

A Combined Study on the Effect of *Drakshadi Gutika* and Yoga Modalities in *Amlapitta*

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Abstract

Background

In this modern era there has been an unprecedented increase of incidences related to GI system due to marked change in life style. Diet pattern, behavioral pattern, mental stress & strain, these multiple factors leads to a clinical condition known as the *Amlapitta*. Symptoms of *Amlapitta* as explained in *Ayurveda* are near clinical entity with symptoms of gastritis; a gastro intestinal disorder mentioned in modern science.

Methodology of intervention

Forty five patients of *Amlapitta* were selected and divided into three groups by random sampling method. Clinical symptoms were given suitable grading according to its severity and assessed based on pre and post data gathered through pre-designed research clinical proforma. Results showing 'p' value less than <0.05 were considered to be statistically significant in this study.

Interpretation

Drakshadi Gutika is combined formulation prepared by *Draksha* having *Madhura rasa, Madhura Vipaka, SheetaVeerya, MruduGuna. Haritaki* having *Lavana Varjita Pancha rasa Kashaya pradhana, Madhuravipaka, Vikrutadoshanulomana, Aamapachana, and Sita* having *Madhura rasa, sheetaveerya, trupti karaka, indriyaprasadaka. These factors exhibit Pitta shamana, and Pitta rechana* property.

Among *Asanas*, *Pavanamuktasana* is the *asana* of choice for the clinical condition that are related with the gastrointestinal tract. Among *Shatkriyas*, *Kunjalakriya* is the best possible wash to the digestive system from stomach to the mouth. After completion of the studies it could be

concluded that patients of Group B were significantly better than the patients of Group A and Group C at $P < 0.05$. Hence by considering overall results in the present study the effect of *KunjalaKriya* with *pavanamuktasanawas* was found more beneficial.

Keywords

Amlapitta, Drakshadigutika, KunjalaKriya, Pavanamuktasana



Greentree Group

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INTRODUCTION

The science with a history of several thousand years has very strong principles on which it has developed. In this modern era, the life style of a human being has completely changed and most of the people are unable to maintain their food habits in a proper manner. In recent years there has been an unprecedented increase of incidences related to GI system due to changing in life style i.e. Diet pattern, behavioral pattern, mental stress & strain. *Amlapitta* is a type of GI disorder due to same causative factor as above described in *Ayurvedic* parlance, closely resembles with Gastritis in modern science also and in chronic stage it may lead to ulceration condition.

The all above mentioned causes leads to imbalance of the *shareerika doshas vata, pitta & kapha* in turn create *agnimandyata* & due to improperly metabolized and get convert into *shukata* (vitiated liquid acid) and this gets situated in *Amashaya* which is called as *Amlapitta*.

Definition

i. *Vijayarakshita*, commentator of *Madhava Nidana* define *Amlapitta* as

विदाहादिआम्लगुणोद्विक्तंपित्तंआम्लपित्तं।

Which means that the *Pitta* having *Vidahi* guna, give rise to *Amla* or sour taste.

ii. According to *Chakrapani*

आम्लपित्तंचेतिआम्लगुणोद्विक्तंपित्तं।

Which means the qualities of *Pitta* i.e. sourness is increased leading to *Amlapitta*

iii. *Shri Gananath Sen* in his book *Sidhanta Nidana* has given similar definition of *Amlapitta*.

आम्लपित्तंसंज्ञातुआम्लंआम्लाधिकंपित्तं॥

The above classical description of *Amlapitta* emphasises that *Amlapitta* is a pathophysiological condition in which the *Pitta* gets vitiated in terms of *Vridhhi* (Excessiveness) and also the sourness of *Pitta* is increased¹.

Charaka and *Kashyapa* have clearly indicated that the *Grahani Doshaja* and *Amlapitta* occur in the persons who could manage their food habits. The *Nidana sevana* create *Mandagni* & due to *Mandagni*, *Ajirna* is developed and it leads production of *Amavisha*. This *Amavisha* mixed with *pittadi Doshas* and lodes in *Amashaya* then it produces the *Amlapitta* diseases².

The *Bruhatrayi* has not mentioned the disease. *Charak* has given some references about *Amlapitta*. *Kashyapa* has first

mentioned separate chapter on it. *Madhavkar & Bhavaprakasha* have given detailed description and *chikitsa* of *Amlapitta*.

