnilam. The area sea shore and its adjoining areas vadha disease are more common. In 15% 0f cases comes under Marutham nilam.

In Kabaala Karappan majority of cases comes under Neithalnilam.

#### Distribution of cases by etiology

Among 100 cases, 45% of the patient were caused by transmission of infected person to another person, 35% of the patient were caused poor hygiene.20% of the patient were caused by stress.

In kabaala Karappan majority of cases had Infected.

### Distribution of cases by gender

Among 100 cases, 54% of cases comes under Male gender and 46% of cases comes under Female gender.

In kabaala Karappan majority of cases had Male.

#### Distribution of cases by udalvanmai

Among 100 cases, 56% of cases comes under Iyalbu, 24% cases comes under Valivu, 20% of cases comes under Melivu vanmai.

In Kabaala Karappan majority of cases had Iyalbu.

#### Disrtibution of cases by noiuttrakaalam

Among 100 cases, 33% of cases come under Ilavenil kaalam (Cithirai – vaikasi), 30 of cases comes under Munpanikaalam (Maarkali-thai), 22%cases comes under Pinpanikaalam (Maasi-panguni), 15% of cases comes under koothirkaalam (iyaipasi-karthikai).

In kabaala Karappan majority of cases had Ilavenil kaalam.

#### Distribution of cases by ennvagaithervu

#### Distribution of cases by naadi

Among 100 cases, 57% of cases had Vadha pitham, 18% of cases had Pitha vadham, 13% of cases had Kabha vadham, 12% of cases had Kabha pitham.

In kabaala Karappan majority of cases had vadhapitham.

#### Distribution of cases by sparism

In veppam 89% of cases had mithaveppam, 11% of cases comes under Migu veppam, 9% of cases comes under viyarvai, 97% of cases comes under Scaly,8% of cases comes under Parukkal.

In kabaala Karappan majority of cases had Mithaveppam.

#### Disrtibution of cases by naa

Among the 100 cases, 46% of patients had coated tongue,34% cases comes under parpathivu, 18% of cases under vaedippu.17% cases comes under Karu nira pulli,14% cases comes under Veluppu,

In kabaala Karappan majority of cases had coated tongue.

#### Distribution of niram

Among 100 cases, 97% of cases white scaly, 43% of cases of red skin.

In kabaala Karappan majority of cases had white scaly.

#### Distribution of cases by mozhi

Among 100 cases 85% of cases comes under moderate pitch,15% of cases comes under low pitch. In kabaala Karappan majority of cases had moderate pitch.

#### Distribution of cases by vizhi

Among 100 cases,16% cases comes under Arippu,13% of cases comes under Veluppu, 9% of cases comes under Erichal, 5% cases comes under Peelai,

In kabaala Karappan majority of cases had vizhi arippu.

#### Distribution of cases by malam

In thanmai 75% of cases comes under iyalbu.

In niram 82% of cases comes under manjal.

In kabaala Karappan majority of cases had iyalbu and manjal

#### Distribution of cases by moothiram

#### In neerkuri

In niram 72% of case comes under pale yellow. In 15% of cases comes under Nurai, 3% of cases comes under Enjal.

In kabaala karppan majority of cases had pale yellow.

#### Neikuri

Among 100 cases, 14% of cases comes under Aravu, 38% of cases comes under Aravu aazhi,7% of cases comes under Aazhi,12% of cases comes under Aazhi aravu,14% of cases comes under Muthu aravu,15% of cases comes under Muthu aazhi.

In kabaala Karappan majority of cases had Aravu aazhi.

#### Disrtibution of cases by manikadainool

Among 100 cases, 47% cases comes under 8 3/4 manikadaialavu. Increased body heat, skin disease due to toxins, abdominal discomfort, cataract, sinusitis.

In kabaala Karappan majority of cases had 8 ¾ manikadaialavu.

#### Distriubution of panjapachi sasthiram

Among 100 cases, 29 cases of Aandhai (Air) in Valarpirai and 15 cases of Kozhi (Air) are affected. So totally 44 cases of Vaayu (Air) element is affected.

In kabaala Karappan majority of cases affected of Vaayu.

#### Distribution of cases by uyir thadhukal

Among 100 cases In vaatham 98% of cases Viyanan,30%udaanan, 18% samaanan, Kirukaran 12%,Koorman 8% are increased. In Pitham 57%% of cases Pirasagam, 98% Ranjagam,18% Saathagam is increased.

In kabaala Karappan majority of cases affected for Viyanan in vadham and ranjagam in pitham.

#### Distribution of cases by udal thadhukkal

In kabaala Karappan majority of cases had saaram, senneer, oon, kozhupu, is decreased.

In kabaala karappan the clinical features is closely related to seborrheic dermatitis. It was observed that almost all patients have a symptoms of dandruff, itching of head and ear, flaky scaly redness of skin.

In future more number of cases will be included for the study and screening the disease, which will be useful for the diagnosis of kabaala karappan in early stage.

# **SUMMARY**

#### 9. SUMMARY

Initially the author had selected 4-5 topics. The author was interested to select this topics because now a days most of the people with seborrheic dermatitis are developing more complications, So the author show this topic to a modern pathologist, She gave more information to the author about the disease. Then this topic is submitted to the screening committe members and got approved from IEC committe members. The aim of this study is to evaluate the significance of the disease **kabaala karappan** with help of siddha parameters Ennvagaithervu, manikadainool and yaakkaiElakkanam.

**Kabaala karappan** is quoted in the YugiVaithiya Chinthamani-800.It is one of the karappan disease characterized by itching of scalp, ear, flaky scaly, dandruff, running nose, sneezing.

The author had collected review of literature, definition, etiology and classification regarding the disease from various books.

From the observational study, In O.P.D 100 cases were observed as per the inclusion and exclusion criteria and the informed consent were observed from the patients.

