

International Ayurvedic Medical Journal, (ISSN: 2320 5091) (March, 2017) 5 (3)

CONCEPTUL REVIEW ON ROLE OF MANAS HETU IN AMLAPITTA W.S.R.TO PEPTIC ULCER

Yasmin Fasiuddin Shaikh¹, Ujwala V. Pawar², Subhash S Saley³

¹P.G. Scholar, ²Guide & Professor, ³HOD,

Dept. of Rognidan & Vikritivigyan, Govt. Ayurved College, Nanded. Maharashtra, India

Email: Shaikhrijju901193@gmail.com

ABSTRACT

Amlapitta is most common disease of present time. It is seen in all age, all classes & all community. Ayurveda mentioned sharirik & manas hetu of diseases. As ahara, consequence of vihara, the manas bhava like chinta, shoka, bhaya, krodha are important factors to aggravate sadhaka pitta which further accumulate and cause vidagdhajirna. This type of ajeerna roots amlapitta. These similar factors role in peptic ulcer in modern science. The peptic ulcer occurs in stomach due to life style factors such as diet, stress, H.pylori bacteria, smoking, alcohol consumption.....out of which stress is important cause. Nowadays world is looking forward to ayurveda for safe treatment modalities. So it is essential to find out role of manas hetu in amlapitta, which would be helpful for better treatment.

Keywords: Amlapitta, Peptic ulcer, Manas hetu

INTRODUCTION

Chinta, Shoka, Bhaya, krodha etc. these are explained to manas bhava in ayurvedic samhita, are said to be manas hetu & cause disease. Charak has mentioned that sharirik & manas vyadhi are interdependent i.e. chronic sharirik vyadhi can disturb mental health & mansik vyadhi can affect sharirik health.

Amlapitta is one of most common disease seen in society. Amlapitta refers to set of symptoms caused by an imbalance between the acid secreting mechanism of stomach normally secrets acid that is essential in digestive process. When there is excess production of acid in

stomach, it results in condition known as *Amlapitta*. According to theories of ayurveda, all diseases are due to hypo-functioning of *agni*¹. As per *Sushruta*, improperly digested food becomes poisonous or toxic (*shukta*), this toxic juice combines with *pachak pitta* & creates a variety of *pitta* dominant disease. *Amlapitta* is one of them². *Amlapitta* is literary means a condition in which sourness of *pitta* gets increased.

An ulcer is lesion that occurs when skin surface or mucus lining is breached heals quickly. Ulcer occurs in stomach or intestine known as peptic ulcer or gastric ulcer. Peptic ulcer occurs in stomach, while duodenal ulcers occur in duodenum. Peptic ulcers are the areas of degeneration & necrosis of gastrointestinal mucosa exposed to acid-peptic secretion. Thogh they can occur at any level of alimentary tract that is exposed to HCL & Pepsin, they occur most commonly in either duodenum or stomach in ratio 4:1. In Ayurveda, it is a disease of *tridoshic* nature, but aggravation of *pitta* is most important.

Psychological stress, anxiety, fatigue may exacerbates as well as predispose to peptic ulcer disease. It occurs more commonly in people faced with more Stress & Strain of life.

AIM AND OBJECTIVES:

- To study etiology of Amlapitta in ayurvedic view.
- To study Role of *Manas hetu* in Amlapitta in ayurvedic view.
- To study *samprapti* of *Amlapitta* & role of *manas bhava* in it.
- To study etiological factor of Peptic Ulcer & role of stress factor in it.

MATERIAL AND METHOD:

This is a review article. References regarding peptic ulcers etiology from modern textbook and correlating with etiology and *samprapti* of *amlapitta* from *samhita granthas* were collected.

