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Ayurvedic management of *Amlapitta* - A Case Report

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ABSTRACT

Amlapitta is one of the most prevalent diseases in today's culture. It can be found in people of diverse ages, socioeconomic backgrounds, and communities. *Amlapitta* is the most common illness in the modern period. Because of indulgence in incompatible food habits and activities, *Amlapitta* is the most common disorder in today's fast increasing culture. Materialistic lifestyles drive people to lead hectic, stressed lives with little regard for good eating habits. Hyperacidity is a condition that occurs when the stomach produces too much acid. The defining characteristics of *Amlapitta* are described in classical Ayurvedic books as *Avipaka* (indigestion), *Urodaha* (chest burning), *Utklesha* (nausea), *Aruchi* (anorexia), and *Tikta-Amlodgara* (sour and bitter belching). A 38-year-old male patient arrived at the outpatient department complaining of burning in his chest, sour eructation, anorexia, etc. Vitals are normal at the time of the examination. Based on this, the patient was treated with *Kamadudha rasa*, *Avipattikar churana*, *Hingavashtak Choorna*, and *Sutshekar Rasa*. It was advised to the patient to follow up every fifteen days. The patient was instructed to keep to dietary and lifestyle guidelines in addition to taking medication.

Key words: *Amlapitta*, hyperacidity, acidity.

INTRODUCTION

The traditional medicinal science of Ayurveda is founded on its own fundamental principles. According to *Ayurveda*, the primary factor in the body's general metabolism, which promotes growth and development, is *Agni*, or digestive fire. Both the preservation of health and the development of diseases have been linked to normal and abnormal

Agni functioning, respectively. Here, "*Agni*" refers to elements that have a high concentration of the fire element i.e., *Agni Mahabhuta* (which is responsible for digestion, metabolism, and transformation). *Agni* can become affected by an unbalanced diet, an unpredictable lifestyle, and other factors. *Agnimandya* is the fundamental cause of all ailments according to Ayurveda. The main cause of *Agnimandya* is faulty dietary habits such as *Adhyashana* (eating after meal), *Vishamashana* (diet on irregular time and quantity), and incorrect behavioural patterns such as *Vegadharana* (Suppression of urges), which causes vitiation of *Doshas* (fundamental bodily bio-elements), either independently or synonymously. Digestive diseases are very widespread in all groups and are also highly disregarded difficulties due to today's lifestyle.

Amlapitta is classified as a *Pitta Pradhana Vyadhi* (illness with a predominance of *Pitta*). Overindulgence in etiological variables, such as poor lifestyle choices, promotes vitiation of the *Vata Pitta Dosha*. *Pitta*, in conjunction with *Vata* or *Kapha*, weakens the

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JatharAgni component, i.e., *Jatharagnimandya*. Consumed food becomes *Vidagdha* (undigested) during this condition. It eventually becomes acidified, or *Shukta*, and remains in the stomach for an extensive period of time. *Vidagdhajirna* (indigestion caused by acidified chyle) emerges at this stage, which is a premonitory symptom of the disease *Amlapitta*. Additionally, vitiated *Pitta* combines with *Shukta*, resulting in *Pitta Amavisha Sammurchhana* (a combination of unmetabolized *Rasa* and undigested food with *Rasa*). *Amlapitta* is the medical term for this condition. *Ayurvedic* writings describe two varieties of *Amlapitta*: *Urdhwaga* and *Adhoga Amlapitta*. The pathology of *Urdhwaga Amalpittha* is caused by vitiated *Pitta* and *Kapha*. Excessive ingestion of *Amla*, *Katu*, *Ushna*, *Vidahiaharsevana*, and *Viruddhashana*, spicy, sour, salty material, greasy, and difficult to digest aliments, elicits *Pitta Doshha*. *Pitta* is normally associated with *Katu Rasa*, however when *Katu Rasa* is changed into *Amla Rasa*, *Amlapitta* results.

According to modern medical science, the most common causes of gastritis are *H. pylori* infections and prolonged use of nonsteroidal anti-inflammatory drugs (NSAIDs), aspirin, and other drugs, such as iron preparations, severe physiological stress, such as burns, multi-organ failure, central nervous system trauma, and autoimmunity. Heartburn is the most prevalent symptom of hyperacidity, and it is characterised by a burning sensation in the chest that radiates towards the mouth. Heartburn is accompanied by a sour taste in the back of the mouth due to acid reflux into the oesophagus, with or without refluxate regurgitation.^[1] Acid reflux that occurs more than twice a week is considered hyperacidity.

