ACID PEPTIC DISORDERS WITH SPECIAL REFERENCE TO
ANNAVAHASROTO VIKARA IN AYURVEDA

Belavadi N Santosh.  A.S.Prashanth

Final Ph.D Scholar, Department of P.G studies in Kayachikitsa, D.G.M Ayurveda Medical College, GADAG-582103 KARNATAKA.

Professor and Head, Department of P.G studies in Kayachikitsa, Ayurveda Mahavidyalaya Hubballi, Karnataka

ABSTRACT

Acid peptic disorders particularly Duodenal Ulcer, Gastric Ulcer in which duodenal ulcers are very common and two are three times more common than Gastric ulcer. Ulcer rates are declining rapidly for younger men and increasing for older individual. Particularly women. Both are common in elderly. Gastric ulcers are associated with a Gastritis affecting the body as well as the antrum of the stomach. The ulcer occurs because of local epithelial damage by cytokines released by H.Pylori and also because of abnormal mucous production.

In Ayurveda the most common Annavahasroto vikaras are Amlapitta, Grahani, Annadravashoola, Parinamashoola. Treatment in terms of Shodhana, Shamana, Rasayana along with following Pathya play important role is pacifying the diseases. Life style modification plays important role in preventing, curing and health promoting of a patient. This article highlights about basic aspects of Duodenal ulcer, Gastric ulcer and other acid peptic disorder in contemporary science and Amlapitta, Parinamashoola, Annadravashoola and different chikitsa modality in terms of Shodhana, Shamana and Rasayana in Ayurveda.

Keywords: Acid peptic disorder, Peptic ulcer, Amlapitta, Annadravashoola, Parinamashoola, Annavahasrotovikara.

INTRODUCTION: In the present era due to Sedentary lifestyle and because of irregular food habits, Stress, Anxiety, Depression leading to many number of Acid Peptic Disorder in which a patient comes to a Doctor with chief complaint of Burning, Belching Bloating etc by which the physician may think in favor of APD.

Prevalence¹: Duodenal ulcer-in 40% and Gastric ulcer in 13% of patients. Whereas negative test result was associated with Duodenal ulcer and Gastric ulcer in only 2-3% of patients respectively.

Duodenal ulcer ²,³: Approximate 50-60% of the adult population worldwide develop duodenal ulcer.

Duodenal ulcer ³: Duodenal ulcer is estimated to occur in 6-15% of western population.

Prevalence: Prevalence is 20-50% in industrialized countries.

In this article about Acid peptic disorder, about basic aspects of Peptic ulcer, duodenal ulcer and Amlapitta, Annadravashoola and Parinamashoola and their management according to different Ayurvedic classics has been discussed. Acid peptic disorders which includes number of diseases whose patho physiology is believed to be the result of damage from acid and pepsin activity in the gastric secretions. Acid peptic disorders are duodenal ulcer, Peptic ulcer, Gastro oesophageal reflex disease (GERD) and so on.

The term Ulcer means: Inflammatory and suppurating lesion internal mucous surface
resulting in necrosis of tissue. (Stomach, Duodenum)

**Peptic Ulcer:** An ulcer of the mucous membrane of the Alimentary tract

**Duodenal Ulcer:** A peptic ulcer of the Duodenum. Acid peptic disorders which includes number of diseases whose pathophysiology is believed to be the result of damage from acid and pepsin activity in the gastric secretions. Acid peptic disorders are duodenal ulcer, Peptic ulcer, Gastro esophageal reflex disease (GERD) and so on.

**Peptic ulcer Prevalence:** Acid peptic disorders are very common in United States, with 4 million individuals affected per year. Life time prevalence of acid Peptic ulcer diseases in the United States is 12% in Men and 10% in Women. Moreover an estimated 15,000 deaths per year occur a consequence of complicated peptic disease.

**Acid peptic disorder result major factors responsible they are:**
Helicobacter pylori
Use / misuse / chronic use of pain killers
Other causes include –
Smoking, Tobacco chewing, Alcohol,
Prolonged use of steroids, Blood group “O”

**Peptic ulcer** - Excavated defects / holes in the GI mucosa. Results from damage to epithelial cells due to effects of acid and pepsin.
- H. pylori
- NSAIDs
- Smoking
- Diet / other diseases / genetics / emotional stress

The disease may cause because of H.Pylori: The Bacteria produces an enzyme Urease which will split into Ammonia Damages mucus layer and Gastric cells.

