

PHARMACEUTICO-ANALYTICAL STUDY OF *KUSHMANDA GHRITHA* AND ASSESSMENT OF ITS ANTI CONVULSANT ACTIVITY ON ALBINO MICEManjunath Sajjan¹, Santhosh Kulkarni², Shashidhar J³.Asst Professor¹, Professor & HOD², Professor³, Department of PG Studies in Rasashastra & Bhaishajya Kalpana SIGAMC Koppal.Corresponding Author: drmanjunathsajjan@gmail.com<https://doi.org/10.46607/iamj0111112023>

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**ABSTRACT**

Sneha Kalpana are the formulations where *Ghritha* and *Taila* are used as base to extract water soluble and lipid soluble active principles. *Ghritha* is considered as the best *Sneha Dravya* because of its speciality i.e., “*Sam-skarasyaanuvartanam*” means *Ghritha* carries the properties of Drug without leaving its own natural properties. *Ghritha* is also having Anti-oxidant property and ability to cross Blood Brain Barrier because of which *Ghritha* preparations are effectively used as *Medya* as well as in many psycho-somatic disorders. *Kusmanda Ghritha* is one of the such preparation, which is advised in *Apasmara* and acting as *Medya*. It is mentioned in *Chakradatta* in the context of *Apasmara chikitsa*¹.

Keywords: *Kushmanda Ghritha*, *Sheha kalpana*, *Kushmanda Ghritha* Analytical and Pharmaceutical study, *Apasmara*, experimental Study of *Apasmara*, *Epilepsy*.

INTRODUCTION

Sneha kalpana medicines commonly prescribed internal and external use of a patients. *Sneha* preparations have better pharmacokinetic action in comparison to other dosage forms because of the lipoid nature

of the bio-membranes, as lipid soluble substances readily permeate into the cells. *Apasmara* is the disease, which is third most common Neurological disorder affects 1% of the general population all over

the world. The recurrence rate of seizures after drug withdrawal is about 40%, so there is need of better management strategies for which *Ayurvedic Ghrita* preparations are needed because of *Ghrita* Preparations having capacity to Cross Blood Brain Barrier. *Kushmanda Ghrita* one such preparation mentioned by Acharya *Chakradatta* in the context of *Apasmara*. In Ayurveda also many formulations are available for treatment of *Apasmara*, however there is a search of formulations which shows quick and long lasting efficacy on epilepsy, so *Kushmanda Ghrita* is having good efficacy to treat the *Apasmara* mentioned by

acharya *Chakradatta*. In this regard Pharmaceutico-analytical study of *Kushmanda Ghrita* and assessment of its anticonvulsant activity on Albino Mice was taken for study. The efficacy of *Kushmanda Ghrita* against MES (maximum electrical shock induced seizures) seizure as indicated by measuring Onset of tonic extensor seizure(sec) and Duration of tonic hind limb extension seizure (sec). These results are comparable to the effects produced by the Standard drug phenytoin.

Pharmaceutical Preparation of *Kushmanda Ghrita* : Drugs Used for MG and KG

Main drugs for KG	Associated drugs for MG
<i>Murchita Ghrita</i>	<i>Hareetaki</i>
<i>Yasthimadhu kalka</i>	<i>Amalaki</i>
<i>Kushmanda Swarasa</i>	<i>Vibhitaki</i>
	<i>Haridra</i>
	<i>Musta</i>

The Ratio 1:4:18 part of *Yasthimadhu kalka* :*Murchita Ghrita* :*Kushmanda Swarasa* is taken respectively

Ingredients in KG and its Quantity¹:

<i>Kalka</i>	<i>Ghrita</i>	<i>Swarasa</i>
<i>Yasthimadhu</i>	<i>Murchita Ghrita</i>	<i>Kushmanda swarasa</i>
1 part	4 part	18 part
250 gm	1 litre	18 litre

Murchana of Ghrita² was Prepared as per Classics with *kwatha churna* of *Haritaki, Amalaki, Vibhitaki, Musta, Haridra* .Then MG was used to prepare KG.

Method of preparation of KG 1 litre of *Murchita Ghrita* was taken in wide mouthed stainless steel vessel, it was kept over gas stove and fire was ignited and allowed to heat over *mandagni*, till appearance of foam and later fire was put off, after cooling , *kalkadravyas* was mixed with *matulunga swarasa* and made it into *kalka*, then added it into *Ghrita* and continuous stirring was done, it was followed by adding of mentioned quantity of *Kushmanda Swarasa*, then Start giving *mandagni* continuously. Frequent stirring was done to allow proper mixing of *kalkadravyas* and *Ghrita*, Procedure was carried out for span of 3 days till obtaining *Sheha siddhi lakshana*'s³ .After *Sneha*

Siddi lakshana ,*Ghrita* was squeezed out of *kalka dravya* when it was luke warm with the help of cloth to avoid much loss. Now the obtained filtrate is called *Kushmanda Ghrita* .