CASE REPORT

A 38-year-old male patient came in OPD with the following symptoms

- *Tikta-Amlodgara* (eructation with bitter and sour taste)
- *Urodaha* (Burning in the chest)
- *Utklesha* (Nausea)
- *Aruchi* (Anorexia)

- *Gauravta* (Feeling of heaviness in abdomen)
- *Avipaka* (indigestion)

History of Patient

History of present illness

Patient has been experiencing the symptoms listed above for a year. He had been suffering with *Amlapitta* for a year. He did not get relief despite numerous treatments.

Complaints were *Tikta Amlodgara* (+), *Urodaha* (+++), *Aruchi* (+++), *Utklesha* (++) , *Avipaka* (+++), *Gauravta* (++)

His symptoms were on and off.

History: No major illness.

Family History: NAD

Examination of the patient:

Ashtavidha Pareeksha

- *Nadi* (Pulse): Dominance of *Pitta dosha* with *Vata*.
- *Mala* (Stool): Incomplete digestion, constipation (occasional)
- *Mutra* (Urine): Normal
- *Shabda* (Speech): Normal
- *Sparsh* (Skin): oily, soft or gentle
- *Druk* (Eyes): normal
- *Akruti*: *Mandya*
- *Jivha* (Tongue): coated, *Mukhapaka* (occasional).
- *Bala*: medium

Diagnosis - *Amlapitta*.

General examination

- Pulse: 76/min.
- R.S: normal
- B.P: 126/88 mm of Hg.
- *Agni*: *Mandagni*
- *Abhyavaharan Shakti* (digestive power): decreased
- *Jarana Shakti* (metabolic power): decreased

- *Koshtha: Krura* (hard)
- *Prakruti: Predominantly Pitta* with *Vata* influence
- *Udara Pariskha: Adhmana* (bloating), *Udara Kathinya* (Abdominal rigidity or hardness)

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: Abhyantar.*

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*)
- Heaviness in abdomen (*Gauravta*)
- Exertion without work (*klama*) these are cardinal symptoms of *Amlapitta*.

Therapeutic intervention:

SN	Name of drug	Dose	Frequency and Anupana
1.	<i>Sutshakar Rasa</i>	1 tab. after meals	Twice a day with Madhu.
2.	<i>Avipattikar Churna + Giloy Satva + Shankh Bhasma</i>	3 grams after meals	Twice a day with lukewarm water.
3.	<i>Hingavashtak Choorna</i>	3 grams after meals	Twice a day with lukewarm water
4.	<i>Kamadudha Rasa</i>	500 mg bd after meals	<i>Koshna Jala</i>

This *Amlapitta* patient's improper digestion resulted in the formation of an inappropriate *Rasa Dhatu*. *Giloy Satva*, a *Rasayan* medication, was therefore added first. *Guduchi* also lowers *Samta*. Additional medications used in treatment, such as *Kamadudha Rasa*, *Hingavashtak Choorna*, and *Avipattikar Choorna*, lower *Dosha Samata* and cause *Anulomana* and *Shamana* of *Dosha*. *Shankha Bhasma* aids *Deepana*, *Pachan*, *Pittahara*, and *Dravata*.

Criteria for assessment:

The improvement of *Amlapitta* signs and symptoms both before and after treatment served as the evaluation criterion. Cardinal symptoms and signs were scored for this purpose.

Gradation Assessment of Subjective Parameters

1. Amlodgara

- No belching - 0
- Feeling of belching with no sound - 1
- Feeling of belching with mild sound - 2
- Feeling of belching with severe sound - 3

2. Daha

- No burning sensation (no retrosternal discomfort) - 0
- Sensation of warmth on throat occasionally - 1
- Burning sensation on throat and chest after a mild oily/spicy food - 2
- Feeling of burning sensation always irrespective of the diet - 3

3. Gaurava

- Normal - 0
- Feeling of heaviness in morning - 1
- Feeling of heaviness in morning and evening after food - 2
- Feeling of heaviness always - 3

4. Utklesha

- No nausea - 0

Mild nausea - 1

Severe Nausea - 2

Severe nausea with vomiting - 3

5. Avipaka

No indigestion - 0

Unable to digest mild fatty food - 1

Unable to digest 3-course meal (breakfast, lunch and dinner) - 2

Unable to digest any kind of food - 3

6. Aruchi

Normal - 0

Only takes lunch and dinner - 1

Loss of interest in lunch or dinner - 2

No desire to take food - 3

Gradation Assessment of Objective Parameters

1. Epigastric tenderness

No tenderness - 0

Mild tenderness and tolerable - 1

Moderate tenderness - 2

Severe tenderness and not allowing to touch - 3

2. Physical Examination of the regurgitated sample

No regurgitation - 0

Regurgitation of only little amount (about 5 ml) of gastric juice - 1

Regurgitation of excess amount of gastric juice with no food content - 2

Regurgitation of gastric juice with food content - 3

Pathya

Yava, Godhuma, Mudga, old rice, boiled and cooled water, Sharkara, Madhu, Sattu, all bitter and light vegetables, Vriddha Kushmanda, Dadima, Patol³.

