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Effectiveness of Elumichamkai ennai as oil bath for management of Peenisam (Sinusitis) patients, attending OPD at Aaghim, attached with GSMC, Chennai - A Case series.

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Abstract

Background: Siddha medicine is a form of traditional medicine that originated in South India. That was one of India's most ancient medical systems. Siddhars had given many literatures regarding the routine lifestyle practices that to be followed for preventing many diseases. The oil bath is one such said of all the routine hygienic practices. Oil bath is recommended once in 4 days to bring strength to the five motor organs also known as Panchainderiyangal. Sinusitis (Peenisam) is one among such illnesses that can treated with oil bath. Sinusitis is an inflammation or swelling, of the tissue lining the sinuses affecting a larger population. **Aim:** The aim of the study is to evaluate the Effectiveness of "Elumichamkai Ennai as Oil Bath" in Sinusitis patients, attending OPD at AAGHIM, Chennai. **Methodology and Materials:** The 10 patients were selected, which of both gender and Age between 15-50 years and the trail is done for span of 30 days. The procedure have been be continued as weekly twice for one month (4 weeks) and prognosis status is assessed. The outcome is mainly assessed by reduction in clinical symptoms of nasal obstruction, rhinorrhea, post nasal drip, headache or facial pain, sense of smell before and after the treatment and the improvement of the patient from severe to moderate, moderate to mild (ADELAIDE Symptom Severity Score) ensures the wellness of the patient. **Result:** Results was Promising and of high standards, as it has shown significant

improvement by the end of the study. **Conclusion:** As the literature evidences support the usage of drugs in the disease, also raw drugs are also easily available, and that the efficacy of “ELUMICHAMKAI ENNAI AS OIL BATH” is seemed to be better solution for PEENISAM patients as a result of the clinical trail. And so I hope that this Elumichamkai Ennai will be more beneficial for physicians in terms of treatment and management of Sinusitis.

Keywords: Elumichamkai, Oilbath, Peenisam, Sinusitis, Medicated oil, Adelaide Symptoms Severity Score.

Introduction

Siddha system of Medicine is a complete holistic medical system that has been practiced in India from antient times. Its predominately practiced in south India. The Siddha System is said to have emerged in antiquity, from the highly evolved consciousness of the Siddhars.

Ancient Siddha literatures numbered the diseases as 4448. Among them the diseases pertaining to Nasal region are 86. ‘Peenisam’ is one of the 86 types of Nasal diseases mentioned by Sage Nagamunivar. The term ‘Peenisam’ means an increased flow of mucous from the nose, owing to the inflammation of the membrane or cold in the wind. The signs and symptoms of Peenisam mentioned in Siddha literature may be correlated with Rhinosinusitis in Modern disease of classification.

Sinusitis as per modern medicine concept

Sinusitis is an inflammation or swelling, of the tissue lining the sinuses. The sinuses are four paired cavities (spaces) in the head. They are connected by narrow channels. The sinuses make thin mucus that drains out of the channels of the nose. This drainage helps keep the nose clean and free of bacteria. Normally filled with air, the sinuses can get blocked and filled with fluid. This is also called rhino sinusitis, with “rhino” meaning “nose.” The nasal tissue is almost always swollen if sinus tissue is inflamed.

The paranasal sinuses are located in the head near the nose and eyes. They are named after the bones that provide their structure.

-) The ethmoid sinuses are located between the eyes.
-) The maxillary sinuses are located below the eyes.

-) The sphenoid sinuses are located behind the eyes.
-) The frontal sinuses are located above the eyes.

The biggest sinus cavity is the maxillary cavity, and it is one of the cavities that most often becomes infected. Each sinus is lined with a respiratory epithelium that produces mucus, which is transported out by ciliary action through the sinus ostium and into the nasal cavity. Normally mucus does not accumulate in the sinuses, which remain mostly sterile despite their adjacency to the bacterium filled nasal passages when the sinus ostia are obstructed or when ciliary clearance is impaired or absent, the secretions can be retained, producing the typical signs and symptoms of sinusitis.

