Clinical Research

A comparative clinical study of Shatapatrayadi churna tablet and Patoladi yoga in the management of Amlapitta

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Abstract

Amlapitta is a very common disease caused by Vidagdha Pitta with features such as Amlodgara, Hrid Kantha Daha, and Avipaka. This is a burning problem of the society. Irregular and improper food habits, and busy stressful lifestyle is one of the main culprit. Amlapitta is the GI disorder described in Ayurvedic texts that closely resembles with Gastritis in modern science. In chronic stage, it may lead to ulcerative conditions. In this study, total 41 patients were registered and were randomly divided into two groups. In group A, Shatapatrayadi churna tablet and in group B Patoladi Yoga tablet were given for 1 month. The Nidana, signs, and symptoms were observed carefully to get idea about the Samprapti of the disease. The effect of Patoladi Yoga on Roga Bala is 65.79%, 62.11% on Agni Bala, and 63.35% on Deha and Chetas bala. The overall relief was 63.75%. The effect of Shatapatrayadi tablet on Roga Bala was 71.94%, 73.15% on Agni Bala, and 77.68% on Deha and Chetas bala. The overall relief was 74.25%.

Key words: Amlapitta, gastritis, Patoladi yoga, Shatapatrayadi churna

Introduction

The disease entity described under the heading of Amlapitta, a constellation of symptoms such as heart burn, abdominal pain, sour belching, reflexes of food taken, nausea, and loss of appetite, has become a very common cause of hospital visits worldwide. Acharya Charaka has not directly described this disease, he has mentioned that when Amavisha get mixed with the Pitta, diseases such as Amlapitta will develop.¹ Amlapitta is the Gastro Intestinal Tract (GIT) disorder described in Ayurvedic texts, which closely resembles with gastritis in modern science and in chronic stage it may lead to ulcerative conditions. In India, it is 10 million and that of peptic ulcer is 5 million. Mortality rate is 70% and that of peptic ulcer is 6500.

The drug selected under the study Shatapatriadi churna is described in Bheshaja Samhita which contains Shatapatri, Amrita, Draksha, and Yashtimadhu. Most of the drugs have Tikta, Madhura, Kashaya, Katu Rasas, Laghu, and Ushna Gunas which act against excessive Drava and Tikshna Gunas of Pitta. On the other hand, they all have a specific role in the management of Mandagni. The drug selected as control is Patoladi Yoga described in Bhaishajya Ratnavali, Amlapitta Adhikara, which contains Patola, Shunthi, Gaduc, and Katuki having Agnideepaka, Pittashamaka, and Pittarechaka properties.

Aims and objectives
1. To evaluate the efficacy of the Shatapatrayadi churna and Patoladi Yoga tablet in Amlapitta.
2. To compare the efficacy of both the drugs.

Materials and Methods

The grouping and management details were provided at Table 1. Total 41 patients between the age group of 15 and 60 years, fulfilling the criteria for the diagnosis of Amlapitta were registered and randomly divided into two groups. In group A, 23 patients were registered and 20 patients completed the treatment. In group B, 18 patients were registered and 15 patients completed the treatment [Table 2]. The patients were selected from the O.P.D. of Kayachikitsa of I.P.G.T. and R.A., G.A.U., Jamnagar hospital.

Criteria for selection of patients

Inclusion criteria

Patients were selected on the basis of presence of classical symptoms of Amlapitta. Patients were subjected to detailed clinical history on the basis of specially prepared proforma. Written consent was taken from the patients before starting the treatment after explaining the details regarding the treatment.
Exclusion criteria
- Patients of age less than 15 and above 60 years.
- Chronicity more than 5 years.
- Patients having cardiac problems, tuberculosis, carcinoma, etc.
- Patients having Anmadrava or Parinama shula.
- Patients having organic diseases such as gastric ulcers and duodenal ulcers.

Investigations
- Routine hematological and biochemical investigations
- Urine and stool analysis.
- Barium meal X-ray for stomach and duodenum where-ever necessary.

