# PROPOSAL FOR CLINICAL TRIAL OF AN INVESTIGATIONAL DRUG ON KARUPPAI SATHAI KATTIGAL (FIBROID UTERUS)

## I.INTRODUCTION:

Karuppai Sathai Kattigal is described as Karppa Vippuruthi by the great Siddhar Yugi in his work Vaidya Chinthamani [1]. The clinical features of Karppa Vippuruthi can be well correlated to Fibroid Uterus. Uterine Fibroid is defined as a benign tumour derived from smooth muscle tissue or a lump of muscle tissue that grows in the wall of the uterus in some women[2]. Fibroids are benign growth present in about 30 % of women over the age of 30. The major symptoms of Fibroid Uterus are pelvic pain, pressure symptoms i.e fullness of lower pelvic region, menorrhagia followed by amenorrhoea. There may be a single fibroid or multiple fibroids of varying size. The symptoms which occur in Karppa Vippuruthi resemble those of Fibroid Uterus and it is mentioned in the following poem:

பாடாக வயிரதுதான் பொருமிக் கொண்டு
பக்கங்கள் கீழ்வயிறு புண்போ னோகும்
ஓடாகப் புளியிலைபோ லுலரு மேனி
உதிரந்தான் றிரண்டுகீழ் வயிற்றிற் கட்டும்
கேடாகக் கெர்ப்பம்போ லுலவல் காணும்
கெட்டியாய் மலமிறுகிப் புழுக்கை போலாம்
பூடாகச் சிரசுதலை வலியு மாகும்
புண்போலாங் **கெர்ப்பவிப் புருதி** தானே.

யூகி வைத்திய சிந்தாமணி, பக்கம் எண் 443, பாடல் எண் 757

In the above poem of Yugi Vaidhya Cinthamani, the symptoms are described as abdominal distention, lower abdominal pain, weight loss, proliferation of uterine tissue with blood clots, which gives a mass like structure and produce symptoms like rolling of foetus during pregnancy, constipation, headache and ulceration of the uterus. Literary review reveals that the classical preparation xxxx mentioned in Siddha literature Pulippani Vaithiyam- 500, is indicated for the management of Vippuruthi [3].Vippuruthi is described as a tumour characterized by the formation of connective tissue connecting the epithelial cells [4]. To be more specific, Vippuruthi pertaining to uterus is known as Karppa Vippuruthi.

In Modern Medicine hormonal therapy is the only choice and apart from that there is no scope for treating the fibroid. Surgery is the ultimate remedy for the removal of fibroid [5]. Myomectomy removes only the fibroids and leaves the healthy areas of the uterus and that too if the fibroid is small and single [6]. As the last resort, hysterectomy is done when the fibroid is big in size and multiple [7].

Regression in the size of the fibroid is due to the synergistic effect of xxx. Keeping the surgical risk in modern treatment method for Fibroid Uterus, the investigators selected the classical preparation xxx, which has been in safe practice for several hundred years with noticeably no adverse effects. The treatment aims at relieving the symptoms and leading to shrinkage or disappearance of the fibroid.

## II. BACKGROUND

Fibroid is derived from smooth muscle cells which rest either from vessel wall or uterine musculature, common during child bearing years (35 - 45 years). Fibroids are also called myomas, leiomyomas and fibromas [2]. The cause of the Fibroid is not exactly known. Fibroid is rarely found before puberty and they generally cease to grow after menopause. Women who are overweight or obese for their height or if their menarche began before the age of ten are at greater risk and women who have given birth are at lower risk. Fibroid begins to grow when cells overgrow in the muscular wall of the uterus. Once a fibroid starts growing it seems to be linked to the hormone estrogen. The hormone progesterone may also promote fibroid growth. On the basis of the fact that uterine leiomyomas develop only after menarche and markedly shrink under hypoestrogenic conditions such as late menopause, it is presumed that their growth depends on estrogens [2]. This is the reason for the cessation of fibroid after menopause, where the fibroid shrinks and symptoms go away. Although the increased sensitivity to estradiol is important for the growth of uterine leiomyomas, high circulating estradiol levels are not a requirement.

