

TO STUDY THE EFFICACY OF SHUNTIKHANDIN THE MANAGEMENT OF AMLAPITTA

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ABSTRACT

In recent years there has been an unprecedented increase of incidences related to GI system due to changing in life style, Diet pattern, behavioral pattern and mental stress and strain. *Amlapitta* is such type of GI disorder due to same causative factor as, closely resembles with Gastritis in modern science also and in chronic stage it may lead to ulceration condition. In this study *Shunthikhand* Ayurvedic preparation with cap Omeprazole allopathic medicine compares and observed the result. *Shuntikh* and preparation was taken from *bhaishajyaratnavati*. *ShunthiKhanda*' constitutes with *Shunthi* as the main ingredient i.e. 16 time more than other drugs, along with other prakshepadravyas (1/16th part) and *Ghrita*, *Dugdha*, *Madhu* and *Sharkara*. Cap omeprazole is the worldwide accepted drug for hyperacidity but it has some limitations. This study was done to study the efficacy of *shuntikhand* in comparison with cap omeprazole.

Keyword: gastritis, amlapitta, shuntikhand, cap omeprazole

INTRODUCTION

Amlapitta is one of the most common diseases seen in society. In modern era's changing life style along with changing food culture, behavioral pattern; Hurry, Worry and Curry are three main reasons for this disease. Amlapitta is a disease of Annavahasrotas. In present time most of the people suffering from Ajirna and Amlapitta due to mental stress and bad food habit. Acid Peptic Disease is vast terminology it cannot be correlated with Amlapitta but the etiology and symptoms of non ulcer Acid Peptic diseases like gastritis is similar to Amlapitta so it can be compared with Amlapitta. In this study chronic and those having recurrent symptoms of Amlapitta patient was selected. Patients were equally distributed in two different groups and observed the result of Shunthikhand Ayurvedic preparation and cap

Omeprazole allopathic medicine. Omeprazole is the Worldwide accepted drug for Acid peptic disorder but this drug has some side effect. In this study how *Shunthikhand* gave result in comparison with Cap Omeprazole was discussed.

Aims and objective:

- 1. To study efficacy of *Shunthikhand* in the management of *Amlapitta*.
- 2. To study efficacy of cap Omeprazole in the management of *Amlapitta*.
- 3. To evaluate the efficacy of *Shunthik-hand* in comparison with cap Omeprazole in the management of *Amlapitta*.

Material and method

GROUP - A

Shunthikhand: All drugs of *Shunthikhand* were identified and authentified by respected guide and the *churnadravyas* were added as per *Bhaishajyaratnavali* refer-

ence. *Shunthikhand* was standardized from Qualichem laboratory.

GROUP – B

Cap Omeprazole: Cap Omeprazole is the standard drug for Acid Peptic Disorder. This drug was used for comparison in this clinical study

INCLUSIVE CRITERIA:

a) Age : >20 to <60 years

b) Sex : No barrier
c) Race & Religion : No barrier
d) Economic status : No barrier
e) Chronicity :>1yr to <5yr

- f) Patients presenting classical features of *Amlapitta* described in *shastra*.
- g) Patients willing to give informed written consent.
- 5. EXCLUSIVE CRITERIA:
- a) Age below 20 and above 60 years.
- b) Patient with history of Haemetmesis, Maleana and Anaemia.
- c) Patient with drug induced Amlapittas.
- d) Patient who are known case of peptic ulcer, T.B, ca oesophagus & other diseases
- e) Patient having major cardiac disorder, diabetes mellitus.
- f) Patients suffering from infectious diseases, pregnant women.

- 6. INFORMED CONSENT: Patient fulfilling criteria for selection will be included under the study after receiving their written consent.
- 7. WITHDRAWAL FROM STUDY: withdrawal of patient will be done on ethical ground after discussion with respected guide.

9. GROUPING:

GROUP A (TRIAL GROUP)

Number of Patients: 30 (including LA-MA) well diagnosed patients of *Amlapitta* presenting with classical symptoms of *Amlapitta*.

