A Clinical Trial of Herbolax in Constipation during Post-operative Period

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ABSTRACT
Constipation is a commonly found problem among all age groups for various reasons. Different treatment modalities including diet and lifestyle changes to chronic treatment with mild or drastic laxatives are adapted to overcome the problem of constipation. A study was conducted on a polyherbal laxative, Herbolax, to evaluate its efficacy in treating cases of constipation. The results showed that all the 45 cases included in the study responded to Herbolax treatment including 13 cases who had excellent response and 18 cases with a good response, the remaining 14 patients displayed a fair response to Herbolax. No side effects were observed amongst any of the patients.

Keywords: Herbolax, constipation, laxative, haemorrhoids

INTRODUCTION
Constipation is a common complaint often resulting from inordinate expectation of regularity in bowel conscious individuals. Stools are described as infrequent, incomplete or unduly hard and unusual straining may be required to achieve defecation. A review of patient’s habits often reveals contributory and correctable causes, such as insufficient dietary roughage, lack of exercise, suppression of defecatory urges arising at inconvenient moments, inadequate time for full defecation and prolonged travel. In spite of appropriate adjustment to these patterns and reassurance, patients often fail to relieve the problem of constipation.

Most cases of chronic constipation arise from habitual neglect of afferent impulses, failure to initiate defecation and accumulation of large, dry faecal masses in the rectum. This voluntary suppression of nature’s call to stool may arise during the period of toilet training in childhood, or later in life due to a sense of social impropriety, unaccustomed surroundings, uncomfortable toilet facilities or illnesses that require confinement to bed. As constant distension of the rectum with faeces becomes chronic, the patient grows less aware of rectal fullness. Bowel movements become progressively more difficult and painful haemorrhoids or anal fissures reinforce suppression of the urge to defecate. To avoid these problems the patient begins the chronic use of laxatives or enemas, without which defecation becomes impossible. To treat the problem of acute or chronic constipation, both doctors and individuals utilise various remedies. There are a number of preparations available for this purpose, however all are not free of side effects and most of them cause dependency. Herbolax, a polyherbal formulation is commonly used in treating constipation. It contains

Ipomoea turpethum, Terminalia chebula, Cichorium intybus, Cassia occidentalis, Solanum nigrum, Glycyrrhiza glabra, Zingiber officinale and Embelia ribes. A clinical study was conducted to evaluate the efficacy of Herbolax in patients with acute and chronic constipation.

MATERIAL AND METHODS
Forty five patients in the age group of 30-65 years, with 24 female and 21 male subjects from the Orthopaedic Department of Kempe Gowda Institute of Medical Sciences, Bangalore, suffering from chronic constipation were included in the study. The patients were selected based on the history and complaints of constipation which are given in Table 1. A complete medical history was taken and patients with suspected carcinoma, rectal prolapse, perianal abscess were excluded from the study. All the subjects were given Herbolax tablet at a dose of 2 tablets at bedtime. The response was noted from the next day onwards. Patients were asked to report if they experienced a sense of griping pain, purging, colic or excessive watery stools or a sense of thirst and weakness to rule out electrolyte imbalances. The treatment was stopped once the patient was relieved of constipation and all the subjects were followed up for 2 weeks. The patients were advised to report any side effects experienced after taking the medicines.

Table 1: Aetiological distribution of cases

<table>
<thead>
<tr>
<th>Causes of Constipation</th>
<th>No. of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients on aluminium hydroxide</td>
<td>06</td>
</tr>
<tr>
<td>Patients on tricyclic antidepressant</td>
<td>03</td>
</tr>
<tr>
<td>Patients on opiates</td>
<td>06</td>
</tr>
<tr>
<td>Bedridden patients</td>
<td>30</td>
</tr>
</tbody>
</table>

RESULTS
At the end of the study it was observed that 30 subjects had experienced constipation for the first time varying over a period of 1-3 weeks. Fifteen subjects had chronic constipation varying from 3 months to 6 years. It was observed that in some of the patients the cause of constipation was due to the use of medications like aluminium hydroxide, tricyclic antidepressants, opiates etc. In the rest of the patients, constipation was due to immobility because of fractures, which they had suffered. While evaluating the results it was observed that all the patients responded to Herbolax from the first dose onwards. Seven subjects with chronic constipation responded after 4-5 days. Herbolax was stopped from the 3rd day onwards in 18 cases, whereas it was continued in the rest for 1 week. All the patients reported smooth evacuation without any strain. None of the subjects reported purging, griping or abdominal pain. In addition, no subject complained of watery stools, weakness, lethargy or cramps. The efficacy was evaluated based on the subjective description of the grade in relief from constipation as excellent, good, fair or no response (Table-2). None of the subjects reported having recurrence of constipation at the end of the two weeks’ period.

Table 2: Response to Herbolax

<table>
<thead>
<tr>
<th>Response</th>
<th>No. of patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>13</td>
</tr>
<tr>
<td>Good</td>
<td>18</td>
</tr>
<tr>
<td>Fair</td>
<td>14</td>
</tr>
<tr>
<td>No response</td>
<td>00</td>
</tr>
</tbody>
</table>

DISCUSSION
Dietary fibre is regarded by many as a panacea in the treatment of adult constipation. Few women with severe constipation find that they are not helped by a high fibre diet which at
times makes their symptom worse\(^1\). When a fibre diet fails, patients turn to laxatives, which increase the water content in the stools and promote colonic propulsion\(^2,3\). India’s classical system of medicine has long used a vast variety of herbs to treat constipation. A literature search for the laxative properties of the herbs used in Herbolax reveals that the seeds of *Cassia occidentalis* are used as a purgative\(^4\); *Embelia ribes* is reported to have stomachic, tonic properties and used for digestive disorders\(^5\); *Solanum nigrum* is used as a laxative\(^6\); *Terminalia chebula* is a very good tonic; and used as a laxative in constipation\(^7\); *Glycyrrhiza glabra* is a well known remedy for various disorders and studies have shown that glycyrrhetonic acid has potential anti-inflammatory and anti-ulcerogenic properties, causes increased water retention\(^8\) and thereby reduces constipation. The observation made in this study shows that the combination of various herbs produces an optimum effect on the patients’ gastrointestinal systems.

**CONCLUSION**

Even though some of the ingredients used are known to have a purgative action, probably due to the optimal blend of the ingredients, the subjects did not experience heavy purging. The response of the patients to Herbolax indicates that this particular remedy contains optimal amount of ingredients, which do not induce side effects, or overactivity of the gastrointestinal system. The absence of the symptoms of electrolyte disturbance indicates that Herbolax does not tamper with the vital internal milieu of the body. Thus, it may be stated that Herbolax is free from side effects and dependency.

**REFERENCES**