

A Comparative Clinical Study on the Effect of *Mrudvikasava* and *Ashwagandhadyarista* in *Madatyaya* with special reference to Alcohol Withdrawal Syndrome

Maya¹, Anita Sharma², Tejasvi Sharma³

1. Ph.D. Scholar, Department of Agad Tantra, National Institute of Ayurveda, Jaipur 2. H.O.D. & Professor, Department of Agad Tantra, National Institute of Ayurveda, Jaipur 3. M.D. Scholar, Department of Agad Tantra, National Institute of Ayurveda, Jaipur

Corresponding Author: Maya **E-mail:** drmayamahala@gmail.com

Cite this paper as: Maya, Anita Sharma, Tejasvi Sharma (2024) A Comparative Clinical Study on The Effect of Mrudvikasava and Ashwagandhadyarista in Madatyaya with special reference to Alcohol Withdrawal Syndrome. *Frontiers in Health Informatics*, 13 (5), 531-545

Abstract

Introduction: Alcohol Withdrawal Syndrome (AWS) is a composite and potentially life-threatening ailment that arises in individuals who have been consuming alcohol in excess and abruptly decrease or cease their alcohol intake. It comes under the heading *Madatyaya* in ayurveda due to same cause and general signs & symptoms. **Aim and objectives:** The aim of the study is to compare the clinical efficacy of *Mrudvikasava* and *Ashwagandhadyarishta* in *Madatyaya* W.S.R. to Alcohol Withdrawal Syndrome. **Materials and Methods:** After attaining endorsement of Institutional ethics committee & informed consent, 40 patients with *Madatyaya* were aimlessly allocated to two groups (20 in each group) for a clinical trial. In group A, *Mrudvikasava* was given and the drug *Ashwagandhadyarishta* was given in Group B for 30 days along with 15 days of follow up. **Result:** The clinical data shows that both the drugs presented the significant effects by reductions in CIWA-Ar Scale and Alcohol Craving Screening Questionnaire after completion of therapy. **Conclusion:** It can be concluded that clinically *Mrudvikasava* and *Ashwagandhadyarishta* are effective and free from any adverse outcome for the management of *Madatyaya*.

Keywords – Alcohol Withdrawal Syndrome, *Madatyaya*, *Mrudvikasava*, *Ashwagandhadyarishta*, Ayurveda

Introduction

Alcohol consumption is a global phenomenon, and its excessive and prolonged use can have detrimental effects on physical and mental health. Alcohol dependence is characterized by physiological and psychological reliance on alcohol, which, when interrupted, can lead to a cascade of symptoms known as Alcohol Withdrawal Syndrome (AWS). In ayurveda, alcohol is explained as *Madya* or *Sura*. Likewise, acute alcoholism can be understood as *Mada* and lastly

Madatyaya includes a wide range of alcohol related problems like – alcohol addiction or alcohol use disorder (AUD), alcohol withdrawal syndrome (AWS) or chronic alcoholism.

According to ayurveda science, *Madatyaya* is a *Tri-doshaja* disease¹ having *Vata-Pitta* predominantly in chronic manifestations. Here, the *Tamo Guna Pradhan Madya* also produces a disturbance in intellectual properties.² It is four types – *Vataj*, *Pittaj*, *Kaphaj* & *Sannipataj Madatyaya*.³ The *Asav-Arishta* is a form of *Madya* which is used as *Aushadh* in management of *Madatyaya*.⁴ This is an example of *Hetu-vyadhipareetarthakari Chikitsa*.

The trial drugs, *Mrudvikasava* and *Ashwagandhadyarishta* have various type of ingredients which work on *Agni* and all *Dosha* combinedly. In *Madatyaya*, *Mansika Dosha (Raja & Tama)* also vitiated but these drugs also have some contents like – *Ashwagandha*, *Vacha* etc. which are *Medhya* (brain tonics) and work on brain. In chronic intake of alcohol, patients get emaciated due to *Vata Dosha* for which it also requires *Balya Aushadh*. Both the drugs also have some ingredients, which are *Balya* and *Vatanulomaka*.

Material and methods

Ethical consideration:

Study was approved by Institutional ethics committee (IEC/ACA/2021/02-21) and was registered prospectively in the clinical trial registry of India vide registration number CTRI/2022/04/042228.

Selection of patients:

The trial was incorporated on 40 clinically diagnosed patients of *Madatyaya* (AWS) fulfilling the inclusion criteria were selected from National Institute of Ayurveda Hospital, Jaipur.

Criteria for selection of patients:

Inclusion criteria:

- Patients having history of alcohol consumption along with clinical manifestation (mild & moderate) of alcohol withdrawal syndrome.
- Age between 20-60 years.
- Patients were selected randomly, irrespective of gender, economical, educational and marital status.
- Patients who gave consent.

