



**A SINGLE CASE STUDY ON THE SIDDHA MANAGEMENT OF
PERUMANJAL NOI (HEPATITIS-B)**

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ABSTRACT

As per saint Yugi, *Peru manjal noi* comes under the 13 types of *Kamalai*. The clinical features of *peru manjal noi*- yellowish discolouration of urine, generalized weakness, yellowish discolouration of tongue, constipation, mental stress are merely correlated with hepatitis B. Hepatitis B is the most widespread and the most important type of viral hepatitis. WHO estimates that hepatitis B infection causes more than a million deaths per year world wide. Finally, this viral hepatitis develops serious liver diseases like cirrhosis and primary hepatic cancer. Presently the drugs for hepatitis like entecavir, telbivudine, tenofovir are unable to cure the disease, but control the viral replication, also safety and efficacy of these drugs are unknown. As per observation of this study, viral load plays significant role to define hepatitis B. Viral loads are predictive of future risk of developing cirrhosis and hepato cellular carcinoma. Study reveals the phenomenon of significant reduction of HBV DNA viral load and improvement in the symptoms without any side effects.

KEY WORDS: *Peru manjal noi, Kamalai, Hepatitis, Yugi, Siddha, HBV DNA*

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1. Introduction

Hepatitis B infection is caused by the hepatitis B virus, an enveloped DNA virus that infects the liver and causes inflammation. HBV infection can be either acute or chronic, and may range from mild disease to severe. Acute hepatitis B is usually a self-limiting disease which cause acute inflammation and hepatocellular necrosis, with a case fatality rate of 0.5–1% [1]. In some people, Chronic Hepatitis B is inactive and does not lead to liver disease. But in others, it may cause progressive liver fibrosis, leading to cirrhosis with end-stage liver disease, and increased risk of hepatocellular carcinoma [2] HBV infection also causes a significant economic burden in terms of years of life lost from liver disease and accounts for 5–10% of liver transplants [2-3]. It is estimated that worldwide, 2 billion people have evidence of past or present infection with HBV, and 240 million are chronic carriers of HBV surface antigen (HBsAg) [4]. Worldwide, it is estimated that around 650 000 people die each year from the complications of CHB [5]. Currently, seven antiviral agents (lamivudine, adefovir, entecavir, telbivudine, tenofovir, emtricitabine, standard and PEG-IFN) are approved for the treatment of CHB [6]. On the basis of clinical features, hepatitis B can be correlated with peru manjal noi was one among the 13 types of Kamalai as per saint Yugi [7]. In modern science there are no any liver protective medication which can be used in the treatment of hepatitis B, as well as these anti-viral drugs may cause some side effects. By considering this, an effective and safety modalities of Siddha treatments were adopted in the present observation with the intention to reduce the Viral load, progression of disease as well as to provide symptomatic relief. This case can be very helpful for the Siddha management of Hepatitis B.

2. Case Report

A 36 years male patient came to Ayodithossar pandithar hospital, National Institute of Siddha, OPD no:1, with the chief complaints of loss of appetite, Itching and dryness of skin, abdomen pain on/off, Nausea on/off, Generalized weakness, yellowish discoloration of urination and burning micturition. Patient was suffering from above symptoms since 2 years intermittently. No any past surgical history

noted by patient. The personal history of patient and *En vagai thervu* and personal history-general examination findings were observed as noted in table-1 and table-2 respectively

3. Results and Discussion

The treatment was planned as per the line of management as per siddha classics and also keeping in mind to reduce the viral load and also to provide symptomatic relief in hepatic dysfunction. After treatment during the assessment, it is observed that Keezhanelli drug has given significant relief in hepatitis B. It has improved hepatic function along with viral overload. As per Siddha, it is considered as derangement of Pitham humor and Kabham humor associated with altered Vatham, due to lifestyle changes, diet and deeds resulting Kamalai. Among 13 types of Kamalai. Yugi vaidhaya chindhamani Categorized as unresolving 6 types are Kumba manjal noi-coeliac disease, Gunma manjal noi-renal and GIT related disease, Mukkuttra manjal noi - ascities, Sengamala manjal noi-cardiomyopathy/pericarditis, Azhagu manjal noi-urethritis, Perumanjal noi- chronic liver diseases /end stage liver disease. Verses from great Siddhar Yugimuni states

*Vibaramaai moothiranthaan manja laagum
Veengumay sareeramengu noovundaagum
Muparamaai mugakaalkan kaiyunnakkum
Mozhimanja niramaagum mugami nukkum
Abarama yannaththai irangavuttathu
Azhugaiyaai mananjalikku moochundaagum
Thaabaramaai thaathu nasht malamum
pandhang Saarntha manjat kaamalai
thanpae ramay.*

