A STUDY ON

GUNMASOOLAI

(DISsertation Subject)

For

the partial fulfillment of the requirements
to the Degree of

DOCTOR OF MEDICINE (SIDDHA)

BRANCH V - NOI NAADAL DEPARTMENT

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CHAPTER 1
INTRODUCTION

Siddha System of Medicine also known as Tamil Maruthuvam, Sinthamani vaithiyam, Naattu vaithiyam in Tamil nadu, is the oldest among the Indian Medical Systems such as Ayurveda and Unani.

Siddha System of Medicine is an integrated part of Indian System, which is very potent and unique system when compared with other traditional systems in existence. Siddha Medicine is contributing much to the health care of human beings.

Siddha System propounded by the Siddhars is a vast and unique system which defines health as a Perfect state of Physical, Psychological, Social and Spiritual well being of an individual. The system not only deals with medicine, but with spirituality, righteous way of living, rejuvenation and its main aim is attainment of perfection.

No doubt, the Siddha System of Medicine is one among the foremost of all other medical systems of the world. The other systems are concerned with treatment and preventive aspects only. But Siddha Medicine is the only system which bestows immortality.

The period of origin of this system is also substantiated by the extensive references about the medical practice that are available in ancient Tamil literature. The ancient Tamil grammar work Tholkappiyam, various other works of Sangam literature and the Tamil Vedham, Thirukkural not only mention, but also give a better picture about this system. According to Thiru T.V.Sambasivam Pillai, who compiled the
monumental work of Siddha (Tamil-English) Medical Dictionary, dates the origin of the Siddha System back to B.C.10,000 - B.C.4,000.

The Siddhars were the greatest spiritual scientists on those days; they were the seekers of truth. “SIDDHU” means “knowledge or wisdom” and “SIDDHI” means “attainment of perfection”. One who had attained perfection in life is called Siddhars. They had thoroughly studied human body, all kinds of plants, minerals, metals and other poisonous drugs and their physical and chemical properties. They are divine persons, follower of Siva cult, they are experts on Alchemy, Yoga and the science of Elixir and also in the field of literature, philosophy, astrology etc. They held that the body is the only instrument with which one could attain success in spiritual evolution and thereby get rid of diseases, decay and death.
1.1 SUGARANA NILLAI IN SIDDHA MEDICINE

All the existing things in this world and universe around it are made up by the five basic elements, namely Aagayam (Space), Kaal (Air), Thee (Fire), Neer (Water), and Mann (Earth) are called the Fundamental Boothams (Elements).

These elements constituting the human body and other worldly substances are explained as Pancheekaranam (Mutual Intra Inclusion). Anyone of these elements cannot act independently by themselves. They can act only in co-ordination of the other four elements. The living creatures and the non-living things are made up of these five elements.

As per the above lines the Universe and the human body are made of five elements
1.1.1 THE 96 BASIC PRINCIPLES (96 Thathuvam)

Siddhars described 96 principles as the constituents of Human being. They include Physical, Physiological, Psychological and Intellectual components of a person. They are nothing but the manifestations of the five basic Elements.

**Bootham - 5 (Elements)**

- Aakaayam – Space
- Vaayu – Air
- Thee – Fire
- Neer – Water
- Mannu – Earth

**Pori - 5 (Sense organs)**

- Kadhu (Ear) – It is a component of Aagayam bootham
- Thoal (Skin) – It is a component of Vaayu bootham
- Kan (Eye) – It is a component of Thee bootham
- Naakku (Tongue) – It is a component of Neer bootham
- Mookku (Nose) – It is a component of Mann bootham

**Pulan - 5 (Functions of sense organs)**

- Kaetal – Hearing, It is a component of Aagayam bootham
- Thoduthal – Touch, It is a component of Vaayu bootham
- Paarthal – Vision, It is a component of Thee bootham
- Suvaithal – Taste, It is a component of Neer bootham
- Nugarthal – Smell, It is a component of Mann bootham
Kanmenthiriyam - 5 (*Motor organs*)

- **Vaai (Mouth)** – The speech occur in relation with Space element
- **Kaal (Leg)** – The walking take place in relation with Air element
- **Kai (Hands)** – Giving and taking are carried out with the Fire element.
- **Eruvaai (Rectum)** – The excreta is removed in association with water element
- **Karuvaai (Sex Organs)** – The sexual acts are carried out in association with the earth element

Karanam - 4 (*Intellectual faculties*)

- **Manam** – Thinking of a thing
- **Bhuddhi** – Deep thinking or analyzing of the same think
- **Agankaaram** – Achievement faculty
- **Siddham** – The deciding faculty to finishing it.

Arivu - 1 (*Wisdom of self realization*)

Naadi - 10 (*Channels of life force responsible for the dynamics of Pranan*)

- **Idakalai** – Starts from the right big toe and ends at the left nostril.
- **Pinkalai** – Starts from the left big toe and ends at the right nostril.
- **Suzhumunai** – Starts from moolaathaaram and extends upto centre of head.
- **Siguva** – Located at the root of tongue it helps in swallowing the foods.
- **Purudan** – Located in right eye.
- **Kanthari** – Located in left eye.
- **Atthi** – Located in right ear.
- **Allampudai** – Located in left ear.
- **Sanguni** – Located in genital organ.
- **Gugu** – Located in anorectal region.

**Vayu - 10 (Vital nerve force which is responsible for all kinds of movements)**

- **Uyir kaal (Piranan)**
  
  This is responsible for the respiration of the tissues and digestion of the food taken in.

- **Keel nokku kaal (abanan)**
  
  It lies below the umbilicus. It is responsible for the downward expulsions of stools and urine.

- **Paravu kaal.(viyanan)**
  
  This is responsible for the motor and sensory function of the entire body and the distribution of nutrient to the various tissues.

- **Mael nokku kaal (Uthan an)**
  
  It originates from utharakini. It is responsible for digestion, absorption, distribution of food.

- **Samaanan (nadu kaal)**
  
  This is responsible for the physical activities of the Vali, i.e. Piranan, abanan, viyanan, and uthanan etc. More over it is responsible for the nutrient and water balance of the body.

- **Naagan**
  
  It is responsible for the movement of the eye.

- **Koorman**
  
  It is responsible for the opening and closing of the eyes and vision. Responsible for yawning.
• Kirukaran

It is responsible for the moisture of the tongue and nose. Responsible for cough and sneezing and induce hunger.

• Devathathan

This aggravates the emotional disturbances like anger lust, frustration etc. An emotional disturbances influence is to a great extent the physiological activities to be responsible for the emotional upsets.

• Dhanancheyan

Expelled from the scalp three days after the death.

Asayam - 5 (Visceral Cavities)

• Amarvasayam – Stomach (digestive organ). It lodges the ingested food.

• Pakirvasayam – Small Intestine. The digestion of food separation and absorption of saaram from the digested food are done by this asayam.

• Malavasayam – Large Intestine, especially rectum. Responsible for the expulsion of undigested food parts and flatus.

• Chalavasayam – Urinary Bladder, kidney.

Responsible for the formation and excretion of urine.

• Suckilavasayam – Genital organs. Place for the formation and growth of the sperm and ovum

Kosam - 5 (Five States of the Human Body or Sheath)

• Annamaya Kosam – Physical Sheath (Gastro intestinal system)

• Pranamaya Kosam – Respiratory Sheath (Respiratory system)
• Manomaya Kosam - Mental Sheath (Cardio vascular system)
• Vignanamaya Kosam - Intellectual Sheath (Nervous system)
• Ananthamaya Kosam - Blissful Sheath (Reproductive system)

Aatharam - 6 (Stations of Soul)

• Moolatharam
  Situated at the base of spinal column between genital organ and anal orifice. Letter “∩w” is inscribed

• Swathitanam
  Located 2 fingers above the Muladharam, (i.e) between genital and navel region. Letter “.setMessage” is inscribed. Earth element attributed to this region.

• Manipooragam
  Located 8 fingers above the Swathitanam, (i.e) at the naval center. Letter “u” is inscribed. Element is water.

• Anakatham
  Located 10 fingers above Manipooragam, (i.e) location of heart. Letter “ setMessage” is inscribed. Element is Fire.

• Visuthi
  Located 10 fingers above the Anakatham (i.e) located in throat. Letter “α” is inscribed. Element is Air.

• Aakinai
  Located between two eye brows. Element is Space. Letter “α” is inscribed.
Mandalam - 3 *(Regions)*

- Thee Mandalam (Agni Mandalam)
  
  Fire Region, found 2 fingers width above the Moolathaaram

- Gnayiru Mandalam (Soorya Mandalam)
  
  Solar Region, located with 4 fingers width above the umbilicus.

- Thingal Mandalam (Chandra Mandalam)
  
  Lunar Region, located at the center of two eye brows

Malam - 3 *(Three Impurities of the Soul)*

- Aanavam
  
  This act makes clarity of thought, knowing power of the soul, yielding to the egocentric consciousness like ‘I’ and ‘Mine’ considering everything is to his own.

- Kanmam
  
  Goes in collustion with the other two responsible for incurring Paavam (the Sin) and Punniyam (virtuous deed).

- Mayai
  
  Climbing ownership of the property of some one else and inviting troubles.

Thodam - 3 *(Three Humours)*

- Vali (Vatham)  - It is creative force. Formed by Vaayu and Aakaya bootham

- Azhal (Pitham)  - It is protective force. Formed by Thee bootham
• Iyyam (Kapham) - It is destructive force. Formed by Mann and Neer bootham

**Eadanai - 3 (Physical Bindings)**

• Porul Patru  - Material Bindings
• Puthalvar Patru  - Offspring Bindings
• Ulaga Patru  - Worldly Bindings

**Gunam - 3 (Three Cosmic qualities)**

• Sathuvam (*Characters of Renunciation or Ascetic Virtues*)
  The grace, control of sense, wisdom, penance, generosity, excellence, silence, truthfulness are the 8 traits
• Raso (*Characters of Ruler*)
  Enthusiasm, wisdom, valour, virtue, offering gift, art of learning, listening are the 8 traits
• Thamo (*Immoral Characters*)
  Immortality, lust, killing laziness, violation of justice, gluttonousness, false hood, forgetfulness, fraud.

**Vinai - 2 (Acts)**

• Nalvinai  - Good Acts
• Theevinai  - Bad Acts

**Ragam - 8 (The Eight Passions)**

• Kamam  - Desire
• Kurotham  - Hatred
• Ulobam  - Stingy
• Moham  - Lust (Intense or Sexual desire)
• Matham - Pride (The feeling of respect towards yourself)
• Marcharyam - Internal Conflict
• Idumbai - Mockery
• Ahankaram - Ego

Avathai - 5 (*Five States of Consciousness*)

• Ninaivu - Wakefulness with the 14 karvikaranathigal (5 pulan, 5 kanmaenthiriyan and 4 karanam) and feels the good and sad things.
• Kanavu - Dreams. In these 10 karvikaranathigal (5 pulan, 5 kanmaenthiriyan) except karanam present in the neck.
• Urakkam - Sleep. The state in which hearing and seeing can’t explained to others. The respiration present in the heart.
• Perurakkam - Repose (Tranquil or Peaceful State). The seevaanma stands in the naabi, producing the respiration.
• Uyirpadakkam - Insensibility to Surroundings. The seevaanma goes to moolathaaram and produce insensibility.

1.1.2 THE UYIR THATHUKKAL

The physiological units of the Human body are Vali (Vatham), Azhal (Pitham) and Iyyam (Kapham). They are also formed by the combination of the five elements. Accordingly Vali formed by the combination of Vali (Air) and Aagayam (Space). This is the Creative force. Azhal formed by Thee (Fire). This is the Force of Preservation. Iyyam formed by Mann (Earth) and Neer (Water). This is the Destructive Force. These three humours are in the ratio 4:2:1 in equilibrium or Normal condition, they are called as the Life Forces.
The formation of Uyir Thathukkal

The vali naadi is formed by the Abanan and Idagalai. The Azhal nadi is formed by Piranan and Pinkalai. The Iyya naadi is formed by Samanan and Suzhumunai.
1. Vali (Vatham)

Vali is soft, fine and the temperature (coolness and hotness) could be felt by touch.

