Dermatology and Venereology



Research Article | Open Access

Leech Therapy and Unani Herbal Formulation on Atopic Eczema

K. Tabassum^{1,*}, Arifuddin², Yasmin³, K. Mohammad Nasar³

¹Department of General Medicine, Dr. Abdul Haq Unani Medical College, India ²Department of General Medicine, Govt. Nizamia Tibbi College, India ³National Institute of Unani Medicine, India

*Correspondence: K. Tabassum, Department of General Medicine, Dr. Abdul Haq Unani Medical College, India. E-mail: tabassum.nium@gmail.com

Received: February 24, 2021; Accepted: March 19, 2021; Published: March 26, 2021

Copyright: © 2021 Tabassum K, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

Introduction: Nare Farsi (Atopic Eczema) is an associate degree inflammatory skin reaction characterized by cutaneous sensation, redness, scaling, cracking, and oozing. constitutes a significant proportion of all skin diseases and affects QoL. army unit medical aid plays a crucial role in skin diseases, particularly dermatitis.

Material and Methods: This trial was conducted to judge the result of Leech medical aid and unani seasoning formulation on dermatitis within the Department of Moalijat (General Medicine), Govt. Nizamia Tibbi school, and Hyderabad throughout the year of 2005-2008. The study consisted of four years older who were enclosed. were given Oral simmering of unani drug alongside the native application of leech in check cluster, whereas in comparative cluster oral and native unani seasoning formulation got for four weeks and followed up one month when trial.

Results: Results were assessed by victimization the Student's' check and therefore the 2 teams were compared concerning the relief of symptoms by X² check. The results showed a big improvement in signs and symptoms each within the check cluster (p<0.05).

Conclusion: native application of leech on Nare Farsi was found higher as compared to the native application of unani seasoner drugs.

Keywords: Atopic eczema; Leech therapy; Morbid humor.

INTRODUCTION

Eczema may be a chronic inflammatory skin complaint characterized by cutaneous sensation, burning sensation, erythema, scaling, cracking, crusting swelling, papules, weeping, and oozing of the skin. it's largely seen on folds of elbows or behind the knees. The lesions vary from cyst to latensification of skin on a background of poorly demarcated redness [1]. dermatitis could also be related to alternative atopic diseases like allergic rhinitis and respiratory disease. folks with dermatitis even have a dry skin tendency, which makes them liable to the drying effects of soaps. It starts in early life; concerning eightieth of cases had it before the age of five years [2-5]. The overall prevalence of 15-20% is according in kids aged between 7-18 years. The prevalence of all sorts of diseases of the skin was eighteen per 1000; seven of them had atopic eczema, Hand disease of the skin, Dyshidrotic disease of the skin, and Nummular disease of the skin every accounted for concerning 2 per a thousand [6-9]. it's because of genetic predisposition, allergic reaction, and infirmity. Climate and psychological factors will play a crucial role in the prevalence of disease of the skin, there's sometimes a case history of allergic respiratory disease, allergic rhinitis, etc. climatically extremes like heat, dampness, severe cold, and psychological stress promote the event of disease of the skin. In the dry winter of northern Asian country cracking of the covering of exposed elements might end in disease of the skin.

According to unani philosophy, Nare Farsi results from admixing of Safra American state Sauda Mohratiqua (Abnormal yellow and black bile) with blood. This abnormal humor alters the mizaj of blood likewise because the organs get nourishment from it. The body's corrective force (Tabiyat) expels the abnormal humor towards the skin, as a result of expelled humor area unit extremely irritating and hot, therefore they cause cutaneous sensation and burning sensation. The viscous half of} these humor might conclude as scale

or crusts and diluted hot part accumulated as vesicles [10].

Diagnosis of disease of the skin has typically supported the sign and symptoms, case history, examination of skin, and laboratory investigations like High humor IgE levels or high specific IgE levels [11]. It will be checked by radio-immune absorbent assay [RAST test] of blood or indirectly by skin prick test. A peripheral blood symptom might also be seen in disease of the skin [12].

Various therapies are used for this clinical condition however all areas unit with poor response and limitations. Treatment with Unani drugs is considered the simplest thanks to higher satisfactoriness, safety, and effectuality, potency, low value with least or no aspect effects. several Unani seasoner medicines like Unnab, Shahatra, Mundi, Charita, etc. area units mentioned within the classical texts for skin diseases and that they area unit in use and giving sensible results. Among them, Ushba Desi for oral use was designated for the trial on the idea of its Musaffi (Blood Purifier), Munzij American state Mushil (Active and Purgative), Mullyin (Laxative), Musakin Jild, Jali (detergent), Dafe Kharish (Anti Itching), Manaeth and Dafae Ufoonat (Anti Septic) properties and on similar ground tree oil (Azadirakta Indica Linn), Gandhak (Sulphur), Kafoor (Camphor) and Ghekwar (Aloe vera) were designated for native application.

