

Clinically Evaluation of an Herbal Medicine Acidom in Hyperacidity

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ABSTRACT

The present study investigated effect of the herbal formulating acidom syrup in hyperacidity. Hundred patients of age group of 25-65 years from the OPD at Al-qudratmatab, Ali Apartment Defense phase- 1, Karachi were evaluated in this trial. Total hundred subjects were inducted in this trial in which male and female ratio was 70 and 30 correspondingly. The determinations of selection of patients were depended on clinical symptoms and endoscopic report. Acidom syrup two tea spoons thrice daily were prescribed for 4 weeks. There was no untoward side effect in any of the patients. Almost all cases got remarkable relief in their symptoms.

Keywords: Acidom, endoscopy, hyperacidity, response.

INTRODUCTION

Hyperacidity is a condition that occurs in many diseases occurs due to an inordinate development of corrosive in the stomach connected with a smoldering sensation in the throat and heart zone. This condition shows up in numerous maladies running from gastritis and peptic ulcers to the at present named gastro-esophageal reflux ailment (GERD).

Peptic ulcer illness (PUD) is a standout amongst the most widely recognized gastrointestinal issue, which causes a high rate of dismalness [1]. Peptic ulcer malady extensively alludes to a gathering of disarranges portrayed by the vicinity of ulcers in any bits of gastrointestinal tract, presented to corrosive in adequate span and focus in spite of the fact that this ulceration most usually happens in the small digestive system (duodenal ulcer) or stomach (gastric

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ulcer). The most well-known types of peptic ulcers are gastric ulcer, duodenal ulcer. The dominant part of gastric ulcer can be ascribed to either H. pylori or NSAIDs prompted mucosal harm. Gastric ulcer that happens in the pyloric territory or those in the body connected with a duodenal ulcer.

The patho-physiology of PUD includes an irregularity between hostile (corrosive, pepsin, and H. pylori) and guarded variables (mucin, prostaglandin, bicarbonate, nitric oxide and development components) [2]. An expected 15,000 mortality reported every year as a result of peptic ulcer [3]. Ulcers were already thought to be just because of expansion in hostile variables corrosive and pepsin, however it has been found that corrosive emission in either typical or beneath ordinary in gastric ulcer patients, and that 40-70% instances of duodenal ulcer patients show causticity inside of ordinary reach, recommending that different elements

are additionally included in ulcerogenes[4].

The lifetime prevalence of peptic ulcer disease is 5-10 %. The treatment of peptic ulcer includes diminishing the discharge of corrosive with H₂-receptor antagonist or proton pump inhibitor, killing emitted corrosive with acid neutralizers and enhancing the mucosal protection mechanism by cytoprotective agents. In spite of the fact that these medications have realized exceptional changes in ulcer treatment however adequacy and security of these medications are still questionable. Writes about clinical assessment of these medications demonstrate that there are occurrences of recurrence, unfriendly impacts and peril of medication collaborations amid ulcer treatment [5,6]. As of late, concentrate on plant research has expanded everywhere throughout the world and a huge group of confirmation has been gathered to demonstrate the great capability of restorative plants utilized as a part of different conventional frameworks. The greater part of the natural medications utilized as a part of the administration of peptic ulcer have been accounted for to lessen the hostile elements, they have been turned out to be protected and successful and demonstrated better patient resistance. Henceforth, utilization of normal medications alone or in mix with different medications ought to be truly considered in the administration of PUD.

The present study explored the role of acidom syrup in hyperacidity treatment. Clinical exploration has affirmed the viability of a few restorative plants for the medication of gastric disorders, and basic scientific research has uncovered many of the mechanisms to explain their therapeutic effects [7].

Herbal formulation

In Unani arrangement of pharmaceutical various medications both single and compound are being used for the treatment of gastritis, gastric ulcer and associated disorders. The polyherbal

formulation acidom was contains the following herb *Glycyrrhiziglabra*, *coriandrumsativum*, *Matricariachamomila*, *Plantago ovate*, *Eleteriacardamom*, *Cinnamomumtamala*. These herbs used in different gastrointestinal disorders such as hyperacidity, gastric and duodenal ulcer etc.

