

A REVIEW ON HEPATOPROTECTIVE ACTIVITY OF KUSHTHAGHNA MAHA-KASHAYA

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ABSTRACT

Ayurveda has been framed upon *Trisutra* viz. *Hetu* (~cause), *Linga* (~features) & *Oushadha* ~ therapeutics). Among these, *Oushdhas* / *Bheshajas* are held responsible for the alleviation of diseases as well as maintenance and promotion of health. *Bheshajas* (~drugs) are known and recognized from their *Guna* (~attribute) and *Karma* (~action). In *Bheshajachatushka* of *Charaka Samhita*, on the basis of *Karma*, *Bheshajas* pertaining to *Ubhayaparimarjana* (~internal as well as external application) are classified into 50 *Mahakashayas*. These 50 *Karmas* are applicable for almost all kinds of ailments. *Kushthaghnamahakashaya* is one among 50 *Mahakashayas*. Ten *Oushadhadravyas* having their own *Guna* & *Karma* are grouped together on the basis of their “*Kushthaghna*” *karma*, which are meant to obliterate *Kushtha* (~skin disorders). *Kushtha* is known to be a *Raktadushtijanyavikara* (~disorder due to vitiated blood). *Raktavahasrotas* (~channels of blood circulation) is having its *Moola* (~root) at *yakrit* (~Liver) and *Pleeha* (~Spleen). *Yakrit* is one of the major organ, which is responsible for various functions of the body. Any abnormal functioning of *Yakrit* due to various causes leads to infirmities including skin conditions. In this paper, an attempt is made to understand the Hepatoprotective action of *Kushthaghnamahakasayadravyas*.

Keywords: *Mahakashaya*, *Hepatoprotective* and *Kushthaghna*

INTRODUCTION

Skin, the seat of *Sparsha* (~sense of touch) not only covers and protects the body, but also performs some functions of excretion and metabolism. Its colour, complexion etc. are considered to be very important to keep the person's beauty and image in the society. Since Vedic period number of diseases were known to turn out the skin ugly and discolored. All such disorders which makes skin and body ugly are described in Ayurveda, particularly under the heading of *Kushtha*¹, which itself denotes that the dis-

eases which leads to cosmetically imbalance. There are 7 factors involved in the disease *Kushtha* viz. *Vata*, *Pitta*, *Kapha*, *Twak* (~skin), *Mamsa* (~muscle tissue), *Shonita* (~blood) and *Lasika* (~lymph)².

Kushthaghnamahakashaya is one among *Panchashanmahakashayas* mentioned in *Bheshajachatushka* of *Charaka Samhita*. Ten *Oushadhadravyas* viz. *Khadira*, *Abhaya*, *Amalaki*, *Haridra*, *Bhallataka*, *Saptaparna*, *Aragwadha*, *Karaveera*, *Vidanga*, and *Jati*³ having their own *Guna* & *Karma*

are grouped together on the basis of their 'Kushthaghna' karma, which are meant to obliterate *Kushtha*.

REVIEW OF KUSHTHAGHNA MAHAKASHAYA:

S.NO.	DRUG	DOSHAGHNA	ACTION ON YAKRIT/RAKTA
1.	<i>Khadira</i>	<i>Kaphapittahara</i>	<i>Raktaprasadana</i> (TiktaKashayarsa&Sheetaveerya)
2.	<i>Abhaya</i>	<i>Tridoshahara</i>	Indicated in <i>Yakritgadam</i>
3.	<i>Amalaki</i>	<i>Tridoshahara</i>	Indicated in <i>Yakritgadam, RaktaVikara</i>
4.	<i>Haridra</i>	<i>Kapha pitta shamaka</i>	<i>Raktaprasadana</i> (Tikta rasa, Pittarechaka)
5.	<i>Bhallataka</i>	<i>Vatakaphahara</i>	Indicated in <i>Yakrit, Pleeharoga</i>
6.	<i>Saptaparna</i>	<i>Kapha pitta shamaka</i>	<i>Raktashodhaka</i>
7.	<i>Aragwadha</i>	<i>Pitta kaphapaha</i>	<i>Raktashodhaka</i>
8.	<i>Karaveera</i>	<i>Kaphavatashamaka</i>	<i>Raktashodhaka</i>
9.	<i>Vidanga</i>	<i>Kaphavatashamaka</i>	<i>Raktashodhaka</i>
10.	<i>Jati</i>	<i>Tridoshahara</i>	<i>Raktaprasadana</i>