Treatment: *Shunthikhand* for 1 month (4 week) 3gm in divided dose Follow up was taken at 1 week interval

GROUP B (CONTROL GROUP)

Number of Patients: 30 (including LAMA) well diagnosed patient's of *Amlapitta* presenting with classical symptoms of *Amlapitta*

Treatment: Cap Omeprazole 20mg BD for 1 month follow up was taken at 1 week interval

Table no.1 Scoring pattern:

· 1	gnant women.		
Sr. No	Symptoms	Grade	Lakshana
1	1 Amloudgara	0	No amloudgara
		1	Sometime during a day
		2	Amloudgara of modrate severity upto next meal but not disturb the patient
		3	Severe amloudgara disturbing the patient
		4	Small amount of fluid regurgitate to patient mouth
2	2 Urdaha	0	No Urdaha
		1	Mild degree of Daha
		2	Modrate degree of <i>daha</i> that subside after taking sweet /cold food /milk/antacid
		3	Severe degree of <i>daha</i> involving two or three region relieved after vomiting.
3	Amlaprachiti	0	No Amlaprachiti
		1	Mild Amlaprachiti during day
			IntermitantAmlaprachiti
		3	Persistant <i>Amlaprachiti</i>
4	Kantdaha	0	No kantadaha

		1	Mild degree of <i>daha</i> in kantaPradesh		
		2	Moderate degree of daha		
		3	Severe degree of <i>daha</i> relived after vomiting		
5;	Constipation	0	Occurs easily in routine time		
ĺ	·	1	Some time difficulty in defecation		
		2	Difficulty in defecation but <i>malpravruti</i> daily with		
			discomfort in abdomen		
		3	Can't pass stool daily and heaviness in abdomen		
6;	Shirshool	0	No shirshool		
		1	Mild shirshool after lunch		
		2	Intermitantshirshool		
		3	Persistantshirshool		
7	Hrulas	0	No Hrullas		
		1	Frequency of salivation on every day		
		2	Feel sense of nauseating and vomit occasionally		
			Frequency of vomiting is two or three time or more per week		
8	8 Adhman	0	No Adhman		
		1	Occasionally feeling distention of abdomen		
		2	Daily after intake of food upto 1hr with mild distention abdomen		
		3	Distention of abdomen upto 1-3 hr after intake of food		
9;	9; Udargaurav		No Udargaurav		
		1	Occasionally <i>udargaurav</i> due to indigestion		
		2	Daily <i>Udargaurav</i> with <i>udgarbahuly</i> a which subside within hour		
			Udargavarav and udgarbahulya disturb the routine life		
10	Angasad	0	No Angasad		
		1	Occasionally feeling of heaviness for sometime in		
			hand and feet		
		2	Feeling of heaviness in hand and feet		
		3	Daily feeling of heaviness over body which lead to <i>akarmanyata</i>		
11	Netradaha	0	No netradaha		
		1	Mild netradaha		
		2	Intermitant netradaha		
		3	Persistant netradaha		

Observation and Result:

In the present study patients were diagnosed with the help of clinical features. All these patients were randomly distributed into two equal groups, namely Trial Group and Control Group. Out of total 60 patients, 4 nos and 5nos of patients from Trial and Control Group respectively left the treatment without prior intimatima-

tion. Theywere labeled as LAMA (Left against Medical Advice). Therefore their observations were not included in this study. Remaining 51 patients from both the groups were examined clinically according to the specially prepared proforma (CRF).

Effect of therapy on PramukhLakshan:

