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## A Comparative Study Of *Amlapittavinashak Yoga Kwath* & *Bhunimbadi Kwath* In The Management Of *Amlapitta* W.S.R. To Acid Peptic Diseases.

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**ABSTRACT:** Now a day, there are so many changes in life style, behavior and diet. To achieve our desires in limited time produces different types problems like anxiety, worry, anger, depression. In modern medical science symptomatology of *Amlapittais* equivalent to the features of hyperacidity. Hyperacidity and its complications pose a major threat to future public health resources throughout the world. The *Ayurvedic* management of *Amlapitta* aims not only control acid secretions in body but also to treat the root cause of the disease. People don't follow rules like *Dincharya* and *Rutucharya*. Peoples are not aware of Rules of consumption of food which are described in "*Aharvidhivishayatan*" by Acharya Charak. Because of this all factor causes physiological disorders, which causes *Annava* stratus drusti which cause *Mandagni* and if the *hetu* sevan is goes on then it cause *Ajeerna* which ultimately leads to *Aamvish*. When *Aamvish* mixed with *pittadi dosha*, the original *KatuRasa* of *Pitta* changes to *amla* causes *amalapitta* disease. *Amalapitta* is characterised by features like *Avipaak* (indigestion), *Klama* (tridness), *Utklesha* (nausea), *Tikta Amlaa Udagar* (sour and bitter belching), *gauravata* (Heaviness), *Hrudhkantha daha* (Heart and throat burning), and *Aruchi*. These clinical features are closely related to functional dyspepsia. All these symptoms if left untreated may produces Gastrointestinal disorder like peptic ulcer disease. Many disease like *Grahani*, skin disease like *Shitpitta*, *Udard* occurs as complication of *Amlapitta*. While describing the prognosis of *Amlapitta*, it has been stated that it can cured easily if promptly treated as earliest with proper *Pathyapathya*. The etiological factors like *Abhojana*, *Atibhojana*, *ganigraha*, *PanchakarmaVyapat* and seasonal variation etc. cause vitiation of *Doshas* and *Agni* which ultimately results *Mandagni* which is treated as mother of all the diseases. This *Mandagni* leads to *Avipaka* and due to *Avipaka* even light and small meals are not digested. This undigested and ill digested food gets *shuktatva* which leads to the formation of *Annavisha*. This *Annavisha* is manifested in the form of *Ajirna*. As per Charaka it is said that when diet is not properly digested it gets fermented and forms *Annavisha*. This *Ama* when mixed with *Pitta* then it develops the disease *Amlapitta*.

**Key word:** *Amlapitta*, hyperacidity, Acid Peptic disease, *Amlapittavinashak yoga kwath*, *Bhunimbadi kwath*.

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## INTRODUCTION:

In this modern techno era, we all are undergoing different life style modifications related to food and lifestyle. Irregular meal pattern, work in shift duties, irregular sleep timings, craze for fast foods, anxiety and stress induced hectic unhealthy schedules causes various disorders due to which there has been an extraordinary increase in the disorders related to *Annavaha Strotas* or the gastrointestinal (G.I.) system. Burning sensation in chest, sour belching, abdominal discomfort, nausea, vomiting, headache, constipation are the most common complaints faced in day to day life. All these symptoms

point out towards “*Urdhwag Amlapitta*” in Ayurveda. If left untreated, Hyperacidity may lead to complications like ulcerations in the Gastro-intestinal Tract. Ayurveda aims at balancing the *Doshas*, basically, working on the root cause of Hyperacidity, not just the symptoms! According to *samprapti* of *Amlapitta* its hetu<sup>1</sup> is *Dushta Ahar. Virudha Bhojana* (incompatible diet) and *Dusta Bhojana* (unhygienic or improper diet), when taken by a person who regularly enjoys *Pittaja Ahara* such as *Madya, Kulatha* and *Bhrista Dhanya* makes the *Pitta Vidagdha*. This *Vidagdha Pitta* gets sour or acidic (*Amla*

*Bhava*) which results in *Apaka* (indigestion), *Amlodgara*<sup>2</sup> (Acid eructations and Pyrosis) etc. and the diseases entity *Amla Pitta* comes into existence. In Kashyapa Samhita, Acharya Kashyapa explains that due to *Mandagni, Vidagda Anna Rasa* (undigested food) turns to *Shukta* form, this retains in *Amashaya* and causes *Amlapitta* Ayurveda emphasizes on the management of *Amlapitta* with *Pathyakar Ahar*<sup>3</sup>, *Vyayam* and *Nidan Parivarjan Chikitsa* along with various *Kalpas*. These *Kalpas* stated in *Samhita* are *Hetu* and *Vyadhi Viparit* targeting the causative *Doshas* and *Dhatu*<sup>4</sup>. Hence it gives us a hope that the multiple treatment modalities mentioned in *Ayurveda* acts on the basic pathology of the disease and help in better control

### AIMS AND OBJECTIVES.

- 1) To study the disease *amlapitta* in detail.
- 2) To study the effect of *amlapittavinashak yoga kwath* in *Amlapitta*.

