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Effectiveness of Ayurveda treatment in *Urdhwaga Amlapitta* (Acid Peptic Disorder)- A Case Report

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Abstract:

Background: Amlapitta is a disease of annavaha strotas (gastrointestinal system) which is caused by vitiation of Agni (Digestive fire). This disease is most commonly seen in the today's society which occurs due to inappropriate dietary habits and lifestyle such as excessive intake of pungent, spicy food, habits like smoking, alcohol, stress which leads to disturbances in digestive system. As mentioned in Ayurveda literature, vitiation of piita occurs due to amla (sour) guna. If this pitta takes an upward course; then it is called as *Urdhwaga* Amlapitta, and it can be correlated with gastritis/Acid Peptic disease in modern medical science.

Material and Methods: A 26 years old female patient was presented with the chief complaints e. g. *Avipaka* (Indigestion), *Utklesha* (Nausea), *Vaman* (Vomiting) and *Adhman* (flatulence) for 2 years was

clinically diagnosed of as case UrdhwagaAmlapitta. This patient was treated with specific regimen-PanchatiktaGhrita, Avipattikar choorna and Kamdudhavati in prescribed dose for 30 days.

Observation and Result: As the treatment given here, the patient got significant relief in all her chief complaints.

Discussion: Due to *Pittaprakopak* and *Kaphaprakopakahar sevan*, both *kapha* and *pitta* vitiates. Due to this, there is vitiation of *Agni* and *agnimandya* occurs and hence there is indigestion of food, leading to formation of *Ama* and *amlapitta*. Therefore, *Deepan*, *Aampachak*, *pittakaphashamakchikitsa* was adopted in this patient.

Conclusion:

Above said *shamanchikitsa* in the Ayurveda plays a substantial role in the cure of *amlapitta*.

Keywords:

Amlapitta, Gastritis, Acid peptic disease, Panchatikta ghrit, Avipattikar choorna, Kamdudha yati.

Introduction:

Amlapitta is a disease which is commonly found in almost all parts of the world. It is seen in all ages, all classes and all community. In Ayurveda, it is belived that Agnimandya (indigestion) is the root cause of all diseases¹. This Agnimandya occurs due to Habitual, irregular diet schedule and activities which includes Adhyashan (eating after meal), Viruddhashan (incompatible food), Vishamashan (diet on irregular time and quality), Vegadharana (Suppression of natural urges) leads to vitiation of doshas. It also includes excessive intake of pungent, spicy food, irregular meal pattern and habits like smoking, alcohol and psychological stress. Due to above mentioned factors, there is dushti of annavaha strotas which leads to various disorders and amlapitta is one of them. It can be correlated with Acid Peptic disease /Gastritis in modern medical science. Acid Peptic disease (APD) is a collective term used to include several clinical conditions such as gastroesophageal reflux (GERD), Oesophagitis, gastritis, disease Peptic ulcer disease (PUD), and Zollinger-Ellison syndrome (ZES), APD is caused by overlapping but separate disease pathways that result in either excessive acid secretion or weakened mucosal defence². literature has not given any reference to amlapitta. In samhita kala, Acharya Charak and Sushrut have not mentioned it directly. It has been first described by Acharya Kashyapa and explains vivid descriptions

about Amlapitta with detailed treatment modalities³. Acharya Charak has described in Grahani (intermittent loose motions followed by constipation) as one of its lakshana (symptom)⁴. Acharya Kashyapa has accepted the involvement of three doshas in Amlapitta⁵, While Madhavkara has accepted the dominance of pitta in this disease⁶. Regarding the clinical definition, the disease has the following symptoms like Avipaka (indigestion), Klama (exhaustion), utklesha (nausea), Tikta-Amlodgara (eructation with bitter and sour taste), Gaurava (feeling of heaviness), Hritkantha daha (Burning sensation in the chest and throat), Aruchi (loss of taste), Shirashula (Headache) is termed as amlapitta. Amlapitta is one of the major diseases caused by lifestyle changes and its prevalence is increasing day by day.

The basic line of treatment for *amlapitta* consists of mainly *Shodhankarma* (Purification). But, practically patients are unable to do such treatments die to lack of time, busy schedule. Hence, we decided to prescibe the most appropriate and effective *Shaman chikitsa*.

In this study, a patient clinically diagnosed as a case of *Urdhwaga Amlapitta* was treated with specific regimen-*Panchatikta Ghrita*, *Avipattikar choorna and Kamdudha vati* in prescribed dose.

Material and Methods: Case report:

A 26 years old female was clinically diagnosed as a case of *Urdhwaga Amlapitta* presented with the chief complaints as mentioned in table no. 1 since 2 years. The patient is working in a Hospital and had a

history of eating excessive oily, spicy, fermented food, junk food, drinking coffee and also stress since last 2 years.

