



## CLINICAL EFFICACY OF PATHYADI CHURNA IN THE MANAGEMENT OF AMLAPITTA (GASTRITIS)

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### ABSTRACT

**Background:** *Ayurveda* has given utmost importance to optimal dietary regimen and its variation as per the season, *Agni*, *Prakruti*. When these are not followed, leads to imbalance in *Doshas* in turn leading to the manifestation of disease. *Amlapitta* is such a clinical entity manifesting in the *Annavaha Srotas*.

### Objectives:

➤ To evaluate the efficacy of *Pathyadi Churna* in the management of *Amlapitta*.

**Methodology:** 20 patients who fulfilled the inclusion criteria were selected and were administered *Pathyadi Churna*, 6 grams twice daily (after breakfast and after dinner) with *Ushnajala Anupana* for 28 days. They were followed up every week and 7 days after the intervention. The *Samanya Lakshanas* of *Amlapitta* were observed, recorded and assessed. **Results:** Out of 24 enrolled patients, 20 completed the treatment schedule. Within the group analysis showed, the effect of treatment was statistically highly significant ( $p < 0.001$ ) before treatment to after treatment and at follow up on all the parameters.

### Interpretations:

➤ *Pathyadi Churna* has shown better result in *Lakshanas* like *Avipaka*, *Tiktamlodgara*, *Hrit-Kanta Daha* during the course of this study.

### Conclusion:

➤ *Pathyadi Churna* can be considered as a safe and effective formulation in the management of *Amlapitta*.

**KEYWORDS:** *Amlapitta*; *Pathyadi Churna*, *Agni*, *Annavaha Srotas*.

### INTRODUCTION

The changes due to modern era have created a disturbance in several areas of an individual's life which are not only limited to his activities and habits but also a lot of changes has happened in his manner of food intake and even in nature of food too. Other contributing factors for the change in food habits are frequent traveling and change of environment which in turn has an effect on an individual's health. So it can be clearly understood that imbalanced food habits are considered as the prime cause of the manifestation of disease in an individual.

*Ayurveda*, the science of life also suggests to follow proper food habits with respect to a person's *Prakruti*, age, a place the person resides, *Rtu* and also his digestive capacity, wherein *Acharyas* brings the concepts of *Ahara Vidhi Vidhana*, *Ahara Vidhi Visesayatana* etc. In case if an individual adopts *Ajirne Bhojana*, *Akale Bhojana*, *Viruddha Bhojana*, *Atimatra Bhojana*, excessive consumption of *Amla*, *Lavana*, *Katu Rasa*, improper lifestyle like *Vega Vidharana*, *Divaswapa*, *Ratri Jagarana* and *Manasika Bhava* like *Chinta*, *Shoka*,

*Bhaya*, *Krodha*, then such individual is prone for various diseases initially related to *Anna Vaha Srotas*, wherein *Amlapitta* is considered one among them. *Amlapitta* can be correlated with Acid Peptic Disorders which comprises of Gastro-Oesophageal Reflux Disease, Gastritis, Functional Dyspepsia described in modern science. According to several authors of contemporary science states that, the combination of physiological, environmental, genetic and psychological factors definitely occupy a prime role in the manifestation of the disease. *Acharyas* have mentioned various treatment modalities like *Shodhana*, *Shamana* and *Nidana Parivarjana* for the management of such disorders. From the perspective of *Shamana* measures, the current study was undertaken to evaluate the efficacy of *Pathyadi Churna* in the management of *Amlapitta*.

### MATERIALS AND METHODS

#### 1. Study design

- Patients with the *Samanya Lakshanas* of *Amlapitta* coming under the inclusion criteria approached the

OPD & IPD of SKAMCH& RC, Bengaluru were selected for the study.

• **Diagnostic Criteria**<sup>[1]</sup>

➤ *Avipaka, Klama, Utklesha, Tiktodgara, Amlodgara, Gaurava, Hritdaha, Kantadaha, Aruchi.*

**a. Inclusion Criteria**

- Patients with *Pratyatma Lakshanas* of *Amlapitta*.
- Above 18 years of age
- Patients of either sex were taken into consideration for study

**b. Exclusion Criteria**

Patients suffering from other systemic illness which interfere with the course of treatment.

**2. Intervention**

The study was intervened for a duration of 28 days after the completion, Follow up study was done after 7 days.