Case sheet proforma were maintained for 100 cases author took the study in her OPD under the guidance of her department faculty.

Laboratory investigations also were carried out during the study.

Ennvagai Thaervu, yaakkaiElakkanam, manikkadainool, and panjapatchisaasthiram were focused in the study.

In this study, following data were observed and discussed for the 100 cases. .

Among 100 cases, 100% of cases presented with itching in head, 97% scaling in head,29% of cases itching in ear,27% sneezing, 88% had mithaveppam, 57% had vadha pitham,38% had neikkuri of vadhapitham.52% had pithavadham thegi. 47% had 8 3/4 fbs in manikkadainool, 44% had vaayu(air) element.

# **CONCLUSION**

#### 10. CONCLUSION

The disease **Kabaala karappan** was taken for clinical study from Yugi vaithiya chinthamani-800. The study on Kabaala Karappan carried out in this dissertation and observes the change in udal thadhukkal and uyir thadhukkal. The changes in the udalthadhukkal and uyirthadhukkal were assessed by Siddha parameters such as ennvagaithervugal and Manikkadainool

A parallel modern diagnosis was derived through routine blood test, urine test and patch test. For this study 100 cases were observed clinically in the outpatient division in arignar anna government hospital of Indian medicine and homoeopathy, Chennai 106.

From this study, the following things were concluded through the collected data as,

- o In Age 31% of patients came under 41-50 years of age.
- o In Naadi 57% of patients had vadhapitham.
- o In Naa- 46% of cases shows Maapadithal.
- o In Mozhi- 88% of cases shows moderate pitch voice.
- o In Vizhi-16% Of cases show arippu in eyes.
- o In Sparisam-97% of cases show scaly.
- o In Malam75% of cases thanmai is eyalbu, niram 82% of cases manial.
- o In Neerkuri- 75% of cases shows yellow coloured urine.
- o In Neikuri- 38% of cases shows Vadhapitham Neikuri.
- O In Manikaddai 47% of cases shows 8 3/4 fbs
- In Panjapachi saasthiram 54 of cases vaayu (air)
- In Uyirthathukal,
  - Vaatham udaanan, viyanan, koorman, kirukaran, samaanan, are increased.
  - Pitham pirasagam, ranjagam, saathagam increased.
- o In Udalthathukal, saaram, senneer, oon, kozhupu, is decreased.

From the above study of the collected dates the author concluded that through the siddhadiagnostic parameters, naadi, naa, mozhi, sparisam, manikadainool, and special investigations IgE, patch test are used for the conformation of kabaala karappan. The disease Kabaala karappan may be correlated with Seborrheic dermatitis.

# LINE OF TREATMENT AND DIETARY REGIMEN

#### 11. LINE OF TREATMENT AND DIETARY REGIMEN

Line of treatment is based on altered kutram in kabaala karappan increased kutram vadham. To neutralize vadham the treatment start with purgatives.

" விரேசனத்தால் வாதம் தாழும்"

For kabaala karappan patients, medicines started with purgatives than anti vadha drugs. External therapy start with external wash for affected areas and external oil for applications.

# DIETARY REGIMEN TO EAT

#### **I CEREALS**

- Kuruvaiarisi
- Kaar Arisi
- Manakkathai arisi

#### **II PULSES**

- Pachai Payaru
- Thuvarai

#### **III VEGETABLES**

- Pudalangai
- Pirku
- Kathiripinju
- Athipinju
- Vellaivengayam

#### **IV SPICES**

- Venthayam
- Sombu
- Kothumalli

#### **V GREENS**

- Puliyarai Keerai
- Thali Keerai
- Manathakkali Keerai
- Kothumalli keerai

#### VII BATH

• Take bath in Luke warm water with paacipayaru/nalangu podi.

#### **VIII HABIT**

• Wear Mask when exposed to environment.

#### **TO AVOID**

#### AVOID THE FOODS WHICH INCREASES VADHAM

- <u>CEREALS</u>: Kambu, Thinai, Varagu, Samai, Kollu.
- <u>PULSES</u>: Gothumai, Soya, Verkadalai.
- FRUITS: Guava.
- <u>VEGETABLES</u>: Kathirikkai, Thadiyankai, Paagal.
- GREENS: Agathi keerai.
- SPICES: kadugu.
- NON-VEG: Eggs, Fish, Shellfish, Karuvadu.
- TASTE: Uppu, Pullipu, Kaarpu (which increases Pitham)
- Food additives and preservatives.
- <u>CHEMICALS</u>: Soaps, detergents, shampoos, dish-washing liquids, air fresheners/perfumes, cleaning supplies.
- House dust mites, pollens, smoke, moulds, Pets (cats/dogs),
- Fabric woolen clothes, metals etc.
- Don't take bath with Shikkakai.

# **ANNEXURE**

#### 12. ASSESSMENT FORMS

Form – I Screening and Selection Proforma

Form – I – A History Proforma on enrollment

Form – II Clinical Assessment on enrollment

Form – III Laboratory investigations on enrollment,

During the study,

Form – IV Consent form

(Vernacular and English versions)

Form – IV – A Patient Information Sheet

(Vernacular and English versions)

Form - V Analysis of panjapatchisaasthiram

# GOVERNMENT SIDDHA MEDICAL COLLEGE, CHENNAI - 106.

#### **DEPARTMENT OF PG - NOI NAADAL**

# AN OBSERVATIONAL STUDY ON SIDDHA DIAGNOSTIC TOOLS INCLUDING LINE OF TREATEMENT AND DIETARY REGIMEN IN PATIENTS OF "KABAALA KARAPPAN"

#### FORM I

#### **SCREENING AND SELECTION PROFORMA**

1. O.P. No:2. I.P. No:	_ 3. Bed No:	
4. S. No: 5. Reg. No:	_	
6. Name: 7. Age	e (years):	
8. Gender: M F T		
9. Occupation:	10. Income: _	
11. Address:		
12. Contact No:		
13. E-mail:	_	
CRITERIA FOR INCLUSION:		
	YES	NO
1. Age: Children and adult		
2. Both male and female		
3. Itching in head		
4. Scaling in head		
5. Itching in ear		

