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ASHA through Siddha.

National projects in Mother and child care including ASHA - Through SIDDHA

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Objective

The Growing importance of AYUSH Systems Domestic as well as Global areas is evident from various statistics generated in yester years. Inclusion of AYUSH Systems in national/ State/ District/ Taluk level is mandatory in Public Health and proper understanding of national health programmes and preparedness in Inclusive health care delivery is the need of the hour. Siddha should reach the Rural masses only through ASHA activist as it reaches their home there by saving their expenses on reaching to PHC'S and also includes them in Mainstreaming .

Mother and Child care

Mother and child care even though is primitive still holds a lot of importance as it Focuses on a healthy nation. Rural population is still vulnerable in mother and child care.

Unhygienic environments, Poor Ante natal follow-ups, Malnutrition including Iron deficiency, improper child care and lack of frequent health supervisions take them under vulnerable population. The national projects if addressed properly will reduce the burden faced by the Rural as well as semi urban population which occupies the major population in India.

Accredited social health activist (ASHA).

Accredited social health activist play a very important role in NRHM as they access the rural population easily and they are Change agent on health .The first port of call for any health related demands of deprived sections of the population, especially women and children.

Roles and Responsibilities

- ***Create awareness on***

- Nutrition

- Basic sanitation

- Hygienic practices.

- Healthy living

- ***counsel on***

- Birth preparedness,

- Importance of safe delivery,

- Breastfeeding

- Complementary feeding,

- Immunization,

- Contraception

- Prevention of common infections including reproductive Tract Infection /Sexually Transmitted Infection (RTIs/STIs) and care of the young child.

Mobilize the community and facilitate them in accessing

Health Services available at the village

Sub-center

Primary health centers

Immunization,

Ante Natal Check-up (ANC)

Post Natal Check-up (PNC),

ICDS and Sanitation.

Primary care by ASHA Activist

1. Diarrhoea
2. Fevers
3. First aid for minor injuries.

ASHA Will Provide Directly Observed Treatment Short-course (DOTS) under Revised National Tuberculosis Control Programme.

ASHA as medical depots

- Oral Rehydration Therapy (ORS)
- Iron Folic Acid Tablet (IFA)
- Chloroquine
- Disposable Delivery Kits (DDK)
- Oral Pills & Condoms etc.
- A Drug Kit will be provided to each ASHA

AYUSH ASHA ROLE

- Combating malnutrition with Siddha drugs/ nutrition advices
- Ensuring basic hygiene and train to make use of home garden herbs and home remedies
- Teaching Siddha life style/ yoga for kids

AYUSH KIT WITH ASHA - WILL HAVE

- RCH KIT - Reproductive and Child health Kit
- General KIT - Siddha First Aid Kit/ Primary care kit.
- Information materials
- Referral addresses
- Wound healing drugs, Home remedies and herbal usage information for primary care
- Tonic for women

ROLE AND INTEGRATION WITH ANGANWADI

ASHA will integrate with existing Anganwadi workers to

- Organizing Health Day once/twice a month.
- On health day, the women, adolescent girls and children from the village will be mobilized for orientation on health related issues such as importance of nutritious food, personal hygiene, care during pregnancy, importance of antenatal check up and institutional delivery, home remedies for minor ailment and importance of immunization etc

ASHA – PROFILE

- One ASHA per 1000 population.
- Primarily a woman resident of the village - 'Married/Widow/Divorced'.
- Literate woman with formal education up to Eighth Class
- Effective communication skills, leadership qualities.

Training needs for AYUSH ASHA

- Providing newborn care and management of a range of common ailments particularly childhood illnesses
- Inform about births and deaths any unusual health problems/disease outbreaks in the community to the Sub-Centers/Primary Health Centre.
- Promote construction of household toilets under Total Sanitation Campaign
- Identification of birth defect children and referrals
- YOGA / Day care – Seasonal care and Personal care mentioned in Siddha
- Nutritious Foods and Home remedies in Siddha and Immunization medicines like Urai Mathirai and Sei Nei in Siddha.

