

Varma manipulation in raising oxygen saturation levels in COVID 19 patient – a case report

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ABSTRACT

Introduction: Background: Varma therapy is a branch of the Siddha system of Medicine. It stores vital energy in certain points, which are called Varma points. When it is manipulated, the energy flow in the body is corrected and the diseases are cured. Many Varma manipulations play an emergency role in many critical situations. In the first wave of COVID 19, many of them died because of lung pneumonia due to a sudden drop in oxygen saturation. This is the study to prove how the Varma manipulation raises oxygen saturation. **Aim:** Vamana manipulation can be done at any time without any preparation or hospital setup. The role of Vilangu varmam in rising oxygen saturation is studied. **Materials Method:** The study was done in a very critical situation in a single sample. A 32-year-old female patient has suffered breathlessness, tightness of the chest and symptoms of a low level of SpO2. The continuous manipulation of varma points was done to raise SpO2As a result of the Varma manipulation, the SpO2 increased from 56% to 86%. **Conclusion:** From this study, the Varma manipulation plays a major role in increasing oxygen saturation in a very critical second wave of the Covid 19 situation.

Keywords: Covid – 19. Siddha, SpO2, Varmam.

INTRODUCTION

Coronavirus disease (COVID 19)¹ was named because of its occurrence in Wuhan in December 2019. After investigating the blood samples, it was found as a novel virus that affects the lungs and belongs to the severe acute respiratory syndrome coronavirus (SARS-COVID) group. The symptoms vary from the asymptomatic carrier to mild, moderate, and severe. While calculating the average, the patient has 83% fever, 82% cough, 10% diarrhoea & nausea, and 31% breathlessness. The X-ray of the lung affected patient shows a ground-glass appearance. The laboratory investigation shows lowered lymphocytes and eosinophils and increased CRP and LDH. The rise in CRP level predicts severe COVID 19. The elevated LDH in COVID-19 patients is not related to the production of LDH-3 and is not a biomarker for lung affection in COVID19 patients. Its main target is the lungs, specifically the distribution of ACE2 receptors. It affects the cardiovascular system, the kidney, the liver, the eyes, and the gastrointestinal and central nervous system. The complication leads to myocardial injury, myocarditis, dysrhythmias, cardiac failure and thromboembolism. Acute respiratory failure may lead to multi-organ failure induced by a cytokine storm. It spreads through the aerosol and into the eyes. RNA was detected in the eye swap taken from the infected patient after 3 days. The mean incubation period is 6.4 days. The habit of wearing a mask and isolation will keep the corona away^{2, 3, 4}. In the first and second corona waves, more patients died because of lowering SpO2. The National Institute of Health recommends a target SpO2 of 92-96%⁵. There is an unraveling relationship between immune responses and COVID 19. Coronavirus disrupts the immune responses and shows lymphopenia, lymphocyte activation & dysfunction, abnormalities in monocytes, high cytokine levels, increased IgG and total antibodies⁶.