The physiological effects of estrogen are mediated by estrogen receptors (ERs). Among them, ER-α is more highly expressed in uterine leiomyomas than in normal myometrium suggesting a possible link between uterine leiomyomas and ER-α expression level [9]. Uterine fibroid growths are classified by the location in which they are found in the uterus. Myometrial

fibroids are found along the wall of the uterus [5]. Submucosal fibroids develop under the interior surface of the uterus. Subserosal fibroids grow on the outside wall of the uterus. Pedunculated fibroids are generally seen growing outside of the uterus [2]. Fibroid uterus does not lead to cancer.

Most of the women with Fibroids do not have symptoms. The symptoms depend on how large a Fibroid is, its location and whether it is bleeding or pressing on an internal organ. The symptoms are low back pain, dysmenorrhoea, excessive menstrual bleeding and pelvic pain, feeling full in the lower abdomen, frequent urination, pain during sex, infertility etc. Fibroid growths are classified by the location in which they are found in the uterus [5]. Uterine Fibroid can be detected through Trans vaginal ultrasound technology [10]. Apart from myomectomy and hysterectomy, recently a non surgical option of Uterine artery embolization (UAE) is available. In this procedure, the blood supply to the Uterus and Fibroids are cut off making the Fibroid to shrink [11]. Magnetic resonance guided focused ultrasound surgery is the newest treatment for Fibroid in women wishing to pursue pregnancy in future [12].

## III. RATIONALE FOR SELECTING RASAGANTHI MEZHUGU

xxx is included in “The Siddha Formulary of India”, Part-I (English), 1992, which is enlisted under Drugs and Cosmetics Act,1940[13]. Though xxx is in practice for more than a century, lack of documentation is the pitfall of Siddha system. In clinical practice, many practioners have successfully observed the shrinkage of fibroid after the administration of xxx. Toxicity studies have been carried out in CSMDRIAS, Chennai to establish its safe administration. xxx is a compound formulation of Herbal, Metal, Mineral and Animal origin. All the ingredients are subject to specific SOP of detoxication and ore dressing. Likewise the toxicities of Metals, Minerals are nullified by the active principle of the Herbs. Curcumin pre treatment has shown a protective effect against intoxication of mercury [14]. An observable regression on the severity such as haemorrhage, hepatocyte degeneration and tubular degeneration of kidney was observed in mercury- treated mice supplement with different doses of lycopene [14]. This observation also indicated that Siddha preparations containing several herbals may have reduced toxic potential.

## IV.AIM AND OBJECTIVES:

To study the clinical efficacy of xxx in the treatment of Karuppai Sathai Kattigal (Fibroid Uterus) and to evaluate the safety of the Drug.

### a.) Primary objective:

The primary objective of this study is to assess the efficacy of **xxx** in the treatment of Karuppai Sathai Kattigal (Fibroid Uterus) to mitigate the symptoms mentioned and to reduce the size of the fibroid.

### b.) Secondary objective:

The secondary objective of this study is to evaluate the safety of the trial drug **xxx,** to improve the quality of life (Patient is comfortable without pain and discomfort, with energy and good sleep) and to prevent any recurrence of the Fibroid.

## V. CENTER

Peripheral institutes of CCRS

## VI. SAMPLE SIZE AND METHODS

| | | |
|---|---|---|
| Sample Size | : | 20 patients |
| Groups | : | Single Group |

## VII. DRUG AND DOSAGE:

Investigational drug 1cap 500mg bid is administered for one Mandalam. One Mandalam is considered as 45 days in our literature Siddha Maruthuvaanga Curukkam. With the drug holiday of 15 days, again xxx is given for 45 days. During the drug holiday the patient has to follow the prescribed diet regimen.

### 1. Pre Clinical Evaluation:

Pre clinical evaluation of the trial drug has been done in CSMRIAS, Chennai.

## VIII. DESIGN OF THE STUDY: Open Clinical Trial

**Duration of the study** **:** 9 months
**Duration of medication** **:** 90 days
**Study period** : : 1 year to complete study
**Follow- up** : It will be carried out after 15 days

3 months (2 Mandalam) drug therapy with drug holiday of 15 days after 45 days, followed by clinical follow up without drug during 6th& 9th months.

