

## **A REVIEW ARTICLE ON SAGE NAGAMUNIVAR SYMPTOMATOLOGY ABOUT PEENISAM WITH MODERN SYMPTOMATOLOGY**

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### **ABSTRACT**

Siddha system of Medicine is a complete holistic medical system that has been practiced in India for 2000 years and above. The System is said to have emerged in antiquity, from the highly-evolved consciousness of the Siddhars. Ancient Siddha literatures numbered the diseases as 4448. Among them the diseases pertaining to Nasal region are 86. 'Peenisam' is one of the 86 types of Nasal diseases mentioned by Sage Nagamunivar. The term 'Peenisam' means an increased flow of mucous from the nose, owing to the inflammation of the membrane or cold in the wind. The signs and symptoms of *Peenisam* mentioned in Siddha literature may be correlated with Rhinosinusitis in Modern disease of classification. The comparative studies of Siddha system of Medicine bring to light high level of medical knowledge the Siddhars had. The study was aimed at evolving a set of exclusive Siddha diagnostic methods for *Peenisam* and to correlate the symptoms of *Peenisam* with that of closely resembling condition in modern medical literature. By relating the ancient Siddha literature with today's, there will be both augmentation of the knowledge of diagnosis and its treatment. This article was aimed at delving in depth into the clinical features mentioned under highly prevailing disease 'Peenisam' by Sage Nagamunivar which further leads to structure the Siddha diagnosis and prognostic pattern of *Peenisam*.

**Keywords:** *Siddha, Nagamunivar, Peenisam, Analogy,*

### **INTRODUCTION**

The Siddha System of medicine, which had its presence in the ancient Tamil land one the foremost of all other medical systems in the world. The clarified intellect and heightened

intuition of the Siddhars, resulting from their Yogic powers, enabled them to explore the world around them and exploit its natural resources for the sake of humanity. Diagnosing a disease is very important for a physician

before he applies or employs any therapeutic remedy and it involves identifying its causes. Identification of causative factors is through 1. Observation – observing smell, taste, color of body 2. Experimentation – Examination of pulse, urine, faeces, eyes, tongue, study of voice quality and tactile perception. 3. Interrogation – enquiring the patient on several points as regards to the duration of disease, his sufferings and habits in respect of food and drink and the digestion or indigestion, sleep, vitality and strength, the state of mind and mental troubles<sup>2</sup>. The signs and symptoms of *Peenisam* mentioned in Siddha literature may be correlated with Rhinosinusitis in Modern disease of classification. ‘*Peenisam*’ is one of the 86 types of Nasal diseases mentioned by Sage Nagamuni<sup>1</sup>. Rhino Sinusitis affects a tremendous proportion of population, accounting for millions of visits to Primary Care Physicians each year. The incidence of chronic sinusitis in Southern Asian countries like India is 136,657,953 out of 1,065,070,607 (US Census Bureau, 2004). More than 120 million Indians suffer from at least one episode of acute sinusitis each year. The prevalence of sinusitis has soared in the last decade due to increased pollution, urban sprawl, and increased resistance to antibiotics. The incidence of morbidity and mortality among patients with complications of sinusitis has been reported to range from 5% to 40%. A sizable number of patients visit National Institute of Siddha with the clinical features of ‘*Peenisam*’. Rhinosinusitis refers to an inflammatory condition involving the four paired structures surrounding the nasal cavities. Although most cases of Sinusitis involve more than one sinus, the maxillary sinus is most commonly involved; next, in order of frequency, are the ethmoid,

frontal, and sphenoid sinuses. Each sinus is lined with a respiratory epithelium that produces mucus, which is transported out by ciliary action through the sinus ostium and into nasal cavity. Sinusitis affects a tremendous amount of proportion of the population, accounts for millions of visits to primary care physicians each year, and is the fifth leading diagnosis for which antibiotics are prescribed.

The study of *Peenisam* will be helpful to standardize the diagnosis of *Peenisam* through Sage Nagamuni’s symptomatology description, which will help clinicians to follow a standard line of treatment and adopt proper preventive measures, so that visits to hospital will get reduced.

Detailed study of the disease *Peenisam* through the symptomatology mentioned in the Siddha literature will enable the physicians to choose appropriate treatment from the wide range of medicines found scattered in the literature with indications of Rhinosinusitis with specific symptomatology groups. Medicines indicated for one group of symptomatology of the same disease may not be found to be a mainstay of therapy to another. Hence emphasis on the study of symptomatology is very vital for the institution of right kind of treatment.