Drug detail
Composition of Shatapatryadi tablet
Shatapatri (Rosa centifolia), Guduchi (Tinospora cordifolia), Nimbu (Azadiracta indica), Haritaki (Terminalia chebula), Bhunimba (Andrographis paniculata), Bhringraja (Eclipta alba), Patola (Trichosanthes dioica), Madhuyasthi (Glycyrrhiza glabra), Amalaki (Emblica officinalis), Darvi (Barberis aristata), Chandan (Santalum album), Devdaru (Cedrus deodara), Bhuamalaki (Phyllanthus urinaria), Draksha (Vitis vinifera), and Haridra (Curcuma longa).\(^2\)

Composition of Patoladi Yoga tablet
Patola (Trichosanthes dioica), Guduchi (Tinospora cordifolia), Sunthi (Zingiber officinale), and Kutki (Picrorhiza kurrooa).\(^3\)

Assessment criteria
Patients were examined weekly. Changes in the patient’s status were noted and following points were taken into consideration for the assessment of results.
1. Improvement in symptoms of Amlapitta was taken into consideration.
2. Improvement in Rogabala along with Deha, Agni, and Chetasabala was considered for assessment.

Symptom scoring was calculated before and after the treatment through statistical analysis, and percentage of relief was noted to assess the efficacy of therapy. The obtained results were interpreted as on the basis of paired ‘t’ test.

Assessment of total effect of therapies
1. Complete remission 100%
2. Marked improvement 76% to 99%
3. Improvement 51% to 75%
4. Mild improvement 25% to 50%
5. Unchanged Below 25%

Observations and Results
Observations on Nidana Sevana [Table 3], Chief Complaints [Table 4]; in results effect of Shatapatryadi Yoga [Table 5], effect of Patoladi Yoga [Table 6], effect of both the drugs on Bala [Tables 7 and 8], overall effect [Table 9] were mentioned in respective tables.

Discussion
Many a times the simple Agnimandya leads to Vidagdhatirna.

### Table 1: Grouping and management

|                      | Shatapatryadi tablet (group A) | Patoladi Yoga tablet (group B) |
|----------------------|--------------------------------|--------------------------------|
| Dose                 | 2 tablets of 500 mg t.i.d.     | 2 tablets of 500 mg t.i.d.     |
| Duration             | 30 days                        | 30 days                        |
| Anupana              | Milk                           | Milk                           |

### Table 2: Registered patients wise distribution

| Type               | Number of patients | Total |
|--------------------|--------------------|-------|
| Completed          | 20                 | 35    |
| Discontinued       | 03                 | 06    |
| Registered         | 23                 | 41    |

### Table 3: Observation of Nidana sevana in patients of Amlapitta

| Observation                  | Number of patients | %    |
|------------------------------|--------------------|------|
| Amla Rasa Sevana             | 22                 | 16   | 92.68 |
| Lavana Rasa Sevana           | 20                 | 17   | 90.24 |
| Samashan                     | 16                 | 13   | 70.73 |
| Adhyashana                   | 13                 | 9    | 53.66 |
| Irregular diet               | 15                 | 8    | 56.10 |
| Addiction of tea             | 17                 | 15   | 78.05 |
| Addiction of smoking         | 7                  | 9    | 39.03 |
| Addiction of tobacco (chewing) | 7                 | 8    | 36.59 |
| Day time sleep               | 18                 | 15   | 80.49 |
| Khandita Nidra               | 12                 | 10   | 53.66 |
| Krura Koshtha                | 15                 | 9    | 58.54 |
| Irregular bowel              | 16                 | 12   | 68.30 |
| Abhisyanday                  | 15                 | 10   | 60.98 |
| Bhojana                      | 13                 | 13   | 63.41 |
| Ati usana Bhojana            | 13                 | 10   | 56.1 |
| Vegavidharana                | 12                 | 12   | 53.66 |

### Table 4: Observation of chief complaints in patients of Amlapitta

| Chief complaints | Number of patients | %    |
|------------------|--------------------|------|
| Aruchi           | 10                 | 09   | 19   | 46.34 |
| Ayivpaka         | 14                 | 11   | 25   | 60.98 |
| Utklesha         | 14                 | 13   | 27   | 65.85 |
| Gaurava          | 08                 | 10   | 18   | 43.90 |
| Amla udgara      | 17                 | 07   | 24   | 58.54 |
| Tikta udgara     | 10                 | 08   | 18   | 43.90 |
| Hrid daha        | 18                 | 10   | 28   | 68.29 |
| Kushki daha      | 17                 | 13   | 30   | 73.17 |
| Urah daha        | 13                 | 08   | 21   | 51.22 |
| Kanta daha       | 13                 | 06   | 19   | 46.34 |
| Sirah shoola     | 08                 | 07   | 15   | 36.59 |
| Urah shoola      | 07                 | 07   | 14   | 34.15 |
in the initial stages and if it is neglected, leads to Amlapitta. Amlapitta is a disease caused due to vitiation of certain attributes of Pitta like the Drava guna (fluidity) and Amla guna (sourness) causing Vidagdha jirna at the initial stages and later causes inflammation and corrosion of the Sleshmadhara kula of the Amashaya, i.e., mucous membrane of the stomach and duodenum.[31] In modern science it can be correlated that Vidagdha jirna, a type of simple dyspepsia and Amlapitta as gastritis. Charaka has not mentioned disease Amlapitta separately even though he quoted the word Amlapitta at several contexts. Charaka while describing the Nannatmajja Vyadhis, included Pittaj diseases such as Dahaka, Dhumaka, Amlaka, and Vidaha. These are seen in acid peptic disorders and indicate the Pittobhama condition. Sushruta and Vagbhata have not mentioned the word Amlapitta. Kashyapa was the first person who described the disease along with its treatment.[31] Madhavakara has described Amlapitta into two types Urdhavagata and Adhagata.