According to modern view, these are the etiological factors of Peptic Ulcer:

1. Life style such as Diet and Stress (psychological factor) – Dietary factors such as spice consumption, caffeine & coffee, also commonly thought to cause or exacerbate ulcers. Psychological Stress, anxiety, fear may cause or exacerbates as

- well as predispose to peptic ulcer disease³. It occurs more commonly in people faced with more stress & strain of life.
- 2. H.pylori bacteria Many peptic ulcer found to have chronic infection of the terminal portions of the gastric mucosa andinitial portions of duodenal mucosa, infection most often caused by bacteria Helicobacter pylori.⁴
- 3. Excess secretion of gastric juices increased secretion may be stimulated by bacterial infections or even in psychic disturbances.⁴
- 4. Excessive Smoking Presumably because of increased nervous stimulation of stomach secretory glands.⁴
- 5. Alcohol Consumption It tends to breakdown the mucosal barrier.⁴
- 6. Drugs (NSAID'S) This drugs that also have strong propensity for breaking down the mucosal barrier.⁴

Etiological factors of Amlapitta in Ayurvedic view:

According to theories of ayurveda, all the diseases are due to hypo-functioning of *agni*. *Mandagni* comes up due to hypo-functioning of *agni*. *Mandagni* comes up due to imbalance of *tridosha* & following eating, physical & mental habits:

- Improper eating habits
- Eating a lot fried foods, meat, sweets, heavy food & over eating.
- Eating incompatible food items
- Eating at irregular times (*vishamashan*)
- Eating before the last meal is fully digested (*Adhyashana*)
- Consuming too much tea, coffee, alcohol & smoking

- Emotional disturbance like stress, anxiety, fear etc
- Taking drug like antibiotics, painkillers, NSAID'S & steroids.

These all are very common & well known factors but, beside this according to Acharya Charak & Kashyapa, *Amlapitta* is generated by *Manas Bhava* which causes *Ajeerna* which is the root cause of all other disease. Conquering *amlapitta* is certainly a very important issue. The right way to fight against this disease is to become well informed about its various aspects specially "*Manas Bhava*" which are main causes of recurrence of it.

Samprapti (pathogenesis) of Amlapitta:

Charak has not mentioned Amlapitta as separate disease entity. The samprapti of Grahini Roga⁵ (IBS) mentioned by charak is able to explain pathogenesis of amlapitta. Ayurveda gives the emphasis on production of disease due to Mandagni mainly. Subsequently, Acharya charak mentioned that full balanced diet which has timely taken, cannot be digested if one in condition of Jelous, fear, anger or in sorrow mood. These all are psychological states that can cause Mandagni.⁵

There are two main conditions from which we must differentiate the disease amlapitta, those are vidaghdajirna & sampitta. Out of which sampitta is stage of Dosha. In amlapitta mainly Rasdhatu & Aam is involved as Dushya. In primary stage of vidagdhajirna, Alpa Jalpana can relieve the symptoms but in amlapitta along with Amla, drava guna is also increased. To understanding all this we should know Pitta, Pachak pitta, Sadhak pitta & Manas Bhaya first-

Pitta:

Pitta is concerned with the production of those physical & mental processes which are pronominally satvika nature. Its function are vision, digestion, heat production, hunger, thirst, softness of body, lustre, cheerfulness & intelligence. Its presence to be inferred in such mental phenomenon as intellection & clear conception, as also such physical phenomenon as digestion, assimilation, heat production, healthy appearance, courage, fear, anger, delight, confusion etc.

Pachak Pitta:

The concept of *Pachak pitta*⁸ is pointed to some internal secretion secreted by *agnidharakala* in *grahini* (corresponding to mucosal glands of the duodenum)

The combined bile & pancreatic juice which is discharged into duodenum in general sense exhibits the general characteristics to achcha-pitta. The slight viscosity of pitta-ishat, anadhikasneha, bears a resemblance to bile. The amla rasa of pitta can be traced to its contamination with gastric contents. The normal smell of pitta is apparently visra gandha (fleshy smell) & unpleasant, putrid odour due to fermentative & putrifactory changes-sama state of dosha. Its tikshnatwa & ushnatwa are possibly inferred from digestive function.

Sadhak Pitta:

Chakrapanidatta described sadhak pitta & identified its location as the hriday. The functions described by him to this pitta are Shaurya, bhaya, krodha, moha etc. 9

Sushrut & vagbhat have both made direct mention of sadhak pitta & described its location & functions in their respective works. The pitta located in hriday is to be known as

sadhakagni⁸; its function is to enable one to achieve ones aspiration.

