

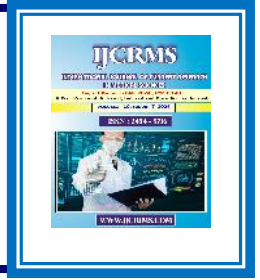


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Effect of Yoga on Soothagavali (Primary Dysmenorrhea) - A case series

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Introduction

SIDDHA, It means the stage of attaining Perfection. Siddha maruthuvam is a Tamil System of medicine and it is believed to be one of the most antiquated and 50,000 year's oldest system of medicine according to historians and linguistic scholars and developed by Siddhars in the Southern part of India. This system is also called as Tamil maruthuvam, Chinthamani maruthuvam and Arivan maruthuvam.

Since the advent of Thirumoolar who wrote the classic THIRUMANTHIRAM this system is popularly called as Siddha system and practiced by Siddhars-The enlightened seekers. The Siddhars have the concept that a healthy Soul can only be developed through a healthy body. So, they developed preventing and protecting methods, Medication and strengthen their physical body and thereby their Souls.

Also they practiced intense Yogic practices, Fasting, Meditation and have achieved Super natural powers named Attama Sithigal and also they gained Supreme wisdom and all above to the stage of Immortality. Through this spiritually attained Supreme knowledge they wrote Scriptures on all aspects of life, truth of life, life style procedures and miracle cure for the diseases.

Siddha system trusts that all objects in the Universe including the Human body are combined of Five basic Primordial elements called as Pancha bootham (Nilam, Neer, Thee, Kaatru, Aagayum) .Also they defined that our Humanbody comprise of 96 Thathuvams(Principles), 72,000 Naadi narambugal (blood vessels and nerves), 7 Udal thathukkal(Physical constituents), 3 Uyir thathukkal(Humours), and Imbalance in these constituents leads to Rogum(Disease). Siddhars

classified the diseases in to 4,448 types. YUGIMAMUNIVAR, a great Siddhar in Siddha system of Medicine, who was born in singalam, explained about many diseases classifies the SOOLAI ROGUM in to 15 types and among them DHOORA SOOLAI is selected for this study.

Pain associated with menstruation is termed as **SOOTHAGAVALI / DHOORA SOOLAI** in siddha system of medicine, also referred as **DYSMENORRHEA** in modern aspect of medicine.

Dysmenorrhea is a major gynecological problem among female adults, Primary dysmenorrhea is characterized by cramping lower abdomen pain that may radiate to the lower back and upper thigh and commonly associated with Nausea stress, headache, vomiting and diarrhea.

Primary dysmenorrhea occupies 20% - 90% of the female population in reproductive age. It affects their academic performance, social activities and is a cause for school absenteeism.

Today's stressful modern lifestyle, lack of physical activities, food habits, frequent intervention of female genital tract affects the uterine environment which leads to higher incidence of dysmenorrhea.

The prevalence of dysmenorrhea world wide ranges 15.8-89.5% for adolescents, The prevalence of dysmenorrhea in India ranges 50-87.89% for adolescents.

It is mainly of two types- primary and secondary.

Primary dysmenorrhea is defined as cramping pain in the lower abdomen occurring just before or during menstruation. **Secondary dysmenorrhea** which is associated with an existing pelvic pathology such as endometriosis.

YOGA is a holistic approach for both physical and mental health. The word yoga means union, joining, or to link together as one whole. Yoga is the art and science of resolving the inherent opposition in all things to create a union of body, mind and soul.

Iyengar [2001] describes yoga as “...**the path, which integrates the body, senses, mind and the intelligence with the self**”.

Essentially all the activities of yoga can be divided into two parts that can be referred to as physical yoga and non-physical yoga.

The National Centre for Complementary and Alternative Medicine (NCCAM) refers to yoga as a mind-body medicine, with its use being recommended as a non-pharmacological tool for managing various non-communicable diseases. Yoga which includes various postures (Asanas), breathing techniques (Pranayama), and meditation has been shown to have therapeutic benefits for individuals with a wide range of health conditions, including hypertension and diabetes.