In traditional medicine *Glycyrrhiziglabra* has been utilized as a demulcent and emollient for a long time for the treatment of ulcers on the mucosal layer. Glycyrrhizin (as carbenoxolone sodium) fasten healing of gastric ulcers and secures against aspirin medicine impelled the harm to the gastric mucosa. *Helicobacter pylori* disease is predominant in people with peptic ulcer is likewise a known danger element for gastric tumor [8,9]. Thusly, an in vitro study was performed to examine the impacts of licorice flavonoids on the development of *Helicobacter pylori*. These flavonoid parts indicated promising hostile to *H. pylori* action against clarithromycin and amoxicillin-safe strains. As the antimicrobial property is by all accounts ascribed to the flavonoid constituents of licorice, DGL arrangements may give remedial advantage to *H. pylori* [10]. Different studies have shown DGL's advantage in mending duodenal ulcers [11].

Cinnamomumtamala have huge gastro-protective action, presumably because of its free radical rummaging action [12]. Chamomile utilized as a part of cutting edge solution fundamentally for their spasmolytic, antiphlogistic, antibacterial properties and as a multipurpose digestive to treat gastrointestinal aggravations including acid reflux, diarrhea, anorexia, motion sickness, and retching [13]. German chamomile (*Matricariachamomilla*) is additionally used to mending injury [14], treat various diseases including diarrhea [15], and inflammation, cancer [16]. Its extract blocks aggregation of *Helicobacterpylori*.

Kishneez in Unani literature has been described

to possess sedative, hypnotic, anti-anxiety and anti-stress effects for which it is used frequently in the management of stress related diseases[17,18]. Notwithstanding its culinary quality, coriander is known for its extensive variety of curative properties. It is by and large utilized as a part of gastrointestinal grumblings, for example, anorexia, dyspepsia, loose bowels, fussing agony and vomiting.

In Unani System of Medicine, small cardamom have frequently been prescribed as *Muqavvi-e-meda* (stomachic), *Mujaffif* (desiccant), *Muhallil* (resolvent), *Hazim* (digestive), *Kasir-e-riyah* (carminative) and *Mane Qai* (anti-emetic) in the treatment of gastrointestinal disorders (*Hurqat-e-meda*/acid peptic disorders).[19-21] *Plantagoovata* husk are largely used for gastrointestinal ailments. *eulcerative colitis*. [22,23]

Inclusion criteria

Patients diagnosed with gastric/duodenal ulcer, heartburn, flatulence were incorporated in the study. The essential prerequisite for incorporation was the clinical components indicating peptic ulcer ailment for 1-2 weeks. Likewise, patients with previous findings of haematemesis or malena were additionally included in this study.

Exclusion criteria

Patients who were taking aluminum acid neutralizers or hepato-protective medications, for example, silymarin, other natural arrangements, H₂ blockers and proton pump inhibitors one month preceding section into the study were avoided from the study. Old patients and pregnant ladies were likewise avoided from the study.

METHODOLOGY

This research was outlined as a forthcoming open study in calming the signs and

manifestations of Hyperacidity. Those subjects were inducted who were visiting outpatient at Alqudratmatab Ali apartment defense phase -1 Karachi.

Every one of the patients experienced a complete physical examination, related medicinal history and demographic subtle elements were entered with uncommon reference to medications utilized, smoking propensities and use of mixed drinks. Every one of the patients was treated acidom at a measurement of 2 - 3 teaspoonfuls (10-15 ml) three times each day after meal for four weeks.

The clinical history of enrolled patients toward the treatment's start (considered day 0) was recorded. The seriousness of the clinical signs and indications, for example, pain, fart, stomach distress and Heart smolder were noted (absent, mild, moderate and sever) on passage and after that at each checkup, i.e. toward the end of the first, second third and fourth weeks were finished.

Lab tests were done in every one of the patients, who included complete blood check and Hb%, Stool tests for ova, cyst and occult blood was done. Upper gastrointestinal tract endoscopy was done in 77 cases with 23 patients declining to experience the strategy. Biopsies were performed to analyze histology and identify *H. pylori* disease to reject gastric growth. A rehash endoscopy was done to discover mending following 4 weeks of treatment and now and again it was done following 6 weeks.

Patients were obliged to take note of the treatment toward the end of study. The unfavorable occasion informed by the patient or saw by the physician were saved in the computerized forms. Measurable examinations of the outcomes were done and the centrality was contrasted with the standard.

