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Research Article

DIETARY MANAGEMENT IN AMLAPITTA - A CLINICAL STUDY

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ABSTRACT

Amlapitta is a disease of *Annavaha strotas*, where there is increase in *Amla* and *Drava guna* of *Pitta* and has resemblance with the symptoms of Non-ulcer Dyspepsia. It is one of the commonest conditions affecting the younger or middle aged people. The causative factors include improper dietary habits, spicy irritant foods, stress etc. Ayurveda agrees that no medicine is equivalent to food; it is possible to make a person, disease free merely with appropriate diet. One has to follow code of dietetics for better health. **METHOD**: Appropriate quantity and quality of food consumed helps to prevent and control hyperacidity, so for the present clinical trial a 20 days dietary chart was prepared for 30 patients of *Amlapitta* aged 18-50yrs of either gender selected from IPD and OPD of *Panchakarma* of Y.M.T Ayurvedic Medical College, Kharghar, Navi Mumbai. Diagnostic criteria were mainly based on the signs and symptoms of *Amlapitta* as per Ayurvedic literature. Pre and post therapy results were analyzed statistically for "p" value using 't' test. **RESULT:** The statistical analysis revealed highly significant results (p<0.001) on *Amlodgara, Avipak, Aruchi, Hrut* and *Kantha Pradesh Daha, Chardi*. All the symptoms showed difference before and after treatment. **CONCLUSION:** The main key for treating *Amlapitta* is to improve digestion. Appropriate quantity and quality of food consumed helps to prevent and control hyperacidity.

KEYWORDS: Amlapitta, Annavaha strotas, Dietary management.

INTRODUCTION

A drastic change in mankind has taken place mostly due to urbanization and industrialization. To cope up with the speed of the modern era, one has to adopt junk food preparations, overwork and stressful duty schedule. The sedentary lifestyle lead to lack of exercises, 30% of the general population suffers from gastro-oesophageal reflux and gastritis. The excessive use of Analgesics esp. NSAIDs, smoking, alcoholism, frequent consumption, hot drinks, spicy food, tobacco lead to the gastric complaints like heartburn, nausea and vomiting. These gastric complaints mimic the symptoms of *Amlapitta*. The *Amlapitta vvadhi* is caused due to Viruddhashana and Pittaprakopaka bhojana and Pana. The symptoms of the Amlapitta vary from Avipaka, Klama, Utklesha, Amlodgar, Anga-gaurava, Hridaya / Kantha pradesha daha and Aruchi. Agni and Pitta are the main factors responsible for digestion, due to its abnormality; food is not properly digested and produces the Aam, which is acidic in nature⁴. Ayurved has provided a simple and cost-effective treatment for Amlapitta. While treating Amlapitta the first concerns are to treat Aam and develop a Niramavastha. Hence while doing dietary management, for 5days liquid diet was given to get Niram avastha and then diet plan was given for rest 15 days.

Aims & Objectives

- 1) To study the aetio-pathogenesis of *Amlapitta* in the light of both *Ayurvedic* and Modern perspective.
- 2) To study the influence of dietary management the *Amlapitta* patients.

Materials & Method Inclusion Criteria

Diagnosed cases of *Amlapitta* of both the gender in the age group of 18 to 50 years.

Exclusion Criteria

1. Patients with known case of peptic ulcer, duodenal ulcer.

2. Pregnant, Lactating women

3. Patients with perforated peptic ulcer & those who need surgical interventions.

4. Pre-diagnosed Lax Hiatus, H. Pylori infection.

5. Patients having chronic consumption of NSAIDs and those on steroidal treatment.

Criteria for Withdrawal

1. Those patients who will show any adverse reaction of the drug.

2. Patients who are not under scheduled follow up.

Study Design

Study design is an open, randomized, clinical study.

Plan of Study

The diet chart has been prepared as per *Ayurvedic* classics. The diet chart contains the time to take food, item of food to be taken and things to be avoided.

Total duration of study was 20days in which for first 5 days patient was asked to take only liquid diet and after that diet plan was followed for rest 15 days.

