

SIRAPPU MARUTHUVAM

6-DAY CME MODULE

Session No.	Topic	Contents	Duration
1	Management of medically treatable spinal disorders	Introduction, Concept of Yugi Vaithya Chinthamani, Diagnosis simplified, Applied anatomy of spine, Yugi's classification on spinal disorders, Description of Neuromuscular disorders, Pranayala vatham, Vatha thambam, Sagana vatham, Asuvathamba vatham, Oorthuva vatham, Thandaga vatham, Moodu vatham, Pharmacology of medicines in the treatment of spinal disorders, Thokkanam the siddha way of touch therapy.	1 ½ Hrs
2	Management of medically treatable spinal disorders	Clinical case study and practical classes in the in-patient ward of Ayothidoss Pandithar Hospital	1 ½ Hrs
3	Caries Spine	Definition, A chronic inflammatory disorder caused by Mycobacterium Tuberculosis, The spine is the most common site of skeletal tuberculosis, Aetiology, Predisposing Factors, Spread, Pathology, Clinical features, Pott's Paraplegia, Diagnostic imaging, investigations, Differential diagnosis, Treatment.	1 ½ Hrs
4	Spondylosis & Disc Prolapse	Spondylosis, Pathology, Clinical features, Radiculopathy, Myelopathy, Investigations, X Ray, Narrowing of IVD mostly C5-C6. Osteophytes or bony spurs anteriorly or posteriorly, MRI will reveal pressure on the inter vertebral foramin and therefore the root, Secondary spinal canal stenosis can be shown by CT or MRI, Treatment, Conservative, Heat and analgesic, Cervical traction, Soft cervical collar, Active neck muscle exercises, Lumbar spondylosis.	1 ½ Hrs
5	Movement Disorders in Siddha Medicine	Movement disorders described in various literatures in Siddha Medicine, anatomical areas – movement disorders, regulation of conscious movements, basic pathology of movement disorders, involuntary movements, intermittent involuntary movements: <i>tremors, myoclonus, ballismus, chorea, hemiballismus, dystonia, tics, physiologic tics stereotypic movements athetosis paroxysmal movement disorders</i> , peripheral disorders, psychogenic movement disorders, psychogenic movement disorders seem to be increasingly more	1 ½ Hrs

		common, benign essential tremor, parkinsonism, progressive supra-nuclear palsy, multiple system atrophies, Huntington's disease: (chronic chorea), Sydenham's chorea:(rheumatic chorea) (acute chorea), myoclonus, motor neuron diseases: cerebellar ataxia, (writer's cramps – dystonic spasm, parkinsonism, lower motor neuron disease, motor neuron diseases - lateral sclerosis, myoclonus, rheumatic chorea	
6	Movement Disorders in Siddha Medicine	Bedside examination and case study	1 ½ Hrs
7	Geriatric care through Siddha system of Medicine	Distribution of diseases in elderly, Chronic Diseases, Birth Defects, Hereditary Diseases, Infections, Metabolic diseases, Degenerative diseases, Diseases of Unknown Reason even today with all the Advancements In Diagnostic Tests, Malignancies, Allergic problems, Kalpa yogam, Eight stages of yoga practice, Classification of Ages, Chronological age, Biological Age, Psychological age, Free radical therapy, Physiological changes in the old age, Kalpa Avizhatham, Pothu karpam, Sirappu Karpam, Prevention of Heart diseases, Diabetes mellitus, Drugs Generally Used For Diabetes, Santhuvatha Soolai (Rheumatoid Arthritis), Osteoporosis and Osteo-arthritis, Respiratory disorders.	1 ½ Hrs
8	Toxicological screening of ISM drugs	Drug toxicity, lethal dose, Therapeutic index II, Median Effective Dose, Margin of Safety, Therapeutic actions and Toxicity are Dose Related, Drug actions, Primary therapeutic effect, Secondary effects, Adverse Drug Reactions, Side effects, Untoward effects, Toxic effects, Pharmacological effects produced with therapeutic dose, Toxicity study in Animals, Acute toxicity, Chronic toxicity, Special toxicity studies, Drug Toxicity in Man, Idiosyncrasy, Allergic And Hypersensitivity Reactions, Haemopoietic Toxicity, Hepatotoxicity, Nephrotoxicity, <i>Behavioural</i> Toxicity, Skin Toxicity, Iatrogenic Disease	1 ½ Hrs
9	Cirrhosis of Liver	Pathology of Liver – An Overview, Cirrhosis, Micronodular Cirrhosis, Macro nodular cirrhosis, Alcoholic liver disease, Fatty change, Alcoholic hepatitis, Primary biliary Cirrhosis, Alcoholic cirrhosis, Primary Sclerosing Cholangitis (PSC), Pathology of PSC, Secondary biliary Cirrhosis, Intra hepatic obstruction – Gallstone, Iron overload syndrome, Hereditary Haemochromatosis, “Bronze diabetics”, Wilson disease, Portal Hypertension, ascites, Benign Liver Tumors, Hepatic adenoma, Hepatic Adenoma, Malignant Liver Tumors, Hepatocellular Carcinoma,	1 ½ Hrs

