ISSN:2320 5091

# A NOVEL APPROACH IN THE MANAGEMENT OF *AMLAPITTA* (GASTRITIS) THROUGH *ODANA KALPANA* – A CLINICAL STUDY

Dewan Shweta Molligoda Susantha P.

Department of Basic Principles, National Institute of Ayurveda, Jaipur, Rajasthan, India

#### **ABSTRACT**

Amlapitta is a very common disease in present era. It is very troublesome disease and can give rise to many serious problems if not treated in time. Signs and symptoms of Amlapitta are very similar to gastritis or hyper acidity. According to conventional medical science the most common causes of gastritis are H. pylori infections and prolonged use of Non Steroidal Anti Inflammatory Drugs (NSAIDS). The incidence of gastritis in India is approximately 3 in 869 that is about 12,25,614 people suffering from gastritis out of the total 1,06,50,70,607 population. In this regard the present study was conducted in 30 clinically diagnosed patients of Amlapitta, with an objective of clinical evaluation of efficacy of Odana Kalpana (Orzya Sativa) and Virecana Yoga. (Operculina turpethum). These patients were randomly allocated into two groups of 15 patients each. Patients of group A were recommended Odana Kalpana 50 g as the Mantha preparation with water twice a day for one month after 3 days of shodhana karma (bio purification). Patient of group B were only given Odana Kalpana 50 g as Mantha preparation with water twice a day for one month. It was observed that the patients of Amlapitta of Group A treated with Odana Kalpana and Virecana yoga showed maximum percentage of improvement i.e. 53.20 %.where as it was 42.01% in patients of Group B. No side effects were noted in any of the patients during the trial period. Hence Odana Kalpana is effective in the management of Amlapitta and also it is cost effective. Bio purification or purgation helped further to enhance the drug efficacy.

**Keywords:** Odana Kalpana, Mantha, Virecana, Amlapitta

#### **INTRODUCTION**

Today's life style is completely changed by all means, our diet pattern, life styles and behavioral pattern is changed and it is not suitable for our normal physiology of digestion of the body. 25 - 30 % peoples are suffering from dyspepsia in India<sup>1</sup>. These diseases are chronic in nature and affects adults mostly. Patients of gastritis often results into peptic ulcer. Signs and symptoms of *Amlapitta* mentioned in the *Ayurvedic* texts are very similar to gastritis or hyper acidity. The incidence of gastritis in India is approximately 3 in 869 that is about 12, 25,614 people suffering

from gastritis out of the total 1,06,50,70,607 population.<sup>2</sup> Caraka Samhita clearly indicates that the Grahani Dosha and Amlapitta occur in the persons who do not check the temptation of food.<sup>3</sup> Amlapitta is mentioned in Kasyapa Samhita<sup>4</sup>, Madhava nidana<sup>5</sup>, Bhavaprakasa<sup>6</sup> and Cakradatta<sup>7</sup>. Acharya Caraka, Susruta and Vagbhata have not described this disease Amlapitta, as separate though it has been referred at certain places. Annavisha (toxins) produced due to Ajirna (indigestion) when mixes with Pitta Dosha, enters in Amashaya (stomach) and then produces Amlapittadi diseases.8 According to all the descriptions available, it is realized that there is excessive secretion of Amla Guna of Pitta dosha which causes Vidahyadi conditions. (i.e sourness of Pitta gets increased.)<sup>9</sup> Therefore drugs which have Tikta-Madhura Rasa, Madhura Vipaka, Sheeta Virya and Laghu Guna with Kapha-pittahara action help in treatment of Amlapitta. The main drug used in this study i.e Odana Kalpana (Oryza sativa) preparation has same properties described in Avurvedic texts.

In Ayurveda, Shodhana therapy (bio purification) has been given an importance as it is based on expulsion of vitiated Doshas produced by the non homological factors from the body and avoids the relapses of diseases. Virechana (purgation) is best measure for Paittika disorder as a Shodhana remedy of disease. 10,11 It is believed that the diseases cured by sodhana therapy never relapse while the disease cured by Shamana treatment may recur<sup>12</sup>. It attacks the very root cause of disease, cleanse all body microcirculatory channels, remove the vitiated Doshas from the body and produce long lasting beneficial effect. The drug used for Shodhana (Virechana) karma was Trivrit Churna. (Operculina turpethum) Taking all these points into consideration the study was planned to evaluate the following aims and objectives.

