

## A CLINICAL OBSERVATIONAL STUDY OF VIRECHANA KARMA IN MANAGEMENT OF AMLAPITTA

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### ABSTRACT

**Background:** *Amlapitta* is a very common disease of *Annavaha Srotasa* caused by *Vidagdha Pitta* with features such as *Amlodgara*, *Hrid Kantha Daha*, and *Avipaka*. Irregular and improper food habits and busy stressful lifestyle are main causes. Due to bad habit of taking unhealthy food, improper life style, the prevalence of *Amlapitta* is increased in present era.

**Objectives:** The aim of this study is to find out effects of *Shodhana* treatment in the patients of *Amlapitta*.

**Methods:** In this study total 20 patients were selected. All the signs and symptoms of the *Amlapitta* were given a grade scores and assessed the patient before and after the treatment. Statistical analysis was performed with use of 't' test.

**Results:** Highly significant improvement was noted in most of the signs and symptoms with more than 65% reduction. No any unwanted effects noted in any patient.

**Conclusion:** *Virechana karma* is an effective therapy in management of *Amlapitta* as the main *dosha* involved is *Pitta* and *Virechana* is ideal treatment for elimination of vitiated *Pitta* and it also expels the *Kapha Dosha*. After *Virechana Karma* recurrence ratio of *Amlapitta* has been decreased. *Pathya* also plays an important role in the management of *Amlapitta*.

**Keywords:** *Amlapitta*, *Annavaha Srotasa*, *Virechana*.

**INTRODUCTION:** In this modern era people have very fast, stressful life and faulty dietary habits.<sup>1</sup> Such food habits together with night vigils due to work, TV, parties, stress are causes of disequilibrium in the *Doshas*. This leads to various life style disorders. Digestive abnormality is most common among them. Faulty dietary habits hamper the process of digestion and produce clinical conditions like gastric hyperacidity, gastritis and gastro esophageal reflux. Clinical features of *Amlapitta* mentioned in *Madhava Nidana* are *Avipaka*, *Klama*, *Utklesha*, *Tikta-amla Udgara*, *Gaurav*, *Hrid-kantha daha* and *Aruchi*.<sup>2</sup> Symptoms of *Amlapitta* are similar to clinical conditions like gastric hyperacidity, gastritis and gastro esophageal reflux disease described in conventional medicine.

### RATIONALE BEHIND SELECTION:

*Amlapitta*, has become a chief cause for discomfort in the normal proceedings of day to day activities. Population based study by using valid questionnaire found that in India 19.8 % population experience heart burn and acid regurgitation at least once weekly<sup>3</sup>. The main drugs used to reduce gastric hyperacidity are proton pump inhibitors, H<sub>2</sub> blockers, antacids and prostaglandins. These drugs have various side effects.

Under the management of *amlapitta* both *Shodhana* and *Shamana* treatment are indicated in the classics with first preference given to *Shodhana*. Because of more efficiency of *Shodhana* then

Shamana in normalizing vitiated *Doshas*. *Virechana* is needed in *Amlapitta* as the main *Dosha* involved in disease pathology is vitiated *Pitta*. *Virechana* is main treatment procedure for elimination of vitiated *Pitta* out of the body. It also expels the vitiated *Kapha Dosha* up to some extent.<sup>4</sup>

**AIM AND OBJECTIVES:** Aim-To study the efficacy of *Virechana Karma* in management of *Amlapitta*. Objectives – 1) To study the etiology, pathogenesis and symptomatology of the disease according to Ayurveda as well as modern science. 2) To study the nature of the disease and the changes occurring during the course of the treatment.

#### ETHICAL CLEARANCE

Clinical Trials Registry –India (Indian Council of Medical Research)

Reg. No - CTRI/2016/06/011611

Institutional Ethics Committee for Human Research

Approval No - JSAM/IECHR/53/09-2016

#### MATERIAL AND METHODS

**Diagnostic criteria:** Diagnosis of the patient of *Amlapitta* was done on the basis of classical signs and symptoms of *Amlapitta* mentioned in *mādhava Nidāna* i.e. *Avipaka, Klama, Utklesha, Tikta-amla udgara, Gaurava, Hrid-kantha daha, Aruci* and with help of proforma compiled

with detailed clinical history and physical examination of the patients.