Exclusion criteria:

- Patients suffering from any kind of major systemic illness such as Malignancy, HTN, Diabetes, Cardiac disease, HIV, Tuberculosis (mainly pulmonary) etc.
- Alcohol addicted patients suffering from liver failure, gastrointestinal bleeding,

hyperacidity, belching, cerebellar degeneration etc.

- Patients with severe clinical manifestations of alcohol withdrawal syndrome.
- Pregnant women and lactating mothers.
- Patients who were not considering the proper instructions given to them, highly violent patients, suffering from major psychiatric illness.

Withdrawal criteria:

- Unwillingness to continue with the study.
- Patients with irregular follow- up.
- Intolerance to medicine.
- Development of any other worst condition requiring some specific treatment.

Assessment criteria:

- A. Clinical Institute Withdrawal Assessment Alcohol Scale Revised (CIWA-AR)
- B. Alcohol Craving Questionnaire-Short Form Revised (ACQ-SF-R)
- C. Pathological Assessment -
 - ✓ Hemogram - CBC
 - ✓ Liver function test - Serum Bilirubin (D), Serum Bilirubin (I), SGOT, SGPT, Total Protein, Alkaline Phosphatase

Sample size: Sample size of 20 (in each group) was selected for the study.

Randomization:

Randomization was done using computer generated randomization method. Randomization plan was generated on www.randomization.com in which 44 patients were randomized into 11 blocks. Randomization plan can be replicated using seed number 26479.

Blinding and Allocation concealment:

It was an open label study and no blinding was done. Allocation concealment was done with the help of sequentially numbered, opaque, sealed envelopes. Randomization sequence generated was sealed in opaque envelopes by an independent person not involved in the study. The envelopes were then sequentially numbered and cases were enrolled following the number.

Consent of patients: All the patients selected for the trial have explained the nature of the study, and their consent was obtained on the pro forma before enrolment in the study.

Grouping: Registered patients were divided randomly in two groups –

- ✓ **Group A:** 20 clinically diagnosed patients of *Madatyaya* (AWS) were treated with *Mrudvikasava*.
- ✓ **Group B:** 20 clinically diagnosed patients of *Madatyaya* (AWS) were treated with *Ashwagandhadyarishta*.

Table 1 Ingredients of *Mrudvikasava*⁵:

S. No.	Drug name	Botanical name	Part used	Quantity
1.	<i>Mrudvika</i>	<i>Vitis vinifera</i> Linn.	Fruit	5 kg
2.	<i>Badara</i>	<i>Zizyphus jujube</i>	Root bark	2 kg
3.	<i>Madhooka</i>	<i>Madhuca indica</i> J.F. Gmel.	Flower	1 kg
4.	<i>Shunthi</i>	<i>Zingiber officinale</i> Rosc.	Rhizome	½ kg
5.	<i>Maricha</i>	<i>Piper nigrum</i> Linn.	Fruit	½ kg
6.	<i>Pippali</i>	<i>Piper longum</i> Linn.	Fruit	½ kg
7.	<i>Dalcheeni</i>	<i>Cinnamomum zeylanicum</i> Breyn.	Bark	½ kg
8.	<i>Ela</i>	<i>Elettaria cardamomum</i> Maton.	Seed	½ kg
9.	<i>Tejapatra</i>	<i>Cinnamomum zeylanicum</i>	Leaves	½ kg
10.	<i>Jayphala</i>	<i>Myristica fragrans</i> Houtt.	Seed	½ kg
11.	<i>Javitri</i>	<i>Myristica fragrans</i> Houtt.	Mace (Kosha)	½ kg
12.	<i>Lavanga</i>	<i>Syzygium aromaticum</i> Linn.	Flower bud	½ kg
13.	<i>Akarakara</i>	<i>Anacyclus pyrethrum</i> DC	Root	½ kg
14.	<i>Kushtha</i>	<i>Saussurea lappa</i> C.B. Clarke	Root	½ kg
15.	<i>Poogphala</i>	<i>Areca catechu</i> Linn.	Fruit	½ kg
16.	<i>Nagakeshara</i>	<i>Mesua ferrea</i> Linn.	Stamen	½ kg
17.	<i>Shakkara</i>	Sugar		20 kg
18.	<i>Jala</i>	Water		65 L

Table 2 Ingredients of *Ashwagandharishta*⁶:

S. No.	Drug name	Botanical name	Part Used	Quantity
1.	<i>Ashwagandha</i>	<i>Withania somnifera</i> Linn	Root	2.4 kg
2.	<i>Musali</i>	<i>Chlorophytum tuberosum</i>	Root	960 g