Kashyapa has expressed the view that, all indrivas together with manas emerge from hriday. The enquiry therefore of sadhaka pitta which is stated to be located in hrudaya (heart & brain) & held to be responsible for some of higher mental activities as also for some of emotional states may have to be directed more towards the brain rather than to heart.

Manas Bhava:

In present era people, especially educated people are becoming very much conscious about their health. Everyone tries to eat proper & according to their body & work. They can control their diet, but still they fall ill. What is reason behind it? About three thousand year ago, Acharya charak described very clearly that, even salutary food taken in an appropriate quantity does not get digested, if the person is in state of *chinta*, *shoka*, *bhaya*, *krodha*. It will be seen from the foregoing that such emotional tensions of stresses as anger, anxiety, worry, fear etc. to which correlated *sadhakapitta* are stated to cause various somatic diseases.

Ayurveda has given the prime importance to *manas bhava* for occurrence of disease. It divided in two types: i.e. Sharirika (somatic) & *Manasika* (psychological)¹⁰. If a person is suffering from any *sharirika* diseases further it could be converted into *mansik* diseases after some duration & same *samprapti* is for conversion of *manas* diseases into *sharirika* disorder. If we discuss another point of view the *manasik bhava* play a vital part for the generation of diseases.

As well as *Tridosha*, *Triguna* (Satva, Raja & Tama) are constituent part of *manas*

bhava of a person commanded by manas depends upon *satva*, *tama* & *raja* guna, when *raja* & *tama* are dominant in a person it generates different negative emotions which causes many mental & physical disorders. ¹¹

Role of Manas – Bhava in Samprapti (Pathogenesis)

Manas hetu (psychological factors) causes vitiation of Doshas & Agni which results in *Agnimandya* (loss of digestive fire) and *Avipaka* (indigested) and in this stage even light diet cannot be digested. It remains as it in *amashaya* and produces *Shuktatva*, which leads to formation of *Annavisha*. This *Annavisha* produces *Ajirna* (indigestion). Once *Agnidushti* occurs it results in *Avipaka*, *Ajirna* and this further damage the agni. *Agnidushti* causes *Shuktpaka* of *Aahara*, it further disturb Agni.

Charaka has mentioned that if *Annavisha* produced by this pathogenesis mixes with *pitta*,it will produces *Amlapitta*. ¹³

Manas bhava play vital role in generation of amlapitta even after considering conduct of diet. As a result, Dosha especially Sadhaka pitta is vitiated and mix up with pachaka pitta and causes Mandagni. In this state of Mandagni whatsoever food material are consumed by a person, become Vidagdha and convert into Shukta (acid) form. This Vidagdha and vitiated Pitta later manifests in form of Amlapitta. Thus it makes clear that manas bhava mentioned above conceived in any form impairs the process of digestion and amlapitta occurs.

According to Modern view, the pathogenesis occurs in either of two ways:

(Due to psychological factor- Stress)

1. Excess secretion of acid and pepsin by gastric mucosa⁴

2. Dimished ability of the gastro-duodenal mucosal barrier to protect against the digestive properties of stomach acid pepsin secretion.⁴

DISCUSSION

Amlapitta is the commonest disease of fast food based modern life. There is involvement of Tridosha but with the dominancy of pitta and kapha in this disease. The pathogenesis of amlapitta categorized as mainly pitta on first place and kapha on second place and the least involved is vata. The conditions Pittavrita prana are nearer to symptomatology of Amlapitta. Hence, it seems that the Amlapitta is a disease condition produced due to Pitta-kaphavritta Vata mainly Prana & Samana. 14

Kashyapa has described that this disease occurs mostly to the person having the Jivhalaulya. ¹⁵Patients generally know the etiological factor of diseases but due to consume them and this disease progress to Kasthasadhya stage and it may manifest the Upadrava.