Some of the scientific components or the elements of physical yoga are:

- Stretching
- Isometric strengthening
- Isotonic strengthening
- Isokinetic strengthening
- Joint range of movement exercises
- One-legged exercises
- Cardiovascular (aerobic) conditioning
- Breathing
- Unilateral nostril breathing
- Sense control
- Concentration
- Relaxation
- Health Visualization
- Meditation.

Yoga asanas strengthens the vital organs of the body and also regulates endocrine system in human which helps to minimize the menstrual pain.

Many such patients with Primary dysmenorrhea visit the OPD of Government Siddha Medical College, Palayamkottai and the effects of the Yoga Therapy is to be recorded for the further evaluation. This serves as the background for this study.

2. Aim & objectives

To evaluate the effect of yoga asanas on Primary dysmenorrhea patients in OPD of Siddhar Yoga Maruthuvam, Government Siddha Medical College & Hospital, Palayamkottai. Through the visual analogue scale (VAS) and Questionnaire before and after the intervention in primary dysmenorrhea.

3. Materials and methods:

A) Study type:

Observational study

B) Study design:

Case series

C) Study place:

Outpatient Department, Department of Siddhar Yoga Maruthuvam, Govt. Siddha Medical College & Hospital, Palayamkottai-627002.

D) Study period:

4 Months

E) Sample size:

20 Patients OPD

F) Sampling procedure:

Non-Random Sampling (Convenience)

G) Criteria for inclusion:

- Age : 15 – 35 years Female
- Patients with Primary dysmenorrhea
Symptoms:

1. Lower abdominal pain
2. Nausea
3. Vomiting
4. Headache
5. Diarrhoea

6. Depression
7. Constipation

- Patient who are willing to sign the informed consent

H) Criteria for exclusion:

- Pregnancy and lactation
- Menstrual regularities other than dysmenorrhea causes

I) Method of approach:

Questionnaires

Visual Analogue Scale

4. Data collection:

Information collected:

Information such as patient's personal details, medical histories, menarche, menstrual symptoms, duration of illness -will be collected.

Data analysis:

Data analysis will be carried out through MS-Excel Software for logical error and manually cross checked for data entry error.

5. Quality assurance:

Data collected is reviewed by review board & expert's opinion are taken. The whole procedure of the research will be supervised by guide & faculty of our department.

6. Human participation procedure:

The study involves human participants with intervention of yoga. Patient was purely recruited based on primary data collection through VAS and menstrual symptoms questionnaire. Thereby voluntary willingness could be get through informed consent document and considered to participate in this study.

Vulnerable populations:

No vulnerable population will be included in the study.

Confidentiality:

The personal information of the participants will be kept in confidential manner

Informed consent:

The participants will be informed about the study in their own language

The study will be conducted only after their consent.

7. Ethical Issues:

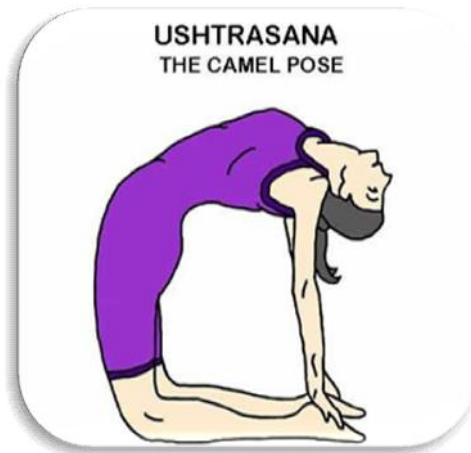
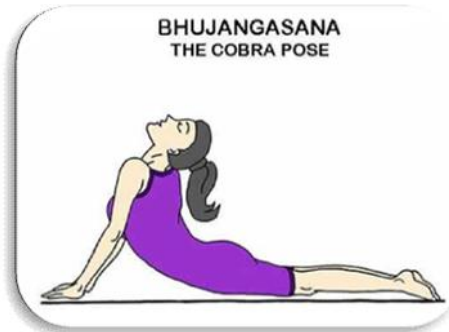
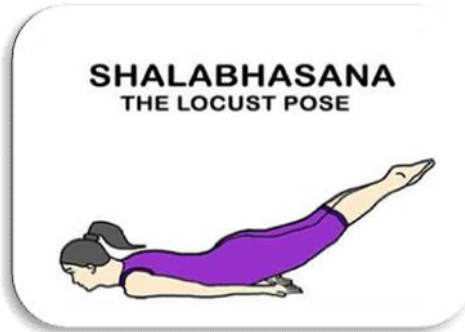
No internal medicines will be used. The data collected from the patient will be kept strictly

