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REVIEW ARTICLE

A Comprehensive Review of Urdhwaga Amlapitta

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ABSTRACT

Amlapitta is one of the most common and familiar diseases of Annavaha srotas in the present era. In this modernized and competitive world, each person is living an unhealthy and stressful life. Materialistic lifestyles provoke people to run behind a busy and stressful schedule. The new lifestyles toward which modernized population gets attracted are far away from the dincharya, ratricharya, and ritucharya along with aahar vihar as suggested in samhitas which is necessity for a healthy life. These days people are easily attracted towards the junk foods along with huge changes in their dietary pattern leading to Amlapitta which itself is a very troublesome disease and can give rise to many serious complications if not treated in time. The cardinal features of amlapitta are avipaka (indigestion), hritakantha daha (heart and throat burn) and tikta- amlodgara(sour and bitter belching). Sign and symptoms of Amlapitta are in resemblance with gastritis, hyperacidity, gastro-oesophageal reflux disease, peptic ulcer, duodenal ulcer etc. modern text have different pathophysiology's to aforementioned gastro-intestinal diseases. Whereas in ayurveda all of these can be solely studied under the concept of amlapitta. Compared to modern management, ayurvedic management of the disease is much bigger hope Hence, the main aim is to understand the concept and line of treatment in accordance with each disease representation.

1. INTRODUCTION

With increasing population and modernization, there has been an increment in the production & growth in the agriculture with ever increasing demands. This has somehow bought down the quality of food also. People have started indulging in wrong food habits which is welcoming to a of diseases. Our GIT is the one which takes care of food when taken and has to suffer primarily the consequences.

The incidence of gastritis in India is approximately 3 in 869, i.e., 12,25,614 people is suffering from gastritis out of total 106,50,70,607 population.^[1]

In present times, *Pitta vardhaka aahara* vihara is a part of the present lifestyle such as salty, spicy, and fried food, and frequent use of NSAIDs, antibiotics, steroids, and aspirin such as medicines plays a major role in developing *amlapitta*. *Vihara* such as fasting, eating between meals, having food in hurry and worry, suppression urges disrupts the *Pachakpitta* thus developing the condition called *Amlapitta*. *Prakrita ras* of *pitta* is *katu*. *Amlapitta* is a condition where *prakrit ras* of *pitta* changes from *katu* to *amla*.

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Dr. Neetu Chauhan, Shri Krishna Government Ayurvedic College and Hospital, Kurukshetra, Haryana, India. Email: neetuharidwarl@gmail.com *Amlapitta* can have resemblance with many conditions such as gastritis, hyperacidity, GERD, peptic ulcer, and duodenal ulcer and can be related to any aforementioned condition.

2. MATERIALS AND METHODS

- 1. Ayurvedic literature's related to Amlapitta
- 2. Previous articles and research works
- 3. Modern medical literatures.

2.1. Methods

Historical review

Reference of Amlapitta in Ayurvedic literatures both brihatrayi, laghutrayi, and other samhita's.

- Vedic kala
 - No reference to Amlapitta is found in Vedic Kala.
- Brihatrayi
 - There is no separate description of *Amlapitta* found in any of the *Brihatrayi samhitas* (*Charaka Samhita, Sushruta Samhita,* and *Ashtanga hridya*), but the word *Amlapitta* is discussed in several places such as:
- Charaka Samhita: While describing the common properties of

the eight types of milk, the term Amlapitta is mentioned by

- 1. Acharya Charaka.
- 2. Kulatha is listed as causative factor of Amlapitta.
- Excessive use of lavana rasa and viruddha aahar is a cause of Amlapitta generation.
- 4. Rajbhasha is mentioned as one of the causes of Amlapitta.
- 5. Indication of kansa haritaki in Amlapitta.
- Mandagni (hypofunction of Agni) leads to indigestion and formation of Annavisha, when Annavisha combines with the pitta, it results into the Amlapitta.
- Sushruta Samhita^[2]
 - Excessive use of *lavana rasa* causes *Amlika*.
 - Amlika mentioned by Acharya Sushruta is very similar to Amlapitta.
- Ashtanga Hridayam^[3]

While describing Pittaj Hridroga Vagbhata has used the term Amlapitta.