45 days drug therapy (1 Mandalam)

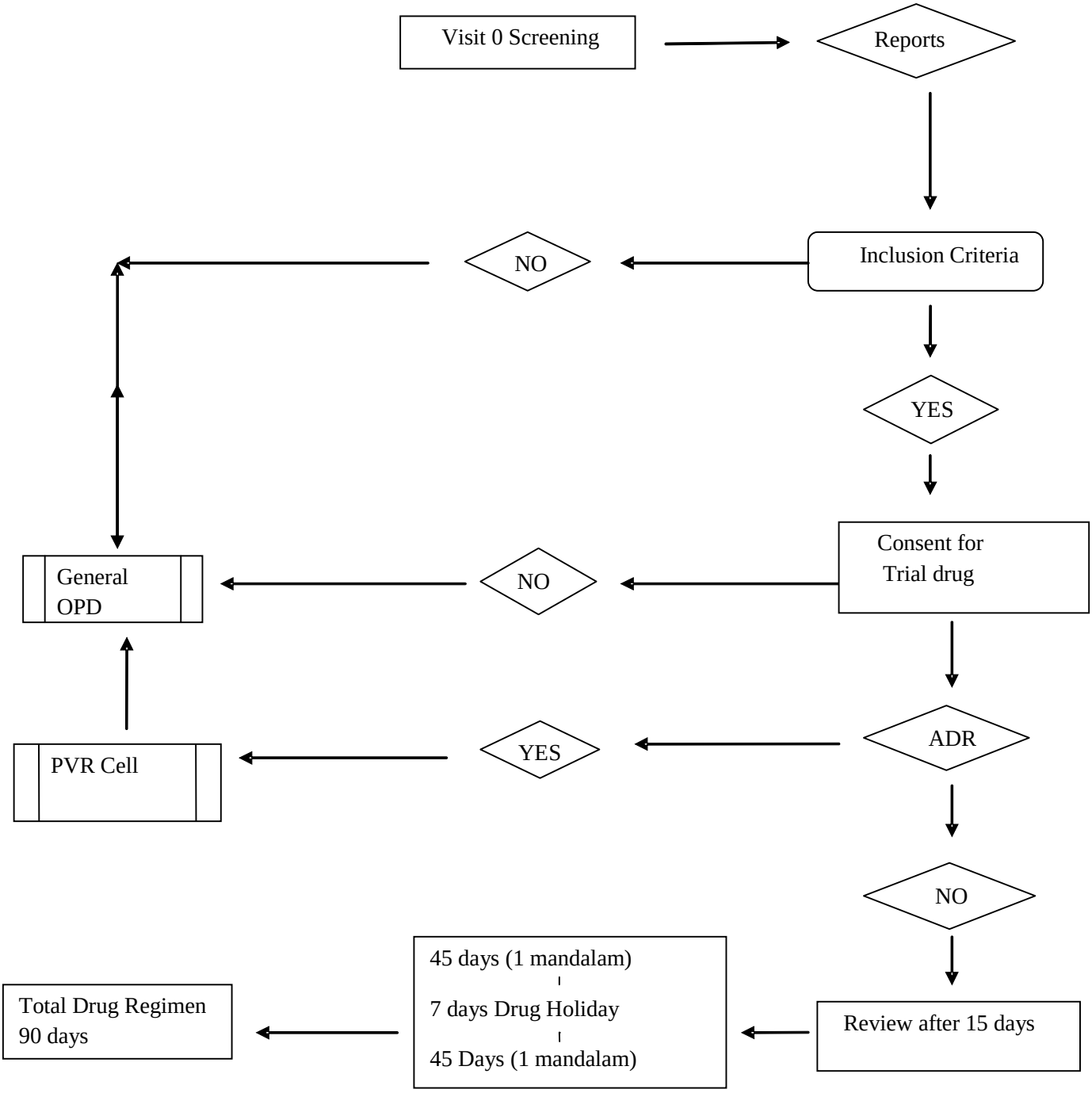
15 days drug holiday

45days drug therapy (1 Mandalam)

Review after 6th month without drug

Review after 9th month without drug

## STUDY DESIGN SCHEMATIC



## IX. INCLUSION CRITERIA:

- Clinical signs and symptoms of fibroid uterus for ≥ 6months
- Women in the age group of 25 – 55 years.
- Presence of Fibroid
- Ambulatory and co-operative.
- Confirmed by Trans vaginal Ultra Sonogram Study.

## X. EXCLUSION CRITERIA

- If underwent any previous treatment procedures
- Malignancy in any part
- Metabolic disorder like Diabetes
- Other chronic disease involving vital organs like Heart, Liver, Kidney or Lung diseases
- HIV/AIDS
- Chromosomal abnormality

## XI. CRITERIA FOR WITHDRAWAL

During the course of the trial treatment if any adverse condition develops which requires emergency treatment, such subject may be withdrawn from the trial and managed by the principal investigator accordingly and new subjects will be recruited for the study.

