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CLINICAL STUDIES ON PEPTIC ULCER AND
ITS TREATMENT WITH PATOLA
(*Tricosanthes dioica* Roxb)



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SUMMARY AND CONCLUSIONS

- (1) Present study has been able to convince that the diseases named Parinamashoola and Annadrava shoola are well correlated with peptic ulcer (duodenal and gastric ulcer) at the level of aetiopathogenesis and clinical features.
- (2) In the pathogenesis of Parinamashoola the role of 'Bali Vayu' resembles with the hypermotility and disturbed motility of gastrointestinal tract which has been hypothesised as one of the main causative factors of

peptic ulcer. The idea "Balashah-Prachyutah" may be compared with the defensive role done by mucus. The predominance of Pitta simulate the hyperacidity or aggressive mechanism described in modern medicine. 'Kapha-pitta-samavritya' is similar with delayed emptying of stomach, stasis of gastric contents and pyloric obstruction.

- (3) Madhava Nidana describes Parinamashoola as a separate clinical entity. The main symptom is shoola (pain) during Parinama Kala (during digestion). This pain is said to be relieved after meal (Bhukta-Matre) or after the completion of digestion (Jeerne-Anne) or by vomiting (Vante). This symptoms complex appears to be very similar to that of peptic ulcer (duodenal ulcer). Synonyms of Parinamashoola are Paktidoshaja shoola, Pakti-shoola and Annavidahajashoola.
- (4) Parinamashoola has been classified into seven clinical varieties according to the doshic involvement. Those are : Vataja, Pittaja, Kaphaja, Vata-pittaja, Vata-Kaphaja, Pitta - Kaphaja and Tridoshaja.

In our study maximum number of patients (50%) were found to be of Vata-pittaja Variety.

- (5) Twenty patients have been studied. The parameters for assessment of etiopathogenesis were - age incidence, sex incidence, occupational incidence, incidence of

(5) religion, dietetic incidence, incidence of addiction, pattern of gastric acidity, modern and Ayurvedic symptoms.

(10) Final diagnosis has been done after consideration of the findings obtained by clinical examination, blood examination, stool and urine examination for routine and microscopic fractional test meal and barium meal x-ray for stomach and duodenum. Some doubts on Barium meal x-rays were eliminated by performing gastroscopy.

(6) All the patients (20) whom were provided radiologically to be the cases of duodenal ulcer, were subjected for clinical trial of Patola (*Tricosanthes dioica*).

(7) Patola (*Tricosanthes dioica*) has been selected as the test drug because of its use mostly in Pittaja disorders, by Ayurvedic physicians from ancient time.

(8) The dose adopted for the clinical trial was 150 ml of the decoction of Patola (*T. dioica*) in 2 divided doses per day for 3 weeks. The parameters for assessment of the result of the treatment were symptomatic relief, reduction of acidity (free and total) and improvement in radiological findings.

- (9) On the basis of clinical study, it is quite obvious that Patola (*T.dioica*) causes remarkable symptomatic relief in peptic ulcer (*Parinamashoola*).
- (10) Patola (*Tricosanthes dioica*) possesses ulcer healing property which has been proved radiologically.
- (11) Though, Patola (*T.dioica*) causes symptomatic relief and ulcer healing property, reduction of free and total acidity is not statistically significant. The 't' and 'P' values for free HCl were : Fasting 't' value - 3.94, 'P' - $\angle 0.01$; First - 't' = $\angle 1.00$, 'P' = $\overline{70.05}$; second 't' = $\angle 1.00$, 'P' = $\overline{70.005}$, Third - 't' = 1.28, 'P' = $\overline{70.05}$, fourth - 't' = 1.31, 'P' = $\overline{70.05}$; fifth 't' = 1.61, 'P' $\overline{70.05}$. The 't' and 'P' values for total acidity were : Fasting 't' = 4.07, 'P' $\angle 0.01$, first - 't' = 2.27, 'P' $\angle 0.05$, second 't' = 1.55, 'P' = $\overline{70.05}$, Third = 't' $\angle 1.0$, 'P' = $\overline{70.05}$, fourth 't' = $\angle 1.0$, 'P' = $\overline{70.05}$, fifth 't' = 1.81, 'P' = $\overline{70.05}$.
- (12) The total response of the treatment with the Patola (*T.dioica*) in the patients of peptic ulcer (duodenal ulcer) were excellent - 50%, good - 35%, poor - 15% and unchanged - 0%.
- (13) The probable mode of action of this test drug is speculated to be the ulcer healing property. Though acid reduction is statistically not significant it reduces both free and total acid to some extent also.

- (14) Thus, we conclude on the basis of above mentioned observations that Patola (*Tricosanthes dioica*) is an effective and a cheaper single herbal drug for the treatment of peptic ulcer.
- (15) It is our earnest hope that the data of above mentioned clinical trial of Patola (*T.dioica*) will stimulate other research workers in the field of gastro-enterology to conduct experimental studies for further verification of its mode of action and efficacy.