

Clinical Research Notes

Chaudhari Krishna Balvantbhai

Open Access

Case Report

Ayurvedic Management of Amlapitta through Vamana Dhauti and Shivapalapindi – A case study

Chaudhari Krishna Balvantbhai^{1*}, Dr. Rekha B.V ² and Dr. Venkatakrishna K.V ³

¹Final Year Pg Scholar, Department of Pg studies in Swasthavritta, Government Ayurveda Medical College, Mysuru

²Proffesor, Department of Pg studies in Swasthavritta, Government Ayurveda Medical College, Mysuru

³Head and Professor, Department of Pg studies in Swasthavritta, Government Ayurveda Medical College, Mysuru

*Corresponding Authors: Chaudhari Krishna Balvantbhai, Final Year Pg Scholar, Department of Pg studies in Swasthavritta, Government Ayurveda Medical College, Mysuru

Received date: July 12, 2022; Accepted date: July 22, 2022; Published date: July 30, 2022

Citation: Chaudhari K B, Dr. Rekha B.V 2 and Dr. Venkatakrishna K.V. (2022). Ayurvedic Management of Amlapitta through Vamana Dhauti and Shivapalapindi – A case study. *J. Clinical Research Notes*. 3(5); DOI: 10.31579/2690-8816/076

Copyright: © 2022 Chaudhari Krishna Balvantbhai, this is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract:

Amlapitta is very common disease of digestive system (Annavahavaha Srotas) caused by vidahi, Atimatra, Dusta Ahara. Digestive system disturbance is one of the most important and challenging area of general practice. After taking throw history and examination the patient was diagnosed as a case of Amlapitta. As the patient had mandagni, Sodhana along with Shamana Line of Treatment was adopted. Assessment was done by Subjective grading criteria for before and after treatment. Here, Vamana Dhauti and Shivapalapindi were selected as an intervention which subside the Pitta Dosha along with Vata and Kapha because of their Rasa, Guna, Prabhava and Karma. Hence this could be a better line of treatment in Amlapitta.

Key words: amlapitta; vamana dhauti; shivapalapindi; gastritis

Introduction

Case Presentation: A 32-year-old female patient, Attended Swasthavritta OPD in 19-10- 2021 with c/o Amlodgara (Soul balching), Hrud daha (burning in Chest region), Kantha Daha (burring in throat region), Avipaka (Indigestion), Gaurava (heaviness in all over body) and Utklesha (Nausea) since 1 year and 4 month. Patient was taking Allopathic medicine since 9 month but has not got complete relief. The natures of treatment were on and off because the patient was not able to maintain long term follow up.

Medication History: Not specific

On examination:

- PR 80/min
- Bp 130/80mm of Hg
- RS B/L NVBS clear
- SPO₂- 98% on room air
- $CVS S_1S_2$ Heard
- CNS Conscious and well oriented to time, place and person

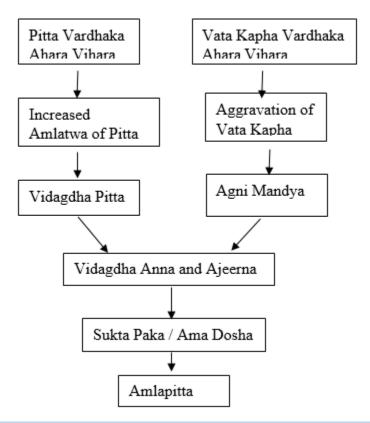
- P/A Soft and Non tender
- Nadi Pitta Kaphaja

Nidana Panchaka: (Five diagnostic tools)

- Nidana (Cause):
 - Food: Adhyashana (Consumption of food when previous meal not digested), Akala Bhojana (not specific time for consumption of food) Viruddhahara (incompatible food), Vidahi (food which produce burning sensation to the body), Ati Amla Katu Ahara (excess intake o sour and pungent food), Junk food
 - Activity: Ratri jagarana(Night awkening), Vega dharana (Suppression of natural urges), Diwa Swapna (Day Sleep), Sahasa Janya Karma or Ati Vyayama (labours work)
 - Mental factor: Krodha (Anger), Soka (Grief), Chinta (Worry)

