



REVIEW ARTICLE

PANCHATIKTHA KWATHA CHURNAM - AN AYURVEDIC MEDICINE

**^{1,2,*}Karthikeyan Nagarajan, ^{2,3}Uma Kullapan Shanmugham, ^{2,3}Kabilan Natarajan,
³Balasubramanian Thiagarajan and ³Geethalakshmi Sekkizhar**

¹Fellowship in Standardization of ISM Drugs

²Department of Siddha

³Tamilnadu Dr.MGR Medical University

ARTICLE INFO

Article History:

Received 10th July, 2017

Received in revised form

12th August, 2017

Accepted 19th September, 2017

Published online 31st October, 2017

Key words:

Ayurveda, *Panchatiktha Kwatha Churnam*, Fever, Skin diseases.

ABSTRACT

Fever is known both as a symptom and a disease. Many were affected by this without knowing its cause. Younger population to older is get affected by fever. In Ayurvedic system Fever can be correlated with jvara. The Jvara has many types caused by different doshas say Vata, Pitta and Kapha. "Panchatiktha Kwatha Churna" (PTKC) which is mentioned in the Hospital pharmacopeia of Arignar Anna Hospital of Indian Medicine is one of the drug indicated especially for this disease. This drug is also useful in treating skin disorders too. The aim of this paper is to explore the literary evidences of its use for both in Fever and Skin disorders in Ayurvedic system. More than 100 scientific papers were reviewed to justify the activity of the ingredients present in the PTKC. PTKC is made up of five ingredients. Further study is to be done to explore its activity scientifically and thereby standardizing the medicine.

Copyright©2017, Karthikeyan Nagarajan et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Karthikeyan Nagarajan, Uma Kullapan Shanmugham, Kabilan Natarajan, Balasubramanian Thiagarajan and Geethalakshmi Sekkizhar, 2017. "Panchatiktha kwatha churnam - An Ayurvedic medicine", *International Journal of Current Research*, 9, (10), 59686-59693.

INTRODUCTION

Herbal drugs constitute a major part in all traditional systems of medicines. Herbal medicine is a triumph of popular therapeutic diversity. Plants above all other agents have been used for medicine from time immemorial because they have fitted the immediate personal need, easily accessible and inexpensive. Herbal medicines have a strong traditional or conceptual base and the potential to be useful as drugs in terms of safety and effectiveness leads for treating different (Saurabh Srivastav et al., 2011). Ayurveda is a complete or holistic system that integrates the mind, body and spirit. Its concept is about health and disease; promote the use of herbal compounds, special diets, and other unique health practices. Ayurvedic system of medicine is gaining its importance nowadays in treating many diseases and thereby helping the human population worldwide. *Panchatiktha kwatha churna* (PTKC) is such a poly herbal Ayurvedic medicine formulated from various medicinal plants such as stem of Guduchi (*Tinospora cordifolia*), bark of Nimba (*Azadirachta indica*), Kantakari - whole plant (*Solanum xanthocarpum*), Vasa (*Adathoda vasica*) and leaves of Bhunimba (*Andrographis paniculata*). It is prepared based on the formula mentioned in the Hospital Pharmacopeia of

Arignar Anna Hospital of Indian Medicine, Arumbakkam, Chennai, India for more than three decades and used in their Ayurvedic out Patient ward in treating for intermittent fever and skin diseases. The aim of this article is to analyse the action of each ingredients and their importance in treating the diseases mentioned above.

MATERIALS AND METHODS

Pancha Tiktha kwatha churna is collected from Ayurveda out Patient Department (OPD), Arignar Anna Hospital for Indian Medicine, Arumbakkam, Chennai, Tamilnadu, India. As per Hospital pharmacopeia *Pancha Tiktha Kwatha Churna* is prepared with equal quantities of all the five ingredients.

Guduchi

Botanical Description

Tinospora cordifolia is a large, glabrous, deciduous, climbing shrub. The stem structure is fibrous and the transverse section exhibits a yellowish wood with radially arranged wedge shaped wood bundles, containing large vessels, separated by narrow medullary rays. The bark is creamy white to grey, deeply left spirally and stem contains rosette like lenticels. The leaves are membranous and cordate in shape. Flowers are in

*Corresponding author: Karthikeyan Nagarajan
Fellowship in Standardization of ISM Drugs

Table 1. Composition of PTKC

S.No.	Name of the Drug	Tamil name	Botanical Name	Part Used	Quantity
1	Guduchi	Seenthil	<i>Tinospora cordifolia</i>	Stem	1 part
2	Nimba	Vembu	<i>Azadirachta indica</i>	Bark	1 part
3	Kantakari	Kandankathiri	<i>Solanum xanthocarpum</i>	Whole plant	1 part
4	Vasa	Adathodai	<i>Adathoda vasica</i>	Leaf	1 part
5	Bhunimba	Nilavembu	<i>Andrographis panniculata</i>	Leaf	1 part

*Tinospora cordifolia**Azadirachta indica**Solanum xanthocarpum**Adathoda vasica**Andrographis panniculata*

Fig. 1. Ingredients of PTKC

axillary position, 2-9 cm long raceme on leaflet branches, unisexual, small and yellow in color. Male flowers are clustered and female are usually solitary. The seeds are curved. Fruits are fleshy and single seeded. Flowers grow during the summer and fruits during the winter.

