



**DIAGNOSTIC CORRELATION OF ELEMENTAL DERANGEMENT FINDINGS  
THROUGH PANCHAPATCHI SASTHIRAM (FIVE BIRD DIAGNOSTIC SIGN) IN  
PATIENTS OF KURAIVEETHANA NOI (HYPOTHYROIDISM)**

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**ABSTRACT**

**Background:** The thyroid hormone is required for the normal functioning of each and every tissue of the body. Hence, its deficiency manifests as multisystem involvement and so the early diagnosis of hypothyroidism is essential for timely management. One among the Siddha diagnostic tools is *Panchapatchi Sasthiram* based on *Panchabootha* theory is a cost effective and non-invasive method. This observational descriptive study was done to evaluate the diagnostic correlation of elemental derangement findings thereby the humoral diagnosis of *Kuraiveethana noi* through *Panchapatchi sasthiram* (five bird diagnostic sign) in patients of *Kuraiveethana noi* (hypothyroidism). **Objectives:** This observational study was aimed at finding the affected *bootham* and thereby the humoral status in *Kuraiveethana noi* (Hypothyroidism) patients using *Panchapatchi sasthiram*. **Methods:** This Observational study was done in 30 *Kuraiveethana noi* patients (increased TSH level) who were willing to sign the consent form with the age of 20-60 years. The Consulting time of the individual patient reporting at OPD was noted and then affected *patchi* and *boothams* was calculated by using *Panchapatchi sasthiram*. **Results and Conclusion:** Based on the observations made from this study of *Panchapatchi sasthiram*, among 30 *Kuraiveethananoi* patients, 37% had *Kabavatham*, 30% had *Kabam*, 13% had *Vathakabam*, 10% had *Vatham*, 7% had *Pithavatham*, 3% had *Pithakabam* as affected humours on *Panchapatchi* based calculation.

**KEYWORDS:** *Panchapatchi sasthiram*, *Kuraiveethana noi*, Hypothyroidism, Diagnostic tool, Humours.

**INTRODUCTION**

Siddha science is one of the most ancient medical systems of India. Fundamental principles of Siddha include theories of five elements (*Panchabootham*) and three vital forces (*Mukkutram*). In Siddha system of medicine, the diseases can be diagnosed via various tools namely *Envagai thaervu*, *Manikkadainool*, *Jothidam*, *Panchapatchi sasthiram*, *Neerkkuri*, *Neikkuri*, etc.

According to these *Pathinen siddharkal naadi nool*, every physician should have the knowledge of below mentioned literature such as *Jothidam* (Medical Astrology), *Panchapatchi* (Five bird diagnostic sign), *Saram* (*Pranayamam*), *Rasavatham* (Alchemy). The environment is same within and outside our body which indicates that the body physiology is more related to the Five elements. The *Panchapatchisasthiram* is one among the diagnostic methods that relies on the concept of *Panchabootha* theory.<sup>[1]</sup> In *Panchapatchi sasthiram*, *Panchabhoothas* (Five elements) are represented by five

birds namely *Vallooru* (Falcon), *Aanthai* (Owl), *Kaagam* (Crow), *Kozhi* (Hen) and *Mayil* (Peacock). It is believed that the five elements represented by five birds influence and control all actions of human. Every bird is associated to each *bootham* based on their characteristic changes by using Waxing and Waning craters of moon. The birds given in the *Panchapatchi sasthiram* is mentioned to have special sequence and power during day and night with alternating nature.<sup>[2]</sup>

By means of simple calculation on the basis of time at which patient visits the doctor, the derangement of 3 humours can be calculated so as the disease. Many diseases if diagnosed earlier helps in avoiding further progress of the disease. In developing countries like India screening of diseases itself is a herculean task so if cost effective tools like *Panchapatchi sasthiram* is established, it will be helpful in early detection of a disease and thereby it may avoid complications of that disease.

The previous studies, Dr.Haritha S, et al., 2023, a study of finding the affected humour by *Panchapatchi* calculation had concluded that the most affected Humour in Madhumegam was Pithavatham.<sup>[3]</sup> Kadlaskar B.B., et al 2015 had reported that in hypothyroidism there is abnormality of *Jatharagni* and *Dhatwagni* along with abnormality of *Kapha* and *VataDosh*.<sup>[4]</sup> Vinothini.T., 2019, a study available in Dr.M.G.R. university repository on “*Neerkkuri* and *Neikkuri* Diagnostic Methodology of Siddha system in *Kuraiveethana noi*” had reported that the most frequently reflected humour is *Pithakabam* followed by *Kabam*.<sup>[5]</sup> One such disease which requires proper screening is Hypothyroidism. Hypothyroidism is a common endocrine disorder resulting from deficiency of thyroid hormone. The thyroid hormone is required for the normal functioning of each and every tissue of the body. Hence, its deficiency manifests as multisystem involvement and so the early diagnosis of hypothyroidism is essential for timely management. Hence the condition hypothyroidism was detected earlier by the cost effective, non invasive and time saving method of diagnosis, the *Panchapatchi sasthanam*.

