

## MANAGEMENT OF *CHOTTU NEER* (URINARY INCONTINENCE) WITH VARMAM THERAPY

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### ABSTRACT

Urinary incontinence (aconuresis) is any involuntary leakage of urine causing social stigma. According to *Siddha* literatures Urinary incontinence is termed "*chottu neer or chottu muthiram*". The causative factors, symptoms and medicinal remedies for Urinary incontinence were explained detailed in the *Siddha* literature. Varmam therapy is the drugless therapy and a special medicine of *Siddha* medical System contributed by the siddhars for promoting the human health. Subtle energy that functions in the body is known as Varmam. Those places where this energy resides and activates both body and life are varma points. In this clinical study we stimulated therapeutically

varmam therapy for the management of urinary incontinence. For this clinical study we selected 65 patients (17 male, 29 female and 19 children) in the age group 5-80 years. Therapy was given twice a week, from four week to one year. After the treatment we concluded that treatment was found effective against stress incontinence, urge incontinence, overflow incontinence, functional incontinence and bed wetting and it gave 93.85% excellent results.

**KEYWORDS:** Urinary incontinence, *Siddha*, *Varmam* therapy, Literature, clinical study.

### INTRODUCTION

Urinary incontinence (UI) is any involuntary leakage of urine, affecting male, female including children. The urine leakage may range from leaking of a small amount to having very strong urges to urinate that are difficult to control. Women experience it twice as often as men. Nocturnal enuresis (Bed wetting) involuntary urination while asleep after the age at which bladder control usually occurs. As per *Siddha* literatures Urinary incontinence is termed "*chottu neer or chottu muthiram*". The word *chottu* means drops, *muthiram* means

urine in Tamil language. According to Siddha literature '*Siddha Maruthavam*' by Dr. Kupusamy Mudaliyar (1987), explained the causative factors, symptoms and medicinal remedies for Urinary incontinence.<sup>[1]</sup> According to the oldest siddha text *Theran karisal* explained that the affected person had inability to control urination, urine passes involuntarily. UI divided into two types one is adult Urinary incontinence other one is children Urinary incontinence. Siddha system has explained that footcause of all the diseases are the three humour of vatham, pitham and kapam, Vatham imbalance is for the UI. It is due to Urethral stenosis, Emotional expressions like Fear, Anxiety and Panic, Urinary Tract Infections, intestinal worms, wheezing, polyuria and Oliguria. The author Kuppusamy 1987 explained that UI in adult is due to Chronic diabetes, hemiplegia, parkinson's disease and Nervous disorder.<sup>[1]</sup>

In modern medicine UI's causes are Weak pelvic floor muscles, Urinary tract infections, Spinal cord injuries, Emotions, Endocrine disorders, Stool impaction, Restricted mobility, Chronic diabetes, Stroke, parkinson's disease, Benign prostate hypertrophy-only for males, Child birth-only for female, Aetiology in children, Neurological developmental delay, Genetics and Insufficient production of anti diuretic hormone.<sup>[2,3]</sup> Clinical study various causes for UI include idiopathic causes bladder cancer, prior urethral or bladder or pelvic surgery, trauma due to surgical or obstetric procedures and congenital.<sup>[4]</sup> In allopathic medical system divided into many types based on symptoms. They are Stress Urinary Incontinence, Urge Urinary Incontinence, Overflow Incontinence, Over Active Bladder, Functional Incontinence and nocturnal enuresis (bed wetting).

Varmam therapy is the drugless therapy and a special medicine of *Siddha* medical System contributed by the siddhars for promoting the human health. Subtle energy that functions in the body is known as Varmam. Varmam is the manifestation of the subtle energy (pranic energy) of the five elements (Pancha bootha of Space, Air, Fire, Water and Earth), Gases, Naadis, Vaasi and Kundalini. Those places where this energy resides and activates both body and life are varma points. These points are located in nerves and naadis, muscles and bones. Those places where this energy resides and activates both body and life are varma points. The text titled "*Varma Vilvisai*" mentions 8000 varma points in the body<sup>5</sup>. The author Thiagarajan mentioned in his book "*Siddha maruthuva sirappu*" in 108 points<sup>6</sup>. By stimulating the varma points the flow of pranic energy can be restored which will in turn restore the normal function of the body (Sivaranjani, 2016).<sup>[7]</sup>

