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A REVIEW ANALYSIS OF ANUBANDHANUBANDHYATVA OF AJIRNA, AMLAPITTA AND SHOOL

Ayurveda

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ABSTRACT

Ayurveda is a traditional medical science that focuses on preventing and treating diseases. Agni, the root of age, is affected by unhealthy diets and overeating. The Acharyas identified four types of physical Agni: Samagni, Vishamagni, Tikshanagni, and Mandagni. Mandagni causes indigestion, leading to various diseases. There are three distinctions of indigestion: Amajirn, Vidagdhajirna, and Vishtabdhajirna. Vidagdhajirna increases bile acidity, leading to ulcers and colic. The present study confirms that the Anubandhanubandhayatva of Ajirna, Amlapitta and Shool(colic).

KEYWORDS

Indigestion, Ajirna, Amlapitta, Shool, Anubandhanubandhayatva

1. INTRODUCTION

Man today is consuming many unhealthy diets such as labourless luxurious life, stress-anxiety-fear-anger-grief- jealousy and miserable life, non-consumption of dietary methods, uneven behavior(visham chesta), vegaavrodh, contaminated foods, viruddha ,visham overeating, dream-sex, alcohol and drugs consumption, non-practice of ghee, milk-oil, ekarasaabhayash, rough-bitter-kshaya substance abuse, etc. Due to these reasons cause Agnidushti. Such dushtagni is unable to digest even light food. lead to Agni mandhya. Agnimandhya create Ajirna, Due to Ajirna, Aamvisha is produced. This Aamvisha combines with vitiated pitta dosha and create pittaja disease like Amlapitta[1].Ajirna, Amlapitta and different types of shool are mainly counted which are caused by Annavahasrotas(G.I.T.).

In this sequence, they arise as Nidaanaarthkari to each other as well as independently. Thus, in the present times, almost all people suffer from these three diseases to more or less extent.

2. AIMS & OBJECTIVES

Study of the interdependence and Anubandhanubandhayatva of Agnimandhya, Ajirna, Amlapitta and Shool(colic).

Knowledge of the samprapti organizational process in the gradual development of these diseases.

3. MATERIALS & METHODS

Material related to Ajirna, Amlapitta and Shool is collected from Ayurveda texts books, modern texts books, index medical journals.

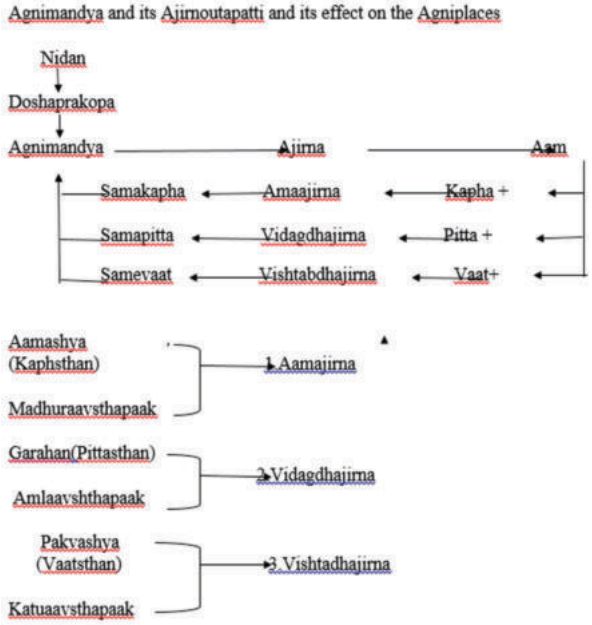
3.1Ajirna-The literal meaning of Ajirna is A = no,Jirna =pachna. Ingested food not being properly digested is called Ajirna(indigestion), the root of Ajirna is Agnimandya, due to Agnimandya the food does not get digest and Ajirna has been said to be the root of the group of diseases as follows:-

अनात्मवन्तःपशुवद्भुंजतेयेऽप्रमाणतः/रोगानीकस्यतेमूलमजीर्णप्राप्नुवन्तिहि//[2]

Ajirna is called Dyspepsia in modern science. Dyspepsia is made up of two words: Dys+pepsin. Dys =Hard, pepsin = Digest or Pepsin Enzyme comes under fag Acid Pepsin disorder. In which the edema of gastric membrane is essential. As a result of this inflammation, deficiency of digestive juices and absence of digestive elements is found in it (both quantitatively and qualitatively). This deficiency can also be due to disorder of intestinal movements, weakness of intestinal afferent nerves and insufficient presence of stool in the rectum or retention of stool for a long time[3].

