

A COMPARATIVE CLINICAL STUDY OF YAVADI GHANA VATI AND GUDUCHYADI GHANA VATI IN THE MANAGEMENT OF AMLAPITTA

Aboli Patil¹, Varghese Jibi², Smritika Taware³, Kalpesh Chaudhari⁴

¹Assistant Professor , Dept of Kaumarbhritya, ²Assistant Professor , Dept of Kayachikitsa

³Assistant Professor , Dept of Stree Rog & Prasuti Tantra, ⁴Assistant Professor , Dept of Panchakarma

Dr. D.Y. Patil Ayurveda College & Research Centre, Pimpri, Pune, Maharashtra, India

ABSTRACT

Though there is no direct description of etiopathogenesis as well as treatment protocol of Amlapitta in *Brihatrayi*, many scattered references can be traced out from them. It is one of the Psychosomatic disorder having high prevalence and still on the rise. *Kashyapa Samhita* is the first text which describes the disease *Amlapitta* as a separate disease entity along with treatment. Some of the conditions in Modern Science like Hyperacidity, Gastritis, GERD, Dyspepsia, Ulcers can be included under the broad umbrella of *Amlapitta*. In present study, 54 patients having the classical symptoms of *Amlapitta* were selected and divided into two groups and administered Group-A : *Yavadi Ghana Vati* 500mg twice a day along with 5ml honey before meal; Group-B: Patients were given *Guduchyadi Ghana Vati* 500mg twice a day along with 5ml honey before meal. After a course of therapy of 4 weeks, improvement was observed in both the groups on the basis of *Rogabala*, *Dehabala*, *Chetasabala*, *Agnibala* with comparatively better results in the patients treated with *Guduchyadi Ghana Vati* group.

Keywords: *Amlapitta*, *Ghana Vati*, *Yavadi*, *Guduchyadi*.

INTRODUCTION

In the 21st century, more attraction for fast food, copying the Western life style, change in diet habits & behavioral pattern, stress and strain hampers the process of digestion and lead many Psychosomatic disorders like *Amlapitta*. In *Brihatrayi*, no direct reference as a separate disease entity many scattered references can be traced out. *Acharya Kashyapa* describes it as a separate disease along with treatment. He believes that the disease is caused by vitiation of *Tridoshas* leading to *Mandagni* and *Amlapitta*¹. It is characterised by *Avipaka* (Indigestion), *Utklesh* (nausea), *Amlodgara* (sour belching), *Chhardi* (vomiting), *Hritdaha* (Heartburn), *Aruchi* (Anorexia), *Klama*² (fatigue). He describes it as “*Bhishakamohakara*” as

clinical pictures of many diseases like *Vidagdhajirna*, *Parinamshoola*, *Annadrava shoola*, *Pittaja shoola*, *Pittaja Grahani* are overlapping with *Amlapitta* so it is very difficult to diagnose and differentiate it. Many conditions in Modern Science like Hyperacidity, Gastritis, GERD, Dyspepsia, Ulcers can be included under the broad umbrella of *Amlapitta*. *Madhavakara* has describes the *Swatantra samprapti* while *Charaka* and *Kashyapa* has given *Paratantra samprapti*. *Madhavakara* has described the pathogenesis of the disease due to *Pittaparakopa* which is already increased due to its own causes³. He describes the two *gatis* of *Amlapitta* as *Urdhvaga* and *Adhoga*. *Acharya Charaka* describes that

when *Annavisha* gets associated with *Pitta* it leads to *Pittaja* diseases like *Amlapitta*⁴.

Aims & Objectives: The present study was carried out to study the etiopathogenesis of *Amlapitta* as well as to assess the efficacy of *Yavadi* and *Guduchyadi Ghana Vati* and to compare their effects.

Materials and methods: Total 54 patients having classical symptoms of *Amlapitta*, irrespective of sex, occupation etc, attending the O.P.D. of Dept. of *Kayachikitsa*, I.P.G.T.& R.A., Gujarat Ayurved University, Jamnagar, were selected for the clinical trial.

Inclusion Criteria: Patients presenting with the classical symptoms of *Amlapitta*, like *Avipaka* (Indigestion), *Utklesh* (nausea), *Amlodgara* (sour belching), *Chhardi* (vomiting), *Hritdaha*(Heartburn), *Aruchi* (Anorexia), *Klama* (fatigue) etc. aged between 15-60yrs. were included.

Exclusion Criteria: Patients aged below 15 and above 60 yrs, chronicity more than 5 yrs and suffering from *Vidagdhajirna*, *Adhoga Amlapitta*, Ulcers, Carcinoma etc. were excluded.

