

Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in



An International Journal for Researches in Ayurveda and Allied Sciences



Note

Journal of

Ayurveda and Integrated Medical Sciences

ORIGINAL ARTICLE

June 2022

Clinical review on comparative study of two different formulations Amritadi Kwatha and Kandughna Mahakashaya Ghan Vati on the basis of clinical efficacy in patients of Udarda

Puneet Sharma¹, Satish Gandharve², Rajesh Sood³

¹Assistant Professor, Department of Samhita and Siddhant, Shiva Ayurvedic Medical College and Hospital, Himachal Pradesh, India.

²Reader, Department of Samhita and Siddhant, Rajiv Gandhi Government Post Graduate Ayurvedic College and Hospital, Himachal Pradesh, India.

³Professor, Department of Samhita and Siddhant, Rajiv Gandhi Government Post Graduate Ayurvedic College and Hospital, Himachal Pradesh, India.

ABSTRACT

Present study deals with study and comparison of two ayurveda formulations in the patients of *Udarda*. *Amritadi Kwath* and *Kandughna Mahakashaya Ghan Vati* were used in separate groups of patients and their effect was compared. *Kandughna Mahakashaya Ghan Vati* was found to be more effective in the patients of *Udarda*.

Key words: Udarda, Kandughna Mahakashaya Ghan Vati, Amritadi Kwatha

INTRODUCTION

Udarda has been described by all Acharyas. The detailed description in separate chapters is available in Madhavanidana, Bhavprakash, Chakradutta, Sarangdhar Samhita, Yogratanakar and Bhaisjyaratnavali. Udarda has been described with Sheetpitta and Kotha. Udarda has Kapha dominancy. [1] It is caused by contact with Sheeta and Paniya Sansparsh especially in Shishsir Ritu. [2]

Udarda is characterized by Utsang, Raag and Kandu.^[3] Present study was done to evaluate the effect of Kandughna Mahakashaya^[4] Ghan-Vati and Amritadi Kwath^[5] on patients of Udarda. Two separate groups

Address for correspondence:

Dr. Puneet Sharma

Assistant Professor, Department of Samhita and Siddhant, Shiva Ayurvedic Medical College and Hospital, Himachal Pradesh, India.

E-mail: puneet8350965907@gmail.com

Submission Date: 19/04/2022 Accepted Date: 23/05/2022

Quick Response Code

Website: www.jaims.in

DOI: 10.21760/jaims.7.5.5

of patients were selected on the basis of subjective and objective symptoms. In each group, different formulation was used for the duration of 45 days with three follow ups at the interval of 15 days.

MATERIALS AND METHODS

Plan of study

An open-label comparative clinical trial was planned in the patients of *Udarda*. Patients were selected from the OPD of the hospital and brought under trial after informed consent.

Inclusion criteria

- a) Patients willing for trial.
- b) Patients in the age group of 15- 70 years of either sex.
- c) Patients with the classical signs and symptoms of Udarda like Raga, Kandu, Udbhisch Mandala^[6]

Exclusion criteria

- a) Patients not willing for trial or not ready to give informed consent.
- b) Patients whose age is less than 15 and above 70.
- c) Pregnancy, lactating women and puerperium.

ISSN: 2456-3110

ORIGINAL ARTICLE

June 2022

- d) Failure of patients to follow up successive visits.
- e) Patients diagnosed with severe systemic illness like (HIV, Tuberculosis, Malignancy, Systemic Lupus Erythematous, Hypertension and Anaphylaxis to Medicines)

Lab investigation

All the lab investigations were performed before and after trial.

Blood examination

Hb, TLC, DLC Neutrophils, Lymphocyte, Monocytes, Eosinophils, Basophils and E.S.R.

Biochemistry

- Fasting blood sugar,
- RFT Blood urea, Serum creatinine, Uric acid.
- Lipid profile Cholesterol, HDL, LDL, VLDL, Triglycerides

Urine examination

- Routine
- Microscopic

Criteria of assessment

Subjective criteria

Assessment of *Raag*^[7] (Erythema), *Kandu*^[8] (Pruritis), *Mandalotpatti*^[9] (Wheal formation) and frequency of attacks was done before and after treatment on the basis of gradings. (Table 1)

Criteria for final assessment of results

- Complete remission 100 % relief in signs and symptoms.
- Excellent Improvement Patients showing more than 75% of relief in signs and symptoms were taken as excellent improvements.
- Moderate Improvement Patients showing 50% to 75% of relief in signs and symptoms were taken as moderately improved.
- Mild improvement Patients showing 25% to 50% of relief in signs and symptoms were taken as mildly improved.