Apathya

Seasame, blackgram, garlic, curd, Amla and Katu Padarth, Guru Anna, oily and spicy food, fermented foods.⁴

DISCUSSION

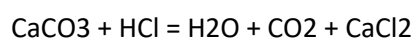
Amlapitta has become a major issue in today's society as a result of bad eating practices and routines. Continued use of an unsuitable food, routine, and habits might result in stenosis, anemia, duodenitis, chronic gastritis, malabsorption, and irritable bowel syndrome. Many people frequently experience a burning sensation in their chest and stomach. All of the medications used in the study were *Pitta Shamak*, which stabilize and balance the *Kapha* and *Pitta Doshas*. In terms of *Shamana*, the majority of medications have *Tikta Rasa*, which contains *Vayu + Akasha Mahabhuta*. The *Vayu Mahabhuta* eliminates the *Srotorodha* during a *Samprapti Vighatana*, and this *Akasha Mahabhuta* dries up the *Dravtva* of *Dushita Pitta*. These medications treat subjective symptoms and promote good physical, mental, and emotional health.

Mode of action of Sutshekhar Ras²

An essential Ayurvedic medication, *Sutshekhar Ras* balances *Pitta Dosha* and relieves symptoms such as heartburn, nausea, vomiting, abdominal pain, epigastric tenderness, hiccups, fever, headaches, and breathing difficulties. "*Sutshekhar Rasa*"- the *Pitta's* vitiated state - improves the entire digestive process and leads to *Agni's* efficient operation. *Sutshekhar Rasa's* *Ruksha, Laghu, Katu*, and *Ushan* qualities have the ability to reduce vitiated *Pitta* and keep *Agni* functioning properly. Ingredients of *Sutshekhar Rasa* are mostly *Agnivardhak* & *Amapachak* properties.

Mode of action of Shankha Bhasma

This is a Calcium carbonate compound. This directly reacts with gastric HCl and neutralise them, so this acts as potent antacid.



Shankha Bhasma, being *Sita Virya*, alkaline in nature, *Grahi* (absorption enhancing), it is indicated in gastrointestinal disorders like *Amlapitta*, *Parinama Shula*, *Grahani* (irritable bowel syndrome), and *Agnimandhya*.

Mode of action of Avipattikara Churna

Avipattikara Churna is a herbomineral compound formulation with clinical applications in the treatment of Amlapitta (hyperacidity and dyspepsia). *Katu, Tikta, Madhura Rasa, Laghu, Ruksha, Tikshna, Snigdha Guna, Ushna Sheeta Virya, Madhura, and Katu Vipaka* constitute the majority of the drugs in Avipattikara Churna. Aside from *Khandasharkara*, the main ingredient is *Trivrut (Nishoth)*. It comprises *Katu, Tikta Rasa, Laghu, Tikshna, Ruksha Guna, Ushna Virya, and Katu Vipaka*. It has *Bhedana, Rechana, and Shothahara* properties, which make *Pitta Virechana* useful in Amlapitta's *Samprapti Vighatana*. This action of *Trivrut* is also aided by the *Mridu Rechana/Anulomana* action of *Triphala*. *Trivrut* and *Triphala* are both effective remedies for *Vibandha*. *Deepana, the Pachana Karma* of all drugs, maintains *Agni* and prevents *Aama* formation. Additionally, *Avipattikara Churna* improves gastric secretion and motility, which facilitate better digestion.

Action of Kamdudha Rasa^[7]

Some of the ingredients of *Kamadudha Rasa* such as *Pravala* and *Mukta* have *Dipana* (appetizer) and *Pachana* (digestive) properties maintain the normalcy of *Agni* (digestive fire). The *Kshariya* (alkaline) nature of these drugs would reduce the *Amliyata* (acidic nature). These are *Sita Virya Dravyas* (the drug having cold potency or cooling effect usually resembles to endothermic) which does *Pitta Shamana* (pacify the biological fire).

Action of Guduchi

Guduchi Satva, another important ingredient, is known for its *Rasayana* properties. It has *Tikta* (bitter), *Kashaya Rasa* with *Madhura Vipaka* (sweet post-digestive effect), *Snigdha Guna, Tridosha Shamaka* (pacifies three bioenergy principles, *Vata, Pitta, and Kapha*), and *Dipaniya*.