According to the Unani system of drugs, leech medical aid works on the principles of Tanqiyae Mawad (Evacuation of Morbid Humors) and Imalae Mawad (Diversion of humor). Tanqiyae Mawad means that the resolution and excretion of morbid humor and excess fluids from the body, thereby maintaining the equilibrium within the quality and amount of body humor, that are literally liable for the upkeep of traditional health. Imalae Mawad refers to the diversion of the morbid fluids from the positioning of the affected organ to the positioning wherever it's simply expelled from the body tissues. supported this holistic approach, leech medical aid was designated for the management of Nare farsi (Atopic Eczema). The effectiveness of this medical aid might also be attributed to the Mokhaddir (Sedative) and Muhallil (Antiinflammatory) actions of spittle of leeches.

Objectives

- To compare the effectuality and safety of Leech medical aid and native application of Unani seasoner Formulation within the management of Nare farsi
- To improve the standard of Life (QoL) of the patients

MATERIAL AND METHODS

The clinical test entitled "A Comparative clinical test on Leech medical care and Unani flavorer Formulation on Atopic Eczema" was distributed in Government Nizamia Tibbi school and Hospital throughout 2005-08. Total forty patients archaic cluster of 21-50 years with complaints of itchiness and burning sensation, erythema, scaling, cracking, crusting, swelling, papules, weeping, and oozing of the skin were enclosed within the study. They were at random divided into check and comparative teams. an indepth history concerning age, socioeconomic standing, occupation, presenting grievance with onset and length was noted just in case Record type [CRF]. Medical, Past, and Family Histories were conjointly recorded. Patients were completely examined for assessment of their general health to rule out the other illness. Patients were investigated for ESR, Eosinophils, and Ig before and when trial. when taking their consent, they were enclosed into the trial. At the time of their first visit the patients were provided an inquirer and explained the way to fill it. Before beginning the trial, moral Committee Approval was taken.

Study style

Randomized Comparative Clinical Study.

Study length

Sample size: twenty subjects in every cluster

Method of an Assortment of Knowledge

- 1. Sign and symptoms
- 2. Laboratory investigations

Selection Criteria

Inclusion criteria: each gender between the ages of 21-50 years. Complaint of itchiness, burning sensation, redness, scaling, cracking, crusting, swelling, weeping, and oozing of the skin.

Exclusion criteria: Patient with general malady like HTN, DM, Impaired urinary organ or viscus functions. Patients with alternative skin diseases like skin disease, Ictheosis, etc. Allergic eczema.

Criteria for choice of the leech: Leech with a tiny head and of tiny size like a rat tail, having 2 golden lines on its back and of red color were taken from clean water during which tiny frogs were a gift.

Intervention: In each team simmering of half-dozen gram Ushba desi, was given per oral daily once within

the morning. within the check cluster, 4-6 leeches were applied on the affected half once a week. Leeches could suck the blood until they fall themselves wounds caused by leeches were washed and the dressing was finished with antiseptic lotion.

In comparative cluster paste of Gandhak, Gheeekwar and Kafoor mixed in nim tree oil and applied on affected half once daily when laundry the affected give up H2O within the morning.

Treatment time: Four Weeks

Follow-up: Once during a week for four weeks when the completion of the trial

Criteria for Effectivity

Relieved: five hundredth relief in sign and symptoms

Partially relieved: twenty-fifth relief in sign and

symptoms

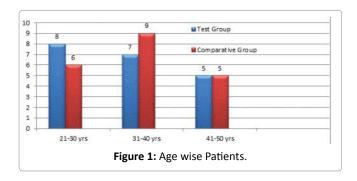
No response: any relief in sign and symptoms

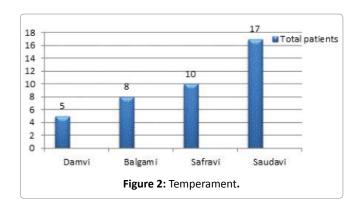
RESULTS AND DISCUSSION

In this study out of forty patients, twenty-five (62%) patients were feminine and fifteen (38%) were males. Females square measure affected over males. This finding was in accordance with the survey of centres for illness management and hindrance (CDC).

Figure 1 Shows its prevalence was slightly higher within the age bracket of 31-40 years i.e. sixteen cases (40%) and least within the age bracket of 41-50 years i.e. ten cases (25%). Out of forty patients, fourteen (35%) were within the age bracket of 21-30 years, sixteen (40%) were between the age of 31-40 and ten cases (25%) were within the age bracket of 41-50 years.