## AIMS AND OBJECTIVES

- 1. To find out effectiveness of Odana Kalpana in Amlapitta.
- 2. To compare the efficacy of Odana Kalpana preparation as the single administration and with a Virecana Yoga.

#### **MATERIALS AND METHODS**

Design of the study: Randomized Single blind study

**Selection of patients:** In the present study the cases were taken from O.P.D/I.P.D. of Arogyashala, NIA, Jaipur in month of Sept

2011. A detailed history, evaluation and follow up studies were recorded on a Performa designed especially for the present study. Patients were advised to take pathyahara and to correct their dietary habits and avoid Apathyahara.

Sampling: Simple random sampling technique using lottery method was used. Group allocation was done by simple random allocation (complete randomization).

**Sample size:** 30 patients, Drop outs: none **Grouping:** 30 patients under trial were subdivided into two groups i.e. Group A, Group B (each 15) to compare the effects. Patients of Group A, received Odana Kalpana (Oryza sativa) i.e rice cooked first and then roasted 50 g as the Mantha preparation with water twice a day for one month after 3 days of shodhana karma (purgation) with 10g of Trivrit Churna. Patient of Group B received the medicine of Odana Kalpana 50 g as the Mantha preparation with water twice a day without any shodhana karma.

**Ethical considerations**: Ethical clearance was obtained from the institutional ethics committee (IEC). Informed consent obtained from all the patients.

Inclusive criteria: Patients having classical features of Amlapitta, mentioned in Ayurvedic texts, Out of which following symptoms were considered like Diarrhoea/Vidbheda, Heaviness of abdomen/Udara Guruta, Heaviness of the Gourava, Acid body/Sharira Eructation/Utklesa, Flatulence/Amlodgara, No digestion of food/Avipaka, Headache/Shira Shula, Pain in the cardiac region/Hrit Shula, Lethargy/Angasada, Lassitude/Klama, Loss of Appetite/Aruci, Vomiting/*Chardi*.

Exclusive criteria: Patients having any endocrine disorders or chronic complicated diseases. Patients age group below 16 years and above 66 years.

Table 1: showing the treatment followed in groups A and B

Group	No. of Patients	Treatment given
A	15	Trivrit Churna 10g Virecana Yoga for 3 nights before sleep, and after that Odana Kalpana 50 g with water, before meals, twice a day for 30 days
В	15	50g of <i>Odana Kalpana</i> with water before meals twice a day for 30 days

## **Preparation of Drugs**

Main drug was prepared as mantha kalpana, according to Susruta samhita<sup>13</sup> and Sarangadhara Samhita.<sup>14</sup> Mantha prepared using Rakta Sali odana (Oryza sativa). In this first rice was cooked and then roasted. Finally roasted odana was given to the patient as a powder form. It is sweet, sitavirya, laghu paka, (light in digestion), strength promoting, pitta- pacifying, slightly increasing vata and kapha, unctuous, and reduces quantity of faeces.<sup>15</sup>

For Virechana Yoga Trivrit (Operculina turpethum) powder was given. Following are its Ayurvedic properties. Guna: Laghu, Ruksha, Tikshna, Rasa: Katu, Tikta, Madhura, Kashaya, Veerya: Ushna, Vipaka: Katu, Dosha: Pittakaphahara, Karma: Rochaniya, Krimighna, Kanthya, Jwaraghna, Vranahara, Lekhana, Shodhana<sup>16</sup>

**Criteria of Assessment:** Both subjective and objective parameters were employed for assessment of the impact of the treatment produced in respective groups.

**Subjective criteria-** Evaluation was done in relative to relief in signs and symptoms of *Amlapitta* with the help of scoring pattern found in *Ayurvedic* texts. <sup>17</sup>

#### **Objective criteria**

Following investigations were carried out before and after the clinical trial to rule out some underlying disease.