Taxonomic Description

The plant *Tinospora cordifolia* comes under the class Magnoliopsida, orders Ranunculales and belongs to the Menispermaceae family. The species is widely distributed in India, extending from the Himalayas down to the southern part of peninsular India. It is also found in neighboring countries like Bangladesh, Pakistan, and Srilanka. The plant is also reported from South East Asian countries such as Malaysia, Indonesia and Thailand etc. (Abhimanyu Sharma *et al.*, 2010)

Chemical Composition

A variety of constituents have been isolated from different parts of *Tinospora cordifolia*. They belong to different classes such as alkaloids, diterpenoid lactones, steroids, glycosides aliphatic compounds, polysaccharides. Some constituents have been isolated from plant mainly they are tinosporone,

tinosporic acid, cordifolisides A to E, syringen, berberine, giloin, gilenin, crude giloininand, arabinogalactan polysaccharide, picrotene, bergenin, gilosterol, tinosporol, tinosporidine, sitosterol, cordifol, heptacosanol, octacosonal, tinosporide, columbin, chasmantine, palmarin, palmatosides C and F, amritosides, cordioside, tinosponone, ecdysterone, makisterone A, hydroxyecdysone, magnoflorine, tembetarine, syringine, glucan polysaccharide, syringine apiosylglycoside, isocolumbin, palmatine, tetrahydropalmatine, jatrorrhizine respectively (Abhimanyu Sharma *et al.*, 2010).

Medicinal Property

The plant possesses anti-oxidant, anti-hyperglycemic, anti-neoplastic, anti- stress, anti- dote, anti- spasmodic, anti-pyretic, anti allergic, anti- leprotic anti- inflammatory, antihyperlipidaemia, Immunomodulatory properties. Various parts of the plant contain immense medicinal properties (Abhimanyu Sharma *et al.*, 2010).

Immunomodulator Activity

Immunomodulatory activity of different fractions and extracts of stem of *Tinospora cordifolia* were evaluated using the

polymorphonuclear neutrophil (PMN) phagocytic function studies. The present study substantiates the same property of *Tinospora cordifolia* through an in vitro slide method of phagocytosis. The method is simple to perform and gives an in situ view of the internal mechanism of phagocytosis. The plant extract samples from external vendors and extracts prepared in-house were analyzed for the said property. This property of the plant can be explored to use in many disease conditions as an adjuvant therapy. Like many infectious agents are becoming resistant to currently used antibiotics, in such cases this plant based formulation can be used to enhance the immune response of the patient and bring the cells at the site of infection and increase its killing capacity. In other disease conditions like recurrent UTI infections, this immunostimulatory activity of the *T. cordifolia* will be useful to flush off the adhering infectious organisms from the mucosal surfaces by enhancing the phagocytosing activity of the cells of the immune system (Salkar *et al.*, 2014).

Nimba

Botanical description

Neem (*Azadirachta indica*) is a member of the Meliaceae family and its role as health-promoting effect is attributed because it is rich source of antioxidant. It has been widely used in Chinese, Ayurvedic, and Unani medicines worldwide especially in Indian Subcontinent in the treatment and prevention of various diseases. Earlier finding confirmed that Neem and its constituents play role in the scavenging of free radical generation and prevention of disease pathogenesis. The studies based on animal model established that Neem and its chief constituents play pivotal role in anticancer management through the modulation of various molecular pathways including p53, pTEN, NF- κ B, PI3K/Akt, Bcl-2, and VEGF. It is considered as safe medicinal plants and modulates the numerous biological processes without any adverse effect (Mohammad A. Alzohairy, 2016).

Biologically Active Compounds

Azadirachta indica has compound of various constituents that play role in disease management. Although more than 300 natural products have been isolated from different sections of this tree, with new compounds added to the list every year till now (Sharma *et al.*, 2015), but a few of them have been studied for biological activity (Biswas *et al.*, 2002). Among them some compounds are well-known for their beneficial bioactive actions like anti-inflammatory, antifungal, antibacterial etc. as shown in Table 2.

Table 2. Some bioactive compounds from Neem

Neem compound	Source	Biological activity
Gallic acid, epicatechin and catechin	Bark	Anti-inflammatory, Immunomodulatory
Polysaccharides Gla , Glb	Bark	Anti-tumour

Antibacterial Properties

Werner Fabry *et al.* (1998) in their study reported that extracts of stem bark and leaves of *Azadirachta indica* showed the minimum inhibitory concentration (Staphylococcus, Enterococcus, Pseudomonas, Escherichia, Klebsiella, Salmonella, and Mycobacterium). Methanolic and acetone

extracts of *A. indica* were more effective against the bacteria compared to that of aqueous extract (Singh *et al.*, 2016). Studies at molecular level demonstrate that *A. indica* contains chemical constituents of alkaloids, terpenoids tannins and flavonoids. These chemicals might show the antibacterial activity having the ability to make a complex with the bacterial cell walls. Inhibitory activity towards DNA topoisomerase enzyme II by azadirachtin, a bioactive metabolite of Neem might also involve in the antibacterial potential. Moreover, the Gram positive bacterial strains were found more sensitive than the Gram-negative ones (Sinaga *et al.*, 2016).

Determination of Analgesic Activity

The crude extracts of *Azadirachta indica* showed significant analgesic action compared to the reference drug indomethacin. Pain sensation in acetic acid induced writhing method is elicited by triggering localized inflammatory response resulting release of free arachidonic acid from tissue phospholipid via cyclooxygenase (COX), and prostaglandin biosynthesis (Dinda *et al.*, 2013).

Determination of Preliminary phytochemical analysis

The preliminary phytochemical analysis showed that the hydro-alcoholic extract of *Azadirachta indica* leaf revealed the presence of alkaloids, triterpenoids, tannins and flavonoids. The flavonoids are known to possess Anti-inflammatory activity by inhibiting the cyclooxygenase responsible for synthesis of inflammatory prostaglandins (Dinda *et al.*, 2013).

