DRUG PROVING

Amoora rohituka: A multicentric double blind homoeopathic pathogenetic trial

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Objective: To elicit the pathogenetic response of the drug Amoora rohituka in homoeopathic potencies on healthy human beings.

Methodology: Drug Amoora rohituka was proved by the Central Council for Research in Homoeopathy through double-blind placebo-controlled method. The study was conducted at three centers. The drug was proved in two potencies (6C and 30C) on 53 apparently healthy volunteers who were selected after conducting pre-trial medical examination by the medical specialists and routine laboratory investigations. In the first phase volunteers were given 56 doses (04 doses per day for 14 days) of placebo. In the next two phases 56 doses (04 doses per day for 14 days) of each potency or placebo were consumed. The symptoms generated during the trial period were noted by the volunteers and elaborated by the Proving Masters. The data obtained from all the three centers was compiled at proving-cum-data processing cell at CCRH headquarters after de-coding.

Observations: Out of the 53 provers who were on actual drug trial, 29 manifested symptoms. Drug was able to produce symptoms in each potency more or less related to every part of the body. Some of the symptoms have been reproved which are mentioned in different literatures after the fragmentary proving.

Conclusion: New and reproved pathogenetic responses elicited during the proving trial expands the scope of use of the drug Amoora rohituka and will benefit the research scholars and clinicians. These symptoms will carry more value when verified clinically.

Keywords: homoeopathy; pathogenetic effect; homoeopathic pathogenetic trial; drug proving; amoora rohituka

Introduction

Hindu physicians found Rohitaka as an excellent remedy in the enlargement of liver and spleen, among corpulent with enlarged glands and general debility. Hence, they named it as *Plihaghati* meaning thereby that it does away with all splenic disorders. They have found Rohitaka to have alterative, astringent and tonic effect.

The drug is also recommended for jaundice and dropsical swelling.¹ It is also useful in chronic malarial

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New Delhi- 110 058 Email: <u>ccrhdp@yahoo.com</u> fevers and leucorrhoea. Constipation is a prominent feature.²

Bark of *Amoora* appears to be an effective immuno-suppressive drug similar to prednisolone. A 50% ethanolic extract of the stems showed anticancerous activity.³ The ethanol extract of *Amoora rohituka* stem bark showed Cytotoxicity against MCF-7 cell lines derived from human mammary adenocarcinoma.⁴

The seeds are acrid with sharp taste; refrigerant, laxative, anthelmintic^{3,5}, cures ulcers, diseases of the blood, eye and ear; lessen muscular pain. The bark of this plant acts as astringent. The ripe seeds yield oil which is used as a stimulating liniment in rheumatism.⁵

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personally proved this drug. However, a systematic proving of *Amoora rohituka* in homoeopathic potencies was necessary to elicit its pathogenetic power, so Central Council for Research in Homoeopathy undertook its systematic Homoeopathic Pathogenetic Trial (HPT) as per the approved protocol.

Botanical Name³ : Aphanamixis polystachya

(Wall.) Parker

Family³ : Maliaceae Synonym³ : Amoora rohituka Wight & Arn.

Common names³:

Hindi : Rohituka, Harinhara
Bengali : Tikata raj, pitta-raj
Telugu : Chawa-manu
Tamil : Malampuluvan
Malayalam : Chemmarom
Trade : Amoora

Description

A large evergreen tree with spreading crown of branches; leaves imparipinnate, up to 1m long; leaflets opposite, 4-8 pairs and an odd one, 7.5-23 x 3.4-10 cm; elliptic—oblong or oblong-lanceolate, acuminate, glabrous on both surfaces. Flowers white, bracteate, sub-sessile; male spikes panicled, female simple, calyx 5 partite, petals 3, anthers 6, ovary 3-celled with two superposed ovules in each cell. Seed oblong with a scarlet aril.^{5,6}

Distribution

Found in sub-Himalayan tract, from Gonda (U.P.) eastwards to West Bengal and Assam and southward to Andamans. In southern India, it is common in the Western Ghats from North Kanara downward to Tinnevelly. ⁷

Part used in Homoeopathy

Roots⁶

Potencies used

6C & 30C

Objective

To elicit the pathogenetic response of the drug *Amoora rohituka* on apparently healthy human volunteers in homoeopathic potencies.

