



Sanjeevani Darshan

ISSN: 2584-0304

<http://sanjeevandidarshan.com>



**National Journal of
Ayurveda & Yoga**

Year-2024

Volume 2, Issue 4

**“AYURVEDIC APPROACH OF AMLAPITTA W.S.R. TO ACID PEPTIC DISEASE :
A REVIEW”****Dr. Shivani K. Raut¹, Dr Archana S. Dachewar²**

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ABSTRACT:

Amlapitta, a condition associated with the Annahava Srotas in Ayurveda, has become increasingly common in modern times due to unhealthy dietary habits and lifestyle choices. The term "Amlapitta" is derived from two components: "Amla" and "Pitta." Ayurvedic texts describe Amlapitta as a disorder characterised by an increase in both the quantity and sourness of vitiated Pitta. Acharya Chakrapani defines it as "Pitta endowed with the quality of sourness." In contemporary medical terminology, this condition can be compared to gastritis or acid peptic disease. In Ayurveda, Amlapitta is managed by balancing Pitta through therapies like Vamana (therapeutic vomiting) and Virechana (purgation). The primary symptoms of Amlapitta include Avipaka (indigestion), Klma (fatigue), Utklesha (nausea), Tikta-Amla Udgara (sour or bitter belching with burning sensation), and Aruchi (loss of appetite). In India, approximately 3 out of 869 individuals suffer from gastritis, which translates to around 12,25,614 people affected out of a total population of 1,06,50,70,607. Studies conducted in cities indicate that more than 50% of individuals are affected by gastritis by the age of 10, and this figure increases to over 80% by the age of 20. In Ayurveda, this condition is referred to as Amlapitta.

Aims & Objectives: Aim of article to provide information about Amlapitta w.s.r. to Acid peptic Diseases. **Materials & Methods :** Ayurvedic Samhitas ,modern literature , journals , various websites , review articles have been analyzed for study . **Conclusion:** This paper presents a comprehensive review of Amlapitta from both Ayurvedic and modern medical perspectives.

KEY WORDS:- Amlapitta, Acid peptic disease, Gastritis, Vamana, Virechana.

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How to cite article:

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Ayurvedic approach of amlapitta w.s.r. to acid peptic disease : A review, Sanjeevani Darshan - National Journal of
Ayurveda & Yoga 2024; 2(4): 01-17 : <http://doi.org/10.55552/SDNJAY.2024.2401>

INTRODUCTION

Ayurveda holds a prominent position among Indian medical systems for effectively managing health conditions in a safe and holistic way. It not only treats diseases but also addresses their underlying causes. Acid peptic disease is correlated with Amlapitta in Ayurvedic practice⁽¹⁾. Classical Vedic texts do not mention Amlapitta specifically, but in the Samhita period, Acharya Kashyapa was the first to identify it as a distinct condition, providing detailed explanations and treatment approaches⁽²⁾. The term Amla refers to a sour sensory quality detected by taste, while Pitta represents one of the three fundamental Doshas in Ayurveda, essential for digestion and metabolism. According to Ayurvedic principles, all illnesses stem from dysfunction in Agni (digestive fire)⁽³⁾. Similarly, Amlapitta arises from the vitiation of the Annavaha Srotas due to improper dietary and lifestyle practices. Factors such as fasting, irregular eating, stress, hurried meals, and consuming spicy foods disturb Pachaka Pitta (responsible for digestion), leading to this disorder⁽⁴⁾. Acid peptic disease has become increasingly common in modern times, largely due to unhealthy dietary habits, lifestyle choices, stress, and addictions. A primary manifestation of this condition is hyperacidity or gastritis. Hyperacidity occurs when there is excessive secretion of stomach acid, resulting from an imbalance between the acid secretion process in the stomach and upper intestine and the stomach's protective mechanisms. The natural process of digestion involves the secretion of stomach acid, which has evolved significantly from ancient to modern times as dietary patterns have changed. While these changes aim to improve quality of life, poor dietary habits and unhealthy lifestyles remain significant contributors to various illnesses⁽⁵⁾.

In India, approximately 0.34% of the population is affected by gastritis, with a higher prevalence among females (53.33%) compared to males (46.66%). The condition is most commonly observed in individuals aged 20–40 years (41.66%), with a decline in prevalence after the age of 40 (11.66%)⁽⁶⁾. This highlights the importance of understanding the condition and its initial treatment strategies. While allopathic treatments are widely used for acid peptic disease, they may cause side effects such as headaches, diarrhoea, nausea, and constipation⁽⁷⁾.

