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A CLINICAL STUDY OF VAMAN KARMA IN THE MANAGEMENT OF AMLAPITTA

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ABSTRACT

Amlapitta is one of the disorders caused by faulty diet and behavioural pattern . Charak has given detailed description of digestive process and described vividly the pathogenesis of G.I.T In Grahani Roga . Kashyapa has mentioned Rasa as Dushya of Amlapitta the disease involves mainly Rasavaha, Raktavaha , Purishavaha , and Annavaha Strotas . Purvarupa of the disease is not mentioned in classical text. Madhavakara has given general symptoms of Amlapitta Avipaka , Klama , Utklesh , Amla –Tiktodagar aruchi

Hrudhkanthadaha . Amlapitta is mostly Chirakari in nature. This is caused by Jivha –Laulya .Pathya in disease an important part of treatment and non compliance with Pathya may make this disease incurable. Chikitsa of Amlapitta is mentioned by Sangraha Granthakara including Shodhan and Shaman Chikitsa. Aacharyas have given much importance to Shodana Chikitsa in Amlapitta .

KEY WORDS: Amlapitta , Grahani Roga mainly Rasavaha, Raktavaha , Purishavaha , Annavaha Strotas , Purvarupa

INTRODUCTION:

In the era of Globalization; today's life style is completely changed by all the means. Our diet pattern, and behavioural pattern is changed and it is not suitable for our normal physiological function like digestion. These diseases are chronic in nature and affecting people but mostly adults.

Amlapitta is first sign of physiological disturbance to cause by dietetic pattern, mental stress which is related to our digestion. Impairment of Agni leads to the impairment of digestion and metabolism, leading to the diseases. Amlapitta is one such disease caused by the impairment of Agni . When the Amla guna of Pitta increased then it is called Amlapitta.

The disease *Amlapitta* is an *Amashayokta Pitta kapha* are involved in the manifestation of this disease. *Shodhan* the best Treatment modality to eliminate the *doshas* from the body and thereby to prevent the recurrence of diseases. *Vamana* is the best procedure to eliminate the *Amashayagata kapha and pitta dosha*. Taking all these points into consideration the study was planned.

OBJECTIVES OF THE STUDY:

To study the efficacy of *Vaman* by *Madhanphaladi yoga and Patol ,Nimba Vamanopag Dravya in the management of Amlapitta.*

MATERIAL AND METHOD:

MATERIAL -

Madanphaladi yoga was prepared in Panchakarma Department of L. R. P.
 Ayurvedic Medical college, Hospital, P.G. Institute and Research Center, Islampur

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• All drugs required for preparation of *Madanphala yoga*, *Til Tail* and *Goghruta* were procured from GMP approved pharmacy.

Source of Subject:-

Patients subjected to clinical trials were selected randomly from OPD and IPD of Loknete Rajarambapu patil Ayurvedic medical college Hospital P.G Institute and Research Centre Islampur. Written consent was taken from each patient after given them detailed information about the treatment.

Clinical history of patients was taken in special prepared case-sheet performa.

Criteria for selection of patient as follows:-

Inclusion criteria:-

- 1) Patients showing lakshanas of Amlapitta which is mentioned in classical text
- 2) Patients of age group above 20years and below 60years.
- 3) Patients of both sexes of different socioeconomic group.
- 4) Patient who are fit for Vaman yogya.

Exclusion criteria:-

- 1) Known case of peptic ulcer, duodenal ulcer.
- 2) Patient suffering more than 3 years.
- 3) Known case of carcinoma of stomach and esophagus.
- 4) Patients with major systemic disorders that interfere with the course of treatment.
- 5) Patients with addiction of alcohol and smoking.

ASSESSMENT CRITERIA:

SUBJECTIVE PARAMETERS:

- 1) Avipak
- 2) Uthklesh
- 3) Amlodgar
- 4) Tiktodgar
- 5) Rudhkantha Daha
- 6) Aruchi
- 7) Klama

METHODS –

Madanphala yoga-

Madanphala churna - 3gms to5gm.