Table no. 2 Showing Effect of Therapy on General Symptoms Score of 51 Pa-

tients of Amlapitta

Sr.No	Symptoms	Group	Sympt	oms Scor	·e	% of Relief
			BT	AT	Diff	(Diff/BT)
1	Amloudgara	Trial Group	31	08	23	74%
		Control Group	34	07	27	72%
2	Urodaha	Trial Group Con-	45	13	32	71%
		trol Group	44	09	35	79%
3	Amlaprachiti	Trial Group Con-	37	08	29	78%
	_	trol Group	36	06	30	83%
4	Kantadaha	Trial Group Con-	28	09	19	68%
		trol Group	24	07	17	70%
5	Constipation	Trial Group Con-	25	05	20	80%
	_	trol Group	21	11	10	48%
6	Shirshool	Trial Group Con-	12	03	09	75%
		trol Group	11	02	09	81%
7	Hrullas	Trial Group Con-	16	03	13	81%
		trol Group	17	08	09	52%
8	Adhman	Trial Group	20	04	16	80%
		Control Group	25	14	11	44%
9	Udargaurav	Trial Group	13	04	09	80%
	, and the second	Control Group	14	08	06	42%
10	Angasad	Trial Group	09	04	05	55%
		Control Group	09	05	04	44%
11	Netradaha	Trial Group	06	02	04	66%
		Control Group	08	04	04	50%
	Total	Trial Group	242	63	179	73.96%
		Control Group	243	81	162	66.66%

RESULT: It could be comprehended that percentage of relief was more in the *Urodaha*, *Amlaprachiti*, *Kantadaha*, *shirashool* of Control Group than Trial Group but the Percentage of relief in *Adhaman*, *Malabadhata* (constipation), *Hrullas*,

Udargavrav was found more in Trial Group than control Group.

STATISTICAL ANALYSIS:

Table no. 3 Showing Effect of Therapy on Symptoms of 51 Patients of *Amlapitta* by Wilcoxon- Ranked Singed Test

S.	Symptoms	Groups	W	T+	T _	Mean ± SD		P	Result
N						BT	AT		
1	Amloudgara	TG	105	105	0.0	1.19±1.167	0.30±0.47	0.0001	E.S
		CG	120	120	0.0	1.36±1.25	0.28±0.54	< 0.0001	E.S
2	Urdaha	TG	210	210	0.0	1.73±1.002	0.5±0.509	< 0.0001	E.S
		CG	171	171	0.0	1.76±1.09	0.36±0.56	< 0.0001	E.S
3	Amlaprachiti	TG	120	120	0.0	1.42±1.33	0.307±0.47	< 0.0001	E.S
		CG	136	136	0.0	1.44±1.08	0.24±0.52	< 0.0001	E.S
4	Kantadaha	TG	78	78	0.0	1.07±0.97	0.34±0.62	0.0005	E.S
		CG	91	91	0.0	0.96±0.93	0.28±0.45	0.0002	E.S

5	Constipation	TG	78	78	0.0	0.96±0.99	0.23±0.51	0.0005	E.S
		CG	55	55	0.0	0.84±0.98	0.44±0.58	0.0020	V.S
6	Shirshool	TG	25	25	0.0	0.46±0.76	0.11±0.32	0.0156	S
		CG	28	28	0.0	0.44 ± 0.70	0.08±0.27	0.0156	S
7	Hrullas	TG	55	55	0.0	0.61±0.80	0.11±0.32	0.0020	V.S
		CG	28	28	0.0	0.68 ± 0.98	0.32±0.55	0.0156	S
8	Adhman	TG	66	66	0.0	0.76±0.99	0.15±0.36	0.0010	V.S
		CG	55	55	0.0	1±1.11	0.56±0.65	0.0020	V.S
9	Udargaurav	TG	36	36	0.0	0.5±0.76	0.15±0.36	0.0078	V.S
		CG	21	21	0.0	0.56±0.76	0.32±0.47	0.0313	S
10	Angasad	TG	15	15	0.0	0.34 ± 0.69	0.15±0.36	0.0625	NOT
									Q.S
		CG	10	10	0.0	0.36±0.56	0.2±0.40	0.1250	N.S
11	Netradaha	TG	6	6	0.0	0.23±0.65	0.076±0.27	0.2500	N.S
		CG	10	10	0.0	0.32±0.69	0.16±0.37	0.1250	N.S

W=sum of all rank

T+=sum of all positive rank

T-=sum of all negative rank

S.D. =Standard Deviation

- P>0.05 N.S. (Non Significant)
- P=0.01-0.05 S (Significant)
- P=0.001-0.01 V.S. (Very Significant)
- P<0.0001 E.S. (Extremely Significant)

MANN WHITNEY TEST

Difference between the summation of before treatment and after treatment results of all the subjective parameters was calculated separately for both the groups.

