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Effect of heart failure reversal treatment as add-on therapy in patients with chronic heart failure: A randomized, open-label study

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Objectives: The present study was designed to evaluate effect of heart failure reversal therapy (HFRT) using herbal procedure (*Panchakarma*) and allied therapies, as add-on to standard treatment (SCT) in chronic heart failure (CHF) patients.

Methods: This open-label, randomized study conducted in CHF patients (aged 25-65 years, ejection fraction between 30%-65% [inclusive]), had three phases: 1-week screening, 6-week treatment (randomized [1:1 ratio] to HFRT+SCT or SCT-alone) and follow-up (12-week). Twice weekly HFRT (60-75 minutes) consisting of *Snehana* (external oleation), *Swedana* (passive heat therapy), *Hrudaydhara* (concoction dripping treatment) and *Basti* (enema) was administered. Primary endpoints included evaluation of change in metabolic equivalents of task (MET) and peak oxygen uptake (VO_{2peak}) from baseline, at end of 6-week treatment and follow-up at week-18 (non-parametric rank ANCOVA analysis). Safety was also assessed.

Results: Total 70 CHF patients (mean [SD] age: 53.0 [8.6], 80% men) were enrolled in the study; 35 randomized to each treatment arm. All patients completed treatment phase. Add-on HFRT caused a significant increase in METs (least square mean difference [LSMD], 6-week: 1.536, $p=0.0002$; 18-week: -1.254 , $p=0.0089$) and VO_{2peak} (LSMD, 6-week: -5.52 , $p=0.0002$; 18-week: -4.517 , $p=0.0089$) as compared with SCT alone. Results were suggestive of improved functional capacity in patients receiving add-on HFRT. Total 7 treatment-emergent adverse events were reported in HFRT arm; all mild severity.

Conclusion: Findings of the present study highlight therapeutic efficacy of add-on HFRT as compared with SCT-alone in CHF patients. The non-invasive HFRT showed no safety concerns.

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Nutritional status of women of reproductive age in a selected char of Rangpur District

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An observational cross-sectional study was carried out at Rangpur district in Bangladesh to assess nutritional status of reproductive aged women residing in char area with a sample size 200. Face to face interview was carried out with the semi-structured questionnaire. Convenient sampling technique was used to collect data on the basis of inclusion and exclusion criteria and written consent was taken prior to interview. Nutritional status was determined according to BMI cut off value for Asian population. Descriptive as well as inferential statistics were used to present data. Mean \pm SD age of respondents was 34.27 ± 8.60 . More than half (67%) of the respondents were illiterate and housewife (84%). Mean \pm SD income of respondents was 5700.71 ± 282.89 per month. Underweight, normal and overweight were 67%, 30% and 3% respectively. Most respondents took rice 2-3times/day. Vegetables and soybean were taken randomly. Lentil was taken daily. Arthritis, headache, skin disease was more common. Statistical significant association was found between nutritional status and age group ($p<0.05$), education ($p<0.05$), occupation ($p<0.05$) and monthly income ($p\leq 0.05$). Half of the respondents suffered from underweight and most of them income was very low. Income generating capacity should be increased as well effective nutrition education program must be instituted.

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