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## Effect of Siddha Herbal Management on *Athikozhuppu* (Dyslipidaemia): A Case Report

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### Abstract

**Background:** Dyslipidaemia is a metabolic disorder characterized by abnormal levels of lipids in the blood and is a major risk factor for cardiovascular diseases. Siddha medicine describes several herbal formulations for the management of metabolic disorders, but scientific documentation of these treatments is limited.

**Objective:** To evaluate the effect of Siddha management on lipid profile parameters and related clinical symptoms in a patient with dyslipidaemia.

**Case Presentation:** A 50-year-old male presented with complaints of pain in the right shoulder joint, pain in the right scapular region, and numbness in both hands for six months. Blood investigations revealed elevated lipid profile parameters. Based on Siddha assessment, the patient was diagnosed with *Athikozhuppu* (Dyslipidaemia). The patient was treated with Siddha therapeutic procedures including mild purgation followed by internal medicines such as *Thiripala Chooranam*, *Maruthampattai Chooranam*, and *Talisadi Chooranam* for six months.

**Results:** After treatment, lipid profile parameters improved. Total cholesterol reduced from 274 mg/dl to 212 mg/dl, triglycerides from 277 mg/dl to 118 mg/dl, LDL from 185.6 mg/dl to 120 mg/dl, and VLDL from 32.4 mg/dl to 19 mg/dl. Clinical symptoms were also reduced.

**Conclusion:** This case suggests that Siddha management may help improve lipid profile parameters and clinical symptoms in dyslipidaemia. Further studies with larger sample sizes are required to confirm these findings.

**Keywords:** *Athikozhuppu*, Dyslipidaemia, *Maruthampattai Chooranam*, *Thiripala Chooranam*, and *Talisadi Chooranam*.

### Introduction

Dyslipidaemia is a metabolic disorder where the levels of fats (lipids) in the blood become abnormal. This may include high total cholesterol (TC), low-density lipoprotein (LDL) cholesterol, or triglycerides (TG), and/or low levels of high-density lipoprotein (HDL) cholesterol. Dyslipidaemia increases the risk of cardiovascular diseases such as heart attack and stroke, which are major causes of death worldwide [1]. Generally, dyslipidemia does not cause clear symptoms and is usually found during routine blood tests [2]. Dyslipidemia is divided into two types: primary and secondary. Primary dyslipidemia is caused by genetic factors, while secondary dyslipidemia develops due to other conditions such as obesity or diabetes [3]. Herbal medicine is used as an alternative treatment in many parts of the world for Dyslipidaemia management [4]. Several clinical studies have shown that the natural active compounds found in herbal medicines can safely help improve blood lipid levels [5, 6, 7]. In Siddha medicine, many herbal formulations for the management of dyslipidaemia are mentioned in classical texts and are commonly practiced by Siddha practitioners.

However, proper scientific documentation of these traditional treatments is limited. Therefore, this retrospective case study was conducted to document and evaluate the clinical effectiveness of a Siddha herbal formulation in the management of dyslipidaemia.

### Objective

To evaluate the effect of the treatment on lipid profile parameters and associated clinical symptoms.

### Case Report

A 50-year-old male, development officer, from Nallur, attended the Cardiovascular System Clinic at Siddha Teaching Hospital with complaints of pain in the right shoulder joint, right scapular region, and right hand, associated with numbness for the past 6 months. On examination, blood investigations and X-ray findings revealed elevated lipid profile parameters.

Based on Siddha medical assessment, the patient was diagnosed with *Athikozhuppu* (Dyslipidaemia) and was managed conservatively in the Outpatient Divisions according

to traditional Siddha treatment protocol. On examination and investigation, blood investigations showed elevated lipid profile parameters, indicating abnormalities in lipid metabolism. The cervical spine X ray was performed to rule out structural abnormalities, and the results were reported as normal. For clinical evaluation, both clinical symptoms and laboratory parameters were assessed before and after the management. The severity of the patient’s clinical symptoms was recorded and compared between the pre-management and post-management periods. In addition, lipid profile parameters were evaluated before treatment and after the completion of management in order to determine the effectiveness of the intervention. These assessments helped to monitor the patient’s clinical improvement and biochemical changes during the course of treatment

**Treatment Protocol**

**Internal Procedures**

- **Day 1:** 5g of *Kadukkai Chooranam* with 20 ml of warm water was administrated on an empty stomach for mild purgation.
- **Day 2:** Oil bath with 30 ml gingelly oil (head, chest, abdomen, limbs) followed by warm water bath
- **Day 3 Onwards:** Internal medicines.

