

# CLINICAL EFFICACY OF *VIRALIVER KUZHI THAILAM (EXTERNAL)* IN THE TREATMENT OF *VENPULLI (VITILIGO)* IN CHILDREN – A CASE SERIES.

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**Abstract-** The Universe is composed of five elements via, Earth, Water, Fire, Air, Ether (Man, Neer, Neruppu, Kaatru and Aakayam). The human anatomy, physiology, pathology of disease, materials for the treatment and the food for sustenance all fall with in the five elemental categories Siddha medicines revitalize and also rejuvenate the dysfunctional organs. According to Siddha system of Medicine diseases are classified into 4448 in number. Kuttam (dermatological diseases) is one among them. Kuttam is further classified into 18 types. The disease Venpulli is one among them. It is mentioned as “Suvetha Kuttam” in the text ‘Siddha Maruthuvam Sirappu’.

**Keywords:** Venpulli, Poochu, Viraliver kuzhi thailam, Siddha Medicine .

## INTRODUCTION:

Vitiligo is characterized by depigmented (chalky white (or) pale white) macules which are sharply marginated. Vitiligo may present anytime in life including the neonatal period and childhood. It deserves special attention as frequently 50%. The disease onset is before 20 years of age. In 25% of the cases, it starts before the age of 10 years. In two Indian studies, the prevalence has been reported to be 26% (South India) & 23.3% (North India) respectively. Positive family history in childhood vitiligo varies between 11% & 46%.

The clinical features of VENPULLI which is explained in “SIDDHA MARUTHUVAM SIRAPPU” literature may be correlated with VITILIGO.

According to THERAYAR THARU external therapy in SIDDHA system is divided into 32 types. POOCHU (External application) is one among them. POOCHU is defined as applying of boiled leaf juices or boiled oils in affected area. VIRALI VER KUZHI THYLAM is mentioned in the siddha literature THE PHARMACOPOEIA OF SIDDHA RESEARCH MEDICINE, and it is used as EXTERNAL APPLICATION in the treatment of VENPULLI.

This study deals with reduction in the clinical symptoms like Hypopigmented patches, in children treated with VIRALI VERKUZHI THAILAM.

## CLASSIFICATION:

The classification system is important because of the special significance assigned by some authorities to each type of Vitiligo. The most widely used classification of Vitiligo is localized, generalized, and universal types and is based on the distribution, as follows:

### 1. Localized Vitiligo:

1. Focal: This type is characterized by one or more macules in one area, most commonly in the distribution of the trigeminal nerve.

2. Segmental: This type manifests as one or more macules in a dermatomal or quasidermatomal pattern. It occurs most commonly in children. More than half the patients with segmental Vitiligo have patches of white hair or poliosis. This type of Vitiligo is not associated with thyroid or other autoimmune disorders.

3. Mucosal: Mucous membranes alone are affected.

### 2. Generalized Vitiligo:

1. Acrofacial: Depigmentation occurs on the distal fingers and periorificial areas.

2. Vulgaris: This is characterized by scattered patches that are widely distributed.

3. Mixed: Acrofacial and Vulgaris Vitiligo occur in combination, or Segmental and Acrofacial Vitiligo and/or Vulgaris involvement are noted in combination.

### 3. Universal vitiligo:

This is complete or nearly complete depigmentation. It is often associated with multiple endocrinopathy syndromes.

## CLINICAL FEATURES:

Vitiligo is most noticeable in the summer when the normal skin is tanned by the sun. The white areas having not protected by pigment are easily made red and sore by exposure to sun or artificial ultraviolet light.

• Early lesions may be pale white and ill defined. At this stage, Wood's lamp helps to confirm the diagnosis. Patches enlarge

slowly and may affect the whole body. Patients skin is susceptible to even minor trauma, it heals with depigmentation.

- At time lesions develop along the distribution of a peripheral nerve, zosteriform vitiligo. It is interesting sometimes to see a bunch of hair burning in that area of skin. Occasionally, vitiligo develops around pigmented moles – ‘Halo naevus’.
- Haemoglobin content of the blood is low and sometimes intestinal parasites and infections can be detected. Patients complaint of easy fatiguability.
- Vitiligo sometimes disappears spontaneously after months or years but more usually the conditions spreads slowly and may eventually involve nearly the whole of the skin.