Materials and Methods

Location and duration of study

The proving was conducted at Drug Proving Research Unit (Homoeopathy), Kolkata from

November 2007 to January 2008, at Drug Proving Unit (Homoeopathy), Bhubaneswar from March 2007 to March 2008 and at Central Research Institute (Homoeopathy), Kottayam from March 2008 to January 2009.

Participants

Total 53 apparently healthy volunteers from above mentioned three centers, between the age group of 18 to 50 years, comprising of 14 males and 39 females, were enrolled in this study.

Drug

Amoora rohituka was procured in 6C and 30C potencies from M/s. Dr. Willmar Schwabe India Pvt. Ltd., NOIDA, in 100 ml. sealed phials of each dilution. Globules (number 30) were medicated with these attenuations at the Council's headquarters office and sent to Drug Proving Research Units in coded phials (verum) along with placebo (control).

Placebo

Placebo was made up of plain globules (number 30) moistened with plain dispensing alcohol (unsuccussed) and was therefore indistinguishable from verum.

Study Design

The study was a randomized double blind placebo controlled trial.

Methods

Before commencing the study, all provers were screened strictly by the experts and apparently healthy provers between the age group of 18-50 years, both males and females were included in the drug proving trial. Pregnant and lactating mothers were excluded.

'Written informed consent' from each volunteer was obtained before starting the proving. Pre-trial Medical Examination (PME) and Terminal Medical Examination (TME) of the volunteers were carried out by General Physicians, Psychiatrists, Cardiologists, Ophthalmologists, ENT Specialists, Dermatologists, Gynaecologists, Radiologists and their routine laboratory investigations at the centers were done to ascertain their health status. After recommendation of experts, healthy volunteers were enrolled in the Homoeopathic Drug Proving Programme. The study was conducted at three centers. According to CCRH Drug Proving Protocol, the sample size included 30% volunteers under control group at each center. So, out

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of 53 volunteers, 35 were kept on drug (verum) and 18 were on placebo (control) in all three phases. All the volunteers were assigned code numbers and the coded drugs of different potencies (including placebo) were supplied in separate glass phials bearing code numbers of the respective volunteers; keeping both provers and proving masters blind about what provers were consuming (drug or placebo).

The study consisted of three phases. Each phase consisted of 56 doses of drug or placebo.

Phase-I: Placebo phase. It is useful in generating prover's response to placebo and therefore symptoms generated by the prover in this stage act as control for subsequent phases.

Phase-II: In 2nd phase, the proving was conducted with 6C potency.

Phase-III: In 3rd phase, the proving was conducted with 30C potency.

Procedure of Proving

The volunteers were asked to take 4-6 globules of a particular potency of the coded drug, four times a day, dry on tongue.

The volunteers were instructed to note down the details of their feelings/changes in mind and body, after taking the coded drug/placebo in 'Prover's Day Book Proforma' daily.

If sign(s)/ symptoms(s) appeared

The volunteers were asked to stop taking the drug/ placebo as soon as they felt any change or any sign(s) and/or symptoms(s) developed during the trial.

The volunteer noted down the sequence of the appearance of new sign(s) and/or symptoms(s), their progress and the number of doses after which such sign(s) and/or symptoms(s) appeared with date, time of onset and duration for which they persisted. Intake of drug remained suspended till the sign(s) and/or symptoms(s) totally disappeared. Any change in normal routine of the prover in respect of daily habits pertaining to diet, living conditions etc./any treatment taken was also noted in the Prover's Day Book Proforma.