		ANNEXURE
6. Itching in eye		
7. Rheum of eye		
8. Sore thorat		
9. Rhinitiss		
10.Sneezing		
CRITERIA FOR EXCLUSION		
1. Psoriasis		
2. Actinic keratosis		
3. Tinea capitis		
4. Atopic dermatitis		
5. Systemic lupus erythematosus		
6. Acne rosacea		
Date:	Signature of the p	oatient

# FORM 1 A

# HISTORY PROFORMA ON ENROLLMENT

1. S. No of the case:	and Reg. No. of		<del></del>	
2. Name:	_			
3. Age (years): DC	ов 🔲			
	Date	Month	Year	
4. Educational Status:				
1) Illiterate 2) Literate	3) Student	4) Gra	aduate/Post gradu	ate
5. Nature of work:				
6. Annual income of the Family				
7. Total number of members sha	red the income:	Adult	Children	
8. Complaints and Duration:				
9. History of present illness:				

Λ	M	M	EXI	[]	D١	C
A	IVI	IVI	r. X I		к	r

<ul><li> Tuberculosis</li><li> Any major illnesses</li></ul>			
<ul> <li>11. Habits</li> <li>Betel nut chewer:</li> <li>Tea (No. of times/day)</li> <li>Coffee (No. of times/day)</li> </ul>	Yes	No	/day /day
<ul> <li>Type of diet : Veg Non-veg</li> <li>12. Personal history:</li> <li>Marital status: Married</li> </ul>	Mixed diet Unmarried		
13. Family history:  • History with similar symptoms:			
14. Menstrual and Obstetric history:			
Age of menarche y	ears		
Gravidity/Parity			
Duration of the menstrual cycle			
Constancy of cycle duration 1.Reg	gular 2.Iı	rregular	
15. GENERAL ETIOLOGY FOR KABA	ALA KARAPPAN		
<ul><li> Increased salt, sour and pungent</li><li> Stress</li></ul>	tastes in diet	Yes	No
• Anger			
<ul> <li>Infection</li> </ul>			
<ul> <li>Poor hygine</li> </ul>			

### 16. CLINICAL SYMPTOMS OF KABAALA KARAPPAN:

		Yes	No
•	Itching in head and ear		
•	Scaly		
•	Sore thorat		
•	Rheum of eye		
•	Rhinitis		
•	Sneezing		
•	Head ache		
•	Itching in eye		

# FORM II

### **CLINICAL ASSESSMENT FORM**

	1.	S. No: and 1	Reg. No: _			_	
	2.	Date:					
	3.	Name:					
	4.	Date of birth:					
		D D	M M	Y	Е	A	R
	5.	Age: years					
<b>5</b> 7 <b>T</b>		r a					
VI	TA]	LS:					
	1.	Height:Cms					
	2.	Weight:Kgs					
	3.	BMI:Kgs/m <sup>2</sup>					
	4.	Temperature (°F):					
	5.	Pulse rate:/m	in				
	6.	Heart rate:/min					
	7.	Respiratory rate:	_/min				
	8.	Blood pressure:/_	mm/F	Ig			
GI	ENE	RAL EXAMINATION	:				
			Yes		No		
			165		110		
	1.	Pallor:					
	2.	Jaundice:			[		
	3.	Cyanosis:			[		
	4.	Lymphadenopathy:					
	5.	Pedal oedema:					
	6.	Clubbing:					
	7.	Jugular vein pulsation:					

### **VITAL ORGANS EXAMINATION:**

		Normal	Affected	
1.	Stomach			
2.	Liver			
3.	Spleen	Ħ		
4.	Lungs	一		
5.	Heart			
6.	Kidney			
7.	Brain			
SYST	EMIC EXAMINATI	ON:		
1.	Cardio Vascular Syst	tem _		
2.	Respiratory System	-		
3.	Gastrointestinal Systematical S	em _		
4.	Central Nervous Syst	tem _		
5.	Urogenital System	_		
6.	Endocrine System	_		

# SIDDHA SYSTEM OF EXAMINATION

# [1] ENNVAGAI THERVU [EIGHT-FOLD EXAMINATION]

I. NAADI (KAI KURI) (RADIAL PULSE READING):					
(A) Naadi Nithanam (Pulse	e Appraisal):				
1. Kaalam (Pulse reading se	eason):				
1. Kaarkaalam (Aavani, Purataasi)	2.Koothirkaalam (Iypasi, Karthigai)	3. Munpanikaal (Margazhi,			
4. Pinpanikaalam (Maasi, Panguni)	5. Ilavenirkaalam (Chithirai, Vaigasi)	6. Muthuvenirka (Aani, A			
2. Desam (Climate of the p	atient's habitat):				
1. Kulir (Temperate)	2. Veppam (Hot)				
3. Vayathu (Age):					
1-33yrs (Vathakalam)	34-66yrs ( Pithakalam	67-100yrs (	(Kabakalam)		
4. Udal Vanmai (General b	ody condition):				
1. Iyyalbu (Normal built)	2. Valivu 3.Meli (Robust) (Lean)				
5. NaadiyinVanmai (Expan	sile Nature): Vanmai	Menmai			
6. Panbu (Habit):					
1. Thannadai (Playing in)	2. Munnokku (Advancing)	3.Pinnokku (Flinching)			
4.Pakkamnokku Swerving)	5.Puranadai (Playing out)	6.Illaitthal (Feeble)			
7. Kathithal (Swelling)	8.Kuthitha (Jumping)	9. Thullal (Frisking)			
10. Azhutth (Ducking)	11. Padutthal Lying)	12.Kalatthal (Blending)			
13. Suzhalal (Revolving)					

