

**AN OBSERVATIONAL STUDY ON SIDDHA DIAGNOSTIC TOOLS OF  
KANDA PITHAM (TONSILITIS)****Sakthikala S.<sup>1\*</sup>, Indumathy V.<sup>2</sup> and Sasi S. K.<sup>3</sup>**<sup>1</sup>PG Scholar, Department of Noi Naadal, Govt Siddha Medical College, Chennai.<sup>2</sup>PG Scholar, Department of Maruthuvam, Govt Siddha Medical College, Chennai.<sup>3</sup>Professor, Department of Noi Naadal, Govt Siddha Medical College, Chennai.Article Received on  
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Medical College, Chennai.**ABSTRACT**

Kanda Pitham is a clinical entity described by Sage Yugi in his treatise in Yugi Vaithiya Chinthamani- 800 as one among the 42 types under Pitha diseases described in Siddha system of medicine. The study was aimed at delving in depth into the clinical features mentioned under Kanda Pitham and to evolve the standard Siddha diagnostic methods and management for Kanda Pitham. This study was a randomized, observational, single center study with the sample size of 80, suffering from Kanda Pitham. At the end of the study, it can be concluded, that the symptoms of Kanda Pitham are closely resembled the symptoms of Tonsilitis.

**KEYWORDS:** Kanda Pitham, Tonsilitis, Siddha.**INTRODUCTION**

Siddhars are universally supposed to have lived at very early periods and we cannot ascertain their exact period of existence. Agastya siddhar is the chief of all siddhars. Word siddha comes from word 'siddhi'. Siddhi means heavenly bliss. Siddhi refers to 8 supernatural powers ie Ashtama siddhi. Those who attained ashtama siddhi they are called siddhars. They were men of highly cultured intellectual and spiritual faculties combined with supernatural powers.

Man is said to be microcosm, world is macrocosm, because what exist in world, exist in man will. So, Man must be looked up on as integral part of universal nature and not as anything separate from the later. Forces in men are identical with forces of world.

Five elements are the original bases of all the corpora things. Which when destroyed resolve themselves again into elements. Each element is combined with other four elements. Elements cannot be viewed dissociate from other elements. Elements are divided into 2 halves, physical and subtle. Then the subtle is again divided into two equal parts of which one is retained as such and other part is subdivided into 4 equal parts. This process of combination of each of these parts with retained half of other is called Panchikaranam.

Humoural pathology viz wind, bile, phlegm and the relative properties of these humour are responsible for a person physical and mental qualities and disposition, since three humour are called thridhotam.

It is necessary to stress the specialties of siddha system, they are

- (i) Name suggests siddha by making his body fully resistant.
- (ii) Naadi sasthanam-an examination of pulse as a diagnosis, minute variation in pattern of pulse along with correspondence to disease and symptoms.
- (iii) Investigations of urine by Therayar method. Here a drop of oil is dropped on the urine collected early in the morning, depends on the drop of oil spreads on surface of urine as time passes on diagnosis would be made. it is an integral part of en vagai thaervu in noi naadal.<sup>[1]</sup>

In 4448 diseases, pitha disease is classified into 42 types based on Yugi vaidhya Chindhamani.<sup>[2]</sup> In that, the author chooses Kanda Pitham (Tonsillitis). Tonsillitis is defined as inflammation of lymphatic tissue of pharynx especially the palatine. It is caused by group of  $\beta$ -haemolytic streptococcal infection.<sup>[3]</sup>

Tonsillitis is clinically manifests as sore throat with fever, pain on swallowing and cervical adenopathy.<sup>[4]</sup> The prevalence of Kanda Pitham is annual incidence of 100 per 1000 population. It is common in children between 5 to 15 years. Bacterial tonsillitis specifically group A  $\beta$ -haemolytic streptococci is 15 to 30% of children with sore throat and 5 to 15% of adult with sore throat. It is common in winter, although it may occur at any time of year. So the author prefers to select Kanda Pitham based on siddha diagnostic tools naadi, mozhi, sparism, neikuri, manikadai nool.

## MATERIALS AND METHODS

It was a randomized, observational, single centered study. The study on diagnostic methodology and symptomatology of Kanda Pitham (Tonsillitis) The observational study on Kanda Pitham was carried out in the out patients in post graduate department of Noi naadal at Aringnar Anna Govt hospital, Chennai - 106. The study was conducted during the period of December 2017 to December 2018.

The observational study was done in 100 cases, out of that, 80 cases were selected on the basis of clinical symptoms indicated in the siddha text. The study was approved by Institutional Ethics Committee, IEC No: GSMC-CH-ME-5/023/2016

### Inclusion Criteria

1. Sex: Both male and female
2. Fever
3. Sore throat or throat pain
4. Hoarshness of voice
5. Cervical lymphadenopathy
6. Vomiting
7. Dryness in tongue
8. Ulcer in throat

### Exclusion criteria

Symptoms associated with

1. Peritonsillar abscess
2. Diphtheria
3. Infectious mononucleosis
4. Tumour of pharynx
5. Tuberculosis of pharynx
6. Rheumatic fever

## RESULTS AND DISCUSSION

### Age distribution

Among the 80 cases, 70% Of cases comes under below 20 years, 30% of cases comes under above 20 yrs.

**Gender distribution**

Among 80 cases, 57.5% of cases comes under Male, 42.5% of cases comes under Female.

**Food habits**

Among 80 cases, 28.75% of cases come under vegetarian, 71.25% of cases come under mixed diet.