**NSAIDs:** Gastric mucosa protects itself from gastric acid by prostaglandin. This drug blocks the production of prostaglandin.

**Emotional Stress:** Due to Stress Stimulates limbic area of Brain Stimulates Sympathetic and Parasympathetic nerves in Hypothalamus.

**Peptic ulcer:**
- The characteristic features is
  - Epigastric pain
  - Nausea and Vomiting
  - Heartburn and regurgitation
  - Anorexia and weight loss particularly in Gastric ulcer
  - Sometimes Haematemesis or melaena or perforation.

The clinical features of duodenal ulcer are:
- Pain in the upper abdomen just below the sternum. Occur most before meals, or when hungry. It may be eased with food, antacid. The pain may wake you from sleep. Other symptoms Bloating, Retching (Eject the contents of the stomach through the mouth) and Feeling sick. Sometimes food makes the pain worse

Acid peptic disorder is a term which represents a common group of pathological (disease) conditions also known as peptic ulcer disease in which the inner lining(mucosa) of the stomach and duodenum (common) gets damaged or destroyed.

**Gastric Ulcer** - Attributed to H pylori/NSAIDs induced mucosal damage, Bile acid and Pancreatic enzymes may injure gastric mucosa strongly alkaline in nature.

**Complications of peptic ulcer:**
- **Bleeding:** Upper gastrointestinal (UGI) bleeding
Perforation: Duodenal, antral, and gastric body ulcers

Obstruction: Gastric outlet obstruction is the least frequent ulcer complication. Surgery is now usually only needed if a complication of a duodenal ulcer develops such as severe bleeding or a perforation.

Investigation

Diagnosis: Endoscopy provides a sensitive, specific and safe method for diagnosing peptic ulcers. It is usually the first to diagnose ulcers of esophagus, stomach and duodenum, determine their cause

Radiological examination after Barium meal- Shows the size, shape, motility presence of ulcer in the Stomach. Tissue Biopsy examination to determine if a gastric ulcer is cancerous and to identify the presence of H. pylori. Endoscopy is more reliable than barium contrast X-rays for detecting ulcers in the duodenum.

Other investigation

Blood- Hb%, Stool- Occult blood, FMT

Barium meal: This is similar to a barium swallow (above) aims to look for problems in the stomach and duodenum such as ulcers, polyps, tumours

If u drink a white liquid that contains a chemical called barium sulphate, the outline of the upper parts of the gut (esophagus, stomach and small intestines) shows up clearly on X-ray pictures. This is because X-rays do not pass through barium.

Treatment- Aims- Relief of symptoms, Heal ulcer, Prevent complications and Prevent recurrence.

Guidelines- Stop smoking, Avoid stress, Avoid NSAIDs, Alcohol Dietary modifications

Annavahasrotovikara in Ayurveda The most common conditions are Amlapitta, Grahanai, Annadravashoola

Parinamashoola

AMLAPITTA 6: 

| Nirukti: 7, 8 Acharya Charaka and Madhavakara said increased amlaguna of Pitta is nothing but Amlapitta. Acharya Kashyapa explained Vidagdha annarasa turn to Shuktata this annarasa retained in Amashaya and produces Amlapitta. 9 |

Paryaya: Prameelika, Pittavisuchika, Amlaka Acharya Sushruta used the word Amleeka as synonyms Acharya Yogaratnakara used the word Pittamla

<table>
<thead>
<tr>
<th>Table 1 showing Nidanas of Amlapitta:</th>
<th>Agnidustikaraka nidana-</th>
<th>Viharaja-</th>
<th>Pittaprakopaka nidana-</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ajeerne Bhojana, Adhyashana, Vishmashana, Atiruksha Bhojana Kulatha, Dustanna,Guru ahara, Vidahi Anna Pana Sevana Viruddhashana- Does Vishamata of Agni- unable to digest light food-Undergoes</td>
<td>Bhukte, Bhuktesnana, Bhukte Avagahana Vegadarana, Desha, Kala, Rutu vaishyamyat vitiation of doshas resulting in agnidushti manifest Amlapitta</td>
<td>Bhukte Divaswapna, Mdhya, Sura, Madhyana, Madhyaratri and Ushnakala, Krodha Atikulathasevana, Adika Amla Katu, Lavanasevana- Agravates pitta –Vidagdhata of food Amlapitta</td>
<td></td>
</tr>
</tbody>
</table>
shuktapaka continues for long time leading to Amlapitta.