Progression of disease:

The patient was well before 2 years, then from 8-10 days gradually she had complained of above said complaints. The patient had received allopathic management

for two years; but the relief was temporary and also had some adverse effects like headache and dizziness. After a long time, the patient opted for Ayurveda treatment for her problem and visited *Kaychikitsa* OPD R. T. A. M, Akola, Maharashtra.

Table no. 1: Chief complaints:

Sr. no.	Name of Chief Complaints	Duration
1.	Avipaka (Indigestion)	
2.	Utklesha (Nausea)	8-10 days on and off
3.	Vaman (Vomiting)	
4.	Bhram (Giddiness)	
5.	Shirashool (Headache)	
6.	Hritkantha daha (Retrosternal burning)	3
7.	Adhman (Flatulence) N J-R A S	

History of the Patient:

The detailed history of the patient is given as follows:

- Family history: No significant family history was found
- Medical history: No known allergies.
- H/o Surgical removal of fibroadenoma (bilateral) before, no

other surgical history related to disease was obtained.

Clinical Findings:

Ashtavidha Parikshana of the patient is given in table no. 2

Table no. 2

Sr. no.	Head	Finding	
1.	Nadi	78/min, Regular, Pittapradhan	
2.	Mala	Nirama, once a day	
3.	Mutra	Samyak, 4-5 times 1-2 times at night	

4.	Jivha	Sama
5.	Shabda	Spashta
6.	Sparsha	Anushnasheeta
7.	Drik	Prakrita, no pallor, no icterus
8.	Aakruti	Madhyam

Samprapti Ghatak:

- Dosha- Pachak pitta, Kledak kapha, Saman vayu
- Dooshya- Rasa, Purusha
- Agni. Mandagni
- Ama. Sama
- Strotas. Rasavaha, Annavaha, Purishvaha

Specific investigation- Patient has done Gastroscopy in 2020 and the findings are - Gastritis with Oesophagitis and duodenitis. Diagnosis- Based on Patient's history, assessment of clinical features; the clinical diagnosis made was *Urdhwaga Amlapitta* (Acid Peptic Disorder)

Therapeutic intervention:

J-RAS

The line of treatment adopted *shamanchikitsa* in this patient is shown on table no. 3.

Examinations-

Epigastric tenderness is present.

Table no. 3: Drug profile

Tab.	Table no. 5 : Drug prome					
Sr.	Internal medication/Drug	Dose	Time of admistration	Anupana	Duration	
1.	PanchatiktaGhrita Nimba (Azadirachta indica) Patol (Trichosanthes dioica) Kantakari (Solanum surattense) Guduchi (Tinospora codifolia) Vasa (Adhatoda vasciaca) Ghrita	15 ml	Rasayankala (Morning 8:30 am)	Lukewarm water	30 days	
2.	Avipattikarchoorna (Ayurvedic prop. medicine)	3 gms BID	Apankala (1 hour before meal)	Lukewarm water	30 days	

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3.	Kamdudhavati (Ayurvedic	250mg (2	Vyan- udan	Lukewarm	30 days
	prop. medicine)	tab. BD)	(After meal)	water	

Observation and Result (Outcome of Therapy):

Avipaka (Indigestion), Utklesha (Nausea), Vaman (Vomitting)improved from severe to moderate whereas, Bhram (Giddiness), Shirashool (headache), Hritkantha daha (Retrosternal burning)improved from moderate to mild after 7 days of tratment. After 15 days of therapy Avipaka (Indigestion), Utklesha (nausea), Vaman

(Vomitting), Adhman (flatulence) improved to mild and symptoms such as Bhram (Giddiness), Shirashool (headache), Hritkanthadaha (Retrosternal burning) were completely relived. Further same line of treatment was continued and after 30 days patient got complete relief from all above symptoms of amlapitta (APD). After this treatment only Kamdudha vati is advised to take

SOS.

Table no. 4

Sr. no.	Name of chief complaints	Day 1	Day 7	Day 15	Day 30	Day 45 (follow up after treatment)	Day 60 (follow up after treatment)
1.	Avipaka (indigestion)	+++		+110	0	0	0
2.	Utklesha (nausea)	++	++	J-K A S +	0	0	0
3.	Vaman (vomitting	+++	0	0	0	0	0
4.	Bhram (Giddiness)	++	+	0	0	0	0
5.	Shirashool (Headache)	++	+	0	0	0	0
6.	Hritkanthadaha (Retrosternal burning)	+	0	0	0	0	0
7.	Adhman (Flatulence)	++	+	+	0	0	0

Discussion:

Ina present case study, the causative factors found are excessive intake of *kshar* and *amla dravya*, hurry, worry, curry which are characteristic causes of APD were present in the patient. In this case study, a patient clinically diagnosed as a case of

UrdhwagaAmlapitta (APD) was treated with specific regimen-Panchatikta ghrit, Avipattikar choorna, Kamdudha vati in prescribed dose for 30 days. Avipattikar choorna and Kamdudha vati are the drugs in Amlapittarogadhikar. In Avipattikar choorna, the drugs are Madhur Tikta,

Kashaya, katu rasyukta and Madhur vipaka and sheetavirya. Due to vidagdha pitta, there is Hritkantha daha and it is relieved by pittashamak rasa, virya, vipaka present in it. Shunthi, marich, pippali acts as a Deepan and pachana which relieve symptoms like

Avipaka (Indigestion) and Utklesha (nausea)⁷.

