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Validation of Siddha Varmam Therapy for the Management of Karuvanga Noigal (Menstrual Disorders)

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Abstract: Diagnostic, therapeutic, and therapeutic approaches used in traditional Indian medical systems are distinctive. It offers a wide variety of external therapeutic options for managing health. In Siddha system there are 32 different sorts of this external management. The non-invasive treatment method known as Varmam is based on "Vaasi flow" or energy flow. The unremitting flow of Vaasi, which becomes stagnated at specific locations, is known as Varma Thalagal or Varma Pulligal. During a female's reproductive life, menstruation is a naturally occurring phenomenon involving the release of blood from the uterus through the vagina which occurs on a roughly monthly basis. a cycle with an usual duration of 21 to 45 days and an average blood loss of 20 to 80 ml. Menstrual problems can take many different forms, such as dysmenorrhea, premenstrual symptoms, menorrhagia, polymenorrhea, abnormal vaginal bleeding, amenorrhea, oligomenorrhea, and irregular menstruation. The objective of this study was to describe and validate the Moothira kalam, Anna kalam, Mothera varmam, Iilan kuruthu varmam, Navari ellu varmam, Peru viral Manjal varmam, Palla varmam, Sakthi kooradagal Varmam in the management of Karuvanga Noigal (Menstrual disorders). Nearly 12% of Gynecologist referrals are for menstrual problems such polymenorrhea, abnormal uterine bleeding, and menorrhagia, which are often linked to a very high likelihood of surgical intervention. The anatomical position, link between Varmam and Karuvanga Noigal, mechanism of action, standardization of pressure applied to the spot, choice of finger, length of therapy, and method for Varma Pulligal applied to Karuvanga Noigal are all expounded upon in this study. The study discusses the need to identify Varmam sites for Gynecological illness. It gives enhanced Varmam documentation for next generations.

Keywords: Siddha Varmam, Karuvanga Noigal, Gynecological illness, Vaasi flow, Varma Pulligal, Menstrual disorders

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Introduction

AYUSH system of medicine is an alternative medicine that is practiced traditionally in different areas of India. Siddha system of medicine is one among them. It has been followed for decades in Tamil Nadu. It has 32 internal and 32 external medicines (Meena *et al.*, 2021). These therapies are used both as mainstream and supportive therapies - both curative and prophylactic. The external therapy is subdivided into invasive and non-invasive technique. Varmam is called as Marmam, Kalam. These literatures describe the human energy physiology, human energy pathophysiology, trauma and its complications, fracture management, bandage and fracture reduction methods, muscle and nerve injury management, locating varmam points along the energy channels, clinical features from trauma on each varmam points and their specific therapy, formulary of varmam drugs, massage methods and manipulation techniques, etc. (Hertweck and Yoost, 2010). Varmam is a non-invasive therapeutic technique which is based on "Vaasi Flow" (i.e. energy flow). The unremitted flow of Vaasi, stagnant at particular points which are called as Varma Thalagal/Varma Pulligal. If there is any obstruction in this flow, it may lead to pathological condition. In human body there are 108 varmam points, among them 12 of them are major points which is also called as Padu Varmam. Each Padu Varmam supplies Vaasi energy to the adjacent 8 varmam points which is called as Thodu Varmam.

The varmam processed by pressuring particular points at particular pressure for particular timing. Balancing life energy through stimulation of varmam points by various manipulation techniques. Varmam therapy is a drugless, non-invasive, simple therapy used in Siddha system of medicine. The therapy time is less and if given regularly it gives long lasting results.

During a woman's reproductive life, menstruation -- naturally occurring phenomena involving the release of blood from the uterus via the vagina-- occurs at about monthly intervals. A

typical cycle lasts from 21 to 45 days, with blood loss averaging 20 to 80 ml. Age, ethnicity, family history, smoking, physical activity, and nutritional choices are just a few of the variables that might have an impact on menstrual cycles. The body experiences hormonal variations throughout a woman's active reproductive life (from menarche through a normal monthly cycle, pregnancy, and menopause), which can cause stress and mood swings. High levels of stress and emotional disorders can make the menstrual cycle even more challenging. Menstrual problems can take many different forms, such as dysmenorrhea, premenstrual symptoms, menorrhagia, polymenorrhea, abnormal vaginal bleeding, amenorrhea, oligomenorrhea, and irregular menstruation (Liu *et al.*, 2004; Amu *et al.*, 2014).