The pharmacological actions of all the 10 drugs mentioned in *Kushthaghnamahakashaya* have been described in Table HEPATO-PROTECTIVE ACTIVITY OF *KUSHTHAGHNA MAHAKASHAYA*:

By definition, Hepato-protective agents are those compounds, which mitigate the liver injury caused by hepatotoxic agents thus can prevent damage to the liver. Although some scholars considered fortifying, tonic and strengthening.

1. Hepatoprotective Activity of *Khadira - Acacia catechu*

A study conducted by Shirish S. Pingale investigates the hepatoprotective action of heartwood powder of *Acacia catechu* in the treatment of liver damage in rats exposed to carbon tetrachloride (CCl₄). The evaluation was carried out using liver function marker enzymes in blood plasma, Liver tissue biochemistry supported by histopathology due to CCl₄ induced hepatopathy the marker enzymes leak into the blood. The extent of recovery was compared with the natural liver regeneration after CCl₄ damage and normal

Table 1: Showing *KushthaghnaMahakashaya* with their pharmacological actions on *Dosha* as well as *Yakrit/Rakta*⁴.

liver. The heartwood powder of *Acacia catechu* was treated in the form of aqueous slurry. From the findings of blood biochemical parameters it was inferred that the treatment with this plant material is effective against CCl₄ induced dysfunction of the liver. The decreased levels of serum bilirubin after treatment with heartwood powder of *Acacia catechu* restores the normal functional status of the liver. This hepatoprotective effect was supported by light microscope studies⁵.

In another study conducted by VarkungValte et.al. the liver damage in albino rat was induced by a subcutaneous injection of 50%v/v CCl₄ in olive oil at the dose of 2ml/kg twice a week for 14days. The hepatoprotective activity was monitored biochemically by estimating serum transaminases, serum alkaline phosphatase, serum bilirubin and serum protein after intraperitoneal injection of ethyl acetate extract of *Acacia catechu* (250mg/kg). Silymarin (5mg/kg.I.P) was given as a reference drug. The histopathological changes of liver sam-

ples were compared with that of control. Ethyl acetate extract of *Acacia catechu* inhibited CCl₄ induced liver toxicity in albino rats at 250mg/kg body weight as assessed by the biochemical and histological examination. Hence Ethyl acetate extract of *Acacia catechu* exhibited significant hepatoprotective activity⁶.

2. Hepatoprotective Activity of *Abhaya-Terminaliachebula*

Reddy P. Nishanth et.al.conducted a study, where *Terminaliachebula* extracts were evaluated on 2-acetylaminofluorene (2-AAF)-induced hepatocellular carcinoma in mice. The 25 mg.kg⁻¹ b.w. 2-AAF treatment showed liver aberration and up-regulation of multidrug resistance-1 (MDR1), generation of reactive oxygen species (ROS) and cyclooxygenase-2 (COX-2) expression via phosphorylation of Akt-MAPKs and nuclear translocation of NF-κB. Pre-administration of 50 mg.kg⁻¹ TCE along with 25 mg.kg⁻¹ 2-AAF inhibited the expression of MDR1 by preventing ROS generation and COX-2 expression through Akt and MAPK signaling pathway. *T. chebula* may overcome the 2-AAF-induced oxidative stress and drug resistance in the hepatic tissue of mice and prevent the possible neoplastic transformation leading to hepatocarcinoma⁷.