Synonyms of *Amlapitta*

Ashtanga Sangraha has mentioned three synonyms of *Amlapitta* –

- *Amlapitta*
- *Pramilaka*
- *Pitta Visuchika*³.
- *Hikkamlaka – Harita*⁴.
- *Amlika* - *Sushruta*⁵

Diagrammatic representation of *Samprapti* of *Amlapitta*

NIDANA SEVANA



Diagnoses

The disease can be diagnosed on the basis of *Nidanas* (aetiology), *Purvarupa* (premonitory symptoms), *Linga* (symptoms), *Upashaya* (therapeutic diagnosis) and *Samprapti*.

Amlapitta is also correlated with gastritis and non-ulcer acid peptic disease. According to *Acharya Vagbhata Agni* plays an important role in the the etiopathogenesis of all the human ailments. Charaka has explained the sequential progression of diseases of G.I.T.

By considering the above factors Management of *Amlapitta* aims at minimizing the symptoms, correcting the *Agni*, Optimize the quality of life and reducing the risk of developing co-morbidities. Hence, *Ayurveda* and *Yoga* offers scope in the form of Formulation, *Yogic Kriya* along with *asana*, respectively as treatment modalities for resisting these types of disorders.

Objectives of the study

The present study was undertaken in to three groups and the patients were selected from OPD, IPD and special camps conducted by S.J.G.A.M. College, Hospital and Research Centre; Koppal with the following objectives:

1. To assess the efficacy of *Drakshadigutika* in *Amlapitta*.
2. To study the effect of *Yoga* modalities in *Amlapitta*.
3. To study the combined effect of *Drakshadigutika* and *Yoga* modalities in *Amlapitta*.

Materials and Methods

A. Drugs: For *Gutikartha*: *Draksha*, *Haritaki*, *Sita*.

KunjalaKriya: *Saindhava Lavana* and *Ushna jala*.

B. Instruments: *Yoga mats*, *Vamana tub*, Necessary utensils, Gas stove, Napkins, and Towels.

Collection of drugs: All the raw drugs are authenticated and collected from the Dept of *Dravyaguna* S.J.G.A.M.C. Koppal.

Preparation of Medicine: *Drakshadigutika* was prepared in the Dept. of *Rasa shastra* and *Bhaishajya Kalpana* of S.J.G.A.M.C., Koppal as mentioned in the classics.

Method of preparation:

Composition of drug⁶:

S. No.	Sanskrit name	Botanical name/ English name	Quantity
1	<i>Draksha</i>	<i>Vitisvinifera</i>	1 part
2	<i>Haritaki</i>	<i>Termenaliachebula</i>	1 part
3	<i>Sita</i>	Sugar candy	2 parts

In the above mentioned drug one part of *Haritaki* and two parts of *Sita* were taken and made it in to fine powders, at the same time the *Draksha* was grinded well and the paste was prepared, first mix the *Haritaki* powder to the paste of *Draksha* in *khalvayantra* and triturate well until to attain a homogenous mixture, then to this mixture two parts of *Sita* were added and *Gutikas* of 6g each were prepared by weighing with the help of electronic weighing machine. It was kept for some times and packed in air tight covers.

Selection of the patients:

Method of collection of data

Patients of *Amlapitta* were selected randomly according to the classical signs and symptoms irrespective of sex, religion, occupation and socio economic status from O. P. D. and I. P. D. section of Department of *Swasthavritta* S.J.G. Ayurvedic Medical College, PG studies and Research Centre, Koppal.

Study Design: A combined clinical study

Criteria for selection of patients

Inclusion Criteria

- Patients of *Amlapitta* with classical symptoms like *Tiktaamlodgar*, *Hritkanthadaha*, *Avipaka* etc.
- Age between 16-60 years.

- Patients of *Amlapitta* without any critical complication.

Exclusion criteria

- Symptoms secondary to any other systemic diseases.
- Gastric ulcers, peptic ulcers and carcinoma of GI tract.
- Patients of *Amlapitta* with acute symptoms with complications.
- Patients who are diabetic, *ayogya* for *Kunjalakriya* and *asanas*.

Sample size and grouping

A minimum of 45 patients excluding dropouts were selected and were divided in to three groups viz., Group-1, Group-2, and Group-3 by random sampling method.

