

REVIEW ARTICLE

ISSN 2456-0170

AN ACCLAMATION OF LEGENDARY TRADITIONAL SNAKE BITE PRACTITIONER

¹Dr.Chaitra.H. ²Dr.Gururaj Anil Bhat

¹Associate Professor Dept of Agadatantra ²Associate Professor Dept of Shalakya Tantra SDM College of Ayurveda and Hospital Hassan, Karnataka - India

ABSTRACT

It is well accepted fact that snake bite cases are the leading cause of morbidity and mortality in India. According to World Health Organization snake bite is one among the most neglected tropical diseases in the world. The saga is about a traditional snake bite practitioner called Mr. Ramanna who lived in a small village. He had the vast experience of nearly 40 years and claims that he has treated more than ten thousand bite cases. The great thing is not only about the number but out of ten thousand cases only two cases were failed. He adopts a very unique way of tying and removing ligature. He also employs a single distinctive method to diagnose, neutralize venom and assess prognosis. The dry powder of Tinospora cordifolia is kept in between the betel leaf and offered to chew. If it is a poisonous case the person cannot identify the bitter taste of Tinospora cordifolia. Few months back I went to meet him but unfortunately he was no more. He had not studied human anatomy, physiology, pathology and pharmacology. But he was pretty confident in handling bite cases. It was very painful to note that such treasure of antidotes of snake bite also went away with the person. Another bitter truth is lack of documentation of the treated cases.

KEYWORDS: Traditional snake bite practitioner, Tinospora cordifolia, Piper betel

INTRODUCTION

The snake bites are life threatening emergencies that seek immediate attention. It is one among the important rural hazard. It is well accepted fact that snake bite cases are the leading cause of morbidity and mortality in India. The diagnosis and treatment of venomous snake bites is sometimes difficult for clinicians because of lack of sufficient information by the patients. In India there are fifty two types of venomous snake species¹. The most common verities include Cobra, Krait, and Russell's viper and saw scaled Viper². As there are no definite testing kits or markers available in the medical practice to differentiate poisonous and nonpoisonous bites, the clinicians face many challenges to treat the case. About fifty thousand people die every year in India due to snake bites³. The Viper bites are being crowned with major blame of mortality. The tragedy of injury, disability and death caused by snake bite remains unrecognized unheard and by global community.⁴According to World Health Organization snake bite is one among the most neglected tropical diseases in the world. The insufficient emergency health care facilities especially in rural areas of India drive the large segment of people to utilize the alternative system of treatment by traditional healers.

The saga is about a traditional snake bite practitioner called Mr. Ramanna who lived in small village called Palya of Hassan district in Karnataka state. After cancellation of several appointments with him, finally I succeeded in visiting his place in the month of April 2017. He was familiar personality in the surrounding locality for a noble cause. He used to live in a small house with his seven family members. Very soon I understood that the house is only small but not his heart. I was overwhelmed by the friendly gesture of a poor man. Basically he was a labor in a rice industry. As he was working in rice industries for more than seventeen years he was suffering from severe wheezing and was struggling to speak also and was resting on a bed. He was

delighted to note that a person has approached him inquest of knowledge about traditional way of treating snake bite cases. Hence amidst his illness he started to narrate his journey in the path of management of snake bite cases.

It was in the year 1960; that when Mr. Ramanna was pretty young, had a cobra bite. He took medicines from many doctors for the same. But his complaints like blurring of vision and tremors did not reduce and the bite ulcer did not respond for nearly six months. Finally he met a person called Late Mr. Kannappa at Bangarupete near Kolar. He recalled from his memory that the day he met Late Mr.Kannappawas Wednesday and it was around 6 o clock in the evening. Late Mr. Kannappa did not give him food and water up to Saturday and put him only on medications and did not allow him to sleep also. All these measures looked very strange but by Sunday onwards the symptoms started slowly reducing. Within a week he was able to manage himself without any body's support and by one month he became completely normal.

Late Mr.Kannappa was kind enough to show and explain the medicines to Mr. Ramanna while he was under treatment. Late Mr. Kannappa was very much attracted by the dedication of Mr. Ramanna and one month before his death he called Mr Ramanna and showed and explained all the medicines, herbs and methods used in the management of snakebite cases. Even though Mr. Ramanna was aware about those medicines and herbs he did not practice for two years out of fear. One day a person from his neighbourhood approached him with snake bite while he was working in the field. Immediately Mr Ramanna handled the case by the knowledge of medicines which he had obtained. The patient recovered very fast and Mr Ramanna gained faith on those medicines also. It helped him to boost his confidence level to treat such cases.

He had the vast experience of nearly 40 years and claims that he has treated more than ten thousand bite cases. The great thing is not only about the number but out of ten thousand cases only two cases were failed. In Hassan district Viper bite cases are more common. With his extensive experience in the management of bite cases he has learnt that poisonous symptoms increase in hot sun and reduces slowly as the sun sets.

He adopts a very unique way of tying and removing ligature. Generally most of the traditional snake bite practitioners will put one ligature above the bite site. But according to Mr Ramanna two ligatures have to be tied with four inch gap. It should be loosened alternatively once in ten minutes. According to him ligature will be effective only if it is tied immediately after bite. If the ligature is applied after an hour or so will be of no use. He has mastered a very peculiar way of removal of ligature with specific type of movement so that the poison will start moving towards bite site. Later he puts an incision with a blade in between two ligatures.