Saindhava - 2gms to 4gms

Honey - As per need.

he above drugs will be mixed together and given for swallowing.

Maximum two liters of each *Nimba and Patola kwath* were administered as *Vamonopaga*. *Vamankarma* were done according to (A.hr.18/15).

RESEARCH METHODOLOGY:

All the 30 patients were selected after scrutinized and adopted for treatment

Purva Karma -1) Snehapan – Shuddha Goghrita.

Suddha Goghrita is given maximum for seven days. If the samyak lakshyan were come before seventh day then the snehapan were stop. During snehapan patient will advise to take warm water till filling hungry. Patients were given Abhyantar Snehana in kramavardhaman, according

to kostha in early morning. After getting Samyak SnehanLakshyan patients were given one day

Vishram, during vishramkala patient were given Sarbangabhyang, Baspasweda and

kaphautklesak ahar at evening. In Vaman day one hour before patient were given

Sarvangabhyanga Baspasweda and 200ml Yavagu to drink.

2) Sarvangabhyang with Tila tail (15-35 mins).

3) Sarvanga swedan by Bashpa sweda with plain tap water (tills

swedagamana)

Pradhan karma - Vaman karma were done according to Astang hrudaya. After vaman samyak

shudhi lakshyan were noted according Vaigiki, Maniki, Langiki and Antiki Parkiksha.

Pashchat karma – Dhumpan- Haridravarti

Sansarjan krama 3 to 7 days according to Shuddhi

Route of administration: - Oral

Kaal: Pratah kaal (7 a.m.)

Total Period of study:-Minimum 8days and Maximum 16days.

Pathyapathya:

In the group, patients were advised to avoid apathya sevana and suggested for pathya sevana.

PATHYA: Madhur rasa Aahar, Yava Wheat, Old Rice warm water, fresh diet

and proper sleep, Milk.

APATHYA: Spicy food, bakery products, oily food, curd, pickles, salt.

Type of Study: - Clinical study.

Follow Up:

• In There will be two follow up done, immediately after Vamana karma and Samsarjan

krama

CRITERIA FOR ASSESSMENT

To assess the effect of therapy objectively, all the signs and symptoms will be given scoring pattern depending upon their severity as below:

GRADATION CHART:

1) Avipak –

1	No Avipaka	0
2	Indigestion/ prolongation of food digestion period occasionally related to heavy meals	1
3	Avipaka occurs daily after each meals takes four to six hours for Udgara shuddhi etc. lakshanas.	2
4	Daily after each meals/ seldom feels hunger but eats the foods	3
5	Eats only once in a day and does not have hunger by evening.	4

2) Amlodgar / Tiktodgar -

1	No Amlodgar / Tiktodgar, in day	0
2	Amlodgar / Tiktodgar, in day time occasionally	1
3	Amlodgar / Tiktodgar, when taking any Lavan, Amla and Katu rasa yukta aahar.	2
4	Amlodgar / Tiktodgar, when taking excess amount diet.	3
5	Amlodgar / Tiktodgar, after taking any	4

food.

3)Klama –

1	No Klama	0
2	Occasionally feeling of lassitude without Sharma and remins For	1
	sometimes and vanishes	
3	Lassitude without <i>Shrama</i> daily for sometimes	2
4	Lassitude without Shrama daily for long duration	3

4) Aruchi –

1	No <i>aruchi</i> , equally willing towards all food	0
	1000	
2	Aruchi occationally present	1
3	Aruchi for some specific food or rasavishesha always	2
4	Aruchi for all foods, could take meal	3
5	Aruchi always present, totally unwilling for food	4

