



Role of shodhan and shaman chikitsa in amlapitta

Vd. Prerana P. Jawale

(M.D.) Asso. Professor, Kayachikitsa Dept., R.A.Podar Medical College (Ayu.), Worli – Mumbai -18.

ABSTRACT

Amlapitta is an ayurvedic disease which is characterized by group of symptoms like vomiting(chhardi), belching(amlaudgar), salivation with or without nausea(utklesha and hrullas), retrosternal burning and throat burning(hrut kanth daha), headache(shiroshool). Today's lifestyle like improper food intake, unhealthy way of living, lack of proper sleep, mental stress, is one of the prime reason to develop such a disease which has a troublesome effect on one's day to day life. It is one of the important and chronic disease which has to be taken into consideration as it is affecting many people as the condition worsens if early intervention is not done. Keeping this in mind ayurvedic management is one such method which plays an important role in giving relief to patients. Therefore I did a study on group of patients suffering from amlapitta. An ayurvedic approach that is shodhan and shaman chikitsa is an ideal method which was followed and the results were drawn on the basis of observation.

KEYWORDS

Amlapitta, Shodhan chikitsa, Shaman chikitsa.

Introduction

Ayurveda is ancient Indian medical sciences. In Ayurveda there are so many basic principles or siddhanta has been described in relation to svastha sharia. These basic principles are Thridosha siddhanta, Prakruti siddhanta, Dosh-dushya siddhanta etc.

Ayurveda is science of life. Basic approaches of ayurveda are the preservation of health and prevention of disease. More emphasis has been laid over preservation of health of masses. So many diseases are described in samhitas based on these principles and one of them is Amlapitta. Amlapitta is a lifestyle disease. Amlapitta is a very important disease in present era due to its increasing prevalence day by day. Amlapitta is one of them which is most common in all age groups.

Although modern medicine like proton pump inhibitors, H2 blockers are available, they are costly and cannot be taken for long time due to their side effects.

As the base of disease is 'Aama'. Amlapitta is a disease of Annava shrotasa. Due to vividha hetu sevana like viruddha dushta aahara, vihara like Ratra-jagarana, Vegadrodha and manasika hetu like Chinta, bhaya, krodha pitta dosha of body get vitiated with increase in amla and drava guna, Again and again hetusevna causes Aamasanchiti and dusti of annava shrotasa. Vitiated pitta dosha, aama and annava shrotasa leads to disease called as 'Amlapitta.'

As Amlapitta is Drava, Amla pittajanyam, Aamashyagata, Aamajanya vyadhi, treatment described for it, is Shodhana as vaman, virechana, etc and then shaman chikitsa. The treatment should be given to alleviate Drava, Amla guna of pitta and to alleviate samata.

An Ayurveda, drug or diet articles that reverse or break the samprapti without producing any side-effect has been looked as ideal drugs or diets. G.I.T disorders are being treated successfully by Ayurvedic physician. Ayurveda has a lot to offer in the management of Amlapitta. In ayurveda, chikitsa is mentioned in two groups i.e. Shodhan and Shaman.

In this research work, I have decided to study the effect of both therapies i.e. shodhanapurvaka shaman and shaman chikitsa in amlapitta comparatively.

For fulfilling this purpose as in the Amlapitta Chikitsa, Yogratnakar says 'Purvam tu vamanam karyam...' 'Vaman Karma' selected as 'Samshodhana therapy'

Considering main concept of chikitsa of Amlapitta it was in mind to evaluate shaman yoga, which have-

- 1) Tikta, Katu Ras, katu vipaka, and ushan veeriyra
- 2) Easy availability of drugs
- 3) Simple method of preparation
- 4) Easy route of administration of drugs.

Thus while going through different ayurvedic texts 'GUDUCHYADI KWATHA AFTER VAMANA IN AMLAPITTA' satated by Bhaishajya Ratnavli (Amlapitta chikitsa 56/13)

छिन्नखदिरवष्ट्याहृदावर्मभो वा मधुद्रवम् ॥ (भै.र ५६/१३)

Which contains Guduchi, Yastimadhu, Khadir Daruharidra fulfills all the above criteria.