DEFINITION OF APASMARA: *Apasmara* is defined as *Apagama* of *Smrti* associated with *Bibhatsa Cesta* due to derangement of *Dhi* and *Sattva*⁴ *Apasmara* is *Apaya* of *Smrithi*(loss of memory)where the *Chitta*(mind)gets deranged by the aggravated *Doshas*, and gets localized in the *Hridaya*(mind) and *Deha*. When the mind gets deranged by the obstruction of *Sanjna Vahasrotas* the following symptoms are seen. Patient enters into darkness (loss of consciousness) with his mind becoming inactive.

SAMPRAPTI GHATAKA OF APASMARA

The involvement of both the *Sharirika* and *Manasika* *Doshas* is vital for the *Samprapti*. *Sharirika Doshas*:

Dosha : *Vata* and *Pitta* – *Sharirika Doshas* (*Ch*, *Chi*, *10/6*)

Raja and *Tama* – *Manasika Doshas*

Dushya : *Rasa Dhatu*

Agni : *Jatharagni*

Agnidusti : *Mandata*

Srotas : *Samjna vaha* , *Rasavaha Srotas* .

Physio-chemical parameters of Kushmanda Ghrita and Murchita Ghrita

Organoleptic parameters : Analytical Study

Parameters	Kushmanda Ghrita Results	Murchita ghrita Results
Form	Liquid	Liquid
Colour	Greenish Brown	Yellowish
Odour	Characteristic	Characteristic
Taste	Madhura Tikta	Madhura

Physio-chemical parameters of Kushmanda Ghrita and Murchita Ghrita⁵⁻¹³

Parameters	Results Kushmanda ghrita	Murchita Ghrita
Specific gravity	0.92 g/cm ³	0.91g/cm ³
Weight	0.95gm/ml	0.89gm/ml
Density	0.95kg/m ³	0.91kg/m ³
Refractive index	1.461	1.460
Viscosity	25.7mPa	26.5mPa
Acid value	2mg	0.4mg
Iodine value	15.5mg	22.8mg
Saponification Value	189.89mg	305.25mg
Peroxide value	3.8meq/kg	3.4meq/kg
Rancidity	Negative	Negative

TLC of Kushmanda ghrita

Particulars	Steroids	Terpenoids	Flavonoids	Alkaloids
Solvent front	7	5.1	8	8
Sample	1.8&3.1	0.9,1.9 & 4.3	1 , 6.2 &7.2	7.1
Rf values	0.257 &0.442	0.176 , 0.372 &0.843	0.125, 0.775 & 0.9	0.887
Reports	+	+	+	+

TLC of Murchita ghrita

Particulars	Steroids	Terpenoids	Flavonoids	Alkaloids
Solvent front	7.7	6.7	7.6	7.3
Sample	2.2	0.8	2.1	6.4
Rf value	0.285	0.119	0.276	0.876

Reports	+	+	+	+
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EXPERIMENTAL STUDY.

In the present study an In-Vivo method is used to screen the Anti-convulsant activity of *Kushmanda Ghrita* by Maximal electro shock(MES) induced seizures method by using Electro Convulsimeter.

Experimental Methodology: Preparation of drugs according to group : Shows drugs according to groups.

Group	Number of Mice	Drugs	Purpose
Group 1	6	given with 2% w/v gum acacia served as receive MES (60 mA for 0.2 Sec),	To serve as Control
Group 2	6	Phenytoin	To serve as Standard
Group 3	6	<i>Kushmanda Ghrita</i> Low dose	To serve as Trial
Group 4	6	<i>Kushmanda Ghrita</i> High dose	To serve as Trial

METHODOLOGY:

Maximal electro shock (MES) method induced Seizures in mice:

Albino mice of either sex with a body weight 22-25g were divided into 4 groups of 6 animals in each . Group 1 will serve as normal and will receive MES (60 mA for 0.2 Sec), Group 2 will be administered phenytoin (25mg/kg p.o) and serve as standard. Group 3 - 4 will be administered(1200mg/body kg wt and 2400mg/body kg wt) oral with compound *Kushmanda Ghrita* with low dose and high dose respectively for seven consecutive days. On the eighth day, one hour after oral administration of the compound/vehicle/standard drug MES seizures will be induced by electro-Convulsimeter. A 60mA current will be delivered trans auricularly for

0.2sec in mice. This current intensity should elicit complete tonic extension of the hind limbs in control mice. For recording various parameters, mice will be placed in a clear rectangular plastic cage with an open top, permitting full view of the animal’s motor responses to seizure.

