

**International Journal
of Ayurveda and
Pharmaceutical
Chemistry**



Volume 7 Issue 3 2017

www.ijapc.com

e ISSN 2350-0204



Greentree Group



A Clinical Study to Evaluate the Efficacy of *Phalatrikaadi Kwatha* in the Management of *Amlapitta* w.s.r. to Gastroesophageal Reflux Disease

Bhupinder Singh^{1*}, Jaya Sakalani Kala², Archana Negi³, D ShwetaShukla⁴, and DeshrajSingh⁵

¹⁻⁵P.G. Deptt. Of Kayachikitsa, Rishikul Campus, Uttarakhand Ayurved University, UK, India

ABSTRACT

In today's era *Amlapitta* is a common disease found mostly in middle aged persons due to faulty dietary habits and changing lifestyle. It hampers the daily routine activities due to its symptoms like heart burn, abdominal pain, loss of appetite, nausea and vomiting. *Amlapitta* is caused by the increased *Drava guna* and *Amlaguna* of *Pachaka Pitta*. It affects the *Annavaha*, *Rasavaha*, *Raktavaha*, *Purishvahasrotasa*. Due to increasing incidence of the disease, scholars of different medical field are working to develop various means and measures to overcome this burning problem. In allopathic system of medicine *Amlapitta* cannot be correlated with any specific disease, but its symptoms are found in many disorders such as gastric ulcer, duodenal ulcer, gastroesophageal reflux disease and gastritis commonly named as acid peptic disorder. Acid peptic disorder results from an imbalance between aggressive factors (gastric acid, pepsin) and protective factors (gastric mucus, bicarbonate and prostaglandins). Antacids neutralize acid which is the first line of immunity and thus make the person more prone to various infections. While *Ayurvedic* approach is *Agni vriddhi* and *Aampachana* by various means. So, the present study is aimed at finding effective treatment of *Amlapitta* (gastroesophageal reflux disease). For the present clinical study 20 patients of *Amlapitta* were registered from the O.P.D., P.G. Department of Kayachikitsa, Rishikul Campus Haridwar. *Phalatrikaadi Kwath* was selected for managing the patients of *Amlapitta*.

KEYWORDS

Amlapitta, *Mandagni*, *Gastroesophageal Reflux disease*, *Phalatrikaadi Kwatha*



Greentree Group

Received 20/06/17 Accepted 22/00/17 Published 10/11/17



INTRODUCTION

Since long time, infectious (communicable) diseases were the biggest killer diseases globally. But now, the trend is changing towards increased prevalence of chronic diseases with causative factors mostly related to diet and lifestyle. *Ayurveda* is as old as human civilization, it is based on two principles maintaining *healthy state of the human body* and curing the disease. Most of the *Vikara* are deeply rooted in faulty habits like improper dietary habits, stress, anger, spicy irritant food, oily foods, etc. and *Amlapitta* is one of them.

Amlapitta is not considered as a separate disease in *Bruhatatraya* but is mentioned as a symptom in number of diseases by *Acharya Charaka*. *Acharya Kashyapa* was the first to give a detailed description of the disease. It is also the first text which has counted the *Manasika Bhavas* (Psychological factors) as a chief cause of the disease and analyse the disease on the basis of *Doshika* predominance. *Kashyapa* believed that the disease is caused by vitiation of *Tridoshas* leading to *Mandagni* and *Amlapitta*¹. He describes it as “*Bhishakamohakara*” as clinical pictures of many diseases like *Vidagdhajirna*, *Parinamshoola*, *Annadravashoola*, *Pittajashoola*, *Pittaja Grahani* are overlapping with *Amlapitta* so

it is very difficult to diagnose it and differentiate it. Whereas *Acharya Madhavakara* has described the disease in detail and classified it on the basis of *Gati* i.e., *Urdhvaga Amlapitta* and *Adhoga Amlapitta*.