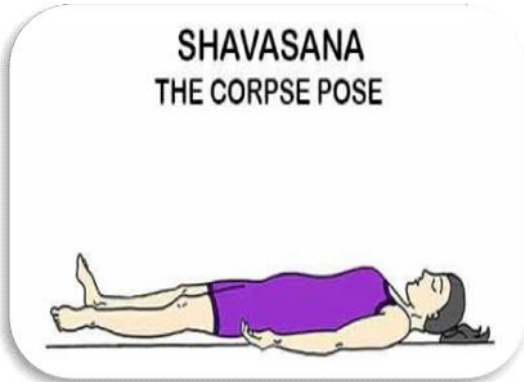
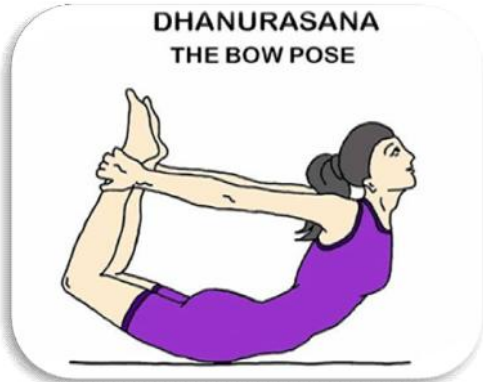
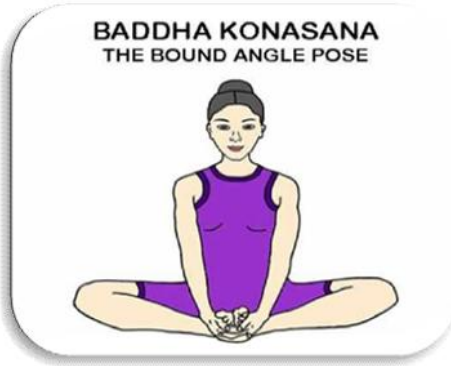
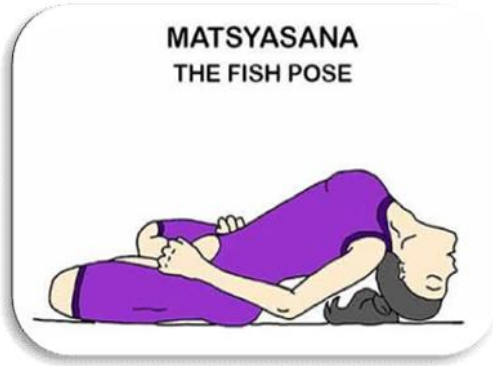
confidential. The Patient will be informed about the diagnosis, treatment and followup. After getting the consent of the Patient (through consent form) they will be enrolled in the study. Informed consent will be obtained from the patient explaining her in language understandable to the patient. Treatment would be provided free of cost.

8. Methods used:

Asanas :

- Salabasanam
- Bhujangasanam
- Vajrasanam
- Ustrasanam
- Matsyasanam
- Paddhakonasanam
- Dhanurasanam
- Shavasnam