## **METHODOLOGY:**

The literature cited here was principally extracted from the *Nagamunivar thalai noi maruthuvam*. For the understanding and validation of the collected information, reputed journals and databases were referred. After the methodological collection of the above information, it was compared with the current scenario and parallels were drawn leading to a

specific conclusion. Then a concise, but comprehensive review was made.

### **OBSERVATIONS:**

According to the text of *Nagamunivar thalainoi maruthuvam*, the symptoms of *Peenisam* are Headache, mucous discharge from the nose, recurrent sneezing, dryness of the nose, halitosis and nasal stuffiness.<sup>1</sup>

### **ANALOGY BETWEEN THE SYMPTOMATOLOGY OF PEENISAM INNAGAMUNIVAR MARUTHUVAM & MODERN TEXT**

#### **Severe headache**

In the first line of poetry about *Peenisam* (one among the nasal diseases) Sage Nagamunivar explains about the severe nature of the featuring headache. Headache is a common, accompanying non-specific symptom with the affection of sinuses. The ducts that connect the sinuses to the back of the nose become inflamed, the ability of the sinuses to drain is decreased, and pressure builds up within the affected sinus. Underlying pathology in sinus affections are associated swelling and inflammation of the lining of the sinuses, possibly resulting in increased mucus and fluid secretion. This increase in fluid and pressure causes the pain in sinus affections; this was succinctly poetised by Nagamunivar in his first line of the selected literature. "...Common presenting symptoms of sinusitis include headache..."<sup>8</sup> "...Headache is a common symptom in patients diagnosed with chronic Rhinosinusitis (CRS), being presented in upto 83 % of patients..."<sup>10</sup> "...The severity of headache has been reported to be one of the highest among the most common symptoms associated with Chronic Rhinosinusitis..."<sup>10</sup> "...Chronic sinusitis leads to recurrent

headache, which shows a diurnal periodicity. The headache starts in the morning and worsens by mid-day, and subsides by evening..."<sup>11</sup> "...History of chronic headache and the demonstration of purulent discharge from the nose coupled with tenderness over the sinuses should suggest the clinical diagnosis ..." <sup>11</sup> "...Nasal congestion associated with headache, purulent postnasal discharge, and halitosis suggests Sinusitis..."<sup>12</sup> "...Sore throat purulent nasal discharge and post nasal drip occur with acute sinusitis. Other signs and symptoms include halitosis, headache, malaise, cough, fever, and facial pain and swelling associated with nasal congestion..."<sup>29</sup> "Sinus headaches cause a dull, deep, throbbing pain in the front of head and face. Worse pain in the morning (because mucus has been collecting and draining all night)<sup>14</sup>." "...Headache/facial pain or pressure of a dull, constant, or aching sort over the affected sinuses is common with both acute and chronic stages of sinusitis. This pain is typically localized to the involved sinus and may worsen when the affected person bends over or when lying down. Pain often starts on one side of the head and progresses to both sides..."<sup>28</sup>

#### **Mucous discharge from the nose**

Here Sage Nagamunivar refers about the mucous discharge through the nose, Generally, it can be assumed that a yellowish purulent mucous discharge would always be bacterial and a waterier nasal discharge to be viral in origin. During these infections, the nasal mucous membranes produce excess mucus, filling the nasal cavities, causing damming up of mucus discharge in the sinus and releasing into the nasal cavities causing stuffiness and excrements. It is therefore

presumed with confidence that, Sage Nagamunivar has talked his heart out about an infectious condition of the Paranasal sinuses clearly mentioning about Rhinosinusitis symptomatology.

“Rhinosinusitis usually presents with facial tenderness & pain, Purulent nasal discharge...”<sup>15</sup> “...and a painful face suggest Sinusitis...”<sup>27</sup> “...Nasal discharge/ Purulence/ discoloured post nasal discharge is one of the major factor in the diagnosis of Rhinosinusitis...”<sup>25</sup> “... Purulent rhinitis, purulent postnasal drip, and pain in a maxillary tooth ache independent predictors of complicating Sinusitis...”<sup>27</sup> “...Thick, purulent or discoloured nasal discharge is often thought to indicate bacterial sinusitis but also occurs early in viral infections such as the common cold and is not specific to bacterial infection...”<sup>28</sup> “... Acute and chronic sinusitis may be accompanied by thick nasal discharge that is usually green in colour and may contain pus (purulent) and/or blood...”<sup>37</sup>