#### MATERIALS AND METHODS

An observational study was conducted in out patient department of *Noi Naadal* in *Ayothidoss Pandithar* hospital, National Institute of Siddha. This study was approved by IEC (Institutional Ethics Committee) NIS/IEC2020/MP-5 dated on 25/11/2021 and it was registered in Clinical Trial Registry, India, No: CTRI/2022/02/040139. In this study, 30 outpatients in between 20-60years age groups with increased TSH levels were selected. The study details were collected in the pre-designed data collection forms.

#### Standard procedure to calculate the *Panchapatchi*

Based on *Panchapatchi sasthanam*, a day is divided into 10 parts, five come under day time and five come under night time and each part is known as *saamam*. Initially, the sunrise time should be noted. The calculations will differ according to *Vallarpirai* or *Theyaipirai*. The consulting time of the patients with the investigator should be noted. Then the action of the bird at that particular time should be noted. Then the investigator identifies the bird in its *Thuyil* and *Saavu* action and correlates it with corresponding *bootham* and humours. Finally, the investigator will be able to derive the affected humor and *Panchabhootham* of the patient

which then helps in diagnosis.

#### OBSERVATION AND RESULTS

Among 30 patients, 90% were females and 10% were males and 20% were in 20-30yrs of age group, 33% were in 31-40yrs, 27% were in 41-50yrs, 20% were in 51-60yrs of age groups. Among 30 patients, 80% had TSH range between (5.1 – 10)  $\mu$ IU/ml, 7% had between (10.1 – 20), 3% had between (20.1 – 30), 10% had between (30.1& above) and 73% had *Vathapitham* and 27% had *Pithavatham* as *Naadi*.

**Table No. 1: Affected Patchi.**

Affected Patchi	Frequency	Percentage(%)
Crow, Owl	8	27
Vulture, Peacock	7	23
Peacock, Cock	6	20
Cock, Crow	5	17
Owl, Vulture	3	10
Cock, Peacock	1	3
TOTAL	30	100

**Table No. 2: Affected Bootham.**

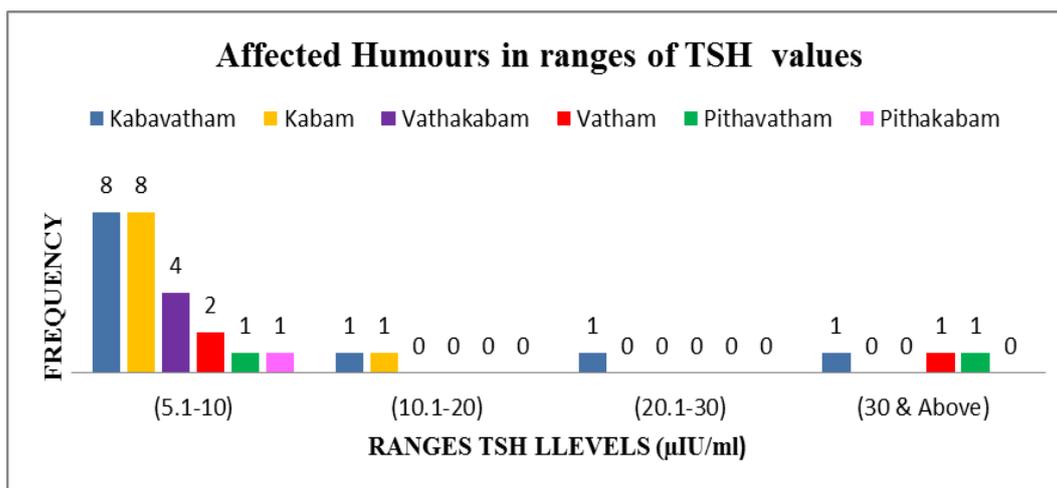
Bootham	Frequency	Percentage(%)
Neer, Mann	9	30
Mann, Kaatru	6	20
Mann, Aahayam	5	17
Aahayam, Kaatru	3	10
Aahayam, Neer	3	10
Thee, Aahayam	2	7
Aahayam, Thee	1	3
Thee, Neer	1	3

**Table No. 3: Affected Humours.**

Affected Humour	Frequency	Percentage(%)
Kabavatham	11	37
Kabam	9	30
Vathakabam	4	13
Vatham	3	10
Pithavatham	2	7
Pithakabam	1	3
TOTAL	30	100

**Table No. 4: Comparison of Humours with Increased levels of TSH in Patients with Hypothyroidism.**

Increased TSH Ranges ( $\mu$ IU/ml)	Affected Humours					
	KV	K	VK	V	PV	PK
(5.1 - 10)	8	8	4	2	1	1
(10.1 - 20)	1	1	0	0	0	0
(20.1 - 30)	1	0	0	0	0	0
30&Above	1	0	0	1	1	0
<b>TOTAL</b>	<b>11</b>	<b>9</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>



Among 30 subjects, while observing *Panchapatchi* calculation, 37% had *Kabavatham*, 30% had *Kabam*, 13% had *Vathakabam*, 10% had *Vatham*, 7% had *Pithavatham*, 3% had *Pithakabam*. *Panchapatchi* revealed that the majority of the subjects had *Kabavatham* humour in Hypothyroidism.

