



# ***Sai Siddha Forum***

Bi-Annual Magazine

July 2018 - Issue 2



*Sri*

## **SAI RAM SIDDHA MEDICAL COLLEGE & RESEARCH CENTRE**

(An ISO 9001 : 2015 Certified Institution)

Sai Leo Nagar, West Tambaram, Chennai - 44. [www.sairamsiddha.edu.in](http://www.sairamsiddha.edu.in)



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## Forward Messages

I am delighted to know that Sri Sairam Siddha Medical College is back with the second issue of their bi-annual magazine Sai Siddha Forum. This is a creative as well as a technical material and will remain as a subsidiary skill developing tool for the students. The participation extended by the staff and especially the students is highly appreciable and this also paves a way for frequent knowledge updating in the field of Siddha not only for students but also for the staff community.



I sincerely wish that this magazine would be a fundamental platform for the students to exhibit their skills besides academics. My compliments to the editorial board for their efforts and my good wishes to the Principal, students and faculty of the college to have once again made it successful. I also wish to convey my best wishes for their future endeavors.

With best wishes...

**Sai Prakash LeoMuthu**  
Chief Executive Officer

Good things remain good only because they are scarce. I am glad to pen for this spectacular second issue of the bi-annual magazine Sai Siddha Forum by Sri Sairam Siddha Medical College. I feel very glad about all the events and activities that are conducted by the college. They are consistently making their good efforts to bring out the fine talents of the students as well as the staff. I also sincerely appreciate their efforts for they are striving to be in the limelight. Their novel ideas will always bring them success.



I wish to convey my best wishes to the students and faculties for their joint efforts in the release of the second issue of this magazine. All the very best for their future endeavors and hope they will bring more laurels to the college.

My Best wishes...

**R. Sathish Kumar**  
Co-ordinator

We always believe that education is more beyond the academics and we follow the same in our college. For every issue of Sai Siddha Forum, our team of editors, faculties and students, in addition to generate creative content from the student population, they also work on to establish the events and activities that has happened in the college. In order to channelize the talents of our students, we recently conducted sports and cultural in our college.



We always encourage the students to inculcate Research ideas in them and they have attended Conferences and Seminars in recent days as a part of it. This second issue of our magazine is another feather to our cap which made our students realize their own hidden skills and we feel extremely happy to showcase their talents in our magazine. We consider every issue of the magazine as the first issue and put in our at most efforts to make it successful. I profoundly hope to continue our sincere work and reach greater heights in the future.

**Dr. S. Mathukumar**  
Principal

*Education is the manifestation of the  
perfection already in man*



**MJF. Ln. LEO MUTHU**  
Founder Chairman

*A prodigious altruist and educationist who set a paradigm  
for constancy with conscientiousness and clemency*



## EFFECT OF MADHUMEGA CHOORANAM AND MATHAN THYLAM IN DIABETIC WOUND - A SINGLE CASE STUDY

Dr. A. Lazha MD(s),

Reader, Department of Noi Anuga Vithi including Research Methodology

People with Diabetes mellitus can develop different problems, some times get worsen lead to serious complications. Most common complication is Nerve damage called Neuropathy which leads to loss of sensation. Diabetic foot is associated with major morbidity, mortality and also with reduction of a person's quality of life.

### CASE HISTORY:

Sex	:	Female
Age	:	55years old
Menstrual History	:	Attained Menopause
Marital Status	:	Married
Complaints	:	An Ulcer on the plantar aspect of big toe measuring about 1.5x2.5x1 cm since 1 year.
Past History	:	History of DM since 7 years
O/E	:	Pain, Mild to Moderate oozing, No significant granulations seems to be covered with neurotic fibers of black colour predominantly.
Place of Treatment	:	Sri Sairam Siddha Medical College Hospital

**EVALUATION OF PATIENT:** Envagai thervu

### TREATMENT: Line of treatment

- 1) Madhumegha chooranam 2gm bd with water
- 2) Tiripala chooranam – External wash
- 3) Mathan thyalam – Bd (External) Dressing the wound

- Total treatment period - 2 months.
- On the day of treatment Random Blood Sugar was 318mgs% with above described wound characteristics.
- After 2 weeks of treatment Blood Glucose levels decreased to 187mgs%
- From third week onwards wound shows mild pink color
- At the end of fourth week scattered proliferation of healthy tissue were seen in wound.
- End of 5th week 50% wound healed.
- End of 8th week 90% of wound healed and Random Blood Sugar was 136mgs%

### CONCLUSION:

People living with Diabetes Mellitus are prone to having foot problems. Like Nerve damage, poor circulation, Nail disorders, foot deformity, sometimes complications leads to Amputation. In our College we provided the extra care for the complications followed by the diabetes mellitus. Through our treatment methods and medicines we can prevent the complications of Diabetes mellitus.

### PROACTIVE MEASURES:

- 1) Inspect your feet
- 2) Don't ignore leg pain
- 3) Careful nail cutting
- 4) No bathroom surgery
- 5) Don't go bare foot
- 6) Check shoes and socks frequently.



1st Week



3rd Week



4th Week



5th Week



## Maantham

Dr. N. R. Panneer Selvam MD(s).,  
Reader, Department of Kuzhanthai Maruthuvam

According to Siddha System of Medicine Maantham is the most common paediatric disease encountered in both cities and Villages .In Siddha medicine , it is classified into 21 types and has been described to occur during the first 3 yrs of life .It is also believed to be acquired from mother to the child through breast milk.

As breast milk is the only source of nutrition for the infants, any change in its composition as a result of variation in mother's diet may lead to a greater impact on the child's health.

Siddha Literature says that food that are difficult to digest often results in Maantham. Recent studies have also claimed that those kind of foods increase the level of IgE, thereby causing the cutaneous manifestations like Eczema.

Maantham if left untreated often results in Kanam(corresponds to Primary Complex).It has been prophesized that maantham profoundly affects the nutritional and immune status of the child making them vulnerable to the M. Tuberculosis infection. Further, Maantham is also believed to cause Autism in children. This scenario is drawing increasing attention of the health care professionals these days.