After disappearance of sign(s) and/or symptom(s) produced by the drug, the volunteer had to wait for a further period of 07 days before taking the remaining doses of that potency following the same dose schedule as stated above. In case of further

appearance of new sign(s) and/or symptom(s), the same procedure as stated above was followed till the consumption of 56 doses of that potency by the volunteer.

If the prover was experiencing the same symptom(s) what he/she had already shown, he/she was asked to stop the current quota and to switch over to the next quota after a washout period of 14 days.

Each prover was interrogated everyday by Proving Master about the appearance of new symptom(s) or progress of symptoms and noted those in 'Symptom Elaboration Proforma' with respect to appearance and dis-appearance of symptoms, their location, sensation/character, modalities, conc-omitants, extension of symptoms, causation, clinico-pathological findings and other treatment taken.

If no sign(s)/ symptoms(s) appeared

If no symptom was observed, the volunteers noted down as 'No Symptom' with date and time of intake of the respective dose of the drug/placebo.

Before commencing the administration of subsequent potencies (subsequent Phase) of the drug, the volunteers remained on a washout/rest period (it should be a symptom free period between two phases of drug proving in which a volunteer does not take drug) for 14 days and started taking next potency in the same procedure as mentioned above, till completion of 56 doses.

The same procedure was followed for the 3rd phase.

Each volunteer was interrogated by the Proving Master to verify the sign(s) and/or symptom(s) recorded by the volunteer. The symptoms recorded in 'Prover's Day Book Proforma' were verified by the Proving Master and completed through further interrogation with the provers in respect to their location/ sensation/ modalities and concomitants, if any, in 'Symptoms Elaboration Proforma'.

During the course of proving, the volunteers were referred for specific laboratory investigation(s) to rule out any pathological cause of appearance of symptom(s). Since laboratory tests were performed to identify any correlation between the subjective and objective changes during the course of proving, the expert opinion of the honorary consultant(s) was obtained, wherever needed.

After completion of trial of all potencies, the volunteers underwent TME.

On completion of all the respective Phases of the proving, the compilation of data recorded in 'Prover's Day Book Proforma', 'Symptoms Elaboration Proforma', 'Pathological Report Sheets' and 'Terminal Medical Examination sheets', was done at the Council's headquarters by the Drug Proving-cum-Data Processing Cell. After decoding, the sign(s) and/or symptom(s) generated by the volunteers kept on the drug were separated from those generated by the volunteers kept on placebo. The sign(s) and/or symptom(s) which were common to both the groups i.e. placebo as well as drug groups were not taken into consideration while compiling the symptomatology of the drug.

Management of adverse effects A vial of antidote is sent with each quota to each center. In this trial homoeopathic potencies of Camphora were used as Antidote as it is believed that Camphora can antidote nearly every vegetable medicine. Proving master gives antidote to the volunteer if symptoms continue for a long time or intensity is much to cause discomfort. Proving Master is also directed to take advice of honorary consultants and to get laboratory investigations done, if required.

Pathogenetic effects

Pathogenetic effects (Proving symptoms) are defined as all changes in clinical events and laboratory findings reported by the volunteers during a Homoeopathic Pathogenetic Trial and recorded in the final report. The incidence of pathogenetic effects per volunteer is defined as the total number of findings observed in the trial divided by the total number of provers. So incidence in this proving was 5.03 findings per volunteer.

Pathogenetic effects were deduced

- (i) from comparison of symptoms developed in placebo phase with symptoms during intervention phases (Intraprover comparison)
- (ii) from comparison of symptoms developed by provers on control (for all for phases) with provers on actual drug trial (Interprover comparison)

Results

At Drug Proving Research Unit (H), Kolkata, out of 15 volunteers, 05 volunteers reported symptoms. At Drug Proving Unit (H), Bhubaneswar out of 18 volunteers, 11 volunteers reported symptoms. At Central Research Institute (H), Kottayam, out of 20 volunteers, 13 volunteers reported symptoms consequent upon the administration of the drug.