Conclusion:

Change agents in health are accredited to Promote health practices and if they are Trained, Guided and Monitored Properly NRHM Vision will meet its Goal of Health delivery even to the unreachable.

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Santha Santhirodaya mathirai induced changes in liver enzyme level in liver disorder patients

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Siddha system of medicine:

This is the first system to emphasize health as the perfect state of physical, psychological, social and spiritual components of a human being. The fundamental principle of this medicine successfully eliminates the evil side effects without losing the beneficial medicinal properties.

Siddha system of medicine is being greatly recognized as a definite approach to liver disease treatment. Large numbers of medicines are available for liver disorders

- Liver is the largest organ in the human body, plays a vital role in many physiological processes.
- According to Siddha liver is the seat of Pitta.
- Pitta humor is involved in liver disorders.
- Aggravation of pitta causes liver diseases such as fatty liver, cirrhosis, and hepatitis.
- The signs and symptoms of Cirrhosis simulate the symptoms described in Azhal kalleeral noi in Siddha.

PATHOGENESIS

- Excessive bile production or obstruction in the flow of bile usually indicates high pitta, which in turn affects the agni or enzyme activities responsible for absorption, digestion and metabolism.
- Pitta can be aggravated by many factors of diet and lifestyle. They include alcohol abuse, eating red meat, eating too much spicy or oily, heavy foods, lack of sleep, too much direct exposure to the sun and smoking. When pitta becomes aggravated it results in liver diseases such as Kamalai and Kalleeral noi.

Clinical evaluation:

AZHAL KALEERAL NOI

Signs and Symptoms :

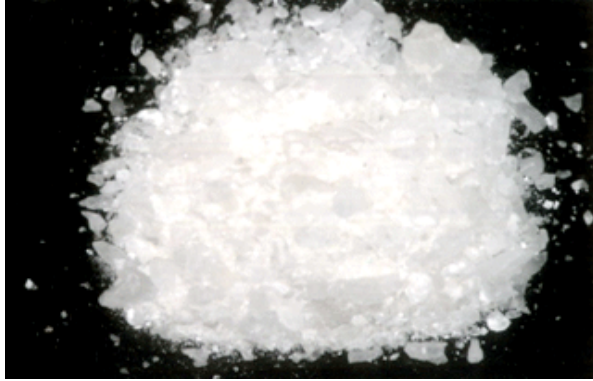
- Anorexia
- Nausea
- Vomiting
- Fever
- Jaundice
- Edema

Diagnostic criteria:

- The magnitude of pitta aggravation is diagnosed through pulse reading, observing the conjunctiva, tongue, and palpation of the abdomen.
- Using Modern biochemical parameters such as Serum bilirubin, S.G.O.T., S.G.P.T., Serum alkaline phosphatase.

*Preparation of the drug**Ingredients:*

Venkaram (Borax)	- 10gm.
Rasa Karpooram - (Mercuric sub chloride)	- 20 gm.
Manjal (Curcuma longa)	- 60gm.
Elumichai Charu (Lemon Juice)	- 110 gm.



Karpooram

Venkaram

Manjal

Rasa

Method.

Purified Rasa Karpooram, Purified Venkaram and manjal were ground with lime juice for 12 hrs, then brought into fine consistency, rolled into 100mg pills and dried in shade.



Mathirai

Santha Sandhirodaya

Therapeutic properties

- Rasa karpooram (*Mercuric subchloride*) is useful for pitta thodam, jurm, kamalai, etc.
- Mercury, is widely used in Siddha medicine. Siddhars used Mercury not only to cure innumerable diseases, but also to rejuvenate the body and promote longevity.
- Manjal (*Curcuma longa*) is useful for many diseases. It has potent hepatoprotective property also.
- Vengaram (*Borax*) is effective in peptic ulcer, skin diseases etc.
- Lowering of bio chemical parameters were observed in ccl4 induced damaged liver in rat . (Journal of research in Ayurveda and Siddha Jan–June 1995 vol.XVI o.1–2).