However ,symptomatic treatment often goes in vain. And so, treatment approach should be broad starting right from the birth like our ancestors. Here are some remedies prescribed by them,

- A medicine called Presava Nadai Kala Lekiyam is often given to the women just after delivery. This medicine boosts up the milk production in the mother and enhances appetite in the child.
- A combination of Neem, Ajwain (omam), Turmeric can be ground into paste and shall be given along with Honey.
- A special preparation called Pancha Deepakini Chooranam is made from 5 thoroughly dried and powdered ingredients namely Dried Ginger, Pepper,



Long Pepper, Cardamom, Cumin. A spoonful of this chooranam can be given along with honey in the morning before food.

- Single herbs like Frog fruit (Poduthalai) in the form of surasam and Athividayam in the form of decoction can be given.
- Oil from the Trellis vine (utthamani) can be given in the form of drops / can be applied to the nipples before feeding.

These medicines promote appetite and enhances the digestion, growth and immunity of the child and these medicines are in use since time immemorial. Moreover, even though abortion, maternal and fetal death rates have plummeted due to the efforts of the modern medicines , diseases like Maantham remains as the challenge for modern society .So, it is time for joining the hands of the modern and Siddha medicines for providing the finest health care to the humanity.

Note : Maantham corresponds to Failure To Thrive (FTT).



# TRANSDERMAL DRUG DELIVERY AN OVERVIEW

## INTRODUCTION:

Human skin is ready accessible surface for drug delivery and also receives about one-third of blood circulating through body. In order to understand the delivery of therapeutic agents through the human skin for systemic effects, the comprehensive morphological, biophysical & physico-chemical properties of skin are to be considered. Transdermal drug delivery system can deliver the drugs through skin portal to systemic circulation at a predetermined rate & maintain clinically effective concentrations over a prolonged period of time.

## ROUTE OF TDDS:

For Transdermal drug delivery, drug has to penetrate through all three layers and reach in systemic circulation.

Solute transport in stratum corneum lipid bilayers, Like other lipid bilayer systems stratum corneum is highly anisotropic and size-dependent. Specifically, lipid bilayers exhibit strong structural heterogeneity that results in spatial variations in solute partition and diffuse co-efficients

Transdermal transport of hydrophilic solutes has received less attention than hydrophobic solutes, because hydrophilic solutes generally exhibit low permeabilities that are difficult to measure.

For any molecule to be applied to skin two main routes of skin permeation can be defined

1. Transepidermal route
2. Transfollicular route

### Transepidermal route:

In this route molecules cross the intact horny layers. Two potential micro routes are present. Transcellular (or intracellular) and intercellular pathway.

### Transfollicular route (shunt pathway):

The transportation occurs via sweat glands and hair follicles with their associated sebaceous glands. This route seems to be the most important

for ions and large polar molecules which hardly permeate through stratum corneum

### Advantages of TDDS:

Avoidance of chemically hostile GI environment

Avoidance of significant presystemic metabolism (degradation of GIT or by liver) and therefore need lower doses.

Allow administration of drugs with narrow therapeutic window because drug levels are maintained within therapeutic window for prolonged periods of time.

### Disadvantages of TDDS:

Adequate solubility of the drug in both lipophilic and aqueous environment, to reach dermal microcirculation and gain access to systemic circulation

- The molecular size of drug should be reasonable that it should be absorbed percutaneously
- Diffuse of permission of drug through human skin-barrier function of skin
- Skin irritation or dermatitis due to excipients

### Factors that influence transdermal drug delivery

The effective transdermal drug delivery can be formulated by considering 3 factors as

1. Skin
2. drug
3. vehicles

### Biological factors:

1. Skin condition
2. Skin age
3. Blood supply
4. Skin metabolism
5. Skin hydration
6. Temperature & pH
7. Diffusion co efficient
8. Molecular size and shape



M. Sowbarnika  
Final Prof.



# SUCCESS STORIES

## INVENTOR OF THE IMPLANTABLE CARDIAC PACEMAKER



**Wilson Greatbatch** was an inveterate inventor, with more than 150 patents to his name. He will be best remembered for the invention and development of the first implantable pacemaker, a device which has improved, saved, and extended countable lives since its first use in 1960. Worldwide, around three million people currently benefit from Greatbatch's discovery, with an additional 600,000 being implanted every year

### EARLY LIFE:

He was born in Buffalo, New York, in 1919.

He attended school at West Seneca.

He served for US Navy during the Second World War. He started teaching at the University of Buffalo.

### FROM MISTAKES TO A MIRACLE:

It was in 1956, while working at Buffalo, that he made his most important discovery, the result of a fortuitous error. Working on a heart-rhythm recorder, he mistakenly added an incorrect electronic component, so that the device produced electrical pulses instead of simply recording them. Recalling the event later, he said "I stared at the thing in disbelief", having realized at once that he had found a way to electrically simulate and stimulate a heartbeat.

A patent for the implantable pacemaker was granted in 1962. In 1960 the pacemaker had been implanted in the first human patient, a 77-year-old man, who went on to live for a further 18 months.

He also continued to develop and manufacture lithium-based batteries for pacemakers.

### HIS WORD ABOUT HIS ACHIEVEMENT:

In an interview he said "Nine things out of 10 don't work", but emphasized that "The 10th one will pay for the other nine". Greatbatch told his local Buffalo newspaper in 1984: "I think one of my first and most gratifying realizations of what a pacemaker could do was in observing the reactions of elderly people to their grandchildren. People with heart disease generally don't have enough blood supply to their brains and couldn't respond before to the bantering of kids.

### HIS ACHIEVEMENTS:

- Greatbatch was the recipient of many awards during his lifetime.
- In 1983 the national society of professional engineers selected pacemaker as one of the greatest contributions to society of previous 50 Years.
- In 1998 Greatbatch was inducted into the National Inventors' Hall of Fame in Akron, Ohio
- Greatbatch received a Lifetime Achievement Award from the Massachusetts Institute of Technology in 1996.

