Awareness And Belief On Preferring Siddha Treatment For Cerebral Palsy (Siravatham)In Children-A Hospital Based Cross Sectional Study

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Abstract: Cerebral palsy is a static, non-progressive disorder caused by brain insult or injury in the prenatal, perinatal and postnatal time period, it is one of the major developmental disability which ranges from mild to total handicap, as care giving is associated with high rates of awareness on various services to manage of children, they need support of family and community members such as neighbours, parents experience states of depression, physical and psychological difficulties in supporting the child, Siddha system of medicine reduces the burden of parents for which the arrive to Siddha, investigation conducted among 100 parents of cerebral palsy children with age group between 2 to 12 years in both male and female children, results of this study suggest that the number of non-consanguineous parents is 59%,in gender distribution female children is more which is 51%, the birth asphyxia contributing to 48% of cerebral palsy children, awareness about their children illness and other availability of various services is 99%, people prefer Siddha treatment on belief on Siddha system of medicine is 47%, reason to choose Siddha treatment mainly on therapies, Siddha system has a vast reciprocity of external therapies from which the cerebral palsy children's gained better prognosis. In conclusion the awareness among the parents about their children illness has made knowledge about Siddha provision for the management of the disease.

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I. Introduction

The siddha system is reverentially considered as a 'karpaga vriksha',a desire tree, as it holds in its vastness all things knowable and all things experimental, by man; it deals with all existence. The bio – regulating principles vatham, pitham, kapham are in constant motion and in an ever-shifting dynamic balance with one another and are required for life to happen [1]. Siddhars developed methods and medication that strengthen the body, mind and soul [2].

Cerebral palsy is defined as a non-progressive neuromotor disorder of cerebral origin. It includes a group of heterogeneous clinical states of variable aetiology and severity ranging from incapacitation to total handicap [3]. It substantially affects a person's life activities and be present from birth. Although there is autism, Down syndrome, fragile x syndrome, cerebral palsy is emerging as one of the main course of childhood disabilities in India [4]. Children reach developmental milestones at their own pace. Complications like low birth weight, birth asphyxia, premature separations of placenta and abnormal foetal positions leads to the disease [5]. Population based studies from around the world report prevalence estimates of CP ranging from 1.5 to more than 4 per 1000 live birth or children of a defined age range. The incidence of cerebral palsy in India is about 3.8% of population. [6]

In siddha system there are various branch of medical science of Siddhars which deals with diseases of children, their essential nature, childcare, treatmentetc. [7]. Child care has been considered so important that is classified depending on the age of the child called "paruvangal". Each of these stages has their disease and treatment prescribed for them [8]. In According to madhalainoi maruthuvam, Siravatham is a term that describes the characteristics of childhood disability caused by neuronal damage [9]. Siddha system has both internal medicines and external medicines for the management and better prognosis. As the medicines and therapies strengthen both the nervous system and muscular skeletal system it helps children's to attain their milestone which are delayed.

Care provided to the children with cerebral palsy largely depends on the awareness and belief on various treatments. This study examines the reason ,awareness and belief of siddha system among parents of cerebral palsy children.

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II. Materials and Methods

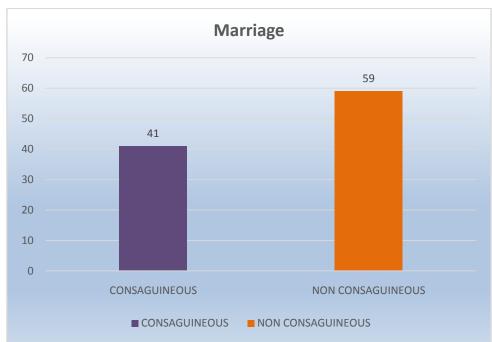
This study has been conducted on informants of 100 children with cerebral palsy in Ayodhidoss pandithar hospital, National institute of Siddha, Chennai, to study the awareness and belief among parents of children with cerebral palsy. Children with age group of 3-12 years have been included in the study. The study was conducted after IEC approval NIS/IEC/2018/29 for the period of one year. The study was registered in CTRI trial registration CTRI/2018/06/014677.