Another article described about varma is Siddha system of medicine emphasize various modalities of treatment, Among them drugless therapy is considered to be supremo and Varma therapy comes under this category (Natarajan S et.al, 2012).<sup>[8]</sup> As the geriatric patients suffer with a multiple of diseases, no new drug has been discovered so far, for the total geriatric healthcare. This makes the patients to take specific drugs for each disease which lead them to frustrate over its adverse effects. So they prefer to have a drugless therapy as Varma therapy plays a unique role in it. Chelvi et al. 2016 explained that Varmam is the unique therapy of Siddha System used to treat multiple ailments, especially related to musculoskeletal and neurological deficits. This helps the affecting persions either acting by locally or regulating the three humors of Vali, Azhal and Iyam.<sup>[9]</sup> Varmam therapy can also be used along with internal medications and external applications as well. Varmam is the points wherever the energy (pranan) is stored and when particular area or organ is affected, the energy will spread to that area and make that organ function perfectly. This treatment methodology is educated by the guru-disciple method (Gurukulam). The guru who coached varmam is called as “*Varmani*” or “*Aasan.*” According to Siddha principles, the movements of the body are mainly controlled by Vali. Hence, the varmam points were also classified as Vali, Azhal and Iyam varmam points.<sup>[10]</sup> This therapy is very effective in UI of aged peoples.

Berghmans et al, 2000 was previously explained that their randomized clinical trials of urge urinary incontinence in women the physical theraphyies were very effective (Berghmans L.C.M et al, 2000).<sup>[11]</sup> In the present study was to evaluate the effect of varmam therapy on Urinary incontinence management. The result of the clinical trial study may help in the betterment of disease management.

## **MATERIALS AND METHODS**

### **Study Design and subjects**

A tottal of 65 subjects with complaints of urinary incondinence attending the Art Research Institute (ARI), Coimbatore, Tamilnadu. For this clinical study we selected 65 patients (17 male, 29 female and 19 children) in the age group 5-80 years. Therapy was given twice a week, from four week to one year. Both inclusion and exclusion criteria of the patients were mentioned below.

### **Inclusion criteria**

Both sexes

Age groups 5 to 80 years

### Exclusion criteria

Age below 5 and above 80 years

Urinary Stones

Tumors that block the urinary tract

Carcinoma of Prostate and Bladder

Cystocele

Benign prostate hypertrophy

Patients who have failed to appear for the treatment less than 5 sittings were not considered for summing up results.

### Therapeutic schedule

The following varmam points were stimulated one time per day for consecutive 5 sittings in 2 weeks. The pressure was mentioned in Varmam literatures.<sup>[4]</sup> (Table No.1).

**Table No. 1: Varma points for the treatment of UI.**<sup>[4]</sup>

| S.No | Varmam points <sup>[4]</sup>       | Location <sup>[4]</sup>  | Function <sup>[4]</sup>  |
|------|------------------------------------|--|--|
| 1.   | Kondaikolli Varmam <sup>[12]</sup> | Middle line near to the cranial vertex.                                    | Connects Gross Body With Subtle Body   |
| 2.   | Pin kannadi kaalam <sup>[13]</sup> | Outer surface of the occipital bone just below the occipital protuberance. | Regulates the function of higher centers for micturition and enhances the function of spinalcord |
| 3.   | Muthira kaalam <sup>[12]</sup>     | Right flank zone (lumbar) and Left flank zone (lumbar) of abdomen regeion  | Regulates the functions and tonicity of bladder and ureters.                                     |
| 4.   | Idamburi kaalam <sup>[14]</sup>    | Right side articulation of sacro iliac bones.                              | Control the flow of urine, gives streanth to urethral sphincter muscles.                         |
| 5.   | Valamburi kaalam <sup>[14]</sup>   | Left side articulation of sacro iliac bones.                               | Control the flow of urine, gives streanth to urethral sphincter muscles                          |
| 6.   | Nairuppu kalam <sup>[13]</sup>     | Inferior ramus of the ischium (ascending ramus)                            | Improve the tone and function of the pelvic floor muscles.                                       |
| 7.   | Kallidai kalam <sup>[15]</sup>     | Upper portion of Suprapubic zone of lower abdomen                          | Increase the stranth and activities of baldder and urethra.                                      |
| 8.   | Adimootu varmam <sup>[16]</sup>    | Middle Of The Cubital Fossa  | Strengthen The Nerves Of Bone Marrow   |

