

**EVALUATION OF THE EFFICACY OF AVIPATTIKAR CHURNA IN
THE MANAGEMENT OF AMLAPITTA**

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ABSTRACT

Amlapitta is a common disorder caused by vidagdha pitta such as avipaka (indigestion), amlotkalesh or tikta amlodgara (sour or bitter belching), hridayakanta (heart throat burning sensation) and aurichi (anorexia) due to acid peptic digestion affecting more people in India. The disease was selected for clinical study to assess the efficacy of a commonly used Ayurvedic drug ie Avipattikar churna. The criteria of selection were the signs and symptom of Amlapitta as maintained in Ayurvedic classical texts irrespective of sex religion occupation etc. The study material comprised of 10 Amlapitta patients from OPD of National Institute of Ayurveda, Jaipur. Patients were treated with

Avipattikar Churna for 21 days and arbitrary scoring pattern was adopted for the assessment of Amlapitta. The results showed that Avipattikar churna is more potent drugs in the treatment of Amlapitta without any ADR. The result of the present study revealed the concept of Ayurvedic principal and practice of Amlapitta in Ayurveda.

KEYWORDS: Amlapitta, Avipattikar churna.

INTRODUCTION

Amlapitta is one of the most common disease in the modern era due to changing lifestyle, food culture and also depends upon one's body constitution. Amlapitta is a caused by aggravation of pitta particularly in its drava and amla properties.^[1] Sushrut in sutrasthana mention that quality of pitta is normally katu and becomes amla when it vidagdha.^[2] The aggravated pitta thus causing Amlapitta produce excessive acidity in the stomach acid eruction, burning sensation and colic pain when associated with vata. The main causes of the disease are improper Ahara (diets), Vihara (Life style), stress, and not following Ahara vihara vishshaayatana etc.^[3] In Ayurvedic text, it is clearly Mentioned that, a person with a pre-existing tendency of excessive pitta secretion and takes incompatible, unhygienic, sour and pitta vitiated food and drinks there is mal secretion of pitta this is called Amlapitta.^[4] Amlapitta is mention in Kasyapa samhita, Madhava nidana, Bhavaprakash and Chakradatta.^[5,6,7,8] There is no description of Amlapitta as a separate disease in text of Charak, Shusruta and Bhagabhatta. Charak has mentioned only the term Amlapitta but it is clearly mentioned in Charak chikitsa 15th chapter that agnimandya is the root cause of Amlapitta.^[9]

Avipattikar churna a polyherbal Ayurvedic formulation which is being used for the treatment of Amlapitta. It has fourteen different ingredients which are: Shunthi(*Zingiber officinale* Roxb), Maricha (*Piper nigrum* Linn), Pipali (*Piper longum* Linn), Haritaki (*Terminalia chebula* Retz), Vibhitaki (*Terminalia bellerica* Roxb), Amalaki (*Emblica officinalis* Gaerth), Mustha (*Cyprus rotudus* Linn), Salt (Vida lavana), Vidanga (*Embelia ribes* Burmf), Ela (*Elettoria cardomum* Maton), Patra (*Cinnamomum tamala* Nees & Eberm) Lavanga (*Syzygium aromaticum* Linn), Trivit (*Operculina trpethum* Linn) and Sarkara (Sugar candey).^[10]

The present study has been undertaken to evaluate the efficacy of Avipattikar Churna in the management of Amlapitta in a scientific methodical manner.

MATERIAL AND METHODS

Following material and methods were adopted for conducting the present study. The study was conducted under a strict protocol to prevent bias and to reduce the sources of error in the study.

Criteria for Inclusion

1. Patients of either sex aged between 15 and 65 years.
2. Patients having clinical symptom of Amlapitta.

Criteria for Inclusion

1. Patients suffering from gastric ulcer, duodenal ulcer, gastric cancer.
2. Patients who had past history of heart disease.
3. Patients with uncontrolled diabetes mellitus.
4. Pregnant and lactating women.

Patients with clinical symptom of Amlapitta were selected randomly from OPD of National Institute of Ayurveda, Jaipur, Rajasthan.

(1) **Level of study:** The study had been carried out at OPD level.

