A SCIENTIFIC REVIEW OF MOOLAM (ANO RECTAL DISEASES)-YUGI’S VERSION

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ABSTRACT

Worldwide, the overall prevalence of an ano rectal disease in the general population is estimated to be 4.4%. The faulty dietary pattern and life style, hereditary factors are important etiological factors of this disease. As per saint Yugi Moolam is classified as 21 types based on clinical symptoms and size, shape, colour of the pile mass which includes some of the ano-rectal diseases. The diet and deeds which influences the vital humors Vatham (Intestinal peristaltic movement) and Pitham (metabolism and absorption) of food stuffs are said to be major causative factors of this disease. As per Yugi’s version the following ano rectal diseases under Moola noi have been categorized as, Neer moolam (Inflammatory bowel disease), Aazhi moolam (strangulated haemorrhoids), Sittru moolam (adenomatous colorectal polyps), Varal moolam (colorectal non-neoplastic polyps), Seezh moolam (kaposis sarcoma), Silaethuma moolam (anal warts condyloma), Thondha moolam (rectal cancer), Vinai moolam (irritable bowel syndrome), Powthira moolam (anal fistula), Kutha moolam (rectal prolapse), Ratha moolam (internal haemorrhoids 1st degree - bleeding piles), Mega moolam (gonococcal proctitis), Vaatha moolam (interno-external hemorrhoids), Pitha moolam (prolapsed haemorrhoids), Surukku moolam (anal stenosis), Mulai moolam (sentinel pile), Savvu moolam (perianal tuberculosis). This paper focuses the scientific basis of etiology and classification of Moolam by saint Yugi.

KEYWORDS: Ano rectal disease, Haemorrhoids, Moolam, Siddha, Yugi.

INTRODUCTION

Siddha system is well founded under the basic principles of nature and its elements. prevention and treatment are the basic aim of the Siddha system of medicine. Siddha insists to lead a healthy life both physically and mentally. They classified the disease on the basis of Thiridhosa theory. Saint Agasthiyar identified 4448 diseases and one among them is Eruvai Mulainoi. Saint Yugi classified Moolanoi into 21 types. Moolam in Siddha means the area Moolathram or root. Moolatharam has been given maximum important in Siddha system as it is energy producing centre of the body (Kundalini). If the early stage is not being taken care of it may lead to complications and need to be corrected with surgery. “Anilapithathondhamalathu-moolamvarathaathu” (Anilam-vaatham, Pitha-pitham)-As per saint Theraiyar derangement of Vatham and Pitha humor due to lifestyle changes diet and deeds resulting Moolam.

The main Vatha humor and Pitha humor get affected cause in Moolanoi (Haemorrhoids). In Moolano, increased Keelvaikanal stimulates Vatha humor these totally stimulate Pithahumor, constipation develops due to effects of Keelaikanal. So the symptoms like loss of appetite, emaciation, mental depression, decreased body fluids and blood volume are developed.

METHODOLOGY

The literature cited here principally extracted from the Yugivaithyasidhamani. For the understanding and validation of the correlated information reputed journals and databases were referred. After the methodological collection of the above information data were correlated with the current scenario and conclusions were arrived. Then a comprehensive review was made.
OBSERVATION

ETIOLOGY-According to Yugivathiya chindhamai

| Thathaiyath mathiga maang kuliri naalum | The poem describes the etiology of Moolam, these are |
| Thariyatha thavazhchiyaar kirandhi yaalum | 1. Exposure to excessive heat and excessive cold |
| Puthayaam porunthaa ushnathaalam | 2. Anger and frustration |
| Punarchi yaayi kobathaar salippinaau | 3. Anxiety and depression increased sexual desire |
| Kaththayaam vegukaamam vendalaalam | 4. Heavy intake of salt and pungent food |
| Kadinamam mupplaum kaarathaalam | These are all Vitiates Abanavayu (Vatha humor) |
| Muthayaam veguthanagal ponathalum | |
| Moolam vanthu munaiyum thaanay. | |

Sanippana mooaththin peyaray thennil
Samarasamam neer mooalang sendu mooam
Munipana mulaimoolang sittru mooam
Moorkkamamvaralamoolamrathamoolam
Thinipana seenmoo mazhi mooam
Thiniyama thamara mamoolath thodu
Vanipana vathamodu pithamoolam
Vagaiyaama setumathin moola mae.
Vagaiyauthu thondhamaa moolathodu
Valarkindra vinaimoolam mega mooam
Pagaiyaagum powthira moolammodu kuthnya moolam
Pugaiyaagum puramoolang surukku mooam
Porugunda savvagu mooalathodu
Thugaiyaagum moolandhaani rubath thondrum
Sootchamaa yithinudaiya surubang kelaay.