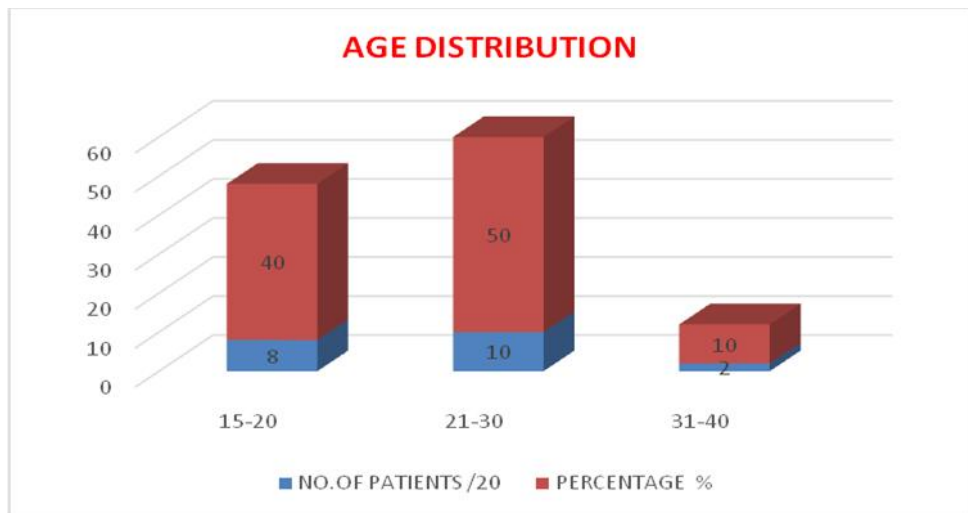
Each asana poses were to be held for at least 20-30seconds and performed for 5 repetitions. Total duration was around 30 minutes with rest of 30seconds between 2 asanas. Shavasana was to be performed at the end for 3-4minutes.

Asanas are to be done twice a day for a period of 12 weeks.

9. Results and observations

1.1 Age Distribution

Age	No.of patients/20	Percentage %
15-20	8	40
21-30	10	50
31-35	2	10

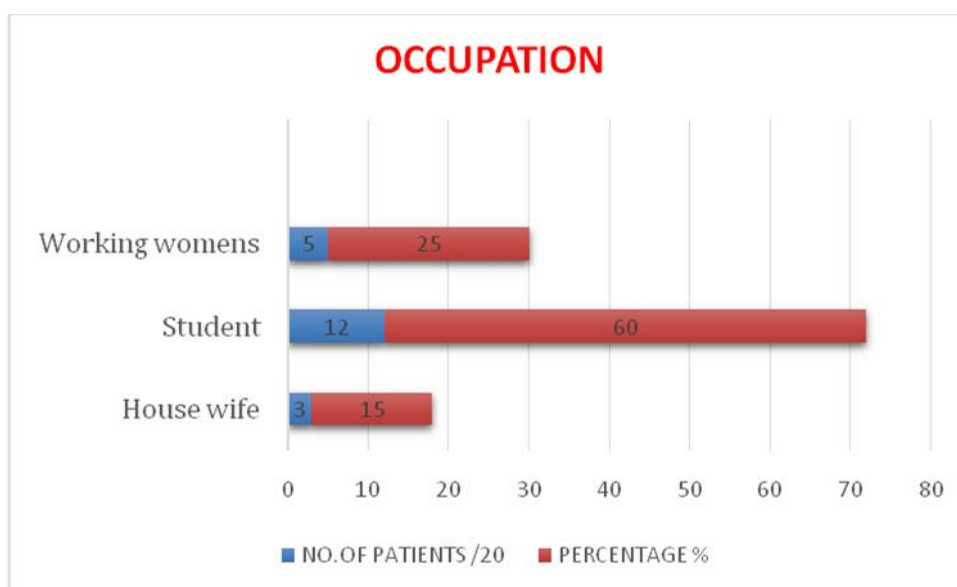


Inference

Out of 20 patients (1.1), 10 patients comes under the age group of 21-30yrs,08 patients comes under the age group of 15-20yrs,02 patients comes under the age group of 31-35yrs.

1.2 Occupation

Occupation	No.of patients /20	Percentage %
House wife	3	15
Student	12	60
Working womens	5	25