#### DISCUSSION

Siddha system has many diagnostic modalities like *Ennvagai thervu*, *Manikkadainool*, *Jothidam*, *Panchapatchi sasthanam*, etc. *Panchapatchi sasthanam* is used even today by the traditional Siddha practitioners of Tamil Nadu as one of the diagnostic tools given in the Siddha literature.

Based on *Panchapatchi* calculation, Among 30 patients regardless of consultation time 27% had Crow & Owl, 23% had Vulture & Peacock, 20% had Peacock & Cock, 17% had Cock & Crow, 10% had Owl & Vulture and 3% had Cock & Peacock as affected Patchi.

Among 30 patients, 30% had *Neer & Mann*, 20% had *Mann & Kaatru*, 17% had *Mann & Aahayam*, 10% had *Aahayam & Neer*, 10% had *Aahayam & <Kaatru*, 7% had *Thee & Aahayam*, 3% had *Thee & Neer* and 3% had *Aahayam & Thee* as affected *Boothams*.

Among 30 patients, 37% had *Kabavatham*, 30% had *Kabam*, 13% had *Vathakabam*, 10% had *Vatham*, 7% had *Pithavatham* and 3% had *Pithakabam* as affected Humours.

Among 30 patients, 27% patients had Crow, Owl as an affected Patchi to the maximum, 30% patients had *Neer*, *Mann* as an affected *Bootham* to the maximum & 37% patients had *Kabavatham* as an affected Humour.

Hence the most affected Humour in Hypothyroidism was *Kabavatham* denotes *Kabam* got most affected in *Kuraiveethananoi* based on *Panchapatchi* calculation which represents *Mantha nilai* typical of *Kuraiveethanam*. This was an initial step to know about the techniques of *Panchapatchi Sasthanam* for diagnostic

purpose. Since *Panchapatchi* diagnostic method is based on calculation, subjectivity will less likely occur. It minimizes the inter observer variations and eases to get appropriate diagnosis. Hence *Panchapatchi* diagnostic methodology will be preferable than other methodologies in future. This study would be helpful in further evaluation of Siddha diagnostic tool standardization in future.

#### CONCLUSION

In this study, among 30 *Kuraiveethana noi* patients, 37% had *Kabavatham*, 30% had *Kabam* as affected humour denotes *Kabam* got most affected in *Kuraiveethana noi*. So this study concludes that *Panchapatchi* diagnostic methodology paves a way for diagnosing affected humour which helps in drug designing.

#### LIMITATIONS AND RECOMMENDATIONS

Since the sample size was very small there was less variability among the participants and hence the strong association could not be suggested through the study. Further study will be conducted to assess the affected humour in hypothyroidism by *Panchapatchi* calculation with large sample size.

#### REFERENCES

1. R.C. Mohan. *Bogamunivar Panchapatchi sasthanam* Dec2012 Published by *Thamarainoolagam*.
2. S.P. Ramachandhiran *Romarishi vinadi Panchapatchi sasthanam* 1994 published by *niraimathi* publisher.
3. Dr. S. Haritha "Diagnostic Correlation of Elemental Derangement Findings Through *Panchapatchi Sasthanam* (Five Bird Diagnostic Sign) in patients of *Madhamegam* (Diabetes Mellitus), *International Journal of Ayurvedic Medicine*, 2023; 14(1): 225-228.
4. Kadlaskar B.B., Lakshmi Ravindranath. Hypothyroidism in Ayurveda – A Conceptual Study. *AYUSHDHARA*, 2015; 2(4): 246-250.
5. Dr. T. Vinothini M.D. (S), Master thesis, A Study on *Neerkuri* and *Neikkuri* Diagnostic Methodology of Siddha System in "*Kuraiveethana noi*"

- (Hypothyroidism), National Institute of Siddha, Chennai.
6. Karishma Singh and Anup B. Thakar, A clinical study to evaluate the role of *Tripala Guggulu* along with *Punarnavadi Kashaya* in the management of hypothyroidism, *Ayu.*, Jan-Mar., 2018; 39(1): 50-55.
  7. Dr. Pulipaani Sundharavarathachariyar, *Pathinen Siddhargal Panchapatchi sasthan uraiyum vilakkamum* Sep 2011, *Thanjavur saraswathi mahal noolagam, Thanjavur*.
  8. Venugopal P.M, *Udal Thathuvam* 2nd edition, Department of Indian medicine and homeopathy, Chennai., 2014; 299-300.
  9. Dr. Samuvel. P Green, *Udal Koorugal*, 2nd edition, Department of Indian medicine and homeopathy, Chennai, 1994; 477.
  10. Ramachandran S, *Yugi Vaithiya Chinthamani* 800, 1st edition, *Thamarai Noolagam*, 1998.
  11. Peter Asman, Ophthalmological evaluation in thyroid-associated ophthalmology, 2003; 81: 437-448 *Acta Ophthalmol Scand*, ISSN 1395-3907.