The schedule of interview consisted of semi-structured questions focussing on demographic information, family history, birth history, concerns, belief and awareness. The schedule of question regarding the domains consisted of 15 items. Demographic details consists of 5 items, family history 1 item, Birth history 1 item, Awareness about illness 2 items, Belief in siddha treatment 2 items, other services utilized by children's 2 items, Opinion about Siddha medicine after treatment consists of 2 items. Results have been presented through statistical analysis in absolute numbers and percentage.

III. Results

The percentage of non-consanguinity marriage seems to be 59% and consanguinity marriage is 41%.it is shown in the table 1

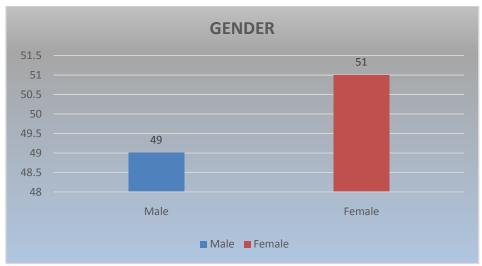
TABLE 1: Marriage Marriage No of parents percent Cum CONSAGUINEOUS 41 41 41 59 100 59 CONSAGUINEOUS TOTAL 100 100



According to this study male children's have been reported 49% and female children's being 51%. It is shown in the table 2.

TABLE 2: Gender

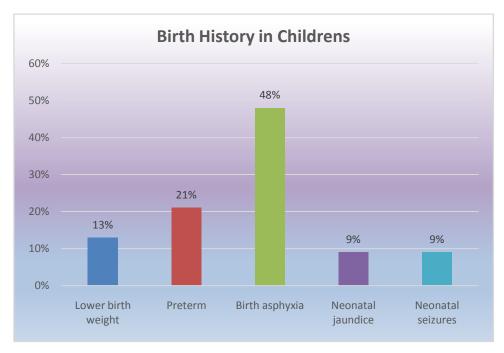
GENDER	NO OF CHILDRENS	PERCENT	CUM
Male	49	49.00	49.00
Female	51	51.00	100.00
TOTAL	100	100.00	



A very large number of children's subscribe to the Birth asphyxia, which is one of the main reason for Siravatham. A total of 13% have been reported with low birth weight,21% as preterm, 48% as birth asphyxia, 9% as Neonatal jaundice, Neonatal seizures. It is shown in the table 3.

TABLE 3: Birth history

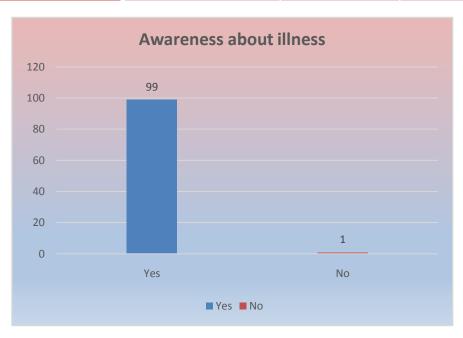
Birth History	No of children	percent	Cum
Low birth weight	13	13	13
Preterm	21	21	34
Birth asphyxia	48	48	82
Neonatal jaundice	9	9	91
Neonatal seizures	9	9	100
TOTAL	100	100	



A very large percentage of parents are aware about the illness of their children's contributing to 99% and only about 1% of parent is unaware about the illness of their child. It is shown in the table 4.

TABLE 4: Awareness about illness

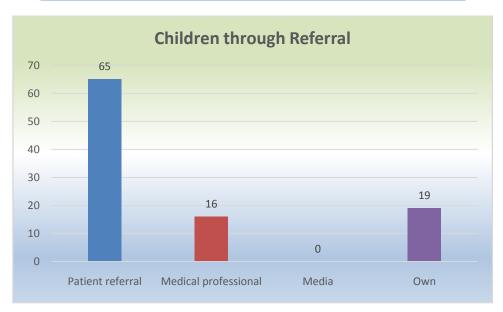
AWARENESS ABOUT ILLNESS	NO OF PARENTS	PERCENT	CUM
YES	99	99	99
NO	1	1	100
TOTAL	100	100	



The children's of Siravatham coming to siddha treatment by Patient referral i.e. Patients who gained improvement through siddha therapeutics for their own illness is 65%, Referral by medical professional is 16%, through Media is nil and by own is 19%. It is shown in the table 5.