Probable mode of action of Shatapatradya tablet

Ingredients of Shatapatradya tablet include Tikta, Kashaya, and Madhura rasa. Madhura, Tikta, and Kashaya Rasa are Pitta Shamaka. Tikta rasa and Kashya Rasa also subside Kapha Dosha. Madhura Rasa having soothing effect promotes strength and pacyit Pitta and Vata Dosha and useful in Daha. In this tablet, 13 drugs are Tikta Rasa pradhrana. According to Charaka Samhita, Tikta Rasa is having the following properties such as Krimighna, Murchahar, Dahanashak, Kunduhar, Trishnusamak, Jwaraghna, Agnipdana, and Pitta Sleshma Upashoshana. In Amlapitta, natural Rasa of Pitta, i.e., Katu is converted into Vidagda Amla Rasa due to Agnimandhya by virtue of Dravata increase of Pitta Dosha. Tikta Rasa drugs directly act on the Vidagda Pitta and convert it into Nirama Pitta. Tikta Rasa decreases the Pitta Dravata Vridhhi, so its benefits in pacifying symptoms such as Utklesha, Amlaodgara, and Avipaka. Shatpatri and Chandana cure the Visra Dosha of Pitta, whereas Gudhuci and Yasthimadhu are beneficial in conditions such as Chinta and Shoka due to its Medhya properties. Shatpatri, Amalaki, and Patola controls Daha due to its cooling properties, and also Nimba Twak is reported as antipeptic, analgesic, and anti-inflammatory properties which are very much beneficial in this condition. Bhringaraja has been reported to have antitissue, anti-inflammatory, and immunomodulatory properties, so these properties have a greater role to play in this disorder. Wound healing property of Madhuyashthi is also beneficial in gastric and duodenal ulcers.

Probable mode of action of Patoladi Yoga

It's contain Patola, Sunthi, Guduchi, and Kutaki. Maximum

### Table 5: Effect of Shatapatradya churna tablet in patients of Amlapitta

| Group A | N  | Mean score | %  | P       |
|---------|----|------------|----|---------|
|         |    | BT         | AT |         |
| Aruchi  | 10 | 3.20       | 0.80| 75.00   | <0.001 |
| Avipaka | 14 | 2.85       | 0.93| 67.5    | <0.001 |
| Utklesha| 14 | 3.14       | 1.00| 68.18   | <0.001 |
| Gaurava | 08 | 3.00       | 1.00| 66.66   | <0.001 |
| Amla udgara | 17 | 3.05       | 0.82| 73.07   |         |
| Tikta udgara | 10 | 3.4       | 0.7 | 79.41   | <0.001 |
| Hrid daha | 18 | 3.44      | 1.17| 66.12   | <0.001 |
| Kukshi daha | 17 | 3.29    | 0.71| 76.79   | <0.001 |
| Urah daha | 13 | 3.31      | 1.08| 67.44   | <0.001 |
| Kantu daha | 13 | 3.31     | 0.92| 72.09   | <0.001 |
| Sirah shoola | 08 | 3.12     | 1.00| 68.00   | <0.01  |
| Urah shoola | 07 | 2.85     | 1.28| 55.00   | <0.01  |

