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News Letter of SKM in Siddha, Ayurveda and Unani

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10 Health tips for healthy monsoon

- ▶ Take Proper Nutrition During Monsoon
- ▶ Get Enough Sleep
- ▶ Increase Intake of Vitamin C
- ▶ Skin Care During Monsoon
- ▶ Avoid Junk Food During Monsoon
- ▶ Avoid getting in touch with Sick People
- ▶ Take Proper Care of Hygiene
- ▶ Avoid Walking in Rain
- ▶ Exercise Regularly
- ▶ Save yourself from Mosquitoes

Articles are invited in Siddha, Ayurveda and Unani fields about clinical experience, rare medicinal preparations, successful treatments, Herbal informations and AYUSH Foods for our "SKM Vaidhya Amirtham" News letter which has around 10000 copies of circulation.

Please send your Articles/Suggestions to:

SKM Center for Ayush System Research and Education

Saminathapuram (Post), Modakkurichi,

Erode - 638 104. Tamilnadu, India.

email:techsupport@skmsiddha.org



AYURVEDIC IMPACT ON ANTI-MÜLLERIAN HORMONE - AN INFERTILITY CASE REPORT



Dr. Ruchika Chowdhary,
B.A.M.S., MD.,

Sai Ashok Ayurvedic
Multispecialty Panchakarma and
Infertility centre,
V.P.O. Dalkati, Th. Jawali - 176023
Dist.Gongra, Himachal Pradesh.



BEFORE



AFTER



Introduction:

Infertility though not only a physically disabling disorder, it has far reaching psychological and social consequences. Various factors responding to achieve the womb to get fertile, but an Anti-Müllerian hormone response a woman's ability to produce eggs that can be fertilized for pregnancy. Anti-Müllerian hormone is a dimeric glycoprotein, is produced by the granulosa cells in the prenatal and antral follicles. Serum AMH levels reflect the ovarian follicular pool, any reduction in the number of small, growing follicles may be followed by a reduction in the circulating AMH. AMH is a better marker of the ovarian reserve than age alone and is superior to other markers described in the literature, such as basal FSH, E2, and inhibin B. Women with higher ovarian reserve and therefore higher circulating AMH levels have a higher success rate than their counterparts with lower AMH.

Case Report:

A 30 years aged female house wife living in jawali, Himachal Pradesh visited the clinic for the infertility treatment, In their 5 years of marriage life they did continuous intervention and repeated procedure to conceive. To conceive she had gone through 3 years of allopathic treatments but she did not get any remedy to attain pregnant. Investigations carried out on both partners revealed fertility. The semen analysis of the partner founds normal. For female we investigated ultrasonography that suggested no abnormality. And HSG suggested bilateral fallopian tubal patency. Also she had no predominant previous medical or surgical illness.

Clinically there is found no abnormal menstrual cycle, on blood examination – AMH value was 0.77 ng/mL. During speculum examination no abnormality found during per vaginal examination and no tenderness in cervix. Her BP was 110/76 mmhg, Pulse was 75/minutes. Weight 59 kg and height 158 cm.

Ayurvedic approach

On examination it was found that she was belonging to Vata pitha prakriti. So we advocated the following regimen as per the system.

Lifestyle modification

During this treatment period she was advised to take laghusupadyaahara (Food which is easily digestible). And told her to avoid Diwaswpna (Sleeping at day time).

Therapy

Acchasnehapana (intake of oil) was started with mahanarayanatailam, Samyaksnigdalakshana was observed after 6 days of Snehapana. Virechana was performed on the administration of trivritlehyam.

Medication

Yogbasti recommended for two consecutive menstrual cycles and proceeds after every menstruation.

Conclusion:

This Ayurvedic approach including a combination of both Shamana and Shodhana therapies were helpful in smooth menstruation. There is no adverse event found during and after this therapies. After 3 months of completion of shodana and shamanapatient was conceived naturally and deliver a healthy baby.

Anuvasanabasthi	Asthapanabasthi
Sahacharaditailam	Dashamoolakwatha – 250 ml Sahacharaditailam – 100 ml Shatapushpakalka – 50 g. Madhu - 30 gm Saindhavalavana – 5g
Uttara basthi	
Uttara basthi with phalagritha	



EFFICACY OF SIDDHA MEDICINE IN THE TREATMENT OF CHRONIC SINUSITIS

Introduction:

Sinusitis is very a common chronic illness with a substantial health care impact. This study reveals the treatment of chronic sinusitis by the siddha medications.

