Liv.52 in the Management of Various Hepatic Disorders — A Study of 53 Cases

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INTRODUCTION

The liver hold a position of singular importance in the human system. It effectively control the numerous metabolic processes via the "Metabolic Pool" by its secretory and excretory functions, plasma protein synthesis, reticuloendothelial storage and other important functions. Its metabolic functions include detoxification and active participation in the metabolism of proteins, fats, carbohydrates, minerals and water. Diseases of the liver throw the entire system out of gear. So also many systemic diseases are responsible for affections of the liver. In spite of the tremendous strides in modern medicine, as yet there is no drug developed in modern medicine that stimulates the functions of the liver, protects it from damage or helps in the regeneration of hepatic cells. Clinical studies including therapeutic functional results or response, and acute and chronic toxicity studies have shown Liv.52 to be an effective therapeutic agent as reported in many research studies.

Cirrhosis of the liver, enlarged liver either due to fatty changes or cloudy degeneration due to some toxic causes, Indian childhood cirrhosis, chronic active hepatitis and other cases of supposed liver affection or enlargement were studied in this series. The therapy of these and other conditions still remains limited in spite of the advances in knowledge of etiological factors, pathogenesis, diagnosis etc.

Liv.52 is reported to improve the hepatic cell function, act as a hepatic stimulant, anabolic, choleretic and as a corrective and curative in many hepatic disorders including pre-cirrhotic and early cirrhotic conditions, enlarged or toxic liver, infantile liver disorders, nutritional disorders, hyperlipaemia etc.

Composition

Each ml of Liv.52 drops or 2.5 ml of Liv.52 syrup contains:

Exts.	Capparis spinosa	17 mg
	Cichorium intybus	17 mg
	Solanum nigrum	8 mg
	Cassia occidentalis	4 mg
	Terminalia arjuna	8 mg
	Achillea millefolium	4 mg
	Tamarix gallica	4 mg

Processed in Eclipta alba, Phyllanthus niruri, Boerhaavia diffusa, Tinospora cordifolia, Berberis aristat, Raphanus sativus, Phyllanthus emblica, Pulmbago zeylanica, Embelia ribes, Terminalia chebula, Fumaria officinalis.

Each Liv.52 tablet contains:

Exts.	Capparis spinosa	65 mg
	Cichorium intybus	65 mg
	Solanum nigrum	32 mg
	Cassia occidentalis	16 mg
	Terminalia arjuna	32 mg

Achillea millefolium 16 mg Tamarix gallica 16 mg Mandur bhasma 33 mg

Processed in Eclipta alba, Phyllanthus niruri, Boerhaavia diffusa, Tinospora cordifolia, Berberis aristata, Raphanus sativus, Phyllanthus emblica, Plumbago zeylanica, Embelia ribes, Terminalia chebula, Fumaria officinalis.

MATERIAL AND METHODS

Sixty two cases of liver disorders were admitted at the Vivekananda Hospital, Latur (Maharashtra) and are included in the study. Diagnosed cases of infective hepatitis were not included in the study. Out of 62 cases, 9 cases were excluded as there were six cases of liver cell (hepatic) carcinoma, and one each of amoebic hepatitis, Wilson's disease and myeloid leukaemia as the diagnosis was confirmed by hepatic biopsy and histological studies. Thus 53 cases were studied in the final study reported in this paper.

On admission careful history, symptoms, signs and clinical findings were noted. Blood counts, urine examination, liver function tests and other investigations were performed. Liver biopsy with VIM-Silvermann needle was performed in all cases at suitable times during their illness. The histopathological studies and reports were carefully studied and analysed.

Signs and symptoms, and biochemical tests were recorded after a few days and the results were tabulated as "Good", "Fair" and "Poor" on the basis of fixed criteria. The side or toxic effects of Liv.52, if any, were carefully looked for and noted.