Before starting the treatment detailed clinical history was taken in the clinical research proforma based on *Ayurvedic* and modern parameters and the written consent was taken from the patients.

Method of preparation of drug: All the drugs of *Yavadi Ghana Vati*⁵ and *Guduchyadi Ghana Vati*⁶ except *Yava* were procured from the pharmacy, GAU, Jamnagar. *Yava* was purchased from local Jamnagar market. While honey was purchased from Khadi Bhandar, Jamnagar. The drugs were authenticated in the Dept. of Pharmacognosy, I.P.G.T. & R.A. Though both the drugs are described in classics in *Kwatha* form but for better palatability they were converted into *Ghana vati* form and

were prepared by the pharmacy, GAU, Jamnagar.

Dose & Duration: The patients of Group-A were treated by *Yavadi Ghana Vati* whereas patients of Group-B were treated by *Guduchyadi Ghana Vati*. Both the vati in the dose of 500mg were administered along with 5ml honey before meal for the duration of 4 weeks.

Criteria for Assessment: The patients were examined weekly and their status was noted. Assessment was done on the basis of improvement in *Rogabala*, *Dehabala*, *Chetasabala* and *Agnibala* by specific scoring pattern. Subjective parameters were analysed by Wilcoxon's matched paired test. Total improvement was categorized as follows; no improvement 0 - 25%, mild improvement- 26%-50%, moderate improvement:51%-75%, Marked Improvement:76% -100% and Complete Remission: 100%.

Observations: The observation made on 54 patients of *Amlapitta* showed that maximum number of patients i.e. 66.66% were between the age group of 36-60yrs., 59.29% were female, 88.89% were married, 59.26% were housewives, 38.89% were primary educated, 50% belongs to middle socio economic status, 85.19% belongs to urban civilization, 35.19% of patients having chronicity of 2-3yrs, *Adhyashana* was observed in 42.59% , 61.11% were taking *Katu rasa pradhana* diet and 98.15% were habitual to tea. 53.70% of patients were having *Avara Jaran Shakti*, 64.81% having *Mandagni*, *Chinta* was found in 51.85% of patients. The chief complaints observed in the patients as: *Amlodgara* in 100% of patients, *Katu udgara* in 92.59%, *Kantha Daha* 68.52%, *Uraha Daha* 74.06%, *Chhardi* in 44.44%, *Avipaka* in 51.85%, *Adhmana* in 44.44%, *Shira Shoola* in 35.19% of patients.

Rasavaha Srotodushti was found in 87.04%, *Annavaha* in 100%, *Purishvaha* in 38.89%, *Raktavaha* in 20.37% of patients.

RESULTS

Effect of Therapy on cardinal symptoms: Both the drugs *Yavadi* and *Guduchyadi Ghana Vati* showed statistically highly significant results on cardinal symptoms of *Amlapitta*. (Table – 1)

Overall effect of Therapy on *Rogabala*, *Dehabala*, *Chetasabala*, *Agnibala*: Both the drugs showed statistically highly significant results on all these parameters. (Table- 2)

Effect of Therapy on Brief Psychiatric Rating Scale (BPRS) : Both the drugs showed statistically highly significant result on the symptom Tension. (Table-3)

Comparison of effect of Therapy: On comparison by Chai Square, Group-B i.e. *Guduchyadi Ghana Vati* showed better results on the symptoms like *Kukshi daha*, *Amlodgara*, *Katu udgara*, *Avipaka*, *Balavridhi*, *Swara Varna Yoga*, *Jirna Ahara Lakshanas*. (Table-4)

Overall effect of Therapy : Moderate improvement was observed in 44% and 56% of the patients in Gr.A and Gr.B resp. Mild improvement was observed in 52% and 24% of the patients in Gr.A and Gr.B resp. Marked improvement was observed in 4% and 20% of the patients in Gr.A and Gr.B resp.(Table-5)

DISCUSSION

Amlapitta is a disease of Psychosomatic origin. Symptoms of *Amlapitta* closely resembles with Hyperacidity⁷ as there is excessive secretion of Hydrochloric acid than normal. Also It is characterised by Heart burn, Indigestion, Sour belching, Feeling of nausea, Lack of desire for food, feeling

of restlessness which can be similar to symptoms of *Amlapitta*. Excessive intake of *Amla*(sour), *Katu*(Pungent), *Lavan*(Salty), *Vidahi*(Spicy) substances causes vitiation of *Pittadosha* and lead to disease. This type of food cause irritation of the mucous membrane of stomach and esophagus, also they cause weakness of the lower esophageal sphincter, stimulate the stomach to produce excess of acid and increase acid reflux⁸.