Action of Hingvashtak Churna^[8]

It is a traditional Indian combination of *Trikatu* (*Shunthi, Pippali, and Maricha*), *Ajmoda/Yavani, Saindhav Lavana, Jeeraka, Krishna Jeeraka, and Hingu. Sunthi's Katu Rasa* and *Ushna Veerya* properties

increase the *Agni* (digestive fire), relieving *Mandagni* (low fire). *Katu Rasa* and *Laghu*, along with *Tikshna Guna*, cause *Srotoshodhana*. This converts the indigested and *Pakva-Apakva* food into an assimilable form, and because of *Katu Rasa* and *Ushna Virya*, the *Agni* returns to normal, resulting in *Vyadhi Shamana*, or disease subsidence. Furthermore, the constituent ingredients of *Hingvashtak Churna* stimulate digestion through a variety of enzymatic secretions.

SN	Symptoms	Before treatment (BT)	After treatment (AT)
1.	<i>Amlodgara</i>	1	0
2.	<i>Avipaka</i>	2	1
3.	<i>Aruchi</i>	2	1
4.	<i>Utklesha</i>	1	0
5.	<i>Daha</i>	2	0
6.	<i>Gaurava</i>	2	0

CONCLUSION

As a result, it can be concluded that the aforementioned Ayurvedic management is important in the treatment of *Amlapitta*. Even in such a short period of time, we can have major disorders completely cured with no recurrence by making some lifestyle changes. "*Sutshekar Rasa*" - the vitiated state of *pitta* improves the entire digestion process, resulting in proper *Agni* function. *Sutshekar Rasa*, which contains *Ruksha, Laghu, Katu, and Ushan*, has the effect of reducing vitiated *pitta* and ensuring the proper functioning of *Agni*. *Sutshekar Rasa* contains ingredients with mainly *Agnivardhak* and *Amapachak* properties. "*Avipattikar Churana*" is a more potent drug for the treatment of *Amlapitta* with no side effects. The drug used in this *Churana* is *Madhur Tikta Kasaya, Katu Rasa Yukta, Madhur Vipaka, and Sitavirya*. *Avipattikar Churna's* ingredients neutralize *Vidagada Pitta* in *Amlapitta*. *Shamana Upakram* combined with *Pathyahara* for an extended period of time is beneficial for any gastrointestinal disease. According to Ayurvedic principles, patients with any

disease who are treated with their *Dosha, Dhatu, Mala Avastha*, and *Ashtavidha Pariksha* will experience *Upashaya*. In this case study, *Shamana Chikitsa* combined with *Pathyapathya* was found to be effective in reducing *Amlapitta* symptoms. This is evident from the manner in which *Pachaka Pitta* (digestive component of biological fire) performs *Pachana Karma* (digestive action). The capacity for digestion is also determined by the qualitative increase of *Pitta's Usna Guna*. Conceptually, it was concluded that substances with properties such as *Ruksha, Kasaya*, and *Laghu* had the effect of decreasing *Pitta's Drava Guna* while maintaining the proper function of *Agni*. Similarly, substances with *Madhura* and *Sita* properties reduced *Pitta's Usna* property, allowing *Agni* to function properly.

REFERENCES

1. Clarrett D, Hachem C. Gastroesophageal reflux disease (GERD). J Missouri State Med Assoc 2018;115:214-8.
2. Ajay Kumar & Tina Singhal; Scientific Explanation of Mode of Action of Sutshekhar Ras in Amlapitta with special reference to Acid Peptic Disorders: A Review; nt. J. Res. Ayurveda Pharm. 9 (5), 2018
3. Vidya Lakshmipati Shastri.Yogratnakar. edited by Bhisagratna Brahmashankar Shastri. Amlapitta Pathyapathya.1-3.Pg.No.244.
4. The Ayurvedic Formulation of India, Part I. Second revised English Edition, Government of India, Bhaishjyaratnavali, Amlapittadhikara.Pg.No.106.
5. Sri Bhavamishra, Bhavaprakash Nighantu, Commentary by K C Chunekar, edited by G S Pandey, Choukamba Bharati Academy, Varanasi: Revised & Enlarged ed. 2010; p. 39-40.
6. Sri Bhavamishra, Bhavaprakash Nighantu, Commentary by K C Chunekar, edited by G S Pandey, Choukamba Bharati Academy, Varanasi: Revised & Enlarged ed. 2010; p. 166.
7. Purohit H. Kamadugha Rasa An Effective Ayurvedic Formulation For Amla Pitta, Tanta University Journal of Homoeopathy & Medical Science, Volume 3|Issue 3|July–Sept. 2020|
8. Manoj Kumar Dash et al / probable mode of action of hingvastaka churna / Int. J. Res. Ayurveda Pharm. 7(Suppl 3), Jul - Aug 2016

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