

**STUDYING THE EFFECTIVENESS OF TREATING OSTEOARTHRITIS USING THAI
TRADITIONAL MEDICINE IN THE CLINIC APPLIED THAI TRADITIONAL MEDICINE,
SUAN SUNANDHARAJABHAT UNIVERSITY**

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ABSTRACT

This research aimed to study Thai massage's effectiveness in treating osteoarthritis in patients and compare the pain levels of patients with osteoarthritis before and after the massage. The sample consisted of 10 patients receiving medical treatment at a traditional Thai medicine clinic, Suan Sunandha Rajabhat University. Due to knee pain not being treated with other methods, the results were compared before and after the massage. The sampling method used is selective selection. Data was collected through interviews and examinations and analyzed using statistical analysis software. The statistics used are percentage, mean, standard deviation, and paired t-test.

Keywords: Thai traditional medicine, osteoarthritis

INTRODUCTION

Nowadays, Thailand has an increasing incidence of osteoarthritis of the knee. In most cases, it is more common in the elderly than in adolescents or those aged 45 years and older. Knee osteoarthritis can be caused by a severe accident, such as falling from a height or overuse. Such restrictions can hinder daily activities such as folding, kneeling, distraction, and walking up and down stairs. As a result, knee movement is restricted. This leads to knee pain and the development of osteoarthritis.

RESEARCH OBJECTIVE

1. To study the effectiveness of osteoarthritis treatment with traditional Thai medicine methods.
2. To compare the pain of osteoarthritis before and after treatment. With the treatment process of traditional Thai medicine,

LITERATURE REVIEW

Osteoarthritis of the knee refers to a disease characterized by chronic deterioration of the knee joint's articular cartilage and subchondral bone. The joint causes pressure or friction on the bone.

Ligaments and muscles inside the knee joint a lot. It causes inflammation of the joints and has reduced synovial fluid, chronic pain, swelling, and tenderness. There are sounds in verses, difficulty moving, and deformed joints (Kwan Suvee Abichandramethakul, 2018, p. 224).

Causes or risk factors that cause osteoarthritis of the knee

1. Older age
2. Overweight (overweight or obesity) Body Mass Index exceeding the norm (BMI > 25)
3. Heavy use of the knee joint. For example, work requiring frequent heavy lifting, such as sitting on the floor, folding a lot, squatting, and kneeling frequently.
4. Accidents that have occurred in the knee joint, such as fractures, kneecap fractures, torn injections of the anterior cruciate ligament, or herniated discs.
5. Have a history of infection in the knee joint
6. There is a genetics of osteoarthritis.
7. Chronic arthritis such as rheumatoid arthritis, gout, etc.

Thai Traditional Medicine

Osteoarthritis in Thai traditional medicine is classified as a type of epilepsy, which is a type of epilepsy that causes loose joints. Water and scrub in the joint are divided into two types.

1. Knee pneumonia is a type of pneumatic pneumonia characterized by severe knee joint inflammation, causing pain, swelling, redness, heat, and possibly fever.
2. Dry knee wind is a type of air with chronic knee joint inflammation, causing pain and swelling around the joint.

Treatment Guidelines

1. Thai Massage: Due to osteoarthritis, there is pain in the knee joint, causing the knee joint to be deformed. Inconvenient swaying Massage therapy stimulates blood flow to help relieve pain.
2. Herbal compress: When the massage is done, the heat from the compress, which contains herbal medicine, will pass through the skin to help relieve aches and pains and reduce swelling. Spasms of muscles, tendons, and joints
3. Herbal medicine treatment involves balancing the body by dispensing medication to distribute blood to the knee.

RELATED RESEARCH:

The effectiveness of drug tattooing compared to herbal compresses in patients with osteoarthritis can be seen that drug tattooing can reduce the severity of osteoarthritis symptoms better than herbal compresses. In terms of reducing the severity of osteoarthritis. It increases muscle flexibility, thus resulting in improved blood movement, helping the fascia tissue to stretch. Reduce muscle spasms This may be due to the use of herbal oil, which is a discreet recipe consisting of hot herbs such as plai, turmeric, sugarcane, etc., which have pharmacological effects in reducing pain,

swelling, anti-inflammatory. This improves blood circulation.(Pornpan Khamma, Sanjai Sangvichia, Suphalak Hatchkam, Tara Shinakarn and Piraya Anmanee, 2022)

SOURCES OF INFORMATION

The following information is relevant to studies on the treatment of osteoarthritis. Pain in elderly patients

1. The study population consisted of volunteers who received treatment at an applied Thai traditional medicine clinic. Suan Sunandha Rajabhat University

2. The subjects were selected through an interview process and answered a questionnaire to assess knee osteoarthritis. The selection criteria included (1) consent to participate in the study, (2) age 30 years or older with knee pain, (3) ability to communicate effectively in Thai, (4) pain in the knee area while moving, and (5) pain in the pressed knee area. Participants refused to participate in the study.