Atomic absorption spectrometry analysis

- The concentration of Mercury in two marketed samples were analyzed by using atomic absorption spectrometry.
- Sample I 6.204mg/l
- Sample II 13.61mg/l
- Sample I is selected for further studies.

Acute toxicity study

- Swiss albino mice of either sex weighing between 20–25 gms were divided into ten groups of six animals each.
- Santha santhirodaya mathirai was prepared as fine suspensions in honey.
- Group I to IX were administered with various doses of 100, 200, 500, 1000, 2000, 5000, 7000, 10,000 mg of Santha santhirodaya mathirai /kg body weight.
- Group X received the vehicle honey
- After administration behavioural changes and mortality symptoms were observed continuously for the first 12 hours, then 24 hours, 48 hours and 72 hours.
- Mortality and toxic symptoms were recorded.
- No mortality was observed upto 5000 mg/kg
- 33.33% mortality observed at 6000 mg/kg
- 50% mortality observed at 7000 mg/kg
- 100% mortality at 10000 mg/kg body weight.
- Hence the LD50 of S.S.Pills is 7000 mg/kg

Clinical study

Selection of patients:

- 30 patients of both male and female were selected and recruited from Arignar Anna Govt. Hospital for Indian Medicine and Homeopathy, Chennai 106. The blood samples were collected from the above patients.

Experimental design:

- Group I: Disease free healthy individual (n=10)
- Group II: Patients with Azhal kalleeral noi on treatment with S.S.Pills 3 pills twice with honey a day for a period of 48 days.(n=20)

Results and discussion

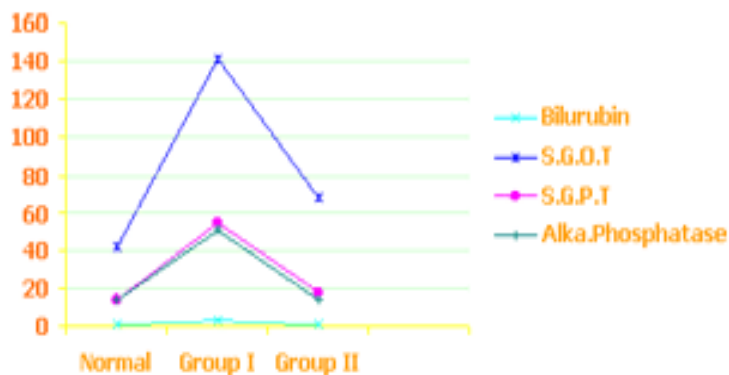
- The concentration of mercury present in the sample used is 6.204mg/dl
- The acute toxicity study shows that the LD50 is 7000mg/kg body weight.

- Lowering of bio chemical parameters were observed in ccl4 induced damaged liver in rat . (Journal of research in Ayurveda and Siddha Jan-June 1995 vol. XVI o.1-2)
- Clinical and biochemical changes were observed in majority of patients.
- Anorexia, nausea, vomiting, fever were improved within a week.

Effect of s.s.pills on serum enzyme levels in azhal kalleeral noi patients

	Normal	Group I	Group II
<i>Bilirubin</i>	0.8	2.8	0.9
<i>S.G.O.T</i>	42	141.3	67.2
<i>S.G.P.T</i>	14.5	55.1	18.2
<i>Alka. Phosphatase</i>	13.6	50.5	14.25

Effect of s.s.pills on serum enzyme levels in azhal kalleeral noi.



Summary and conclusion

Based on the above investigation, it can be concluded that Santha santhirodaya pill has got the curative potential to reduce the aggravated pitta which can be evidenced from the pronounced biochemical changes observed. No side effects were observed which suggests that the drug is safe to use therapeutically. This kind of finding can be exploited in the successful treatment of Azhal kaleeral noi with Santha santhirodaya mathirai.

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- **Manickavasakam, K.** (2008) [Review of Kilingjal \(Ostre edults, Linn\) in traditional Indian medicine.](http://openmed.nic.in/2682/01/twalter.pdf) Siddha Papers. <http://openmed.nic.in/2682/01/twalter.pdf>
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