

SYNERGISTIC APPROACH OF INDIAN AYURVEDIC MEDICINE AND MODERN MEDICINE FOR THE TREATMENT OF SUSPECTED CASES OF COVID-19.

Medicine

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ABSTRACT

On January 31,2020. World health organisation declared A public health emergency of international concern . On the date March 16, 2021. Infecting 11,92,18,587 people and resulting 26,42,673 deaths. A novel Corona Virus was isolated in the Wuhan, China in the December of 2019. Here we report 4 cases and their line of treatment for the COVID-19. In this report we describe 4 cases and their speedy recovery after the synergistically use of Indian ayurvedic Medicine and Modern Medicine for the treatment. This Report also describes the identification, diagnosis, clinical treatment and management including doing the physical exercise, pranayama and spirometry exercise. This all the combination of the procedures in the treatment helped the patients to recover soon.

KEYWORDS

Novel Corona Virus, COVID-19, Indian Traditional Medicine

INTRODUCTION

Corona Virus Disease (COVID-19) is an infectious disease from the SARS and MERS family. (1) A virus closely related to SARS Virus (2)(3)(4). The primary spread of this virus currently seen to be human to human transmission. The forms may vary like respiratory droplets from infected individuals when they cough or sneeze. The incubation period stands for 2 days to 14 days. (5)(6) Though the incubation period stands as a choice because this virus also makes some infected individual asymptomatic and helps itself to transmit the disease. The infection leads to fever, coughing, myalgia and difficulty in breathing. Since this leads to respiratory distress syndrome, sepsis and septic shock and eventually death. (7) Currently, Infected individuals have symptomatic based treatment. Thus, Indian Ayurvedic Medicine was investigated and used for the trials of the medicine and line of treatment for the suspected COVID-19 Patients. The present report described is of four cases from the same town. These all the cases were given Sushrut Rasayan, Madhav Rasayan and Ras Madhav Vati and showed the beneficiary effects and achieved rapid recovery. This case report enhances the synergistic use of the Indian Ayurvedic Medicine with Modern Medicine.

CASE STUDY

In this case report we present 4 cases that were suspected of COVID-19. All the cases live in a small town, Chimur. These cases were related to each other and could not be traced with each other, on observation patients seemed the typical COVID-19 Symptomatic Cases. All the patients were informed about treatment procedure and also signed the consent form.

Case 1 is 75 years old male, on September 28,2020 at 10.30 PM patient was presented to ER with dyspnea and patient was little unconscious. On asking family, patient had history of Asthama and Couldn't breath properly since 3-4 days. Patients vitals were taken as T:96.8°F, P:111 b/m and SpO2 : 82%. The initial treatment of nebulisation and Paracetamol to dilate the bronchus and reduce the fever respectively. On Sept 29, Patient was sent for X-ray, HRCT and Basic Investigations. X-ray showed the changes of Bronchitis. HRCT of Chest showed the Parenchymal infusion in both the lobes and glass ground opacity. The CORAD score was of 5 with infection score of 23/25. After confirm the suspicion patient was shifted to Isolation. The first dose had Pulmoclear and deriphylline along with Ramdasvati, Madhav Rasayan and Shushruth Rasayan. (Whole line of treatment is in Table 2). On September 30, The Patient was given chest physiotherapy and spirometry exercise 2 times a day.

The same treatment was continued for upcoming days. The Temperature of the patient came to normal and patient was now positively responding to the treatment. On October 1 , 2020. Patients SpO2 returned to normal range but the patient was kept on the oxygen supply. Patient could now breath and without oxygen more than 30 minutes. Since the medicines were doing there part, patients were now asked to do some physical exercise like Spirometry exercise, small walks and pranayama.

On October 2, 2020, Patient was prescribed of the Montair-Lc. And continued the same treatment. Patient could now talk, walk and could do all of the physical work without any difficulty in breathing. Patient was continuously observed and monitored for any changes in the SpO2 level. On October 9, 2020, Patient was again sent for Post X-ray Examination. The Result of X-ray revealed that all the consolidations were absent and lung was healthy back again. Patient was monitored again for the changes and patient was discharged.

