



# AN OBSERVATIONAL STUDY ON URDHWANGA AMLAPITTA AND ITS CLINICAL MANAGEMENT

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## ABSTRACT

Amlapitta is an annavahasrotas vyadhi brought on by a vitiated Agni. The Pachaka pitta increases due to samata in an Amlapitta situation. Amlapitta is believed to be Pitta. Vyadhi Tridoshaja Kapha Pradhana (compound disease caused by multiple factors). Acharya Kashyap acknowledged the involvement of three Doshas in Amlapitta, despite Madhav Kara accepting Pitta's predominance in this illness. Acharya Charka does not identify Amlapitta as a distinct illness, but it is included as one of the Lakshanas in Grahani. Worry and stress have aggravated the illness, notably in Amlapitta, in addition to those stimulating stimuli. This is a lifestyle problem, thus those who have been dependent on nicotine, alcohol, or processed meals rich in salt are at risk of developing it. According to contemporary research, Amlapitta is related to hyperacidity. It just serves to highlight an increase in stomach acid. Food particles are reduced to their lowest possible size by the digestive enzyme hydrochloric acid, which the stomach secretes to aid in digestion. When there is too much hydrochloric acid in the stomach, a condition known as hyperacidity develops.

**Keywords:** *Amlapitta, Hyperacidity, Pachaka Pitta etc.*

## INTRODUCTION

The terms "Amla" (sour) and "Pitta" (hyperacidity) are combined to form the name "Amlapitta." As a consequence of fermentation, the amount of Pachaka Pitta is increased in Amlapitta, and its characteristic of typically bitter flavour is changed to more sour taste.<sup>1</sup> Due of Pitta's heightened sourness, it is known as Amlapitta. It is a digestive condition brought on by abnormal pancreatic and stomach enzyme production. The medical designation for it is

Acid Peptic Disorder.<sup>2</sup> In Ayurveda, it is known as Amlapitta. It is a disease that affects people all around the world and is highly common. Amlapitta, a vyadhi (disease) of annavahasrotas that is brought on by vitiated Agni, is one of the most common.<sup>3</sup>

Amlapitta is a condition in which samata causes the Amla guna of Pachaka pitta to grow, resulting in vyadhi (Disease). Acharya Kashyap agreed that three Doshas were present in Amlapitta, however Madhav Kara agreed that Pitta was in charge in this situation. Acharya Charka does not mention Amlapitta specifically, although one of the Lakshana is referred to in Grahani. According to Ayurveda, vitiated Agni is the root of many illnesses.<sup>4</sup> A rise in the trend of diseases has been sparked by a number of factors in today's advanced civilization, including rapid environmental changes, the adoption of newer food materials, modifications to cooking techniques, atmospheric pollution, the intrusion of various chemical agents in newer lifestyles, occupational hazards, and so on. Along with such stimulating factors, stress and concern have significantly worsened the ailment, including Amlapitta.<sup>5</sup>

Amlapitta is a digestive disorder according to Ayurveda. It has been connected to hyperacidity in recently conducted medical studies. A crucial part of the digestive process is HCL. By severing the bonds that link amino acids, a process known as proteolysis, the enzyme pepsin is produced when HCL converts the dormant enzyme pepsinogen into the active enzyme. A surge in stomach acid is referred to as hyperacidity.<sup>6</sup> In order to speed up digestion, the stomach secretes hydrochloric acid, which reduces food particles to the lowest possible size. When there is too much hydrochloric acid in the stomach, a condition known as hyperacidity develops.<sup>7</sup>

Acharya Vagbhata asserts that Pachaka Pitta functions similarly to Agni. When this Agni's liquid form is gone, it becomes significant in the Annapachana Prakriya. As a result, Pachaka Pitta and HCL are related, and Amlapitta is a condition in which Pachaka Pitta levels are elevated.<sup>8</sup> Ayurvedic Amlapitta, a disease entity, can therefore be connected to hyperacidity. Amlapitta is categorised using the Srotas' Dosha Dushti and Sthana Dushti. Avipak (indigestion), Kalma, and Utklesh are Amlapitta symptoms.<sup>9</sup>

## Methodology

The content of Amlapitta was compiled from many books, articles, literary works, Samhitas, textbooks, and reliable websites, among other sources.