(2) **Design of study:**

Study type	-	Interventional
Purpose	-	Treatment
Control	-	Not control
No of group	-	One
No of patients	-	10 Patients
Type of study	-	Single blind

(3) **Drug:** 10 Amlapitta patients were selected from OPD level.

Avipattikar churna - 3 gm twice a day for 21 days

Anupana – Water

(4) **Assessment of the patients:** Relief of signs and symptom of amlapitta was assessed by the before treatment and after treatment with gradation of clinical features on the basis of scoring pattern.

RESULTS AND DISCUSSION

In this study, 10 patients (6 male and 4 Females) were selected from the out patients department of NIA, Jaipur, Rajasthan having common features of Amlapitta. The results showed that 50% of patients were the age group of 31 -40 years which is pitta dosha dominant stage of life. At this particular age, diet incapability vishmashana, ignore dincharya, take oily substance and smoking hetu (etiological factor) for the pitta dusti (Table 1). Maximum number of patients (50%) were belongs to service class and suffering from mental stress, which is an important causes of Amlapitta (Fig.1).

Results of the shareera prakriti examination showed that maximum 40% patients prone to the Amlapitta disease were of vata kapha (Table 2). The tendency of vata kapha predominance leading to Annavaha srotodusti and produce Amlapitta symptoms. Results of the present study showed that 50% patients were having madhya kostha, which is responsible for poor digestion. It is observed that the patient's had addiction of tea/coffee (90%), alcohol (10%), smoking habit (20%), tobacco (10%). The incidence was common in intellectual person in the age of 31-40 years. These factors are vitiation of pita dosha. Results suggest that mental stress is one of the main causes of Amlapitta.

Patients response of the treatment was evaluated on all the subjective criteria and significant improvement were found among 70% patients and 30% of the patients showed moderate response. The data shown in the context to clinical are very original and practical (Table 3).

Avipattikar churna is more potent drugs in the treatment of Amlapitta with unknown side effect. In Avipattikar churna the drugs are madhur tikta kasaya, katu rasa yukta and madhura vipaka and sitavirya. In Amlapitta, tikta amlata udgara, hritkantha daha due to vidagda pitta which is relived by pittasamak rasa, virya, vipaka present in ingredients of Avipattikar churna. Shunthi, pippali, maricha act as dipana and pachana which relive ama like symptom aruchi, gourava, avipaka utklesha (Table 4).

In conclusion, it is suggested that amlapitta is mostly a psychosomatic disease and the incidence of the disease will be increased in parallel with the advanced of civilization and condition of the society. The results of the Avipattikar churna are overall better and highly significant in both objective and subjective parameters. This is increasing faith in the concept given in our ancient Ayurvedic literature. Management of Amlapitta by Avipattikar churna of Ayurvedic system of medicine is still superior to that of other system of medicine. As this study was conducted over small group of patients, a similar study performed over a large sample for longer duration could have presented much sharper and more accurate results.

Table 1. Age wise distribution of the Amlapitta patients

Age	No. of Patients
10-20 yrs	01
21-30 yrs	02
31-40 yrs	05
41-50 yrs	01
51-60 yrs	00
> 60 yrs	01
Total	10

Table 2. Prakati wise distribution of the Amlapitta patients

Prakriti	No. of patients
Vatta Pitta	3
Vatta Kapha	4
Pitta Kapha	1
Pitta Vatta	1
Kapha Pitta	1
Kapha Vatta	0

Table 3. Effect of Avipattikar Churna in Amlapitta patients

S.N.	Symptoms	BT	AT	Cured	%
1	Amlotkalesh	9	3	6	60.66
2	Vid Bheda	2	1	1	50.00
3	Guru Kosthata	8	3	5	62.05
4	Shiro vedna	15	7	8	53.33
5	Udradhmana	1	-	1	100.00
6	Udradhmana	2	1	1	50.00
7	Angasada	1	-	1	100.00
8	Antrakujan	-	-	-	-
9	Ura Pradesh Daha	25	9	16	64.00
10	Romahorsha	-	-	-	-
11	Avipak	24	8	16	66.66
12	Klama	2	-	2	100
13	Kanthdaha	12	3	9	75.00
14	Titoudar	5	2	3	60
15	Gaurova	8	2	6	75
16	Aruchi	5	2	3	60
17	Amlodgara	24	6	18	75
18	Vanti	-	-	-	-
19	Tiktashayala	-	-	-	-
20	Bhranti	-	-	-	-
21	Dahaukta Atisar	-	-	-	-