This current intensity should elicit complete tonic extension of the hind limbs in control mice. The onset time of seizures and duration of tonic hind limb extension and mortality for each animal was observed. Decrease in duration of hind limb extension was considered as a protective action^{14,15}.and Duration of tonic hind limb extension (sec.)seizures parameters were observed as end point.

Results:-

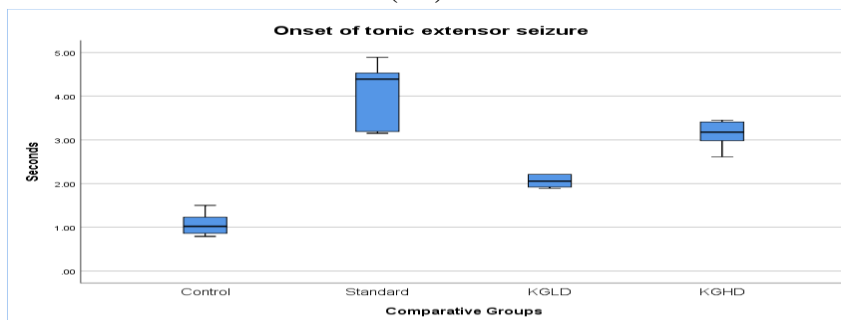
Different time intervals comparisons	Descriptive					ANOVA						
	Treatment Groups	N	Mean	±SD	±SE	Variance	Sum of Squares	Df	Mean Square	F	P	Remarks
Onset of tonic	Control (Gum of acacia)	6	1.07	0.268	0.109	Between Groups	30.3	3	10.1	50.3	<0.001	HS

extensor seizure (sec)	Standard (Phenytoin)	6	4.09	0.738	0.301							
	<i>Kusmanda Ghrita</i> (Low Dose)	6	2.14	0.304	0.124	Within Groups	4.0	20	0.2			
	<i>Kusmanda Ghrita</i> (High Dose)	6	3.13	0.310	0.127							
Duration of tonic extensor seizure (sec)	Control (Gum of acacia)	6	23.47	1.228	0.501	Between Groups	646.6	3	215.5	102.86	<0.001	HS
	Standard (Phenytoin)	6	10.40	1.263	0.516							
	<i>Kusmanda Ghrita</i> (Low Dose)	6	17.55	1.618	0.660	Within Groups	41.9	20	2.1			
	<i>Kusmanda Ghrita</i> (High Dose)	6	11.72	1.632	0.666							
IS - Insignificant; MS - Moderately Significant; S - Significant; HS - Highly significant.												

According into statistical analysis of onset of time in tonic extensor seizure ,which is having F value 50.3 ,which is highly significant at $P < 0.001$ between all the groups and within the group.

In Duration of time in tonic extensor seizure ,which is having F value 102.86 ,which is highly significant at $P < 0.001$ between all the groups and within the group.

Pair wise comparison According to Scheffe in homogenous subset of Onset of tonic extensor seizure: Onset of tonic extensor seizure (sec)



- ❖ It shows Lower dose of KG is better than control group .
- ❖ Higher dose of KG is better than lower dose (1200 mg/kg of wt)
- ❖ Phenytoin Standard group is better than higher dose of KG(2400mg/kg of wt)

❖ **Pair wise comparison According to Scheffe in homogenous subset of Onset of Duration of tonic extensor seizure:**

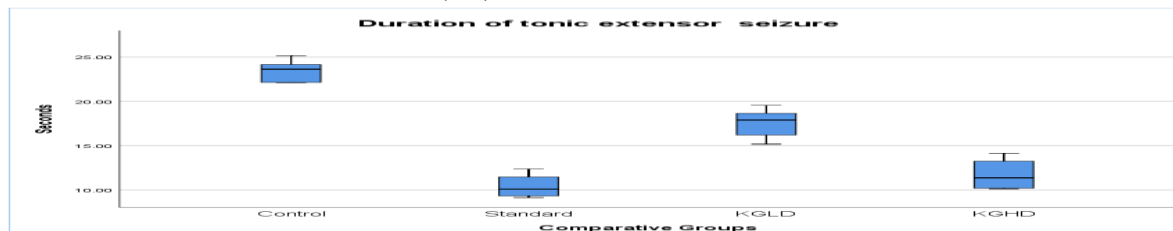
Table no: 53 Duration of tonic extensor seizure (sec)

