# Effect of Modified Traditional Medicine Formulation-16 (*Apunyein-Thway-Hsei*) in The Treatment of *Rajonivruti*(Menopausal Syndrome)

Moh Moh Aung (2014)

### **ABSTRACT**

Menopausal symptoms have been considered as a major health problem in women with long term consequences. The chance of occurence is expected to be increasing due to the average age has steadily increased inthelastcentury all over the world. According to Traditional Medicine, menopause is caused by aggravated vatadosha entering the shukradhatu of the artavavahasrota(female reproductivesystem),resulting menopausal syndrome. The present study was taken up with the objective of evaluating the efficacy of ModifiedTMF-16inthe treatment of Rajonivruti(menopausal syndrome) and the association between serum FSH level and prakriti(constitution). It is a quasi-experimental study done in Mandalay Traditional Medicine Teaching Hospital over one year period(fromJuly 2013 to August2014). Total 33 patients with Rajonivruti were included. TheserumFSHlevelsofstudy populationwereanalyzedandprakritiwere determined by questionnaires.Data were analyzed using SPSS software version 21 and improvement of symptoms score were compared using Pair SampleT-test and One Way ANOVA. P value was <0.05 considered assignificant. There were 33 patients with *Rajonivruti*. The mean ageofpatientswas52.15 ±3.44 years(range46-62). Most presenting symptom was night sweating that was severe in 96.9% of cases. It was found that 52% of study population was pittaprakriti, 30% was vataprakriti and 18% was kaphaprakriti. Serum FSH level was associate with the severity of menopausal symptoms in vataprakriti(p=0.003). It washighly significant in improvement (p<0.0001) of menopausal symptoms by treating with Modified TMF-16. Therefore, muscle and joint pain was not significant (p=0.023) in this study. There was no association between *Rajonivruti* and age, marital status(BMI). ModifiedTMF-16wassignificantly status and physical effective(p<0.0001)on Rajonivruti(Menopausal symptoms) and serum FSH level was associate with the severity of menopausal symptoms in *vataprakriti*(p=0.003).

### Effect of Medicated Oil of Alpiniagalanga(L) Willd. Nasya Karma in Patients with KaphajaShira Shula W.S.R. to Chronic Sinusitis

NaingKeeMyu Mang<sup>1</sup>, KyiKyi Oo<sup>1</sup>, Win Myint<sup>1</sup>, Than Ohn<sup>1</sup>, MaungMaung Thet<sup>1</sup>, TheimKyaw<sup>2</sup> SanSan Htay<sup>4</sup>, Kyaw Oo<sup>3</sup>

- 1. University of Traditional Medicine, Mandalay
- 2. Department of Traditional Medicine, Nay Pyi Taw
- 3. Department of Medical Research (Pyin-Oo-Lwin Branch)
- 4. University of Medicine, Mandalay.

#### **ABSTRACT**

KaphajaShira Shula in Traditional Medicine has been correlated with chronic sinusitis according to literatures. Chronic sinusitis is a common disease worldwide, particularly in places with high levels of atmospheric pollution. In pathological concept of traditional medicine, KaphajaShira Shula occurs due to the vitiation of Kapha and VataDosha and KaphaDosha is predominant in this condition of KaphajaShira Shula. The present study was conducted to evaluate the effect of medicated oil of Alpiniagalanga (L) Willd. Nasya Karma on patients with KaphajaShira Shula W.S.R. to chronic sinusitisafter obtaining informed consent from OPD and IPD in 100 bedded Traditional Medicine Teaching Hospital (TMTH). Thirty three cases presenting with the clinical presentation of *KhaphajaShira Shula* patients were selected and studied by hospital basedOuasi-clinical study design from 1st September 2013 to 31<sup>st</sup> October 2014. Radiological assessments (Sinus X-ray) before and after treatment were carried out and the registered patients were prescribed for oral administration in tablet form 2 gm of the same ratio of combination of TMF-23 and TMF-24 with lukewarm water three times per day after mean for 24 days. The duration of the study was taken 24 days and every 8<sup>th</sup> day was the rest day in this study. The results obtained from this study were analyzed and compared with the serial effects of the clinical presentation at day 0 with day 8, day 16 and day 24 with the one sample t-test by using SPSS software version 20. In the serial effect of the therapy according to the clinical presentations of patients with KaphajaShira Shula in mean percentage, this study proved that headache (43.41%), heaviness of head (63.77%), nasal discharge (47.71%), nasal obstruction (49.38%), impaired sense of smell (36.53%) were statistically highly significant relief after treatment with this medicated oil Nasya Karma by p<0.000, and facial pain (23.08%) and post nasal discharge (10.43%) were statistically significant relief after treatment by p<0.001and p<0.04 respectively. The overall serial effect was moderate improvement after treatment at day 24 and statistically highly significant by p<0.000. The findings obtained from this study could be proved that the medicated oil of A.galanga (L) Willd. Nasya Karma is effective in the management of the patients with KaphajaShira Shula W.S.R. to chronic sinusitis. In addition, it is believed that this medicated oil has heterogenous properties of Khapha and Vata as well as Vayuand Apo Mahabhutain concept of traditional medicine.

