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## Ethical perspective and Standard Operating Procedure (SOP) on Nasiyam in Siddha system of medicine

**S.Mohamed Ajmal<sup>1</sup>, R.Raseeha<sup>1</sup>, S.Rajkumar<sup>1\*</sup>, A.P.Uma<sup>2</sup>, M.S.Shreedevi\***<sup>1</sup>Final year BSMS, Sivaraj Siddha Medical College, Salem<sup>1\*</sup>Third year MD (Noi Naadal), Government Siddha Medical College, Palayamkottai, Thirunelveli<sup>2</sup>Lecturer, Department of Sirappumaruthuvam, Sivaraj Siddha Medical College, Salem

\*Research Officer, Siddha Central Research Institute, Chennai

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### Abstract

Siddha system of medicine is one of the ancient systems of medicine in India. It was gifted by 18 Siddhars. The external therapies in Siddha medicine is the main strength and popular in local health care practices among Tamil speaking people. Siddha external therapies act as powerful means to promote health equity, evidence of instant efficacy and safety and comparatively cost effectiveness. There are 32 types of External therapies classified by our Siddhars. Among these Nasiyam is placed in twelfth place. It is a process by which the drug is administered through the nostrils. Sometimes the prepared medicines are made into pill form and the pills are dissolved either in water or breast milk or plant juice and instilled in the nostril. The main aim of our study is to overcome the problem of non-availability of Standard Operative Procedure in Siddha external therapies with their ethical perspectives.

**Keywords:** Siddha system, Nasiyam, External therapies, Standard Operative Procedure.

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### Introduction

Siddha medicine are in practice when the human race starts to civilize. External therapies and internal therapies are two eyes of Siddha system. In several instances, only the procedures without any drug are sufficient and these procedures are already systematized. Most of the therapies are aimed at maintaining healthy balance of the three physiological factors and also seven tissues of the body. Nasiyam is a process by which the drug is administered through the nostrils. Fresh plants are cleaned thoroughly or blanched, crushed and juice extracted, filtered and instilled into the nostril. Individual oil or herbal juices or flower juices are also used for Nasiyam. Watery drops are faster than oily drops in their function. Generally Nasiyam is performed in the evening time

for Vali(Vaatha)diseases, noon time for Azhal(Pitha) diseases and morning time for Iya(Kapha) diseases. The dose should be appropriate and should not to be less than 4 drops and not to be exceeded than 8 drops. Fresh plant juice and decoction are instilled into nostrils upto 4-8 drops. For mild conditions we may instill 4 drops, for moderate 6 drops and for severe 8 drops. In normal healthy patients Nasiyam (Nasal application) should be applied once in 6 weeks for maintaining good health. The intranasal route (administration through the nose) may allow certain drug molecules to bypass the blood brain barrier via diffusion or axonal transport along olfactory and trigeminal nerves. This study is to overcome the problem of non-availability of Standard Operative Procedure in Siddha external therapies with their ethical perspectives [1].

## Materials and Methods

### 1. Definition

Nasiyam is a process by which the drug is administered through the nostrils. Fresh plants are cleaned thoroughly or blanched, crushed and juice extracted, filtered and instilled into the nostril. Individual oil or herbal juices or flower juices are also used for nasiyam[1].

### 2. Intent of this study

- To improve circulation,
- To control infection,
- To prevent the fungal growth,
- To disinfect the affected area,
- To prevent the watering and dryness,
- To remove blockage,
- To avoid septal deviation,
- To balance vaatham, pitham, kapham,
- To normalize Iyam.

### 3. Eligibility criteria

Nasiyam is not advised in

- Patient below 7 years,
- Above 80 years,
- Unconsciousness,
- After oil bath

### 4. Ethical Perspectives

- Gender issues (Therapy like Thokkanam etc. On Male to Male and Female to Female only),
- Time issues (It is not advisable to do Therapy in night times),
- Environment issues (It is not advisable to do Therapy in Low light, dark areas, open place, screen less),
- Command issues (Proper command from Physician),
- Consent issues (Consent form signed by patient),
- Privacy issues (Avoid Camera, photographs, non-medical personnel),
- Safety issues (Electric shocks, floor slip etc)

### 5. Therapeutic Sources

Fresh plant parts like leaf, stem, tuber, or dry plant parts or fatty oils.