The above song stated that the symptoms of Peru majal noi

Siruneer manjalaagum (Yellowish discoloration of urine)

Udal vanmai kuraiyum (Generalized weakness)
Mugam, Kaal, Kai, Ulnaaku Manjalagum (yellowish discoloration of face, leg, hands, uvula)
Annaththai irangavutathu (Loss of appetite)
Malakattu (constipation)

So, the treatment is planned by keeping following facts in mind:

- Which helps in boosting immune system
- Works at the level of pathophysiological level
- Have the property of antiviral

Table -1 : *Envagai thervugal* (Eight fold system of clinical assessments)

S.No		Siddha investigative parameters	Findings
1		<i>Naa thervu</i> -examination of tongue	
	a)	Niram (Colour)	Normal. No pale/yellowish
	b)	Thanmai (Character)	Coated.no fissure
	c)	Pulan (Sense)	Normal .No bitter / sour taste
2		<i>Niram thervu</i> -examination of colour	Pitha Kapha Thegi
3		<i>Mozhi thervu</i> -examination of speech	Normal
4		<i>Vizhi thervu</i> -examination of eye	
	a)	Niram (Colour)	Mild yellowish
	b)	Thanmai (Character)	Normal.no dryness / gummy secretion.
	c)	Pulan (Sense)	Normal. No defective /night blindness
5		<i>Malam thervu</i> -examination of stool	
	a)	Niram (colour)	Yellow
	b)	Nurai (Forth)	Present
	c)	Elagal/Erugal (Consistency)	<i>Erugal</i> (Constipation)
6		<i>Moothiram thervu</i> -examination of urine	
	I.	Neerkuri	
	a)	Niram(Colour)	Yellow
	b)	Adarthi (Specific gravity)	Increased
	c)	Manam (Odour)	Present
	d)	Nurai (Forth)	Decreased
	e)	Enjal(Deposititis)	Present
	II.	Neikuri	<i>Azhal Neer</i> -oil spreads in the form of ring .
7		<i>Sparisam thervu</i> -examination by touch	Dryness, Itching and warm
8		<i>Naadi thervu</i> -examination of pulse	
	a)	Thanmai (Character)	Feeble
	b)	Nadai (Pattern)	Pitha Kapha Naadi

Table-2: Personal history

Name-XX01	Heart rate -74/mins
Age-36 years	Temperature-Afebrile
Sex-Male	Decubitus-sitting
Marital status-Married	Pallor-Nil
Occupation-Gym trainer	Icterus- present
Sleep –normal	Cyanosis-Nil
Addiction- No	Clubbing- Nil
Food Habit-Non vegetarian	Lymphadenopathy-Nil
Blood pressure-130/80 mm/hg	Oedema-Absent

Clinical Investigations

Haematology	Serology
<p>Complete Blood Count (CBC)</p> <ul style="list-style-type: none"> • Hb % :12.8 gm% • TC: 8500 cells/mm3 • DC P-78% L-20% E-02% • PLT :2.3 ×10³ cells/μL • Liver Function Test (LFT) • T.BIL/D.BIL 2.3/1.5 mg/dl • ID.B 0.8 mg/dl • SGOT 17 IU/L • SGPT 21 IU/L • ALP 73 IU/L • T.P/ALB 7.9/4.5 gm/dl • Renal Function Test (RFT) • UREA 17 mg/dl • CREAT 0.9 mg/dl • Uric acid-6.2 mg/dl 	<ul style="list-style-type: none"> • HBsAg Positive • Anti Hep C negative • Anti HAV IgM negative • Anti HEV IgM negative

VIRAL LOAD

PERIOD	HEPATITIS B VIRAL (HBV DNA) QUANTITATIVE
01/02/2016	21232837 IU/mL
03/02/2017	447 IU/mL
11/07/2018	<40 IU/mL

TREATMENT

As per the references available in the Siddha classics, following classical formulations were prescribed and HBV DNA Viral load was advised after the due course of therapy.

Vaanthi and *Kazhichal Maruthuvam* (For altered *azhal* and *Vali*)

First day

Meganatha Kuligai	2 pills with hot water 20 ml at early morning [8]
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nd

2 day onwards

KUDINEER (DECOTION)

Mandoorathy Kudineer	40-80 ml twice a day [9]
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KARKAM

Keezhanelli karkam	5-10 g with milk 50 ml at early morning*[10]
Avuri ilia karkam	5-10 g with milk 50 ml at early morning*[10]

* For alternate weeks

CHOORANAM

Keezhanelli chooranam	2-3 g twice a day with butter milk (50 ml) [11]
Thalisathy chooranam	1-2 g twice a day with honey (5 ml) [12]
Elathy chooranam	1-2 g twice a day with honey (5 ml) [13]

MANAPAGU (SYRUP)

Madhulai Manapagu	15 ml twice a day with water (50 ml) [8]
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MAATHIRAI (TABLETS)

Saantha santhirodhaya maathirai (100mg)	1-2 twice a day with honey (5 ml) [8]
Bhavana kadukai	1-2 before and after food chewable twice a day [8]

CHENDHURAM

Ayakandha chenduram	65-130 mg twice a day with honey (5 ml) [9]
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PARPAM

Pavala parpam	100-300 mg twice a day with honey (5 ml) [9]
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After recovery oil bath was advised twice a week with any of the following medicated oil.