In the present study, both the groups showed statistically highly significant results on cardinal features like *Amlodgara*, *Katu udgara*, *Avipaka*, *Kukshi daha*, *Uraha daha*, *Chhardi* as most of the drugs like *Guduchi*, *Patola*, *Nimba* having *Tikta*(bitter) and *Kashaya rasa* which are best *Pittashamaka* and *Amapachaka* rasa so they reduced the *samata* of *Pitta* and relieve symptoms. Also *Pippali* and *Chitraka* by virtue of their *katu rasa* cause *Agnideepana*, *Amapachana* and *Srotoshodhana*. *Guduchi*⁹ and *Nimba*¹⁰ have analgesic, anti-inflammatory, anti-ulcer, carminative properties reduce symptoms.

Dehabala may be increased due to *Balya* and *Rasayana* properties of *Guduchi* and *Nimba*, also *Guduchi* has antioxidant, immunostimulatory activity may increase *dehabala*.

Improvement in *Chetasabala* as well as in BPRS may be due to *Medhya*, *Rasayana*, Anti-stress properties of *Guduchi*. *Pippali* with honey also has *medhya* effect.

Improvement in *Agnibala* may be due to *Agnideepana*, *Amapachana* properties of *Guduchi*, *Patola*, *Nimba*, *Chitraka*. Also they have digestive and appetiser properties.

Honey has *Tridoshashamaka* property, reduces symptoms. It has anti-inflammatory, anti-oxidant effect. Some researchers prove that one and a half hours

before a meal can help limit the gastric acid secretions¹¹.

CONCLUSION

The disease *Amlapitta* can be correlated with Hyperacidity on the basis of symptoms as well as pathology. If the patient does not follow the *pathya-apathya* then there is no importance of drug as *Laulya* is the main etiological factor, also mentioned by *Kashyapa*. In most of the patients, there is involvement of *Annava* srotas along with *Rasavaha*. *Agnimandya* is the main responsible factor of it. As the vicious cycle continues between *Agnimandya*, *Ajirna*, *Laulya*, *Nidana sevana* the disease becomes *Chitakari*(chronic). *Guduchyadi Ghana Vati* showed significant results on BPRS due to the *Medhya*, Anti-stress property of *Guduchi*. It also showed better improvement in *Doshavridhi*, *Srotodushiti*, Investigation parameters than *Yavadi Ghana Vati*. Both the groups showed statistically highly significant results on chief complaints like *Amlodgara*, *Katu udgara*, *Avipaka*, *Balavridhi*, *Swara Varna Yoga*. But on comparison by Chai Square, *Guduchyadi Ghana Vati* showed better results on these parameters. As it contains more potent drugs like *Guduchi*, *Patola*, *Nimba* and *Chitraka* useful in *Amlapitta*. *Guduchi* and *Patola* are *Tridoshashamaka*. *Guduchi* having *Medhya*, *Rasayana*, Anti-stress, Anti-oxidant properties. *Chitraka* having *deepana* and *pachana* properties. *Yavadi Ghana Vati* showed better results on *Chhardi* due to *Ruksha*(dry), *Anabhi-shyandi* properties of *Yava*, where *Pittavridhi* takes place due to its *drava guna*. *Guduchyadi Ghana Vati* plays an important role in *Amlapitta* where *Pittavridhi* occurs by *Ushna*, *Tikshna*, *Amla*, *katu gunas*. It is more potent in *Agnidipana* than *Yavadi Ghana vati*, *Medhya guna* of *Guduchi*

also important to relieve psychological factors of *Amlapitta*. *Guduchyadi Ghana Vati* is cost effective than *Yavadi Ghana vati*. Also *Rasayana* property of *Guduchi* will produce long term curative effect, prevent early recurrence, improves *dehabala*. Both the drugs are free from side effects.

REFERENCES

1. Pt. Hemraja Sharma, Vidyotini Hindi commentary, *Kashyapa Samhita*, Chaukhamba Sanskrit Sansthan, Varanasi (2009), Kash.khi.16/6,pg.no.335
2. Madhavanidanam, Madhavacharya, 'Madhukosha' Vyakhya by Acharya Yadunandana Upadhyaya, Chaukhamba Pakashan, Varanasi (2004), part 2,51/2, page no.171
3. Ibidem(2),M.N. part 2,51/1, page no.170
4. Agnivesha, Charaka Samhita with 'Ayurveda-Deepika' Commentary of Chakrapanidatta, edited by Vaidya Jadvaji Trikamji Acharya, Ed. Reprint, Chaukhamba Surbharati Prakashan, Varanasi, 2009, Ch.Chi.15/47
5. Dr. Indradev Tripathi & Dr. Daya Shankar Tripathi, Yogaratnakara, Vidyaprabha Hindi commentary, Chaukhamba Pakashan, Varanasi (1998), Pg.no.667
6. Ibidem(5)
7. www.Ayushveda.com
8. The American Asso. of medial chronobiology and chronotherapeutics
9. Billore K.V., Yelne M.B., Dennis T.J. and Chaudhari B.G., Database on medicinal plants used in Ayurveda, Vol. 3, Central Council For Research in Ayurveda and Siddha, New Delhi, 2004; 229
10. Kirtikar K.R. and Basu B.D., Indian medicinal plants – Volume 1, Ed. 2nd,

