

# Literary Review on *Chikitsa* of *Amlapitta*

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**Abstract:** *The life style of today is absolutely altered or modified, within the last two decades, when compared with the past. Likewise, are the habits of food intake as well. Most of the people are not able to compromise much in their food habits. They have awful food habits like irregular intake, eating of smoked foods, excessive use of spices, chillies and masalas, intake on inappropriate time, using processed foods, having food with preservatives etc. Similar is the psychological imbalances observed in the present - day community and the relation with food. It leads to conditions like dyspepsia, peptic ulcer and other major disorders of the GI tract, in the due course. Amlapitta is one of the most common disease. It is mainly caused due to aggravation of pitta. It can be correlated with hyperacidity of Modern Science. According to prevalence studies 50% of population is affected by it. Modern treatment mainly includes use of antacids, H2 blockers and PPIs which has limitations in management. Ayurveda mainly emphasizes on prevention of disease. Here the main objectives are to introduce Amlapitta as a disease by detailing of its Ayurvedic Management*

**Keywords:** Amla - Pitta, Hyper - Acidity, Pitta Prakopa, Chikitsa

## 1. Introduction

Due to Continuous alterations in the food and life style, more than a few people are suffering from a number of disorders of digestion and the resultant clinical conditions. The most common abdominal condition experiencing in the primary health care, is dyspepsia. <sup>[1]</sup> Gastric dyspeptic disorders are mainly caused by the unfriendly dietetic pattern, mental stress and strain, mishandling of certain drugs etc. which are directly or indirectly affecting our digestion or its mechanism. <sup>[2]</sup> Ayurveda has given utmost importance to optimal dietary regimen and its variation as per the season, *Agni, Prakriti*, type of the in taken food and the disease condition. <sup>[3]</sup> The unaccustomed variations in the same, may lead to the diseases of the *Koshtha* or the GI tract. Depending on the three *Doshas*, which gets disturbed with the pathology, the condition or the disease varies and is named accordingly, in the classics.

Charak and Kashyap have clearly discussed that the *GrahaniDosha* and *Amlapitta* occurs in the person, who could not verify the temptation of food in their life. <sup>[4]</sup> The *Nidana* or the etiological components create *Agnimandya* or depleted digestive mechanism and thus *Ajirna* is developed and leads to the formation of *Amavisha* or substances which are not supportive in nature or even harmful to the body. This *Amavisha* mixed with the *Doshas*, mainly the *PittaDosha* and gets accumulated in the *Amashaya*, then gradually resulting in the diseases like *Amlapitta*. <sup>[5]</sup>

As per the available studies, more than 50% of the people with Hyper - Acidity symptom seldom consult a physician, although they may undertake over the counter medications, on the arousal of the symptoms for the relief, making the computing of the exact prevalence of the condition, as composite. Significant job absenteeism and disability are reported among these, than the people without these symptoms. The most reported or dominant cause of hyper - acidity in the society are the Functional Dyspepsia (FD) and the Irritable Bowel Syndrome (IBS). The prevalence of FD

has noted to vary between 11 - 29.2% as per available studies. <sup>[6]</sup> Currently, the possibilities of available pharmacological agents in the management of the FD are still having its own limits; however, the experience of administering prokinetics, tricyclic antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs), Proton Pump Inhibitors (PPIs), and other several alternative techniques have been accumulated and tried as well. <sup>[7]</sup> The present available protocols, have their own limited areas in the studied efficacy. World is looking ahead to the alternative systems for their contribution to these patients, so as to provide them with a superior prospective and Ayurveda is the best answer for it.

## Aim and Objective

To detailed review of Ayurvedic Management of *Amlapitta*

## 2. Material & Method

References regarding *Amlapitta* and its *Chikitsa* were collected from *Bruhatrayi, Laghutrayi* Modern textbooks and Research articles and analysed them.

## 3. Discussion and Conclusion

Ayurveda has three basic categories of *Chikitsa* regarding the management of any disease. The combinations of these are used in the treatment of the condition, accordingly.

### 1) *Nidana Parivarjana*

Removal of all the alleviating factors of both *Ahara* and *Vihara* which are responsible for causation of the disease, is to be performed.

