Original article

Efficacy of Ayarij Faiqura in Qarah-e-Hazmiya - Randomized controlled Clinical study

Siddiqui MA¹, Quavi A², Quamri MA³

Abstract

Background and Objective: Oarahe Hazmiya (Peptic ulcer disease) is one of the commonest ailment of Gastro intestinal tract, reported to affect around 4% of the population and 10% of people developed it at some point in their life. Etiopathology of the disease is considered as multi factorial mostly treated with medications and rarely with surgery. Several Unani formulation have been indicated effective in Qarahe Hazmiya, one of such formulation has been selected to evaluate its efficacy and to validate the same on scientific parameters *Methods*: This study was conducted as a single blind, randomized standard control clinical trial on 28 patients (n=20) in test and (n=8) control groups. Test group received Ayarij Faiqura 5gm and control group received Pantoprazole 40 mg, orally in empty stomach for 45 days. The study outcome was assessed as the difference in pre and post treatment through subjective and objective parameters. Result: The test drugs revealed statistically significant improvement in burning sensation in abdomen (p<0.0001), pain abdomen (p<0.0001) as subjective parameters in comparison to control group where as objectivecally endoscopic report showed significantly improvement (p<0.0196) in comparison to control group with respect to the healing of ulcer / erosions. Interpretation and conclusion: The study revealed that the test drug had good response in controlling burning sensation and pain abdomen, along with healing of ulcer / erosions in comparison to control drug. No side effect or toxicity was observed during and or after the study. Thus, it could be concluded that the test drug was found to be safe and effective without any adverse effect.

Keywords: Qarah-e-Hazmiya; PUD; Ayarij Faiqura; Pantoprazole; Unani Medicine

DOI: http://dx.doi.org/10.3329/bjms.v17i1.35291 Bangladesh Journal of Medical Science Vol. 17 No. 01 January'18. Page : 112-117

Introduction:

Qaraha-e-Hazmiya (Peptic ulcer disease), also known as a gastric ulcer or duodenal ulcer, it is a break in the lining of the stomach, first part of the small intestine, or occasionally the lower esophagus.¹ It affects 4 million people worldwide annually, the incidence of PUD has been estimated at around 1.5% to 3%.² About 10% of people develop peptic ulcer at some point in their life.³ Etiopathology of the disease is considered as multi factorial such as H.pylori, spicy food, smoking, alcoholism, NSAIDs, stress, genetic factors etc.^{4,5} Symptoms of PUD include abdominal pain, upper abdominal discomfort, bloatedness, feeling of fullness, vomiting, weight

loss.¹ Medical management as offered by western system of medicine contains various antibiotics, PPIs (Pantoprazole, Lansoprozole, and Omeprazole etc), H₂ receptor blockers (Ranitidine, Famotidine, Cimetidine etc) and antacids, ⁶ which can provide time being relief only. Unani scholars have used the term as *Qarahe Medah* for ulcer of stomach, later on term *Qarahe Asna ashri* was a coined term for duodenal ulcer which is caused by Khilt laze or safra-e-had.⁷ In Unani System of Medicine ulcer of the gastric mucosa (Qarahe Hazmiya) was treated with several Unani formulations which possess activities like Mundammil-e-Qurooh (drugs that heal ulcer, Maniye ufoonat (antiseptic), Dafe

- 1. MA Siddiqui, HoD of Moalajat & Director, National Institute of Unani Medicine-Bengaluru-91
- 2. Abdul Quavi Prof. Dept. of Surgery, Government Unani Medical College, Allahabad-16
- 3. Mohd. Aleemuddin Quamri Reader, Dept. of Moalajat, National Institute of Unani Medicine-Bengaluru-91

<u>Correspondence to:</u> Dr. Mohd.Aleemuddin Quamri, Reader, Dept. of Moalajat, National Institute of Unani Medicine-Bengaluru-560091, Email ID:drmaquamri@gamil.com

Humuzat (antacids), Muqawwi-e-Meda (tonic for Test Drug Composition: stomach), Maniye Insebaabe Mavaad hadda (drugs that stop accumulation of pus) indicted for PUD like symptoms which is used by Zakaria Rhazi.^{7,8,9} Avarij Faiqura is a poly herbal Unani pharmacopeal preparation has been selected and hypothesised to evaluate its efficacy and to validate Unani the same on scientific parameters this study is conducted

Material and methods:

A randomized single blind standard controlled clinical trial was conducted at the O.P.D of N.I.U.M, Bengaluru after the approval of the protocol by the Institutional Ethical Committee of National Institute of Unani Medicine, Karnataka.