As a result, Ayurvedic treatment approaches have gained recognition and appreciation among researchers for their potential benefits and reduced side effects. In Ayurveda, the treatment of Amlapitta includes procedures such as Shodhana therapies like Vamana (therapeutic emesis) and Virechana (therapeutic purgation), along with Shamana Chikitsa involving the use of formulations such as Kamdudha Rasa, Maharasnadi Kwatha, and Sutashekhar Rasa. Among these, Vamana is primarily recommended for managing Urdhwaga Amlapitta (acid reflux affecting the upper gastrointestinal tract), while Virechana is used for treating Adhoga Amlapitta (conditions affecting the lower gastrointestinal tract). In chronic cases, Asthapana Basti (therapeutic enema) is also suggested as part of the treatment regimen.

AIM & OBJECTIVE:

- To understand the concept of Amlapitta in Kashyapa Samhita.
- Amlapitta told in Kasyapa Samhita.
- To interpret the treatment on basis of Panchmahabhuta Siddhanta from Ayurveda.

MATERIAL AND METHOD :

The foundational and conceptual materials were gathered from Ayurvedic classics, including Bruhatrayi and Laghutrayi, along with their available commentaries, research papers, and journal articles.

ETYMOLOGY :

Amlapitta is a term derived from two components: Amla + Pitta

The word Amla denotes a specific taste, commonly associated with sourness, which stimulates excessive salivary secretion. Pitta represents a biological substance responsible for digestion, metabolism, and transformation within the body. When these two elements are combined, Amlapitta refers to a condition characterized by an increase in the sour quality of Pitta.

DEFINATION⁽⁸⁾ :

- **Amlaya Pittam Amlapittam | (Vachaspatyam)**

According to Vachaspatyam, Amlapitta refers to a condition where Pitta manifests with a sour taste.

- **Vidahyاملagunodriktam Pittam Amlapittam |(Vijayaraksita)**

Vijayarakshita, commentator of Madhava Nidana defines the words as that the Pitta having Vidahi quality give rise to Amla or sour taste.

- **Amlapittam Chaiti Amlagunodriktam Pittam |(Chakrapani)**

This indicates that the qualities of Pitta, such as sourness, become elevated, resulting in Amlapitta.

- **Amlam Amladhikam Pittam Yatra Tadamlapittam |(Gananatha Sen)**

In his book Sidhanta Nidana, Shri Gananath Sen provides a similar definition, stating that the increased sourness of Pitta leads to the condition known as Amlapitta.

The classical description of Amlapitta highlights that it is a pathophysiological condition characterized by the vitiation of Pitta through Vruddhi (excessiveness), leading to an increased sourness of Pitta.

SYNONYMS⁽⁹⁾ :

- Pramilaka- As.Sa.Su.5/27 Indu. Commentary
- Pitta Visuchika- As.Sa.Su.5/27 Indu. Commentary
- Pittamlaka - Harita
- Amlika - Su. Su. 42/9

NIDANA :

The causes of Amlapitta can be broadly categorized into the following etiological factors.

1. Aharaja
2. Viharaja
3. Manasik
4. Agantuj

1. Aharaja Hetu⁽¹⁰⁾:-**Table No. 1 : Showing Aharaja hetu of Amlapitta.**

Sr.no	Nidana	M.N.	Y.R.	K.S.
1	Vidahi pana sevana	+	+	-
2	Vidahi anna sevana	+	+	-
3	Viruddhashana	+	+	-
4	Dushtanna sevana	+	+	-
5	Vidagdha ahara sevana	-	+	-
6	Atiamla sevana	+	+	-
7	Kaphaprakopinna sevana	+	+	-
8	Guru ahara sevana	-	-	+
9	Kulattha sevana	-	-	+
10	Pittaprapak anna sevana	-	+	-
11	Pisntanna sevana	-	-	+
12	Abhishyandi ahara	-	-	+
13	Atisnidha ahara	-	-	+
14	Atiushna sevana	-	-	+
15	Atiruksha ahara	-	-	+

2. Viharaja Hetu⁽¹¹⁾ :

To maintain optimal health, it is essential to adhere to a disciplined lifestyle and follow proper habits. These include regular and timely defecation, consuming food on time, and maintaining a proper sleep schedule. Suppressing natural urges forcefully should be avoided. Consistently following these habits ensures the balance of the body's natural constituents,

which contributes to overall excellent health and proper bodily functions.