Huashi Baidu Decoction (HSBD), a novel multi-drug preparation, was used to treat 19 patients with severe COVID using 45 potential target genes⁷. Similar to the Siddha system of medicine, Kaba sura decoction has good immunogenic and preventive activity against COVID 19. A review study shows that dietary therapy and herbal medicine have good potential against COVID-19. By using an anti-viral coated mask, by using aerosol essential spray to prevent droplet infection, by using a surface sanitising agent can prevent COVID 19⁸. Innovative trials and research are going around the world against COVID 19 infections. Many herbal medications block or inhibit the viral host pathways, thereby acting as powerful remedies for SARS-COV 2 infection⁹. The mushrooms contain colosso-lactone VIII, colossolactone E, colossolactone G, ergosterol, helian-triol F, and velutin that act against the COVID 19 virus. The ergosterol present in them possesses anti-inflammatory activity. So it can be given as a single or multiherbal therapy to fight against this CORONA Virus¹⁰. Rutin is the major chemical constituent present in *Azadirachta indica*, commonly called the Neem tree (Veembu). So it can be ingested as a food or dietary supplement because it has no systemic toxicity but possesses pleiotropic activity¹¹. In Tamil Nadu, *Azadirachta indica* is considered as a holistic herb, used as an anti-viral drug, and is distributed to religious people during temple celebrations. Traditionally, they decorate their main entrance with these leaves to protect against viral infections. The Siddha varmam is a divine art, procreated by the Siddhars such as Thirumoolar, Agasthiyar, Bogar and Ramadevar. Varmam is a subtle energy that helps in the proper functioning of the body and life force. This varmam energy is connected with the entire body and regulates the proper functioning of the air, blood and heat flow in the body, thereby preventing the affliction of diseases. The places where the subtle energy is found are called varma points¹². These energy-filled varma points do fundamental functions like receiving and supplying energy in the body. Varmam treatment is the sustenance of this subtle energy at varmam points. Varmam manipulation regulates the functions of subtle energy¹³. Varmam points provide immunity to the body. Excessive intake of food, excess sleep, falling or getting hurt, indigestion, and insomnia are some of the reasons for the reduction of energy in varmam points, which alter the pathophysiological mechanism and lead to disease. In varmam manipulation, the altered pathophysiological mechanism was regulated¹⁴. The varmam points manipulated are Vilangu varmam and Adappa Kaalam. Vilangu varmam is located in the pit of the chest, below the clavicle bone, where the clavicle bone meets the shoulder joint. With the middle part of the middle three fingers, 14 finger pressure (maathirai), applying three inward and outward rotations simultaneously on both sides regulates breathing and increases the oxygen level in the blood¹⁵. Adappa Kaalam is located on the flanks below the axilla on both sides. With the middle part of the middle three fingers, 14 finger pressure (maathirai), apply three forward and backward movements, simultaneously on both sides. It strengthens the lungs¹⁶. In this study, the evolution of Varma manipulation to raise the SpO₂ of a patient in a very critical situation was studied.

MATERIALS AND METHODS

Patient History: A 32-year-old female patient was suffering from breathlessness, cough, tiredness and her oxygen saturation of 56. The patient was in an ambulance in search of oxygen availability at a hospital on May 21, 2021, during the second wave of Covid 19. Before that, the symptoms of CORONA

started on 19.05.2021. The patient underwent an RT-PCR test and it was positive and took a CT lung and went for hospitalization.

Complaints and duration: The occurrence of the first symptom of COVID-19 on 19.05.2021. The patient suffered from fever, dry cough, and breathlessness on walking, giddiness and tiredness. The very next day, cautiously checking the SpO₂ with a pulse oximeter, they were shocked because the SpO₂ was reducing gradually.

Previous history: The patient had co-morbidities like diabetes and hypertension for the past 1 year. The blood glucose level and blood pressure were under control by allopathic medication. No history of lung-related problems like bronchial asthma, bronchitis and cardiac issues.

Assessment

Lab investigation: All the laboratory reports related to COVID-19 like RT-PCR, total WBC count, ESR, CRP, and cholesterol. RT-PCR was positive and all other values were increased above the normal limits, confirming that she was affected by Covid 19.

After confirming COVID 19, the SpO₂ was monitored. It showed 56 percent. It was going down rapidly. Everyone panicked and spent about a half-hour searching for an oxygen-available hospital in an ambulance. In this critical situation, the Varma points like vilangu varmam and adappa kaalam are continuously manipulated by a Siddha Doctor. Before reaching the hospital, they measured the SpO₂. Surprisingly, it reached 86 percent.

Prognosis: The patient was hospitalised in the Guindy Corona ward and diagnosed with moderate COVID pneumonia. After providing oxygen supplementation for two days and essential medicines, the patient's state became stable and was discharged on 27.05.2021. The advice was given to take rest in a home with home isolation for 7 days and a high protein diet. The doctor prescribed taking a multivitamin, blood thinner medicines, and zinc tablets with vitamin C.