Homogeneous Subsets: Scheffe

Treatment groups	N	Subset for alpha = 0.05		
		1	2	3
Standard	6	10.40		
KGHD	6	11.72		
KGLD	6		17.55	
Control	6			23.47
	Sig.	0.49	1.00	1.00

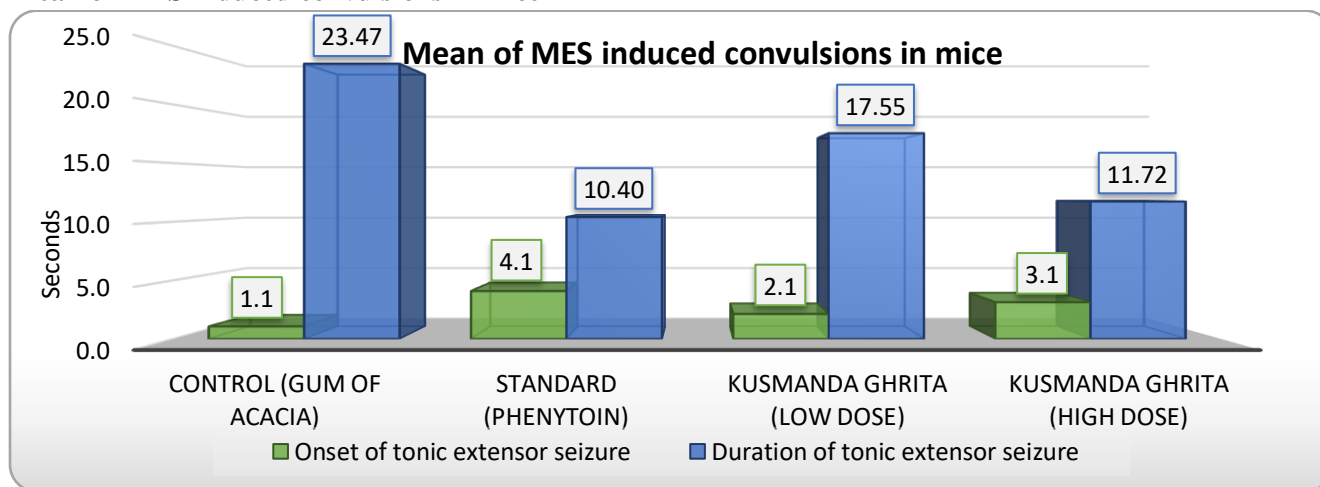
Means for groups in homogeneous subsets are displayed.

❖ **Duration of tonic extensor seizure (sec)**

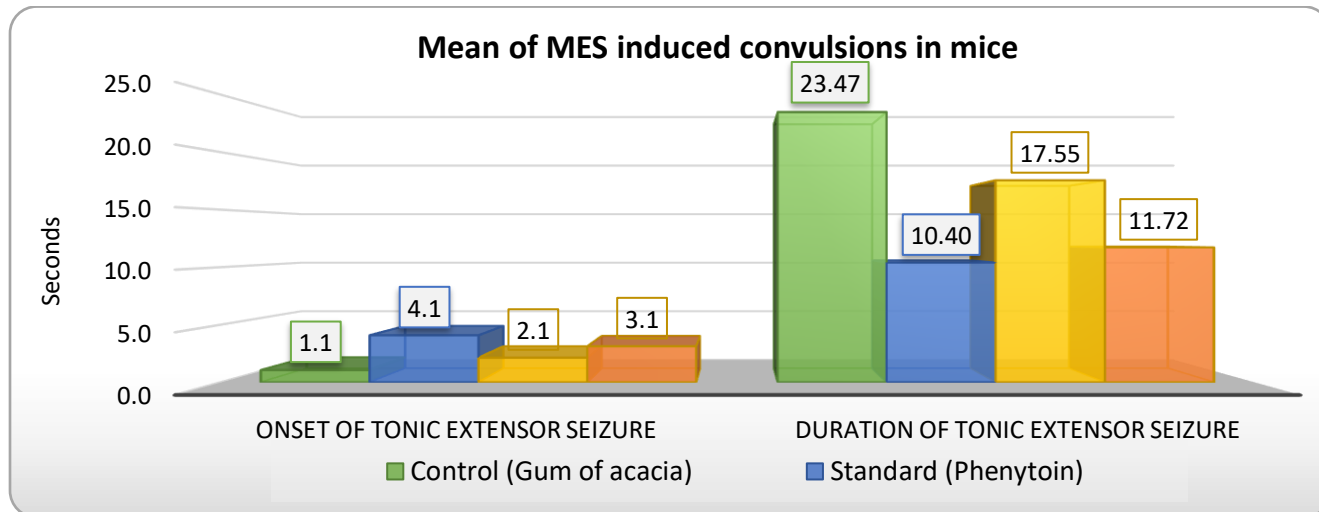


- ❖ **It shows** Lower dose Group of KG is better than control group
- ❖ Lower dose Group of KG is not equal to standard group
- ❖ There is no significant difference between higher dose Group and standard group .both are coming under same subset ,there is no difference between these two groups ,so it is statistically prove that Higher dose of KG is equal to Standard group in duration of tonic extensor seizure.