Inclusion Criteria: Diagnosed cases of Qarahe Hazmiya confirmed by endoscopy, patients of either sex, age between 20 to 70 years. Exclusion criteria: patients below 20 and above 70 years of age, pregnancy and lactation, gastrinoma (Zollinger Ellison Syndrome), Carcinoma of the gastrointestinal tract, haemetemesis and maelena, gastric or duodenal perforation, cirrhosis of liver, diabetes mellitus, hypertension, severe respiratory diseases, cardiovascular diseases, renal diseases, reflux oesophagitis, hiatus hernia with the investigation of esophageogastro duodenoscopy (EGD) and withdrawal criteria failure to follow the protocol any side effect or reaction or drop out.

A total of 70 subjects of PUD were screened and 30 patients fulfilling the inclusion criteria were assigned to the test and standard controlled group by simple randomization method after taking voluntary informed consent. 20 subjects were allocated to test and 8 subjects to the standard control group. Subjective parameters (pain in upper abdomen, burning sensation after meal, vomiting, bloating) were assessed with VAS at baseline and follow up visits (0th ,15th, 30th and 45th days) and objective parameters (Oesophageo gastro duodenoscopy) were carried out on pre and post (i.e. 0th and 45th days) study period. The assessment of safety of treatment was done by the clinical assessment at every visit of follow up and biochemical assessment before and after treatment like Biochemical parameters Complete Blood Picture Blood urea, Serum creatinine, SGOT, SGPT, S. Bilirubin, Blood sugar, Stool for routine, microscopic and occult blood.

S. NO	Unani Name	Scientific Name	Quantity
1	Sibr	Aloe barbadenesis	3334 mg
2	Mastagee	Pistascia lentiscus	238 mg
3	Ood-e-Balsan	Commiphora opobalsamum	238 mg
4	Habb-e-	Commiphora opobalsamum	238 mg
	Balsan	Commpnora opoolasamam	2.50 mg
5	Darchini	Cinnamomum zeylanicum	238 mg
6	Sumbul-Ut-	Nardostachys jatamansi	238 mg
	Tib	ivaraosiacnys jaiamansi	
7	Asaroon	Veliriana welchi	238 mg
8	Saleekha	Cinnamomum cassnablume	238 mg

Test group was given Ayarij Faiqura 7, 8,9,10 in a dose of 5 g once a day in powder form and the control group was given Pantocid 40 mg, once orally a day before meal for 45 days.

Result:

A total of seventy patients were recruited and screened over a period of 16 months, out of which 28 eligible patients (23 males, 5 females) with a mean age of (40.57±6.85) years were enrolled into the study. Patients were divided into two groups of 20 in test and 8 in control group.

The median VAS Score of burning sensation in abdomen in control group was 8[8,8] on base line (0 day) and 3[2,5] on 45th day, whereas in test group the median score was 8[7,8] on baseline (0 day) and 0[0,3] on 45th day. When the median VAS Score of two groups were compared statistically using Friedman test with Dunn pair comparison test for intra-group comparison and Krushkall Wallis for inter group comparison, it was found that the median VAS Score at 30th and 45th day in control group was reduced significantly (P<0.01) when compared with median VAS Score0th day of control group. Median VAS Score of test group at 15th day, 30th day and 45th day were reduced significantly (P<0.01) when compared with median VAS Score 0th day of test group. When median Visual Analogue Scale Scores of two groups were compared with each other, it was found that the test group significantly (P < 0.01) reduced the scores when compared with median VAS Score at 45th day.

Discussion:

Ayarij Faiqura is one of the compound Unani formulation prescribed since the period of Hippocrates. ^{7,8,9,10} The name contains two parts Ayarij and Faiqura which means Shareef (noble) and bitter respectively. Ayarij Faiqura is also known as Dawae Elahi for various reasons of its effects are

innumerous in the management of various ailments. ¹¹ It has been in use for long time for various therapeutic effects Mundammile Qurooh, Maniye ufoonat, Maniye Insebaabe Mavaad hadda, Dafe Humuzat, and Mugavie Medah wa Am'ma.^{7, 11} This result consistent with the effect of Ayarij Faiqura that possesses a good number of herbs which are Musakkin alam like Asaarun, Saleekha as stated by Najmul Ghani Hkm and. Mohd Abdul Hakeem^{12,} and Muhallile Auram like Sibr. Darcheeni as claimed by and cooling¹⁴ effect of *Sibr*, *Asaarun*, *Saleekha*. The result indicates that both, control and test drugs, are effective in reducing the burning sensation in abdomen, while the test formulation is more effective than control drug. This result also revealed with the finding of Panahi Y et al (2015) and Umar WRS (2016).15,16

