



## 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 Chetasa 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.<sup>[1]</sup> *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 703 and that of peptic ulcer is 6500.

The drug selected under the study *Shatapatrayadi churna* is described in *Bheshaja Samhita* which contains *Shatapatrayadi*, *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*, *Guduci*, and *Katuki* having *Agnideepaka*, *Pittashamaka*, and *Pittarechaka* properties.

### Aims and objectives

1. To evaluate the efficacy of the *Shatapatrayadi churna* tablet 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.

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**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 *Annadrava* 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 Shatapatriyadi tablet**

*Shatapatri* (*Rosa centifolia*), *Guduchi* (*Tinospora cordifolia*), *Nimba* (*Azadiracta indica*), *Haritaki* (*Terminalia chebula*), *Bhunimba* (*Andrographis paniculata*), *Bhringraja* (*Eclipta alba*), *Patola* (*Trichochosanthos dioica*), *Madhuyasthi* (*Glycyrrhiza glabra*), *Amalaki* (*Embllica officinalis*), *Darvi* (*Barberis aristata*), *Chandan* (*Santalum album*), *Devdaru* (*Cedrus deodara*), *Bhuamalaki* (*Phyllanthus urinaria*), *Draksha* (*Vitis vinifera*), and *Haridra* (*Curcuma longa*).<sup>[2]</sup>

**Composition of Patoladi Yoga tablet**

*Patola* (*Trichochosanthos dioica*), *Guduchi* (*Tinospora cordifolia*), *Sunthi* (*Zingiber officinalae*), and *Kutki* (*Picrorhiza kurrooa*).<sup>[3]</sup>

**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 *Shatapatriyadi 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 *Vidagdhajirna*

**Table 1: Grouping and management**

	<b>Shatapatriyadi tablet (group A)</b>	<b>Patoladi Yoga tablet (group B)</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
	Group A	Group B	
Completed	20	15	35
Discontinued	03	03	06
Registered	23	18	41

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

Observation	Number of patients			%
	Group A	Group B	Total	
<i>Amla Rasa Sevana</i>	22	16	38	92.68
<i>Lavana Rasa Sevana</i>	20	17	37	90.24
<i>Samashan</i>	16	13	29	70.73
<i>Adhyashana</i>	13	9	22	53.66
Irregular diet	15	8	23	56.10
Addiction of tea	17	15	32	78.05
Addiction of smoking	7	9	16	39.03
Addiction of tobacco (chewing)	7	8	15	36.59
Day time sleep	18	15	33	80.49
<i>Khandita Nidra</i>	12	10	22	53.66
<i>Krura Koshtha</i>	15	9	24	58.54
Irregular bowel	16	12	28	68.30
<i>Abhishyandi Bhojana</i>	15	10	25	60.98
<i>Ati usana Bhojana</i>	13	13	26	63.41
<i>Vegavidharana</i>	13	10	23	56.1
<i>Krodha</i>	12	10	22	53.66

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

Chief complaints	Number of patients			%
	Group I	Group II	Total	
<i>Aruchi</i>	10	09	19	46.34
<i>Avipaka</i>	14	11	25	60.98
<i>Utklesha</i>	14	13	27	65.85
<i>Gaurava</i>	08	10	18	43.90
<i>Amla udgara</i>	17	07	24	58.54
<i>Tikta udgara</i>	10	08	18	43.90
<i>Hrid daha</i>	18	10	28	68.29
<i>Kukshi daha</i>	17	13	30	73.17
<i>Urah daha</i>	13	08	21	51.22
<i>Kanta daha</i>	13	06	19	46.34
<i>Sirah shoola</i>	08	07	15	36.59
<i>Urah shoola</i>	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 Vidagdhajirna at the initial stages and later causes inflammation and corrosion of the Sleshmadhara kala of the Amashaya, i.e., mucous membrane of the stomach and duodenum.<sup>[4]</sup> In modern science it can be correlated that Vidagdhajirna, 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 Nanatmaja Vyadhis, included Pittaj diseases such as Dahaka, Dhumaka, Amlaka, and Vidaha. These are seen in acid peptic disorders and indicate the Pittolbana condition. Sushruta and Vagbhata have not mentioned the word Amlapitta. Kashyapa was the first person who described the disease along with its treatment.<sup>[5]</sup> Madhavakara has described Amlapitta into two types Urdhavadagata and Adhogata.

