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## Ayurveda Management Of *Garavishjanit Amlapitta*: A Case Study

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**ABSTRACT:** People are not following dietary disciplines which suits for their health. Many of fast food substances, unhealthy eating habits fall under *Viruddhaahar*. *Amlaguna* property of the pitta is exaggerated. Acharya Charaka mentions the diseases which created from consumption of *Viruddhaahar*. Repeated consumption of *viruddhaahar* leads to *agnidushti* and such *dushtagni* is unable to digest even light food. Indigested food forms *aamvisha*. *Aamvisha* probably has the nature of *Garavisha*. *Ama* combines with vitiated pitta and this *sthansamshrya* occurs in *Aamsaya* leading to *Amlapitta*. *Hetu* and *Vyadhi viparit chikitsa* becomes pivotal part in treatment of *Garavishjanit Amlapitta*. The *Chikitsa* Principles are *shodhan* in the form of *Vaman* and *Virechan* and then *shaman chikitsa*. But in the current clinical practice, *Shaman Chikitsa* is also preferred in *Amlapitta*. So we will work out on *shaman remedies* to be tested for effectiveness in *Garavishjanit Amlapitta*. *Sootshekhar Ras* is clinically proven remedy and used in the treatment of *Amlapitta*. *Suvarna* is one of the main ingredients in *Sootshekhar Ras* which is stated as *vishdoshhar* and used in the treatment of *garavisha*, *soit* is *hetuviparit*. The ingredients of which are the drugs *agnivruddhi* and *pittadoshasanshaman* property. Thus can be used as *shaman remedy* in *Garavishjanit Amlapitta*. The result revealed significant effect of *Sootshekhar Ras* in various subjective parameters like *avipak*, *klama*, *utklesh*, *tikta-amla udgar*, *hruda-kantha dah* and *aruchi* after treatment.

**Keywords** – *Amlapitta*, *Viruddhaahar*, *Sootshekhar Ras*.

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## INTRODUCTION:

Dietary pattern of Indian people has been changing and up to certain extent by the influence of western culture. People are not following dietary disciplines which suits for their health. Many of fast food substances, unhealthy eating habits fall under *Viruddhahar*. Irregular and untimely eating habits along with certain variations of recipes can be included under the *Viruddhaharviz*. *Kaal*, *Matra*, *Sanskara*, *PariharViruddha* etc<sup>1</sup>

*Ashtang Hrudayakar* quotes that the effects of *Viruddhahar* consumption are likely that of *Garavish*.<sup>2</sup>

*Acharya Charak* enlists the diseases as *Shandhya*(Sterility), *Aandhya* (Blindness), *Visarpa* (Erysipelas), *Dakodara* (Ascites), *Visphota* (Eruptions), *Unmada*(Insanity), *Bhagandar*(Fistula), *Moorcha* (Fainting), *Mada* (Intoxication), *Aadhman*

(Flatulence), *Galagraha* (Spasmodic obstruction in throat), *Pandu* (Anaemia), *Aamvisha* (Poisoning due to *Ama*), *Kilasa* (A skin disease), *Kushtha* (skin disease), *Visha*(Poisoning), *Grahani* (Sprue-like disease), *Shotha* (Oedema), *Amlapitta* (*Hyperacidity*), *Jwara*, *Peenas* (Rhinitis), *Santaan dosha* and even death to arise from this hetu i.e. consumption of *Viruddhahar*. *Amlapitta* is one of them,<sup>3</sup> It is mentioned by *Charak* in *Grahani Chikitsa* and explained in details in *Madhavnidan*, *Yogaratnakar*, *Kashyapa Samhita*.

According to *Ayurved*, *Amlapitta* is described as a disease generally resulting after *ajeerna*.<sup>4</sup> Repeated consumption of *viruddhaahar* leads to *agnidushti* and such *dushtagni* is unable to digest even light food. Thus indigested and fermented food

forms *aamvisha*.<sup>5</sup> and that *amavisha* probably has the nature of *Garavisha*.<sup>6</sup> Such *Amavisha* and *Viruddhahar* itself vitiates pitta and *Ama* combines with vitiating pitta and this *sthansamshrya* occurs in *Aamsaya* leading to the manifestation of *avipak*, *klama*, *utklesh*, *tikta-amla udgar*, *hruda-kantha dah* and *aruchi*.<sup>7</sup>

### CASE STUDY-

#### CASE -1

A male patient of age 45 years, driver by profession had come to OPD with the following symptoms *avipak*, *klama*, *utklesh*, *tikta-amlaudgar*, *hruda-kantha dah*, *aruchi*. He had history of following all symptoms since 1 year. He had no present any other illness.