## SECRET OF HEALTHY LIFE BY 98 YEAR OLD YOGA EXPERT



**V. Nanammal** is India's oldest Yoga teacher who comes from Coimbatore, Tamil Nadu. Her work has been honored with India's National Nari Shakti Puraskar in 2016 and the country's third highest civilian award the Padma Shri in 2018.

She was brought up by an agriculture family. Her husband was a **Siddha practitioner**. At the age of 8, she learnt yoga from her father; she mastered more than 50 Asanas. Nanammal has trained more than **one million students** for the past five decades. '**Ozone Yoga Centre**' was established by her. Around 600 of her students, including 36 members of her family, have become 'Yoga instructors' around the world.

She Drinks 500ML of water as soon as she wakes up, and uses Neem sticks to brush her teeth, and even carries a few when she goes out of town. She eats healthy food at all times of the day, like fruits, milk with honey and turmeric powder.

Accordingly to **Deccan Herald** report, Nanammal attempted to get on the Guinness book of world records by teaching yoga to over 20,000 students and enthusiasts in Coimbatore. Right now she creates awareness among women, mainly girl student, about yoga techniques by going to various educational institutions to solve several health related problems, especially after marriage.

Her son, V Ellusami said

**"She had rejected offers from several yoga federations across the world as she does not know English"**

She is an expert in Silambattam, an Indian Martial art with stick as a weapon.

**Her presence will raise the spirit of the international festival of yogic heritage and will motivate its participants to hold on to the yoga way of life.**



J. Lakshanya  
First Prof.



# 10 RARE DISEASES THAT TURNED PEOPLE INTO SUPER HEROES

## # 10 : HYPERTHYMESIA: Super Memory

**Total No. Diagnosed: 60**

Disruption of a person's memory to remember all the events of their life down to every last detail. They literally forget nothing. They can recite news broadcast of any day, any year.

Rebecca sharukh - Australin writer. She remembered how she was wrapped in a pink blanket at the age of 7. Not years, not 6 months but 7 days.

## # 09 : IN-BORN ANACGESIA:

**Insensibility to pain**

**No. of cases: 40**

You may think this feature of x-men. The syndrome doesn't influence mental abilities or appearance; a person doesn't feel any pain - maximum. Other people's touches.

## # 08 : SAVANT SYNDROME:

**Literally do any thing**

Rare syndrome which might be typical for people with developmental disorders such as autism / asperger's syndrome. patients with such conditions are extremely talented in music, drawing, painting, calculation, cartography with constructing models.

Stephen will shire - Artist, drew map of London with just one flight over the city.

## # 07 : INSENSITIVITY TO COLD

Besides people who don't react to pain, there are those who are indifferent to cold.

WIMHOF - able to stand low temperature about 120 minutes in pipe with ICE & Freezing water, swim under ice in frozen lakes.

## # 06 : URBACH - WIETHE DISEASE: Complete Absence of fear

**No of cases: 300**

Rare genetic disorder with complete lack of fear. An anonymous women, after several torturous experiments by researchers, found her alone despite the fact that she can't access danger.

## # 05 : HYPOHIDROTIC ECTODERMAC DYSPLASIA:

Vampire Disorders people suffering from their condition of frequently have eerily pointed teeth, are extremely thin and pale, their eyes have outlines with dark circles, teeth typically pointed and hair is absent. The patients always have to check their temperature and stay away from sunlight because they don't have sweat glands E.G: actor Michael berryman

## # 04 : POLYMELIA : OCTOPUS PEOPLE

A strange disorder, people born with unusual number of limbs. In some, there are pretty useful.

In Pakistan, A baby was born with six legs.

## # 03 : STONE MAN SYNDROME

This disease occur one in 2 million, people. They have the soft tissues of their bodies turning into bone. The mutation of ACVRI gene responsible for the development of different tissues of the human body leads to muscles turning to bones.

## # 02 : HYPERTRICHOSIS : Were wolf syndrome

Hair growth of such people is abnormal . All their bodies are covered with thick hair it grows long and lush even on their faces and hence to nick name due to genetic mutation.

## # 01 : FOREIGN ACCENT SYNDROME

But any of you have tried foreign accent at least once in your life. Have you been successful? And there are people who don't even need to try hard. Their countrymen will believe that they are tourists. But for patients they speak foreign accent uncontrollably. What is even more surprising? People who can speak French accent may have never visited France before.



**L. Nava Subramania Bharathi**  
Final Year





## CLINICAL CHALLENGE

1. A male patient of age 28 has severe backache with the complaint of increasing pain on coughing or sneezing. Positive sign is indicated by appearance of pain and parasthesia in leg at 30° in SLR test for L5 and S1 nerve root.
2. Patient present with low back pain with diffuse radiation in the gluteal region and the back of thighs pain relieved by sitting or lying and increase by standing and walking. Neurogenic claudication is present. The radiological features shows diminished interpedicular distance and midsagittal diameter.
3. An aseptic inflammatory arthritis, has no destructive change in the joint structures. Patients suffer from bowel infections and urethritis. Pain present over, all joints mainly in knee and ankle. Patients even has complaints of conjunctivitis
4. A female patient of age 27 has complaints of left knee joint pain with swelling and redness over the joint stiffness and pain present over fingers and in wrist. And fever UTI infections, malaise since a week. Patient present with P/H/O TB cured and age and trauma at knee joint and aspiration done in knee joint(left)
5. Patient of age 80 years has natural dribbling of micturition, incomplete emptying, H/O inguinal hernia and Increased frequency of urination at night (nocturia). Patient post void residual urine volume is about 60.9cc(significant)