Samprapti of Ajirna-

4. Rasasheshaajirna- Even if the diet of a person with dyspepsia is chronic, sometimes some part of the food juice produced in the form of food remains undigested for some time, then due to the remaining juice, Rasasheshajirna occurs. In this indigestion, even if the belching is pure. There is no desire to eat. Even when the udgarsuddi, the desire for eat does not arise, and the hridgaorav, salivation. Due to the lack of symptoms, it is also called Mandajirna[4].



5. Dinpakijirna - In a healthy state, complete digestion of food takes place in 24 or 26 hours, but sometimes due to excessive food intake, untimely, unhealthy food etc., it gets not digested within the said time and takes place on the next day. This is called Dinpakijirna. It does not have symptoms like the ajirna mentioned above and is dosharahit[5]. The purpose of this statement is that according to the rules of Ayurvedic swasthvarit, even if the food eaten in the morning has not jeerna, there is no harm in eating food in the evening.But if the food has not digested by the next day, then it is not advisable to eat food on that day[6].

6. Prakritaajirna – This happens every day and every person, but there is no disorder in it. It means that after eating food, the food remains undigested before the stipulated period of maturity and unripe food is called indigestion. Since it is not harmful, it is called Prakrit and is different from others[7].

3.2Amlapiitta-

Definition-

Sushruta has enlisted katu as pittas original rasa and mentioned that when pitta becomes vidagdha then it changes in the Amla. According to Dalhanacharaya the commentator of Sushruta, Ranjit Rai Desai has given two types of pitta (1) Sama pitta (2) Niram pitta. He said that sama pitta has an Amla Rasa while Niram pitta has a katu rasa there for in Amlapitta sama pitta is there - means a condition created by samapitta is called as an Amlapitta. Chakrapani said that Amlapitta is a condition in which Amla guna property of the pitta is exaggerated. Madhukoshakara has also accepted this definition.

Types -

According to the vitiated Doshas -

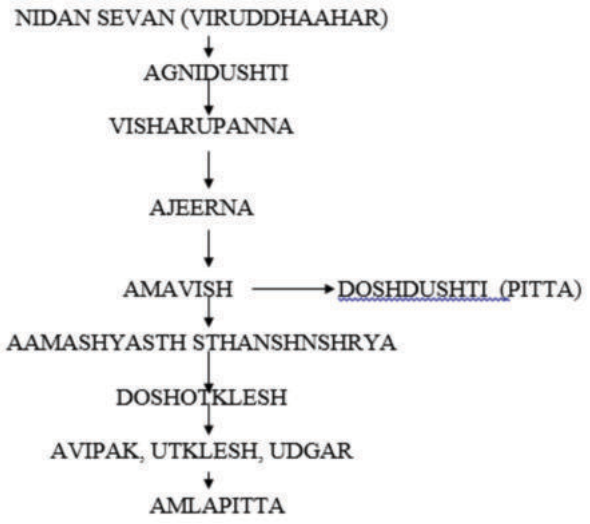
Kashyapa has given three types.
1. Vataja Amlapitta
2. Pittaja Amlapitta
3. Kaphaja Amlapitta

Madhavkar has given four types.
1. Vatadhika Amlapitta
2. Kaphadhika Amlapitta
3. Vatakaphadhika Amlapitta
4. Shleshmapittaja Amlapitta

According to sthanadusti of the srotasa -

(Madhavkara and Bhavamishra)
1. Urdhavaga Amlapitta
2. Adhoga Amlapitta

Samprapti of Amlapitta-



Symptoms-

Amlaudgar(soureructation), Tiktaudgar (Bittereructation), Hruddah (Heartburn), Kanthdah(Burninginthroat), Avipak (Indigestion), Klam(Exhaustion without any exertion), Utklesh (Nausea), Aruchi(Tastelessness), Gaurav(Feeling of heaviness)[8]

3.3 Shool -

Shool is the name of a special Vedna. Two types of colic have been described after Amlapitta. According to the theory of the Sidhanantnidan, the result is Amashayakshatoth Annadravya and Pakvashayakshatoth Prinamshool. Even in practice, these two types of colic are often visible.