**List of Internal Medicines**

**Table 1:** Internal Medicines

Name of the Drug	Dose and Duration	Anupanam
<i>Thiripala chooranam</i>	2g twice in a day after food from 3 <sup>rd</sup> day to 182 <sup>rd</sup> day	Warm water
<i>Marutham pattai chooranam</i>	2g twice in a day after food from 3 <sup>rd</sup> day to 182 <sup>rd</sup> day	Warm water
<i>Talisadi chooranam</i>	2g twice in a day after food from 3 <sup>rd</sup> day to 182 <sup>rd</sup> day	Warm water

**Results**

**Comparative Blood Investigation Assessment on Pre and Post Management**

**Table 2:** Blood investigation parameters assessment

Blood Parameters	Normal Values	Pre-Management	Post-Management
Total Cholesterol (mg/dl)	150-200	274	212
Triglyceride (mg/dl)	30-150	277	118
HDL (mg/dl)	>40-60	56	53
LDL (mg/dl)	70-130	185.6	120
VLDL (mg/dl)	<2-30	32.4	19
Fasting Blood Sugar (FBS) - mg/dl	70-110	92	95
Post prandial Blood Sugar PPBS) - mg/dl	80-140	106	110
HbA <sub>1c</sub>	5.7 – 6.4%	6.3%	6.1%

Table 2 shows the comparison of blood investigation parameters before and after management. Before treatment, the patient had elevated lipid profile values, including total cholesterol (274 mg/dl), triglycerides (277 mg/dl), LDL (185.6 mg/dl), and VLDL (32.4 mg/dl), which were higher than the normal range. After management, these values were reduced considerably. Total cholesterol decreased to 212 mg/dl, triglycerides reduced to 118 mg/dl, LDL decreased to

120 mg/dl, and VLDL reduced to 19 mg/dl. HDL levels remained within the normal healthy range, changing slightly from 56 mg/dl to 53 mg/dl. Blood sugar parameters remained stable during the treatment period. Fasting Blood Sugar changed from 92 mg/dl to 95 mg/dl, Postprandial Blood Sugar from 106 mg/dl to 110 mg/dl, and HbA<sub>1c</sub> slightly reduced from 6.3% to 6.1%.

**Comparative Signs and Symptoms assessment on pre and post Management**

**Table 3:** Signs and symptoms before and after management.

Signs and Symptoms	Before Management	After Management
Pain in the right shoulder joint	Present	Reduced
Pain right scapular region	Present	Reduced
Numbness in both hand	Present	Reduced
Tenderness	Absent	Absent
Swelling	Absent	Absent

Table 3 shows the comparison of clinical signs and symptoms before and after management. Before treatment, the patient experienced pain in the right shoulder joint, pain in the right scapular region, and numbness in both hands. After the management, these symptoms were reduced significantly. Tenderness and swelling were not observed either before or after the treatment. Overall, the clinical symptoms showed noticeable improvement following the management.

**Discussion**

The present case demonstrates the potential effectiveness of Siddha management in controlling dyslipidaemia. The treatment protocol included purgation therapy followed by internal herbal formulations such as *Thiripala Chooranam*, *Maruthampattai Chooranam*, and *Talisadi Chooranam*, which are traditionally used in Siddha medicine for metabolic disorders.

**Maruthampattai chooranam:** Previous studies have reported the antihyperlipidemic potential of several Siddha herbal formulations. *Maruthampattai Chooranam*, prepared from the bark of *Terminalia arjuna* [8], has demonstrated significant cardioprotective and lipid-lowering effects. Experimental studies using high-fat diet-induced hyperlipidemic Wistar rats showed that *Terminalia arjuna* bark extract improved lipid profile levels and reduced biochemical and histopathological changes in cardiac tissues [9]. Similarly, *Arjuna Ksheerapaka Chooranam*, a milk decoction of *Terminalia arjuna* bark, has been reported to reduce total cholesterol, LDL, and triglycerides while increasing HDL levels in both experimental and clinical studies [10].