Key Words : Sinusitis, Peenism, Siddha Medicine, Nasiyam

According to WHO report Chronic sinusitis affects 1 in 8 people in India; about 5-15% of urban population. The prevalence of sinusitis (146/1000 population) has been reported to exceed that of any other chronic condition and is apparently on the increase. Siddhars classified the disease into 4448 types. Among them the disease of nasal origin are 86 and Peenisam is one of them. Peenisam is otherwise known as Mookadaippu or Neerkovai as per Siddha literature and known as Sinusitis in modern medicine.

Case Report:

A female 26 yrs old, was reported to OPD of SKM Chikitchaalaya, Erode with symptoms of continuous sneezing in the early morning, watery eyes, heaviness of the head, burning sensation in the body, right side nasal blockage sometimes purulent discharge and cough with expectoration. The above symptoms were present since 3 months. O/E Patient felt pain in right side of the face. Blood Investigations revealed, Total leucocytes count (TLC) – 12500 cells/cu.mm, Differential Count : Neutrophils – 75%, Lymphocytes – 24%, Eosinophils – 3%, Monocytes – 1% , ESR – (30 mm ½ hr), 70 mm – 1 hr) and AEC – 490 cells / cu.mm. Naadi – Pithakabham.

Treatment given:

Thaleesadhi PS -1g bd,AF with honey
Vasanthakusumagara mathirai – 1 bd, AF with honey
Mahasudharsana tablet 1 gm – 1 bd, AF with water
Nochi thilam – oil bath weekly once
Anu thilam – 2 drops each nostril, weekly twice
 The above medications given for 1 month.

Blood Results	Before Treatments	After Treatments
TLC	12500 cells/cu.mm	10500 cells/cu.mm
DC : Neutrophils	75%	55%
Lymphocytes	24%	20%
Eosinophils	3%	1%
Monocytes	1%	0%
ESR ½ hr	30	10mm
1 hr	70	20mm
AEC	490 cells / cu.mm	410 cells / cu.mm

Discussion:

The diagnose should be based on combination of patient history, physical examination and laboratory results. At first explained to the patients, about siddha system and medications, and how to intake with proper adjuvant. Symptoms were reduced 40% within 15 days, and then decided to continue the same medications for another 15 days. After 1 month review, all symptoms were reduced and patient feels better. Blood Investigations revealed, Total leucocytes count (TLC) – 10500 cells/cu.mm, Differential Count : Neutrophils – 55%, Lymphocytes – 20%, Eosinophils – 1%, Monocytes – 0% , ESR – (10 mm ½ hr), 20 mm – 1 hr) and AEC – 410 cells / cu.mm.

Conclusion:

According to Theraiyarin Noi Anugaa Vithi, “Nasiya Anjanathal Iyam Thazhum” – which means nasal application is very effective to treat the kabha dhosam. Nowadays, people's are shifting towards the siddha system due to its complete cure and safe to use. I conclude that external therapies also needed to control the affected dhosam, Among them Nasiyam is accessible and affordable to the entire society. Even though Nasiyam is one of the non-invasive procedure also, compared with the surgical intervention for the treatment of chronic sinusitis in modern aspect.



Dr. K. Ruba MD (S),
 Medical officer,
 SKM Chikitchaalaya,
 VOC, Park Road,
 Erode.





STRESS MANAGEMENT THROUGH YOGA NIDRA

Introduction:

Stress is a feeling of emotional or physical tension. It can come from any event or thought that makes you feel frustrated, angry or nervous.

Stress is body's reaction to a challenge or demand. In short bursts stress can be positive, such as when it helps avoid danger or meet a deadline. But when stress lasts for a long time, it may harm health.

Yoga nidra is the systematic method of inducing complete physical, mental and emotional relaxation which is derived from the tantras, is a powerful technique in which one learn to relax consciously. In yoga nidra sleep is not regarded as relaxation. People feel that relaxing is when they collapse in a chair with a coffee, a drink ,reading newspaper, watching television or a cigarette. But true relaxation is actually an experience far beyond all this. For absolute relaxation one must remain aware. This is yoga nidra , the state of dynamic sleep.

In yoga nidra the state of relaxation is reached by turning inwards away from outer experience. If the consciousness can be separated from external awareness and from sleep it becomes very powerful and can be applied in many ways, for example to develop memory, increase knowledge and creativity or transform one's nature.

Yoga nidra is one aspect of pratyahara which leads to the higher states of concentration and samadhi.

Types of stress:

1.Acute stress

Acute stress is something which affects almost everyone from time to time. It relates to events and pressures of the present and the near future running late for work or forgetting an important appointment. This stress occurs for a short period of time. Acute stress can present in anyone's life, it is highly treatable and manageable. However repeated acute stress can become very harmful for your physical and mental health.

