

Anorexia in Osteoarticular Tuberculosis

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INTRODUCTION

A pathological repulsion of ingestion of food in osteo-articular tuberculosis is quite a common problem as in any other form of tuberculosis. This in addition to the tubercular toxæmia may lead in some cases to severe cachexia and debility – more so when this chronic illness compels the patient to prolonged recumbency, does the picture become very gloomy. The anorexia in some cases may be of such an exasperating nature that intervention becomes necessary.

There is a wide range of appetisers, stomachics, elixirs and tonics of both alcoholic and non-alcoholic nature. Here we have tried to evaluate the efficacy of Liv.52 on anorexia due to osteoarticular tuberculosis.

MATERIAL AND METHODS

The subjects were 95 patients who were admitted in the Orthopaedic Ward as clear-cut cases of osteoarticular tuberculosis during the last two years, and who were studied and followed up for three weeks during their hospital stay. The diagnosis was based on history and clinical and radiological examination. Cases of doubtful diagnosis were carefully excluded from the study. A group of 20 patients were taken as control and were given coloured sugar syrup (Placebo). The study was double-blind i.e. neither the patient nor the doctor knew which patient was getting the placebo and which the genuine drug. The Staff Nurse was deputed to distribute the placebo and drug marked as A and B respectively. A day to day record was maintained about the subjective state of appetite. Observations were recorded and response was noted as good, satisfactory and poor. The drug was administered in doses of one to two teaspoonfuls thrice a day. The duration of treatment was ten days. Those case where the appetite returned within four days were labelled as “Good” those showing it from the 5th to the 8th day were “satisfactory” and those where the response was insignificant or absent even after eight days were labelled as “poor”.

The sustained effect of the drug was also observed. Those patients who retained good appetite even after ten days of withdrawal of the drug were put in the “good sustained effect group” while those where the effect of the drug tapered off in one week of discontinuation were put into the “poor sustained effect group”.

The trial was conducted at the beginning of the hospitalisation and treatment along with streptomycin, isonex, and thiacetazone so that the improvement in the appetite due to control of the tubercular process may be carefully excluded from the improvement of the appetite due to the trial drug. Improvement in appetite due to the control of the tubercular process with anti-tubercular drugs usually takes a minimum of 10 days.

No other tonic or alcohol-containing drug was administered during this study, multivitamin and iron tablets were, of course, included in the treatment regime as supportive therapy.

OBSERVATIONS

In all 95 cases were studied. Twenty patients were taken as control (receiving drug A) while 75 patients received drug B. Age of the patients varied to a considerable extent. The youngest was of one year, while the oldest was 60 years of age. All types of cases of osteoarticular tuberculosis were taken up.

A total of 63 patients showed good or satisfactory response to the drug. These patients were utilised to see whether the effect of the drug was sustained even after its discontinuation. The observations are recorded in Tables I, II and III.

Sl. No.	Description	No. of patients
1.	Number of patients who were given drug A (Placebo)	20
2.	Number of patients who were given drug B (Liv.52 Syrup)	75
Total No. of patients studied		95

Sl. No.	Group	No. of patients	Good		Satisfactory		Poor	
			No. of patients	% age	No. of patients	% age	No. of patients	% age
1.	Group A	20	–	–	3	15	17	85
2.	Group B	75	36	48	27	36	12	16
Total		95	36	–	30	–	29	–

Sl. No.	Description	Good sustained effect		Poor sustained effect	
1.	Patients showing good response	28	77.78%	8	22.22%
2.	Patients showing satisfactory response	20	74.07%	7	25.93%
Total		48	76.4%	15	23.6%

No untoward side effects were noticed in 10 days' therapy.

DISCUSSION

The fact that only three patients (15%) showed satisfactory response in the improvement of appetite after ingestion of drug A (placebo) indicates that the psychological impression of taking a tonic is insignificant as compared to 48% 'good' and 26% 'satisfactory' effect of "Liv.52" on appetite. Only a small number of 12 patients (16%) did not show any response to the drug in spite of 10 days' therapy. It was observed that these patients were of the older age group and were apathetic towards their surroundings and were depressed in general. Younger patients showed excellent results. It is probably on this account that Mohan and Reddy (1975) got as high as 84% successful results with this drug in a trial of 100 patients of divergent ailments in the paediatric age group.

It is also remarkable that the effect of the drug is sustained even after the withdrawal of the drug. Out of 66 patients who showed good and/or satisfactory response to the drug, 28 (42.4%) showed good sustained effect and 20 (23.6%) showed satisfactory sustained effect. It is only in 12 patients (15%) that the effect of the drug wore off rapidly. However, only further studies can throw more light on the mode of action of Liv.52 on the immediate and sustained effect on appetite.

CONCLUSIONS

1. It is free from toxicity or any other side effects.
2. It has shown good results in improving appetite in cases of anorexia due to tubercular toxæmia.
3. Its effect is persistent after withdrawal of the drug.