

A CROSS SECTIONAL STUDY ON PRESCRIPTION PRACTICES FOR THE TREATMENT OF KAANAAKADI (URTICARIA) AMONG SIDDHA PRACTITIONERS

Dr. S. Elakkiya^{1*}, Dr. N. Sathya² and Dr. M. P. Abdul Kader Jeylani³

^{1*}PG Scholar, Department of Nanju Maruthuvam, Government Siddha Medical College, Palayamkottai, Tirunelveli, India.

²PG Scholar, Department of Nanju Maruthuvam, Government Siddha Medical College, Palayamkottai, Tirunelveli, India.

³HOD & Professor, Department of Nanju Maruthuvam, Government Siddha Medical College, Palayamkottai, Tirunelveli, India.

Article Received on
15 April 2024,

Revised on 05 May 2024,
Accepted on 25 May 2024

DOI: 10.20959/wjpr202411-32670



*Corresponding Author

Dr. S. Elakkiya

PG Scholar, Department of
Nanju Maruthuvam,
Government Siddha Medical
College, Palayamkottai,
Tirunelveli, India.

ABSTRACT

In Siddha literature, it is said that Kaanaakadi (Urticaria) is the result of reaction of our body in response to allergic foods, some medicines and some are idiopathic. The symptoms mentioned are itching / rashes or both are seen in hands, legs & other parts of the body. In modern aspect, Urticaria is defined as edematous and itchy swellings of the dermis. It may be acute (within 6wk) or chronic (more than 6wk). Urticaria may be confused with a variety of other dermatologic diseases that are similar in appearance and are also pruritic. Usually, however, it can be distinguished from these diseases by an experienced clinician. Urticaria is not a contagious disease, unless hives themselves contain a pathogen. More than one fifth of the population suffer at one time. 60% of patients are in the age group of 20-50 years. Incidence is higher in older age group. This documentation will help as a reference for need and management care in cases of kaanaakadi (urticaria).

KEYWORDS: Kaanaakadi, Prescription Study, Siddha Practitioners, Salem.

INTRODUCTION

In Siddha literature, it is said that Kaanaakadi (Urticaria) is the result of reaction of our body in response to allergic foods, some medicines and some are idiopathic. The symptoms

mentioned are itching / rashes or both are seen in hands, legs & other parts of the body. In modern aspect, Urticaria is defined as edematous and itchy swellings of the dermis. Urticaria also known as nettle rash, hives or weals. These lesions disappears in few hours but not exceeding 48 hours. Urticaria looks like raised areas of erythema and edema involving the layers of dermis and epidermis, which are pruritic. Acute urticaria may be caused by allergic reactions to cosmetics, soaps, foods, drugs, infections, insect bites, stings or exposure, environmental factors, latex, undue skin pressure, cold or heat, emotional stress and exercise, among other factors. It may be acute (within 6wk) or chronic (more than 6wk).

Urticaria may be confused with a variety of other dermatologic diseases that are similar in appearance and are also pruritic. Usually, however, it can be distinguished from these diseases by an experienced clinician. Urticaria is not a contagious disease, unless hives themselves contain a pathogen. More than one fifth of the population suffer at one time. 60% of patients are in the age group of 20-50 years. Incidence is higher in older age group. This documentation will help as a reference for need and management care in cases of kaanaakadi (urticaria).

AIM

To analyses the various prescription practice among Siddha physicians in the treatment of KAANAAKADI (URTICARIA) and documenting the drug of choice and line of treatment in Salem.

OBJECTIVE

To enumerate the drug of choice for the treatment of KAANAAKADI (URTICARIA) from Siddha physicians in Salem District.

STUDY POPULATION

Siddha Practitioners Salem district were selected.

STUDY TYPE

Cross sectional study.

STUDY PLACE

Salem District.

STUDY PERIOD

4 months.

SAMPLE SIZE

50 (Government and private siddha physicians)

DATA COLLECTION AND ANALYSIS INFORMATION COLLECTED

The information was collected from Siddha practitioners in Salem district.

QUESTIONNAIRE BASED INTERVIEW

Requested appointment from each Siddha physician practitioner in Salem District.

The study was explained at the time of appointment and the informed consent were collected from the physicians. Data were collected by requesting the physician to answer the questionnaire. Personal information's from the collected data kept confidential.

DATA ANALYSIS

All collected data were analyzed statistically.

STUDY METHODOLOGY

Study was conducted among various physicians treating kaanaakadi. Assessment of study by questionnaire.

Data collection was evaluated. Data were analyzed.

Completion of the study. Submission of the report.

ETHICAL REVIEW

The proposal was submitted to the screening committee to get the approval. Institutional screening committee approved the proposal.

ETHICAL ISSUES

The data from the Siddha Practitioners in Salem kept confidentially. Informed consent was obtained from the practitioners. This study involves only the necessary enquiries. No other unwanted enquiries were done.

