



**ORIGINAL RESEARCH PAPER**

**Ayurveda**

**"A CASE STUDY OF EFFECT OF PATOLADI YOGA IN THE MANAGEMENT OF AMLAPITTA"**

**KEY WORDS:** Vidagdhapitta, Deepan-pachan, Amlapitta, Shaman.

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**ABSTRACT**

Dosha, dhatu and malas are the basic component of sharir. One of the main doshas is pitta and most common disease due to vidagdhapitta is Amlapitta with features like amlodgara, kanthadaha, avipaka etc. Amavisha when get mixed with pitta the disease develops. Amlapitta is caused due to irregular and improper food habits and stressful life. The treatment involves shodhana and shaman chikitsa. Patoladiyoga is one of the best drugs for amlapitta. Katu tikta raspradhan dravyas and deepan-pachan properties are the key features of this yoga.

**Summary:-** A case of amlapitta, successfully treated with Patoladi yoga has been discussed in this article. The contents of Patoladi yoga and their action on the disease has been explained.

**CASE REPORT:-**

A 35 years old male patient came in OPD with the complaints of

- 1) Kantha-udar daha (burning sensation in throat and all over abdomen)
  - 2) Amlodgara (burpings)
  - 3) Chardi (vomiting) 1-2 times/day
  - 4) Udar aadhman (heaviness in abdomen)
  - 5) Aruchi (anorexia)
  - 6) Bhramaprachiti (vertigo)
- Since 2 months.

No H/O – diabetes, hypertension, bronchial asthma and any other major illness.

No any surgical history.

**Habits :-**

Alcohol consumption 2-3 times / week  
Tea 5-7 times / day  
Tobacco chewing since 10 years.

**Occupation:-**

Labour

**On examination :-**

Patient was afebrile.  
Pulse rate was 82/min. regular  
Blood pressure was 110/70 mm of Hg  
There was no haematemesis.

Routine investigations were done 15 days ago and were within normal limits.

Patient had taken allopathy treatment before 15 days.

Endoscopy was done before 10 days which was within normal limits.

**Treatment given:-**

Patoladi yoga (churna) 500 mg TID after food with luke warm water. Patient was asked to avoid the spicy and oily food and skip the tea and alcohol.

After 7 days there was no chardi (vomiting), no kanthadaha (burning sensation in throat), no aruchi (anorexia).

There was still mild adhman (heaviness in abdomen) and bhramaprachiti (vertigo) on and off. Patient was asked to continue the treatment for more 7 days.

**Observation and method of analysis:-**

Observation was made according to gradations of symptoms.

**1) Daha:-**

- 0 - No daha
- 1 - Daha in any 1 area of udara, kantha, ura occasionally for more than half hour
- 2 - Daha in any 2 areas/occurs daily for half hour to 1 hour
- 3 - Daha occurs daily in more than two areas for more than 1 hour and relieves after digestion of food or vomiting.
- 4 - Daha involving most of the areas, patient may not sleep at night and does not relieve by any measure.
- 5 - Severe degree of daha involving the whole body and does not relieve by any measure.

**2) Amlodgara:-**

- 0 - No amlodgara at all.
- 1 - Occasionally during day or night for less than half hour after meals.
- 2 - Amlodgara occurs daily for 2 to 3 times for " to 1 hour and relieves by sweets, water and antacids.
- 3 - Amlodgara after every intake of meal, any food substance for " to 1 hour and relieves by food and vomiting.
- 4 - Amlodgara for more than 1 hour and does not relieve by any measure.

**3) Chardi:-**

- 0 - No vomiting at all.
- 1 - Frequency of salivation every day.
- 2 - Feels sense of nauseating and vomits occasionally.
- 3 - Frequency of vomiting is 2 to 3 times or more per week and comes whenever daha and pain aggravated.
- 4 - Frequency of vomiting daily.
- 5 - Frequency of vomiting after every meal or even without meal.