Agni in human body is not blazing fire as in phenomenal world; it is incorporated in the *Pitta*. The *Pitta* is direct indicator of status of *Agni* in body. *Amlapitta*, as is clear by it is a pathological condition in which *Pitta* assumes *Amlaguna*; which is its *Vikrta Guna*. *Kledana Karma* of *Amlarasa* in its hyperactive state is seen in the patients of *Amlapitta*. Due to aetiological factors, *Pitta* is vitiated, and so there is quantitative increases in its consistency (*Drava guna vruddhi*) and qualitative reduction in its functions (*Sva Karma Hani*). 16

Manas bhava play vital role in generation of amlapitta even after considering conduct of diet. As a result, Dosha especially

Sadhaka Pitta is vitiated and mix up with Pachak pitta nd cause Mandagni. In this state of Mandagni whatsoever food material are consumed by an unwise person, become vidagdha and converted into Shukta (acid) form, This Vidagdha and vitiated Pitta later manifest in the form of Amlapitta. Thus it makes clear that manas bhava mentioned above conceived in any form impairs the process of digestion and amlapitta occurs. So, also the psychological Stress factor aggravates the peptic ulcer due to mucosal digestion from hyperacidity most significant factor. Protective gastric mucus barrier may be damaged.³

CONCLUSION

Hence, it can be concluded that Psychology also plays a great role in maintaining the health of a person. An abnormal psychology of a person in terms of anxiety, anger, fear etc. would affect the physiology of digestion. These factors tend to affect the secretion of gastric juice and by that; they are disturbing the homeostasis, which interns *Amlapitta*.

Stress factor plays important role in to produce *Amlapitta* and also to aggravate the peptic ulcer due to hyperacidity.

REFERENCES

 Vagbhata: Ashtang Hriday with the commentaries Sarvangasundara of Arundatta & Ayurvedarasayana of Hemadri,edited by Hari Sadashiva Shastri Paradakar, reprint ed. Varanasi: Chaukhamba Surbharti Prakashan 2010, Nidana sthana chapter, page 513.

- Sushrut: Sushrut Samhita with Nibandhsangraha Commentary of shri Dalhanacharya & Nyayachandrika panjika of Gayadasacharya, edited by vd.vaidya Yadavji Trikamji, reprint ed. Varanasi, Chaukhamba Surbharati Prakashan 2012.Sushrut sutrasthana chapter 46,page 251.
- 3. Textbook of Pathology- Author Harshmohan, publisher Anshan, 5th edition,2015.
- 4. Textbook of Medical Physiology, publisher-Harper Voyager, Author C.Guyton, John E.Hall,11th edition,2015.
- 5. Agnivesha: Charak Samhita, elaborated by Charaka & Dridhbala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by vaidya ydavji Trikamji, Chaukhamba Surbharti Prakashan, 2011. Chikitsa sthana chapter 15, verse 44, page 517.
- 6. Agnivesha: Charaka Samhita, elaborated by Charaka & Dhridhabala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by Vaidya Yadavji Trikamji, reprint ed. Varanasi: Chaukhamba prakashan 2011, chikitsa sthana chapter 12,page 80.
- 7. Agnivesha: Charaka Samhita, elaborated by Charaka & Dhridhabala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by Vaidya Yadavji Trikamji, reprint ed. Varanasi: Chaukhamba prakashan 2011,chikitsa sthana chapter 18,page 109.
- 8. Sushrut: Sushrut Samhita with Nibandhsangraha Commentary of shri Dalhanacharya & Nyayachandrika panjika of Gayadasacharya, edited by vd.vaidya

- Yadavji Trikamji, reprint ed. Varanasi: Chaukhamba Surbharati Prakashan 2012.Sushrut sutrasthana chapter 21,page 101.
- 9. Vagbhata: Ashtang Hriday with the commentaries Sarvangasundara of Arundatta & Ayurvedarasayana of Hemadri, edited by Hari Sadashiva Shastri Paradakar, reprint ed. Varanasi: Chaukhamba Surbharti Prakashan 2010, Sutra sthana chapter12, page 101.
- 10. Agnivesha: Charaka Samhita, elaborated by Charaka & Dhridhabala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by Vaidya Yadavji Trikamji,reprint ed. Varanasi: Chaukhamba prakashan 2011,Sutra sthana chapter 1,verse 55,page 15.
- 11. Agnivesha: Charak Samhita, elaborated by Charaka & Dridhbala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by vaidya ydavji Trikamji, Chaukhamba Surbharti Prakashan, 2011. Sharir sthana chapter 4, verse 36, page 323.
- 12. Agnivesha: Charak Samhita, elaborated by Charaka & Dridhbala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by vaidya ydavji Trikamji, Chaukhamba Surbharti Prakashan, 2011. Chikitsa sthana chapter 15, verse 44, page 517.
- 13. Agnivesha: Charaka Samhita, elaborated by Charaka & Dhridhabala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by Vaidya Yadavji Trikamji, reprint ed. Varanasi: Chaukhamba prakashan 2011,chikitsa sthana chapter 12,page 80.

