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ETIOPATHOLOGICAL PERSPECTIVE OF AMLPITTA W.S.R. TO GERD AND ITS MANAGEMENT: A REVIEW

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ABSTRACT

In Ayurveda, gastroesophageal reflux disease (GERD) can be associated with syndrome like *Amlapitta*, characterized by the vitiation of *Pitta Dosha*. Generally, *Pitta* has *Katu Rasa*, but when it is subjected to *Vidagdha* conversion and develops *Shukti Bhava* it leads to the formation of *Amlata* in the *Amashaya*. GERD is the similar types of gastrointestinal disorder, defined by the reflux of stomach contents past the lower esophageal sphincter into the esophagus. The classic symptoms of GERD include heartburn, epigastric discomfort and regurgitation. Exacerbated *Vata Dosha* leads to *Vishama Gati* in the *Annavaha Srotas*, causing *Pitta* to be displaced from its original location. Ayurvedic principles of therapeutic management include utilization of *Vatanulomana*, *Pitta Shamana*, *Agnideepana* and *Ama Pachana* therapies along with implementation of *Shodhana* procedures. Present article summarizes etiopathological perspective of *Amlpitta* W.S.R. to GERD and its management through ancient approaches.

KEYWORDS: Ayurveda, Amlpitta, GERD, Pitta Dosha, Ama Pachana.

INTRODUCTION

Gastroesophageal reflux disease or GERD is a condition where the gastric contents backflow into the esophagus and even the respiratory tract at times. Non-abidance by *Dincharya* and *Ritucharya* and taking up unhealthy habits like smoking and alcoholism worsens the imbalance in the body functions, particularly on the gastrointestinal system. In the contemporary age the life style of people has been drastically altered. Higher stress levels, dependency on fast foods, anxiety and irregular eating habits have greatly attributed to digestive disorders. These life style alterations interfere with the natural balance of *Tridosha*, vitiating *Pitta Dosha* and lay the ground for conditions such as gastritis, hyperacidity, dyspepsia, peptic ulcer and GERD, which is similar to the condition like *Amlapitta*. [1-3]

Samprapti

Excessive exposure to the *Nidanas* causes vitiation of *Vata* and *Pitta Doshas*. This vitiation causes *Mandagni*, affecting digestion. Subsequently improper digestion of food leads to *Vidagdha Paka*, this undigested food gets accumulated in the stomach and ferments, which converts further consumed food into a *Vidagdha*

condition. This state develops into *Vidagdhajirna*, which is the *Purvarupa* of *Amlapitta*. With continued interaction of the aggravated *Pitta* with the fermented food, *Sama Pitta* results, which ultimately develop into *Amlapitta*.

The disease in due course of time develops to *Bheda Avastha* with two major types as mentioned in **Figure 1**. As mentioned in figure, *Urdhvaga Amlapitta* possesses ascending movement of vitiated *Pitta* and *Adhoga Amlapitta* possesses descending movement of vitiated *Pitta*. These conditions can cause complications like *Jwara*, *Atisara*, *Shula*, *Shotha*, *Aruchi*, *Bhrama* and *Pandu*. [3-6]

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Figure 1: Various types of Amlapitta.

Nidana

- Aharaja Hetu is predominant in the etiology of Amlapitta, eating food in violation of principles of Ahara Vidhi-Vidhana and Ahara Vidhi Viseşayatana is said to be the most predominant factor. Viruddhahara, excess intake of Katu, Amla, Vidahi and Bharjita Anna, etc. are agitates Pitta Dosha and affects the process of digestion leading to the manifestation of Amlapitta.
- Viharaja Hetu includes disturbed pattern of lifestyle, these involve improper times of meal, sleeping disturbances, and suppression of natural urges, violations of daily practices interferes with the balance of Doshas, particularly Pitta, thus disturbing the digestive balance. Repeated infringements of these principles give rise to Amlapitta.
- Manasika Hetu also contributes equally towards the imbalance of digestive health. Emotional imbalance in the form of anxiety, anger, stress and greed can upset the natural physiology of digestion. These can decrease the secretion of digestive juices, make their abnormal release, or bring about hyper secretion. All these culminate in Pitta aggravation and hence in the development of Amlapitta.
- Agantuka Hetu includes iatrogenic factors since Amlapitta can occur as a result of the inappropriate use or side effects of contemporary medicines. Likewise, inappropriateness in the use of Ayurvedic medicines, specifically unpurified Rasa Aushadhis and excessive use of Ushna and Tikshna medicines without proper evaluation can also cause Amlapitta. Wrong usages of Panchakarma treatments may disrupt Agni and give rise to the disease. In addition, Amlapitta may also arise as an Upadrava of some other gastrointestinal ailment such as Vibandha, Arsha and Pandu. [6-8]

