



## Management of Thookaminmai (Insomnia) through Siddha Medicine Sadamanjil Choornam : A Case Report

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### Abstract

Thookaminmai (insomnia) is a sleep disorder affecting many people all around the world of all ages. 53 years old female visited the Department of Siddhar Yoga Maruthuvam of Government Siddha medical college, Palayamkottai with complaints of difficulty falling asleep, problem waking up too early over the period of past 6 months. She has a history of hypertension for past 10 years and taking medicines for it. Insomnia Severity Index Scale (ISI) has been used as a standard tool to measure the status of sleep. Diagnosed as Thookaminmai (insomnia) and provided with Sadamanjil Choornam twice a day with hot water recommended by Siddha text Siddha Pharmacopoeia of India. On fifth day of taking Sadamanjil Choornam her sleep got to normal without any disturbances and case is followed for a month. Insomnia Severity Index Scale was used before and after taking Sadamanjil Choornam for sleeplessness. The Siddha medicine Sadamanjil Choornam could improve the quality of sleep and treat Thookaminmai (Insomnia). Further large scale studies of Sadamanjil Choornam for Insomnia can be led.

**Keywords:** Siddha medicine, Insomnia, Sadamanjil choornam

### Introduction

Thookaminmai (Insomnia) is an emerging problem affecting many people around the world. There are several types of sleep disorders known. The ASDC (Association for Sleep Disorders Centre) has done a lot of work in classifying the various sleep disorders and their classification has been adapted for use both by DSM-IV-TR and ICD-10. The sleep disorders are known as non-organic sleep disorders in ICD-10.

Insomnia means one or more of the following:

- Difficulty in initiating sleep (going-off to sleep).
- Difficulty in maintaining sleep (remaining asleep).

a. Frequent awakenings during the night, and

b. Early morning awakening.

- Non-restorative sleep where despite an adequate duration of sleep, there is a feeling of not having rested fully (poor quality sleep).

In siddha System of medicine sleep is defined as one of the fourteen vital reflexes of the body. Thookaminmai (Insomnia) may also be called as Nithiraipankam. According to siddha text Padartha Guna Sinthamani, Nithiraipankam is quoted as

“Siddha mayaka seriiyyam pulathayaka

Meitha urakkamantha enbavaika – nitthamura

Vanduch silaraina yaypanoi kavvumirak

This can include both:

Kanduch silarainambik kaan”

Which means if there is no quality sleep then it causes tiredness of the senses, fear, indigestion and many other diseases.

According to siddha text Siddha Pharmacopoeia of India Part 1, Sadamanjil is the dried rhizome of *Nardostachys grandiflora* of family Valerianaceae, an erect perennial herb, 10 to 60 cm. high, found in the sub-alpine Himalayas from Punjab to Sikkim and Bhutan at altitudes of 3000 to 5000 m. It is used for treating Thookaminmai (Insomnia).

## Methodology

### Patient Information

A case of 53 years old female from Tirunelveli, working as a housemaid visited the Department of Siddhar Yoga Maruthuvam of Government Siddha medical college, Palayamkottai with complaints of difficulty falling asleep, problem waking up too early over the period of past 6 months. She has attained menopause before six years. She has a history of hypertension for past 10 years and taking medicines for it. During the visit and stay in hospital her blood pressure was normal. She has no history of Diabetes mellitus, Asthma and Thyroid disorders.

Her Food habit was normal. Her appetite was normal. She weighed 69 kilograms. She has no significant family history. There is no psychological problem history. She was then admitted in IP Department of

Siddhar Yoga Maruthuvam of Government Siddha Medical College and Hospital, Palayamkottai.

### Clinical Findings

The Siddha diagnostic tool envagai thervu which includes Naadi (pulse), Sparisam (palpation), Na (tongue examination), Niram (colour of the body), Mozhi (speech), Vizhi (eye examination), Malam (stool examination) and Moothiram (urine examination) were recorded. Her Naadi (pulse) according to siddha method was Vaathakabam. Her blood pressure was 130/80 mm Hg. Her Respiratory rate was 17/ minute. Her Heart rate was 70/ minute. Her Pulse rate was 72/ minute.

### Laboratory Findings

Routine haematology and Biochemical tests were carried out. The results were completely normal. Her haemoglobin was 12.2 g/dl. Her Urea level was 21 mg/dl. Her creatinine level was 0.6 mg/dl. Her random sugar level was 107 mg/dl. All the laboratory tests carried out were normal.

### Therapeutic Intervention

Sadamanjil Choornam is given one gram twice a day after food with hot water. She was asked to continue the tablet which she was taking for hypertension. She was provided with normal indian diet in IP Department of Siddhar Yoga Maruthuvam of Government Siddha Medical College and Hospital, Palayamkottai.

**TABLE 1 : INTERNAL MEDICINE : SADAMANJIL CHOORNAM CONTENT AND DOSAGE**

S. No.	DRUG	BOTANICAL NAME	PART USED	QUANTITY
1	Sadamanjil	<i>Nardostachys jatamansi</i>	Rhizome	1 gram twice a day with hot water

### Assessment Tool

Before the therapeutic intervention, the participant was subjected to Insomnia Severity Index (ISI) Scale, which indicates the Severity of Insomnia (composed of 7 standardized questions) to measure the Sleep Quality. Each question carries 0-4 score (a scale of 0,1,2,3 and 4) and the final summarized scoring could be ranging between 0-28 score followed by the insomnia severity has been categorized as mentioned in table 2.