## References of Amlapitta in Samhitas

- Acharya Kashyap also administered Dosha-based treatments for Amlapitta, contending that the vitiation of Tridosha results in Mandagni, which then triggers Vidagdhajirna, which ultimately appears as Amlapitta.
- Acharya Madhava Kara explained Amlapitta and its division into Urdhavaga Amlapitta and Adhoga Amlapitta in accordance with Gati.
- Charka Acharya is not referred to be a disease in the Charka Samhita Amlapitta. He claims that when Amavisha is coupled with Pitta, Amlapitta develops.

## Amlapitta's Causes

- 1) **Aharaja:** This term refers to a number of incorrect eating practises that are at odds with standard Ayurvedic practises. Agnimandya results in Amlapitta in accordance with Kashyap Viruddha Ahara, Adhyasana, Ama Bhojana, Guru, Snigdha Bhojana, and other elements. According to Acharya Madhava Kara, Amlapitta illness is exacerbated by high Pitta.<sup>10</sup>
- 2) **Viharaja:** This term refers to things that go against the norms of sanitary conduct. There are two types:
  - Excessive physical work and
  - Excessive mental effort.
  - No or minimal physical exertion.
  - Ratri-jagarana, Dhatukshaya, Upavasa, and other styles of yoga that require excessive physical exertion encourage Vata Pitta Prakopa.
- 3) **Agantuja Hetu:** This group includes the regular and excessive use of alcohol, tobacco, beverages, cigarettes, and other irritants and poisons.
- 4) **Manasika Hetu:** Maintaining one's mental health is also important.
- 5) **Additional risk factors** include anoopadeshai living, Sharadritu, alcoholism, smoking, tobacco chewing, ongoing painkiller usage, and Helicobacter pylori infection. The excess of "Pitta dosha" in the body is brought on by all of the following disorders, which manifest as Amlapitta symptoms.

## STHANA DUSHTI

There are several Ayurvedic Samhitas that mention Amlapitta, including Madhavnidana, Bhavprakash, Yogaratnakara, Chakradatta, and Rasaratna Samuchhaya. Acharya Charaka, Sushruta, and Vagbhata do not devote a separate chapter to the illness Amlapitta, despite the fact that it is addressed in their Samhita.<sup>10</sup>

### 1) Urdhwaga Amlapitta-

Vamana Harita, Pitta, Neela, Krushna, Rakta, Raktabha, Mansodakabha Varna, Atiamla, Atipichhila, Achha, Shleshmanujata, Vividha Rasa, Amlodgara, Tiktodgara, Kantha-Hrid-Kukshi

2) **Adhogata Amlapitta-** Trushna, Daha, Murchha, Moha, Hrillasa, Kotha, Agnimandya, Harsha, Sveda, Pittata<sup>11</sup>