- 20 patients were given *Pathyadi Churna* 6 gms twice daily (morning and night) with *Sukoshna Jala* after food

**a. Duration of the Study**

The total duration of the study was 35 days.

**b. Assessment Criteria**

The clinical findings were noted in specially designed case proforma and assessment was done

- Day 1- Before Treatment (BT)
- Day 29- After Treatment (AT)
- Day 35- At Follow Up (AF)

The parameters (*Pratyatma Lakshanas* of *Amlapitta*) considered for the study were scored from 0-3 for the purpose of statistical analysis. Assessment criteria is as follows,

**Scoring Pattern**

**1. Avipaka**

**Table No. 01: Showing Gradings of Avipaka.**

Score	Criteria
0	Presence of <i>Jeernahara Lakshanas</i> before next <i>Annakala</i>
1	The appearance of <i>Jeernahara Lakshanas</i> but delayed by 1-2 hours.
2	Eats once a day and doesn't feel hungry throughout the day.
3	<i>Avipaka</i> associated with <i>Bhaktadwasha</i> .

**2. Klama**

**Table No. 02: Showing Gradings of Klama.**

Score	Criteria
0	Absent
1	Present after exertion but relieved by rest
2	Present even after minimal work relieved after a longer time.
3	Present throughout the day, even at rest and inhibits daily activities.

**3. Utklesha**

**Table No. 03: Showing Gradings of Utklesha.**

Score	Criteria
0	Absent
1	Present after food intake and relieved after some time.
2	Present throughout the day associated with <i>Praseka &amp; Shtivana</i> .
3	Present throughout the day associated with episodes of <i>Chardi</i> .

**4. Hrit-Kanta Daha**

**Table No. 04: Showing Gradings of Hrit-Kanta Daha.**

Score	Criteria
0	Absent
1	Retrosternal burning with a specific food, relieved after some time.
2	Retrosternal burning with all food.
3	Associated with nausea.

5. *Gourava*Table No. 05: Showing Gradings of *Gourava*.

Score	Criteria
0	Absent
1	Retrosternal burning with a specific food, relieved after some time.
2	Retrosternal burning with all food.
3	Associated with nausea.

6. *Tikta Udgara*Table No. 06: Showing Gradings of *Tikta Udgara*.

Score	Criteria
0	Absent.
1	Appears 2-3 times per day on consumption of food predominantly <i>Katu, Tikta, Kashaya Rasa</i> .
2	Appears 4-6 times on consumption of all types of food.
3	Appears more than 6 times a day on consumption of all types of food

7. *Amla Udgara*Table No. 07: Showing Gradings of *Amla Udgara*.

Score	Criteria
0	Absent.
1	Appears 2-3 times per day on consumption of foods predominantly <i>Amla, Lavana Rasa</i> .
2	Appears 4-6 times on consumption of all types of food.
3	Appears more than 6 times a day on consumption of all types of food

8. *Aruchi*Table No. 08: Showing Gradings of *Aruchi*.

Score	Criteria
0	Can perceive the normal taste of food.
1	Unable to perceive at sometimes.
2	Unable to perceive the taste of all foods.
3	Unable to perceive the taste of all foods associated with <i>Bhaktadwasha</i> .

Drug Review<sup>[2]</sup>

➤ *Pathyadi Churna* from *Cakradatta*, “*Amlapitta Chikitsa*” which is indicated for *Amlapitta* and it has the ingredients like *Pathya, Bhrngaraja* and *Purana Guda* which are to be taken in equal parts and made into *Churna* Form.

## OBSERVATIONS

Out of 20 patients, 03 (15%) of the patients belonged to the age group of 21-30 years, 06 (30%) between 31-40 years, 02 (10%) between 41-50 years, 04 (20%) between 51-60 years and 05 (25%) between 61-70 years. In Habitation, 19 (95%) patients were from the Urban Habitation and 01 (05%) was from Rural Habitation. In addiction, 01 (05%) had addiction to Smoking, 01 (05%) had addiction to Alcohol, 18 (90%) patients were addicted to Tea/Coffee, 01 (05%) had addiction to Tobacco Chewing and 05 (25%) had the habit of taking Junk Food, 1(05%) had the habit of *Atyambupana*. In