The median VAS score of abdominal pain in control group was 8[5,8] on base line (0 day) and 3[1,5] on 45th day, whereas in test group the median VAS score was 8[7,8] bon baseline (0 day) and 0[0,3] on 45th day. When median VAS Score of two groups were compared statistically, using Friedman test with Dunn pair comparison test for intra group comparison and Krushkall Wallis for inter group comparison, it was found that the median VAS Score at 30th and 45th day in control group was reduced significantly (P<0.01) when compared with median VAS Score 0th day of control group. Median VAS Score of test group at, 30th day and 45th day were reduced significantly (P<0.01) when compared with median VAS Score 0th day of test group. When median Visual Analogue Scores of two groups were compared with each other, it was found that the test group were significantly (P < 0.01) reduced the scores when compared with median VAS Score at 45th day. This result coincides with the effect of Avarij Faiqura that possesses Muhallile Auram drugs like Sibr and Balchhar according to Allama Najmul Ghani and¹³Ibn Baitar.¹⁴ The result shows that both control and test drugs are effective in reducing the abdominal pain, while the test formulation is more successful than control drug. This result accordance with the effect of Ayarij Faigura that possesses a good number of herbs which are Muqawwi medah, Muhallile Varm, Mudammile Qurooh and Kasirur Riyah such as Sibr, Darcheeni, Mustagee, Balsan.¹², ¹⁴Ulcer healing was assessed by endoscopic report of 14 patients out of 20 in test group showed complete healing after 45 days of drug administration, while in 6 patients no significant response was observed. In control groups report of endoscopy, only one patient

showed complete healing, while no significant change was observe in remaining [Figure 2.]. The two groups were compared using chi-square (x^2) test with Yate correction and was found that the test group showed significantly (p < 0.0196)better cured when compared with the control in respect to the healing of ulcer. This result concurs with the effect of Avarij Faigura that contains copious herbs with potent medicinal properties like Mudammile Qurooh, Mujafife Qurooh, Mohallil, Dafe ufoonat, Jaali, jazib such as Sibr ,Darcheeni, Asaarun, Balchhar, Mustagee as described by Unani scholars.^{7,8,10, 11} During the course of the trial some patients complained of burning in anus while passing stools and one patient complained of mild per rectal bleeding. The patient who complained of per rectal bleeding was excluded from the trial. About Avarij Faigura Ibn Sina had stated that some time patients complain of per rectal bleeding and burning in anus due to sehaj amaa because of its mushil effect. He advocated adding Izkhar and Vard for preventing this adverse effect of Avarij Faiqura. We have taken formula of Ayarij Faiqura from National Formulary of Unani Medicine. The safety parameters assessed for patients were Hb%, TLC, Blood urea, Serum creatinine, SGOT, SGPT, ESR, FBS and S Bilirubin. The data was analyzed using paired t test. There was no significant difference (p>0.05) between pre and post treatment for each safety parameters.

<u>Conclusion:</u>

Qarahe Hazmiya is one of the commonest diseases affecting the Oesophageo- gastrodeudenal tract. This is more common in south India. Patients of Qarahe Hazmiya have the complain of discomfort due to pain in abdomen, belching, bloating, burning sensation. Males are more affected than females due to use of beverage, smoking, alcohol and spicy food, and Helicobacter pylori and Khilt lazze. The overall result of test drug was found quit encouraging in the treatment of *Qarahe Hazmiya*. Significant improvement was observed in burning sensation of abdomen, pain in abdomen and on objective parameter i.e. endoscopy results revealed good effect in healing of ulcer or erosion. The result is $x^2 = p < 0.019$. No adverse effect was observed in the test group and overall observance to the treatment was found admirable.

Acknowledgement: Work is duly acknowledged to Dept. of Moalajat.

Conflict of Interest: NIL

an the two groups are shown in below.				
S.No	Content	No. of Patients		
1	Age	40.57±6.85		
2	Sex-M/F	23/5		
3	Dietary Habits-Mixed/ Vegetarian	22/6		
4	History of NSAIDs-Present/ Absent	26/2		

 Table No-1: The demographic characteristics of comparison
all the two groups are shown in below:

Table No-2: Effect of test drug on Burning **Sensation and Abdominal Pain**

Subjective Parameters	Groups	0 day	15 th day	30 th day	45 th day
Burning	Control (Pantoparzole)	8[8,8]	5[5,8]	5[2,5]*	3[2,5]*
sensation	Test (Ayarij Faiqura)	8[7,8]	5[4,5]+	3[0,4]+	0[0,3]+, * ,∆
Abdominal	Control (Pantoparzole)	8[5,8]	5[5,8]	5[3,5]*	3[1,5]*
pain	Test (Ayarij Faiqura)	8[7,8]	5[4,5]	3[0,4] *,+	0[0,3]+,*,Δ

Comparison and Kurshkall wallis for intergroup

 \square *p <0.01 with respect to control 0 day

 \square +p<0.01 with respect to test0 day

 $\Box \Delta p < 0.01$ with respect to control on 45th day

Test used Friedman test with Dunn" pair

comparison test for intra group

Comparison and Kurshkall wallis for intergroup comparison

 $\square *p < 0.01$ with respect to control 0 day

 \square +p<0.01 with respect to test0 day \triangle p < 0.01 with respect to control on 45th day

Table No-3: Effect on Gastroduodenal ulcer / **Erosion by Endoscopic report:**

Group	No. of patients with ulcer / Erosion	Cured	Not Cured
Control Pantaparazole)	8	1	7
Test (Aiyarij Faiqura)	20	14	6

Test used x^2 with Yate Correction with P<0.0196.

