

ROLE OF AMA AS A PREDISPOSING FACTOR IN VARIOUS SAMPRAPATI (ETIOPATHOGENESIS) – A CASE STUDY

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ABSTRACT

Ama is a unique concept described by *acharyas* in Ayurveda. According to *acharyas* *ama* is a one of the main cause for occurring the various diseases. In this study 59 years old male patient came in OPD of the P D Patel Ayurveda Hospital with complains of abdominal pain, weakness and anorexia more than 1 year. Patient was diagnosed to have *raktapitta* but when clinical history was taken patient was found with many symptoms of *ama* like *gaurav* (heaviness), *bal-bhransh* (weakness), *klam* (tiredness without work). Patient was treated with anti *ama* remedies. After thirty days of treatment, his stool report was conducted and it was complete normal and also got relief in symptoms.

Keyword: *Ama, Raktapitta*

INTRODUCTION

In Ayurvedic classics, *Ama* which is the product of metabolic defect has been considered an important factor for the pathogenesis of the most of the diseases. Its importance is also reflected by the word *Amya* which is a synonym given to the *Vyadhi*.¹ It is essential to see the presence or absence of *Ama* in a patient before starting the treatment, because the line of treatment is totally different in case of *Samavastha* (presence of *Ama*) and *Niramavastha* (Absence of *Ama*). The substances, which remain undigested, disintegrated, foul smelling, excessive in quantity, slimy in nature, and causes stiffness of the whole body is known as *Ama*. In this definition the nature of *Ama* and symptoms produced by it are described.² Summing up, *Ama* is resultant of improper digestion or partially digestion of the food mate-

rials in presence of hypo functioning of *Jatharagni*. It is also the accumulation of *Malas* and *Prathmadoshadusti*. In case of *Dhatavagnimandya* it refers to the partially or incompletely metabolized *dhatu*.

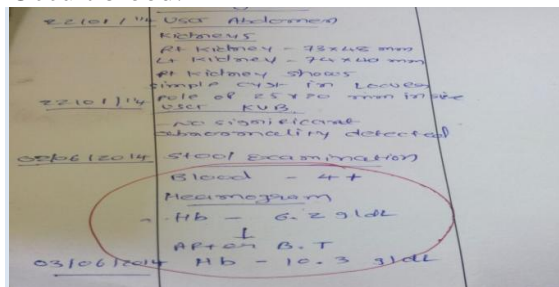
Case Report

A 59 years old male patient having complaints of abdominal pain, weakness, anorexia more than 1 year came at P.D Patel Ayurveda hospital on 3rd June 2014. Patients had sifting duty (day and night) in his job. Due to his part of his job, irregularly diet history was found. Then after before 14 to 16 month ago he has started above complains. He has visited physician of mahagujrat medical hospital. Physician gave him symptomatic treatment but patient did not get relief in above symptoms. Physician has advised him for abdominal ultrasonography (usg) but no significant abnormality was

found. Than after he was suggested for stool examination and in this study occult blood was found. Than after patient was treated with conventional medicine and also given two times blood transfusion (BT) for increasing blood level. Again he was advised for BT but he did not agree for this procedure. Again stool examination, Hb% and Ultrasonography of abdomen was done on 2nd June. So in short patient was not diagnosed for the probable or confirmatory causes of occult blood (in stool) by the doctors. Then patients came at P.D Patel Ayurveda Hospital in OPD Department on 3 June 2014 for the treatment of same complains.

Ultrasonography of abdomen (22nd January 2014): Right 73 * 48 mm, and left kidney 74 * 40 mm. right kidney shows simple cyst in lower pole of 25*20 mm in size No significant abnormality detected.

Stool examination :(on 2nd June 2014) :
Occult blood: 4+



Hematological examination: (on 2nd June 2014): Hb%= 6.2 gm/dl

After BT: Hb%= 10.3 gm/dl (on 3rd June 2014)

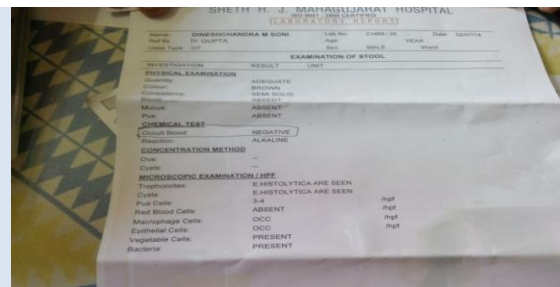
Treatment and Result:

Patient was treated with following *ayurvedic* management.

1. *Chitrak mula churna* 2 gm two times per day before meal.
2. Combination of *Hingvastak Churna* (1 Gm) + *Mustaa churna* (2gm) two times per day with hot water before meal.
3. Tablet *Haritaki* 3tablets (each tablet 500mg) at night with hot water.

Patient was treated with above treatment from 3rd June 2014 to 2nd July 2014. Patient's hematological and stool investigation was carried out. His Hb% was remaining steady without any ayurvedic or modern hematinic remedies. It was normal stool report. No occult blood was found in the stool.

Report of before treatment Report of after treatment:



DISCUSSION

This case was not showing features of any kind of direct bleeding history but occult but was seen in stool, that is why we consider it as case of *raktapitta*. During history we have also found symptoms of *ama* like *gaurav* (heaviness), *bal-bhransh* (weakness), *klam* (tiredness without work), and *alasya* (leaziness), *apkti* (loss of appetite).³ We have also found *rakta* was vitiated by *ama*.⁴ According to *Ayurvedic* principles of management in *samaavastha*(presence of *ama*) *dipan*, *pachan* and *anuloman* treatment was given to the patients⁵. After one month

of treatment stool examination was carried out and it was normal stool report. No occult blood was found in the stool. Through this treatment patient got remarkable improvement in his physical complains as well as in pathological investigations.

Role of medicament: According to *sharangdhar samhita dipan aushdha* ignited the *agni*(digestive fire) and *pachan aushdha* digest (metabolized) the *apkva ras*(*ama rasa*) in to *pakva*(formed) form.⁶ *Chitrak*(plumbago zeylanica) has both *dipan* and *pachan* property.⁷ *Hingvastak churana* has ingredient like *hingu*(asafoetida)⁸, *ji-*

rak(cumin seed), *lavan*(salt).⁹ All ingredient digest the *ama* dosha and give the strenghan to the *agni*(digestive fire).¹⁰ *Musta*(cyperus rotundus) has also *dipan-pachan* property.¹¹ *Haritaki* (terminalia chebula) is the best for *anuloman*. *Anuloman* also dose the *apakva mala*(unformed) in to *pakva*(formed) form.¹² *Chitarak* has *usan, tikshn, ruksh* property¹³ which is opposite to the *rakta guna* and can be increase the bleeding but due to presence of *ama* we followed and treated it with *ama chiikitsa sutra*(line of treatment) and got wonderful result.

CONCLUSION

This patient presented with responded rapidly to typical Ayurvedic management. The patient was treated with modern medicine but the potential benefit of Ayurvedic treatment was more and rapid without side effects.

Conflict of interest-None

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