3.	<i>Manjishtha</i>	<i>Rubia cardifolia</i>	Root	480 g
4.	<i>Haritaki</i>	<i>Terminalia chebula</i> Retz.	Pericarp	480 g
5.	<i>Haridra</i>	<i>Curcuma longa</i> Linn	Rhizome	480 g
6.	<i>Daruharidra</i>	<i>Berberis aristata</i> DC	Stem	480 g
7.	<i>Yashtimadhu</i>	<i>Glycyrrhiza glabra</i> Linn	Root	480 g
8.	<i>Rasna</i>	<i>Pluchea lanceolata</i> CB Clarke	Root/Leaf	480 g
9.	<i>Vidari</i>	<i>Pueraria tuberosa</i> DC	Root/Tuber	480 g
10.	<i>Partha (Arjuna)</i>	<i>Terminalia arjuna</i> Roxb.	Stem/Bark	480 g
11.	<i>Mustaka (Musta)</i>	<i>Cyperus rotundus</i> Linn.	Rhizome	480 g
12.	<i>Trivrita</i>	<i>Ipomoea turpenthum</i> Linn	Root	480 g
13.	<i>Ananta (Shveta Sariva)</i>	<i>Hemidesmus indicus</i> R. Br	Root	384 g
14.	<i>Shyama (Krishna Sariva)</i>	<i>Cryptolepis buchanani</i> Roem Schult.	Root	384 g
15.	<i>Shveta Chandana</i>	<i>Santalum album</i> Linn	Heartwood	384 g
16.	<i>Rakta Chandana</i>	<i>Pterocarpus santalinus</i> Linn	Heartwood	384 g
17.	<i>Vacha</i>	<i>Acorus calamus</i> Linn.	Rhizome	384 g
18.	<i>Chitraka</i>	<i>Plumbago zeylanica</i> Linn.	Root	384 g
19.	<i>Jala</i> <i>for decoction</i> <i>Reduced to</i>	Water		98.304 L 12.288 L
20.	<i>Makshika (Madhu)</i>	Honey		14.400 kg
21.	<i>Dhataki</i>	<i>Woodfordia fruticosa</i> Kurz.	Flower	768 g
22.	<i>Shunthi</i>	<i>Zingiber officinale</i> Rosc.	Rhizome	96 g
23.	<i>Maricha</i>	<i>Piper nigrum</i> Linn.	Fruit	96 g
24.	<i>Pippali</i>	<i>Piper longum</i> Linn.	Fruit	96 g
25.	<i>Tvaka</i>	<i>Cinnamomnm zeylanicum</i> Bregn	Stem/Bark	192 g

26.	<i>Ela (Sukshmaila)</i>	<i>Elettaria cardamomum</i> <i>Maton</i>	<i>Seed</i>	<i>192 g</i>
27.	<i>Patra (Tejpatra)</i>	<i>Cinnamomum tamala</i> Nees & Ebern	<i>Leaf</i>	<i>192 g</i>
28.	<i>Priyangu</i>	<i>Callicarpa macrophylla</i> <i>Vahal</i>	<i>Flower</i>	<i>192 g</i>
29.	<i>Nagakeshara</i>	<i>Mesua ferrea</i> Linn.	<i>Stamen</i>	<i>96 g</i>

Table 3 Administration of trial drug:

Name of group	Name of drug	Dose & time of administration	Route of administration	Duration	Anupana
Group A	<i>Mrudvikasava</i>	30 ml, twice a day	Oral	30 days	Equal quantity of water
Group B	<i>Ashwagandhadyarista</i>	30 ml, twice a day	Oral	30 days	Equal quantity of water

Outcome measures:

- ✓ **Primary outcome** – changes in CIWA-Ar scale & Alcohol craving questionnaire scale
- ✓ **Secondary outcome** – changes in CBC & LFT parameters

Routine examination and assessment:

The full details of history & physical examination of patient were recorded as per the proforma. Clinical & physiological assessment was done before treatment, during treatment & at the end of the treatment and results were analyzed with appropriate statistical tests.

Statistical Analysis:

Statistical analysis was performed using statistical software GraphPad In stat trial version 3.10. For intragroup comparison of non-parametric data, Wilcoxon matched-pairs signed rank test was employed whereas intergroup comparison for non-parametric data was done using Mann Whitney U test. Paired t-test was used for intragroup comparison of parametric data, whereas Unpaired t-test was used for intergroup comparison.

