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A CROSS SECTIONAL STUDY ON VARMAM PRACTICE BY TRADITIONAL PRACTITIONERS & SIDDHA PHYSICIANS IN THE MANAGEMENT OF PAKKAVATHAM AND MUGAVATHAM

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ABSTRACT

Background: Varmam or varmakalai is one of the special treatments in Siddha system of medicine and used to treat multiple ailments, especially musculoskeletal and neurological deficits. Varmam means science of motion and function of the life energy. Varmam therapy is used along with internal medications and external application as well. In Tamil Nadu, the practices of varmam possess various methods of manipulation according to the traditional knowledge. Each varma aasans (Traditional practitioner) and institutionally qualified Siddha physicians have unique techniques and methodology in their varmam practice. Aim: The aim of the study is to document the different approaches of varmam practiced by traditional practitioners and Siddha physicians in the management of pakkavatham, and mugavatham. Materials and methods: Five traditional practitioners and five Siddha physicians from Kanyakumari district and Chennai were interviewed by pre designed questionnaire and their responses were documented. Result: It was observed that, thadaval, thattal, adangal is the most common varmam methodology followed by traditional practitioners. Siddha physicians were using various varmam methodology such as asaithal, pidithal, thatal, thadaval, oondral, anukkal, enthal and karakkal in the management of *pakkavatham and mugavatham*All the Siddha physicians are advising external therapies along with varmam whereas traditional practitioners primarily concentrate on varmam manipulation only. **Conclusion**: This documentation is a preliminary level study and will help for the further research leading to standardizing all these points and techniques.

KEYWORDS

Varmam, Pakkavatham, Mugavatham, Traditional practitioners, Siddha physicians.

1.INTRODUCTION

Siddha system is a traditional system of medicine in southern part of India. Varmam or varmakalai is one of the special treatments in Siddha system of medicine. Siddha varmam therapy used along with internal medication and external applications as well. Varmam is a subtle energy that flows inside the body. The places where the *vaasi* energy resides and activates both the body and life-energy are *varmam* points. Human body has 108 varmam points. These are divided into 12 *padu varmam* and 96 *thodu varmam*. Varmam therapy is the pressure manipulation over the varmam points. The stimulation of varmam points by various methods like *anukkal, asaithal, thatdaval, yenthal, oondral, pidithal, nazhukkal, amarthal, pathukkal, karakkal, pinnal.* In Tamil Nādu, the practices of varmam possess various methods of manipulation according to traditional knowledge. Each *varma aasan* (Traditional practitioner) and institutionally qualified Siddha physicians have unique techniques and methodology in their varmam practice. In this study, author was tried to study the various therapeutic methods of varmam and differentiate the therapeutic approach of *varmam* manipulation by traditional practitioners and Siddha physicians in the management of *pakkavatham* and *mugavatham*.

2.MATERIALS AND METHODS

- The author selected 5 traditional practitioner and 5 Siddha physicians for the study 6 of them from Kanyakumari district and 4 of them from Chennai. The data were collected by direct interview approach.
- Predesigned questionnaire was used to elicit information regarding varmam methodology, duration of the treatment, and additional therapies used along with varmam therapy.

STUDY TYPE	Cross sectional study
SAMPLING TECHNIQUES	Convenient sample technique
STUDY PLACE	Kanyakumari district & Chennai
SAMPLE SIZE	10
TOOL OF RESEARCH	Questionnaire

3.RESULTS

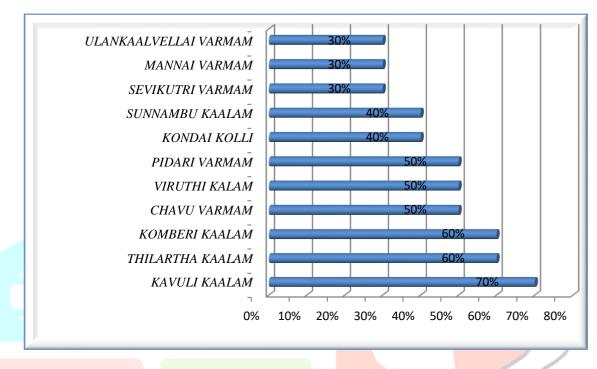
Among the 10 surveyed practitioners, traditional practitioners were more than

24 years experienced and Siddha physicians were more than 9 years experienced in varmam field and 60% of them from Kanyakumari and 40% of them from Chennai. Among the surveyed practitioners, 90% were male and 10% were female. There is smaller number of female physicians compared to male physicians practicing varmam.