- Kashyapa Samhita^[4]
 - Kashyap Samhita is the first textual reference where Amlapitta is mentioned as separate disease with its detailed description, i.e., Nidana, Rupa, Chikitsa, Pathya, and Apathya.
 - Acharya Kashyapa has also mentioned the importance of Anoop and Jangala Desha as a causative and relieving factor of Amlapitta. Amlapitta is a vyadhi of anoopa desha, so it is treated with jangal desh aushadhi. When the amlapitta becomes untreatable even with jangal desh aushadhi, the rogi is advised "deshaantar gaman"i.e., change of climate.
- Madhaya nidana^[5]

Madhava nidana is the 2nd text after the *Kashyap* which has described the *Amlapitta* along with its *Nidana*, *Rupa*, types, and *Samprapti*.

• Sharangdhar samhita^[6]

Acharya Sharangdhar did not explain about the Samprapti of the disease but gave a detail description of different types of preparation's useful in Amlapitta.

Bhavprakash^[7]

In *Bhavaprakasha*, separate description of *Amlapitta* is given along with its *Upadrava* and arishta lakshana.

- Yogratnakar has mentioned, Nidan Rupa Bheda Samprapti and Pathya Apathya along with the Upadravas of Amlapitta.
- Bhaishajya Ratnavali^[8]

Only described the *Chikitsa of Amlapitta* along with different preparations useful in *Amlapitta Chikitsa*.

2.2. Etiology/Nidan of Amlapitta

The etiological factors of Amlapitta can be classified as Table 1

- Aaharaja nidan
- Viharaja nidan
- Manasika nidan
- Agantuja nidan

2.2.1. Viharaj Nidan

- Atisnana (Taking excessive bath)
- Ati-Avagahanata (Excessive swimming)
- Bhuktva Divaswapna (Sleeping in day time after the meals)
- Vega Dharana (Suppression of natural urges)
- Shayya Prajagarana (Improper sleeping schedule)

2.2.2. Manasa Nidana

- Chinta, shoka, bhaya, krodha, moha
 - Agantuj Nidana

- Desh: Amlapitta is more common in population living in anoopa desha because of kapha dosha dominancy
- Ritu-Varsha ritu (rainy season) because of weak digestion power.
- Prakriti Pittaja prakriti is more susceptible for the disease
- Amlapitta Samprapti

According to and dosha:

Bhed according to gati and dosha are mentioned in Tables 2 and 3.

- 1. Urdhwaga amlapitta
- 2. Adhogata amlapitta

2.3. Samanya and Vishishta *Rupa* are mentioned in Tables 4 and 5

2.3.1. Sadhya Asadhyata/prognosis of Amlapitta

According to *Acharya Madhava*, the newly manifested disease is *sadhya* (curable) with good efforts. In chronic conditions, the *Amlapitta* becomes manageable but cannot be cured completely, i.e., it becomes *Vyapya*.

According to *Acharya Kashyap*, disease becomes incurable when it is associated with *Updrava's*.

2.3.2. Chikitsa sutra^[10]

The first line of treatment is *vamana* in *Urdhwaga Amlapitta* and *Virechana* in *Adhogata Amlapitta*. After *shodhana*, *Shamana Chikitsa* should be applied.

If disease has attained, its chronicity *Niruha* and *Anuvasan basti* should be given accordingly.

2.3.3. Upshaya Annupshaya (according to Acharya Kashyap)

- Vattika Amlapitta-Snigdha upshaya
- Paitikka-Swadu and sita upshaya
- Shleshmika-Ruksha and ushana upshaya.

2.3.4. Upadrava^[11]

- 1. Atisara (loose motions)
- 2. Aruchi (patient does not want to eat)
- 3. Pandu (anemia)
- 4. Sotha (swelling/inflammation)
- 5. Bhram (dizziness)
- 6. Dhatu-kshaya (emaciation or weight loss)
- 7. Shula (pain).

