A Review on Medications Prescribed for Kalladaippu Noi in Selected Siddha Literatures

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ABSTRACT

Renal calculi are become aware as acute illness but come into existence stage of urolithiasis is a systemic disease that can be a route to end stage renal disorder. On an average 6% of women and 12% men are influenced with renal stone. In modern system of medicine Kalladaippu noi (K.N) was called urolithiasis (Renal stone). Siddharsgifted us a lot of medicinal treasures. Aim was to find distribution of medicinal preparations for the K.Nin selected siddha literatures. Descriptive study was performed in library of Government Siddha Medical College & Hospital Palayamkottai. The prescribed medicines were identified by using Kalladaippu as a key word, and documented from selected authenticated Siddha Publications.Out of 52 medications 25% of medications were mentioned in PothuMaruthuvamby K.N Kuppusamy Muthaliyar. Out of 52 medications 46.2% of *Churanam*was highly prescribed. Out of 52 medicatons, 50% of Herbo mineral, 96.2% of Internal medicines and 3.8% of External medicines were found. Out of 20 single herbal medications 15% of Chirakam and Nallanerunjil were used in high. According to pharmacological actions 11% of diuretic action, 9.5% of demulcent, astringent and tonic action were in high.That medications have definitely a significant role in controlling the K.N. It is the need of time for prevention of such wide spreading disease. Further researches should be conducted on other various measures to gain confidence over the siddhar's natural discipline. Thus it can be done successfully through holistic principles of traditional siddha literatures.

Key Words: Diuretic, Kalladaippu noi, Churanam, Herbo mineral

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Introduction

Renal calculi are become aware as acute illness but come into existence stage of urolithiasisis a systemic disease that can be a route to end stage renal disorder. The increasing prevalence is due to environmental cause and genetic liability. On an average 6% of women and 12% men are influenced with renal stone. Recurrence rate of renal stone is 70-80% in males and 47-60 % in females, with greater number 80% of calcium oxalate stones (Athul Sohgaura et al ,2017).

The formation of kidney stones is connected with serious medical conditions and importance for physicians while assessing and treating the patients. The process of formation of stones in the kidney, bladder, and/or urethra (urinary tract) is known as urolithiasis or renal calculi or nephrolithiasis.

Typical symptoms of acute renal colic are intermittent colicky flank pain that may radiate to the lower abdomen or groin, often associated with nausea and vomiting. Lower urinary tract symptoms such as dysuria, urgency and frequency may occur as the stone enters the ureter. (Jeyashree With Sundaram ,2018). strong basic principles and cultural circumstances, Siddha system of medicine is providing health care solutions to a number of health discussions of the modern era. Though it is a system of medicine, Siddha system is guiding us to conduct a perfect living in this world (Meenakshi et al 2017).

The Siddhars categorized the disease into 4448 types. One among the disease which comes under the disorder of urinary system or visarka uruppugal. In modern system of medicine K.N was called urolithiasis (Renal stone). Siddhars gifted us a lot of medicinal treasures to treat human illnesses.

If we go in search of that particular disease in depth, we may get better medicinal approach to the patients with the disease. Aim was to find distribution of medicinal preparations for the K.N in selected siddha literatures. Descriptive study was performed in library of Government Siddha Medical College & Hospital Palayamkottai. www.ijrphr.com

Siddhapharmacology (Gunapadam) deals with the detailed study of Siddha drugs. This branch of Siddha medicine describes. It is based on the concept of five primordial elements or panchabhootham and taste (suvai) of the

drug. Innumerable varieties of herbs, mineral and animal products find mention in Siddha literature.Based on their origin, raw drugs are categorized into the following classes:

- 1. Plant origin (Mooligaivaguppu)
- 2. Metals and Minerals (Dhathuvaguppu)
- 3. Animal origin (Seevamvaguppu)

The prescribed medicines were identified by using Kalladaippu as a key word, and documented from selected Authenticated Siddha Publications that were Gunapadam moolikaivakuppu part ١, Gunapadam thathujeevavakuppu part II & III, Pathartha (vegetable gunavelakkam kingdom), Pathartha gunavelakkam (mineral and animal kingdom), Pathartha guna sinthamani and Pothu Maruthuvam and Siddha Vaithiya Thirattu.

