



**OBSERVATIONAL CASE REPORT: THE TRADITIONAL MANAGEMENT OF
SHOULDER JOINT DISLOCATION**

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ABSTRACT

Traditional orthopedic management is an external therapy under the traditional system and practicing by the native traditional bonesetters in Sri Lanka. In Eastern and Northern Province, the traditional orthopedic management called Murivu nerivu (Fracture and dislocation). The traditional bonesetters are practiced their own manipulation and reduction method to heal the Murivu nerivu. This objective of the study was found out the diagnosis, line of management (reduction and manipulation) and treatment plan which are used to cure the nerivu in shoulder joint. The present case study was carried out in the bonesetter's private clinic in Koddai kallar, Batticaloa district, Sri Lanka. The patient was selected randomly through the history taking and a patient who had acute shoulder joint dislocation. This study over a period of 41 days. Before and after treatment pain and motility assessment were performed. The management plan started with an application of herbal paste and the Pattu (Medicinal paste) and oil. At the end of the treatment, significant reduction of pain and increased elbow motility. The traditional bone setting was an effective treatment for the Murivu nerivu without any deformity.

KEYWORDS: herbal paste, Murivu nerivu, pattu.

INTRODUCTION

The basic principle of the fracture managements are bone reduction, immobilization and rehabilitation. Displacement of broken bone or angulation of the broken bone is done by the immobilization. Prevention of movements relieves the pain and enhances the healing. In modern medicine, used to prevent the immobilization by the application of plaster of Paris cast, continuous traction, external fixation and internal fixation. Nonunion is a serious complication of a fracture of a fracture and thus warrants surgical management to remove the scar tissues between bone fragments and immobilization with a mode of fixation (Attanayake, et al, 2018).

Now a days people seek the alternative health care system to minimize the complications of the surgical management. Many developing countries have integrated traditional healers into mainstream healthcare. In developing countries, especially in Africa, Asia and South America, the use of traditional bone setters to treat musculoskeletal injuries is widespread (Nwachukwu, et al, 2011). In Sri Lanka, traditional orthopedic management is an effective treatment method and is popular among laymen. Most treatments used by indigenous healers were transmitted orally and sometimes written in palm leaf manuscripts.

It is an external treatment practiced by the native traditional bone healers in Sri Lanka in various preparation as *pattu*, *mallum* and oils. In addition, internal medicine like decoction, gruels, *choornum* and pills are used in management of other symptoms and complication during the treatment (Attanayake, et al, 2018).

Case Scenario

A 42 years old male presented to the traditional physician with the history of falling from a height of about 1.5 meters. The patient had a complaint of acute pain in the right shoulder joint from last night. Further, he stated inability to lift his hand.

Past history: no history of any previous illness.

On examination

Tenderness on the right shoulder joint and mild swelling and limited movement. His shoulder did not allow for passive movements as well.

Diagnosis & treatment plan

First, he felt the shoulder joint and confirmed the dislocation. After that, he used the reduction method and relocated the joint. Then treatment was carried out as follows.

On first regimen (day1-3)

The physician applied the *urukku marunthu* (herbal paste) for 15 minutes which is a single herb to reduce the pain as well as loosening the joint.

After that, external application of 50 mL of herbal oil was applied and closed manipulation done by the physician.

Then bandaged the joint and sling around the neck to reduce the mobilization. Then he asked the patient to visit the clinic after three days and avoid some food such as raw banana, yam etc.

On second regimen (day4-14)

After three days, the bandage was removed and asked to perform passive and active movements. At the time patient returns to a good range of movement.

Then manipulation done by the physician and applied the *muddai paththu*.

Then he advised to visit the patient when the bandaged peel of randomly.

Third visit (day 15- 21)

After ten days patient was visited the clinic with the mild pain in the shoulder and good range of movement. Then he applied the external application of 10mL of oil every day for 1 week.

After one week patient was visited the clinic without any complaint. Patient was asked to do the active exercises.

Treatment outcomes

Pain and motor function assessment was done before commencement of treatment and during the treatment. Pain was graded as 10 in right shoulder and power of flexion, extension, adduction and abduction was graded as 1 in right shoulder. After 20 days of treatment, pain improved to the normal level (Grade 0) and other motor function improved to the normal level (Grade 5).

DISCUSSION

This is the shoulder joint dislocation and he complained with pain and restricted movement in the shoulder joint. The physician examined the patient using his traditional knowledge and diagnosed as *Toal Moodu vilakal* (shoulder joint dislocation).

The injury was fresh and first he applied *urukku marunthu* (herbal paste). He used the *oduvadakki* plant as *urukku marunthu* which has capable to reduce the pain. After that, he manipulates and relocates the joint. Then he applied the oil (*novennai*) which contains sesame oil, castor oil, *kariya pavalam* (*Aloe barbadensis*), *manjal* (*Curcuma longa*), *sukku* (*Zingiber officinale*), *vasambu* (*Acorus calamus*), *elam* (*Elettaria cardamomum*), *sittaraththai* (*Alphinia officinarum*), *kadukkai* (*Terminalia arjuna*), *thippili* (*Piper longum*), and *athimathuram* (*Glycerrhiza glabra*). In the ingredients of medicinal oil, most of the plant has anti-inflammatory and analgesic activity, these would enhance the healing and lead to reunion of bone. Further, he used the *muddi*

pathu which consist egg white yolk, *kariya pavalam* (*Aloe barbadensis*). Egesie et al., (2011) mentioned *Aloe barbadensis* has potent anti-inflammatory activity and plays important role in most of the traditional preparation to various types of pain and inflammatory condition. The white yolk enhance the healing and callus formation. He used the bandaged to restrict the movement and stabilize the joint. During the examination and manipulation, he recited the *manthras*.

CONCLUSION

From this study, able to know about the traditional thoughts about reduction management and treatment plan of the dislocation. It gives the success rates of traditional management in dislocation. That is indicating our Traditional medicine is not ruining.

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