Hb.g%, TLC and ESR.

#### **Subjective Criteria**

Grading System of Symptoms (Assessment criteria)

- Diarrhoea/Vidbheda
- 0 Normal bowel
- 1 2-3 times loose motion per day

- 2 2-3 times loose motion per day
- 3 More than 6-7 times loose motion per day with weakness of the body
- Heaviness of abdomen/ *Udara Guruta*
- 0 No heaviness
- 1 Occasionally feeling of heaviness in abdomen but it is for some times only
- 2 Heaviness of abdomen throughout the day
- 3 Daily feeling of heaviness which requires medication and does not relive by it
- Heaviness of the body
- 0 No heaviness of the body
- 1 Occasionally feeling
- 2 Heaviness remains up to 6 hours
- 3 Heaviness remains more than 6 hours
- Acid Eructation /Utklesa
- 0 No (utklesa) at all
- 1 Occasionally but not daily
- 2 Daily after taking meals (1-2 hours)
- 3 Frequent Amlasyata & Amla Gandha
- Flatulence/ Amlodgara
- 0 No Amlodgara at all
- 1 Occasionally during day or night for less than half an hour after meals.
- 2 Amlodgara after intake of meals any food substance for half to one hour and relieved by digestion of food or vomiting
- 3 Amlodgara after intake of meals any food substance for less than half hour and relieved by digestion of food or vomiting
- No digestion of food/Avipaka
- 0 No Avipaka at all
- 1 *Avip ka* Occur daily after meals remain 4-6 hours for *udgara suddhi laksana*
- 2 Daily after all meals seldom feel hunger but eats the foods only once in a day & does not have hunger by evening
- 3 Never get hunger always heaviness of the stomach followed by Gaurava Avipaka, Alasya

- Headache /Shira Shula
- 0 Not at all
- 1 Occasionally
- 2 Daily for some time
- 3 Daily after meals all the time of the day
- Pain in the cardiac region /Hrit Shula
- 0 Not at all
- 1 Occasionally
- 2 Daily after meals for less than 30 minute
- 3 Daily after meals for long time
- Lethargy / Angasada
- 0 Not at all
- 1 Occasional feeling of heaviness
- 2 Lethargy remain up to the jaranantakala (4 to 6 hours) only
- 3 Angasada/heaviness also followed by jaranantakala for 7 hours
- Lassitude / Klama
- 0 Not at all
- 1 Lassitude without Shrama daily for some times
- 2 Daily for long time
- 3 Always feels tired & have no enthusi-

- asm all the time of the day
- Loss of Appetite/ Aruci
- 0 Willing towards all Rasa
- 1 Willing amla, lavana and katu rasa
- 2 Unwilling foods but can eat
- 3 Totally unwilling for meals
- Vomiting / Chardi
- 0 No vomiting or nausea
- Nausea only
- 2 Occasional vomiting (weekly 2-3 times)
- 3 Frequent vomiting

Statistical analysis: The information gathered on the basis of above observations was subjected to statistical analysis. Student Paired' test was carried out for all non-parametric Test. The results were interpreted at p<0.05, p<0.01 and p<0.001 significance levels. [18]

The obtained results were interpreted as: If P value is not < 0.05 Insignificant; P <0.05, P < 0.01 Significant and P < 0.001Highly Significant.