Above poem as per saint Yugi moolam is classified as 21 types based on clinical symptoms and pile mass size, shape colour which includes some of the ano-rectal diseases. They are

1. Neer moolam
2. Sendu moolam
3. Mulai moolam
4. Sittru moolam
5. Varal moolam
6. Seezh moolam
7. Ratha moolam
8. Aazhi moolam
9. Thamaraga moolam
10. Vatha moolam
11. Pitha moolam
12. Kaba moolam
13. Thondha moolam
14. Vinai moolam
15. Mega moolam
16. Powthira moolam
17. Kiraandhi moolam
18. Kudha moolam
19. Pura moolam
20. Surukku mooam
21. Savvoo moolam

Interpretation

**1. Neer Moolam** (Figure 1)

Surupangkael thoppullalay miga valithu
Surundumay keezhvayitrai porumai kondo
Varupangkael maamvarandu vaai neeruvaam
Vaayvuthaan pirigaiyilay nurai por kaanum
Thurungkael pidavaithaainir roivu maagum
Surukkaga malamvaruthal polirukum
Nirupangkael adikadikku neerai pogum
Nilaiyaana neerolumaam iniivaaiypa paray
- Abdominal pain
- Abdominal distension
- The stools will dry up
- Excessive salivary secretion
- Frothy discharge during flatus

**Inflammatory Bowel Disease**

**IBD - Colon**

- Abdominal pain
- Abdominal discomfort
- Tenesmes, pellety stools
- Diarrhoea with mucus
- Oral ulceration

Available online at: [http://ijapr.in](http://ijapr.in)
2. Sendu Moolam (Figure 2)
Ninaivaaga karunaiyida mulaiyay pola
Nimirnth ezhunthu naalmondru nirpamaagi
Kanavaagak kandriyay miga vaikkum
Kaarandhaan pottavudan kalaiyaayi veezhum
Inavaaga raththamodu thaneer kaanum
Irugiyay maanththee yumirai chaagum
Thinavaaga vasanaththai surukki koollum

Seya sendu moooolathin riramai thanay.
- Pile mass is like base scape of elephant foot yam
- There will be pain on three days from occurrence of pile mass
- Patient will get rid of the mass after application of Kaaram
- Bloody and watery discharge
- Constipation, Anal stricture

Thrombosed External Hemorrhoids
- Patients present with acute pain.
- Surgical excision is indicated for symptomatic thrombosed external hemorrhoids within 48 to 72 hours of pain onset
- Constipation
- the dot may erode through the skin and discharge itself.

3. Mulai Moolam (Figure 3)
Thiramaga vasanathir kaduppu mundaam
Thiratchiyaai thaditherivu seyalung kaanum
Aramaga vadivyair ukallu poam
Aasanadhaan migasarungui thinavu mundam
Kuramaga kuthikolla raththapee rirangum
Koosatha iraicchalamiga veppa mundam
Maramaaga manjalmulai polaezhumbum
Malandheeyu mulaimoolai vanmai thanay
- Anal pain
- The anus get hardened and burning sensation occurs
- Bleeding
- Belching
- Constipation
- Pile mass may look like turmeric buds

Sentinel Pile
- Chronic anal fissures are also often accompanied by an external skin tag (sentinel pile) at the distal end of the fissure and a hypertrophied anal papilla at the proximal end.
- Severe tearing pain with the passage of faeces often with a small amount of bright red blood with the stool.
- Constipation.

