

REPORT ON CLINICAL TRIAL OF LIVGOOD CAPSULE

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REPORT ON THE CLINICAL TRIAL OF "LIVGOOD CAPSULE" IN LIVER DISORDERS

INTRODUCTION:

The LIVER is the largest gland of the body. It is situated in the right hypochondrium. It plays a central and varied role in many essential physiological processes. The liver is essential for life and it is the chemical factory of the body. It may be viewed as serving a regulatory and protective function for whole organism. To the extent of that such biotransformation results in the formation of toxic product as in the case of certain drugs, the liver may be bear attach as their adverse effects. LIVER helps in all sorts of metabolism, blood formation, bile secretion, vitamins synthesis, heat regulation and many other performances are generally done in all the times. So the careful assessment is equally important in the patients with obvious liver diseases. In this study the "LIVGOOD" capsule was trialed in the patients of liver disorders to know the efficacy of the drug clinically.

AIM AND OBJECT:

To evaluate the therapeutic value of "Livgood" capsules in the patients of liver disorders, the present clinical trial was undertaken. Total 55 cases have been registered for this study. But out of these cases only 50 cases were included in the drug trial, who had followed the full treatment schedule.

MATERIAL AND METHOD:

Total 55 patients of liver disorders were registered during the course of trial. The study consists clinical patterns in liver disorders and the management of the particulars condition with the "LIVGOOD" capsules.

Out of 55 cases, 50 cases had followed full term (90 days) treatment schedule. The rest of the cases had discontinued the course of treatment.

This study consisted of clinical pattern, the liver disorders and the management of the particular condition with "Livgood" capsules.

The clinical pattern were studied in all the 55 cases for incidence of age, sex, religion, occupation, economic status, education and social status and symptoms of liver disorders following the incidence of L.F.T.

SELECTION OF CASES:

All the patients selected for the study were interrogated and details history were recorded in the case record form. All the patients were thoroughly examined and findings were recorded. After the clinical examination patients were subjected for laboratory investigation, routine examination of blood, stool and urine were done and to establish the final diagnosis, liver function test (L.F.T) was done. The individual who have symptoms of liver disorders with or without raised Bilirubin level, S.G.P.T, S.G.O.T and Alkaline Phosphatase etc. were subjected to clinical trial.

METHODS OF DRUG ADMINISTRATION:

The drug "Livgood" was administered in the form of capsules prepared and supplied by GOODCARE PHARMA PVT. LTD, 1 GUPTA LANE, KOLKATA - 700006. The patients of liver disorder taken for the study, were administered 2 capsule (500mg each) twice daily orally morning and evening with water for a period of 90 days.

DIET:

All the patients selected for the trial were advised to avoid butter, ghee and spicy food.

FOLLOW UP:

Follow up study was conducted in all cases at interval of one month for 3 months (90 days), L.F.T was done in each cases in every month.

CLINICAL PATTERN:

The present study consists of total 50 cases who have symptoms of liver disorders and completed the full course of treatment schedule (i.e 90 days). But we had registered 55 cases for the present study, out of which 5 cases had not completed the full course of treatment. So the clinical pattern will be discussed on 55 cases. But the result will be analyzed on observation of the findings of 50 cases.

Age Incidence:

Patients of the present study were from 20 to 60 years of age. Patients of different age group are given in Table No. 1.

Table No. 1: Showing the incidence of different Age Group

Sl. No.	Age Groups (years)	No. of patients	Percentage
1.	21 - 35	25	45.45
2.	36 - 50	24	43.64
3.	51 & above	06	10.91
Total :		55	100.00

Sex Incidence:

Patients of both sexes were registered for the present study. The sex groups are given in Table No. 2.

Table No. 2: Showing the incidence of Sex

Sl. No.	Sex	No. of patients	Percentage
1.	Male	35	63.63
2.	Female	20	36.37
Total :		55	100.00

Religion Incidence:

Patients of various religions were included in this study. Patients belonging to different religion are shown in Table no. 3.

Table No. 3: Showing the incidence of Religion

Sl. No.	Religion	No. of patients	Percentage
1.	Muslim	30	54.54
2.	Hindu	20	36.36
3.	Christian	5	9.10
Total :		55	100.00

Occupation Incidence:

In this study patients belonging to various occupations were included and shown in Table No. 4

Table No. 4: Showing the incidence of Occupation

Sl. No.	Occupation	No. of patients	Percentage
1.	Service	13	23.64
2.	House wives	12	21.82
3.	Labour	10	18.18
4.	Cultivator	05	9.09
5.	Student	05	9.09
6.	Businessmen	08	14.54
7.	Retired	02	3.64
Total :		55	100.00

Economic Status:

In this study patients of different income groups were recorded and shown in Table No. 5

Table No. 5: Showing the incidence of Income Status

Sl. No.	Income Status	No. of patients	Percentage
1.	L.I.G	37	67.27
2.	M.I.G	18	32.73
Total :		55	100.00

Educational Status:

When educational status was enquired, patients of both literate and illiterate were found in this series. The educational status as found is given in Table No. 6.

Table No. 6: Showing the incidence of Educational Status

Sl. No.	Educational Status	No. of patients	Percentage
1.	Illiterate	10	18.18
2.	Primary	20	36.37
3.	Madhyamik	10	18.18
4.	Higher secondary	04	7.27
5.	Graduate	09	16.36
6.	Post Graduate	02	3.64
Total :		55	100.00

Rural and Urban Incidence:

This study included patients from urban and rural areas and shown in Table No. 7.

Table No.7: Showing the incidence of Rural and Urban

Sl. No.	Rural/ Urban	No. of patients	Percentage
1.	Rural	20	36.36
2.	Urban	35	63.64
Total :		55	100.00

Incidence of Diet Habits:

Patients included in the present study were found to have both types of diet habits (vegetarian and non-vegetarian), which are presented in Table No. 8.