Another study conducted by S.Vidya et.al. to evaluate 1% gum acacia suspension of leaves of *Terminaliachebula* for its hepatoprotective effect against paracetamol induced acute liver damage on albino Wister rats indicated that the 1% gum acacia suspension of leaves of *Terminaliachebula* at 300 mg/kg body dose significantly reduced the elevated levels of biochemical markers like SGPT, SGOT, ALP, bilirubin (total and direct), total cholesterol, triglycerides. The

effect of 1% gum acacia suspension of leaves of *Terminaliachebula* was comparable with that of the standard silymarin 100mg/kg. These results suggest that 1% gum acacia suspension of leaves of *Terminaliachebula* may have the potential therapeutic value in the treatment of paracetamol induced hepatic damage and some liver diseases⁸.

3. Hepatoprotective Activity of *Amalaki-Emblicoefficialis*

A I Mir et.al. conducted a study, where Efficacy of a herbal product of *Emblicoefficialis* (fruit) (EO) has been evaluated against CCl₄ and thioacetamide (TAA) induced changes in rat liver. Chronic treatment of CCl₄ and TAA revealed abnormal histopathology indicative of pre-fibrogenic events. EO reversed such alterations with significant regenerative changes suggestive of its preventive role in prefibrogenesis of liver⁹.

Tasduq SA et.al. report showed the hepatoprotective property of a 50% hydroalcoholic extract of the fruits of *Emblicoefficialis* (fruit) (EO-50) against antituberculosisdrugs-induced hepatic injury. The biochemical manifestations of hepatotoxicity induced by rifampicin, isoniazid and pyrazinamide, either given alone or in combination were evaluated. In vitro studies were done on suspension cultures of rat hepatocytes while sub-acute studies were carried out in rats. The hepatoprotective activity of EO-50 was found to be due to its membrane stabilizing, antioxidative and CYP 2E1 inhibitory effects¹⁰.

4. Hepatoprotective Activity of *Haridra-Curcuma longa*

The result of study conducted by MahuyaSengupta et.al. suggested the aqueous extract of turmeric reduced the lev-

el of SGOT, SGPT and bilirubin in CCl₄ intoxicated mice. Apart from damaging liver system, CCl₄ also reduced nonspecific host response parameters like morphological alteration, phagocytosis, nitric oxide release, myeloperoxidase release and intracellular killing capacity of peritoneal macrophages. Administration of aqueous extract of *C. longa* offered significant protection from these damaging actions of CCl₄ on the nonspecific host response in the peritoneal macrophages of CCl₄ intoxicated mice¹¹.

The study conducted by S. L. Baxla et.al. concludes that supplementation of *Curcuma longa* at 500 mg/kg daily oral for 28 days has shown protection against lead induced hepatotoxicity¹².

5. Hepatoprotective Activity of *Bhallataka-Semecarpusanacardium*

The study conducted by Savitapatil et.al. to evaluate hepatoprotective activity of fruit extracts of *Semecarpusanacardium* against the damage caused by CCl₄ (1.25mg/kg, p.o.). Aqueous and ethanolic extracts of *Semecarpusanacardium* fruits were administered in the dose of 250 and 500mg/kg/day orally for 7 days. Silymarin (50mg/kg) was used as standard drug. The hepatoprotective effect was assessed by biochemical parameters such as SGOT, SGPT, ALP, total bilirubin and serum protein. It was concluded that both aqueous and ethanolic extracts showed significant hepatoprotective activity¹³.