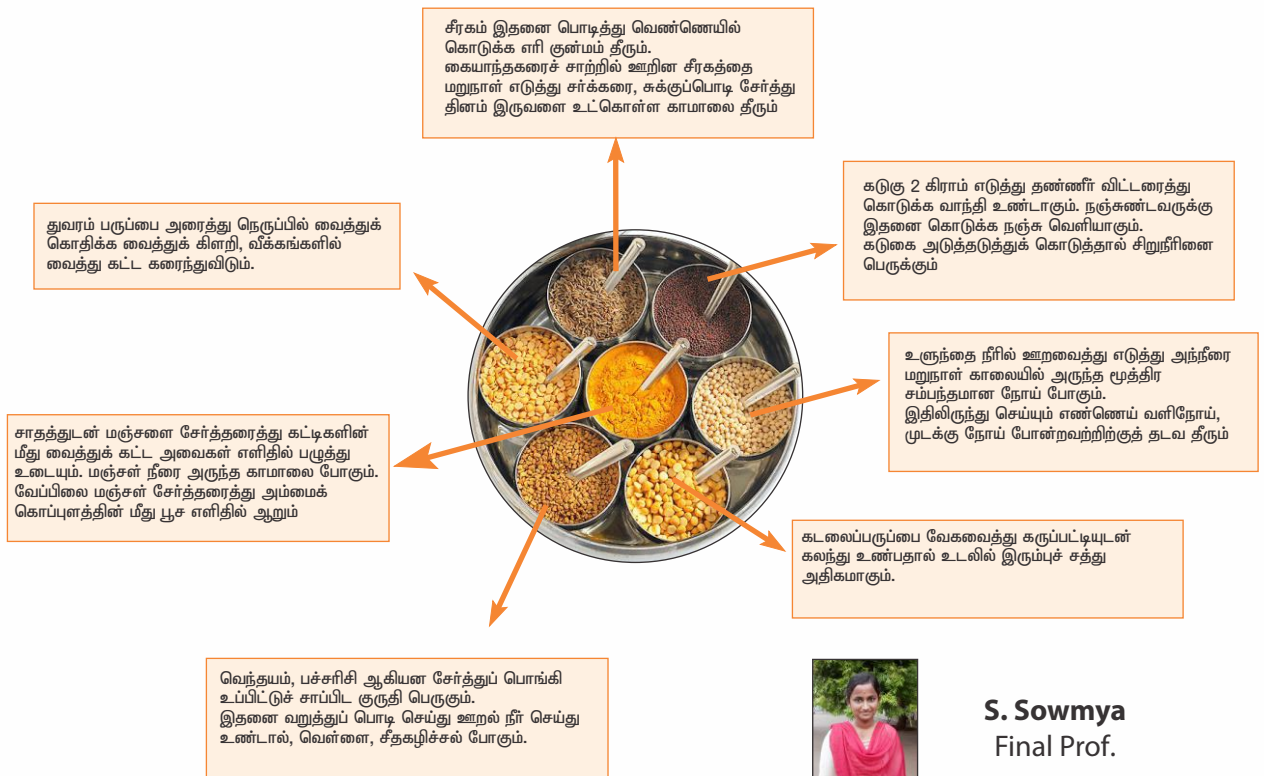
### Answer:

1. IVDP ( Inter Vertibral Disc Prolapse)
2. Lumbar Canal Stenosis
3. Reitter's arthritis
4. Gonococcal Arthritis
5. BPH (Benign prostatic hyperplasia)



**Dr. R. Dinesh Kumar**  
Lecturer

## அஞ்சறைப்பெட்டி மருத்துவம்



**S. Sowmya**  
Final Prof.



# மூலிகை - குறுக்கெழுத்து புதிர்

### இடமிருந்து வலம்:

1. பிரண்டை (7)
3. சாம்பிராணிப்பூண்டு (3)
6. இரத்தபுட்பிகா (6) இறுதி எழுத்து மாறியுள்ளது
8. தென்னைமரம் (6) கலைந்துள்ளது
9. மூங்கில் (2)
10. வெற்றிலை (5)
11. உரைப்பான் (4)
12. ஆரூகதம் (3)
13. துளசி (3)
14. அதிமதுரம் (5)
17. கஞ்சா (7)
19. குன்றிமணி (6)
21. பைசாசி (6)
23. கோரை (6)

1									
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	13				14			15	
16		17							
	18								20
	19								
21		22							
				23					

### மேலிருந்து கீழ்:

2. கிருசுண்ணபாலை (6)
4. சருமபந்தம் (3)
5. மாதுளை (4)
7. சிங்கவல்லி (4) கலைந்துள்ளது
15. பாரிபத்திரம்
16. தாமரை (4)
18. திப்பிலி
20. திருமரம் (3)
22. வில்வம் (4) இறுதி இரண்டு எழுத்து இல்லை எனவே (2)

(முக்கிய) இயை '22 கமி' '02 முயாகி '81 ஶக' '91 ஶரூஷ '51 (இரையயைகி) மயலகி' '2 மூலிகை '5 கம' '7 முயகி' '2 : '51 கி' '51

இ' '61 ஶக' '71 மூலிகை '71 மூலிகை '51 ஶரூஷ '21 ஶரூஷ '11 க' '01 மயலி '6 (முயகி' '8 க' '8 (ம) '9 முயகி '9 முயகி '5 : '51

**முகாயுரூ**



S. Selvalakshmi III Prof.

## Find Who is This?

1. He was born in 1963 in Maharashtra.
2. He is an Indian-born American scientist and an entrepreneur.
3. He holds four degrees from MIT, including a Ph.D. in biological engineering.
4. In 2007, he was awarded a Fulbright U.S. Student Program grant to study the integration of Siddha, a system of traditional medicine developed in South India, with modern systems biology.
5. "The Internet Publicity Guide" book was written by him.
6. He was the founder of e-mail.

Ans: Shiva ayyadurai



A.Prethwinya J.Reena R. Sangeetha Second Prof.



### FUN BYTES

1. Doctor Harish and a bus driver Manish are friends with same women named Priyanka. the bus driver needs to go for a long trip of 10 days with Priyanka but he wants to avoid doctor Manish. So before he left he gave Priyanka 10 apples and asked her to eat them daily why?

Ans: An apple a day keeps the doctor away.