### Effect of Myanmar Traditional Therapy in patients with *Arisa* (Haemorrhoids)

KhinYatanarHlaing\*, Win Naing\*, Ni NiZaw\*, AungKyaw Min\*,
Hla Moe\*\*

University of Traditional Medicine\*, University of Medicine (Mandalay) \*\*

#### **ABSTRACT**

Arisa (Hemorrhoids) pertains to a disease occurring in guda (anorectal region) and it is torturing to the patients. It may create hindrance or suppression on ano-rectal passage. Many people suffer from haemorrhoids which can be uncomfortable and sometimes painful. Various modalities of treatment for Arisa have good outcome. Among them, the purpose of this study was undertaken to investigate the effect of Myanmar Traditional Therapy in patients with Arisa (haemorrhoids). Myanmar Traditional Therapy for Arisa (haemorrhoids) means that it is conservative treatment and non-invasive treatment, including TMF -12 and TMF -27 orally, TMF -49 ointment based cream was used for anal application and modified Anumupanhsei: was used for anal phanhteihsei. Modified Anumupanhsei: was prepared by adding 6 times of potassium Aluminiumsulphate (Kjauk chin) to the original Anumupanhsei:. Forty one caseswith haemorrhoids patients were studied by hospital based quasi experimental study design in Ulcer and Sore Therapy Ward of Traditional Medicine Teaching Hospital, Mandalay from 1st September 2013 to 31st October 2014. The study was conducted by history taking, physical examination and intervention of Myanmar Traditional Therapy on haemorrhoids patients for 28 days. The changes of signs and symptoms of haemorrhoids were assessed at day 7, at day 14, at day 21 and atday 28. It was found that the ser ial effect of Myanmar Traditional Therapy on haemorrhoids patients was statistically significant at day 7 (p<0.000), at day 14 (p<0.000), at day 21 (p<0.000) and at day 28 (p<0.000) respectively. The percent improvement of signs and symptoms score after treatment was 73% (markedimprovement) with (p = 0.000). Therefore, Myanmar Traditional Therapy was highly significant effective in haemorrhoids patients. Besides, according to Traditional Medicine concept, Myanmar Traditional Therapy has the effect that relief on Arisa/haemorrhoids caused by heat and excessive internal pathavi.

## Effect of Myanmar Massotherapy in the management on patients with *pakshaghata* (hemiplegia)

Su Mon Khaing, Hla Moe, Than Ohn, Maung Maung Thet, Ni Ni Zaw, Kyaw Oo

### **ABSTRACT**

This present study was aimed to find out the effect of Myanmar Massotherapy in the management on patients with pakshaghata (hemiplegia) admitted to physical medicine ward, Traditional Medicine Teaching Hospital, Mandalay. Study design of this study was hospital based clinical trial carried out from September 2013 to August 2014. Medicines used in this study were produced from Myanmar Traditional Medicine Factory, Mandalay. In the present study, 62 cases with pakshaghata were studied for the effect of Myanmar Massotherapy. Myanmar massotherapy is kneading or pressing on the pressure points by using tip of finger, digital ball of the thumb, palm and heel of the hand. The duration of treatment taken for this study was 48 days for each patient. The effectiveness of Myanmar Massotherapy was measured with assessments of grading for power and gait, finger movement, wrist drop, foot drop, abduction, flexion, external rotation and internal rotation of shoulder joint, flexion, abduction, adduction and extension of hip joint, sitting from lying down, standing from sitting, flexion of elbow joint, flexion of knee joint, dorsiflexion and plantar flexion of ankle joint, toe movement, simple shoulder test and simple hip test on day 0, 16, 32, 48. Statistical analysis on paired ttest and one way ANOVA method was done by using SPSS statistics (version 20). It was evidenced that mean effect on pakshaghata was statistically significance (p = 0.000). Therefore, there was statistically significant for the treatment of pakshaghata by Myanmar Massotherapy. In the present study, the mean value of signs and symptoms of pakshaghata in day 0 was 76.56 and that of day 48 was 34.81 and p value was .000. The mean score of signs and symptoms of pakshaghata was significantly decreased in this study. Myanmar Massotherapy used in this study was cost effective, easily available and less side effect. The results of this study suggested that Myanmar Massotherapy can be treated to get better outcomes in rehabilitation of pakshaghata. Therefore, the pakshaghata can be treated by Myanmar Massotherapy used in this study.

