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An Ayurvedic management of *Amlapitta*: A Case Study

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ABSTRACT

Introduction: *Agni* is the primary factor which decides whether the body is healthy or sick. According to *Charaka* pitta itself is *Agni*. *Amlapitta* a gastrointestinal tract disorder which developed due to the *Vikriti* of *Pachaka Pitta*. The *Pachaka Pitta* gets vitiated and it changes from normal bitter taste {alkaline} to *Vidagda* /sour (acidic) taste. The symptoms of *Amlapitta* can be seen in gastro esophageal reflux disease. Accompanying symptoms like nausea, vomiting, loss of appetite, acid belching and sour taste in mouth. **Aim and Objectives:** The primary aim of this paper is to study the efficacy of *Shamana Chikitsa* in Ayurveda in the management of *Amlapitta*. **Materials and Methods:** This is a case study of a 27-year-old female patient who had signs and symptoms of *Amlapitta*. Ayurvedic *Shamana Oushadas* were used according to patients *Prakriti*, *Avastha* of *Roga* and *Rogi*, *Ama*, *Agni* for the follow-up and post-test assessments. **Observation and Results:** Improvement in the condition of patient in terms of *Avipaka*, *Tikta Amla Udgara*, *Urokanda Daha Ruja*, *Utklesa*, *Dourbalya*, *Adhmana*. This case study highlights the possibilities of Ayurveda and displays its evidence-based treatments.

Key words: *Amlapitta*, *Pachaka Pitta*, *Agni*, *Gastroesophageal reflux disease*.

INTRODUCTION

“*Bala Arogya Ayuscha Pranascha Agnou Pratistitha.*”^[1] according to *Acharya Charaka*, the power of *Agni*, or normal condition of *Agni*, is responsible for proper health, longevity, and vital breath. *Acharya Vagbata* says that *Roga Sarveapi Mandagnou.*^[2] *Mandagni* is the primary cause of all diseases. So, *Agni* plays a crucial role in understanding the development of illness, diagnosis, and therapy protocols. In the modern

era, *Amlapitta* (hyperacidity) is the one of the most prevalent disease conditions of *Annavaha Strotas*. Ayurveda says that *Pitta* is of 2 types *Prakrita* and *Vaikrita*. In this condition, *Pitta* becomes *Vaikrita* or *Vidagda* because the *Amlaguna* of *Pachaka Pitta* increases due to their similarity. References to *Amlapitta* and its management are scattered in *Brihathrayees* of Ayurveda. *Amlapitta* was first made explicit in the *Kashyapa Samhita*. Later on, *Bhavaprakasha*, *Madhava Nidana*, and *Yogaratanakara* also described it clearly. Ayurvedic classics describe two varieties of *Amlapitta*: *Urdhwaga* and *Adhoga Amlapitta*. *Dosha* classifications include *Vatanubandhi*, *Kaphanubandhi*, and *Vatakaphanubandhi*. Excessive consumption of *Virudha Ahara* which includes a combination of *Kshira Matsya* and foods that have attained *Amlata* or that are fermented or that are acidic which aggravates *Pitta* is the main *Nidana* of *Amlapitta*. The general term “*Amlapitta*” covers a number of common GIT disorders, including hyperacidity, dyspepsia, gastritis, peptic ulcers, etc.

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Hyperacidity, or acid reflux, is the term for the condition that arises from an excess of hydrochloric acid in the stomach. It is usually caused by bacterial infection, lifestyle choices such as drinking alcohol, unhealthy eating habits, mental stress as well as the prolonged use of NSAIDs like aspirin, ibuprofen, muscle relaxants etc. leads to gastric related complaints like nausea, vomiting, heart burn, acidic regurgitation etc. In modern medicine, the treatment of GERD (Gastro Esophageal Reflux Disease) typically involves medications and lifestyle modifications, and it comes with many drawbacks. Long term use of proton pump inhibitors causes risk of decreased magnesium levels, increased risk of bone fractures, and potential interference with nutrient absorption. While these medications give mainly symptomatic relief, they often do not address any underlying causes of GERD such as hiatal hernia, obesity, or poor dietary habits etc. Simply taking the drugs without proper investigations has the potential to mask other conditions which mimics similar symptoms of GERD such as gastric ulcer or esophageal ulcer.