(B) Naadi Nadai (Pulse Play):				
1. Vali 2.	. Vali Azhal 3. Vali Iyyam			
4. Azhal 5.	Azhal Vali 6. Azhal Iyya			
7. Iyyam 8.	Iyya vali 9. Iyya Azhal			
10. Mukkutram				
II. NAA (TONGUE):				
1. Vadivam (Shape): "U"shape	"V"shape Abnormal			
2. Naavin Niram (Colour):				
1. Karuniram 2. Maa niram (Dark) (Yellow)	3. Velluppu 4. Ilam Sivappu (Pink)			
5. Others				
3. Maa Padithal (Coating): Present	Absent			
4. Suvai (Taste sensation):				
1. Kaippu 2.Pulippu (Sour)	3. Inippu (Sweet)			
4. Thuvarppu 3.Uvarppu (Salt)	4. Kaarppu (Pungent)			
5. Vedippu (Fissure): Present	Absent			
6. Vaineerooral(Salivation): Normal	Increased Reduced			
7. Colour of saliva: Colouress	Milky white			
<b>8. Deviation of the tongue</b> : Present	Absent			
9. Pigmentation: Present	Absent			
10. Area of Pigmentation:				
1. Tip 2. Sides 3.	Root 4. Whole			
II. NIRAM (COLOUR):				
1. Iyalbaana Niram (Physiological colour):				
	Velluppu 4.Maaniram (wheatish)			

2. Nirammaatram (Pathologicial changes in colour): Present Absent
1. Karuppu 2.Manjal P.Velluppu (Pale)
Pattern of colour changes: Regular Irregular
3.PadhikkapattaIdathiltholinthanmai (Nature of affected skin):
1. Karuniramadaithal 2. Kuru/kuppulam 3. Scaly (Pustules)
IV. MOZHI (VOICE):
1. Sama oli (Medium pitched)  2. Uraththa oli (High pitched)  3. Thazhntha oli (Low pitched)
Vaai kularal: Present Absent
Peasa mudiyaamai:Present Absent
V. VIZHI (EYES):
1. Niram (Colour of bulbar conjuctiva):
1. Karuppu
5. Pazhupu 6. No Discoloration muddy)
2. Imai Neeki Paarthal (Colour of palpable conjuctiva):
1. Sivapu 2. Velluppu 3. Ilam Sivappu 4.Manjal (red) (white) (Pink) (yellow)
3. Neerthuvam (Moisture): Normal
4. Erichchal (Burning sensation): Present Absent
5. Peelai seruthal(Mucus excrements): Present Absent
6. Any other eye diseases:  Present Absent
VI. MEI KURI (PHYSICAL SIGNS):
1. Veppam (Temperature): Midhaveppam Miguveppam Thatpaveppam
2. Viyarvai (Sweat):
1. Quantity: Normal Increased Decreased

2. Colour: Normal Abnormal
3. Smell: Present Absent
3. Thoduvali (Tenderness): Present Absent
4. Padhikapatta Idathil unarvu:
1. Erichal (Burning): Present Absent
2. Arippu(Itching): Present Absent
3. Unarchi inmai (Numbness): Present Absent
VII. MALAM (STOOLS):
1. Ennikai / Naal:
2. Alavu (Quantity): Normal Increased Decreased
3. Niram (Color):
1. Karuppu 2. Manjal 3. Sivappu 4. Velluppu (Red) (White)
4. Sikkal(Constipation): Present Absent
5. Sirutthal (Poorly formed stools): Present Absent
6. Kalichchal (Diarrhoea):
1. Loose watery stools: Present Absent
2. Digested food: Present Absent
3. Seetham (Watery and mucoid excrements): Present Absent
4. Colour of Seetham: Venmai (White) Manjal (Yellow)
5. Passing of: A. Mucous: Present Absent
B. Blood: Present Absent
6. History of habitual constinution: Present Absent

# VIII. MOOTHIRAM (URINE)

(A) Neer Kuri (Physical Characteristics)					
1. Niram (colour) Normal	Abnormal				
Colourless Milky purulent	Orange				
Red Greenish	Dark brown				
Black Brown red or yellow					
2. Manam(odour): Oderless	Ammonical				
Fruity Others					
3. Edai (Specific gravity)	Yes No				
• Normal (1.010-1.025):					
• High Specific gravity (>1.025):					
• Low Specific gravity (<1.010):					
• Low and fixed Specific gravity (1.010-1.01	2):				
4. Alavu (volume)	Yes No				
• Normal (1.2-1.5 litres/day):					
• Polyuria (>2litres/day):					
• Oliguria (<500ml/day):					
Anuria (no urination):					
5. Nurai (froth): Present Absent If present, its colour:  6. Enjal (deposits): Present Absent If present, its colour:					
(B) Nei Kuri (Oil Spreading Sign):					
Pattern of oil:					
1. Aravu (Serpentine) 2. Aazhi (Ring) 3. Muthu / Sa (Pearl / Sieve	1 1				
5. Aravu + Muthu / Salladai kan 6. Aazhi + A (Serpentine + Pearl / Sieve) (Ring + Ser					
7. Aazhi + Muthu / Salladai kan 8. Muthu + (Ring + Pearl / Sieve) (Pearl + Se					

Sprea	ding nature of oil:	1. Vegamai p (Rapid sp		2.Mella paraval (Slow spreading)
[2]. M	ANIKKADAI NOC	)L (Wrist cir	rcummetric sign)	:
	1. Right side:	fbs;	2. Left side:	fbs
[3]. IY	YMPORIGAL /IYN	— ⁄IPULANGA	AL (Penta sensors	and its modalities)
1. 2. 3. 4. 5.	Mei (Skin): Vaai (Mouth/ Tong Kan (Eyes): Mookku (Nose): Sevi (Ears):	Normal ue):	Affected	
[4]. KANMENTHIRIYANGAL /KANMAVIDAYANGAL (Motor machinery and its execution):				
		Normal	Affected	
1.	Kai (Hands):			
2.	Kaal (Legs):			
3.	Vaai (Mouth):			
4. ~	Eruvai(Analepy):			
5.	Karuvaai (Birth car	iai):		

