

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

Dyslipidemia in Ancient Siddha Literature: Correlation with Deepana Silathma Noi – A Literature Review.

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DOI: https://doi.org/10.55248/gengpi.6.0825.3074

ABSTRACT

Dyslipidemia is a major metabolic disorder characterized by abnormalities in lipid metabolism, which pretense individuals for heart and lifestyle related diseases. Ancient Siddha literature has described a parallel position, known as Deepna Silathma Noi, classified by Yugi Muni under Kaaba Nogal, which is 800 in Vaidai Chintmani 800. This review tries to correct the classical proven details of Deepana Silathma Noi with modern clinical manifestations of dislipidemia. References are prepared from primary proven texts, which reveal the ancient insight into proven vocabulary, and modern medical literature, lipid disorders.

Keywords: Dyslipidemia, Siddha medicine, Deepana Silathma Noi, Yugi Vaidhya Chinthamani, Mukkutra Iyal, Lifestyle disorders.

Introduction:

Dislipidemia is a metabolic disorder characterized by abnormal levels of cholesterol, triglycerides, and lipoprotein in the blood. It is a major risk factor for heart diseases, obesity and metabolic syndrome, which contributes significantly to global sickness and mortality. [1,2] The prevalence of dislipidemia in India is increasing due to dietary change, sedentary lifestyle and genetic tendency. [3]

Yugi Muni, in his classical text, in the Yugi Validya Chinathamani 800, is described by twenty -one type of Kaaba Noi (Felm's disease), of which Deepana Shilathma Noi is considered closely from dyslipidemia. [4] The symptoms described include increased appetite, burning sensation, chest discomfort, body pain, obesity, heaviness, and irritation in the throat—features those parallel modern clinical presentations of dyslipidemia and related metabolic disorders. [5]

According to *Mukkutra Iyal* (Siddha physiology), *Silathumam* corresponds to lipids (*epzkh*), and its pathological increase leads to metabolic disturbances manifesting as obesity, heaviness, and vascular disorders. ^[6] This ancient description not only highlights the correlation between Siddha nosology and modern medicine but also emphasizes the timeless role of diet and lifestyle in the causation of lipid disorders.

Aim:

The present review aims to analyze the concept of *Deepana Silathma Noi* described in Siddha literature and establish its correlation with dyslipidemia in modern biomedical terms.

Rationale:

Deepana silathuma noi provides details of metabolic disturbances involving hunger, body heaviness and lipid accumulation in the proven concept of mukkutraviyal. The purpose of this review is by correcting these symptoms with modern dyslipidemia:

- 1. To view pathophysiological similarities between proven silathumum imbalance and lipid metabolic disorders.
- 2. Identify specific proven symptoms that correspond to the clinical characteristics of dyslipidemia such as hyperlipidemia, peripheral vascular diseases and the clinical characteristics of heart risk.
- 3. In the contemporary medical context, highlight the relevance of ancient proven details in understanding the metabolic disorders related to lifestyle.

These correlations may inform the development of integrative strategies for the prevention and management of dyslipidaemia.

Ancient Literature - Yugi Vaidhya Chinthamani 800:

In Yugi Vaidhya Chinthamani 800, Yugi Muni elaborates on 21 types of Kaba Noi (phlegmatic disorders). Of these, he describes a situation called Deepana Silathuma Noi, which features excessive appetite, burning, chest heaviness, normal body pain, obesity and indigestion. These characteristics show a close similarity for clinical manifestations of dislipidemia, a metabolic disorder associated with lipid imbalance and obesity.

Correlate the Siddha Descriptions to Dyslipidemia Manifestations:

The classical proven details of Deepna Silathuma Noi provide detailed observation of metabolic disturbances, including changes in appetite, body heaviness, generalized pain and obesity.

In order to better understand their relevance in modern medicine, these symptoms can be correlated with clinical characteristics of dislipidemia such as Peripheral Vascular Diseaseas, vascular complications and metabolic syndrome.