*p The sites of vatha*

According to vaithya sathakam, vali dwells in the following places:

"உட்பிச்சை யாது வெள்ளாய்வு வெங்குதல்
 உந்தகற்சிலம் எர்கியாகிய சிகர் செய்ய
 கிளையும் பலியான பலியான கால்
 கைகற்சிலம் எர்கியாகிய சிகர் வளர்க்கும்
 கைகற்சிலம் பலியாகிய சிகர் வளர்க்கும்
 கைகற்சிலம் பலியாகிய சிகர் வளர்க்கும்"

- தஞ்சைமி காலம்

Umbilicus, rectum, Faecal matters, Abdomen, anus, bones, hip joint navel plexus, joints, hair follicle and muscles.

"உட்பிச்சை யாது வெள்ளாய்வு வெங்குதல்"

- மீனமி

"நவாருணா வானையாக கைப்பிட்ச் கைப்பிட்ச்
 செய்யனாக வானையாக வளர்க்கும்"

- புனித மாரமிய

According to Saint Thirumoolar and Yuki muni, the places of vatham are the anus and below the naval region.

*p Properties of vali:*

"உட்பிச்சை யாது வெள்ளாய்வு வெங்குதல்
 கைகற்சிலம் பலியாகிய சிகர் வளர்க்கும்"
The following are the natural properties of vatham

1. To stimulate the respiration
2. To activate the body, mind and the intellect.
3. To expel the fourteen different types of natural reflexes.
4. To activate the seven physical constituents in functional co-ordination.
5. To strengthen the five sense organs.

In the above process vatham plays a vital role to assist the body functions.

2. Azhal (Pitham)

The nature of Azhal is atomic. It is sharp and hot. The ghee becomes watery, salt crystalies and jaggery melts because of heat. The heat of Azhal is responsible for many actions and their reactions.

The seat of Azhal

According to vaithiya satham, the pingalai, urinary bladder, stomach, stomach and heart are the places where Azhal sustains.

In addition to the above places, the umbilicus, epigastric region, stomach, sweat, saliva, blood, essence of food, eyes and skin are also the places where Azhal sustains. Yugi muni says that the Azhal sustains in urine and the places below the neck.

The character of Azhal

Azhal is responsible for the digestion, vision, maintenance, of the
body temperature, hunger, thirst, taste etc. its other functions include thought, knowledge, strength and softness.

**The functions of Azhal**

1. Maintenance of body temperature
2. Produces reddish or yellowish colour of the body.
3. Produce heat energy on digestion of food.
4. Produces sweating
5. Induces giddiness.
6. Produces blood and the excess blood is let out.
7. Gives yellowish colouration to the skin, eyes, faeces and urine
8. Produce anger, heat, burning sensation, inaction and determination.
9. Gives bitter or sour taste.

**The types of Azhal**

1. Aakkanal - Anala pitham or Pasaka pitham - The fire of digestion.
   It lies between the stomach and the intestine and causes digestion and dries up the moist ingested substance.

2. Vanna eri – Ranjaga pitham - Blood promoting fire
   The fire lies in the stomach and gives red colour to the chyme and produces blood. It improves blood.

3. Aatralanki – Saathaga pitham – The fire of energy.
   It gives energy to do the work.

   It gives colour, complexion and brightness to the skin.

It lies in the eyes and causes the faculty of vision. It helps to visualize things.

3. Iyyam (Kapam):

- **The nature of Iyyam**
  Greasy, cool, dull, viscous, soft and compact are the nature of Iyyam.

- **Seats of Iyyam**
  Head, tongue, eyes, nose, throat, thorax, bone, bone marrow, joints, blood, fat, sperm and colon are the seats of Iyyam. It also lies in the stomach, spleen, the pancreas, chyle and lymph.

- **The natural quality of Iyyam**
  Stability, greasiness, formation of joints, the ability to withstand hunger, thirst, sorrow and distress are the qualities. It also helps to withstand sufferings.

- **Functions of Iyyam**
  Greasiness, strength, roughness, knowledge, cool, growth, heaviness of bone, restriction of joint movements, pallor, indigestion, deep sleep and to have a sweet taste in tongue are the function of Iyyam. The skin, eyes, faeces and urine are white in colour due to the influence of Iyyam.

- **Five types of Iyyam:**
  1. **Ali iyyam - Avalambagam**
     Heart is the seat of Avalambagam. It controls all other types of Iyyam.
2. **Neerpi iyyam** - *Kilethagam*:

   Its location is stomach. It gives moisture and softness to the ingested food.

3. **Suvai kaan iyyam** - *Pothagam*:

   Its location is tongue. It is responsible for the sense of taste.

4. **Niraivu iyyam** - *Tharpagam*

   It gives coolness to the vision.

5. **Ondri iyyam** - *Santhigam*

   It gives lubrication to the bones particularly in the joints.

### 1.1.3 THE UDAL THATHUKKAL

Udal Thathukkal is the basic physical constituents of the body. They are also constituted by the Five Elements.

**Seven physical constituents of the body:**

1. **Saaram**  
   This gives mental and physical perseverance.

2. **Cheeneer**  
   Imparts colour to the body and nourishes the body

3. **Oon**  
   It gives shape to the body according to the physical activity and covers the bones.

4. **Kozhuppu**  
   It lubricates the joints and other parts of the body to function smoothly.

5. **Enbu**  
   Supports the frame and responsible for the postures and movements of the body.

6. **Moolai**  
   It occupies the medulla of the bones and gives strength and softness to them.

7. **Sukkilam**  
   It is responsible for reproduction.
These are the seven basic constituents that form the Physical Body. The Bones are predominantly formed by the Earth component, but other elements are also present in it. All the three humours Vali, Azhal and Iyyam present in this 7 constituents. The intake food converted to udal thaadus in which the intake food is converted to saaram in the first day, and then it converted to chenneer in the second day, oon, kozhuppu, enbu, moolai and sukkilam respectively in the following days. So in the seventh day only the intake food goes to the sukkilam.

1.1.4 UDAL THEE (Four kinds of body fire)

There are four kinds of body fire. They are Samaakkini, Vishamaakkini, Deeshaakkini and Manthaakkini.

1. **Samaakkini**

The digestive fire is called as Samaakkini. This is constituted by Samana Vayu, Anala Pitham and kilethaga Kapham. If they are in normal proportion then it is called as Samakkini. It is responsible for the normal digestion of the food.

2. **Vishamaakkini**

Due to deranged and displaced Samana Vayu, it takes a longer time for digestion of normal food. It is responsible for the indigestion due to slow digestion.

3. **Deeshaakkini**

The samana vayu rounds up the Azhal, which leads to increased Anala Pitham, so food is digested faster.

4. **Manthaakkini**

The samana vayu rounds up the Iyyam, which leads to increased kilethaga Kapham. There fore food is poorly digested for a very
longer period and leads to abdominal pain, distention heaviness of the body etc.

1.1.5 THINAI

- There are five thinai (the land)

1. Kurinchi - Mountain
2. Mullai - Forest
3. Marudham - Agricultural land
4. Neidhal - The coastal area
5. Paalai - Desert

- Features of the five regions

1. Kurinchi

“அருகில் கண்காணிக்க வட்டமையால் பிறை
அருகில் கண்காணிக்க வட்டமையால் பிறை
சாத்திக் குறிப்பிட்டு வட்டமையால் பிறை
சுமாமிக் குறிப்பிட்டு ஆயிரே.”

- பகராத்து கைகள் சிற்றாண்டு

Fever causing anemia, any abnormal enlargement in the abdominal organ (vaitul aamai katti). Also leads to Iyya disease

2. Mullai

“மலையை கண்காணிக்க வட்டமையால்
மலையை கண்காணிக்க வட்டமையால் - மலையை கண்காணிக்க வட்டமையால்
சாத்திக் குறிப்பிட்டு வட்டமையால்
சுமாமிக் குறிப்பிட்டு போற்றும்”.

- பகராத்து கைகள் சிற்றாண்டு
This mullai land leads to the Azhal disease, vallai disease and Vali disease.

3. **Marudham**

   "அழக்கம் வல்லை வளியம் இரண்டு வடைமன்
   வாருகின்ற முழுமையும் வரையத்தில் - வரையத்தில்
   காரணிக்கப் படுகிறது அதிகமானிங்கள் வகைப்பாடுகளால்
   வெட்டுகின்றது வளியம் மன்”.

   - பாமங்குத் கம் சீமாணலை

   All the Vali, Azhal and Iyyam disease will be cured in this land.

4. **Neidhal**

   "வளி வல்லை இரண்டு வடைமன்
   வாருகின்ற முழுமையும் - வரையத்தில்
   முழுமையும் வரையத்தில் வடைமனிங்களிலும்
   காரணிக்கப் படுதும் கால்”.

   - பாமங்குத் கம் சீமாணலை

   This place induces Vali diseases and affects liver and intestines.

5. **Paalai**

   "பாலை வளியம் வடைமன் வழிபாடு
   முழுமையும் வரையத்தில் வடைமன்? - வரையத்தில்
   முழுமையும் வரையத்தில் வடைமன் வழிபாடு
   காரணிக்கப் படுகிறது”. வரையத்தில்

   - பாமங்குத் கம் சீமாணலை

   This land produces all the three Vali, Azhal and Iyyam disease.
1.1.6 KAALAM

Ancient Tamilians had divisions over the year into different seasons know as Perumpozhudhu and likewise in the day, it is known as Sirupozhudhu

Perumpozhudhu:

The year is divided into six seasons. They are,

1. Kaarkalam
2. Koothir
3. Munpani
4. Pin pani
5. Ilavenil
6. Mudhuvanil

Sirupozhudhu

The day has been divided into six yamams of four hours each. They are maalai (evening), Idaiyammam (Midnight), Vaikarai (Dawn), Kaalai (Morning), Nannpakal (Noon), Erpaddu (Afternoon). The each Perumpozhuthu and sirupozhuthu are associated with the three humours naturaly.

1.1.7 SIDDHA ANATOMY

As per the literature Pathinen Siddhar nadi sasthiram the Siddha anatomy were found.
The Height of one individual is 96 finger to his own finger. The total muscle weight is 125 palam, Each Eye - 2 Kalanchi weight, Nose - 3 Kalanchi Edai, Tongue - 4 Kalanchi edai, total bones weight - 120 palm, Liver - 8 palm, the total gastro intestinal tract length is 32 Muzham, Moolai is 8 palm. Blood - 30 uzhakku and 72000 Nadikal.

1.1.8. THE ASTROLOGY

Macrocosm and microcosm

Man is said to be microcosm, and the world is macrocosm; because what exist in the world exist in man. Man is an integral part of universal nature. The forces in the microcosm (man) are identical with the forces of the macrocosm (world). The natural forces acting in and through the various organs of the body are intimately related to the
similar or corresponding forces acting in and through the organism of the world. This closely follows the Siddhars doctrine

“அசாம்பு சுக்கநில்க்க பிரபலம்
பிரபலம் சுக்கநில்க்க அசாம்பு
அசாம்பு பிரபலம் வாசிக்கு
அசாம்பு கால் பார்க்கும் விளை”
- சாம்பல் தாலாத்

Astral influences:

All the influences that come from the sun, planets and stars act on human bodies.

Moon exercises a very bad influence over the disease in general, especially during the period of new moon. Examples are paralysis, brain affections, dropsy, and stimulation of sexual passions. Mars causes women’s suffering from want of blood and nervous strength. A conjugation of the moon with other planets such as Venus, mars, etc may make her influence still more injurious.