The following symptoms were observed during the drug proving:

- In the first parenthesis, the 1st number given after every symptom denotes number of volunteers produced that particular symptom and 2nd number denotes potency used.
- In second parenthesis, the 1st number denotes number of doses after which symptom produced that particular symptom and the 2nd number denotes the duration (in days) for which the symptom lasted.
- Symptoms produced during the pathogenetic trial of the drug were compared with the homoeopathic literature cited in the reference and those symptoms which were found in the literature, are shown in **bold**, superscribed with a numerical that refers to the respective literature.

Mind

- Irritation and impatience. (1,6C) (28,1)
- Irritable with anxiety about responsibilities. (1,30C) (32,1)
- Easily angered.^{1,2} (1,30C) (56,1)
- Anxiety with great fear. (1,30C) (20,1)
- Mood changeable, impulsive. (1,30C) (48,2)
- Great anxiety with nervousness. (1,30C) (16,1)

Vertigo

- Vertigo in morning with sleepiness in daytime. (1,30C) (32,1)
- Vertigo on lying down and closing eyes. (1,30C) (6,1)

Head

- Headache before sunset with sleepiness. (1, 30C)
 (32,1)
- Heaviness of head. (1, 30C) (32,4)
- Congestive pain with heaviness of head agg. stooping, after rising, amel. sleep. (1, 30C) (50,1)
- Throbbing pain in head, agg. night, amel. lying down. (1, 30C) (28,2)
- Throbbing headache, comes suddenly and goes suddenly. (1, 6C) (56,1)
- Throbbing headache, heaviness of head with increased perspiration, agg. moving amel. sleeping. (1, 6C) (44,1)

- Stitching pain in right side of forehead, amel. lying down. (1, 6C) (37,2)
- Left sided headache. (1, 6C) (20,1)
- Heaviness of head with pain over the left eye in forenoon, agg. looking upwards, slight movements, night. (1, 30C) (14,6)
- Frontal headache, amel. rest, sleep. (1, 6C) (44,3)
- Frontal headache at 10am, amel. evening, after sleeping. (1, 6C) (52,1)
- Frontal aching headache, agg. movement of eye.
 (1, 6C) (8,1)
- Frontal headache, agg. evening. (1, 30C) (24,3)
- Pain and congestion in frontal region, more on left side at 10am. (1, 30C) (33,2)
- Frontal headache with congestion, agg. on stooping. (1, 30C) (32,2)
- Frontal headache with congestion at 4pm, pain radiating towards ear, amel. sleep. (1, 30C) (34,2)
- Frontal headache with congestion from 4pm to 8pm agg. walking, stooping, amel. after bathing. (1, 30C) (40,1)
- Throbbing pain in frontal region, agg. walking amel. pressure. (1, 30C) (16,1)
- Bursting pain in forehead and temples, agg. evening, morning. (1, 30C) (4,2)
- Throbbing headache in both temples, agg. waking up in the morning, amel. by pressing with hands.
 (1, 30C) (21,4)
- Throbbing pain in both the temples, gradually spread to the vertex, agg. motion, at night, amel. rest. (1, 6C) (56,4)
- Pain in temporal region, congestion with vertigo at 3pm. (1, 30C) (18,1)
- Pain in left temporal region from 2.15pm to 4pm, sensation as if something were screwed into part, amel. pressure applied in spots. (1, 30C) (20,1)
- Throbbing pain in left temporal region extends to vertex, agg. motion, heat of sun; amel. rest, open air. (1, 6C) (34,1)

- Throbbing pain in left temporal region at 8:30pm, gradually spreading to whole head. *Agg.* motion, watching T.V., closed room, sitting, talking; *amel.* lying down, sleeping, fanning. (1, 30C) (56,1)
- Bursting pain in temporal region at 11am, amel. after sleep. (1, 30C) (40,1)
- Throbbing pain in temples and occiput with heaviness, agg. evening. (1, 6C) (56,2)
- Aching pain in occipital region from evening till night, agg. lying on painful side, movement of head on sides. (1, 30C) (4,3)
- Severe occipital headache, agg. noise, light, amel. lying down, darkness. (1, 30C) (32,1)
- Itching on scalp, agg. daytime, taking bath. (1, 6C) (15,2)
- Painful boils on scalp, alongwith the hair line of forehead. (1, 6C) (28,3)