Observations and Results

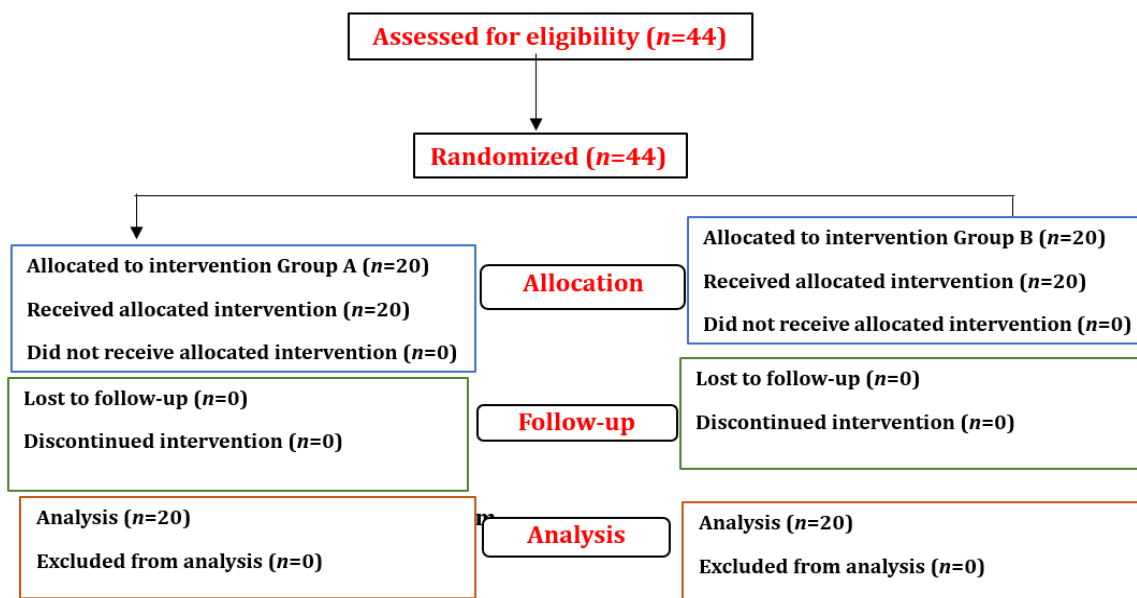


Table 4 Intra group comparison of CIWA-Ar scale

SYMPTOMS	Group	N	Mean		Diff.	% Of Relief	SD±	SE±	P value	Result
			BT	AT						
Nausea/vomiting	A	20	2.15	0.50	1.65	76.74	1.46	0.33	<0.0001	ES
	B	20	1.40	0.35	1.05	75.00	1.05	0.23	0.0002	ES
Tremors	A	20	1.35	0.70	0.65	48.15	0.75	0.17	0.0020	VS
	B	20	1.80	1.20	0.60	33.33	0.60	0.13	0.0010	ES
Anxiety	A	20	2.40	1.95	0.45	18.75	0.60	0.1	0.0078	VS
	B	20	2.60	1.55	1.05	40.38	0.69	0.15	<0.0001	ES
Agitation	A	20	1.20	0.60	0.60	50.00	0.75	0.17	0.0039	VS
	B	20	1.35	0.65	0.70	51.85	0.73	0.16	0.0010	ES
Paroxysmal sweat	A	20	0.55	0.10	0.45	81.82	0.69	0.15	0.0156	S
	B	20	0.55	0.30	0.25	45.45	0.44	0.10	0.0625	NS
Orientation& clouding of sensorial	A	20	0.25	0.15	0.10	40.00	0.31	0.07	0.5000	NS
	B	20	0.35	0.15	0.20	57.14	0.37	0.08	0.1250	NS
Tactile disturbances	A	20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
	B	20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
	A	20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-

Auditory disturbances	B	20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
Visual disturbances	A	20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
	B	20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
Headache	A	20	0.40	0.10	0.30	75.00	0.57	0.13	0.0625	NS
	B	20	0.65	0.25	0.40	61.54	0.50	0.11	0.0078	VS

(N: Number of patients; BT: Before Treatment; AT: After Treatment; %: Percentage; S.D: Standard Deviation; SE: Standard Error; ES: Extremely Significant; VS: Very Significant; NS: Not Significant; S: Significant)