<u>3.1 PAKKAVATHAM</u>

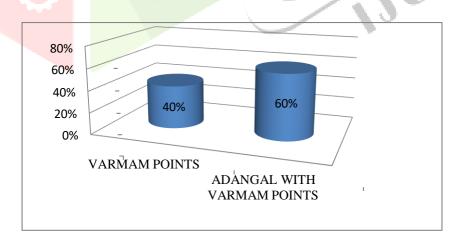
COMMONLY USED VARMAM POINTS FOR PAKKAVATHAM

Ulankalvellai varmam, Mannai varmam, Sevikutri varmam, Sunnambu kaalam, Kondai kolli varmam, Pidari varmam, Viruthi varmam, Chavu varmam, Komberi varmam, Thilartha kaalam, Kavuli kaalam, are the chiefly used varmam points in the management of Pakkavatham



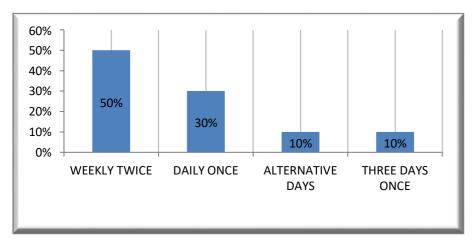
TREATMENT PROCEDURE

According to this study, 60% of practitioners were practicing varmam with adangal method and 40% of practitioners were practicing only varmam points in the management of *Pakkavatham*



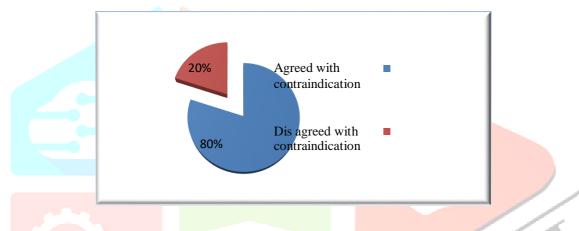
FREQUENCY OF VARMAM TREATMENT

Among 10 practitioners, frequency of varmam therapy to *pakkavatham* is weeklytwice in 50% of practitioners, daily once in 30% of practitioner's alternative days in 10% practitioners and three days once in 10% of practitioners.



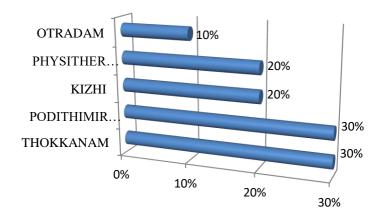
CONTRAINDICATION

Among 10 practitioners, 80% of practitioners agreed with contraindication of varmam manipulation while treating *pakkavatham* and 20% of practitioners disagreed with it.



ADDITIONAL THERAPIES ALONG WITH VARMAM FOR PAKKAVATHAM

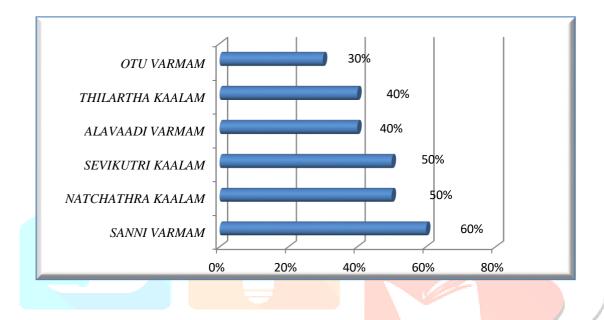
Among 10 practitioners, 30% of practitioners were practicing *thokkanam*, 30% were practicing *podithimirthal*, 20% were practicing *kizhi*, 20% were practicing physiotherapy and 10% of practitioner was practicing *otradam* along with *varmam* therapy in the management of *pakkavatham*.



3.2 MUGAVATHAM

COMMONLY USED VARMAM POINTS

Among 10 practitioners, 60 % of the practitioners were using *sanni varmam* 50% of practitioners were using *natchathra kaalam*,50% of practitioners were using *sevikutri varmam*, 40% of practitioners were using *alavaadi Varmam*, *thilartha kaalam* and 30% practitioners were using *otu varmam* in the management of *mugavatham*.

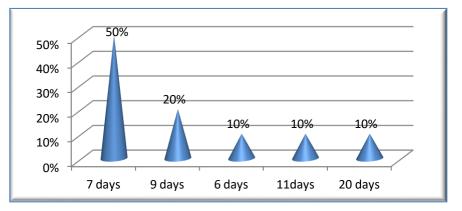


DURATION OF TREATMENT

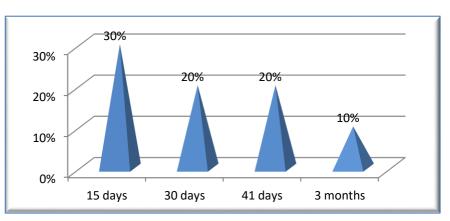
In acute *mugavatham* condition, among 10 practitioners, 50% of the practitioners said that varmam therapy can be given for 7 days, 20% of practitioners suggested that varmam should be given for 9 days and 10% said that varmam can be advised eleven days, another 10% practitioners suggested that 20 days for treatment.

