

A Case Study On Effect Of Madhav Rasayan On A Covid 19 Positive Patient Along With Standard Allopathic Protocol Suggested By ICMR

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Abstract:

Today's pandemic era is very threatening and critical issue in all aspects. Healthcare workers along with Ayurveda doctors definitely working very hard to tackle the situation. In Ayurveda it is most important to study the samprapti(etiology) of any disease. In covid19 cases all symptoms are related with sannipat(increases of all three doshas) mentioned in ancient ayurvedic samhitas. In charak samhita 13 types of sannitpatas are described. According to sushrut samhita special type of jwar is mentioned called as abhinyas or hatoujas jwar. In this case study I briefly describe ancient literature and their correlation with Covid 19 symptoms. With the help of standard protocol of ICMR allopathic medicines Madhav rasayan helps to speedy recovery and formation of Covid 19 Antibodies are seen in this case

Keywords: Madhav Rasayan, jwar, ayurvedic treatment for Covid 19, sannipatik jwar, corona virus ayurvedic treatment

Introduction:

Today's pandemic era is very threatening and critical issue in all aspects. Healthcare workers along with Ayurveda doctors definitely working very hard to tackle the situation. In Ayurveda it is most important to study the samprapti(etiology) of any disease. In covid19 cases all symptoms are related with sannipat(increases of all three doshas) mentioned in ancient ayurvedic samhita. In charak samhita 13 types of sannitpatas are described. According to sushrut samhita special type of jwar is mentioned called as abhinyas or hatoujas jwar. In this case study I briefly describe ancient literature and their correlation with Covid 19 symptoms. With the help of standard protocol of ICMR allopathic medicines, Madhav rasayan and generic ayurvedic medicines chyavanprash helps to speedy recovery and formation of Covid 19 Antibodies are seen in this case.

सन्निपातज उच्यते ॥८९॥

सन्निपातज्वरस्योर्ध्वं त्रयोदशविधस्य हि । प्राक्सूत्रितस्य वक्ष्यामि लक्षणं वै

पृथक् पृथक् ॥९०॥

भ्रमः पिपासा दाहश्च गौरवं शिरसोऽतिरुक् । वातपित्तोल्बणे विद्याल्लिङ्ग

मन्दकफे ज्वरे ॥ ९१ ॥

शैत्यं कासोऽरुचिस्तन्द्रापिपासादाहग्व्यथाः । वातश्लेष्मोल्बणे व्याधौ लिङ्ग

पित्तावरे विदुः ॥९२॥

छर्दिः शैत्यं मुहुर्दाहस्तृष्णा मोहोऽस्थिवेदना । मन्दवाते व्यवस्यन्ति लिङ्गं

पित्तकफोल्बणे ॥९३॥

सन्ध्यस्थिशिरसः शूलं प्रलापो गौरवं भ्रमः । वातोल्बणे स्याद् व्यनुगे तृष्णा

कण्ठास्यशुष्कता ॥९४॥

रक्तविण्मूत्रता दाहः स्वेदस्तृड् बलसंक्षयः । मूर्च्छा चेति त्रिदोषे स्याल्लिङ्गं पित्ते

गरीयसि ॥ ९५ ॥

आलस्यारुचिल्लासदाहवम्यरतिभ्रमैः । कफोल्बणं सन्निपातं तन्द्राकासेन

चादिशेत् ॥९६॥

प्रतिशयाय छर्दिरालस्यं तन्द्राऽरुच्यग्निमार्दवम् । हीनवाते पित्तमध्ये लिङ्गं

श्लेष्माधिके मतम् ॥९७॥

हारिद्रभूत्रनेत्रत्वं दाहस्तृष्णा भ्रमोऽरुचिः । हीनवाते मध्यकफे लिङ्गं पित्ताधिके