RESULT AND DISCUSSION

In the first and second waves of COVID 19, many people lost their lives because of the sudden drop down of SpO₂ due to lung pneumonia. In clinical practice, manipulation of vilangu and varmam will increase SpO₂ in bronchial asthma, bronchiectasis, and pneumonic diseases. As a result, it is critical to understand this variable so that everyone can assist those suffering from low SpO₂. Many studies were conducted in hill regions, 3000 meters above sea level, where the oxygen saturation would be low. They increased the oxygen saturation by manipulating Vilangu varmam only. The continuous manipulation of these sets of varma points in a patient will increase the energy flow in the thoracic region and organs present inside the thoracic region. Fernando Mejio et al. stated in their studies that they monitored patients with SpO₂ below 90% and an age above 60 years, and concluded that early detection of hypoxia and hospitalisation with an oxygen facility will reduce inpatient hospital mortality¹⁷. Some patients who are asymptomatic with silent hypoxemia or severe hypoxemia have disproportional symptoms and adverse health systems leading to complications. The main complication is acute pulmonary embolism, which can be detected by chest CT angiography¹⁸. Arvin R. Akhavan et al. state that the emergency department clinician decides whether the patient needs high levels of oxygen or mechanical ventilation during admission, based on the records maintained in the ambulance regarding

the oxygen saturation¹⁹. The target oxygen saturation for the COVID 19 patient is 94–98%²⁰. The problem is thromboembolism. This can be prevented by giving heparin for at least 7 days. No previous research has been done in this area to increase the oxygen level to the best of our knowledge. The present study reveals the importance of Varma manipulation in deprived patients with low-level SpO₂. If it persists, it leads to cytokine storm and multi-organ failure and leads to a fatal condition. If the Varma manipulation is done from the initial stages of COVID 19, the hospitalisation duration can be reduced significantly. This, in turn, can help reduce the inadequacy of hospital beds for more critical cases. In this second wave of COVID 19, many positive patients with lung pneumonia died because of non-mechanism of availability of oxygen supply at the correct time and no vacancy in the hospitals. The mechanism of vilangu varmam was explained by our Guru in a theoretical manner that regulates the energy pathway or it clears the blocks in the vital energy pathway that means ten major energy pathways (thasa vayukkal.). Further studies regarding its scientific mechanism and more clinical trials may reduce the COVID 19 mortality rate in the future. This is the first study to evaluate the vilangu varmam manipulation to increase the SpO₂ in the current critical situation. It also helps to increase the immune system's power. So it can be tried to prevent and withstand this crucial situation. The other Varma point, adappa kaalam, is very beneficial in giving energy to the thoracic organs and also eliminates depressive mood after COVID. It can be used in an emergency without the need for a hospital. It can also be manipulated by the patient at any time. The life-saving Varma points, namely Vilangu varmam and Adappa kaalam, were manipulated continuously. Before reaching the hospital Her oxygen saturation increased from 56 to 86 and she was hospitalised in ICU at Corona Hospital, Guindy, Chennai, India. After emergency treatment, her oxygen saturation was raised to 96% with the help of oxygen supply and varmam manipulation by the patient herself. The patient was discharged from the hospital on 27.05.2021. The post-COVID tiredness, disturbed sleep, raised CRP, breathlessness, and hair loss are normalised with the help of varmam manipulation and Siddha medicines.

Conclusion

The present study evaluates that Varma manipulation can be used in an emergency condition to increase oxygen saturation. Vilangu varmam can increase oxygen saturation, but the adappa kaalam will tone the lungs and heart and tune other vital energy pathways. so that further complications may be prevented. The brief study with more patients will give new innovative tricks in emergency treatment or first aid to Corona patients.

Declaration of competing interest

All authors declare no conflict of interest. This study is not funded by any government or non-government funding agency.