2.Episodic acute stress

People who frequently experience acute stress are whose lives present with frequent triggers of stress ,have episodic acute stress. The individuals who frequently suffer acute stress often leave a life of chaos and crisis. They are always in a rush or feel pressured. They take on many responsibilities, and usually cannot stay organized with so many time demands. There are two main personality types that frequently present with episodic acute stress:

1. Type A personality :- Type A personality have a excessive competitive drive aggressiveness, abrupt and essence of time urgency. These type personality individuals are likely to develop coronary heart disease.

2. The Worrier:- The worrier presents with almost incessant negative thoughts causing episodic acute stress on physical and mental health. Worry warts project probable disaster and negatively forecast catastrophe in almost every situation. They are often diagnosed with generalized anxiety disorder.

3.Chronic stress

Chronic stress is the most harmful type of stress. If chronic stress is left untreated over a long period of time it can significantly and often irreversibly damage your physical health and deteriorate your mental health. For example long term poverty, repeated abuse in any form, unemployment, poor work environment or an unhappy marriage can cause significant chronic stress. Chronic stress can be caused by a aversive experience in childhood or traumatic experiences later in life.

Chronic stress can lead to suicide, homicide, psychosis, heart attack and strokes.





Signs and symptoms:

At physical level:

- Chest pain
- Body pain
- Exhaustion or trouble sleeping
- Headache
- Dizziness or shaking
- Muscle tension or jaw clenching
- Stomach or digestive problems

At emotional level:

- Depression
- Anxiety or irritability
- Panic attack
- Sadness

Pathophysiology:

Stress is bodies way of responding to the demand which is caused by both good and bad events. The body reacts by releasing chemicals in the blood. To combat this demand by a complex repertoire of behavioral and physiologic adoptive responses. Stress experiences often lead to various chronic health conditions such as hypertension, coronary heart disease.

Stress influenced conditions:

- Diabetes mellitus
- Hair loss
- Heart disease
- Hyperthyroidism
- Obesity
- Ulcers

Clinical experience:

Stress is common among both men and women, but women are more likely to get affected than men. 77% of people experience stress that affects their physical health and 75% of people have stress that impacts their mental health. Nearly 3 in 10 patients who visited SKM Chikitchaalaya, Erode were observed with stress in past 1 year. Everyone has different stress triggers, work stress and emotional disturbances are more common among patients.

Case study:

A 29 years female had visited SKM Chikitchaalaya, Erode with chronic stress since 6 months along with symptoms of depression, sleep disturbances and pain in chest region. The patient even had thoughts of suicide.

Yoga therapy given: Loosening exercise

Asanas

- Tadasana
- Shashankasana
- Marjariasana
- Setu bandhasana
- Supta udarakarshanasana

Pranayama

- Nadi shuddhi
- Brahmari

Relaxation

- In shavasana yoganidra is given in alternative days for 30 minutes.

Conclusion:

During yoga nidra one will enter a calming state of mind and body. The practice creates physical and mental activities that change brain waves to release emotional tension slows down the nervous system and allow muscles to relax. This triggers a relaxation response naturally reducing stress in the body and mind. Alleviating mental and bodily stress can also relieve headache and muscle tension. By relaxing it reduces one's anxiety and depression level due to stress; it also improves sleep pattern and physical health. Yoga nidra has been given for about 2 months to that patient at first she was not able to concentrate on the instructions given, but after practicing for a month she started to get relax and sleep disturbances got reduced. Regular practice improved her physical and mental health, the pain felt in the chest due to depression got reduced. Yogic sleep puts the practitioner into a deep relaxation state, which will leave them feel well rested. Yoga Nidra also reduce blood pressure, addiction, enhances creativity, improves self esteem and confidence.



HEPATOPROTECTIVE AND ANTIOXIDANT ACTIVITY OF KARISALAI KARPAM, A POLYHERBAL SIDDHA FORMULATION AGAINST ACETAMINOPHEN-INDUCED HEPATIC DAMAGE IN RATS.

