

AYURVEDIC MANAGEMENT OF AMLAPITTA (GASTRITIS) - A CASE REPORT

^{*1}Dr. Pooja Rani, ²Dr. Pramod Kumar Mishra, ³Dr. Brahmanand Sharma and
⁴Dr. Julee Meena

¹MD Scholar, PG Department of Kaya Chikitsa, Dr. S.R. Raj. Ayurved University, Jodhpur,
Rajasthan.

²Associate Professor and HOD, PG Department of Kaya Chikitsa, Dr. S.R. Raj. Ayurved
University, Jodhpur, Rajasthan.

³Assistant Professor, PG Department of Kaya Chikitsa, Dr. S.R. Raj. Ayurved University,
Jodhpur, Rajasthan.

⁴MD Scholar, PG Department of Kaya Chikitsa, Dr. S.R. Raj. Ayurved University, Jodhpur,
Rajasthan.

Article Received on
19 August 2022,
Revised on 09 Sept. 2022,
Accepted on 30 Sept. 2022
DOI: 10.20959/wjpr202213-25737

*Corresponding Author

Dr. Pooja Rani

MD Scholar, PG
Department of Kaya
Chikitsa, Dr. S.R. Raj.
Ayurved University,
Jodhpur, Rajasthan.

ABSTRACT

Amlapitta is caused by vitiation of *Agni* in *Amashaya* region. Due to modern life style and food habits, *Amlapitta* is the most prevalent disorder in today's culture in a constantly expanding civilization. The main causative factors of *Amlapitta* are stress, spicy irritant food, oily foods, bakery foods etc. leads to disturbances in digestive system. Due to this pitta is imbalanced and results in *Amalpit*. *Amlapitta* has many of the same physical characteristics as hyperacidity or gastritis. The negative side effects of synthetic medications like proton pump inhibitors and H2 receptor blockers have led to a decline in their use. The ruling features of *Amlapitta* are *Avipaka* (indigestion), *Urodaha* (Burning in the chest), *Utklesha* (Nausea) *Aruchi* (Anorexia) and *Tikta-*

Amlodgara (sour and bitter belching) have been described in *Ayurvedic* classical texts. The following complaints were brought to OPD by a 38-year-old male patient - *Urodaha*, *Utklesha*, *Aruchi*, and *Praseka*, *Tikta-Amlodgara*. The vitals are normal during the examination. *Avipattikar Churana* 3 gm BD, *Kaamdudha Rasa* 1 tab. BD and *Kushmandavaleha* 5 gm BD were prescribed for the patient. Every fifteenth day, the patient

was instructed to follow up. The patient was instructed to follow dietary and lifestyle limitations in addition to taking medicine.

KEYWORDS: *Agni, Amlapitta, Annavaahasrotas*, hyperacidity.

INTRODUCTION

Due to present lifestyle and unawareness of ones *prakriti*, digestive disorders are very common in all age groups. A common functional disorder of the *Annavaaha Srotas* is *Amlapitta*, which is brought on by *Agnimandya*. *Agnimandya* occurs due to faulty dietary habits such as *Adhyashna* (eating after meal), *Vishamashana* (irregular quantity and time of diet) and wrong behavioral patterns such as *Vegadharana* (suppression of urges) which leads to *Dushti* of *Annavaaha Srotas* that causes number of disorders, *Amlapitta* is one of them.

The “*Amlapitta*” (Hyperacidity) is possessed by words- ‘*Amla*’ (Sour) in addition to ‘*Pitta*’ (Gastric Juice). Only *Pitta Vardhaka Ahara Vihara* can account for *Amlapitta*. The amount of *Pachaka Pitta* (gastric juice), which is increased in *Amlapitta* (hyperacidity), changes due to fermentation from its normal acerbic flavour (alkaline) to an excess of sour taste (acidic). The *Amlapitta* is thereafter sparked by the stimuli of terrible stress and solicitude (hyperacidity).

Amlapitta is a condition that develops when certain *Pitta guna*, such as *Drava* (fluidity) and *Amla guna* (sourness), become out of balance. At first, this causes *Vidagdhajirna* (indigestion brought on by an acidified chyle), but over time, it worsens and causes corrosion of the “*Sleshmadhara Kala*” of the “*Amashaya*,” the mucous membrane of the stomach and duodenum. Hydrochloric acid (HCL) when produced in large quantity or not utilized well in stomach region cause inflammation of stomach, called as gastritis. Increased HCL can damage the soft tissue lining of esophagus, stomach, duodenum etc.