Table No. 8: Showing the incidence of Diet Habits

Sl. No.	Diet Habits	No. of patients	Percentage
1.	Non-Vegetarian	37	67.27
2.	Vegetarian	18	32.73
Total :		55	100.00

Incidence of Nature of Work:

In this trial study nature of work were studied which are presented in Table No. 9.

Table No. 9: Showing the incidence of Nature of Work

Sl. No.	Nature of Work	No. of patients	Percentage
1.	Sedentary	26	47.27
2.	Moderate	17	30.91
3.	Hardworker	12	21.82
Total :		55	100.00

RESULT AND OBSERVATION:

The results of 50 patients who had completed the treatment schedule (i.e. 90 days) were observed in terms of subjective improvements, which are presented below in Table No. 10.

Table No. 10: Showing the response of treatment on subjective features of sexual disorder

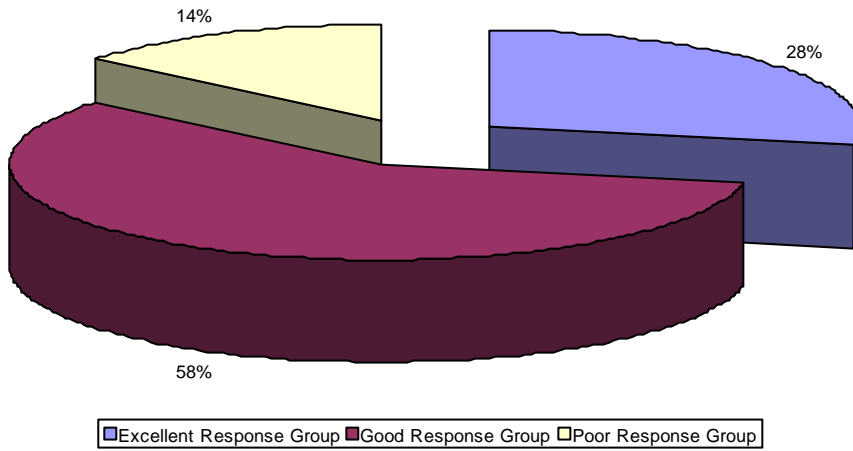
Sl. No.	Symptoms	No. of patients before treatment	No. of pt relieved after treatment	Percentage of relief
1.	Anorexia	50	42	84.00
2.	Yellow Urine	30	25	83.33
3.	Yellow eyes/ Palms	20	18	90.00
4.	Upper Abdominal Discomfort	46	36	78.27
5.	Fever	34	28	82.36
6.	Nausea	32	25	78.12
7.	Vomiting	20	16	82.36
8.	Loss of weight	42	21	50.00
9.	Headache	35	26	74.29
10.	Skin Rashes	11	09	81.82
11.	Bleeding Nose	08	06	75.00
12.	Weakness	44	30	68.18
13.	Loss Libido	30	30	00.00

In all patients who had completed the treatment Schedule of 90 (ninety) days were also observed in terms of objective improvements which are presented in Table No. 11

**Table No. 11: Showing the response of treatment on objective features of liver disorders
(Mean effects, n = 50)**

Sl.No.		B.T.	A.T
1.	Serum Bilirubin Mg/dl	2.82 ± 0.40	0.90 ± 0.04
2.	Alkaline Phosphatase	271.09 ± 10.05	214.92 ± 7.80
3.	SGOT	104.20 ± 36.97	34.36 ± 1.70
4.	SGPT	108.47 ± 38.32	35.66 ± 1.37

Figure showing the percentage of relief in the treatment with Livgood capsule in patients



DISCUSSION :

55 patients suffering from liver disorders were included in the present series of clinical study. The clinical study was undertaken to evaluate the efficacy, the drug "Livgood" capsule were given in these cases. Out of 55 cases 50 cases could be followed up properly.

To all the patients in the trial “Livgood” capsules was given in the dose of 2 cap (500mg each) twice daily orally, morning and evening with water for a period of 90 days. The effects of the drug on 50 patients was observed in consideration of subjective and objective improvements. At the end of treatment the result was assessed in terms of excellent response, good response and poor response. The patient were included in the excellent response group, when the objective criterias become normal and showed 75% relief from classical clinical features within 3 months.

The patients were included under the good response group, when they showed more than 50% relief of subjective features and normal objective parameters. The patients were included in poor response group when they showed less than 50% relief of subjective criterias and negligible improvements of objective criterias.

When the total effects of the drug on the subjective criterias and objective criterias were taken into consideration, 28% cases were included in excellent response group, 58% cases included in good response group and 14.00% in poor response group to the treatment in the “Livgood” capsule.

During study of the “Livgood” capsules none of the patients had shown any side effects.

CONCLUSION :

The drug “Livgood” capsules has been found to be a hepatoprotective drug with definite effects in the treatment of liver disorders. The result in the trial group has shown encouraging result after 30 days of treatment. After 90 days of the treatment the statistical data has shown the significant response in the objective criterias like Serum Bilirubin, SGOT, SGPT and Alkaline Phosphatase. So Livgood can safely be given in liver disorder.

ACKNOWLEDGEMENT

We sincerely acknowledge Dr. P.K. Mukherjee, Project Officer and Asstt. Director (Ayurveda) for sanctioning permission to conduct this trial at Institute of Post Graduate Ayurvedic Education & Research at Shyamadas Vaidya Shastrapith Hospital, Kolkata - 700009.

We further acknowledge M/s. GOODCARE PHARMA PVT. LTD., Kolkata - 700006 for their financial support for this trial.

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