Carrageenan induced rat paw oedema

The methanol extract of *Azadirachta indica* was investigated for its anti-inflammatory and analgesic activities in animal models. The hydro-alcoholic extract, ethyl acetate and n-butanol fractions at 100 mg/kg body weight reduced significantly the formation of oedema induced by carrageenan. The results were also comparable to those of indomethacin, the reference drug used in this study (Perianayagam *et al.*, 2006).

Kantakari

Solanum xanthocarpum is commonly known as the Indian night shade or Yellow berried night shade (English). It is a prickly diffuse, bright green perennial herb, woody at the base, 2–3 m height, found throughout India, mostly in dry places as a weed along roadsides and waste lands. *Solanum xanthocarpum* is known by different name in various different languages in India viz, Kantkari (Sanskrit), Kateri (Hindi), Bhoringni (Gujarati), Kantakkattiri (Tamil), Kantkariccunta (Malayalam), Vakudu (Telugu), Nelagulle (Kannad). In ancients Ayurveda, plant is described as pungent, bitter, digestive, alternative astringent. Stems, flowers, fruits are bitter, carminative. Root decoction used as febrifuge, effective diuretic and expectorant. Charaka and Sushruta used the extract of entire plant and fruits in internal prescription for bronchial asthma, tympanitis, misperistalsis, piles and dysuria and for rejuvenation (Sachin Parmar *et al.*, 2010). *Solanum xanthocarpum* is an important source of many pharmacologically and medicinally important chemicals, particularly steroid hormone solasodine and other chemicals like solasonine, campesterol, campeferol, diosgenin and various useful alkaloids. *Solanum xanthocarpum* safe for human use and is regarded as a valuable plant in both Ayurvedic and modern drug development areas for its versatile

medicinal uses. The plant is widely studied for the various pharmacological activities like antiasthmatic, hepatoprotective, cardiovascular, hypoglycemic and mosquito repellent properties (Reddy and Rajasekhar Reddy, 2014).

Chemical Constituents

Solanum xanthocarpum plant contains alkaloids, sterols, saponins, flavonoids and their glycosides and also carbohydrates, fatty acids, amino acids etc (Ghani, 1998).

Hepatoprotective activity

In Chandana *et al.* investigated *Solanum xanthocarpum* extracts for hepatoprotective activity using CCl₄ induced hepatotoxicity in rats. Rats administered with CCl₄ but treated with *Solanum xanthocarpum* extracts showed significant increased in the level of enzyme which indicates the antioxidant activity of *Solanum xanthocarpum*. Jigrine is a polypharmaceutical herbal formulation containing aqueous extracts of 14 medicinal plants including *Solanum xanthocarpum* and used for liver ailments (Chandana *et al.*, 2011). Najmi *et al.* investigated the DPPH-free radical scavenging activity, hepatoprotective and antioxidant activity of Jigrine against galactosamine induced hepatotoxicity in rats (Najmi *et al.*, 2005).

Antiasthmatic activity

A pilot study on the clinical efficacy of *Solanum xanthocarpum* and *Solanum trilobatum* in bronchial asthma proves the significant use of herbs in the treatment of asthma (Mohan *et al.*, 2007). Major literature data supports use of whole plants. Gautam *et al* 2008 evaluated the therapeutic effect of ethanolic extract of *Solanum xanthocarpum* i.e. asthma relieving or antihistaminic, antiallergic property. Gautam *et al.* 2008 studied effects of *Solanum xanthocarpum* extract on some of the parameters like smooth muscle relaxation, and antagonism of asthma mediators such as histamine, eosinophils and protection against mast cell degranulation which seemed to be prominent in pathophysiology of asthma (Vadnere *et al.*, 2008).

Anti-inflammation activity

Stigmasterol, carpesterol and diosgenin showed Antiinflammation Effect (Gabay *et al.*, 2010; Bhattacharya *et al.*, 1980). Lupeol in *Solanum xanthocarpum* also acted as multi-target agent with immense anti-inflammatory potential, targeting key molecular pathways. Lupeol at its effective therapeutic doses exhibited no toxicity to normal cells and tissues. Hence, it may serve as atherapeutic and chemopreventive agent for treatment of inflammation (Saleem and Lupeol, 2009).

Vasa

Vasa, botanically identified as a *Adhatoda vasica* Nees., belonging to Acanthaceae family is important Ayurvedic medicinal herb. It is an evergreen, gregarious, stiff, perennial shrub, 1.2-6.0 m in height, distributed throughout India, up to an altitude of 1,300m². Leaves of *Adhatoda vasica* are elliptic lanceolate or ovate-lanceolate, entire, 5-30 cm long, hairy, light green above, dark below, leathery; flowers are large, white with red- or yellow-barred throats, in spikes with large bracts; capsules are clavate, longitudinally channeled,

1.9-2.2 cm× 0.8 cm and seeds are globular (Anonymous: The Wealth of India (Raw materials), 2005). Its leaves are extensively used for treating cold, cough, whooping cough and chronic bronchitis and asthma as sedative expectorant, antispasmodic and anti-inflammatory drug.

Properties and Actions according To Ayurveda

Rasa (taste): Tikta (Bitter), Kashaya (Astringent) Guana (quality): Laghu (light) Virya (Potency): Sheeta (cold) Vipaka (post digestive effect): Katu / Laghu Karma: Hridya, Kaphapittahara, Raktasangrahika, Kasaghna (Anonymous: the Ayurvedic Pharmacopeia of India, Part-1, 2004).

