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POTENTIAL PREVENTIVE ROLE OF CLASSIC AYURVEDIC FORMULATION IN QUARANTINE SUBJECTS AMID COVID 19: AN EXPERINEC BASED EVIDENCE

Dr. Vikrant Patil*1 and Dr. Sushma Patil2

Director, The Ayurvedic Thyroid Clinic (TATC), Mohan Nagar, Dhankawadi, Pune, Maharashtra- 411043.

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*Corresponding Author Dr. Vikrant Patil

Director, The Ayurvedic Thyroid Clinic (TATC), Mohan Nagar, Dhankawadi, Pune, Maharashtra- 411043.

ABSTRACT

Till present, COVID 19 lacks in specific treatments or vaccines. Though, many clinical trials are evaluating probable potential treatments. WHO researcher group recommended during the Ebola outbreak in 2014 that —it is ethical to offer unproven interventions with as yet unknown efficacy and adverse effects, as potential treatment or prevention keeping in view no established treatment or specific vaccine were available. The Health advisory released by The Ministry of Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy (AYUSH) against coronavirus infection included different herbs like Ashwagaandha, Mulethi, Guduchi etc. which may prove beneficial in fighting with coronavirus infection. There is a

classical reference of use of an Ayurvedic formulation in Spanish Flue pandemic, which was published "Chikitsa Prabhakatr" in Marathi language in 1921 written by Vaidya Prabhakar Balaji Oagle. The said formulation is administerd to 103 home quarantine SRPF candidates which had come in contact with corona positive patients in the same unit. Though there was a risk of getting in contact with corona positive candidate from same unit, the treated subjects did not ended up with any of the positive corona candidate. This represents the preventive potential of the Ayurvedic formulation given as an intervention. We strongly believe that sharing our clinical experience would help fill the knowledge gap and strengthen the confidence of all stakeholders in Ayurveda research. With limited evidence, our research is expected to assist the identification of a better treatment approach and guide further research.

KEYWORDS: Covid 19, quarantine, Ayurveda, pandemic.

INTRODUCTION

COVID-19 is an infectious disease caused by a newly discovered coronavirus or severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). WHO declared it as a global pandemic on March 11, 2020. This is a respiratory disease and virus spread primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes.^[1]

It has raised global health concerns. The spread of the corona virus is taking toll of almost whole world, to arrest its spread and come up with treatment modalities to treat positive patients are the challenges. The rapid pace with which researchers have been able to understand this novel strain of virus and undertaking research not only in antiviral category but also the traditional medicines to handle this situation is a testament to the lessons learned from public health emergencies.^[2]

There are many formulations and herbs from Ayurveda that can prove beneficial in prevention, mitigation and treatment of corona infection. Some of the Ayurvedic formulations bear a scattered evidences to have a potential therapeutic activity in epidemic or pandemic situation.

It is need of an hour to compile such evidences and knowledge from herbal alternatives to come up with products for working in corona infection at multiple stages.

Clinical Scenario

As per the clinical data available and statistics provided by respective authorities, almost 80% of corona positive subjects are showing up mild to moderate symptoms with an incubation period of 1 to 14 days. These patients are demonstrating recovery without special treatment. Many of asymptomatic infected patients either progress to the diseased or act as a carrier. Old people with certain comorbidity have a higher risk of developing severe disease and adverse outcomes.^[3]

Common symptoms of COVID-19 infection include fever, dry cough, and sore throat. The other less common symptoms are body ache, headache, shortness of breath and rarely diarrhea, nausea or a runny nose.^[4]

Till present, COVID 19 lacks in specific treatments or vaccines. Though, many clinical trials are evaluating probable potential treatments. Meanwhile WHO released standard recommendations for the public to minimize exposure to and transmission of a range of

illnesses. Preventive measures include personal and respiratory hygiene, use of personal protective equipment, boosting immunity and identification and quarantine of suspected or confirmed cases. (5) WHO researcher group recommended during the Ebola outbreak in 2014 that —it is ethical to offer unproven interventions with as yet unknown efficacy and adverse effects, as potential treatment or prevention keeping in view no established treatment or specific vaccine were available. [6]

Possible Role of Ayurveda

The Health advisory released by The Ministry of Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy (AYUSH) against coronavirus infection included different herbs like Ashwagaandha, Mulethi, Guduchi etc. which may prove beneficial in fighting with coronavirus infection.^[7] There were guidelines released apprehending research in Ayurveda for prevention of corona infection.

In 1918 there was pandemic situation of Spanish Flue, which caused death toll of 5-6 lakhs in India. There is a classical reference of use of an Ayurvedic formulation in Spanish Flue pandemic, which was published "Chikitsa Prabhakatr" in Marathi language in 1921 written by Vaidya Prabhakar Balaji Oagle. The Spanish Flue was also categorized in Mild, moderate and severe. Mild stage presented symptoms like fever, general weakness, headache, dysentery etc. Moderate stage presented fever spike, dry cough and insomnia. Severe cases experienced dyspnea, pneumonia, resulting in death. For mild to moderate cases following formulation was given as a treatment modality. The composition of the formulation was Nimba twak, Ringani, Kadechirayat, Sunthi, Marich, Badishep, Ova, Purpatak, Vidanga. [8]

METHODS AND RESULTS

After getting four positive candidates from State Reserve Police Force or SRPF unit at Pune, Maharashtra, total of 103 personnel from same unit were home quarantined. The Above cited formulation in 500 mg capsule form was administered to 103 candidates twice a day for 14 days. Following are the results obtained. There were no adverse events during 14 days. This is suggestive of safety of the intervention. There were around 21.36 % of study population ie 22 subjects were with some symptoms of sore throat and dry cough. Rest all were presenting no symptoms at baseline. The 50% of the subjects ie 11 out of 22 representing mild symptoms were relieved in 2 days post treatment and rest 50% got their symptoms relieved in next 2 days. In short all 21.36% subjects were relieved for symptoms in 4 days of treatment. At the end of the study no subject turned out to be positive after nasopharangeal swab for RT-

PCR. There were 100% subjects found negative for the corona infection. Though there was a risk of getting in contact with corona positive candidate from same unit, the treated subjects did not ended up with any of the positive corona candidate. This represents the preventive potential of the Ayurvedic formulation given as an intervention.

There is need to explore the product for therapeutic potential in corona positive candidate by careful study design.

We do agree that the follow up in the presented clinical experience was unplanned and hence, lack a strategic data collection and analysis. However, we strongly believe that sharing our clinical experience would help fill the knowledge gap and strengthen the confidence of all stakeholders in Ayurveda research. With limited evidence, our research is expected to assist the identification of a better treatment approach and guide further research.

DISCUSSION

With no established conventional specific treatment or vaccine available for COVID-19 infection, experience-based Ayurvedic medicine should be considered along with the multidisciplinary treatment approach. The Ayurvedic formulation we used as an intervention is texted for beneficial use in Spanish flue earlier, it can demonstrate promising effects in the treatment and prevention of COVID-19 infection in early clinical settings, control randomized trials need to be conducted to confirm the findings.

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