3) To study the effect of *Bhunimbadi Kwath* in *Amlapitta*.

4) To compare the effect of *Amlapittavinashak Yga Kwath* And *Bhunimbadi Kwath* In *Amlapitta*.

5) To study Acid peptic disease.

### MATERIALS & METHODS:

#### Criteria of Diagnosis:

The patients were diagnosed on the basis of Symptoms of *Amlapitta*.

**Inclusive criteria-** Patients between age group 18 to 65 years of either gender.

- Patients with clinical signs and symptoms of *Amlapitta*. (*Avipak, Utkesha, Hrullas, Tikta-amla udgar, Hrdkanthadaha*)
- Patient having above *amlapitta* symptoms more than 1 month and less than 2 years.

#### Exclusive criteria-

- Patients having these symptoms for more than 2 years.

- Known cases of organic diseases like gastric ulcer, duodenal ulcer, CA stomach.
- Known cases of endocrine disorders like diabetes mellitus, Thyroid disorder.
- Patient with severe systemic disorders.
- Patients receiving any other treatment like NSAID'S, Antibiotics or other long term and continuous medication.

**Table no 1:- showing groups of management**

	<b>Trial group</b>	<b>Control group</b>
Drug	<i>Amlapittavinashak yoga kwath</i>	<i>Bhunimbadi kwath</i>
Dose	40ml	40ml
Duration	21 days	21 days
<i>Sevan Kala</i>	After meal	After meal
Route	Oral	Oral
<i>Anupana</i>	Lukewarm water	Lukewarm water
No. of patients	20	20
Follow up study	Every week and whenever needed	Every week and whenever needed

## DRUG REVIEW

### Selection of Drug:

Following are the main reasons to select this formulation:

1. In the preparation the ingredients are easily available. This formulation is easy to prepare and free from toxic effect.
2. The compound drug

*Amlapittavinashak yoga kwath* is having properties like, pitta dosha shaman, *deepaneeya*, *raktavardhaka* and *kaphavatahara*.

3. *Agni vikriti* is an important clinical condition of *Amlapitta*<sup>5</sup>. *Pachak agni* is an essential factor for the proper digestion and

assimilation of *ahara rasa*, with the *mandagni avastha samyakahara rasa* formation will not take place.

4. The etiological factors like *Abhojana*, *Atibhojana*, *ganigraha*, *Panchakarma Vyapat* and seasonal variation etc. cause vitiation of *Doshas* and *Agni* which ultimately results *Mandagni* which is treated as mother of all the diseases.
5. This *Mandagni* leads to *Avipaka* and due to *Avipaka* even light and small meals are not digested. This undigested food gets *shuktatva* which leads to the formation of *Annavisha*. This *Annavisha* is manifested in the form of *Ajirna*<sup>6</sup>. As per *Charaka* it is said that when diet is not

properly digested it gets fermented and forms *Annavisha*.

This Ama when mixed with Pitta then it develops the disease

*Amlapitta*.

6. In *Amlapittavinashak yoga* *guduchi*, *nimba*, *patol*, *haritaki*, *bibhitaki*, *amalaki* mainly possess the properties of *pitta dosha shaman*, *agnideepana*, *pachana*. therefore, helps in the production of intrinsic factor and assimilation of extrinsic factor which will help to enhance the process of *Samprapti Bhang* of *Amlapittaroga*.
7. *Anupana* of *Madhu* has been told in the reference which will purify *Rasawaha Srotasa* of patient.

### Criteria for Assessment

Patients were assessed on the basis of the following criteria:

The assessment was made based on following subjective and objective parameters and the assessment of the result was made on the basis of improvement in clinical findings as well as laboratory investigations, which were repeated after the completion of treatment also. The improvement in the clinical signs and symptoms were assessed by adopting. The following scoring method.