## XII. ROUTINE EXAMINATION AND ASSESSMENT:

The full details of the history and physical examination of the patient will be recorded as per the proforma (Form 1 & 2). Clinical assessment, laboratory investigations and Trans vaginal Ultra sonogram (Form 3 & 4)will be recorded before and after treatment,followed by clinical follow up without drug during $6^{th}$& $9^{th}$ months.

**XIII. LABORATORY INVESTIGATION:**

**1. Blood**

I. TC.

ii. DC. P L E M B

iii ESR

iii. Hb

iv. Sugar Random

v. Serum Cholesterol

vi. Urea

vii. VDRL

**2.Urine**

I. Albumin

ii. Sugar

iii. Deposit

**3.Biochemistry**

i) Liver function test

ii) Renal function test

**4. Transvaginal UltraSonogram**

**XIV. CRITERIA FOR ASSESMENT:**

| S. No | Patients symptoms | 15th day | | | | 30thday | | | | 45th day | | | | 60th day | | | | 75th day | | | | 90th day | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 1 | 2 | 3 | 0 | 1 | 2 | | 0 | 1 | 2 | | 0 | 1 | 2 | 3 | 0 | 1 | 2 | 3 | 0 | 1 | 2 | 3 |
| 1. | Low back pain | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | Painful menstruation | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | Excessive menstrual bleeding | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. | Constipation | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. | Frequent Urination | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. | Dysparunia | | | | | | | | | | | | | | | | | | | | | | | | |

0- None 1- Mild 2- Moderate 3-Severe

Mild - Complained by patient after interrogation about pain with mild bleeding.

Moderate - Frequent complaints of pain without painful look with moderate bleeding.

Severe - Excruciating pain with severe bleeding.

**ASSESMENTOF TRANSVAGINAL SCAN:**

| | |
|---|---|
| Before treatment | |
| After treatment | |
| 9th Month | |

## XV. TOTAL PERIOD OF STUDY: NINEMONTHS

## XVI. FOLLOW UPS:

Two follow ups will be carried out after $6^{th}$ & $9^{th}$ months after completion of 3 months treatment period.

## XVII. STATISTICAL ANALYSIS

Clinical symptoms, laboratory parameters and Trans vaginal ultra sonogram will be analyzed using appropriate statistical method with the guidance of a Biostatistician.

## XVIII. TRIAL MONITORS AND DATA ANALYSES:

The progress of the trail will be monitored by Central Council for Research in Siddha, New Delhi consisting of one expert each of Allopathy and Siddha besides one outside expert. Data analysis will be undertaken at SRRI, Puducherry.

## XIX.ETHICAL REVIEW

Institutional Ethical Committee (IEC) clearance will be obtained from the Institute's Ethical Committee after submitting project proposal, patient information sheet and informed consent form. Patient's information sheet and informal consent will be maintained in duplicate with one copy given to the patient at the time of entry to the trial.

## REFERENCES


1. Yugi Vaidya Chinthamani, 1998, 1st Edition, 443

2.VG Padubidri Shirish N.Daffary, Shaw's Text Book of Gynaecology, 13th Edition, 2004, 337

3.Pulippani vaithiyam-500,1st Edition,Thamarai Nulakam, 1999,72-73,

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6. Nezhat FR et al.: Recurrence rate after laparoscopic myomectomy. J Am Assoc Gynecol Laparosc,1998, 5, 237 – 240

7.Naughton MJ et al.: Health – related quality of life after hysterectomy, Clin Obstet Gynecol,1997, 40, 947-957

9. Stewart EA, Uterine Fibroids, Lancet, 2001, 357, 293-298

10. Lerner JP,Timor- Tritsch IE, Monteagudo A., Use of transvaginal sonography in the evaluation of endometrial hyperplasia and carcinoma. Obstet and Gynaecol Survey 1996;51(12):718-25).