In chronic *mugavatham* condition, duration of the treatment is 15days for 30% of practitioners, 30 days for 20% of practitioners, 41 days for 20% practitioners, 3 months for 10% of practitioner

ACUTE CONDITION

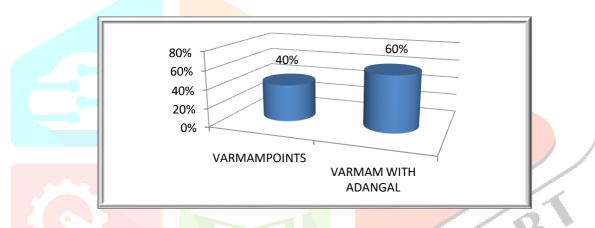


CHRONIC CONDITION



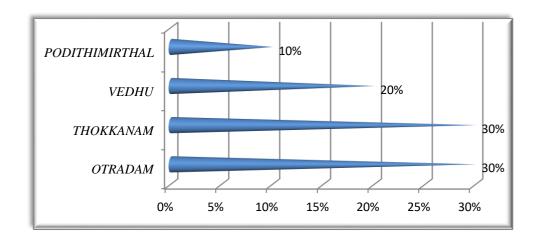
TREATMENT PROCEDURE

Among 10 practitioners, 60% of practitioners were practicing varmam with adangal method and 40% of practitioners were practicing only varmam points in their treatment procedure.



ADDITIONAL THERAPIES ALONG WITH VARMAM

According to this study, some additional therapies were given along with varmam therapy. Among 10 practitioners, 30% of the practitioners were practicing *thokkanam* 30% were practicing *otradam*, 20% were practicing *vedhu*, 20% were practicing *podithimirthal* in the management of *mugavatham*.



4.DISCUSSION

In pakkavatham management, commonly used varma points in head region is - Thilarthakaalam Kondaikoll varmami, Seerunkolli varmam, Poigaikaalam, Pidari varmam, Sevikutri varmam, Sunnambu kaalam, Natchathra kaalam, Sanni varmam. In body - Vilangu varmam, Adappa kaalam , Unthi varmam, Ner varmam, Thamaraga varmam and upper limb points are Kavuli kaalam, chavu varmam, Ulankai vellai varmam, Manibantha varmam, Mozhipirazhgai varmam, Piratharai varmam , Aga and pura mootu varmam. Lower limb points areKomberi kaalam, Viruthi kaalam, Ulankaalvellai varmam, Melmannai varmam and Keel mannai varmam, Amai kaalam. Other than this Mudichu varmamangal also used Karunamirtha mudichu, Sara mudichu, Thunnal mudichu, Paasamudichu, Kumbaga mudichu.

In *Pakkavatham* management all the *Siddha* physicians were advised external therapies in addition to varmam whereas traditional practitioners primarily concentrate on varmam manipulation only. Varmam therapy given along with internal medicine and external therapy in 80% of the patients. Thadaval is the most commonly used method especially *Sarvanga thadaval murai*. Predominantly ¹/₄ maathirai pressures are used to manipulate the *varmam* points. Varmam manipulation given along with external therapies such as *otradam*, *thokkanam*, *podithimirthal*, *kizhi*, *patru* and physiotherapy.

In Mugavatham, the following adangal methods were used Kothanda adangal, Amirtha adangal, Thatu adangal, Kan adangal, Perunarambu adangal, Visainarambu adangal, Aasamai adangal, Melmudichu adangal. Thadaval methods are Thalai pagai thadaval, Munnetri thadaval, Kan sutri thadaval, Pirai thadaval, Kuri thadaval. Commonly used Varma points are Mugasanni varmam, Sevikutri varmam, Otu varmam, Poigai kaalam, Minvetti varmam, Manthirakaalam, Alavadi varmam, Thilatha kaalam, Natchathra kaalam. In the management of Mugavatham, 90% practitioners only give Varmam manipulation without any internal medicine. In acute condition all the practitioners practicing varmam manipulation without medicine. In Chronic condition only 20% practitioners using internal medicine along with varmam manipulation. Adangal and thadaval methods were commonly used. ¹/₄ & ¹/₂ maathirai pressure is used to manipulate the varmam points. Varmam manipulation given along with external therapies such as otradam, thokkanam, podithimirthal, vedhu, patru in mugavatham condition. Duration of the treatment varies from weekly once or twice to monthly twice.

Varmam manipulation gives as an adangal method in emergency condition. *Thadaval, thattal, adangal* is the most common varmam methodology followed by traditional practitioners. Siddha physicians were used following methodology such as *asaithal, pidithal, thatal, thadaval, oondral, anukkal, enthal and karakkal*. There are many influencing factors also present in varmam therapy such as finger selection, technique selection, duration of therapy, using pressure, frequency of varmam therapy. Most of the traditional practitioners disagreed with contraindication while treating neurological disorder with varmam therapy.

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www.ijcrt.org 5.CONCLUSION

From this study it is obvious that varmam traditional practitioners and Siddha physicians practicing different modalities such as varmam points and various manipulation techniques, internal and external medicines in the management of *pakavatham* and *mugavatham*. I hope that this compilation and documentation maybe used as a repertoire of points which can be used in the management of *pakavatham* and *mugavatham*. This documentation will be the preliminary level study and will help for the further research leading to standardizing all these points.

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