Cross Sectional Study on Madhumegam (Diabetes Mellitus) Patients with respect to "Avathaigal - 10", at Government Siddha Medical College and Hospital, Palayamkottai (May - August2018)

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ABSTRACT

Background

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PG Scholar, Department of Gunapadam <u>drkalaimathi1994@gmail.com</u> *Madhumegam* is one of the major common disease mentioned in siddha literature. This disease comes to end by ten numbers of *avathaigal* which will be correlated to the complication occur in diabetes mellitus. The alarming rate of higher incidences increase as on every year which is confessed upon by the ICMR guidelines - 2005. The statistics says that every tenth of Indian population is being suffered by diabetes mellitus which will be increased 32 million in 2030. WHO projects that diabetes will be the 7th leading cause of death in 2030. Prevalence of diabetes in

10.2% and 9.2% among urban men and rural (men), respectively among woman 8.0% and 6.3% in urban and rural respectively as per the National Health Survey 2015 - 2016 in Tamilnadu.

Aim: This study was designed to evaluate onset and present symptoms of *Avathigal-* 10 in *madhumegam* patients.

Materials & Methods: The study was a hospital based, cross sectional study carried out at government siddha medical college, Palayamkottai, Tirunelveli District, Tamilnadu, India. A total of 70 responders of Diabetic patients more over randomly selected for the study.

Results: In this study diabetics will occur the patients in mostly above 30-40 yrs 10%, diabetics

will occur male patients in 54.3% & Female - 45.7% and onset of avathaigal-10 symptoms occurs in diabetics patients most after 2 years at 20%, presence first symptom-frequent urination at night time 42.88% UTI infection - 4.3%, dryness of tongue-51.4%, Nausea-4.29%, wounds, crams and cyst -10%, diarrhoea-4.29%, other infections 1.43%, TB history - Nil & TB symptoms - nil.

Conclusion:

Avathai-10 symptoms in madhumegam are most prevalence in untreated Diabetes patients.

Keywords:	Madhumegam,	Avathaigal-10,	cross
sectional	study	hospital	based.

INTRODUCTION

In siddha system of medicine disease are classified into 4448 types. According to that sage yugi vaithiya chinthamani Meganoi is classified into 20 types. Madhumegam is one among them which comes under pitha type is called "Thithippuneer",

"InippuNeer""Neerinaiperukkalnoi", and it is correlated with "Diabetes mellitus" in modern system.Diabetesmellitus is ิล chemical condition characterized by frequent and excessive passage of urine with sweetness eventually reading to detoriation of seven body constituents. Diabetes mellitus is chronic progressive metabolic disorder. lt is due to hypoglycemic and hyperglycemic as a common end type for all types of diabetesmellitus is followed by micro and macro vascular complications leading to cardio vascular disease, nephropothy and retinopathy. In this circumstance using and preventing of the non-communicable disease is a major target for medical fraternity and research. so this untreat madhumegam comes to end by 10 number of avathaigal which will be

correlated to the complication occurs in diabetes mellitus.

They are following:

- i Gradual increase in body weight
- ii Increased urination and often mixed with seman.
- iii Dryness of tongue and throat and gas trouble.
- iv Increased thirst.
- Increased frequency in urination and makes mental worry.
- vi Restlessness on bed breathlessness.

vii Appearance of boilswounds and cysts. viii Vomit, tasteless sensation -occurs.

- ix Infection of micro organisms & other infections disease
- x Finally suffer with tuberculosis and cause death.

AIM OF THE STUDY:

To evaluate onset and present symptoms of Avathaigal-10 in madhumegampatients at Government Siddha Medical College and hospital, Palayamkottai, Tirunelveli. www.ijrphr.com **Objective:**

Primary objective:

To evaluate the onset and complication of the *avathai*-10 symptoms.

Secondary Objectives:

To study personal characteristic, may the patients have knowledge about the risk factor (or) complication of madhumegam.

MATERIALS AND METHODS

Questionnaire of this study about personal details.

Study type:

Observational study

Study design:

Cross sectional study (Hospital

based)

Study place:

OPD of Government siddha medical college and hospital, Palayamkottai, Tirunelveli (District), Tamilnadu.

Method of Approach:

- i Face to face
- ii No intervention

Sample size:

Sample size is calculated by the epiinfo, confidence level 95% with estimated population size 158, with

Peer reviewed, Open Access Journal expected frequency 50% confidence limit

5% got a sample size 70.

Further studies were followed with

calculated sample size 70.

Patient requirement:

Inclusion criteria:

- Both gender
- Age above 18 years
- patient already diagnosed as diabetic (madhumegam)
- patients with report of a blood sugar level fasting and post prandial
- patients who are willing to give information.

Exclusion criteria:

- Age below 18 years
- Patients who are not diagnosed as diabetic
- Patients with out the report of blood sugar level.
- Patients who are not willing to give information.

RESULTS



		UTI infection			
		Frequency	Percent	Valid	Cumulative
				Percent	Percent
Valid	no	67	95.7	95.7	95.7
	yes	3	4.3	4.3	100.0
	Total	70	100.0	100.0	

dryness of tongue					
		Freque	Perce	Valid	Cumulative
		ncy	nt	Percent	Percent
Valid	no	34	48.6	48.6	48.6
	yes	36	51.4	51.4	100.0
	Tot	70	100.0	100.0	
	al				

Flatulence					
		Freque	Perce	Valid	Cumulative
		ncy	nt	Percent	Percent
Valid	no	64	91.4	91.4	91.4
	yes	6	8.6	8.6	100.0
	Tot	70	100.0	100.0	
	al				

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TB history& TB symptoms						
		Frequen	Percen	Valid	Cumulative	
		су	t	Percent	Percent	
Vali	no	70	100.0	100.0	100.0	
d						





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any infections



DISCUSSION

Our study conducted in government siddha medical college, Palayamkottai district of Tirunelveli had a total of 70 respondents, out of those 32 female (45.7%) and male 38 (54.3%) were in the age group of 30-40 years 7 responders,41-50 years 17 responders ,51-60 years 26 responders above 61 years 20 responders.

onset of diabetes in the patients 1 -12 months - 8 responders, 1 - 3 years - 36 responders, 4 - 10 years - 17 responders, above 10 years - 9 responders.

Patient that have Genetic history about 34 responders (48.57%).

The most frequent in first symptoms of the responders have frequent urination at night time (42.88%) (fig 1) Responders have UTI infections about 4.3%

(Fig-2) Dryness of tongue about

Peer reviewed, Open Access Journal (51.4%)(Fig-3) Flatulence occurs 8.6% (Fig-4) Sleep disturbance 32.86% (Fig-5) Nausea& Tastelessness 4.29% (Fig-6) Wounds and cyst formation about - 10% (Fig-7) Diarrhoea Presence about 4.29% (Fig-8) other infections 1.43% (Fig-9) TB history & TB symptoms - nil (Fig-10)

CONCLUSION

Diabetes mellitus is a most common non-communicable disease. In this circumstances using and preventing the non-communicable disease is a major target for medical fraternity and researchers.

So patients should be aware this diabetes mellitus and for patient prevent and cure of its complications. They must adviced eating healthy diet and exercise. Aasanas and resistance training (twice a week) is very beneficial for maintaining blood sugar control.

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