(2) Participants who do not cooperate with the research Participants who have undergone surgery or have a related metal splint with knees, patellas, and legs (4) participants with open wounds or Inflammation around the knees and legs (5) Participants with fractures or fractures (6) Participants with contraindications to massage Withdrawal criteria include unwillingness to participate in the study of severe side effects caused by royal massage, such as bruises at the massage site, inability to comply with the terms and conditions of the agreement, or failure to attend two consecutive appointments and inability to contact

3. In this research study, research tools were used to collect Collect data from two tools: experimental methods and questionnaire, the research instrument is divided into two parts: pre-study and post-test interviews.

(1) Biosocial Factors Questionnaire, which collects data. Go through a single and multiple-answer form to summarize the findings. Descriptive (2) Pre-massage assessment uses a 5-scale rating scale to evaluate. Knee pain with the following scoring criteria: 0 For no pain, 1-3, for minor 4-6. (3) Causes of knee pain, which is rated as "unsure," 1 point, "No" 2 points, and "Yes" 3 points. Pain assessment assesses the effectiveness of massage therapy using the same 5-level scoring scale as the pre-massage assessment.

(2) knee pain level, assessed on a scale of 1-3 for mild symptoms, 4-6 for moderate symptoms, 7-9 for severe symptoms, and 10 for severe pain; and (3) post-massage therapy satisfaction interview, with a satisfaction score of 1 for least to 5 for most.

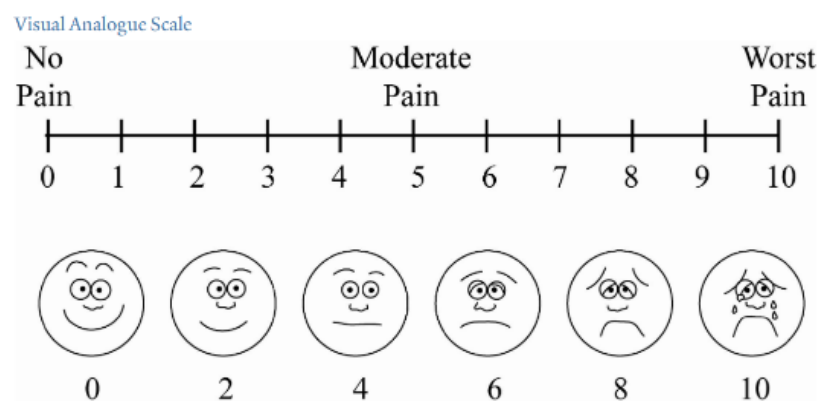
RESEARCH METHODOLOGY

Volunteers received knee pain treatment at the Applied Thai Traditional Medicine Clinic, Suan Sunandha Rajabhat University. The research methodology uses the following techniques: During this interview, participants agreed to provide general information and questionnaire responses about their knee pain; participants were asked to identify the cause of knee pain and rate the severity of the pain before receiving massage therapy. After the massage therapy, participants were given a questionnaire to assess and evaluate their level of pain relief.

The degree of back, leg, and knee pain. For two weeks, participants were scheduled to receive two massage therapy sessions per week, each lasting 1 to 1.5 hours.

DATA COLLECTION

The data collection process for this research involved selecting individuals treated with knee osteoarthritis and meeting the selection criteria. The study and benefits of massage therapy while ensuring its safety under the supervision of applied Thai traditional medicine. This study collected two types of data. Firstly, general information and health information were collected from participants before undergoing massage therapy. Second, pain assessment data was collected before and after the massage using the Facial Scale. This quick and easy method uses a one-dimensional pain expression represented by images. The images range from smiling and happy faces representing pain to tearful faces representing. At most painful, participants were asked to mark or point to a number corresponding to their pain level. They then replace them with points under the corresponding image. Visual Rating Scale is also used to measure pain before and after massage therapy.



RESULTS

The study focused on the effectiveness of Thai massage in treating knee pain and involved 10 participants treated at an applied Thai traditional medicine clinic. The demographics of participants indicated that the majority were female (66.7%), with 6 cases in the age range of 46-52 years (60%) and 4 cases over 60 years old (40%). Most participants (100%) have completed high school, and most occupations are general contractors (70%). This is followed by government employees (30%). For health data, all participants reported no comorbidities, with 10 (100%) experiencing knee pain, 8 (80%) left-side pain, and 2 (20%) right-side pain.

DISCUSSION

Studies have been conducted to study Thai massage's effectiveness in treating knee osteoarthritis. The mean before and after massage therapy showed a significant difference at a level of 0.05, consistent with the results of an earlier study by Nasrallah Cheyalee. Regarding the effectiveness of royal court massage on knee movements in patients with chronic shoulder disease, this study aimed to compare knee motility levels before and after treatment with traditional Thai medicine treatment in patients diagnosed with chronic osteoarthritis according to conventional Thai medicine patients. According to Thai traditional medicine, ten patients were selected and compared with knee motility levels

before and after treatment. The results showed that Thai traditional medical treatment significantly increased the level of knee motility at a $p < 0.01$. This effectively treats upper back muscle pain in patients not treated with other methods. Accidental sampling was used to select 30 participants, and data was collected through interviews and analysis to compare pain levels before and after treatment. The results showed that the pain in the upper back muscles decreased significantly after treatment.

The results of this study suggest that the use of traditional Thai medicine treatments imposes a level of knee mobility—a statistically significant increase ($p < 0.01$). Our observations also show varying degrees of pain before and after treatment. This supports the potential benefits of therapy in managing knee pain.

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