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A Cross sectional Study On Siddha Diagnostic Tool, *Manikkadai Nool*, among *Brahmiyam Noi* (Leucorrhoea) Patients

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Abstract

Introduction

Leucorrhoea, also known as flour albus, is a thick, whitish, yellowish or greenish vaginal discharge. There are many causes of leucorrhoea, the usual one being estrogen imbalance. It is usually a non-pathological symptom secondary to inflammatory condition of the vagina or cervix. Siddha system implies that diagnosing a disease is essential more than its treatment and prevention. *Manikkadai nool* is one of the unique, non-intervening diagnostic tool in siddha practice which holds 26 output values ranging from 4-11fbs. The methodology of *Manikkadai nool* is an anthropometry measurement based on the wrist circumference and finger breadth of the individual. As per Siddha literature the *Manikkadai nool* value for *Brahmiyam noi* (leucorrhoea) is mentioned as 8 1/4 fbs.

Objective

To calibrate the value of *Manikkadai nool* among patients of *Brahmiyam noi* (Leucorrhoea).

Methodology

This was a cross sectional study carried out among clinically diagnosed *Brahmiyam Noi* (leucorrhoea) patients attended OPD at AAGHIM, Chennai. The sample size was 50 and the sampling selection administrated was purposive sampling.

Result

This study concludes that most of the leucorrhoea (*Brahmiyam noi*) cases have the same *Manikkadai nool* value (8 1/4) as mentioned in the Siddha literature (*Agathiyarsoodamanikayarusootheram*).

Conclusion

The current study standardise the *Manikkadai nool* value for *Brahmiyam noi*(leucorrhoea) patients which would be helpful for earlier diagnosis in future.

Keywords: Leucorrhoea ,Siddha, *Manikkadai nool*, *Brahmiyam noi*,

1. Introduction

Siddha system of medicine is traditional one, with prestigious background of Tamil culture, civilization and indigenous medicine. Disease of mankind are classified into four thousand four hundred and forty-eight types in Siddha system. As per the sage *Therayar*, diagnosis of disease is an important factor in any system of medicine, unless the diagnosis is correct, however best the treatment is, it will end-up in vain, unless the root cause is cleared. In Siddha literature, the symptoms of *Brahmiyam noi* is correlated with the symptoms of leucorrhoea. The term leucorrhoea is strictly defined as an excessive normal vaginal discharge. Secretions from the endometrial glands, cervical glands, and vagina contribute to the discharge. This may be physiological or pathological. An increase in normal vaginal secretions develops physiologically at puberty, during pregnancy, at ovulation, sexual arousal and premenstrual phase of menstrual cycle. Pathological discharge may be infectious or non-infectious. Infectious discharge may be due to specific infection such as Gonorrhoea, *Trichomonas vaginalis*, Chlamydiasis which are sexually transmitted and disturbances in the normal vaginal flora case Moniliasis and Bacterial vaginosis. The prevalence of vaginal discharge was found to be 28.99% in India.[1] In Siddha system diagnosing a disease is essential than its proper treatment. *Manikkadai nool* is one of the unique, non-intervening diagnostic tool in Siddha practice which holds 26 output values ranging from 4-11 fbs. Anthropometry is the science dealing with the systematic measurement of human individual particularly dimensions of body calculations. The measurement concept rooted in its interaction with several factors like the basic nutrition of the individual, psychological conditions, environmental and seasonal influences, and infections [2]. Now a days many new cases of *Brahmiyam noi* is reported due to stress factor and also recorded in OPD at Arignar Anna Hospital of Indian Medicine, Arumbakkam. In order to diagnose above in the earlier stage the author have chosen the *Manikkadai nool* diagnostic technique of Siddha system.

In the study various wrist circumference would be recorded for *Brahmiyam noi* and hence to standardize the same will be helpful for easy diagnosis in future. The aim of the study is to elucidate and calibrate the significance of *Manikkadai nool* among *Brahmiyam noi* patients.