He also employs a single distinctive method to diagnose, neutralize venom and assess prognosis. The dry powder of Tinospora cordifolia is kept in between the betel leaf and offered to chew. If it is a poisonous case the person cannot identify the bitter taste of Tinospora cordifolia. The drug Tinospora cordifolia is commonly named as "Guduchi" in Sanskrit belonging to family Menispermaceae is a genetically diverse, large, deciduous climbing shrub with greenish yellow typical flowers, found at higher altitude⁵. The drug extracts are extensively used in various herbal preparations for the treatment of different ailments for its anti-periodic, antispasmodic, anti-microbial, anti-osteoporotic, anti-inflammatory, anti-arthritic. antiallergic, and anti-diabetic properties⁶.He offers this for every half an hourly once until patient identifies the taste. Once the patient recognizes the taste then the person is

considered to be out of danger. In case of Cobra bite he used to keep intestines of hen at bite site for twelve hours. He goes on changing the intestine once the colour changes to green. In Ayurveda also we get similar kind of reference of keeping fresh flesh to absorb poison.

In Krait bite cases he used to keep hot pieces of black coloured glass bangles on each smaller and bigger joints depending upon the number of straie on Krait. To arrest the bleeding and to reduce oedema in Viper bite cases he used to apply leaves of Dattura metel and Pongamia pinnata root paste with lemon juice. The classical toxicology text books of Ayurveda advocates a principle that animate poison neutralizes the inanimate poison and vice versa⁷. Mr. Ramanana practically applies this principle even without the systematic study of science of Ayurveda. The drug Dattura metel which is considered as one among the inanimate poison is being used here to neutralize the animate poison. In order to bring back to consciousness he applies the combination of Piper nigrum and Tinospora cordifolia at a time to both eyes with help of hen's feather. He takes Eleven rupees from patient on a betel leaf and performs small customary ritual with incense sticks. Once in a year the charges collected from such patients will be offered to the feet of Lord Manjunatha of Shri Kshetra Dharmasthala in South Kanara district of Karnataka. He never used to keep a single penny received from patients. He opines that this medicine does not work on metabolic disorders like Diabetes mellitus and in patients who consumes alcohol and smoking. He gives internal medicines only for three days and during that time the patient should be on bland diet. He strictly advocates not drinking water but coffee decoction with sugar or jiggery can be He gives freshly prepared consumed. medicine. In his enormous years of experience in treating snake bite he has treated more of Viper bite cases.

He always used to inspire to take up the bite cases and he would support me in handling such cases. Few months back I went to meet him but unfortunately he was no more. The plants herbs which he had planted in front of his residence were destroyed by the road connection authorities in with road widening. His family was migrated to some other place. The tragedy is that none of his family members except his daughter Muttamma, learnt the traditional practice of snake bite management. Now she is also not ready to practice because of legal issues. He had not studied human anatomy, physiology, pathology and pharmacology. But he was

pretty confident in handling bite cases. It was very painful to note that such treasure of antidotes of snake bite also went away with the person. Another bitter truth is lack of documentation of the treated cases. As Mr. Ramanna was neither behind money nor behind name and fame he never bothered to maintain the data of cases treated by him. He was totally unaware of present day demands of scientific society. Even after conveying him the need of data maintenance he was unmoved. The man was not in hunger of recognition and honor.

ACKNOWLEDGEMENT

Authors would like to thank Rajiv Gandhi University of Health Sciences, Bengaluru for funding the project.

REFERENCES

 Reddy, K. S. Narayan. The essentials of forensic medicine and Toxicology.
 (24thed.). Hyderabad: K Sugunadevi; 2005.

 Reddy, K.S.Narayan. The essentials of forensic medicine and Toxicology. (24thed.). Hyderabad: KSugunadevi; 2005.

3. Kalyan Ray, DHNS, New Delhi, https://www.deccanherald.com/science-andenvironment/india-neglects-snakebites-

714568.html Jan 23 2019,

4. David Williams, Jose Maria Gutierrez et al. The Global Snake Bite Initiative: an antidote for snake bite. *The Lancet* 2010; volume 375(January 02 2010): 89. www.thelancet.com

5. Rana V, Thakur K, Sood R, Sharma V, Sharma TR. Genetic diversity analysis of *Tinospora cordifolia* germplasm collected from northwestern Himalayan region of India. J Genet. 2012; 91:99–103. [PubMed] [Google Scholar]

6. Sharma U, Bala M, Kumar N, Singh B,
Munshi RK, Bhalerao S.Immunomodulatory active compounds from *Tinospora cordifolia*. J Ethnopharmacol.
2012;141:918–26

 Charaka. Charaka Samhita. New Delhi: Chaukambha publications; 2011.

CORRESPONDING AUTHOR

Dr. Chaitra. H Associate Professor Dept of Agadatantra SDM College of Ayurveda and Hospital Hassan, Karnataka - India Email: drchaitrah@sdmcahhassan.org

Source of support: Rajiv Gandhi University of Health Sciences Bengaluru-Karnataka Conflict of interest: Nil. Intellectual property rights disclosed

Cite this article as

Dr.Chaitra.H: An Acclamation of Legendary Traditional Snake Bite Practitioner. ayurpub; V(3): 1483-1488



Interaction with practitioner



Piper betel with Tinospora cordifolia



Tinospora cordifolia