Failure to maintain these habits can disrupt the body's functioning, disturb the balance of Pitta and digestion, and eventually lead to Amlapitta.

The factors contributing to this disturbance include:

- **Atisnat:** Taking excessive baths.
- **Ati Avagahanat:** Excessive swimming.
- **Bhuktwa Diwasvapnat:** Sleeping during the day after meals.
- **Vega Dhararam:** Suppression of natural urges.
- **Shayya Prajagarae:** Irregular or improper sleeping habits.

3. Manasika Hetu⁽¹²⁾:

Psychology plays a significant role in maintaining overall health and regulating psychological well-being. However, abnormal psychological states such as anger, anxiety, and greed can negatively impact the digestive system's physiology. These emotional disturbances may lead to reduced, irregular, or excessive secretion of digestive juices, which can disrupt proper digestion. Such imbalances aggravate Pitta, ultimately contributing to the development of Amlapitta.

Modern research has demonstrated that acid gastritis is often a result of stress and strain, highlighting the critical role of psychological factors in the onset of Amlapitta.

4. Agantuka Hetu:

Nowadays, iatrogenic diseases are becoming increasingly common, and Amlapitta can be a consequence of improper drug use or drug abuse. The over-the-counter use of non-steroidal anti-inflammatory drugs (NSAIDs) and anticoagulants may treat certain conditions but can also lead to Amlapitta as an adverse effect. Similarly, Ayurvedic medicines, particularly unpurified or improperly prepared Rasa Aushadhi, can trigger Amlapitta.

Excessive use of Ushna (hot), Tikshna (sharp), or other potent drugs over extended periods without proper diagnosis or assessment can also cause Amlapitta. Furthermore, Panchakarma treatments performed with Heena Yoga, Mithya Yoga, or Atiyoga can negatively impact Agni (digestive fire) and lead to the development of various diseases, including Amlapitta.

Additionally, Amlapitta can emerge as a secondary complication or Upadrava of other chronic conditions such as Vibandha (constipation), Arsha (hemorrhoids), Ajirna (indigestion), and Pandu (anemia).

SAMPRAPTI^(13,14,15) :

The term Samprapti refers to the entire process of disease formation, starting from the initial contact of a causative factor with the body and leading to the full manifestation of disease symptoms. It represents the progression a disease follows, involving the vitiation of Doshas

(biological humors) and the pathway through which the disease develops. This concept is similar to the modern medical term pathogenesis.

According to Kashyapa, Madhava, and Gananath Sen, the specific Samprapti of Amlapitta unfolds as follows:

Excessive indulgence in the aforementioned etiological factors leads to the vitiation of Vata and Pitta Doshas. This vitiation can reduce the Jatharagni (digestive fire) to below its normal level, a state referred to as Jatharagnimandya. In this weakened state, any consumed food becomes Vidagdha (impaired or improperly digested) and remains stagnant in the stomach. This stagnant food leads to Sukta, which represents an early stage of the disease. This initial condition is known as Vidagdhajirna, a Purvarupa (prodromal or preliminary stage) of Amlapitta.

Further progression involves the mixing of vitiated Pitta with Sukta, leading to Pitta-Amavisa-Sammurchhana, the formation of toxic combinations that result in the development of Amlapitta with its hallmark symptoms. If left untreated during this stage, the disease advances into Bhedavasta (distinct stages of differentiation), giving rise to forms such as Urdhwaga (upper tract manifestations) and Adhoga (lower tract manifestations). Additionally, advanced stages of the disease may result in further complications, including Sitapitta, Udara, Annadrava, and Parinama Shula.

In his work Sidhanta Nidana, Gananath Sen notes that when food contains an excess of Amlarasa (the sour taste), Amlarasa is also produced in the Amashaya (stomach). An overabundance of Amlarasa in the stomach can irritate the Amashaya when consumed in large quantities or at improper times. This irritation can lead to an increase in Amlarasa secretion, which further disturbs the Amasayakala (gastric mucosa). Such disturbances can give rise to a variety of chronic, incurable disorders like Shula (abdominal pain) and other complications.