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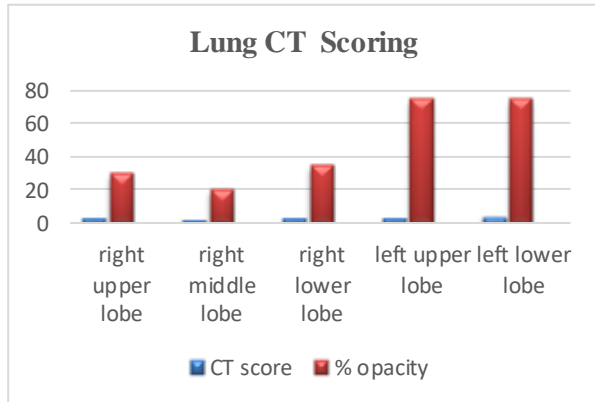


Fig.1 Diagrammatic representation CT Lung Scoring

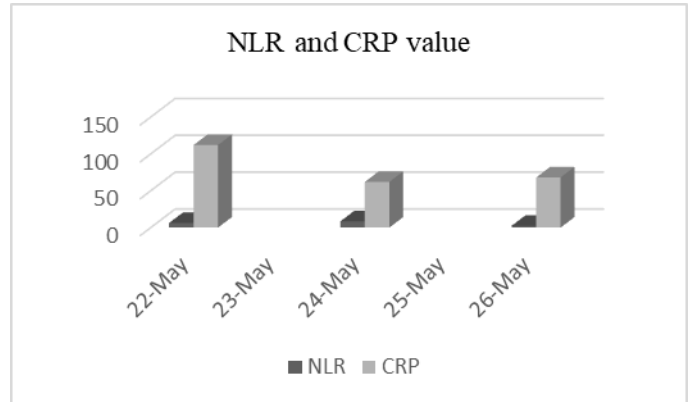


Fig.2 NLR is high on 22 and 24 May 2021 and reached normal on 26.5.2021. CRP value not reached normal

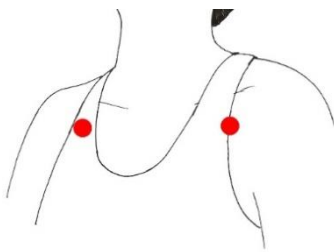


Figure 3 Vilangu varmam is located in the pit on the chest, below the clavicle bone where this clavicle bone meets the shoulder joint.

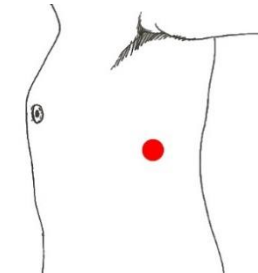


Figure 4 Adappa kaalam is located on the flanks below the axilla on both sides.