In Charakasamhita the term Amlapitta highlighted in Charakasamhita chikitsasthana 15th chapter. Acharya Charaka explained the vitiated Agni unable to digest the lightest food produce to shuktatva which leads to Visharupatam. When Amavisha mixes with the doshas it manifests Vataja, Pittaja, Kapaja Acharya Charaka and Vagbhata not highlighted the disease Amlapitta but they used the term while explaining various instances.

- Kulatha amlapittakaranam
- Atilavana-Amlapittakaranam,
- Virudda aharajanyaroga-Amlapitta
- Ksheerapana amlapitta haranam sreshta
- Kamsaharitaki-Amlapitta
- Dashamulaharitaki- Amlapitta

AMLAPITTA SAMPRAPTI
Vidahi adi pitta prakopaka ahara, vihara

\[
\begin{align*}
&\text{Pittadi dosha prakopa} \\
&\text{Jatharagnimandya} \\
&\text{Vidagdha of Ahara} \\
&\text{Suktapak} \\
&\text{Amotpatti} \\
&\text{Tiktamlodgaradi lakshanas} \\
&\text{Amlapitta rogotpatti}
\end{align*}
\]

Samprapti Ghatakas :
Dosha: Pitta pradana Tridosha, Pachakapitta, Kledakakapha and Samanavata.
Dushya: Rasadhatu.
Agni: Jataragni.
Ama: Jataragnimadhya.
Srotus: Rasavaha, Annavaha.

Srotodusti prakara: Sanga and Atipravrtti.
Udbhavasthana: Amashaya.
Adhisthana: Amashaya
Sancharasthana: Annavaha srotus.
Vyaktasthana: Mukha and Guda.
Rogamarga: Abhyantara.

According to Doshas
1. Vataja Amlapitta
2. Pittaja Amlapitta
3. Kaphaja Amlapitta

Madhavakara has given four types.
1. Vatadhika Amlapitta
2. Kaphadhika Amlapitta

Table 2 showing Types of Amlapitta

<table>
<thead>
<tr>
<th>According to Doshas</th>
<th>According to sthana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kashyapa has given three types.</td>
<td></td>
</tr>
<tr>
<td>1. Vataja Amlapitta</td>
<td></td>
</tr>
<tr>
<td>2. Pittaja Amlapitta</td>
<td></td>
</tr>
<tr>
<td>3. Kaphaja Amlapitta</td>
<td></td>
</tr>
<tr>
<td>two types of Amlapitta.</td>
<td></td>
</tr>
<tr>
<td>1. Urdhavaga Amlapitta</td>
<td></td>
</tr>
<tr>
<td>2. Adhoga Amlapitta</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>According to sthana</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Adhoga Amlapitta</td>
</tr>
</tbody>
</table>