# [5]. YAKKAI (SOMATIC TYPES):

S.No.	Characters	Vatha	Pitha	Kaba	
		constitution	Constitution	Constitution	
1.	Build and appearance	Lean and lanky, lengthy built	Moderate build	Short, uniform thickness, broad build	
2.	Skin colour and Complexion	Dark and light admixed complexion. Dry skin	Red and Yellow. Wrinckles and shiny	Yellowish white, Fleshy, flappy and shiny	
3.	Bones and Joints	Cracking sound of joints on walking with prominent joints	Thin covering of bones and joints by soft tissue	Plumpy joints and limbs	
4.	Hair and eyelashes	Split hair and dark eyelashes	Sparse hair with graying	Dark and Dense hair	
5.	Appearance of Eyes	Lengthy Eyes	Easily suffering eyes due to heat and alcohol	Sparkling eyes	
6.	Vision	Long sight	Short sight	Clear sight	
7.	Voice	Clear and high pitched voice	Clear and medium pitched voice	Husky and unclear. Low pitched voice	
8.	Tongue	Lengthy, sharp ended tongue with black patches	Medium and yellow or red coloured	Blunt, thick tongue with white coated	
9.	Appetite	Scant appetitie for cold food items	Increased apetite and intolerance to hunger, thirst, heat	Less appetite and tolerant to hunger, thirst, heat	
10.	Taste	Desire for pungent, salt, sweet, heat	Desire for bitter, sweet, astringent	Desire for sour, bitter, astringent	
11.	Sleep	Sleeping with half closed eyes	Medium sleep	Deep sleep	
12.	Dreams	Flying in dreams around the hills, sky. Walking around the dense forest.	Seeing like yellow colour flowers, fire, sun, thunder.	Seeing the cooling places like tolus in the pond	
13.	Strength	Poor strength	Medium strength	Immense strength	

14.	Character	Unstable mind,	Medium,	Stable mind.	
		change of mood	discipline,	Discipline and	
		according to	Good habits,	increased	
		situation	Eagerness	knowledge	
15.	Knowledge	Oscillation	Brilliance	Genius	
		mind			
16.	Sexual	Loss of libido	Desire in	Loss of libido	
	activity		sexual activity		
		Total no. of	Total no. of	Total no. Of	
		Vaatham	Pitham	Kabham	

RESULTANT SOMATIC TYPE:		
[6] GUNAM:		
1.SathuvaGunam 2. RasoGunam 3.	ThamoGunam	
[7] KOSAM:	Normal	Affected
<ol> <li>Annamayakosam (7 Udarthathukal)</li> <li>Praanamyakosam(Praanan+ Kanmenthi</li> <li>Manomayakosam(Manam + Gnendhiri</li> <li>Vingnanamayakosam(Budhi+ Gnendhi</li> <li>Aanandamayakosam(Pranavaayu + Sul</li> <li>UYIR THATHUKKAL:</li> </ol>	yam)	
A. VALI (VAATHAM):	Normal	Affected
	Normal	Affected
A. VALI (VAATHAM):  1. Uyir Kaatru (Praanan)	Normal	Affected
<ul> <li>A. VALI (VAATHAM):</li> <li>1. Uyir Kaatru (Praanan)</li> <li>2. Malakkaatru (Abaanan)</li> <li>3. Thozhil Kaatru (Viyaanan)</li> </ul>	Normal	Affected
<ol> <li>A. VALI (VAATHAM):</li> <li>Uyir Kaatru (Praanan)</li> <li>Malakkaatru (Abaanan)</li> <li>Thozhil Kaatru (Viyaanan)</li> <li>Oli Kaatru (Uthaanan)</li> <li>Niravu Kaatru (Samaanan)</li> </ol>	Normal	Affected

B. AZ	HAL (PITHAM):	Normal	Affected	
<ul><li>3.</li><li>4.</li></ul>	Aakkanal (Paasagam or Analagam) Vanna Eri Anal (Ranjagam) Olloli Thee (Prasagam) Nokkanal (Aalosagam) Aatralangi Anal (Saathagam)			
1. 2. 3. 4. 5.	Ali Iyyam (Avalambagam) Neerpi Iyyam (Kilethagam) Suvaikaan Iyyam (Bothagam) Niraivu Iyyam (Tharpagam) Ondri Iyyam (Sandhigam)	Normal	Affected	
	ARAM (CHYLE):  NCREASED SAARAM (CHYLE)  Loss of appetite  Excessive salivation  Loss of perseverance  Excessive heaviness  White musculature	• I • I	REASED SAARAM(CHY Loss weight Firedness Oryness of the skin Diminished activity of the ense organs	TLE)
•	Cough, dyspnoea, excessive sleep Weakness in all joints of the body			
SAAR	AM: INCREASED DECREA	ASED	NORMAL	

# **B. CENNEER (BLOOD):**

INCREASED CENNEER(BLOOD)	DECREASED CENNEER(BLOOD)			
Boils in different parts of the	Anaemia			
body	Tiredness			
Anorexia	Neuritis			
Mental disorder	Lassitude			
Splenomegaly	Pallor of the body			
Colic pain				
Hematuria				
CENNEER: INCREASED DECREAS  [C]. OON (MUSCLE):	ED NORMAL			
INCREASED OON (MUSLE)	DECREASED OON (MUSLE)			
Cervical lymphadenitis	Impairment of sense organs			
Vernicle ulcer				
• Tumour in face ,abdomen,	Joint pain			
thigh, genitalia	Jaw, thigh and genitalia			
Hyper muscular in the	gets shortened			
cervical region				
OON: INCREASED DECREASED NORMAL D. KOZHUPPU (FAT):				
INCREASED KOZHUPPU (FAT)	DECREASED KOZHUPPU (FAT)			
Cervical lymph adenitis	Pain in the hip region			
Vernicle ulcer	Disease of the spleen			
• Tumour in face, abdomen,				
thigh, genitalia				
Hyper muscular in the				
cervical region				
KOZHUPPU: INCREASED DECREA	SED NORMAL			