Annadravashool-

The state of Ajirna, pachymanavastha and the state of Jirna, the possibility of shool(colic) has been accepted in all these three states. In these three stages, Anna remains in liquid form due to which the production of shool continues. Once this colic starts, it remains constant. In this, there is no change in the colic due to eating or not eating healthy food or unhealthy food, but the shool remains the same. When the bile in the form of dushit food juice is removed by Vamann, the colic soon subsides. There is no rhythm to this. That is, it is calmed down by chaos[9].

Parinaamshool-

The initial dosh Vata is aggravated by its Nidanas. The sthansanshraya of aggravated vata occurs in the stomach only, Parinamshool occurs only when the food is consumed in the digestive tract and does not occur at any other time. Kaphaaavarit (envelps) bile and vayu produces shool. This shool subsides on its own after eating food, due to vaman or when it is suppressed the food becomes completely digest. It increases due to food items having acidic Vipaak and is mitigated by food having sweet Vipaak. There is a soft covering of mucous membrane in the inner part of the duodenum and stomach which protects from the adverse effects of acid reaction. In the first phase of digestion, there is an acidic reaction, then the tolerance of the stomach wall decreases due to which the lining of the stomach gets swollen, which ultimately takes the form of ulcer due to which shool occurs there[10]. These ulcers are addressed from the location specific point of view, Duodenal & Gastric Ulcer. Has been done Nowadays, both these types of ulcers are called by the same noun peptic ulcer. It has been designated because an enzyme called pepsin is responsible for it[11].

3.4 Analysis of Anubandhanubandhayatva-

Disease with independent principal, symptoms is called **Anubandhya**(primary), the one which is secondary (apradhan, partantra) among Vata, Pitta and Kapha is called **Anubandh.** Dosha is dependent. It is difficult to be calmed down due to which the symptoms are not clear and it is not done by the method mentioned in the scriptures (whose vitiation and pacification is related to the main dosha) is called Anubandh. Primary disorder is that which is independent, has symptoms manifested and etiology and remedy as described, while the secondary disorder is that having contrary characters. The treatment always goes to the pradhan one, the apradhan himself becomes calm.[12] In these diseases, digestion becomes sluggish go to Agnimandhya and causes paitik symptoms of disease. Dosha is different from these three diseases only because it is according to bala. It should be explained as such. There is no difference between these three in terms of nidaan, symptom and samprapti, but there are some differences in the distinction of the adhisthana component of Samprapti and the dosh, doshansho and dhatu there in due to the different positions.

Agnidushti, Ajirna, colic due to Amlapitta can be said to be a dependent samprapti, but the scriptural instructions regarding dependent and independent diseases are not clear and unambiguous, but it is also doubtful to accept the rogantarrog(underlying disease) as a pratantra(dependent) disease. The stage of rogantar rog can also be considered for nidaanathkar.

3.5 Diagrams showing different stages from the perspective of vyadhitraya.

4. DISCUSSION

4.1. Saamyataaye (similarties) -

a) Depending on the cause(hetu) of the disease, all three diseases are caused by Paktidosha.
b) On the basis of Adhishthana, the Adhishthana (Ampachya manashaya) of all three is the same.
c) On the basis of Srotas, these the three diseases AnnavahSrotas and Abhayantar Rog Marga are there.
d) On the basis of Srotodushti, for the first time in Vyadhitray, Sanga type of dushti has also been seen and later on, Vimarggamana type of dushti has also been seen.
e) The Samvayi causes and Nimit causes (diet, lifestyle etc.) of all three diseases are almost the same.
f) Except Atmalinga (Cardinal Sign), the remaining characteristics are found to be the same.
g) There is similarity between the three from the point of view of treatment and pathya-apathyaor, upsaya-anupsaya.
h) All three diseases are Aamashyasamutath & krichsadhya 4.2. Vibhedatmak lakshana(difference) –

5. CONCLUSION

In the present study, when analyzing Amlapitta, Ajirna and Shool(colic) from the point of view of Anubandhanubandhayatva, it is clear that the three diseases have interdependent aashyaashriya relationships. Therefore, it can be said that Amlapitta, Ajirna and Shool(colic) have Anubandhanubandhayatva.

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