

## Study of Effect of Carica Papaya Leaves Extract on Paltelets Count

KEYWORDS	Exercise; B	l; Executive function; Stroop test		
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**ABSTRACT** India is one of the countries with highest cases of dengue fever in Asia after Indonesia . the number of patient increasing gradually with affecting new areas of population carica papaya (CP) belongs to caricaceae family is a widely cultivated plant in India has many health benefits and fruit consumption is very popular the leaves are believed to increase the platelet count in dengue. Objective of this study is to determine study effects of C. Papaya leaves extract capsules to dengue fever patient. A randomized clinical trial on 40 patient divided in two groups of 20 including the control group received 2 C.P. capsute 3 times daily. The result showed significant increased in platelet count (p<0.05) maintained stability of hematocrit to normal level and shorten hospitalization (p<0.05) in dengue and accelerates platelet count compared to control group.

**INTRODUCTION** :- Dengue infection is a viral infection spread by Aedes aegypti especially in tropical countries having its endemic zone occuring everly year after mansoon grows in water stagnation affecting major population in Indonesia, Thailand, Myanmar Sri Lanka etc. Till now there is no drug or vaccine approved by USFDA. Therefore alternative medicines are needed. Carica papaya leaves are found in most of tropical countries including India. The leaves of papaya have been shown to contain antioxidant activity and reduce lipid peroxidation the alkalodis, flavonoids, saponins, tannin show anti-inflammatory and CP leaves have anti-bacterial property and immunomodulator activity. Fruits have nutritional value and seed extract act as anthelmintic and contraceptive in Indonesia and Malaysia CP leaves have been used effectively for treatment of dengue fever (Sathasivam et al.2009) In this study we observed the effect of CP leaves extract capsules in adults with DFD including hospitalization period.

**MATERIALS AND METHODS** :- Each 550 mg of CPC containing 70% extract of CP leaves were used in DFD patients. The study was approved by elthical committee of J.LN. Medical College council. An open random controlled clinical trial was conducted on Insolation ward of DF patients. Each subject received 24 caps. twice daily Blood sample taken twice daily platelet count and hematocrit leavel were tested in hospital laboratory during hospitalization period of 2015-16.

40 subject selected for the study diagnosis as DFD having high fever (2-7days) thrombocytopenia under 1 lack/ cuml. a rise in hematocrit by  $\geq$ 20% men and women aged 15-55 years. Idiopathic thrombocytopenic Purpura, Leukemia and haemophilia were excluded from study. All subjects received standard therapy for DF and trial group were given 2CP caps x 3 times daily. The blood of subject were taken for platelet count and hematocrit level every morning and afternoon daily.

The data were presented in terms of mean and SD analyzed by descriptive and analytical statistics showing P value of less than 0.05 considered statistically significant.

**RESULT AND DISCUSSION** :- The trial population consisted of adult patients with DFD hospitalized in Isolation ward men were slightly more than women in age 15-34 years

(Table I) Demographic Parameters of Dengue fever patients (n=34)

Variables (%) n=40	Subjects
Sex :	
Male	25 (56.25)
Female	15 (43.75)

Age (years):	
15-24	7(35.0)
25-34	8(37.0)
35-44	3 (17.0)
45-55	2(10)

Male were more than females due to higier exposure of males to dengue vactor at working place or travelling.

Platelet count in trial group raised faster than control group and hematocrit changes were not significantly different (Figure2)

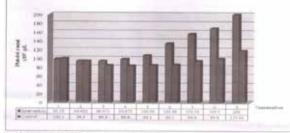


Figure 1: Change of plandet count of all subjects

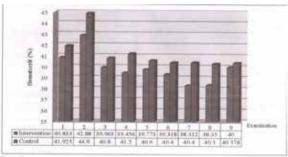


Figure 2: Change of hematocrit level of all subjects.

Table 2: Onset increase in platelet count of all subject.   Group Examination					bject.			
	2 <sup>nd</sup>	3 <sup>nd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>	$8^{th}$	9 <sup>th</sup>
Contorl n (%)	*	2(5)	3(7.5)	4(10)	(5)	3(7.5)	1(2.5)	5(12.5)
Intervention n	(%)	1(2) 5	5 (25) 4	(20)	3(15	) 7(38	)** *	* **

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At the 7,8 and 9<sup>th</sup> day subject have increase in platelet count hence discharged by the physician.

It is obvious that platelet count increased on  $5^{th}$  day while in trial group in  $6^{th}$  examination ( $3^{rd}$  day).

Table : 3 Platelet count and hematocrit of all subjects

Parameter	Con	trol	Intervention		
	l	9 <sup>th</sup>	lª	$6^{\rm th}$	
Platelet count (x10 <sup>3</sup> /µI	.) 100.10±28.981	117.48± 24.550	98.33±38.721	133.88±33.956	
Hematocrit (%)	41.922±3.8122	40.378±4.1075	40.680±4.9684	39.318±4.7649	

Table :4 Hospitalization period of the Patients.

Hospitalization		Group	
(days)	Control (n=20)	Intervention (n=20)	
3		12 (60%)	
4		7 (35%)	
5	14 (70%)	1 (5%)	
6	4 (20%)		
7	2 (10%)		

The trial showed that patients in the trial group who received CPC reached faster increase and higher platelet count compared to control group. The average hospitalization period of dengue fever is  $4.2\pm1.5$  days. and discharged earlier. No side effect were seen in trial group.

**CONCLUSION** :- CPC can be used as an additional drug in dengue fever accelerates the platelet count and shortens the hospitalization period.

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