MATERIALS & METHODS

Procedure of Vaman:

Procedure of vamana was performed as follows:

A) Purvakarma

- 1) Pachana was given to the patients for 5 to 7 days for Aam Pachana. Sunthi or Trikatu was used for it.

- 2) To determine the dose of Ghrita used, for Abhyanta Snehapana, Koshtha of patients was determined by giving ghrita in Hrasiyasi matra (1 pala- 40 ml) orally. According to time required for digestion of Hrasiyasi matra of Ghrita, uttam matra of sneha was calculated. Schedule for seven days of snehapana was prepared in increasing dose. Daily increase in dose was equal for all days. Snehapan was advised for 3, 5 or 7 days as per Koshtha of patient.

- 3) After visualizing Samyaka Snehapana symptoms, Bahya Snehana and Swedana was advised for three days i.e. the end day of Abhyantar snehapana, Rest day and vamana day before starting vamana procedure.

- 4) Bahya snehana was done with Til Tail. For swedana Bashpa Sweda in Swedana case was performed. Sign and Symptoms of Samyaka Swedana were looked in every patient.

- 5) Utkleshakara Ahara was given on rest day in the Dinner

B) Pradhana Karma

- 1) On the day of Vamana Karma patient was asked to consume Godugdha about 200 ml early in the morning.

- 2) Afterward Bahya snehana and Swedana was done just before

introducing Vamana drug

3) Yashtimadhu Fanta was used for Akantha Pan as per requirement and capacity of patient. Yashtimadhu Fanta was prepared using standard method of Fanta preparation as per narrated by Sharangadhara And it was given to patient for AKantha Pan.

4) Vamana Yoga (Vamana drug)
Madanphala pippali- 4gm
Saindhava- 1gm
Madhu – as per requirement

5) Dose- May be adjusted as per Bala of Patient

6) After Akantha Pan Madanphala Yoga was administered to Patient.

Samyaka vamana was observed according to Antiki, Vaigiki, Maniki and LAingiki Parikshas

C) Pashchyata Karma-

1) Dhumpna was given to patient after completion of Vamana procedure after 1 Moohurta i.e 48 minutes.

2) According to type of Shuddhi achieved Sansarjana KRama was advised to the patient for 1,2 or 3 annakala

Patient was advised to come for follow up after completion of Sansarjan Karma. Then oral drug Therapy was started

Drug Name: Guduchyadi Kwatha

1. Contents: Guduchi
Khadira
Daruharidra
Yastimadhu

All contents are in equal quantity

2. Preparation – was prepared as per Sharangdhar Samhita mentioned in Drug Review
3. Dose- 40 ml BD
4. ANupan – Madhu
5. Duration -12 weeks
6. Diet – Regular diet was advised.

CRITERIA FOR SELECTION OF PATIENTS

A) Inclusion Criteria

1. Age group 20 yrs to 70 yrs
2. Sex- Both Males and Females
3. Patients with Symptoms of Amlapitta
4. Patients with Symptoms of Amlapitta were selected
5. Patients having symptoms of 'Hyperacidity'

B) Exclusion Criteria

1. Age group below 16 yrs and above 70 yrs
2. Patients having past history of hematemesis esophageal varices
3. Patients having hyperacidity due to secondary underlying cause like esophageal carcinoma, chronic alcoholic liver disease, purpura, Koch;s Cardiovascular disorder DM
4. Patients with multisystem diseases or who are seriously ill
5. Immuno-compromised patients and patients on AKT
6. Pregnancy and lactation
7. All the contraindications for the vamana karma told by Aacharyas in Samhitas i.e Avamyia

Drug- Guduchadi Kwatha after Vamana karma

Dose – 40 ml BD

Anupana- MADhu

Duration of Treatment- 12 weeks

Follow up- weekly

Investigations:

All baseline investigations required for the study and for screening was carried out initially and on completion of study. Such as CBC, ESR, LFT,RFT, BSL (Fasting &* PP) ,HIV, VDRL, Gastroscopy

CRITERIA FOR ASSESSMENT

1. Chardi: Vomiting
2. Amlaudgar: Burp or Belching was asked for with sour or bitter taste
3. Tiktodgara: Bup or belching was asked for with sour or bitter taste
4. Utklesh and Hrullas: Salivation with or without nausea
5. Hrut-Kantha Daha: Retrosternal burning and burning sensation near throat
6. Shiroshoola: Headache

STATISTICAL ANALYSIS

All the data generated and collected during the study was subjected to statistical analysis to reach final result and conclusion
a) For subjective Parameters (Qualitative Data) Wilcoxon Signed rank test and Chi Square test was applied
b) For Objective Parameteres paired 't' test.
Level of Significance
 $\rho < 0.05$ is statistically significant.