- 1) GROUP-1: 15 patients were administered *DrakshadiGutika* with the Dosage of 6 gm BD along with the *Anupana* of *Shrutasheetajala*.
- 2) GROUP-2: 15 patients were advised *Yogic* modalities the modalities mainly includes *Kunjala Kriya* and *Pawanamuktasana* daily in the morning.
- 3) GROUP-3: 15 patients were advised *DrakshadiGutika* with above mentioned dose as well as *anupana* and *Yogic* modalities i.e. *Kunjala Kriya* and *Pawanamuktasana*.

Pathyapathya will be advised to follow in detail as per the chart for all the three groups.

Assessment of variables: Patients were assessed by using Subjective parameters and severity of clinical conditions before, after treatment and follow up.

Methodology: *Kunjala Kriya Procedure*^{7,8}

- a) *Purvakarma*.
 - b) *Pradhana karma*.
 - c) *Paschat karma*.
- a) ***Purvakarma:*** Systemic and local examination of the patient.

Preparation of the kunjladravya

Method of preparation of *KunjalaDravya:*

Take a 4-6 lt of water and boil it well, add salt to the water in a reasonable proportion i.e., one teaspoonful per liter of water. Stir well and keep in separate jar for drinking.

- b) ***Pradhana Karma:*** After examination, the patient was made to sit in the chair in a comfortable position. The patient was asked to drink the prepared *kunjladravya* i.e., the warm water containing salt until the stomach is filled with water. The patient was asked to stand slowly while standing, told to bend forward and placing the hands on the knees. Then with mouth open he was asked to breathe slowly making a whispering ‘ah’ sound from

the deeper parts of the throat, simultaneously contracting the upper part of the abdomen, just below the ribcage. At the end of inhalation, told to retain the compression of the abdomen and exhale. The water gushes out from the mouth in a steady stream. After that he was told to relax the body during expulsion, so that the water is not impeded.

Timing of procedure: The patient was advised to perform the activity early in the morning, before breakfast.

c) **Paschat karma:** The patient was asked to wash the face with lukewarm water and advised to take rest for some time on the chair. After that the vital signs were examined.

PawanamuktasanaTechnique⁹:

a) **Purva Karma:** Patients was asked to do warming exercises.

b) **Pradhana Karma:** Patients were asked to lie down on a yoga mat slowly.

Stage 1

Patients were advised to bend the right leg and bring the thigh and knee as near as possible to the chest. The other leg should remain straight, told to place the hands over the knee and interlock the fingers. Gently pull the knee nearer the chest. Relax the whole body keeping the

straight leg, back and head on the floor, then advised to breathe in deeply and slowly while simultaneously raising the head and shoulders.

At the end of inhalation the forehead, nose, chin or neck should touch or be as close as possible to the right knee, asked to hold the breath for a short time in the raised pose. Then patients were asked to exhale slowly and lower the head and shoulders to the floor to resume the starting position. This is one round. Then advised to Inhale while again raising the body and repeating the procedure. Then straighten the bent leg and relax the whole body for a short time.

Stage 2

Asked the patient to bend the other leg towards the chest and repeat the same procedure as given in stage 1. Do the same number of rounds. On completion, straighten the left leg and relax the whole body.

Stage 3

Advised to fold both legs to the chest simultaneously. Same procedure was repeated as like above stage. Afterwards asked the patient to relax the whole body with awareness on breath.

Breathing, awareness and duration

Breath should be deep and synchronized with the movement as described in the technique. This is important for it to accentuate the massage of the abdominal organs. This asana will give the most benefits if one holds the breath while in the raised position for as long as is comfortable. One should be aware of the breath and the compression of the abdomen throughout the practice

Time of doing Asana: Advised to do early in the morning after digestion of food.

Study duration: Total duration: 60 days.

Treatment duration: 30 days

Group-1: *Drakshadigutika* of 6 gm BD with *aanupana* of *Shrutasheetajala* for 30 days.

Group-2: The *KunjalaKriya* was advised continuously for 7 days, and *Pavanamuktasana* for 30 days.

Group-3: The above mentioned both the aspects for 30 days.

Observation and follow up study

Patients were advised to attend the OPD for observation on 15th day and advised to attend on 30th day after treatment duration. After this advised to attend for follow ups on 45th day and on 60th day.

Assesment of results

The data will be collected and analyzed by various statistical tools with the help of Bio Statistician.

Criteria for assessment

The improvement in the patients assessed on the basis of relief in the cardinal & associated symptoms & signs of the disease. Total assessment of the therapies was done on the basis of relief in the main signs and symptoms of disease.

On the basis of these criteria total patients were divided in five categories as below.

