Lukol in the Treatment of Menorrhagic Haemorrhages

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Amongst the commonest and most troublesome complaints met in gynaecological practice are vaginal discharges in the form of Leucorrhoea, vaginal bleeding, irregular periods, etc. The etiological factors are different according to age, site of lesion, parity, environment, nutrition, other diseases and emotional factors. It is important to note that some lesions are organic and some are functional.

The treatment of these ailments depends upon their aetiology and may be either medical or surgical or both. In the medical category fall the various drugs that are usually tried to treat these ailments and Leucol (The Himalaya Drug Co.) is one such drug and I have obtained very favourable results with it in controlling uterine haemorrhages of a functional type and in some types of leucorrhoea.

**SELECTION OF CASES AND TREATMENT**

For this preliminary report, I have selected 25 cases between the ages of 15 and 40, who used to attend the clinic regularly. At the commencement of treatment, the patient was given a complete physical check-up. The vagina, cervix, uterus, adnexae were examined. The other investigations included Hb, and RBC tests and cervical smears – wet preparation and dry preparation. In this preliminary series of 25 cases, Leucol was tried on the following complaints:

<table>
<thead>
<tr>
<th>Complainant</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irregular uterine haemorrhages (functional)</td>
<td>11 cases</td>
</tr>
<tr>
<td>Vaginitis</td>
<td>7 cases</td>
</tr>
<tr>
<td>Vaginitis with pelvic inflammation</td>
<td>2 cases</td>
</tr>
<tr>
<td>Pelvic inflammation</td>
<td>3 cases</td>
</tr>
<tr>
<td>Endocervicitis</td>
<td>2 cases</td>
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</tbody>
</table>

At the commencement of the treatment, the patient attended the clinic for a daily routine check up, later on alternate days and then every week. Follow up of these cases has been done for 6 months and is still being done.

The patients were put on Leucol 2 tablets 3 times a day. Unless otherwise specified, no other treatment was simultaneously given.

**RESULTS**

All cases of uterine bleeding of a functional nature responded to Leucol therapy and their periods were regularised. Most patients responded very well and the bleeding was controlled within 24 to 72 hours and was completely stopped within 3 or 4 days. Even after the haemorrhage stopped, the treatment was continued and was omitted after the commencement of one or two normal periods. After treatment, the periods which were profuse before became moderate and where they were of long duration, they were brought within normal limits.

In some patients, the bleeding was accompanied by anaemia and general symptoms like anorexia, debility, etc. The anaemia and general tone of the patient improved considerably.
Leucorrhoea which was due to anaemia or of non-specific origin was checked by Leucol. Leucorrhoea of organic origin was not controlled by Leucol and the therapy had to be supplemented with other specific treatments according to lesion.

**DISCUSSION**

Leucol contains vegetable and mineral drugs and the action of each ingredients different. That is the general tone of the body and anaemia is improved, is mainly due to the action of Loh bhasma, which is iron triturated many times and which is a powerful haematinic. This improves the entire system and hence the uterine circulation and Leucorrhoea due to the general debility is controlled to a fair extent.

Another principle is Lodh (Symplocos racemosuas), which acts on the Uterine mucous membrane as a mild astringent and exerts a soothing anodyne action. The bleeding, which may be due to relaxation of the uterine musculature in elderly patients gets checked as the tone is improved. It also arrests abnormal secretions so that the Leucorrhoea is controlled in some cases.

The other two ingredients Saraca indica (Asoka) and Woodfordia floribundi (Dhai) have got similar actions. They both have an astringent action on the endometrial mucous membrane and enhance the action of each other. Saraca indica which is powerful uterine tonic acts directly on the musculature of the uterus. It has got a stimulating effect on the endometrium and ovarian tissues and is a powerful styptic.

In uterine haemorrhages which are due to irregular desquamation of the endometrium and which continue for a long time, the chief fault lies in the endometrium itself, and hence drugs like Dhai and Lodh help in the condition since they act on the endometrium. Haemorrhages due to ovarian dysfunction are chiefly checked by Asoka – probably due to improved circulation, the ovarian function improves.

The haemorrhages due to general debility and anaemia are corrected by the anti-anaemic factor.

To sum up them, we do not know as yet the exact mechanism and the aetiology of the irregular and functional uterine haemorrhages. It may be in the fault of endometrium, ovary or both or may be unknown.

The various therapies which are tried are hormone (male and female) and irradiation, general tonics and vitamins, etc. Finally, if the disorder still persists, then hysterectomy is the only choice remaining.

Hence, since good results are obtained with Leucol which is cheap and effective and has no contra-indication, I always give it first preference in the treatment of these complaints.

**CONCLUSIONS**

1. Leucol therapy is very useful in ailments like uterine haemorrhages, which are chiefly functional in nature. Non-specific leucorrhoea also responds to Leucol.

2. There is no contra indication.

3. There is no side-reactions.

4. The symptoms which are mainly general are improved.

5. The drug is easy to handle and easy to administer.
6. Leucol is effective even where other remedies have failed.

7. There is no drug addiction or no intolerance when the drug is given for a long time.

8. The symptoms do not appear again after stoppage of Leucol therapy (still under observation).

9. This therapy is cheaper than other therapies.

To sum up, this preliminary report is based on a study of 25 cases. Encouraged by the results, more exhaustive investigations with more follow-up are under progress and detailed results will be published in due course.

My thanks are due to The Himalaya Drug Co., Bombay for placing at my disposal generous supplies of Leucol tablets.

**SUMMARY**

1. Twenty five cases vaginal discharges were treated with Leucol therapy.

2. Eleven cases of functional uterine haemorrhages responded satisfactorily to Leucol.

3. Non-specific leucorrhoea was controlled, but leucorrhoea of organic origin did not respond.