### E. ENBU (BONE):

INCREASED ENBU (BONE)	DECREASED ENBU (BONE)			
• Excess growth in bones and teeth	<ul> <li>Bones diseases</li> <li>Loosening of teeth</li> <li>Nails splitting</li> <li>Falling of hair</li> </ul>			
ENBU: INCREASED DECREASED   F. MOOLAI (BONE MARROW):	NORMAL			
INCREASEDMOOLAI	DECREASEDMOOLAI			
(BONE MARROW)  • Heaviness of the body	(BONE MARROW)			
	Osteoporosis     Section and a section			
• Swollen eyes	Sunken eyes			
Swollen phalanges				
<ul><li>chubby fingers</li><li>Oliguria</li></ul>				
MOOLAI: INCREASED DECREASED NORMAL  G. SUKKILAM / SURONITHAM (SPERM / OVUM)				
INCREASED	DECREASED			
SUKKILAM/SURONITHAM (SPERM / OVUM)	SUKKILAM/SURONITHAM (SPERM / OVUM)			
Infatuation and lust towards	Failure in reproduction			
women / men	Pain in the genitalia			
Urinary calculi				

KABAALA KARAPPAN Page 138

SUKKILAM/SURONITHAM: INCREASED DECREASED NORMAL

## [10] MUKKUTRA MIGU GUNAM

I. Vali	(Vaatham) Migu gunam	Present	Absent
1.	Emaciation		
2.	Complexion – blackish		
3.	Desire to take hot food		
4.	Shivering of body		
5.	Abdominal distension	Ħ	
6.	Constipation		
7.	Insomnia		
8.	Weakness		
9.	Giddiness		
10.	Lake of interest		
II. Azh	nal (Pitham) Migu gunam	Present	Absent
1.	Yellowish discoloration of skin		
2.	Yellowish discoloration of the ey	/e	
3.	Yellow colored urine		
4.	Yellowish stools		
5.	Increased appetite		
6.	Increased thirst		
7.	Burning sensation over the body		
8.	Sleep disturbance		
III. Iyy	vam (Kabham) Migu gunam	Present	Absent
1.	Increased salivary secretion		
2.	Reduced activeness		
3.	Heaviness of the body		
4.	Body colour – fair complexion		
5.	Chillness of the body		
6.	Reduced appetitie		
7.	Wheezing		
8.	Increased sleep		

[11]. NOIUTRA KA	LAM:	
1. Kaarkaalam (Aug15-Oct14)	2.Koothirkaalam (Oct15-Dec14) 3. Munpanikaalam (Dec15-Feb14)	
4.Pinpanikaalam (Feb15-Apr14)	5. Ilavanirkaalam (Apr15-June14) 6.Muthuvenirkaalam (June15-Aug14)	
[12]. NOI UTRA NI	LAM	
1. Kurunji (Hilly terrain)	2. Mullai (Forest range) 3. Marutham (Plains)	
4. Neithal (Coastal belt)	5. Paalai (Aried)	

## FORM-III

#### **LABORATORY INVESTIGATIONS**

1. O.P No: Reg. No:
2. Lab. No Date of assessment
3. Name:
4. Age: years
5. Date of birth D D M M Y E A R
D D M M Y E A R  Blood:
6. Hb gms%
7. ESR at 30 minutes mm and ESR at 60 minutesmm
8. TC Cells/cu mm
9. DC: P% L% E% M% B%
10. Blood Sugar - (R)mgs% (F)mgs%(PP)mgs%
11. Serum Cholesterolmgs %
12. Serum creatininemgs %
13. Blood ureamgs %
Urine Examination:
14. Sugar
15. Albumin
16. Deposits
Special Investigations:
17. Immunoglobulin E (IgE) UI/ml

#### GOVERNMENT SIDDHA MEDICAL COLLEGE, CHENNAI - 106.

#### **DEPARTMENT OF PG - NOI NAADAL**

# AN OBSERVATIONAL STUDY ON SIDDHA DIAGNOSTIC TOOLS INCLUDING LINE OF TREATEMENT AND DIETARY REGIMEN IN PATIENTS OF "KABAALA KARAPPAN"

#### FORM IV A

#### **INFORMED WRITTEN CONSENT FORM**

I exercising my free power of choice, hereby give my consent to be included as a subject in the diagnostic trial entitledAstudy on "KABAALA KARAPPAN".
I will be required to undergo all routine examinations. I may be asked to give urine and blood
samples during the study.
I have been informed about the study to my satisfaction by the attending investigator and the
purpose of this trial and the nature of study and the laboratory investigations. I also give my
consent to publish my urine sample photographs in scientific conferences and reputed
scientific journals for the betterment of clinical research (ensuring the confidentially)
I am also aware of my right to opt out of the trial at any time during the course of the trial without having to give the reasons for doing so.
Signature /thumb impression of the patient :
Date :
Name of the patient :
Signature of the investigator :
Head of the Department :
Date :

## அரசினர் சித்தமருத்துவக் கல்லூரி சென்னை-106 பட்டமேற்படிப்பு - நோய்நாடல் துறை நோய் கணிப்புமுறைமற்றும்குறிகுணங்களைபற்றிய ஓர் ஆய்வு

#### ஓப்புதல் படிவம்

#### ஆய்வாளரின் ஒப்புதல் படிவம்

நான் இந்த ஆய்வை குறித்த அனைத்து விபரங்களையும் நோயாளிக்கு புரியும் வகையில் எடுத்துரைத்தேன் என உறுதியளிக்கிறேன்.