मतम् ॥९८॥

शिरोग्रवेपथुः श्वासः प्रलापश्छद्यरोचकौ । हीनपित्ते मध्यकफे लिङ्गं

स्यान्मारुताधिके ॥९९॥

शीतको गौरवं तन्द्रा प्रलापोऽस्थिशिरसोऽतिरुक् । हीनपित्ते वातमध्ये लिङ्गं

श्लेष्माधिके विदुः ॥१००॥

श्वासः कासः प्रतिशयायो मुखशोषोऽतिपावरुक् । कफहीने पित्तमध्ये लिङ्गं

वाताधिक मतम् ॥१०१॥

वक्त्रभेदोऽग्निदौर्बल्यं तृष्णा दाहोऽरुचिर्भ्रमः । कफहीने वातमध्ये लिङ्ग

पित्ताधिके विदुः ॥ १०२ ॥

सन्निपातज्वरस्योलमतो वक्ष्यामि लक्षणम् । क्षणे दाहः क्षणे

शीतमस्थिसन्धिशिरोरुजा ॥ १०३ ॥

साम्रावे कलुषे रक्ते निभुने चापि दर्शने । सस्वनौ सरुजौ कर्णी कण्ठः

शूकैरिवावृतः ॥१०४॥

तन्द्रा मोहः प्रलापश्च कासा श्वासोऽरुचिर्भ्रमः । परिदग्धा खरस्पर्शा जिह्वा

स्रस्ताङ्गता परम् ॥१०५॥

Now the fever caused by aggregation of three doṣas is being said *sannipatik jwara*.

will describe hereafter the symptoms of the thirteen types of *sannipatik jwara* (fever caused by aggregate).

Giddiness, thirst, burning sensation, heaviness, excessive pain in head-these are the symptoms in fever caused by *vata-pitta* as severe and *kapha* as mild.

Cold sensation, cough, anorexia, drowsiness, thirst, burning sensation, pain, distress—these are the symptoms in fever caused by severe *vata* and *kapha* and mild *pitta*.

Vomiting, alternating cold and hot sensation, thirst, fainting, pain in bones- these are the symptoms in fever caused by severe *pitta* and *kapha* and mild *vata*.

Pain in joints, bones and head, delirium, heaviness, giddiness, thirst, dryness of throat and mouth-these symptoms are found in fever caused by severe *vata* with subsidiary *pitta* and *kapha*. Red faeces and urine, burning sensation, sweating, thirst, weakness and fainting-these are the symptoms in fever caused by severe *pitta* (with subsidiary *vata* and *kapha*).

Lassitude, anorexia, burning sensation, vomiting, restlessness, giddiness, drowsiness and cough-these are the symptoms of fever caused by severe *kapha*(with subsidiary *vata* and *pitta*).

Coryza, vomiting, lassitude, drowsiness, anorexia, poor digestion-these are the symptoms of fever caused by severe *kapha*, moderate *pitta* and mild *vata*.

Yellow urine and eyes, burning sensation, thirst, giddiness and anorexia are symptoms of fever caused by severe *pitta*, moderate *kapha* and mild *vata*.

Headache, tremors, dyspnoea, delirium, vomiting and anorexia are the symptoms of fever caused by severe *vata*, moderate *kapha* and mild *pitta*.

Feeling of cold, heaviness, drowsiness, delirium, excessive pain in bones and head are the symptoms of fever caused by severe *kapha*, moderate *vata* and mild *pitta*.

Dyspnoea, cough, coryza, dryness of mouth, and excessive chest pain are the symptoms of fever caused by severe *vata*, moderate *pitta* and mild *kapha*.

Diarrhoea, poor digestion, thirst, burning sensation, anorexia and giddiness are the symptoms of fever by severe *pitta*, moderate *vata* and mild *kapha*.