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Table 1. Equilit ulet plain for Annupitta					
Day	Liquid Diet to be Taken				
1	Akrut Mudgha Yush (green gram soup without tempering)				
2	Akrut Mudgha Yush (green gram soup without tempering)				
3	Akrut Mudgha Yush (green gram soup without tempering)				
4	Krut Mudgha Yush (green gram soup tempering done with ghee)				
5	Krut Mudgha Yush (green gram soup tempering done with ghee)				

Akrut Mudgha Yush- Green gram soup not processed with fat, salt, sours etc.

Kruta Mudgha Yush- Green gram soup processed with fat, salt and sours etc.

No specific quantity was decided for the liquid diet. Patients were asked to take as much as possible, unlimited amount of *Mudgha Yush* so that no signs of dehydration appear.

Time	
8-10am	Any fruit/salads/Oats/vegetable soups/mix vegetable soup
1-2pm	Moong dal, non-spicy vegetable, wheat chapatti
4-5pm	Salads-cucumber, carrot, radish, beetroot
8pm	Vegetable soups/Salads/Milk
Preferred vegetables	Vegetables like white pumpkin, bitter gourd, okra, bean sticks, bottle gourd, and lady finger.
& fruits	Fruits like black grapes, sweet lime, pomegranate, fig, dry fig, banana, chickoo, guava, black
	raisins, apples, pears, peaches, melons.
Preferred drinks	Warm water, Sunthi sidha Godughda (Cow's Milk), Ushir sidha jal, Buttermilk.

Table 2: Dietary therapy in management of Amlapitta

After the liquid diet for 5 days, patient was asked to adopt above Table No.2 Diet plan for the next 15 days. Patient was asked to drink warm water whenever required.

Avoid eating spicy foods, or foods containing excess amount of garlic, salt, oil, chillies, pickles, bakery products, junk food, canned food items, over night kept food etc. Avoid the use of alcohol, tobacco, spices, meat, red pepper, sour foods, pickles, strong tea and coffee, Leafy vegetables like *Methi*.

Assessment crietria¹

Table 3: Self Assessing gradation score

1	Avipaka	Feels hunger after 5-6hrs	0
		Feels hunger after 6-7hrs	1
		Takes food only 1 time	2
		No hungry at all	3
2	Aruchi	No aruchi	0
		Feels 1-2 times in 5-6days in a week	1
		Takes meal without feeling hungry	2
		Feels no hunger and no taste	3
3	Hrut & Uropradesh daha	No burning sensation	0
	(retrosternal burning	Feels burning sensation relieved by water	1
	sensation)	Feels burning sensation after having food or any antacid	2
		Not subsiding burning sensation even after having food or	
		drink or any antacid	3
4	Kantdaha	No burning sensation	0
		Feels burning sensation relieved by water	1
		Feels burning sensation after having food or any antacid	2
		Not subsiding burning sensation even after having food or	3
		drink or any antacid	
5	Amla/Tikta Udgara	No Amla/Tikta Udgara	0
		Feels Amla/Tikta Udgara sometimes after having food	1
		Feels Amla/Tikta Udgara once or twice after having food	2
		Feels Amla/Tikta Udgara after every food	3
		No tiredness	0
6	Klama	Feels tiredness sometime	1

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		Feels tiredness 2-3 times in a week	2
		Always Feels tiredness	3
		Absent.	0
7	Shirshool	Occasional.	1
		3-4 times a day.	2
		Persistent throughout the day.	3
8	Chardi	No nausea or vomiting	0
		Nausea but no vomiting	1
		Once or twice vomiting in a week	2
		After having food immediately vomits	3

Table 4: Total effect of therapy was assessed as follows

Cured	100% relief
Markedly improved	More than 50% relief
Improved	25 To 50% relief
Unchanged	Below 25% relief

OBSERVATIONS & RESULTS

1. *Amlapitta* is more common in female (53.33%) than male (46.66%) The incidence of *Amlapitta* is highest in the age group of 20-40years (41.66%) and lowest in age group of above 40 years (11.66%).

Maximum 56.56% patients were having >1 year chronicity.100% patients had Previously undergone allopathic therapy.
 After analyzing all the data and the observation by applying student "t" test, we conclude that diet plan is effective in *Amlapitta*. The diet restriction is effective in the treatment of *Amlapitta*.

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4. No adverse effect was found during & after the study.