Complete relief	-	100 %
Marked relief	-	76 % to 99
Moderate relief	-	51 % to 75 %
Mild relief	-	25 % to 50 %
Poor relief	-	< 25 %

RESULTS AND DISCUSSION

S. N o.	PARAMETERS	%Reduction Group A (BT-AT)	%Reduction Group B (BT-AT)	%Reduction Group C (BT-AT)
1	<i>Tiktamlodg ara</i>	57.14	86.12	73.16
2	<i>Hritkanthad aha</i>	63.88	81.02	82.50
3	<i>Aruchi</i>	56.25	88.45	78.57
4	<i>Avipaka</i>	71.41	91.30	55.55
5	<i>Kukshiveda na</i>	62.94	89.65	83.33

6	<i>Brhama</i>	33.35	85.71	100
7	<i>Kukshigaur</i> <i>ava</i>	69.22	100	64.98

8	<i>Shirashoola</i>	63.63	81.25	40.00
9	<i>Hrullasa</i>	49.99	81.25	71.44

Showing the overall effect of the results

S.No.	GRADATION	Group A			Group B			Group C		
		BT to AT			BT to AT			BT to AT		
		No	of	%	No	of	%	No	of	%
		patients			patients			patients		
1.	No improvement - < 25%	0		0	0		0		0	
2.	Mild relief – 25% to 50%	8		53.33	0		0		13.33	
3.	Moderate relief –50% to 75%	6		40	4		26.66	9	60	
4.	Marked relief – < 75%	1		6.66	8		53.33	4	26.66	
5.	Complete relief – 100%	0		0	3		20	0	0	

DISCUSSION

Disease Review

Detail and direct description of *Amlapitta* as a separate disease entity has not been described in the *Brahatravees*, but *Acharya Charaka* quoted the word *Amlapitta* in different contexts. *Charaka* while describing the *NanatmajaVyadhis*, considered the *Pittajvyadhis* like *Dahaka*, *Dhumaka*, *Amlaka* and *Vidaha*. These are seen in acid peptic disorders and indicate the state of *Pittavrudhi*. *Acharya Sushruta* and *Acharya Vagbhata* has not mentioned the disease *Amlapitta* directly but *Sushruta* has mentioned that excessive consumption of

Lavan Rasa leads to the symptom known as *Amlika*, that is similar to *Amlapitta*. *Acharya Vagbhata* while describing *PittajaHridroga*, used the term '*Amlapitta*'. *Acharya Kashyap* and *Madhavakara* both have described the disease elaborately. *Kashyapa* has mentioned the *Nidanas* those represents the involvement of *Doshas (Vatadayaha)* i.e., *Tridoshas*. Whereas *Madhavakara* has mainly given importance to *Pitta* aggravating factors responsible for the disease.

It is very difficult to correlate *Amlapitta* with a single disease of modern medical science. On the bases of pathophysiological

conditions and symptoms of the disease can be correlated to *Amlapitta* with Gastritis syndrome. It means inflammation of gastric mucosa associated with different types of symptoms.

Drug review

The drug which are having *Tikta* & *Madhurarasa*, *sheetavirya* & *madhura Vipaka*, *Laghu* & *Rukshaguna*, on the basis of above property '*DrakshadiGutika*' was selected. The combination of three drugs i.e. *Draksha*, *Haritaki*, and *Sita*. The *Draksha* as an individually or in combination with remaining drugs exhibits the *pitta rechana* property and it is easily available and palatable, the *Haritaki Lavanavarjita Pancharasa*, and *Haritaki* does *Vatanulomana*, and also *Pathya.Sita* more palatable, *madhura rasa Vata pitta shamaka* property will help to relieve the *Amlapitta*. The above said pharmacological actions of the drugs definitely pacify the parameters of the symptoms.

Procedure Review

The *Yoga* modalities mainly include the *Pavanamuktasana* which is helpful for the *vatanulomana* massage to the internal organs. The *kunjalaakriya* is a simple practice and all that is vomited is salty water containing impurities from the stomach. As

such there is no unpleasant taste, smell and nausea accompanying the procedure.

Materials and Methods

Clinical improvement is the ultimate expectation of drug, and *yoga* modalities, hence the present study was aim to evaluate the single and combined effect of the *Drakshadigutika* and *Yoga* modalities in *Amlapitta*. With this aims and objective, the clinical trial was carried out with total 47 patients diagnosed as *Amlapitta* with a help of classical signs and symptoms. Out of 47, 45 patients were completed the study the two patients not came for follow up in time, so we have not considered them for study. All 45 Patients were assigned in to three groups respectively, and analyzed on the bases of improvement in the cardinal signs and symptoms.