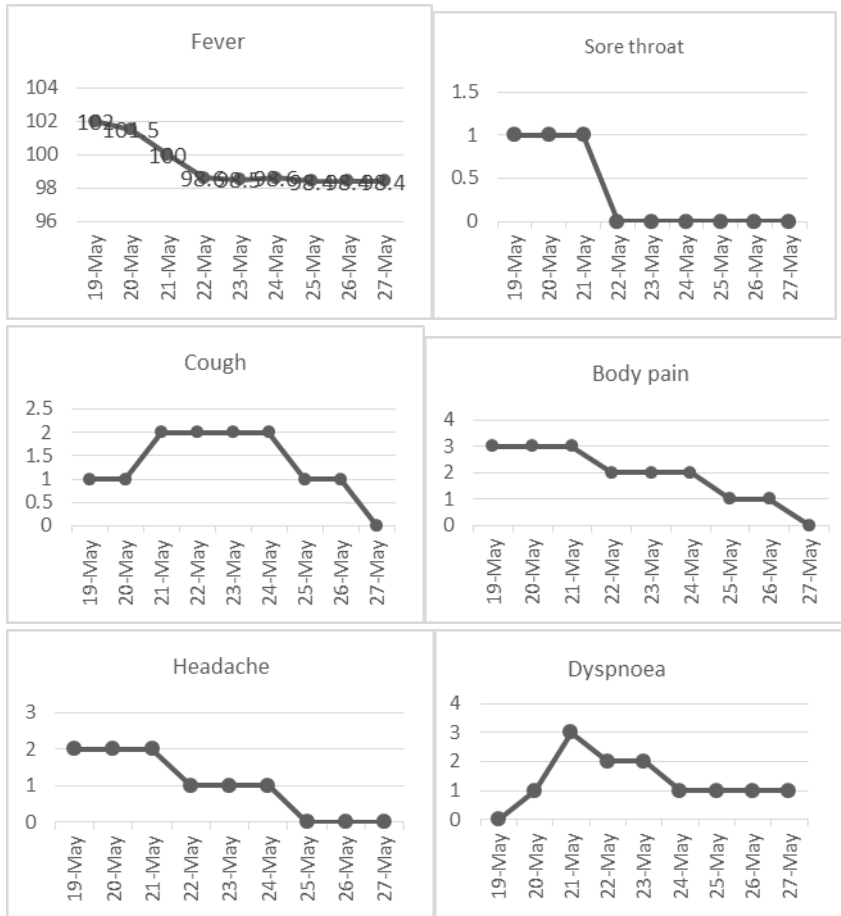
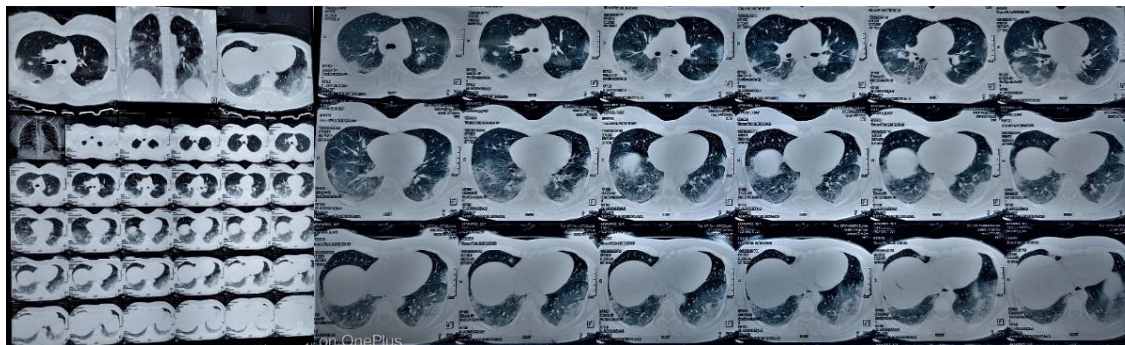
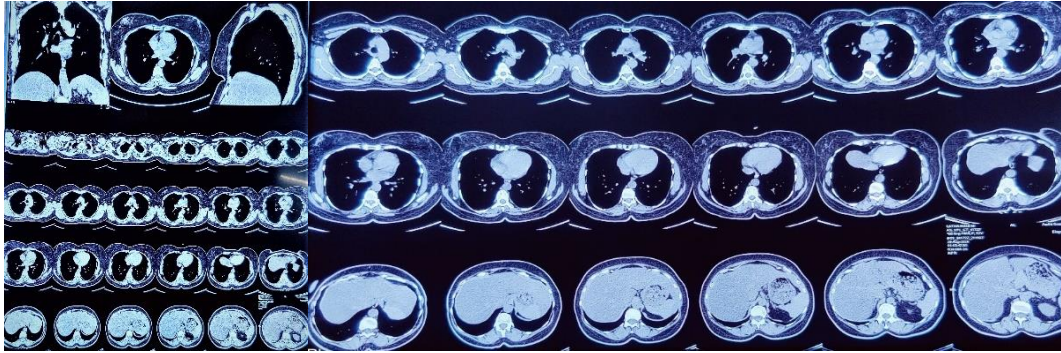


Figure 5. Prognosis graph of fever, sore throat, cough, Body pain, Headache, Dyspnoea. All shows good improvement.