### **Recurrent Sneezing**

Here Sage Nagamunivar refers to about the mucous discharge through the nose, Generally, it can be assumed that a yellowish purulent mucous discharge would always be bacterial and a more watery nasal discharge to be viral in origin. During these infections, the nasal mucous membranes produce excess mucus, filling the nasal cavities, causing damming up of mucus discharge in the sinus and releasing into the nasal cavities causing stuffiness and excrements. It is therefore presumed with confidence that, Sage Nagamunivar has talked his heart out about an infectious condition of the Paranasal sinuses clearly mentioning about Rhinosinusitis

symptomatology. “...Acute Rhinosinusitis patients typically presents with complaints of sneezing.”<sup>31</sup> “...Other non-specific symptoms of Sinusitis include cough, Sneezing and fever...”<sup>8</sup>

### **Dryness of the nose in chronic disease (Peenisam)**

Here Sage Nagamunivar explains about dryness of the nose. During the initial stages, there would be copious mucous discharge through the nose. But when this condition grows to become chronic there would be dryness of the nose which means the secretions had reduced by this time and the infection and accompanying inflammation becoming more conservative and keeps itself alive and maintaining through. This is justified by excerpts from the text, “...In chronic sinusitis - Post nasal drip is the commonest and most annoying symptom that give rise to dryness and burning at the back of the nose.”<sup>33</sup>

### **Halitosis (Bad breath)**

In this line, Sage Nagamunivar explains about Halitosis. In Rhinosinusitis, due to nasal blockage Person may be unable to breathe well through the nose which is often more blocked at night. This leads to constant mouth breathing which further leads to halitosis. It is easily given to understand that the blocked-up secretions lead to setting in of infection and that causes the foul odour to emanate from the mouth. This was clearly explained by Sage Nagamuni with authority in his classic literature without fail. “Well described sinus symptoms such as Halitosis are less frequent...”<sup>24</sup> “...Diagnostic criteria for Rhinosinusitis “...In addition there is often malodorous breath without poor dental hygiene...”<sup>31</sup> “...Acute Rhinosinusitis presents in children with signs and symptoms

of nasal discharge and obstruction, persistent cough, and bad breath (halitosis) ...”<sup>33</sup>“...Acute Sinusitis typically follows an episode of viral rhinitis and presents with nasal discharge, nasal congestion, moderate fever, foul breath(halitosis), cough & postnasal discharge...”<sup>34</sup>“...Acute Sinusitis typically follows an episode of viral rhinitis and presents with nasal discharge, nasal congestion, moderate fever, foul breath(halitosis), cough & postnasal discharge...”<sup>24</sup>“...Rhinosinusitis usually presents with facial tenderness, pain, nasal congestion and purulent nasal discharge, common signs and symptoms include anosmia or hyposmia, pain on mastication, and halitosis...”<sup>35</sup>

### Nasal stuffiness

Here in the last line he explains about nasal stuffiness or blockage. Rhinosinusitis symptoms occur due to blockage of the osteomeatal channels due to the alterations in the quantity and quality of the secretions of paranasal sinuses, thus blocking the air flow and mucous drainage resulting in severe nasal blockage and congestion. Therefore, on analysing the whole poem of Peenisam, it is evident that Nagamuni has clearly defined symptoms of both catarrhal inflammation of nasal mucosa and Para Nasal Sinuses. i.e. Rhinosinusitis. “In chronic bacterial Sinusitis patients experience constant nasal congestion.”<sup>8</sup> “Nasal obstruction/blockage is one of the major factor in the diagnosis of Rhinosinusitis”<sup>25</sup>“...Acute Rhinosinusitis presents in children with signs and symptoms of nasal discharge and obstruction, persistent cough, and bad breath (halitosis) ...”<sup>33</sup>

## DISCUSSION

The study of *Peenisam* will be helpful to standardize the diagnosis of *Peenisam* through Sage Nagamunivar’s symptomatology description, which will help clinicians to follow a standard line of treatment and adopt proper preventive measures, so that visits to hospital will get reduced. Detailed study of the disease *Peenisam* through the symptomatology mentioned in the Siddha literature will enable the physicians to choose appropriate treatment from the wide range of medicines found scattered in the literature with indications of Rhinosinusitis with specific symptomatology groups. Medicines indicated for one group of symptomatology of the same disease may not be found to be a mainstay of therapy to another. Hence emphasis on the study of symptomatology is very vital for the right kind of treatment. The symptoms and signs mentioned in Sage Nagamuni literature are in close conformity with that of Rhinosinusitis mentioned in modern medical literature.

## CONCLUSION

This article concludes by throwing lights on the validation of symptomatology of *Peenisam* by Sage Nagamunivar and may be correlated with Rhinosinusitis, so that a physician can arrive at proper treatment procedures by rightly diagnosing the disease. By relating the ancient Siddha literature with today’s, there will be both augmentation of the knowledge of diagnosis and its treatment.

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