#### INCLUSION CRITERIA

- Patient fulfilling the diagnostic criteria of *Amlapitta* were randomly selected irrespective of sex, religion and occupation.
- Patient between the age group of 18 to 60 years.
- Patients eligible for *Virechana* are included for study

#### EXCLUSION CRITERIA

- Patients below 18 and above 60 years.
- Patients suffering with any other systemic illness.
- Patients contraindicated for *Virechana* are excluded for study.

#### STUDY PROTOCOL, THERAPY AND TIMELINES

**Study design:** This is a single arm, interventional clinical study.

**Sample size:** 20 (Twenty)

**SELECTION OF PATIENTS:** The patients fulfilling the diagnostic criteria of *amlapitta* were selected for the study irrespective of sex, caste, religion and occupation from outpatient department (O.P.D.) and in patient department (I.P.D.) of Panchakarma and Kayacikitsa department, P.D. Patel Ayurveda Hospital, Nadiad.

**STUDY SITE:** O.P.D and I.P.D. of P.D. Patel Ayurvedic hospital, Nadiad.

**Table No 1 Treatment Schedule**

PROCEDURE		DRUGS	DURATION
<b>PURVAKARMA</b>	<i>Snehapana</i>	<i>Go-ghrita</i>	3 to 7 days
	<i>Abhyanga</i>	<i>Tila taila</i>	3 days
	<i>Baspa Sveda</i>	<i>Plain water</i>	
<b>PRADHANA KARMA</b>	<i>Virechana</i>	<i>Trivrit churna, Honey</i> <i>Triphala kvatha</i>	1 day
<b>PASHCAT KARMA</b>	<i>Samsarjana Krama</i>	<i>Based on Shuddhi</i>	3 to 7 days

**PURVAKARMA:** All the patients were given *Snehapana* with *Go Ghrita* after admission. After proper *Snehana Sarvadaihika Abhyanga* with *Tila Taila* was performed in the morning for three days before *Virechana*. According to the concept of Ayurveda; the *Sneha* diffuses in the body through the minute hair follicles of skin and is dissolved by. After *Baspa Svedana* was done for next two days. [Charaka has advised that

*Virechana* should be carried out in *Manda Kapha* that is *Hina Kapha* condition.<sup>5</sup> for *Samyaka Virechana*. This is achieved by keeping two days' gap after *Snehapana*].

**PRADHANA KARMA:** On third day *Virechana yoga* prepared from the following drugs was given after *Abhyanga & Svedana* and after *shleshama kala* (i.e. 9-10am)<sup>6</sup>. Patient were observed and *Ayoga*, *Atiyoga* or any other complication of *Virechana*.

### VIRECHANAYOGA:<sup>7, 8</sup>

Trivrita churna [5-10 gm (Depending on *Kostha* and *Bala* of patient)] and honey [As require] will be given with *Triphala kvatha* [40 ml] as *Virechana Yoga*.

**PASCHAT KARMA:** After *Samyaka Virechana Samsarjana Karma* was performed according to *Shuddhi*. *Samsarjana krama* is based on the type of *Shuddhi* i.e. for *Avara Shuddhi*, *Madhyama Shuddhi* and *Hina Shuddhi*, it is of 3 days, 5 days and 7 days respectively.<sup>9</sup>

**ASSESSMENT OF THE RESULTS:** Improvement in the patients was assessed

on the basis of relief in the cardinal and associated symptoms and signs of the disease. All the signs and symptoms have given the grade scores depending upon their severity before and after the treatment. Assessment of the relief was noted according to the improvement in this score.

Mean score, standard deviation, standard error, paired t test was carried out at the level of 0.05, 0.01 and 0.001 of p value. The results were interpreted as improvement if  $p < 0.05$  and significant if  $p < 0.01$ .