Case 2 is a 55 years old male patient, who complained of high fever since 8 days on October 13, 2020. Patient had bitter taste and was typhoid positive. Patients vitals were unstable as T: 99°F, P:104 b/m, SpO2 : 85% and RBS (Postmeal) was of 212 mg/dL. Patient was sent for basic investigation of X-ray Chest PA first to rule out the possibility of Suspected COVID-19. The X-ray had consolidation in the right upper lobe in the lungs.

Hence, Case 2 was also isolated and prepared for HRCT test. HRCT resulted into CORAD Score of 5 and infection 22/25. There was a patchy areas with glass ground opacity and parenchymal involvement more than 90%. The patient was admitted and was administrated Amoxycillin 1.2g, Fibrinil, Deriphylline, Acetyl cystine and bronchoclear. Along with the western medicine patient was also given the Sushrut Rasayan, Rasmadhav Vati and Madhav Rasayan. On October 14, 2020, Patient was given the same treatment and was kept on observation. SpO2 was elevated to 90%. Patient didn't had fever and was kept on oxygen supply of 4 litres. The new dose of Laxmivilas Ras, Sunshamani vati and Aarogyavadhini was given on October 15, 2020. The Patient again had fever of 98°F by night and depleted to 95°F by night. Patient was now on the way of recovery, we started Pranayama, Spirometry Exercise and Chest Physiotherapy. Patient Could now breath properly and we continued the same treatment. On October 16,2020, Patient could now normally talk and walk in his isolation room and could answer on rounds. On October 17, 2020, a new dose of MethylPrednisolane 80mg was administrated. Patient showed positive responding results were shown on the same treatment. On October, 18, 2020 we observed the patient for the whole day and the SpO2 was back normal to 95%. Later the X-ray was taken to check for the consolidation changes and any other changes remaining to treat. The X-ray result was normal and hence the patient was made ready for discharge.

SN	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
TEMP																														
HR																														
RR																														
SpO2																														
FEVER																														
COUGH																														
WHEEZING																														
DIARRHEA																														
CONSTIPATION																														
PHYSIO																														
SPIRO																														

TABLE 1. Vitals and Symptom Status of Case 1. Table shows the symptoms including Patient location (H= Home, C= Clinic HR=HeartRate, Temp °F), Cough, Nausea, Vomiting, Diarrhea, Depression and the Treatment

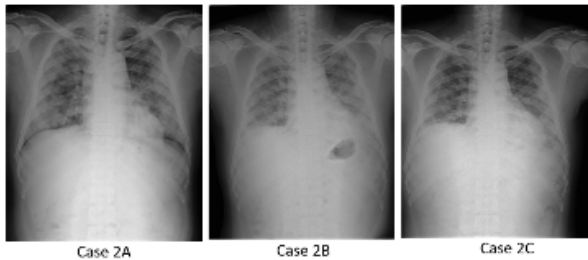


Fig 2. Chest PA X-Ray Images of Case 2. Image A represents the Consolidation in the lungs and changes of the bronchitis. Image B represents the minor changes of the recovery in the consolidation. Image C shows the complete recovery of the patients after the Synergistic Treatment.

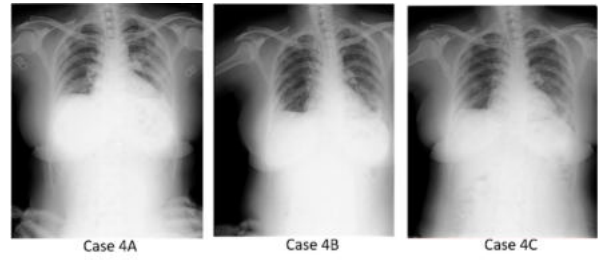


Fig 4. Chest PA X-Ray Images of Case 4. Image A shows the changes of the bronchitis and ARDS. Image B represents the minor changes of the recovery. Image C shows the complete recovery of the patients after the Synergistic Treatment.