Table 1 presents a systematic mapping of proven symptoms for contemporary biomedical manifestations, which highlights similarities between ancient insight and modern understanding of lipid disorders.

Table 1. Symptom Correlation of Deepana Silathuma Noi (Yugi Vaidhya Chinthamani 800) with Modern Dyslipidaemia

Siddha clinical features	WHO Siddha Terminology (2023)	Modern Medicine Correlation
Vibaramai Deepananthaan	Excessive appetite	Increased carbohydrate intake ^[7]
migavundagum		
Mikkaan udambellam	Burning sensation	Peripheral burning, neuropathic
erivundagum	throughout the body	pain, burning soles[8]
Aparamaam nenjadaikkum	Severe chest discomfort	Angina pectoris ^[9]
azhugaayagum		
Aakkaiyellam valiyundam	Generalized body pain	Ischemic muscle pain,
malundagum		cramping, fatigue ^[8]
Kabaramaaik kaigalunj	Chills/coldness in	Cool/cyanotic extremities, poor
sayithyamaagum	extremities	circulation ^[8]
Kanaththum serirandhaan	Heaviness and obesity	Obesity (BMI >30), metabolic
paruthuk kaanum		syndrome ^[8]
Uparamai unnakkir	Throat irritation /	Enlarged tonsils, metabolic
pasapasakkum	indigestion	inflammation ^[10]
Urdhiyathaa Deepana	Defined as Deepana	Dyslipidaemia (lipid
Silathuma Noi	Silathuma Noi	metabolism disorder)

Discussion:

The Classical Siddha Pathological condition Deepana Silathuma Noi, presents features of Dyslipidemia which is essential to rule out proper disease management.

Siddha pathogenesis of Dyslipidemia:

In Siddha system of medicine, Silathumam is considered one of the seven physical constituents (*Udal Thathukkal*) and is associated with the lipid component of the body. [11][12] An imbalance or pathological increase in Silathumam is believed to lead to disorders like Deepana Silathuma Noi, which is characterized by symptoms such as chest heaviness, generalized body pain, and obesity. These clinical features closely resemble those of modern dyslipidemia, which includes elevated levels of cholesterol, triglycerides, and lipoproteins in the blood which leads to cardiovascular diseases and metabolic syndrome.

Comparison of Pathophysiology:

The pathophysiology of dyslipidemia involves disturbances in lipid metabolism, leading to the atherosclerosis which causes Peripheral Artery Diseases leads to chillness of extrimities and chest pain. Similarly, the Siddha description of Deepana Silathuma Noi indicates an excess of Silathumam, resulting in symptoms like chills and Chest tightness. [14]

It shows, the Siddha and Modern term parallel and which highlights the ability to integrate traditional knowledge with modern medical practices.

Clinical Implications and Integrative Approaches:

The correlation between Siddha symptoms and modern dyslipidemia define the treatment strategy. Siddha medicine heels the diseases by lifestyle modifications, following particular dietary pattern, and the use of herbal formulations to balance Silathumam.

Moreover, studies on dyslipidemia confirm that lifestyle interventions and pharmacological management are crucial for preventing cardiovascular complications and reducing morbidity. This demonstrates the translational relevance of Siddha insights in guiding preventive and integrative approaches.

Limitations and Future Directions:

While the relationship between proven details and modern dislipidemia is hypnotic, there are many limitations. Classical texts are primarily qualitative, lack of quantitative data that can provide more accurate understanding of described conditions Additionally, the application of Siddha treatments requires further clinical validation through randomized controlled trials to establish their efficacy and safety in managing dyslipidemia.

Conclusion:

Future research should focus on bridging the gap between traditional Siddha medicine and modern biomedical science. This includes conducting clinical studies to evaluate the effectiveness of Siddha formulations in managing dyslipidemia and exploring the underlying mechanisms through modern scientific methodologies.

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