TABLE 5: Children through referral

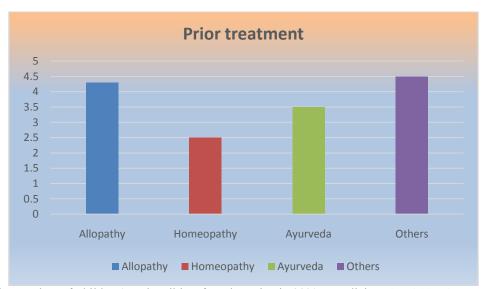
Referral	NO OF CHILDRENS	PERCENT	CUM
Patient referral	65	65	65
Medical professional	16	16	81
Media	0	0	0
Own	19	19	100
TOTAL	100.00	100.00	



The children's prior treatment and management in Allopathy is 77%, Homeopathy is 5%, and Ayurveda is 17% and others 1% .It is shown in the table 6.

TABLE 6: Prior treatment

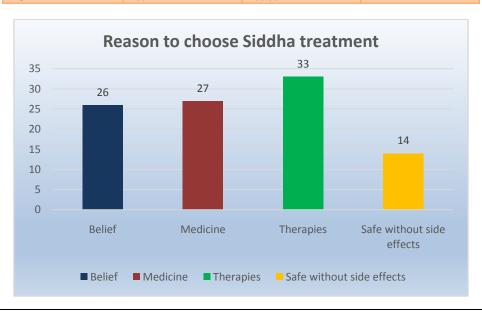
PRIOR TREATMENT	NO OF CHILDRENS	PERCENT	CUM
Allopathy	77	77.00	77.00
Homeopathy	5	5.00	82.00
Ayurveda	17	17.00	99.00
Others	1	1.00	100.00
TOTAL	100	100.00	



The number of children's subscribing for Therapies is 33%, Medicines in Siddha is 26%, belief in Siddha treatment is 14%, medicines are safe without side effects is 14%. It is shown in the table 7.

TABLE 7: Reason to choose siddha treatment

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REASON TO CHOOSE SIDDHA TREATMENT	NO OF CHILDRENS	PERCENT	CUM	
Belief	26	26.00	26.00	
Medicine	27	27.00	53.00	
Therapies	33	33.00	86.00	
Safe without side effects	14	14.00	100.00	
TOTAL	100	100.00		

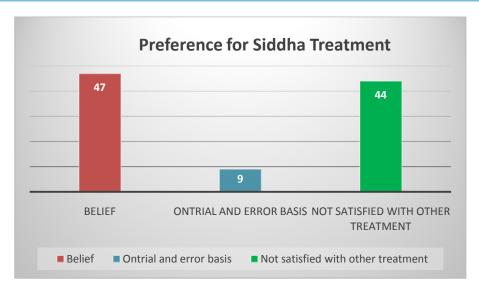


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Most of the parents of Siravatham children's prefer Siddha treatment on belief is 47%, On trial and error basis is 9%, Not satisfied with other treatment is 44%. It is shown in the table 8.

TABLE 8: Preference for siddha treatment

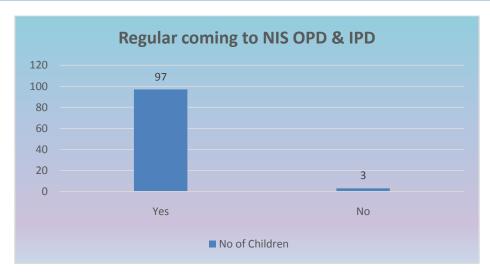
PREFERENCE FOR SIDDHA TREATMENT	NO OF CHILDRENS	PERCENT	CUM	
Belief	47	47.00	47.00	
On trial and error basis	9	9.00	56.00	
Not satisfied with other	44	44.00	100.00	
treatment				
TOTAL	100	100.00		



Regularly coming to siddha treatment contributes to 97%, and the children abscond or irregular in treatment is 3%. It is shown in the table 9.