### Clinical observations

70 patients were observed. Treatment ranged from 4 weeks to 1 year as required. Varma points were stimulated twice a week. Diet advices & exercises were taught to them. Most of the patients got immediate response for their problem they were able to control their urgency

until they reach the bathroom. Once the points were given continuously, the results were good.

Few patients got response only after 8 to 9 times giving the varma points. In Children the response was very good. They were able to wakeup when the bladder is full.

### Response to varmam treatment

Good Response – 24%

Moderate Response – 34%

Mild response – 17%

Poor response – 5%

20% patients did not follow regularly.

## RESULTS AND DISCUSSIONS

A total of 65 patients was considered for this study. Of them 46 were adults (17 males and 29 females) and 19 were children (13 boys and 6 girls). Out of 17 males patients 4- got mild response, 11-had moderate response and 2- got good response. Out of 29 females patients, only 3 had poor response, 6 had mild response, 8 had moderate response and 12 showed good response. (Table No.2).

**Table No. 2: Response of Varmam Therapy to UI in Adult patients.**

| Category     | Age groups | No. Observed | Poor | Mild | Moderate | Good |
|--------------|------------|--------------|------|------|----------|------|
| Adult Male   | 30-50      | 4            | -    | 1    | 2        | 1    |
|              | 50 - 80    | 13           | -    | 3    | 9        | 1    |
|              | Tottal     | 17           | -    | 4    | 11       | 2    |
| Adult Female | 15 - 30    | 2            | -    | -    | -        | 2    |
|              | 30 - 50    | 16           | 2    | 2    | 5        | 7    |
|              | 50 - 80    | 11           | 1    | 4    | 3        | 3    |
|              | Tottal     | 29           | 3    | 6    | 8        | 12   |

Out of the 13 boys, only one had mild response and all the other had good response. Among the 6 girls one showed poor response, another showed mild response and all the other showed good response.

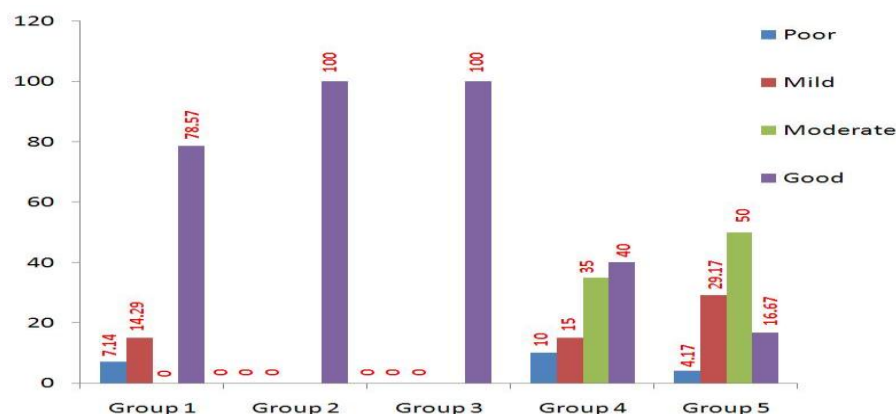
**Table. 3: Response of Varmam Therapy to UI in Child patients.**

| Category     | Age groups | No. Observed | Poor | Mild | Moderate | Good |
|--------------|------------|--------------|------|------|----------|------|
| Male child   | 5 - 10     | 9            | -    | 1    | -        | 8    |
|              | 10 - 15    | 4            | -    | -    | -        | 4    |
|              | Tottal     | 13           | -    | 1    | -        | 12   |
| Female child | 5 - 10     | 5            | 1    | 1    | -        | 3    |
|              | 10 - 15    | 1            | -    | -    | -        | 1    |
|              | Tottal     | 6            | 1    | 1    | -        | 4    |

