brought to you by CORE



ISSN 2456-3110 Vol 4 · Issue 4 July-Aug 2019

Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in

Indexed

An International Journal for Researches in Ayurveda and Allied Sciences





ORIGINAL ARTICLE

July-Aug 2019

An experimental study to evaluate the concept of Trividha Atisevana Varjya Dravya w.s.r. to Lavana

Dr. Shilpa Nimbal¹, Dr. Umapati C. Baragi², Dr. Kashinath Hadimur³, Dr. Jyothi Alias Jyostna⁴

¹Post Graduate Scholar, ⁴Assistant Professor, Dept of Samhita and Siddhanta, ³Associate Professor, Dept. of Rasa Shastra & Bhaishaiya Kalpana, BLDEA'S AVS Ayurveda Mahavidyalaya, Vijayapur, ²Associate Professor & HOD, Dept of Samhita and Siddhanta, Faculty of Ayurved, Main Campus, Uttarakhand Ayurved University, Dehradun, Uttarakhand, INDIA.

ABSTRACT

Background: Lavana is used as medicine as well as Ahara since ancient times. In Caraka Samhita it has been mentioned that three Dravyas viz. Pippali, Kshara (alkali) and Lavana (salt) can be used as emergency medicine, but they should not be consumed in excess (Ati Upayunjita). Hence in the present study Lavana has been evaluated in experimental animals in two different phases' viz. Acute administration at graded doses as part of acute toxicity study and Sub-Acute administration at fixed dose level, as part of toxic Sub-Acute toxicity study, to assess the possible adverse effects. Materials & Methods: Wistar strain albino rats of either sex weighing between 150 - 200g. body weights were used. The experiment was carried out in accordance with the direction of the Institutional animal ethics committee (IAEC) after obtaining its permission (Approval number IAEC - 138/k/2018). **Results:** Results were drawn based on histopathological reports and biochemical reports of each group of toxicity study. Acute toxicity study has been carried out in albino rats receiving the 2 dose level maximum at up to 10 times higher (855mg/kg) then the therapeutic equivalent dose (427.5mg/kg). In Sub-Chronic toxicity: dose given was five times higher than therapeutic equivalent dose and ten times the equivalent to human therapeutic dose for duration of 30 days. Discussion: Toxicity is not found in Acute study and in Sub-Acute study moderate to high toxicity is found.

Key words: Acute, Sub-acute, Toxicity, Lavana, Salt.

INTRODUCTION

Today's fast moving lifestyle and modernization has caused change in food pattern of human beings, and they have little time to think what they are eating is a healthy diet. Globalization has seriously affected one's eating habits and enforced many people to consume

Address for correspondence:

Dr. Shilpa Nimbal

Post Graduate Scholar, Dept of Samhita and Siddhanta, BLDEA'S AVS Ayurveda Mahavidyalaya, Vijayapur, Karnataka, India. E-mail: shilpanmbl346@gmail.com

Submission Date: 24/06/2019 Accepted Date: 16/08/2019

| Access this article online | | | | |
|----------------------------|----------------------------|--|--|--|
| Quick Response Code | | | | |
| | Website: www.jaims.in | | | |
| | DOI: 10.21760/jaims.4.4.26 | | | |

fancy and high calorie fast foods, popularly known as Junk foods. A set of fairly satisfactory dietic codes had been identified and prescribed by Ayurveda.

Any modifications in diets and even in their preparation style leads to ill health. Ayurveda explains the concept of Nitya Sevaniya (consumable) and Atisevaniya Varjya Dravyas (non conumable).

Trividha Atisevana Varjya Dravyas has been explained by Acharya Charaka in Rasavimaniya Adhyaya of Vimanasthana.

Pippali (Piper longum), Kshara (Alkali) and Lavana (salt) should not be consumed in excess quantity. If consumed it will cause various hazards. Among these three Dravyas, Lavana has been selected for the present study.

ISSN: 2456-3110

OBJECTIVE OF THE STUDY

- To collect, compile and experimentally analyze the concept of '*Trividha Ati Sevaniya Varjya Dravya's* w.s.r. to Lavana.
- 2. To evaluate the effect of *Lavana* (Samudra *Lavana*) experimentally in context of *Ati Sevana Varjya*.
- 3. To evaluate the sub-acute toxic effect of *Lavana* (*Samudra Lavana*) in albino rat two different dose levels.

MATERIALS AND METHODS

Materials

Test Drug

The test drug i.e. *Lavana* (sodium chloride) for the present study was procured from the Pharmacy of Rasashastra and Bhaishajya Kalpana, BLDEA'S AVS Ayurveda Mahavidyalaya, Vijayapur.