OBSERVATION AND RESULTS:-

Percentage Change In Signs And Symptoms Of Patients Observations

Sr	Symptoms	No.of	%
no		patient	
		S	
1	Avipak	28	93.33
2	Aruchi	27	90
3	Gaurav	18	60
4	Hritdaha	30	100
5	Utklesh	22	73.33
6	Amlodagar	27	90
7	Klama	17	56.66
8	Tiktodagar	16	53.33
9	Kanthadaha	25	83.33

(Source:Primary Data)

CRITERIA OF ASSESSMENT OF SUBJECTIVE PARAMETERS

Assessment of clinical result:-

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The total effects of the therapy was assessed as below:

Sr.	Result	No. of	%
No		Patients	
1	Excellent	14	46.66%
	/Marked		
	remission		
2	Good	12	40 %

/Moderate
Improv
ement

3 Mild 4 13.33 %
improv
ement

4 Uncha 0 0 %
nged

DISCUSSION

Probabel Mode of Action Of Madanphaladi Vaman Yoga-:

In Vamaka Dravyas have Ushnadi Guna, it produces Pachana, Dahana, Swedana, Chhedana and Stravana of Doshas in their own places. With the help of Sukshma Guna, the Vamana Dravya enters at the level of micro circulatory channels and leads to Pachana and Vishyandana of Doshas and ultimately directs Doshas towards Koshtha, from where they are eliminated easily. Due to Vishyandi and Vikasi Gunas, the Vamaka Dravya reaches at the cellular level (all Dhatus) without being digested and produces Sandhi Saithilya and migrated to Koshtha for elimination. The main action of Vamaka Dravya is on stomach of the individual. The vitiated Kapha and Pitta present in entire body is alleviated and expelled out through the mechanism of Vamana and disease process is suppressed up to the maximum level. In study Nimba and Patol Kwatha used as Vamanopag so its Guna Tikta, Kashaya Rasa are Pittashamak. Tikta Rasa is Aruchinashak and Dahashamak. It helps in Jala dominant substance it includes Kleda, Meda, Pitta and Kapha. Tikta Kashay Rasa helps in pacifying the Kapha and Pitta both. In these two Rasa Tikta rasa is better as it is Laghu and it does the Lekhan of Ama also as its Ruksha in nature. It performs the function of Pitta — Sleshma Shodhan as described by Charak.

The Vipak of Dravyas used here Katu .These Vipak are Pittashamak in nature. Here there combination of Laghu and Ruksha Guna .In Amlapitta Vydhi Dravya Guna is increased, Kledak Kapha , and Pachak Pitta are Drava in dominancy . The increased Jaliya Ansha of Pitta reduces the Tikshnata of Pachak Pitta as well as Kedak Kapha and makes them unable to even little quantity of food leading to Agnimandya . The Laghu and Ruksha properties of Dravya performs the function of Dravanasha — Shoshan . These Gunas make the Agni Pradipata and helps to attain the Niramatwa of vydhi . As per the mode of action of Vamana Karma, as described above, it clears the channels from the Sanga, created by vitiated Pitta and Kapha,. Maximum Doshas are thrown out from the body, by this Process, thus, detoxifying the body up to a certain level.

Karya of Chikitsa on Samprapti Vighatan :-

Impairment of Agni leads to the impairment of digestion and metabolism, leading to the diseases. Amlapitta is one such disease caused by the impairment of Agni. In Amlapitta Amla and Drava guna of Pitta increased. Vamana process mainly takes place in 'Amashaya'.

Amashaya is the site of both Pitta & Kapha. More correctly, it is the site of Kledaka Kapha & Pachaka Pitta. Samana vayu is the prime factor which controls the movements of this whole region. Vamana removes the vitiated matter mixed with Kledaka Kapha & Pacaka

Pitta. In this process, along with Udana Vayu, Samana Vayu has also to play a great role.