2. What did the nervous kid say when the doctor asked if he had been getting enough iron?

Ans: yes I chew my nails every day

3. What is better than presence of mind in an automobile accident?

Ans: Absence of body

4. What is the healthiest kind of water?

Ans: Well water

5. Which is faster, hot or cold?

Ans: Hot's faster. You can catch a cold

6. Why is an eye doctor like a teacher?

Ans: They both test the pupil

7. Which country gets ill every time

Ans: Brazil (Braz – il)

8. What is the better treatment for dandruff?

Ans: Baldness

9. When they take out an appendix, it's an appendectomy; when they remove your tonsils, it is a tonsillectomy. What is it when they remove a growth from your head

Ans: A Haircut

10. What medical condition helps you to run faster? / which is the faster spreading disease?

Ans: Athlete's foot



J. Lakshanya  
First Prof.

### HODGEPODGE

- Bacteria which have Babes — Ernst granules  
- TPREADCRHBTACNUIOYEMIEIRE
- Pfeiffer's bacillus  
- UEPJUNHILZMSNOEAALFE
- Bacteria cultivated in yolk sac of developing chick embryo  
- EIKTSIRICTA
- Blue pus is caused by  
- MEDSOAPNEUGOSIARDAOUNS
- Koch's Bacilli  
- TCUEORUMUBLYOBCIACESRSIT
- Energy parasite  
- HBAYACDLIME
- Non-venereal treponematoses  
- WYSA
- Bacteria which shows medusa- head appearance in agar plate  
- AAIBHRUALSCSNLTCI
- Cl.Welchii  
- SMFPUEIRNSECTOGIDLRIRE  
— Ziehl Neelsen
- Method  
- TCEIFSASDTAT
- Non — psittacine birds  
- RHNSOITOS
- Spirochetal jaundice  
- SESIWDAEISLE
- Bacillary dysentery  
- IGHSLOSEILS
- Hansen's Bacilli  
- BELMAIERYCUACPEOTRM
- Pleuropneumonia like organism  
- YOLAMCMPSA



S. Priyadharshini  
First Prof.

#### Answers:

- Coryne bacterium diptheriae
- Hemophilus influenzae
- Rickettsia
- Pseudomonas aeruginosa
- Mycobacterium tuberculosis
- Chlamydiae
- Yaws
- Bacillus anthracis
- Clostridium perfringens
- Acid fast test
- Ornithosis
- Weils disease
- Shigellosis
- Mycobacterium leprae
- Mycoplasma



### HOW DID DISEASE GET THEIR NAMES?

#### 1. Alzheimer's Disease: Alos Alzheimer

In 1901, Alos Alzheimer analysed a 51 year old woman at an asylum who had short term memory. When she died he dissected her brain and presented the illness as Alzheimer's Disease

\* 3  
\* 4 to 6

= The weight of your brain in pounds  
= The number of minutes your brain can survive without oxygen before it starts to die

#### 2. Asperger's syndrome: Hans Asperger

Coched in 1944, Asperger named the disease after he observed a group of children and described their illness as 'autistic psychopathy' However, since all of the research was written in German, his contributions didn't become known until much later

\* 8 to 10  
\* 10 to 23

= The number of seconds you have before losing consciousness due to blood loss  
= The number of watts of power your brain generates when you're awake (that's enough to turn on a light bulb)

#### 3. Hodgkin's Lymphoma: Thomas Hodgkin

In 1865, the illness was named Hodgkin's Lymphoma after the name of the pathologist Hodgkin who worked in the field of cancer at Guy's Hospital in London in 1932. It was also one of the first cancer to be treated using radiation therapy

\* 20  
\* 250

= The percentage of oxygen and blood flow going to the brain  
= Miles per hour is the speed at which messages in brain travel

#### 4. Addison's Disease: Thomas Addison

It is named after Thomas Addison, the British physician who first described the condition on the constitutional and local effects of disease of the Suprarenal Capsules (1855). All of Addison's six original patients had tuberculosis of the adrenal glands

\* 100,000  
\* 1,000 to 10,000

= The number of miles of blood vessels in your brain  
= The number of synapses of each neuron in your brain

#### 5. Crohn's Disease: Dr. Burrill B. Crohn

After his father was affected with awful indigestion for most of his life. Crohn decided to study of the stomach infections. It was in 1932 that he reported the original cause of the illness as localised inflammation of the ileum.

\* 100 billion

= The number of neuron in your brain



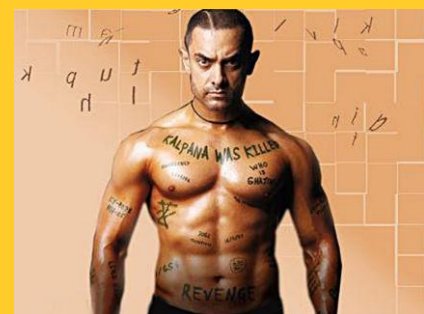
P. C. Berfin Flower  
Final Prof.



N. Sornalatha  
Third Prof.

### MOVIE BASED ON PSYCHIATRIC CONDITIONS

- My Left foot (1989) - Cerebral palsy
- Awakenings (1990) - Encephalitis Lethargica
- Black Swan (2010) - Obsessive Compulsive Disorder
- Taare zameen Par (2007) - Dyslexia
- Barfi (2012) - Autism
- My Name is Khan (2010) - Asperger's syndrome
- Gajini (2005) - Andrograde Amnesia
- Theivathirumagal (2011) - Developmental Disability
- Anjali (1990) - Autism
- Nadunishi Naaigal (2011) - Schizophrenia
- 3 (2012) - Bipolar Disorder



P. Hema  
Third Prof.



An Interview with an Expert

**Dr. R. RAMESH BABU, BSMS, Kallakurichi**

Managing Director, Sri Siva Sakthi Siddha Orthopaedic Hospital



**1. What made you motivated towards the bone setting ?**

My thirst in pursuit of deviation from the general practice made me to choose a different field of practice. From the very beginning I had a dream to build a hospital which is full of rush 24x7. And to have a number of technicians to assist me in my hospital. And some of my well wishers guided me in each and every part of my life, that gave me a lot of inspiration. Especially Prof. Dr. Sornamariammal very often suggested me to concentrate more in special therapies. Once during my college days, Dr. Michael jeyaraj arranged for a training program on bone setting by Traditional Bone setter. This mainly attracted me towards special therapies. On the whole, the enthusiasm of search towards bone setting motivated me to travel almost all over India in need of deep knowledge about bone setting.