According to a number of studies, a sizeable part of the female population that is of reproductive age experiences health problems that are associated with menstruation. Menstrual problems such as menorrhagia, irregular uterine bleeding, and polymenorrhea are responsible for roughly 12% of all referrals to gynecology, and they are often linked with an extremely high probability of requiring surgical intervention (Karout *et al.*, 2012). A relationship has been shown between stress and a variety of monthly abnormalities, such as menorrhagia, oligomenorrhea, dysmenorrhea, and PMS. Stress can be a key contributor to, or cause of, menstrual irregularities. Menstrual irregularities can include PMS. There are a few researches on the prevalence of menstruation issues and their connection with psychological stress, and these studies may be found in the accessible literature.

The objective of this study is to describe and validate the Moothira kalam, Anna kalam, Mothera varmam, Iilan kuruthu varmam, Navari ellu varmam, Peru viral Manjal varmam, Palla varmam, Sakthi kooradagal in the management of Karuvanga Noigal (Menstrual disorders).

Materials and Methods

The list of Varmam points used for Karuvanga Noigal are collected from the expertise, working in varmam OPD of National Institute of Siddha

and Government Siddha Medical College, Chennai based on their experience.

The varmam points that have been collected from them are Moothira kalam , Anna kalam , Mothera varmam, ilan kuruthu varmam, Navari ellu varmam, Peru viral Manjal varmam, Palla varmam, Sakthi kooradagal (Table 1) (Rajaram, 2007, 2015, 2016)

Varma maruthuvam pothu by Dr. Kannan Rajaram and Varma maruthuvam adipadai kalvi by N. Shanmugam are the works utilized for the cross reference. PubMed, Physiopedia, MEDLINE, and the AYUSH research portal are the websites we consulted to support our thoughts. IJRP and JAIM are the journals consulted.

Results and Discussion

Varmam is a method of comprehensive body restoration. Varmam differs from person to person based on their followers because it was taught through the guru disciple technique. There are several disputes among the Varmani. Therefore, standardizing varmam points based on research and clinical trials is required.

Traditional varmam therapy tends to draw patients because it is a low-cost alternative to intrusive surgeries, offers speedy healing methods, and appeals to their cultural and traditional beliefs. The term "Varmam" in Siddha medicine refers to the life energy (VASI) that remains concentrated in particular spots on our bodies. Fingers are used to gently stimulate varmam points. The pressure ranges from 1/4 unit, 1/12 unit, 3/4 unit, and 1/2 unit (unit = Mathirai). The therapeutic manipulation of certain spots where the life energy is found concentrated is described as Siddha Varmam treatment (SVT). By controlling the flow of life energy that is obstructed by an attack on one or more Varmam points or by other factors, handling these points with a specific force for a set period of time will release the life energy from these points and bring relief to the affected person. Varmam is another name for the changes

that take place in the body when certain areas are struck or manipulated directly or indirectly with a certain amount of power. The location of the points, the force of the blow, the length of the pressure, and the patient's physical stamina all affect the signs and symptoms that appear in the body (Rajaram, 2007, 2015, 2016).

Age, ethnicity, family history, smoking, physical activity, and nutritional choices are just a few of the variables that might have an impact on menstrual cycles. Stress has been linked to a number of monthly abnormalities, including menorrhagia, oligomenorrhea, dysmenorrhea, and PMS. Stress can also be a key contributor to or cause of menstrual irregularities. Additionally, it has been shown that students majoring in medicine and the health sciences have a significant prevalence of menstruation issues.