Hereafter (I) will describe the symptoms of the *sannipata jwara* (caused by all the three doṣas with equal severity) such as-momentary sensations of heat and cold, pain in bone joints and head; tearful, dirty, red and crooked eyes, ears with tinnitus and pain, throat as if covered with awns, drowsiness, fainting, delirium, cough, dyspnoea, anorexia, giddiness; tongue as if charred and roughened, excessive laxity in organs, haemoptysis, turning of head, thirst, insomnia, cardiac pain, delayed and little elimination of sweat, urine and faeces, limbs not much emaciated, continuous groaning, appearance of rashes and blackish and reddish patches, muteness, inflammation in channels, heaviness in abdomen and delayed digestion of *doshas*.

Hataujasa/ Abhinyasa fever described by Acharya Sushrut:

अभिन्यास — हतौजस ज्वर
 'नात्युष्णशीतोऽल्पसंज्ञो भ्रान्तप्रेक्षी हतप्रभः ।
 खरजिह्वः शुष्क कंठः स्वेदविण्मूत्रवर्जितः ॥
 साश्रुनिर्भुग्नयनो भक्तद्वेषी हतस्वरः ।
 श्वसन्निपतितः शेते प्रलापोपद्रवन्वितः ॥
 अभिन्यासं तु तं प्राहुर्हतौजसमथापरे ।
 सान्निपातज्वरं कृपच्छ मसाध्यमपरे जगुः ॥'

(सु. उ. तं. ३९/४०-४२) 2

Where a slight or imperceptible rise of the bodily heat, or a slightly subnormal temperature attended with a subcomatose state, erroneous vision, loss of voice, injured or cracked condition of the tongue, dryness of the throat, suppression of stool, perspiration and urine, tearful eyes, hardness of the thorax aversion to food, dulness of complexion, difficult breathing and delirious talks and other concomitant symptoms are the specific indications in a patient always confined to his bed, it is known by the name of *Abhinyasa*, while others call it a case of *Hataujasa fever*.

Description of Madhav Rasayan:

- 1) Designed & Marketed by - Shri Vishwavati Ayurvedic Chikitsalaya & Research Center, Kolhapur
- 2) Manufactured by- Sahyadri ayurvedic Life Pvt.Ltd, Satara

Content of Madhav rasayan:

Piper longum

- Glycyrrhiza glabra
- Eclipea alba
- Achyranthes aspera
- Emblica ribes
- Aloe vera

1)Piper longum medicinal Properties:

- Rasa (taste) – Katu (pungent)
- Guna- Laghu, Teekshna (lite,strong, piercing)
- Vipaka- Madhura – Undergoes sweet taste conversion after digestion
- Veerya – Ushna – Hot potency. (wet variety has cold potency)
- Effect on Tridosha – Balances Vata and Kapha Doshas. (wet variety increases Kapha Dosha).

Qualities as per Bhojana kutuhalam

According to Bhojana Kutuhala long pepper in its wet state aggravates kapha dosha, is sweet and cold in nature, is heavy for digestion and is unctuous. In its dry state it possess the opposite of the above qualities. it is aphrodisiac, has katu rasa and is sweet in its post metabolic state, It is greatly useful in disorders caused due to vitiation of vata and kapha dosha, cough and dyspnoea.

Piper longum benefits

Wet, fresh long pepper uses:

- Shleshmala – Increases Kapha Dosha
- Madhura – sweet
- Guru – heavy
- Snigdha – unctuous, oily
- Pittahara – Balances Pitta Dosha.

Dry long pepper fruit uses:

- Kapha Vataghni – Balances Kapha and Vata Dosha
- Katu – Pungent taste
- Ushna – hot
- Vrushya – aphrodisiac
- Pitta Avirodhini – Does not increase Pitta to a large extent.
- Deepani – improves digestion strength
- Rasayani – anti ageing, rejuvenative
- Anushna – not very hot
- Snigdha – unctuous, oily
- Rechani – causes purgation

- Shwasahara – useful in asthma, COPD and other respiratory diseases
- Kasahara – relieves cough, cold
- Udarahara – useful in ascites
- Kushtahara – useful in skin diseases
- Pramehahara – useful in diabetes
- Gulmahara – useful in abdominal tumor
- Arshahara – relieves piles, hemorrhoids
- Amanut – useful in indigestion, relieves Ama
- Marutahara – Useful in Vata imbalance disorders
- Pittaprakopini – slightly increases Pitta.
- Kshayapaha – relieves chronic lung disorders, tuberculosis.