Results

Table 5: Profile of Patients					
Age	Range in year 18-50 Yr	No. of patients			
Religion	Hindu 💋 🕺 🚺 🦉	18(60%)			
-	Muslim Muslim	12(40%)			
Sex	Male	14(46.66%)			
	Female	16(53.33%)			
Economical	Poor	6(20%)			
status	Middle JAPR 4	20(66.66%)			
	Rich	4(13.33%)			
Habitat	Urban	25(83.33%)			
	Rural	5(16.66%)			
Marital status	Married	26(86.66%)			
	Unmarried	4(13.33%)			

Table 6: Distribution of patients according to food habits

Sr.No	Diet	NO. of Patient	Percentage
1.	Vegetarian	12	40%
2.	Non-vegetarian	8	26.66%
3.	Mix	20	66.66%

Table 7: Addiction wise distribution

Table 7. Multion wise distribution							
Addiction	No. Of patients	Percentage					
Alcohol	2	6.66					
Tobacco	4	13.33					
Smoking	2	6.66					
No addiction	14	46.66					
Теа	8	26.66					
Total	30	100%					

Table 8: Agni wise distribution

Agni	No. Of patients	Percentage					
Samagni	00	00					
Mandagni	13	43.33%					
Tikshanagni	5	16.66%					
Visamagni	12	40%					

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Table 9. Effect of thet plan on signs & symptoms of Annapitu								
Symptoms	Mean score		Difference	% of	SD+-	SE+-	'ť'	'P'
	BT	AT		relief				
Avipaka	1.73	0.13	1.6	92.30	1.00	0.18	8.73	<.001
Aruchi	2.16	0.3	1.86	86.15	1.04	0.19	9.81	<.001
Hrut & Uropradesh daha	2.26	0.56	1.7	75	0.59	0.10	15.62	<.001
(retrosternal burning sensation)								
Kantdaha	1.36	0	1.36	100	0.71	0.13	10.41	<.001
Amla/Tikta Udgara	2.13	0.4	1.73	81.25	0.58	0.10	16.27	<.001
Klama	1.2	0.06	1.13	94.44	0.93	0.17	6.62	<.001
Shirshool	1.36	0.43	0.93	6829	0.78	0.14	6.51	<.001
Chardi	1.73	0.13	1.6	92.30	1.00	0.18	8.73	<.001

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Table 10: Percentage of relief

Effect	No. of patients	Percentage	
Cured	4	13.33%	
Markedly improved	15	50%	
Improved	10	33.33%	
Unchanged	1	3.33%	
Total	30	100%	

Out of 30 patients 4 patients were cured, 15 patients had markedly improved in their symptoms. 10 patients show improvement while 1 patient had no effect. **DISCUSSION**

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In the management of any disease, food and dietetic code are the important aspects to be looked upon. *Amlapitta* is a functional disorder occurring in *Amashaya* and the clinical features are related with the upper part of gastro-intestinal tract². The major causative factors as explained in the classical literature are mainly vitiating the *Agni* and its functions related with digestion and metabolism. The problem is very common in the general population, exclusively because of the fast changing life styles.

Due to the uncontrolled intake of the etiological factor affecting the *Agni* that leads to *Agnidushti*; primarily the symptoms like *Agnimandya*, *Avipaka*, *Amavisha* and there after the *Amadosha* is manifested leading finally to the problem *Amlapitta*.

Benefits of Yush

Cooked green gram is easily digestible and absorbable as *Amlapitta* is a disease caused by *Mandagni*. It is endowed with vitamin A and B; it helps in the normal cell function in stomach⁵.

From the above results *Pathya-Apthya* plays an important role to achieve *Niramavastha* and hence half of the disease gets cured. Once *Niramavastha* is achieved then the treatment becomes more easier as *Yush* and nonspicy healthy diet has properties to get rid of from *Aam dosha³*.

CONCLUSION

Ayurveda agrees that no medicine is equivalent to food; it is possible to make a person disease free merely with appropriate diet. One has to follow code of dietetics for better health. The main key for treating *Amlapitta* is to improve digestion. Appropriate quantity and quality of food consumed helps to prevent and control hyperacidity. One should also take food considering one's own capacity of digestion. With the complaints of *Amlapitta*, following the dietary do's and don'ts helps to produce soothing effect on the inner layer of the stomach, reverses inflammatory changes and controls the digestive secretions by which hyperacidity can be tackled.

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