**Table No. 4: Response of different categories of UI to varma therapy.**

| Type of patients | Category of urinary incontinence number responded / number treated |     |       |     |     |            |       | Total |
|------------------|--|-----|-------|-----|-----|------------|-------|-------|
|                  | SUI  | UI  | OFT   | OAB | FI  | Bedwetting |       |       |
|                  |  |     |       |     |     | Boys       | Girls |       |
| Male             | -  | 2/2 | 15/15 | -   | -   | -          | -     | 17/17 |
| Female           | 20/20  | 4/5 | -     | 0/1 | 2/3 | -          | -     | 26/29 |
| Children         | -  | -   | -     | -   | -   | 13/13      | 5/6   | 18/19 |
| Total            | 20/20  | 6/7 | 15/15 | 0/1 | 2/3 | 13/13      | 5/6   | 61/65 |

SUI: Stress Urinary Incontinence; UUI: Urge Urinary Incontinence; OFI Overflow Incontinence; OAB: Over Active Bladder; FI: Functional Incontinence.

**Fig.No. 1. Response of UI in different age groups to Varmam therapy.**

The response of different categories of UI is presented in Table. No.4. Out of 17 male patients 2 belonged to urge Urinary Incontinence and 15 to overflow Urinary Incontinence. Out of 29 female patients 20 belong to stress Urinary Incontinence, 5 urge Urinary Incontinence, 1 over active bladder and 3 functional Urinary Incontinence.

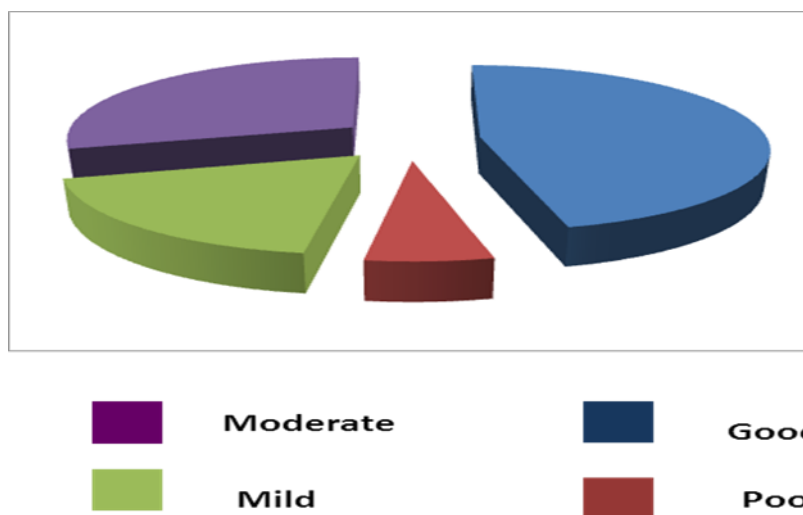
All the 9 children (13 boys and girls) came under bedwetting category. Stress Urinary Incontinence was found only among adult females and all of them responded to varmam therapy (3 mild, 6 moderate and 11 good responses).

Out of 7UUI (2 male and 5 female) mild response was observed in male and female patients whereas one female responded good and another moderately. One female patient responded poor.

All the fifteen patients belonging to overflow Urinary Incontinence were mala and all of them responded to varmam therapy (3 mild, 10 moderate and 2 good response). One female patient affected with overactive bladder responded poorly to varmam treatment. Three female patients were affected with functional Urinary Incontinence. They had osteo arthritis of both knee joints with Urinary Incontinence. Out of these one each showed poor, mild and moderate response.

### Bedwetting

Boys (13) are more than girls (6) in this category. Out of 13boys one had mild response while good response was observed in all the other 12. Out of 6 girls one showed mild response, 4 good response and one poor response.