**Table No 2 Grading Scores of the Signs and Symptoms of the Amlapitta**

<b>AVIPAKA</b>		<b>GRADE</b>
1	Presence of all the symptoms of <i>Jirna-Ahara Lakshnas</i>	0
2	Presence of four symptoms of <i>Jirna-Ahara Lakshnas</i>	1
3	Presence of two symptoms of <i>Jirna-Ahara Lakshnas</i>	2
4	No symptoms of <i>Jirna-Ahara Lakshnas</i>	3
<b>KLAMA</b>		
1	No <i>Klama</i>	0
2	Occasionally feeling of lassitude without <i>Shrama</i> and remains for sometimes and vanishes	1
3	Lassitude daily without <i>Shrama</i> for sometimes	2
4	Lassitude daily without <i>Shrama</i> for long duration	3
<b>TIKTA – AMLA UDGĀRA</b>		
1	No <i>Tikta-Amla Udgāra</i>	0

2	Appears 1-5 times/day only on consumption of sour/spicy food	1
3	Appears 6-10 times/day on consumption of any type of food	2
4	Appears 10 times /day on consumption of any type of food	3
<b>UTKLESHA</b>		
1	No Nausea	0
2	Presence of salivation with Nausea	1
3	Presence of Nausea with content coming to the throat	2
4	Presence of Nausea with vomiting	3
<b>GAURAVA</b>		
1	No Gaurava	0
3	Mild	2
4	Moderate	3
5	Severe	4
<b>HRID-KANTHA DAHA</b>		
1	Absent	0
2	Appears 1-2 episodes /day does not interfere with work performance; occasionally feel inconvenience during routine work.	1
3	Appears 3-4 episodes /day has interference with work but doesn't prohibit work performance and other activities.	2
4	Appears more than 4 episodes/day prohibits the work performance and other activities.	3
<b>ARUCHI</b>		
1	Willing towards all <i>Bhojya Padārth</i>	0
2	Unwilling towards some specific rasa i.e. <i>Katu/Amla/Madhura</i> food	1
3	Unwilling toward unliking foods but not to the other	2
4	Totally unwilling for meal	3

**Table No 3 OBSERVATIONS AND RESULTS**

**Effect of the treatment on symptoms**

Symptoms and signs / Investigations	Mean score		Improvement in Percent	S.D.	S.E.	p Value
<i>Tikta-amla udgara</i>	3.7	1.1	70.27	0.84	0.28	<0.001
<i>Hrit-kantha daha</i>	3.8	1.4	63.15	0.97	0.32	<0.001
<i>Utklesha</i>	3.3	1.0	69.69	0.94	0.31	<0.001
<i>Avipaka</i>	2.7	0.9	66.66	0.78	0.26	<0.001
<i>Aruchi</i>	3.1	1.2	61.29	0.74	0.24	<0.001
<i>Klama</i>	2.8	1.0	64.28	0.84	0.41	<0.02
<i>Gaurava</i>	2.5	0.75	70.00	0.58	0.28	<0.001

**FOLLOW-UP:** All the patients have completed the 15 days follow-up. No any

unwanted effects noted during the follow-up period.

**DISCUSSION:** People living sedentary lifestyle and those getting indulged in consumption of incompatible, spicy, sour food were seen to be more prone to get *Amlapitta* and it is more common in non-vegetarians than vegetarians. As long as effect of *Virechana* is concerned, it has great value as it eradicates the disease because the main causative factor for the disease is *Pitta Prakopa*. And it is corrected by the process of *Virechana* in combination with proper *Samsarjana krama* and also *Nidana Parivarjana*.

**CONCLUSION:** Symptomatic improvement has been observed in majority of the patients after *Virechana*. *Pathya* also plays an important role in the management of *Amlapitta*.

At the end of the study none of the cases remained unchanged. The response of the treatment was encouraging. It could be concluded that *Virechana Karma* with *Trivrita Churna* is an effective therapy in management of *Amlapitta*.

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