11.Walker WJ et al.: Uterine artery embolisation for symptomatic fibroids: clinical results in 400 women with imaging follow up. BJOG, 2002, 109:1262 – 1272,

12.Sang-Wook Yoon et al.: Pregnancy and Natural Delivery Following Magnetic Resonance Imaging – Guided Focused Ultrasound Surgery of Uterine Myomas.Yonsei Medical Journal, 2010

**CLINICAL TRIAL OF XXX IN**
**KARUPPAI SATHAI KATTIGAL (FIBROID UTERUS)**
**FORM-1 SCREENING PROFORMA**

1. Centre
2. Code No 055 Level of study OPD
3. Subject No_____ Name of the patient_____

Address:

4. Gender Female
5. Age _____Yrs
6. Group Single

**CRITERIA FOR INCLUSION:**

- Clinical signs and symptoms of fibroid uterus for ≥ 6months
- Women in the age group of 25 – 55 years.
- Presence of Fibroid
- Ambulatory and co-operative.
- Confirmed by Trans Vaginal Ultra Sonogram

**EXCLUSION CRITERIA**

- If underwent any previous treatment procedure
- Malignancy in any part
- Metabolic disorder like Diabetes Mellitus
- Other chronic disease involving vital organ like Heart, Liver, Kidney or Lung diseases
- HIV/AIDS
- Chromosomal abnormality

Signature of Research Official

**CLINICAL TRIAL OF XXX IN**

**KARUPPAI SATHAI KATTIGAL (FIBROID UTERUS)**

**FORM II – HISTORY PROFORMA**

1. Centre 2.Code No. 055 Level of study OPD

3. Subject No---------

Name of the patient----------

Address:

4. Gender Female

5. Age ----------Yrs

6. Educational Status

Illiterate Read & Write Primary school Middle school

High school College Others Specify

7. Occupation

8. Income per month in Rupees ----------

**HISTORY OF PRESENT ILLNESS:**

9. Onset of illness Acute Insidious

10. Duration of illness

11. Mode of treatment given Allopathy, Ayurveda, Siddha, Unani

**FAMILY HISTORY**:

12. Cardiovascular diseases Yes No

13. Tuberculosis Yes No

14. Others Yes No

If yes specify----------

**PERSONAL HISTORY:**

15. Diet Veg. Non-veg.

16. Emotional stress Yes No

17. Addiction Yes No

If yes specify----------

18. Bowel habit Regular Constipation

19. Sleep Good Disturbed Insomnia

20. Presence of anxiety Yes No

**PHYSICAL EXAMINATION**

21. Height (cm) ----------

22. Weight (kg) ----------

23. Pulse (per min.) ----------

24. Blood Pressure Systolic / Diastolic (mm Hg) ----------

25. Body temperature ( F $^{o}$) ----------

26. Respiration (per minute) ----------

27. Anemia absent Present

28. Pigmentation absent Present

29. Deformities absent Present

30. Lymphadenopathy absent Present

**SYSTEMIC EXAMINATION**

31. CVS Normal Abnormal

If abnormal, details----------

32. CNS Normal Abnormal

If abnormal, details----------

33. Respiratory system Normal Abnormal

If abnormal, details----------

34. Digestive system Normal Abnormal

If abnormal, details----------

35. Urogenital system Normal Abnormal

If abnormal, details----------

36. Eye visual activity Normal Abnormal

If abnormal, details----------

37. Ear Audibility Normal Abnormal

If abnormal, details----------

**Udaliyal (Prakriti)**

| **S.No** | **Vatham** | | **Pitham** | | **Kabam** | |
|---|---|---|---|---|---|---|
| 1. | Lean Built | | Medium built | | Stout/Well built | |
| 2. | Less Strength | | Medium Strength | | Good Strength | |
| 3. | Dry Body | | Excessive sweating | | Oily Body | |
| 4 | Dry and Dark skin | | Pinkish or yellowish skin | | Fair, Soft & smooth skin | |
| 5. | Scanty and Brown hair | | Early graying and baldness | | Black and thick hair | |
| 6 | Fickle minded | | Short tempered | | Steady and patient | |

| | | | | | | |
|---|---|---|---|---|---|---|
| 7 | Irregular appetite and thirst | | Excessive appetite and thirst | | Normal appetite and thirst | |
| 8 | Constipate tendency | | Frequent and large stools | | Normal steady bowel | |
| 9 | Disturbed Sleep | | Average sleep | | Sound deep sleep | |