The 8th place from the laghanam deals about ones age, chronic disease, death etc.

“நான்மார் காலமின்றியிருப்பான் கள்ளம்
முதுகைசுவாரி விளையாடு
பர்வாய் காலமின்றிய முற்புலம்
யாம் திருத்திவிளையாட்டில்
சுருக்கம் ஆசாம்பு விளை
சுருக்கம் பார்க்கும் முறும் கள்ளம்
ஆசாம்பு சுக்கநில்கிற விளைக்கும் கள்ளம்"
In the organisms of man, these forces may act in an abnormal manner and cause disease. Similarly in the great organism of the cosmos they may act abnormally likewise and bring about disease on earth and its atmospheric condition like earthquake, storms etc. The mar invisibly influences human’s blood constituents. The Venus makes love between two persons of the opposite sex.

The following are the instance in which every sign of the zodiac has towards some particular parts of the body.

1. **According to T.V.S Dictionary.**
   - 1. Aries - To the neck
   - 2. Taurus - Neck and shoulder
   - 3. Gemini - Arms and hands
   - 5. Leo - The heart and stomach
   - 6. Virgo - The intestine, base of stomach and umbilicus
   - 7. Libra - Kidney
   - 8. Scorpio - Genitals
   - 9. Sagittarius - Lips
   - 10. Capricorns - Knees
   - 11. Aquarius - Legs
   - 12. Pisces - Feet

2. **According to literature Thiruvalluvar periya sunthara sekaram.**
   - 1. Mesam - Head
2. Risabam – Face  
3. Mithunam – Neck  
4. Kadagam – Shoulder  
5. Simmam – Chest  
6. Kanni – Side of body  
7. Thulam – Posterior trunk (muthugu), stomach  
8. Virutchigam – Testis  
9. Thanusu – Thigh (thudai)  
10. Magaram – Knee  
11. Kumbam – Calcanium  
12. Minam – Foot

The different planets influence the human organ.

1. According to literature Siddha maruthuvanga surukkam:

Like the signs of the zodiac each of the planets has jurisdiction over some parts of the body. The seven planets exercise special power over some parts of the body to cause disease or diseases according to their influences on the three humors in the system:

1. Saturn

It presides over bones, teeth, cartilages, ear, spleen, bladder and brain and gives rise to fever, leprosy, tabes, paralysis, dropsy, cancer, cough, asthma, phthisis, deafness of the right ear, hernia, etc.

2. Jupiter

It has jurisdiction over the blood, liver, pulmonary veins, diaphragm, muscles of the trunk and sense of touch and smell.

3. Mars
It has power over the bile, gall bladder, left ear, pudendum, kidneys, fever, jaundice, convulsions, hemorrhage, carbuncle, erysipelas, ulcer etc.

4. Venus

It presides over the pituitous blood and semen, throat, breast, abdomen, uterus, genetalia, taste, smell, pleasurable sensation, gonorrhea, barrenness abscesses or even death from sexual or poison.

5. Mercury

It has jurisdiction over the animal, spirit, over legs, feet, hands, fingers, tongue, nerves and ligaments and produces fevers mania, phrenitis, epilepsy, convulsion, profuse expectoration or even death by poison, witchcraft and so on.

<table>
<thead>
<tr>
<th>Planets</th>
<th>Organ influenced</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Solar force</td>
<td>Heart</td>
</tr>
<tr>
<td>2. Lunar force</td>
<td>Brain</td>
</tr>
<tr>
<td>3. Mars</td>
<td>Gall Blader</td>
</tr>
<tr>
<td>4. Mercury</td>
<td>Kidney</td>
</tr>
<tr>
<td>5. Venus</td>
<td>Lungs</td>
</tr>
<tr>
<td>6. Jupiter</td>
<td>Liver</td>
</tr>
<tr>
<td>7. Saturn</td>
<td>Spleen</td>
</tr>
</tbody>
</table>

2. According to literature Thiruvalluvar periya sunthara sekaram.

1. Sooriyan – head
2. Santhiran – face
3. Sevvai – chest
4. Puthan – center of posterior trunk

5. Guru – stomach

6. Sukiran – groin, genitalia

7. Sani – thigh (thudai)

8. Raagu – hands

9. Kedhu – legs

The related Rasi and the organs, like wise the related Kiragam and organs are more prone to disease in their corresponding organ itself. Therefore, the human body is impregnated with the vital forces to be affected by the astronomical bodies in the sky. With the augmented spiritual force, a sage is able to control the above said planets. The others are activated by the force of these asteroids.

So by the literature Sithamaruthuvanga surukkam, T.V.S dictionary, Thiruvaluvar periya sunthara sekaram, the stomach is closely related to Guru, Simmam, Kanni, Thulam.
1.2 KUGARANA NILLAI IN SIDDHA MEDICINE

This is the first medical system to emphasize health as the perfect state of Physical, Psychological, Social and Spiritual component of human being.

The condition of the human body in which the dietary habits, daily activities and the environmental influence keep the three humours in equilibrium is considered as Healthy Living.

DISEASE

Disease is also known by other names via malady, sickness, distemper, suffering, and ailment, distress of mind, chronic disease and dreadful illness.

THE CHARACTERISTICS OF DISEASE:

Disease is of two kinds:

1. Pertaining to the body and disease

2. Pertaining to the mind according to the variation of the three humors.

Cause for Disease:

Excepting the disease caused by our previous birth, the disease caused by our present birth is due to our food habits and actions.

This has been right by quoted in the following verse by saint Thiruvalluvar:

"வேதியியற்றும் விகர்வியற்றும் உள்ளே
உண்மையுடன் வாழ்வெழு வாழே (தீர்வு)

The food and action of a person should be in association with the nature of his body. Any increase or decrease in a humor viz. vali (vatham), Azhal (pitham), Aiyam (kapham) leads to the derangement of the three humors. The agreement of food means the taste and quality of the food eaten and a person’s
ability to digest. Agreement of action means his good words, deeds and action. According to Thiruvalluvar the disease is caused due to the increase or decrease in the equilibrium of three humors.

So disease is a condition in which there is derangement in the Five Elements, which alters the three humours, which is also reflected in the Seven Physical Constituents. The change could be an increase or decrease in the equilibrium. They show their following signs as per the vitiation of individual humour.

**Functions of deranged Vali (vatham)**

Body ache and pain, pricking pain, the pain as though the body is tightly bounded by cords, nervous debility, tremor, rigidness, dryness, remorseless, emaciation, throbbing pain, trauma, displacement of joint, weakness of the functional organ and loss of function, loss of sensation, perception of astringent taste only, constipation, concentrated urine, thirst, sensation of fragility in the foreleg and thigh, numbness and pricking pain in the bone, goose skin, stiffness of upper and lower limbs and back, the skin, eyes, faces and the urine are black in colour.

**Features of increased vali**

Emaciation, body color – blackish, desire to take hot food, shivering of body, abdominal distension, constipation, insomnia, weakness, weakness of five sense organs, giddiness, ookkam inmai.

**Features of decreased vali**

Body pain, feeble voice, decreased activity, dull mental power, syncope, disease caused by increase of Iyyam.

**Features of increased Azhal**
Yellow colouration of the skin, yellow colouration of the eye, yellow colouration of urine, yellow coloration of faeces, increased appetite, increased thirst, irritation all over the body, reduced sleep.

**Features of decreased Azhal**

Poor digestion, coolness and demulcent, pallor, Iyya disease.

**Features of increased Iyyam**

Increased salivary secretion, reduced activeness, heaviness of the body, body colour – whitish, chillness of the body, reduced appetite, Cough, eraippu, increased sleepiness.

**Features of decreased Iyyam**

Vertigo, weekness and dryness of joints, causing prominence of articular bones, dry cough, lightness, excessive sweat, palpitation of heart.

**The variation of the seven thathukkal.**

1. **Saaram**

   Increased Saaram leads to disease of increased Iyyam like indigestion.

   Etc

   Decreased Saaram leads to loss of weight, tiredness, and lassitude, dryness of the skin and diminished activity of the sense organs.

2. **Chenneer**

   Increased chenneer causes boils in different parts of the body, throbbing pain, anorexia, mental disorder, splenomegaly, a colic pain, increased blood pressure, reddish eye and skin, jaundice, haematuria etc.

   Decreased chenneer leads to anemia, tiredness, neuritis and lassitude, pallor of body.
Oon

Oon in excess causes cervical lymph adenitis, syphilitic ulcer, tumor in face, abdomen, thigh, genitalia, etc, hyper muscular in the cervical region are the signs.

Decreased oon leads to impairment of sense organs. Joints diseases and jaw, thigh and genitalia gets shortened.

3. Kozhuppu

The increased kozhuppu leads to that of increased oon associated with dyspnoea and loss of activity.

Decreased kozhuppu leads to pain in the hip region and disease of spleen.

4. Enbu

Excess of enbu causes growth in bones and teeth.

Decreased enbu causes pain in joints, teeth disease, breaking of nails and hair.

5. Moolai

Excess cause’s obesity, heaviness of eyes, decreased urine, delayed wound healing.

Decreased moolai causes pores in the bones, diminished vision.

6. Venneer

Excess venneer causes calculus, increased sexual attitude.

Decreased venneer causes pricking pain in testis, black coloration of genitalia.
1.3 DIAGNOSTIC METHODS OF SIDDHA SYSTEM

The diagnostic methodology in Siddha treatment is unique in which the Physician examines the tongue, complexion, speech, eyes, and palpatory findings in a patient and also examines the urine and stools. The diagnosis is then confirmed by the ‘Pulse Diagnosis’. The examination for the above is called as the “Envagai thervugal” (Eight Tools of Diagnosis).

These diagnostic tools not only help for diagnosis but also to learn the prognosis and restoration of health. Apart from the envagai thervu there other parameters in Siddha system to diagnose the disease, they are the Manikadai nool and the Sothidam.

Envagai thervugal

The diagnostic stools of envagai thervu slightly differs from Siddhar to Siddhar. The most common is

"நூறு ஓஸ்பூரில் முதியும் அனுரையும்
வெண்கல் தருணியும் பாதங்குறு பாகம்"
- தருணியும் பாகம் பாகம்

As per Saint Therayar, the eight methods of diagnosis are nadi (pulse), Naa(tongue), Niram (color), Mozhi(voice), Vizhi (eyes), Malam (faeces) and Neer (urine), sparisam(touch).
As per sait Agathiyar Nadi, Malam, Salam, Niram, Gunam, Muga kuri, Thegam, Vayadhu, Elamai are the diagnostic stools.

According to literature Kannu saami paramparai vaithiyam Naadi, varthai, Naa, Thegam, Thodu unarvu, Niram, Malam, Salam, Vizhi are the diagnostic stools.

According to literature Agathiyar vaithiya surukkam the diagnostic stools are Nadi, Vizhi, Kurigunam, Nalkurippu, Maeni, Malam, Neer.
According to above literature the diagnostic stools are Mugam, Pal, Vai, Naakku, kaayam, Irumalam, Nadi.

According to Literature Thanvantri vaithiyam the diagnostic stools are Nadi, Mugam, malam, Neer, Udal, Vizhi, Naa, Pal.
According to the above literature the diagnostic stools are Nadi, Kan, Sattham, Thegam, Parisam, Naa, Irumalam.

**Tongue (தாய்க்குறிப்பு)**

In Vali derangement, tongue will be cold, rough, furrowed and pungent taste. In Azhal, it will be red or yellow and kaipu taste will be present. In Iyyam, it will be pale, sticky and sweet taste will be present. In depletion of thontham, tongue will be dark, with the papillae raised and dry.

**Colour (நிறம்)**

"வல்லூரில் அய்வக நிறங்கள் நிருவக

பார்வாதை நூற்றுக்கு நூற்று பொறும்"
In Vali, Azhal and Iyyam vitiations, the colour of the body will be Back, Yellow or red and White colour respectively.