Pitta dosha is elicited by excessive eating of *Amla, Katu, Ushna, Vidahiaharsevana*, and *Viruddhashana* as well as other spicy, sour, salty, greasy and difficult to digest foods. *Pitta* typically has *Katu rasa*, however *Amlapitta* results when *Katu rasa* is changed into *Amla rasa*. According to current medical knowledge, *H. pylori* infections, prolonged use of NSAIDS, aspirin, and other medications, such as iron preparations, severe physiological stress, such as burns, multi-organ failure, central nervous system damage, and autoimmune disease, are the main causes of gastritis.

There are a few allusions to *Amlapitta* in *Brihatrayee* of *Ayurveda*. The *Kashyapa Samhita* provides an explanation of *Amlapitta* illness. It has also been related by *Madhava Nidana*, *Bhavaprakasha*, *YogaRatnakara*, *Sharangdhara Samhita* and *Chakradutta*. All ailments, according to *Vagbhatta*, are brought on by *Mandagni*.

CASE REPORT

A 38-year-old man with the following symptoms visited the opd

- *Tikta-Amlodgara* (eructation with a bitter and sour taste)
- *Urodaha* (chest burning)
- *Utklesha* (nausea)
- *Aruchi* (Anorexia)
- *Praseka* (Excessive salivation)

History of present illness

Patient was asymptomatic before 2 years. Then gradually he had developed above symptoms like *Tikta Amlodgara* (+++), *Urodaha* (++++), *Aruchi* (+++) and *Utklesha* (+++) and diagnosed as *Amlapitta* disorder. He took treatment from many places but couldn't get satisfactory results. Since last year, he had intermittent symptoms that were virtually found five days weekly. He was resting, eating, and eating at odd hours because of their farming work.

Past history: No significant disease.

Family history: NAD.

Examination of the patient

Ashtavidha Pareeksha

Nadi (Pulse): *Pitta Pradhana*, *Vatanuubandhi*

Mala: *Apakva*, *Asamyaka Guda daha* (occasional) and *Baddha koshta* (occ)

Mutra (Urine): *Samyaka Mutrapravarti*

Shabda (Speech): *prakrtika* (normal)

Sparsh (Skin): *Snigdha*, *Mrudu*

Jivha (Tongue): *Sama* (coated), *Mukhpaka* (occasionaly)