Photograph 6. CT Lung on 21.05.2021 confluent patchy areas of ground-glass opacity and consolidations in both lungs s/o viral pneumonitis. CORADS – 5. CT scoring 15/25 and total lung involvement is 50 – 60 %.



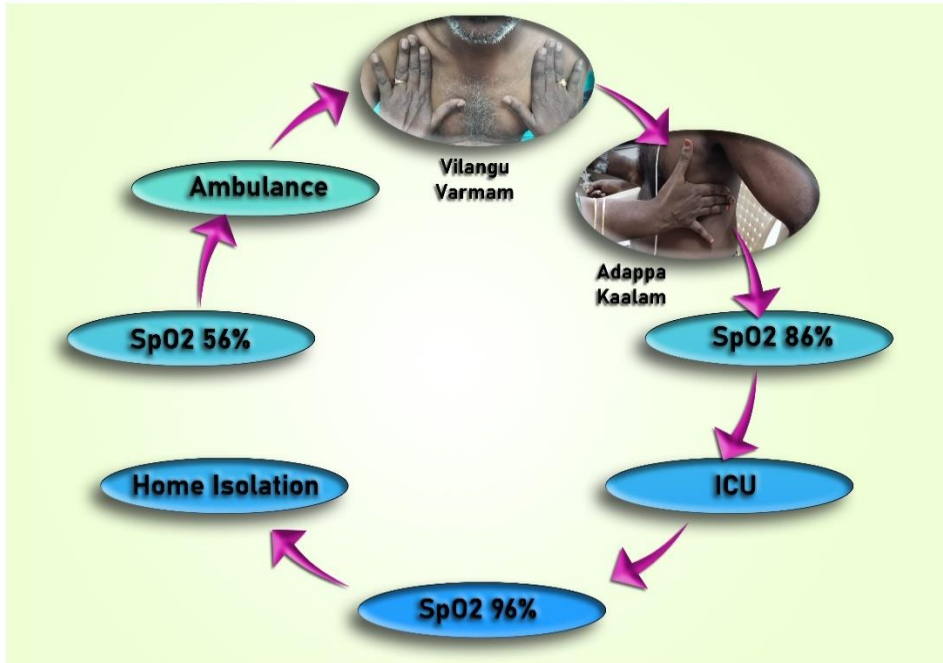
Photograph 7 CT Lung on 30.06.2021 shows focal fibrotic lesion in the apico posterior segment of left upper lobe- suggestive of old healed infective aetiology. No evidence of airspace opacities.CORADS 1. No bronchial thickening or bronchiectasis.

10. Tables:

Symptom	19.5.21	20.5.21	21.5.21	22.5.21	23.5.21	24.5.21	25.5.21	26.5.21	27.5.21
Fever	102	101.5	100	98.6	98.5	98.6	98.4	98.4	98.4
Sore throat	+	+	+	–	–	–	–	–	–
Cold	On & off	+	+	–	–	–	–	–	–
Cough	+	+	++	++	++	++	+	+	–
Body pain	+++	+++	+++	++	++	++	+	+	–
Headache	++	++	++	+	+	+	–	–	–
Diarrhoea	–	–	–	–	–	–	–	–	–
Dyspnoea	–	+	+++	++	++	+	+	+	+
Tiredness	++	++	++	++	++	+	+	+	+

Table 1. Brief description of signs and symptom – fever, sore throat, cold are reduced after 3 days, headache reduced gradually after 6 days, cough and body pain reduced on 7th day, slight dyspnea and tiredness present at the time of discharge.

Graphical summary:



Technical Terms

Maathirai-It is a pressure given by fingers during Varmam manipulation. Varmam: It is traditional method of manipulation by hand and legs. It's like acupressure.

Consent Letter: The written consent letter was obtained from the patient for publishing this paper.

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