SAMPRAPTI GHATAKAS:

1. Dosha – Tridosha (mainly pitta)
2. Dushya – Ras, rakta
3. Srotasa – Annavaha
4. Agni – Jatharagni
5. Ama – Jatharagni mandhyajanya
6. Udbhava sthana – Amashaya

PURVAROOPA:

The Ayurvedic classics do not specifically mention distinct Purvarupas (prodromal or preliminary stages) of Amlapitta. However, through the application of logical reasoning

(Tarka) and practical observations, certain important inferences can be made.

As previously explained in the concept of Samprapti, Agnimandya (reduced digestive fire) and Ajirna (indigestion) represent the progressive stages leading to the manifestation of Amlapitta. These conditions are commonly observed among patients and can be considered early indicators of Amlapitta.

Additionally, symptoms associated with Annavaha Srotodusti (disruptions in the digestive tract pathways) and Purishavaha Srotodusti (disruptions in the fecal elimination pathways) can also be identified as Purvarupa of Amlapitta, reflecting the initial disturbances preceding the full development of the disease.

ROOPA⁽¹⁶⁾ :

The symptoms of Amlapitta have been described in classical texts by Kashyapa, Madhava Kara, and Harita. Subsequent authors during the Sangraha-kala period, such as Bhavamishra, Vangasen, and Yogaratnakara, have followed Madhava Kara's descriptions.

In this context, Basavaraja categorized Amlapitta under the Nanatmaja diseases of Pitta and identified it with Vakshiva Paridosha (from Saptama Prakarana).

According to Madhava, the symptoms of Amlapitta include:

- Avipaka (impaired digestion)
- Kanthadaha (burning sensation in the throat)
- Klama (fatigue)
- Tikta Amla Udgara (bitter, sour regurgitation)
- Gaurava (heaviness in the body)
- Aruchi (loss of appetite)
- Utklesha (nausea)
- Hritdaha (burning sensation in the chest)

Kashyapa added additional symptoms such as:

- Antrakujana (abdominal rumbling)
- Vidbheda (abdominal discomfort)
- Udara Admana (abdominal distension)
- Hritshula (chest pain)

An analysis of the classical texts reveals that the list of symptoms associated with Amlapitta is extensive. A comparative table summarizing the symptoms across different authorities has been presented for better understanding.

Table 2: Showing Samanya Lakshana of Amlapitta according to various authorities.

Sr. No.	Lakahanas	K.S.	M.N.	B.P.	S.N.	B.R.	G.N.
1	Amlodgara	+	+	-	-	-	-
2	Amlotklesha	+	-	-	-	-	-
3	Antrakujana	+	-	-	-	-	-
4	Avipaka	-	+	+	-	+	+
5	Angasada	+	-	-	-	-	-
6	Gaurava	-	+	+	-	+	+
7	Aruchi	-	+	-	-	-	+
8	Hriddaha	-	+	+	+	+	+
9	Gurukostata	+	-	-	-	-	-
10	Kanthadaha	+	+	+	+	+	+
11	Hritsula	+	-	-	-	-	-
12	Karacharanadaha	+		+	+	+	+
13	Klama	-	+	+	+	+	+
14	Romaharsha	+	-	-	-	-	-
15	Siroruk	+	-	-	+	-	-
16	Srama	-	-	-	-	-	+
17	Udaradhama na	+	-	-	-	-	-
18	Tiktodgara	-	+	+	-	+	+
19	Utklesha	+	+	-	-	+	+
20	Vidbheda	+	-	-	-	-	-
21	Uravidaha	+	-	-	-	-	-

TYPES OF AMLAPITTA⁽¹⁷⁾:

Based on the movement (Gati) of Pitta, Madhava has classified Amlapitta into two types:

1. **Urdhvaga Amlapitta**
2. **Adhoga Amlapitta**

Furthermore, Kashyapa and Madhava have categorized Amlapitta based on the involvement of Doshas as well, dividing it into specific types accordingly.

Kashyapa	Madhava
Vatika Amlapitta	Sanila Amlapitta
Paittika Amlapitta	Sanila Kapha Amlapitta
Slesmika Amlapitta	Sakapha Amlapitta
	Slesmapitta Amlapitta

UPASAYA ANUPASAYA⁽¹⁸⁾ :

Specific references to Upasaya (methods of therapeutic management) and Anupasaya (non-therapeutic management) are exclusively mentioned by Kashyapa while describing the Dosaja (dosha-based) types of Amlapitta.