 Unimproved - Patients showing 25% of relief in signs and symptoms were taken as unimproved.

Consent of patient

All the selected patients were informed about the nature of study and written consent was obtained on the case report form before inclusion in the trial.

RESULTS

Effects of trial drugs

Total 20 patients were registered in present study. Patients were divided in two groups. 10 patients were given *Kandugha Mahakashaya Ghan Vati. Amritadi Kwath* was given to next 10 patients. The results obtained are discussed below.

Effect of Kandughna Mahakashaya Ghan Vati in patients of Udarda

The trial drug provided statistically highly significant relief (p<0.001) of 53.33% in *Raag*, 64.996% relief (p<0.001) in *Kandu*, 41.665% relief (p=0.001) in *Mandlotpatti* and 54.998% relief (p<0.001) in frequency of attacks. p value was highly significant with all the symptoms.

Effect of Amritadi Kwath in patients of Udarda

The trial drug provided significant relief (p=0.01) of 28.332% in *Raag*, 33.332% relief (p=0.011) in *Kandu*, 28.332% relief (p=0.025) in *Mandlotpatti* and 43.332% relief (p=0.029) in frequency of attacks. p value was significant in *raag* and non-significant in *Kandu*, *Mandlotpatti* and frequency of attacks.

Comparison of trial group 1 and trial group 2

In intergroup study between group 1 and group 2, *Raag* and *Kandu* shows statistically significant difference, rest of symptoms shows no significant reduction. (Table.2)

On the basis of percent relief, it can be said *Kandughna Mahakashaya Ghan Vati* was more effective than *Amritadi Kwatha* in the patients of *Udarda*.

DISCUSSION

The purpose of discussion is to interpret and describe the significance of findings in the light of what was ISSN: 2456-3110 ORIGINAL ARTICLE June 2022

already known. Discussion based on *Shastras* about any conceptual or clinical study is always fruitful.

Clinical study incorporates the role and comparison of *Kandughna Mahakashaya Ghan Vati* and *Amritadi Kwatha* in the patients of *Udarda*.

Udarda has been described by all Acharyas. The detailed description in separate chapter is available in Madhavaidana, Bhavprakash, Chakradutta, Sarangdhar Samhita, Yogratanakar and Bhaisjyaratnavali. Udarda has been described with Sheetpitta and Kotha. Udarda has Kapha dominancy. It is caused by contact with Sheeta and Paniya Sansparsh^[10] especially in Shishsir Ritu.^[11] Udarda is characterized by Utsana, Raaq and Kandu.^[12]

Probable mode of action of *Kandughna Mahakashaya Ghan Vati*

Rasa: Out of 10 ingredients 8 have Tikta Rasa which is Kapha and Pitta Shamak.

Guna: *Laghu* and *Ruksha Guna* are predominant in the contents.

Vipaka: Seven contents have *Katu Vipaka* and three have *Madhura Vipaka*.

Overall effect of *Kandughna Mahakashaya* is *Kapha* and *Pitta Shamak*, hence, it is useful in normalizing *doshas* involved in *Udarda*.

Probable mode of action of Amritaadi Kwatha

Rasa: Contents of Amritaadi Kwatha have Katu, Tikta and Kashaya Rasa which are Kaphanashak.

Guna: Laghu and Ruksha Gunas are predominant in Amritaadi Kwatha.

Vipaka : Katu Vipaka is present in all contents except Guduchi.

Hence, overall effect of *Amritaadi Kwatha* is *Kaphnashak*.

Effect of therapy

Kandughna Mahakshaya Ghan Vati (Bar diagram 1)

Patients taking *Kandughna Mahakashaya Ghan Vati* shows significant relief in all the symptoms. 64.99% relief in *Kandu* followed by 54.99% relief in frequency

of attacks, 53.33% relief in *Kandu* and 41.66% relief in *Mandalotpatti*.

Amritadi Kwatha (Bar diagram 2)

Patients taking *Amritadi Kwatha* show significant relief in *Raag* and non-significant relief in other symptoms.

There was 33.33% relief in *Kandu*, followed by 28.332% relief in *Raag*, 28.332% relief in *Mandalotpatti* and 43.332% relief in frequency of attacks.

Intergroup comparison of two groups (Table 2) (Bar diagram 3)

In intergroup study between group 1 and group 2 only *Raag* and *Kandu* shows statistically significant difference, rest of symptoms shows no significant reduction.

Effect of *Kandughna Mahakashaya Ghan Vati* was better than *Amritadi Kwath* in patients of *Udarda*.