Null hypothesis: There is no significant difference between two groups.

Alternative hypothesis: There is significant difference between two groups. Two tailed test was applied to find out the P value. As P value <0.001 then null hypothesis rejected and if P value >0.001 then null hypothesis accepted.

Table no.4 showing patient wise difference between before treatment and after treatment of symptoms of both groups

SR. NO.	Difference of Group A	Difference of group B
1	10	6
2	6	6
3	13	10
4	8	5
5	7	8
6	8	5
7	6	8
8	6	7
9	11	4
10	9	8
11	8	7
12	7	7

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13	7	7				
14	8	8				
15	4	7				
16	6	8				
17	9	5				
18	3	5				
19	5	0				
20	6	8				
21	5	5				
22	6	7				
23	6	7				
24	2	7				
25	5	7				
26	6					
Mean	6.808	6.480				
S.D.	2.384	1.917				
S.E.	0.4675	0.3835				
Median						
Passed Normality	No	No				
Monn Whitney II statistics = 222						

Mann-Whitney U statistics = 322

P(two tailed)= 0.4812, considered not significant

In above table p value is >0.001 then null hypotheses accepted i.e. there was no significant difference between two groups

D) Total effect of therapy Table no.5 Showing Total Effect of Therapy on Total Patients of *Amlapitta*

0 r				
Sr. No	Criteria For Total Effect of Therapy	Groups	Total No. of Patients	%
1	Complete remission	TG	03	10%
		CG	03	10%
2	Markedly Relieved	TG	20	66%
		CG	19	63%
3	Moderately Relieved	TG	03	10%
		CG	02	06%
4	Unchanged	TG	00	00%
		CG	01	03%
5	LAMA	TG	04	13%
		CG	05	16%

In this study 3 patients (10%) had complete remission in both Trial and control group. 20 Patient from Trial group and 19 Patients (63%) from control group had markedly relieved. However 3 patients from Trial group and 2 patients from Control group had moderately relieved. There was no Patient unchanged in Trial group

but 1 Patient was unchanged in Control group.

DISCUSSION

Mode of action of Shunthikhand

'ShunthiKhand' constitutes *Shunthi* as the main ingredient i.e. 16 time more than other durgs, along with other *prak-*

shepadravyas (1/16th part) and Ghrita, Dugdha, Madhuand Sharkara. Most of the ingredients of shunthikhand having Katu, Tikta and Madhura predominant Rasa, Laghu, Ruksha, Tikshna Guna, Ushna Sheeta Virya. Katu, MadhuraVipaka having Agnideepan property

Shunthi having ushnvirya, katu rasa guru rukshatikshnaguna and madhurvipak so it is useful in sampitta. Hence Shunthi being MadhuraVipaka subsides Ama but does not provoke Pitta. Also Shunthi is the best medicine for Amapachaka and alleviates the Srotorodha by UshnaTikshna Guna.

In Shunthikhand Dugdha, Sharkara, Goghrita are more in quantity than that of Shunthi. This increased quantity reduces the Ushna, Tikshna property of shunti to some extent. So Shunthikhand shows both Pittashaman as well as Agnideepaniya property.

All the drugs in *Shunthikhand* having *Deepana Pachana* property which improves the status of Agni subsequently prevent the *Ama* formation and vitiation of *Doshas. Laghu, Ruksha, Tikshnaguna, Katuvipaka* and *Ushnavirya* drug having opposite to that of *Kapha* which helps in alleviation of *Kapha*. Once this *Kapha* is

alleviated *Avarana* of *Vayu* gets removed and *vayu* traverses through its own path leading to relief in symptoms.

Ghrita having pittaghna property. Dugdha has Rasayana, Medhya and Anulomana action. Due to madhur rasa and madhurvipaka it has pittaghna property and Madhu is the best Yogavahi, possesses nutritive properties, and improves general metabolism.