RESULTS

Total 100 patients incorporated into the trial, every one of the patients finished the study and were discovered suitable for investigation. According to the analysis by endoscopy, 21 were determined to have gastritis, 31 had corrosive peptic infection, 25 had peptic ulcer illness and 23 had dyspepsia (Table 1). There was a critical lessening in the seriousness scores for stomach pain, flatulence, heart burn toward the end of 3rd weeks of treatment when contrasted with the standard. The rate diminished for stomach pain was 70% and 90% at the 3rd and 4th weeks of therapy separately, and for flatulence and heart burn was 65% and 75% individually.

Table 1. Etiology of the cases studied

Diagnosis	cases
Dyspepsia	23
Gastritis	21
Gastric/Duodenal ulcer	25
Acid peptic disease	31

Table 2. Relief in symptoms after treatment with Acidom Syrup

Symptoms	2ndWeek	3rdWeek	4thWeek
Pain-abdomen	50.4	60.3	80.6
Flatulence	60.4	70.5	85.8
Heart burn	55.5	60.4	84.7
Nausea	70.5	80.4	90.6
Vomiting& Loss of appetite	75.4	86.2	93.8

The lessening saw in every one of the indications was factually huge. Toward the study's end indications vanished normally and proceeded with antacids agent treatment was not needed. Endoscopy was rehased in a larger part of cases, and the outcomes demonstrated a critical change in improvement. It was watched that there was incredible or great reaction in 86-

87% of the patients after treatment. Toward the study's end, the examiners appraised adequacy and resilience of treatment as magnificent to great in 90% of the patients.

To the extent the side effects were concerned, five instances of the runs were accounted for. However this symptom did not warrant cessation of treatment and the general brilliant averages profile of the 5 patients was not influenced (Tables 3 and 4).

Table 3. Global assessment of the efficacy of Acidom

Response	Percentage
Excellent – good	86.67
Fair	13.33
Poor	0

Table 4. Investigators assessment of the efficacy and tolerability of Acidom

Response	Percentage
Excellent – good	90
Fair	10
Poor	0

DISCUSSION

Hyperacidity present in different gastrointestinal disorders, such as gastroesophageal reflux disease (GERD), gastritis, and peptic ulcer have a noteworthy effect on health. Accordingly, human services suppliers must devise approaches to breaking point consumption while giving top notch patient consideration. In spite of the fact that the objectives of treatment are the same in both customary and oversaw care situations, ideal expense regulation procedures depend intensely on the specifics of installment and danger plans included. Expense sparing methodologies including medication treatment are regularly in light of the suspicion that medicines with lower procurement

expenses are the most savvy. If there should be an occurrence of gastritis treatment, the adequacy of corrosive concealment treatments ought to additionally be considered. Likewise, adequacy ought to be a noteworthy thought in treatment decision in light of the fact that repeat and inconveniences as a consequence of ineffectual treatments can contrarily influence the patients' personal satisfaction and expand the general expense of human services [19]. Studies have demonstrated that individuals who had gotten no less than one medicine of cimetidine, famotidine, nizatidine, ranitidine, lansoprazole or omeprazole corrosive stifling medications, had a significant increment in danger of creating pancreatitis [24].

We conducted this trial on Acidom as it is a safe herbal preparation. Acidom is syrup comprising of an anti-ulcer herb known as *Glycyrrhizaglabra*, *Eleteria cardamom*, *Coriandrumsativum*, *Plantagoovata*, *Matricaria chamomile*, *Cinnamomumtamala*.

Acidom has turned out to be a successful and all around endured drug in the administration of gastritis, indigestion and corrosive peptic malady. It has an elevated requirement of adequacy and security in both gastritis and in ulcer treatment and gives great symptomatic help in all patients. Couples of patients were treated with *H. pylori* annihilation treatment in which *H. pylori* diseases were recognized. In non-steroidal-anti-inflammatory gastritis and ulcers withdrawal of the medication and stomach settling agent suspension provided great efficacy.

CONCLUSION

Along these lines, it can be put forth that Acidom is powerful in the manifestations of gastritis and corrosive peptic illness. Torment help was thoughtful in the initial two weeks itself. No patients griped of any unfriendly occasions. Acidom could turn into the pillar

in the administration of gastritis and corrosive peptic illness and peptic ulcer.

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