4. Sittru Moolam (Figure 4)
Vanmaiyya udamberiyum mayakka maagum
Vayiruthaan palapalamnum valvuvai kuttrum
Inmayaiy kurukurendaray iraicchalaagum
Isivudanay porumalaayi laippu maagum
Thinmayaii stithhumoolai pala vundaagum
Thegamengum veluppaagum seyalung kaanum
Venmaiyyai veuthumay pasiyirathau
Meni kannunj sittru mulai midukkundha thanay
- Giddiness
- The skin of the abdomen look shining, tender and borborygmi.
- Abdominal distension
- Weight loss
- Pallor of the body
- Small masses will appears
- Loss of appetite
- General weakness

Adenomatous Colorectal Polyps
- Polyps are usually asymptomatic but may ulcerate and bleed, cause abdominal pain, and, when very large, produce intestinal obstruction.
- Adenomatous polyps are common
- colorectal cancers arise from adenomas.
5. Varal Moolam (Figure 5)
Midukkaga malaththaiyay yirukki kollum
Miguvaaga rathamathu thulyaai vizhum
Adukkaga sadamularthi yazhal kazhikkum
Aanmaithaan migapesi sandai kollum
Udukkaaga ullirukku muaigal thaanum
Oruvarkku theriyaathu odikki vaikkum
Thidukkaga naal thanilay pelan kuraikkum
Seyalazhikkum varalnooa sethi thanay.
- Constipation
- Bleeding per rectum
- Increased body temperature
- Anger speech
- Invisible mass present in rectum
- Body strength will gradually come down.

Colorectal Non-Neoplastic Polyps
• Hyperplastic polyps are the most common non-neoplastic polyp in the colon. They are small nodules or polypoid lesions composed of normal cellular components
• Bleeding per rectum
• Constipation
• Polyps are categorized as sessile if the base is attached to the colon wall, or pedunculated if a mucosal stalk is interposed between the polyp and the wall.6

6. Ratha Moolam (Figure 6)
Sethiyai thopputhanil valiththu nondhu
Sirukathir porperiittu ratham veezhum
Maethiyaai menivattri veluththu pogum
Miga kaikaalsanthumay sobaiyaagum
Maathiyaai marpiakkundh thalaini vundaam
Mayakkanhaan miguthiyaai thali podum
Naathiyaai kannirandu manjal polaam
Naliyum ratha moolaththin nanbut haanay.
- Pain in umbilical region
- Pallor of the body
- Edema of both upper limb and lower limbs
- Chest pain
- Headache
- Giddiness
- Yellowish discoloration of eyes

Internal Haemorrhoids 1st Degree (Bleeding Piles)
• The most common presentation of internal hemorrhoids is rectal bleeding during defecation.
• Patients with acutely thrombosed or strangulated internal hemorrhoids usually present with severely painful.7

7. Seezh Moolam (Figure 7)
Nanbaaga kuthangkaduthhu erippu thondrum
Naatriyai seeyodu thaneer kaanum
Manpaaga maamisangal karaindu kondu
Vadivamellam veluthunmay manjaalagum
Menbaaga mevumvaa neera thaagum
Midukkana nadaikuraiyu melivu maagum
Thinbaaga siruneer thaan manjlikkum
Seemoola thannudaiya sethi yaamay.
- Burning sensation in anal region
- Purulent mucous discharge
- Skin becomes pale and yellow
- Yellowish discoloration of urine

Kaposis Sarcoma
• Severe rectal pain
• Bloody mucous discharge per-rectum
• Rectal mucosa with hemorrhagic nodules and a necrotic ulcer in the rectum
• Jaundice hypo attenuated lesions in the liver, along with worsening lymphadenopathy.8

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### 8. Aazhi Moolam (Figure 8)

