



CLINICAL EVALUATION OF ANTI- KIRANTHY ACTIVITY OF KIRANTHY OIL

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Abstract

Kiranthi is a common disorder Kiranthi affecting children is defined as an inflammation of the infantile skin, affecting the scalp and body. Currently available treatment options have certain limitation, either due to poor efficacies or due to compliance issues. Anyhow Kiranthi oil is being used even now effectively to treat this disorder but so far no scientific clinical trial had been done in North –East of SriLanka. Thus the researcher aimed to anti- kiranthi activity of Kiranthi oil. This study was an observational, descriptive and clinical trial, conducted as per the ethical clearance, was approved by Ethical Review Committee Faculty of Medicine, University of Jaffna. Six hundred patients of both sexes, from the age of one month to till one year of age, who were clinically diagnosed as suffering from kiranthi, with the consent of the parents, were enrolled in the study. All the enrolled patients underwent a thorough clinical examination, with special emphasis on local skin examination. Patients were divided in two groups. Group I (517 patients) Kiranthi Oil used. Group II (83 patients) is control as they were used the gingily oil. Group-I patients were advised to apply 10ml of Kiranthi oil daily for one year with gentle massage. Clinical assessment of lesions was done objectively and subjectively. Thorough skin examination was done after the completion of every month and at the end of the study. The efficacy end points showed rapid clinical improvement and symptomatic control of kiranthi. All adverse events reported or observed by patients were recorded with information about severity, date of onset, duration and action taken regarding the study drug. Statistical analysis was done according to Chi. Square test with Yates correction was evaluated $P = 0.05$ was considered significant.

A total 600 patients were enrolled in the study. There was a highly significant reduction. In subjective evaluation, majority of patients experienced remarkable overall improvement. There were no clinically significant adverse reaction, either reported or observed, during the entire period of study and overall compliance to the treatment was excellent. Therefore, it may be concluded that “Kiranthy Hair Oil” is effective and safe in the prevention and management of Kiranthi.

Key words: *Kiranthi, SriLanka, Ethical Review Committee, Kiranthi Hair Oil.*

INTRODUCTION

Kiranthi is a common disorder in child. Kiranthi means an inflammation of the infantile skin. Affecting the scalp and body (Ponnaiah 1936). Currently available treatment options have certain limitation, either due to poor efficacies or due to compliance issues. Kiranthi oil is being used effectively to treat this disorder but so far no scientific clinical trial had been done. Thus the researcher aimed to anti- kiranthi activity of Kiranthi oil.

But this Kiranthi Oil is still in use. This is already observed by researcher and did clinical trial. Furthermore, these drugs are unable to prevent recurrence, which is common troublesome clinical problem.

“Kiranthy Oil” is a polyherbal formulation indicated for Kiranthi, This oil contains 24 herbs (Sivapirakasam (1999)).

OBJECTIVE

To evaluate the clinical efficacy and safety of “Kiranthy Oil” in the management of Kiranthi.

STUDY DESIGN

This study was a descriptive and clinical study conducted from 1999 at the Jaffna, Kopay. Manipay MOH division, as per the ethical guidelines of Medical Faculty University of Jaffna. The study protocol, case report forms, regulatory clearance documents, product related information and informed consent form (Tamil) were submitted to the Ethical Review Committee and approved by the same.

MATERIALS AND METHODS

Inclusion Criteria

Six hundred patients of both sexes, from the births to one year, and patients parents who were willing to give informed consent were enrolled in the study.



Exclusion Criteria

Patients with severe infection, endocrine disorders, skin diseases other than the kiranthy were excluded from the study.

STUDY PROCEDURES

Six hundred patients selected for this study. All patients underwent a thorough clinical examination with special emphasis on local skin examination. All the patients were advised to apply 10 ml of Kiranthy oil on head and whole body with gentle massage.

All the enrolled patients underwent a thorough clinical examination, with special emphasis on local skin examination. Patients were divided in two groups. Group I (517 patients) Kiranthy Oil used. Group II (83 patients) gingily oil was used. Group-I patients were advised to apply 10ml of Kiranthy oil daily for one year with gentle massage. Group II was control group. Clinical assessment of lesions was done objectively and subjectively. Thorough skin examination was done after the completion of every month and at the end of the study. Rapid clinical improvement and symptomatic control of kiranthy was observed in group II patients. All adverse events reported or observed by patients were recorded with information about severity, date of onset, duration and action taken regarding the study drug.

Follow – Up and Assessment

All patients were followed for a period of 1 month and each follow-up visit, they were asked about the frequency of the application of Kiranthy oil on head and body in order to check the compliance to the treatment. Clinical assessment of lesions was done objectively (by researcher) and also subjectively (by patient's parents).

Adverse Events

All adverse events reported or observed by patients and recorded with in severity, date of onset, duration and action taken regarding the study drug.

RESULTS

Table- 1: Response to Kiranthy Oil Treatment

Kiranthy disease	Use of Kiranthy oil (Group – 1)	Control(use of gingilyoil(Group11)	Total
During the study period affected	42 (8.1 %)	53 (63%)	95
During the study period not affected	475 (91.9%)	30 (37%)	505
Total	517	83	600

Group I (517 patients) Kiranthy Oil used. Group II (83 patients) gingily oil was used. Statistical analysis was done according to Chi. Square test with Yates correction was evaluated $P = 0.05$ was considered significant.

A total 600 patients were enrolled in the study. There was highly significant reduction. In subjective evaluation, majority of patients experienced remarkable overall improvement. There were no clinically significant adverse reaction, either reported or observed, during the entire period of study and overall compliance to the treatment was excellent. Therefore, it may be concluded that “Kiranthy Oil” is effective and safe in the prevention and management of Kiranthy.

REFERENCES

1. Ponnaiah, I, Pararajasekaram Kiranthyroga Nithanam, pp.32, 1936.
2. Sivapiragasam , V, Pararajasekaram Kulanthairoga Nithanam, pp.42, 1999.

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