### SamanyaNidana

*Acharya* Charak is narrating the mechanism of digestion and absorption very effectively, while explaining the *Chikitsa* of *Grahani*. This is because *Grahani* is such a condition where, the proper transformations of *Dhatu* is affected. Chakrapani says that by the term *Grahani*, the *Doshas* of *Agni* located in

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the *Grahani*, is being explained. [8] Here the transformation and metabolism of the *Dhatu*s are dealt with seriously also with the stage of metabolism of the food. The etiological factors for *Agnidushti* are mentioned thereafter.

Dietary habits	<i>Abhojana, Ajeerna Bhojana, Atibhojana,</i>
Alteration in food quality	Excess of <i>Guru, Shita, RukshaBhojana, Dushta</i>
Unused	<i>AsatmyaBhojana</i>
Iatrogenic	<i>Snehana, SodhanaVibrama or unideal Paschat</i>
Convalescent	<i>Karsana</i> resulting from other <i>Vyadhis</i>
Seasonal	Alteration in the <i>Desa, Kala, Ritu</i>
<i>Vega</i>	Dharana of the <i>Vegas</i>

These all leads to alteration in the functioning of *Agni*, altered digestive mechanisms and the resultant disorders like *Ajeerna* or in the later stages, diseases such as *Amlapitta*. [9] The resulting *Ajeerna* or *Amadosha* is acting as a toxin or the causative factor, for the choice of resultant diseases. If it does not get subsided at that level, the pathogenesis progresses further. The *Ama* or toxin when associated with *Pitta*, results in conditions like *Daha, Trishna, MukhaRoga, Amlapitta* etc. [10]

It is to be advised to the patient to avoid such type of factors which are responsible for. Even in the days of *Kashyap, Acharya* advises to avoid the food materials which are processed. While explaining the *Sadhyasadhyata*, he adds that the diseases like *Amlapitta* becomes *Sadhya* in those who are not greedy towards their food habits. [11] The ancient people were not as careless as we people, as far as the food habits are concerned. Still the restrictions are mentioned by them, to be followed. That points towards the seriousness of dietary restrictions, in GI conditions like *Amlapitta*, in their management.

## 2) *Apakarshana*

*Apakarshana* or *SodhanaChikitsa* is the unique methodology of Ayurveda as far as the approaches of all the medical systems are considered. [12] *Sodhana* is the management protocol for the *Prabhoota Dosh*a in any condition. While selecting the concerned *Sodhana*, mainly 3 factors are to be considered. i. e., the status of *Dosha*, localization of the *Doshas* or the *Sthanasamshraya* and *Bala* of the patient. In *Amlapitta*, even though it is a *Pitta* dominant disorder, the *Sthanasamshraya* is in the *Amasaya*, which is the *Kaphasthana*. The primary route of *Sodhana* mentioned in *Vyadhi* affecting the *Amasaya* is the *Urdhwa Sodhana, Vamana*. The *Sodhana* which eliminates the *Doshas* through the easiest route is always considered as the ideal one. [13]

### *Vamana and Virechana in Amlapitta:*

*Kashyap* has described *Vamana* as the first line of treatment, followed by *Langhana* and *LaghuBhojana*. [14] i. e., even though the *Amlapitta* is a *Paittikadisease*, the most effective *Sodhana* is *Vamana*. *Kashyap* opines that just like a tree with its trunk and branches are destroyed by striking the blow at its root. Hesays that, peculiarly for the chronic conditions; *Vamana* is to be done definitely. He also gives another example for the relevancy of *Sodhana*. If we are pouring pure milk in a vessel in which we have already kept *Takra* and not properly cleaned, the milk even though fresh, is having a chance to become fermented. In fact, the *Shamana* drugs applied after doing *Vamana*, will have the

expected effect. The *Amashaya* with the *Doshas* associated with the *Ama* is defective in absorbing the drugs even though *Shamana* drugs are being advised, without proper *Shodhana*. Such a significance is there for *Shodhana*, in the context. As per the *Chakradatta* and *Yogaratanakara*, the second line of treatment is to perform *Mridu virechana*. [15] [16] Drugs used for *Vamana* are *Lavanambu, Sukhosna - Dugdha, Ikshurasa, Madhudaka* or *Tiktadravyas* and for the *Virechana* *Triphala, Trayamana, Katuki* along with *Trivrit* is mentioned. [17]

