LIVOMYN

Efficacy and tolerability of 'LIVOMYN' proved in PMS trial conducted on 916 patients in the management of various liver disorders

Phase IV, open, multi-centric study was conducted by 109 private practitioners, on more than thousand patients between 18-70 years of age, suffering from Viral Hepatitis, Alcoholic Hepatitis and AKT induced hepatitis.

- In Viral hepatitis -Livomyn tablet was administered in a dose of 2 tablets twice a day, while Livomyn syrup was given in dose of 15 ml. (1 tablespoonful) twice a day for 8 weeks.
- In Alcoholic hepatitis and AKT induced hepatitis - Livomyn tablet was administered in a dose of 2 tablets twice a day, while Livomyn syrup was given in dose of 15 ml (1 tablespoonful) twice a day for 12 weeks.

Results:

- Viral hepatitis **-** About 75 doctors treated 674 subjects, 85% reduction in mean AST and ALT level.
- Alcoholic hepatitis **-** About 142 patients were treated, 80% reduction in mean ASTand ALT level
- AKT induced hepatitis **-**Eleven doctors treated 184 patients; there was 70% reduction in mean aspartate transaminase (AST/SGOT) and alanine transaminase (ALT/SGPT).

Conclusion:

This large scale nationwide study confirms the efficacy of both dosage forms of Livomyn in three major types of hepatitis. The improvement within 8-12 weeks of treatment, as assessed through these investigations was very significant. Both patients and their physicians reported the clinical efficacy and good toleration of Livomyn, thus, confirming its excellent hepatoprotective activity.

LIVOMYN reverses the hepatotoxicity induced by CCL4 & AKT drugs as proved by advanced nuclear medicine based HEPATOBILIARY SCINTIGRAPHY

(Conducted by Dr. Rajeev Gaikwad at at Veterinary Nuclear Medicine Department) (…Data on File)

Animal study was conducted on Twenty four wistar rats by Dr. Rajeev Gaikwad (HOD) at Veterinary Nuclear Medicine Department; Bombay Veterinary College; Parel; Mumbai. An intra venous injection of the radiopharmaceutical agent, 99mTc-mebrofenin was given into the afferent blood supply of the liver to assess absorption and clearance of drugs through liver (Hepatic Extraction Efficiency - HEE). Hepatobiliary scans with gamma scintigraphy were taken at baseline, after induction of hepatotoxicity and after 20 days treatment of Livomyn in all groups and then compared with the normal hepatic activity of healthy controlled group of rats and with those who were left untreated. Additionally, biochemical parameters such as AST, ALT, serum bilirubin and serum alkaline phosphatase were also monitored at equivalent intervals.

The scintigraphy graphs confirmed, the Hepatic Extraction Efficacy (HEE) was impaired in both groups of rats in which hepatotoxicity was induced by CCl_4andRifampcin-Isoniazid.Butafter 20 days of treatment with Livomyn the Hepatic Extraction Efficacy (HEE) of these rats was resumed to almost normal as similar to healthy controlled group. No change or a decline in hepatotoxicity was observed in the untreated group.

Livomyn is a safe and balanced formulation to cease virus growth

(Conducted by Dr. Avinash Shankar)

Comparative evaluation of clinical efficacy of an indigenous Hepatogouge versus Virustatic Drug in management of Hepatitis

The comparative trial was conducted by Dr. Avinash Shankar at R. A. Hospital & Research centre, Warisaliganj (Nawada) to evaluatethe efficacy of an indigenous drug Livomyn against a virustatic drug Ribavirin and placebo in management of Hepatitis.
200 patients,4groups
Group A- 55 patients of viral hepatitis on Livomyn
Group B- 35 patients of hepatitis or chronic hepatitis on Livomyn
Group C- 55 patients of viral hepatitis on Placebo
Group C- 55 patients of viral hepatitis on Ribavirin

Livomyn showed complete relief of both clinical and pathological changes marked by symptomatic relief,
Group A response began in 4 days
Group B response began in 6 days
Group C response began in 21 days
Group D response began in 19days

All patients in Group C & d needed adjuvant therapy.
Hepatic encephalopathy in 11 cases in Group C
Marked anaemia in 7 cases in Group D

Conclusion
Indigenous Livomyn is a safe and balanced formulation to cease virus growth, check hepatic damage, promote hepatic regeneration, better digestion, improved appetite, fast bilirubin elimination, and can be prescribed to all without any restriction.