<table>
<thead>
<tr>
<th>Syndrome</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saethiyai neenda valli kizhangu polath</td>
<td>Thimirthumay yegamulai yaaga kkaaunum</td>
</tr>
<tr>
<td>Neethiyaii neerodung seeyumi raathham</td>
<td>Niranirai yaayiththondri yaemalumung chikkum</td>
</tr>
<tr>
<td>Kadiya balaveenamaandh thegandh thaanum</td>
<td>Aadhiyaam asaththathanai poruthuk kollum</td>
</tr>
<tr>
<td>Aazhimoo laaththinida aamai thaanay</td>
<td>• Pile mass is like sweet potato</td>
</tr>
<tr>
<td></td>
<td>• Watery, bloody and pus discharge</td>
</tr>
<tr>
<td></td>
<td>• Constipation</td>
</tr>
<tr>
<td></td>
<td>• Generalized weakness</td>
</tr>
<tr>
<td></td>
<td>• Death will happen after a long time</td>
</tr>
</tbody>
</table>

### Strangulated Haemorrhoids

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Acute prolapse, where the haemorrhoidal mass becomes trapped by the sphincter outside the anus, can lead to obstruction of venous return, oedema and strangulation.</td>
</tr>
<tr>
<td>• Constipation</td>
</tr>
<tr>
<td>• If untreated, this can be severely incapacitating for several weeks.³⁶</td>
</tr>
</tbody>
</table>

### 9. Thamaraga Moolam (Figure 9)

<table>
<thead>
<tr>
<th>Syndrome</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moolamaam pavaththil ulakkai poon pol</td>
<td>Muthirntha thamararai poo polalarnthirukkum</td>
</tr>
<tr>
<td>Noolamaam norukkaa malamung kaanum</td>
<td>Nunukaeri yiraththa modu thinavundam</td>
</tr>
<tr>
<td>Vaalamaai vayirirainthu neerai poogum</td>
<td>Vayiroothi pasiyilla mandhang kaanum</td>
</tr>
<tr>
<td>Thaalamaa maemoochai asathi undaam</td>
<td>Thamaragama moolathin thanmai thaanay.</td>
</tr>
<tr>
<td>A pile mass is like plunger and lotus flower</td>
<td>bleeding and itching in anal region</td>
</tr>
<tr>
<td></td>
<td>Watery stools</td>
</tr>
<tr>
<td></td>
<td>Loss of appetite with indigestion</td>
</tr>
<tr>
<td></td>
<td>Tiredness</td>
</tr>
</tbody>
</table>

### Internal Haemorrhoids 4th Degree

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Hemorrhoids cannot be reduced. They are permanently prolapsed</td>
</tr>
<tr>
<td>• bleeding during /after defecation</td>
</tr>
<tr>
<td>• pain</td>
</tr>
<tr>
<td>• prolapse</td>
</tr>
<tr>
<td>• Itching and peri-anal soiling.²⁹</td>
</tr>
</tbody>
</table>

### 10. Vaatha Moolam (Figure 10)

<table>
<thead>
<tr>
<th>Syndrome</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thanmai kovaipazham kudham sivappu</td>
<td>Thanil adappam poo pola mulai valarnthu</td>
</tr>
<tr>
<td>Kanmai karuppaa miruthuvaa irukum</td>
<td>Kanmai karupppa miruthuvaa irukum</td>
</tr>
<tr>
<td>Kadppodu thinavu kuttal thimirthalagum</td>
<td>Vanmai mayir thaan mulaihu malang chikki kendru</td>
</tr>
<tr>
<td>Vanmai mayir thaan mulaihu malang chikki kendru</td>
<td>Magathaga karuththu meththa thirandu kaanum</td>
</tr>
<tr>
<td>Vanmai vayirivutumay kudalul valiyaagum</td>
<td>Mikka thalaivali vaatha moolamaamay”</td>
</tr>
<tr>
<td></td>
<td>• Pile mass is like almond flower and red ivy gourd fruit in colour</td>
</tr>
<tr>
<td></td>
<td>• Inflammation of the anus, Pain in anus</td>
</tr>
<tr>
<td></td>
<td>• Itching, Retention of faces</td>
</tr>
<tr>
<td></td>
<td>• constipation, Headache</td>
</tr>
</tbody>
</table>

### Interno-External Hemorrhoids

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Incomplete evacuation or rectal fullness</td>
</tr>
<tr>
<td>• Defecation of hard fecal material.¹¹</td>
</tr>
</tbody>
</table>
11. *Pitha Moolam* (Figure 11)

- Pile mass present like a cotton seed and paddy
- Constipation and stools passed like flour ball with blood and pus.
- Inflammation and burning sensation in anus
- Thirst
- Perspiration

Prolapsed Haemorrhoids

- Patients frequently complain of bleeding with or without defecation, a swelling, mild discomfort or irritation.
- Other symptoms may include soilage or mucous discharge.
- Pruritis, and a sense of incomplete evacuation.