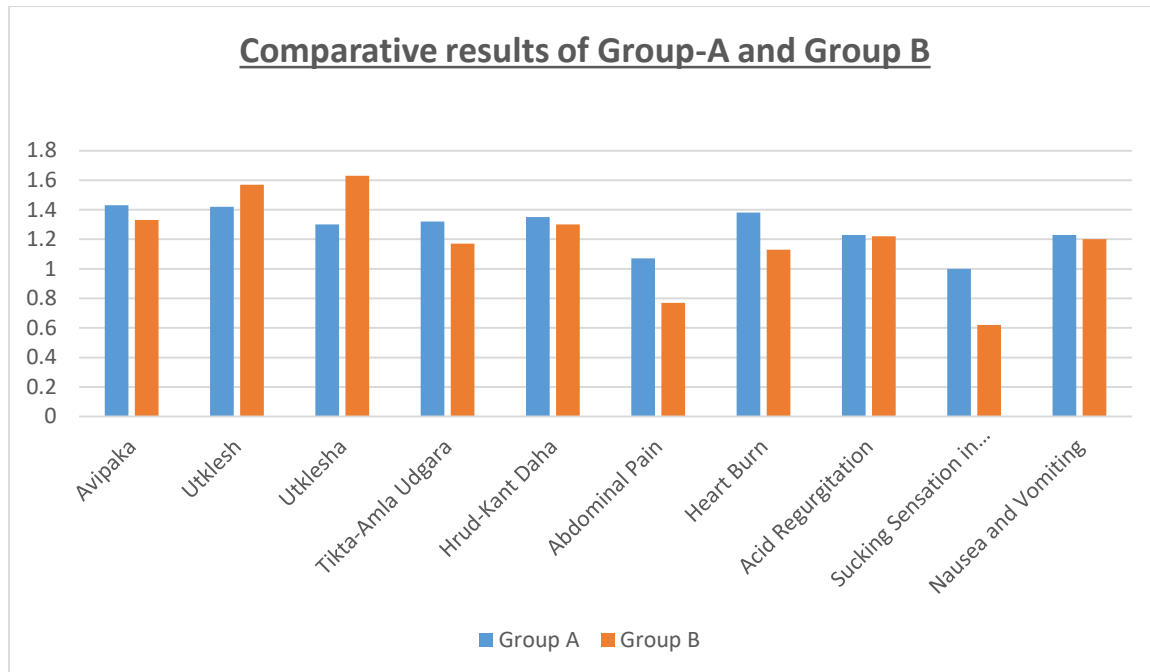
Symptoms	Grade 0	Grade 1	Grade 2	Grade 3	Grade 4
<b>DAHA</b>	No complaints	Complaints relieved by taking small amount of water	Complaints continue for more than 1 hour even after having cold water or milk and settles down without medicines	Complaints continue for more than 1 hour even after having cold water or milk and settles down with medicines	Complaints not responding to cold water or cold milk intake and requires medical treatment
<b>CHARDI</b>	No event 0	Less than 1 episode a week	More than 1 episode a week 2	More than 1 episode for 3 to 4 days	More than 1 episode a day
<b>SHULA</b>	Absent 0	Occasional	3 to 4 times a day	5 to 6 times a day	Persistent throughout the day
<b>AVIPAK (Dyspepsia) (Jeernaaharlakshana - udgarshoodhi, utsaha, yathochitvegotsarga, laghuta, kshut, pipasa) Absence</b>	5 to 6 jeernaahara lakshanas	4 to 5 Jeernaahara lakshanas	3 to 4 Jeernaahara lakshanas	3 to 2 Jeernaahara Lakshanas	Absence of jeernaahara lakshanas

<b><i>TIKTA AMLODGAR</i></b>	Clear belching after two hours of food or no belching at all	Mild belching after food intake and requires no treatment to settle down 1	Belching starts after 1 hour of food intake and settles down with or without treatment	Belching starts after 2 hours of food intake and settles down with or without treatment	Belching starts within 2 hours of food intake requires treatment or belching without taking food 4
<b><i>KLAM</i></b>	Routine daily work without weakness	Routine daily work for 2 hours causes weakness but relieves after rest Grade 1	Routine daily work for 1 hour causes weakness but relieves after rest Grade 2	Daily work for 1 hour causes weakness which is not relieved after Grade3	Weakness without any work & not relieved even after rest for 6 hr grade 4
<b><i>UTKLESH</i></b>	No symptoms	For 1 hour and requires no medicine	For 1 hour and requires medicine	For more than 1 hour but settles down with or without medicine	For more than 2 hours & requires medicine 4
<b><i>AMLA UDGAR</i></b>	No symptoms	For 1 hour and requires no medicine	For 1 hour and requires medicine	For more than 1 hour but settles down with or without medicine	For more than 2 hours & requires medicine 4
<b><i>GAURAVATA</i></b>	No complaints	Sometimes feels tastelessness, but can have food	Sometimes feels tastelessness, but cannot have food	Continuous sensation of tastelessness, but able to eat food	Continuous sensation of tastelessness & unable to eat food