		Cholangiocarcinoma, Hepatoblastoma. Metastatic tumours.	
10	Documentation on observational & experimental studies ICH & GCP perspective	What is FDA, ICH initiatives on documentation, Source of documents in clinical research, need for documentation, The critical role of clinical research in the drug development process and health care, Aim of ICH-GCP, ICH-GCP Guidelines, Hand written document, Document modification, case histories, Electronic documents, Document maintenance, Archiving, Court experience.	1 ½ Hrs
11	How to recognize Alcohol dependence in a non-psychiatric patient	How to screen for Alcohol Dependence, Interventions, Alcohol and Alcohol Dependence, Magnitude of the problem (Alcohol Dependence), Role of Non-Psychiatric Medical specialists, How to screen for Alcohol Dependence, Interventions, Activities of NGOs, Mismatch between problem & solution, Physician Concerns and myths, Alcohol abuse.	1 ½ Hrs
12	OCD - Obsessive-Compulsive Disorder	Understanding OCD, Uniqueness of OCD, <i>Obsessions in OCD, Examples of the most common obsessions, What Are Compulsions?, Compulsions in OCD, Safety-Seeking Behaviours, Pure Obsessions, Emotions in OCD, How Much Can OCD Affect a Person's Life? How Common Is OCD?</i>	1 ½ Hrs
13	Overview and general principles of assessment and management of mental health problems in general practice	Understand The Psychiatric Problems commonly seen in General Practice, common clinical presentation, principles of assessment, including indicators of "abnormal" behavior, as symptom or sign, principles of management, Prevalence of psychiatric disorders in general practice, Depression, Generalized anxiety disorder, Alcohol dependence, and Somatoform disorders, Common principles in management (How to do it?), Principles of Pharmacological Management, Common Prescription Errors, Range of Psychotropic Medication now available, Myths about Psychotropic Drugs, Advantages of Newer Drugs available, Choice of Psychotropic Drugs, Issues of Compliance and Noncompliance, Role in after care.	1 ½ Hrs
14	GCP Guidelines and relevance to Traditional Medicine (Part I)	Participants are expected to be aware on the need for GCP, Make the participant to understand the regulatory requirement in the current scenario, Make the participant to understand the relevance of GCP in traditional medicine research. What is GCP? Fundamental Principle of GCP, Aim of GCP, Advantage of GCP.	1 ½ Hrs
15	GCP	Protocol, Ethical and Safety considerations, sponsor, Who	1 ½

	Guidelines and Relevance to Traditional Medicine (Part II)	is a monitor?, Who is an investigator?, Record Keeping and Data Handling, Quality Assurance, Role of Biostatistician, Study Design, Randomization and blinding, Statistical Analysis, Clinical trials of Herbal remedies and medicinal plants, Categories of Herbal Products, Guidelines	Hrs
16.	An analysis of Peranda parpam.	Siddhars classified the mental diseases on the Symptomatology, Dhukka Suram (By Grief), Paya Suram (By Fear), Sina Suram (By Anger), Manakkalakka suvai inmai,(psychological Anorexia), 18 varieties of functional Psychoses mentioned – Kirigai, The treatment of physical and mental diseases based on three entities, Mani, Manthiram, Avizhtham Preliminary Screening of Gross behavioural studies in Rats, Barbiturate Induced Sleeping Time, Amphetamine Antagonism of the test drug, Chemical Analysis of the Drug	1 ½ Hrs
17	Visit to Herbal Garden, Inpatient Ward and Pharmacy	Demonstration of medicinal plants used in Siddha system of medicine, Medicine preparation techniques in the pharmacy, Visiting the In-patient department	6 Hrs
Pre and Post test Training assessment		Assessment and Feedback forms are given to participants before the commencement of sessions so that they fill the forms at the end of each session/day and put them in sealed envelops,	1 Hour
		Total	31

Total sessions – 17 (Seventeen)

Total Duration – 6 (Six) days