PARALYSIS FOLLOWING THEORY OF THAI TRADITIONAL MEDICINE

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ABSTRACT

The purpose of this research was to understand the paralysis following the Theory of Thai Traditional Medicines, disease mechanism, diagnosis, and treatment. This research was a documentary research using qualitative approach. Data sources of this research were come from textbook of Thai Traditional Etiology (Kampi Samuddhadan Vinijchai), textbook of Thai Traditional Tales (Kampi Nithan), Kampi Chavadan, Kampi Kasai as well as interviewing three experts in Thai Traditional Medicine namely Mr. Boonyaporn Yeemee Boonthong, Mr. Sippakon Sopisakon, Mr. Pornchai Chanannithithorn, and Mr. Monthon Phetsee). The results of documentary research were found that Paralysis was a health problem caused by imbalance of wind according to Theory of Thai Traditional Medicine. This imbalance was contracted either of U-thangkhamawata wind concurrently combined with Athokhamawata wind, or body deterioration such as accident. Thus, paralysis treatment following Theory of Thai Traditional Medicine was done by food and wind element rebalancing. The patients were recommended to eat hot food and do exercise. Hot flavor recipes (also known as "Ya rot ron" in Thai) were suggested to paralysis patients because it can spread wind inside human body. Furthermore, treatment with laxative and analeptic as well as hand healing, massage, massage with hot pressing, and sauna with herbs can facilitate the problem and alleviate the paralysis. This outcomes of study can contribute to be basic knowledge on diagnosis of paralysis and apply for further study in the fields of Thai Traditional Medicine.

Keywords—Paralysis, diagnosis, Thai Traditional Medicine

INTRODUCTION

The information from Bureau of Non Communicable Disease, Department of Disease Control on the campaign of World Stroke Day 2017 reported that stroke is the world's top 2 of public issues due to 17 million people were died from it which affected to the physical health, mental health, society and economy. In Thailand, the total of stroke mortality per 100,000 people during 2014 – 2016 was 38.66, 42.62 and 43.54 consecutively which indicated that it was increased every year and it was 1.5 - 2 times of diabetes and ischaemic heart disease as the report from Strategy and Planning Division, Office of the Permanent Secretary on the disease and injury of Thai population in 2013 revealed that stroke was the top 1 of mortality in male for 1.1 percent and in female for 14.5 percent which the average of medical fee in 2008 for each stroke patient was 1,629 baht and for the inpatient was 2,973 million baht per year, in case if there were 500,000 stroke patients per year, the medical fee would be 20,632 million baht per year. The information from International Health Policy Program reported that stroke was the threat for people all around the world, only the current medicine would not be sufficient, then the Thai traditional medicine would be in focus as another treatment choice for patient and relatives as it had the lower cost. Thai traditional medicine was the knowledge and experience recorded on Thai book, Koi (Lan leaf) book or another material which passed on and inherited for many years consisted of various medical scriptures for the checking and treatment for stroke such as Tale disease which described on elementary deficiency - relapse - slack - disability, Chavadan scripture which described on 2 wind types: collapsed wind and 8 of unhealthy food included various winds caused by stroke wind (information code of Thai traditional medicine, Institute of Thai Traditional Medicine, 2008), and Kasai scripture which described on Kasai disease as the elementary deterioration or dye - stick - sweep - caress tightly in Pali-Makot language that affected to the emaciation - abnormal functioning - elementary disability, the researcher interested in studying and understanding on the concept and theory of Thai traditional medicine from various textbooks and documents in order to continue the knowledge of treatment for stroke in the future.

OBJECTIVE

1. To understand the paralysis following the Theory of Thai Traditional Medicines, disease mechanism, diagnosis, and treatment.

METHODOLOGY

- A. Approach documentary research using a qualitative approach.
- B. Data collection data was collected by 2 methods.
 - 1. Documentary review from textbooks of Thai Traditional Medicine (Relief Medicine) - Scripture of Thai Traditional Medicine I and II (Revised Edition), textbooks of Thai Traditional Etiology - Scripture of Samuddhadan Vinijchai ("Kampi Samuddhadan Vinijchai"), Scripture of Chavadan ("Kampi Chavadan"), Scripture of Kasai ("Kampi Kasai"), and textbook of Thai Traditional Tales – Scripture of Nithan ("Kampi Nithan").
 - 2. In-depth interview four Thai Traditional Medicine experts namely Mr. Boonyaporn Yeemee Boonthong, Mr. Sippakon Sopisakon, Mr. Pornchai Chanannithithorn, and Mr. Monthon Phetsee.

RESULTS

From the study of stroke on the scripture of Thai traditional medicine revealed that there was no mention of direct cause and treatment for stroke but only the similar symptom as the current stroke, there were various scriptures mentioned on the symptom of stroke such as Samuddhadan Vinijchai scripture, Nithan scripture, Chavadan scripture and Kasai scripture which were relevant by the symptom and cause of disease.

Stroke in Thai traditional medicine was caused by the lower wind, higher wind and the body deterioration, then Thai traditional medicine was suitable for its treatment; blurred eyes, dysarthria, acroanesthesia and brain disability which was consistent with the concept and attitude of 4 experts in Thai Traditional Medicine namely Mr. Boonyaporn Yeemee Boonthong, Mr. Sippakon Sopisakon, Mr. Pornchai Chanannithithorn, and Mr. Monthon Phetsee.

Stroke was caused by the higher wind, the lower wind and brain disability as the body deterioration which Thai traditional medicine was relevant with current medicine in the brain disorder as it was a commanding part of the body.

The symptoms were blurred eyes, facial palsy, dysarthria, stupefaction and acroanesthesia which similar to those symptoms mentioned in the current medicine.

8 causes of disease were food, movement, temperature, sleepless, starvation on food and drink, stool and urine restriction included not eating on time and no exercise which was relevant with current medicine as it was caused by behavior, age and heredity.

The diagnosis for finding its cause by living behavior, age, occupation and symptom.

The treatment of Thai traditional medicine was differed from the current medicine, Thai traditional medicine would find the cause of disease by living behavior and the actual cause from which part of the body, then applying herbs for treatment by its cause along with the hand treatment or massage on 10 main energy lines included the adjustment on behavior and exercise.

CONCLUSION

Stroke was caused by the higher wind and the lower wind which affected to the brain disability, nervous system disability and slower movement included it was also caused by an accident and injury.

The treatment for stroke on the scripture of Thai traditional medicine, it would find the cause of disease by living behavior and the actual cause from which part of the body by diagnosing on Scripture of Samuddhadan Vinijchai, then made up a prescription for treatment. Stroke which caused by the wind disorder would be treated on Scripture of Chavadan applying hot flavored medicine for wind dispersing and 5 species of Thai medicine for elementary balancing, then treated by its symptom and stimulant included treated by a massage for wind dispersing, doing exercise and having healthy food.

The findings of this research revealed that it was consistent with the objectives, the concept and theory of the treatment for stroke by the scripture; the method and process of checking and treatment by Thai traditional medicine. Due to it was the restriction in making an appointment with the expert for a focus group interviewing, the treatment result should be recorded for future research for more benefits to Thai traditional medicine in the treatment for stroke.

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