

A CLINICAL STUDY OF MARHAM DAKHLION ON CHRONIC CERVICITIS AND CERVICAL EROSION

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Received: 26 September, 1990

Accepted: 12 February, 1991

ABSTRACT: *The Clinical utility of the famous Unani Formulation, Marham Dakhlion was tested in a population of 100 patients. The medicine was found effective in 80% of the cases and no side effects were also observed.*

INTRODUCTION

It has generally been observed that about eighty percent of gynecological patients suffer either from acute cervicitis (*Warm – e- unqur Rahim Head*) or chronic cervicitis (*Warm – e – Unqur Rahim Muzmin*). Cervicitis is an inflammatory condition of cervix uteri (*Unqur Rahim*). Chronic cervicitis is more prevalent and almost always associated with cervical erosion (*Qarah-e-unqur Rahim*). *Atibba* believe that *Qarah-e-Unqur Rahim* is usually caused by *Khilt-e Safra* (Bile), *Khilte – e- Sauda* (Block Bile). *Khoon-e- Radi* (Contaminated Blood), *Warm – e – Sauda* (Metritis and Endometritis), *Busoor – e- Rahim* (Eruption of cervix uteri). *Mana –e- Zeh* (Obstructed labour) and *Ahtabas- e – Tams* (Amenorrhoea). 1 – 5 Septic abortions, puerperal sepsis, gonorrhoea, instrumentation, prolonged use of contraceptive pills, and use of local irritants are also included in its causes. According to Hector and Bourn, chronic cervicitis is a loose term which embraces a torn cervix with an erosion and chronic infection in the gland of cervical canal. 6 There is no

natural method of overcoming the infection as in the case of endometritis because mucosa of cervix does not exfoliate during menses. The term erosion literally means that cervix has been eroded by some ulcerative process but in fact it is an over growth of columnar epithelium (endocervix) of cervix has been eroded by some ulcerative process but in fact it is an over growth of columnar epithelium (endocervix) of cervix over cubical epithelium and an erosion is never ulcerated unless it is malignant. 7 Erosion indicates present or past endocervicitis and it is cestrogen dependent thus does not occur before puberty except congenital one of in menopause. It is a disease of reproductive age and can only be demonstrated by inspection and palpation.8

The most evident clinical features are leucorrhoea, metrorrhagia, low backache, pruritis vulva, increased frequency of micturition and dysuria. Infertility may bleed during pregnancy because of increased vascularity.9. In few cases, it is associated

with parametritis especially in cases of obstetric injury where patient complaints of deep dysparunia.¹⁰ Some times it may cause metastatic infections like arthritis and muscle pain and urinary tract infection. Common people believed that “White discharge” is white blood which patient is loosing and the patient develops psychological palpitation. It is still not proved that erosion predisposes to cervical carcinoma.¹¹

Diagnosis of chronic cervicitis and erosion is made by per vaginum (P/V) and per speculum (P/S) examinations. On P/S examination, cervix will be red, swollen and having slightly raised area around external OS< which is smooth and glistening while on P/V examination, cervix will be firm and erosion site will give a soft velvety feeling to the examining finger and it may bleed easily. Cervix may be normal or bulky.

In allopathy, chemotherapy is said to be useless. The only curative treatments is Electrocautery or Diathermy cautery on cryo-surgery while in Unani Medical Science its treatment is based on two main principles, *Tahleel* (Disoultion) and *Tajweef* (Desiccation) and the drugs which have dissolution and desiccation properties are known as *Muhallialt* (Resolvents) and *Mujaffifat* (Desiccators) respectively. According to a renound Unani Hakim Mohd. Akbar Arzani, the local application of the drugs is more effective than the systemic.¹² As per Arzani's recommendation *Marham Dakhlion*, a herbal paste which is claimed to be effective in all types of cervicitis (by reducing harness and moisture of inflamed cervix and its heighboring structures as local applicant),¹³ has been selected for the clinical trial and has also been compared with Furacin skin ointment on chronic cervicitis and cervical erosion.

MATERIALS AND METHODS

The study was conducted at Ajmal Khan Tibbiya College, Hospital, Aligarh Muslim University, Aligarh during the years 1988 – 89 on 100 patients. They were divided into two equal groups (50 patients in each group) having mild to advanced erosion. For the selection of patients the following criteria was adopted.

The patients were between the age of 25 – 45 years. They were multipara, not pregnant not suffering from tuberculosis, venereal disease and diabetes mellitus. They had complaints for more than three months and were not using contractive pills. Their weight was between 35 – 50 kg and haemoglobin percetange was between 8 – 10 gm.

The following investigations and examination were made before the treatment and the patients were re-investigated and re-examined after the completion of treatment.

Clinical examinations include history records of the patients, per speculum and per vaginum examinations while investigations include routine urine and stool examinations, total and differential counts of blood cells and percentage of haemoglobin, X-ray chest was also done to exclude pulmonary tuberculosis.

The first group of patients was treated with Marham Dakhlion (Table No. 1) and the second group was treated with Furacin skin ointment (Nitrofurazone 0.2% W/W Cream). All the patients were examined weekly and their responses were recorded regularly. The total duration of treatment was three weeks, after which a complete assessment was made.

OBSERVATIONS AND RESULTS

During the study it has been observed that age incidence of first group was 38,40,20

and 2 percent and in second group was 34,44,20 and 2 percent in 26 to 30, 31 to 35, 36 to 40, 41 to 45 years of age respectively.