QUALITY ASSURANCE

Data collected was reviewed by review board & expert opinion were taken. The whole procedure of the research was supervised by guide & faculty of our department.

CONFIDENTIALITY

The personal information of the participants kept in confidential manner.

INFORMED CONSENT

The participants were informed about the study in their own language. The study was conducted only after their consent.

DISCUSSION

1. Doctor's treating kaanaakadi patients.

Figure - 1



Figure 1: Shows about No. of. Doctors treating Kaanaakadi patient.

2. Common occupation affected by kaanaakadi.

Table 1: Shows about occupation affected by kaanaakadi.

Name of the Occupation	No. of. Doctors
After some viral fever Agricultural farmers	42
Chemicals industry	37
Cement factory	27
Daily wage Lathe work	39
Machinery industry workers	22
Veterinary workers	24
Dye making factory	30
IT employee	18
Housemaid	10
Rural labor	33
Construction workers	6
Textile worker	13
Pharmaceutical employee	17
Agricultural farmers	24
Vit D, Zinc deficiency	30

3. Causes of Kaanaakadi

Figure - 2

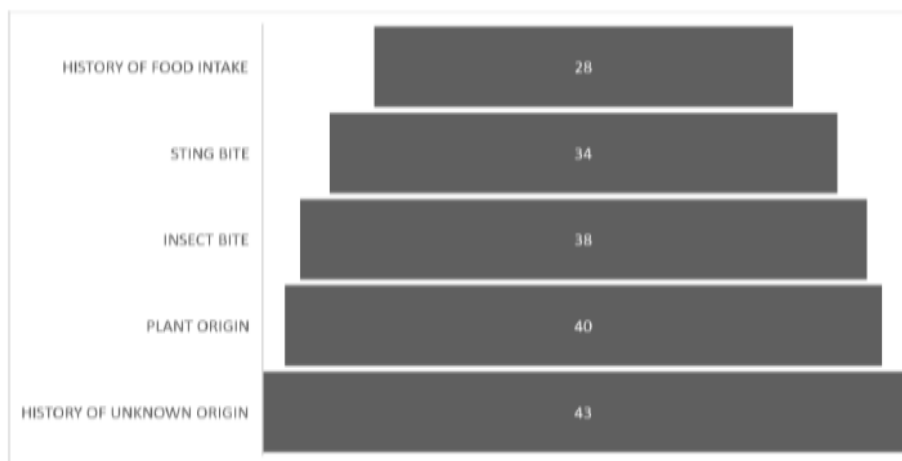


Figure 2: Shows about the causes of kaanaakadi.

4. Details of Detoxification process:

Figure -3

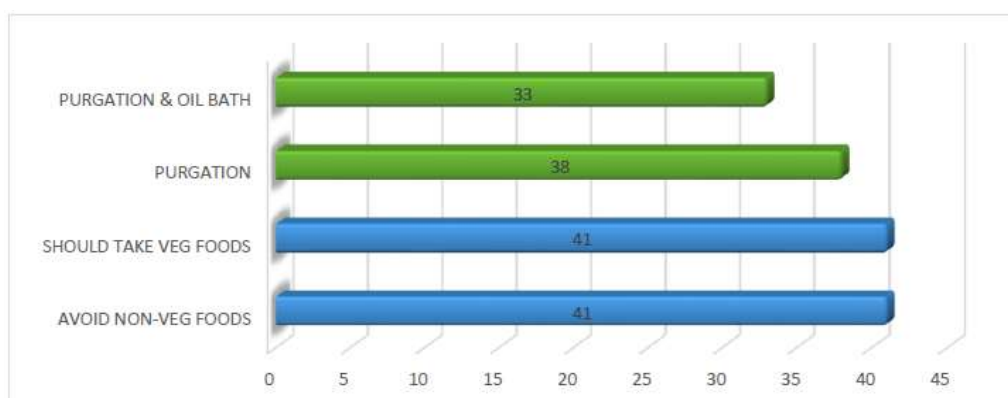


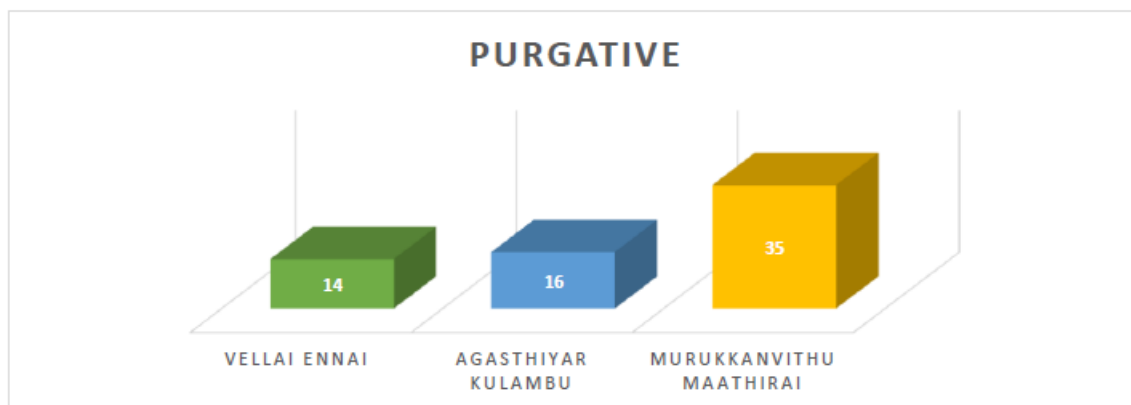
Figure-3: Shows about the details of Detoxification process.