OVERALL ASSESSMENT OF THERAPY

The effect of Therapy was assessed as follows

Complete relief- 100 %
Marked relief- More than 75 %
Moderate Relief- 50-75%
Mild Relief- 25-50%
NO relief- below 25%

OBSERVATION & RESULTS

Observations:

The effect of Drug on 'Amlapitta' Symptoms were observed accordingly

Age – 55 % were from 30 to 40 yrs age group

Sex- 50 % males and 50 % Females

Occupation- 35 % House wife, 30 % Service man, 20 % labour

Economical Status- 40 % lower class, 40 % Middle class, 20% Higher class

Ahar (Diet)- 70 % mixed diet, 30 % vegetarian Diet

Vyasan (addiction) – 10 % alcohol addiction , 15 % smoking/tobacco , 25% Both alcohol and smoking/tobacco, 35% Tea, Coffe addiction, and 15% no addiction

Prakruti – 60% pittakafa prakruti, 25% kafavata , 15% vata pitta

Agni- 45% visham agni, 35% mandagni, 20% tikshna agni

Koshta- 40% Krurkoshta, 45% Madhya koshta & 15% mridu koshta

Chronicity – 35% less than 1 year, 25% more than 2 years, 30 % 1 ½ - 2 years , 10% - 1 to 1 1/2 years

Table showing effect on symptoms score of 20 patients of Amlapitta in group A

Sr.No	Symptom	BT	AT	Difference	Percentage of Relief
1.	Chardi	49	9	39	81.25
2.	Amloudgar	50	11	39	78
3.	Tiktoudgar	49	8	41	83.673
4	Amloutklesh	51	8	43	84.313
5.	Tiktoutklesh	48	6	42	87.5
6.	Daha	50	10	10	80.00
7.	Shioroshoola	23	2	21	91.30
	Total	319	54	265	83.072

Effect of Therapy on Symptoms score:

It was observed that overall percentage of relief (83.07%)

Table showing effect on symptoms of 20 patients of "Amlapitta" by Wilcoxon Matched Pairs signed Ranks test"

Sr. No	Symptom	Mean	SD	SEd	Sum of all signed ranks	No of Pairs	Z	P
1.	Chardi							
	BT	2.400	0.6806	0.1522				<0.0001
	AT	0.450	0.6048	0.1352				
Diff	1.950	0.6048	0.1352	210	20	3.91		
2.	Amloudgar							
	BT	2.500	0.6070	0.1357				<0.0001
	AT	0.550	0.5104	0.1141				
Diff	1.950	0.6048	0.1352	210	20	3.91		
3	Tiktoudgar							
	BT	2.450	0.6048	0.1352				<0.0001
	AT	0.400	0.5982	0.1338				
Diff	2.050	0.6863	0.1534	210	20	3.91		
4	Amloutkles							
	BT	2.550	0.6048	0.1352				<0.0001
	AT	0.400	0.5982	0.1338				
Diff	2.150	0.5871	0.1313	210	20	3.91		
5	Tiktoutkles							
	BT	2.400	0.300	0.5982				<0.0001
	AT	0	0.4702	0.1051				
Diff	2.100	0.5525	0.1235	210	20	3.91		
6	Daha							
	BT	2.500	0.6070	0.1357				<0.0001
	AT	0		0.1357				
Diff	2.000	0.5620	0.1257	210	20	3.91		
7.	Shiroshool							
	BT	1.150	0.7452	0.1666				<0.0001
	AT	0.100	0.3078	0.06882				
Diff	1.050	0.6048	0.1352	153	17	3.62		