**2. What is the secret behind your successful practice?**

Hardwork, Sincerity to the profession, kindness in practice, Self-confidence, unveiling the real status of disease to the patient, providing valuable treatment in affordable cost, making a trend-set in the treatment protocol. These are some of the things which I consider as secrets of my success and this made me to enter successfully into my 21st anniversary in bone setting carrier.

**3. Share about any of the challenging experiences in your practice?**

12 years back, a 60 years old male patient came to me with non-union multiple Fracture of mid 1/3 of tibia and fibula, with external fixation. I handled the case confidently and hopefully treated him with Vasavu Ennai and some banding techniques. This was my first most challenging success.

**4. What specific books would you prefer to the young practitioners for bone setting ?**

At the beginning I referred the book Basis of Fracture Treatment. To handle the day to day complications I would suggest Dr. John Ebiniser's orthopedics book and many varma books are available in siddha. Anyhow only by realizing the

complications from once own experience is more important than textbooks.

**5. Would you prefer any three first aid tips for the young practitioners to treat injured persons?**

First thing is to check for his/her conscious to relieve from unconscious Pulimuthu varmam and kavuli kaalam can be applied in scissors pattern twice. Next, we should be aware of the area and severity of pain. Then check for any deformity. If any of such deformity persists, that part of the extremity should be immobilized immediately with any of the available objects.

**6. Kindly convey us any three suggestions for future doctors of Siddha?**

I would like to suggest that

1. For Siddha doctors nowadays, lots of opportunities are available to mould them in a form that they want them to be like learning yoga, varma, external therapies, medicine preparations so on and so forth. Learning these kind of treatment methodologies is very essential

2. Secondly, general practice or setting up special therapy centers is very important for the future

3. Thirdly, you will become recognized rapidly and easily if you take up a particular disease and handle it in your practice. Moreover, Siddha literature has so many references to study in depth by which you can update your knowledge and also create a good impact about Siddha system of medicine among the public

**7. What were the struggles that you had to face during your initial stages?**

Well, there were many that I now astonish to see how we managed to overcome each one of them and we faced all them as challenges instead of calling them struggles. Like,

- First and foremost, we are not traditional bone setters. So to gain recognition in bone setting was the real challenge we had to face. Hopefully



we worked hard to create trend setting in Siddha Enbu Murivu sigichai

- The pressure that we faced from our professional colleagues was one of the big challenges
- As we exclusively did bone setting, many cases plunged into our hospital for it and we had a shortfall in staff
- We had a lack in well trained therapist and giving them practice and making them ready to treat enbu murivu was another challenge to note
- Post treatment like thokkanam has to be given parallely for gaining normal movement of the part affected

These were the challenges we faced and managed to overcome them

**8. Did you follow a protocol to treat patients and for all procedures in your hospital?**

Our hospital has a protocol and we always follow it. Our Treatment protocol includes Both acute injury, chronic traumatic Injuries. More than 70% injury are not compound fractures. We treat all extremities, long bone, small bone, spinal injuries, pelvic bone injuries. These are the types of fractures that we are upto.

**9. Can a special herb or medicine is enough to treat bone fractures?**

Basically I am not a traditional bone setter. According to Siddha orthopaedics and upto my knowledge in Siddha practice, treating fractures with a single herb is not possible. As said in varma nool, we use all Murivu ennaigal, Thirumeni ennaigal, vasavu ennai, pastes, pattru marunthugal

and so on. Any qualified physician would acknowledge that these medicines alone are not enough for treatment . In Thadavu muraigal methodology , boldness and confidence while treating patients , bandaging techniques for immobilizing, knowledge about the time to shift to active movement during healing process and mainly experience – all put together only will bring a successful bone setting treatment besides a single herb

**10. In what conditions will the union of fracture fragments be delayed?**

It is such an important question to answer. There are many reasons both pathologically and metabolically. Pathological reasons like vascular necrosis and metabolic reasons like diabetes, chronic smoking, improper reduction, misalignment, distraction fracture fragments in between the soft tissues, protrusion, delayed treatment procedure will make the union delay. In comprehensive conservative management in Siddha aspect, doing proper reduction and then immobilizing is the important step. Once done with it, patient's cooperation is very essential. The patient's attender should also cooperate in handling the patient properly. Improper handling by attender, early walking, early movement at fracture site and the above said reasons play a crucial role in delaying and non-union of fracture fragments.



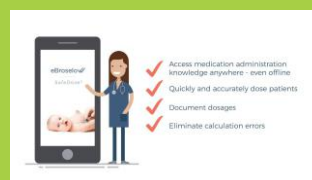
Interview by **Dr. D. Amirtharaj**  
Reader, Dept. of Varmam,  
Pura Maruthuvam & Sirappu Maruthuvam

**MEDICAL APPLICATIONS (MOBILE)**

01. Epocrates plus
02. eBroselow safedose
03. eMedicoz
04. Visual Dx
05. Medscope



**L. Nava Subramania Bharathi**  
Final Year





## Know the Simple Psychology

1. The people who give the best advice are usually the ones with the most problems.
2. The smarter the person is, the faster he thinks, and the sloppier his handwriting is.
3. The way a person treats restaurant staff reveals a lot about their character.
4. Good morning and good night text messages activate the part of the brain responsible for happiness.
5. People who try to keep everyone happy often end up feeling the loneliest
6. The happier we are, the less sleep we require
7. When you hold the hand of a loved one, you feel pain less keenly and worry less
8. Intelligent people tend to have less friends than the average person. The smarter the person is, the more selective they become.
9. Marrying your best friend eliminates the risk of divorce by over 70%, and this marriage is more likely to last a lifetime.
10. Being alone for a long time is as bad for your health as smoking 15 cigarettes a day.
11. Travel boosts brain health and also decreases a person's risk of heart attack and depression
12. People look more attractive when they speak about the things they are really interested in.
13. When two persons talk to each other and one of them turns their feet slightly away or repeatedly moves one foot in an outward direction, this is a strong sign of disagreement, and they want to leave.