**Voice (அன்னிதம் பாடல்)**

"பாடல் கல்லால் அந்திகளின் பிறுத்தூர் வாசகக்
பக்காவளியல் சுருந்து பலமிக்க
சைவமறுவியல்வியலை வாசகக்
அறிவுறையால் பலமிக்கையில்
தம்பியால் புரிந்து பாதிக்க
நுட்பாக்கும் சிறுத்துக்குடியேறிப்பையை
தொடர்ந்து பல்பொருள்பதிவுகள்
காணவை பல்லிவுடைய எண்ணிட்டே"
In vitation of vali, Azhal and Iyyam the voice will be Medium, heavy and lower respectively. By the voice, the strength of the body can also be accessed.

**The Eyes (விளிம்பு  பாறைகள்)**

“In vali disease the tears are black colour, in Azhal disease they are
yellow, in Iyya disease they are whitish in colour and in thontha disease the tears are multi colour. In vali disease the tearing will be increasingly present. In disturbance of all three humoors, eyes will be inflamed and red.

**Faeces** (பூச்சு பாச்‌சு)

“இன்னொருள் மாற்றபாதை மாற்ளும் பாச்‌சு
இன்னொருள் மாற்றம் மாற்றி மக்குத்தி
மும்பருக் குற்றமைத்து புதும் பாச்‌சு
மும்பருக் குற்றமைத்து புதும் பாச்‌சு
மும்பருக் குற்றமைத்து

**Urine** (முடா பாச்‌சு)

“In provoked Vali - faeces is hard, dry and black in colour. In Azhal vitiation, it is yellow. In Iyyam disturbance it is pale.

“வருடியால் மாற்றுக்கொண்டு தின்படி தெளிவிக்
புதிரையும் குற்றுக்கொண்டு குற்றுக்கொண்டு மாற்று
புதிரையும் குற்றுக்கொண்டு

**National Institute of Siddha - Chennai**

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Neer is urine and kuri is signs and symptoms. Theraiyar, one of the authors of Siddha medicine who wrote on urine examination and stages of health. He explains the colour and consistency of the urine in different humour and disease. He also describes the spreading of a single drop of oil on the surface of the urine indicates imbalance of specific dosha and prognosis of disease. Normal urine is thin straw colour and odourless. The time of day and meals eaten will affect the colour of the urine.

**Colour of urine**

1. **Yellow colour** - similar to straw soaked water - *indigestion*
2. Lemon colour - good digestion
3. Reddish yellow - heat in body
4. Colour similar to forest red or flame coloured - extreme heat
5. Colour of saffron- heat in body at highest level

**Nei Kuri**

"அந்தம் மாறிகு அவிச்சென் குமார
நில அவிச்சு அவன் அவிச்சென் குமார்
புரியாந் அவிச்சு என்னை கொண்டு
அவிச்சென் குமார் கொண்டிரு.

பொய்திண்ண வெள்ளியான தூக்கி என.
அருவை கோண்டார் பவளம்
"
The oil spreading nature indicates the Vali, Azhal and Iyya disease e.g
1. Aravu (Snake Pattern of spread) indicates Vali disease
2. Mothiram (Ring Pattern of spread) indicates Azhal disease
3. Muthu (Pearl Pattern of spread) indicates Iyya disease

In Nei kuri, the fastly spread, muthu and salladai kan type of spreading nature shows the Asaathiyam (incurable) state of the disease. So the prognosis can be assessed by the Nei Kuri.
In Vali disease some of the body areas are chill and in some areas they are hot.
In Azhal disease heatness can be felt. In Iyya disease chillness can be felt. In Thontham disease different sense will be felt.

**Naadi (நாடி)**

The ‘Pulse Diagnosis’ is very unique in Siddha Medicine, which was introduced to other Indian Systems of Medicine at a later period. The pulse is examined in the Right hand of males and the left hand for females. The pulse is recorded at the Radial-artery. Diagnosis and Prognosis are done by reading of the pulse.

Naadi is nothing but, the vital energy that sustains the life in our body. Naadi plays the most important role in envagai thervu and it has been considered to be the most important for assessing the prognosis and diagnosis of the disease. Any variation that occurs in the three humours is reflected in the naadi. These three humours organize, regularize and integrate the functions of the human body. So, naadi serves as a good indicator of all ill health.
Naadi is felt as,

Vali - Tip of index finger
Azhal - Tip of middle finger
Iyyam - Tip of ring finger

The Gait of the Naadi:

Compared to the various animals, reptiles and birds.

The normal unit of pulse diagnosis is 1 for Vali (Vatham), ½ for Azhal (Pitham) and ¼ for Iyyam (Kapham).
Vali - Movement of Swan and Peacock
Azhal - Movement of Tortoise and Leech
Iyyam - Movement of Frog and Serpent.

MANIKADAINOOL *(Agathiya soodamanikayaru soothiram)*

“கால்குக்காட்டிகளினால் மூன் குறிப்பிட
நிலையில் நிகழ்விலிருந்து
நீரேற்றாகும் பாறை நோய் தேவைமா
அணக்கருனியது வலமறுநிய தருமிடு”

- பாதிக்கும் பயனுடைய தொடர் கருத்து

According to the Pathinen siddhar naadinool, Manikadainool is also used for diagnosis. This manikkadai nool is a parameter to diagnose the disease through measuring the length of the wrist by the thread and then measuring the thread with the patient’s finger. By this measurement the disease can be diagnosed.
AIM AND OBJECTIVE

Health is the perfect state of physical, psychological, social and spiritual components of human being. Disease is the result of abnormality and wrong pattern of living, including various combination of harmful diet, contrived habits such as smoking, alcohol etc. These leads to derangements in the five elements, this alters the three humours which in turn reflected in the seven physical constituents. The healthy living is the condition of the human body in which the dietary habits, daily activities and the environmental influences to keep the three humours in equilibrium.

On the other hand physical and mental state like fear, anger, worries, induces morbid state and generates a lot of malady. One among them is the Gunmasoolai, which is a gastro intestinal disorder.

Now a day, due to altered food habits and stress factors people are highly affected by Gunmam disease. The untreated chronic Gunmam again due to chronic stress and altered food habits leads to Gunmasoolai, which has severe colic pain in the abdomen etc.

During 2005 – 2006, approximately 1500 cases of Gunmam (including treated and untreated cases) which may leads to Gunmasoolai were recorded in out patient department of Ayothidoss pandithar hospital, National institute of siddha. It is always essential to identify the cause for any disease to be accepted as scientific methods.

So these facilitated me to take Gunmasoolai as my dissertation work.
A. Primary aim:

1. The main aim is to diagnose the **Gunmasoolai** through Envagai thervu, Kalam, Nilam, Manikadai nool and Sothidam.

B. Secondary Aim:

1. The secondary is aim to establish the Vali humour is deranged in **Gunmasoolai**.

2. To make a clinical study of **Gunmasoolai** on the basis of siddha literature.

3. To have an idea of incidence of the **Gunmasoolai** with reference to sex, age, habit.

4. To collect literary evidences about **Gunmasoolai**.

5. To study the detailed aetiological factors of **Gunmasoolai**.

6. To analyse the signs and symptoms of **Gunmasoolai**.

7. To find out the changes of Udal thathu and Uyir thathu and 96 thathuvam.
**CHAPTER 3**  
**REVIEW OF LITERATURE**

**Gunmasoolai** is a specific type of disease with pricking pain in the abdomen with many other symptoms like constipation, flatulence, body pain. It is classified under Soolai Noi.

As per Siddhar *Yugimuni* ‘Soolai’ is defined as the severe pricking pain present in the Ribs, stomach, hip and back of the body.

‘**Gunmam**’ is a specific type of disease which dysfunctions the physical and mental condition of the body. It occurs in the abdomen. As per Siddhar *Yugimuni*, Gunmam is classified into 8 types. In this classification of Gunma Noi, Gunmasoolai is not mentioned, but due to the severity of pricking pain present in Gunmasoolai, it is classified under Soolai Noi which has 15 types.

The **Gunmasoolai** is the combined form of Gunmam and Soolai.

As per the above quotation of Siddhar *Therayar*, the Vali humour is deranged in both the conditions.
3.1 READING LINES BETWEEN YUGI’S POEM

As per Saint Yugimuni, Gunmasoolai is a type of Soolai disease. In Gunmasoolai vali humour is predominately vitiated. The vitiation of vali is due to irregular food habits, physical and mental activities etc. As a result of vitiation of vali important vayus Piran, Uthanan, Abanan, Viyanan and Samanan are vitiated. The vitiation of the above vayus resulted in the following symptoms as per the literature Yugi vaithiya sinthamani -700

Symptoms of Gunmasoolai:

- Retention of faeces, constipation
- Stricture of urine, retention of urine
- Rumbling in the abdomen, gargling sound
Generally the Soolai is the continuation of the Gunmam disease. The Gunmam are compared to ulcer. So the Gunmam leads to the Gunmasoolai and all the above symptoms may approximately correlates with the chronic gastric ulcer.
3.2 OTHER SURVIVING SIDDHA LITERATURE

1. According to Literature T.V.S dictionary,

As per the T.V.S literature, Gunmasoolai and Soolaigunmam are same and both are mentioned as, a kind of dyspepsia

- **Gunmasoolai (கும்பசூலை):**
  
  1. Colicky pain in the abdomen experienced in cases of dyspepsia
  2. A kind of dyspepsia marked by its supervening symptoms via colicky pain in the upper part of the abdomen, burning sensation, water-brash, belching, salivation, a kind of digging and piercing pain resembling that arising from the piercing of a dart, numbness stiffness of the limbs etc.

- **Soolai gunmam (சூலைகுமம்):**
  
  A form of dyspepsia arising from the abnormal heat of the bilious system. It is attended, swelling rumbling noises of the storm in the evening, low fever etc.

2. According to literature Yugi vaithiya kaaviyam

According to this literature the symptoms of Gunmasoolai and Soolaigunmam are same. The two poems symptoms and lines are same with very mild differences and they are placed under the Gunmam and Soolai disease.
As per the above poem, the **Gunmasoolai** has pricking pain with burning sensation in the upper abdomen, increase salivation, belching, and chillness of body and then warmthness of body.

As per the above poem, **Soolaigunmam** has pricking pain with burning sensation in the upper abdomen, increase salivation, vomiting, belching, and chillness of the body followed by warmthness. So as per this literature these both diseases **Gunmasoolai** and **SoolaiGunmam** are same.

### 3. According to Aathmaratchamirthham (uyir kakkum Siddha maruthuvam)

The signs and symptoms of **Gunmasoolai** are as follows.

1. Upper abdominal pain with burning sensation
2. Increased saliva secretion

3. Belching

4. Mild warmth ness

5. Shivering

6. Pain in the joints

Here Gunmasoolai have the maximum same symptoms of literature Yugi vaithiya sinthamani, the difference is, the pain is indicated particularly to the epigastric region and classified in the Gunmam disease.

4. குண்மசூலை: 

According to the above literature Gunmasoolai is mentioned as Soolaigunmam. The vayu gets in the ribs and produce constipation, sever body pain, pricking pain in the abdomen, flatulence, belching, meat odor, dryness of the body.

Though the Yugi vaithiya sinthaamani mentions, general pricking pain in abdomen with the help of the above literatures the location of pain is indicated to epigastric region only.

So the Gunmasoolai is classified in both Gunmam and Soolai disease. Like Pandu, Soobai and Kaamaalai, the Soolai is the continuation of Gunmam. The untreated Gunmam leads to the Soolai disease with severe pricking pain in the abdomen or ribs.
The clinical study on topic “Gunmassolai” was carried out in the out-patient department of the Ayothidoss Pandithar Hospital of the National Institute of Siddha, Chennai-47.