All the patients were put on conventional line of treatment according to their main affliction. In addition they were given Liv.52 concentrated drops, one teaspoonful t.i.d., until fair regression of symptoms and signs. Later on they were maintained on Liv.52 tablets, 2 t.i.d. The response was judged as "Good" when there was total clinical improvement, regression of signs and biochemical findings: "Fair", when there was partial clinical improvement and regression of signs; and "Poor" when there was no change in the clinical status.

Out of 53 patients, 27 were below the age of 40 years and 25 between 41 - 60 years. There were 39 males and 14 females (See Table 1).

Table 1: Age in years and sex distribution						
Sex	Below 10 years	11-20 years	21-40 years	41-60 years	Above 60 years	Total
Males	3	5	11	19	1	39
Females	0	2	6	6	0	14
Total	3	7	17	25	1	53

Forty two cases complained either of anorexia or occasional nausea or vomiting. Seven presented themselves with jaundice and 14 had swelling of the feet and 11, swelling of the abdomen (See Table 2). For diagnostic signs see Table 3.

Table 2: Symptoms		
Symptoms	No. of cases	
Anorexia or vomiting	42	
Swelling of feet	14	
Swelling of abdomen	11	
Jaundice	7	

Table 3: Diagnostic Signs		
Signs	No. of cases	
Hepatomegaly	36	
Splenomegaly	21	
Ascites	11	
Oedema of feet	14	
Icterus	7	

The histological studies were done by a competent histopathologist after careful liver biopsy. Detailed study and analysis of the histopathological findings revealed the following final diagnosis of each of the cases after correlation with the clinical and histopathological findings. Table 4 shows the final diagnosis (nine cases as earlier reported in histological examination were excluded from this present study).

Table 4: Histological diagnosis		
Diagnosis	No. of cases	
Portal cirrhosis	26	
Normal liver	7	
Fatty liver	7	
Cloudy degeneration of liver	4	
Indian childhood cirrhosis	4	
Chronic active hepatitis	3	
Non-cirrhotic portal fibrosis	2	
Total	53	

As per the laid down criteria already discussed, the results were carefully analysed and classified and are presented here in Table 5.

Table 5: Final results of Liv.52 therapy on histopathological diagnosis				
Diagnosis	Good	Fair	Poor	Total
Portal cirrhosis	_	14	12	26
Normal liver	7	_	_	7
Fatty liver	6	1	_	7
Cloudy degeneration of the liver	4	_	_	4
Indian Childhood cirrhosis	_	2	2	4
Chronic active hepatitis	1	2	_	3
Non-cirrhotic portal fibrosis	_	_	2	2
Total	18	19	16	53

Out of 53 cases of liver disorders studied, seven cases showed a normal hepatic histopathology. The results in portal cirrhosis portal fibrosis depend on the stage of the disease, i.e. how far advanced. Liv.52 has given very salutary results in cloudy degeneration of the liver and in fatty liver, and in liver damage due to undefined aetiology. Chronic active hepatitis is a difficult condition to treat once it has developed but out of these cases, one responded well and two in a fair manner.

DISCUSSION

The liver is a vital organ and its proper functioning is essential for a normal or healthy life. Many conditions affect the liver. In most cases the damage to the hepatic parenchyma may be gradual or in some cases it is sudden. Once the damage has been done and the cells have been damaged markedly, the damage is irreversible. In most of the cases, either with partial or marked liver damage, the general condition of the patients and their signs and symptoms remarkably improved. No side-effects of Liv.52 were observed during the study and it was found to be a safe drug to use in high concentrations and for a long time.

After reports of several animal experiments, clinical studies, double blind studies and controlled clinical and histopathological observations, we are happy to note and confirm our clinical and critical evaluation after histopathological studies. It may be relevant to note that Liv.52 is a very useful drug in many disorders with functional disturbance of the liver without manifestation of any clear cut disease or symptomatology.

In conclusion our results of the extensive use of Liv.52 are very salutary. There was good subjective and objective improvement in all patients with cloudy or fatty changes in the liver and in a large number of patients with cirrhosis. Liv.52 drops were more effective in established cases. Liv.52 seems to be a good adjuvant in these and other liver diseases. Apart from being economical and reliable, it is virtually free from any short- or long-term toxic or side effects.