www.ijaar.in

IJAAR VOLUME III ISSUE VI JAN-FEB 2018
Table 3 showing Lakshanas of Amlapitta

<table>
<thead>
<tr>
<th>Lakshanas of Amlapitta</th>
<th>Urdhvaga Amlapitta</th>
<th>Adhoga Amlapitta</th>
<th>Doshanubedhena</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amlo, Tiktodgara</td>
<td>Harita, Peeta,</td>
<td>Bhrama, Thrishna</td>
<td>Vataja- Jrumbha,</td>
</tr>
<tr>
<td>Kanta, Urovidaha</td>
<td>Neela, Krishna,</td>
<td>Hrillasa, Daha,</td>
<td>Angasada Shoola,</td>
</tr>
<tr>
<td>Kukshi, Hritdaha</td>
<td>Arun, ati amla</td>
<td>Angapeetata,</td>
<td>Snigdha upashamana</td>
</tr>
<tr>
<td>Uklesha, Avipaka</td>
<td>vanama</td>
<td>Harsha, Moha &amp;</td>
<td>Pittaja- Bhrama,</td>
</tr>
<tr>
<td>Antrakujana</td>
<td>Tikta amlodgara</td>
<td>Murcha</td>
<td>Vidaha Sheetopa shamanam</td>
</tr>
<tr>
<td>Vibandha, Gourav</td>
<td>Hrit, Kanta, Kandu</td>
<td></td>
<td>Kaphaja- Chardi,</td>
</tr>
<tr>
<td>Angasada</td>
<td>Kukshidaha,</td>
<td></td>
<td>Ruksopashaya Guruta</td>
</tr>
<tr>
<td>Romaharsha</td>
<td>Jwara, Shiroruja,</td>
<td></td>
<td>Sanila- Tamodarshana,</td>
</tr>
<tr>
<td></td>
<td>Aruchi</td>
<td></td>
<td>Shoola, Murcha, Kampa,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pralap, Vibhrama.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Kaphanugate- Aruchi,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Angasada, Kaphastheevana,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Sadaha, Udaragourava &amp; Jadyata</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Vata Kapha- Here Both</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Vataja and Kaphaja</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Lakshanas are present</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Sleshmapittaje-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Shiroruja, Bhrama,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Mukhamadhuryata,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Chardi, Aruchi, Tikta,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Katu, amlodgara, Kanta,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Hrit, Kukshidaha, Alasya,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Murcha</td>
</tr>
<tr>
<td>Uapashaya- Vataja-</td>
<td>Snigdha Ahara,</td>
<td>Swaprakopaka nidana sevana vitiates Vayu, Kapha does avritta to Pitta Shoola.</td>
<td></td>
</tr>
<tr>
<td>Pittaja- Madhura sheeta</td>
<td>Kaphaja-Ruksha, Ushna Ahara said by acharya Kashyapa.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anupashaya- Nidanas</td>
<td></td>
<td></td>
<td>Shoola will be during the time of digestion this is Parinamashoolo.</td>
</tr>
<tr>
<td>Amlapitta Upadraiva:</td>
<td></td>
<td></td>
<td>Amashaya chuta kapha mixes with vikrita Pitta, vitiates Vata manifest shoolo during ahara pachanakala in regions like Kukshi, Udaraparshva, Nabhi, Bastipradesha, Stana and Kati pradesha any one of the area are in all regions. By the intake of</td>
</tr>
<tr>
<td>Jwara, Atisara, Pandu,</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
food, By Vomiting, after complete digestion of the food *shoola* get subside.

**Parinamashoola**

**Vatika**- Admana, Atopa, Arati, Kampa, Malamutravibandha- with Snigdh, Ushna padarth Shamaana.

**Pittaja**- Trishna, Daha, Glani upadravayuktta Amla lavana padarthoppana Sheeta padartha Shamana

**Kaphaja** Chardi, Hrullasa, Moha and Alpavedana Katu Tiktadravya-Shamana

**Dwandvaja**, **Tridoshaja** Dvilakshana yukt Trilakshanyuktta and said in Vangasenasamhita and Gadanigraha.

**Asadhyya Parinamashoola**: When person becomes Mamsaksheena, Bala and Jatharagni ksheena utpanna Parinamashoola is said to be asadhyya


**Annadravashoola** **18**: Shoola may manifest after digestion of the food or during the digestion of the food, by following *pathyapathay* or by taking or not taking food the *Shoola* will not get subside. 

**Annadravashoola**:

- By following *pathyapathay* or by taking or not taking food the *Shoola* will not get subside

**Parinamashoola**: *Shoola* will be during the time of digestion

**Parinamashoola**: *Shoola* in regions like Kukshi, Udaraparshva, Nabh Bastipradesha, Stana and Kati pradesha any one of the area are in all regions. By the intake of food, By Vomiting, after complete digestion of the food *shoola* get subside.

**Amlapitta Chikitsasutra** **18**: Poorvam tu vamanam karyam.........

Vamana, Mridu virechana, Basti Y.R, C.D, Raktamokshana- Vangasen

Acharya Kashayapa said Sthanaparitithyaga.

The tiktarastra pradhana dravyas like Patola, Vasa Nimba, Guduchi are indicated.

**Annadrava, Parinamaschoola Chikitsasutra**: Vamana, Virechana and Bastikarma Vatajanita-Snehyuktayoga, Pittajanita-Rechanadi Kaphajanita-Vamanadi

**In Parinamaschoola** **19**- Tikta and madhurasidda vamana, Virechan and Basti

Amashayagata dosha-Vamanakarma and in Pacchamanavastha- Virechana and Niruhabasti Pakvashayagata Anuvasanabasti – Until Pittante-Vamana

Kaphante -Virechana then follow same line of treatment as that of Amlapitta said by acharya Gadanigrahaka.

