

COMPREHENSIVE STUDY ON ETIOLOGY OF BAHUPITTA KAMALA

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ABSTRACT :

Viral infections, alcohol, certain allopathic drugs and many other factors keep hampering the normal physiology of the liver. Unfortunately the effects are noticed much after more than 80% of liver is already damaged. Ayurveda has stood the test of time and is still the preferred treatment modality when it comes to liver disorders. The disease Kamala is Nidanarthakara Roga of Pandu. This review article on 'Comprehensive study on the aetiology of *Bahupitta Kamala*' is an attempt to explore further its minute details so as to attenuate further research in this field.

Key words: Bahupitta kamala, etiology, pandu, rakta, samprapti.

INTRODUCTION: Thanks to rapid progress in all fields of medicine since the post-independence era, morbidity rate has gone down considerably. With the advancement in science, many lifestyle changes take place in society like irregular diet and sleep timing, increased consumption of spicy food, fast food and alcohol, stress which causes adverse effect on body. There is increased prevalence of *bahupitta kamala* due to increased population living in congested area, poor sanitation, consumption of unhygienic food and polluted water etc. In spite of such achievements, little progress has been seen in modern medicine when it comes to treating liver disorders through oral medicine.

Ayurveda considers *Kamala* as a disorder of *raktavaha strotas*.¹ *Yakrit* and *pleeha* are *moolasthanas* of *raktavaha strotas*.² Vitiating *Pitta* is the main causative factor in the pathogenesis of *kamala*.³ In the disease under consideration, this vitiating *pitta* affects the liver in a major way and

shows general manifestations in the body. This study should give a deeper insight on the intricate aspects on pathology of *bahupitta kamala*.

AMSHI-AMSHA SAMPRAPTI OF BAHUPITTA KAMALA:

Normal complexion of skin grossly depends on two factors- *Teja*⁴ and *rakta*⁵ along with *sneha guna*⁶ of *ojas*.⁷ *Pitta* resides in *rakta dhatu*.⁸ Exposure to *dosha* vitiating factors leads to vitiation of *Pitta*, especially its *ushna-tikshna guna*, to cause disturbance in the normal physiology of the *saumya, sneha* quality of *ojas* which is already in circulation with *rakta dhatu*. Along with this reduced the *rakta dhatu*'s *poshak ras* (required in formation of *rakta dhatu*) is also reduced. Decrease of both *rakta* and *ojas* hampers the normal complexion and hence pathological complexion appears. The abnormal complexion varies according to the *doshic* imbalance. Out of this imbalance of *tridosha*, aggravated *pitta* causes the *pandu varnata* complexion in *pandu* disease. Moreover, depreciation

of the ten qualities of *ojas* is directly proportional to *dhatu daurbalya*.⁹ (Many Acharyas agree that the condition of *Bahupitta Kamala* is preceded by *Pandu*. Hence, its discussion is invariably important too.)

The aggravated *pitta* with its profound *ushna tikshna* qualities causes *Shithilendriya* and thus augments the pathology of *pandu* disease. *Ushna* quality reduces the *sneha amsha* of the *dhatu*s which is required for maintaining their *ghanatva* (intactness) and normal functioning. According to Acharya Todar (Author of Paadtippani, teeka on Ashtang Hrudaya), “*shaithilyam shithilta syaat, samghaat bhedo bhavet, swaruphaani syaadityartha*” which means the dense form of *dhatu*s is reduced hence causing laxity. These vitiated *dhatu*s are under nourished and sub-standard. The qualities of these *dhatu*s are not up to the mark and different from those mentioned in *saar dhatu lakshanas*.⁹ Due to over production of abnormal *pachak pitta*, its normal function is grossly hampered. Normally *pitta* metabolises the ingested food into *saar* and *kitta(mala)*. With diminished digestive activity of vitiated *pitta*, the digestion becomes sub-standard. More of *mala* is produced and extremely little *saar* part is obtained through the process. The *preenan* of *indriyas* is badly affected leading to their poor functioning. Thus, ayurved texts use the term ‘*hatendriya*’.

The lax, under-nourished *dhatu*s are incapable of performing their optimum functions and hence the manifestations of *gaurav, anutsaah, shaithilya* surface in the disease forming process.³ *Pitta pradhan* vitiated *tridoshas* are circulated throughout the body by the heart and ten *dhamanis* through the medium of *ras dhatu*.³ Eventually, all the *dhatu*s, *updhatus* and

malas are vitiated due to the circulating aggravated *pitta*. Reduction of *rakta poshakamsha* occurs significantly. There is an increase in the mala quantity and decrease in *poshakamsha*. The icterus seen in the eyes is due to the *malarupi pitta* carried to the site by *vaayu*. In normal conditions, *pitta* situated in *ras dhatu* maintains the complexion of humans. Any vitiation in *rasgat dosha* will lead to alteration in the skin color. The further spread of *malarupi pitta* eventually causes frog like discoloration on visible areas like skin, nails and oral fossa. The body attempts to expel the aggravated *pitta* in union with *kleda* through the medium of faeces, urine and sweat. Thus, the prominent dark yellow discoloration of the waste products is observed.