Experimental animals

- Wister strain albino rats were selected from Sri Venkateshwara Enterprises, suppliers of Laboratory animals, Bangalore. (CPCSEA =237).
- The rats were maintained under strict laboratory conditions, controlled with environmental temperature, humidity and light dark cycles.
- The rats were fed with balanced pellet diet as prescribed by CFTRI and water and libitum.

Inclusive criteria

- Healthy albino rats of either sex will be considered.
- Weighing about 150-200g
- Albino rats between 90 -120 days were included.

Exclusion criteria

- Rats less than 150g and more than 200g.
- Pregnant and diseased rats.
- Rats which are under trial of other experiments.

Mode of Administration

ORIGINAL ARTICLE

Drugs were administered through Oral route. 16 no. needle bent slightly at its tip and inserted into a cut IV tube to the length of needle to prevent oral injury. Needle fixed to the 2 ml syringe.

July-Aug 2019

Plan of the Study

The study is planned in two different phases as follows,

- Acute toxicity study 9 Albino rats
- Sub -acute toxicity study 12 Albino rats

Method

The Toxicological studies will be conducted according to Ayush Guidelines for screening for toxicity in the Animal house attached to Dept. of Rasashastra and Bhaishajya. BLDEA'S AVS Vijayapur. Standard pharmacological protocol will be adopted for the experimental study which will be mentioned in the description of experimental study. Whole work is planned to generate data from laboratory i.e., experiments on animals are performed as described in references.

Rat dose was calculated on the basis of Human dose by using Standard Conversion Method on the basis of body surface area ratio using the table of Paget and Barnes.

Dose calculation

Recommended human dose of *Lavana* (Common Salt) - 5gms/day

Rat dose = Human dose x 0.018 (for 200gm of body weight)

- = 0.09gm
- = 90mg

Acute study

- Study was divided in to 3 groups. Each group contain 3 rats.
- Recommended test dose is given to all the groups.

ISSN: 2456-3110

 Observed for 24 hrs, and after 24 hrs. Then scarifies was done. Blood is collected for laboratory investigation and organs sent for Histopathology.

| No of Rats | Control Group | TED X 5 | TED X 10 |
|------------|------------------|----------|----------|
| Rat 1 | Water | 382.5 mg | 765 mg |
| Rat 2 | Water | 427.5 mg | 855 mg |
| Rat 3 | Water | 427.5 mg | 855 mg |

Sub-acute Study

- Study is divided in to 4 groups. Each group contain 3 rats.
- 2. Recommended dose is given to all the groups.
- For 30 days dose is given. On 31st day scarifies is done.

| No of Rats | Control Group | TED | TED X 5 | TED X 10 | |
|------------------------------------|------------------|---------|----------|----------|--|
| Rat 1 | Water | 67.5 mg | 382.5 mg | 720 mg | |
| Rat 2 | Water | 67.5 mg | 427 mg | 697.5 mg | |
| Rat 3 | Water | 67.5 mg | 427 mg | 697 mg | |
| TED - Therapeutic Equivalent Dose. | | | | | |

Statistical analysis

The data generated is mentioned as Mean ± SEM. Difference among the groups is assessed by employing one way ANOVA with Dunnet's multiple't' test.

If P value is less than 0.05 - There is a significant difference.

If P value is more than 0.05 - There is no significant difference.

OBSERVATIONS AND RESULTS

Acute Group

No major difference has been observed in acute groups after giving respective doses. Even up to

855mg/kg dose level no mortality and behavioural changes were observed.

July-Aug 2019

ORIGINAL ARTICLE

Sub Acute Group

- 3 rats in a group 4 TED X 10, 3 rats died during the experiment. 1st expired on 5th day during the experiment 2nd rat on 8th day, and 3rd rat on 9th day during experiment.
- The rats belonging to TED X 5 group, were looking unhealthy at the end of the experiment.