#### On examination-

Pulse: 78/min, B.P.- 130/76 mmHg, Temp.- 97.7<sup>0</sup>F, CNS, CVS, RS-NAD,

*Jivha - Sama,*

*Mal mutra pravrutti–Samyak,*

*Prakruti – Pittapradhankapha,*

*Bala – Madhyam,*

*Agni- Mandagni.*

#### CASE -2

A male patient of age 40 years, Peon by profession had come to OPD with the following symptoms *avipak*, *utklesh*, *tikta-amlaudgar*, *gaurav*, *hruda-kantha dah*. He had history of following all symptoms since 6-7 month. He had no present any other illness.

#### On examination-

Pulse: 72/min, B.P.- 136/78 mmHg, Temp.- 97.8<sup>0</sup>F, CNS, CVS, RS- NAD,

*Jivha -Sama,*

*Malmutra pravrutti – Samyak,*

*Prakruti – Pittapradhanvata*

*Bala- Madhyam*

*Agni--Mandagni*

After clinical examination, both patients is diagnosed with *Amlapitta* and advised to take oral medication i.e. *Sootshekhar Ras*.

#### MATERIAL -

*Sootshekhar Ras (YogratnakarAmlapittachikitsa)*<sup>8</sup>

Sr.No.	Sanskrit Name	Latin Name	Quantity
1	<i>Shudh Parad</i>	<i>Mercury</i>	1-Part
2	<i>Suvarna Bhasma</i>	<i>Gold</i>	1-Part
3	<i>Shudh Tankan</i>	<i>Borax</i>	1-Part
4	<i>ShudhVatsanabh</i>	<i>Aconitum ferox</i>	1-Part
5	<i>Shunthi</i>	<i>Zingiber officinale</i>	1-Part
6	<i>Marich</i>	<i>Piper nigrum</i>	1-Part
7	<i>Pippali</i>	<i>Piper longum</i>	1-Part
8	<i>Dhatur</i>	<i>Datura metal</i>	1-Part
9	<i>ShudhGandhak</i>	<i>Sulphur</i>	1-Part
10	<i>ShudhTamra</i>	<i>Copper</i>	1-Part
11	<i>Ela</i>	<i>Elettaria cardamom</i>	1-Part
12	<i>Twak</i>	<i>Cinamomumzeylanicum</i>	1-Part
13	<i>Patra</i>	<i>Cinamomtamala</i>	1-Part
14	<i>Nagkeshar</i>	<i>Mesuaferrea</i>	1-Part
15	<i>ShankhaBhasma</i>	<i>Turbinellarapashels</i>	1-Part
16	<i>Bilwamajja</i>	<i>Aeglesmarmelos</i>	1-Part
17	<i>Kachorak</i>	<i>Angelica glauca</i>	1-Part
18	<i>Bhrungaraj</i>	<i>Eclipta alba</i>	Bhavana

*Anupana Dravya - Madhu and Sarpi*

*Sootshekhar Ras* was procured from FDA approved pharmacy (Unjha health care pvt.Ltd,Ahemdabad )

#### METHODOLOGY -

- Type of Study - Clinical, Randomized, Single blind trial study.
- Primary end Point - Reduction in the gradation of criteria of assessment in duration of four weeks for efficacy in GA.
- Secondary end Point - Side effects of both drugs if any observed during the trial study of four weeks.

**PLACE OF STUDY-** Bharati Vidyapeeth Medical Foundation's Ayurved Hospital & Research Centre, Katraj-Dhankawadi, Pune.

#### DOSAGE SCHEDULE-

Drug Name	<i>Sootshekar Ras</i>
Sevan Kala(Time)	<i>Rasayan( Early morning)</i>
<i>Matra (Dose)</i>	125 mg
<i>Anupana</i>	<i>Madhu-Sarpi</i>
Duration	Four weeks

#### CRITERIA FOR ASSESSMENT-

- For subjective parameters, their English synonyms and gradation index were taken from Text with English Translation-*Yogratnakar*. The sign and symptoms have been included as subjective parameters on the basis of reference from *Yogratnakar-Amlapitta chikitsa adhayay*, shloka no.1-2