*Nidanas*, 20 (100%) patients were taking *Viruddhahara*, 20 (100%) patients were taking *Vidahi Annapana*, 19 (95%) were taking *Katu Amla Rasa*, 20 (100%) were taking *Pishtanna*, 15 (75%) were taking *Guru Bhojana*, 16 (80%) were taking *Atisnigdha Bhojana*, 04 (20%) were having *Rukshanna*, 01 (05%) were having *Adhyashana*, 09 (45%) were having *Vishamashana*, 03 (15%) were having *Atyambupana* and 11 (55%) were having *Kulattha Sevana*. In *Vihara*, 18 (90%) were doing *Vegadharana*, 14 (70%) were doing *Diwaswapna*, 07(35%) were not doing *Vyayama*. In this study, 07 (35%) patients were having *Chinta*, 03 (15%) were having *Shoka*, 09 (45%) were having *Krodha*, 01 (05%) were having *Bhaya*. Related to *lakshanas*, 17 (85%) patients had *Avipaka*, 16 (80%) had *Klama*, 09 (45%) had *Utklesha*, 19 (95%) had *Tikta Udgara*, 19 (95%) had *Amla Udgara*, 06 (30%) had *Gourava*, 20 (100%) had *Hritdaha*, 20 (100%) had *Kantadaha* and 07 (35%) had *Aruchi*.

## RESULTS

Table 10: Effect of Treatment on <i>Avipaka</i> .								
Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	2.94	0.53	2.41	0.618	0.150	16.082	<0.001	HS
BT-AF	2.94	0.18	2.76	0.562	0.136	20.273	<0.001	HS

In *Avipaka*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	2.25	0.13	2.13	0.885	0.221	9.604	$<0.001$	HS
BT-AF	2.25	0.13	2.13	0.957	0.239	8.878	$<0.001$	HS

In *Klama*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	2.22	0.22	2.00	0.707	0.236	8.485	$<0.001$	HS
BT-AF	2.22	0.11	2.11	0.601	0.200	10.539	$<0.001$	HS

In *Utklesha*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	3.00	0.37	2.63	0.684	0.157	16.771	$<0.001$	HS
BT-AF	3.00	0.37	2.63	0.597	0.137	19.206	$<0.001$	HS

In *Tikta Udgara*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	3.00	0.21	2.79	0.419	0.096	29.029	$<0.001$	HS
BT-AF	3.00	0.32	2.68	0.478	0.110	24.500	$<0.001$	HS

In *Amla Udgara*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	2.67	0.00	2.67	0.516	0.211	12.649	$<0.001$	HS
BT-AF	2.67	0.00	2.67	0.516	0.211	12.649	$<0.001$	HS

In *Gourava*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	2.80	0.20	2.60	0.503	0.112	23.134	$<0.001$	HS
BT-AF	2.80	0.15	2.65	0.489	0.109	24.218	$<0.001$	HS

In *Hrit Daha*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	2.75	0.15	2.60	0.503	0.112	23.134	$<0.001$	HS
BT-AF	2.75	0.20	2.55	0.605	0.135	18.856	$<0.001$	HS

In *Kanta Daha*, before treatment to after treatment and before treatment to follow up, the p value ( $< 0.001$ ) revealed statistically highly significant.

Group	Mean		Mean diff	PAIRED t-TEST				
	Before	After		SD	SE	t-value	p value	Re
BT-AT	1.86	0.00	1.86	0.690	0.261	7.120	<0.001	HS
BT-AF	1.86	0.00	1.86	0.690	0.261	7.120	<0.001	HS

In *Aruchi*, before treatment to after treatment and before treatment to follow up, the p value (< 0.001) revealed statistically highly significant.

## DISCUSSION

### Effect of the Treatment on Avipaka

*Avipaka* is one among the *Lakshana* seen in *Kapha Prakopa Avastha* particularly in *Koshtha* and a *Lakshana* in *Sama Dosha Avastha*.<sup>[3]</sup> *Avipaka* plays an integral part in the *Samprapti* of the *Amlapitta*, where proper *Paka* is hampered and *Vidagdha* is seen.

An ingredient of *Pathyadi Choorna* is *Haritaki* which is *Dipana*, *Pachana* and does *Dosha Anulomana*. Along with this, another ingredient *Guda* which also possess *Anulomana Karma* due to its *Sara Guna*. Thus, *Agnimandya* is relieved and *Samyak Ahara Pachana* is ensured.