Introduction:

During yoga nidra one will enter a calming state of mind and body. The practice creates physical and mental activities that change brain waves to release emotional tension slows down the nervous system and allow muscles to relax. This triggers a relaxation response naturally reducing stress in the body and mind. Alleviating mental and bodily stress can also relieve headache and muscle tension. By relaxing it reduces one's anxiety and Synthetic drugs such as non-steroidal anti-inflammatory drugs are used commonly as the main course or as adjuvant therapy for several disease conditions. Acetaminophen (paracetamol, n-acetyl-p-aminophenol) is a common and most widely used analgesic and antipyretic drug. This drug is associated with both intentional and accidental poisoning. Toxic effects on the liver due to the excess use of paracetamol may lead to death. In view of this, use of the herb, herbal product, or phyto-constituents is becoming attractive as the first choice to avert the toxic effect of drugs on the liver. Easy accessibility, low levels of technological input, low cost, broad continuing acceptance and relative low side effects have increased the utilization of traditional medicines including Siddha medicine in many parts of India. Karisalai Karpam tablet is a Siddha formulation containing seven plants. It is a proprietary medicine used to cure liver disorders such as jaundice, enlargement of liver and spleen, hepatosplenomegaly, anemia and is also beneficial in renal pathic conditions and skin diseases. Until now, no research has been reported on the hepatoprotective activity of Karisalai Karpam. In view of above, the present study was designed to evaluate the hepatoprotective effect of Karisalai Karpam tablet against acetaminophen induced liver injured depression level due to stress; it also improves sleep pattern and physical health. Yoga nidra has been given for about 2 months to that patient at first she was not able to concentrate on the instructions given, but after practicing for a month she started to get relax and sleep disturbances got reduced. Regular practice improved her physical and mental health, the pain felt in the chest due to depression got reduced. Yogic sleep puts the practitioner into a deep relaxation state, which will leave them feel well rested. Yoga Nidra also reduce blood pressure, addiction, enhances creativity, improves self esteem and confidence.



Avuri



Aya chendooram



Karisalamkanni



Kottakkaranthai

Materials and Methods

Polyherbal formulation

Karisalai Karpam tablet is manufactured by SKM Siddha and Ayurveda Company (India) Limited, Erode, Tamil Nadu since 1997. The product is obtained from the SKM Siddha and Ayurveda Company (India) Limited, Erode, and it is formulated using Karisalamkanni (*Eclipta prostrata*, 15%), Manjal Karisalai (*Wedelia calendulaceae*, 15%), Avuri (*Indigofera tinctoria*, 15%), Kottakkaranthai (*Sphaeranthus indicus* L., 15%), Vallarai (*Centella asiatica*, 15%), Kuppaimeni (*Acalypha indica*, 15%), Siruseruppada (*Coldenia procumbens*, 5%), Aya Chendooram 5%.

Animals

Healthy Wistar rats (150–200 g) were used in the study. Animals were housed under standard environmental conditions. The Institutional Animal Ethical Committee (Reg.No. 1305/ac/09/CPCSEA) had approved the study.

Hepatoprotective activity,

Rats were randomly divided into six groups (n = 6) in the following manner:

- ★ Group I (healthy control): 0.5% sodium carboxymethyl cellulose (CMC) as vehicle
- ★ Group II (disease control): 0.5% sodium CMC + paracetamol (3 g/kg)
- ★ Group III (standard group): Silymarin (100 mg/kg, p.o. for 3 days) + paracetamol (3 g/kg)
- ★ Groups IV–VI (test drug treated group): Karisalai Karpam tablet (50, 100 and 200 mg/kg, p.o., for 3 days) + paracetamol (3 g/kg).



The animals in above stated groups were treated with respective drug or vehicle once daily for 3 consecutive days followed by oral administration of 3 g/kg of acetaminophen on the 3rd day to all animals except those in Group I. All the standard and test drugs were suspended in 0.5% sodium CMC and administered orally. Animals were anaesthetized and sacrificed 48 h after administration of acetaminophen. Blood samples were collected and centrifuged at 4000 ×g for 30 min to obtain the serum used for the analyses of serum glutamic oxaloacetate transaminase (SGOT), serum glutamic pyruvic transaminase (SGPT), alkaline phosphatase (ALP), total bilirubin (TB), direct bilirubin (DB), using commercial biochemical kit obtained from Agapee Diagnostic Ltd., Kerala.

In vivo antioxidant activity

Liver samples were homogenized in 0.15 M KCl-10 mM potassium phosphate buffer (pH 7.4) to give a 10% (w/v) liver homogenate. The liver homogenates were then centrifuged at 3000 ×g for 10 min to get clear supernatant, which was used for the determination of antioxidant status. The content of antioxidant enzymes such as superoxide dismutase (SOD), catalase (CAT), glutathione peroxidase (GPx), and non-enzymatic antioxidant glutathione (GSH) in liver tissue was determined. In brief, SOD activity was estimated by the inhibition of auto-catalyzed adrenochrome formation at 480 nm in the presence of tissue homogenate. For CAT, the rate of H₂O₂ decomposition was determined spectrophotometrically at 240 nm, GPx activity evaluated using the molar extinction coefficient of nicotinamide adenine dinucleotide phosphate (NADPH) 6220/M/cm and expressed as μM reduced NADPH oxidized/min/mg protein at 37°C, while GSH was measured by 5,5-dithiobis (2-nitrobenzoic acid) method. All samples were assayed in triplicates.