Table 5 Intra group comparison of Alcohol Craving Screening Questionnaire

SYMPTOMS	Group	N	Mean		Diff.	% Of Relief	SD±	SE±	P value	Result
			BT	AT						
If I had some alcohol, I would probably drink it?	A	20	3.65	1.15	2.50	68.49	1.24	0.28	<0.0001	ES
	B	20	4.50	1.90	2.60	57.78	1.39	0.31	<0.0001	ES
I miss drinking?	A	20	5.25	1.10	4.15	79.05	1.73	0.39	<0.0001	ES
	B	20	5.40	1.50	3.90	72.22	1.68	0.38	<0.0001	ES
I am not making any plans to drink?	A	20	4.30	1.35	2.95	68.60	1.76	0.39	<0.0001	ES
	B	20	3.40	1.35	2.05	60.29	1.79	0.40	0.0001	ES
I could not stop myself from drinking if I had some alcohol here?	A	20	4.50	1.40	3.10	68.89	1.80	0.40	<0.0001	ES
	B	20	3.80	1.40	2.40	63.16	1.57	0.35	<0.0001	ES
I want to drink so bad I can almost taste it?	A	20	3.80	1.05	2.75	72.37	2.24	0.50	<0.0001	ES
	B	20	4.05	1.15	2.90	71.60	1.65	0.37	<0.0001	ES
I would feel less irritable if used alcohol now?	A	20	5.20	1.65	3.55	68.27	1.79	0.40	<0.0001	ES
	B	20	5.20	1.65	3.55	68.27	1.67	0.37	<0.0001	ES
If I used alcohol, I would feel less tensed?	A	20	4.90	1.30	3.60	73.47	1.76	0.39	<0.0001	ES
	B	20	4.50	1.55	2.95	65.56	1.67	0.37	<0.0001	ES
Drinking would not be very satisfying?	A	20	4.05	1.60	2.45	60.49	1.54	0.34	<0.0001	ES
	B	20	4.05	1.55	2.50	61.73	1.64	0.37	<0.0001	ES

I would feel less restless if I drink?	A	20	4.90	1.35	3.55	72.45	1.82	0.41	<0.0001	ES
	B	20	4.70	1.85	2.85	60.64	1.31	0.29	<0.0001	ES
If I was using alcohol, I would feel less nervous?	A	20	4.90	1.30	3.60	73.47	1.76	0.39	<0.0001	ES
	B	20	4.50	1.55	2.95	65.56	1.67	0.37	<0.0001	ES
It would be easy to pass the chance to use alcohol?	A	20	3.15	1.15	2.00	63.49	1.69	0.38	<0.0001	ES
	B	20	2.75	1.25	1.50	54.55	1.88	0.42	0.0020	VS
Drinking would put me in a better mood?	A	20	4.25	1.10	3.15	74.12	2.11	0.47	<0.0001	ES
	B	20	4.95	1.45	3.50	70.71	1.88	0.42	<0.0001	ES

(N: Number of patients; BT: Before Treatment; AT: After Treatment; %: Percentage; S.D: Standard Deviation; SE: Standard Error; ES: Extremely Significant; VS: Very Significant)

Table 6 Intra group comparison of pathological assessments

SYMPTOMS	Group	N	Mean		Diff.	% Of Relief	SD±	SE±	T value	P value	Result
			BT	AT							
Haemoglobin	A	20	13.34	13.68	-0.34	-2.54	0.98	0.22	1.545	0.1388	NS
	B	20	13.84	14.20	-0.36	-2.58	0.85	0.19	1.872	0.0766	NS
Total leucocyte count	A	20	6.89	6.73	0.16	2.38	1.83	0.41	0.4018	0.6923	NS
	B	20	7.04	7.01	0.03	0.48	2.56	0.57	0.0594	0.9532	NS
Neutrophils	A	20	56.11	56.21	-0.11	-0.20	8.96	2.00	0.0546	0.9570	NS
	B	20	55.46	56.41	-0.95	-1.71	7.89	1.76	0.5380	0.5968	NS
Leucocytes	A	20	33.05	32.00	1.05	3.19	7.33	1.64	0.6434	0.5277	NS
	B	20	31.20	31.70	-0.50	-1.61	6.18	1.38	0.3639	0.7199	NS
Eosinophils	A	20	3.34	2.12	1.22	36.55	1.82	0.41	2.996	0.0074	VS
	B	20	3.52	4.07	-0.55	-15.70	3.18	0.71	0.7765	0.4470	NS
Monocytes	A	20	8.04	7.31	0.73	9.10	1.71	0.38	1.919	0.0702	NS
	B	20	8.00	7.58	0.42	5.24	2.40	0.54	0.7794	0.4454	NS
Basophils	A	20	1.47	1.23	0.24	16.21	2.07	0.46	0.5144	0.6129	NS
	B	20	0.92	0.77	0.15	16.52	0.39	0.09	1.731	0.0997	NS
	A	20	0.51	0.40	0.11	20.80	0.16	0.04	2.934	0.0085	VS