Major chemical constituents

The Leaves have been found to be a rich source of alkaloids of which vasicine and vasicinone are bioactive. A non-nitrogenous neutral principle, vasakin, vasicinone, two new quinazoline alkaloids, one of which was named as adhvasinone and two new pyrroloquinazoline alkaloids, desmethoxyaniflorine and 7-methoxyvasicinone were identified from the ethanolic extract of the leaves (Anonymous: Review on Indian medicinal plants, 2004).

Experimental Pharmacology

Expectorant - The petroleum ether extract of the leaves 50mg/kg bw i.p. and i.v. (Inamdar *et al.*, 1960)

Bronchodilator - Vasicinone isolated from the leaves had a bronchodilator action (Amin and Mehta, 1959). Vasicine showed bronchodilator activity in both in vivo and in vitro experimental studies (Gupta *et al.*, 1977).

Antitussive - The plant extract was evaluated in experimental models for antitussive activity (Dhuley, 1999).

Anti tubercular activity - It was found that bromhexine and ambroxol, the semi-synthetic derivatives of vasicine have activity against *Mycobacterium tuberculosis* in vitro (Grange and Snell, 1996).

Platelet activity - vasicine hydrochloride –alkaloid from leaves (Atal *et al.*, 1982).

Enzyme activity - The decoction of the leaves of the plant activated the trypsin enzyme (Bhargav *et al.*, 1988).

Anti-inflammatory activity - 50% ethanolic extract of the plant (excluding root) (Vijaya and Vasudevan, 1994).

Antimicrobial activity - The alcoholic extracts of the leaves and root of Vasa showed antibacterial activity against *Staphylococcus aureus* and *Escherichia coli*. The water extract of the leaves also showed activity against *Staphylococcus aureus* (Bhakuni *et al.*, 1990).

Antiviral activity - The crude extract of the leaf, the bark and the plant (Kalpesh Panara *et al.*, 2014).

Anthelmintic activity - The leaves (oil) as well as the alkaloids, vasicine and vasicinone were screened against *Ascaris lumbricoides* neuromuscular preparations (Singh, 1972).

Hepatoprotective activity - Biologically active phytoconstituents such as Alkaloids-Quinazoline, Flavonoids, Tannins, Vasicinone, Essential oil which are present in the various extracts of *Adhatoda vasica* are accountable for the significant hepatoprotective activity (Bhaduri *et al.*, 1985).

Pharmacokinetic Properties

Vasicine - Accumulation of the drug in other smooth and skeletal muscles was noticed 90 min after administration. There was no appreciable accumulation of the drug in the liver (Zutshi *et al.*, 1980). The *in vivo* metabolism of vasicine on oral administration in rats revealed, that the process of metabolism was very fast and first pass effect was appreciably pronounced and this might be the cause of loss of efficacy of vasicine as an abortifacient when administered orally (Sharma *et al.*, 1983). Ram *et al.* (2007) determined the site of absorption of vasicine in the intestine. They used everted sac method to assess the absorption. Duodenum was reported to have the maximum capacity to absorb isolated vasicine from the methanolic and ethanolic extracts of Vasaka (Ram and Shirwaikar, 2007). Pharmacokinetics studies of vasicine were conducted. The peak plasma concentration was detected in the plasma (Amla *et al.*, 1987).

Bhunimba

Andrographis paniculata (Burm.f.) Wall. ex Nees., (Family Acanthaceae) (English name-King of Bitters, Tamil name-Nilavempu) is an annual herbaceous plant and is extensively cultivated in Southern Asia, China and some parts of Europe. In traditional medicine, *A. paniculata* is widely used to get rid of body heat, dispel toxins from the body; prevent common cold, upper respiratory tract infections including sinusitis and fever and as an antidote against poisons of snakes and insects. The plant has been reported to exhibit various mode of biological activities *in vivo* as well as *in vitro* viz., antibacterial, antiviral, anti-inflammatory, anti HIV (Human immunodeficiency virus), immunomodulating/immunostimulatory and anticancer. The plant showed potential therapeutic action in curing liver disorders, common cough and colds in human. The characteristic secondary metabolites encountered in this plant have considerably enhanced its importance in the arena of medicinal plants (Joseph Joselin and Solomon Jeeva, 2014).

Botanical description

Andrographis paniculata is an annual, branched, herbaceous plant erecting to a height of 30-110 cm in moist shady places. The stem is acutely quadrangular; much branched and can be broken easily due to its fragile texture. Leaves are simple, opposite, glabrous, lanceolate, 2-12 cm long, 1-3 cm wide with acute entire margin. Inflorescence is terminal and axillary in panicle, 10-30 mm long with small bract and short pedicel. The flowers possess calyx with 5 sepals which are small and linear. Corolla tubes are narrow, about 6 mm long, bilabiate, upper lip oblong, white with a yellowish top, whereas the lower tips are broadly cuneate, 3-lobed, white with violet markings. Stamens 2, inserted in the throat, anther basally bearded. Ovary superior, 2-celled with exerted style. Capsule of the herb is erect, linear-oblong, 1-2 cm long, compressed, longitudinally furrowed on broad faces with thin glandular hairs. Seeds are very small (Niranjan *et al.*, 2010; Zhang, 2004). In Traditional Chinese Medicine, *Andrographis paniculata* is a bitter and 'cold

property' herb. It is used in the treatment of 'hot' conditions such as acute infections and fever, including throat infection, pneumonia, tonsillitis, dysentery, gastroenteritis and pyelonephritis (The promotion and development of traditional medicine: report of a WHO meeting, 1978; Deng *et al.*, 1982; Bensky and Gamble, 1993).