Four classifications

-) Acute rhino sinusitis: Sudden onset, lasting less than 4 weeks with complete resolution.
-) Sub-Acute rhino sinusitis: A continuum of acute rhino sinusitis but less than 12 weeks.
-) Recurrent acute rhinosinusitis: Four or more episodes of acute, lasting at least 7 days each, in any 1-year period.
-) Chronic rhino sinusitis: Signs of symptoms persist 12 weeks or longer.

Etiology

Causes are a combination of environmental and host factors. Acute sinusitis is most commonly due to viruses and is usually self-limiting. Approximately 90% of patients with colds have an element of viral sinusitis. Also it can be caused by allergens, irritants, viruses, fungi, and bacteria. Popular irritants are animal dander, polluted air, smoke, and dust.

Prevalence

In worldwide, prevalence of chronic rhino sinusitis ranges from about 12.3 % in the USA, 10.9% in Europe and 13% in China (2020). The prevalence of sinusitis estimated to be 14.7% of the global population. As estimated 134 million Indians suffer from chronic sinusitis. Women are highly affected compared to male (5.7% than 3.4%) and increases with age (2014). Over 75% of the patients had incidence of sinusitis in the age group of 16-45 years, children younger than 15 years of the age(2018) .Approximately 0.5% to 2% adults and 6% to 13% children are complicated by bacterial sinusitis^[2]. The most common etiology was sinusitis caused by infections (26-44%) followed by anatomical obstruction (22-36%) (2016). Of the anatomical obstruction most common was deviated nasal septum in 62% of the case. Prevalence of Chronic rhino sinusitis with nasal polyposis was 1-2.6% and was greater in men.

Chronic rhino sinusitis with nasal polyp is estimated to affect 1-4% of the general population and 25-30% of patients with chronic rhino sinusitis^[3]. Acute rhino sinusitis (ARS) has a one-year prevalence of 6–15% and often occurs after a viral common cold or flu.Chronic rhino sinusitis (CRS) is a significant health problem affecting 5–12% of the general population . Viral rhino sinusitis is more common than bacterial sinusitis.

Symptoms

Major

-) Facial pain/pressure/fullness
-) Nasal obstruction/blockage
-) Nasal or postnasal discharge/purulence (by history or physical examination)
-) Hyposmia/anosmia
-) Fever (in acute rhino sinusitis only)
-) Headaches

Minor

-) Fever (other than acute rhino sinusitis)
-) Halitosis
-) Fatigue

-) Dental pain
-) Cough
-) Ear pain/pressure

Diagnosis

A clinical diagnosis of rhino sinusitis is made if the following two symptoms are present:

-) A feeling of nasal blockage or discharge;
-) Facial pain/pressure;
-) Loss of sense of smell in adults or a cough in children.

If symptoms have been present for less than 12 weeks, the disease is termed ARS. It becomes CRS after 12 weeks.

Sinusitis (Peenisam) as per Siddha concept

Definition

According to Noi Naadal Noi Mudhal Naadal Thirattu part-II

Peenisam is characterized by redness of the nasal mucosal membrane, steering, mild pus and blood.

According to Nagamunivar Thalainoi Maruthuvam

The song for Peenisam is as follows,

“தலைமிகவலிக்கும்நாசிசளிவிழு
மொடுவுண்டாகும்நலிவுறு
தும்மலுண்டாம்நாட்செலில்வறளும்
நாசிமலைவறத்திரண்டுவீழும்
வாயுமேநாற்றமுண்டாம்பெலமுற
மூக்கடைக்கும்பீனிசமென்றுதேரே”

-நாகமுனிவர் தலை நோய்
மருத்துவம், பக்க எண்-109.

According to the text Nagamunivar thalainoimaruthuvam, the symptoms of Peenisam are given as Headache, mucous discharge from the nose, recurrent sneezing, dryness of the nose, halitosis and nasal stuffiness.