Bilirubin (Direct)	B	20	0.43	0.57	-0.14	-32.49	0.24	0.05	2.627	0.0166	S
Bilirubin (Indirect)	A	20	0.76	0.67	0.09	11.86	0.36	0.08	1.128	0.2733	NS
	B	20	0.89	0.74	0.15	17.10	0.40	0.09	1.691	0.1072	NS
SGOT	A	20	99.03	38.16	60.87	61.47	19.35	4.33	14.066	<0.0001	ES
	B	20	90.81	51.95	38.85	42.79	11.63	2.60	14.936	<0.0001	ES
SGPT	A	20	80.93	36.04	44.89	55.47	14.44	3.23	13.905	<0.0001	ES
	B	20	108.51	51.57	56.94	52.48	19.13	4.28	13.311	<0.0001	ES
Total protein	A	20	7.76	7.53	0.23	2.90	1.15	0.26	0.8755	0.3922	NS
	B	20	7.56	7.69	-0.13	-1.72	1.02	0.23	0.5709	0.5747	NS
ALP	A	20	108.85	93.75	15.10	13.87	18.83	4.21	3.585	0.0020	ES
	B	20	94.80	99.05	-4.25	-4.48	22.81	5.10	0.8331	0.4151	NS

(N: Number of patients; BT: Before Treatment; AT: After Treatment; %: Percentage; S.D: Standard Deviation; SE: Standard Error; ES: Extremely Significant; VS: Very Significant; NS: Not Significant; S: Significant)

Table 7 Inter group comparison of CIWA-Ar scale

Variable	Mean Diff		SD ±		SE ±		U' value	P value	Result
	Group A	Group B	Group A	Group B	Group A	Group B			
Nausea/vomiting	1.650	1.050	1.461	1.050	0.3267	0.2348	245.50	0.2070	NS
Tremors	0.6500	0.6000	0.7452	0.5982	0.1666	0.1338	201.50	0.9761	NS
Anxiety	0.4500	1.050	0.6048	0.6863	0.1352	0.1535	292.0	0.0070	VS
Agitation	0.6000	0.7000	0.7539	0.7327	0.1686	0.1638	217.0	0.6241	NS
Paroxysmal sweat	0.4500	0.2500	0.6863	0.4443	0.1535	0.09934	225.00	0.4081	NS
Orientation & clouding of sensorial	0.1000	0.1500	0.3078	0.3663	0.06882	0.08192	210.00	0.6538	NS
Tactile disturbances	0.00	0.000	0.000	0.000	0.000	0.0000	000.00	0.000	-
Auditory disturbances	0.00	0.000	0.000	0.000	0.000	0.0000	000.00	0.000	-

Visual disturbances	0.00	0.000	0.000	0.000	0.000	0.0000	000.00	0.000	-
Headache	0.3000	0.4000	0.5712	0.5026	0.1277	0.1124	226.00	0.3980	NS

(N: Number of patients; BT: Before Treatment; AT: After Treatment; %: Percentage; S.D: Standard Deviation; SE: Standard Error; VS: Very Significant; NS: Not Significant)

Table 8 Inter group comparison of Alcohol Craving Questionnaire

Variable	Mean Diff		SD±		SE±		U' value	P value	Result
	Group A	Group B	Group A	Group B	Group A	Group B			
If I had some alcohol, I would probably drink it?	2.500	2.600	1.235	1.392	0.2763	0.3112	214.50	0.6918	NS
I miss drinking?	4.150	3.900	1.725	1.683	0.3858	0.3763	217.00	0.6483	NS
I am not making any plans to drink?	2.950	2.050	1.761	1.791	0.3939	0.4005	257.00	0.1151	NS
I could not stop myself from drinking if I had some alcohol here?	3.100	2.400	1.804	1.569	0.4033	0.3509	249.50	0.1767	NS
I want to drink so bad I can almost taste it?	2.750	2.900	2.245	1.651	0.5020	0.3692	206.50	0.8690	NS
I would feel less irritable if used alcohol now?	3.550	3.550	1.791	1.669	0.4005	0.3733	203.00	0.9443	NS
If I used alcohol, I would feel less tensed?	3.600	2.950	1.759	1.669	0.3934	0.3733	248.50	0.1822	NS
Drinking would not be very satisfying?	2.450	2.500	1.538	1.638	0.3439	0.3663	206.00	0.8776	NS
I would feel less restless if I drink?	3.550	2.850	1.820	1.309	0.4070	0.2927	253.50	0.1367	NS
If I was using alcohol, I would feel less nervous?	3.600	2.950	1.759	1.669	0.3934	0.3733	248.50	0.1822	NS
It would be easy to pass the	2.000	1.500	1.686	1.878	0.3770	0.4199	246.00	0.2026	NS

chance touse alcohol?									
Drinking would put mein a better mood?	3.150	3.500	2.110	1.878	0.4717	0.4199	217.50	0.6404	NS

(N: Number of patients; BT: Before Treatment; AT: After Treatment; %: Percentage; S.D: Standard Deviation; SE: Standard Error; NS: Not Significant)