5. Drug of choice for Kaanaakadi treatment

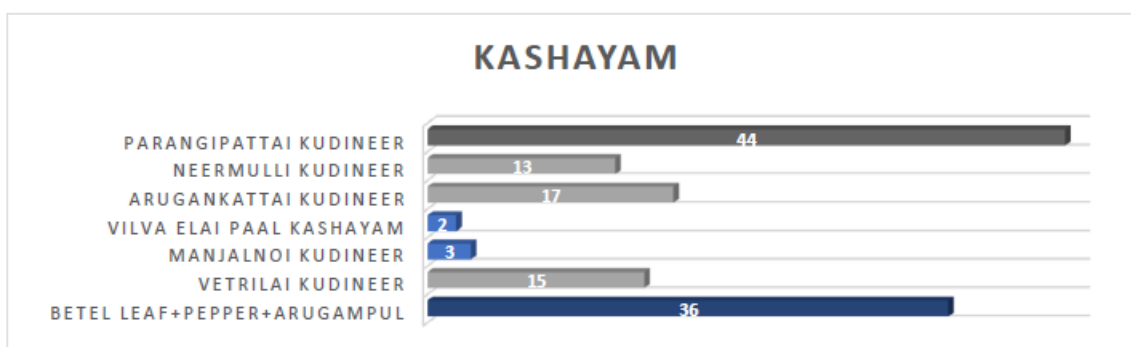
Table 2: Shows about the drug of choice for the treatment of kaanaakadi.

Purgative	1. Vellai ennai 10ml once morning empty stomach 2. Agasthiyar kulambu 130mg with palm jaggery once morning empty stomach 3. Murukkanvithu maathirai 1 or 2 once morning empty stomach
Kashayam 30ml OD/BD	1. Betel leaf+Pepper+Arugampul 2. Vetrilai kudineer 3. Manjal noi kudineer 30ml BD 21 days 4. Vilva ilai pal kashayam 30ml OD 21 days 5. Arugankattai kudineer 6. Neermulli kudineer 7. Parangipattai Kudineer
Chooranam	1. Seenthil chooranam 2. Elathy chooranam 3. Parangipattai chooranam 4. Amukkara chooranam 5. Thaalisaathi chooranam

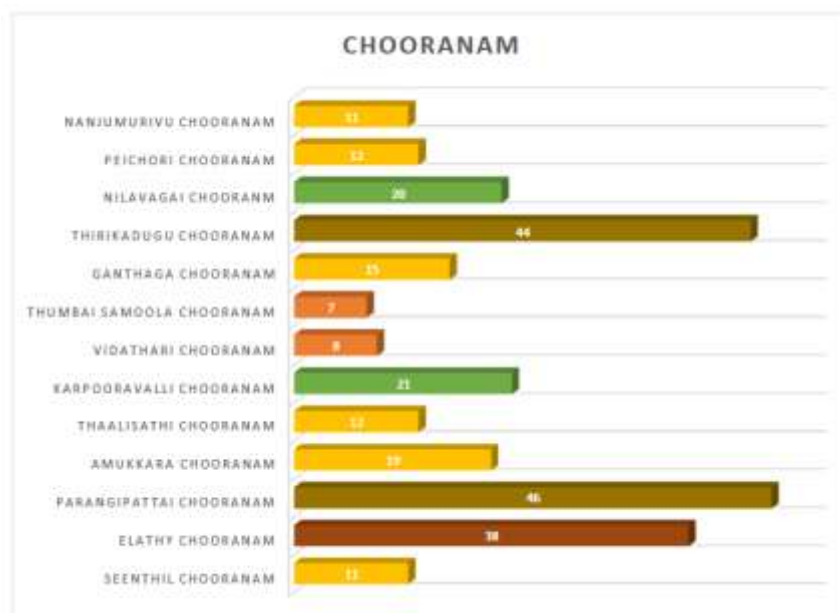
1-2gm with lukewarm water or milk or honey	6.Karpooravalli chooranam 7.Vidathaari chooranam 8. Thumbai samoola chooranam 9. Ganthaga chooranam
	10.Thirikaduku chooranam 11.Nilavagai chooranam 12.Peichori chooranam 13.Nanjumuru chooranam
Parpam 100-200mg	1.Palagarai parpam 2.Sangu parpam 3.Nandukkal parpam 4.Kukkil parpam
Chendooram 100-200mg	1.Annabethi chendooram 2.Ayagantha chendooram 3.Arumuga chendooram
Tablet 1 or 2 with lukewarm water	1.Kadukkai maathirai 2.Sivanarvembukuli thylam capsule 3.Parangipattai chooranam tablet 4.Amukkara chooranam tablet 5.Thaaalisathi chooranam tablet 6.Gandhaga chooranam tablet
Karuppu 100-200mg	1.Sivanaramirtham
Melugu 500mg	1. Ganthagarasayana melugu 2. Rasagandhi melugu
External Medicines	1.Arugan oil 2.Arugan paste 3.Utriplex lotion 4.Karappan oil 5.Mathan oil 6.Pungu oil 7.Sivappu ennai 8. Kuppaimeni powder 9. Thiripala chooranam