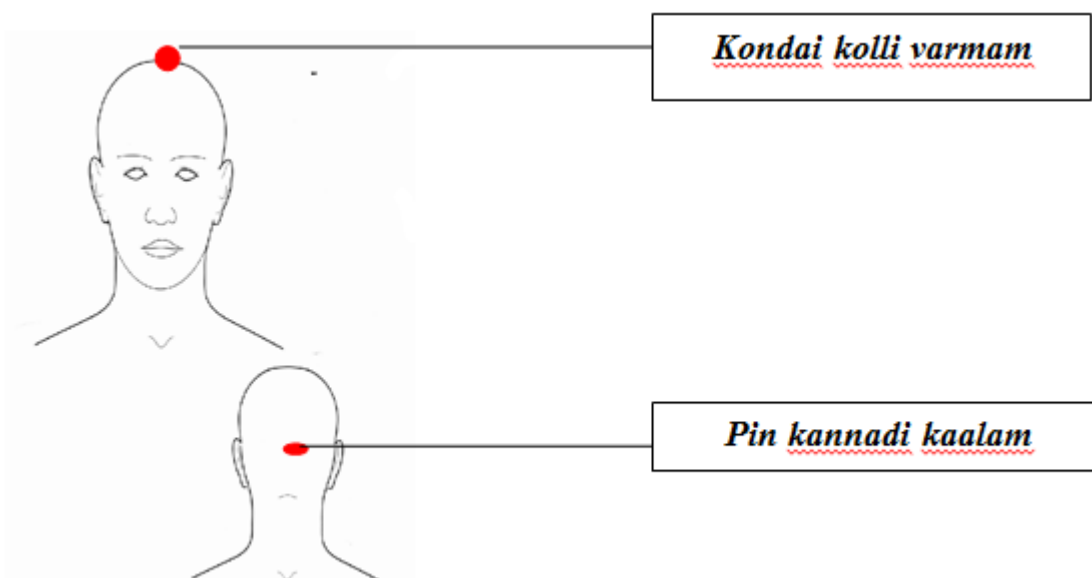


**Fig. No. 2. Overall response of UI patients to varma therapy.**

Urinary Incontinence is caused by various neurological and myogenic factors mentioned above. Varmam therapy has literary evidence for treating diseases or conditions. The following verses in *varma kaandam* and *varma soothiram* explain how Urinary Incontinences occur. First we will see what varma kaandam has to say about this. As per the tamil varmam