2) Glycyrrhiza glabra medicinal qualities:

Rasa (Taste) – Madhura (Sweet)

Guna (Properties) – Guru (Heavy), Snigdha (Unctuous)

Vipaka (Post digestion effect): Madhura (Sweet)

Veerya (Potency) – Sheeta (Cold)

Action on Dosha:

Vata-Pittahara (Pacifies the aggravated / morbid Vata and Pitta). Being heavy and unctuous and possessing sweet taste and post-digestion effect, which are antagonistic to Vata, Yashtimadhu pacifies (controls) it. Similarly Yashtimadhu pacifies the aggravated Pitta due to its sweet taste and post-digestion effect and also its cold potency.

- Good for eye and eyesight / vision
- Provides good strength and immunity
- Enhances color and complexion
- Good aphrodisiac, increases the quantity and quality of semen
- Good hair tonic
- Excellent remedy for throat disorders, good for improving voice
- Heals ulcers, wounds and swelling / inflammation associated with wounds
- It neutralizes the bad effects of poisons and toxins. In Chinese medicine it was administered for treating food poisoning and its ill-effects
- Anti-emetic
- Relieves thirst
- Relieves tiredness / exhaustion, provides energy
- Useful in relieving wasting disorders, degenerative diseases
- Good expectorant, expels phlegm from lungs, heals respiratory diseases

- Good for heart health, prevents damage from LDL cholesterol (Bad fat), Discourages clogging plaque formation which can damage heart
- Enhances immunity by boosting levels of interferon which is the key chemical of the immune system that fights off viruses ([Research](#)) 3
- Has anti-allergic property and highly beneficial in allergic rhinitis, conjunctivitis, bronchial asthma ([Research](#)) 4
- Externally it has been effectively used in eczema, dermatitis and psoriasis
- Mild laxative
- It has powerful antioxidants, phyto-estrogens which are helpful during menopause
- It has antidepressant compounds and helps in warding off depression
- Good Brain Tonic
- Blood-purifier, Increases quality and quantity of blood, useful in bleeding disorder
- Relieves cough, chest congestion, sore-throat
- Anti-pyretic
- Relieves dysuria
- Promotes longevity of life
- Promotes fracture healing.

3) Medicinal qualities of Eclipta alba-

- Rasa (taste) – Katu (pungent), Tikta (bitter)
- Guna (qualities) – Rooksha (dryness), Laghu (light to digest)
- Veerya- Ushna – Hot potency
- Vipaka- Katu – undergoes pungent taste conversion after digestion.

Effect on Tridosha

Because of its pungent, bitter taste, dryness and lightness, it balances Kapha Dosha. Because of its hot potency, it balances Vata. Hence, it balances Kapha and Vata Doshas.

4) Achyranthes aspera – Medicinal properties

Rasa (taste) – Katu (pungent), Tikta (Bitter)
Guna (qualities) – Laghu (lightness), Rooksha (dryness), Teekshna (Strong, sharp) Sara (induces movement)
Vipaka- Katu – Undergoes pungent taste conversion after digestion
Veerya – Ushna (hot potency)
Effect on Tridosha – Balances Kapha and Vata Dosha.

5) Emblica Ribes -

Rasa (taste) – Katu (pungent), Kashaya (Astringent)
Guna (qualities)– Laghu (lightness), Ruksha (dryness), Teekshna (piercing, strong)
Virya– Ushna – hot potency
Vipaka– Katu – Undergoes pungent taste conversion after digestion.
Prabhava – Special effect – Krumighna – relieves worm infestation

Effect on Tridosha

Because of its hot potency, it balances Kapha and Vata Doshas.