Pharmacognosy

The presence of important phytochemicals in *A. paniculata* make the plant useful for treating different ailments and have a potential of providing useful drugs of human use. The quantitative determination of pharmacognostic parameters will help for setting standards for crude drugs (Sharma *et al.*, 2012; Sivananthan and Elamaran, 2013).

Antibacterial activity

The development of bacterial resistance to currently available antibiotics has made it necessary to search for new antibacterial agents. New sources, especially natural products from plants, are being investigated because medicinal plants have been widely used for treatment of many types of acute and chronic diseases and many plants with antimicrobial activity have been reported (Dharmadasa *et al.*, 2013). Within the recent years, infections have increased to a great extent and antibiotics resistance effects become an ever-increasing therapeutic problem (Cowan, 1999). Natural products of higher plants may possess a new source of antimicrobial agents with possibly novel mechanisms of action (Mahesh and Satish, 2008; Ahmad and Aqil, 2007). They are effective in the treatment of infectious diseases while simultaneously mitigating many of the side effects that are often associated with synthetic antimicrobials (Barbour *et al.*, 2004). Abubacker and Vasantha (Abubacker and Vasantha, 2010) studied the antibacterial effect of ethanolic leaf extract of *A. paniculata* against *Escherichia coli*; *Klebsiella pneumonia*, *Proteus vulgaris* and *Streptococcus pneumonia* by disc diffusion method were identified. The results revealed that the ethanolic leaf extract and andrographolide compound isolated from the leaves are potent in inhibiting these bacteria and the work highlights that the inhibitory effect is on par with standard antibiotics.

Effect on inflammation and fever

Andrographis paniculata is used as a folk medicine for reducing inflammation. Three ingredients deoxyandrographolide, Andrographolide and neoandrographolide are effective in reducing inflammation (Dutta and Sukul, 1982). In other studies it was found that *Andrographis paniculata* extracted with alcohol (Sawasdumongkol *et al.*, 1990; Chantasutra and Limpapanichkul, 1989), *A. paniculata* extracted with water (Sawasdumongkol *et al.*, 1990) and *A. paniculata* extracted with chloroform (Chantasutra and Limpapanichkul, 1989) reduced inflammation. Madav *et al* found that Andrographolide significantly inhibited carrageenin-, kaolin-and nystatin18 induced paw oedema (different models of inflammation) in rats (Madav *et al.*, 1996). In China, it has been reported that Andrographolide has some beneficial effects as an antiinflammatory agent (Radhika *et al.*, 2009; Shen *et al.*, 2000), whereas Deng *et al.* who studied on rats and mice concluded that four lactones from *A. paniculata* have anti-inflammatory and anti-pyretic effects (The promotion and development of traditional medicine: report of a WHO meeting, 1978).

Anti-inflammatory activity

Shen *et al.* (Prakash *et al.*, 2011) have established that the anti-inflammatory effect of Andrographolide could be explained by its ability to inhibit neutrophil adhesion/transmigration through suppression of Mac-1 upregulation. Andrographolide may be useful for the improvement of inflammatory disorders by limiting the early phases of neutrophil infiltration. Iruretagoyena *et al.* showed that andrographolide is able to down modulate both humoral and cellular adaptive immune responses. This molecule when used in vitro, was able to interfere with T cell proliferation and cytokine release in response to allogenic stimulation. Treatment with andrographolide was able to significantly reduce EAE symptoms in mice by inhibiting T cell and antibody responses directed to myelin antigens. Their data suggest that andrographolide is able to efficiently block T cell activation in vitro, as well as in vivo, a feature that could be useful for interfering with detrimental T cell responses (Shen *et al.*, 2002).

Anti Cancer Activity

Tan *et al.* utilized the well-characterized epidermal growth factor receptor (EGFR) and transferrin receptor (TfR) expressed in epidermoid carcinoma (A-431) cells as a model to study the effect of andrographolide on receptor trafficking. Andrographolide treatment inhibited cell growth, down-regulated EGFRs on the cell surface and affected the degradation of EGFRs and TfRs. This study sheds light on how andrographolide may affect receptor trafficking by inhibiting receptor movement from the late endosomes to lysosomes. The down-regulation of EGFR from the cell surface also indicates a new mechanism by which andrographolide may induce cancer cell death (Wang *et al.*, 2007). The results demonstrate for the first time that 14-DAG desensitizes hepatocytes to TNF-a-mediated apoptosis through the release of TNFRSF1A. This can be used as a strategy against cytokine-mediated hepatocyte apoptosis in liver dysfunctions (Tan *et al.*, 2010).

Antiviral and Antifungal effects

Andrographolide, neoandrographolide and 14-deoxy-11,12-didehydroandrographolide are reported to be viricidal against herpes simplex virus 1 (HSV-1) without having any significant cytotoxicity at viricidal concentrations (Dua *et al.*, 2009). Fungal infections are one of the major health problems in tropical countries. Fungi or dermatophytes invade in to the keratinophilic region of the body and cause dermatophytosis. Radha *et al.* examined the petroleum ether, acetone, chloroform and methanolic extracts of *Andrographis paniculata* leaves and stems, in order to evaluate the antifungal potential of *Candida albicans* and *Aspergillus flavus* (Manjusha *et al.*, 2011). Similar studies were conducted by Bobbarala *et al.* against *Acremonium strictum*, *Alternaria alternata*, *Aspergillus flavus*, *Bipolaris bicolor*, *Cladosporium herbarum*, *Curvularia lunata*, *Fusarium oxysporum*, *Penicillium expansum*, *Rhizoctonia solani*, *Tiarosporella phaseolina* and *Ustilago maydis* using hexane, chloroform and methanolic extracts and the results revealed that the methanolic extract showed activity against *Alternaria alternate* whereas, the chloroform extracts showed greater activity against *Fusarium oxysporum* (Aniel Kumar *et al.*, 2010).