6. Hepatoprotective Activity of *Saptaparna-Alstoniascholaris*

Ashutosh Kumar et.al. conducted a study, where the methanolic extract of *Alstoniascholaris* (L.) R.Br. stem bark was screened for hepatoprotective activity against Swiss albino rats with liver damage induced by CCl₄. The results of hepatoprotective activity revealed that the methanolic

extract of *Alstoniascholaris* significantly decreased the biochemical parameters (SGOT, SGPT, ALP, TP and TB). Silymarin (25 mg/kg), a known hepatoprotective drug, was used for comparison. The extract did not show any mortality up to a dose of 2000 mg/kg body weight. The findings indicated that the methanolic stem bark extract of *Alstoniascholaris* (L.) R.Br. (200 mg/kg) was effective in bringing the functional improvement of hepatocytes. The hepatoprotective activity was also supported by histopathological studies of liver tissues¹⁴.

A study by Kumar et al. concluded that the methanolic extracts of *Alstoniascholaris* leaves afforded a decent hepatoprotective potential against Thioacetamide induced liver damage in Albino rats and produced dose dependent effects when administered at doses of 100mg/kg and 200mg/kg orally¹⁵.

7. Hepatoprotective Activity of *Aragwadha-Cassia fistula*

Sunetrapatwardhan et.al. conducted a study, where hepatoprotective activity of ethanolic extract of *Cassia fistula* bark was investigated against hepatotoxicity induced by administering CCl₄ with olive oil (1:1), 0.2ml/kg for 10 days by intraperitoneal route in wistar rats. Silymarin (100mg/kg, p.o.) and the extracts of *Cassia fistula* bark (CFB 200 and 400 mg/kg, p.o.) were administered concomitantly for 14 days to the respective groups of animals. Hepatoprotective effect of ethanolic extract of *Cassia fistula* bark was evident in the doses of 200 and 400 mg/kg as there was significant decrease in AST, ALT, ALP, triglycerides, bilirubin, and protein levels in comparison to CCl₄ control group. Histology of the liver section of the animals treated with the ethanolic extract of *Cassia fistula* bark in the doses of 200 and 400 mg/kg, further confirmed the hepatoprotective activity¹⁶.

A study conducted by S.J. Wasu et.al. to investigate the hepatoprotective effect of leaves and bark of *Cassia fistula* against CCl₄ induced hepatotoxicity in rats. Sixty albino Wistar rats were divided into six equal groups of 10. Four groups received extracts leaves/bark of *Cassia fistula* and intraperitoneal (i.p.) CCl₄ (0.2 ml/100 g) either before or after administration of extracts. Two groups were controls, one treated with CCl₄ and one with normal saline. Liver damage was assessed by plasma concentration of bilirubin and biochemical parameters SGOT, SGPT and ALP. Treatment with aqueous extract of leaves and bark significantly reduced CCl₄ -induced elevation in plasma enzyme and bilirubin concentration in rats. This study demonstrated that CCl₄ -induced liver damage in rats can be ameliorated by treatment of extracts from leaves and bark¹⁷.

8. Hepatoprotective Activity of *Karaveera-Neriumindicum*

Patel Govind conducted a study where Methanolic flowers extract of *Neriumindicum* was evaluated for hepatoprotective in rats. The plant extract (500 and 1000 mg/kg, p.o.) showed a remarkable hepatoprotective activity against CCl₄ induced hepatotoxicity in liver tissues. CCl₄ induced a significant rise in SGPT, SGOT and ALP. Treatment of rats with different doses of plant extract (500 and 1000 mg/kg) significantly (P<0.001) altered serum marker enzymes levels to against CCl₄ treated rats. The activity of the extract at dose of 300 mg/kg was comparable to the standard drug, silymarin (100 mg/kg, p.o.). Histopathological changes of liver sample were compared with respective control. Results indicate the hepatoprotective properties of *Neriumindicum* against CCl₄ induced hepatotoxicity in rats¹⁸.

