



Role of varmam on kumbavatham (Rotator cuff syndrome)

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ABSTRACT

Siddha system of medicine is one of the traditional systems of medicine. There are 64 types of medicine. 32 ulmarunthu and 32 puramarunthu. Varma is one of the vast and most reliable methods in pura marunthu 32[1]. Rotator cuff syndrome is termed as kumbavatham in Siddha text. The aim of the study is to evaluate and to manage the rotator cuff lesion in an elderly male with varmam therapy. The patient reported a gradual onset of pain. There was no history of fall or trauma. Pain was present on the right shoulder and was sharp and deep on abduction and flexion of the left shoulder which reported a VAS of 8/10. The patient had tried all conservative treatments and was finally advised for surgery. patient were given varmam therapy for three months as per following the Siddha varma protocols. Within the treatment course the patient started to do normal daily activities slowly without pain. The uniqueness of this case is that it involves an elderly female who sustained multiple causative factors for rotator cuff.

Keywords: Varman Therapy, Kumbavatham, External Therapy, Rotator Cuff Syndrome

1. INTRODUCTION

Shoulder pain is a common musculoskeletal complaint in the general population. Rotator cuff syndrome is one of the most common cause of shoulder pain seen in the elderly population. In allopathic system of medicine, NSAIDs and steroids are generally prescribed along with physiotherapy. But still it remains as asymptomatic approach. In siddha system of medicine kumbavatham has the characteristics of pain present in hand and shoulder joints, difficult to flex and extend the hand.

Varmam is an ancient South Indian divine martial art. Later it evolved as a therapy. It was introduced by Siddhars, the ancient scientists. The human body has 108 varmam points. The varma points are divided into two main divisions and two sub divisions: the main divisions are padu varmam (12 points) and thodu varmam (96 points) [4]; Kannan Rajaram in 2010 has mentioned the sub divisions of varmam as uzh varmam (6 points) and thattu varmam (8 points). Varma points are points where the prana, ie, vital energy of our body is concentrated (residing). They have a wide range of therapeutic applications. It encompasses different manipulation techniques. The basic objective of the varmam therapy is to stimulate these points to cure diseases. When one or many varmam points are manipulated therapeutically, they produce curative effects in many diseased conditions. In order to give a safe and effective treatment using varmam therapy, this single case study has been carried out.

2. CASE STUDY

A 59-year-old male complaint of right shoulder pain for 5 years, onset was gradual. No history of fall or trauma. Pain was present on left shoulder. Pain was sharp and intense on abduction and flexion of the right shoulder, unable to rise the shoulder. Pain usually was aggravating with movements of shoulder. Gradually the condition worsened and movements were restricted. Routine activities including combing hair, unable to use soap on back, removing shirt etc was also badly affected. Patient had regular bowel and bladder habits. Appetite was slightly normal and sleep was altered due to shoulder pain and stiffness. Detailed Siddha examination envagaitheirvu (Eightfold diagnostic methods) were done. The patient was a known diabetic and non-hypertensive and taking hypoglycemic drugs (Glimepiride twice daily). Blood pressure (144/84 mm of Hg), pulse (78/min) and respiratory rate (21/min) were within the physiological limits. Respiratory system examination revealed bilateral adequate air entry with no added sounds. Cardiovascular system revealed normal audible S1, S2. All the movements at right shoulder joint were limited both actively and passively.

Investigations Routine hematological, urine and biochemical investigations were carried out to exclude other pathology and to know the underlying cause, which were within normal limits, blood sugar level i.e. fasting & post prandial blood sugar levels were controlled.

Patient has given varmam therapy for two months. he continued anti-diabetic drugs also. Patient’s range of motion, strength and pain were markedly improved after the varmam therapy. Brief details of given varmam points[4,5] and location were given in Table 1.