**Amlapitta Pathyapathya** **20, 21**: Pathya- Laghu sheeta, madhura tiktarastra, Yava, Mudgayusha, Lajasaktu, Karkotaka, Karavellaka, Patola, Kushmada, Dadima Godugdha, Ghrita

**Annadravashoola**

**Annadravashoola** : by following *pathyapathay* or by taking or not taking food the *Shoola* will not get subside

**Parinamaschoola**: *Shoola* will be during the time of digestion

**Parinamaschoola**: *Shoola* in regions like Kukshi, Udaraparshva, Nabh Bastipradesha, Stana and Kati pradesha any one of the area are in all regions. By the intake of food, By Vomiting, after complete digestion of the food *shoola* get subside.

<table>
<thead>
<tr>
<th><strong>Amlapitta Pathyapathya</strong> <strong>20, 21</strong>:</th>
<th><strong>Annadravashoola, Parinamaschoola Pathyapathya</strong>:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pathya</strong>- Laghu sheeta, madhura tiktarastra, Yava, Mudgayusha, Lajasaktu, Karkotaka, Karavellaka, Patola, Kushmada, Dadima Godugdha, Ghrita</td>
<td>Acharya Vangasen and Bhaishajyaratnakara seaid Godhuma manda, mixed with ghrita, guda, shankara sheetala ksheera-Pana Shalitandula manda, Yavamanda with ghrita,</td>
</tr>
</tbody>
</table>
ApathyaTila,Masha,Kulatha,Dhanyamla
Madhya, Amla, Lavana katurasa pradhanahara varjya.
Kashyapa lastly explained Deshantaragamana (Quit the place) to cure for the disease Amlapitta

Kashyapa lastly explained Deshantaragamana (Quit the place) to cure for the disease Amlapitta.

ApathyaTila,Masha,Kulatha,Dhanyamla
Madhya, Amla, Lavana katurasa pradhanahara varjya.
Kashyapa lastly explained Deshantaragamana (Quit the place) to cure for the disease Amlapitta

Most practicable treatments in these conditions:

- Deepana pachana with Avipattikarachurna or Agnitundivati for 3-5days with Jala Shodhana procedures like Shamanasneha- with Dadimatadighrita, Sukumaraghrta, Indukanta ghrita.
- Sadhyovamana- If necessary
- Arohanasnehapana followed by Virechana- Dadimatadighrita, Sukumaraghrta or Ghrita mentioned in that context is better option
- YastimadhuKsheerabasti-A. Yastimadhu Ksheerapaka Basti B.Nirruhabasti pattern as mentioned in classics.
- Anuvasana basti with Yastimadhu ghrita.

Shamana yoga

Table showing Treatment of Amlapitta, Parinamashoola & Annadravashoola

<table>
<thead>
<tr>
<th>Amlapitta yoga</th>
<th>Parinamashoola-</th>
<th>Annadravashoola-</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guduchadi kwatha</td>
<td>Aparajitamulakalka mixed with sharkara,madhau and Ghrta</td>
<td>Louhaguggulu-1karshapramana vati with Usnjala</td>
</tr>
<tr>
<td>Patoladi kwatha</td>
<td>Nagaradikalka-Shunti,Tila and Puranagudakalka</td>
<td>Pathyadilouha-Haritakichurna and Louhabhasma with goghrita</td>
</tr>
<tr>
<td>Avvipattikarachurna</td>
<td>pachan is done in ksheera taken for 7days</td>
<td>Krishnadhyalouha-Pippali, Haritakichurna and</td>
</tr>
<tr>
<td>Hingvadichurna</td>
<td>Shambukabhasma with ushna jala anapana</td>
<td>Nagaradikalka</td>
</tr>
<tr>
<td>Laghusutsekhararas</td>
<td>Shambukadivatika-prathakala</td>
<td>Shambhukabhasma</td>
</tr>
<tr>
<td>Kamadugarasa</td>
<td>yatanusaramatra</td>
<td>Tiladigutika</td>
</tr>
<tr>
<td>Shathavrighrta</td>
<td>Vaishvanarachurna-Parinamshoola-C.D</td>
<td>Narikelakshara</td>
</tr>
<tr>
<td>Drakshadighrta</td>
<td>Samudradhyachurna-</td>
<td>Shankhachurna</td>
</tr>
<tr>
<td>Jeerakadighrta</td>
<td></td>
<td>Samudradysachurna</td>
</tr>
<tr>
<td>Rasayana-Narikela</td>
<td></td>
<td></td>
</tr>
<tr>
<td>khanda, Khanda</td>
<td></td>
<td></td>
</tr>
<tr>
<td>pipalli avaleha,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amalakikhandha,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jeerakadhyavaleha,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dadimatadhyavaleha</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**DISCUSSION**

