

A COMPARATIVE CLINICAL STUDY TO EVALUATE THE EFFICACY OF PRABHAKAR VATI AND SARPAGANDHA VATI IN SHONITA DUSTI W.S.R. TO ESSENTIAL HYPERTENSION**¹Dr. G. Vinay Mohan, ²Dr. Dhanya P. R. and ³Dr. Jyoti Ashok Belavi**¹HOD, Guide, Dept. of PG Studies in Kayachikitsa, Shri Shivayogeeshwara Rural Ayurvedic Medical College and Hospital, Inchal.²Assistant Professor, Co Guide, Dept. of PG Studies in Kayachikitsa, Shri Shivayogeeshwara Rural Ayurvedic Medical College and Hospital, Inchal.³Post Graduate Scholar, Dept. of PG Studies in Kayachikitsa, Shri Shivayogeeshwara Rural Ayurvedic Medical College and Hospital, Inchal.***Corresponding Author: Dr. G. Vinay Mohan**

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Article Received on 27/11/2024

Article Revised on 18/12/2024

Article Accepted on 08/1/2025

ABSTRACT

Hypertension, a critical global health challenge, affects over one billion individuals worldwide, with a prevalence of 29.8% in India. Essential Hypertension, a multifactorial condition with no specific identifiable cause, aligns closely with Shonita Dusti in Ayurveda. This study compares the efficacy of Prabhakar Vati and Sarpagandha Vati in managing Shonita Dusti (Essential Hypertension) by leveraging classical Ayurvedic principles and evidence-based approaches.

KEYWORDS: Shonita dushtu, hypertension, sarpaganda vati, prabhakara vati.**INTRODUCTION**

Hypertension, or elevated arterial blood pressure, contributes significantly to cerebrovascular, coronary, renal, and peripheral vascular diseases. Despite modern pharmacological advancements, control of hypertension remains a challenge. Ayurveda conceptualizes the disease under Shonita Dusti involving Raktadhatu and Tridosha imbalance. Symptoms like Shirashula, Swedadhikya, and Krodha resemble clinical features of Essential Hypertension. This study evaluates the comparative efficacy of Prabhakar Vati and Sarpagandha Vati to provide a holistic Ayurvedic solution.

MATERIALS AND METHODS**Study Design**

This was a randomized, open-label, interventional clinical trial conducted on 40 patients diagnosed with Shonita Dusti corresponding to Essential Hypertension. Participants were divided into two groups:

Group A: Prabhakar Vati (250 mg) twice daily with lukewarm water.

Group B: Sarpagandha Vati (250 mg) twice daily with lukewarm water.

Duration: 21 days with follow-up on the 22nd day.

A standardized proforma was used for recording subjective symptoms and objective parameters pre- and post-treatment.

SELECTION CRITERIA**Inclusion Criteria**

1. Patients aged 30–60 years presenting with symptoms of Shonita Dusti.
2. Hypertension as per JNC 8 guidelines: Systolic BP > 140 mmHg or Diastolic BP > 90 mmHg.
3. Willingness to provide informed consent.

Exclusion Criteria

1. Secondary Hypertension and other systemic disorders.
2. History of cerebrovascular accidents, CKD, or metabolic disorders.
3. Congenital heart disease or psychiatric conditions.

Intervention Protocol

1. Prabhakar Vati: Administered for its Pitta Shamana, Tridosha Hara, and cardioprotective properties, owing to ingredients like Arjuna kwatha and Abhraka Bhasma.
2. Sarpagandha Vati: Known for its Nidrajanana (sedative) and antihypertensive properties, attributed to Sarpagandha.

Both formulations were administered twice daily with lukewarm water.

Dravya Karma of Sarpagandha Vati and Prabhakar Vati

• Sarpagandha Vati

Sarpagandha Vati is a classical Ayurvedic formulation primarily used for managing psychological disorders, sleep disturbances, and hypertension. It contains *Rauwolfia serpentina* as its main ingredient.

Dravya Composition

1. Sarpagandha (*Rauwolfia serpentina*)

Rasa (Taste): Tikta (bitter), Kashaya (astringent).

Guna (Quality): Laghu (light), Ruksha (dry).

Veerya (Potency): Sheeta (cold).

Vipaka (Post-digestive effect): Katu (pungent).

Doshagnata (Dosha pacification): Pacifies Vata and Pitta.

Karmukata (Mode of Action)

1. Shamana (Pacification)

Pacifies aggravated Vata and Pitta, reducing symptoms like Shirashula (headache), Krodha (anger), and Swedadhikya (excessive sweating).

Effective in calming the nervous system due to its Tikta-Kashaya Rasa and Sheeta Veerya.

2. Nidrajanana (Sleep-inducing)

Contains alkaloids like reserpine, which are known to calm the mind and enhance sleep quality by reducing anxiety and overactivity of the nervous system.

3. Hrudya (Cardioprotective)

Reduces arterial tension and blood pressure, aiding in the management of hypertension.

4. Tranquilizing Action

The sedative effect alleviates psychological stress, promoting mental clarity and emotional balance.

• Prabhakar Vati

Prabhakar Vati is a cardioprotective Ayurvedic formulation indicated for heart diseases, palpitations, and hypertension. It is a compound preparation containing a synergistic combination of herbs and minerals.

Dravya Composition

1. Arjuna (*Terminalia arjuna*)

Rasa: Kashaya (astringent).

Guna: Laghu (light), Ruksha (dry).

Veerya: Sheeta (cold).

Vipaka: Katu (pungent).

Doshagnata: Pacifies Pitta and Kapha.

2. Abhraka Bhasma (Processed Mica)

Balya (strengthening), Rasayana (rejuvenating).