Acute Study

Effect on Haematological and Biochemical Parameters.

| SN | Parameter | Control Group | TED X 5 | TED X 10 |
|-----|-----------------|------------------|---------|----------|
| 1. | Total WBC count | NSD | NSD | NSD |
| 2. | Diff. count | NSD | NSD | NSD |
| 3. | Lymphocytes % | NSD | NSD | NSD |
| 4. | Eosinophils % | NSD | NSD | NSD |
| 5. | Monocytes % | NSD | NSD | NSD |
| 6. | Basophils % | SD | SD | SD |
| 7. | RBC count | NSD | NSD | NSD |
| 8. | Haemoglobin % | NSD | NSD | NSD |
| 9. | Heamacrite | NSD | NSD | NSD |
| 10. | MCV | NSD | NSD | NSD |
| 11. | МСН | NSD | NSD | NSD |
| 12. | МСНС | NSD | NSD | NSD |
| 13. | RDW | NSD | NSD | NSD |
| 14. | Platelet count | SD | SD | SD |

ISSN: 2456-3110

| 15. | Platelet volume | NSD | NSD | NSD | |
|---|--------------------------------|-----|-----|-----|--|
| 16. | РСТ | NSD | NSD | NSD | |
| 17. | Platelet distribution width | NSD | NSD | NSD | |
| 18. | SGOT | NSD | NSD | NSD | |
| 19. | SGPT | SD | SD | SD | |
| 20. | Blood urea | SD | SD | SD | |
| 21. | Alkaline phosphate | NSD | NSD | NSD | |
| 22. | S. creatinine | SD | SD | SD | |
| NSD : Non Significant Difference, SD : Significant Difference | | | | | |

Table 4: Summary of the data on Histopathologicalchanges of the organs recorded during acute toxicitystudy.

| SN | Organs | Control Group | TED X 5 | TED X 10 |
|----|--------|---------------|-------------|-------------|
| 1. | Brain | Rat 1 - NSC | Rat 1 - SC | Rat 1 - NSC |
| | | Rat 2 - NSC | Rat 2 - NSC | Rat 2 - SC |
| | | Rat 3 - NSC | Rat 3 - SC | Rat 3 - SC |
| 2. | Left | Rat 1 - NSC | Rat 1 - NSC | Rat 1 - NSC |
| | kidney | Rat 2 - NSC | Rat 2 - NSC | Rat 2 - NSC |
| | | Rat 3 - NSC | Rat 3 - NSC | Rat 3 - NSC |
| 3. | Right | Rat 1 - NSC | Rat 1 - NSC | Rat 1 - NSC |
| | kidney | Rat 2 - NSC | Rat 2 - NSC | Rat 2 - NSC |
| | | Rat 3 - NSC | Rat 3 - NSC | Rat 3 - NSC |
| 4. | Left | Rat 1 - NSC | Rat 1 - SC | Rat 1 -NSC |
| | lung | Rat 2 - NSC | Rat 2 - SC | Rat 2 -SC |
| | | Rat 3 - NSC | Rat 3 - SC | Rat 3 - SC |
| 5. | Right | Rat 1 - NSC | Rat 1 - SC | Rat 1 - NSC |
| | lung | Rat 2 - NSC | Rat 2 - SC | Rat 2 - SC |
| | | Rat 3 - NSC | Rat 3 - SC | Rat 3 - SC |
| 6. | Liver | Rat 1 - NSC | Rat 1 - NSC | Rat 1 - NSC |

| | | Rat 2 - NSC | Rat 2 - SC | Rat 2 - NSC |
|----|--------|-------------|-------------|-------------|
| | | Rat 3 - NSC | Rat 3 - SC | Rat 3 - SC |
| 7. | Spleen | Rat 1 - NSC | Rat 1 - SC | Rat 1 - NSC |
| | | Rat 2 - NSC | Rat 2 - NSC | Rat 2 - NSC |
| | | Rat 3 - NSC | Rat 3 - NSC | Rat 3 - NSC |
| 8. | Heart | Rat 1 - NSC | Rat 1 - SC | Rat 1 - NSC |
| | | Rat 2 - NSC | Rat 2 - NSC | Rat 2 - NSC |
| | | Rat 3 - NSC | Rat 3 - SC | Rat 3 - SC |
| | | | | |

July-Aug 2019

NSC - No Significant Changes, SC - Significant Change.

ORIGINAL ARTICLE

Sub-acute Study

Effect on Haematological and Biochemical Parameters

| SN | Parameter | Control Group | TED | TED X 5 |
|-----|-----------------|------------------|-----|---------|
| 1. | Total WBC count | NSD | NSD | NSD |
| 2. | Diff. count | NSD | NSD | NSD |
| 3. | Lymphocytes % | NSD | NSD | NSD |
| 4. | Eosinophils % | NSD | NSD | NSD |
| 5. | Monocytes % | NSD | NSD | NSD |
| 6. | Basophils % | NSD | NSD | NSD |
| 7. | RBC count | NSD | NSD | NSD |
| 8. | Haemoglobin % | NSD | NSD | NSD |
| 9. | Heamacrite | NSD | NSD | NSD |
| 10. | MCV | NSD | NSD | NSD |
| 11. | МСН | NSD | NSD | NSD |
| 12. | МСНС | NSD | NSD | NSD |
| 13. | RDW | NSD | NSD | NSD |