S no	Varmam points	Location
1.	Kavulichavvu varmam	It lies four fingers below the shoulder joint on the inner side of the arm (between the deltoid and biceps muscle) Kavuli Varmam: It lies in the first web space at the junction of the bones of the thumb and the index finger.
2.	Piratharai	It lies where the arm pit meets the back (posterior axillary fold), on both sides
3.	Yenthi	It lies where the arm pit meets the chest (anterior fold) on both sides.
4.	Kakkattaikaalam	It lies in the pit above the collar bone (supraclavicular fossa) on both sides.
5.	Saramudichipirithal	Mudichivarmam lies at the meeting point of the neck and the back bone (C7- T1 meeting point)

The above points were given to the patient and the severity of the pain can be assessed by the following visual analogue scale. after the two months of the treatment pain gets subsided and routine to its normal

3. OBSERVATION AND RESULTS

Overall satisfactory treatment after a month the patient feels better and started to doing the routine and able to remove his clothes. there is no aggravation of pain and marked stiffness and swelling in the shoulder joints. Pain completely reduced by completion of the treatment, at sometime if the patient hold a weight pain present after the follow up the symptoms also reduced.

Grading of assessment criteria: A. Severity of pain (VAS scale): Severity of pain can be assessed by the following Visual Analogue Scale. [11]

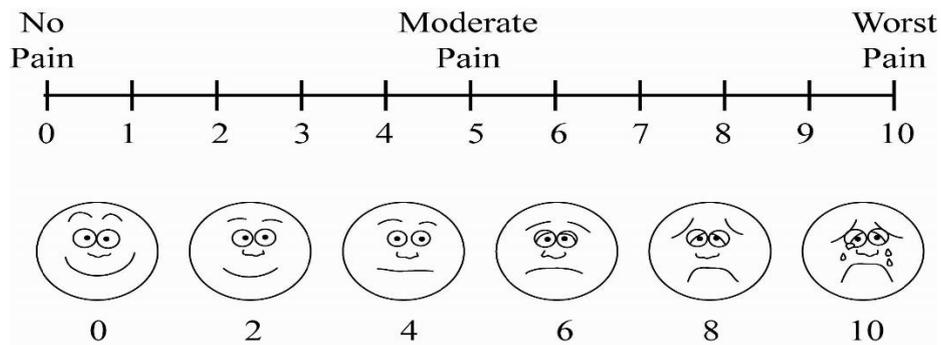


FIG. 1: Severity of pain

Table 2:

Grading Of Stiffness	
0	NO STIFFNESS
1	STIFFNESS:NO MEDICATION
2	STIFFNESS,RELIVED BY EXTERNAL APPLICATION
3	STIFFNESS RELIVED BY ORAL MEDICATION
4	STIFFNESS,NOT RESPONDED BY MEDICINE

Table 3: Effect of Therapy on Range of Movement-mallet score

Range of motion	GRADE II	GRADE III	GRADE IV
ABDUCTION	<30	30 TO 90	>90
LATERAL ROTATION	0	0 TO 20	>20

MEDIAL ROTATION	NOT POSSIBLE	S1	T12
HAND TO NECK	NOT POSSIBLE	HARD	EASY
HAND TO MOUTH	MARKED TRUMPED SIGN	PARTIAL TRUMPED SIGN	<40

Table 4: Effect of varmam on score

	Before treatment	After treatment
VAS	8	4
STIFFENNES	3	2
RANGE OF MOVEMENTS	GRADE 2	GRADE3

4. DISCUSSION

The patient has a multifunctional rotator cuff lesions such as swelling,restricted movements with both intrinsic and extrinsic. Depend upon the age ,shoulder overuse,other prolong medication.intrinsic factors which cause the pain includes range of injury machanisms in rotator cuff. [10]The shoulder is the site of many painful conditions.. Fortunately, most shoulder disorders respond to non_operative management or may resolve spontaneously thus it can be proposed to patient having a rotator cuff syndrome to improve their condition after conservative treatment and rehabilitation have failed even above 60 yrs. It is generally accepted that rotator cuff repair leads to better clinical outcome but it is rarely proposed to older patients as a treatment option.[8] Older patients are likely to be less active and may have more severely degenerated rotator cuff tendons. [9] Limitation of the study was relatively short follow up but seems to be sufficient to assesses improvement of the patient, long term progress should be recorded with

5. CONCLUSION

Varmam is one of the spiritual therapy branch of Siddha Medicine.Varmam treatment is cost effective and Could be done to serve public wherever the emergency /first aid required and also treat many diseases.it plays a drastic results in kumbavatham,rotator cuff syndrome it is single case study will do in vivo further.

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