Rupa (Clinical Features)

- Avipaka, Kanthadaha and Klama
- Tikta-Amla Udgara, Gaurava and Aruchi
- Utklesha, Hriddaha and Antrakujana
- Vidbheda, Udara Adhmana and Hritshoola, etc.

Treatment

Nidana Parivarjana means avoidance of causative factors is important approach for the treatment of Amlapitta. Triggers that should be avoided are Adhyashana, Atibhojana, Guru, Abhishyandi and Vidahi foods. Lifestyle habits like Vegadharana, daytime sleep after food intake and Ratrijagarana must also be

avoided.

Shodhana Chikitsa play vital role as purification measure, Sushruta prefers Vamana in Amashayagata Vata, while Virechana is preferred by Charaka in similar types of conditions. Both the therapies assist in cleaning the affected Srotas and removing the disease from its place of origin. Before the application of these processes, Snehana and Swedana are required for enhancement of esophageal peristalsis and tone of lower esophageal sphincter by pacification of Vata and maintaining Vatanulomana. Virechana is particularly effective in eliminating Pitta Dosha and is also beneficial when Kapha Dosha is present or is located in Pitta Sthana. It clears the Annavaha and Purishavaha Srotas, boosts Agni and maintains correct Vata movement. [7-9]

Avurvedic Preparations for GERD

- Shankh Vati, Mahashankh Vati, Sanjeevani Vati and Lashunadi Vati
- Avipattikar Churna, Hingwashtak Churna Shaddharana Churna, Mulethi Churna, Shatavari Churna and Amalaki Churna
- Kamdudha Rasa, Sutshekhar Rasa and Lilavilasa
- Shatavari Ghrita and Drakshadi Ghrita

These preparations are designed to balance Pitta, enhance digestion, calm Vata and work as Deepana and Pachana, to improving digestion and reducing gas and acidity. Their antacid property helps to suppress symptoms of disease. These drugs are considered useful for Aam Pachana action, managing digestive toxins and deranged Agni, particularly in Sama Amlapitta. Their Vatanulomana property relives from the upward movement of gastric reflux. These drug offers laxative and Pitta-shamak action, thereby manages acid reflux and constipation. They also helps in digestion and manages bloating by regulating *Vata*, whereas their *Aam* pachana effect is considered beneficial in Sama Amlapitta. These drugs exert antacid action, calming the gastric mucosa and promoting ulcer healing. Their cooling, Pitta-shamak and mucosa-protective actions nourishes and rejuvenates the GI lining and offers antiinflammatory effects. Sutshekhar Rasa excessive Pitta and is especially indicated in Sama-Pitta conditions of indigestion and nausea. Ghrita preparations serve a nourishing and cooling function, soothes Pitta and repairs the lining of the gut. Ghrita possessing Rasayana and Pitta-shamak properties; alleviates

burning and eases digestion in Pitta-predominant Amlapitta. [7-10]

CONCLUSION

Gastroesophageal Reflux Disease (GERD) is a chronic upper gastrointestinal disorder that has a substantial impact on quality of life and is becoming more prevalent globally. It results from the retrograde flow of stomach acid or contents into the esophagus. Its symptoms and signs are very similar to those of *Urdhwaga Amlapitta*. The pathogenesis includes several factors like *Vata Prakopa*, *Udavarta*, *Pitta* displacement from its normal site, *Kapha Kshaya*, *Agnimandya* and *Amlapitta*, etc. are culminating in a complicated interaction between *Dosha* and *Dushya* that ultimately expresses itself as GERD. Early diagnosis and treatment of symptoms will prevent complications. Lifestyle adjustments and improvements in acid suppression remain the basis of GERD management.

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