Lines of poem breakup Symptomology

-) தலைமிக வலிக்கும் - Severe Headache
-) நாசி சளிவீழு - Mucous discharge from the nose
-) நலிவுறு தும்பலுண்டாம்- Recurrent Sneezing
-) நாடசெலிப்பறளும் நாசி.- Dryness of the nose in chronic sinusitis
-) மலைஹித்திரண்டு விழும்- Increased nasal discharge
-) வாயுமே நாற்றமுண்டாம்.-Bad odour in mouth (halutosis)
-) பெலமுற மூக்கடைக்கும்- Recurrent Sneezing

Synonyms for Peenisam

-) Neerkovai
-) Mookkadaippu
-) Mookuncer paichal

Oil bath

-) The oil bath is one among the routine hygienic practices that to be followed for preventing illness.
-) Oil bath is recommended once in 4 days to bring strength to the five motor organs also known as Panchainderiyangal.
-) The importance of such oil bath had been mentioned in our Siddha literatures such as “*Theraiyar Thaila Varga Surukam, Pathartha Guna Sindhamani*”.

Literature Review

“சதுர்நாட் கொருக்கால் நெய்முழுக்கைத்தவிரோம் ”.
“எண்ணெய்பெறின், வெந்நீரில் குளிப்போம் ” -Theraiyar

) ஆண்கள் புதன் மற்றும் சனிக் கிழமைகளிலும், பெண்கள் செவ்வாய் மற்றும் வெள்ளிக் கிழமைகளிலும் எண்ணெய்க் குளியல் எடுப்பது நல்லது.

Materials and Methodology

-) In the present study, 10 patients were selected who are diagnosed with Peenisam.
-) Patients were enrolled from OPD at AAGHIM diagnosed as sinusitis and have been selected for “ELUMICHAMKAI ENNAI AS OIL BATH” treatment.
-) The diagnosis of the disease was based on conventional criteria for sinusitis and the radiological findings along with supportive parameters such as complete blood profile, ESR, IgE.
-) The patients who are enrolled are informed about the objectives of the study in the language and terms understandable to them and informed consent have been obtained in writing from them.
-) This procedure is continued as weekly twice for one month (4 weeks) and prognosis status is assessed based on Adelaide Symptom Severity Score.
-) Clinical assessment is mainly assessed by reduction of clinical symptoms (Nasal obstruction, Rhinorrhea, Post nasal drip, Head ache or facial pain, Anosmia).

Trial medicine

Elumichamkai Ennai

Reference

“பச்சைமஞ்சள்செம்பீரம்பலவகை த்தண்ணீருழக்காம்எச்சினள்ளின் எண்ணெய்யாமொன்று- நிச்சயமாய்க் காய்ச்சிவடித்துக்களங்கமறச்சென் னியில்தேய்த்திடப்போம்பீனிசங்க ள்தேர்ந்து”

- Agathiyar Vaithiya chinthamani (Page no: 42.)

Duration: Twice in a week for one month.

Ingredients:

1. Raw Turmeric rhizome juice (*Curcuma longa*) -336ml
2. Lemon juice (*Citrus limon*)-336ml
3. Sesame oil (*Sesamum indicum*)-1.3L

then it is filtered and poured into an air tight container.

Study design

Study Type: Case series

Study Centre : Arignar Anna Govt. Hospital of Indian Medicine, Attached with GSMC, Chennai.

Study Period: 3 months

Sample Size : 10 patients (OP)

Standard operative procedure

In a larger vessel take 1.3 L of sesame oil and add each 336ml of raw Turmeric rhizome juice and lemon juice to it. All the mixture are boiled and flicked off at the right consistency of thailam And

Criteria of assessment

Adelaide symptom severity score

Adelaide symptom severity score	Score				
Nasal obstruction	1	2	3	4	5
Rhinorrhoea	1	2	3	4	5
Post-nasal drip	1	2	3	4	5
Headache or facial pain	1	2	3	4	5
Sense of smell	1	2	3	4	5

*1=No Symptoms,2=Mild,3=moderate,4=Severe,5=Extreme.