Menstrual problems can take many different forms, such as dysmenorrhea, premenstrual symptoms, menorrhagia, polymenorrhea, abnormal vaginal bleeding, amenorrhea, oligomenorrhea, and irregular menstruation. 3 studies have revealed that many women of reproductive age experience health problems associated to menstruation. Menstrual issues affect young women economically and are one of the leading causes of absenteeism and subpar academic performance. Nearly 15% of adolescent females who reported dysmenorrhea did so in the range of 20–90%. Premenstrual syndrome is another another menstruation issue that may interfere with a woman's day-to-day activities (PMS) (Houston *et al.*, 2006).

A comprehensive research indicated that the combined prevalence of PMS was 47.8%. Nearly 12% of referrals to gynaecology for menstrual problems include polymenorrhea, abnormal uterine bleeding, and menorrhagia. Currently, medication treatments are the mainstay of menstrual problem therapy, which may have negative consequences on fertility, glucose tolerance, and other factors. Long-term use of drug therapies is strongly associated with

Table 1: Details of Varmam points, method and their impact on Menstrual disorders

Name of varmam points	Location	Manipulation technique	Finger selection	Duration	Patient posture	Pressure	Frequency	Indications
Moothira kalam	Four finger below the umbilicus	Press with index finger and rotate right side Press with middle three finger and pressed towards upward and inside	Middle 3 finger	10 seconds	Lying posture	$\frac{1}{2}$ Mathirai	3 times	Amenorrhea Dysmenorrhea
Anna kalam	One finger above the umbilicus	Pressure with middle finger	Middle finger	10 seconds	Lying and sitting posture		3 times	➤ Dysmenorrhea ➤ Expels urine and fecal
Mothera varmam	Six fingers below the umbilicus	Press with thumb	Thumb	10 seconds	Lying posture	$\frac{1}{2}$ Mathirai	3 times	➤ Amenorrhea ➤ Dysmenorrhea ➤ Placenta previa ➤ Urinary incontinence
Ilan kuruthu varmam	Straight back of umbilicus	Pressure with index finger for 3 times Clockwise rotational pressure by using thumb for 3 times	Thumb and index finger	30-60 seconds	Lying posture	$\frac{1}{4}$ Mathirai	3 times	Irregular menstruation Uterine disease
Navari ellu varmam	9 fingers above the coccyx bone and center of scaral bone	On/off Pressure with thumb On/off Pressured with thenar muscle	Thumb, Hand.	30 seconds	Lying posture	$\frac{1}{4}$ Mathirai	3 times	Strengthen reproductive system
Peru viral Manjal varmam	1 $\frac{1}{4}$ finger above and Lateral of nail beds	On/off Pressure with thumb On/off Pressure with thumb and index finger	Thumb and index finger	30-60 seconds	Sitting and lying posture	$\frac{1}{4}$ Mathirai	3 times	Menorrhagia Uterine prolapsed
Palla varmam	Two fingers in below the xiphoid processing between right and left side 7th intercostal area.		Thumb and index finger	30-60 seconds	Sitting and lying posture	$\frac{1}{4}$ Mathirai	3 times	Menorrhagia Menstrual disorders Menopausal disorders.
Sakthi kooradagal	located below the medial malleolus	On/off Pressure with thumb	thumb	30 seconds	Sitting and lying posture	$\frac{1}{4}$ Mathirai	3 times	Menstruation diseases

hypertension, venous thrombosis, breast cancer, and other cancers, according to experimental data. Therefore, it is crucial to choose a

complementary alternative therapy that is highly safe, more selective, and has a low incidence of side effects (Shanmugam, 2016; Zhang *et al.*,

2021).

Varmam therapy is effective at treating menstrual disorders while requiring little in the way of infrastructure and obstructing cultural or religious sentiments, dietary customs, or legal requirements. Varmam treatment may lessen the

need for other medications. The use of varmam is being investigated daily, necessitating the establishment of a strict task force committee to document and publicise the more recent varmam indications based on clinical experience.

Conclusion

If traditional treatment is continued alongside treatment with varmam, patients will have a more consistent increase in their clinical condition and will be cured significantly sooner. It is possible that varmam treatment is the most effective supplementary therapy, and that it should be implemented in all hospitals throughout the world.

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