Table 9 Inter group comparison of pathological assessments

Variable	Mean Diff		SD±		SE±		T value	P	Result
	Group A	Group B	Group A	Group B	Group A	Group B			
Haemoglobin	0.3399	0.3656	0.9812	0.8515	0.2194	0.1904	0.0602	0.9523	NS
Total leucocyte counts	0.1640	0.0340	1.826	2.557	0.4082	0.5718	0.1850	0.8542	NS
Neutrophils	0.1095	0.9495	8.963	7.893	2.004	1.765	0.3145	0.7548	NS
Leucocytes	1.054	0.5030	7.326	6.181	1.638	1.382	0.7264	0.4720	NS
Eosinophils	1.219	0.5525	1.820	3.182	0.4069	0.7116	2.161	0.0370	S
Monocytes	0.7320	0.4190	1.706	2.404	0.3815	0.5376	0.4748	0.6376	NS
Basophils	0.2385	0.1520	2.074	0.3928	0.4637	0.0873	0.1833	0.8555	NS
Bilirubin (Direct)	0.1060	0.1405	0.1616	0.2392	0.0361	0.0534	3.819	0.0005	ES
Bilirubin (Indirect)	0.0905	0.1530	0.3587	0.4046	0.0802	0.0904	0.5169	0.6082	NS
SGOT	60.873	38.854	19.354	11.634	4.328	2.601	4.361	<0.0001	ES
SGPT	44.893	56.938	14.438	19.130	3.228	4.278	2.248	0.0305	S
Total Protein	0.2250	0.1300	1.149	1.018	0.2570	0.2277	1.034	0.3077	NS
ALP	15.100	4.250	18.834	22.815	4.211	5.102	2.925	0.0058	VS

(N: Number of patients; BT: Before Treatment; AT: After Treatment; %: Percentage; S.D: Standard Deviation; SE: Standard Error; ES: Extremely Significant; VS: Very Significant; NS: Not Significant; S: Significant)

Table 10 Distribution of patients according to relief (in percentage)

Relief	Alcohol Withdrawal		Alcohol Withdrawal		Total	
	Group A		Group B			
	Patient	%	Patient	%	Patient	%
No relief	0	00	0	00	0	00

Mild (1-25%)	0	00	0	00	0	00
Moderate (26-50%)	18	90.00	19	95.00	37	92.50
Marked (51-75%)	2	10.00	1	5.00	3	7.50
Excellent (76-100%)	0	00	0	00	0	00

Discussion

Probable mode of action of *Mrudvikasava*:

- Most of the ingredients in this *Mrudvikasava* are *Madhura – Katu - Tikta Rasa, Laghu – Teekshna Guna, Ushna Veerya* and *Katu Vipaka Dravya*.
- Most of the drugs have *Kaphahara* properties, which plays vital role in *Amapachana* and *Ushna & Teekshna* drugs may be helpful to flush out the toxins from the body and correct the *Agni* (digestive fire).
- Because of *Sara Guna* of *Mrudvika* and *Teekshna Guna* of another *Dravya*, this drug may pass the Blood Brain Barrier and regulates the psychological changes which happen in alcohol withdrawal syndrome.
- In *Mrudvikasava*, *Mrudvika (Vitis vinifera)* is the chief ingredient. The most important active constituents of *V. vinifera* are phenolic compounds.⁷
- Hepatoprotective effects of *Mrudvika (Vitis vinifera)*: Some studies combined *V. vinifera* with other herbal medicines and investigated the effect their combination in different hepatotoxic models. It seems that the antioxidant, free radical scavenging and anti-inflammatory activities of *V. vinifera* and other herbs are responsible for their hepatoprotective effects⁸. In one study, a diet that included 15% *V. vinifera* powder protected several tissues, including the liver, against oxidative stress induced by 20% ethanol in rats⁹. In this study, it was suggested that the intake of functional food is useful in the prevention of chronic degenerative liver diseases.
- Neuroprotective: The dichloromethane fraction (DF) of *P. longum* and *P. nigrum* was examined for the therapeutic effect of neuron injury after apoplexy using a middle cerebral artery occlusion model in rats. The extract was administered orally in the rat model for 14 days. The model exhibits a significant increase in PSD95, phosphorylated CaMK II (p-CaMK II), calmodin (CaM) and N-methyl D-aspartate receptor subtype 2B

(NR2B).¹⁰ As Ayurveda perspective, *Katu & Tikta Rasa* of *Mrudvikasava* may help to keep mind alert.