Result

23 patients who came to the outpatient department of Government Siddha Medical College, AAGHIM who presented with the symptoms of nasal obstruction, rhinorrhoea, post nasal drip,

headache, anosmia. Out of them, ten patients were selected .These ten patients were enrolled based on the eligibility criteria. They were administered for Elumichamkai Ennai head bath for 4 weeks. Their symptoms before and after were recorded.

Inferences:

Table -1: Nasal obstruction:

Patient	Before	After
1	3	1
2	3	2
3	5	3
4	4	2
5	5	1
6	4	3
7	2	1
8	4	0
9	5	2
10	4	0

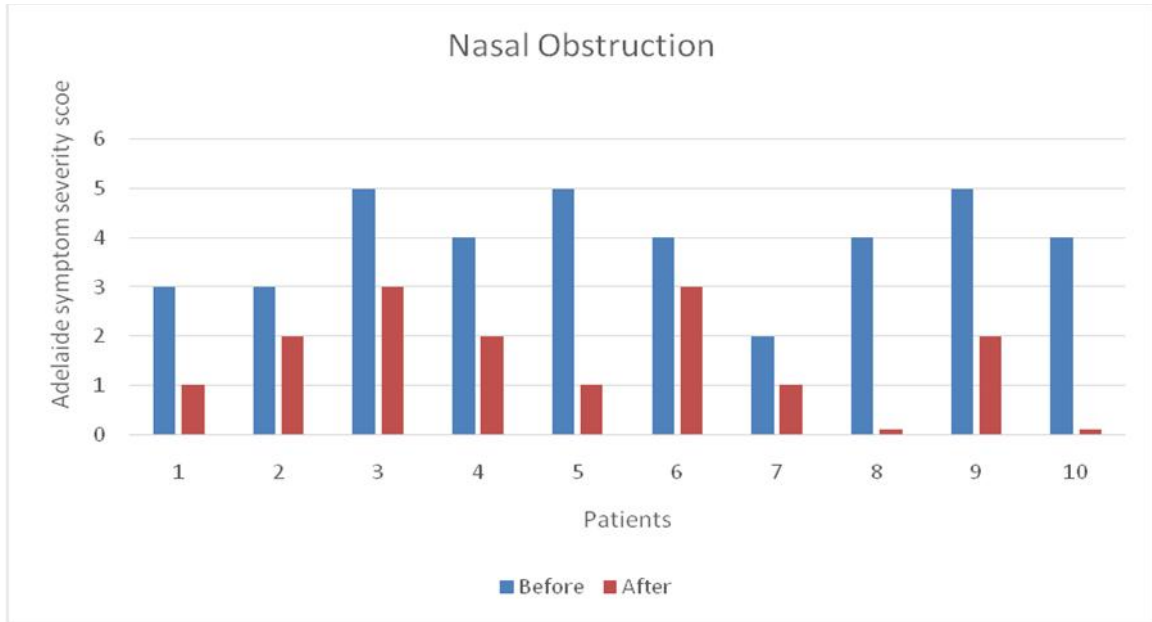


Diagram-1: Nasal obstruction

Table -2: Rhinorrhoea:

Patient	Before	After
1	2	0
2	3	1
3	5	3
4	4	2
5	3	1
6	4	2
7	3	0
8	5	3
9	4	2
10	2	1