Selection of Cases

30 cases were selected from the out patient department and were followed under the supervision of the Head of department and Staffs of the post graduates Noi nadal department.

Population and sample

The population consists of Gunmassolai patients with constipation, scanty micturition, flatulence, vomiting, moorchai (giddiness), severe pricking pain in abdomen, burning sensation in abdomen, increased salivary secretion, belching, reduced intake of food, mild heatness of body, general body tiredness, dryness of body or loss of taste. The sample consists of Gunmassolai patients attending out patient department of the Ayothidoss Pandithar Hospital of the National Institute of Siddha, Chennai-47.
Inclusion criteria

1. Age above 20 years
2. Duration of disease more than 3 years

Exclusion criteria

1. Patients with any serious illness

Evaluation of Clinical Parameters

During interrogation, the cases were subjected to careful examination which involved history taking and examination of clinical features. The signs and symptoms of Gunmassolai as per the literature Yugimuni Vaithiya Sinthamani, constipation, scanty micturition, flatulence, vomiting, moorchai (giddiness), severe pricking pain in abdomen, burning sensation in abdomen, increased salivary secretion, belching, reduced intake of food, mild heatness of body, general body tiredness, dryness of body and loss of taste. The detailed history of the past and present illness, dietary habits, occupational history were also taken, before considering the case for selection in this study. The patients satisfying inclusion and exclusion criteria will be admitted to the study.

Study on Siddha Clinical Diagnosis

The Envagai thervu, Mukkutram, Udal thathukal, Manikadai nool, Nilam, Kalam and Sothidam of the patient were assessed.
Modern parameters

The following routine laboratory investigations were carried out in the patients.

**Routine**

Total count
Differential count
Erythrocyte sedimentation rate
Haemoglobin estimation
Blood sugar
Blood grouping

**Urine**

Albumin
Sugar
Deposits

**Motion**

Ova
Cyst

**Specific tests**

U.S.G Abdomen Scan
Endoscopy
In the present study comprising 30 patients, all were between the ages of 17 to 50 years. No patients were below 17 and above 50 years. The incidence of Gunmassolai during sex, season of the year, month of the year, was also studied.

Among the 30 patients admitted in the O.P.D and I.P.D of Ayothidoss pandithar hospital, National institute of Siddha. All the patients were seen throughout all the seasons. The incidence in the three periods of human life namely Vali kaalam, Azhal kaalam and Iyya kaalam is noted.

### 7.1 SEX DISTRIBUTION

<table>
<thead>
<tr>
<th>Sex</th>
<th>No of cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>7</td>
<td>23</td>
</tr>
<tr>
<td>Female</td>
<td>23</td>
<td>77</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

Out of 30 cases, there were 7 males and 23 females. Their ages were ranging from 17 to 50 years. 23% of cases were male and 77% of cases were females. The housewives are more affected to Gunmassolai due to altered food diet, stress and anger.

Pie diagram showing the sex distribution of Gunmassolai
### 7.2 Age Distribution with Corresponding Kaalam

<table>
<thead>
<tr>
<th>Age Group and Kaalam</th>
<th>No of cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 to 33 yrs - Iyya Kaalam</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>33 to 66 yrs - Azhal Kaalam</td>
<td>18</td>
<td>60</td>
</tr>
<tr>
<td>66 to 100 yrs - Vali Kaalam</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 40% of cases were in the Iyya Kaalam i.e age group between 1 to 33 yrs. 60% of cases were in the Azhal Kaalam i.e age group between 33 to 66 yrs.

**Bar diagram showing the Age distribution with the corresponding Kaalam**
### 7.3 KAARANANGAL FOR GUNMASSOLAI (ETIOLOGY)

#### Table No. 3

<table>
<thead>
<tr>
<th>Kaaranangal for Gunmassolai</th>
<th>No. of Case (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased intake of thuvarpu taste</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Increased intake of milagu vagai uraippu</td>
<td>23</td>
<td>77</td>
</tr>
<tr>
<td>Increased intake of kilangu vagai</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Pasi adakuthal</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Pugai pidithal</td>
<td>6</td>
<td>20</td>
</tr>
<tr>
<td>Increased punarchi</td>
<td>13</td>
<td>43</td>
</tr>
<tr>
<td>Increased anger</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Mana salippu</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Miguntha sandai iydal</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>Virainthu odal</td>
<td>13</td>
<td>43</td>
</tr>
<tr>
<td>Pacchai marangalai vaettuthal</td>
<td>6</td>
<td>20</td>
</tr>
</tbody>
</table>

Among the 30 case, 100% of cases were having increased anger, Mana salippu, Pasi adakuthal and 93% of cases were having increased intake of Kilangu vagai about 77% case were having increased intake of milagu vagai uraippu
### 7.4 Pothu Kaaranangal for Vali (Etiology)

#### Table No. 4

<table>
<thead>
<tr>
<th>Pothu Kaaranangal for Vali</th>
<th>No. of Case (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased intake of Kaipu taste</td>
<td>12</td>
<td>37</td>
</tr>
<tr>
<td>Increased intake of Thuvarpu taste</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Increased intake of Kaarpu taste</td>
<td>23</td>
<td>77</td>
</tr>
<tr>
<td>Increased intake of Pulpul</td>
<td>23</td>
<td>77</td>
</tr>
<tr>
<td>Increased intake of Palaya saatham</td>
<td>20</td>
<td>67</td>
</tr>
</tbody>
</table>
### Observation and Results

<table>
<thead>
<tr>
<th>Condition</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased intake of Kail varagu</td>
<td>7</td>
<td>23</td>
</tr>
<tr>
<td>Increased intake of Varagu</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Increased intake of Naei[ghee]</td>
<td>18</td>
<td>60</td>
</tr>
<tr>
<td>Miguntha kaatru padum padi iruthal</td>
<td>27</td>
<td>90</td>
</tr>
<tr>
<td>Altered diet timings</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Increased intake of water</td>
<td>27</td>
<td>90</td>
</tr>
<tr>
<td>Increased Anger</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Fear</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Sadness [Thukkam]</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Fast running [Virainthu oodal]</td>
<td>13</td>
<td>43</td>
</tr>
<tr>
<td>Prolonged constipation</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Pagalil thungi iravil Kanvizhithal</td>
<td>20</td>
<td>67</td>
</tr>
<tr>
<td>Increased sexual desire</td>
<td>13</td>
<td>43</td>
</tr>
<tr>
<td>Increased Starvation</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

Among the 30 case, 100 % of cases were having altered diet timings, increased starvation, fear, sadness (thukkam) and increased anger. 93 % of cases were having prolonged constipation, 90% case were having increased intake of water, miguntha kaatru padum padi iruthal, 77% case were having increased intake of pulipu and increased intake of kaarpu taste. 67% of cases were having increased intake of palaya saatham and pagalil thungi iravil kanvizhithal. 60% of cases having increased intake of naei[ghee].
7.5 **FOOD HABIT**

<table>
<thead>
<tr>
<th>Food Habit</th>
<th>No. of. Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vegetarian</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Non Vegetarian</td>
<td>29</td>
<td>97</td>
</tr>
<tr>
<td>Alcohol</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Smoking</td>
<td>6</td>
<td>20</td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 97% of cases were Non vegetarian, 20% were smoking and 17% were Alcoholic.

7.6 **UDAL VANMAI**

<table>
<thead>
<tr>
<th>Udal Vannmai</th>
<th>No of cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iyyalpu</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Valivu</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Melivu</td>
<td>27</td>
<td>90</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 90% of cases were Melivu udal Vanmai.

7.7 **NAADI**

<table>
<thead>
<tr>
<th>Naadi</th>
<th>No. of. Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Naadi Nithanam</td>
<td>Vannmai</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Menmai</td>
<td>27</td>
</tr>
</tbody>
</table>
## Observation and Results

<table>
<thead>
<tr>
<th>Total</th>
<th>30</th>
<th>100</th>
</tr>
</thead>
<tbody>
<tr>
<td>Naadi Panbhu</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Puranadai</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Azhunthal</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Kalatthal</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Naadi Nadai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vali Azhal</td>
<td>20</td>
<td>67</td>
</tr>
<tr>
<td>Azhal Vali</td>
<td>7</td>
<td>23</td>
</tr>
<tr>
<td>Iyya Vali</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Vali Iyyam</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Iyya Azhal</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 90% of cases were having Naadi nithaanam as Menmai. 100% were having Kallathal and puranadai as Naadi Panbhu. In the Naadi nadai, 67% were having Vali Azhal, 23% were Azhal Vali and 3% were Vali Iyyam, Iyya Vali and Iyya Azhal

### Bar diagram showing Naadi nadai in percentage

![Bar diagram showing Naadi nadai in percentage](https://via.placeholder.com/150)
### 7.8 NAA

Table No. 8

<table>
<thead>
<tr>
<th>Naa</th>
<th>No. of Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thanmai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maa padithal</td>
<td>27</td>
<td>90</td>
</tr>
<tr>
<td>Vedippu</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Niram</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Karuppu</td>
<td>17</td>
<td>57</td>
</tr>
<tr>
<td>Manjal</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Vellupu (pallorness)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Suvai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kaippu</td>
<td>2</td>
<td>6.6</td>
</tr>
<tr>
<td>Normal</td>
<td>5</td>
<td>16.6</td>
</tr>
<tr>
<td>Loss of taste</td>
<td>23</td>
<td>76.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Vai neer ooral</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increased</td>
<td>27</td>
<td>90</td>
</tr>
<tr>
<td>Normal</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 90% of cases were having Maapadithal, 100% case were having Vedippu. In tongue 100 % case were having Velluppu (pallorness) and 57% of cases were having Karrupu niram. In Suvai among 30 cases 76.6% cases were having Loss of taste and 6.6% of cases were having Kaippu taste. Among 90% of case were having increased saliva secretion.
### 7.9 NIRAM, MOZHI AND VIZHI

#### Table No. 9

<table>
<thead>
<tr>
<th>Niram, Mozhi and Vizhi</th>
<th>No. of Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Niram</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Karuppu</td>
<td>25</td>
<td>83.3</td>
</tr>
<tr>
<td>Manjal</td>
<td>1</td>
<td>3.3</td>
</tr>
<tr>
<td>Vellupu</td>
<td>4</td>
<td>13.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td><strong>Mozhi</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sama oli</td>
<td>26</td>
<td>87</td>
</tr>
<tr>
<td>Uratha oli</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Thazhantha oli</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td><strong>Vizhiyin Niram VenVizhi</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Karuppu</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Manjal</td>
<td>10</td>
<td>33</td>
</tr>
<tr>
<td>Sivappu</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Vellupu (pallor)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td><strong>Vizhiyin Thanmai</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kanneer</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Kan Erichchal</td>
<td>18</td>
<td>60</td>
</tr>
<tr>
<td>Peelai seruthal</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Parvai kuraivu</td>
<td>17</td>
<td>57</td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 83.3% cases were black colour. 87% of cases were having Sama oli. In the Naadi nadai, In vizhiyin niram, 100% were having Vellupu, 33% were Manjal and 13% were Sivappu. 60% cases have Kan erichchal and 57% cases haved vision affected. 17% cases have Kanneer and peelai seruthal.
### 7.10 MEIKURI

**Table No. 10**

<table>
<thead>
<tr>
<th>Mei kuri</th>
<th>No. of Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veppam</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mitham</td>
<td>26</td>
<td>87</td>
</tr>
<tr>
<td>Migu</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Thatpam</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Viyarvai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normal</td>
<td>26</td>
<td>87</td>
</tr>
<tr>
<td>Reduced</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Thanmai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thodu vali</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Udal varatchi</td>
<td>24</td>
<td>80</td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 87% of cases were having Mitha veppam. 87% of cases were having normal viyarvai. 100% of Cases were having Thodu Vali and 80% of cases were having Udal varatchi.