Case -01 (Test Group)

Case -02 (Test Group)



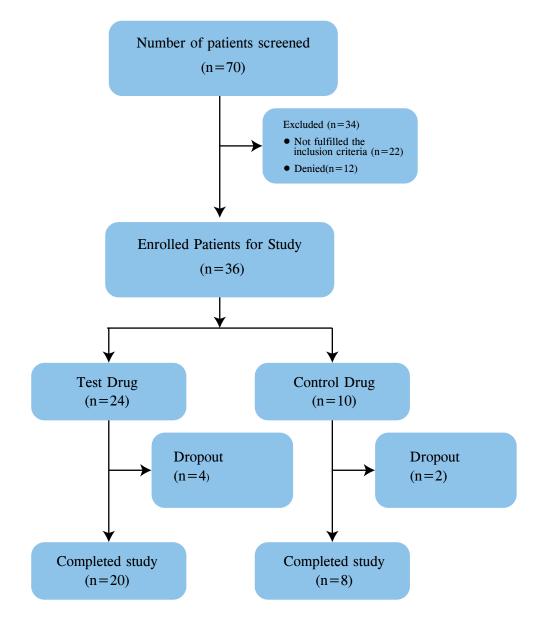


Figure No. 1: Flow diagram of the study

References

- 1. Roy S. Clinical Study of Peptic Ulcer Disease. Asian Journal of Biomedical and Pharmaceutical Sciences.2016; 6(53):41-43.
- Chung KT, Shela VG. Perforated peptic ulcer an update. World J Gastrointest Surg. 2017; 9(1):1-12.
- Oliveria FDA, Andrade LN, Sousa EBV, Sousa DP. Anti-Ulcer Activity of Essential Oil Constituents. Molecules. 2014; 19:5717-5747.
- Ford AC, Gurusamy KS, Delaney B, Forman D, Moayyedi P.Eradication therapy for peptic ulcer disease in Helicobacter pylori-positive people. *Cochrane Database Syst* Rev. 2016 Apr 19; 4:CD003840. doi: 10.1002/14651858.CD003840.pub5.
- Kim HU. Diagnostic and Treatment Approaches for Refractory Peptic Ulcers. *Clin Endosc.* 2015; 48:285-290.
- Lin HJ. Role of proton pump inhibitors in the management of peptic ulcer bleeding. <u>World J Gastrointest Pharmacol</u> <u>Ther</u>. 2010; 1(2): 51–53.
- Baghdadi IH. Kitabul Mukhtarat Fit Tib. Part 2. Central Council for Research in Unani Medicine, New Delhi .2005:346-347.

- Kabiruddin A. Al-Qarabadin. Central Council for Research in Unani Medicine, New Delhi.2006:30.
- Rhazi Z. Kitabul Mansuri. Central Council for Research in Unani Medicine, New Delhi. 1991:359-360.
- 10. Jurjani I. Tarjuma e Zakheera Khwarzam Shahi. Idara Kitab Us Shifa New Delhi. 2011.
- 11. Sina I. Al Qanun Fit Tib (Urdu).Vol-5. Idara Kitabush Shifa, New Delhi. YNM: 1484-1485.
- Baitar I. Al Jameul Mufradat Al-Advia wa Al Aghzia. Part-3. New Delhi. CCRUM.1999; 170-175.
- Ghani N. Khazainul Advia. Idara Kitab Us Shifa New Delhi.YNM:308-312.
- 14. Hakeem HMA. Bustanula Mufardaat, Idara Kitabu Shifa. New Delhi.2002:106-107.
- 15. Panahi Y, Khedmat H, Valizadegan G, Mohtasami R, Sahebkar A. Efficacy and safety of Aloe vera syrup for the treatment of gastroesophageal reflux disease: a pilot randomized positive-controlled trial. *Journal of Traditional Chinese Medicine*.2015; **35**(6):632-636.
- Umar WRS, Sheu MN.Preliminary study on the ulcerogenic effect of the crude extract of aloe vera administered to ulcer-induced albino rats. *Journal of Pharmacognosy and Phytochemistry*. 2016;5(1): 8