Bishen Singh Mahendra Pal Singh, 2004; 419.

Table 1: Effect of Therapy on cardinal symptoms

11. www.chinaview.cn

Symptom	Group	n	N	Mean Score		%	W	P
				BT	AT			
Amlodgara	A	25	21	2.20	0.96	56.36	231.00	<0.001
	B	25	23	2.00	0.67	66.00	276.00	<0.001
Katu udgara	A	25	20	2.16	0.96	55.56	210.00	<0.001
	B	25	24	1.96	0.68	65.31	300.00	<0.001
Uraha daha	A	21	15	1.80	0.92	48.89	120.00	<0.001
	B	19	18	1.32	0.48	63.64	171.00	<0.001
Kukshi daha	A	17	11	1.40	0.80	42.86	66.00	<0.001
	B	17	16	1.28	0.44	65.62	136.00	<0.001
Chhardi	A	12	12	1.00	0.28	72.00	78.00	<0.001
	B	12	10	1.04	0.48	53.85	55.00	<0.001
Avipaka	A	14	12	1.12	0.60	46.43	78.00	<0.001
	B	14	13	1.12	0.40	64.28	91.00	<0.001

Table 2- Overall effect of Therapy on Rogabala, Dehabala, Chetasabala, Agnibala

Assessment	Group	n	N	Mean score		%	W	P
				BT	AT			
Rogabala	A	25	24	1.13	0.54	56.22	300.00	<0.001
	B	25	25	1.20	0.45	62.28	325.00	<0.001
Dehabala	A	25	14	1.62	1.10	45.22	105.00	<0.001
	B	25	20	2.04	0.98	57.20	210.00	<0.001
Chetasabala	A	25	18	0.74	0.39	49.83	171.00	<0.001
	B	25	17	1.08	0.57	54.68	153.00	<0.001
Agnibala	A	25	19	1.53	0.86	48.04	190.00	<0.001
	B	25	22	1.77	0.87	56.85	253.00	<0.001

Table 3-Effect of Therapy on Brief Psychiatric Rating Scale (BPRS)

Symptom	Group	n	N	Mean score		%	W	P
				BT	AT			
Tension	A	16	9	1.76	1.40	20.45	45.00	<0.001
	B	12	9	1.28	0.92	28.12	45.00	<0.001
Anxiety	A	5	5	0.60	0.36	40	15.00	>0.05
	B	7	7	0.68	0.40	41.18	28.00	<0.05
Depression	A	5	5	0.60	0.40	33.33	15.00	>0.05
	B	4	4	0.44	0.28	36.36	10.00	>0.05

Table 4-Comparison of effect of Therapy

Symptom	Group	<50	>50	x ²	p
Kukshi daha	A	13	4	4.30	Significant
	B	6	11		

<i>Amlodgara</i>	A	16	9	5.15	Significant
	B	7	18		
<i>Katu udgara</i>	A	16	9	3.93	Significant
	B	8	17		
<i>Avipaka</i>	A	13	1	5.90	Significant
	B	6	8		
<i>Balavridhhi</i>	A	24	1	7.46	Significant
	B	15	10		
<i>Swara Varna Yoga</i>	A	25	0	7.29	Significant
	B	17	8		
<i>Jirna Ahara Lakshanas</i>	A	20	4	52.59	Significant
	B	14	10		

Table 5-Overall effect of Therapy

Criteria	Effect of Therapy			
	Group A		Group B	
	No. of patients	%	No. of patients	%
Complete Remission	00	00	00	00
Marked Improvement	1	4	5	20
Moderate Improvement	11	44	14	56
Mild Improvement	13	52	6	24
Unchanged	00	00	00	00

CORRESPONDING AUTHOR

Dr. Aboli Patil

Lecturer, Dr. D.Y. Patil Ayurveda
College & Research centres-
Pimpri, Pune, Maharashtra, India
Email: drabolipatil@gmail.com

Source of support: Nil
Conflict of interest: None Declared