**TABLE 2**

<b>SCORE</b>	<b>SEVERITY OF INSOMNIA</b>
0-7	No Clinical Insomnia
8-14	Subthreshold Insomnia
15-21	Clinical Insomnia (Moderate Severity)
22-28	Clinical Insomnia (Severe)

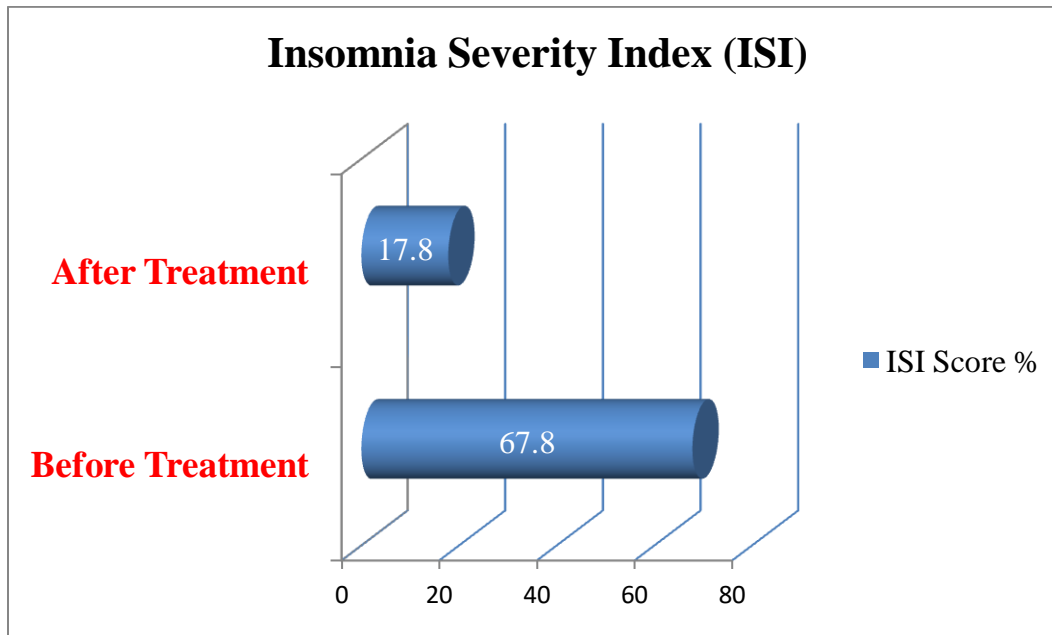
**Outcome And Followup**

The Severity of Thookaminmai (Insomnia) was assessed by Insomnia Severity Index Scale before and after the therapeutic intervention. The score was 19/28 before the therapeutic intervention and it reduced to 5/28 after the therapeutic intervention after one month. Her quality of sleep becomes normal. Then she was discharged from the hospital. She was asked to stop the medicine Sadamanjil Choornam. She was then asked to visit the hospital after one week. After one week she was satisfied with her sleep quality, it was good as it was during the date of discharge. She was then asked to visit the hospital only if she has problem of insomnia in the future.

**TABLE 3**

<b>INSOMNIA SEVERITY INDEX SCALE</b>		
<b>Time</b>	<b>Score</b>	<b>Percentage</b>
Before Treatment	19/28	67.8
After Treatment	5/28	17.8

Chart 1



### Conclusion

The Siddha Medicine Sadamanjil Choornam could improve the quality of sleep and treat Thookkaminmai (Insomnia). Sadamanjil Choornam also reduces the associate problems of Insomnia like stress. Further large scale studies of Sadamanjil Choornam for Insomnia can be leaded.

### References

1. Durairasan. K(Editor), Noiilla Neri, Department of Indian Medicine and Homeopathy, 2017
2. Uthamarayan. K. S, Siddha Maruthuvanga Surukkam, Department of Indian Medicine and Homoeopathy , 1983 (1<sup>st</sup> Edition)
3. Rajkumar. G. A(Editor), Padartha Guna Sinthamani, Department of Indian Medicine and Homoeopathy, 2007
4. Charles M Morin, Geneviève Belleville, Lynda Bélanger, Hans Ivers, The Insomnia Severity Index: psychometric indicators to detect insomnia cases and evaluate treatment response, *Sleep* 34 (5), 601-608, 2011
5. The Siddha Pharmacopoeia of India, Part 1, Volume 1, Ministry of Health and Family Welfare
6. Amrith Sam. N, Pavithra. K, and Poonkodi Kanthimathi. A. S, Biochemical Analysis of Siddha Monoherbal Drug Sadamanjil Choornam, *IJRAMT*, vol. 3, no. 3, pp. 82–83, Mar. 2022
7. Davidson, Principles and Practice of medicine, Elsevier publications, 2014 (22<sup>nd</sup> edition)
8. Niraj Ahuja, A Short Textbook of Psychiatry, Jaypee Brothers Medical Publishers, 2011 (7<sup>th</sup> edition)
9. Riba FJ, Health WHOD of M. Insomnia : behavioral and cognitive interventions. 1993.