According to *Acharya Charak* *Amlapitta* develops when *Aamvisha*, get mixed with *Pitta*². In *Ayurvedic* text *Mandagni* is the main cause of all the *Roga* including *Amlapitta*. In allopathic system of medicine *Amlapitta* cannot be correlated with any specific disease, but its symptoms are found in many disorders such as gastric ulcer, duodenal ulcer, gastroesophageal reflux disease and gastritis commonly named as acid peptic disorder. Acid peptic disorder results from an imbalance between aggressive factors (gastric acid, pepsin) and protective factors (gastric mucus, bicarbonate and prostaglandins). Major causes are *H. pylori* infection, NSAIDs, psychosocial factors etc. According to NDDIC (National Digestive Disease Information clearing house), the prevalence rate of gastritis is 10 million and that of peptic ulcer is 5 million (1987) in India. The frequency of both duodenal and gastric ulcer showed a decline from 1998 to 2008 i.e., from 12% to 2.9% and 4.5 to 2.7%. Antacids are among the one of the most widely used



medicine all over the world. Food and drug Administration (FDA) warned that there is increased risk of fractures with the use of Proton Pump Inhibitor. By taking antacids the person neutralizes acid which is the first line of immunity and becomes more prone to various infections. While in *Ayurveda* we concentrate more on *Agni vraddhi* and *AamPachan* by various means. So there is an open field for *Ayurvedic* scholars.

The drug selected under the study is *Phalatrikaadi Kwatha* described in *Chakradutta*. *Phalatrikaadi Kwatha* contains *Triphla*, *Patol*, *Kutki* and *Yashti Madhu*. Most of the contents have *Virechan* property. *Yashtimadhu* has *Madhur Rasa*, *Madur Vipaka* and *SheetaVirya* which act against the excessive *Drava*, *Tikshna* and *Ushna Guna* of *Pitta*.

AIMS & OBJECTIVES

- 1) To study the aetiopathogenesis of *Amlapitta*.
- 2) To evaluate the efficacy of *Phalatrikaadi Kwatha* in the management of *Amlapitta*.
- 3) To study the probable mode of action of *Phalatrikaadi Kwatha* in *Amlapitta*

MATERIALS AND METHODS

The study comprised of 20 patients of *Amlapitta*. The patients were selected from

OPD and IPD of Rishikul campus, Haridwar.

Ethical Committee Approval Number-
UAU/R/C/IEC/2016-17/2

Selection of Sample: -Randomized Sampling

Type of Study: Single Blind

Duration of Study: 45 days

Selection of Drug:

Phalatrikaadi Kwatha

- 1 Dose: 40 ml
- 2 Time of administration: two times(during morning and evening)
- 3 Duration of therapy : 45 days
- 4 Patients were guided regarding *Pathya/Apathya* regimen.

Assessment & Follow Up

Periodic assessment of the signs and symptoms was done at interval of 15 days for 45 days. A follow-up was done after 15 days to check the recurrence if any, after withdrawing the therapy.

INCLUSION CRITERIA-

1. Classical symptoms of *Amlapitta* as described in *Ayurvedic* texts viz. *Amlodgaar*, *Tiktodgaar*, *Kanthadaah*, *Urahdaah*, *Aruchi*, *Utklesha*, *UdarAadhmaan*, *Avipaka*, *Gaurav*, *Klama*, *Shiroruk*.
2. Age 20- 60 years.



3. GERD without any metabolic complication.

EXCLUSION CRITERIA-

1. Age group < 20 years and more than 60 years
2. Known case of Gastric and Duodenal ulcer
3. Known case of Gastric carcinoma
4. Chronic gastritis (more than 1 year)
5. Any other chronic illness.

Criteria for Assessment: Subjective parameters were employed for assessment of the impact of the treatment. Following sign and symptoms of *Amlapitta* were looked into for assessment:

- *Avipaka*
- *Klama*
- *Utklesha*
- *Tiktaudgara*
- *Amlaudgara*
- *Gaurav*
- *Urahadaha*
- *Kanthadaha*
- *Aruchi*
- *Aadhmaan*

- *Shiroruka*

The above symptoms were graded as below:

None	-	0
Mild	-	1

Moderate	-	2
Moderate to Severe	-	3
Severe	-	4

INVESTIGATIONS

I. Routine haematological, urine examination carried out to rule out any other pathology.

II. USG (if required).

III. Barium meal test (if needed).

STATISTICAL ANALYSIS

- Wilcoxon Signed Rank Test was applied on the subjective parameters.
- The obtained results were interpreted as:

P > 0.05 Not Significant

P < 0.01 & < 0.05 significant

P < 0.001 highly significant

RESULTS AND DISCUSSION

Discussion on Disease:

Amlapitta is a disease of *Pitta* dominancy but in vitiated condition. According to *Kashyapa Samhita* and other classics this vitiation could happen by four main groups of reasons (*Aharaja*, *Viharaja*, *Manasika*, *Agntuka*). Subsequently after increase in *Drava Guna* of *Pitta* formation of *Amla Rasa Pradhana Ama* takes place. Two more additional *Pitta*-vitiating factors i.e. *Anupa Desha* (*Ka.Ki. 16/22*) and the *Varsa Ritu* has specifically observed and mentioned by



Kahsyapa and *Srikanthadatta* respectively³. *Kashyapa* has mentioned such etiological

factors of *Amlapitta*, which are *Kapha Prakopa* (*Pitta Prakopa* along with *Kapha*).

Table 1 Efficacy Study of *Phalatrikaadi Kwatha*

Symptom	Median		Wilcoxon Signed Rank W	P-Value	% Effect	Result
	BT	AT				
<i>AVIPAKA</i>	0	0	-2.428 ^a	<0.05	52.9	Sig
<i>AMLAUDGARA</i>	0	0	-1.633 ^a	<0.001	40.0	Highly Sig.
<i>KANTHA DAHA</i>	2	0	-3.066 ^a	<0.01	68.0	Sig
<i>GAURAV</i>	2	1	-3.002 ^a	<0.01	51.5	Sig
<i>UTKLESHA</i>	2	0.5	-2.739 ^a	<0.01	50.0	Sig
<i>KLAMA</i>	3	1	-3.700 ^a	<0.01	48.8	Sig
<i>ARUCHI</i>	3	1	-3.601 ^a	>0.05	52.1	NS
<i>URAH DAHA</i>	2	1	-3.397 ^a	<0.001	51.3	Highly Sig.
<i>TIKTAUDGARA</i>	0	0	-1.633 ^a	>0.05	55.6	NS
<i>SHIRO RUKA</i>	2	0.5	-2.877 ^a	<0.01	56.3	Sig
<i>AADHMAAN</i>	0.5	0	-2.598 ^a	<0.01	52.4	Sig

Sharangadhara recognized that in the case of lust (*Kama*) and anger (*Krodha*), pulse - a somatic factor, is rapid and in case of anxiety and fear it is weak (*Sarangadhara Samhita 1:3:9*). This proves the effect of *Manasik Bhavas* on our body activities. Psychological factors like *Kama*, *Krodha*, *Shoka* etc, leads to *Agnidusti*. *Dusti* of *Mana* or *Agni* leads to Indigestion⁴ (*Su.Su. 46/50*). In *Amlapitta*, *Agni* will be diminished due to the *Nidana Sevana*. The food which is not properly digested becomes *Vidagdha* and produces *Shuktapaka* which is having increased *Amla Guna* in the stomach. If one has no control on eating due to greed vitiated *Pitta Dosha* finally produces *Amlapitta*.

Discussion On Observations & Results (Table 1) :-Statistically highly significant

results were found in 2 symptoms – *Amlaudgara* & *Urahadaha* ($p < 0.001$).

- Statistically significant results were found in 7 symptoms viz. *Avipaka*, *Kanthadaha*, *Gaurav*, *Utklesha*, *Klama*, *Shiroruka* and *Aadhmaan*.
- Statistically non significant results were found in only 2 symptoms *Aruchi* and *Tiktaudgara*.
- Percentage wise maximum effect was found on *KanthaDaha* (68%), *ShiroRuka* (56%) and *Tiktaudgara* (55.6%) followed by *Avipaka* (52.9%), *Adhmana* (52.4%) *Shiroruka* (52.4%), *Aruchi* (52.1%), *Urahadaha* (51.3%) *Utklesha* (50%) **Klama (48.8 %)** and *Amlodgara* (40%).

Discussion on Probable mode of action of *Phalatrikaadi kwatha*:



▶ Most of the contents of *Phalatrikaadi Kwatha* have *Tikta*, *Kashaya* and *Madhura Rasa*. *Madhura*, *Tikta* and *Kashaya Rasa* are *Pitta Shamaka*. *Tikta Rasa* and *Kashya Rasa* also pacifies *Kapha Dosha*.