12. *Silathuma Moolam* (Figure 12)

- Pile mass looks white in colour
- Burning sensation present
- Anal irritation
- Watery and pus discharge
- Painful defecation
- Mood swings
- Oligospermia
- Anaemia
- Tastelessness

Anal Warts Condyloma

- Itching, and discharge
- The lesions are benign they cause psychological distress and may cause problems in relationships because they are disfiguring and sexually transmitted.

13. *Thondha Moolam* (Figure 13)

- Pile mass is like cocks comb
- Difficulty in walking
- Increased sweat and tremor
- Increased thirst
- Diarrhoea
- Weight loss (Body will shrink like leech)

Rectal Cancer

- IBD are highly encouraged to be screened for colorectal cancer on a more frequent basis.
- Abdominal pain can occur
- Change in bowel habit.
14. *Vinai Moolam (Figure 14)*

**Thidikittu soruseriyamai yaagum**

Theebanatha nilamarpi lithae kaagum

Adukitta adivayitrir kuttra lundaam

Aangara kobamodu maaumung kattum

Kadukitta kaikaalu mochalagum

Kanamaaga vayar iraindu kaanda lundaagum

Vedukittu narmbella misivu maagum

Migakadukkum vinaimoola vibarandhaanay.

- Sudden shock
- Indigestion
- Belching
- Abdominal pricking pain
- Constipation
- General weakness

**Irritable Bowel Syndrome**

- Colicky or cramping is felt in the lower abdomen
- Abdominal boating
- Constipation and tend to pass infrequent pelley stools
- Chronic fatigue syndrome

15. *Mega Moolam (Figure 15)*

**Vinaiyaaga lingathil vellai yootrum**

Meththavaai kuthathannir uthirang saaikkum

Sanaiyaaga sathamaai kazhichalaagum

Thaakkana siruneeru mericha laagum

Panaiyaaga padukung kaal thalaivalikum

Barama udamberikkum thirundaagum

Munaiyaaga moothirandhaan madhuraagam

**Moorkkamana megamendra moolandh thaanay.**

- Discharge from genital
- Bleeding per anus
- Diarrhoea, Burning micturition
- Sweet taste present in urine

**Gonococcal Proctitis**

- The higher incidence in male reflects ano receptive transmission.
- Rectal inflammation
- Viscous yellow muco purulent anal discharge.
- Rectal bleeding

16. *Powthira Moolam (Figure 16)*

**Moorkkamai powthirathir katti yaagi**

Moothiranthaan adikadikku aruvalagum

Kaarththamaang kaalkalyung kanappu maagum

Kanakanakung kuthangkuying saavar sodu

Poorkamaam poopola mulaigal kaanum

Porung kovaipazham pola sivappu maagum

Paarkamang kaarandhaan podath theerum

**Powthirama moolathin panbu thaanay.**

- Perianal abscess will develop
- Frequent urination
- A masses looks like mango flower, and cock comb, red ivy gourd fruit colour.
- **Kaaram** application will be the cure this condition

**Anal Fistula**

**Occurrence of**

- Skin irritation around the anus
- Throbbing, constant pain that may be worse when sit down, move around, have a bowel movement or cough
- A discharge of pus or blood when having a bowel movement (rectal bleeding)
17. **Kirandhi Moolam (Figure 17)**

Panbuthaan lingaththir punnundaagum
Baaramaik kaalkaiyung kaduppu mundaam
Gunpathaak kuthathukkul virana maagi
Kodi kodiyaayi mulaiyundaagi seeyum raththam
Thanbuthaan thaneeerum perugavundaam
Thanalpola erivodu kaduppu maagum
Kenbuthaan kettiyaai malam varandu
Keetraga vediththrangu kirandhi moooolam
- Ulcer on penis
- Continuous chain like lesion
- Purulent and Bloody discharge
- Constipation
- Burning sensation in anal region