Enhances cardiac function and improves cellular metabolism.

3. Shuddha Gandhaka (Purified Sulphur)

Boosts digestion and helps in detoxifying the blood.

4. Other Ingredients

Essential herbs like Mukta Pishti (pearl calcite) contribute to cooling and strengthening actions.

Karmukata (Mode of Action)

1. Hrudya (Cardioprotective)

Strengthens cardiac muscles and improves myocardial function through Arjuna's Kashaya Rasa and Abhraka's Rasayana properties.

2. Raktashodhaka (Blood Purifier)

Detoxifies blood, reducing Shonita Dusti symptoms like Shirashula and Tamasatidarshana (blurring of vision).

3. Tridosahara (Balances Doshas)

Balances all three Doshas, particularly Pitta, by reducing inflammation and heat in the body.

4. Pitta Shamana (Pacifies Pitta)

Manages Pitta-related hypertension symptoms like anger, sweating, and fatigue.

5. Balya (Strengthening)

Improves overall systemic strength, supporting cardiac output and stabilizing blood pressure.

6. Rasayana (Rejuvenation)

Acts as a rejuvenative, enhancing tissue health and longevity.

ASSESSMENT CRITERIA

Subjective Parameters

1. Shirashula (headache).
2. Swedadhikya (excessive sweating).
3. Krodha (anger).
4. Tamasatidarshana (blurring of vision).
5. Shrama (fatigue).

Objective Parameters

1. Blood pressure (systolic and diastolic).
2. Serum cholesterol levels.

Statistical Analysis

1. Paired t-test: Used for intra-group comparisons of pre- and post-treatment data.
2. Unpaired t-test: Used for inter-group comparisons.
3. Significance Level: A p-value < 0.05 was considered statistically significant.

RESULTS

Group A: Prabhakar Vati

1. Significant improvement in Shirashula and Krodha due to its Pitta Shamana properties.
2. Reduction in systolic and diastolic BP was significant.
3. Better control of serum cholesterol levels compared to Group B.

Group B: Sarpagandha Vati

1. Superior results in managing symptoms like Swedadhikya, Anidra, and anxiety.
2. Statistically significant reduction in blood pressure.
3. Enhanced psychological relief, attributed to its sedative properties.

Comparative Analysis

1. Prabhakar Vati showed a broader systemic impact.
2. Sarpagandha Vati effectively managed psychological and sleep-related symptoms.

DISCUSSION

Prabhakar Vati, with its cardioprotective and Pitta Shamana properties, exhibited a comprehensive approach in reducing hypertension-related symptoms. Sarpagandha Vati, known for its sedative and antihypertensive properties, offered targeted relief for psychological stress and sleep disturbances. Integrative use of these formulations guided by Ayurvedic principles may provide a robust framework for managing Essential Hypertension.

CONCLUSION

Both Prabhakar Vati and Sarpagandha Vati are effective in managing Shonita Dusti corresponding to Essential Hypertension. While Prabhakar Vati demonstrated a broader systemic impact, Sarpagandha Vati was more effective in mitigating psychological stress and enhancing sleep quality. Future studies with larger sample sizes and longer follow-up periods are recommended to validate these findings and explore synergistic benefits.

REFERENCES

1. Anchala R, Kannuri NK, Pant H, Khan H, Franco OH, Di Angelantonio E, Prabhakaran D. Hypertension in India: a systematic review and meta-analysis of prevalence, awareness, and Control of hypertension. *J Hypertens*, Jun. 2014; 32(6): 1170-7. Doi:10.1097/HJH.000000000000146. PMID: 24621804; PMCID: PMC4011565.
2. Harison's Principles and Practice of Medicine. Jamson, Favci, Kasper, Hauser, Longo, Loscalzo editor. 20th edi. Mc Gravehill education, 2018; II: 3528, 1890, 1891.
3. API Textbook of Medicine. Y.P. Munjal chief editor. 9th edi. Mumbai: The Association of Physicians of India, 2012; I, 1030, 686, 687.
4. Devidson. Devidson's Principles and Practice of Medicine. Stuart H. Ralston, Ian D. P. Enman, Mark W.J. Strachan, Richard P. Hobson editor. 23rd edi. Elsevier, 2018; 1365, 509.
5. Sushruta. Sushruta Samhita. Dalhana and Shri Gayadas rachita hindi vyakya, Varanasi: Chaukhambha orientalia, 2016; part I, 399, 159, 160.
6. Vagbhata. Atanga Hrdaya. Dr. T. Shreekumar, translation and commentary. 4th edi. Kerala: Harishree hosp, 2013; part II, 440, 190.
7. Agnivesha. Charaka Samhita. H.S. Kushwaha editor. Varanasi-Chaukhambha Orientalia, 2014; part I, 964, 332, 333, 336.
8. Manthappa M. Manipal Prep Manual of Medicine. H. Basavana Goudappa editor. 2nd edi. New Delhi: CBS Publishers & Distributors, 2016; chapter 3, 708, 237.
9. Govindadas. Bhaisajya Ratnavali. Shri Lalchandra vaidya editor. Varanasi- Chaukhambha Orientalia. sloka, 820, 438.
10. Yadavji trikamji acharya. Siddhayoga sangraha. 11 edition. Shri baidhyanartha Ayurveda Bhavan limited Naini., 2003; chapter-19. 164: 101.
11. Hivale US, Bhatted SK, Bhojani MK, Bhusal N. A clinical study on the effect of Triphaladikal basti with Arjunapunarnavadi Ghanavati in the management of essential Hypertension. *Ayu.*, Oct-Dec., 2018; 39(4): 250-255. Doi:10.4103/ayu.AYU_184_17. PMID: 31367149; PMCID: PMC6639820.