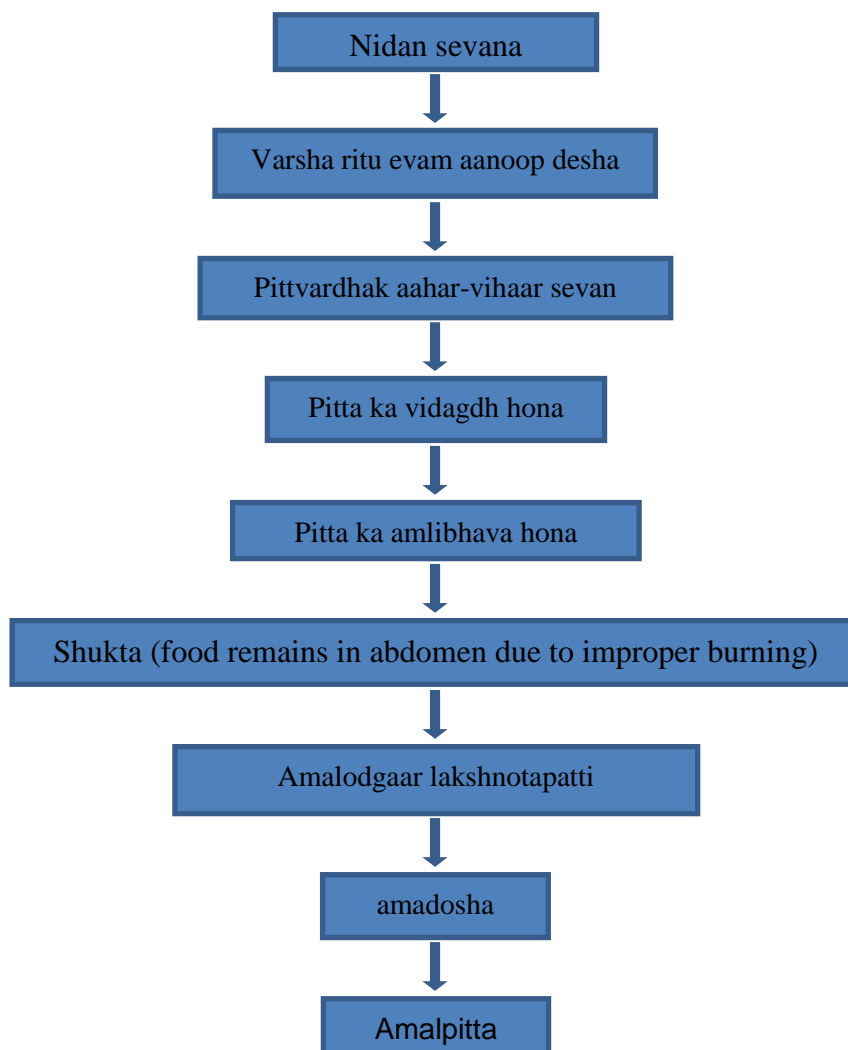
Druk (Eyes): *Prakruta*

Aakriti: *Samanya*

Prakrut Bala: *Madhyam*

General Examination**Pulse:** 76/min.**Respiration:** 18/min**Blood Pressure:** 122/82 mm of Hg.**Agni:** Mandagni, Abhyavaharana Shakti and Jarana Shakti decreased.**Koshtha:** Krura**Prakruti:** Pitta pradhana-vata**Udara pariskha:** Aadhmana, Udara kathinya

- **Nidan panchaka**

❖ **Hetu**❖ **Aahara-** Aniyamita, Atiamla, Atikatu aahar (spicy), Adhyashan, etc.❖ **Vihara** – Ratri Jagrana and Diwaswapna.**Samprapti**

Samprapti Ghataka**Dosha:** Pitta pradhana, Kapha anubandhi**Dushya:** Rasa dushti**Strotodushti:** Annavaha, Purishvaha, Rasavaha**Vyadhi avastha:** Sama avastha, Kapha utkelsha, Dosha urdhwa gati**Sadhyasadhyatva:** Kashta sadhya**Vyadhi marga:** Abhyantara**Vyadhi Nidana (Diagnostic Criteria)**

Burning sensation in the chest (*Urodaha*), Eructation with a bitter and sour taste (*Tikta-amlodgar*), Nausea (*Utklesha*), Indigestion (*Avipaka*), Loss of appetite (*Aruchi*), Exertion without work (*klama*) these are cardinal symptoms of *Amlapitta*.

Therapeutic Intervention

S. No	Name of Drug	Dose	Frequency and Anupana
1	<i>Avipattikar churana</i>	3 gm	after meals Twice a day with Madhu
2	<i>Kaamdudha Rasa</i>	1 tab	after meals Twice a day with lukewarm water
3	<i>Kushmaandavaleha</i>	5 gm	After meals twice a day with milk

Formulation of Intervention Medicine

Sr. No.	Ayurvedic Medicine	Ingredients	References
1.	<i>Avipattikar churana</i>	<i>Shunthi</i> (Zingiber officinale), <i>Maricha</i> (piper nigrum), <i>Pippali</i> (piper longum), <i>Haritaki</i> (Terminalia chebula), <i>Vibhitaki</i> (Terminalia bellirica), <i>Amalaki</i> (Embelica officinalis), <i>Mustaka</i> (Cyperus rotundus), <i>Vida lavana</i> , <i>Vidanga</i> ((Embelica ribes), <i>Ela</i> (Eletaria cardamomum), <i>Twak</i> (Cinnamomum zeylanicum), <i>Lavang</i> (Syzygium aromaticum), <i>Trivrit</i> (Operculina terpepethum) and <i>Sharkara</i> (Saccharum officinarum).	<i>Bhaishajya Ratnavali</i> , <i>Amlapitta</i> 25/29
2.	<i>Kaamdudha Rasa</i>	<i>Guduchi</i> (Tinospora cordifolia), <i>Prawal bhasma</i> , <i>Mukta bhasma</i> , <i>Shankh bhasma</i> , <i>Kapardik bhasma</i> , <i>Muktashukti bhasma</i> , <i>Swarngairik bhasma</i>	<i>Rasyogsagara</i>
3.	<i>Kushmaandavaleha</i>	<i>Kushmanda</i> (Benincasa hispida), <i>Amla</i> (Embelica officinalis), <i>Sharkara</i> (Saccharum officinarum).	<i>Sharangdhara Samhita</i> , <i>Madhyam Khanda</i> 8/22