தேதி:	கையொப்பம்:			
இடம்:	பெயர்:			
	நோயாளியின் ஒப்புதல் படிவம்			
நான்	என்னுடைய சுதந்திரமாக தேர்வு செய்யும் உரிமையைக்			
9 9	தலைப்பிடப்பட்டு கபாலக்கரப்பான் நோயைக் கணிப்பதற்கான மருத்துவ உட்படுத்த ஒப்புதல் அளிக்கிறேன்.			
கூறப்பட்டது. மேஓ	இந்த மருத்துவ ஆய்வின் காரணத்தையும், மருத்துவ ஆய்வுகூட பற்றி திருப்தி அளிக்கும் வகையில் ஆய்வு மருத்துவரால் விளக்கிக் லும் எனக்கு மருந்துகள் அக மற்றும் புற நோயாளிகள் பகுதியில் தும் தெரிவிக்கப்பட்டுள்ளது.			
	5 மருத்துவ ஆய்வின் போது காரணம் எதுவும் கூறாமல், எப்பொழுது இந்த ஆய்விலிருந்து என்னை விடுவித்துக் கொள்ளும் உரிமையைத் ர்.			
தேதி:	கையொப்பம்:			
இடம்:	பெயர்:			
தேதி:	சாட்சிக்காரர்கையொப்பம்:			
இடம்:	பெயர்:			
	ஊழவுமுறை:			

#### FORM - IV-E

#### **PATIENT INFORMATION SHEET**

#### PURPOSE OF RESEARCH AND BENEFITS:

The diagnostic research study in which your participation is proposed to assess the diagnostic methods in Siddha methodology in "KABAALA KARAPPAN" patients. It is expected that you would benefit from this study. Knowledge gained from this study would be of benefit to patients suffering from suchconditions for the diagnosis and prognosis.

#### **STUDY PROCEDURE:**

You will be interviewed and examined as OP and IP patients at the study centre. At the first visit the physician will conduct a brief physical examination and assess the condition followed by Enn vagaithervu and routine blood and urine analysis. After matching the inclusion criteria you will be included in this study and you will be examined on the basis of Enn vagaithervu.

#### **POSSIBLE RISK:**

During this study, there may be a minimum pain to you, while drawing blood sample.

#### **CONFIDENTIALLITY:**

Your medical records will be treated with confidentiality and will be revealed only to other doctors / scientists. The results of this study may be published in a scientific journal, but you will not be identified by your name.

#### YOUR PARTICIPATION AND YOUR RIGHTS:

Your participation in this study is voluntary and you may be withdrawn from this study at anytime without having to give reasons for the same. You will be informed about the findings that occur during the study. If you do agree to take part in this study, your health record will need to made available to the investigators. If you don't wish to participate at any stage, the level of care you receive will in no way to be affected.

The Ethics committee cleared the study for undertaking at OPD and IPD, AAGHIM, CHENNAI – 106. Should any question arise with regards to this study you contact following person,

#### **PG - STUDENT:**

Dr. P. THIRUVENGADAM, Post Graduate, Department of PG – NoiNaadal, Government Siddha Medical College, Chennai - 106.

Email: <u>drthirupoigai@gmail.com</u>

Mobile No: 9655431552

### அரசினர் சித்த மருத்துவக் கல்லூரி சென்னை-106 பட்டமேற்படிப்பு - நோய்நாடல் துறை நோய்க்கணிப்பில் எண்வகைத்தோவின் பங்கு பற்றிய ஓர் ஆய்வு

#### நோயாளியின் தகவல் படிவம்

#### ஆய்வின் நோக்கமும் பயனும்:

தாங்கள் பங்கெடுத்துக் கொள்ளும் இவ்வாய்வு சித்த மருத்துவ முறையில் நோயை கணிப்பதற்கான ஓர் ஆய்வுமுறை. இதன் பயனாக தங்களைப் போன்று பாதிப்புக்குள்ளாகும் நோயரின் நோய்கணிப்புக்கு பயனாகும்.

#### ஆய்வமுறை:

தாங்கள் நேர்காணல் மற்றும் பரிசோதனைகளின் மூலம் உள்நோயாளி, வெளிநோயாளி பிரிவில் ஆய்வு செய்யப்படுவீர்கள். முதல் நேர்காணலின் போது ஆய்வாளரால் உடலின் பொது பரிசோதனை, எண்வகைத்தேர்வு சோதனைகள், நீர் மற்றும் இரத்தப் பரிசோதனை செய்து குறிப்பிட்ட குறிகுணங்கள் இருப்பின் இவ்வாய்விற்காக எடுத்துக்கொள்ளப்படுவீர்கள்.

#### நேரும் உபாதைகள்:

இவ்வாயில் இரத்த பரிசோதனைக்காக இரத்தம் எடுக்கும் போது சிறிது வலி ஏற்படலாம்.

#### நம்பகத்தன்மை:

தங்களின் மருத்துவ ஆவணங்கள் அனைத்தும் மருத்துவர் ஆய்வாளர் அல்லாத பிறரிடம் தெரிவிக்கப்படமாட்டாது.