Samprapti:

Auctores Publishing LLC – Volume 3(5)-076 www.auctoresonline.org ISSN: 2690-8816



Flow Chart 1: Schematic presentation of samprathi

Samprapti Ghataka

Dosha: Pitta pradhana Tridosha	Strotas: Annavaha, Purishvaha,	
	Rasavaha	
Dushya: Rasa dushti	Sadhyasadhyatva: Sadhya	
Strotodushti: sanga, vimarga gamana	Vyadhi marga: Abhyantara	

 Table 1: Samprapti Ghataka of Amlapitta

Chikitsa (Treatment):

After taking throw history and examination the patient was diagnosed as a case of Amlapitta. As the patient had mandagni

 $3~{\rm days}$ - Dipana Pachana with Chitrakadi Vati and Agni
Tundi Vati $2-0\text{-}2~{\rm Bf}$

On 4^{th} day - Sodhana i.e Vamanadhauti for 1 day early in the Morning and on Empty Stomach [4].

From $5^{th}\, Day$ Shivapalappindi (Shamana Chikitsa) $6 gm - 0\text{-}\, 6 gm^5$ Bf for $30 \; days$

Samhita also agree with the fact that sodhana therapy followed by Shamanaaushadi renders good result. Hence in present study also Vamanadhauthi as a sodhana followed by Shivapalapindi is administered.

Assessment was done before and after treatment.

Assessment Chart [6]:

Symptoms	Grading	Before Treatment	After Treatment
	0 - No belching	-	-
	1 - Feeling of belching with no sound	-	+
Amloudagara	2 - Feeling of belching with mild sound	-	-
	3 - Feeling of belching with severe sound	+	-
	0 -No burning sensation	-	+
	1 - Sensation of warmth on throat occasionally	-	-
Hrit-Kanta Daha	2 - Burning sensation on throat and chest after mild oily/spicy food	+	-
	3 - Feeling of burning sensation always	-	-
	0 – Normal	-	+
	1 - Feeling of heaviness in morning	-	-

Gaurava	2 - Feeling of heaviness in morning and evening after	-	-
	food		
	3 - Feeling of heaviness always	+	-
	0- No nausea	-	-
	1- Mild nausea	-	+
Utklesha	2 - Severe nausea	+	-
	3 - Severe nausea with vomiting	-	-
	0 - No indigestion	-	+
	1 - Unable to digest mild fatty food	-	-
Avipaka	2 - Unable to digest 3- course meal	-	-
	3 - Unable to digest any kind of food	+	-

Table 2: Shows the Assessment Criteria and result before and after treatment

Imaging Findings:



Table 3: Shows Photograph of Vamana Dhauti

Discussion: "Sarve Roga api Mandagni" Mandagni is the root cause for all disease and Amlapitta is a Lifestyle disease which is caused by Mandagni itself. So, Pachana and Dipana helps to Digest Ama, Makes the Dosha Niramana and Increased Digestive Fire. *Madhava Samhita*

suggests that the main aim of treatment of *Amlapitta* is to balance the aggravated *Kapha* and *Pitta*, this can better achieve through *Vamandhauti*.