▶ In this drug, 4 ingredients have *Tikta Rasa*. According to *Charaka Samhita*, *Tikta Rasa* is having properties like *Krimighna*, *Dahanashak*, *Agnidipana* and *Pitta Sleshma Upasoshana*⁵.

▶ *Yashtimadhu* present in it has ***Madhur Rasa***. *Madhura Rasa* counteract the *Tikshna Guna* of Vitiated *Pitta*. It also promotes strength, pacify *Pitta* and *Vata Dosha* and useful in *Daha*. Moreover, *Yashtimadhu* has ***Madhur Vipaka***, and ***Sheeta Virya*** which act against the excessive *Drava*, *Tikshna* and *Ushna Guna* of *Pitta*.

▶ *Yashtimadhu* and *Patola* relieve the symptoms like *Amlodgara*, *Tiktodgara*, and *Urahadaha* because of their *Madhura Rasa* and *Tikta Rasa* respectively.

▶ *Triphala*, because of its mild ***Virechaka*** property, eliminates the vitiating *Pitta* from the body.

▶ *Vatanulomana* property of *Haritaki* and *Amalaki* helps in expelling the excessive *Vidgdha Pitta* from the body.

▶ *Kutaki* has ***Pittarechak*** property

which also help to eliminate vitiating *Pitta* from body.

▶ In pathogenesis of *Amlapitta*, *Mandagni* leads to *Ama* formation. *Haritaki* also has *Agnideepan* property. According to *Aacharya Sharangdhara* it is the best medicine for *Amapachana* and alleviates the *Srotorodhaby Ushna*, *Tikshana Guna*.

- In *Amlapitta* natural *Rasa* of *Pitta* i.e. *Katu* is converted into *Vidagdha Amla Rasa* due to *Agnimandhya* and by virtue of *Dravata* increase the *Pitta Dosha*. *Tikta Rasa* drugs directly act on the *Vidagdha Pitta* and convert it into *Nirama Pitta*. *Tikta Rasa* decreases the *Pitta Dravata Vriddhi*, so it benefits in pacifying symptoms like *Utklesha*, *Amlaudgara* and *Avipaka*.

➤ From the above discussion, we can conclude that *Phalatrikaadi Kwatha* effectively carries out *Samprapati Vighatana* of *Amlapitta*.

CONCLUSION

“Conclusions” drawn from present work are as follows:

- *Amlapitta* is a *Pitta Pradhan Vyadhi* which has clinical features similar to GERD.
- Out of 11 subjective parameters *Phalatrikaadi Kwatha* has shown significant results in 9 parameters.



- As discussed above due to the properties of contents of *Phaltrikadi kwatha* it was found to be effective in controlling symptoms of *Amlapitta*.



REFERENCES

1. Pt. Hemraja Sharma, Vidyotini Hindi commentary, Kashyapa Samhita, Chaukhamba Sanskrit Sansthan, Varanasi (2009), Kash. khi.16/6, pg.no.335.
2. Kasinath Pandey, Gorakhnath Chaturvedi, Charak Samhita, Svimarsha Vidhyotani Hindi vyakhyaupeta, Chapter 15, Chikitsa Sthan , 2009, sloka no. 47, Chaukambha Sanskrit Publication, Varanasi, pg no. 530.
3. Yadonandan Upadhyay, Madhav Nidan, Madhokosha Tika, 2nd part, Uttaradh, Chapter 51, 2008, Sloka 3, Chaukambha Sanskrit Publication, Varanasi, pg. 203.
4. *Sushruta Samhitā* “*Ayurved Tatva Sandipika*” commentary, edited by Dr. Ambikadatta Shashtri, Chaukhambha Sanskrit Publication, Varanasi -221001 (India) , reprint 2005, Sutra sthana 46/50.
5. Kasinath Pandey, Gorakhnath Chaturvedi, Charak Samhita, Svimarsha Vidhyotani Hindi vyakhyaupeta, Chapter 26, Sutra Sthan , 2005, sloka no. 42, Chaukambha Sanskrit Publication, Varanasi, pg no. 507.