Dry powder or pill dissolved in mother milk, Cow's urine, Butter, Animal blood.

Common salt, Alum dissolved water.

### 6. Specifications and Articles required

The treatment room should have the following specifications such as

- 10x10 feet room
- Separate rooms for men and women
- Screen
- Ventilator
- Windows for sunlight
- Movable lamp
- Exhauster fan
- Nasiyam Chair

#### A) For preparation

- Pestle and Mortar or Kalvam for grinding
- Stove
- Filter
- Knife
- Spoons
- Match box
- Air tight container

#### B) For administration

- A separate room and Screen
- Cloth
- Towel
- Wash basin
- Gloves, Gauze roll, Cotton roll, Soap or Anti septic lotion, Knife, Scissor, Tissue paper, Dust bin, Surgical Gloves
- Dropper
- Torch light

### 7. Procedure

- Preparation of medicine
- Administration of Nasal Drops
- Removal of the Patient

**A) Preparation of medicine****Method 1**

Crush the fresh plants and filter the juice and store in an air tight container

**Method 2**

Purify the required drugs in a cloth bundle and soak it in urine

**Method 3**

The Purified drugs are made into paste with the help of leaf juice or breast milk or butter and expose to sunlight and store in an air tight container

**B) Administration of Nasal Drops**

- Gather all the articles at therapeutic
- Ask the patient to blow the nose gently with the cloth
- Wash the Physician hands thoroughly
- Explain the Procedure to the patient
- Place the patient in the nasiyam chair
- Tilt the patient head as far back as possible or lie down on a nasiyam chair and hang the patients head over the edge
- Stand back to the patient
- Check the dropper tip to make sure that it is not chipped or cracked
- Lift the patient nose upwards using the physician left middle finger
- Close one nostril using thumb or ring finger
- Hold the Filled dropper or the soaked cloth bundle using the right hand
- Instill the correct number of drops into the patient's nose
- Repeat the same in another nostril
- Ask the patient to spit the drops when it reaches the throat
- Clean the outer opening of the nostril using dry sterile cloth

**C) Removal of the Patient**

- Removal may be done after 30-35 minutes
- Ask the patient to gargle with lukewarm water
- Use tissue paper to wipe nose and mouth
- Repeat the wiping for 3-4 times

**8. Care of articles and patients after procedure**

- Clean the table
- Dispose the waste
- Autoclave the articles subjected to procedure
- Wash the physician hands well
- Ask the patient to wash the face again with lukewarm water
- Leave the patient to go outside

**9. Therapy timings and dose[1]**

Within 7 hours from sunrise

- Due to predominant of Vatha – to be applied in the evening
- Due to predominant of Pitham – to be applied in the afternoon.
- Due to predominant of Kapham – to be applied in the morning.
- For acute intensified diseases – to be applied in the night
- Chitthirai, Vaigasi, Ipasi, Karthigai (April, May & October, November) – to be applied in the morning.
- Margazhi, Thai, Maasi, Panguni (December, January, February, March) – to be applied in the afternoon.
- Aani, Aadi (June, July) – to be applied in the evening.
- Aavani, Purattasi (August, September)– to be applied when the sun shines.

The dose should be appropriate and should not be less than 4 drops and not to be exceeded than 8 drops. Fresh plant juice and decoction are instilled into nostrils upto 4-8 drops. For mild conditions we may instill 4 drops, for moderate 6 drops and for severe 8 drops.

**10. Duration**

30-35 inutes

**11. Mechanism of Nasiyam Procedure**

- It is a well-known factor that the olfactory centre is located in the temporal lobe of the brain. The filaments of first cranial nerve, Olfactory nerve arise from the upper parts of the nasal mucosa, from where the minute

fibrils pass to meet with the fibres from olfactory bulb.