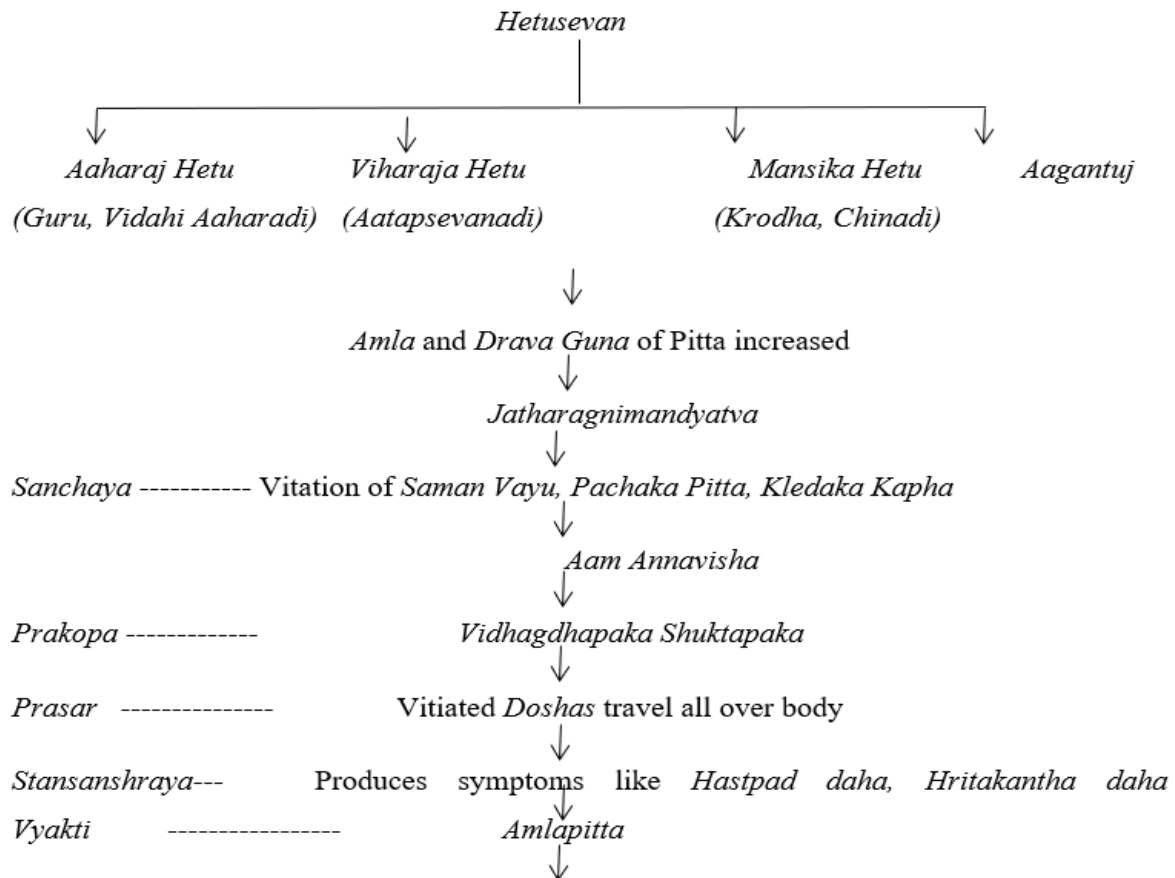
## AMLAPITTA CLASSIFICATION

- a. **Vataja Amlapitta**
- b. **Pittaja Amlapitta**
- c. **Kaphaja Amlapitta**

## Samprapti

- **Grahani Srotas** – Annavaha,
- **Samprapti Gataka Dosha** – Pitta Vishesha
- **Dushya** – Rasa
- **Adisthana** – Amashaya,

## Samprapti of Amlapitta



Urdhvag Amlapitta

(References- <https://www.granthaalayahpublication.org/journals/index.php/granthaalayah/article/view/3904/3918>)

### Madhava Nidana- Four types-

- Vatadhikya Amlapitta
- Kaphadhikya Amlapitta
- Vata-Kaphadhikya Amlapitta
- Shleshma-

### DISCUSSION

It is clear that pitta aggravation is the primary cause of Amlapitta. This pitta dosha is aggravated by excessive consumption of astringent and sour meals, alcohol, salt, and hot and sharp foods that burn.<sup>12</sup> To the greatest extent possible, one should try to stay away from things like anger, fear, exposure to a lot of sun and fire, eating a lot of dry vegetables and alkalis, irregular eating patterns, and so on. All persons with acidity can, in general, benefit from a milk diet, however some people may initially have trouble digesting milk.<sup>13</sup> This is because the stomach's large amount of acid and the milk's proteins combine to form hard curds. These commonly cause nausea. Conversely, milk is an excellent choice in this circumstance, especially if a fast designed to meet your individual needs comes first.<sup>14</sup> The milk diet should be adhered to for several weeks, if possible. Drink a lot of warm water as well. This is what Ayurveda emphasises since, according to it, "heat kills hot" (ushnam ushna hanti).

Additionally, drinking cold water increases the amount of stomach acid secreted, according to physiological research. The milk can be had together with a non-irritating, easily digestible evening meal when the stomach seems to be in better form.<sup>15</sup>

It's better to limit your intake of meals that need vigorous chewing for a time because doing so increases the flow of gastric juice and its acid. On the other side, insufficiently chewing the meal will make things worse by causing stomach pain. Mastication in this circumstance ought to be minimised as a consequence. It's important to avoid overeating and instead have three small meals throughout the day.<sup>16</sup> Artificial stimulants should be avoided because they all raise pitta. Whatever its form, drinking alcohol is like feeding the pitta fire. If consumed in excess, the caffeine included in coffee and tea has the drawback of causing the stomach to produce more acid.<sup>17</sup>

## MANAGEMENT –

When treating Amlapitta, we must consider the patient's Doshadhikya, Sthanvaigunya, and Hetu and then design the appropriate course of action, such as Pachan and Anuloman. Patient of Amlapitta had improper Rasa Dhatu production due to improper digestion. Guduchighana Vati, a Rasayan medicine, was therefore introduced first. Guduchi also reduces Samta. Other drugs, such as Pravalpanchamrut Vati, are used throughout therapy.<sup>18</sup> Reduced dosha samata results in anulomana and shamana of dosha due to the effects of Avipattikar Choorna, Hengvashtak Choorna, and Raktapachak Choorna. Assist Deepana, Pachan, Pittahara, and Dravata with Shankha Bhasma.