#### PROCEDURE OF VIRALIVER KUZHI THAILAM PREPARATION

**REFERENCE:** THE PHARMACOPOEIA OF SIDDHA RESEARCH MEDICINE, Dr.M.Shanmugavelu & Dr.G.D.Nayudu (Pg:166).

#### INGREDIENTS OF PUZHUVETTU THAILAM:

1. Virali ver (Dodonaea Viscosa ) - 100gms

#### PREPARATION:

The Root of VIRALI cut into small pieces, dried in the sun light and subjected to KUZHI THAILAM. Then oil is collected, filtered and stored in a air tight container.

#### USAGE:

VIRALI VERKUZHI THAILAM was given for external application in the hypopigmentation patches over a period of a months.

#### CASE SERIES:

S.NO	AGE/SEX	COMPLAINTS	VITAL SIGNS	ANTHROPOMETRY
1	5Y/MC	Hypopigmented patches present in the right hand, leg & groin region since 2 years.	Temperature- 98.4F Heart rate- 81/min Respiratory rate- 19/min Pulse rate- 85/min	Height-110cm Weight-17kg
2	8y/FC	Hypopigmented patches present in the left leg & ankle joint since 1 year Constipation since 2 months.	Temperature- 98.6F Heart rate- 79/min Respiratory rate- 20/min Pulse rate- 81/min	Height-110cm Weight-17kg
3	5Y/FC	Hypopigmented patches present in the front of the both legs and eye lids since 3 months.	Temperature- 98.6F Heart rate- 82/min Respiratory rate- 21/min Pulse rate- 78/min	Height-105cm Weight-16 kgs
4	10Y/FC	Hypopigmented patches present in the lips, extensor surface , ankle joint& ear since 2 years.	Temperature- 98.6F Heart rate- 80/min Respiratory rate- 20/min Pulse rate- 82/min	Height-128cm Weight-25kg
5	12Y/MC	Hypopigmented patches present in the lips since 2 months	Temperature- 98.6F Heart rate- 82/min Respiratory rate- 19/min Pulse rate- 80/min	Height-159cm Weight-54kg

6	6Y/MC	Hypopigmentation present in around the lips since 6 months.	Temperature- 98.7 Heart rate- 82/min Respiratory rate-20/min Pulse rate- 78/min	Height-117cm Weight-24kg
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CASE NO: 1

Age/sex: 5 years / Male child

Before treatment



After treatment



Case series 2:

x: 5 years/ Female child

Age/se

Before treatment



After treatment



**RESULT**

As per the above analysis using VASI score out of Six patients 3 had good prognosis (65%), 2 had moderate prognosis (25%) and one had poor prognosis (10%) to VENPULLI treated with VIRALI VERKUZHI THAILAM.

**MEAN IMPROVEMENT IN VITILIGO BY USING VASI SCORE:**

S.NO	OP	AGE/SEX	VASI SCORE	CLINICAL
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	NO		BEFORE TREATMENT	AFTER TREATMENT	IMPROVEMENT
1	7686	5/MC	7%	2%	GOOD
2	3143	8/FC	2%	0.50%	GOOD
3	2408	5/FC	11.25%	4.75%	GOOD
4	7585	10/FC	15.5%	14.05%	MODERATE
5	4837	12/MC	9%	7%	MODERATE
6	5586	6/MC	2%	1.80%	MILD

### DISCUSSION

From this study, *Poochu* plays a important role as a lubrication, moisturization, local healing, anti inflammatory actions. It also removes our wastes as toxins through the skin and balances *mukkutram*. It is also dilating all body channels for the cleansing and improving peripheral circulation. These characters of *Poochu* are useful in Venpulli and reduces hypopigmented patches and promotes the pigmentation on affected area. The procedure is just application of *Virali verkuzhi thailam* in affected area for one month. At the end of the study among 6 patients, 3 patients showed good prognosis like pigmentation from mild to good and 2 patients shows moderate improvement and other 1 patient shows mild improvement. Effect of *Virali verkuzhi thailam* reduces hypopigmented patches and that promotes pigmentation on affected area.

### CONCLUSION

In siddha system external application of medication shows best results in general. Application of VIRALIVER KUZHI THIALAM in VENPULLI reduces hypopigmentation of the patches and promotes the pigmentation on affected area. The study VIRALI VERKUZHI THAILAM showed effective result in reducing symptoms of VITILIGO in children, it improve the quality of life in children.

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**Conflicts of Interest :** None

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