**Table :-showing Comparative results of Group-A and Group**

<b>Signs and Symptoms</b>	<b>Group A (Mean Score)</b>	<b>Group B (Mean Score)</b>	<b>T Value</b>	<b>P Value</b>
<i>Avipaka</i>	1.43	1.33	0.49	>0.05
<i>Utklesh</i>	1.42	1.57	0.69	>0.05
<i>Utklesha</i>	1.30	1.63	2.13	<0.05
<i>Tikta-Amla Udgara</i>	1.32	1.17	0.69	>0.05
<i>Hrud-Kant Daha</i>	1.35	1.30	0.26	>0.05
Abdominal Pain	1.07	0.77	1.26	>0.05
Heart Burn	1.38	1.13	1.58	>0.05
Acid Regurgitation	1.23	1.22	0.11	>0.05
Sucking Sensation in Epigastrium	1.00	0.62	2.08	<0.05
Nausea and Vomiting	1.23	1.20	0.23	>0.05
Borborygmus	0.72	0.73	0.10	>0.05
Abdominal Distention	0.62	0.65	0.21	>0.05
Eructation	0.33	0.67	2.05	>0.05
Increased Flatus	0.52	0.50	0.12	>0.05
Decreased Passage of Stools	0.03	0.18	1.70	<0.05
Increased Passage of Stool	0.10	0.10	0.00	>0.05
Loose Stools	0.10	0.20	1.13	>0.05
Hard Stools	0.10	0.35	2.04	<0.05
Urgent need of Defecation	0.12	0.10	0.19	>0.05
Feeling of incomplete Evacuation	0.20	0.32	0.99	>0.05





**OBSERVATION AND RESULT:**

**Effect of treatment in group A**

class	Grading	No. of Patients
0-25%	No change	0
26-50%	Mild	0
51-65%	Moderate	8
76-100%	Marked	12

**Effect of treatment in group B**

Class	Grading	No of patients
0-25%	No change	0
26-50%	Mild	1
51-75%	Moderate	17
76-100%	Marked	2

### Statistical analysis

Group A	Group B	Mean Difference	SE (±)	T Value	P value
78.78	65.84	12.94	2.84	4.39	<0.05

Comparative analysis of the overall effect of the treatments in both the groups was done by statistically with Mann Whitney test. The test shows that the treatment is significant in Group A when compared to Group B. Group A overall result is 78.78% and Group B overall result is 65.84%.

### DISCUSSION:

A scientific discussion on the study gives rise to some fruitful conclusions As per the observation drawn from this study, we can conclude that, *Ayurveda* in fact is the first medical science which identified, diagnosed and managed *Amlapitta*. *Amlapitta* is co related with Hyperacidity which is having similar pathogenesis and manifestations. The various hetus of *Amalapitta Ahara Vidhi Viruddha* Hetus like *Adhyashan*<sup>7</sup> and *Pramitashan*,, *Samashan*, *Vishamashan*, *Ajir nashan* . *Jalapana Vidhiviruddha Hetu* like *Atyambupana Viharaj Hetus* like *Divaswap Ratro jagaran* *Avyayam Mansik Hetu* like *Chinta Shok* All these were findings of

study which indicate *Santarpanjanya and Apathyanimmitaja* origin of disease. So this study revalidates the *Nidan Parivarjan* is mandatory for the results in the treatment, need of *Hetu Viparit Chikitsa*. Both Group A (*Amlapittavinashak yoga kwath*) and Group B (*Bhunimbadi kwath*) shown highly significant result in reduction of the subjective parameters quantity of urine like *Avipak* , *Utklesh* , *Hrud kanth daha*, *Hrullas* symptoms ( $p < 0.05$ ). The Group A was found significant when compared with Group B. Both the Group had highly significant result in reduction in the Nausea ( $p < 0.05$ ) and in the comparison between both groups, Group A was not significant when compared with Group B. Both the Group had highly significant result in reduction in the sucking sensation in epigastrium ( $p < 0.05$ ) and in the comparison between both groups, Group A was found significant when compared with Group B. It is observed that in this study that *Pathyakar Ahara*, *Vihara* with lifestyle modification and some *Ayurvedic* medication gives

better result in reducing complications of *Amlapitta*.

## CONCLUSION

Thus the *Amlapittavinashak yoga kwath* have shown better effect on the patients of *Amlapitta* by *Samprapti Bhanga* of disease, with significant reduction in the symptoms of *Amlapitta* like. *Avipak*

,*Aruchi, Hrudkanthdaha, chardi, Utklesha* etc. The study has shown fairly good changes in symptoms throughout the follow up of 21 days. The present study was carried out on the small sample size for limited period and it showed encouraging results in patients of *Amlapitta*. So further study is needed with modification in groups.

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