On October 15, 2020, Case 3 reported to ER. Case 3 is a 48 Year old male from the same town. He had fever since 8-10 days, Body ache with dyspnea, and Known case of Hypertension. We sent the patient for X-ray, X-ray showed the presence of Pneumonia, Changes of Bronchitis and ARDS. Fibriile Illness. We soon asked for HRCT of the patient. The HRCT had the CORAD-5 and the infection score of 19/25. The patient was started the dose of Amoxycillin, Dexamethasone, Aminophyllin, Favipiravir and Nebulisation of Duolin and Budecort. Along with the Modern Medicine, Patient was given Rasmadhav Vati,

Patient's X-ray and HRCT was asked. Patient's X-ray had the Changes of Bronchitis and ARDS. HRCT report stated parenchymal infusion in the lower lobe of Right Lung. The Score of CORAD was 5 and the score of infection was 15/25. Patient also complained of fibril illness and SpO2 levels of 92%. Patient was given Piperacillin, Paracetamol infusion and methyl prednisolone as main drugs. Along with this patient was given Rasmadhav Vati, Madhav Rasayan and Sushrut Rasayan.

TABLE 2. Signs and Symptoms Table of Case 2. Table shows the symptoms including Patient Location (In Home, Clinic, Hospital), Fever, Cough, Nausea, Vomiting, Diarrhea, Depression and the Treatment.

Symptom	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
WET																														
COUGH																														
NAUSEA																														
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DEPRESSION																														
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Madhav Rasayan and Sushrut Rasayan as Ayurvedic Indian Medicine. Patient was continuously monitored. Patient was kept on same medicine for rest of days along with the Spirometry Exercise, Pranayama and Chest Physiotherapy. On the progressing days patient could now breath properly and there was stability in the vitals. Soon the patient was sent for X-ray and hence, the X-ray was normal. Patient was advised of one day observation without oxygen. On October 21, 2020, Patient was discharged.

Table 5. Clinical Laboratory results of all cases.

MEASURE	REFERENCE RANGE	CASE 1			CASE 2			CASE 3			CASE 4		
		DAY 2	DAY 15	DAY 20	DAY 2	DAY 24	DAY 28	DAY 3	DAY 25	DAY 29	DAY 3	DAY 25	DAY 29
White cell count (10 ⁹ /L)	3.53-9.53	5.30	7.10	6.23	7.20	7.90	8.20	5.20	6.62	8.80	11.10	6.53	8.20
Red cell count (10 ¹² /L)	3.83-5.23	3.25	3.30	5.03	4.20	4.75	4.80	3.35	3.68	3.85	3.68	3.52	3.90
Neutrophil count (10 ⁹ /L)	1.02-4.32	8.80	7.75	4.52	8.47	6.58	3.5	7.48	3.82	2.0	8.8	5.8	4.7
Lymphocyte count (10 ⁹ /L)	1.32-3.23	2.3	2.7	2.5	3.80	2.2	2.85	2.20	3.82	2.80	1.82	2.52	2.7
Platelet count (10 ⁹ /L)	102-452	2.21	0.03	0.01	0.30	0.23	0.42	0.32	0.48	2.54	0.23	0.54	2.14
Hemoglobin (g/dL)	12.5-16.0	10.2	11.7	10.8	12.8	12.5	10.2	10.8	12.8	11.1	12.0	10.2	11.1
Hematocrit (%)	32.50-45.3	11.2	13.1	13.2	14.2	14.5	14.3	12.8	13.7	13.2	14.6	11.5	13.1
Serum Creatinine (mg/dL)	0.2-1.2	2.2	3.2	3.4	8.6	18.2	19.5	16.4	15.1	42.9	26.8	16.5	18.3
Sodium (mmol/L)	136-144	118.2	126.2	128.0	143.7	140.6	132.5	138.0	137.3	132.0	130.0	130.0	133.0
Glucose (mmol/L)	4.0-6.0	5.2	5.2	5.2	6.3	6.3	5.6	6.35	6.65	4.72	5.2	5.5	5.3
Creatinine (mmol/L)	45-64	80	86	75	114	132	85	96	92	85	56	63	71
Total Protein (mmol/L)	62	25	22	28	25	25	29	26	22	22	25	29	21
Corrected calcium (mg/dL)	8.5	4	3	2	3	4	3	3	4	2	4	4	2