Table 3: Effect of Hematological investigations by paired 't' test

No	Investigation (Units)	Mean		Mean of Diff	S.E.	t	P
		BT	AT				
1	Hb. (gm%)	11.54	11.51	0.030	0.0798	0.3758	>0.05
2	RBC (million/mm ³)	4.19	4.23	0.40	0.0666	0.6002	>0.05
3	WBC (million/mm ³)	5955	5970	15.00	82.166	0.1826	>0.05
4	ESR	18.70	18.25	0.45	0.7415	0.6069	>0.05
5	BSL F	88.80	90.20	1.40	0.8221	1.703	>0.05
6	BSL PP	113.3	113.7	0.40	1.286	0.3110	>0.05
7	SGOT	26.05	25.45	0.60	0.8059	0.7445	>0.05
8	SGPT	25.00	25.65	0.65	0.9550	0.6806	>0.05
9	S.Bilirubin	0.80	0.78	0.02	0.0359	0.5558	>0.05
10	Blood Urea	23.30	23.30	0.00	0.5477	0.000	>0.05
11	S. Creatinine	0.880	0.825	0.055	0.0320	1.718	>0.05
12	BUN	10.345	10.390	0.45	0.1057	0.4255	>0.05

Table showing total effect of therapy in 20 patients of Amlapitta

Sr. No	Total effect of Therapy	Group A	
		No of Patients	Percentage
1	Cured (100 % relief)	3	15 %
2	Marked Relief (> 75% relief)	14	70 %
3	Moderate Relief (50-75% relief)	3	15 %
4	Mild Relief (25-50% relief)	0	0 %
5	No Relief (< 25 % relief)	0	0 %

Conclusions

Here, based upon the result of the clinical study assessed in the form of tables and graphs in Observations chapter & discussed in

previous chapter, conclusions of study is presented.

Amlapitta is result of Agnidushti. It is chronic in nature and difficult to cure. In this disease, dosha involved are Pachaka Pitta having 'Amla' & 'Drava' guna pradhanya along with Saman Vayu & Kledaka Kapha, Dushya are Rasa & Rakta, Strotasa- Rasa, Rakta, Annavaaha and purishnvaha are involved

'Urdhavaga Amlapitta' can be correlated with 'Hyperacidity' in modern medicine. Rog-Vishesha Vidnyana of 'Urdhaa Amlapitta' can be correlated with 'Hyperacidity'.

With the help of results obtained in clinical study following conclusions can be made.

1. Majority of the patients were from the age group 30-40 yrs.
2. Males than females have equal prevalence of Amlapitta
3. Most of the patients were from middle class income group
4. 15% patients were free form any kind of Vyasan, others had some sort of Vyasana such as Tea./Coffee, smoking, alcohol etc.
5. Most of the patients included in the study were of pittapKapha prakritis
6. Maximum Patients having history of Ratrijagarana, Diwaswap
7. Manasika Hetu- from total sample in 32.5% of patients mansika hetu like stress, anxiety was observed

So we can concluded that prevalence of amlapitta is more in pitta-kapha pradhan prakruti, middle age individuals & Middle economic class, Also history of addiction, Non-veg consumption, habit of Ratrijagrana, Diwaswapa, psychological factors like stress, anxiety were observed as main causative factors for amlapita.

1) % Wise improvement of Symptoms

A significant improvement was observed in symptoms. Vamanottar Guduchyadi Kwatha reduced symptoms upto 83.07% which is very beneficial. However Wilcoxon test applied to effect of therapy on symptoms is found highly significant. It indicates that Guduchyadi Kwatha is effective in reducing symptoms of Urdhavaga Amlapitta

2) Symptom score was evaluated by Mann-Whitney test Symptoms are effectively relieved by the therapies 'Vamnottar Guduchi Kwatha 'having better action,

3) Pathological Improvement

A significant improvement was observed in Gastroscopy before n after treatment. Vamanottar Guduchyadi Kwatha reduces Gastroscopic changes markedly

Finally we can conclude that

- Vaman Karma ' and Guduchyadi Kwatha' are also highly effective in the management of 'Urdhvaga Amlapitta'
- Therefore we can say that , shodhanapurvak shaman chikitsa is better than shaman chiktisa alone in 'Urdhvaga Amlapitta' as it cures the root cause of the disease because of 'Samprapti Bhanga'
- Treatments are safe and there is no side effects observed during the study.