Ayurveda the science of healthy living gives a holistic approach to the management of *Amlapitta* considering *Nidana*, *Avastha* of *Roga*, *Rogi*, *Agni*, *Dosha*, *Dushya*, *Desa* etc. *Acharya Kasyapa* describes *Shodhana* and *Samana Chikitsa* including *Dinacharya* and *Ritucharya*.^[3]

CASE REPORT

A 27 year old female patient came to OPD with complaints of intermittent bouts of *Avipaka*, *Tikta Amlaudgara*, *Utklesa*, *Urokanta Daha Ruja*, *Gourava*, *Vibandha Adhmana*, *Dourbalya*^[4] since 3 years.

History of present illness

The Patient was apparently asymptomatic three years ago. She had gradually developed above symptoms during her final year exams. She was diagnosed with GERD and was prescribed modern medical treatment. But she didn't get any relief. Since last year, her symptoms have been occurring intermittently and worsening when she skips food.

Past history: No major illness

Family history: Father has similar complaints since many years

Examination of the patient:

Ashtavidha Pareeksha:

Nadi: *Vata Pittaja*

Mala: *Asamyak* (Constipation i.e., hard, sticky, unsatisfactory bowel evacuation most of the time)

Mutra: *Anavilam, Samyak Mutrapravartana*

Jihwa: *Saama*

Sabda: *Prakrita*

Sparsa: *Anushna Aseeta*

Drik: *Prakrta*

Akriti: *Madhyamam*

Provisional diagnosis: *Amlapitta*

General examination

Pulse: 72/min.

BP: 120/72 mm of Hg.

Agni: *Vishamagni*, *Abhyavaharana Shakti* is reduced
Jarana Shakti is normal

Koshta: *Krura Koshta*

Prakruti: *Vatapradhana Kaphaja*

Nidana

Aharaja Nidana: *Virudhasana*, *Anasana* (Occasionally), *Ati Katu Amla Lavana*, *Vidahi Aharas*, *Guru Bhojana*, *Alpasana*

Viharaja Nidana: *Rathri Jagarana*, *Atapa Sevana*

Samprapti

Nidana Sevana



Severe aggravation of *Pitta* along with *Vata* and *Kapha*



Agnimandya



Vidagdha Ajeerna leads to *Shukratva* of *Anna*.



Turning more sour due to increasing *Amla* and *Drava Guna* of *Pitta* in *Amashaya*.



Suktatam Yaati Samsrajyamanena Pittena Janayati Amlapittam (Amlapitta)^[5]

Management

To effectively cure *Amlapitta (Shudha Chikitsa)*, *Shudha Nirnaya* is important. *Doshadhikya*, condition of *Agni*, *Ama*, *Avastha* of *Vata*, patient's *Ahara Vihara*, *Vegas* should be assessed according to symptomatology.

Table 1: Treatment Given

SN	Medicine	Dose	Time of administration	Anupana	Duration
1.	<i>Avipattikara Churna</i>	3 gm	Before meal	With Luke warm water	20 days
	<i>Pittantak Yoga</i>	1 gm			
	<i>Shankha Bhasma</i>	250 gm			
	<i>Kaparda Bhasma</i>	250 mg			
2.	<i>Mahashankha Vati</i>	2 tabs	After meal	Luke warm water	20 days
3.	<i>Mishri + Yashtimadhu Churna</i>	5 gm	After meal	Milk	20 days
4.	<i>Guduchyadi Gana Kwatha</i>	40 ml	Before meal	Water	20 days

Table 2: Assessment of symptoms before and after treatment.

SN	Lakshana	Before treatment	After treatment
1.	<i>Avipaka</i>	+++	+
2.	<i>Tikta Amla Udgara</i>	+++	Cured

3.	<i>Urokanta Daha Ruja</i>	+++	+
4.	<i>Dourbalya</i>	+++	Cured
5.	<i>Adhmana</i>	+++	Cured

DISCUSSION

In this study observations were done before and after the intervention based on the symptoms and the results are mentioned in the table 2. The result shows reduction in all the symptoms, some being completely cured.