While explaining *Shamanayoga:*

- **Shudhavarga preparations**
  Shambhukadi, Shankha Shukti, Kapardika etc will be highlighted by various acharyas these preparations are act as antacids maintains acid secretions, reduces shoola and Shotha

- While explaining different yogas and as well as Rasayana yogas of Anndravashoola, Parinamashoola when we look into the benefits majority of them are also indicated in Amlapitta. Hence for the diseases like Amlapitta, Parinamashoola and Anndravashoola follow similar yogas in all these conditions.

**Why there is different colours of Vamana in Amlapitta?**

Different colours of Vamana in Amlapitta like hareeta, peeta, neela….because of involvement of pittadosha and when Pitta attains vidhagdhata produces different colours.

**How to differentiate Urdhvaga and Adhoga Amlapitta?**

In Urdhvaga- hareeta, peeta, neela….Vamana Adhoga- hareeta, peeta, neela..Atisara is the main difference.

**Amlapitta Pittapradhana Why Vamana?**
Amlapitta is Amashaya samudbhava and it is also treatment for Kapha as well as Pitta For Amlapitta Annadrava, Parinamashoola Tiktarasa pradhanah dravya are specified what is the Rationality?

Tiktarasa dravya like Patola, Nimba, Vaasa, Guduchi… possess Laghu, Rukshaguna, Sheetaverya pacifies Pitta and does Agnideepana, amapachaka helpful in Aruchi, Praseka, Krimi daha. Thats why. Shali is said to be Apathya as it is said to be sarve Pathya by Charaka Here shali produces the Vidhayadhata which is the preliminary stage of the disease

Upavasa- Because of excess Pachakapitta produces irritation to the mucus membrane produces the disease

Few Guidelines to the patient, Healthy person

- Take food then only when previous food was properly digested
- Avoid excess tea, coffee, alcohol and carbonated drinks
- Avoid excess intake of NSAIDs
- Avoid irregular food habits and heavy food articles and overeating
- Don’t go for junk foods like Fast food, Bakery items, too spicy too fatty etc
- Avoid divaswapna and ratrijagarana
- Chinta, Shoka, Bhaya, Krodha etc kept aside while taking food
- Always hita, mita, laghu and dravayukata ahara and which is easily digestible is always preparable.
- When there is Ama and Ajeerna lakshanas are present Langhana is first and best

CONCLUSION:

- In the initial stage of the disease and in Doshautkleshata or by looking into vyadhiavastha then only Vamana is to be done.
- To prevent the disease and recurrence ideal Rasayana prayoga is done for better results.
- Apart from treatment proper guidance about the lifestyle which is most essential to the patient.
- The Budhimana vaidhya should plan the appropriate treatment based on patients Vaya, Bala Prakriti…etc

- The diseases like Duodenal ulcer, Peptic ulcer which will correlating with Parinamashoola and Annadravashoola in Ayurveda.

REFERENCES:


18. Jain Sankarlalji Vaidya, Vangasena, Vangasena samhita, Amlapittadikara
Mumbai Khemaraj Srikrishnadas publishers; 1996. P.N. 648-656

Corresponding Author: Dr. Santosh N. Belavadi. Final Ph.D Scholar, Department of P.G Studies In Kayachikitsa, D.G.M Ayurveda Medical College, Gadag-582103 Karnataka
Email: ayursnb@yahoo.co.in

Source of support: Nil
Conflict of interest: None Declared

Cite this Article as: [Belavadi N Santosh et al : Acid Peptic Disorders with Special Reference to Annahvasroto Vikara in Ayurveda] www.ijaar.in : IJAAR VOLUME III ISSUE VI JAN -FEB 2018 Page No:1001-1011