### EFFECT OF HSEI-WEIK-ZA IN PATIENTS WITH VATARAKTA WITH SPECIAL REFERENCE TO GOUTY ARTHRITIS

Thandar Soe\*, Maung Maung Thet\*, Thin Thin Toe\*, Win Naing\*, Cho Yi Myint\*\*, Thein Zaw Linn\*\*\*,

- \*University of Traditional Medicine, Mandalay
- \*\*University of Pharmacy, Mandalay
- \*\*\*Research and Development Devision, Nay Pvi Taw

#### **Abstract:**

Vatarakta is a heterogenous disorder that results in the deposition of uric acid salts and crystals in and around joints and soft tissues. Vatarakta comes under the purview of Gouty Arthritis. Various modalities of treatment for *Vatarakta* have good outcome. Also in Myanmar, Myanmar traditional medicine practitioners have been using Hsei-Weik-Za (HWZ) for the patients with Vatarakta since several years. The HWZ has property to reduce vitiated kapha dosha and medas dosha which are the major causative factors of Vatarakta. To study the "Effect of Hsei-Weik-Za in patients with Vatarakta with special reference to Gouty Arthritis". According to the source of data, patients suffering from Vatarakta with signs & symptoms and hyperuricaemia were selected from Out Patient Department of (100) bedded Traditional Medicine Teaching Hospital, Mandalay. Hospital based Quasiexperimental study of 44 patients with Simple Random Sampling Method (patients were subjected to Hsei-Weik-Za three times per day with warm water in an interval of 28 days) was undertaken. Therapeutic effect was observed using the subjective and the objective criteria which were graded and analyzed statistically. Moderate to marked improvement of the symptoms of Vatarakta was observed in this study. But overall response was significantly more in total symptoms score (marked improvement 75%) with p value was 0.000 but uric acid level from day 0 to day 14 (moderate remission 67%) when compared to from day 14 to day 28 (mild remission 33%) with p value was 0.008. Therefore, *Hsei-Weik-Za* is found to be more effective in the management of *Vatarakta* with signs and symptoms than hyperuricaemic *Vatarakta*.

### EFFECT OF MYANMAR MASSOTHERAPY IN THE MANAGEMENT OF NECK PAIN DUE TO SANDHIGATA VATA

Wint Theingi, Thein Zaw Linn, Yin Yin Thi, Win Myint, Maung Maung Thet
University of Traditional Medicine

#### **ABSTRACT**

The present study entitled "Effect of Myanmar massotherapy in the management of neck pain due to sandhigata vata" aims to undertake the conceptual and scientific study of neck pain due to sandhigata vata by providing Myanmar massotherapy. Neck pain due to sandhigata vata is not only a common condition noticed by many individuals in their daily life but also common clinical problem in traditional medicine. The objective of this study is to study the effect of Myanmar massotherapy in the management of neck pain due to sandhigata vata. The design of this study is hospital based quasi-experimental study. The study period was started from 1st September 2013 to 31<sup>st</sup> August 2014. Total 44 subjects after obtaining informed consent from IPD and OPD in 100 bedded Traditional Medicine Teaching Hospital (TMTH), Mandalay were selected according to signs and symptoms who were diagnosed as neck pain due to sandhigata vata. Radiological assessment (X-ray of cervical region) was carried out in patients where necessary to ascertain the diagnosis as well as differential diagnosis. Registered patients of neck pain were prescribed for oral administration of TMF-24 in tablet form-(2g) three times per day with lukewarm water after meal for 24 days. The subjects were performed detailed procedure of therapeutic massage. The Myanmar massotherapy treatment was given for three consecutive days, and every 4<sup>th</sup> day was kept rest. This schedule was repeated for six times. The assessment of signs and symptoms were done on day 0, day 12 and day 24. Data resulting on signs and symptoms of neck pain due to sandhigata vata was done with paired sample t-test, one way ANOVA test by using SPSS software version 20. Effect of Myanmar massotherapy according to signs and symptoms are relief from pain 93.1% (p<0.000), radiation of pain 47 % (p<0.000), tenderness 54% (p<0.000), headache 49.6% (p<0.000), flexion 60.6% (p<0.000), extension 65.1% (p<0.000), left bending 66.3% (p<0.000), right bending 67.5% (p<0.000), left rotation 63% (p<0.000) and right rotation 63.2% (p<0.000). Out of 44 patients after completion of treatment 4 (9.1%) patients were cured, 36 (81.8%) patients were marked improvement, 4 (9.1%) patients were reported as mild improvement. None of the patient was found unchanged. According to One-Sample Statistics, percent improvement after day 12 was 47.41% (p<0.000). Percent improvement between day 12 and day 24 was 36.04% (p<0.000). The overall effect of Myanmar massotherapy on neck pain patients was 66.95% (p<0.000) after day 24.Based on the finding results, it can be stated that there is serial improvement by providing Myanmar massotherapy in the management of neck pain due to sandhigata vata.