Immunomodulatory activity

Intra-gastric administration of ethanol extracts of the stems and leaves, andrographolides to mice was reported to stimulate

antibody production and the delayed-type hypersensitivity response to sheep red blood cells (Puri *et al.*, 1993). The extract and purified andrographolide was also reported to stimulate an innate immune response in mice, measured by macrophage migration index, phagocytosis of [¹⁴C] leucinelabelled *E.coli*, and proliferation of splenic lymphocytes stimulated with *Andrographis paniculata* extract (Panossian *et al.*, 2002). However, the mechanism of the immunostimulation of andrographolide was not investigated. Andrographolide has been reported to have both immuno-stimulant and suppressant activities (Panossian *et al.*, 2002). Rajagopal *et al* and Kumar *et al.* reported the immunostimulatory activity of andrographolide in vitro in PHA stimulated HPBLs (human peripheral blood lymphocytes) by increased proliferation of lymphocytes and production of IL-2 (Maunwongyathi, 1994; Sirisha Mulukuri *et al.*, 2011).

Conclusion

From the vast literature study and experimental results analysis, it can be concluded that the ingredients present in the PTKC is capable of treating intermittent fever either caused by bacteria or virus. Also most of the ingredients of PTKC are having immunomodulatory action hence PTKC can be used in skin diseases too. Though biological activities and toxicological studies have been done for *Guduchi*, *Nimba*, *Kantakari*, *Bhunimba* and *Vasa*, Pharmacological reviews on above mentioned plant will give valuable information which will assist the Ayurveda physician in getting more advanced knowledge about the scientific activities of ingredients of PTKC. Further clinical trials should be carried out to develop the scientific evidence for the uses of PTKC in treating fevers and skin diseases.

Acknowledgement

Author thanks Vice-chancellor, Registrar, Head of the Department, Associate and Assistant Professors, Dept. of Siddha, Tamilnadu Dr.MGR Medical University, Chennai, India for their guidance and Dr.A.Saravanan, Dr. R. Balamurugan, Dr.T.Ashok kumar Assistant Medical Officers, Ayurveda of Arignar Anna hospital of Indian medicine, Arumbakkam, Chennai, Tamilnadu for their Supportive help in this work.

REFERENCES

- [No authors listed] 1978. The promotion and development of traditional medicine: report of a WHO meeting. *World Health Organ Tech Rep Ser.*, 1-41.
- Abhimanyu Sharma, Asmita Gupta, Sakshi Singh Amla Batra, 2010. *Tinospora cordifolia* (Willd.) Hook. F. & Thomson - A plant with immense economic potential. *J. Chem. Pharm. Res.*, 2(5),327-333.
- Abubacker MN, Vasantha S. 2010. Antibacterial activity of ethanolic leaf extracts of *Andrographis paniculata* Nees (Acanthaceae) and its bioactive compound Andrographolide. *Drug invention today* 2.
- Ahmad I, Aqil F. 2007. In vitro efficacy of bioactive extracts of 15 medicinal plants against ESbetaL-producing multidrug-resistant enteric bacteria. *Microbiol Res.*, 162, 264-275.
- Amin AH, Mehta DR. 1959. A bronchodilator alkaloid (vasicinone) from Adhatodavasica nees. *Nature*, 184, 1317.