Table 1 Ingredients of Marham Dakhlion in Each 60 Grams

Name of Ingredients		Quantity in each 60 gm.
Roghan – e- gul	(oil : <i>Rosa Demescus</i>)	Q.S.
Mom Khalis	(Bee Wax)	Q.S.
Murdar Sang	(Mineral : Litharg)	18 gm
Tukh-me-khatmi	(Seed : <i>Althoea officinalis</i>)	18 gm
Tukh-me-e-Kanocha	(Seed : <i>Phyllanthus Madarpetensis</i>)	18 gm
Tukhm-e-Katan	(Seed : <i>Linum Usitatissimum</i>)	6 gm
Tukhm-e-Asapghol	(Seed : <i>Plantago ovata</i>)	6 gm
Tukhm-e-hulba	(Seed: <i>Trigonella Foenumgraccum</i>)	6 gm

This incidence indicates that the maximum number of patients (44%) were in age of 31

to 35 years and least (2%) were in 41 to 45 years of age (Table No.2)

Table No.2 Age – wise incidence, Degree of Erosion and Inflammation in Two Selected Groups

Age in years	Incidence of cases		Advanced degree		Moderate degree		Mild degree	
	No.	(%)	No.	(%)	No.	(%)	No.	(%)
Marham Dakhlion Group								
26 – 30	19	(38)	1	(2)	13	(26)	5	(10)
31 – 35	20	(40)	1	(2)	17	(34)	2	(04)
36 – 40	10	(20)	2	(4)	04	(08)	4	(08)
41 – 45	1	(2)	-	(-)	(-)	(02)	-	(-)
	50	100	4	8	35	70	11	22

Furacin Skin ointment Group								
26 – 30	17	(34)	-	(-)	12	(24)	5	(10)
31 – 35	22	(44)	2	(4)	18	(36)	2	(04)
36 – 40	10	(20)	2	(4)	04	(08)	4	(08)
41 – 45	01	(02)	-	(-)	-	(-)	1	(02)
	50	100	4	8	34	68	12	24

According to the severity of the diseases the degree of erosion and inflammation was found 8.68 and 23 percent in advanced moderate and mild degree respectively (Table No. 3). During treatment weekly difference in improvement in Marham

Dakhliion and Furacin skin ointment treated group was recorded as 40 and 32 in first week 50 and 48 in second week and 80 and 54 percent in last week respectively (Table No.3)

Table No.3 Degree of improvement recorded at the end of first, second and third week of treatment with marham dakhliion and furacin skin ointment

Week	Complete		Moderate		Mild		No. Relief	
	No.	(%)	No.	(%)	No	(%)	No	(%)
Marham Dakhliion Group								
First week	05	(10)	06	(12)	9	(18)	30	(60)
Second week	13	(26)	11	(22)	4	(08)	22	(44)
Third week	23	(46)	05	(10)	2	(04)	20	(40)
Furacin skin ointment group								
First week	-	(-)	08	(16)	8	(16)	34	(68)
Second week	2	(04)	13	(26)	9	(18)	26	(52)
Third week	6	(23)	17	(34)	4	(08)	23	(46)

Degree of improvement in relation to the degree of erosion and inflammation after completion of treatment was recorded as 25

to 50 in advanced 65.7 and 58.8 percent in moderate and 54.5 and 41.6 percent in mild degree erosion (Table No.4)

Table No.4 Degree of improvement recorded at the end of the study in relation to the degree of erosion and inflammation with marhama dakhlion and furacin skin ointment

Degree	Incidence of cases		Complete Relief		Moderate Relief		Mild Relief		No. Relief	
	No	(%)	No	(%)	No.	(%)	No.	(%)	No.	(%)
Marham Dakhlion group										
Advanced	04	(08)	-	(-)	-	(-)	1	(2)	3	(6)
Moderate	35	(70)	4	(8)	9	(18)	10	(20)	12	(24)
Mild	11	(22)	1	(2)	2	(04)	3	(6)	5	(10)
										40
Furacin skin ointment group										
Advanced	04	(08)	-	(-)	1	(2)	1	(2)	2	(04)
Moderate	34	(68)	3	(6)	8	(16)	9	(18)	14	(26)
Mild	12	(24)	1	(2)	2	(4)	2	(04)	7	(14)
										44

These results are based on marked changes in symptoms and signs like white discharge per vaginum, lower abdominal pain, tenderness and redness on P/V and P/S examinations. At the end of the study white discharge per vaginum, lower abdominal tenderness as relieved about 75 percent of cases and redness disappeared in about 50 percent cases completely while rest of the cases had mild to moderate relief.

Two to five percent increase in haemoglobin percentage in 5 to 10 percent cases and no gain in weight was observed in both the groups. Five to six percent of cases of Furacin skin ointment treated group showed mild adverse reactions like increases vaginal discharge, burning sensations, increased redness and pain.

Conclusion

At the end of three weeks it has been concluded that;

Cervical erosion and cervicitis mostly affect the females of the age of 26 to 35 years and in multi para.

Marham Dakhlion has been found effective in about 80% of cases and better results observed in their week as compared to the first and second week by subsiding the symptoms and it also free from side effects.

Furacin skin ointment has also been found effective in 54% of cases but also has some side effects.

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