# **OBSERVATIONS AND RESULTS**

Table 2: The Effect of Therapy According to Signs and Symptoms in Group A

SI	Symptoms	Pts.	Mean		Dif	% of	SD	SE	t	p	
No			BT	AT		change				r	
1	Aruci	15	1.40	0.2	1.2	81.0	0.4	0.1	11.00	< 0.001	
2	Udara Guruta	15	3.00	1.0	1.9	64.4	0.7	0.18	10.64	< 0.001	
3	Amla Udgara	15	2.00	0.6	1.40	70.0	0.6	0.6	8.1	< 0.001	
4	Amla Uthklesa	15	1.1	0.2	0.8	76.0	0.9	0.2	3.3	< 0.001	
5	Sharira Gourava	15	3.00	1.0	1.9	64.0	0.4	0.1	16.0	< 0.001	
6	Angasada	15	1.4	0.4	1.0	71.0	0.5	0.1	7.2	< 0.001	
7	Klama	15	1.3	0.2	1.0	80.0	0.4	0.1	9.0	< 0.001	
8	Chardi	15	0.2	0.00	0.2	100.00	0.4	0.1	1.8	>0.1	
9	Vitbeda	15	00	00	00	00	00	00	00	00	
10	Shiro ruja	15	1.40	0.30	1.10	76.0	0.40	0.1	9.0	< 0.001	
11	Avipaka	15	2.0	0.3	1.3	64.0	0.4	0.1	10.0	< 0.001	
12	Hrit Shula	15	0.26	0.06	0.2	75.0	0.4	0.1	1.8	< 0.01	

Table 3: The Effect of Therapy According to Signs and Symptoms in Group B

Sl	Committee	No. of	Me	ean	Dif	%of				
No	Symptoms	Pts.	BT	AT	DII	change	SD	SE	t	p
1	Aruci	15	1.3	0.8	0.5	40.0	0.6	0.1	3.2	< 0.010
2	Udara Guruta	15	3.00	1.4	1.5	51.0	0.6	0.1	9.2	< 0.001
3	Amla Udgara	15	2.4	1.3	0.9	38.0	0.7	0.18	5.0	< 0.001
4	Amla Uthklesa	15	0.8	0.6	0.2	30.0	0.5	0.1	1.73	>0.1
5	Sharira Gourava	15	3.00	0.50	1.2	38.0	0.7	0.1	5.1	< 0.001
6	Angasada	15	1.4	0.7	0.7	50.0	0.5	0.1	4.7	< 0.001
7	Klama	15	1.3	0.6	0.7	55.5	0.5	0.1	4.7	< 0.001
8	Chardi	15	0.2	0.00	0.2	100.00	0.4	0.1	2.2	< 0.05
9	Vitbeda	15	00	00	00	00	00	00	00	00
10	Shiro ruja	15	1.40	0.8	0.5	38.0	0.50	0.1	4.0	< 0.001
11	Avipaka	15	2.1	1.4	0.9	43.7	0.7	0.2	4.5	< 0.001
12	Hrit Shula	15	0.1	0.0	0.1	100	0.35	0.09	1.4	>0.1

Table 4: Effect of the Trial Drug of Group A on Haematological Profile and Biochemical Profile

Sl	Variable	Mean		Diff. % of Relief		SD	SE	4	
No	v ar rable	BT	AT	DIII.	70 Of Keller	SD	SE	L	P
1	Hb (g%)	10.73	11.02	0.28	2.6	0.40	0.10	2.7	< 0.5
2	TLC (/cu mm)	7390	7220	830	13.7	150	30	2.5	< 0.5
3	ESR (mm/hr)	34.66	33.33	2.2	6.5%	2.1	0.5	4.1	< 0.5

SD = Standard Deviation, SE = Standard Error, NS = Not significant

The above table shows that the trial medicine of Group A did not show any noticeable effect on the Haematological status of the volunteers who participated in the trial. All the variables exhibited a very little change after the completion of the trial which was not significant.

Table 5: Effect of the Trial Drug of Group B on Haematological profile and Biochemical Profile

SI	Variable	Mean Mean		Diff.	% of Relief	SD	CE	4	-
No	variable	BT	AT	DIII.	% of Keller	SD	SE	ı	Р
1	Hb (gm %)	10.235	10.095	0.14	1.3679	0.6286	0.1406	0.996	< 0.5
2	TLC (/cu mm)	7150	7120	30	0.4196	721.18	161.26	0.186	< 0.5
3	ESR (mm/hr)	36.73	37.33	0.6	1.6	3.5	0.9	0.6	< 0.5

SD = Standard Deviation, SE = Standard Error, NS = Not significant

Table shows that the trial medicine of Group B did not show any noticeable effect on the Hematological status of the volunteers who participated in the trial. All the variables exhibited a very little change after the completion of the trial which was not significant.