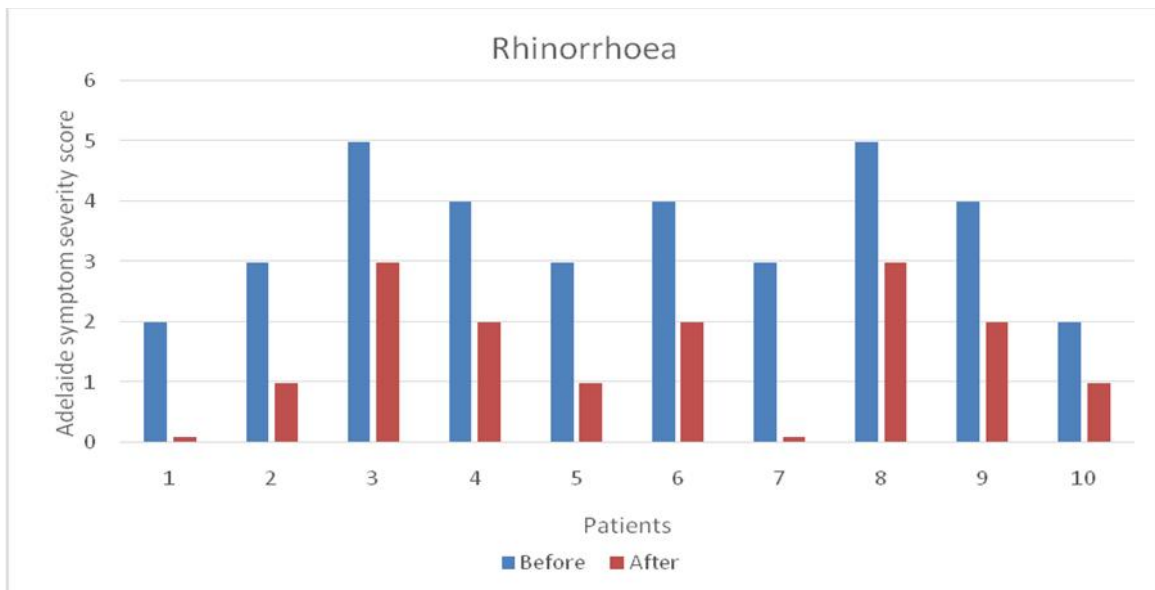


Diagram-2: Rhinorrhoea:

Table -3: Post Nasal Drip:

Patient	Before	After
1	0	0
2	0	0
3	3	2
4	3	1
5	0	0
6	4	2
7	1	1
8	0	0
9	3	1
10	4	3

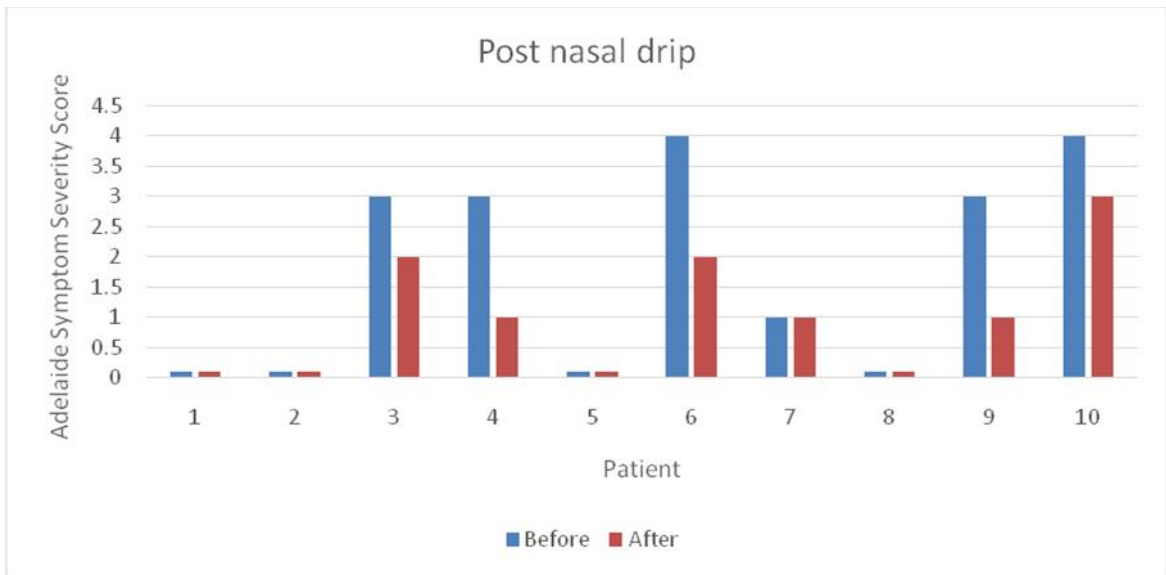


Diagram-3: Post nasal drip:

Table: 4-Headache:

Patient	Before	After
1	3	1
2	5	3
3	3	0
4	2	2
5	3	1
6	5	2
7	4	0
8	2	1
9	5	3
10	4	2

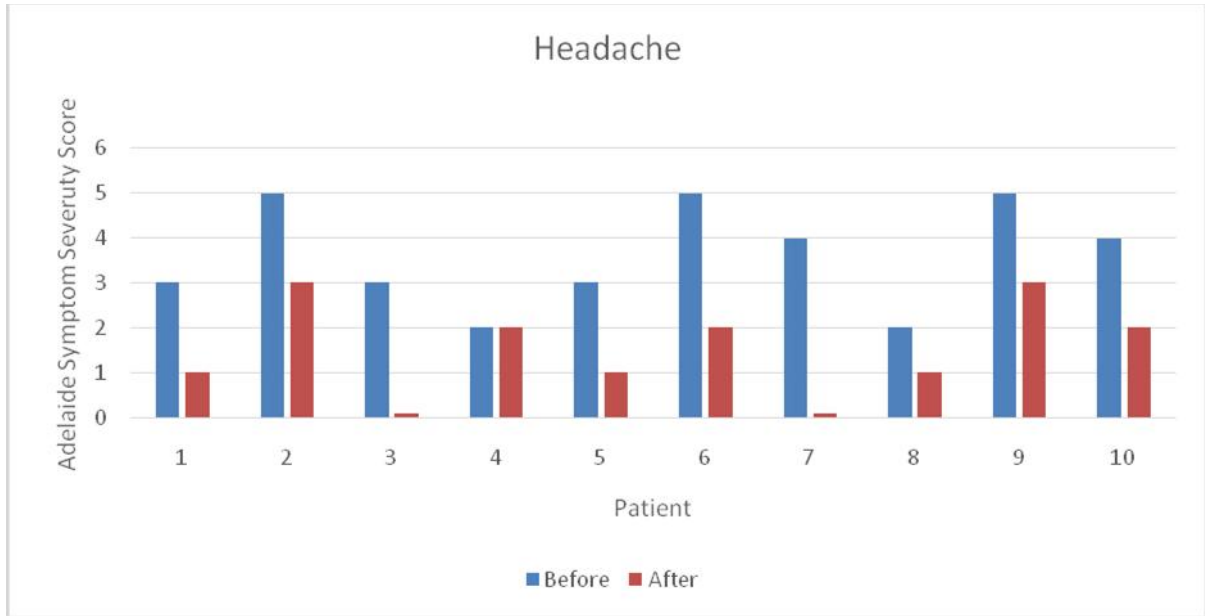


Diagram-4: Headache

Table : 5 - Anosmia:

Patient	Before	After
1	0	0
2	1	0
3	2	1
4	0	0
5	0	0
6	1	1
7	0	0
8	2	1
9	2	2
10	0	0

