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Studies with Liv.52 in Infective Hepatitis

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INTRODUCTION

Liv.52, an indigenous product has been widely used clinically in various hepatic disorders for the last eight years. The drug has been tried in cases of diffuse hepatic fibrosis and portal hypertension (Mathur, 1957). Patrao (1957) found Liv.52 to be very useful in severe hepatic damage and recommended its use for its treatment. Sule and Sathe (1957) observed marked clinical improvement, as well as improvement in liver function tests brought about by Liv.52 in cases of severe hepatic damage. Vyas (1960) noted a decrease in cellular infiltration and necrotic changes in some cases of infantile cirrhosis. Sheth *et al* (1960) showed that Liv.52 afforded quite a considerable protection against hepatic damage caused by carbon tetrachloride in rats. A number of experimental studies have been carried out on mice (Joglekar *et al* 1963) on dogs (Murkibhavi *et al* 1957) and on rats (Karandikar *et al* 1963). These studies suggest the protective action of Liv.52 against hepatotoxicity. Patel *et al* (1963) showed its efficacy in acute hepatic toxicity. Liv.52 has been reported to be effective in anorexia of varying causes, including malnutrition by Sheth *et al* (1963), Athavale (1966), Saxena (1971) and Indira Bai (1970), Prasad (1969), Dayal (1970). Arora (1969) added Liv.52 to the usual treatment of infectious hepatitis and reported that it adds materially to the patient's comfort and accelerates the recovery. Jaffari and Shyam Raj (1969), tried Liv.52 in cases of infective hepatitis and observed good response clinically as well as in liver function tests. Sule *et al* (1968) also observed marked clinical improvement in cases of infective hepatitis. A marked improvement was seen in relieving the symptoms of nausea, vomiting, loss of appetite and abdominal pain with diarrhoea and constipation.

The present trial of Liv.52 has been carried out in 27 cases of infective hepatitis to assess its therapeutic response. The study was carried out over a period of 1½ years.

Each Liv.52 tablet contains :

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

(Prepared in the juices and decoctions of various hepatic stimulants).

MATERIAL AND METHODS

There were 27 cases of infective hepatitis in the present series. The common presenting features were, yellow discolouration of skin and sclera, fever, loss of appetite, passage of dark coloured

urine and pain in abdomen. The common signs observed were jaundice and hepatomegaly in all cases.

Laboratory tests included the following investigations :

1. Urine for bile pigments and bile salts.
2. Haemoglobin percentage.
3. Total and differential white blood cell count
4. Serum bilirubin.
5. Total serum protein, albumin and globulin.
6. Van den Bergh's reaction.

Liv.52 tablets 2 t.i.d. were administered.

OBSERVATIONS

An improvement in the general condition and appetite were observed in all cases. Jaundice regressed and cleared by 3 weeks. Diminution in the size of the liver was quite significant. Serum bilirubin level was also significantly reduced.

DISCUSSION

Till recently, treatment has had little effect in altering the course of an ordinary case of infective hepatitis. Till today various drugs have been tried as therapeutic measures and various authors have claimed beneficial results with different drugs.

Liv.52 an indigenous proprietary medicine was claimed to be a hepatic stimulant : Kirtikar and Basu (1963), Sheth *et al* (1960), Joglekar *et al* (1963), Karandikar *et al* (1963), Patel *et al* (1963) have shown protective effects of Liv.52 against hepatotoxic agents.

In the present trial there was clinical improvement in relieving the symptoms of nausea, loss of appetite and abdominal pain. Jaundice regressed, liver size reduced and serum bilirubin was also lowered.

None of the cases treated with Liv.52 showed any untoward toxic symptoms.

SUMMARY

A clinical trial of Liv.52 was carried out in 27 cases of infective hepatitis. Clinical improvement was noticed in all cases. Jaundice regressed.

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