- Vamana should be given first, followed by a Sukha Virechana.
- Susnigdha Anuvashana Basti should be used after that in dosha-related chronic illnesses
- Considering the relationship of doshas, shaman measures in terms of medications and nutrition should be used in sansargaj Amlapitta following Shodhan.
- Vamana and Virechana should be used to eradicate doshas in Urdhwa Amlapitta.

## URDHVAG AMLAPITTA AUSHADHI

- Nidana Parivarjana is the first series.
- Avipattikar churna
- Sutshekhar Rasa
- Vasa Ghrita
- Narikel Khand
- Shatavari ghrita
- Lila Vilas Rasa

## SADHYASADHYATA

Amlapitta is Sadhya in its recent stage, but it changes to yapyia or krichhasadhya in its chronic stage. When combined with updrava, it creates asadhy. Adequate nutritional care can be used to cure even the Kashta- Sadhya kind of Amlapitta.<sup>19</sup>

## PATHYA – APATHYA IN AMLAPITTA

Ayurveda mentions pathya apathya to both prevent and treat the ailment. Pathya are generally Laghu and Agnidipak ahar suggested in Amlapitta, including Yava, Godhuma, Mudga Yusha, Puran Shali Shashtik, Lajamand, etc. Apathya such as Navanna, Mash, Kulathha, Dadhi, etc. are advised in Amlapitta. In order to better understand Amlapitta sickness, this review article will focus on Pathya (Wholesome regimen) and Apathya (Unwholesome regimen).

## DISCUSSION

Food and beverages that are good for the body's channels are referred to by Charaka as Pathya. Apathya, on the other hand, is having a detrimental influence on them. The importance of medication therapy is negligible if a person adheres to the Pathya guidelines for a certain condition, while drug therapy is completely useless if a person is subjected to Apathya.<sup>20</sup>

As Pathya Sevana has been cited in ancient literature as being as significant as Oushadha Sevana and an efficient step in the prevention of illnesses and the consequences of diseases, The daily consumption of a food filled with Yava, Godhuma, Purana Shali, Mudga Yusha, and Lajasaktu can thus be suggested for those with Amlapitta illness or those with a family history of comparable other ailments. Those who are opposed to Ama and Pitta are thought to have comparable Gunas like Deepana, Laghu, Pittahara, and Vatanulomana. These can be recommended for frequent use because they are affordable and accessible. By doing so, Pitta can be kept in a normal state, which enables Nidana Parivarjana for the aforementioned Amlapitta, prevention of Ama development, and avoidance of Vidagdha Pittaprapakopa.<sup>21</sup>

## CONCLUSION

Ayurveda Pachaka Pitta awakens Agni. When its liquid condition is gone, this Agni is essential for digestion. As a result, Pachaka Pitta and HCL are equivalent, and Amlapitta is a condition marked by increased levels of Pachaka Pitta. Amlapitta from Ayurveda may therefore be linked to hyperacidity. When left untreated and unaddressed, incompatible foods, routines, and behaviours can lead to stomach ulcers, chronic gastritis, duodenitis, irritable bowel syndrome, mal-absorption, anaemia, and stenosis.

A traditional Ayurvedic literature was employed in the evaluation. It is stated in the Charka Samhitas, Vagbhata, and contemporary elements that everyone should adhere to the dietary and behavioural instructions to prevent Amlapitta or Hyperacidity since, as we all know, prevention is better than therapy. GIT and Jatharagni should be maintained natural as seasoning, Prakruti, and other things as taught by the scripture. Excessive amounts of salty, sour, spicy, and pungent meals should be avoided.