**4) Adhmana:-**

- 1 - No adhmana.
- 2 - Occasionally feeling of distension iof abdomen.
- 3 - Daily after intake of food for 1 hour with mild distension of abdomen.
- 4 - Distension of abdomen upto 1 to 3 hours after food intake.
- 5 - Severe distension of abdomen upto more than 6 hours after intake of food.

**5) Aruchi:-**

- 0 - Willing towards all type of food.
- 1 - Unwilling towards specific food but less than normal.
- 2 - Unwilling towards specific rasa.
- 3 - Unwilling towards food but could take the meal.
- 4 - Unwilling towards unliking food but not to other.
- 5 - Totally unwilling for meal.

**6) Bhramaprachiti:-**

- 0 - No reeling of head.
- 1 - Sometimes feeling of reeling head/bhrama.
- 2 - Feeling of reeling head/bhrama < 3 times a day.

3 - Feeling of reeling head/bhrama>3 times a day.  
 4 - Frequently feeling of reeling head, change of posture causes severe problem.

Total global count of the symptoms before and after treatment was as follow. (Table no 1)

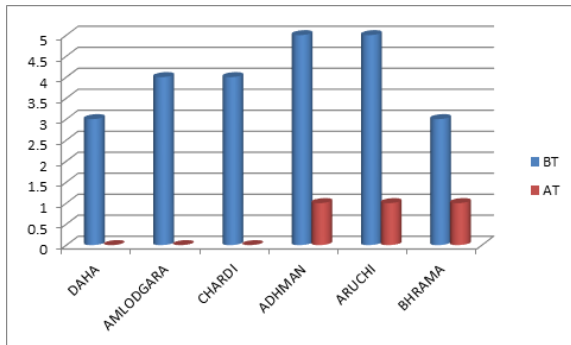
SYMPTOMS	BEFORE TREATMENT	AFTER TREATMENT
Daha	3	0
Amlodgara	4	0
Chardi	4	0
Adhmana	5	1
Aruchi	5	1
Bhramaprachiti	3	1
TOTAL	24	3

(table no. 1)

The percentage relief in Daha, Amlodgara and Chardi was found to be 100%. In symptoms like Adhmana and Aruchi the relief was 80%. In Bhramaprachiti it was 66.66%

So the total percentage relief was found to be 87%. This showed that Patoladi yoga was significant in reducing the symptoms of Amlapitta.

**Graphical presentation of the symptoms before and after treatment**



(diagram no. 1)

**DISCUSSION :-**

Amlapitta is a condition where excessive secretion of amla gunatmak pitta takes place causing vidahyadi condition. According to Vachaspati-

अम्लाय् पित्तम् अम्लपित्तम् ।

means pitta leading to sour taste

विदाहदम्लगुणोद्विक्तम् पित्तं अम्लपित्तम्।  
 (विजय रक्षित)

अम्लगुणोद्विक्तम् पित्तम् अम्लपित्तम् ।  
 चक्रदत्त

Amlapitta is a condition where excessive secretion of amla gunatmak pitta takes place causing vidahyadi condition. In ayurveda increased intake of oily, spicy food are depicted for aggravation of pitta dosha. Vidagdha pitta leads to Amlapitta. In this case, the patient was consuming alcohol, tobacco and tea which was one of the causative factors for the disease. Due to low socio-economic status, there was lack of nutritional food and increased mental stress.

In this patient due to alcohol consumption, improper food timings and stressful life, agnimandya was the first step towards the disease. Agnimandya led to aama formation which then vitiated the pitta dosha. Increased amlata in pitta dosha caused amlapitta.

The nidana or hetu of amlapitta can be catagorised as following

**1) Aharaja hetu:-**

The first and foremost group of etiological factors of amlapitta may be considered as the dietary factors. Under this group the intake of food against the code of dietics ie Ahara Vidhi Visheshaytana is included. Various types of incompatible substances, excess use of pitta aggravating factors like katu, amla, vidahi padartha sevan and untimely consumption of food are the factors against Ahara Vidhi Visheshaytana and they directly disturb the equilibrium of pitta.

