



Review of Karuppaikatti with special reference to Siddha Medicine.

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Abstract

Fibroids are the most frequently seen tumors of female reproductive system fibroids are firm compact tumors that are made of smooth muscle cells & fibrous connective tissue develop in the uterus. It is estimated that between 20 to 50 percent of women of reproductive age have fibroids, although not all are diagnosed some estimates state that up to 30 to 77 percent of women will develop fibroids sometime during their child bearing years. In more than 99 percent of fibroid cases the tumors are benign (non cancerous) these tumors are not associated with cancer & do not increase women's risk for uterine cancer they may range in size from the size of a pea to the size of soft a soft ball or small grape fruit.

Keywords: Fibroids, menopause, non cancerous, siddha drugs.

Introduction

women who are approaching menopause are at the quarter risk for fibroids because of their long exposure to high levels of oestrogen fibroids are very common in their 30s & 40s but fibroids usually do not cause problem many women never even know they have them your body makes loss of these hormones after you stop having period (menopause) fibroids usually shrink after menopause & stop causing symptoms.

Signs and symptoms of disease:

Karuppaikatti so common and so often asymptomatic. The location and size of the katti determines the symptoms. Initially it is asymptomatic, depending upon the growth of tumour, the symptoms get worsen. The common symptoms are

1. Menorrhagia, polymenorrhoea and metrorrhagia
2. Infertility, Recurrent abortion
3. Pain
4. Abdominal lump

5. Pressure symptoms
6. Vaginal discharge.

Signs:

1. Anaemia due to menorrhagia
2. An abdominal lump
3. Enlarged uterus

Modern investigation:

1. Ultra sound:

It should always be used to confirm or clarify the nature of the tumour.

Both transabdominal & transvaginal route can be done.

2. Sonohysteroscopy:

It is used to diagnose submucosal fibroid and subserous fibroid.

3. Magnetic Resonance Imaging

It is excellent imaging modality for mapping the precise location & size.

4. Laproscopy:

Laproscopy can be of clinical value if the uterus is not larger than a twelve week gestation size. It is used to differentiate between pedunculated fibroid and ovarian neoplasm.

5. Endometrial Biopsy:

6. Blood investigation:

To rule out iron deficiency anaemia.

Treatment:

Purgation:

1. Agasthiyar kuzhambu – 100 – 200mg with 10ml bark juice of Naval and goat's milk
2. Kowsikarkuzhambu – 100 – 200mg with daemia juice
3. Karudankizhanguthylam – 15ml with 50ml luke warm at early morning
4. Sithathithylam – 3 – 5ml with 50ml luke warm water at early morning.
5. Meganathathylam – 8 – 16ml with 50ml luke warm water at early morning.
6. Rasa thylam – ¼ balam with luke warm water at early morning. Salt and sour food restricted.
7. Kumattithylam – 8 – 16ml with luke warm water at early morning.
8. Kazharchithylam – 8 – 16ml with luke warm water at early morning.

Emesis:

Marukaraikudineer – 40 – 80ml at early morning.
Emesis procedure should be given according to the patient's health condition.

Internal Medicine:

Level 1:

Kudineer:

Nilavembukudineer – 30 – 60ml twice a day
Chooranam:
Amukkarachooranam – 1 – 2g twice a day with ghee
Seenthilchooranam – 1 – 2g twice a day hot water
Karisalaichooranam – 1 – 2g twice a day with honey

Thiriphalachooranam – 1 – 2g twice a day with hot water.

Thirikadukuchooranam – 1 – 2g twice a day with honey

Parangipattaichooranam – 1 – 2g twice a day with ghee

Nilakadambuchooranam – 1 – 2g twice a day with hot water

Nei:

Venpoosaninei – 15ml twice a day

Senkottainei – 15ml twice a day

Thanneervittannei – 10ml twice a day

Manapagu:

Madhulaiamanapagu – 10 – 15ml twice a day with hot water

Adathodaimanapagu - 10 – 15ml twice a day with hot water

Ilagam:

Venpoosaniilagam – 5 – 10g twice a day

Mahavallathilagam - 5 – 10g twice a day

Kumariilagam – 5 – 10g twice a day

Thaneervittanilagam – 5 – 10g twice a day

Karisalaiilagam – 5 – 10g twice a day

Impooralilagam - 5 – 10g twice a day

Kuzhambu:

Navacharakuzhambu - 130mg with palm jaggery twice a day

Mezhugu:

Rasaganthimezhugu – 500 – 1000mg with palm jaggery twice a day

Gunma kudorimezhugu - 500 – 1000mg with palm jaggery twice a day

Nava uppumezhugu – 100 – 200mg with palm jaggery twice a day. Only milk rice.

Idivallathimezhugu – 200 – 1000mg with palm jaggery for 40days.

Take unsalted food. Avoid sex, avoid fish also. Use fried salt, curd, butter milk, ghee, sabe bean, green gram, aria keerai, ponnakannikeerai etc. Apply castor oil to the head and bath.

Nandhimezhugu – 250 – 500mg with palm jaggery twice daily depending upon the ailment. It should be

taken for 12, 25, 45 days. No restriction in food. Can bath in cold water. While taking the medicine apply kumari, sandanaathi, nellikkai, shenbagamthylam to the head and bath to avoid heat.

Level 2:

Parpam:

1. Rasa parpam-65mg(size of rice) with thirikaduguchooranam twice a day for 3 – 5days. Milk rice only. If needed medicine given after 10days for 3 – 5days.
2. Karuvangaparpam - 65mg(size of rice) with thirikaduguchooranam twice a day for 3 – 5days. Milk rice only. If needed medicine given after 10days for 3 – 5days.
3. Thangaparpam – 30 - 65mg twice a day with honey.
4. Pavalaparpam – 100 – 200mg twice a day with honey.
5. Sanguparpam – 100 – 300mg with milk twice a day
6. Kungiliyaparpam – 100 – 300mg with milk twice a day.
7. Muthu parpam – 30 – 130mg with milk twice a day.

Chenduram:

1. Arumugachenduram – 100 – 200mg twice a day with honey or thirikaduguchooranam 1 – 2g.

2. Ayachenduram – 60 – 130mg twice a day with honey.
3. Ayakaanthachenduram – 65 – 130mg with honey twice a day.
4. Gowrichinthamanichenduram – 65 – 130mg twice a day with honey or thirikaduguchooranam 1 – 2g.
5. Ayamanikalabachenduram – 100 – 200mg twice a day with honey.
6. Thangaouram – 130 260mg twice daily with 1 – 2g Amukkarachooranam and honey.

Advantages in Siddha System:

The properties action & uses of siddha herbal formulation which was scientifically proved & coincides in siddha texts.

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