- Amla V, Bano G, Johri RK, Zutshi U and Atal CK. 1987. Pharmacokinetics of vasicine in healthy Indian volunteers. *Acta Pharmacol Sin*, 8,190-192.
- Aniel Kumar O, Mutyala Naidu L, Raja Rao KG. 2010. In vitro antibacterial activity in the extracts of *Andrographis paniculata* Burm.F. *International Journal of Pharm Tech Research*, 2, 1383-1385.
- Anonymous: Review on Indian medicinal plants, Vol I. 2004. Indian council of medical research, New Delhi, 258.
- Anonymous: the Ayurvedic Pharmacopeia of India, Part-1, Vol- 1. 2004. Dept. of Ayush, Ministry of health & family welfare, New Delhi,173-174.
- Anonymous: The Wealth of India (Raw materials), Vol.I, revised ed. 2005. A, CSIR, New Delhi, 76.
- Atal CK, Sharma ML, Khajuria A and Kaul A. 1982. Thrombopoietic activity of vasicine hydrochloride. *Indian J Exp Biol.*, 20, 704-709.
- Barbour EK, Sharif AM, Sagherian VK, Habre AN, Talhouk RS, et al. 2004. Screening of selected indigenous plants of Lebanon for antimicrobial activity. *J Ethnopharmacol.*, 93, 1-7.
- Bensky D, Gamble A 1993. Chinese herbal medicine: *Materia Medica*. Eastland, Seattle.
- Bhaduri, N., Shri Ram and Patil, B.D. 1985. Evaluation of some plant extracts on protectants against the pulse beetle *Callosobruchus maculatus* (Fabricans) infecting cowpea seed. *J Entomol Res.*, 9, 183-187.
- Bhakuni DS, Goel AK, Jain S, Mehrotra BN and Srimal RC. 1990. Screening of Indian plants for biological activity. Part XIV. *Indian J Exp Biol.*, 2,619-637.
- Bhargav MK, Singh H and Amreshkumar, 1988. Evaluation of *Adhatodavasica* as a wound healing agent in buffaloes-clinical, mechanical and biochemical studies. *Indian Vet J.*, 65, 33- 38.
- Bhattacharya TK, Ghosh MN, Subramanian SS. 1980. A note on anti inflammatory activity of carpesterol. *Fitoterapia*, 51, 265-268.
- Chandana VR, Gupta RK, Talib Hussain, 2011. Hepatoprotective effects of *Solanum xanthocarpum* fruit extract against CCl₄ induced acute liver toxicity in experimental animals. *Asian Pacific Journal of Tropical Biomedicine*, 14(3), 964- 968.
- Chantasutra V, Limpapanichkul S. 1989. Acute anti-inflammatory activity of *Andrographis paniculata* Nees in rats. The eighth conference; Faculty of Pharmacy, Chulalongkorn University (Thai language).
- Cowan MM. 1999. Plant products as antimicrobial agents. *Clin Microbiol Rev.*, 12, 564-582.
- Deng W L, Nie R J, Liu J Y. 1982. Comparison of pharmacological effect of four andrographolidess. *Chinese Pharmaceutical Bulletin*, 17, 195-198.
- Dharmadasa RM, Samarasinghe K, Adhiketty P, Hettiarachchi PL. 2013. Comparative Pharmacognostic Evaluation of *Munronia pinnata* (Wall.) Theob. (Meliaceae) and its substitute *Andrographis paniculata* (Burm.f.) Wall. Ex Nees (Acanthaceae). *WJAR* 1, 77-81.
- Dhuley JN. 1999. Antitussive effect of *Adhatodavasica* extract on mechanical or chemical stimulation induced coughing in animals. *J Ethnopharmacol.*, 67,361-365.
- Dinda, A., D. Das, G. Ghosh, S. Kumar, 2013. Analgesic and Anti-inflammatory Activity of Various Fractions of *Azadirachta indica* Leaf in Experimental Animals, *International Journal of Pharm Tech Research*, 5(2),838-843.
- Dua VK, Verma G, Dash AP. 2009. In vitro antiprotozoal activity of some xanthones isolated from the roots of *Andrographis paniculata*. *Phytother Res.*, 23, 126-128.
- Dutta A, Sukul NC. 1982. Filaricidal properties of a wild herb, *Andrographis paniculata*. *J Helminthol.*, 56, 81-84.
- Gabay O, Sanchez C, Salvat C, Chevy F, Breton M, Nourissat G et al. 2010. A phytosterol with potential anti-ostearthritic properties. *Osteoarthritis Cartilage*, 18,106-116.
- Ghani A. 1998. Medicinal plants of Bangladesh - chemical constituents and uses. Asiatic Society of Bangladesh, Dhaka.
- Grange JM, and Snell NJ. 1996. Activity of bromhexine and ambroxol, semi-synthetic derivatives of vasicine from the Indian shrub *Adhatodavasica*, against *Mycobacterium tuberculosis* in vitro. *J Ethnopharmacol.*, 50(1),49-53.
- Gupta OP, Sharma ML, Ray Ghatak BJ and Atal CK. 1977. Pharmacological investigations of vasicine and vasicinone-the alkaloids of *Adhatodavasica*. *Indian J Med Re.*, 66, 680- 691.
- Inamdar MC, Khorana ML and Rajarama Rao MR. 1960. Pharmacology of *Adhatodavasica*Nees: Part 1- studies on expectorant activity. *J Sci Ind Res.*, 19C,59-60.
- Joseph Joselin and Solomon Jeeva, 2014. *Andrographis paniculata*: A Review of its Traditional Uses, Phytochemistry and Pharmacology, Medicinal and Aromatic plants, 3:4, 1-15.
- Kalpesh Panara , Suman Singh, Krutika Joshi, Praveen Kumar A. and Nishtheswar Karra, 2014. Review on Research Studies Of Vasapatra (Leaf Of *Adhatoda Vasica* Nees.), *International Journal of Pharmacognosy*, 1(3), 168-173.
- Madav S, Tandan SK, Lal J, Tripathi HC. 1996. Anti-inflammatory activity of andrographolide. *Fitoterapia*, 67, 452-458.
- Mahesh B, Satish S. 2008. Antimicrobial activity of some important medicinal plants against plant and human pathogens. *World J Agric Sci.*, 4, 839-843.
- Manjusha G, Rajathi K, Mini Alphonse JK, Meera K. 2011. Antioxidant potential and antimicrobial activity of *Andrographis paniculata* and *Tinospora cordifolia* against pathogenic organisms. *Journal of Pharmacy Research*, 4, 452.
- Maunwongyathi P. 1994. Next step of medicinal plant. Medical Media, Bangkok-noi, Bangkok, 186.
- Mohammad A. Alzohairy, 2016. Therapeutics Role of *Azadirachta indica* (Neem) and Their Active Constituents in Diseases Prevention and Treatment, Evidence based complimentary and alternative medicine, 1-11.
- Mohan L, Sharma P, Srivastava CN. 2007. Comparative efficacy of *Solanum xanthocarpum* extracts alone and in combination with a synthetic pyrethroid, cypermethrin, against malaria vector, *Anopheles Stephensii*. *Southeast Asian Journal of Tropical Medicine and Public Health*, 38(2), 256–260.
- Najmi AK, Pillai KK, Pal SN, Aqil M. 2005. Free radical scavenging and hepatoprotective activity of jigrine against D-GaIN induced hepatopathy in rats. *J Ethnopharmacol*, 97, 521-525.
- Niranjan A, Tewari SK, Lehri A. 2010. Biological activities of Kalmegh (*Andrographis paniculata* Nees) and its active principles-A review. *Ind J Nat Prod Resour.*, 1, 125-135.
- Panossian A, Davtyan T, Gukasyan N, Gukasova G, Mamikonyan G, et al. 2002. Effect of andrographolide and Kan Jang--fixed combination of extract SHA-10 and extract SHE-3-on proliferation of human lymphocytes,