Eyes

- Itching in eyes turns red, agg. evening, night; amel.
 washing with cold water. (1, 6C) (36,1)
- Stye in lower lid of right eye with pricking pain. (1, 6C) (56,6)
- Agglutination of eyes. (1, 6C) (8,1)
- Pain in right upper eyelid with watering of eyes in forenoon, agg. looking up, exertion, evening. (1, 30C) (20,1)
- Pain above eyebrows more on left side. (1, 30C)
 (56,1)

Ear

Pain in left ear in forenoon. (1, 30C) (18,1)

Nose

- Sneezing with whitish nasal discharge. (1, 6C) (30,4)
- Coryza with sneezing, itching in ears, nose and pharynx. (1, 6C) (20,1)
- Sneezing after taking bath in morning agg. cold, fan air. (1, 6C) (40,4)

- Sneezing with running nose, itching in nose, agg. morning; amel. evening. (1, 6C) (8,3)
- Sneezing on waking up in the morning, amel. washing of face. (1, 30C) (32,1)
- Sneezing with bland discharge, agg. waking up in the morning. (1, 30C) (40,1)
- Coryza starting with sneezing and with watery nasal discharge turning to thick, yellow, also from posterior nares and stoppage of nose, agg. morning, amel. open air, noon; with hoarseness, hot breath, pain in left ear and upper eyelid, occipital headache, difficult inspiration through nose and fearfulness. (1, 30C) (16,10)
- Sneezing with watery nasal discharge after taking bath. (1, 30C) (5,1)
- Fluent watery coryza in morning. (1, 30C) (49,1)
- Paroxysmal sneezing in morning with watery, irritating discharge from nose, agg. blowing nose.
 Eyes feel dry. (1, 30C) (24,1)
- Watery discharge from nose. (1, 6C) (24,3)
- Coryza with lacrymation. (1, 30C) (28,2)

Mouth

- Painless swelling (small) on the middle of roof of the mouth. (1, 6C) (8,7)
- Aphthous ulcer on lower lip. (1, 6C) (20,1)
- Aphthous ulcer on the inner side of left cheek. (1, 6C) (28,4)
- Dryness of tongue especially in the morning. (1, 30C) (32,1)
- Waterbrash. (1, 30C) (34,1)
- Aphthous ulcer inside the left cheek with burning pain, agg. after eating. (1, 30C) (28,1)
- Blackish discolouration on lower lip with severe burning. (1, 30C) (48,2)
- Aphthae with redness of mouth, burning pain, agg. during eating. (1, 30C) (16,8)
- Ulcers on the inner side of lower chin and upper lip near angle of mouth. (1, 6C) (56,10)

Throat

- Irritation in throat with soreness with mild burning pain. (1, 6C) (30,1)
- Inflammation of tonsils with burning pain and hoarseness, agg. morning. (1, 6C) (44,6)
- Pain in throat in morning, agg. swallowing. (1, 6C)
 (56,1)
- Pain and soreness of throat agg. morning. (1, 30C)
 (22,2)
- Pain in throat, dryness and soreness with feeling of something hard in upper throat. (1, 30C) (20,2)
- Sore throat. (1, 30C) (28,2)
- Throat pain early morning on rising with soreness, amel. swallowing. (1, 30C) (42,1)
- Sore throat with little expectoration. (1, 30C) (49,1)
- Sensation as if a lump is lodged in the throat, hawks to clear it. (1, 30C) (20,1)
- Sore throat with increased perspiration, agg. night, hot food, drinking water. (1, 6C) (32,1)
- Pain in throat on swallowing, agg. drinking cold water, amel. external heat application, drinking warm water. (1, 30C) (40,6)