6) Aloe Vera medicinal properties

Rasa (taste) – Tikta (bitter)
Guna (qualities) – Guru (heaviness), Snigdha (oily, unctuous), Picchila (sticky, slimy)
Vipaka- Katu – Undergoes pungent taste conversion after digestion.
Veerya – Sheeta – Cold potency

Effect on Tridosha – Balances all the three Doshas.

Symptoms of COVID-19

- The main symptoms include:
- Fever
- Coughing
- Shortness of breath
- Trouble breathing
- Fatigue
- Chills, sometimes with shaking
- Body aches
- Headache
- Sore throat
- Loss of smell or taste
- Nausea
- Diarrhea

The virus can lead to pneumonia, respiratory failure, septic shock, and death. Many COVID-19 complications may be caused by a condition known as cytokine release syndrome or a cytokine storm. This is when an infection triggers your immune system to flood your bloodstream with inflammatory proteins called cytokines. They can kill tissue and damage your organs.

Following severe symptoms:

- Trouble breathing or shortness of breath

- Ongoing chest pain or pressure
- New confusion
- Can't wake up fully
- Bluish lips or face
- Strokes have also been reported in some people who have COVID-19. 5

Description of Covid19 case:

A Covid 19 positive male patient of age 30 years approach me by mobile phone conversations. According to him he has completed 10 days Allopathic treatment as per ICMR's Standard Protocol in Covid centre. He was discharged on 16.07.2020 as his health was stable. He was under home quarantine for next 14 days. He is with mild to moderate symptoms i.e. Coughing, fatigue, Chills,

sometimes with shaking, body aches, headache, sore throat, loss of taste. While home quarantine I arrange to send Madhav Rasayan 2 bottles. I suggested to intake 1TDS before breakfast, lunch & dinner for first 5 days. Next 5 days 1OD before breakfast. He took 7 days and I suggested to do Covid 19 RT-PCR test as per national policy on dated 24.07.2020. The reports found that **not detection of Covid 19 virus**. I suggested to repeat 2nd cycle of Madhav Rasayan after 10 days gap of 1st cycle (of 10 days) and we repeated Covid 19 antibodies test on 11.08.2020. Report shows **detection of development of antibodies** against Covid 19 virus in near past exposure. Now while writing this article patient is completely stable and doing his office work regularly.

MMDM. (1208) 5000-5-2020

Estate and Management Dept.

**PUNE MUNICIPAL CORPORATION
HEALTH DEPARTMENT**

Discharge Card 2640

29

Hospital / Isolation Facility Name :

Patient Name : [Redacted]

Age : 30 Sex : M

Address : Satavnagar, Saimandir, Sadgaon, Hadapsar.

Date of Admission : 9/7/20

Date of Discharge : 16/7/20

History : Covid ID - YG150812
CID - NF

Lab Report : Covid 19

Covid 19

Advice on Discharge :

- (1) Please remain Home Quarantine / Home Isolation for 14 days.
- (2) Please Continue Medicine Advised by Doctor.
- (3) For Follow up, When required contact any nearest PMC flu OPD or PMC Covid Hospital.
- (4) For any Health complaint contact on helpline number - 020-25506317 / 020 - 25506300

Signature of Doctor

Stamp

Before taking Madhav Rasayan



S NO
66 SATAVNAGAR HANDEWADI ROAD
HADAPSAR PUNE, PUNE
Tel No : 9503852006
PIN No: 411028
PID NO: P1162000022572
Age: 30.0 Year(s) Sex: Male

Reference:

Sample Collected At:
Hadapsar centre home visit
Construction house, ground floor, 796/189
-b, bhandarkar institute road, pune
411004

Medical Laboratory Report

VID: 116201570000440

Registered On:
24/07/2020 05:31 PM
Collected On:
24/07/2020 5:31 PM
Reported On:
25/07/2020 03:46 PM