Gunapadam moolikai vakuppu part I by K. S. Murugesa Muthaliyar (2013) 9th edition published by Indian medicine and Department of Homoeopathy, Chennai 106 and Pathartha gunavelakkam (Vegetable kingdom) by S. Kannusamypillai (2017) re

edition published by B.Rathnayakar and consisting Herbal sons were raw drugs (Mooligai moolaporutkal). It was consisted the herbal details based on Siddha fundamentals, plant part like root, leaves, flowers etc and its medicinal value. Gunapadam thathu jeevavakuppu part II &III Thiyagarajan (2016) 9th edition R. by Indian medicine published by and Department of Homoeopathy, Chennai 106 and Pathartha gunavelakkam (Mineral and animal kingdom) by C. Kannusamypillai edition (2017)re published by Β. Rathnayakar and sons were explaining use of metals and minerals.

The depth of their knowledge in the field of Metals (*Ulogam*), Minerals (*Karasaaram*), Mercury and Arseniccompound (*Pashanam*), Other minerals (*Uparasam*) were clearly described on this text. Raw drugs obtained www.ijrphr.com from animal kingdom were also described on it. *Patharthagunasinthamani* by Kaasim Mohammad Raavuththar(1932) published by B.Rathnayakar and sons have so many varieties of pharmacological and therapeutic uses of siddha raw materials and preparations.

Pothu Maruthuvamby K.N Kuppusamy Muthaliyar(2004) 6th edition Published by Indian medicine and Department of Homoeopathy, Chennai 106 was having medicines related to the systematic diseases.

Siddha Thirattu K.N Vaithiya by Kuppusamy Muthaliyar and K.S Uththamarayan (2016) re print Published by Indian medicine and Department of Homoeopathy, Chennai 106 was containing variety of medicinal preparations with indications.

The data were summarized. Following Index of the text books were denoted through the review article.

G.M. V(I)- Gunapadam moolikaivakuppu part I– K.S.Murugesa Muthaliyar Peer reviewed, Open Access Journal thathujeevavakuppu part II & III– R.Thiyagarajan

P.G. V (Veg)- Pathartha gunavelakkam (Vegetable kingdom) – S.Kannusamy pillai

P.G. V (M&A)-Pathartha gunavelakkam
(Mineral and animal kingdom) –
S.Kannusamypillai

P.G.S- *Pathartha gunasinthamani* – Kaasim Mohammad Raavuththar, Indian medicine and Homeopathy dept.

P.M- Pothu Maruthuvam –K.N. Kuppusamy Muthaliyar

S.V. T- Siddha VaithiyaThirattu – K. N Kuppusamy Muthaliyar, K. S. Uththamarayan.

Above literatures were reviewed and documented medicinal preparations for the K.N. Medicinal preparations were classified from each books by single herbal, Poly herbal, Herbo Mineral, Metallic preparation, External medicines for *Kalladaippu noi*.

G.T.J.

V

(II &III)-Gunapadam

Siddha aspect of Kalladaippu

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www.ijrphr.com The clinical features of Urolithiasis can be correlated to those of Kalladaippu found mentioned in siddha literatures. In siddha is described as а disease texts. it characterized by pain in the tip of genitalia, sudden intermittent obstruction flow of urine, low back pain, pain in loin and groin and presence of small sand like stones in urine.

of siddhars One the named YugiMunivar in his treatise Yugi vaidhya chinthamani 800, elaborately deals with Kalladaippu under the chapter Kalladaippu roganithanam. In this work he has documented in an orderly manner the knowledge of this disease all that is available before him and during his time.

There are also evidences of this disease in the works of other prominent *siddhars*like *Theran* and *Agathiyar*. Some of the common clinical features of this disease found in siddha literature are burning micturition, intermittent flow of urine, nausea and vomiting, fever, low back ache radiating to loin and groin up to the tip of

the genitalia and less frequently hematuria, diarrhea and headache.

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Yugi has classified Kalladaippu into four types based upon the clinical features and affected Mukkutram/uyirthathu as follows,

1. Vaatha Kalladaippu

Pain felt just below the umbilical region and penis characterized by severe colic, dyspnea, abdominal distension, oliguria and constipation.

2. Pitha Kalladaippu

Urine output is reduced with characteristic burning sensation (portrayed as pain similar to introducing a red-hot iron needle into the urethra), passing out of blood colored stone which blocks the ureter causing gnawing and pricking pain along with tenderness.

3. Slethuma Kalladaippu

Excruciating pain in the umbilical region, pain in the joints of upper and lower extremities, low-backache, spasmodic pain, sweating and gradual passing out of white colored granules in the urine.

 4. Thontha Kalladaippu : It is characterized by severe pain and passing out of small, sand like granules in urine.
 Cause and Pathology

According to the principles as found in siddha texts authored by *siddhars*, the cause

www.ijrphr.com for this disease is attributed mainly to dietary factors like intake of muddy and contaminated water food substances adulterated with particles like stones, bone fragments, hair and sand rotten food stuff carbohydrate rich diet frequently and food substances that cause increase in *vatham* humor (*Vayu*).