CONCLUSION

1. In *Brihatrayi*, *Amlapitta* has not been considered as a separate diseases entity
But the complete description of *Nidana*, *Samprapti*, *Laxana*, and Its *Chikitsa Sutra* was first explained by *Acharya Kashyapa* then by *Madhava*.

2. The disease can be diagnosed on the basis of symptoms given by *Madhava Nidana* and *Kashyapa Samhita*.
3. Majority of patients were from age group of 20-30years. This suggests that middle aged persons are with struggle of life giving them more stress. This age is also the age of *Pitta* predominance.
4. Present lifestyle that has disturbed the food habits gives rise to *agnimandya*, *vidagdhajirna* and further leads to *Amlapitta*. Therefore strictly *pathya* *apathya* compliance is required for the cure and prevention of the disease.
5. In Group 'B' after one month of treatment, 04 Patients showed moderate response (26.66%), 08 Patient showed marked relief (53.33%), 03 Patients showed complete response (20).
6. Hence by considering overall result, in the present study the effect of Yoga modalities without giving any medicine was more beneficial.
7. Among *Asanas*, *Pavanamuktasana* is the asana of choice for the clinical condition that are related with the

gastrointestinal tract. Among *Shatkriyas*, *Kunjalakriya* is the best possible wash to the digestive system from stomach to the mouth. It helps to maintain the homeostasis of the stomach through its cleansing effect.

REFERENCES

1. Chakrapani – Ch. Chi. 15/40-43. Vaidya Jadavaji Trikamji Acharya; Charaka Samhita by Agnivesha, Revised by Charaka and Dridhabala with the Ayurveda Dipika commentary of Chakrapanidatta; 5th edition; Reprint 2014; Choukhambha Sanskrit Samsthana, Varanasi.
2. Ka.Khi-16/44,45 Sri Satyapala Bhashagacharya; Kashyapa Samhita of Vriddha Jivaka Revised by Vatsya with Sanskrit Introduction by Nepal Rajguru Pandit Hemaraj Shrama with Vidyotini Hindi Commentary, Edition; Reprint 2013. Choukhambha Sanskrit Samsthana, Varanasi.
3. A.S., Su. 11/10 Indu. Commentary. Mitra Jyotir; Sharma Shivaprasad; Ashtanga Sangraha of Vriddha Vagbhata with Shashilekha Sanskrit Commentary by Indu; First Edition; 2006; Choukhambha Sanskrit Samsthana, Varanasi
4. Harita Sam-24Chap/2, Acharya Harita; Vidyotini Hindi Commentary, Edition; Reprint 2013. Choukhambha Sanskrit Samsthana, Varanasi.
5. Su. Su. 21/11 Vaidya Jadavaji Trikamji Acharya; Sushruta Samhita of Sushruta with the Nibhanhasangraha Commentary of Shri. Dalhanacharya; and the Nyaya Chandrika of Shri. Gayadasa Acharya 5th edition; Reprint 2014; Choukhambha Sanskrit Samsthana, Varanasi.
6. Siddha Yoga Sangraha P No 48. Yadavji Trikamji acharya; Siddha Yoga sangraha by Baidyanatha Ayurveda Prakashana; 5th edition 2012. Choukhambha Sanskrit Bhavan, Varanasi.
7. A Systematic course in the ancient tantric techniques of Yoga and kriya by swami Satyananda saraswati.page number 104. A Systematic course in the ancient tantric techniques of Yoga and kriya, inscribed by Swami Nischalananada Saraswati; Edition Reprint 2004 Published by Bihar School Of Yoga, in association with Yoga Publication Trust. Munger, Bihar.

8. Naturopathy and Yoga for Wellness and healing by Dr Prashanth Shetty. page number 62. Dr Prashanth Shetty; Naturopathy and Yoga for Wellness and healing; First edition 2012; Aditya Publishers Mabli, Dist Udupi, Karnataka.
9. A Systematic course in the ancient tantric techniques of Yoga and kriya by swami Satyananda saraswati. page number 74-75. Swami Satyananda saraswati; A Systematic course in the ancient tantric techniques of Yoga and kriya, inscribed by Swami Nischalananada Saraswati; Edition Reprint 2004 Published by Bihar School Of Yoga, in association with Yoga Publication Trust. Munger, Bihar.