9. Hepatoprotective Activity of *Vidanga-Embeliaribes*

Nahidtabassum et.al. studied the protective effect of *Embeliaribes* on paracetamol induced liver cell damage using mice as experimental animals. Paracetamol was administered orally in a dose of 500mg / kg body wt 48hrs before the administration of drugs. The mice treated with *Embeliaribes* extract (50, 100 & 200mg / 100g/day) showed a dose dependent fall of 41%, 47% & 66% respectively in the serum SGPT levels as compared to the elevated levels in the mice receiving paracetamol only. Histopathology of liver of mice revealed 67%, 70% and 80% normal livers respectively in mice receiving the above doses of *E. ribes*. The results suggest that extract of *E. ribes* possesses hepatoprotective activity against paracetamol induced acute hepatocellular damage in mice¹⁹.

10. Hepatoprotective Activity of *Jati-Jasminumgrandiflorum*

The study by Netranjali Dhamalet.al. designed to evaluate hepatoprotective effect of the ethanolic leaves extract of *Jasminumgrandiflorum* (JG) in Isoniazid (INH) induced hepatotoxicity in wistar albino rats. Elevated levels of SGOT, SGPT, and Lipid profile following INH administration were significantly lowered by JG treatment. Deposition of collagen was observed in liver and found to be less in JG treated animals; Pretreatment of rats with JG significantly decreases Lipid peroxidation (LPO) and increases the antioxidant activities. The study reveals the hepatoprotective activity of leaves extract of JG in isoniazid induced liver damage²⁰.

DISCUSSION:

Yakrit is considered as one of the *Koshtangas* (~internal organs)²¹. The functional importance of *Yakrit* is more empha-

sized than its anatomical aspects in Ayurvedic literatures. There are multiple diseases like *Kamala* (~jaundice), *Halimaka* (~chlorosis), *Yakritodara* (~hepatomegaly) etc. where direct involvement of *Yakrit* is noticeable. Does it mean that the involvement of *Yakrit* is limited to these conditions only? Since *Yakrit* has its range of functions on different components of the body, it can be observed that the drugs mentioned in different disease conditions are having their action on liver as a protective agent to improve the function of liver.

All the 10 drugs mentioned in *Kushthaghnamahakashaya* are having hepatoprotective activity and are endorsed by the evidences given above. To understand the rationality behind the relation between hepatoprotective activity and *Kushthaghna karma*, understanding the role of liver in the manifestation of *Kushtha* is essential.

The disease *Kushtha* is *Shonitajaroga* (~disorders due to vitiated blood) as mentioned in *Vidhishoniteeyaadhyaya* of Charaka Samhita²². Again in *Vidhashitapeeteeyaadhyaya* of Charaka Samhita it is mentioned as *Raktapradoshja roga*²³. Derangement of *Rakta* is one among 7 factors (*Vata*, *Pitta*, *Kapha*, *Twak*, *Mamsa*, *Shonita* and *Lasika*) which are mandatory for the manifestation of *kushtha* as per the explanation available in Charaka Samhita. *Rakthavahasrotas* is having its *Moola* in *Yakrit* and *Pleeha*²⁴. Hence it is obvious that, there will be involvement of *Yakrit* in the manifestation of *Kushtha*. If *Yakrit* and *Pleeha* performs their functions normally, then *Rakta* will be in its normal state. The word *Kushthaghna* indicates obliterate *Kushtha*, to achieve this all these drugs need to act on very basic factors responsible for the manifestation of *Kushtha*. Hence all these drugs are having common hepatoprotective activity along with other properties, so that nor-

malcy of *Rakta* is achieved. Even in the text books of Ayurveda the role of all these drugs on *Rakta/Yakrit* are evident as mentioned in Table-1. This doesn't mean that *Rakta* is the only factor which is to be considered to get *Kushthaghna* action. This is only one pharmacological action along with many other actions which should be endowed in *Kushthaghnadravyas*.

CONCLUSION

Kushthaghnamahakashaya are the group of 10 drugs which are clustered together on the basis of its *Kushthaghna karma*. To achieve this *Karma*, all these drugs are endowed with hepatoprotective activity along with other properties. Hepatoprotective activity of all the 10 drugs implies that the drug action on *Yakrit* is very crucial to achieve complete relief from *Kushtha*.

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