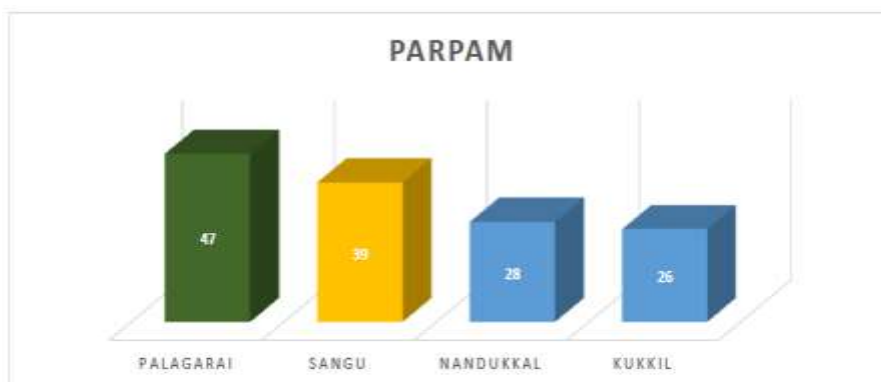
Internal medicine: Figure – 1.



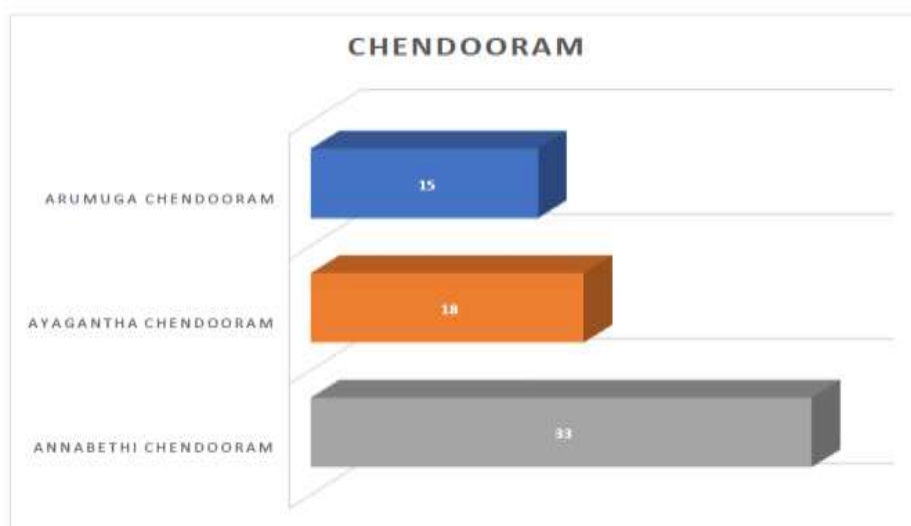
Internal medicine: Figure – 2.