**Mrs. V. Poorna Pushkala**  
Reader, Dept. of Noi Nadal

## RESEARCH METHODOLOGY ABBREVIATIONS

1. ADR – Adverse Drug Reaction
2. AE – Adverse Event
3. AUC – Area Under the Curve
4. CDER – Centre for Drug Evaluation and Research
5. CDRH – Centre for Devices and Radiological Health
6. CI – Confidence Interval
7. CFR – Code of Federal Regulation
8. CRA – Clinical Research Associate
9. CTA – Clinical Trial Agreement
10. OHRP – Office for Human Subject Protection Program
11. DLT – Dose Limiting Toxicity
12. EC – Ethics Committee
13. FDA – Food and Drug Administration
14. GCP – Good Clinical Practices
15. GLP – Good Laboratory Practices
16. GMP – Good Manufacturing Practices
17. IND – Investigational New Drug
18. IRB – Institutional Review Board
19. MOS – Medical Outcome Study
20. NDA – New Drug Application
21. PMA – Pre-Market Approval
22. PMS – Post Marketing Surveillance
23. CCTR – Cochrane Controlled Trials Report/Register
24. ISRCTN – International Standard Randomized Controlled Trial Number
25. CDR – Cognitive Drug Research
26. PD – Pharmacodynamics
27. PK – Pharmacokinetics
28. IB – Investigator's Brochure
29. NSR – Non Significant Risk
30. IRB – Institutional Review Board



R. Pavithra  
Third Prof.



## A SINGLE CASE STUDY REPORT OF KAALANJAGAPADAI (PSORIASIS)

**Dr. R. Sivashankar MD(s),**

Lecturer,  
Dept. of Siddha Maruthuva Moola Thathuvam

In India more than 10 million people was suffered from Psoriasis every year. Treatment may be help to control the disease but can't be cured. Lab test and medical imaging investigations are rarely required. It may last for year or life long.

Psoriasis is a chronic inflammatory non-contagious disease, related to inherited genes, more common in obesity, diabetic population. Certain medicines like beta blockers have been linked to psoriasis

### TYPES:

- Psoriasis vulgaris
- Guttate psoriasis
- Scalp psoriasis
- Pustular psoriasis
- Erythrodermic psoriasis

### INVESTIGATION:

No specific blood test for Psoriasis. ESR may be raised, WBC, Uric Acid level increased, if joints affected radiology investigation required.

Skin biopsy may be used to diagnosis for few cases.

### CASE HISTORY:

A 24 year old male patient came to Sri Sairam Siddha Medical College Hospital with the complaints of generalized itching and scaling, more red patches especially in thigh region and also affected minimally in abdomen and both upper limb.

### EVALUATION OF THE PATIENT:

- Naa - Normal
- Niram - semmai
- Mozhi- Normal
- Vizhi -Normal
- Neer - ilamanjal
- Malam -Normal, ilagal
- Naadi - Pitha vadham

### COMPARATIVE STUDY:

- Scaling - Due to vaayu migu gunam
- Red patches - Due to Pitha migu gunam
- Dryness of skin - Due to Vatham migu gunam
- Itching - Due to Kabam migu gunam



Day 1



After 2nd week



After 5th Week



At 8th week

### TREATMENT:

1. Purgative - Murukkan Vitthu pills - (for Vatha samanam)
2. Nei (Ghee) Muzhukku-- oil both -3 days -(for Pitha samanam)
3. Seenthil Chukku Kasayam  
Seenthil - Bitter taste ,helps to normalize the Pitha humour  
Chukku - Spicy taste as a vatha samani
4. Sivanar Vembu Chooranam + Palakarai Parpam with ghee - (for vatha samanam)
5. Vetpaalai Ennai - External use

### PATHIYAM:

Avoid non vegetarian, fried food items, and junk foods.

### CONCLUSION:

Patient was treated with the above mentioned medicines for about 8 weeks. Symptoms were reduced gradually. On 8th week more than 95% of signs and symptoms decreased without any adverse events. This combination therapy will be useful for future reference to treat Kaalanjagapadai (Psoriasis).



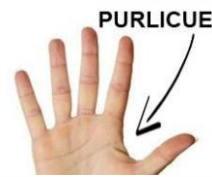


### STRANGE FUNNY BODY PARTS NAME

(KNOWN PARTS UNKNOWN NAMES)

1) **PURLICUE:**

It means twisted.  
It is a term for the space between the forefinger and thumb.



2) **GOWPEN:**

This is a hallow space that is formed when the two hands are placed together to create a bowl shape



3) **PHILTRUM:**

It is vertical groove between the bottom of the nose and upper lip.



4) **GINGLYMUS:**

A hinge joint - like the elbow / knee that allows motion in one place only.



5) **LANULA:**

The white crescent area show at the base of your fingernail (Little moon)



6) **RASCETA:**

Transverse creases of the skin on the palmer surface of the wrist.



S. Malini  
Third Prof.

## SILENCE - A SPARK FOR HEALTHINESS

- An art of healthy mind is silence
- Our soul without any problem is silence expressions expressed to the core is silence
- A way of retaining positive energy is silence
- A picturization of nature at olden age is silence
- A bundle of thoughts rejuvenating mind is silence
- A cute smile instead of laughter is silence
- A small wish than a quarrel is silence
- A failure than a success is silence
- A healthy mind than a healthy soul is silence



## Siddha Related Apps

01. 1100 சித்த மருத்துவம் (Siddha Medicine in tamil)
02. சித்த மருத்துவம்
03. Naattu Maruthuvuam Siddha Ayurvedic Natural Medicine
04. Mooligai Marmam
05. Iyarkai vaithiyam - Tamil
06. Health Plus Tamil