### Table 6: Effect of Patoladi yoga tablet in patients of Amlapitta

| Group B | N  | Mean score | %  | P       |
|---------|----|------------|----|---------|
|         |    | BT         | AT |         |
| Aruchi  | 09 | 3.5        | 1.00| 71.87   | <0.01  |
| Avipaka | 11 | 3.09       | 0.90| 70.58   | <0.001 |
| Utklesha| 13 | 3.23       | 0.84| 73.80   | <0.001 |
| Gaurava | 10 | 3.33       | 1.00| 69.69   | <0.001 |
| Amla udgara | 07 | 2.85       | 0.85| 70.00   | <0.001 |
| Tikta udgara | 08 | 2.75     | 1.13| 59.09   | <0.001 |
| Hrid daha | 10 | 2.9       | 1.2 | 58.62   | <0.001 |
| Kukshi daha | 13 | 2.92     | 1.46| 50     | <0.001 |
| Urah daha | 08 | 2.75      | 1.00| 63.63   | <0.01  |
| Kantu daha | 07 | 2.57     | 1.14| 50.00   | <0.001 |
| Sirah shoola | 07 | 3.14     | 1.00| 68.18   | <0.001 |
| Urah shoola | 07 | 3.14     | 1.57| 50.00   | <0.01  |

### Table 7: Overall effect of Shatapatradya churna tablet on Rogabala, Agnibala, Dehabala, and Chetasbala

| Assessment | N  | Mean score | X  | SD | SE | t  | P       |
|------------|----|------------|----|----|----|----|---------|
|            |    | BT         | AT |    |    |    |         |
| Rogabala   | 20 | 31.06      | 9.45| 21.61| 0.39| 0.12| 17.4   | <0.001 |
| Agnibala   | 20 | 10.14      | 2.72| 7.42 | 0.26| 0.15| 14.25  | <0.001 |
| Dhea and   | 20 | 8.91       | 2.34| 6.57 | 0.22| 0.09| 12.11  | <0.001 |
| Chetasbala |   |            |    |    |    |    |         |

### Table 8: Overall effect of Patoladi yoga tablet on Rogabala, Agnibala, Dehabala, and Chetasbala

| Assessment | N  | Mean score | X  | SD | SE | t  | P       |
|------------|----|------------|----|----|----|----|---------|
|            |    | BT         | AT |    |    |    |         |
| Rogabala   | 15 | 28.02      | 10.90| 17.12| 0.34| 0.11| 15.50  | <0.001 |
| Agnibala   | 15 | 9.82       | 2.74| 7.08 | 0.15| 0.09| 26.00  | <0.001 |
| Dhea and   | 15 | 9.13       | 2.28| 6.85 | 0.15| 0.06| 19.00  | <0.001 |
| Chetasbala |   |            |    |    |    |    |         |

### Table 9: Overall effect of therapy

| Criteria    | Effect of therapy |
|-------------|-------------------|
|             | Group A | Group B |
| Complete remission | 00 | 00 | 00 |
| Marked improvement | 11 | 55 | 00 |
| Improvement | 09 | 45 | 15 | 100 |
| Mild improvement | 00 | 00 | 00 |
| Unchanged | 00 | 00 | 00 |

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Rasa are Tikta and Kashaya Rasa which are Pittashamaka and Kaphanashaka. In pathogenesis of Amlapitta, Mandagni leads to Ama formation and Sutthi is the best medicine for Annapachana and alleviates the Srotorodha by Ushan Tikshana Guna. All the drugs have Deepana Pachana property, which improves the status of Agni. Laghu Ruksha Guna and Katu Vipaka are Kapha Shamaka. Madhura Vipaka Sheeta Veerya drugs may counteract the Tikshana Guna of Vitiated Pitta, which showed the expulsion of the stool Mutra, i.e., Vatamulokama and helps in expulsion of the Vidagdhita Pitta. Patola has bitter acrid taste and cooling action.

Acharya Charaka told that Dugdha is Pathya for Amlapitta,[6] while Kashayana mentioned it is one of the important causative factors for Amlapitt.[7] In 75.61% patients, Upashaya in signs and symptoms of Amlapitta, hence it can be concluded that it is beneficial in this disease. In Ayurvedic Dugdha Parpati therapy is indicated in which heavy amount of milk is administered.\[8\]

**Effect of therapy**

Shatapatrayadi tablet shows better result in symptoms such as Kukshi Daha, Hrida Daha, and Kantha Daha. It also shows better results on Amlo and Tikta Udgana. Quality of sleep is more improved in group A. Feeling of well-being improved more in group A and Deha Bala also improved more in group A. While Patoladi Yoga shows better result in Gaurana, Avipaka, Shirashila, and Klama.

**Conclusion**

- Amlapitta showed its direct impact on Annavaha srotasa.
- Agnimandya was present in majority of patients.
- Present lifestyle that has disturbed the food habits gives rise to agnimandya, vidagdhajirna, and finally leads to Amlapitta.
- Socioeconomic condition, mental stress, and strain play an important role in causing and aggravating the disease.
- Shatapatrayadi tablet showed better result.
- Both the drugs are free from side effects.

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