ISSN: 2456-3110

ORIGINAL ARTICLE

July-Aug 2019

| 14. | Platelet count | NSD | NSD | NSD |
|-----|--------------------------------|-----|-----|-----|
| 15. | Platelet volume | NSD | NSD | NSD |
| 16. | РСТ | NSD | NSD | NSD |
| 17. | Platelet distribution width | NSD | NSD | NSD |
| 18. | SGOT | NSD | NSD | NSD |
| 19. | SGPT | NSD | NSD | NSD |
| 20. | Blood urea | NSD | NSD | NSD |
| 21. | Alkaline phosphate | SD | SD | SD |
| 22. | S. creatinine | SD | SD | SD |

Summary of the data on Histopathological changes of the organs recorded during sub-acute toxicity study.

| SN | Organs | Control Group | TED | TED X 5 | TED X 10 |
|----|-----------------|--|---|--|----------------|
| 1. | Brain | Rat 1 - NSC - NSC - NSC - NSC - | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - NSC Rat 2 - NSC Rat 3 - SC | Rat 1 - NSC |
| 2. | Left kidney | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - SC |
| 3. | Right kidney | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - NSC Rat 2 - NSC Rat 3 -SC | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - SC |
| 4. | Left | Rat 1 - | Rat 1 - SC | Rat 1 - SC | Rat 1 - |

| | lung | NSC | Rat 2 - SC | Rat 2 - SC | SC |
|----|---------------|--|---|--|----------------|
| | | Rat 2 - NSC | Rat 3 - SC | Rat 3 - SC | |
| | | Rat 3 - NSC | | | |
| 5. | Right lung | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - SC Rat 2 - SC Rat 3 - SC | Rat 1 - SC Rat 2 - SC Rat 3 - SC | Rat 1 - SC |
| 6. | Liver | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - SC Rat 2 - NSC Rat 3 - SC | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - SC |
| 7. | Spleen | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | |
| 8. | Heart | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - SC Rat 2 - NSC Rat 3 - SC | Rat 1 - NSC Rat 2 - NSC Rat 3 - NSC | Rat 1 - NSC |

DISCUSSION

In the present study *Lavana* is taken, there are five types of *Lavana*, in which *Samudra Lavana* is used for present study, among the types of *Lavana*'s, *Saindhava Lavana* is said to best for internal use.

Acute Study

There are totally 22 parameters referred in blood investigation report. Statistically we see significant difference in Basophils and mild increase in TED X 5 group in Rat 2, may be due to chronic non-specific inflammation in some organs. Statistically there is no

ISSN: 2456-3110

ORIGINAL ARTICLE July-Aug 2019

significant difference in all RBC related parameters. All are normal. Statistically there is significant difference, we find mild increase in platelet count in TED X 5, TED X 10 group Rats due to chronic nonspecific inflammation in some organs. Statistically we see that there is a significant difference in SGPT, Blood urea, S. Creatinine and moderately increase in SGOT levels in TED X 5 and TED X 10 groups in all rats, increase in SGPT in TED X 10 group rats, and increase in Alkaline phosphate in TED X 5, TED X 10 group rats, these all may be due to Chronic Nonspecific Inflammation. Over all there is a mild to moderate increase in some parameters in blood.

In the present study, in acute there are 3 groups, In Group 1 (control group) histopathology level all the organs are normal, in this group experimental drug was not given to rats only water was given to rats. Histopathology report of group 3 (TED X 5) and group 4 (TED X 10). In present Acute study, in group 2 (TED X 5) Rats, histopathologically we found that in both the lungs of all 3 Rats there was a congested blood vessels and diffuse lymphocytic infiltration to interstium and occasional lymphoid aggregates were noted, due to this there is a mild increase in Basophill count and mild increase in platelet count in all three Rats. There is a mild increase in SGOT and SGPT and alkaline phosphate in Rat 2 and Rat 3, this may be due to congested blood vessels and mononuclear cell infiltration the portal triad also noted fatty changes at the places in liver. All these suggest that least amount of toxicity was found in acute study of group 2. In Group 3 (TED X 10), in Rat 2 and Rat 3, we found congested blood vessels and occasional perivascular lymphocytic infiltration in brain and focal area of haemorrhage, this may also occur in process of death. And in Rat 3 in liver, histopathologically we found congested blood vessels and mono nuclear cell infiltration portal triad and also noted fatty changes at places due to this there is a moderate increase in SGOT, SGPT and alkaline phosphate. There is a mild change in platelet count may be due to congested blood vessels and diffuse lymphocytic infiltration in to interstium, occasional lymphoid aggregates seen in right and left lung in Rat 2 and Rat 3. All these suggest that there might be a mild toxic level in acute group 3 at dose level of TED X 10.