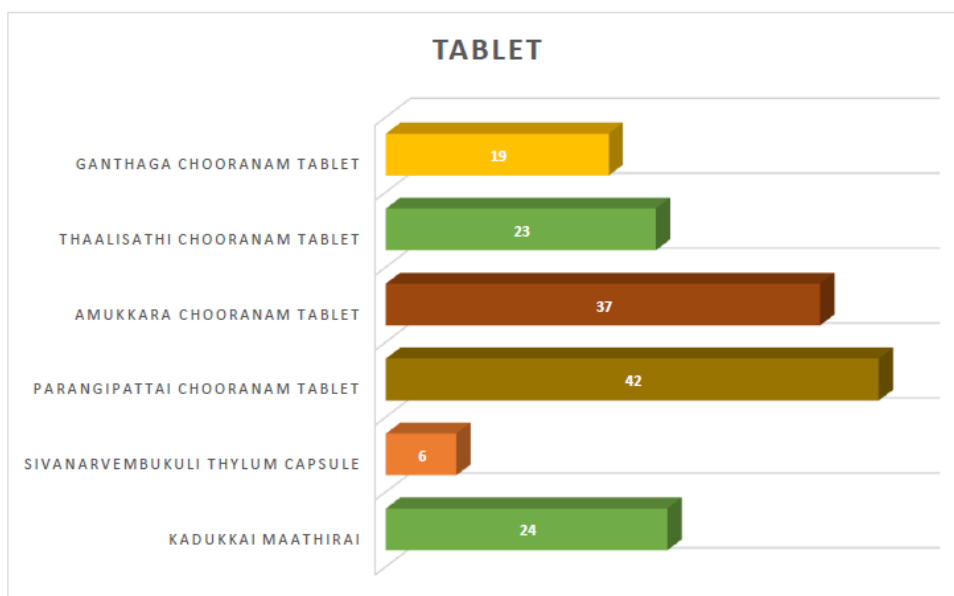
Internal medicine: Figure – 3.



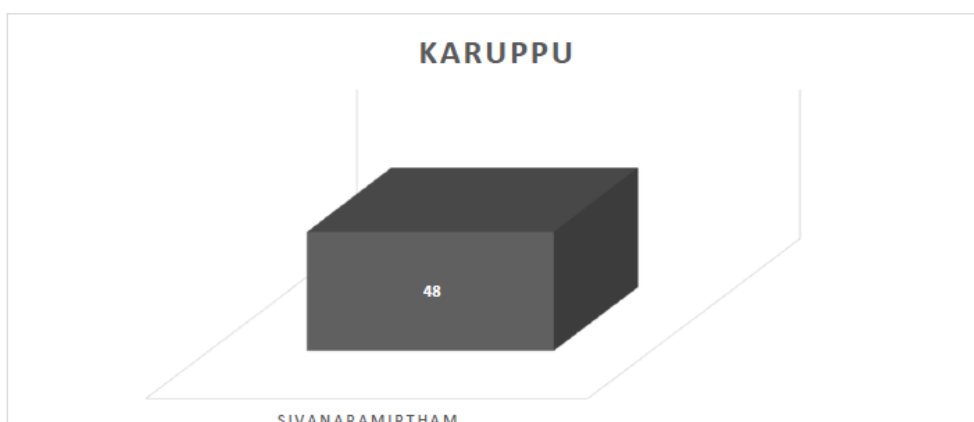
Internal medicine: Figure – 4.



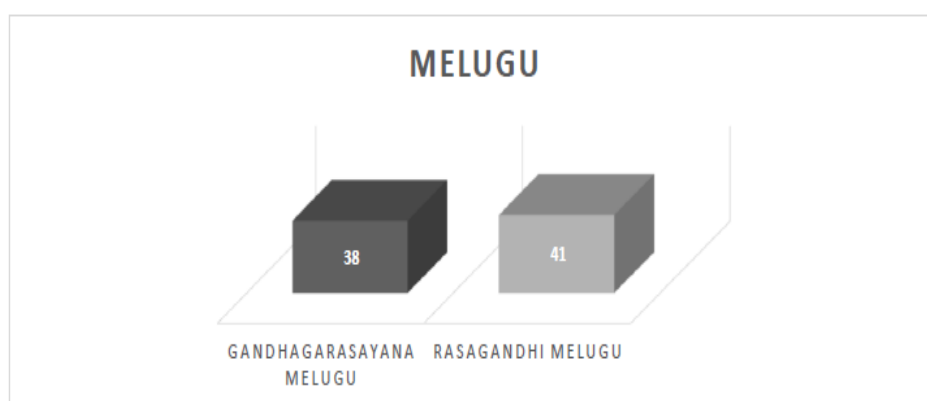
Internal medicine: Figure – 5.



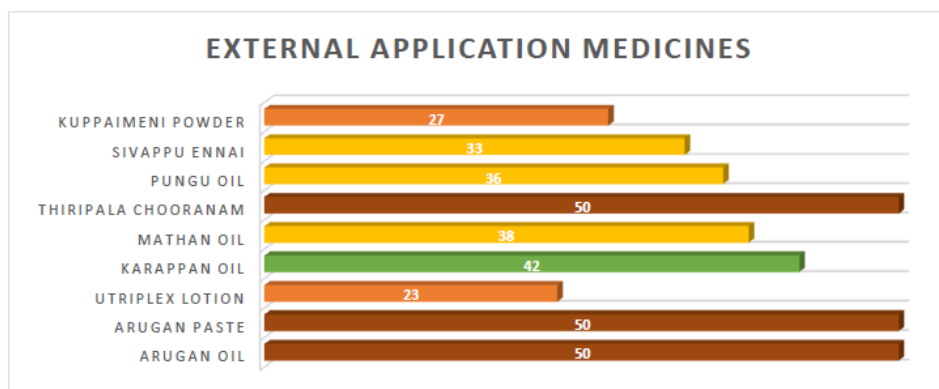
Internal medicine: Figure – 6.