2. Materials and Methods

This was a cross sectional study conducted at outpatient department of Arignar Anna government hospital of Indian medicine. The study was approved by IEC [Institutional Ethics Committee] –GSMC-Chennai. IEC No-3466/ME-2/036/2022. The study was also registered in CTRI [Clinical Trial Registry India] CTRI No-2022/10/046665. The study takes place for 3 months after the registration of CTRI. In this study, 50 female patients of age group between 15 - 45 years were enrolled. The enrolled patients were informed about the study in English and local language Tamil whichever necessary. Informed consent in written was obtained from them.

The inclusion criteria were age group between 15 to 45 years, discharge colour may be white, grey, yellow. Consistency may be thin/thick, curdy/cheesy. The exclusion criteria were patients having vaginal discharge during premenstrual in adolescent girls and pregnancy, sexually transmitted disease like Syphilis, Gonorrhoea, Cervical and Uterine cancer. *Manikkadai nool* diagnostic technique was applied for every patient and the data was collected and analysed. The standard operating procedure of the tool is the wrist circumference measured in finger units on both hands (Right and Left).



Figure 1



Figure 2



Figure 3



Figure 4

The thread is placed in dorsal aspect of four finger shown in figure 1. Then the circumference is measured just below four fingers from the wrist of the correspond hand using a cotton thread shown in figure 2. Then the Ante brachial circumference of wrist is measured which is shown in figure 3.

Then the thread removed from the wrist and measured by placing the thread along the middle of four fingers in dorsal aspect of hand shown in figure 4. Each finger contains 4 units like $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, 1. The total length of thread is counted in terms of finger units.

3. Results

The obtained value is interpreted for diagnosis of disease shown in Table 1 and 2. The nature of the thread should be cotton, Non elastic (should

remain unchanged at any circumstances), Moderately thickened and easy to handle.

Table 1: Distribution of *Manikkadai nool* value in right hand for *Brahmiyam noi*.

S.No	<i>Manikkadai nool</i> value for Right hand	No.of cases [50]
1.	8 fbs	5
2.	8 $\frac{1}{4}$ fbs	33
3.	8 $\frac{1}{2}$ fbs	7
4.	8 $\frac{3}{4}$ fbs	4
5.	9 fbs	1

fbs-finger breadth size

Table 2: Distribution of *Manikkadai nool* value in left hand for *Brahmiyam noi*

S.No	<i>Manikkadai nool</i> value for left hand	No.of cases [50]
1.	8 fbs	4
2.	8 $\frac{1}{4}$ fbs	34
3.	8 $\frac{1}{2}$ fbs	6
4.	8 $\frac{3}{4}$ fbs	5
5.	9 fbs	1

fbs-finger breadth size

4. Discussion

Manikkadai nool measure (wrist circumference) is one of the diagnostic parameters in Siddha system as per classical Siddha text. Previously, a study has been published by Vinod .N.P et al at December 2022 on Validation of *Manikkadai nool*[3]. Another study has done by Vinayak. S et al at April 2022 on Guidelines for reporting diagnostic studies of Siddha anthropometric tool *Manikkadai nool*[4]. But, standardization of *Manikkadai nool* in correlation with disease has not reported yet. Hence, this study was done as an initiative for early diagnosis of Brahmiyam (Leucorrhoea) disease using *the Manikkadai nool* tool. As per Siddha text, 8 ¼ fbs may have the conditions such as indigestion, fever, leucorrhoea, head ache within one year period of time. In the current study, *Manikkadai nool* value ranges from 8 to 9 fbs for leucorrhoea patients. Out of 50 patients, 66 %(33) of leucorrhoea cases had a value of 8 ¼ fbs on their right hand. While, 68% (34) of the cases had a value of 8 ¼ fbs on their left hand. Most of the Brahmiyam patients had 8 ¼ fbs which is correlated with the value as per Siddha literature [5].

5. Conclusion

The study concludes the Siddha diagnostic tool *Manikkadai nool* was found to be relevant as per Siddha literature in the diagnosis of leucorrhoea.

This tool can be used as a cost effective supportive parameter for early diagnosis of Brahmiyam (Leucorrhoea) condition before proceeding to further diagnostic methods.

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