2.4. Modern Interpretation of Amlapitta

Number of research has been done over the *Amlapitta* and their correlation with modern diseases which are as follows:^[12]

- 1. Vaidya Tripathi correlates Amlapitta with GERD
- 2. Vaidya Purushottam with chronic gastritis
- 3. Vaidya S.N Tripathi correlates with non-ulcer dyspepsia
- 4. Vaidya Harinath Jha correlates with hyperacidity and GERD.

2.5. Gastritis Versus Amlapitta

Gastritis is the inflammatory condition of the gastric mucosa some signs and symptoms of chronic and acute gastritis which are very similar to *Amlapitta* as mentioned in Table 6.

Management according to modern science:

- 1. Proton pump inhibitor
- 2. H2 blockers
- 3. Antibiotic therapies.

2.6. Amlapitta Versus Hyperacidity

This is mentioned in Table 7 under the heading of the amlapitta versus hyperacidity.

3. DISCUSSION

After observing the sequential development of *Amlapitta*, it was not mentioned in the *Bruhatrayee* such as *Charaka*, *Sushrut*, *and Ashtanga* in detail like other diseases.

Kashyap Samhita is the first Samhita which explained a detailed description of the disease. Pittaj dosha is mainly involved in the pathogenesis of the Amlapitta such as intake of Pitta prakopaka ahar vihar. However, it is predominantly found in the Anoop desha which is contradictory to the pitta dosha involvement. Hetu of amlapitta can be taken in two ways. First hetu being amla, lavana, snigdha, ushna atisevana which increases properties of jala mahabhuta leading to drava gunadhikya. As the drava, snigdha, sara guna increase leading to amlapitta. Similarly with second hetu being katu, ushna, ruksha atisevana, leads an increase in properties of agni mahabhoota due to ushna gunaadhikya, simultaneously increasing Tikshna, ushna, lghu & ruksha guna giving rise to amlapitta. So two different hetus are giving two different samprapti leading to amlapitta as per flow chart 1. At present, it is correlated with GERD, chronic gastritis, non-ulcer dyspepsia, or hyperacidity. In ayurveda, treatment of choice is mainly based on the shodhan, i.e., Vaman.

4. CONCLUSION

There is no disease which perfectly resembles with the Amlapitta mentioned by Acharyas in different Samhita's but some other disease shares common symptoms with amlapitta. It was not a relevant disease in the samhita kaala and samgraha kaala. With the changes in the dietary habits of the people, the disease had made its presence among the people. It is one of the most common upper gastrointestinal disorders. It can be mostly observed in the middle age group population, evidently due to their improper eating schedule and pulling the night shift jobs. In Anoop desha, kapha dosha, or the jaliya ansh is responsible for its dominance. The prominent gunas of kapha dosha increase the dravatva and decrease the ushnatva guna of pitta dosha leading to further mandaagni. As a result, acharya kashyap has mentioned the concept of deshantar gaman which is a type of nidan parivarjan chikitsa. At clinical/OPD level, treatment is approached symptomatically through shaman chikista which can pacify the vitiated dosha for a duration and the patient would have to follow strictly the Pathya Apathya regimen. In its acute phase, the aggravated pitta can be expelled completely with the help of shodhan chikitsa and subsiding the Roga for a good amount of time.

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6. AUTHORS' CONTRIBUTIONS

All the authors contributed equally in design and execution of the article.

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This study does not require ethical clearance as it is a review study.

9. CONFLICTS OF INTEREST

Nil.

10. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from principal investigators.

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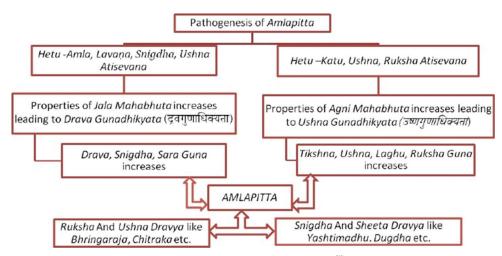
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Flowchart 1: Pathogenesis of Amlapitta^[9]