Histopathological examination

After the animals were sacrificed, sections of livers from each group were fixed immediately in 10% neutral formalin for a period of at least 24 h, dehydrated in graded (50–100%) alcohol and embedded in paraffin. Cross-sections of the liver tissue (5–6 μm thickness) were prepared and stained with hematoxylin-eosin dye. These sections were subjected to microscopic examination.

Statistical analysis

The data were subjected to analysis of variance (ANOVA) and expressed as mean ± standard error of mean (n = 6). Statistical analysis was carried out by ANOVA followed by Turkey tests. A level of P < 0.05 was used as the criterion for statistical significance.

Results

This study was planned with a view to evaluate the efficacy of Karisalai Karpam tablet against acetaminophen induced liver disorder and to investigate its possible underlying mechanisms.

Hepatoprotective activity

In our study, we observed that the treatment with the toxic dose of paracetamol results in significant (P < 0.001) increase in SGPT, SGOT, ALP activity and TB, DB level in serum in negative control group thereby confirming drug induced hepatocellular toxicity. Treatment with Karisalai Karpam tablet was found to normalize the level of these enzymes. Karisalai Karpam showed dose dependent activity and in higher dose it prevented the increase in SGPT, SGOT, ALP, TB, and DB by 67.8%, 72.3%, 47.6%, 61.3% and 62.9% respectively as compared to the disease control group. The hepatoprotective activity was comparable to the standard drug silymarin [Table 1].

In vivo antioxidant activity

Marked decrease in concentration of GSH, SOD, CAT and GPx was observed in paracetamol treated animals. Karisalai Karpam at 100 and 200 mg/kg significantly produced in vivo antioxidant activity by restoring liver GSH, blood GSH, SOD, CAT, GPx level. Karisalai Karpam (200 mg/kg) was found effective in increasing in liver and blood GSH, SOD and CAT [Table 2].

Histopathological examination

Histopathological studies also have confirmed that Karisalai Karpam showed a protective effect. At 100 and 200 mg/kg dose, the Karisalai Karpam treated rat livers showed only mild congestion which is comparable with that of standard.

Conclusion

This study shows that Karisalai Karpam tablet possesses the significant hepatoprotective property, and this may in part be explained by the antioxidant activity of Karisalai Karpam tablet. Currently, the incidence of drug related liver damage is increasing in an alarming rate on one hand while on the other hand, the use of paracetamol is extensive and often abused. This study establishes the protective effect of Karisalai Karpam tablet against paracetamol induced liver damage, which provides a support for its use in treatment of liver disorders.

Ref: Sen S, Chakraborty R, Thangavel G, Logaiyan S. Hepatoprotective and antioxidant activity of Karisalai Karpam, a polyherbal Siddha formulation against acetaminophen induced hepatic damage in rats. *Ancient Sci Life* 2015;34:198-202.



Kuppameni



Manja Karisali

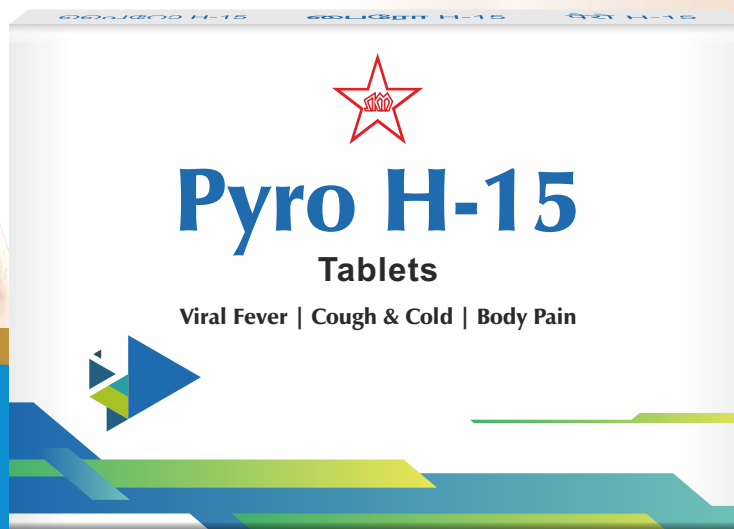


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Tel Fax: +91 424 2500590, 2501238 Website URL : www.skmsiddha.org

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