- Arakku thylam [13]
- Seeraga thylam [8]
- Karisalai thylam [14]
- Santhanathi thylam [14]
- Keezhanelli thylam[13]

PATHIYAM (DIET)

- Rice or *kanji*-rice with butter milk
- Tender coconut
- Sugarcane juice
- Tender vegetables like *murungai* (*Moringa oleifera*), *Avarai* (*Dolichos lablab*), *Kathari* (*Solanum melongena*), *Athi* (*Ficus racemosa*), *Vendai* (*Hibiscus esculentus*)
- Greens like *Ponnaganni* (*Alternanthera sessilis*), *Kaiyaan* (*Eclipta prostrata*), *Manathakkali* (*Solanum nigrum*), *murungai* (*Moringa oleifera*)
- Pulses like *paasi payaru* (*Vigna radiate*), *Ulundhu* (*Vigna mungo*)

AVOID

- Oily foods
- Intake of salt and sour tastes
- Adequate bed rest
- Alcohol should be avoided
- *Kadukkai chooranam* (*Terminali chebula*) 1-2 gram with hot water at evening
- *Katralai karpam* (*Aloe vera*)

YOGASANAM

- Pranayamam
- Pachimothasanam
- Sarvaangasanam
- Padmasanam
- Salabasanam

This treatment modality have an action as it works at the level of hepatic. By keeping above view in mind, The hepato protective drug Keezhanelli chooranam, Karisaalai Karpam, Santhsanthirothayam was planned for strengthening and rejuvenation of liver function. It lowers the viral load on the liver and renormalizes liver functions. It has hepatoprotective activities which help in liver disorders and maintains overall liver health. It reverses the oxidative damage of hepatocytes and exerts overall hepatoprotective actions. Keezhanelli contains Phyllanthin and

hypophyllanthin, which have antiviral property and anti-hepato-toxicity activity. Phyllanthus inhibits proliferation of the hepatitis B virus (HBV) by inhibiting replication of the virus' genetic material; it blocks DNA polymerase, the enzyme needed for the hepatitis B virus to reproduce. Extracts of Phyllanthus amarus inhibit the DNA polymerase of HBV and related viruses [15]. Santha santhirothayam, it lowering of biochemical parameters were observed in CCl₄ induced damaged liver in rat [16]. Ingredients of Mandoorathi Kudineer (decoction) possess heat and its quality allows the herbs and minerals to penetrate up to the cellular level of the tissue thus helps in cleansing the microchannels. Bhavana kadukkai and Madhulai manapagu which helps in combating the features of degenerative functions of liver like anorexia, indigestion, nausea, abdominal pain results in the improving the general condition of health and strengthens the whole body. Pavala parpam was evaluated for its hepato-protective activity. The blood parameters, LFT especially SGOT and SGPT, RFT, were within normal limit after administering the Siddha medicines. At the end of treatment, the patient had marked relief in abdominal pain, itching and dryness of skin, nausea, yellowish discoloration of urine and constipation. Viral load had been decreased from 21232837 IU/mL to <40 IU/mL.

4. Conclusion

The analysis of hepatitis B in terms of Siddha concludes that the hepatitis is a symptom complex where we can correlate based on the symptoms here it had taken as Peru manjal noi and treated accordingly. The treatment methods explained in classic Siddha literature, thereby improving quality of daily life of the person who is suffering. In modern medicine, despite of recent medical advances, even at cellular and molecular level, there are no any liver protective medication which can be used in the treatment of hepatitis B. But in the field of Siddha research, many fruitful medicines and life style modifications have been found for the treatment, prevention of hepatitis B. Siddha system medicine offers holistic approach towards each disease and specific to each person. Further the antiviral drugs which are used in the treatment of Hepatitis B, have some common side effects including fever, headache, mental problems. These drugs are costly and then

safety profile is unknown. While the Siddha medicines are free of these side effects, easily available and less cost than anti-viral drugs in modern medicines. This is a single case study and it needed to be studied in more number of cases.

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How to cite this Article

A.Aishwarya, I.Karthika , T. Lakshmi Kantham.
A single case study on the siddha management of
Perumanjal noi (Hepatitis-B). Int J Trans Res Ind
Med 2019 ; 1(1): 05-11