In this whole process, drug is accepted in Koshtha by Samana vayu. But 'Virya & Prabhava of the Vamaka medicine' potentiates Udana Vayu & instead of further progression of food, it is dragged backwards & expelled through mouth. Thus, during Vamana process, the functions of

Samana Vayu are hampered and it is propelled in the reverse direction.

All the three factors which regulate the functions of Agni are interfered in this arduous process. So, to normalize them, Sansarjana Krama was planned. Hence, Sansarjana Krama achieves normalization of the edifice of digestion i.e. Samana Vayu, Pachaka

Pitta & Kledaka Kapha.In Sansarjana Krama Agni is improved and Amla, Drava Guna of Pitta is decreased thereby Samprapti vightan is the way to treat a disease.

CONCLUSION

In present study titled "A CLINICAL STUDY OF VAMAN KARMA IN THE MANAGEMENT OF AMLAPITTA", 30 Patients were diagnosed as having Amlapitta on the basis of classical symptoms of Amlapitta and taken single group. Patient were given Vaman Karma and Sansarjan Krama.

From this study it can be concluded that non compliance of code of healthy diet selection and eating plays major role in causation of this disease. Hence the code and conduct of healthy eating is important to achieve early and better result of the treatment as *Nidan Parivarjana*.

It was observed that the symptomatology of *Amlapitta* were closely resembles with hyperacidity Condition. *Madanphaladi Vaman* karma showed better result in *Amlapitta* in the present study. Treatment was effective on all the parameter. It was observed that patients taking *Sansargan Krama* after *Vaman Karma* were relieved of their symptoms. The statistical analysis the application of paired t-test , exact after the Shodhan Karma and after completion of *Sansarjan Krama* (after treatment) has given maximum result on the *Avipak*, *Gaurava*, *Hritdaha*, *Utklesh Amlodagar*, *Klama*, *Kanthadaha*.

Vaman karma Chikitsa is very effective in the management of Amlapitta.

Amlapitta is condition lasting for long time and also there are chances of recurrence but in the present study such Recurrence was seen as after Sansargan Krama when Pathya was not followed by patients.

REFERENCES:

- 1. Ashtanga Hridayam (2012) Nirmala by Dr. Brahmanand Tripathi, Pub-Chaukambha Sanskrit Sansthan Varanasi.
- 2. Ayurvediya Panchakarma Vigyan- 14th edition by Vaidya Haridas S. Kasture, Pub-Baidyanath, Ayurveda Bhavan, Allahabad
- 3.Dravya Guna (2005)- Part 2 by P.V. Sharma, Pub- Chaukhamba Bharati Academy, Varanasi
- 4. Gray's Anatomy, Published by Churchil Livingstone, 7th edition
- 5 . Kashyap Samhita Hindi Comm.By Satyapal Choukhamba Sankrut Sansthan, Varanasi.
- 6. Madhavanidana- 27th edition of Sri Madhavakara with the "Madhukosha" Sanskrit commentary, by Vd. Yadunandan Upadhyaya Pub- Chaukambha Sanskrit Sansthan Varanasi.
- 7 . P.J.Mehta's Practical Medicine, Editors- S.P.Mehta, Shashank Joshi, Nihar P. Mehta, 17th edition
- 8. Sanskrit-English Dictionary- Etymologically Philologicallyarranged by Sir Monier Williams, Oxford University Press- London.
- 9. Sharangadhara Samhita (2007)-Dr. Brahamanand Tripathi, with Dipika commentary, Chaukhambha surbhartiprakashana, Varanasi.
- 10. Sushruta Samhita (2010) Ayurveda Tatva Sandipika by Kaviraja Ambikadatta Shashtri, Pub- Chaukambha Sanskrit Sansthan Varanasi.
- 11. Vangasen (2009) Pandit Harihar Tripathi Choukhamba Sankrut Sansthan, Varanasi.

12. Yogaratnakara (2009)-Vd.Shri Lakshmipati Shasrti, with Vidyotini commentary, Varanasi, Chaukhamba Prakashana.

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