Mode action of Omeprazole:

Omeprazole is a selective and irreversible proton pump inhibitor. It suppresses stomach acid secretion by specific inhibition of the H +/K + ATPase system found at the secretory surface of gastric parietal cells. Omeprazole will inhibit the final step of acid production. Omeprazole will also inhibit both basal and stimulated acid secretion irrespective of the stimulus.

According modern point of view *Amlapitta* (Hyperacidity) means accumulation of extra acid in stomach. It can't differentiate *sama pitta, pittavrudhi & Accchapitta*. *Acchapitta* is useful in digestion of food and sepration of *sara* from *kitta*. However *sama pitta* and *Pittavrudh*i is pathological.

Table no. 6Effect of therapy

SYMPTOMS	GRO	OUP A		GRO	OUP B	
	n	% Relief	Significance P	n	% Relief	Significance P
			value			value
Amloudgara	14	74%	0.0001	15	72%	< 0.0001
Urdaha	21	71%	< 0.0001	19	79%	< 0.0001
Amlaprachiti	15	78%	< 0.0001	17	83%	< 0.0001
Katadaha	16	68%	0.0005	17	70%	0.0002
Constipation	13	80%	0.0005	12	48%	0.0020
Shirshool	08	75%	0.0156	07	81%	0.0156
Hrullas	11	81%	0.0020	09	52%	0.0156
Adhman	11	80%	0.0010	12	44%	0.0020
Udargaurav	09	80%	0.0078	10	42%	0.0313
Angasad	06	55%	0.0625	08	44%	0.1250
Netradaha	03	66%	0.2500	05	50%	0.1250

Above data stated that there was extremely significant result in the symptoms *Amloudgara*, *Urdaha*, *Amlaprachiti*, *Kantadaha* of both group but the Percentage of relief was more in *Uradaha*, *Amlaprachiti*, *Kantadaha*, *Shirshool* of Group B (control group) than Group A (Trial group).

Percentage of relief in Amloudga-ra, Constipation, Hrullas, Adhman, Udar-gaurav, Angasad and Netradaha of Group A (Trial group) was more than Group B (control group) and level of significance also better than control group. In Angasad and Netradaha Non significant result were found in both the group because these symptoms were less in number in the patients. Total percentage of relief in Trial group 78.93% was more than total percentage of relief in control group was 66.66%.

Comparison between the effects of two drugs:

Cap Omeprazole is worldwide accepted drug for *Amlapitta* (Gastritis). In comparison with this standard drug, the drug *Shunthikhand* also gave significant result, both the drugs were not significantly different become statistically proved.

Though cap Omeprazole is the standard drug for Amlapitta it has some limitation. It can't cure all symptoms of *Amlapitta* because main cause of *Amlapitta* is *Agnidushti* but it was not relieved by cap Omeprazole. *Shunthikhand* first of all relived the *Agnidushti* so it was given better result in all symptoms of *Amlapitta*.

CONCLUSION

- *Amlapitta* is the burning problem in society due to changing lifestyle.
- Conclusions drawn from the various aspects of clinical study are as: All the 60 patients of present study were taking Vishamashana, Katu-Amla rasa Pradhna diet, tea and tobacco. Mandagni is the main cause of Amlapitta.

- Constipated peoples are more prone to disease *Amlapitta*.
- In the present study both the Groups showed equal result, but the total percentage of relief was more in the Trial group than Control group.
- Cap Omeprazole is the standard drug for *Amlapitta*. In comparision with this standard drug, the drug *Shunthi khand* also gave significant result.
- Cap Omeprazole has some limitation.
- *Shunthikhand* were giving relief from all the symptoms of *Amlapitta* by relieving *Agnidushti*.

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STANDARDIZATION OF SHUNTHI KHAND

Standardization of shunthikhand was done in Qualichem laboratories
Test report is as follow

Pachangesachinjagannath & Wankhade V.H: To Study The Efficacy Of Shuntikhandin The Management Of Amlapitta

no	Test	Remarks
1)	PH(1% Aqueous solution)	2.74
	Method: A.P	
2)	Loss on drying at 105 degc	3.27
3)	Total ASH	2.42
4)	Acid insoluble ASH	0.58
5)	Water soluble extractive	57.61
6)	Alcohol soluble extractive	24.04

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