**Udal vanmai**

Among 80 cases, 32.5% of case comes under iyalbu, 25% of cases come under valivu, 42.5% of cases come under Melivu.

**Season of occurrence**

Among 80 cases, 0% of case comes under Karkaalam, 2.5% of cases come under koothirkaalam, 25% of cases come under Munpanikaalam, 40% comes under Pinpanikaalam, 26.25% of cases come under Ilavenil, 6.25% of cases come under Mudhuvenil.

**Regional distribution (Nilam)**

Among 80 cases, 12.5% of case comes under Marutham, 87.5% of cases comes under Neithal.

**Naadi nadai**

Among 80 cases, 52.5% of case comes under pitha kabam, 30% of cases come under pitha vadham, 17.5% of cases come under vadha pitham.

**Naa**

Among 80 cases, in maa padithal 55% of cases comes under present, 45 % of cases comes under absent. In niram 2.75% of cases comes under vellupu. 97.25 % of cases comes under normal. In suvai 97.25 % of cases comes under normal, 2.75 % of cases comes under kaippu. In vedippu 8.75 % of cases comes under present, 78.75 % of cases comes under absent, in vaai neer oorai 87.5% of cases comes under normal, 12.5% of cases comes under increased, 0% of case comes under decreased. In Deviation 100% of cases comes under absent. In pigmentation 20% of cases comes under present, 80 % of cases comes under absent.

**Niram**

Among 80 cases, 46.25% of case comes under karuppu, 45% of cases come under manjal, 7% of cases come under veluppu.

**Mozhi**

Among 80 cases, 0% of case comes under high pitch, 37.5% of cases come under moderate pitch, 62.5% of cases come under low pitch.

**Vizhi – colour**

Among 80 cases, In niram of ven vizhi 0% of case comes under manjal, 31.5% of cases comes under venmai, 7.5% of cases comes under sivappu, 61.25% of case comes under pazhuppu. In keezh imai neeki paarthai 8.75% of case comes under veluppu, 91.25% of case comes under ilam sivappu. In erichal 75% of case comes under present, 25% of case comes under absent.

**Vizhi - lacrimation**

100% of cases and normal individuals had Normal lacrimation,

**Sparisam**

Among 80 cases, In veppam, 50% of case comes under migu veppam, 46.25% of cases comes under mitha veppam, 3.75% of cases comes under thatpam. In viyarvai 85.5% of cases comes under normal, 12.5% of cases comes under increased. In thodu vali 100% of cases come under absent.

**Malam**

Among 80 cases, 28.75 % of case comes under sikkal, 71.5 % of cases comes under normal. In niram, 3.75% of cases come under karuppu. 96.25% of cases comes under manjal, 0% of cases comes under veluppu.

**Neerkuri**

Among 80 cases, In niram 75% of case comes under yellow, 25 % of cases comes under pale yellow. In manam 90% of cases comes under ammonical, 10 % of cases comes under odourless. In nurai, 90% of case comes under absent, 10% of cases comes under present. In edai 100 % of cases come under normal. In enjal 11.25% of case comes under present, 88.75% of cases comes under absent.

**Neikkuri**

Among 80 cases, 6.25% of case comes under vatham, 42.5% of cases come under pitham, 48.75% of cases come under kabam, 2.5% of cases come under salladaikan.

**Deranged vali**

Among 80 cases 62.5% of udhaanan is decreased, 95% praanan is decreased

**Deranged azhal**

Among 80 cases, 95% of cases saadhagam, 18.3% Of cases paasagam baadhippu

**Deranged iyyam**

In kabham 100% of cases avalambagam badhipu, 75% of cases tharpagam bathipu, 18.3% of cases pothagam bhadhipu.

**Udal thathukkal**

Out of 13 cases, 100% of cases had deranged Saaram and senneer. 84.61% of cases had deranged Oon. 69.23% of cases had deranged Kozhuppu, 7.69% of cases had deranged Enbu. 7.69% of cases had deranged Moolai. For all the normal individuals the udal thaathu remain unaffected. Majority of the cases had deranged Saaram, Senneer, Oon, and Kozhuppu.

**Clinical features**

Among 80 cases, 95% of case had throat pain, 62.5% of cases had hoarshness of voice, 46.25% of cases had fever. 18.75% of cases had lymphadenopathy. 12.5% of cases had dryness in tongue. 15% of cases had vomiting, 1.25% of cases had ulcer.

**Occupation**

Among 13 cases, 30.76 % of cases were labour work, 23.07% of cases were business men, 15. 38% of cases were technician, 7. 69% of cases were Driver, auditor, home maker and farmer. In the study, majority of the cases were labour work and business men. Both the categories have more physical and mental stress that derange the normal functions of the body.

**Manikkadai Nool (Wrist circumference)**

42.5% of cases had 7 1/2 fbs wrist circumference, 32.5% of cases had 8fbs and 25% of cases had 8 1/2 fbs .

**Yaakkai Ilakkanam**

Among 80 cases, 13.75% of case comes under pitha vatham, 25% of cases comes under kabha vatham, 47.5% of cases comes under pitha kabam. 2.5% of cases comes under vadha pitham. 6.25% of cases comes under vadha kabam.

## CONCLUSION

The patients with symptoms of Kanda Pitham mentioned by Yugi conformed to majority of symptoms mentioned in the modern literature of Tonsilitis. Thus, this study has validated the symptomatology elucidated by Sage Yugi is similar to Tonsilitis., classified as per International standards. This in turn helps in global acceptance of Siddha system as a well-established one among the other medical systems.

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