- 14. Vagbhata: Ashtang Hriday with the commentaries Sarvangasundara of Arundatta & Ayurvedarasayana of Hemadri, edited by Hari Sadashiva Shastri Paradakar, reprint ed. Varanasi: Chaukhamba Surbharti Prakashan 2010,Nidana sthana chapter16,page 538
- 15. Vriddha Jivaka: Kashyapa samhita revised by Nepal Rajaguru Pandit Hemaraja Sharma with vidyotini hindi commentary by sri. Satyapala, Bhishagacharyas, reprint ed. Varanasi: Chaukhamba Sanskrit sansthan 2012, Khila sthana chapter 16, verse 18, page 336.
- 16. Shri Madhavkar: Madhava Nidana Uttarardha) with the Madhukosha Sanskrit commentary by Shrivijayrakshita & Shrikanthadatta & vidyotini hindi commentary bv shri Sudarshan Shastri, revised & edited by prof. Yadunandan Upadhyaya, reprint ed. Varanasi: Chaukhamba Prakashan 2008.chapter 51, verse 3-6, page 203.
- 17. Vriddha Jivaka: Kashyapa samhita revised by Nepal Rajaguru Pandit Hemaraja Sharma with vidyotini hindi commentary by sri. Satyapala, Bhishagacharyas,reprint ed.Varanasi: Chaukhamba Sanskrit sansthan 2012,Khila sthana chapter 16,verse 10,page 336.
- 18. Shri Madhavkar: Madhava Nidana (Uttarardha) with the Madhukosha Sanskrit commentary by Shrivijayrakshita & & hindi Shrikanthadatta vidyotini Sudarshan commentary by shri Shastri, revised & edited by prof. Yadunandan Upadhyaya, reprint ed.

- Varanasi: Chaukhamba Prakashan 2008.chapter 51,verse 1-2,page 203.
- 19. Textbook of Clinical Medicine Publisher Saunders, Author Parveen Kumar & Michael Clark,9th edition,2016.
- 20. Vriddha Jivaka: Kashyapa samhita revised by Nepal Rajaguru Pandit Hemaraja Sharma with vidyotini hindi commentary by sri. Satyapala, Bhishagacharyas, reprint ed. Varanasi: Chaukhamba Sanskrit sansthan 2012,Khila sthana chapter 16,verse 31,page 538.
- 21. Agnivesha: Charak Samhita, elaborated by Charaka & Dridhbala with the Ayurvedadipika Commentary by Chakrapanidatta, edited by vaidya ydavji Trikamji, Chaukhamba Surbharti Prakashan, 2011. Vimana sthana chapter 2, verse 9page 238.
- 22. Vriddha Jivaka: Kashyapa samhita revised by Nepal Rajaguru Pandit Hemaraja Sharma with vidyotini hindi commentary by sri. Satyapala, Bhishagacharyas, reprint ed. Varanasi: Chaukhamba Sanskrit sans than 2012, Khila sthana chapter 16,verse 3-6,page 335.

Source of Support: Nil Conflict Of Interest: None Declared

How to cite this URL: Yasmin Fasiuddin Shaikh Et Al: Conceptul Review On Role Of Manas Hetu In Amlapitta W.S.R.To Peptic Ulcer. International Ayurvedic Medical Journal {online} 2017 {cited March, 2017} Available from: http://www.iamj.in/posts/images/upload/906_912.pdf