Internal medicine: Figure – 7.



Internal medicine: Figure – 8.



External medicine: Figure – 1.

6. Book Reference for the treatment of kaanaakadi:

Figure – 4

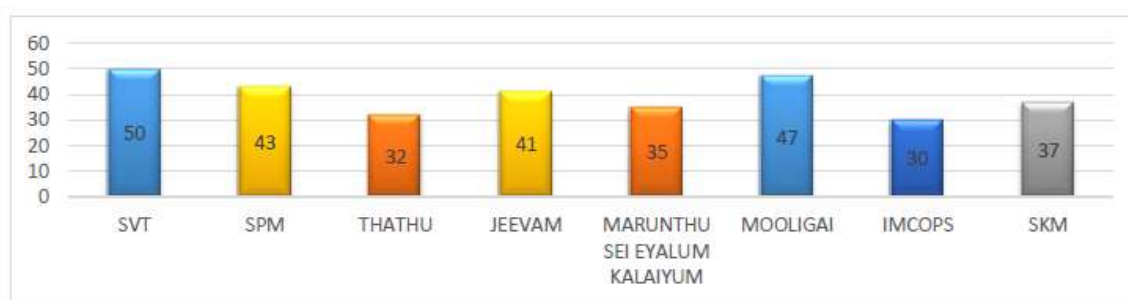


Figure-4: Shows about the book reference for the treatment of kaanaakadi.

Table – 3.

Table 3: Shows about the book reference for the treatment of kaanaakadi.

Kannusamiyam parambarai vaithiyam	1
Nanju murivu nool	1
Pharmacoeppia of Indian medicine	1

7. Yoga therapy for the treatment of kaanaakadi.

Figure – 5

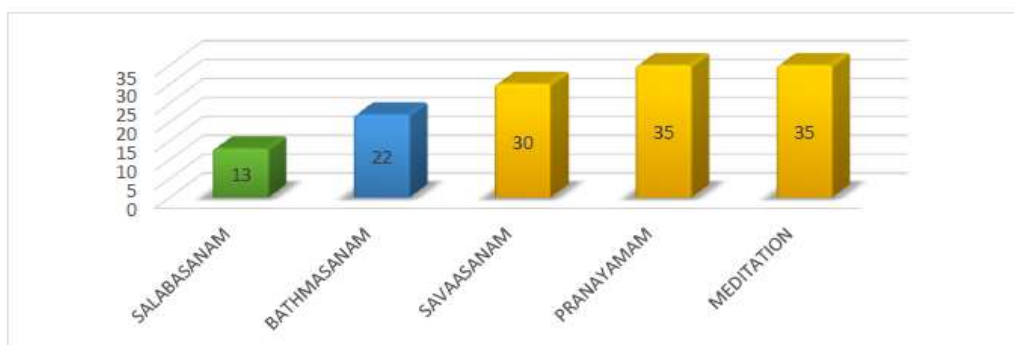
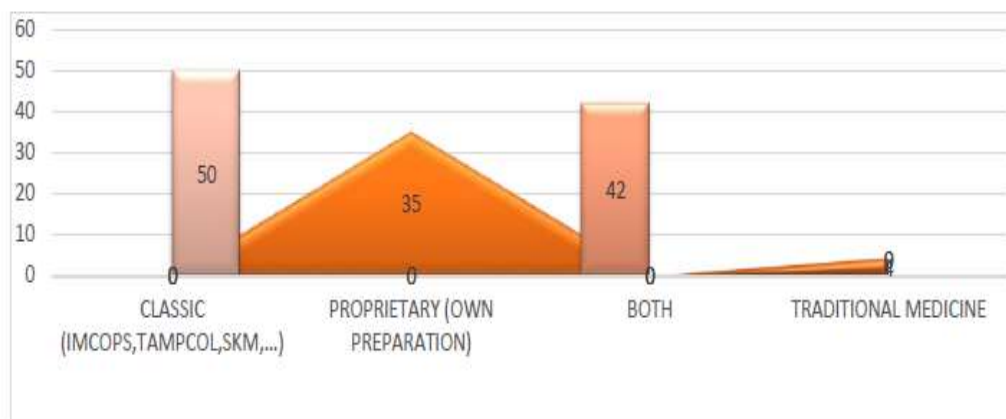


Figure-5: Shows about the yogasanas.