Table 1: The etiological factors of Amlapitta can be classified as

Both solids and liquids Aahar	According to quality of Aahar	Faulty dietary habits	Miscellaneous	Pitta provoking Aahar
 Kulathasevan, Prithuana (e.g., poha), Pistanna sevan (e.g., maida, besan) Bhrist dhany (fried food) Pulakasevan (husky food) Vidahianapan Phanit madya dustambupan 	 Apakwanna Sevana (uncooked food) Guru and Abhishyandi ahar (heavy to digest) Atisnigdha and atiruksha ahar Amla ahar Paryushita Anna Sevana 	 Akal bhojan (untimely eating) Adhyasana (food after meal) Visamasan Ajirnasana amapurnata Antarodakpan (drinking excess water during meal) Annahina madya (drinking alcohol without eating food) 	 Gorasa Sevana (milk products). Iksuvikara sevana (Sugar-cane products) 	 Ati Usna (very hot) Ati Amla (intake of excessive acidic diet) Ati Drava (intake of excessive liquid) Ati Tikshna Ati Panam (Over drinking)

Table 2: Difference in the symptoms between Kashyap and Madhav

Acharya Kashyap	Acharya Madhav
Vatika amlapitta	Sanila Amlapitta
Paittika amlapitta	Sukapha amlapitta
Shleshmika amlapitta	Sanila kaphaja amlapitta

Table 3: Difference between Urdhwaga amlapitta and Adhoga amlapitta

Urdhwaga amlapitta

- Character of vomitus in *Urdhwaga Amlapitta* is *Harit-pita-nila-araktam raktabh vaman-* green yellow blue light or dark red in color
- Ati-amla- excessive source
- Mashodakabham-appear like meat wash
- Ati pichvhilam-excessively sticky
- Acha shelshmanugatam-mixed with clear mucus
- Bhukte vidagdha to athwa api abhukte karoti tikta amla vami kadachit-bitter and sour vomiting occur just after the meal or during the digestion or even when the patient does not take food.
- Kanth hrit kukshi daha-burning sensation in throat chest and belly Shiro rujam-headache
- Kar Charan Daham aushnyam-burning sensation and increased heat in the hand and feet
- Mahatim aruchim-severe anorexia
- Jwaram cha kaphapittam-fever of kapha pitta origin
- Kandu mandalpidika shatnichitagata roga cha ayam-itching and manifestation of rounded elevated eruption and hundreds of boils spread over the body causes disease symptoms such as indigestion nausea.

Adhoga amlapitta

- Hrillas-nausea
- Koth-urticaria
- Agnisara-weakening of digestive fire
- *Harsha*-Goosebumps
- Sweda- excessive sweating
- Angapitatwa-yellow discoloration of body parts

Table 4: Samanya Runa of Amlanitta

S. No	: Samanya Rupa of Amlapa SYMPTOMS/RUPA	K.S	M.N	B.P	Y.R	S.N
1	Hrit Daha	+	+	+	+	+
2	Kanthdaha	+	+	+	+	+
3	Amlodgar		+	+	+	+
4	Klama		+	+	+	+
5	Avipaka		+	+	+	
6	Utklesha		+	+	+	
7	Tiktokder		+	+	+	
8	Gaurava		+	+	+	
9	Aruchi		+	+	+	
10	Vidbheda	+				
11	Gurukostha	+				
12	Amlakostha	+				
13	Shiroruja	+				
14	Hridshoola	+				
15	Adhmana	+				
16	Angsada	+				
17	Romaharsha	+				
18	Antrakujana	+				
19	Urovidaha	+				
20	Tiktasyata	+				
21	Karcharandaha		+			

Table 5: Symptoms according to doshas

Vishishta rupa	Vattika	Paittika	Shleshmika
According to Kashyapa Samhita	ShoolaAngasadJrimbha	BrahmaVivaha	GauravaChardi

Table 6: Amlapitta Vs. Gastritis

AMLAPITTA	GASTRITIS
Amlodgar	Sour belching
hrillas	Nausea
vamana	Vomiting
aruchi	anorexia
raktabh vanti	haematoemesis

Table 7: Amlapitta Vs. Hyperacidity

	* *	-	
AMLAPITTA			HYPERACIDITY
Hritadaha			Heart burn
Hritssula			Chest pain
Amla udgara			Sour belching
Amla utklesha			Acid reflux
Aruchi			Loss of appetite