Probable mode of action of *Ashwagandhadyarishta*:

- Most of the ingredients in this *Ashwagandhadyarishta* are *Madhura – Katu - Tikta Rasa, Laghu – Teekshna Guna, Ushna Veerya* and *Katu Vipaka Dravya*.
- In this formulation – *Haridra, Manjishtha, Ela, Chandan* are *Vishaghna Dravya*¹¹, which counteract the effects of *Madya*, because *Madya* has similar properties like *Visha*.¹²
- In *Ashwagandhadyarishta*, *Ashwagandha (Withania somnifera)* is the chief ingredient.
- *Ashwagandha (Withania somnifera)* is very revered herb of the Indian Ayurvedic system of medicine as a *Rasayana* (tonic). It is used for various kinds of disease processes and specially as a nervine tonic.
- Sitoindosides and acylsterylglucosides in *Ashwagandha* are anti-stress agents. Active principles of *Ashwagandha*, for instance the sitoindosides VII–X and Withaferin-A, have been shown to have significant anti-stress activity against acute models of experimental stress¹³.
- Cognition promoting effect of *Ashwagandhadyarishta*: *Ashwagandha* is a well-known Ayurvedic *Rasayana*, and belongs to a sub-group of *Rasayana* known as *Medhyarasayanans*. *Medhya* typically refers to the mind and mental/intellectual capacity. Thus, *Medhya Rasayana* like *Ashwagandha*, is used to promote intellect and memory. The cognition-promoting effect of *Medhya Rasayana* is best seen in children with memory deficits, or when memory is compromised following head injury, or a prolonged illness and in old age¹⁴.
- The available scientific data support that *Ashwagandhadyarishta* is a real potent regenerative tonic, due to its multiple pharmacological actions like anti-stress, neuroprotective, antitumor, anti-arthritis, analgesic and anti-inflammatory etc. It is useful for different types of diseases like Alcohol withdrawal syndrome, Parkinson, dementia, memory loss, stress induced diseases and others.

Conclusions

Based on the results, it was found that both *Mrudvikasava* (Trial drug) and *Ashwagandhadyarishta* (control drug) were effective in lowering sign and symptoms and clinically safe in patients with *Madatyaya*.

Financial support and sponsorship

This study was financially supported by National Institute of Ayurveda, Deemed To be University, Jaipur – 302002, Rajasthan, India.

Conflicts of interest

There are no conflicts of interest.

References

- ¹ Charak Samhita, Chikitsasthana, Madatyaya chikitsa, 24/100.
Available from: <https://niimh.nic.in/ebooks/ecaraka/>
- ² Sharangdhar Samhita, Purva Khanda, Deepanpachanadikathanam, 4/22.
Available from <https://sa.wikisource.org/s/ijj>
- ³ Charak Samhita, Sutrasthana, Ashtodareeyadhyaya, 19/5.
Available from: <https://niimh.nic.in/ebooks/ecaraka/>
- ⁴ Charak Samhita, Chikitsasthana, Madatyaya chikitsa, 24/117-18.
Available from: <https://niimh.nic.in/ebooks/ecaraka/>
- ⁵ Rastantrasara & Siddhaprayoga Sangraha, Part 1st, Asavadi Prakarana, page 385.
- ⁶ Ayurveda Pharmacopeia of India, Part 2nd, Volume 2nd, page 10-12.
Available from <https://dravyagunatvpm.wordpress.com/e-ayupharmacopoeia-of-india/>
- ⁷ Tang YL, Chan SW. 2014. A review of the pharmacological effects of piceatannol on cardiovascular diseases.
Phytother Res 28: 1581–1588
- ⁸ Kang JW, Kim SJ, Kim HY, et al. 2012. Protective effects of HVP411 complex against D-galactosamine-induced hepatotoxicity in rats. Am J Chin Med 40: 467–480.
- ⁹ Dogan A, Celik I. 2012. Hepatoprotective and antioxidant activities of grape seeds against ethanol-induced oxidative stress in rats. Br J Nutr 107: 45–51.
- ¹⁰ Kumar S, Kamboj J, Sharma S. Overview for various aspects of the health benefits of Piper longum linn. fruit. Journal of acupuncture and meridian studies, 2011 Jun 1; 4(2): 134-40.
- ¹¹ Charak Samhita, Sutrasthana, Shadvirechanashatashriteeyadhyaya, 4/11.
Available from: <https://niimh.nic.in/ebooks/ecaraka/>
- ¹² Charak Samhita, Chikitsasthana, Madatyaya chikitsa, 24/98.
Available from: <https://niimh.nic.in/ebooks/ecaraka/>
- ¹³ Bhattacharya, S.K., Goel, R.K., Kaur, R., Ghosal, S. (1987). Anti - stress activity of Sitoindosides VII and VIII. New Acylsterylglucosides from *Withania somnifera*. Phytother. Res., 1: 32-37.
- ¹⁴ Singh R.H., Udupa K.N. (1993) Clinical and experimental studies on rasayana drugs and rasayana therapy. Special Research Monograph, Central Council for Research in Ayurveda and Siddha (CCRAS), Ministry of Health and Family Welfare, New Delhi.