**Probable mode of action of Shatapatrayadi tablet**

Ingredients of Shatapatrayadi 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 pacify Pitta and Vata Dosha and useful in Daha. In this tablet, 13 drugs are Tikta Rasa pradhana. According to Charaka Samhita, Tikta Rasa is having the following properties such as Krimighna, Murchahar, Dahanashak, Kanduhar, Trishnashamak, Jwaraghna, Agnidipana, and Pitta Sleshma Upasoshana. In Amlapitta, natural Rasa of Pitta, i.e., Katu is converted into Vidagdha Amla Rasa due to Agnimandhya by virtue of Dravata increase of Pitta Dosha. Tikta Rasa drugs directly act on the Vidagdha Pitta and convert it into Nirama Pitta. Tikta Rasa decreases the Pitta Dravata Vriddhi, 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 antiulcer, anti-inflammatory, and immunomodulatory properties, so these properties have a greater role to play in this disorder. Wound healing property of Madshuyashti is also beneficial in gastric and duodenal ulcers.

**Probable mode of action of Patoladi Yoga**

Its contain Patola, Sunthi, Guduchi, and Kutaki. Maximum

**Table 5: Effect of Shatapatryadi 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	<0.001
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
Kanta 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
Kanta 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 Shatapatryadi churna tablet on Rogabala, Agnibala, Dehabala, and Chetasabala**

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
Deha and Chetasabala	20	8.91	2.34	6.57	0.22	0.09	12.11	<0.001

**Table 8: Overall effect of Patoladi yoga tablet on Rogabala, Agnibala, Dehabala, and Chetasabala**

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
Deha and Chetasabala	15	9.13	2.28	6.85	0.15	0.06	19.00	<0.001

**Table 9: Overall effect of therapy**

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

Rasa are Tikta and Kashaya Rasa which are Pittashamaka and Kaphanashaka. In pathogenesis of Amlapitta, Mandagni leads to Ama formation and Sunthi is the best medicine for Amapachana 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., Vatanulomana and helps in expulsion of the Vidagdha Pitta. Patola has bitter acrid taste and cooling action.

Acharya Charaka told that Dugdha is Pathya for Amlapitta,<sup>[6]</sup> while Kashaypa mentioned it is one of the important causative factors for Amlapitt.<sup>[7]</sup> 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.<sup>[8]</sup>

### Effect of therapy

Shatapatriyadi tablet shows better result in symptoms such as Kukshi Daha, Hrida Daha, and Kantha Daha. It also shows better results on Amlo and Tikta Udgara. 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 Gaurava, Avipaka, Shirashula, and Klama.

### Conclusion

- Amlapitta showed its direct impact on Annavaaha 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.
- Shatapatriyadi tablet showed better result.
- Both the drugs are free from side effects.

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## हिन्दी सारांश

# अम्लपित्त व्याधि पर शतपत्र्यादि चूर्ण वटी एवं पटोलादि योग वटी का चिकित्सकीय अध्ययन

जितेन्द्र कुमार, ए. आर. दवे, माधुरी जी. व्यास

अम्लपित्त, विदग्ध पित्त से होने वाली एक सामान्य व्याधि है। जिसमें अम्लोद्धार, हृदकंठदाह, अविपाक इत्यादि लक्षण पाये जाते हैं। यह समाज में पाई जानेवाली एक ज्वलंत समस्या है। अनियमित तथा असम्यक आहारसेवन, व्यस्त दिनचर्या एवं मानसिक तनाव इसके प्रमुख कारण हैं। अम्लपित्त पाचन तंत्र की व्याधि है जिसकी तुलना आधुनिक चिकित्सा विज्ञान में वर्णित आमाशय शोथ से की जा सकती है। चिरकारी अवस्था में यह व्रणावस्था में परिवर्तित होता है। विविध आयुर्वेद संस्थाओं में अम्लपित्त पर काफी संख्या में चिकित्सकीय शोध कार्य हुआ है। अधिकतर शोध कार्य कुछ हद तक कारगर साबित हुये हैं, परंतु कुछ संलग्नित लक्षणों पर संतोषकारक उत्तर देने में असमर्थ पाये गये। इन सभी तथ्यों को ध्यान में रखते हुये इस चिकित्सकीय शोध कार्य की रूपरेखा तैयार की गई। इस अध्ययन में कुल ४१ आतुर पंजीकृत किये गये तथा सामान्य वितरण पद्धति से २ वर्गों में बाँटा गया। वर्ग अ में शतपत्र्यादि चूर्ण वटी तथा वर्ग बमें पटोलादि योग वटी १ मास तक दी गई। निदान लक्षण तथा चिन्ह का सतर्कता से अवलोकन कर व्याधि की संप्राप्ति समझने की कोशिश की गई। पटोलादि योग वटी का रोग बल, अग्निबल, देह बल तथा चेतस बल पर सार्थक परिणाम मिला। शतपत्र्यादि चूर्ण वटी का अग्निबल, देह बल तथा चेतस बल पर अधिक अच्छा परिणाम मिला।