TABLE 9: Regular coming to NIS OPD & IPD

REGULAR COMING TO NIS OPD & IPD	NO OF CHILDRENS	PERCENT	CUM
Yes	97	97.00	97.00
No	3	3.00	100.00
TOTAL	100	100.00	



A large number of children's gains through Siddha treatment which is 82% and no improvement is 18%. It is shown in the table 10.

TABLE 10: Improvement through siddha treatment

IMPROVEMENT	NO OF CHILDRENS	PERCENT	CUM
Yes	82	82.00	82.00
No	18	18.00	100.00
TOTAL	100	100.00	



IV. Discussions

The Ministry of Ayurveda, Yoga, Unani, Siddha, Homeopathy abbreviated as AYUSH is a governmental body in India purposed with developing education and research in AYUSH and other indigenous medicine systems. It is operated under Ministry of Health and family welfare. The Indian government also gives importance on Siddha, by starting up medical colleges and research centres like National institute of Siddha (NIS) and Central council research in Siddha (CCRS). These bodies under Ministry of AYUSH have made several provisions for the benefits of the people. However lack of awareness about siddha treatment and therapy services acts as stumbling blocks in the utilization of these provision. The children's coming to Siddha treatment through media is nil which is proved in the study.

Siddha medicine is a system of traditional medicine originating in the ancient Tamilakam in South India and srilanka, the practice has been nearly ruined due to intervention of other systems of medicine. But now in recent days the eyes has been again turned to Siddha medicine in which the peoples have strong belief of 47%. So this study highlights the strong foundation about Siddha and the people still believe that, the medicine will surely cure the disease.

In the study conducted among Afghan family in Punjab, India in four generation-consanguineous marriages increase the risk of congenital anomalies [10].But it is interesting to note that in the present study non-consanguineous marriages have been reported 59% which is more than consanguineous marriage 0f 41% and hence the consanguineous marriage may not be one of the factor for cerebral palsy. The female children's have been more affected contributing to 49% which is more than male children's.

Siddha medicine is a vast repository of external therapies particularly administration of drugs through routes other than oral. In several instances, only the procedure without any drug is sufficient and these procedures are already systematized. These therapies are aimed at maintaining a healthy balance of three physiological factors or humours (Tridosham), Vatham, Pitham and Kapham and also the seven tissue types of the body (Sapthadhathus)- Saram (Lymph), Cheneer(Blood), Oon (Muscle), Kozhuppu (fat), Yenbu (Bone), Moolai (Marrow) and Sukkilam or Suronitham (Male and female reproductive tissues)[11]. Hence all these nonoral therapies are called "Puramarunthuvam". In this study it is proved that knowing the importance and benefits of puramaruthuvam most of the children's choose Siddha treatment as their choice contributing to 33%. The external therapies given to children's of Siravatham include Nasiyam (nasal drops), Thokkanam (physical therapy), Pugai (fumigation), Podithimirthal (body powder), Varmam (stimulation of vital force), Oil bath etc. The line of treatment and duration is fixed by doctors according to their age, body built, naadi (one of the diagnostic tool in siddha) and chronicity of illness. Out of 33% of children's coming for therapies 29% of them have better prognosis with treatment and 4% have no improvement with the treatment. From the study of complementary and alternative medicine (CAM) use in families of children with cerebral palsy, 56% used CAM techniques which included 213 families with a child (0 to 18 years) with CPwere recruited at the university medicalcentre in Ann Arbor, MI, USA as part of a descriptive survey, Massage therapy (25%) and aqua therapy(25%) were the most common (12). This highlights that alternative medicines have been used since

many days by people. Comparing with current study the patients choose siddha treatment for therapies(33%) which is more than it proving that the use of alternative medicine has been increased.