Table 6: Total Effect of Therapy in 30 Patients (Subjective Symptoms)

Group	BT	AT	Diff.	% Relief	SD	SE	t	p	Results
A	1.4189	1.0137	0.4052	53.256	0.2141	0.0714	5.6777	< 0.001	HS
В	1.6874	0.8865	0.801	42.017	0.379	0.0612	2.40	< 0.01	S

SD = Standard Deviation, SE = Standard Error, S = Significant HS= Highly significant

Table 7: Total Effect of Therapy in 30 Patients (Subjective Symptoms) Percentage Wise

Sl No	Groups	Total Effects (%)
1	A	53.20
2	В	42.01

Subjective symptoms are found to be relieved to the maximum in Group A (53.2%) than Group B (42.01%).

#### **DISCUSSION**

After the completion of therapeutic trial there was marked improvement in the feeling of well being, physical and mental fitness in two groups but the incidence of improvement was higher in Group A i.e. Odana Kalpana and Virecana group. Ayurveda has given much emphasis on Shodana (Purification body), either with or before starting any treatment (Caraka Samhita). So Triv it cur a, was mild purgative, was administered which also facilitated the better action of the drug. In addition to this it also help to bring back the normal function of pitta. Among the symptoms taken into consideration as subjective parameter in Group A and Group B of amlapitta, highly significant

results were found in Udara Guruta, Amla Udgara, Sharira Gaurava, Angasada, Klama,, Avipaka and Shiro ruja. Hence, it is revealed that the drug was very effective in treatment of such symptoms. In Group A significant result were found in *Chardi* and Hrit Shula. In Group B significant result were found in Chardi, Aruci. Symptom of *Vidbeda was* not found in any patient. 50% of patients in both Groups mentioned that they have passed very well formed stools after administration of drug. Most of the patients suffered from Amla Utklesa and it had been reduced within 7-10 days. On the basis of overall result it was observed that more improved subjective parameters were found in Amlapitta

patients of Group A. (Odana Kalpana + Virechan Yoga).

# Probable mode of action of Rakta Shali Mantha (Odana Karama)

According to Caraka Old Shali generally not aggravates kapha. Acarya Caraka has classified all the diets and drinks according to their taste, potencies, vipaka and specific actions under twelve Shali is grouped under sukha dhanya (corn with bristles). This Shali type is cold in potency and sweet in taste as well as vipaka; they do not produce much of Vata; they are bowel-binding; they produce stool in small quantity; they are unctuous and nourishing, and they produce semen and urine in considerable quantity. Of them, Rakta Shali is the best in as much as it relieves thirst and alleviates all the three vitiated dosa Acarya Susruta also expounds about the specific Ahara dravya. The most important presenting sign of Amlapitta is burning sensation of the stomach, heart and throat. This sign is most prominent and is in the middle stage of the disease. This is due increasing drava guna and vidagdhatva of the pitta. Because of the madhura rasa of Shali, pitta dosa is pacified. Prithvi bhuta which is present in the manth absorbed the excessive drava guna and corrected the composition of pitta. Avipaka (indigestion), fatigue, heaviness of the body and stomach and anorexia were due to manda agni. Shali having the property of dipana karma also acted against manda agni.

#### **CONCLUSION**

Odana Kalpana is a safe, economical and effective remedy for the management of Amlapitta. Purification or Shodhana karma with Trivrit churna helped to enhance the drug efficacy. Therefore it can be concluded that Odana Kalpana with Trivrit Churna as Virechan yoga or Bio Purification are more effective treatment

modalities and can be used effectively in the management of *Amlapitta*.

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#### **CORRESPONDING AUTHOR**

Dr. Shweta Dewan PG Scholar, Dept. of Basic Principles, National Institute of Ayurveda, Jaipur, Rajasthan, India

Email: arorau51@yahoo.com

Source of support: Nil Conflict of interest: None Declared