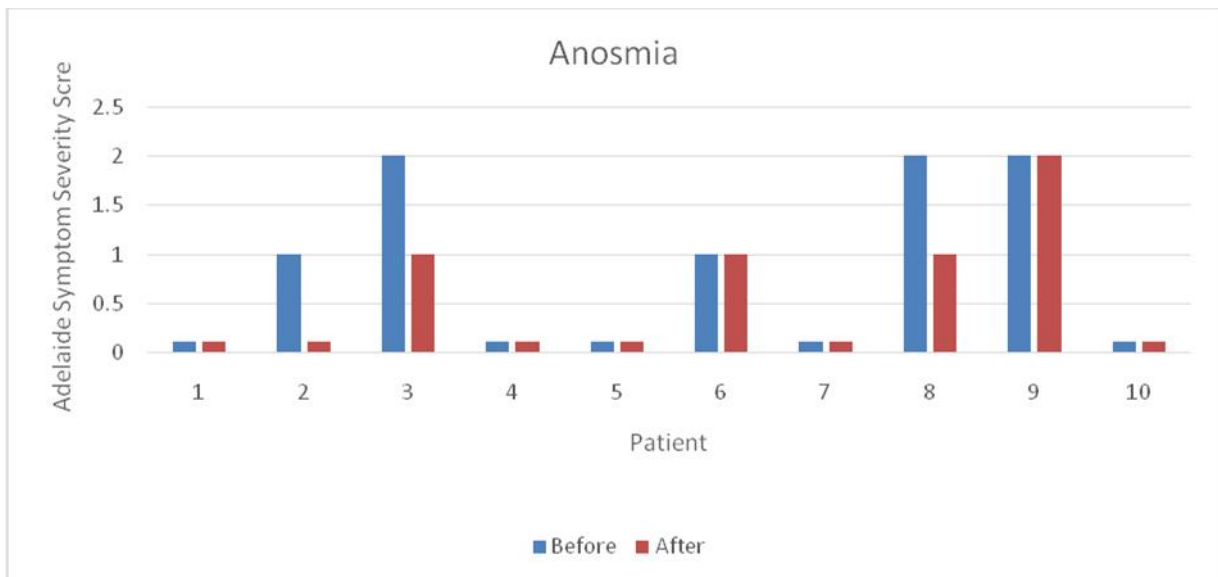


Diagram-5: Anosmia:

Table -6: Distribution of Gender

Gender	Patients	
	Number	Percentage %
Male	2	20%
Female	8	80%
Total	10	100%

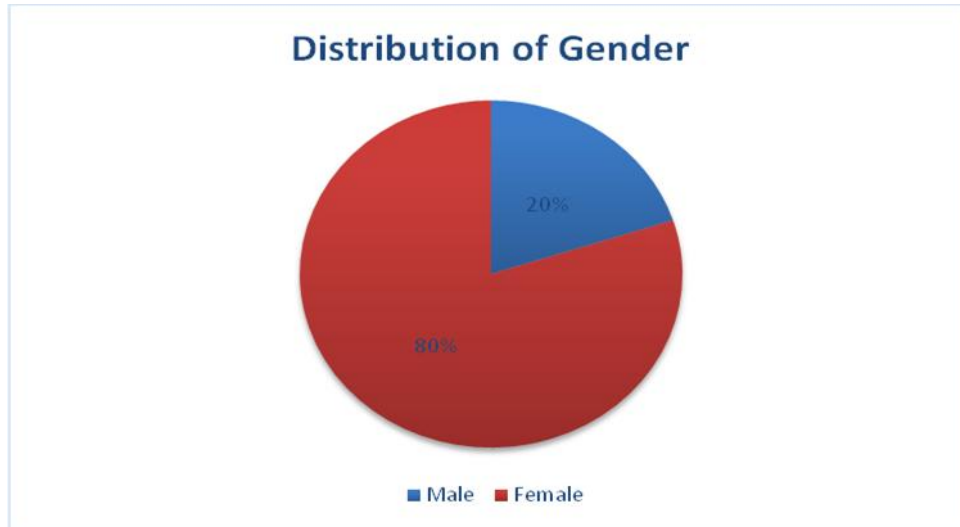


Diagram: 6 -Distribution of gender

Table-7: Age distribution:

Gender	Patients	
	Number	Percentage %
15-20 YRS	0	0%
21-30 YRS	4	40%
31-40 YRS	5	50%
41-50 YRS	1	10%
TOTAL	10	100%