**Vatham Pittham Kabam Thontham**

**KOSANGAL (Systemic Examination)**

1. Manomaya Kosam (Cardio-Vascular System) Normal Abnormal

If abnormal, details ----------

2. Vignanamaya Kosam (Central NervousSystem) Normal Abnormal

If abnormal, details ----------

3. Pranamaya Kosam (Respiratory System) Normal Abnormal

If abnormal, details ----------

4. Annamaya Kosam (Digestive System) Normal Abnormal

If abnormal, details ----------

5. AnanthamayaKosam (Uro-Genital System and Reproductive system)

Normal Abnormal

If abnormal, details ----------

**PORIGAL/ PULANGAL**

Mei (Skin) Normal Abnormal

If abnormal, details ----------

Vaai (Mouth) Normal Abnormal

If abnormal, details ----------

Kan (Eye) Normal Abnormal

If abnormal, details ----------

Mooku (Nose) Normal Abnormal

If abnormal, details ----------

Sevi (Ear) Normal Abnormal

If abnormal, details ----------

**UDAL KATTUGAL**

Saaram Normal Abnormal

If abnormal, details ----------

Senneer Normal Abnormal

If abnormal, details ----------

Oon Normal Abnormal

If abnormal, details ----------

Kozhuppu Normal Abnormal

If abnormal, details ----------

Enbu Normal Abnormal

If abnormal, details ----------

Moolai Normal Abnormal

If abnormal, details ----------

Sukkilam/ Suronitham Normal Abnormal

If abnormal, details ----------

**ENVAGAI THERVUGAL**

**NAA**

Maa padithal Present Absent

Niram Black Red Pale Others

Suvai Inippu Pulippu Kaippu Thuvarppu

Uvarppu Karppu

Vedippu Present Absent

Vai Neerural Normal Excess Scanty Absent

**NIRAM (Skin)**Karuppu Manjal Veluppu Maa niram

**MOZHI** Sama oliUratha oli Thazhantha oli

**VIZHI**

Niram Black Red Yellow Pale

Kanner Normal Abnormal ----------

Erichal Present Absent ----------

Peelai Present Absent ----------

**MEI**

Veppam Mitha Veppam Miku Veppam Thatpam

Viyarvai Normal Increased Reduced

Thoduvali Present Absent ----------

Vali Present Absent ----------

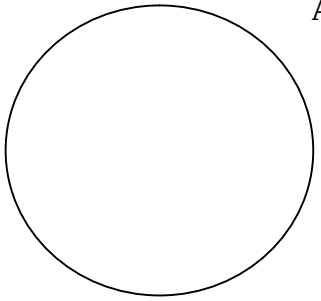
**NAADI** Vatham Pitham Kabam Vathapitham Vathakabam

Pithakabam Pithavatham Kabavatham Kabapitham

| **MALAM** | **Normal** | **Affected** | | |
|---|---|---|---|---|
| Niram | Black | Red | Yellow | Pale |
| Thanmai (Consistency) | Irukal | Ilakal | Thin | Bulky |
| Alavu | Normal | Increased | Reduced | |
| Kazhichal | Present | Absent | ---------- | |
| Seetham | Present | Absent | ---------- | |
| Vemmai | Present | Absent | ---------- | |

| **MOOTHIRAM** | **Normal** | **Affected** | | |
|---|---|---|---|---|
| Niram | Venmai | Manjal | Sivappu | Others |
| Nurai | Normal | Increased | Reduced | |
| Edai | Normal | Increased | Reduced | |

| | | | |
|---|---|---|---|
| Enjal | Normal | Increased | Reduced |
| Manam | Present | Absent | ---------- |
| Thadavai (Frequency) | DAY | NIGHT | ---------- |
| **NEIKURI** | **Aravam** | **Mothiram** | **Muthu** |



Date: Signature of Research Official

**CLINICAL ASSESSMENT FORM-III**

**GYNAECOLOGY RECORD**

| | | |
|---|---|---|
| Name and address of patient<br><br>Occupation/Income | Age<br><br>Single<br>Married<br>Widow | Father's / Husband's Name<br><br>Address<br><br>Occupation/Income |
| **Menstrual History**<br>Menarche<br><br>Previous menstrual cycle<br><br>Present menstrual cycle<br><br>Last Menstrual/Menopause | **Obstetric History**<br>No. of pregnancies<br>Medical termination of Pregnancy<br>Abortions<br>No. of children alive<br>Last delivery/Abortion<br>Details | |
| Marital History<br><br>No. of years married | Family History | |