Yugi in his Vaidya chinthamani also mentions about other factors that make one more prone to this disease such as particular seasons like mudhuvenil (summer) and karkalam (monsoon) and type of habitation of a person (Neithal and mullai).

He also adds some other etiological factors like excessive intake of foods substances of salty, sour and bitter taste and unnecessary controlling of the *vegangal* (natural urges or reflexes) such as micturition and ejaculation which are regulated by *abanavayu* (*vatham* that is Peer reviewed, Open Access Journal

One or more of the above mentioned factors of diet and lifestyle causes derangement of vatham and pithamuyirthathukkal (humours).Vatham (vali) produces dryness and Azhal (pitham) produces heat.

This derangement of humors resulting in increase of dryness and heat in the body leads to concentration of urine and formation of stones. Due to derangement of *vatham*, *abanan* which is one of the components of ten *vayu* (*vali*/*vatham*) is also affected.

Abanan, as already mentioned is necessary for the proper functioning of the reflex mechanisms related to excretory and reproductive systems. All these lead to the onset of the disease and the associated signs and symptoms (Uththammarayan K S (2013) & Murugesa mudaliyar KS (2013)

responsible for the downward flow of *vatham* controlling these reflexes.

RESULT AND DISCUSSIONS



Chart 1: Distribution of total number of medications.

Out of 52, distribution of medications mentioned in text books as follows, In P.Mtext 25%, In P.G.Stext 21.2%, In G.M. V(I)text 17.3%, In P.G. V (Veg) text 15.3%, In G.T.J. V (II &III)text 9.6%, In P.G. V (M&A)and S.V. Ttexts 5.8%.

Distribution of form of medicine 120 100 100 100 80 70 60 46.2 40 30 30.8 25 19.2 15 20 13.3 26 3.8 4 4 1.9 1 1 0 Paththu Decoction Churanam Powder Parpam Chenthuram Oil Mathirai ■ G.T.J. V (II &III) ■ P.G. V (Veg) ■ P.G. V (M&A) G.M. V(I) P.G.S P.M S.V. T Total

Chart 2: Distribution of form of medicine

Out of 52, distribution of form medications mentioned in text books as follows, 25% of Churanam, 19.5% of Decoction, 15% of Parpam, 6% of Mathirai, 4% of churanam, 3.8% of Powder and 1.9% of Paththu. Out of 13 number of Churanam, 46.2% types of Churanam mentioned in **P.G.S**.



Chart 3:Distribution of type of ingredient in medications

Out of 52, distribution of type of ingredients in medications mentioned in text books as follows, 50% of Herbomineral, 38.46% of Single herbal, 3.8% of Poly herbal and Herboanimal and 1.9% of Mineral and poly mineral. Out of seven text books **P.M**have 25% of Herbo mineral medications.

Peer reviewed, Open Access Journal Chart 4: Distribution of mode of administration



Out of 52, distribution of mode of administration mentioned in text books as follows, 96.2% of Internal medicines and 3.8% of External medicines. Of that external medications mentioned in **G.M. V(I)**and**P.G. V (Veg)** texts



Chart 5: Distribution of single herbal remedies among the texts

Out of 20 single herbal medications, distribution of single herbs mentioned in text books as follows, 15% of Chirakam and Nallanerunjil, 10% of Chirupelai, Mavilangu and Yaanainerunjil. And 5% of Citramanakku, Omum, Perumpeelai, Todatsurungi, nilakkadambu, Manjalmullangi, Mullangi and Vellari.





Out of 20 single herbal medications, distribution of pharmacological actions shown as follows. 11% of diuretic action, 9.5% of Demulcent, Astringent and Tonic action, 8.3% of Aphrodisiac action, 7.1% of Lithotriptic and Stomachic action, 6% of Stimulant and Refrigerant actions, 5.9% of Laxative action, 4.7% of Carminative action 3.6% of Deobstruentactons, 3.5% of Rubifacient, 2.4% of Resolvent and 1.2% of Altrative and Emolient actions.

CONCLUSION

Varieties of medications mentioned in the selected classical siddha texts. According the review whole medications were plays a major role in treating kalladaipunoi. It is well understood that each formulas and its ingredients have good activity related to the management of kalladaippu noi. Out layer review about the pharmacological activities of the single herbal ingredients of effective medicationsare more on kalladaippu noi management.That medications have definitely a significant role

in controlling the *kalladaipunoi*. It is the need of time for prevention of such wide spreading disease. Further researches should be conducted on other various measures to gain confidence over the *siddhar's* natural discipline. Thus it can be done successfully through holistic principles of traditional siddha literatures.

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