No.	Symptoms	Gradation
1	<i>Avipak</i> (Indigestion)	<p><b><i>Jeernaaharalakshana</i></b>—<i>Utsaha, laghuta, Udgara shuddi, trishna, kshudh apravritti and yathochit malotsarga</i></p> <p>0-Presence of all symptoms 4 hrs after taking food</p> <p>1-Presence of any 4 symptoms 4 hrs after taking food</p> <p>2-Presence of any 2 symptoms 4 hrs after taking food</p> <p>3-Presence of any one symptoms 4 hrs after taking food</p>
2	<i>Klama</i> (Exhaustion without any exertion)	<p>0-No</p> <p>1-Mild</p> <p>2-Moderate</p>
3	<i>Utklesh</i> (Nausea)	<p>0-No</p> <p>1-Occasionally</p> <p>2- frequently</p> <p>3-Continuous <i>Utklesh</i></p>
4	<i>Tikta Udgar</i> (Bitter eructation)	<p>0-Noudgar</p> <p>1-Occasionally</p> <p>2-frequently</p>

5	<i>Amla Udgar</i> (Sour eructation)	0-Noudgar 1-Occasionally 2-frequently
6	Gaurav (Feeling of heaviness)	0-No 1-Yes
7	<i>Hrud dah</i> (Heart burn)	0-No 1-mildburning(dah) 2-Burning not disturbing daily activities 3- Burning disturbing daily activities
8	<i>Kantha dah</i> (Burning in throat)	0-No 1-mildburning(dah) 2-Burning not disturbing daily activities 3- Burning disturbing daily activities
9	<i>Aruchi</i> (Tastelessness)	0-No 1-Yes

## RESULT

Treatment has been given for 4 weeks and improvement in parameters at 7<sup>th</sup> day, 14<sup>th</sup> day, 21<sup>th</sup> day, 28<sup>th</sup> day are show below:

### SUBJECTIVE PARAMETERS -

Follow up – case -1

Symptoms	BT(day 0)	7 <sup>th</sup> day	14 <sup>th</sup> day	21 <sup>th</sup> day	28 <sup>th</sup> day
<i>Avipak</i>	2	2	1	0	0
<i>Klama</i>	2	2	1	0	0
<i>Utklesh</i>	3	3	2	1	0
<i>TiktaUdgar</i>	2	1	1	0	0
<i>Amla Udgar</i>	2	1	1	0	0
<i>Gaurav</i>	0	0	0	0	0
<i>Hrud dah</i>	3	2	1	1	0
<i>Kantha dah</i>	3	2	1	0	0
<i>Aruchi</i>	1	1	1	0	0

Follow up - case -2

Symptoms	BT(day 0)	7 <sup>th</sup> day	14 <sup>th</sup> day	21 <sup>th</sup> day	28 <sup>th</sup> day
<i>Avipak</i>	3	2	2	1	0
<i>Klama</i>	0	0	0	0	0
<i>Utklesh</i>	2	2	1	1	0
<i>TiktaUdgar</i>	2	1	1	0	0
<i>Amla Udgar</i>	2	1	1	0	0
<i>Gaurav</i>	1	1	1	0	0
<i>Hrud dah</i>	3	2	2	1	0
<i>Kantha dah</i>	2	1	1	0	0
<i>Aruchi</i>	0	0	0	0	0



## DISCUSSION

**Samprapti-** Frequent *viruddhahar* consumption leads to *agni dushti* and that *agni* is even unable to digest light food. Thus undigested food becomes poisonous in nature and the *viruddhahar* remains in compatible with the body. This combinely vitiates pitta *dosha* and combined with it ultimately results in manifestations of *amlapitta* i.e. *avipak, kham, utklesh, tikta-amlaudgar, hrud-kanthadah, aruchi*.

**Samprativighatan-** The *ushan gunatak dravyas* induces deepen, *pachan* effect in the body and *Suvarna* pacifies pitta dosha & poisonous nature of undigested /

incompatible food by its *sheetaveerya*. This combined effect results in *agnivruddhi* and *doshasan shaman* and eventually alleviating the symptoms of *Garavishajanit Amlapitta*. The effect of *suvarna* in *Soot shekhar ras* may have acted as *apunar bhava*, So preventing the recurrence of the manifestation.

## CONCLUSION

From the present case study it is concluded that *Sashatriya ayurvedic* medicine like *Sootshekhar Ras* for internal use with some *Pathyaahar* (dietary control) is more effective in the management of *Garavishajanit Amlapitta*.

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