According to Kashyapa, the types of Amlapitta and their corresponding Upasaya are as follows:

- **Vataja Amlapitta:** Managed by Snigdha Upasaya (oily or unctuous therapies).
- **Pittaja Amlapitta:** Managed by Swadu (sweet taste) and Sita (cooling therapies) Upasaya.
- **Kaphaja Amlapitta:** Managed by Ruksha (dry) and Ushna (hot) Upasaya.

UPADRAVA⁽¹⁹⁾ :

The complications of Amlapitta are not extensively described by ancient Acharyas except for Kashyapa. According to Kashyapa, eight Upadravas (complications) are identified, and he stated that the disease becomes incurable in the presence of these complications. The eight Upadravas are as follows:

1. **Jvara** (fever)
2. **Atisara** (diarrhea)
3. **Panduta** (anemia)
4. **Shula** (abdominal pain)
5. **Shotha** (swelling or edema)
6. **Aruchi** (loss of appetite)
7. **Bhrama** (dizziness or vertigo)
8. **Grahani Roga** (intestinal disorders)

Although Madhavakara did not explicitly mention complications of Amlapitta, he included Shoola (abdominal pain) as part of its Vatika predominant variety. Hence, Parinama Shoola (evolutionary abdominal pain) and Annadrava Shoola (pain associated with food) can be considered as complications of Amlapitta.

According to **Acharya Gananath Sen**, the Upadravas of Amlapitta include the following:

- Amasayakala Shopha (inflammation of the gastric mucosa)
- Grahani Kala Shopha (inflammation of the intestinal region)
- Kandu (itching)

- Mandala (skin rashes)
- Pidaka (skin lesions or pustules)
- Shitapitta (acid-related skin reactions)
- Udara (abdominal distension)
- Vicharchika (dermatitis or chronic skin condition)
- Vispota (eruption or sudden skin outbreaks)

SADHYASADHYATA⁽²⁰⁾ :

Madhava has outlined the concept of Sadhyasadhyata (curability) in relation to Amlapitta. According to him:

- If Amlapitta is of recent origin, it can be effectively cured with appropriate and timely interventions.
- In cases of chronic Amlapitta, the disease tends to recur once treatment is discontinued.
- Some patients may find it particularly challenging to cure Amlapitta even with proper and sustained treatment.
- When Amlapitta is accompanied by other Upadravas (complications), its chronic form may become Asadhya (incurable).

SAPEKSHA NIDANA OF AMLAPITTA :

The diagnosis of Amlapitta should be differentiated from other conditions such as Pittaja Atisara (diarrhea due to Pitta imbalance), Pittaja Grahani (intestinal disorders associated with Pitta), and Vidagdhajirna (fermented or impaired digestion). Proper differential diagnosis is essential for accurate assessment and treatment.

Table No. 3 Showing Sapeksha Nidana of Amlapitta

Samprapti	Amlapitta	Pittaja Atisara	Pittaja Grahani	Vidagdhajirna
Dosha	Pitta (Amla and Drava)	Pitta(Drava and Sara)	Pitta (Tikshna)	Pitta (Usna)
Dusya	Rasa	Purisha and Rasadi Dhatu	Purisha	Rasa
Srotas	Rasavaha Annavaha Purishavaha	Purishavaha Rasavaha	Purishavaha Annavaha	Annavaha
Adhistna	Amashaya	Pakwashaya	Grahani	Amashaya

CHIKITSA OF AMLAPITTA⁽²¹⁾ :

The treatment for Amlapitta can be approached through two main strategies: General principles of management and management based on the specific condition of the patient. According to Charaka, most diseases can be treated using three methods:

1. **Apakarshana** (elimination therapy)
2. **Prakritivighata** (restoration of natural balance)
3. **Nidana Parivarjana** (removal of causative factors)

1. Apakarshana

In the context of Amlapitta, the disease originates in the Amashaya (stomach) with Doshas primarily localized there. Apakarshana refers to Shodhana (purification/elimination) therapy, which aims to eliminate the accumulated Doshas from the body through specific cleansing methods.

- **Vamana** (therapeutic emesis) is recommended when Doshas are localized in the Amashaya.
- **Virechana** (therapeutic purgation) is indicated when Doshas are located in the Pachyamanasaya (upper intestines).
- **Basti** (medicated enema) is the appropriate therapy if Doshas are localized in the Pakwasaya (lower intestines).

These treatments are part of Shodhana therapy, which helps cleanse the body of excess Doshas.