#### நோயாளியின் பங்களிப்பும் உரிமைகளும்:

இவ்வாய்வில் **த**ங்களின் பங்களிப்பு தன்னிச்சையானது. இவ்வாய்வில் தூங்கள் ஒத்துழைக்க இயலவில்லையெனில் எப்பொழுது வேண்டுமானாலும் காரணம் எதுவும் கூறாமல் விலகிக்கொள்ளலாம். இவ்வாய்வின் போது அரியப்படும் தகவல்கள் தங்களுக்க<u>ு</u> தெரிவிக்கப்படும். நோயாளியின் ஒப்பதலுக்கிணங்க நோய்கணிப்பு விவரங்களை ஆய்வாளர் பயன்படுத்திக்கொள்வார். நோயாளி ஆய்வினிடையே ஒத்துழைக்க மறுத்தாலும், எந்தநிலையிலும் நோயாளியை கவனிக்கும் விதம் பாதிக்கப்படமாட்டது. நிறுவன நெறிமுறை குமுமம் மேந்கண்ட ஆய்வினை மேற்கொள்ள ஒப்புதல் அளித்துள்ளது. ஆய்வு குறித்த சந்தேகங்கள் இருப்பின் கீழ்கண்ட நபரை தொடர்புகொள்ளவும்.

#### பட்டமேற்படிப்பாளர்:

மரு. பொ.திருவேங்கடம்

பட்டமேற்படிப்பு – நோய் நாடல் துறை,

அரசினர் சித்த மருத்துவக் கல்லூரி சென்னை-106

மின் அஞ்சல்: drthirupoigai@gmail.com

அலைபேசிஎண்: 9655431552

## FORM-V

## ஜோதிடம் மற்றும் பஞ்சபட்சி கணிப்பு படிவம்

பெயர் : எ	வயது : ஆ	ண்டுகள்			
பாலினம் : ஆண் 🔲 பெண் 🔲 பிற 📗					
பிறந்த தேதி மாலை மாலை					
பிறந்த ஊர்:					
இலக்னம்:	இராசி :	நட்சத்திரப்	D:		
நோயாளி முதலில் வந்த நாள்:					
நோயாளி முதலில் வந்தநே	தும்: கா	ாலை மாலை			
கிழமை: பொழுது (சாமம்):					
பிறை : வளர்பிறை தேய்பிறை					
சாவு					
	பட்சி	பூதம்			
	வல்லூறு	மண் 🗌			
	ஆந்தை	<b>நீ</b> ர்			
	காகம்	<b>தீ</b>			
	கோழி	வளி			
	மயில் 📗	வெளி			

பாதிக்கப்பட்ட குற்றம்:\_\_\_\_\_

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- 3. Dermatology by Neena khanna
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## **CERTIFICATES**



## The Tamil Nadu Dr.M.G.R. Medical University

69, Anna Salai, Guindy, Chennai - 600 032.

This Certificate is awarded to Dr/Mr/Mrs...P. THIRNYEMGADAM.

For participating as Resource Person / Delegate in the Twenty Fourth Workshop on

## "RESEARCH METHODOLOGY & BIOSTATISTICS"

For AYUSH Post Graduates & Researchers

Organized by the Department of Siddha

The Tamil Nadu Dr. M.G.R. Medical University From 24th to 28th April 2017.

Dr.N.KABILAN, M.D.(S), Ph.D.,

Prof. Dr. T. BALASUBRAMANIAN, M.D., D.L,O., Prof. Dr. S. GEETHALAKSHMI, M.D., Ph.D. VICE CHANCELLOR



## GOVERNMENT SIDDHA MEDICAL COLLEGE

Arumbakkam, Chennai, 600106

This certificate is awarded to Dr./Mr./Ms. P. THIRUVENGADAM

for participating as a resource person / delegate in the seminar on

"Orientation to research Methods"

Organised by Suzhumunai Scientific forum Government Siddha Medical College on 22 March 2018

Dr. P. Manickam

Scientist E (ICMR) National Institute of Epidemilogy Dr. K. Kanakavalli

Principal
Govt. Siddha Medical College



## GOVERNMENT SIDDHA MEDICAL COLLEGE Arumbakkam, Chennai-106 Communication Of The Decision Of Institutional Ethics Committee (IEC) IEC No: GSMC-CH-ME-5/024/2017 Protocol title: AN OSERVATIONAL STUDY ON SIDDHA DIAGNOSTIC TOOLS INCLUDING LINE OF TREATMENT AND DIETARY REGIMEN OF KABAALA KARAPPAN Principal Investigator: Dr. P. THIRUVENGADAM Name & Address ofInstitution: Government Siddha Medical College, Arumbakkam, Chennai-106 New Review Revised Review ted Review Date of review (DD/MM/YY): 06-04-2017 Date of Previous Review, If Revised Application: Decision of the IEC Recommended with suggestions Recommended Revision Rejected Suggestions / Reasons / Remarks: Study period 1 year, remove patients irregular to OPD in exclusion criteria. Recommended for a period of 1 year from date of completion of preclinical studies : Please Note: Inform IEC immediately in case of any adverse events/serious drug reaction. Seek IECapproval in case of any change in the study procedure, site and investigator This approval is valid only for period mentioned above IEC member have the right to review the trial with prior intimation. **Member Secretary**

## INSTITUTIONAL ETHICS COMMITTEE Date: 06.04.2017 Sub : IEC Review of research proposals Ref : Your letter dated MEMBERS **PARTICIPATION** SIGNATURE Dr.P JEYAPRAKASH NARAYANAN. M.D(S)., Chairman Dr. K. KANAKAVALLI., MD(S)., Member secretary Dr.SATHYA RAJESWARAN M.D(S), Clinician - Siddha Dr.KABILAN M.D(S), Clinician - Siddha Dr.R.VASUDEVAN, M.D(S)., PG.DIP (Clinical research), Msc (Medical sociology), Sociologist Dr.L.MUKUNTHAN, M.B.B.S., DNB (Medicine)., Modern medicine specialist, Dr.JOSEPH MARIYA ADAIKKALAM, M.D(S)., Msc epidemiology., Social scientist, Dr.G.DAYANANTH REDDY, M.Pharm, Ph,D., Biomedical scientist Mr.B.PADMANABHA PILLAI, Philosopher Mrs.PREETHA SARAVANAN, Public person Dr.K.Kanakavalli, M.B(s) Dr.P.Jeyaprakashnarayanan M.D(s)., Member secretary Chairman