### 7.11 MALAM

**Table No. 11**

<table>
<thead>
<tr>
<th>Malam</th>
<th>No. of Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niram</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Karuppu</td>
<td>18</td>
<td>60</td>
</tr>
<tr>
<td>Manjal</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Thanmai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mala Sikkal</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Sirutthal</td>
<td>28</td>
<td>93</td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 60% of cases were having Karutha malam. 93% of cases were having Malasikkal and Siruthal.
### 7.12 NEER KURI

<table>
<thead>
<tr>
<th>Neer Kuri</th>
<th>No. of. Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neer Thanmai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neer Manam</td>
<td>8</td>
<td>27</td>
</tr>
<tr>
<td>Neer Erichchal</td>
<td>16</td>
<td>53</td>
</tr>
<tr>
<td>Neer Niram</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Venmai</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Manjal</td>
<td>20</td>
<td>67</td>
</tr>
<tr>
<td>Crystalclear</td>
<td>6</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Nurai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nil</td>
<td>24</td>
<td>80</td>
</tr>
<tr>
<td>Reduced</td>
<td>6</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Edai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normal</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Enjal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normal</td>
<td>10</td>
<td>33</td>
</tr>
<tr>
<td>Reduced</td>
<td>20</td>
<td>67</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Nei kuri</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aravam</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Muthu</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Melaparaviyathu</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Asathiyam</td>
<td>26</td>
<td>87</td>
</tr>
</tbody>
</table>

Among the 30 cases of this study 27% of cases were having Neer manam. 53% of cases were having Neer erichchal. 67% of Cases were having Manjal niram urine and 80% of cases were having Udal varatchi. 100% were normal edai. 67% were having reduced Enjal. 87% of cases were having Asathiya Nei kuri.
### 7.13 IMPORIGAL AND KANMAENTHIYANGAL

Table No. 13

<table>
<thead>
<tr>
<th>Imporigal and Kanmaenthriyangal</th>
<th>No. of Cases affected (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Imporigal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mei</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Vaai</td>
<td>21</td>
<td>70</td>
</tr>
<tr>
<td>Kan</td>
<td>17</td>
<td>57</td>
</tr>
<tr>
<td>Kanmaenthriyangal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kaal</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Eruvaai</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Karuvai</td>
<td>7</td>
<td>23</td>
</tr>
</tbody>
</table>

Among the 30 cases of this study, in 100% of cases Mei had affected and in 70% of cases Vaai had affected. In 93% of cases Eruvaai had affected.

### 7.14 MANIKADAI NOOL

Table No. 14

<table>
<thead>
<tr>
<th>Manikadai nool (Viral kadai)</th>
<th>No of cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>16</td>
<td>53.3</td>
</tr>
<tr>
<td>9</td>
<td>3</td>
<td>10.0</td>
</tr>
<tr>
<td>9 ¼</td>
<td>2</td>
<td>6.6</td>
</tr>
<tr>
<td>9 ½</td>
<td>3</td>
<td>10.0</td>
</tr>
<tr>
<td>9 ¾</td>
<td>1</td>
<td>3.3</td>
</tr>
<tr>
<td>10</td>
<td>5</td>
<td>16.6</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

Out of 30 cases 53.3% of cases have 8 V.K, 10% of cases have 9 ½ V.K, 3.3% of cases have 9 ¾, 6.6% of cases have 9 ¼ V.K, 16.6% of cases have 10 V.K.
Bar diagram showing the Manikadai nool for Gunmasooali

![Manikadai nool bar diagram]

### 7.15 UYIR THATHUKKAL

<table>
<thead>
<tr>
<th>Uyir Thathukkal</th>
<th>No. of. Cases affected (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vali Pranan (Uyirkkaal)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Abanan (Keezh nokku kaal)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Samanan (Naduk kaal)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Uthanan (Mel nokku kaal)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Viyanan (Paravu kaal)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Naahan</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Koorman</td>
<td>17</td>
<td>57</td>
</tr>
<tr>
<td>Kiruharan</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Devathathan</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Dhananjeyan</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
In types of Vali, out of the 30 cases of this study, in 100% of cases Pranan (Uyirkkaal), Abaanan (Keezh nokku kaal), Samaanan (Naduk kaal), Uthaanan (Mel nokku kaal), Viyaanan (Paravu kaal) and Devathathan are affected. In 93% of cases Kiruharan had affected. In 57% of case Koorman had affected.

In Azhal, out of 30 cases of this study, in 100% of cases, Analam (Aakku anal), Ranjagam (Vanna eri) and Saathaham (Aatral angi) are affected. In 57% of case Alosagam (Nokku anal) had affected. In Prasagam (Ul oli thee) 87% of cases are affected.

In Iyyam, out of 30 cases of this study, in 100% of cases, Avalambagam (Ali iyam) and Kilethagam (Neerpi iyam) are affected. In 70% of cases Pothagam (Suvai kaan Iyyam) had affected. In 60% of cases Tharpagam (Niraivu iyam) had affected.
### 7.16 UDAL THATHUKKAL

Table No. 16  

<table>
<thead>
<tr>
<th>Udal Thathukkal</th>
<th>No. of Cases affected (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saaram</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Senneer</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Oon</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Kozhuppu</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Enbu</td>
<td>7</td>
<td>23</td>
</tr>
<tr>
<td>Moolai</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Sukilam / Suronitham</td>
<td>7</td>
<td>23</td>
</tr>
</tbody>
</table>

In udal thaathukkal Out of 30 cases 100% of cases have deranged saarum and chenner, 93% of cases have deranged Oon and Kozhuppu.

### 7.17 NOI UTRA KAALAM AND NILAM

Table No. 17  

<table>
<thead>
<tr>
<th>Noi Utra Kaalam and Nilam</th>
<th>No. of Cases affected (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Noi Utra Kaalam</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kaarkaalam</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Koothirkaalam</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Munpanikaalam</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Pinpanikaalam</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>ElavenirKaalam</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Muduvenirkaalam</td>
<td>16</td>
<td>53</td>
</tr>
<tr>
<td>Noi Utra Nilam</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kurinji</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Mullai</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Marutham</td>
<td>6</td>
<td>20</td>
</tr>
<tr>
<td>Neithal</td>
<td>20</td>
<td>67</td>
</tr>
<tr>
<td>Palai</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
In Kaalam, out of the 30 cases of this study 53% of cases were affected in Muduvenil Kaalam. In Nilam, 67% of case had affected from Neithal Nilam.

### 7.18 RAASI AND NATCHATHIRAM

<table>
<thead>
<tr>
<th>Raasi and Natchathiram</th>
<th>No. of. Cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raasi</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meshaam</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Rishabam</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Katakam</td>
<td>4</td>
<td>16</td>
</tr>
<tr>
<td>Simmam</td>
<td>8</td>
<td>32</td>
</tr>
<tr>
<td>Thulam</td>
<td>10</td>
<td>40</td>
</tr>
<tr>
<td>Meenam</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Total</td>
<td>25</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Natchathiram</th>
<th>No. of. Cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barani</td>
<td>2</td>
<td>15.3</td>
</tr>
<tr>
<td>Karthigai</td>
<td>1</td>
<td>7.7</td>
</tr>
<tr>
<td>Rohini</td>
<td>1</td>
<td>7.7</td>
</tr>
<tr>
<td>Makam</td>
<td>1</td>
<td>7.7</td>
</tr>
<tr>
<td>Visakam</td>
<td>5</td>
<td>38.3</td>
</tr>
<tr>
<td>Uthiradam</td>
<td>2</td>
<td>15.3</td>
</tr>
<tr>
<td>Avittam</td>
<td>1</td>
<td>7.7</td>
</tr>
<tr>
<td>Total</td>
<td>13</td>
<td>100</td>
</tr>
</tbody>
</table>

Out of 25 cases 40% cases documented under Thulaam and 32% of cases under Simmam. In Natchathiram out of 13 cases 38.3% of cases were documented on Visakam.
7.19 CLINICAL SIGN OF GUNMASSOLAI

<table>
<thead>
<tr>
<th>Clinical Sign of Gunmassolai</th>
<th>No. of Cases (out of 30)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constipation</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Scanty micturation (Dysuria)</td>
<td>20</td>
<td>67</td>
</tr>
<tr>
<td>Flatulence (Rumbling noise)</td>
<td>29</td>
<td>97</td>
</tr>
<tr>
<td>Vomitting</td>
<td>22</td>
<td>73</td>
</tr>
<tr>
<td>Moorchchai (Giddiness)</td>
<td>28</td>
<td>93</td>
</tr>
<tr>
<td>Severe pricking pain in abdomen</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Burning sensation in abdomen</td>
<td>24</td>
<td>80</td>
</tr>
<tr>
<td>Increased salivary secretion</td>
<td>27</td>
<td>90</td>
</tr>
<tr>
<td>Belching</td>
<td>25</td>
<td>83</td>
</tr>
<tr>
<td>Reduced intake of food</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>General body tiredness (Vedumbal)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Mild Warmthness (Heatness of body -Azharchi)</td>
<td>25</td>
<td>83</td>
</tr>
<tr>
<td>Dryness of body</td>
<td>24</td>
<td>80</td>
</tr>
<tr>
<td>Loss of taste</td>
<td>23</td>
<td>77</td>
</tr>
</tbody>
</table>

In clinical sign, out of the 30 cases, 100% of cases had severe pricking pain in abdomen, reduced intake of food and general body tiredness (vedumbal). 97% of cases have flatulence. 93% of cases were having malasikkal and moorchai. 90% of cases were having increased salaiva. 83% of cases had mild warmthness (heatness of body – azharchi). 80% of cases have dryness of body and burning sensation in abdomen and 83% of cases have belching.
Bar diagram showing the clinical symptoms percentage recorded for Gunmassolai

C - Constipation
FLA - Flatulence
GID - Giddiness
BSA - Burning sensation in abdomen
BEL - Belching
GBT - General body tiredness (Vedumbal)
DON - Dryness of body
SM - scanty micturation
VOM - vomit
PPA - pricking pain in the abdomen
ISS - Increased salivary secretion
MW - Mild Warmthness
LOT - Loss of taste
### 7.20 BLOOD GROUP

#### Table No. 20: Blood Group

<table>
<thead>
<tr>
<th>Blood group</th>
<th>No. of. Cases (out of 20)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>“A” Group</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>“B” Group</td>
<td>3</td>
<td>15</td>
</tr>
<tr>
<td>“AB” Group</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>“O” Group</td>
<td>15</td>
<td>75</td>
</tr>
</tbody>
</table>

Out of 20 cases 75% cases were having “O” Blood Group.

### 7.21 INVESTIGATIONS

#### Table No. 21: Investigations

<table>
<thead>
<tr>
<th>Investigations</th>
<th>No. of. Cases</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hb 8.0-8.9 gms</td>
<td>4</td>
<td>13.3</td>
</tr>
<tr>
<td>9.0-9.9 gms</td>
<td>10</td>
<td>33.3</td>
</tr>
<tr>
<td>10.0-10.9 gms</td>
<td>9</td>
<td>30.0</td>
</tr>
<tr>
<td>11.0-11.9 gms</td>
<td>7</td>
<td>23.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Out of 30 cases 33.3% of cases have 9 to 10 gms % hemoglobin, 30.0% of cases have 10 to 10.9 gms % hemoglobin.
Approximately 1500 cases of Gunmam were recorded in the out patient department of Ayothidoss pandithar hospital, National institute of siddha. Author has seen 200 cases of Gunmam in which author selected 30 cases, with the clinical symptoms of Gunmassolai for the study.

Gunmassolai is a specific type of disease with pricking pain in the abdomen with many other symptoms like constipation, flatulence, body pain etc.

Gunmassolai is classified in the soolai types according to Yugi vaithiya sinthamani, this literature also describes 8 types Gunmam separately.