The patient also received advice regarding dietary and lifestyle restrictions in addition to medicine. Patients were instructed to observe mealtimes, consume light fare, coconut water, items with cooling properties, vegetables such as white pumpkin and bitter ground, cucumber, fruits such as gooseberry, black grapes, fig, and dry grapes, a sufficient number of fluids such as amla juice and pomegranate juice, warm water, and get enough sleep or rest. The patient was instructed not to take *Amla*, *Lavana*, *Katu*, *Vidahiaharsevana*, and *Viruddhashana* throughout this treatment. Avoid consuming too many food items that are oily, heavy to digest, sour, spicy, or salty.

Follow-up

The patient was checked in with once every 15 days, up until a 45-day period. Mild relief was observed during the initial follow-up in *Tikta-amlodgar*, *Urodaha*, *Utklesha*, and *Praseka*. The patient was instructed to take the same medication as before. In the second follow-up, *Tikta-amlodgar*, *Urodaha*, *Utklesha*, and *Praseka* are fully cured and *Aruchi* was feeling a little better. The patient made no further complaints at the third follow-up. The patient was instructed to adhere to the dietary and lifestyle guidelines. Avoid doing a supine position and lying down right after eating, alcohol, tea, and coffee.

Mode of Action *Avipattikar Churana*: The drugs used in this preparation are frequently *Deepniye*, *Pachniye*, and *Agnivardhaka*, lessen the symptoms of vitiated *Pitta*, *Ama*, vitiated *Samana* *vayu*, and vitiated *Udana* *vayu*, which will aid the *Shamana* with elevated *Pitta* in the digestion of *Ama*. Due to its purgative effect *Avipattikar Churna* is employed in the *Shodhana* of *Amlapitta's* vitiated *Pitta*.

Mode of action of *Kaamdudha rasa*: The main action of drug is *Pittashaman*, *Deepniye*, *Daahaprashmna* and *Raktastambhana* properties and it is *Sheetviry* drug. *Guduchi* itself acts as *rasayana* and due to its *tikta*, *kashya* *rasa*, it alleviates the *pitta* hence much effective in *Amalpitta*.

Mode of Action *Kushmanda avaleha*: As *Kushmanda* has *laghu* *snigdha* *gunna*, *Madhura* *rasa*, *sheeta* *veerya* so this *Avelaha* has *Tridoshashamaka* property. It has been used as a *Naimittika Rasayana* (promoter of specific vitality in specific disease and *Amlapitta* is one of them).

DISCUSSION

Amlapitta has become a major issue in the current environment as a result of bad eating practices and routines. Continued use of an unsuitable food, routine, and habits might result in stenosis, anemia, duodenitis, chronic gastritis, malabsorption, and irritable bowel syndrome. The primary cause of disease is *Amlapitta* vitiated *dravya roop* of *Pitta*, and alterations in the way *agni* (appetite) functions result in a variety of illnesses. Many of us frequently experience a burning sensation in our chest and stomach. All of the medications used in the study were *Pitta shamaka*, which stabilize and balance the *Kapha* and *Pitta doshas*. In terms of *samana*, the majority of medications have *Tikta rasa*, which contains *Vayu+ Aakasha Mahabhuta*.

During a *Samprapti Vighatana*, the *Vayu Mahabhuta* removes the *Srotorodha* and this *Akasha Mahabhuta* dries up the *Dravtva* of *Dushita Pitta*. These medications address subjective symptoms as well as physical, mental, and emotional wellbeing.

RESULTS

After 45 days, *Amlapitta* displays full resolution. For the aforementioned symptoms, the oral treatments "*Kaamdudha rasa*," "*Avipattikar churana*," and "*Kushmaandavaleha*" are beneficial.