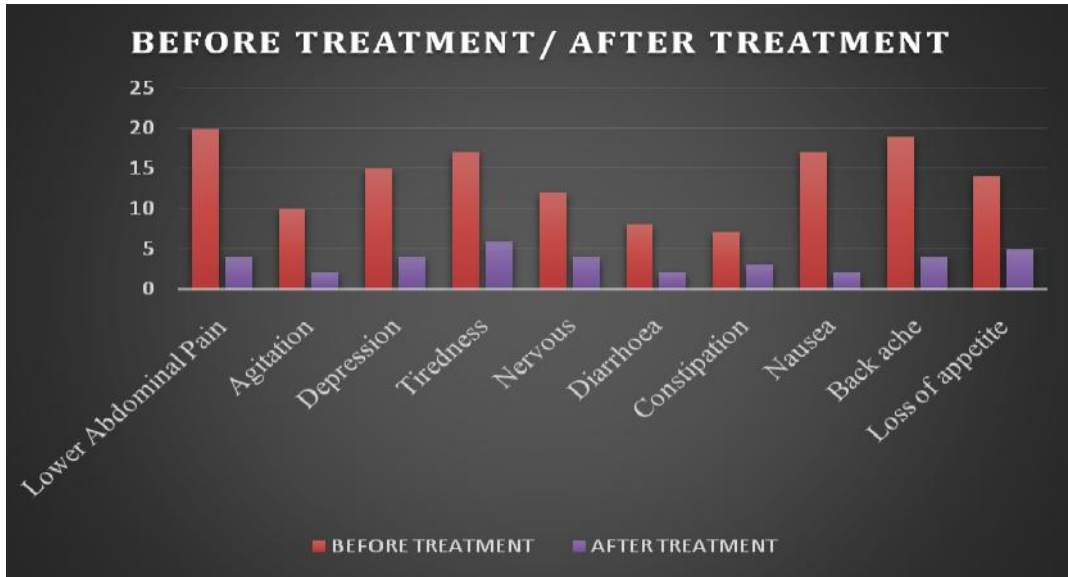


Inference

Out of 20 patients, 60% patients are students, 25% patients are working womens, 15% patients are house wife.

1.3 Clinical manifestation before & after treatment

Signs and symptoms	Before treatment	After treatment
Lower Abdominal Pain	20	4
Agitation	10	2
Depression	15	4
Tiredness	17	6
Nervous	12	4
Diarrhoea	8	2
Constipation	7	3
Nausea	17	2
Back ache	19	4
Loss of appetite	14	5



Inference

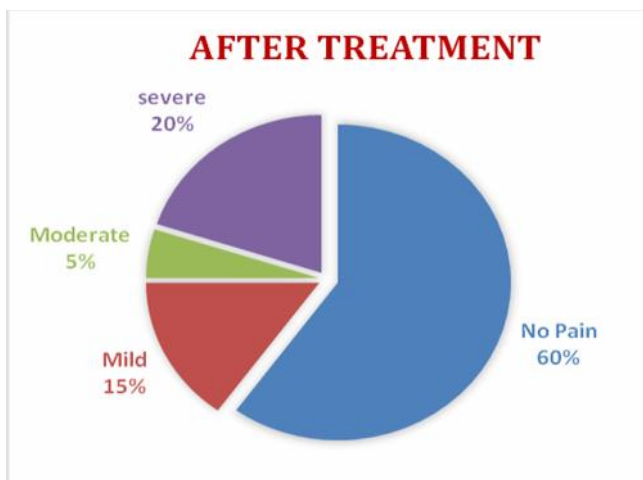
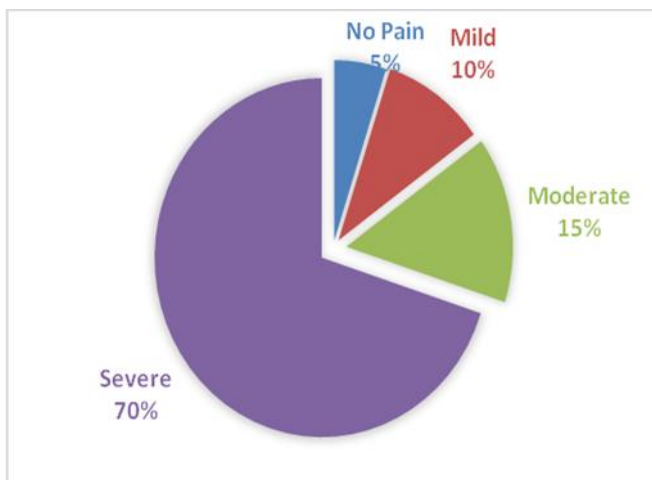
After treatment, out of 20, lower abdominal pain was reduced in 04 patients, agitation was reduced in 02 patients, depression and low backache was

reduced in 04 patients, tiredness was reduced in 06 patients, nausea and diarrhoea was reduced in 02 patients, loss of appetite was reduced in 05 patients.