Sub Acute Study

Statistically there is no significant in all rats. In group 2 there is mild increase in WBC count in rat 3, and in group 3, mild increase in WBC count in rat 1, 2, 3 and mild increase in lymphocytes in all rats of group 2 and group 3. May be due to chronic nonspecific inflammation in some organs. Other parameters are normal. Statistically there is no significant difference in all RBC related parameters. May be due to chronic non-specific inflammation in some organs. Other parameters are normal. Statistically there is no significant in all rats. But mild increase in platelet count in group 2 and group 3 in rat 2 & 3. May be due to chronic non-specific inflammation in some organs. Other parameters are normal. There is statistically significant difference in Alkaline phosphate and S. Creatinine in all groups. In group 2 there is mild increase SGOT,SGPT, moderate increase in alkaline phosphate in rat 3 this may be due to chronic nonspecific inflammation where as in group 3 mild increase in alkaline phosphate in rat 1, rat 2, highly increase in SGOT, SGPT in rat 1 and in rat 3 may be due to chronic non-specific inflammation.

In Histopathalogy study, in sub-acute group 2 (TED), histopathalogy in both lungs of Rat 1 and Rat 2 found congested blood vessels were seen diffused lymphocytic infiltration in to interstium and a place of lymphoid aggregates were seen, this causes mild variation in WBC count and mild increase in platelet count. Left lung is normal in Rat 3 where as in right lung congested blood vessels and focal area of haemorrhage was seen. Mild increase in SGOT, SGPT, moderate increase in alkaline phosphate was seen, this may be due to congested blood vessels and focal area of haemorrhage in Rat 3 in right kidney. This suggests that there may be mild toxic effect in all Rats.

In Group 3 - in Rat 3, there is a mild increase in WBC count and platelet count which may be due to congested blood vessels and focal areas of haemorrhage and mono nuclear cell Infiltration in right and left lung in Rat 2 & 3, there is a congested

ISSN: 2456-3110

ORIGINAL ARTICLE

July-Aug 2019

blood vessels were also seen, diffused lymphocytic infiltration in to interstium at places, lymphoid aggregates were seen, this causes highly increase in SGOT & mild increase of Alkaline phosphate in Rat 1 & 3. All these suggest that moderate toxicity can be found in group 3 (TED X 5). As discussed earlier all Rats died in between the experiment, only one Rat organs were able to send for histopathology study. Report says that there is a congested blood vessels and lymphocytic infiltration in portal triad. At this dose level TED X 10 toxicity is found. All these suggests that Highly toxicity can be seen in group 4 (TED X 10).

Microphotographs Acute toxicity Study (Ted X 10)



Left Kidney Normal



Heart Normal



Brain Occasional Lymphostic Infilteration



Spleen Normal

CONCLUSION

Based on present study, *Lavana* is again proved to be *Atisevaniya Varjya Dravya*. So we should not consume excess to avoid health hazards. By animal experiment, we found in acute group no toxicity was found, where as in Sub-acute group moderate to high toxicity was found. Thus *Lavana* should not be consumed in excess.

REFERENCES

 Acharya Vidhyadar Shukla, Charaka Samhita, Vimanastana, 1st chapter, Rasavimaniya Adhyaya, Chaukamba Publications. Varanasi. Pg .no 552,

ISSN: 2456-3110

ORIGINAL ARTICLE July-Aug 2019

- 2. Ayush gruidelines for Toxicity / safety evaluation of Ayurveda and Siddha plant drugs, available from www.ccras.nic.in.
- Paget GE and Barnes JM. Evaluation of drug activities.
 In: Lawrence DR and Bacharach AL, editors, Pharmacometrics. New York: Academic Press; 1964.p.161.

How to cite this article: Dr. Shilpa Nimbal, Dr. Umapati C. Baragi, Dr. Kashinath Hadimur, Dr. Jyothi Alias Jyostna. An experimental study to evaluate the concept of Trividha Atisevana Varjya Dravya w.s.r. to Lavana. J Ayurveda Integr Med Sci 2019;4:191-198. http://dx.doi.org/10.21760/jaims.4.4.26

Source of Support: Nil, Conflict of Interest: None declared.

Copyright © 2019 The Author(s); Published by Maharshi Charaka Ayurveda Organization, Vijayapur (Regd). This is an open-access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.