On examination Examined by

General condition

Per abdomen

Per vaginum

Per speculum

**CRITERIA FOR ASSESMENT:**

| S. No | Patients symptoms | 15th day | | | | 30thday | | | | 45th day | | | | 60th day | | | | 75th day | | | | 90th day | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 1 | 2 | 3 | 0 | 1 | 2 | | 0 | 1 | 2 | | 0 | 1 | 2 | 3 | 0 | 1 | 2 | 3 | 0 | 1 | 2 | 3 |
| 1. | Low back pain | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | Painful menstruation | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | Excessive menstrual bleeding | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. | Constipation | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. | Frequent Urination | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. | Dysparunia | | | | | | | | | | | | | | | | | | | | | | | | |

0- None 1- Mild 2- Moderate 3-Severe

Mild - Complained by patient after interrogation about pain with mild bleeding.

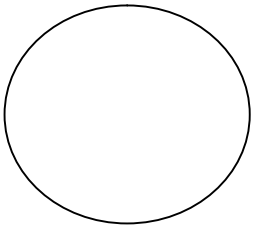
Moderate - Frequent complaints of pain without painful look with moderate bleeding.

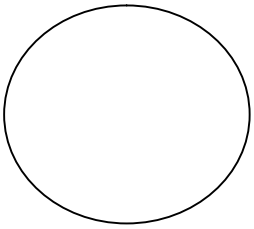
Severe - Excruciating pain with painful cries with severe bleeding.

**ASSESMENTOF TRANSVAGINAL SCAN:**

| | |
|---|---|
| Before treatment | |
| After treatment (3rd Month) | |
| 9th Month | |

**NEIKURI** Before treatment After treatment





Date: Signature of Research Official

**CLINICAL TRIAL OF XXX IN KARUPPAI SATHAI KATTIGAL (FIBROID UTERUS)**

**FORM IV –LABORATORY INVESTIGATIONS**

1. Center

2. Code No.055

3. Subject no._____ Name_____

4. Gender Female ☐

5. Age_____yrs.

6. Date of Assessment _____

**LABORATORY INVESTIGATIONS***:*

**Blood**
1.TC
2. DC. P L E M B
3. ESR
4. Blood sugar Random
5. Hb%
6. Serum Cholesterol
7. Serum Urea
8. Serum Creatinine
9.VDRL

**Urine**
1. Sugar
ii.Albumin
iii.Deposit

**Biochemistry**

Liver Function Test Before, During and After treatment
Renal function Test

**Trans Vaginal Ultra Sonogram ---** Before ,After and 9th Month

Signature of Research Official

**CLINICAL TRIAL OF XXX IN**

**KARUPPAI SATHAI KATTIGAL (FIBROID UTERUS)**

**PATIENT INFORMATION SHEET**

**STUDY INVESTIGATORS:**

**SITE OF INVESTIGATION:**

**CONTACT NUMBER:**

You are being asked to participate in a clinical research study. However, before you decide to be a part in this study, you need to understand the risks and benefits as well as what is expected of you as a study participant. Please read the following information carefully. You should not sign this form until you understand all of the information presented in the following pages and until all of your questions about the research have been answered to your satisfaction.

**What is the study about?**

This study is done to assess the efficacy of **xxx** in the treatment of Karuppai Sathai Kattigal(Fibroid Uterus). A total of 20 patients suffering with fibroid uterus like you will be taking part in this study.

**What will you have to do?**

Your doctor will explain clearly what you have to do. It is important that you follow the instructions scrupulously. The study will take approximately three months to complete. After this period, you are expected to visit the hospital every15 days.

Before you start treatment, during the first visit to the clinic, you will undergo a complete physical examination, Trans Vaginal sonogram, Blood and urine samples will also be taken. This is to make sure that you are eligible for the study.

One week later, at your second visit, if you are eligible, you would be put on trial treatment for 90 days. You may receive trial drug for 90 days.

**What happens at the end of the study?**

The trial treatment will be stopped at the end of 90 days. You will be referred to the General OPD .**Are there any risk?**

If the trial drug cause any adverse effect it has to be reported to the doctor.

**What are the alternatives?**

Your doctor will be pleased to explain to you the available alternative treatment .

**When can you leave the study?**

Your participation in the study is entirely voluntary. You can choose to leave the study at any time. Your decision to leave the study will not affect your medical care or relationship with your doctor.