Avipattikar choorna contains Nishotha which expells excessive pitta from Mahastrotas through virechana.

Table no. 5: Ingredients of Avipattikarchoorna⁸ and their Properties:

Sr. no.	Drugs	Ras	Vipaka	Veerya
1.	Shunthi (Zingiber officinale Roxb.)	Katu	Madhura	Ushna
2.	Marich (Piper nigrum Linn.)	Katu	Katu	Ushna
3.	Pippali (Piper longum)	Katu	Madhura	Anushna sheeta
4.	Amalaki (Emblica officinalis)	Pancharas (except	Madhura	Sheeta
5.	Haritaki (Terminalia chebula)	Pancharas (except lavana)	Madhura	Ushna
6.	Bibhitak (Terminalia belerica)	Kashaya	Madhura	Ushna
7.	Mustak (Cyperus rotundus)	Katu, Tikta, kashaya	Katu	Sheeta
8.	Vidanga (Embelia ribes)	Katu	Katu	Ushna
9.	Ela (Elettaria cardamom)	Katu, Madhura	Madhura	Sheeta
10.	Tejpatta (Cinamonam tamala)	Katu, Tikta, Madhura	Katu	Ushna
11.	Nishotha (Operculina terpethun)	Katu, Tikta	Katu	Ushna
12.	Lavanga (Syzygium aromaticun)	Katu, Tikta	Katu	Sheeta
13.	Sarkara	Madhura	Madhura	Sheeta
14.	Vidalavana (salt)	Lavan	Katu	Ushna

Avipattikar choorna is given in Apankala for pittastravan and vatanuloman purpose.

Kamdudha vati acts an antacid and suppresses the vidagdha pitta and also acts as Deepan and panchana. Pravala and Mukta which have deepana (appetizer) and

pachana (digestive) properties and also maintains normalcy of *Agni* (Ghosh and Baghel, 2011). *Pravala* , *Mukta*, *Suvarnagairik*, *Shankha bhasma* having *sheetvirya* and due to this property, *pittashamana* occurs.

Table no. 6: Ingredients of *KamdudhaVati*⁹ and their Properties

Sr. no.	Drugs	Ras	Vipaka	Veerya
1.	Suvarnagairik (Red ochre)	Madhur, Kashaya	Katu	Sheeta
2.	Mukta bhasma	Madhur, Kashaya	Madhura	Sheeta
3.	Praval bhasma (coral calx)	Madhur, kinchit amla, Kashaya	Madhura	Sheeta
4.	Shankha bhasma (Incinerated conch shell)	Tikta VURIOG	Madhura	Sheeta
5.	Muktashukti bhasma	Madhura A S	Madhura	Sheeta
6.	Kapardik bhasma	Katu, Tikta	Madhura	Ushna Sheeta
7.	Guduchisatva (Tinospora cordifolia)	Tikta, Kashaya	Madhura	Ushna

Pachatikta ghrita is used in this particular patient for specific reason. Basically, the patient is suffering from Amlapitta since 2 years and there was rukshata along with Pittavriddhi and vatanuloman was also hampered. so, to counter this effect, Panchatiktaghrita was the best option as it has Tiktarasa dominanace in ghrit form helps for pittashaman and snigdhabhava of ghrita reduces the rukshata and promotes

vatanulomana. Not only this, ghrita is considered as Medhya. So, in order to suppress the stress, Panchatiktaghrita good act and act on Manovahastrotas also. Hence, Panchatikta ghrita in Rasayankala is used. After 30 days of regimen, the medicine was stopped but follow up was taken for next month and no recurrence was found in any of the symptom.

Table no. 7: Ingredients of PanchatiktaGhrita¹⁰ and their Properties

Sr. no.	Drug	Rasa	Vipaka	Veerya
1.	Nimba (Azadirachta indica)	Tikta, Kashaya	Katu	Sheeta
2.	Patol (Trichosanthes dioica)	Tikta	Katu	Ushna
3.	Kantakari (Solanum surattense)	Tikta, Katu	Katu	Ushna
4.	Guduchi (Tinospora cordifolia)	Tikta, kashaya	Madhura	Ushna
5.	Vasa (Adhatoda Vasciaca)	Tikta, Kashaya	Katu	Ushna

Conclusion:

From the above observation, it is clear that, this specific regimen which was combination of *Panchatikta ghrita*, *Avipattikar choorna* and *Kamdudha vati* (internally) in the prescribed dose for one month provided significant relief in the management of symptoms of *Urdhwaga Amlapitta* (Acid peptic disorder). No recurrence of symptoms upto next 1 month.

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