Table 4. Ingredients of Avipattikar churna and their properties

S.No	Drugs	Latin name	Rasa	Guna	Veerya	Vipaka	Dosha karma
1	Shunthi	<i>Zingiber officinate</i> Roxb	Katu	Laghu Snigdha	Ushna	Madhura	Kapha vata shamak
2	Maricha	<i>Piper nigrum</i> Linn	Katu	Laghu , Teekhsna	Ushna	Katu	Kapha shamak
3	Pipali	<i>Piperlongum</i> Linn	Katu	Laghu Snigdha Teekhsna	Anushna sheeta	Madhura	Kapha vata shamak
4	Amalki	<i>Emblika officinalis</i> Gaerth	Pancha rasa (Except Lavana)	Guru ruksha sheeta	Sheeta	Madhura	Tridosha samak
5	Haritaki	<i>Terminalia chebula</i> Retz	Pancha Rasa(Except Lavana)	Laghu ruksha	Ushna	Madhura	Tridosha samak
6	Bibhitak	<i>Termininalia bellirica</i> Roxb	Kashaya	Laghu ruksha	Ushna	Madhura	Tridosha samak
7	Mustak	<i>Cyprus rotundus</i> Linn	Katu tikta Kasaya	Laghu ruksha	Sheeta	Katu	Kapha pitta shamak
8	Vidanga	<i>Embelical ribes</i> Burmf	Katu	Laghu ruksha teekhsna	Ushna	Katu	Kapha vata shamak
9	Ela	<i>Elettaria cardamom</i> Maton	Katu madhura	Laghu ruksha	Sheeta	Madhura	Tridosha samak
10	Tejpatra	<i>Cinnamonam tamala</i> Nees&Eberm	Katu tikta Madhura	Laghu ruksha teekhsna	Ushna	Katu	Kapha Vata shamak
11	Nishotha	<i>Operculna trpethum</i> Linn	Katu tikta	Laghu ruksha teekhsna	Ushna	Katu	Kapha pitta sodhak
12	Lavanga	<i>Syzygium aromaticum</i> Linn	Katu tikta	Laghu Tikhsna	Sita	Katu	Kapha pitta shamak
13	Sarkara	-	Madhura	Sheeta snigdha	Sheeta	Ushna	Tridosha samak
14	Vida lavana	-	Lavana	Laghu teekhsna	Ushna	madhura	Vata shamak

