AMLAPITTA (HYPER ACIDITY): A REVIEW ON PREVENTIVE TOOLS

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ABSTRACT
The clinical presentation of Amlapitta can be correlated to Hyper Acidity. The complications, economic burden of expenses, adverse effect of drugs and alarming increase in incidence and prevalence of acid peptic disorders among population create a need of prevention of etiology of this disorder. By having the knowledge regarding Aharaja (food related causes), Viharaja (regimen related causes), Manasika (psychological causes) and Upashaya (relieving factors) / Anupashaya (aggravating factors) factors of Amlapitta, one can prevent and as well manage the clinical conditions. Hence in the current article an effort is done to review the concept of Amlapitta with respect to symptoms and etiology which act as the tools for Nidana parivarjana (Circumvent the causative aspects) in Amlapitta.

INTRODUCTION
Amlapitta is a disease mainly affecting Annavaha Srotas (gastrointestinal system). Improper food habits, busy stressful lifestyle are the main factors which have led to the increased prevalence. The disease Amlapitta can be compared to a number of diseases according to modern science such as hyper acidity, Gastritis, GERD and in general acid peptic disorder. These diseases are commonly employed for any clinical conditions with upper abdominal discomfort like indigestion or dyspepsia in which the specific clinical signs and radiological abnormalities are absent.

For the treatment of this disease, antacids are usually used which are having certain adverse effects on long term usage. The most common adverse effect of aluminum containing antacids is constipation. Formation of insoluble aluminum salts appear to produce the constipating effect. This may progress into intestinal obstruction, fecal impaction, development of hemorrhoids and anal fissures. In the patients with impaired renal function, aluminum can be retained in the brain and other tissues leading to Hyperaluminiumaemia.

INCIDENCE & PREVALENCE
The survey studies of Acid peptic disorders conducted in India validated increasing incidence and prevalence of the disorder among various age groups. These studies emphasize that the prevalence of GERD in India is likely to be between 8% and 19%, which is comparable to GERD prevalence rates published in western countries.

CLASSICAL REFERENCE AND SYMPTOMS
Amlapitta is one of the diseases which is mentioned by many authors in the classics. Kashyapa samhita and Madhava Nidana texts have emphasized...
the Amlapitta disease in detail. Haritha samhitha entitles Amlapitta as Amlahikka\(^6\), Pathya kalpanas (therapeutic diet recipes) for Amlapitta are found in Sharangadhara samhitha\(^11,12\). Bhavapракasha\(^13,14\), Yogaratnakara and Vangasena have also explained about Amlapitta similar to Madhava Nidana.

The symptoms\(^15\) of Amlapitta are Avipaka (indigestion), Klama (exhaustion without exercise), Uklesha (nausea), Tiktha Amla Udgara (bitter and sour belching), Gaurava (heaviness), Hritdaha (burning sensation in the chest), Kantadaha (burning sensation in the throat), Aruchi (anorexia). On the other hand, gastritis or hyperacidity are having symptoms such as bloating of abdomen, bloody/ black stools/ bloody vomiting, dysphagia, hiccups, nausea, weight loss, burning sensation in the chest usually after eating which might go worse at the night, Regurgitation of food/ sour liquid etc\(^16\).

**NIDANA OF AMLAPITTA**

Amlapitta is a disease caused by various Nidanas (causative factors), which can be divided as Aharaja (food related causes), Viharaja (regimen related causes) and Manasika Nidanas (psychological causes)

1. **Aharaja Nidanas (food related causes)**\(^17\)
   
   Aharaja nidanas of Amlapitta include Adhyasana (Eating before digestion of previously taken food), Abhishyandi Bhojana (Sliminess producing foods), Ajirma (Indigestion), Ama (Undigested food), Apakvanna (Uncooked), Amla Sevana ( Sour foods), Antharodaka Pana (Taking water in between food), Athi Ushna Ahara (Excessive hot foods), Athi Snigdha Ahara (excessive unctuous foods), Athi Ruksha Ahara (excessive dry foods), Athi Drava Ahara (excessive liquid articles), Bhuktha Bhuktwa (Repeated eating), Bhrishta Dhanyya (Fried cereals), Dushhtanna (Spoiled food), Gorasa (Milk products), Guru Bhojana (Heavy foods), Ikshu Varika (Preparations of Sugar-Cane), Kulattha Sevana (Excessive use of horse gram), Madya (Wines), Parushithanna ( stale food), Pittaparakopi Annapanu (Food and drinks which stimulates Pitta Dosha), Pruthukha Sevana (Consumption of Flattened rice obtained from boiled paddy), Pulaka Sevana (Consumption of Wildly growing rice), Viruddha Ashana (Eating incompatible foods)

2. **Viharaja Nidanas (regimen related causes)**\(^18\)

   Viharaja Nidanas of Amlapitta includes Akala Bhojana (Untimely food), Athi Snana (Excessive bath), Avagaha (Tub bath), Diwaswapan (Day sleep), Vegendharana (Suppression of natural urges)

3. **Manasika Nidanas (psychological factors)**\(^19\)

   Manasika Nidanas of Amlapitta includes Chinta (Anxiety), Slōka (Grief), Bhaya (Fear), Krodha (Anger) and Dukh-Shayya Prajugare (Sleeps on an Uncomfortable Bed)

   Certain studies proved that Aharaja (food related causes), Viharaja (regimen related causes), Manasika (psychological causes) related to Amlapitta have strong association in manifesting and aggravating/ relieving the condition of Amlapitta\(^10,21\).

**UPASHAYA (Relieving Factors) OF AMLAPITTA**

Upashaya (relieving factors)\(^22\) of Amlapitta is explained in Kashyapa Samhitha while describing Doshaja types of Amlapitta.

In Vataja type of Amlapitta Snigdha Dravyas such as ghrita (ghee) will act as Upashaya and in Pittaja type of Amlapitta Swadu and Sheeta dravyas such as godhuma(wheat), mudga (green gram) will act as Upashaya. In Kaphaja type Ruksha and Ushna dravyas such as taka (buttermilk)will be acting as Upashaya will be acting as Anupashaya.

**DISCUSSION**

“Prakshalanat hi Pankhasya, Doorat Aasparshanat Pram” As per this reference, it is better to stay away from Nidanas (causative factors) rather than putting efforts to cure disease after its manifestation. Amlapitta has majority of Nidanas (causative factors) as Aharaja (food related causes), Viharaja (regimen related causes) & Manasika Bhavas (psychological causes). Hence one can adopt life style modification in order to control and prevent this disorder. The failure in this attempt will definitely lead to complications of the gut leading to plethora of problems. Hence ideal life style adoption becomes the cheaper and most ideal tool to overcome this disorder.

**CONCLUSION**

Preventive tools of Amlapitta are Ashta Ahara Vidhi Visheshya Ayatana (Eight rules regarding ideal method of food consumption), Dwadasha Ashana Pravicharana (Twelve rules of food consumption), Viruddha Ahara Nishedha (Avoiding Noncompatible foods), adoption of ideal Dinacharya (Adopting ideal daily regimen) and Rutucharya (Adopting ideal seasonal regimen), Yoga & Rutu Anusara Shodhana (Seasonal specific purificatory therapies). More emphasis should be laid to educate community at large about these most essential health etiquettes of Ayurveda. The following of these concepts not only help to prevent only Amlapitta but also other lifestyle disorders too. As per the quotation, ‘Sarvam Anya
Parityaja Shareeram Anupalaye\textsuperscript{23}; one should give prime importance to protect body from disease and to maintain good health status.

REFERENCES