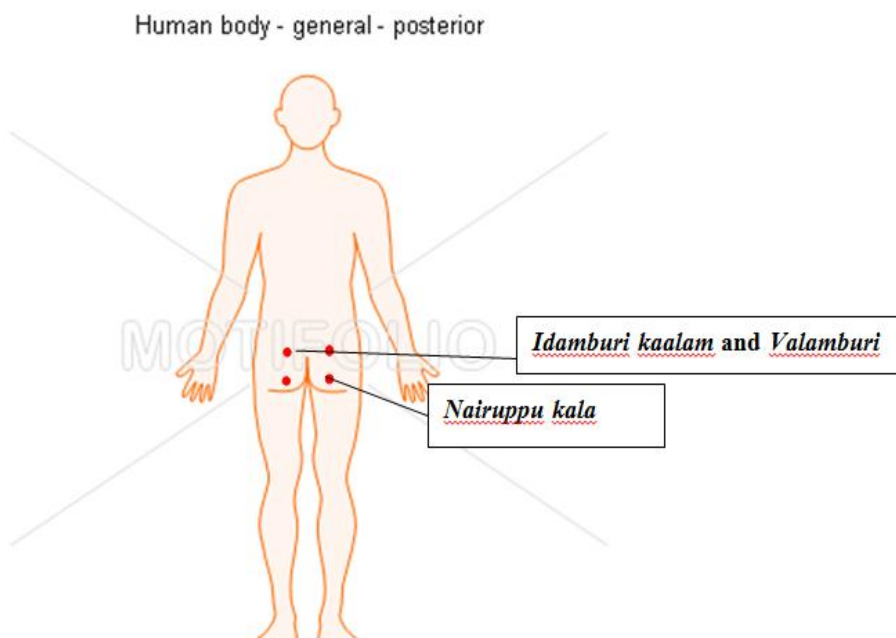
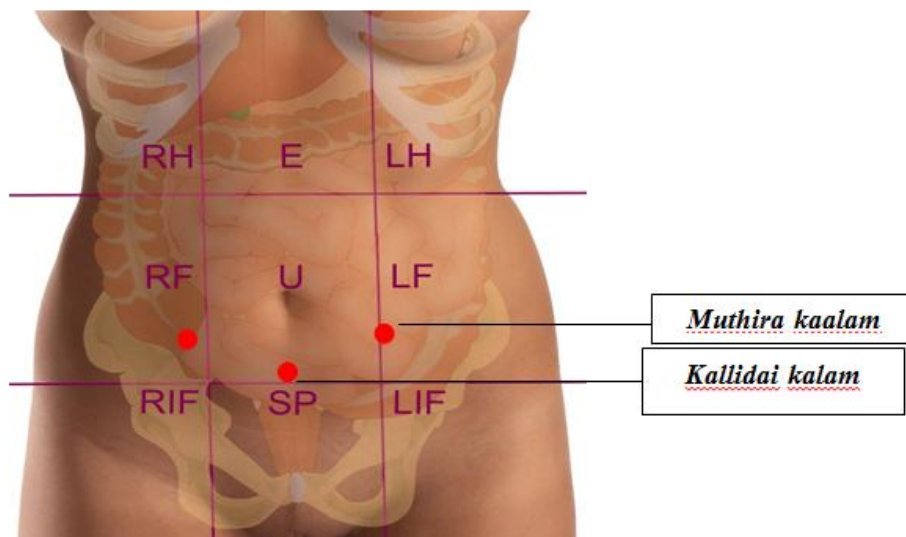
manuscripts “*varma kaandam*” the following points are used to controled the UI. First one is ***Kondai kolli varmam***, locates in Middle line near to the cranial vertex. Stimulation of this point regulates the functions of core substance of inthriyaas. By inthriyaas we refer to both gnanenthiriyangal of skin, tongue, eye, ear and nose also normalize the kanmenthiriyangal of arm, leg, mouth, anys and genitals.<sup>[12]</sup> Second one is ***Pin kannadi kaalam***, it situate in outer surface of the occipital bone just below the occipital protuberance. Apply this varmam point regulates the function of higher centers for micturition and enhances the function of spinalcord.<sup>[13]</sup> Third one is ***Muthira kaalam***, it placed in both side lower regions of the Right flank zone (lumbar) and Left flank zone (lumbar) of abdomen area. Put these varmam points regulates the functions and tonicity of bladder and ureters.<sup>[12]</sup> Fourth & fifth points are ***Idamburi kaalam*** and ***Valamburi kaalam***, these are located in right and left side articulation of sacro iliac bones. Pertain these points control the flow of urine, gives streanth to urethral sphincter muscles.<sup>[14]</sup> Sixth one is ***Nairuppu kalam***, it placed in both side of Inferior ramus of the ischium (ascending ramus). It improve the tone and function of the pelvic floor muscles.<sup>[13]</sup> Seventh point is ***Kallidai kalam***, it located in upper portion of Suprapubic zone of lower abdomen. It is used to increase the stranth and activities of baldder and urethra.<sup>[15]</sup> The last point is ***Adimootu varmam*** placed in middle of the cubital fossa. It gives strengthen to the nerves of bone marrow.<sup>[16]</sup>

### Locations Varma points





Abdomen area divides into 9 zones. They are Right hypochondrium -RH, Epigastrium - E, Left hypochondrium - LH, Right flank (lumbar) - RF, Umbilical -U, Left flank (lumbar) -LF, Right iliac fossa (inguinal) - RIF, Suprapubic - SP, Left iliac fossa (inguinal) – LIF.<sup>[17]</sup>



## CONCLUSION

Age and sex the response between the age group of 10 and 30 (G2 and G3) to varmam therapy was 100% while 7.14%, 10% and 4.17% in age groups G1, G4 and G5 responded poorly (Fig.1). Among males all the 17 responded to treatment while 26 out of 29 female

patients (89.66%) are responded. Over all varmam therapy produced 46.15% good response 29.23% was moderate response, 18.46% had mild response and 6.15% poor response.

As on date to our knowledge there is no permanent cure for this condition in other medical treatment methods. From the results it could be arrived at that varmam therapy is an effective method for the management of all types of UI. Further the treatment method is simple, non-invasive and less time consuming without any side effects.

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