According to Literature Siddha maruthuvam and Noi naadal part -11, it says Soolai gunmam is equivalent to Vayu gunmam and Paayuru gunmam. But the Soolaigunam is the combination of Soolai and Gunmam so only the saint Yugi muni kept the Gunmassolai in the Classification of Soolai.

Other Saints like Thanvanthri, Thirumoolar and the literature Aathmaratchamirtham had classified the Gunmassolai under the Gunmam classification itself. No other literature except Yuki muni defines Gunmassolai under Soolai classification. So according to these literatures Gunmassolai is a type of Gunmam disease.

In the present study comprising 30 patients, all were between the ages of 17 to 50 years. No patients were below 17 and above 50 years. Among the
30 patients admitted in the **Out patient and Inpatient department of Ayodidoss Pandithar Hospital, National institute of Siddha**. All the patients were seen throughout all the seasons.

- There were 7 males and 23 females. Their ages ranging from 17 to 50 years. So most of the cases were females. Housewife and low socioeconomic people are more prone to **Gunmassolai** mainly due to starvation altered timing of food and stress.
- The **Gunmassolai** mostly occurs in the Azhal Kaalam i.e age group between 33 to 66 yrs. It has Naadi nithaanam as Menmai.
- In **Gunmassolai** majority of cases were having Maapadithal and Veddipu in the tongue. The colours of the tongue were Velluppu (pallorness) and most of the cases were having Karrupu niram. Majority of cases were having loss of taste and increased salivation. Most cases have Sama oli.
- In Most of the cases vizhiyin niram were Vellupu
- Most cases have Mitha veppam and normal viyarvai. All Cases have Thodu Vali and most cases have Udal varatchi.
- In Gumasoolai most cases have Karutha malam, Malasikkal and Siruthal.
- In half of the cases Neer erichal were present. Most Cases have Manjal niram urine, normal edai, and reduced enjal. The Nei kuri of **Gunmassolai** shows mostly Asathiya Nei kuri i.e fastly spreading and salladai kan in nature.
- The Manikadai nool for Gunmassolai mostly have 8 Viral kadai
- In **Gunmassolai** Mei, vaai, Eruvaai had affected
• In sub types of Vali, Pranan (Uyirkkaal), Abaan (Keezh nokku kaal), Samaanan (Naduk kaal), Uthaanan (Mel nokku kaal), Viyaanan (Paravu kaal) and Kiruharan, Devathathan are affected.
• In Azhal sub types Analam(Aakku anal), Ranjagam(Vanna eri) and Saathaham(Aatral angi) are affected.
• In Iyyam sub types Avalambagam (ali iyam) and Kilethagam(neerpi iyam), Pothagam(suvai kaan iyyam) are affected.
• In udal thaathukkal 100% of cases had deranged Saarum and Chenner, 93% of cases have deranged Oon and Kozhuppu.
• Most of the cases have the vali migum Characters like abdominal distension, ookkam inmai, giddiness, weakness, emaciation, and constipation, body color –blackish, insomnia and shivering of body.
• Most of the Gunmassolai were affected in Muduvenil Kaalam. Most of the Gunmassolai were affected in Neithal Nilam.
• The Thulam and Simmam rasi are more prone to Gunmassolai disease.
• In the 96 Thathuvam Vayu and Akaaya bootham mainly deranged and leads to derangement of other boothams.
• In Pori the Naa, in Pulan the Mei and Vaai, in Kanmenthiriyam the Eruvaai are affected
• In the Anthakaranam the four anthakaranams and in Aasayam the Amarvasayam, Pakirvasayam, Malavasayam and Chalavasayam are affected.
• In Kosam the Annamayakosam and the Manomayakosam affected. The affected annamayakosam affects other kosam.
• In Aathaaram, the Moolatharam, Swathittaanam and Manipooragam is affected and in mandalam the thee mandalam is affected
• The Thee vinai and the Thamogunam are the main etiological factors for Gunmassolai.
• Most of the case have anemia. The “O” blood groups are more prone to Gunmassolai.
• Anger, fear, sad, non vegetarian diet, smoking, alcohol, Vali (Vatham) inducing diet more aggravating factors to this disease.
• The main causes of Gunmam and Soolai are more closely resembles each other, so the causes of these both should be prevented to reduce the severity of this disease. Along with the above causes, the causes of Vali disease also should be prevented. If failed these aggravates the disease further severely. The Gunmam disease case without the precaution of these factors it will lead to Gunmassolai.

Differential diagnosis of Gunmassolai

1. Iyya gunmam – முய கோமா

Though the patient had emaciation, giddiness, dryness of the skin, loss of strength, loss of appetite and anorexia, due to absence of decreased salaivation, mental confusion, palorness of skin, dry cough, Sudden Shivering and heaviness of head, it is not Iyya Gunmam
2. *Sakthi Gunnam* - சக்தி குணம்

Though the patient had indigestion, burning sensation, giddiness, vomiting, flatulence, tiredness, constipation, increased heat in the body, inability to walk, loss of taste and due to absence of protruded small nerves and numbness and also due to presences of severe pain in the abdomen, it is not Sakthi Gunnam.

3. *Vali Gunnam* - வளி குணம்

Though the patient had abdominal bloating, dryness of the skin, flatulence, Loss of appetite, pain all over the body, due to absence of mental confusion, disturbed sleep, throbbing pain in the hypochondrium, pain in the back and hip, high fever, false appetite and due to presence of severe pricking pain in the abdomen, this is not Vali Gunnam.

4. *Aama soolai* – அமா சூலை

Though the patient had indigestion, increased intake of water, increased intake of pungent and better taste foods and starvation, the severe pricking pain in the stomach, due to absence of pricking pain in ribs this is not Aamasoolai.

5. *Gunma peruvayiru* - குமா பெறுவைறு

Though the patient had indigestion, severe pain in the abdomen, vomiting, due to absence of diarrhea, swelling and hardness in the ribs, hip and stomach, this is not Gunma peruvayiru.
CHAPTER 9
SUMMARY AND CONCLUSION

1. The causes for Gunmassolai which was mentioned by the Siddhars were maximum correlated in this Study. So by avoiding the causes we can prevent the Gunmassolai. Living a mortal life without high sexual thought, helping others, avoiding mental depressions or anger, unaltered timing food are the main factor to avoid this disease.

2. In the Sothidam, the Thulam and Simma raasi gets affected in Gunmassolai. These rasi patients should take care to prevent this disease.

3. Neithal nilam are more prone to this disease. These Neithal nilam patients should take care to prevent this disease.

4. The Azhal kaalam i.e age between 34 to 66 yrs are mostly affected. So this age group people should take care to prevent this disease.

5. In the three humours the Vali humour is affected more in this disease which leads to derangements of other two humours. The diet with Anti Vali humour will prevent Gunmassolai. Particularly the Gunmam patient should avoid the Vali humour diet and activities, because this will induce the Vali humour and leads to the Gunmassolai, which is the next stage of Gunmam with severe pricking pain in the abdomen etc.

6. Since the Gunmam is the continuation of Gunmassolai, patient should take care in the beginning stage of Gunmam itself to prevent Gunmassolai by following the anti Vali diet, good Habit and spiritual acts.
7. The signs and symptoms correlate more closely to chronic gastric ulcer in modern aspects. The chronic gastric ulcer with fibrosis condition likely to more resemble with the signs and symptoms which is also not cured by ordinary treatment and required surgery. In Siddha aspect Gunmassolai is Kanma noi and is incurable.

8. If the Gunmassolai occurred, though it is incurable due to Kanma Noi, to cure Gunmassolai the patient should do the Kanmanivarthy mentioned in Agathiyar kanmakaandam along with good habit, spiritual act and restriction over the causative factors.

9. Though it is Kanma noi and incurable, there are many medicines found specific to Gunmassolai in Noigalukku Siddha Parikaaram, Anubhava vaithiya muraigal, Vaithiya thirattu and etc. So if Gunmassolai occurs then the patient should take medicine mentioned in above literatures.

10. Should avoid angry, bad habits like smoking, alcohol and non vegetarian.

11. Regular timing of food intake and strict restriction over anti Vali diet and spicy foods like pepper, chilly should be followed.

12. If the Gunmassolai patient doesn’t follow this pattern then it will lead to critical condition since it is an Asaathiya noi.

By this study of Envagai thervu, Nilam, Kaalam, Sothidam, Manikkadai nool and along with the Clinical symptoms, the author concludes it as Gunmassolai and Vali humour affected more prominently in this disease.
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♦ Anuboga vaithiya muraigal
♦ Athma Ratchamirtham yennum Vaidhya Sara Sangiragam
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♦ Dhanvanthiri Vaidhyam
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♦ 4448 viyathigal oru vilakkam
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♦ Noi Naadal Noi Mudal Naadal - Part I
♦ Noi Naadal Noi Mudal Naadal - Part 2
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Yugi Vaidhya Chinthamani
Yugi vaithiya kaaviyam by Thamarai Noolagam
ANNEXURE

NATIONAL INSTITUTE OF SIDDHA, CHENNAI-47

A STUDY TO ASSESS THE DIAGNOSTIC ABILITY OF SIDDHA SYSTEM FOR GUNMASOOLAI

DIAGNOSTIC PROFORMA FOR GUNMASOOLAI

1. I.P /O.P. ________  2. Bed No ________  3. S.No __________
4. Name_________________  5. Age (yr) ________  6. Gender M □ F □
7. Occupation __________________________________________
8. Permanent Address ______________________________________
   ______________________________________________________
9. Complaints and Duration __________________________________
   ______________________________________________________
10. History of Present Illness __________________________________
   ______________________________________________________
11. Family History 1. No □ 2. Yes □ _______________________

SPECIFIC ETIOLOGY FOR GUNMASOOLAI

Seiyal maarupadum karanam 1. Yes 2. No
14. Increased intake of thuvarpu taste □ □
15. Increased intake of milagu vagai uraippu □ □
16. Increased intake of kilangu vagai □ □
17. Pasi adakuthal □ □
18. Pugai pidithal □ □
19. Increased punarchi □ □
<table>
<thead>
<tr>
<th>Manam maarupadum karanam</th>
<th>1. Yes</th>
<th>2. No</th>
</tr>
</thead>
<tbody>
<tr>
<td>20. Increased anger</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>21. Mana salippu</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>22. Sirapattu iruthal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23. Thiruduthal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>24. Miguntha sandai iyadal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>Manam matrum Seiyl karanam</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Virainthu odal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>26. Pacchai marangalai vaettuthal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>GENERAL ETIOLOGY FOR VATHAM</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seiyl maarupadum Karanam</td>
<td>1. Yes</td>
<td>2. No</td>
</tr>
<tr>
<td>27. Increased intake of Kaipu taste</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>28. Increased intake of Thuvarpu taste</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>29. Increased intake of Kaarpu taste</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>30. Increased intake of Pulipu</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>31. Increased intake of Palaya saatham</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>32. Increased intake of Kail varagu</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>33. Increased intake of Varagu</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>34. Increased intake of Thinai</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>35. Increased intake of Naei[ghee]</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>36. Miguntha kaatru padum padi iruthal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>37. Altered diet timings</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>38. Increased intake of water</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>Manam maarupadum karanam</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39. Increased Anger</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>40. Fear</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>41. Sadness [Thukkam]</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>42. Fast running [Virainthu oodal]</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>Manam matrum Seiyl maarupadum Karanam</strong></td>
<td></td>
<td></td>
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<tr>
<td>43. Prolonged constipation</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>44. Pagalil thungi iravil Kanvizhithal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>45. Increased Starvation</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>46. Increased sexual desire</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
ENVAGAI THERVU

NAADI (KAI KURI)