CONCLUSION

"*Kaamdudha Rasa*"— the *pitta's* vitiated state—improves the entire digestive process and leads to *Agni's* efficient operation. *Kaamdudha rasa's* *ruksha*, *laghu*, *tikta*, *kashaya* and *sheeta* qualities have the ability to reduce vitiated *pitta* and keep *Agni* functioning properly. Ingredients of *Kaamdudha rasa* are mostly *agnivardhak* & *amapachaka* properties. A more effective medicine for treating *Amlapitta* is "*Avipattikar Churana*," which has no negative effects. *Madhura*, *tikta*, *kasaya rasa yukta*, *Madhura vipaka*, and *Sheetavirya* are the active ingredients in this *churana*. The components of *Avipattikar churna* in *Amlapitta* balance out *vidagada pitta*.

REFERENCES

1. Madhavakara Madhavanidana – Part II Madhukosha Sanskrit comm. By Shri VijayRakashit and Shri Kantha Dutta *Amlapitta* Adhayaya 21st edition. Published by Chaukamba Sanskrit sansthana, Varanasi, 1993.

2. Madhavakara Madhavanidana- Vidhyotinihindi Comm. By Shri SudarshanShastri, AmlapittaAdhayaya 21st edi. Published by Chaukamba Sanskrit sansthana, Varanasi, 1993; Pg No. 170-172.
3. Charaka Samhita – By Dr Bramhanand Tripathi, chikitsasthana, Grahani Adhyaya, 15/45-47, chaukhamba prakashana, 1988.
4. Sushruta Samhita - Dr. Anantarama Sharma ed. Sushruta Samhita of Sushruta vol.-1, sutra 46/502, reprint ed. 2008, Chaukhambha Surabharati Prakashana, Varanasi.
5. Ashtangahrudaya – Sarvangsundartika, By Vd. P.V. Sharma, sutrasthan 8/26, 8th edition, 1998, chaukhmba prakashan, Varanasi.
6. Kaspyapa Samhita or Vrddha Jivaka revised by Vatsya with Sanskrit Introduction by Nepal Rajgura Pandit Hemraja Sharma with Vidhyotini Hindi commentary, Chaukhamba Sanskrit series office Khil Sthana, Chapter 16. Verse 1-14 Edi. Reprint, 2008; 335.
7. Bhavaprakasa of Sri Bhavamisra edited with Vidhyotini Hindi commentary by Bhisagratna Pandit Sri Brahma Shankar Mishra, Jaya krishan Das Haridas Gupta Chaukhamba Sanskrit Series Office. Chapter 10. Verse 20-22 Edi. Reprint, 2008; 298.
8. Chakradatta of Sri Chakra- panidata with the Vaidyaprabha Hindi Commentary and Notes Introduction by Dr Indradeva Tripathi, Edited prof. Ramanath Dwivedy, Chaukhamba Sanskrit Bhawan, Varanasi Edition, Reprint, 2011; 52: 295.
9. Chrak samhita chikitsaasthana Vol- 2nd, Prof priyavrat Sharma Chaukhamba Sanskrit sansthan Varanasi 7th Edition, 2003; 249.
10. Bharat Bhaishajya Ratnakara – 5/8261. / Bharat Bhaishajya Ratnakara – 3/4468.
11. Yogratnakara, Amlapittadhikara.
12. Markad UB, Shinde BT. To evaluate the efficacy of Dhanyakadi churna in the management of Amlapitta - A Case Study. International Journal of Research in Ayurveda and Medical Sciences, 2019.
13. Nibedita, M., Debasis, B., Seema Krishna, M., Vishnu Dutt, S., & Siddaram, *Arawatti. (2016). A CLINICAL STUDY ON AMLAPITTA AND ITS MANAGEMENT WITHCHHINNODBHAVADI GHANAVATI. International Journal of Ayurveda and Pharma Research.
14. Dr Santosh Achutrao Chate Professor- Ayurvedic Management of Urdhwaga Amlapitta: A Case Report (2019) Aayushi International Interdisciplinary Research Journal (AIIRJ).
15. Hanumanthu Kishore Kumar, C. H. Sridurga, and Dabbu Bhaskar Rao- Clinical efficacy of Baladi Manduram in the management of Amlapitta 2018.