The people's come to siddha treatment mainly by referral of patients (65%) who gained better prognosis with the treatment of Siddha medicine, by medical professional (16%), by Media is nil, and by own (19%). Media plays significant role in keeping everyone updated about various events around the world. In this study the communication through various media like electronic media, print media and web media is lagging which disseminate the knowledge and information about siddha system of medicine.

The government of India through three important legislations viz Rehabilitation council of India (RCI) Act, 1994, People With Disability (PWD) Act, 1995, National Trust (NT) Act, 1999 have been enacted and made provisions for several direct and indirect benefits to the people with disability. In this study, these services have been utilized which subscribes toPhysiotherapy(51%) Occupational therapy(2%), Speech therapy(1%), all the above three therapies combined(46%) and few utilized Special education, Inclusive education, Surgery, Neurological procedure, Orthoses and splints, advice for rehabilitation. According to this study physiotherapy have been the only rehab available to most of these children. People are not satisfied with these services (44%) which are one of the main reasons for preference of siddha treatment.

Out of 97% of children's regularly coming to treatment 80% gained better prognosis and 17% no prognosis. Out of 3% of irregular follow up in treatment in that 2% gained prognosis and 1% no improvement. Hence it is evident that the regular follow-up of treatment procedures is significant for better prognosis.

V. Conclusion

Awareness among the parents about their children's illness of cerebral palsy has made knowledge about siddha provisions for the management of the disease. The preference of siddha treatment mainly relies on external therapies which are considered as backbone of siddha medicine.

There is not enough coverage or knowledge about siddha medicine through media but the children arrive to siddha by referral of patients who already gained improvement through siddha system of medicine. In this study non-consanguineous parentage have been reported more breaking the fact that consanguineous marriages are one of the factor for causing cerebral palsy. The holistic and beneficiary approach of siddha medicine has laid the foundation of positive belief that the medicine will cure the disease.

Reference

- [1]. Palpandian, Siddhas masters of the basics, achala siddha, 2008.p.no.85, 103
- [2]. R.Gomathi et.al, a review on primary ideology of varmam in the management of antenatal care, journal of research in bio medicine
- [3]. O.P.Ghai,Piyush gupta,V.K.Paul,Ghai Essential Paediatrics,CBS Publishers and distributors, New Delhi and Bangalore ,6th edition, 2004,.p.no.540
- [4]. Raju sharma, AGK Sinha, A Study on awareness, beliefs, and service utilization among families of children with cerebral palsy in Jalandhar District of Punjab,2014, volume 1, Issue 3, pg. no.170-175.
- [5]. Mahendra rana, Jyotiupadhyay, Asystematic review on etiology, epidemiology and treatment of cerebral palsy, international journal of nutrition, pharmacology, neurological diseases, 2017, volume 7, issue p.n. 76
- [6]. Centres for disease control and prevention, data and statistics for cerebral palsy.
- [7]. Dr.S.Chidambarathanupillai, Siddha system of paediatrics, Siddha medical literature centre first edition, 1992, p.no.10
- [8]. Sage Agasthiyar, agasthiyayvaithiyapillaitamil, thamarainoolagam, 1st edition, 1998,p.no 6
- [9]. Dr.T. Mohanaraj, mathalainoipart III, A.T.S.V.S. Siddha medical college and hospital, 1st edition2009,pg no 115.
- [10]. Nommanudiennaibkhil, Ektachitkara, Consanguineous marriages increase risk of congenital anomalies-studies in four generation of an afghan family, Biomedicalresearch(2016) volume 27,issue 1
- [11]. Dr.T.Thirunarayananet all, External therapies of siddha medicine, centre for traditional medicine and research, first edition, 2010.p.no 1.
- [12]. Hurvitz EA.et.al, Complementary and alternative medicine use in families of children with cerebral palsy, Dev med child neurol, 2003.

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