S. Sowmya  
Third Prof.

## உணவுப் பழக்கம் பழமொழி வடிவில்

01. தன் காயம் போக்க வெங்காயம் போதும்.
02. மூலநோய் தீர் வாழைப்பூ கூட்டு
03. இருமலை போக்கும் வெந்தயக்கீரை
04. பூண்டில் இருக்கு பெனிசிலின் சக்தி
05. சிறுநீர் கடுப்புக்கு அண்ணாச்சி
06. கல்லீரல் பலம் பெற கொய்யாப்பழம்
07. கொலஸ்ட்ரால் குறைக்கு பன்னீர் திராட்சை
08. இரத்த கொதிப்புக்கு அகத்திக் கீரை
09. தலைவலி நீங்க முள்ளங்கிச்சாறு
10. சித்தம் தெளிய வில்வம்



## Events at a glance

### Educational Tour



### Medicinal Botany Tour



### International Conference at Singapore



Dr. R. Sivasankar presented a paper

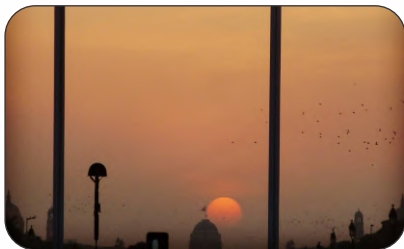


Dr. Karthikeyan, Internee presented a paper



## Photography Club

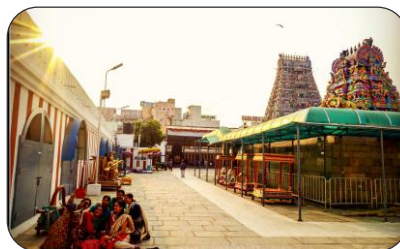
A. Sanjeevi Raman



B. Jayasurya

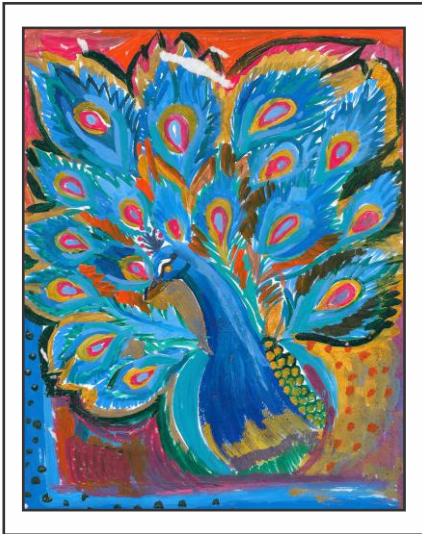


M. Yokeswaran





# Drawings



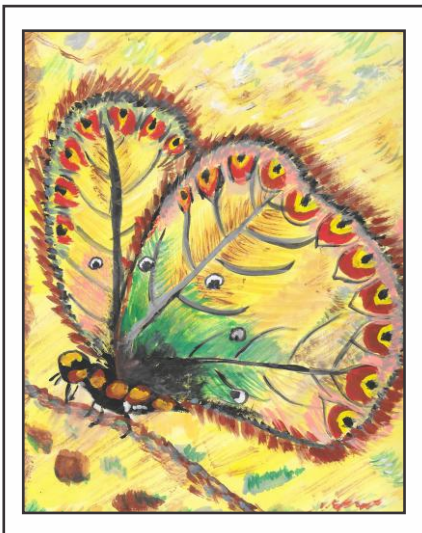
**Elegance**  
J.Lakshanya



**Unconditional**  
U.Sowmiya



**Pride**  
U. Gifita stella



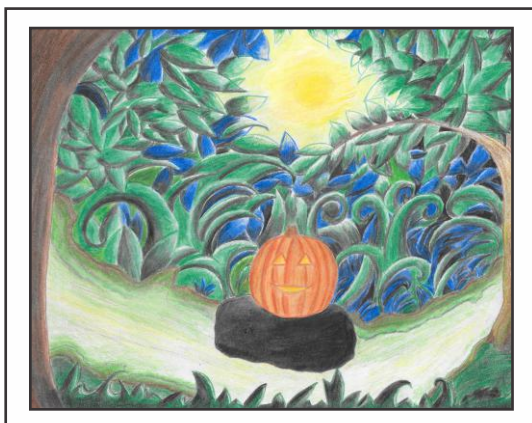
**Liberty**



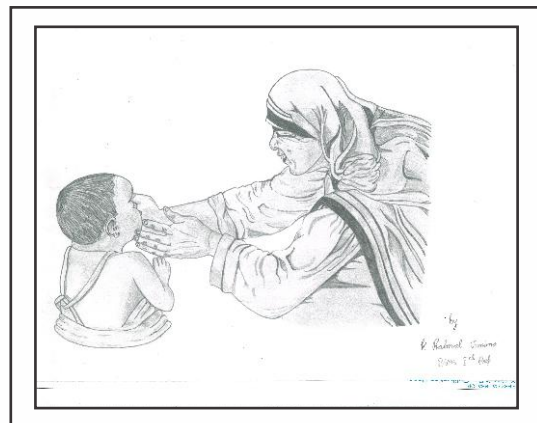
**Bliss**  
R.Kamaline



**Identity**  
D.Megadharshini



**Halloween**  
D.Megadharshini



**Sacrifice**  
A.Rahmal Jamima



# Events at a glance

## Medical Camp



## Workshop on Gunapadam



## CME Programme

Department of Noi Naadal



## Clinical Research Internship Programme with Deepam Hospital





# Events at a glance

## Departmental Activities



Quiz on Noi Naada



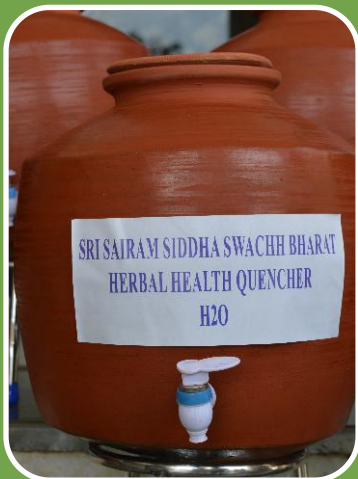
Siddhar Mandram



## Siddhar Samathi Visit



## Swachh Bharat





# Events at a glance

## Splash Fest 2018 - Cultural & Sports



## Pongal Celebrations



## Mentor Counselling Programme



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