- This nerve passes the cribriform plate present over here and joins the olfactory centre in the temporal lobe of the brain.
- As mentioned earlier, the numerous capillaries embedded in the nasal mucosa absorb the medicinal principles administered through nasiyam and produce various kinds of local and systemic effects by mechanical and chemical reactions.
- The discharge secreted contains the blocking morbid and are evacuated through nasal route.
- Thus the pathological condition is reversed and the disease is relieved.

## 12. Symptoms of Good Nasiyam Procedure

- Breathing without difficulty
- Improved strength of sense organs
- Good sleep
- Protects the nostril from toxins
- Excretes the waste
- Maintains the mucous membrane neither dry nor moist
- Improves the vision sharpness and smell sensitivity
- Permits the drug molecule to bypass the blood-brain-barrier via diffusion
- Conducts axonal transport along olfactory and trigeminal nerves.

## 13. Contraindications

- Itching
- Feeling of heaviness of head
- Excess salivation

## 14. Pros and Cons during this therapy

### Advantages

- The nasal mucosa is also a useful site by which the administered drugs undergo considerable presystemic elimination (eg. by 1<sup>st</sup> pass metabolism) when given orally.
- Absorption from the nasal mucosa can also be inconsistent.
- Nasal mucosal epithelium has remarkable and potentially very valuable absorptive properties, notably the capacity to absorb intact complex peptides that cannot be administered by mouth because they would be digested.

- It avoids drug modification by the alimentary juices and liver enzymes.
- Rapid action.
- Accuracy of dose is ensured.
- Can be employed in uncooperative patients.
- Can be employed in patients unable to swallow.

### Disadvantages

- It is always advised to use this route under medical supervision. The disadvantages are
- Inconvenient for use
- Self medication being difficult.
- Less safe and liable to cause infection if proper care is not exercised.
- Like to injure important structures such as nerves and arteries.

## 15. Therapeutic Indications Given in the Literature

- Sinusitis
- Headache
- Nasal polyp
- Migraine
- Psychiatric illness
- Delirium
- Deranged kapham
- Ascities
- Syncope
- Scorpion stings
- Red centipede venom
- Scrotal Swelling
- Cough
- Rhinitis
- Sneezing
- Hemicrania
- Nasal ulcers
- Rigor
- Tremors
- Fever
- Hiccup

## 16. Some important preparations given in the Literature

### Delirium

Leaf juice of Vembu(*Azadirachta indica*) is instilled into nostrils to treat delirium, fever and epilepsy[2]

### Sinusitis

Leaf juice of Vellaruku(*Calotropis gigantea*) is instilled into nostrils to treat sinusitis[2]

**Azhal diseases**

Leaf juice of Umathai(*Datura metal*) is instilled into nostrils to treat Azhaldiseases[2].

**Migraine**

For treating migraine, make a poultice by adding equal quantity of the fruit of Samuthirapazham(*Baringtonia acutangula*) and Perungayam(*Ferula asafoetida*) along with breast milk. Roll it into small pills and as and when required, small portion of the pill is rubbed with breast milk and instilled into the nostril[3].

**Peenisathylam[4]**

2 to 3 drops to be applied once in 4 days.

**Chukkuthylam[4]**

2 to 3 drops to be applied once a week.

**Discussion**

External therapies are Gifts to Siddha, which need to be researched and practised with full concentration by all Siddha Doctors to make Siddha well flourished, welcomed and to reach the general population. It is our duty to expose our External therapy specialities like Nasiyam, Varmam, Thokkanam, Kombukattal, Vedhu, Patru, etc. Nasiyam process cleans the surface impurities from microbes like fungus etc., and removes the dead cells. Nasiyam, Thokkanam,

Varmam and most other therapies of Siddha are regaining popularity and efforts are onto validate and standardize the procedures. These therapies can be done in major measures with locally available resources and therefore are accessible as well as affordable.

**Conclusion**

This paper helps in giving non-availability of Standard Operative Procedure towards Traditional therapies of Siddha that have tremendous results in various diseases. The speciality of these Therapies lies therapeutic in nature. External therapies can be done in major measures with locally available resources and therefore are accessible as well as affordable to the entire society.

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