

## CLINICAL STUDY TO EVALUATE THE EFFICACY OF AMALAKI RASAYAN AND MUKTA PISHTI IN PITTA SHAMAN - A RESEARCH ARTICLE

[Sukhdev Khatotra<sup>1</sup>](#), [Samiksha Sharma<sup>2</sup>](#)

<sup>1</sup>Assistant Professor, <sup>2</sup>P.G Scholar

(P.G Department of Kayachikitsa, Jammu Institute of Ayurveda and Research, Jammu), India

Corresponding Author: [samikshasharma2306@gmail.com](mailto:samikshasharma2306@gmail.com)

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### ABSTRACT

Owing to a busy lifestyle and wrong eating habits, the disease of *Annavahasrotas* is common in the present era. *Acharaya Kashyap* has accepted the involvement of three *Doshas* while *Madhavkar* accepted the dominance of pitta in this disease. *Acharya Charak* has not mentioned it as a separate disease but as one of the symptoms. The present study aimed to find out the efficacy of *Amalaki Rasayan* and *Mukta Pishti* in *Amlapitta*. A total of 30 patients were taken in three equal groups. Group A of 10 patients was treated with oral administration of *Amalaki rasayan*, in group B 10 patients were treated with *Mukta Pishti* and in group C 10 patients were treated with both. After conducting a clinical trial on 30 patients, observations and results were obtained.

**Keywords:** *Amlapitta*, *Amalaki Rasayan*, *Mukta Pishti*

### INTRODUCTION

The word '*Amlapitta*' is comprised of two words '*amla*' and '*pitta*' (gastric juice). In *Amlapitta* the quantity of *Pachak Pitta* is increased, its quality normal, bitter taste is changed to more sour taste as a result of

fermentation, because of this increased sour quality of *pitta* it is called *Amlapitta*. Stress, strain, anxiety, improper food habits, accelerate the citation of *Dosha* by disturbing the action of *Agni*. *Pitta dosha* in the

body is responsible for the production of *dhatu*, for digestion, helps in vision, regulates body temperature and complexion controls all systems big body and acts as a cognitive factor. It may become unbalanced due to *pitta prakopa* ahara and Vihara. Madhur, tikta, kashaya, cold drugs and activities cool the body and pacify the vitiated pitta dosha. *Amalaki rasayan* and *mukta pishti* both have properties to pacify *pitta dosha* that's why considered as the treatment of *pitta prakopa vikara* because they discontinue pathological series (*samprapti vighatan*) and stop changing the process of presumptions into symptoms.

#### **AIM AND OBJECTIVES:**

Comparative study on the efficacy of *Amalaki Rasayan* and *Mukta pishti* in the management of *pitta vriddhikar* disorders and on symptoms of *pitta prakopa*.

#### **MATERIALS AND METHODS**

##### **1) SELECTION OF THE PATIENT:**

The concealing strategies were held in OPD and IPD of Jammu Institute of Ayurveda and Research, Jammu. Patients having complaints of *pitta prakopa* or related disorders.

##### **2) GROUPING OF THE PATIENTS:**

A total of 30 patients were registered for the study and grouped under three based on the drug administration.

Group A - This group of 10 patients were scheduled with *Amalaki Rasayan*,

Group B -This group of 10 patients were scheduled with *Mukta pishti*.

Group C - This group of 10 patients were scheduled with *Amalaki Rasayan* and *Mukta pishti*.

##### **3) DRUG DESCRIPTION:**

*Amalaki Rasayan* and *Mukta pishti* both have drugs with mild potency (sheet virya) and sweetish digestion (*madhur vipaka*) which helps to pacify tridosha. Specially *Amalaki Rasayan* fruit is a laxative that helps to clean out the excessive pitta Dosha from the body (*virechana* is the treatment of *pitta prakopa*) and is tonic which helps to nourish the body when excessive *Pitta* demands over nourishment otherwise can damage the soft tissues or mucous membranes of body channels. The fruit of *Emblica Officinalis* is useful in

acid peptic ulcers and non-ulcer dyspepsia. *Mukta*(pearl) possess anti acidic, refrigerant, and tonic properties.

##### **4) DOSE AND DURATION OF DRUGS:**

2 grams of *Amalaki Rasayan* were administered with the Anupana of *Madhu* twice a day i.e., morning and evening, whereas 125 mg of *Mukta pishti* were administered with water twice a day, till 30 days of the duration.

##### **RESULTS:**

Symptoms of *pitta pakopa* and their related disease were assessment factors for the study, the outcome after the drug administration showed the comparative effect of both drugs on the various complaints, reported by the patients.