SARS-CoV-2 (COVID 19) Detection (Qualitative) by Real Time rt PCR

Test : Qualitative RNA detection of SARS-CoV-2 (COVID19)
Specimen Type : Swab: Nasopharyngeal and Oropharyngeal
Test principle : Real time reverse transcription PCR (ICMR approved kit)
Test description : Screening by "E" gene detection and Confirmation by "RdRp , N or S" gene detection

Result :

SARS-COV-2 RNA	NOT DETECTED
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Metropolis lab ICMR registration no. MHLP001

Interpretation guidelines

A. For result as "DETECTED":

- 1) Detected result indicates presence of SARS-CoV-2.
- 2) Each "Detected" result has been verified using confirmatory test.
- 3) False positive is rare globally.
- 4) A repeat test of freshly collected specimen may give different result due to the following –
 - a. Viral load reduces day by day and one may clear virus as early as 4.3 days.¹
 - b. The new sample may have low viral load due to varied shedding of the virus.
 - c. Inherent variability due to improper sample collection and inadequate storage while due care is taken at Metropolis.
- 5) 80% of patients with "Detected" result may be asymptomatic.
- 6) A detected result does not distinguish between a viable/replicating organism and a non-viable organism

B. For result as "NOT DETECTED":

- 1) "Not Detected" result indicates absence of SARS-CoV-2 in the given specimen. However, it does not rule out the infection completely and should not be used as the sole basis for making decisions related to treatment and other patient management decisions.
- 2) "Not detected" result may be seen due to -
 - a. RT PCR done on Nasopharyngeal swab having 44% false negativity.
 - b. Test done too early or too late where the virus load is below detection limit.
 - c. Improperly collected and stored specimen.
 - d. Viral mutations
- 3) If a subsequent test is tested positive (detected), it may indicate an infection acquired subsequently or increase in viral load to detectable level after the first test.

NABL Accredited



Certificate No. : MC-2834



Manish Karekar

Dr. Manish Karekar
MD (Pathology) Chief of Lab Services

Page 1 of 2

This is computer generated medical diagnostics report that has been validated by an Authorized Medical Practitioner/Doctor. The report does not need physical signature. Results relate only to the sample as received. Refer to conditions of reporting overleaf.
*Test not under NABL Scope ** Referred Test

INNER HEALTH REVEALED



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Disclaimers:

1. RNA viruses like SARS-CoV-2 (COVID 19) have a lot of genetic variability and it's possible that certain virus detection kits test cannot detect some strains of the viruses. Although efforts were made by manufacturers of the diagnostic kits to design the test assays that target the parts of viral genome which are shared by all the different circulating viral strains, there still might be some mismatch between the primers and the probes used in the test and the target regions within the viruses.
2. Sensitivity of this test results depends upon the quality of the sample submitted for testing, stage of infection, type of the specimen collected for testing, medical history and clinical presentation.
3. All approved kits being used also may have different positive and negative predictive values leading to mismatch of results.
4. A careful consideration to combination of epidemiological factors, stage of infection, clinical history, examination, other relevant investigation findings and treatment history should be done when interpreting test results.
5. Current knowledge about novel coronaviruses is evolving and more studies may be required for further evaluation and review of facts indicated in this report.

Patient Instructions:

- Kindly consult referring Physician/ Authorized Govt. hospital for appropriate follow up.
- Details of all the positive patients will be communicated to Epidemiology Cell whom you are requested to support.
- "Detected" status needs to be notified to the appropriate authorities as per the existing rules/regulations, while we shall also be doing the same

Clinical Background:

COVID-19 is a new disease, caused by a novel (or new) coronavirus SARS-CoV-2. Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed COVID-19 cases. Symptoms like Fever, Cough, and Shortness of breath may appear 2-14 days after exposure. The virus is thought to spread mainly from person-to-person, between people who are in close contact and through respiratory droplets. It can also spread from contact with infected surfaces or objects.