Mode of action of *Avipattikara Churna*: *Churna* contains the drugs like *Amalaki*, *Vidanga*, *Musta*, *Vibhitaki*, *Shunti*, *Maricha*, *Pippali*, *Haritaki*, *Twak* etc. These drugs are mainly *Madhura*, *Katu*, *Tikta*, *Kashya* and possess *Madhura Vipaka* and *Sheeta Virya*. The symptoms like *Tikta Amlaudgara*, *Urokanta Daha*, *Ruja* can be relieved by this *Kapha Pitta Samaka Rasa Virya Vipaka* drugs. *Pippali*, *Shunti*, *Maricha*, *Haritaki* etc. are *Deepana Pachana* and *Vatanulomana* which helps in relieving the symptoms like *Adhmana*, *Avipaka* and *Gourava*. Ingredients like *Shunti*, *Pippali*, and *Twak* have natural anti-inflammatory properties, which help in reducing inflammation in the gut mucosa. It is thus aptly said in the *Phalasaruthi* that "*Amlapittam Nihantayashu Vibandham Malamutraro*"^[6]

***Shankha Bhasma*:** *Shankha Bhasma* (also known as Conch Shell Calx) is a unique Ayurvedic preparation made from conch shells. It has *Kshariya* and *Sheeta* nature neutralizing excessive acid production in the stomach. Due to its *Sheeta* property which is beneficial in pacifying *Pitta Dosh*. It is *Deepana Pachana* and also anti-inflammatory in nature. In Ayurvedic classics it is indicated in *Amlapitta*, *Grahani*, *Udarashoola*, *Parinamashoola* etc.

***Kaparda Bhasma*:** Prepared from Cowrie shell (*Cypraea moneta*). Calcium carbonate which is present in this will act as an antacid to alleviate *Urokantaruja Daha*, *Tiktamla Udgara* and helps in curing *Agnimandhya*.^[7]

***Mahashankha Vati*:** As per A.F.I, *Maha Shankha Vati* are specified by *Bhaishjya Ratnavali*, but the most commonly practiced reference is from *Rasendra*

Chintamani. It contains several potent ingredients known for their *Dipana* and *Pachana* properties. The composition of *Mahashankha Vati* can vary slightly based on the specific manufacturer or traditional formulation, but generally it contains the ingredients like *Shankh Bhasma*, *Trikatu*, *Chincha Kshara*, *Pancha Lavana*, *Vatsanabha*, *Hingu* etc.

Pittantaka Yoga: as the name implies it is a *Pittahara Yoga* developed in the pharmacy of National Institute of Ayurveda, Jaipur. Ingredients are *Shudha Swarna Gairika* (red ochre), *Amrit Dhara* (contains *Karpura Satva*, *Putina Satva*, *Ajwain Satva*), *Agnimantha*, *Maricha*, Sugar. Almost all these drugs are *Madhura Tikta Kashaya* and having *Seeta Virya*, thus helps in pacifying *Vata* and *Pitta*. *Ajwain Satva* act as *Vatanulomana*, *Vedana Samaka*, *Ajirna*, *Anaha*, *Aruchi*, *Udarashula* etc. *Karpura* especially cures *Agnimandhya* which is the root cause of *Amlapitta*. *Gairika* has long been widely used as a pacifier for *Pitta Dosh* and used particularly in case of *Amlapitta*, *Pittaja Shira Shoola*, *Udara* etc. disorders.

Mishri and Yashtimadhu Churna with milk: *Glycyrrhiza glabra* is a *Seeta Virya* drug which pacifies *Pitta Vataja*, *Rakta Rogas* and its active compounds, such as glycyrrhizin, glycyrrhetic acid, and flavonoids, which have antacid, anti-inflammatory, analgesics, anti-oxidants and anti-stress properties. It mainly helps to heal gastric ulcers and GERD disorder. It is *Vatahara* due to *Madhura Vipaka Madhura Rasa*. *Pittahara* due to its *Seeta Virya*, *Madhura Vipaka* and *Madhura Rasa*. *Yashtimadhu* is indicated in *Dourbalya*, *Aruchighna* and it is *Dahaghna*.