**Talisadi Chooranam:** The formulation also includes several other herbal ingredients used in specific proportions. *Athimathuram* (*Glycyrrhiza glabra* L.) root, *Perungayam* (*Ferula foetida* L.) resin, *Nellimulli* (*Phyllanthus emblica* L.) dried fruit, *Koshtam* (*Saussurea lappa* C.B.Cl.) root, *Thippili* (*Piper longum* L.) fruit, *Seeragam* (*Cuminum cyminum* L.) seed, *Sathakuppai* (*Anethum sowa* Kurz.) seed, *Karunseeragam* (*Nigella sativa* L.) seed, *Thippilikattai* (*Piper longum* L.) stem, *Kirambu* (*Syzygium aromaticum* L.) buds, *Saathipathiri* (*Myristica fragrans* Houtt.) aril, *Karkadakasirungi* (*Rhus succedanea* L.) leaf galls, *Saathikkai* (*Myristica fragrans* Houtt.) fruit, *Thantrikkai* (*Terminalia bellerica* Roxb.) fruit, *Kadukkai* (*Terminalia chebula* Retz. & Willd.) fruit, *Sadamanjil* (*Nardostachys jatamansi* DC.) root

tubers, *Milagu* (*Piper nigrum* L.) fruit, *Sirunaagapoo* (*Mesua ferrea* L.) flower, *Shanpagamokku* (*Michelia champaca* L.) flower bud, *Vaividangam* (*Embelia ribes* Burm.) seed, *Lavangapathiri* (*Cinnamomum tamala* Nees & Eberm.) leaf, and *Omam* (*Trachyspermum ammi* L.) seed are each included in equal quantities of 10 g. In addition, *Thaniya* (*Coriandrum sativum* L.) seed is added in a larger quantity of 60 g, and cane sugar (*Saccharum officinarum* L.) is included in 120 g to complete the formulation. All ingredients are dried, powdered, and mixed uniformly to prepare the final medicine [11, 12]. This formulation is a polyherbal preparation. Although scientific studies on the complete formulation are limited, several of its individual ingredients have been reported to possess antihyperlipidemic activity. Studies have shown that *Glycyrrhiza glabra* root extract can significantly reduce serum lipid levels [13]. *Phyllanthus emblica* fruit has been reported to improve lipid profiles by lowering total cholesterol and LDL levels. *Terminalia chebula* has demonstrated hypolipidemic activity in experimental models [14]. In addition, *Nigella sativa* seeds have shown cholesterol-lowering effects in both experimental and clinical studies [15], while *Coriandrum sativum* seed extract has also been reported to improve lipid profiles [16]. These findings suggest that the combined action of these herbs may contribute to the lipid-lowering potential of the formulation.

**Thiripala Chooranam:** *Thiripala Chooranam*, which contains *Terminalia chebula*, *Terminalia bellirica*, and *Phyllanthus emblica* (12), has also shown beneficial effects in dyslipidemia. Clinical studies have reported that administration of *Triphala Chooranam* significantly reduced lipid levels and body weight in patients with dyslipidemia without notable adverse effects [17]. In addition, a randomized controlled trial demonstrated that a *Triphala* preparation used along with atorvastatin significantly improved lipid parameters compared with placebo [18].

In the present case, the combined use of these Siddha formulations, along with purgation therapy and dietary regulation, may have contributed to the improvement in lipid profile parameters and reduction of clinical symptoms. The gradual improvement observed over six months indicates the potential of Siddha medicine in restoring metabolic balance and managing dyslipidaemia.

## Conclusion

Siddha medicine provides a holistic approach for managing dyslipidaemia (Athikozhuppu). In this case, traditional Siddha treatments along with herbal medicines such as *Thiripala Chooranam*, *Maruthampattai Chooranam*, and *Talisadi Chooranam* helped improve the patient's lipid profile and reduce clinical symptoms. These results suggest that Siddha treatment may be a safe and helpful supportive therapy for dyslipidaemia. However, further studies with more patients are needed to confirm the effectiveness of these medicines.

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