Mode of Action of Saindhava Lavana:	Mode of Action of Vamana Dhauti
Saindhava lavana added to the water increases Osmotic pressure in stomach	Amlapitta is mainly caused by Ama Dusti.
Causes cellular water to flow from Gastric cells (chief cell, partial cell, and mucus Cell) into the body of stomach	Acts on Amashaya and Annavaha Srotasa
Cellular water carries along with it, toxins and other harmful substances accumulated over years in the gastric cell	Luke warm water pacifies Vata and Saindhava inhibits the secretion of acid in the stomach, help in liquefaction of Achadita and Avalipta Dhatugata Ama
Reverse Osmosis which helps removing toxins and stimulates digestive enzymes in saliva and stomach	Dhatugata Ama is expelled and Dhatavagnimandya homeostasis rectified
	Neutralizes the acid balance in stomach thus helpful in counteracting Tivra Jatharagni resulting in proper metabolism process

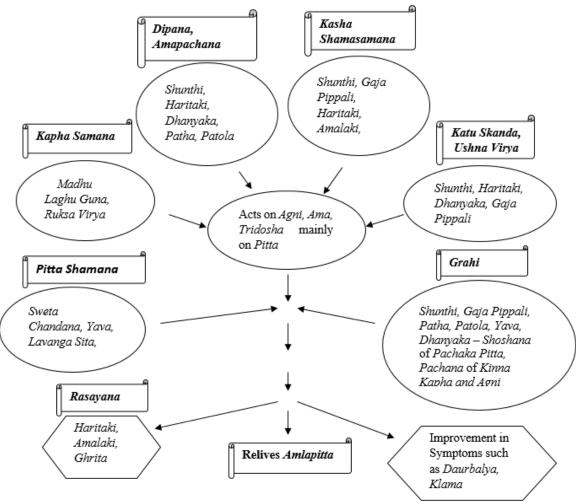
 Table 4: Schematic presentations of Mode of Action of Saindhava Lavana and Vamana Dhauti

The drug selected is *Shivapalapindi* which is explained in *Bhavaprakasa Samhita*. The Fundamental Constitutes are enriched with *Ahara Upayogi Dravya* that helps to stimulate digestion and metabolism which are *Patha*,

Patola, Yava, Sweta Chandana, Dhanyaka, Amalaki, Vasa, Lavanga, Tvaka, Gajapipali, Haritaki, Sita, Madhu, and Grita. Shivapalapindi is herbal mix that soothes the stomach tissues and promotes normal,

comfortable levels of digestive secretion during the digestive process. This cooling blend may help balance the digestive fire and eliminate toxins from the system. It may help control the formation of gas and the

discomfort associated with it. Which helps reducing the inflammation and rebuilding mucus lined barrier.



Flow chart 2: Shows Mode of action of Shivapalapindi

Conclusion:

The adopted treatment that is vamanadhauthi cleanses the stomach, thereby successfully subside the Pitta Dosha along with Vata and Kapha. Then administered shivapalapindi because of its Rasa, Guna, Prabhava and Karma rendering the patient long term benefits. Hence it can be concluded that vamana dhauti along with shivapalapindi is better line of treatment in managing Amlapitta.

Acknowledgments:

The authors will extend heartfelt thanks to the editorial team, technical team for their rapid response in publishing the article. Authors will also extend cordial gratitude to principal and all teaching staff of Department of Swasthavritta, Mysuru

Financial support and sponsorship: Nil

Conflicts of Interest: There are no Conflicts of Interest

References:

- Dr. Bramhananda Tripathy ed. (2003). B Madhava Nidanam of Madhavakara with Madhukosha Commentary by Vijayarakshita & Shrikantadatta 51(1): 225.
- 2. Svami niranjanananda sarsavati, gheranda samhita, varansi, bhusan press, shatkarma. (1997). chapter 1. 68.
- 3. Pandit sri brahma shankar misra, bhava prakash of bhavmishra, Chaukhambha Sanskrit samsthan, amlapitta sleshmadhikara. (2000). reprint. 128.
- Vaidya Kashinath Samagandi, Svasthavrttamrutam, jaipur, Ayurved Sanskrit Hindi Pustak Bhandar, Sata karma. (2019). edition, 303.
- Sharangadhara, Sharangadhara Samhitha, Jiwanprada Hindi commentary by Dr Shailja Srivastava, Publishers Choukambha Orientalia. (2017). 15.
- 6. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6153916/