8. Preferable category of medicine.

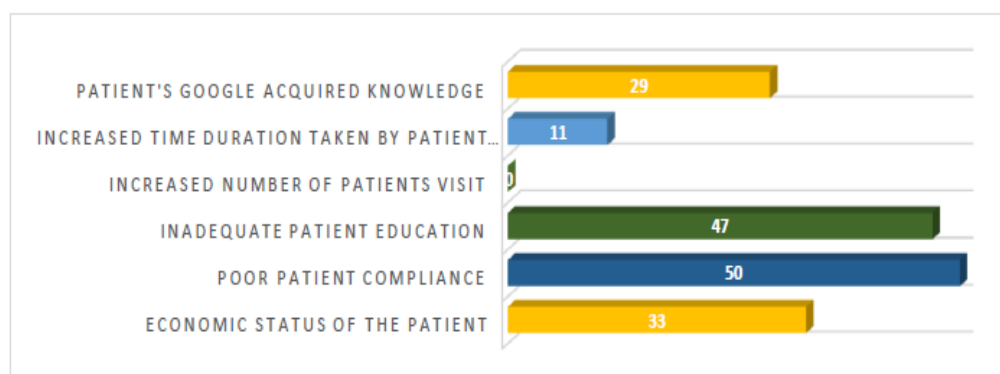
Figure – 6**Figure-6: Shows about Preferable category of medicine.**

9. Paththiyam foods to be avoided.

Table 4: Shows about the details of paththiyam.

Avoid - Non vegetarian foods	Chicken, Egg.
Avoid - Sea foods	Dried fish, Fish, Prawn, Oyster.
Avoid - Vegetarian foods	Agathi keerai(Sesbania grandiflora), Brinjal, Kambu (Pennisetum glaucum), cholan(Sorghum vulgare), Lemon, Orange, Peanuts, Spicy foods, Junk foods, Mushroom, Oily foods, Milk products, Sour tasted food, Gingelly oil, Excess salted foods.
Avoid habits	Smoking, Drinking alcohol.
Avoid climate	Extreme cold, Extreme heat.

10. Factors that affecting doctors dissuade from adopting a treatment plan for kaanaakadi.

Figure – 7.**Figure-7: Shows about factors affecting doctors dissuade from adopting a treatment plan for kaanaakadi.**

11. Prognosis of the disease.

Table 5: Shows about the prognosis of the disease.

Improvement of reduction in symptoms like itching, swelling, redness, blister, pain, fever	44
Improvement by proper intake of paththiyam and medications	38

12. Reason for referring patients to other system of medicine:

Figure - 8



Figure-8: Shows about reason for referring patient to other system of medicine.

13. Reason for patient's non-compliance:

Figure - 9

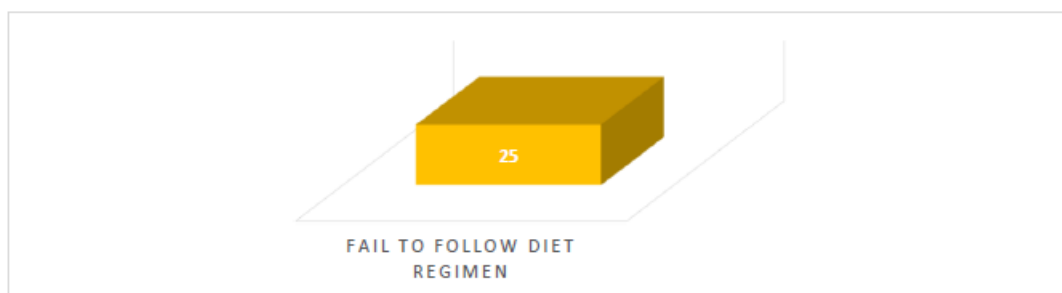


Figure-9: Shows about Reason for patient's non-compliance.

14. Permitting patients to follow other system of medicine during kaanaakadi treatment:

Figure - 10

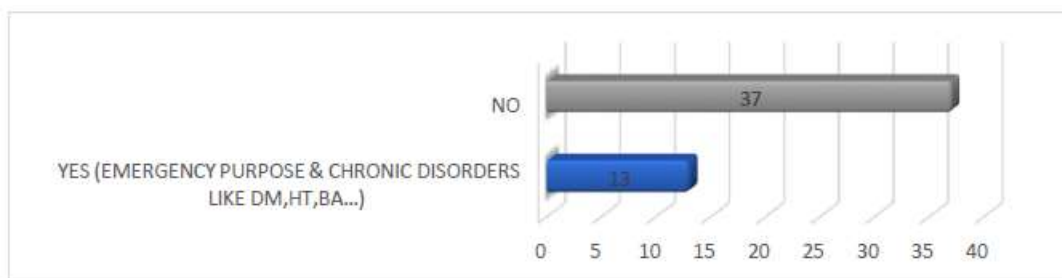


Figure-10: Shows about permitting patients to follow other system of medicine.