**2) Viharaj hetu:-**

To keep the heath undisturbed, one is required to follow the healthy habits. Due to heavy work load, we often suppress the natural urges and disturb the time span of sleep. This causes many changes and disturbances in biological clock of the body. ultimately giving rise to amlapitta.

**3) Manas hetu:-**

Psychology also plays a great role in maintaining the health. An abnormal psychology in terms of stress, anger, anxiety, greediness etc. would affect physiology of digestion and lead to amlapitta.

In Bhaishajya ratnavli, Patoladi yoga has been mentioned in Amlapitta chikitsa. In order to break the pathophysiology of the disease, katu and tikta rasatmak and anuloman dravyas are needed. All these deepan pachan dravyas relieve the samata present in pitta leading to niramata and niram pitta secretion.

Aampachan is the main event which takes place by this yoga which helps to break the pathophysiology of the disease

In Patoladi yoga following dravyas are used.

- 1) Patola
- 2) Shunthi
- 3) Guduchi
- 4) Katuka

The rasa virya and vipaka of dravyas are follows

**1) PATOLA:-**

**Rasa :** tikta  
**Virya :** ushna  
**Vipaka :** katu  
**Guna :** laghu,ruksha

It is deepan pachan as it is tikta rasatmak.

Due to tikta rasa and katu vipaka patol acts on agnimandya and aruchi. It is best deepan pachan dravya. So it is said to be best in amlapitta. It acts on digestive system and relieves all the aama lakshanas

**2) SHUNTHI:-**

**Rasa :** katu  
**Virya :** ushna  
**Vipaka :** madhur  
**Guna :** laghu, snigdha

It is best deepan pachan and shulaghna dravya. It is used in aruchi, adhmana, agnimandya. Aama pachan is best done by Shunthi.

**3) GUDUCHI:-**

**Ras :** tikta,kashaya  
**Virya :** ushna  
**Vipaka :** madhur  
**Guna :** guru,snigdha

It is used for chardinigrahana, deepan, pachan, anulomana. It helps to reduce aamashaygata amlata. Due to tikta kashaya rasa it acts as pitta shamak.

**4) KUTKI:-**

**Rasa :** tikta  
**Virya :** shita  
**Vipaka :** katu  
**Guna :** ruksha, laghu

It is rochan, deepan, pittasarak, dahaprashaman. So it is aruchi and agnimandyahara also it is pittavirechak.

Overall the contents of this yoga are agnimandyahara. In amlapitta the vidagdha pitta is due to aama and which is due to improper food habits.

#### **CONCLUSION:-**

Amlapitta is not mentioned in our vedic texts. Acharya Charaka, Sushrut and Vagbhata has not clearly mentioned the word amlapitta. Acharya Kashyapa was the first to describe amlapitta in detail. Describing the pathogenesis of amlapitta, Acharya Charaka mentioned that amavisha when gets mixed with pitta the disease amlapitta is developed. Whereas according to Acharya Kashyap the disease is caused by vitiation of doshas (tridoshas) causing mandagni leading to vidagdhajirna manifesting as Amlapitta due to vitiation of pita which is already increased due to its own causes.

Changed lifestyle, increased pace of life, stress as well as changes in foods and food habits have contributed to the increased incidence of a good number of clinical conditions

In this case, patient got total relief in 15 days from the symptoms like daha, amlodgara and chardi. There was mild aadhman and bhramaprachiti. Patoladi yoga mentioned in Bhaishajya ratnavli is very beneficial in a case of amlapitta.

#### **REFERENCES**

- 1) Bhaishajya Ratnavli- edited by Rajeshwar Dutta Shastri, Chaukhamba Sanskrit Sansthana, Varanasi.
- 2) Chakrapani- Ayurved Dipika Commentary on charak Samhita, Chaukhamba Surbharti, Varanasi.
- 3) Charak Samhita- Charak Chandrika hindi commentary by Bramhanand Tripathi.
- 4) Chakradatta – Ed. By Pandit Sadanand Sharma, Meherchand Publication New Delhi.