Most cases of childhood disease of the skin in any given community square measure of gentle class. One recent study by Ralph Waldo Emerson and colleagues found that eighty-four of 1760 kids aged 1-5 years from four urban and semi-urban general practices in Nottingham were





gentle, as outlined globally by the examining MD, with 14 July of cases within the moderate and a pair of within the severe classes.

According to the Mizaj (Temperament) out of forty patients five (12%) patients were of Damvi, eight (20%) patients were of Balgami, ten (25%) patients were of Safravi and seventeen (43%) patients were of Saudavi mizaj (Figure 2). It means that atopic dermatitis is a lot of common within the patients with Saudavi mizaj and least in Damavi mizaj.

Therapeutic response of check cluster showed that out of twenty cases, 15(75%) cases were alleviated from their symptoms, 3(15%) were partly alleviated and a pair of (10%) patients had no response. In the comparative cluster, 11(55%) patients alleviated the symptoms, five (25%) patients got partial relief and four (20%) patients didn't response. Results were assessed by victimization the Student's' check and therefore the 2 teams were compared concerning the relief of symptoms by X^2 check. The results of the study showed a major improvement in sign and symptoms within the check cluster.

At one-week follow-up, patients United Nations agency received leech medical care at the side of unani drug reportable considerably improvement in their sign and symptoms than people who were on solely unani flavourer medication. The leech cluster continued to report higher performance, higher overall symptom relief, and improved quality of life throughout the one-month follow-up the amount when the trial.

CONCLUSION

The present study unconcealed that Leech medical care at the side of Unani Oral drug is safe, effective, and of short length medical care (P<0.01) as compared to native application and oral administration of Unani Formulation (P<0.05). No repeat or exacerbation was reportable by any patients when completion of trial up to 1 month of follow up. No patients reportable any

adverse events throughout the trial and follow-up length. Eczematous signs and symptoms were improved in each team; however, the rate of improvement was quicker in the check cluster. By this medical care disease of the skin, patients will be saved from exposure and from adverse effects of cytotoxic and steroid drug employed in standard system of medication.

REFERENCES

- 1. Agarwal US, Besarwal RK, Gupta R, Agarwal P, Napalia S. Hand Eczema. Indian J Dermatol. 2014;59(3):213-224.
- 2. Belgrave DC, Simpson A, Buchan IE, Custovic A. Atopic Dermatitis and Respiratory Allergy: What is the Link. Curr Dermatol Rep. 2015;4(4):221-227.
- 3. Galli E, Gianni S, Auricchio G, Brunetti E, Mancino G, Rossi P. Atopic dermatitis and asthma. Allergy Asthma Proc. 2007;28(5):540-543.
- 4. Spergel JM. From atopic dermatitis to asthma: the atopic march. Ann Allergy Asthma Immunol. 2010;105(2):99-106.
- 5. DaVeiga SP. Epidemiology of atopic dermatitis: a review. Allergy Asthma Proc. 2012;33(3):227-234.

- Hon KL, Chan VP, Leung AK. Experimental Drugs with the Potential to Treat Atopic Eczema. J Exp Pharmacol. 2021;13:487-498.
- 7. Chidwick K, Busingye D, Pollack A, Osman R, Yoo J, Blogg S, et al. Prevalence, incidence and management of atopic dermatitis in Australian general practice using routinely collected data from MedicineInsight. 2020;61(3):e319-e327.
- 8. Galli E, Neri I, Ricci G, Baldo E, Barone M, Belloni Fortina A, et al. Consensus Conference on Clinical Management of pediatric Atopic Dermatitis. Ital J Pediatr. 2016;42:26-39.
- 9. Bawany F, Beck LA, Jarviven KM. Halting the March: Primary Prevention of Atopic Dermatitis and Food Allergies. J Allergy Clin Immunol Pract. 2020;8(3):860-875.
- Feldman SR, Cox LS, Strowd LC, Gerber RA, Faulkner S, Sierka D, et al. The Challenge of Managing Atopic Dermatitis in the United States. Am Health Drug Benefits. 2019;12(2):83-93.
- 11. Abuabara K, Ye M, McCulloch CE, Sullivan A, Margolis DJ, Strachan DP, et al. Clinical onset of atopic eczema: Results from 2 nationally representative British birth cohorts followed through midlife. J Allergy Clin Immunol. 2019;114(3):710-719.
- 12. Ogonowska P, Gilaberte Y, Barańska-Rybak W, Nakonieczna J. Colonization with Staphylococcus aureus in Atopic Dermatitis Patients: Attempts to Reveal the Unknown. Front Microbiol. 2020;11:567090.