Mean of MES induced convulsions in mice



Mean of MES induced convulsions in mice



Mean data of effect *Kusmanda Ghrita* on MES induced convulsions in mice

Sl. No.	Treatment	Dose	Onset of tonic extensor seizure (sec)	Duration of tonic extensor seizure (sec)	Death /Recovered
1	Control (2% Gum acacia p.o.)	5mg/kg(p.o)	1.080±0.1092	22.50±2.040	Recovered
2	Standard (Phenytoin)	25mg/kg (p.o.)	4.080±0.3011***	10.80±4.128***	Recovered
3	<i>Kusmanda Ghrita</i> (KGLD)	1200mg/kg (p.o.)	2.160±0.1240**	14.65±1.404*	Recovered
4	<i>Kusmanda Ghrita</i> (KGHD)	2400mg/kg (p.o.)	3.153±0.1265***	12.82±1.548**	Recovered

It was observed that, The test sample *Kusmanda Ghrita* was shown significant anticonvulsant in a dose dependent manner effect as compared to control by increasing onset time of seizures and reducing the duration of tonic extensor phase. The anticonvulsant activity was shown significant in high dose of test sample as compared to low dose of test sample. In case of onset of seizures Standard Drug is better than high dose of KG. In case of duration of tonic extensor seizure high dose(2400mg/kg of wt) of KG is equal to standard Drug Phenytoin.

DISCUSSION

KG having *medhya* property produces good quality of *Sadhaka pitta* responsible for comprehension and data analysis. It uplifts the *Sattva guna* and counteracts the aggravated *rajas* and *tamas*. It acts on *agni* especially the *Sadhakagni* responsible for nutrition to brain cells by improving the process for transformation and assimilation.

KG is Agni Dipana, Dhatwagni Dipana property - Nourishes All Dhatus, By Snigdha ,Guru Guna ,Madhura Vipaka –Controls Chala And Laghu Guna Of Aggravated Vata, Due To Madhura Rasa ,Madhura Vipaka ,Madhura Veerya Pacifies Pitta And It Will Also Retaining Avalambaka Kapha Also, Elevation Of Ojus, Upliftment Of Satva Guna, Re-Establishment Of Dhee, Dhriti, Smruti, Correcting Vitiated Rajas And Tamas By Eliminating The Srot-rodha, Helps In Reliving Sigh And Symptoms Of Apasmara.

CONCLUSION

- ❖ KG is best in Vata Pittaja Apasmara
- ❖ Rf values of TLC states that the components seen in the KG was shown different places were travelled in glass slide which shows more phyto chemicals are there in KG comparatively in the MG .
- ❖ The anticonvulsant activity was shown significant in high dose of test sample as compared to low dose of test sample. In case of onset of seizures Standard Drug is better than high dose of KG. In case of duration of tonic extensor seizure high dose(2400mg/kg of wt) of KG is equal to standard Drug Phenytoin.

GHRITA MURCHANA



FIG 1- Murchana drugs FIG- 2- Course powder of MG FIG:3 -Nimbu Swarasa FIG:4 Murchana Dravya Kalka



FIG :5 Process of Boiling FIG:6 Murchita Ghrita

KUSHMANDA GHRITA PREPARATION



FIG:7 KUSHMADA PHALA FIG:8 K PHALA JUICE FIG :9 YASTIMADHU KALKA FIG :10 KG BOILIG PROCESS



FIG: 11, KUSHMANDA GHRITA END PRODUCT . KG: SNEHA SIDDI LAKSHANA FIG:12 .VARTIVATH KALKA . FIG:13. SHABDA HINA

EXPERIMENTAL STUDY: MES METHOD



FIG: 14,ANIMAL HOUSE FIG:15 : DRUG LOADING IN SYRINGE FIG:16: DRUG ADMINISTRATION FIG:17: MES STIMULUS .



FIG :18: TONIC EXTENSOR SEIZURE FIG:19: TONIC FLEXION SEIZURE FIG:20 : STATE OF RECOVERY

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