CONCLUSION

Udarda is a Vyadhi caused by Kapha dominance. Due to its acute nature Udarda has been a disease a concern. Acharyas has mentioned various formulation for its treatment. Amritadi Kwatha and Kandughna Mahakashaya were found to be effective in Udarda. Kandughna Mahakahsaya was found to be more effective in Udarda.

Table 1: Subjective Parameters

1.	Raag (Erythema)	Before Trial	After Trial
	No	0	0
	Mild	1	1
	Moderate	2	2
	Severe	3	3
2.	Kandu (Itching)	Before Trial	After Trial
	No	0	0
	Mild	1	1

ISSN: 2456-3110

	Moderate	2	2	
	Severe	3	3	
3.	Mandalotpatti (Wheals formation)	Before Trial	After Trial	
	No	0	0	
	Mild	1	1	
	Moderate	2	2	
	Severe	3	3	
4.	Frequency of attacks	Before Trial	After Trial	
	No	0	0	
	Once a week	1	1	
	Alternate day	2	2	
	Daily	3	3	

Table 2: Comparison of trial group 1 and trial group 2

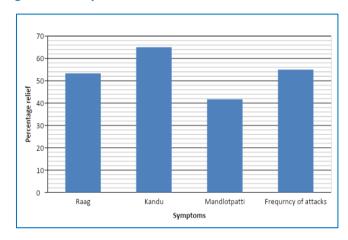
Criteria	N	Mea n	Percent age relief	SD	SE	t	р
Raag	n 1 = 1 0	1.5	53.33%	0.70 7	0.22 4	6.70 8	0.00
	n 2 = 1 0	0.7	28.332%	0.67 5	0.21 3	3.28	0.01
Intergro up	-	-	24.998%	0.69 1	0.30 9	2.58 8	0.01 86
Kandu	n 1 = 1 0	1.8	64.996%	0.63	0.2	9	<0.0 01
	n 2 =	0.8	33.332%	0.78 9	0.24 9	3.20 7	0.01 1

ORIGINAL ARTICLE

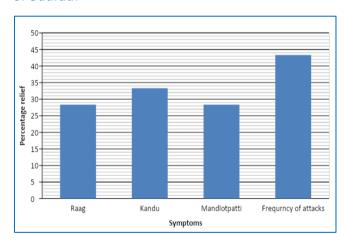
June 2022

	1 0						
Intergro up	-	-	31.664%	0.71 4	0.32 0	3.12 8	0.00 58

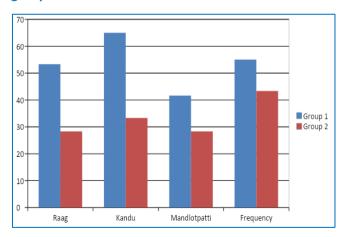
Bar diagram 1: Effect of *Kandughna mahakashaya* ghan vati in patients of *Udarda*.



Bar diagram 2: Effect of *Amritadi Kwatha* in patients of *Udarda*.



Bar diagram 3: Comparison of trial group 1 and trial group 2.



ISSN: 2456-3110 ORIGINAL ARTICLE June 2022

REFERENCES

- Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- Kushwaha H. Sadvirechashatashritiya Adhyaya, Sutrasthan, Chapter 4, Verse 14. Chakrapani teeka on Charaka Samhita. Chaukhamba Orientalia. 2018, p.63.
- Sharma P. Udarda, Kotha and Sheetpitta Chikitsa Adhyaya, Chapter 51, Verse 3. Cakradutta. Chaukhamba orientalia. 2013, p. 410
- 6. Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- 7. Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.

- 9. Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 1. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.283.
- 11. Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- 12. Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.
- 13. Shastri B. Sheetpitta, *Udarda* and Kotha Nidanam, Chapter 50, Verse 5. Madhavnidanam. Chaukhamba Sanskrit Sansthan. 2012, p.284.

How to cite this article: Puneet Sharma, Satish Gandharve, Rajesh Sood. Clinical review on comparative study of two different formulations Amritadi Kwatha and Kandughna Mahakashaya Ghan Vati on the basis of clinical efficacy in patients of Udarda. J Ayurveda Integr Med Sci 2022;5:29-33.

http://dx.doi.org/10.21760/jaims.7.5.5

Source of Support: Nil, **Conflict of Interest:** None declared.

Copyright © 2022 The Author(s); Published by Maharshi Charaka Ayurveda Organization, Vijayapur (Regd). This is an open-access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by-nc-sa/4.0), which permits unrestricted use, distribution, and perform the work and make derivative works based on it only for non-commercial purposes, provided the original work is properly cited.