**Lymphogranuloma Venereum**

- Ulcer on penis
- Fluctuant and suppurative lymph nodes then develop, causing the classic “bubo” of LGV. These “buboes” may rupture in one-third of patients, which may lead to sinus tract formation
- Patients had gastrointestinal symptoms (eg, bloody proctitis with a purulent or mucous anal discharge and constipation). 18

18. **Kutha Moolam (Figure 18)**

Erangumay moongilida kuruththu pola
Izhuththumay thalidilo vullay pogum
Pirangumay seeyodu ratham paayum
Perugiyaay vayiru mettha kanaththu kollum
Arangumay kaalkaiyum thaippu maagum
Adikadikku naavarandu thaneerthedum
Kurangumay migavalkkung kobamundaagum
Kodiyaathu moolaththin gunama thaamay.
- Pile mass is like bamboo shoot
- Pile mass reduce manually
- Mucous and bloody discharge
- Emotional status-Get anger soon

**Rectal Prolapse**

- Patients with prolapse most frequently complain of protrusion of the rectum during defecation. This may reduce spontaneously or require manual reduction.
- Less frequent presenting symptoms include bleeding, pain, mucous discharge, and pruritus.
- Clinical factors associated with prolapse include straining at bowel movements, neurologic diseases and mental illness. 19

19. **Pura Moolam (Figure 19)**

Gunamathaa yennaipor ranneer polum
Kootranaka kaduppodu seeyu mundaam
Thinamathaa thinavedukkundh thirpundaagum
Siru sirangaii melelaang soriyu maagum
Panamathaa sanaththir paguppu pola
Paangaga vithanamaai padukai kooda
Pinamathaa mugamelam vaatamundaam
Paerana puramoola puthumai thanay
- Oily, and watery discharge through anus
- Anal itching
- Small itchy lesion all over the body
- Unable to lie down

**Perianal Paget’s Disease**

- Histologically, PPD is characterized by large vacuolated cells with mucin content, called Paget cells. 18
- Clinical presentation of PPD is an erythematous plaque with squamous areas.
- Anal itch. 20
20. **Surukku Moolam (Figure 20)**

*Pathumaiyaa yaasanaththai surukkik kondu*
*Perungkudalil valiyoodu porumalaagum*
*Kathumayaaai kudhandh thannir radippun daagum*
*Kazhalumay thenereram rathandhthaanum*
*Vethumayaaai vevvanaalpo lazhandru kaanum*
*Vetturudambaai thaaneluththu verippundaagum*
*Padhumai pol thegamengum savu kodap*

Panbaana surukkendra moolandh thaanay.

- Tightening of anal orifice
- Abdominal distension
- Watery and bloody diarrhoea
- Paleness of the skin

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21. **Savvu Moolam (Figure 21)**

*Sorukkiyay mudhuguthandi lurpavaththu*
*Thoppu lay thaamaraipoo pola malrnthu*
*Aruukkanay kuttrila kaara maaki*
*Adivayitrir Ingumay moola rogam*
*Sorukkiyay savvupola sanathiy*
*Sutteriyay nindrumthaa seeyundh thaneer*
*Parukkanay kasivaagu mendhnae randhaa*

Panbaana savvaagu moolandh thaanay.

- Pain starts in low back and it radiates to lower abdomen
- A membranous like structure in anus
- Pus and purulent discharge

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**CONCLUSION**

From the above comparative analysis, it is clear that the literatures of saint Yugi about the etiology signs and Symptoms, appearance of pile mass in *Eruvaimulainoi* (ano-rectal diseases) closely correlates with that the modern medical literatures. The signs and symptoms of the medical conditions mentioned in modern literature have already been scientifically validated. Therefore the saint Yugi’s etiology, signs and symptoms appearance of pile mass in *Eruvaimulainoi* (an ano rectal disease) following the close lines of modern medical literature automatically stands validated. So it is need of the hour to focus on screening and diagnosing various types of *Eruvaimulainoi* (ano rectal diseases) mentioned by saint Yugi with respect to modern science to reach out various Siddha treatment strategies in successful manner.

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