1.4 Pain assessment -visual analogue scale

Pain		Before treatment	Percentage%	After treatment	Percentage%
No Pain	0	1	5	12	60
Mild	1-3	2	10	3	15
Moderate	4-6	3	15	1	5
Severe	7-9	14	70	4	20
Worst possible pain	10	-	-	-	-

BEFORE TREATMENT

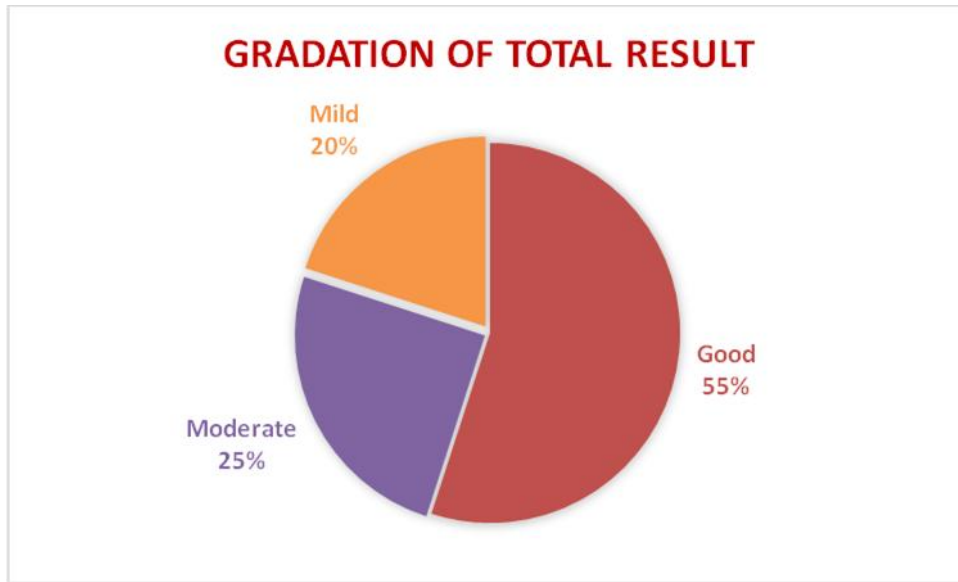


Inference

After treatment out of 20, 60 % had no pain, 15% had mild pain, 20% had severe pain, 5% had moderate pain.

1.5 Result:

S.no	Gradation	No.of cases (20)	Percentage%
1	Good	11	55%
2	Moderate	5	25%
3	Mild	4	20%



Inference:

After treatment, out of 20 patients, 55% had Good improvement, 25% had moderate improvement, 20% had mild improvement.

10. Discussion

Out of 20 patients(1.1), 10 patients comes under the age group of 21-30yrs,08 patients comes under the age group of 15-20yrs,02 patients comes under the age group of 31-40 yrs.

Out of 20 patients(1.2), 60% patients are students, 25% patients are working womens, 15% patients are house wife.

After treatment, out of 20 patients(1.3), lower abdominal pain was reduced in 04 patients, agitation was reduced in 02 patients, depression

and low backache was reduced in 04 patients, tiredness was reduced in 06 patients, nausea and diarrhoea was reduced in 02 patients, loss of appetite was reduced in 05 patients,

After treatment out of 20 patients (1.4). 60 % had no pain, 15% had mild pain, 20% had severe pain, 5% had moderate pain.

After treatment, out of 20 patients (1.5),

-) Good improvement – 55%,
-) moderate improvement – 25%
-) mild improvement – 20%

11. Conclusion

The present study confirms that yogasanam proves to be effective in the reduction of pain and symptoms with primary dysmenorrhea.

Yogasanam is a simple procedure without any side effects and which can be practiced by anyone with minimum flexibility. Now a days adolescent female have very little time to focus on their personal health midst their academic work. Thus a few rounds of asanas daily can help them to prevent and get relieve from primary dysmenorrhea and improves both physical and mental health. With many physiological benefits it can also be suggested that yogasanam included in curriculum in schools and colleges.

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