According to the principles of panch mahabhutas, *pitta dosha* in human body is equivalent to *Tejas mahabhuta*. The body when affected by the vitiated *tejas* results in manifestation of *pandu*. If not treated at this stage, continued *apathya* will lead to enormous elevations of vitiated *pitta*. The *Yakrit(liver)* is majorly affected so much that the *rakta* and *mamsa dhatu* are burnt (extremely vitiated) by *ushna teekshna* gunas of *pitta dosha*. This circulating *pitta* which possesses the qualities of *agni* is the reason for *dhatu daurbalya, daah* and *jwar*. As a result, manifestation of *Bahupitta Kamala* is augmented. The line of treatment will be discussed later.

CONCEPT OF SHATKRIYAKAAL W.R.T. BAHUPITTA KAMALA¹⁰: An important and interesting aspect of the Ayurvedic diagnostic system relates to its ability to explain the pathogenesis of a disease. *Vata, pitta* and *kapha* go out of balance and express this imbalance in any tissue, organ or system. According to this paradigm, each healthy, balanced *dosha* is

at home in a particular area- *vata* in the *pakwashaya*, *pitta* in the *grahani* and *kapha* in *aamashaya*. These are the primary sites of function from which the *dosha* can spread its influence. How this happens is explained in a six stage model of pathogenesis called Samprapti. Accumulation (quantitatively) of the *dosha* marks the first stage of imbalance. In this stage, called *sanchaya*, *vata*, *pitta* or *kapha* accumulates in its own site. Symptoms at this stage are usually mild but the condition can be detected through the pulse even in this early stage. Using *pitta* w.r.t *Bahupitta Kamala* for this example, vitiated *pitta* in *sanchaya* stage will result into *agnimandya*. Aggravating influences might cause *pitta*'s functioning to degrade qualitatively, creating *pitavabhashta* and moving it to the second stage, aggravation or *prakopa*. Aggravated *Pitta* itself manifests as polydipsia, burning sensation, sourness in mouth, etc. In this stage, the doshic level rises in its own "container" in the body.

Further aggravation escalates the situation to the third stage, the stage of spreading or *prasara*. The *ranjaka pitta*, *dushta kleda* and *aama* along with *vayu*'s *chala guna*, in this stage, will leave the *aamashaya* and enter the general circulation. In *kamala*, the aggravated *vata dosha* with its *chala guna* will circulate along with *pitta* throughout the body. The affected person feels unusually tired and unenthusiatic along with considerable loss of appetite. The tiredness is as a result of *pitta*'s *ushna tikshna guna* leading to *indriya shaithilya*.

Vitiated *doshas* tend to enter a spot that has some weakness or defect, perhaps by virtue of genetic flaw or previous disease. The aggravated *dosha* has an affinity toward moving into these weak

spots, called *khavaigunya* or defective space, which can be described as negative locations like potholes on the road. On entering, the *dosha* influences the tissue by its aggravated qualities. Later, the *dosha* further invades the tissue and affects its function. This amalgamation of *dosha* and *dhatu* is the stage of *sthana samshraya*, stage four. In this stage, the *doshas* are lodged in the *twak* and *mamsa dhatu*. The already vitiated *pitta* with the aggravated *vata* affects the *ras*, *rakta* and *mamsa dhatu* predominantly. *Dhatu shaithilya* occurs on a larger scale.

In the next stage, qualitative change becomes apparent. The aggressive quality of *dosha* suppresses the natural quality of *dhatu*, resulting in pathological conditions. This is the stage of manifestation called *vyakti*, stage five. The subtle attributes of *dosha* have totally manifested according to the etiological factors. One cannot only label the illness but also point out the particular quality of the *dosha* that is playing the most important role in the disease process. In *vyakti* stage, functional changes become evident. With respect to *Bahupitta Kamala*, the doshic imbalance show visible yellow discoloration in urine, stools, nails, eyes, skin and oral fossa.

In stage six, the *bheda* stage, structural changes manifest. Complications of other organs, tissues or systems become evident. *Pitta* will not only cause severe discoloration but also lead to gross hepatomegaly. This is stage of final expression of the disease process. The disease has completely manifested with its complications and must be dealt with by effective means.

CONCLUSION: *Bahupitta Kamala* is undoubtedly a condition arising due to major vitiation of *Pitta dosha* and *rakta*

dhatu. Hence, during history taking, if a patient mentions past history of *Bahupitta Kamala*, possibility of *rakta dushti* and high vulnerability to *Pitta* vitiation cannot be ignored. If the patient is already suffering from *Bahupitta Kamala*, it needs immediate medical intervention before excess damage arises due to increased *kharatva* in the *dhatu*s. Complications like *kumbhkamala*, *halimaka*, *udar-rog*, etc occur in absence of prompt medical treatment.

Line of treatment in *Bahupitta Kamala*:

When it comes to *pitta*, all *Ayurved acharyas* unanimously agree that *Virechan* is the best *shodhan*. However in *kamala*, *dhatu shaithilya* occurs on a large scale resulting in lower *bala* of the patient. *Teekshna virechan* may further aggravate *vata dosha* and cause undesirable effects. So to attain the target of *virechan* along with conservation of *bala*, *mrudu virechan*¹¹ is the best option. *Virechan* in the form of *nasya* may also be advised depending on the patient's condition. For alleviation of the residual vitiated *pitta*, drugs of *Tikta*¹¹ and *Madura rasa*, are preferred. *Tikta rasa* will alleviate *pitta* and help in *aama pachan*. *Madhura rasa* will help in regaining *bala*. Drugs like *Aarogyvardhini vati*, *Darvi Ghrut*, etc could be used to remove the major *khavaigunya* formed in *yakrit* (liver). Later *rasa-rakta prasadaka* drugs should be advised as a part of *rasayan* therapy.

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