EFFECT OF TRIPHALA KALKA IN THE MANAGEMENT OF AMALPITTA W.S.R TO HYPERACIDITY

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ABSTRACT

The contemporary lifestyle disorders in India today impose a heavy load on the society and are a new national actuality. Amalpitta (Gastritis) is a very common emerging disease which is an abnormal pathological condition of pitta occurring due to faulty dietary habits, persistent intense stress, excess alcohol consumption, spicy and oily food. It is characterized by acid regurgitation, heart burn indicating the vikruti of Pachaka Pitta along with Kledaka Kapha and Samana Vayu. Though it is not possible to find exact correlation of disease in contemporary system of medicine but some of the disease explained have similarities with symptoms of Amalpitta which is described under broad category Acid Reflux syndrome. But more precisely it seems to have closely resemblance with Hyperacidity, Gastritis, Modern treatment include PPIs, H₂ blockers, antacids etc. The US food and Drug Administration warned that there are increased risk factors with the use of Proton Pump Inhibitors (PPIs) including, Omeprazole, and Pantaprazole. Here a single patient case study was done with pretest, follow up and post-test evaluation by intervening a Triphala in kalka form prescribed in 5 gm dosage daily in two divided doses before meals. A Performa was designed containing Pathyaapathya which was advised to patient. Through this case study it was concluded that Triphala kalka and advised pathyaapathaya regimen was helpful in curing Amalpitta and maintain quality of life.

KEYWORDS: Amalpitta, Triphala kalka, Pathyaapathya, Gastritis.
INTRODUCTION

In this rapidly civilization and multimedia technology life become full with stress having more speed and accuracy are the prime demands. So, people neglect healthy food and are attracted towards the junk food, they are changing their diet pattern, lifestyle and behavioral pattern. People are becoming more stressful with worry, tensional and anxiety causing so many psychological disorders which hampers the digestion and is causing hyperacidity, gastritis, dyspepsia, peptic ulcer disorders and anorexia. All these pathological disorders covered under the broad term of ‘Amalpitta’ in Ayurveda.

It is very common disease encountering in present population with more or less severity, it is the one that bears the direct impact of the deitic errors that a person indulges. 80% of the top ten life threatening disease of the world is due to fault in dietary habits.

In Ayurveda Amlapitta cannot be correlated with one particular disease more precisely. But it can be correlated with Acid Reflux syndrome which comprises of GRED, Gastritis, dyspepsia, Acid peptic disorder, hyperacidity etc. In Ayurveda, sign and symptoms of Amalpitta looks very similar to GRED and Gasritis. Gastro esophageal reflux and gastritis resulting in heartburn affects approximately 30% of the general population. Gastritis is inflammation of the gastric mucosa. Gastritis is not a single disease; rather it is a group of disorders that have different clinical features, histological characteristics and pathogenesis. Amalpitta is one of the major diseases caused by life style changes and its prevalence is increasing day by day. So in this condition Triphala kalka and lifestyle modifactory chart is used.

In Ayurvedic terminology, Agni (digestive fire) is considered as the protector of the human body while Ama (toxic) is the cause of disease. The main cause is the indiscretion in taking food which leads to Doshik (physical energies) imbalances i.e., Vata, pitta and kapha. The three Doshas, Vata, pitta and kapha are present in the whole human body. Due to vitiation of these doshas in grahami (seat of agni), digestion gets hampered resulting in the formation of sama pitta which ultimately brings to the condition of Amlapitta.

CASE HISTORY

A 45 yr old male patient complaining of sour belching (amlodgara), burning sensation in throat and chest (hritkantha-daha), indigestion (avipaka) and exertion without work (klama) and other associated symptoms like ajeerna were also present. Patient’s lifestyle history was
also taken regarding the food habit, sleep, exercise etc. exhibited altered lifestyle. Patient visited many modern hospitals and took medicine but was not satisfied by the treatment, so he came to us for further treatment.

Personal history – Appetite was diminished, sleep was disturbed due to coughing. Rest micturation and bowel habits were regular.

General examination – No pallor, icterus, oedema, clubbing were present, no lymph node were palpable. Blood pressure was 120/80 mmhg, pulse rate 74/min.

Systemic examination – On respiratory examination B/L wheezing present, no abnormal functioning of gastrointestinal, cardiovascular and central nervous system was noticed.

Drug history – Patient took allopathic medicine but unable to give details.

Diagnostic criteria
Burning sensation in chest and throat region (Hritkantha daha), sour belching (Amalodgara), Nausea (Utklesha), Vomiting (Chardi), indigestion (Avipaka), tastelessness (Aruchi), Exertion without work (klama).

Intervention
Triphala kalka was advised 5gm. BD before meal.
Intervention period: 1 month.
Lifestyle chart was given containing Ahara (food), vihara (lifestyle) and Achara (code and conducts).
Follow up: 15th day of intervention.

Contents of Triphala Kalaka
Amalki, Vibhitaki, Haritki and Mishri all were taken in equal amount. Honey was needed as per need to make it in kalka form.

Assessment
Assessment was done on the symptoms gradation.
Table 1: (Comparing the symptoms before after treatment of Amalpitta).

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Before TT (Grade)</th>
<th>After TT (Grade)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sour-belching (amalodgara)</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Burning sensation in throat and chest (hritkanthadaha)</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Indigestion (avipaka)</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Exertion without work (klama)</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

DISCUSSION
In this study, observation was done before and after treatment based on the symptoms gradation and the obtained result are- the amalodgara before treatment was of 2 grade which reduced to 0 after treatment. Hritkantha-daha BT was 2 and after treatment reduced to 1. Avipaka BT it was 2 and after treatment minimized to 0 and the klama BT was 2 and reduced to 0. Above result shows the significant reduction in the symptoms. Effect the Triphala kalka and lifestyle chart containing ahara, vihara, and achara which was advised during the course of treatment will be discussed.

The lifestyle chart contains Ahara, Vihara, and Achara was prepared and advised based on the Pathyaapathya mentioned for Amalpitta (yoga ratnakara) and nityopayogi dravyas in swasthya chitiska of Charaka Samhita. This diet might be benefited due to easily digestible and regularized food habits, tikta shaka and pitta shamaka dravya. Vihara like exercise and sleep was advised to regularize daily and this was benefited by avoiding the day sleep and lack of exercise causing Ajeerna, Agnimandya etc. The achara like Sadvrita (do’s and dont’s) was advised and it results into decreasing the stress and strain. The multi approach treatment was helped in reducing the symptoms and maintaining the healthy life.

CONCLUSION
Triphala helps not only in reducing the symptoms but also maintains the health. The specially prepared lifestyle chart containing Ahara, Vihara, Achara helps in reducing the symptoms and maintaining the healthy lifestyle. The multiple approach treatment was benefit due to multiple actions.

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