15. Average expenditure for the treatment of kaanaakadi:

❖ **Figure - 11**

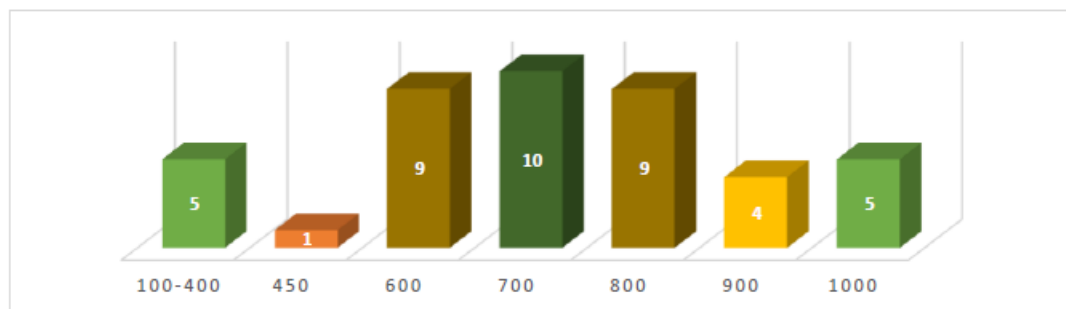


Figure-11: Shows about the average expenditure for the treatment of kaanaakadi.

SUMMARY

The study is about the prescription practices for the treatment of kaanaakadi (urticaria). The participant practitioners came to the line of treatment. Detoxification process is the first line of treatment. On basis of patient body nature (vatha thegi/ pitha thegi / kaba thegi) purgation, oil bath or both were advised. On the other hand, paththiyam foods taking another important place in treating kaanaakadi. Some of sea foods, non-vegetarian foods, vegetarian foods and habits are showing contraindications during medication. Therefore, paththiyam foods was advised by the practitioners. In addition with all other process ashtangayogam also advised by the practitioners. Some of other system of medicine (ayurveda, unani, allopathy, etc.) was allowed to follow by the patient according to his/her health condition. The drug of choice was based on age, weight, yakkai/thega ilakkanam and severity of the disease. The prognosis of the disease was also observed by the participant practitioners. The duration of the medication varied from days to months.

CONCLUSION

This study reveals about the stepping process in the line of treatment for kaanaakadi cases. The result of the study shows about the importance of detoxification process, paththiyam, ashtanga yogam, and drug of choice. This documentation will be beneficial for the upcoming Siddha doctors in treating the KAANAAKADI (URTICARIA).

REFERENCE

1. Dr. R. Thiagarajan, Edition: 2nd edition – 1952, Gunapadam Thathu Jeeva vagupu, paagam 2 & 3, Commissionerate of Indian Medicine & Homoeopathy, Chennai – 106.
2. Dr. K. N. Kuppusamy Mudhaliyar, Dr. K. S. Uthamarayan, Edition: 1st edition-1998,

- Reprint – 2009, Siddha Vaithiya Thirattu, Commissionerate of Indian Medicine & Homoeopathy, Chennai – 106.
3. Dr. J. R. Krishnamoorthy, Edition: 1st -2004, 2nd -2007, Siddha Maruthuvam Vol. 3 Cirappiyal, Tamil Valarchi Kazhagam, University Building Chepauk, Chennai – 600 005.
 4. P. N. Behl. A. Aggarwal. Govind Srivastava, Edition: 10th – 2005, Reprint – 2014, PRACTICE OF DERMATOLOGY, Sathish Kumar Jain & produced by V. K. Jain for CBS Publishers & Distributors Pvt. Ltd., New Delhi – 110002.
 5. Dr. R. Thiagarajan, L. I. M., Edition: 1st edition - 1985, Reprint - 2013, Siddha Maruthuvam Sirappu, Commissionerate of Indian Medicine & Homoeopathy, Chennai – 106.
 6. Vaithiya Rathinam, K. S. Murugesu Mudhaliyar, Edition: 1st -1936, 9th -2013, Gunapadam (porutpanpu nool) mudhal paagam – Mooligai Vagupu, Siddha Materia Medica (Medicinal Plants Division), Commissionerate of Indian Medicine & Homoeopathy, Chennai – 106.
 7. Sarbjit S Saini et al, Allen P Kaplan, Pract. 2018 Jul-Aug, Chronic Spontaneous Urticaria: The Devil's Itch, Published by Elsevier Inc. PubMed. gov.
 8. T. Zuberbier, 13 June 2003, Urticaria, Allergy 2003; 58: 1224-1234. Blackwell Munksgaard 2003. . Google Scholar.
 9. Dominique Dabija, Prasanna Tadi, Gerard n. Danosos., Chronic Urticaria, May 1, 2022., Statpearls Publishing LLC. ncbi. nlm. nih. gov.
 10. K. Rajeswari, CLINICAL EVALUATION OF HERBAL FORMULATION – VILVA ILAI KUDINEER FOR KANAKADI (URTICARIA) IN CHILDREN, 07/10/2022, ISSN 2455-3301. WJPMR.