

COMPARATIVE STUDY OF SHANKHA BHASMA AND GUDUCHI SATVA IN THE MANAGEMENT OF URDWAG AMLAPITTA

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Amlapitta is one of the major diseases caused by life style changes and its prevalence is increasing day by day. In modern science the disease is caused by irregular food habits, addiction of alcohol and tobacco, micro organisms like E-coli and certain idiopathic factors which lead to dyspepsia. *Charaka* and *Kashyap* have clearly indicated that, the *grahani dasha* and *amlapitta* occur in the persons who could check the temptation of food. *Ajirna* after encountering the specific *doshas* and affinity with specific site may cause various diseases. *Annavisha* produced due to *ajirna* when mixes with *pittadi dosha*, and lodges in *amashya* produces *amlapitta*. Irregular food habits, suppuration of natural urges, lack of proper sleep and less time for relaxation, increased dependence on addiction like tobacco, and alcohol are being part of our life which enhances incidences of many diseases mainly having psychosomatic origin are increasing due to urbanization, high industrial growth, deforestation, at a drastic speed.

In our *granthas*, *acharya* suggested *shodhan* as well as *shaman chikitsa* for *amlapitta*. But as we said *nidan pariwarjan* is always the best line of treatment, here the study is concerned to study the details about disease *amlapitta* and its management by

shaman vidhi like *guduchi satva* and *Shankha bhasma*.

The study was conducted in 100 patients. They were divided in to two groups
1) group A-*guduchi satva*. 2) group B – *shankha bhasma*.

1) Age- maximum number of patients was from age group of 31-40yr's. i.e. 40%. 26.66% patients were from age group of 20-30yr's. 20% patients were from age group of 41-50 yr's and 13.37% of patients were from age group of 51-60 yrs. Probable cause for increasing in this age group may be more exposed towards changing environment and mental stress.

2) Sex- It was observed maximum numbers of patients registered i.e.56.66% were male, and 43.33% were female does not make any particular conclusion. In this fast life style, male and female both are suffered from mental stress and irregular intake, spicy food which leads to aggravation of the process of *amlapitta*.

3) Occupation- maximum numbers of patients i.e. 31.66% were house wives. It was observed that most of the housewives were in the habit of the *diwaswapna* and that leads to *agnimandya* and *tridosha prakopa* and then *amlapitta*. In service persons are suffering from mental stress which is important cause of *amlapitta*.

4) Family history- maximum numbers of patients' i.e.68.33% were having history of this disease in the family. *Ancient acharys* have not indicated any hereditary predisposition of this disease but according to modern medicine patient's with 'o' blood group a hereditary predisposition of this disease (acid peptic disease). The observation of family history suggests that, diet pattern and environment also plays an important role as the 31.66% of cases had no family history.

5) Diet pattern- maximum number of patient's i.e.75% was mixed diet while the rest were having vegetarian food. Maximum numbers of patients were having habit of irregular food intake. Non-vegetarian diet and irregular pattern of food intake lead to *agnimandya* and *tridosh dushti*, which also lead the aggravation of this disease.

6) Addiction- maximum number of patient's i.e. 100% had addiction of tea or coffee. 15 % had addiction of alcohol. 25% had smoking habit and 28.33% patient's had addiction of tobacco. 11.66% patient's had addiction of misri. These factors are mostly irritant to gastric mucosa, and thus cause *daurbalya of amashya* along with vitiation of *dosha* mainly *pitta dosha*.

7) *Koshta*- maximum number of patient's i.e.56.66% was having *Madhya koshta*. While 21.67% were having *krura koshta*.

8) *Agni*- maximum number of patient's i.e. 45% were having *visham agni*, while 35% were having *manda agni*. 15% were having *tikshna agni* 5% were having *samagni*. Because of *visham agni pitta dosha* provokes and causes *amlapitta*.

9) *Prakurti*- maximum number of patient's i.e. 43.33% was having *vata pitta prakurti*. *vata pitta prakurti* dominant patient's were more prone to get *vataj and pittaj* disease,

because of *mithya ahara* and *vihar* . All these *doshas* get vitiation and produce *amlapitta*.

10) Sleep- 41.66% has regular sleep history, while 58.33% patients were having irregular sleep. It shows that, irregular sleep and lack of sleep also trigger's *amlapitta*.

11) Chronic - 75% patient's were chronic of 0-12months and 20% patient's were chronic of 1-2 years. 5% patient's had chronic more than 2 years. According to this observation most patients self medicate, for the symptom's causing them to subside temporarily. But with time, the symptoms aggravate and become chronic in nature.

12) Etiological factor- maximum number of patient i.e.68.33% were having *vidhahi bhojan* and *vishamashan* amongst *hetus* followed by *diwaswap* was found in 60% of patients. *bhukta swap* was 56.66% and *abhojan* in 43.33%of patient's. *adhyashan* found in 28.33% of patient's, *parayush* it in 25%. *Atibhojan* found in 20% of patient's. *vegadharan* and *bhuktesasn* were found as *hetu* in 16.66% and 8.33% patient's respectively.

Hence we can have conclusion remarks as follows:

1) *Urdwag amlapitta* is one of the most common *vyadhi* and an incident of this *vyadhi* is very high in present era, and increasing day by day.

2) The age group from 31-40 yrs are more prone to this disease as in this age group are more exposed towards changing external environment and mental stress.

3) *urdhwag amlapitta* is one of the disease in which the *pitta dosha* is mainly responsible for the manifestation of the disease. *amlapitta* is the a condition where excessive secretion of *amlaguna* of *pitta*

takes place or *amlaguna* increases due to *samata* causing *vidahi* condition.

4) Some new *hetu* were found other than *ayurvedic* text's like, *Ratrijagran*, addictions, medicine intake, and those can be correlated with respective category of *ayurvedic hetu*.

5) Due to huge similarity between sign and symptoms in the disease is correlated with acid peptic disorder.

6) The drug *Guduchi satwa* has better results than *Shankh bhasma* in *amlapitta*.

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