References:

1. Tao Ai et al. Correlation of Chest CT and RT-PCR Testing in Coronavirus Disease 2019 (COVID-19) in China: A Report of 1014 Cases
2. Yang et al. Evaluating the accuracy of different respiratory specimens in the laboratory diagnosis and monitoring the viral shedding of 2019-nCoV infections.

Abbreviations

ICMR : Indian Council of Medical Research

-- End of Report --

NABL Accredited



Certificate No. : MC-2034



[Signature]

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PID NO: P1162000022572
Age: 30.0 Year(s) Sex: Male



Reference:

Sample Collected At:
Hadapsar centre home visit
Construction house, ground floor, 796/189
-b, bhandarkar institute road, pune
411004

VID: 116201570000647

Registered On:
11/08/2020 11:21 AM
Collected On:
11/08/2020 11:19AM
Reported On:
11/08/2020 06:52 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
ANTI-SARS-COV-2* (Serum,ECLIA)	Reactive(46.86)	cutoff index	Non Reactive: < 1.0 Reactive: >= 1.0

Introduction:

SARS-CoV-2 is an enveloped, single-stranded RNA virus of the family Coronaviridae, genus Betacoronaviruses. SARS-CoV-2 is transmitted person-to-person primarily via respiratory droplets, but also indirect transmission through contaminated surfaces is possible. SARS-CoV-2 can be isolated from respiratory samples obtained via naso/oropharyngeal swabs or from sputum. The virus accesses host cells via the angiotensin-converting enzyme 2 (ACE2), which is the most abundant in the lungs. The incubation period for COVID-19 is thought to range from 2-14 days following exposure, with most cases showing symptoms approximately 4-5 days after exposure. Definite COVID-19 diagnosis entails SARS-CoV-2 detection by RT PCR method.

Test description:

1. Antibody to SARS-CoV-2 is an immunoassay test for qualitative detection of antibodies (including IgG) to Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2).
2. Seroconversion is observed after a median of 10-13 days after symptom onset for IgM and 12-14 days for IgG and last for several months. Levels and chronological order of IgM and IgG antibody appearance are highly variable supporting detection of both antibodies simultaneously.
3. Therefore, the IgG test is not useful for detecting acute infection or diagnostic purpose.
4. The Elecsys ECLIA Anti-SARS-CoV-2 assay uses a recombinant protein representing the nucleocapsid (N) antigen for the determination of specific, preferential detection of late/mature antibodies against SARS-CoV-2 and has high specificity

Interpretation:

1. Reactive results means Positive for anti-SARS-CoV-2 antibodies and possibility of seroconversion due to past exposure or presumed immunity.
2. Non-Reactive results Negative for anti-SARS-CoV-2 antibodies and possibility of no exposure to virus. Negative test result does not completely rule out the possibility of an infection with SARS-CoV-2. Serum or plasma samples from the very early (pre-seroconversion) phase can yield negative findings. Therefore, this test cannot be used to diagnose an acute infection.

-- End of Report --

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Signature

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*Test not under NABL Scope. ** Referred Test

INNER HEALTH REVEALED

Medical Laboratory Report



S NO
66 SATAVNAGAR HANDEWADI ROAD
HADAPSAR PUNE, PUNE
Tel No : 9503852006
PIN No: 411028
PID NO: P1162000022572
Age: 30.0 Year(s) Sex: Male



Reference:

Sample Collected At:
Hadapsar centre home visit
Construction house, ground floor, 796/189
-b, bhandarkar institute road, pune
411004

VID: 116201570000647

Registered On:
11/08/2020 11:21 AM
Collected On:
11/08/2020 11:19AM
Reported On:
11/08/2020 06:52 PM

Investigation	Observed Value	Unit	Biological Reference Interval
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Test Description:

- IgG Antibody to SARS-CoV-2 is an immunoassay test for qualitative detection of IgG against Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2), that causes COVID 19.
- The assay is an automated, two-step immunoassay that uses a recombinant protein representing the nucleocapsid (N) antigen for the determination of specific, preferential detection of late/mature antibodies against SARS-CoV-2 and has high specificity.