- production of cytokines and immune activation markers in the whole blood cells culture. *Phytomedicine*, 9, 598-605.
- Perianayagam JB, Sharma SK, Pillai KK. 2006. Antiinflammatory activity of *Trichodesma indicum* root extract in experimental animals. *J Ethno pharmacol.*, 104, 410-414.
- Prakash ELS, Kadar Ali SH, Nagireddy Divya, Reeta Vijaya Rani K, Manavalan R. 2011. Evaluation of In-vitro antioxidant activity of leaf extract of *Andrographis paniculata*. *RJPBCS*, 2, 891-895.
- Puri A, Saxena R, Saxena RP, Saxena KC, Srivastava V, et al. 1993. Immunostimulant agents from *Andrographis paniculata*. *J Nat Prod.*, 56, 995- 999.
- Radhika P, Prasad Rajendra Y, Sastry BS, Rajya Lakshmi K. 2009. Antiinflammatory Activity of Chloroform Extract of *Andrographis Paniculata* Nees Stem. *Res J Biotech.*, 4, 35.
- Ram HNA and Shirwaikar A. 2007. In vitro and In situ absorption studies of vasicine in rats. *Indian J. Pharm. Sci.*, 69, 365- 369.
- Reddy, N M. and Rajasekhar Reddy N. 2014. *Solanum xanthocarpum* Chemical Constituents and Medicinal Properties: A Review. *Scholars Academic Journal of Pharmacy*, 3(2), 146-149.
- Sachin Parmar, Amit Gangwal, Navin Shet, 2010. *Solanum xanthocarpum* (Yellow Berried Night Shade): A review. *Der Pharmacia Lettre*, 2(4), 373-383.
- Saleem M, Lupeol, 2009. A novel anti inflammatory and anti cancer dietary triterpene. *Cancer Lett*, 285, 109-115.
- Salkar, K., A. Suthar and C. Chotalia, 2014. Study of Immunomodulatory activity of *Tinospora cordifolia* extract, *International Journal of Advances In Pharmacy, Biology and Chemistry*, 3(4), 880-883.
- Saurabh Srivastav, Pradeep Singh, Garima Mishra, K. K. Jha, R. L. Khosa, 2011. Achyranthes aspera - An important medicinal plant: A review, *J. Nat. Prod. Plant Resour*, 1 (1), 1-14.
- Sawasdimongkol K, Permpipat U, Kiattyingungsulee N. 1990. Pharmacological study of *Andrographis paniculata* Nees. National Institute of Health; Bangkok, Thailand (Thai language).
- Shaila Haque, Sumaiya Farah Khan, Laisa Ahmad Lisa, 2016. Antibacterial properties of Neem (*Azadirachta indica*): a mini review, *Bio journal of Science and Technology*, 4,1-7.
- Sharma M, Sharma A, Tyagi S. 2012. Quantitative HPLC analysis of andrographolide in *Andrographis paniculata* at two different stages of life cycle of plant. *Acta Chim. Pharm. Indica*, 2, 1-7.
- Sharma SC, Siddiqi MA, Zutshi U and Atal CK. 1983. The in vivo metabolism of vasicine- a potent uterotonic. *Indian Drugs*, 20, 431-434.
- Shen YC, Chen CF, Chiou WF. 2000. Suppression of rat neutrophil reactive oxygen species production and adhesion by the diterpenoid lactone andrographolide. *Planta Med.*, 66, 314-317.
- Shen YC, Chen CF, Chiou WF. 2002. Andrographolide prevents oxygen radical production by human neutrophils: possible mechanism(s) involved in its antiinflammatory effect. *Br J Pharmacol.*, 135, 399-406.
- Singh R. 1972. Screening of some plant extracts for antiviral properties. *Technology (Sindri)*, 9, 415-416. & Tripathi RN, Tripathi RKR, and Pandey DK. 1981. Assay of antiviral activity in the crude leaf sap of some plants. *Environ India*, 4, 86- 87.
- Sirisha Mulukuri NVL, Mondal NB, Raghu Prasad M, Renuka S, Ramakrishna K. 2011. Isolation of Diterpenoid Lactones from the Leaves of *Andrographis Paniculata* and Its Anticancer Activity. *International Journal of Pharmacognosy and Phytochemical Research*, 3, 39-42.
- Sivananthan M, Elamaran M. 2013. Medicinal and Pharmacological properties of *Andrographis paniculata*. *International Journal of Biomolecules and Biomedicine*, 3, 1-12.
- Tan Y, Chiow KH, Huang D, Wong SH. 2010. Andrographolide regulates epidermal growth factor receptor and transferrin receptor trafficking in epidermoid carcinoma (A-431) cells. *Br J Pharmacol.*, 159, 1497-1510.
- Vadnere GP, Gaud RS, Singhai AK. 2008. Evaluation of Anti-Asthmatic Property of *Solanum Xanthocarpum* Flower Extracts. *Pharmacology online*, 1,513-522.
- Vijaya S. and Vasudevan TN. 1994. The effect of some medicinal plants on activity of digestive enzymes. *Indian Drugs*, 31, 215-217.
- Wang Y, Xu K, Lin L, Pan Y, Zheng X. 2007. Geranyl flavonoids from the leaves of *Artocarpus altilis*. *Phytochemistry*, 68, 1300-1306.
- Zhang X. 2004. WHO monograph on selected medicinal plants. World Health Organization, Geneva.
- Zutshi U, Rao PG, Soni A, Gupta OP and Atal CK. 1980. Absorption and distribution of vasicine a novel uterotonic. *Plant Med.*, 40, 373-377.