### Effect of the Treatment on Klama

The person gets tired without any exertion or strain is termed as *Klama*<sup>[4]</sup>, “*Anayasa Srama*”. It is also one among the *Lakshana* in *Adhovata Vega Dharana* where *Vata Prakopa* occurs, in turn, disturbs the *Agni* leading to this *Lakshana*.

*Klama* is relieved by the *Anulomana Guna* of *Haritaki* where *Acharya Sarangadhara* mentions *Anulomana Dravya* does *Paka* of *Malas* and then expels them, hence relieves *Sama Dosha* and relieves *Klama*.

### Effect of the Treatment on Utklesha

*Utklesha* is one among the *Kapha Prakopa Lakshana*. It is considered as *Purvarupa Avastha* of *Chardi*, where *Utklishta Kapha* in *Amashaya* tries to come out<sup>[5]</sup> exhibiting *Hrillasa* and *Praseka* as *Lakshanas*.

One among the ingredient of *Pathyadi Choorna* is *Bhrngaraja* which is *Katu Rasa Pradhana* does *Kapha Shamana* and relieves *Utklesha*.

### Effect of the Treatment on Tikta-Amla Udgara

*Udgara* is found due to vitiated *Pitta Dosha*. *Pitta* by nature has *Katu Rasa*. When it becomes *Vidagdha*, *Katu Rasa* is converted into *Amla*.<sup>[6]</sup> The *Ahara* becomes *Vidagdha* in *Amashaya* and *Tiktamlodgara* is developed. *Pathyadi Choorna* ingredient like *Haritaki*, which is an *Anulomana Dravya* helps *Vata Dosha* to attain its normal *Gati*. Thereby by *Urdhwa Vata* giving rise to *Udgara* is relieved. Also other ingredients like *Guda* and *Haritaki* help in *Anulomana*, thereby normal *Gati* of *Vata* is restored, in turn avoiding the reflux of the contents of the stomach into the oesophagus and relieves *Udgara*.

### Effect of the Treatment on Gourava

*Gourava* is caused due to *Ama Dosha*, where *Poshana* to *Rasa Dhatu* is not attained in turn gets vitiated. Due to this vitiation, some of the *Rasapradoshaja Vikaras* like *Aruchi*, *Hrillasa*, and *Gourava* are caused.

*Bhrngaraja* an ingredient of *Pathyadi Choorna* does *Kapha Shamana* along with *Haritaki* clears the *Sroto Vibanadha*. Thus gets relieved from *Gourava*.

### Effect of the Treatment on Hrit-Kanta Daha

*Pitta Dosha* which has attained *Amlata* due to *Vidagdhadha* and also due to increased *Dravata* along with *Vimargagamana* of *Vatadosha*, regurgitation takes place irritates the mucous membrane and produces *Daha*.

*Haritaki* and *Guda* due to their *Anulomana* and *Sramsana* property, helps in restoring the normal *Gati* of *Vata*, thus avoiding the *Daha* in *Hrit* and *Kanta Pradesha* and also does the *Pachana* of *Vidagdha Anna*. *Acharya Susruta* mentions *Abhaya Prayoga* as *Pradhana Chikitsa* in *Amashaya Gata Anna Vidaha* which presents with *Lakshanas* like *Hrit-Kanta Daha*.

### Effect of the Treatment on Aruchi

*Bodhaka Kapha*, *Prana Vayu*, and *Samana Vayu* should be in a normal state to perceive *Ruchi*. Any impairment leads to *Agni Dushti* leading to *Aruchi* which is one of the *Rasa Pradoshaja Vikara*.<sup>[7]</sup>

*Haritaki* acts as *Ruchi Vardhaka*. *Haritaki* along with *Guda* helps in the *Pachana* of *Sama Doshas* and does *Agni Dipana*, in turn acting as *Ruchi Vardhaka*.

## CONCLUSION

- *Kashyapa Samhitha* and *Madhava Nidana* have considered *Amlapitta* in detail as a separate entity. *Pathyadi Churna* have been mentioned by *Cakradatta* for the management of *Amlapitta*.
- Within the group analysis showed, the effect of treatment was statistically highly significant (p<0.001) before treatment to after treatment and at follow up on all the parameters.
- *Pathyadi Churna* has shown better result in *Lakshanas* like *Avipaka*, *Tiktamlodgara*, *Hrit-Kanta Daha* during the course of this study.
- *Pathyadi Churna* can be considered as a safe and effective formulation in the management of *Amlapitta*.

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