Face

- Pimples with itching. (1, 6C) (44,3)
- Face dry, skin peel off from the face, burning on applying cream, white discoloured, constriction sensation, agg. morning, amel. applying oil. (1, 6C) (12,5)
- Vesicular eruptions on face more on Left cheek with redness and itching, amel. by rubbing. (1, 30C) (16,7)
- Pimples on left cheek and forehead. (1, 30C) (34,10)

Stomach

- Nausea and vomiting¹ in the morning, *amel.* lying. (1, 6C) (56,1)
- Nausea and vomiting after taking tea in the evening. (1, 6C) (56,2)

- Rumbling in stomach with loud eructations, agg. after taking tea or milk. (1, 6C) (4,1)
- Thirst decreased. (1, 30C) (32,1)
- Mild gastric discomfort. (1, 30C) (20,1)
- Hungry in early morning. (1, 30C) (9,1)
- Increased thirst with desire for small quantity at frequent interval. (1, 30C) (32,4)
- Loss of appetite. (1, 30C) (32,1)
- Empty sensation in stomach soon after eating. (1, 30C) (36,7)

Abdomen

- Sudden violent pain in the lower abdomen in evening with semisolid, white mucoid stool, agg, eating; drinking, amel, after stool. (1, 6C) (6,1)
- Distension of abdomen soon after eating, amel. drinking hot water, passing flatus. (1, 6C) (56,2)
- Pain abdomen, little left to the umbilicus. (1, 30C) (56,1)
- Pain in abdomen after stool. (1, 6C) (52,3)

Rectum

- Urge to pass stool, unsatisfactory stool with flatulence. (1, 30C) (3,1)
- Painless diarrhea 4 to 6 times during day. (1, 6C) (29,1)
- Constipation with increased thirst. (1, 30C) (40,1)

Urethra

 Stitching pain with burning sensation at the urethra, amel. by pressure. (1, 6C) (40,5)

Female

- Dysmenorrhoea with severe aching pain in legs as if some weight is drawn, more in left leg. (1, 30C) (6,1)
- Menses delayed by 12 days. (2, 30C) (42,12) (20,12)
- Menses delayed by 1 week. Dysmenorrhoea with heaviness, amel. lying on abdomen. Flow of dark clotted blood. (1, 30C) (20,2)

Larynx and trachea

Hoarseness with loss of voice. (1, 30C) (16,5)

Cough

- Dry cough. (1, 6C) (30,6)
- Cough with frothy, white expectoration with slight difficulty in breathing, agg. morning, by dust. It is associated with pain in left side of neck. (1, 6C) (28,8)
- Dry tickling cough with dyspnoea, gagging and vomiting, agg. by reading, amel. drinking water. (1,6C) (4,2)
- Dry, barking cough with chest pain, amel. pressure.
 (1, 6C) (8,3)
- Dry tickling cough. (1, 30C) (20,1)
- Dry, barking cough with pain in chest while coughing, seems as if chest would tear into pieces, agg. talking, noon, night. (1, 30C) (24,1)

Expectoration

Profuse expectoration on hawking in morning.
 (1, 30C) (52,1)

Back

- Pain in back of neck with heaviness of head, amel. after sleep. (1,6C) (16,4)
- Papular eruptions on the back. (1, 30C) (16,6)

Extremities

- Pain in right upper limb above and below the elbow joint. (1,30C) (40,1)
- Pain in right shoulder and arm. (1, 30C) (40,2)
- Aching pain in metacarpophalangeal joint which extends downwards, agg. on holding something. (1, 30C) (7,1)
- Pain in right palm with trembling, agg. weight lifting, bending palm backwards, grasping. (1,30C) (36,3)
- Aching pain in right lower limb extend from hip to ankle, more intense in knee joint. (1, 30C) (5,1)
- Bruised pain with soreness of lower half of thighs, agg. touch. (1, 30C) (56,1)