Test Indications:

- IgG antibodies are produced from day 5 to 7 of the infection and levels peaks around 10 to 14 days post infection and last for several months.
- Levels of IgG antibody appearance are highly variable.
- As per ICMR detection of IgG antibodies for SARS-CoV-2 may be useful in the following situations:
 - Serosurveys to understand the proportion of population exposed to infection with SARS-CoV-2 including asymptomatic individuals.
 - Survey in high risk or vulnerable populations (health care workers, frontline workers, immunocompromised individuals, individuals in containment zones etc) to know how has been infected in the past and has now recovered.
- At this time, it is unknown for how long antibodies persist following infection and if the presence of antibodies confers protective immunity.

Test Limitations:

- The IgG antibody test is not useful for detecting acute infection or for the diagnosis of infections with SARS CoV-2
- Immunocompromised patients who have COVID-19 may have a delayed antibody response and produce levels of antibody which may not be detected as positive by the assay.
 - Testing with a molecular diagnostic method should be considered to evaluate for active infection in these individuals.
- The sensitivity of SARS-CoV-2 IgG early after infection is unknown.
- Negative results do not preclude acute SARS-CoV-2 infection.
- False positive results for SARS-CoV-2 IgG assay may occur due to cross-reactivity from pre-existing antibodies or other possible causes.
- This assay is for in vitro diagnostic use under FDA Emergency Use Authorization only.

Disclaimers:

- Results should be used in conjunction with other data; e.g., symptoms, results of other tests, and clinical impressions.
- Results from antibody testing should not be used as the sole basis to diagnose or exclude SARS-CoV-2 infection or to inform infection status.
- False positive results for SARS-CoV-2 IgG assay may occur due to cross-reactivity from pre-existing antibodies or other possible causes.

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Page 2 of 3

Signature

Dr. Shubhangi Sasturkar
MBBS DCP Pathology

INNER HEALTH REVEALED

Medical Laboratory Report



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Investigation

Anti-SARS-CoV-2 IgG*
(Serum, CMIA)

Observed Value

Positive(5.37)

Unit

S/C

Biological Reference Interval

Negative: < 1.4
Positive: > 1.4

Interpretation guidelines:

Total Antibody (ECLIA)	IgG Antibody (CMIA)	Interpretation
Positive (Reactive)	Positive (Reactive)	<ul style="list-style-type: none"> Exposure to Virus confirmed Possibility of seroconversion or recovery due to past exposure Presumed immunity
Positive (Reactive)	Negative (Nonreactive)	<ul style="list-style-type: none"> Exposure to Virus confirmed Possibility of IgM antibody presence. Suggested to do RT PCR or antigen test to rule out acute infective stage
Negative (Nonreactive)	Negative (Nonreactive)	<ul style="list-style-type: none"> Possibility of no exposure to SARS-CoV-2 virus Negative test result does not completely rule out the possibility of an infection with SARS-CoV-2. Serum or plasma samples from the very early (pre-seroconversion) phase can yield negative findings.

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Signature

Dr. Shubhangi Sasturkar
MBBS, DGP-Pathology

INNER HEALTH REVEALED

Detection of development of antibodies against Covid 19 virus in near past exposure after intake of Madhav Rasayan

Conclusion:

This case study will be helpful in understanding of mode of action of Madhav Rasayan vati, etiology of Covid 19 according to ayurveda, symptoms of santipatik jwar mentioned in ayurvedic samhitas and their correlation with currently symptoms of Covid 19 .It also helpful in treatment on large population after successful clinical trials of Madhav Rasayan in near future.

References:

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