When *Yashtimadhu* is consumed with *mishri* and milk, these compounds may work synergistically to promote overall health because of *Madhura Rasa*, *Snigdha Guna*, *Ojasya*, *Dhathuvarhdhana*, *Vatapittahara* and *Seetala* property of milk, which helps in curing *Amlapitta*.

Guduchyadi Gana Kwatha Churna: Mentioned in *Ashtanga Hrdaya Sutrasthana* 13th chapter, *Sodhanadigana Sangrahana Adhyaya*. It has only 5 drugs which are *Guduchi*, *Padmaka*, *Arishta*, *Dhanyaka* and *Raktachandana*. This *Gana* is *Pittasleshmahara*, *Chardighna*, *Dahahara*, *Thrishnahara* and

Agnivardhaka.^[8] *Guduchi* has *Tikta Rasa* and *Seeta Virya* and is *Jwaraghna* and *Pittaghna*. *Dhanyaka* has *Madhura Vipaka* but is *Ushna Virya* and hence *Agnikrith*. So, it helps in *Agnimandya*. *Padmaka* has mainly *Dahagna* property, so reduces *Hrtkanda Daharuja*. *Nimba* which has *Tikta Kashaya Rasa* and *Pitta Shamaka* property due to its *Seeta Virya*, and is *Kaphahara* due to *Katu Vipaka*. Thus, it helps in healing *Vrana*, promoting *Ruchi* and reduces *Vata* to cure *Adhmana*.

CONCLUSION

Amlapitta, commonly known as gastro oesophageal reflux disease, a prevalent *Annavaha Sroto Dushti Vikara* that affects many individuals worldwide. While its symptoms can range from mild discomfort to severe complications, understanding its *Nidana*, *Dosha Dushya*, *Avastha* of *Ama* and *Rogi*, its *Samprapti* and management strategies is crucial for effective treatment. *Acharya Kasyapa* clearly mentions the management plan for *Amlapitta*. By *Vamana*, the *Dushta Dravarupa Pitta* is eliminated and becomes normal. After that, intake of *Aushadas* which is *Deepana Pachana* for *Ama* and *Lina Dosh*. When all treatments fail, it is recommended to relocate the patient since *Amlapitta* is common in *Anupa Deshas*, emphasizing the significance of *Desha* in *Amlapitta Vyadhi*. This is particularly common in *Anupa Desha*. So, both *Sodhana* and *Shamana* are included in the management and *Tikta Rasa* foods and liquids are advised for intake.

REFERENCES

1. Charaka. Edited by Dr Ram Karan Sharma. Charaka Samhita English translation. Choukhambha Sanskrit Series Office, Varanasi. Sutrasthana. 27-342.
2. Vagbata. Prof.k.R.Srikantha Murthy. Ashtanghrdayam. Choukhambha Krishnadas Academy. Chikitsa Sthana.12th chapter.1-112
3. Vridhajivaka. Edited by Premavati Tiwari. Kasyapa Samhita. Choukhambha Visvabharati. Khilasthana. Reprint 2020, 18-23.632
4. Madavakara. Madhukosa commentary. Narendranadha Sastri.Madhava nidana.Motilal banarasidas. chapter 51.2-51

5. Text book for Roga Nidana and Vikriti Vigyana. Dr.Nisha kumari. Chaukhambha Orientalia Varanasi 418
6. Kaviraj Govind Das Sen. Translated by Siddhi Nandan Mishra Hindi Commentary. Bhaishajya Ratnavali. Chaukhambha Surbharati Prakashan.56th chapter.25-27.903
7. Vagbata. Edited by Dr. Ashok D. Satpute. Rasaratnasammuchaya. Chaukhamba Sanskrit Pratishthan. Reprint 2010. 128-80
8. Vagbata . Dr. T. Sreekumar. Ashtangahrdaya. Harisree Publications. Sutrasthana.13th chapter.16-339

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