Case 4 reported to OPD on October 19, 2020. Case 4 is 41 Years Old Female, who had travel history and complained of cough and cold. Patient was prescribed of Azithromycin, Cough Syrup. Patient is known case of Hypertension. The patient was then asked for home quarantine and was asked for self observation. 3 days later, patient's condition deteriorated and was brought to ER on October 23, 2020

TABLE 3. Signs and Symptoms Table of Case 3. Table shows the symptoms including Patient Location (In Home, Clinic, Hospital), Fever, Cough, Nausea, Vomiting, Diarrhea, Depression and the Treatment.

Symptom	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
WET																														
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TABLE 4. Signs and Symptoms Table of Case 4. Table shows the symptoms including Patient Location (In Home, Clinic, Hospital), Fever, Cough, Nausea, Vomiting, Diarrhea, Depression and the Treatment.

Symptom	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
WET																														
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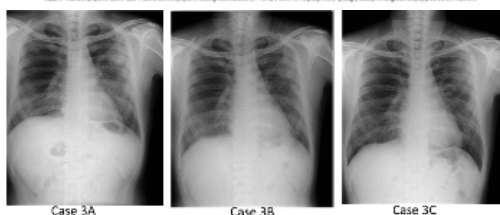


Fig 3. Chest PA X-Ray Images of Case 3. Image A shows the changes of the bronchitis and ARDS. Image B represents the minor changes of the recovery. Image C shows the complete recovery of the patients after the Synergistic Treatment.

DISCUSSION & CONCLUSION
 This report describes the synergistic use of the Indian Ayurvedic Medicine with the Modern Medicine to cure the COVID-19 Symptoms and can be a standard line of treatment for the fast recovery of the patients. All the patients were first taken for X-Ray, this could help us to guess the COVID-19 symptoms and the HRCT confirmed the presence of COVID-19. In this all cases none of the cases were in close contacts with each other except from being from the same town. Majorly all the cases reported to ER were symptomatically developed and were presented after a week of the first day of the symptoms. All the symptoms were recovered rapidly after using the combination of the Indian Traditional Medicines and the Modern Medicine. None of the patient showed any adverse effect or side effect of the treatment.

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REFERENCES
 [1] "What are the official names of the disease and the virus that causes it?". Q&A on

- coronaviruses. World Health Organization. Retrieved 22 February 2020.
- [2] World Health Organization (11 February 2020). Novel Coronavirus (2019-nCoV): situation report, 22 (PDF) (Report). World Health Organization.
- [3] Gorbalenya, Alexander E. (11 February 2020). --"Severe acute respiratory syndrome-related coronavirus: The species and its viruses, a statement of the Coronavirus Study Group". bioRxiv: 2020.02.07.937862. doi:10.1101/2020.02.07.937862. Archived from the original on 11 February 2020. Retrieved 11 February 2020.
- [4] "Coronavirus disease named Covid-19". BBC News. 11 February 2020. Archived from the original on 11 February 2020. Retrieved 11 February 2020
- [5] "Symptoms of Novel Coronavirus (2019-nCoV) | CDC". www.cdc.gov. 10 February 2020. Archived from the original on 30 January 2020. Retrieved 11 February 2020.
- [6] "Symptoms of Novel Coronavirus (2019-nCoV) | CDC". www.cdc.gov. 10 February 2020. Archived from the original on 30 January 2020. Retrieved 11 February 2020.
- [7] "MOH | Updates on 2019 Novel Coronavirus (2019-nCoV) Local Situation". www.moh.gov.sg. Retrieved 11 February 2020.