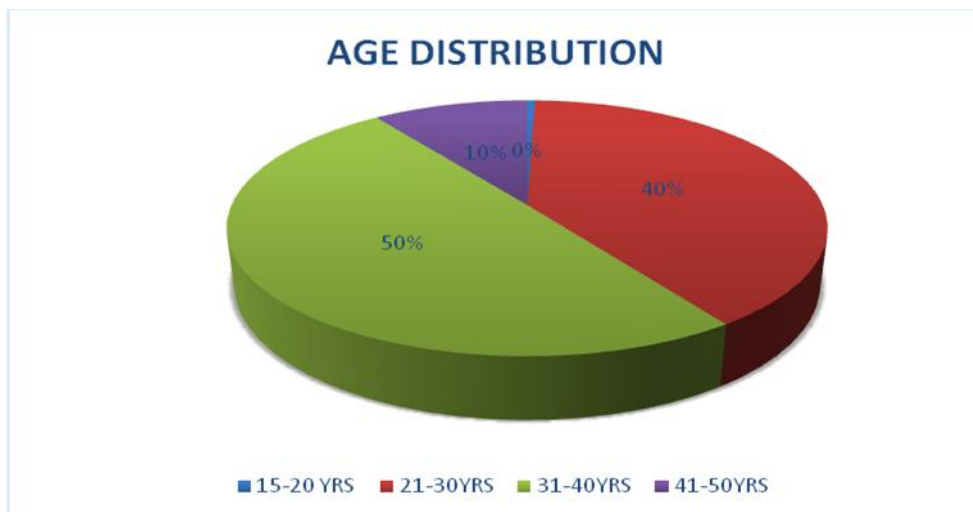


Diagram: 7 -Age distribution

Discussion

Sinusitis is an inflammation or swelling, of the tissue lining the sinuses. The sinuses are four paired cavities (spaces) in the head. They are connected by narrow channels. The sinuses make thin mucus that drains out of the channels of the nose. This drainage helps keep the nose clean and free of bacteria. Normally filled with air, the sinuses can get blocked and filled with fluid. This is also called rhino sinusitis, with “rhino” meaning “nose.” The nasal tissue is almost always swollen if sinus tissue is inflamed. The main symptoms reported by the patients are, Facial pain / Pressure /fullness /Headache, Nasal obstruction/blockage, Nasal or postnasal discharge/ purulence, Hyposmia/Anosmia, Rhinorrhea, Recurrent sneezing.

The prevalence of sinusitis estimated to be 14.7% of the global population. As estimated 134 million Indians suffer from chronic sinusitis. Acute rhino sinusitis (ARS) has a one-year prevalence of 6–15% and often occurs after a viral common cold or flu. Chronic rhino sinusitis (CRS) is a significant health problem affecting 5–12% of the general population. Viral rhino sinusitis is more common than bacterial sinusitis.

In this study patients came with a complex of symptoms, majority of the people came with the symptoms like headache, rhinorrhoea, anosmia, obstruction of nasal pathway and postnasal drip.

In siddha system of medicine some of the practices and methods are indicated for promoting healthy life by preventing the occurring diseases. One such thing is taking oil bath with gingelly oil (nalennai), mukkuttu nei [Nalennai (Gingelly oil), Aamanakku ennai (Castor oil), Nei (cow’s ghee)] or any other medicated oils are suggested.

So through this study, assessed that Elumichamkai Ennai as head bath oil which reduces the symptoms of Sinusitis. Though the Sample size is very small, the symptoms are well reduced in all cases, if it is larger in size the positive result may be increase.

Conclusion

When Elumichamkai ennai was administered to the patient for head bath, it gives very good result in sinusitis patients, as its highly effective in reducing the symptoms of sinusitis.

As the literature evidences support the usage of drugs in the disease, also raw drugs are also easily available And free from side effects, they are useful for long term purpose. And this drug can be the simple solution for the disease that affect major global population.

The drugs along with yoga & pranayama as a supportive therapy have showed a very good prognosis.

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