#### **DISCUSSION**

Sex incidences of screened patients were showed high prevalence in male than female 20: 10, maybe due to excessive physical and mental exercise performed by males and have a tendency to express more anger, which is one of the main causative stimulations to enhance the pitta Dosha, Occurrence of *pitta vriddhi* were found more in between the age group of 16 year - 30 year, which reflects more apprehension in the middle age group as mentioned in Ayurveda. All selected patient belongs to Hindu community, this factor does not show the high incidences among Hindus, area of screening was belonging to Hindu locality. A maximum number of cases were related to educational occupation or were highly educated, excessive mantel exercise, tension, the pressure of studies and worries can produce the symptoms of *pitta prakopa*.

Addiction to tea, coffee or tobacco may also cause *pitta prakopa* and its related diseases. Person of *pitta prakriti* has *mridu koshtha* (mild), are vulnerable to *pitta vikara*. Because *samagni* (uniform) is sensitive to become *vishama Agni* (alter), the census of cases support that, the maximum number of patients were found from the group of *pitta prakriti* and of *Sama Agni*.

**Table 1**

S.No.	Symptoms	Group A			Group B			Group C		
		B.T.	A.T.	Imp. %	B.T.	A.T.	Imp. %	B.T.	A.T.	Imp. %
1.	<i>Amlaka</i> (Acid eructation)	8	2	75.00%	6	1	83.33%	9	1	88.88%
2.	<i>Atripiti</i> (nonsatisfaction)	3	1	66.66%	5	1	80.00%	8	1	87.50%
3.	<i>Trishna adhikya</i> (Excessive thirst)	6	2	66.66%	7	2	71.42%	7	2	71.42%
4.	<i>Tikta asyata</i> (Bitter taste)	9	3	66.66%	7	1	85.71%	9	1	88.88%
5.	<i>Ushma adhikya</i> (Over hotness)	5	2	60.00%	4	3	25.00%	9	2	77.77%
6.	<i>Sweda atipravriti</i> (Excessive sweating)	3	2	33.33%	4	2	50.00%	5	2	60.00%
7.	<i>Gatra daurgandhyam</i> (Disagreeable smell)	5	3	60.00%	2	2	00.00%	6	3	50.00%
8.	<i>Kantha shoushta</i> (choking)	7	2	71.40%	9	2	77.77%	8	4	50.00%
9.	<i>Raktasphota</i> (Red vesicle)	3	1	66.66%	3	2	33.33%	7	4	42.85%
10.	<i>Raktamandala</i> (Red wheals)	7	5	28.57%	3	2	33.33%	8	3	62.50%
11.	<i>Asyapaka</i> (Stomatitis)	7	2	71.4%	6	1	83.33%	7	3	57.14%
12.	<i>Ausha</i> (Heating)	4	2	50.00%	5	1	80.00%	6	2	53.33%
13.	<i>Plosha</i> (Scorching)	5	4	20.00%	4	2	50.00%	5	1	80.00%
14.	<i>Antardaha</i> (Burning sensation inside the body)	2	1	50.00%	4	1	25.00%	6	2	66.66%
15.	<i>Davathu</i> (Boiling)	5	4	40.00%	3	3	00.00%	6	3	50.00%
16.	<i>Arti</i> (Uneasiness)	6	2	66.66%	6	3	50.00%	3	0	100.00%
17.	<i>Klama</i> (Tiresome)	5	4	20.00%	4	3	25.00%	6	1	83.33%
18.	<i>Nishatva</i> (Irritation)	6	4	33.33%	5	4	20.00%	7	2	71.42%
19.	<i>Alpanidra</i> (Sleeplessness)	7	2	71.40%	6	1	83.33%	3	1	66.66%
20.	<i>Sheeta abilasha</i> (Desire for coolness)	6	2	66.66%	3	1	66.66%	5	1	80.00%
21.	<i>Madhur sheeta</i> ( <i>kashaya</i> <i>Abilasha</i> )	1	1	00.00%	4	4	00.00%	5	1	80.00%

## CONCLUSION

Group A showed 54.54%, Group B showed 58.41%, Group C showed 70.37% favourable results to pacify the pitta prakopa. Statistical observations represent the 't' value of Group A = 12.73, Group B = 11.70 and of Group C = 15.80%. The comparison between the results of both drugs favours best *Mukta pishti* as compared to *Amalaki Rasayan*, but the combined effect of both drugs found the best outcome on pitta vriddhi. *Amalaki Rasayan* showed the best response on acid education (75%) and the least response on the desire of Madhur, tikta kashaya dravya. *Mukta pishti*

showed the best response in bitterness of buccal mucosa (85.71%) and least response on disagreeable smell, boiling, desire to have Madhur tikta kashaya articles (0%). Both drugs combined have a good response on arti (uneasiness) 100% and the least effect on red vesicles (42.85%). Because both drugs have physical properties in contrast to the intensity of pitta (Agni) i.e. cold, *madhur vipaka* and also they both were formulated, either with the same compound. That's why this suggests appropriation of both drugs on pitta vriddhi, and various disorders related to pitta.

GROUP	PERCENTAGE	D	S.E	t value
A	54.5%	1.490	0.471	12.73
B	58.41%	1.595	0.504	11.70
C	70.37%	1.900	0.601	15.80

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