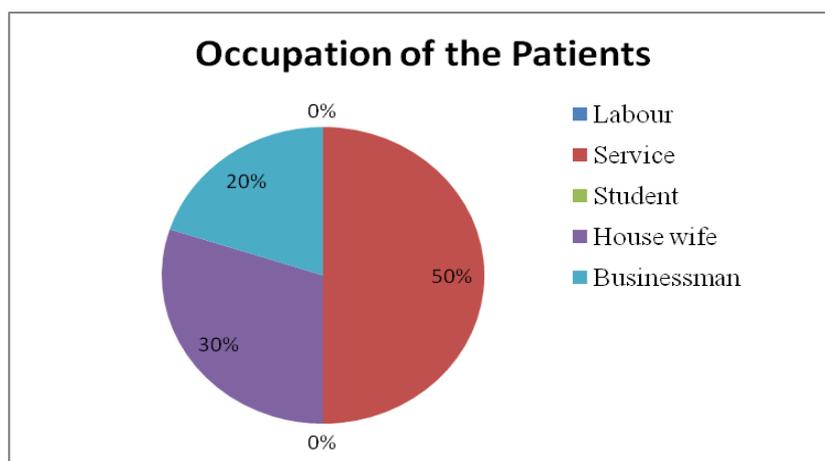


Fig 1. Occupation wise distribution of the Amlapitta patients

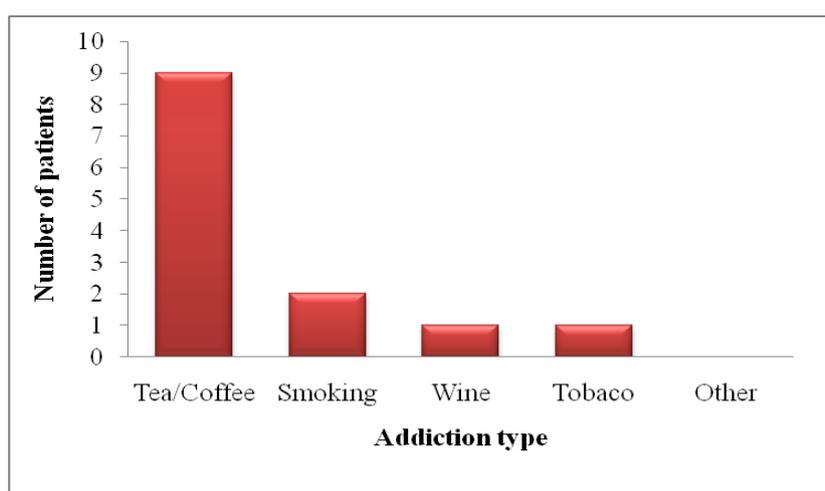


Fig. 2. Addiction wise distribution of the Amlapitta patients.

CONFLICT INTERESTS

The authors declared that they have no competing interests.

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REFERENCES

1. Astanga Samgraha with the commentary of Indu. Vol. 1st. Indu commentary on Sutrasthana 13/3. New Delhi: Central Council for research in Ayurveda and Siddha (CCRAS), 1991; 196.

2. Susuruta Samhita Sutrashana english translation of text and Dalhana commentary. Vol 1st editated by Priva vrat Sharma, Choumkhamba Vishwabharati, 2004; 228.
3. Agnivesha, Charaka, Dridhabala, Charaka samhita, Nidana Sthana, Shosha Nidanam Adhyaya, 6/10, edited by Vaidya Jadavaji Trikamji Acharya, Reprint ed. Varanasi: Chaukhambha Surabharati Prakashana, 2005; 221.
4. Madhva nidana, Madhudhara Hindi Commentry of Vijayaraksita & Srikanthadatta by Brahmananda Tripathi Vol.2nd, Chaukhamba Surabharati Prakashan Varanasi, 1996; 225.
5. Kaspyapa Samhita or Vrddha Jivaka revised by Vatsya with Sanskrit Introduction by Nepal Rajgura Pandit Hemraja Sharma with Vidhyotini Hindi commentary, Chaukhamba Sanskrit series office Khil Sthana,Chapter 16. Verse 1-14 Edi. Reprint, 2008; 335.
6. Madhava Nidanam with commentaries The Madhukosa of Srivijayarakshita and srikanthadatta with The Viyotini Hindi Commentay and Notes edited by Prof. Yadunandana Upadhyaya, Chaukhambha Prakashan, Varanasi, Chapter 51 Verse 2-12, Edi. Reprint, 2007; 171-2.
7. Bhavaprakasa of Sri Bhavamisra edited with Vidhyotini Hindi commentary by Bhisagratna Pandit Sri Brahma Shankar Mishra, Jaya krishan Das Haridas Gupta Chaukhamba Sanskrit Series Office. Chapter 10. Verse 20-22 Edi. Reprint, 2008; 298.
8. Chakradatta of Sri Chakra- panidata with the Vaidyaprabha Hindi Commentary and Notes Introduction by Dr. Indradeva Tripathi, Edited prof. Ramanath Dwivedy, Chaukhamba Sanskrit Bhawan, Varanasi Edition, Reprint, 2011; 52: 295.
9. Chrak samhita chikitsaasthana Vol- 2nd, Prof priyavrat Sharma Chaukhamba Sanskrit sansthan Varanasi 7th Edition, 2003; 249.
10. The Ayurvedic Formulation of India, part I, second revised englishedition, Govt of india , Bhaishjayaratnavali, Amlapittadhikara, 106.