According to Chakrapani, Vrinda Madhay, and Govind Das, the use of **Niruhabasti** (a type of medicated enema) is effective in such cases. Additionally, Yogaratnakara suggests the use of **Raktamokshana** (blood-letting) as another therapeutic intervention.

Summary:

- **Vamana:** For Urdhwaga Amlapitta (upper type).
- **Virechana:** For Adhoga Amlapitta (lower type).
- **Niruhabasti:** Recommended for localized Dosha elimination.
- **Raktamokshana:** Suggested for specific conditions by Yogaratnakara.

2) Prakritivighata :

Prakritivighata refers to the therapeutic approach that uses specific medications to suppress or balance the Doshas, a treatment method known as **Shamana therapy**. In the context of Amlapitta, Shamana therapy is recommended to alleviate symptoms and control the excessive Pitta dosha.

Various **Pitta-Shamaka** (Pitta-reducing) formulations and recipes have been suggested as part of this treatment. The ideal Shamana drug should possess the following properties:

- **Rasa:** Madhura (sweet) and Tikta (bitter), as they counteract the qualities of Pitta.
- **Guna:** Snigdha (unctuous) to balance the vitiated Doshas.
- **Veerya:** Sheeta (cooling) to neutralize the heat associated with excess Pitta.

These qualities directly oppose the characteristics of Pitta, helping to restore balance and relieve the symptoms of Amlapitta.

3) Nidana Parivarjana :

Nidana Parivarjana refers to the practice of avoiding causative factors or dietary habits that aggravate the Doshas and contribute to the development of the disease. This involves steering clear of foods and practices that are known to be Dosha-aggravating or disease-inducing.

The approach emphasizes the consumption of only those foods and dietary items that are wholesome, beneficial, and supportive of the body's natural balance, aiding in the prevention and management of Amlapitta.

According to Kashyapa⁽²²⁾:

Since Amlapitta is primarily associated with the Amashaya (stomach) and involves the dominance of Kapha and Pitta Doshas, the treatment follows a structured approach:

1. **Vamana (therapeutic emesis):** This is the first step to eliminate excess Doshas from the Amashaya. It is the most appropriate initial therapy because the disease is primarily oriented toward the stomach region.
2. **Shamana Therapy:** After Vamana, anti-Pitta and anti-Kapha drugs (Shamana drugs) should be administered to balance and calm the Doshas. Additionally, Pachana drugs (digestive aids) should be included to support the digestive system.
3. **Deepana Therapy:** Once the Samsarga Doshas (combined Doshas) are cleared, and the stomach is free of excessive Doshas, Deepana drugs should be administered. These drugs help stimulate the digestive fire (Agni) to support proper digestion.
4. **Virechana or Sranasna Therapy:** If the Doshas have moved into the Pakwashaya (lower gastrointestinal tract), Virechana (therapeutic purgation) or Sranasna drugs should be used to eliminate the Doshas from the intestines.

This multi-step therapeutic approach ensures a comprehensive and systematic treatment plan to restore balance, eliminate Doshas, and improve digestion.

DRUGS USED IN AMLAPITTA:

(a) Single drug :

- Ativisha
- Patola

- Bhringaraja
- Satavari
- Guduchi
- Sukti Bhasma and Pisti
- Kaparda Bhasma
- Shankha Bhasma
- Mukta Pisti
- Pravala Bhasma

(b) Famous formulations:

- Drakshavaleha
- Sootasekhar Rasa
- Kamadudha Rasa
- Satavari Mandura
- Avipattikara Churna
- Satavari Ghrita

PATHYAPATHYA⁽²³⁾ :

References to Pathya (wholesome or advisable) and Apathya (unwholesome or inadvisable) can be found across various Ayurvedic classics. A summary of these references is presented in **Table 4** for comparative analysis and clarity.

Table No.4 Showing Pathya Apathya in Amlapitta

	Pathya	Apathya
Ahara	Purana, Shali, Mudga, Goghrita, Godugdha, Jangala Mamsa, Patola, Vastuka, Dadima, Amalaki etc.	Amla, Lavana, Katu, Vidahi, Guru, Tila, Kulattha, Madya etc.
Vihara	Sitopachara, Visrama	Atapasevana, Vega Vidharana, Krodha, Soka, Chinta etc.