**What is the cost of the study?**

All medications and tests to be done during the study will be free of charge.If you do not want to participate, you are free to do so. It will not affect your medical care or relationship with your doctor in any way.

**What happens now if you decided to take part?**

You will asked to sign a consent form saying that you have been given information sheet about the study and you voluntarily agree to take part.It is important to follow all instruction given by your doctor doctor's assistant carefully.

**What about the confidentiality?**

The study data in your name or name or address will be coded with initials and number to your records. The confidentiality will be maintained. Unless required by law, only the study

Doctor, the study team and its authorized agents and the Institutional Ethics Committee will have access to confidential data which identifies you by name.

**Any other additional information regarding this trial ?**

If you have any questions regarding the research study related or if you need emergency medical treatment while you participating in this study, or have questions or additional concerns about the study, you should contact the study doctor.

Do not sign this form unless you have had a chance to ask questions and have received satisfactory answers to all of your questions.

**For further questions or problems you may contact:**

# பத்தியம்

**தவிர்க்க வேண்டிய உணவுகள்**

1. அசைவ உணவுகள் (மீன் முட்டை நண்டு மாமிசம் கருவாடு)
2. அகத்தி கீரை சுண்டைக்காய் பாகற்காய் புளித்த மோர்
3. உப்பு புளி காரம் குறைக்கவும்

**சேர்த்து கொள்ள வேண்டிய உணவுகள்**

1. கத்தரிபிஞ்சு அவரைபிஞ்சு முருங்கைப்பிஞ்சு
2. வாழைத்தண்டு வாழைப்பூ முள்ளங்கி கேரட் பீட்ரூட் பீன்ஸ் தக்காளி
3. புளிக்காத மோர் பால்
4. கீரைவகைகள்
5. அதிக அளவு தண்ணீர் பருகவும் (கொதிக்க வைத்து ஆறிய நீர் 1-3 லிட்டர்)

**CLINICAL TRIAL OF XXX IN**

**KARUPPAI SATHAI KATTIGAL (FIBROID UTERUS)**

**DRUG COMPLIANCE FORM – 1st visit**

1. Center: _____
2. S.No. of the patient: _____
3. Name of the patient: _____
4. Sex: Female ☐

**Instructions:**

1. Please take 1 capsule (500 mg) of the medicine twice a day after food.
   (500kp.fp kUe;ij fhiy - khiy> czTf;Fg; gpd; rhg;gplTk;)

2. Please come for the next visit on _____
   (ePq;fs; kUj;Jtkidf;F tuNtz;ba mLj;j Njjp : )

| Day | Date<br>Njjp | fhiy - **Morning** | | khiy - **Evening** | |
|---|---|---|---|---|---|
| | | Please ✓ after taking the medicine.<br>kUe;J cl;nfhz;l gpd; ✓ Fwpf;fTk; | Time<br>Neuk; | Please ✓ after taking the medicine<br>kUe;J cl;nfhz;l gpd; ✓ Fwpf;fTk; | Time<br>Neuk; |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |
| 7. | | | | | |
| 8. | | | | | |
| 9. | | | | | |
| 10. | | | | | |
| 11. | | | | | |
| 12. | | | | | |
| 13. | | | | | |
| 14. | | | | | |
| 15. | | | | | |

Date: _____ Signature / Thumb impression of patient

(Nehahsh; ifnahg;gk);

**CLINICAL TRIAL OF XXX IN KARUPPAI SATHAI KATTIGAL (FIBROID UTERUS)**

*FORM V - PATIENT CONSENT FORM*

I ----------S/o-H/o----------

Aged---------years residing at---------- agree and exercising my free power of choice, hereby give my consent to be included as a subject in the clinical trial of xxx in Karuppai sathai kattigal (Fibroid uterus) which is to be conducted at ----------.

I understand that I may be treated with Herbal /Metal / Herbo - mineral preparation of Siddha system of medicines for the disease. I am suffering from ----------I have been informed to my satisfaction by the attending physician about the purpose of clinical trial, the nature of drug treatment and follow up including the laboratory investigations to monitor and safeguard my body function. The consent, which I am giving to participate, is out of my own interest with my knowledge and full consciousness and after studying the patient information sheet given to me by the investigator and after full clarification of all my doubts. I also state that the consent is not given out of any undue influence or any other measures.

**Signature / Thumb impression of the patient.**

Date: **Signature of Research Official**

**ASSISTANT DIRECTOR(S)**