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Research Paper

Virechana Karma in Managing UrdhwaAmlapitta

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ABSTRACT:

The 'Amlapitta' is composed of words Amla and Pitta. The term Amla has been used as an epithet to Pitta. Though, the Amla has been said a natural property of Pitta along with Katu-Rasa according to Charaka. The Apakarshana, Grahana and Munchana Karma of Vayuare essential for proper digestion. Any exacerbation or cessation in these function will lead to improper digestion. As certain time is required for proper digestion, delayed emptying will cause the Shuktapaka and formation of Amavisha, which are the essential factors of GrahaniDosha. It is clear that all secretary regulations can be termed as function of SamanaVayu. If SamanaVayu is disturbed it will lead toAjirna stage like and start the pathogenesis of G.I.T. diseases. The etiological factors like Krodha, Shoka, Bhaya, Chinta and other stress factors work through the Vagus chain, which is said to be mediating through Vayu. Provocation of Vata by any factor will result in hyper-secretions leading to hyperacidity. The symptoms of UrdhvagaAmlapitta are due to disturbance in Dravata and Ushntaof pachakapitta and SnigdhataofKledakaKapha. As this disease is Chirakaria long duration of treatment is required. Process of Shodhana (VirechanainUrdhwaAmlapitta) plays a vital role in the management of Amlapitta.

KEYWORDS: Amlapitta, Ajirna, Grahana, Munchana, SamanaVayu, Virechana.

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I. INTRODUCTION:

Though the disease Amlapitta is not explained in Charaka as a full-fledged disease, but there are several references regarding Amlapitta. Sushruta and Vagbhata does not mention the word Amlapittathough, Charaka has mentioned it. Kashyapa is the first person, who described the disease Amlapitta so elaborately and gives the due importance to disease and its management. Madhavakara has described the disease separately by giving full status to disease Amlapitta. In modern science, Gastritis and non-ulcer dyspepsia can be correlated with Amlapitta. Kashyapa and Madhavakara have different opinion in giving the etiological factors. Kashyapa has utilized the sequence described by Charaka in GrahaniDosha for explaining the pathogenesis of Amlapitta. Kashyapa has mentioned the Nidanas which represents the involvement of all the three doshas, while Madhavakara has given PittaPrakopaka factor. This disease is the result of GrahaniDosha. This disease is mainly caused by Mandagni. In the state of Mandagni whatsoever food material are consumed by an unwise person, it becomes Vidagdha and are converted into Shukta (acid) form. This Vidagdha and the vitiated Pittalatter manifest in the form of Amlapitta (Ka.Khi. 16). The role of Rasa and Rakta as the Dushyais very clear in this disease.

This disease is *Chirakari*in nature and difficult to treat and mostly occur in people who does not follow the code of healthy eating and diet selection. In chronic stage this may lead to ulceration condition. This disease mainly involves the *Rasa*, *Rakta*, *Annavaha* and *PurishavahaSrotasa*. In chronic stage there is possibility of progression to the *Dhatugatatva* of disease. Mainly there are two types of *Amlapitta*, *Urdhvaga* and *Adhoga*. The Chikitsa Sutra of this disease mentioned by *SangrahaGranthas* includes the use of *Vamana* and *Virechana* along with *Tikta Rasa* and drug having *LaghuRuksha* property.

II. DISCUSSION:

Mode of Action of Virechana:

Action of Virechana Karma can be divided in the following two ways.

Systemic: by which it brings down the morbid *Doshas*, particularly *pitta* from the body to *amashaya* or *Pakawashaya* i.e. G.I.T.

Local Evacuant : which is concerned with the evacuation of these *doshas* in form of *mala* from the gut by purgation both the action and related factors are described above.

From the above description, a hypothesis can be postulated that due to the *virya*of the *virechaka*drug softening, disintegration, liquification occurs of those endogenic metabolic products which cannot be excreted through body secretion as such.

Probable Mode of Action of Virechana in Amlapitta

In this particular disease, *Purva Karma* like *Sneha Karma* acts in two fold manner. It preconditions the patient for *Shodhana* and at the same time acts as *Shamana*. When any *Sneha* is administered internally, it spreads through all the *SukshmaSrotasa* and makes the body soft and disintegrates accumulation of morbid matter. Apart from this action *Sneha* acts as additional layer to the mucosa of *Aamashaya* and *Pachamanashaya* and protects from the deleterious action of the *AtitikshnaPachakaPitta*. By this *Shamana* action alone patients gets remarkable relief. Moreover, this mucosal membrane of the above organ is given a suitable and favorable condition for self repair from the denudation or erosion which was caused by *PachakaPitta*acting on it continuously. The *Aashaya* involved in this disease*Aamashaya* and upper end of *Pakvashaya*. The *dosha*involved is mainly *Pitta*, which includes the *PachakaPitta* of *Amashaya*and *AchchaPitta*of *Pittashaya*and the *Dushya* is *Rasa* and *Rakta*.

The process of *Virechana*may be able to expel the excessive *Dravata*of *Pitta* and *Pitta* present in rest of *Avayavas* can be eliminated out. *Rasa Dushti* can be corrected by this process. After the

process of *Virechana*, the *Agni*, digestive power is increased so it is beneficial for further digestion. After *Shodhana* patient usually felt lightness. Even just after *Virechana* process there is reduction in severity of symptoms. *Daha*, *Shula*, *Amlodgara*, *Chhardi*, *Avipaka*, and general sign and symptoms seems to be lessened just after Virechana process, which helps in further *Shamana* therapy, as it is corrected earlier. As long as effect of *Snehapana* and *Virechana* is concerned, they are of great value as it eradicates the disease. The main causative factors for disease are state of *Agnimandya* it is corrected by the process of *Virechana*, if *SamsarjanaKrama* is properly followed and *NidanaParivarjana* is done properly.

Hypothesis:

☐ Mucus secretion is stimulated by mechanical or chemical irritation and by cholinergic stimulation and the	his
helps in mucosal defence and in preventing peptic ulcerations (Harrison). Virechana procedure may stimula	ate
mucus secretion by above mentioned factors.	

☐ Small in	ntestinal	mucosal pe	ptides pos	sessing th	he capac	city to	o inhib	it gastric	acid secretion	n include	vasoactive
intestinal p	peptide,	enterogluca	gon, neuro	otensin, p	peptide	YY a	and urc	gastrone.	(Harrison).	Virechand	aprocedure
may be abl	le to seci	rete these pe	eptides in p	roper qua	antity.						

□There is direct correlation between pepsinogen I serum concentration and maximum gastric acid secretions. (Harrison) *Virechana* may lower the serum pepsinogen I level. But these entire things must be checked out after the process of *Virechana* with the tools and techniques available in modern science which are required and concerned with this subject, so that we can concretely say this thing. But by observing all the result of the therapy we can postulate this hypothesis and it may be possible that this may be proved in future.

III. CONCLUSION:

In *Brihattrayi*, *Amlapitta* has not been considered as a separate disease entity. According to present knowledge the normal functioning of the *Agni*, *PachakaPitta* means the secreto enzymatic functioning of gastrointestinal tract is deranged in this disease. It is observed that the symptomatology of *Amlapitta* were closely resembles with both hypo-acidity and hyperacidity conditions. *Virechana*can prove to be a good treatment modality for *Amlapitta*.

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