

Siddha Therapy As A Useful Treatment Modality For Sensory Motor Axonal Neuropathy (SMAN) - A Case Study

Bhuvanagiri Satya Sindhuja¹, Injarapu Sankar², Shweta Tiwari³

¹ Patron, Chakrasiddh health centre, Hyderabad, India;

² Chief Healer, Chakrasiddh health centre, Hyderabad

Abstract

Sensory Motor Axonal neuropathy (SMAN) one of the variants of Guillen Barre syndrome has an autoimmune aetiology. SMAN is characterized by peripheral Neuropathy leading to muscular weakness, wasting, decreased reflexes, and sensory and motor nerve deprivation. The recovery process varies from a month to very slow recovery that can take several years. AzhalVaatham, Siddha medical term for peripheral Neuropathy bears a resemblance to symptoms of SMAN so the treatment procedure followed in Siddha for neuropathy will be same in this case. The aim of this study is to decrease lumbar and Right foot pain along with increase in leg length to reduce the imbalance and to demonstrate the traditional therapy of Siddha as a comprehensive and efficient method of treating sensory motor axonal neuropathy (SMAN).

A 4-year old female who had right lower limb weakness for a year with difficulty in walking, taking the stairs and frequent falls while walking was treated with Siddha therapy. The diagnosis was made after a thorough clinical examination, electroneurography and high-resolution nerve conduction tests. Her ailment was treated with siddha by doing Varmam therapy comprising of hand pressure treatments, dietary changes and physical therapy. Patient had a positive outcome after undergoing therapy for one month, showing a noticeable increase in muscular strength and motor function with a follow-up after 2 months. The patient was able to walk with higher pace and running was improved. The pain score on NRS scale which was at 8 was reduced to 4-5 after treatment. There was a noticeable difference in range of movements (ROM) at hip area which was clearly visible while she walked. The leg length difference was reduced by 1.2 cms and the Huges functional disability reduced from grade 3 to 1 (walking without help and running).

Considering the poor prognosis of patients with sensory motor axonal neuropathies in modern medicine, the regression of our patient's symptoms and the improvement in the muscular strength and motor skills with Varmam therapy shows its therapeutic potential in SMAN. This case demonstrates the traditional therapy of Siddha as a comprehensive and efficient treatment modality for sensory motor axonal neuropathy, especially in juvenile instances, necessitating additional research and validation of its effectiveness.

Keywords: sensory motor axonal neuropathy, SMAN, AzhalVaatham, Siddha medicine, Varmam therapy, hand pressure techniques

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