According to *Bhavaprakasha*, the decoction of *Patola, Nimba*, and *Madanaphala* with *Saindhava Lavana* should be used for *Vamana* in *Amlapitta*. [18] *Nishotha Churna* and *Amalaki* are prescribed for the *Virechana*. *AvipathiChoorna* is one of the most commonly used *Yogas* for *Virechana*, which is mentioned by *Vagbhata*. [19]

### *Basti in Amlapitta*

The next regimen consists of administration of *Anuvasana* followed by *Asthapana*, in the chronically afflicted patients. The drugs such as *Tiktaka Gritha, Indukanta Gritha, Aragwadhadi Gana Gritha* etc. are usually used for the purpose of *Anuvasana*. *Madhuyashtyadi Taila* and *Ksheerabala Taila* are also used in this regard. [20] After *Anuvasana*, in chronic cases, *Nirooha* is mentioned. Usually, *Ksheeravasthi* is the ideal one to be administered here. [21] Instead of plain *Ksheera*, *Ksheera Kwathas* with *Guduchyadi Gana, Tiktaka Kwatha, Indukanta Kwatha, Aragwadhadi Gana* is usually used. Plain *Gritha* is observed to cause *Utklesha* in these patients.

### *Raktamokshana in Amlapitta:*

*Yogaratanakar* added *Raktamokshana* as a tool if *Amlapitta* is not cured by both of the *Sodhana* procedures, *Vamana* and *Virechana*. [22] *Vaghat* explains the diseases occurring due to *Raktadushti*. Even though, *Amlapitta* is not mentioned as such, the symptoms resembling the disease are mentioned as *Katu* and *AmlaUdgara* may happen in one with the vitiation of *raktha*. [23] Moreover in some of the patients with *Amlapitta*, symptoms of *Rakta DhatuDushti* are also observed. So, in such a condition, *Raktamoksha* is having significant role, the technique being decided by considering all the related factors.

### 3) *Prakritivighata*

*Prakritivighata* refers to the use of drugs which suppress the elevated *Dosha*, such treatment is also termed as the *Shamana* therapy. [24] *Kashyap* opines that after *Vamana*, if the *Doshas* persist, the physician should resort to the *Shamana Chikitsa* with the aid of *Laghu Bhojana, Shamana* and *Pachana*. It is forbidden by *Acharyas* to give *Drava Aushadhi* if the *Doshas* are in condition of *Utklesha*, because if *Vamana* is not done, the *Drava Aushadhi* will not be metabolized. When the *DoshaUtklesha* has reduced with the help of *Ahara* and *Vihara*, physician can advise *Ama Pachana* and *Bhedana* drugs. Once the *Doshas* have been expelled and *Amashaya*s devoid of vitiated *Doshas*, the physician should direct the patient to take care of the *Agni*. The *Doshas* lodged in the *Pakvashaya*, is removed with the help of *Sansrana* drugs, which is selected as per the condition. Mainly *TiktaRasa, Laghu, Snigdha Guna, Katu* or *Madhura Vipaka* and *Sheetaveerya* drugs are advocated by

all the *Acharyas*, for *Amlapitta*. Use of *Shamanadrugs* opposite to quality of *Pitta* and to an extent *Kapha*, is beneficial for *Amlapitta*.

We have to consider the associative *Dosha*, while prescribing the *Shamana* drug. We can use combinations like *Drakshadi Kwatha* in *Vata – pitta* condition, *Guduchyadi Gana* in *Kapha - Pitta* condition and *Tiktaka Kwatha* for *Pitta* condition. Likewise, we can select *GrithaYogas* as well. *Indukanta Gritha* is ideal for *Vata - Kapha* condition, *Mahatiktaka Gritha* for *Vata - Pitta* condition and *Aragwadhadhi Gritha* for *Pitta - Kapha* condition. The drug of any format is usually selected according to the *Dosha*. *Chooranas* like *Avipattikar* can be used both as a *Shamana* as well as a *Shodhana* drug. The *Yogas* can also be used in a different format, if the condition demands. The *GhrithaYogas* can be administered in the form of *Kwatha*, if we know that *Ghritha* must not be administered, but the combination is ideal for use.<sup>[25]</sup> Foreg. *Mahatiktaka Yoga* when administered in the *Ghritha* form is much more *VataPitta* in action, while if it is being administered as *Kwatha*, it is more *PittaKapha Shamana* in action.

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