I. Naadi Nithanam

47. Kalam

1. Kaarkaalam  
2. Koothirkaalam

3. Munpanikaalam  
4. Pinpanikaalam

5. Ilavenirkaalam  
6. Muduvenirkaalam

48. Desam

1. Kulir  
2. Veppam

49. Vayadu

1. 1-33yrs  
2. 33-66yrs  
3. 66-100yrs

50. Udal Vannmai

1. Iyyalpu  
2. Valivu  
3. Melivu

51. Vannmai

1. Vannmai  
2. Menmai

52. Panbhu

1. Thannadai  
2. Puranadai  
3. Illaithal

4. Kathithal  
5. Kuthithal  
6. Thullal

7. Azhuththal  
8. Padutthal  
9. Kalatthal

10. Munnokku  
11. Pinnokku  
12. Suzhalal

13. Pakkamnokku

II. Naadi nadai

53. Nadai

1. Vali  
2. Azhal  
3. Iyyam

4. Vali azhal  
5. Azhal Vali  
6. Iyya Vali

7. Vali iyyam  
8. Azhal Iyyam  
9. Iyya Azhal

NAA

54. Maapadinthurathal

1. Present  
2. Absent

55. Niram

1. Karuppu  
2. Manjal  
3. Velluppu

56. Suvai

1. Pulippu  
2. Kaippu  
3. Inippu

4. Normal  
5. Loss of taste

57. Vedippu

1. Absent  
2. Present

58. Vai neer ooral

1. Increased  
2. Normal  
3. Reduced

59. NIRAM

1. Karuppu  
2. Manjal  
3. Velluppu

60. MOZHI

Oli

1. Sama oli  
2. Urattha oli  
3. Thazhantha oli
<table>
<thead>
<tr>
<th>Topic</th>
<th>Description</th>
<th>Status 1</th>
<th>Status 2</th>
<th>Status 3</th>
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<tbody>
<tr>
<td></td>
<td>63. Erichchal</td>
<td>1. Present</td>
<td>2. Absent</td>
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<tr>
<td></td>
<td>64. Peelai seruthal</td>
<td>1. Present</td>
<td>2. Absent</td>
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<tr>
<td></td>
<td>67. Viyarvai</td>
<td>1. Increased</td>
<td>2. Normal</td>
<td>3. Reduced</td>
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<td></td>
<td>68. Thodu vali</td>
<td>1. Present</td>
<td>2. Absent</td>
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<td></td>
<td>69. Udal varatchi</td>
<td>1. Present</td>
<td>2. Absent</td>
<td></td>
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<td></td>
<td>71. Sikkal</td>
<td>1. Present</td>
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<td></td>
<td>72. Sirutthal</td>
<td>1. Present</td>
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<tr>
<td></td>
<td>73. kalichchal</td>
<td>1. Present</td>
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<tr>
<td></td>
<td>74. Seetham</td>
<td>1. Present</td>
<td>2. Absent</td>
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<td></td>
<td>75. Vemmai</td>
<td>1. Present</td>
<td>2. Absent</td>
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</tr>
<tr>
<td></td>
<td>77. Manam</td>
<td>1. Present</td>
<td>2. Absent</td>
<td></td>
</tr>
<tr>
<td></td>
<td>78. Nurai</td>
<td>1. Nil</td>
<td>2. Reduced</td>
<td>3. Increased</td>
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<tr>
<td></td>
<td>79. a. Edai (Ganam)</td>
<td>1. Normal</td>
<td>2. Increased</td>
<td>3. Reduced</td>
</tr>
<tr>
<td></td>
<td>79. b. Enjal(Alavu)</td>
<td>1. Normal</td>
<td>2. Increased</td>
<td>3. Reduced</td>
</tr>
<tr>
<td></td>
<td>79. c. Erichchal</td>
<td>1. Present</td>
<td>2. Absent</td>
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<tr>
<td>80. NEI KURI</td>
<td>1. Aravam</td>
<td>2. Mothiram</td>
<td></td>
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<tr>
<td></td>
<td>3. Muthu</td>
<td>4. Aravil mothiram</td>
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<td></td>
<td>5. Aravil muthu</td>
<td>6. Mothirathil muthu</td>
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<td></td>
<td>7. Mothirathil aravam</td>
<td>8. Muthil aravam</td>
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<td></td>
<td>9. Muthil mothiram</td>
<td>10. Asathiyam</td>
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</tbody>
</table>
81. MANIKADAI NOOL (Viral kadai alavu)  

IMPORIGAL / IMPULANGAL

<table>
<thead>
<tr>
<th>1. Normal</th>
<th>2. Affected</th>
</tr>
</thead>
<tbody>
<tr>
<td>82. Mei</td>
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</tr>
<tr>
<td>83. Vai</td>
<td></td>
</tr>
<tr>
<td>84. Kan</td>
<td></td>
</tr>
<tr>
<td>85. Mooku</td>
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<td>86. Sevi</td>
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KANMAENTHIRIYAGAL/ KANMAVIDAYANGAL

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>87. Kai</td>
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<tr>
<td>88. Kaal</td>
<td></td>
</tr>
<tr>
<td>89. Vai</td>
<td></td>
</tr>
<tr>
<td>90. Eruvai</td>
<td></td>
</tr>
<tr>
<td>91. Karuvai</td>
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</table>

UYIR THATHUKAL

I. VALI

<table>
<thead>
<tr>
<th>1. Normal</th>
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</thead>
<tbody>
<tr>
<td>92. Pranan(Uyirkkaal)</td>
<td></td>
</tr>
<tr>
<td>93. Abanan(Keezh nokku kaal)</td>
<td></td>
</tr>
<tr>
<td>94. Samanan(Naduk kaal)</td>
<td></td>
</tr>
<tr>
<td>95. Uthanan(Mel nokku kaal)</td>
<td></td>
</tr>
<tr>
<td>96. Viyanan(Paravu kaal)</td>
<td></td>
</tr>
<tr>
<td>97. Naahan</td>
<td></td>
</tr>
<tr>
<td>98. Koorman</td>
<td></td>
</tr>
<tr>
<td>99. Kiruharan</td>
<td></td>
</tr>
<tr>
<td>100. Devathathan</td>
<td></td>
</tr>
<tr>
<td>101. Dhananjeyan</td>
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II. AZHAL

<table>
<thead>
<tr>
<th>1. Normal</th>
<th>2. Affected</th>
</tr>
</thead>
<tbody>
<tr>
<td>102. Analam(Aakku anal)</td>
<td></td>
</tr>
<tr>
<td>103. Ranjagam(Vanna eri)</td>
<td></td>
</tr>
<tr>
<td>104. Alosagam(Nokku anal)</td>
<td></td>
</tr>
<tr>
<td>105. Prasagam(Ul oli thee)</td>
<td></td>
</tr>
<tr>
<td>106. Saathaham(Aatral angi)</td>
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</tr>
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</table>
### III. IYYAM

<table>
<thead>
<tr>
<th>1. Normal</th>
<th>2. Affected</th>
</tr>
</thead>
<tbody>
<tr>
<td>107. Avalambagam (Ali iyam)</td>
<td>☐</td>
</tr>
<tr>
<td>108. Kilethagam (Neerpi iyam)</td>
<td>☐</td>
</tr>
<tr>
<td>109. Pothagam (Suvai kaan iyam)</td>
<td>☐</td>
</tr>
<tr>
<td>110. Tharpagam (Niraivu iyam)</td>
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</tr>
<tr>
<td>111. Santhigam (Ondri iyam)</td>
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### UDAL THATHUKKAL

<table>
<thead>
<tr>
<th>1. Normal</th>
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<tbody>
<tr>
<td>112. Saaram</td>
<td>☐</td>
</tr>
<tr>
<td>113. Senneer</td>
<td>☐</td>
</tr>
<tr>
<td>114. Oon</td>
<td>☐</td>
</tr>
<tr>
<td>115. Kozhuppu</td>
<td>☐</td>
</tr>
<tr>
<td>116. Enbu</td>
<td>☐</td>
</tr>
<tr>
<td>117. Moolai</td>
<td>☐</td>
</tr>
<tr>
<td>118. Sukilam /Suronitham</td>
<td>☐</td>
</tr>
</tbody>
</table>

### MUKKUTRA MIGU GUNAM

#### I. Vali migu gunam

<table>
<thead>
<tr>
<th>1. Present</th>
<th>2. Absent</th>
</tr>
</thead>
<tbody>
<tr>
<td>119. Emaciation</td>
<td>☐</td>
</tr>
<tr>
<td>120. Body color –Blackish</td>
<td>☐</td>
</tr>
<tr>
<td>121. Desire to take hot food</td>
<td>☐</td>
</tr>
<tr>
<td>122. Shivering of body</td>
<td>☐</td>
</tr>
<tr>
<td>123. Abdominal distension</td>
<td>☐</td>
</tr>
<tr>
<td>124. Constipation</td>
<td>☐</td>
</tr>
<tr>
<td>125. Insomnia</td>
<td>☐</td>
</tr>
<tr>
<td>126. Weakness</td>
<td>☐</td>
</tr>
<tr>
<td>127. Weakness of five sense organs</td>
<td>☐</td>
</tr>
<tr>
<td>128. Giddiness</td>
<td>☐</td>
</tr>
<tr>
<td>129. Ukkam inmai</td>
<td>☐</td>
</tr>
</tbody>
</table>

#### II. Pitham migu gunam

<table>
<thead>
<tr>
<th>1. Present</th>
<th>2. Absent</th>
</tr>
</thead>
<tbody>
<tr>
<td>130. Yellow colouration of the skin</td>
<td>☐</td>
</tr>
<tr>
<td>131. Yellow colouration of the eye</td>
<td>☐</td>
</tr>
<tr>
<td>132. Yellow colouration of urine</td>
<td>☐</td>
</tr>
<tr>
<td>133. Yellow colouration of faeces</td>
<td>☐</td>
</tr>
</tbody>
</table>
134. Increased appetite
135. Increased thirst.
136. Irritation all over the body.
137. Reduced sleep.

### III. Kapham migu gunam

<table>
<thead>
<tr>
<th>Present</th>
<th>Absent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Increased salivary secretion.</td>
<td></td>
</tr>
<tr>
<td>2. Reduced activeness.</td>
<td></td>
</tr>
<tr>
<td>3. Heaviness of the body.</td>
<td></td>
</tr>
<tr>
<td>4. Body colour – Whitish</td>
<td></td>
</tr>
<tr>
<td>5. Chillness of the body.</td>
<td></td>
</tr>
<tr>
<td>6. Reduced appetite</td>
<td></td>
</tr>
<tr>
<td>7. Cough</td>
<td></td>
</tr>
<tr>
<td>8. Eraippu</td>
<td></td>
</tr>
<tr>
<td>9. Increased sleepiness.</td>
<td></td>
</tr>
</tbody>
</table>

#### 147. NOI UTRA KALAM

1. Kaarkaalam
2. Koothirkaalam
3. Munpanikaalam
4. Pinpanikaalam
5. IlavenirKaalam
6. Muduvenirkaalam

#### 148. NOI UTRA NILAM

1. Kurinji
2. Mullai
3. Marutham
4. Neithal
5. Palai

#### 149. Date of Birth:

#### 150. Time of Birth:

#### 151. Place of birth:

#### 152. Rasi

1. Meshaam
2. Rishabam
3. Midunam
4. Katakam
5. Simmam
6. Kanni
7. Thulam
8. Viruchikam
9. Dhanusu
10. Maharam
11. Kumbam
12. Meenam
00. Not known
153. Natchathiram

00. Not known

CLINICAL SIGN OF GUNMASOOLAI

1. Present  2. Absent

154. Constipation
155. Scanty micturition
156. Flatulence
157. Vomitting
158. Moorchchai (Giddiness)
159. Severe pricking pain in abdomen
160. Burning sensation in abdomen
161. Increased salivary secretion
162. Bhelching
163. Reduced intake of food
164. General body tiredness (vedumbal)
165. Mild pyrexia (heatness of body - azharchi)
166. Dryness of body
167. Loss of taste