- Pain in middle part of right leg as if from the bone, agg. evening. (1, 30C) (26,1)
- Eruptions on left calf region with itching, amel. by cold application. (1, 6C) (40,5)
- Aching pain in right knee joint. (1, 30C) (56,1)
- Drawing pain in right knee extending to medial aspect of thigh, agg. lying straight; amel. bending knee backwards. (1, 30C) (48,5)
- Pain and exudation of watery fluid followed by pus discharge from left ring finger nail margin. (1, 30C) (4,3)
- Red rashes on forearm with intense itching, scratching followed by burning, agg. evening, night, on touch, scratching amel. hard rubbing, hot application. (1,6C) (28,4)
- Eruptions between toes and back of hand with redness and itching, amel. by scratching. (1, 30C) (16,2)

Sleep

- Sleepiness. (2, 30C) (20,1) (52,2)
- Sleeplessness at night. (1, 6C) (12,1)
- Sleepiness and drowsiness. (1, 30C) (40,1)
- Insomnia with restlessness. (1, 30C) (20,1)

Chill

- Severe chill during daytime, amel. covering. (1, 30C) (24,1)
- Chill with rigor at 9:30pm, agg. slightest change in position, amel. covering. (1, 30C) (56,3)

Fever

- Fever with dyspnoea. (1, 6C) (17,2)
- Fever with chill associated with headache¹, bodyache. (1,6C) (56,1)
- Fever at night, agg. after sleep. (1, 6C) (56,1)
- Intermittent fever (Temp. 101⁰ F to 102⁰ F) with headache, vertigo, anorexia, increased thirst and loose motion followed by weakness. (1, 6C) (56,3)
- Fever with bodyache. (1,30C) (40,1)

Perspiration

Profuse sweating, worse at night. (1, 6C) (8,1)

Skin

- Urticaria all over the body after taking bath with itching and burning. (1, 30C) (20,2)
- Black discolouration in front of neck, sternal region, under breast and inguinal region with itching and peeling of skin while scratching. (1, 30C) (36,21)
- Itching without eruptions on whole body, agg. daytime, taking bath. (1, 6C) (31,1)

Generalities

- Bruised, aching pain in whole body especially lumbo-sacral region. (1, 6C) (8,1)
- Prostration, must lie down. (1, 6C) (8,2)
- Bodyache with weakness. (1, 30C) (22,1)
- Burning pain all over the body. (1, 30C) (28,1)
- Bodyache with prostration, agg. evening. (1, 30C) (28,2)
- Sensation of heat all over the body. (1, 30C) (32,2)
- Bodyache with laziness. (1,6C) (32,2)

Discussion

Drug was able to produce symptoms in 6C and 30C potencies. Four symptoms were reproved which are already available in the literature. Out of 146 symptoms produced by the volunteers on verum group in 2nd or 3rd phases, only 2 symptoms, viz. menses delayed by 12 days and sleepiness were produced by more than one prover.

The pathogenesis of the drug was produced in almost all organs and systems of body. The drug produced mental symptoms like irritation, easily angered, anxiety, mood changeability, impulsiveness and nervousness.(*Ign.*) During pathogenesis drug produced various types of headache; upper respiratory tract infection with symptoms like sneezing, coryza, dry cough, irritation and soreness of throat, tonsillitis etc. The drug also produced symptoms in gastro-intestinal tract which are manifested with rumbling in stomach with loud eructation and distension of abdomen soon after eating. Some peculiar symptoms were also produced during the study and seems to be

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valuable feature of the drug and these are empty sensation in stomach soon after eating and drawing pain in right knee relieved by bending knee backwards. The drug also showed affection of joints in its pathogenesis. During the trial drug produced intermittent fever with headache and vertigo; itching without eruptions and urticarial eruptions with itching aggravated after taking bath.

These symptoms may help in clinical application of the medicine.

Conclusion

The symptoms appeared (new and re-proved) during the trial will add to the available literature on this medicine and benefit the research scholars and clinicians. These proved symptoms need further verification through clinical application in different settings.

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