**Conflict of interest -Nil**

**Source of Support -None**

**REFERENCES**

1. Murthy S.K., Madhavakara. Madhava Nidana. 2011th ed. Chaukambha Orientalia, Varanasi, 2011;p.166-7.
2. Agnivesha, Charaka, Chakrapani. SutraSthana. Chapter 25,Verse 45. In: Sharma RK, Dash B (editors). Charaka Samhita with Chakrapaanidatta, Ayurved Dipika, Commentary. Reprint ed. Varanasi: Chowkambha Sanskrit Series. Volume 1. 2012;p.437
3. Agnivesha, Charaka, Chakrapani. SutraSthana. Chapter 25,Verse 46. In: Sharma RK, Dash B (editors). Charaka Samhita with Chakrapaanidatta, Ayurved Dipika, Commentary. Reprint ed. Varanasi: Chowkambha Sanskrit Series. Volume 1, 2012;p. 438
4. Sharma P V. SushrutaSamhita. 7th edition: Varanasi: Chaukambha Orientalia. 2002; p. 214.
5. Prasad V V, Sudarshan. Sushruta Samhita, Sutrasthana. 1st edition: New Delhi: Rashtriya Ayurveda Vidyapeet. 2002;p.4.
6. Bhaisajyaratnavali. Chapter 56,Verse 352-70. In:Govind das sen(editors). Bhaisajyaratnavali, edition Varanasi: Chaukambha Orientalia. 2014. p. 84.
7. S. Shastri, Madhav Nidana madhukosh commentary vol -2 chapter 51, shlok no. 1-12 Chaukambha Sanskrit Varanasi. Agnivesha, Charaka, Chakrapani. SutraSthana. Chapter 25,Verse 45.
8. In: Sharma RK, Dash B (editors). CharakaSamhita with Chakrapaanidatta, Ayurved Dipika, Commentary. Reprint ed. Varanasi: Chowkambha Sanskrit Series. Volume 1, 2012;p. 438.
9. Rakshith, Shivakumar, Sreeharsha, Divyasree. Ahara as Pathya and Apathya in Amlapitta - A Review.J Ayurveda Integr Med Sci 2017;1:226-229. <http://dx.doi.org/10.21760/jaims.v2i1.7516>
10. Athvale P, editor. .Ahtang Sangrava of Vagbhatacharya, Sutrasthana. Ch.22, Ver.28.2 nd Edition. Nagpur: Drushtartha Prakashan; 1991.p. 183.
11. Upadhyay Yadunandan , editor. . Madhav Nidana of Madhavkara, Ch.51, Ver. 3to 6. 3rd edition. Varanasi: Chaukambha Sanskrit Sansthan; 1993.p. 234.
12. Tiwari P, editor. Kashypacharya, Khilstan. Ch.16, Ver. 1. 1 st edition. Varanasi: Chaukambha Vishwabharti Prakashan; 1999.p. 631.
13. Upadhyay Yadunandan, editor. . Madhav Nidana of Madhavkara, Ch.51, Ver. 1. 3 rd edition. Varanasi: Chaukambha Sanskrit Sansthan ; 1993.p. 203.
14. Upadhyay Yadunandan , editor. Madhav Nidana of Madhavkara, Ch.51, Ver. 4. 3rd edition. Varanasi: Chaukambha Sanskrit Sansthan; 1993.p. 2o3.
15. Upadhyay Yadunandan, Shastri R,Pandeya G,Gupta B,Mishra B, editor. Charaka Samhia of
16. Agnivesha Vimansthana, Ch.7, Ver. 30. 1 st edition. Varanasi: Chaukambha Bharti Academy; 1998.p. 734.
17. Sharma Hariprann, editor. Rasyogsagara of Nagarjuna, 1 st edition. Varanasi: Chaukambha Krishnadas Academy; 2004. Vol.-1,p. 260
18. Raghunathan K,editor. Pharmacopiel Standards for Ayurvedic Formulations, 2 nd edition, New Delhi: CCRIMH; 1978, Pg. No. 89.

19. Singh K, Singh R, .Antacid Potency in vitro and cost effectiveness of Certain Ayurvedic preparation .  
Journal of Research in Ayurveda and Siddha 1986; 7:82.
20. Das Bhagwan. Alchemy and Metallic Medicines in Ayurveda, 1 st edition. New Delhi; Concept  
Publishing Company: 1986, P.10.
21. Singh K, Singh R, .Antacid Potency in vitro and cost effectiveness of Certain Ayurvedic preparation.  
Journal of Research in Ayurveda and Siddha 1986; 7:82.