MODERN VIEW⁽²⁵⁾ :

It is essential to correlate the diseases described in Ayurvedic classics with modern medical conditions to gain a better understanding of their pathogenesis. Modern medical literature uses certain technical terms to describe conditions similar to Amlapitta. These terms either reflect the pathological aspects of the disease or highlight its clinical characteristics. Similarly, Amlapitta cannot be directly equated with a single condition like acid reflux

syndrome, which includes GERD, gastritis, dyspepsia, peptic ulcer, and hyperacidity⁽²⁴⁾.

GASTRITIS SYNDROME:

Gastritis refers to the inflammation of the gastric mucosa, while the term **syndrome** denotes a condition characterized by a group of associated symptoms. It signifies the manifestation of multiple symptoms arising due to the underlying pathophysiological changes in the stomach.

Table 5: Showing correlation between Hyperacidity and Amlapitta

Sr.no.	Hyperacidity	Amlapitta
1	Heart burn	Hritdaha
2	Chest pain	Hritshoola
3	Abdominal distension	Udaradhmana
4	Loss of appetite	Aruchi
5	Acid refluxes of the food taken	Amlot klesha
6	Sour belching	Amlodgara

GASTRITIS :

It pertains to the inflammatory condition of the gastric mucosa. Although there are several clinical types of gastritis, they can be broadly categorized into the following types:

- 1.Acute Gastritis
- 2.Chronic Gastritis

1) Acute Gastritis :

Acute Gastritis is characterized by symptoms such as epigastric pain, nausea, vomiting, loss of appetite, and severe bleeding (hematemesis).

2.Chronic Gastritis:

Chronic Gastritis is characterized by the absence of significant visible mucosal erosion. However, prolonged inflammation may result in mucosal atrophy. While it is typically asymptomatic, it can be associated with conditions such as pernicious anemia, gastric ulcer, duodenal ulcer, and gastric carcinoma.

TREATMENT PRINCIPLES :

1).Acute gastritis :

- Prevention of Erosive Gastritis
- Treatment of underlying or associated conditions
- Discontinuation of causative agents
- Adoption of general supportive care measures as necessary

2) Chronic Gastritis :

No specific treatment is necessary for Type A or Type B chronic gastritis, with or without mucosal atrophy. However, if the condition is associated with pernicious anemia, it requires regular and indefinite parenteral administration of vitamin B12.

As mentioned earlier, no disease perfectly aligns with the etiology, signs, and symptoms of Amlapitta. However, certain diseases exhibit similarities in their causes, while others share common signs or symptoms with Amlapitta.

DISCUSSION

Amlapitta is a significant lifestyle-related disease that is becoming increasingly prevalent due to changes in daily habits. While lifestyle adjustments can help manage these conditions through pathya (beneficial dietary habits) and apathya (harmful dietary habits), certain situations may require medicinal intervention to alleviate symptoms that disrupt a person's daily routine.

In Ayurveda, pathya serves both as a preventive measure and as part of disease management. Acharya Charaka referred to pathya as synonymous with treatment, underscoring its importance in Ayurvedic healing.

Pathya refers to diets beneficial for maintaining both the body and mind, while **Apathya** refers to those that adversely affect mental and physical health. According to Kashyapa Samhita, certain foods are considered pathya for Amlapitta, such as Purana shaali, Mudra, Masura, Harenu, milk and goghrita, Jangal mamsa, Kalayashaaka, Pautika, as well as flowers of Vasa and Vasuka.

For Amlapitta, a diet with properties such as laghu (light), snigdha (unctuous), shitaguna (cool), madhurrasa (sweet taste), madhurvipaka (sweet post-digestive taste), and shitavirya (cooling effect) is considered pathya. These dietary choices can help prevent the aggravation of Pitta dosha, pacify samanavayu, support agnidipana (stimulating digestive fire), aid in amapachan (detoxification), and regulate vatanulomana (normalization of Vata). Snigdhaahar (unctuous food) is especially helpful in reducing dryness in the intestinal mucosa and regulating vayu (wind element).

CONCLUSION

Ayurveda does not consider Amlapitta as a condition that can be completely managed solely through medication or dietary adjustments. Although it is classified as a yapyya (manageable) disease, Ayurveda emphasizes that a combination of pathya (beneficial lifestyle and dietary practices) and appropriate treatment procedures is essential. Consistent adherence to these practices, in conjunction with proper therapeutic interventions, can not only cure Amlapitta but also support overall well-being and promote longevity.

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Source of Support : None Declared

Conflict of Interest : Nil