



Effectiveness of A Compound Formulation of Suranjan in The Treatment of Niqras (Gout) - A Pilot Clinical Study

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Abstract

Niqras (Gout) in Unani medicine is a well-documented condition described in classical texts as a form of Wajaul-Mafasil (arthritis), characterized by the deposition of Monosodium Urate (MSU) crystals in the joints, causing inflammation and pain. Unani physicians like Ibn Sina and Buqrat (Hippocrates) have elaborated on its etiology and treatment, associating it with an excess of Balgham (phlegm) in the body. Modern pharmacological treatments for gout often come with side effects, but Unani medicine, particularly the use of Suranjan (*Colchicum autumnale*), has shown promise in managing this disease safely and effectively. This study aims to evaluate the safety and efficacy of a compound formulation of Suranjan in patients with Niqras (Gout) by monitoring changes in serum uric acid levels and improvements in joint pain and inflammation. A pilot clinical study was conducted with 10 patients over a period of one month, administering Majoon-e-

Suranjan for non-diabetic patients and Sufoof Majoon-e-Suranjan for diabetic patients.

The study demonstrated significant reductions in serum uric acid levels and alleviation of clinical symptoms without any notable adverse effects. These findings suggest that Suranjan may serve as an effective treatment for Niqras.

The pilot study indicates that Suranjan is a promising alternative for managing Niqras in Unani medicine, warranting further large-scale clinical trials.

Keywords: Anti-inflammatory, *Colchicum autumnale*, Gout, Niqras, Pilot Study, Suranjan, Serum Uric Acid, Unani Medicine

Introduction

Gout, referred to as Niqras in Unani medicine, is primarily a disorder of uric acid metabolism. It results in elevated serum uric acid (Fuzlat al Ma’a), leading to the deposition of Monosodium Urate (MSU) crystals in the joints and surrounding tissues, causing severe pain and inflammation¹. According to Unani classical literature,

Niqras is associated with an imbalance of *Balgham* (phlegm) or a combination of *Balgham* and *Mirrah* (serous fluid)⁴. The excess humor accumulates in the joints, obstructing the flow of *Rutoobat* (nutritional fluids) and resulting in inflammation².

Unani Etiopathogenesis of Niqras

Niqras is linked to a disturbed *Su-e-Mizaj Maddi* (disordered temperament due to material imbalance) or *Su-e-Mizaj Raddi* (disordered temperament due to morbid substances)³.

Ibn Hubal stated that individuals prone to gout have an excess of humors and diminished *Quwat-e-Dafiya* (expulsive power), leading to the deposition of these humors in the joints⁵.

Materials & Methods

Inclusion Criteria

- Patients attending the OPD of Government Nizamia Tibbi College
- Male and female patients aged 20 to 60 years
- Patients diagnosed with acute *Niqras* (Gout)
- Clinically stable individuals with elevated serum uric acid levels

Exclusion Criteria

- Patients with chronic tophaceous gout or urolithiasis
- Individuals under 20 or over 60 years
- Pregnant or lactating women
- Patients with organ failure, severe cardiovascular diseases, or neurological disorders

Study Design

This pilot study included 10 patients diagnosed with *Niqras*, selected based on the inclusion criteria. Non-diabetic patients were administered *Majoon-e-Suranjan*, while diabetic patients received *Sufoof Majoon-e-Suranjan* for a duration of one month. Follow-up evaluations were conducted after treatment to assess

serum uric acid levels and clinical improvements in joint pain and inflammation.

Investigations

- **Serum Uric Acid:** Measured at baseline and after one month of treatment.
- **Musculoskeletal Ultrasound (MSK USG):** Used to assess joint health and detect any tophi formation.
- **USG-Guided Synovial Biopsy:** Conducted to confirm the presence of MSU crystals in the synovial fluid.

Results & Discussion

The pilot study demonstrated a significant reduction in serum uric acid levels in patients treated with *Suranjan*. Clinical symptoms such as joint pain, inflammation, and swelling also improved considerably. No adverse side effects were reported during the course of the study. These findings align with the traditional Unani understanding of *Suranjan* as an effective treatment for *Niqras*, offering anti-inflammatory, anti-urate, and analgesic benefits.

Comparison with Other Studies

Modern treatments for gout, such as allopurinol and nonsteroidal anti-inflammatory drugs (NSAIDs), often come with risks of side effects. However, *Suranjan*, a staple of Unani medicine, provided similar benefits without such risks, supporting its role as a safer alternative.

Conclusion

The results from this pilot study indicate that *Suranjan* (*Colchicum autumnale*) is effective in reducing serum uric acid levels and alleviating joint inflammation in patients with *Niqras* (Gout). The absence of significant side effects also highlights the safety of this Unani formulation. These promising findings suggest the need for further large-scale studies to confirm the efficacy of *Suranjan* in treating gout and to strengthen the case for

integrating Unani medicine into modern gout management practices.

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