Management of Dyspepsia W.S.R to Amajirna- A Case Study

Dr. Nikhil Neelakandhan. E. U¹

¹Associate Professor, Dept. of Kayachikitsa, Vaidyaratnam Ayurveda College.

ABSTRACT

Amajirna is a common clinical condition that has symptoms such as - Yadhabhukta Avidagdha Udgara, Praseka, Utkleda, Gatra Gaurava, Akshikoota sotha. As per classics, the treatment of Amajirna includes Dipana and Pachana. Amajirna has resemblance with dyspepsia. Dyspepsia or indigestion is a common gastro-intestinal disorder with symptoms like nausea, bloating, early satiety, post prandial fullness, abdominal discomfort etc. There are various causes for the occurrence of dyspepsia including micro-organisms. The present case report is of a 41 years old male with onset of symptoms such as nausea, bloating, abdominal discomfort, early satiety, Yadhabhukta Avidagdha Udgara (burping with the same taste of food consumed), Praseka (excess salivation) and Utkleda (nausea) since one or two weeks in every month for the last 6 months. He was taking antacids while coming to the OPD, and got temporary relief. Gradually, even after taking his normal diet, the symptoms started to re-occur and effect of his medications lasted for only a few weeks. The patient was given Pathyadi Churna with Masthu as Anupana for 7 days. It was observed after the completion of treatment that all the symptoms disappeared after 7 days. Also, no reoccurrence for the next 4 months. This shows the Pathyadi Churna with Masthu has a significant effect in relieving the symptoms of dyspepsia/Amajirna.

KEYWORDS:

Dyspepsia, Amajirna, Pathyadi Churna, Masthu, Probiotic.

INTRODUCTION

Ajirna is the Ayurvedic term indicated for indigestion^[1]. Ajirna is generally classified into 6 via, Ama, Vidagdha, Vishtabdha, Rasasesha, Dinapaki and Prakrutha^[2]. Among these 6, Ama is the most common type of indigestion which is caused by Kapha Dosha^[3]. Due to Nidana seva, the increased Kapha diminishes the Jadharagni and cause Amajirna ^[4].

Dyspepsia is a possible modern correlation for *Amajirna*. The term dyspepsia stands for bad digestion or improper digestion^[5]. Dyspepsia is a clinical condition associated with a complex of upper abdominal symptoms including abdominal discomfort/pain, abdominal fullness, early satiety, bloating, belching and nausea^[6]. *Pathyadi Churna* is a classical herbo mineral preparation mentioned in both, *Chakradutta*^[7] and *Bhaishajya Ratnavali*^[8]. The ingredients of *Pathyadi Churna* are *Pathya (Terminalia chebula* Retz.)^[9], *Pippali (Piper longum* L)^[10], and *Souvarchala Lavana* (black salt)^[11]. This medicine is advised to take either with *Ushna Jala* or *Masthu* (curd water)^[12]. As per the text, this medicine is beneficial in 4 types of *Ajirna* via *Ama, Vidagdha, Vishtabdha* and *Rasasesha*^[13].

As *Amajirna* and dyspepsia are correlated, the present case was treated with *Pathyadi Churna* with *Masthu* as *Anupana* considering the probiotic effect of *Masthu* in dyspepsia^[14].

Patient information

A 41 years old male patient working as shop keeper of Indian citizen approached *Kayachikitsa* OPD of Vishnu Ayurveda College, Shoranur, Palakkad dist, Kerala, India on November 16th of 2021 with symptoms nausea, bloating, early satiety, abdominal discomfort, *Yadhabhukta Avidagdha Udgara*, *Praseka* and *Utkleda*. For the last 3 years, patient has these symptoms lasting one or two weeks in every month and aggravated very much



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since last 10 days. Symptoms get worse while he takes curd, sweets and oily food items. Taking light foods like *Kanji* reduced the symptoms for a short period. On physical examination, the patient was moderately built, anxious, pale and had coated tongue. The blood pressure was 134/78mmHg, pulse was 84bts/min, respiratory rate was 14 per minute. Body temperature was 98.6°F. On abdominal examination, no significant symptoms like tenderness were present. The patient had *Kapha-Pitta Prakruthi*. The patient had no history of any other major systemic diseases. The patient was non-alcoholic and non- smoker. There was no significant family history. When the patient came for consultation, he was taking Pan D capsules and Gelusin tablets in the last 10 days, but with not much relief (table 2). The differential diagnosis includes GERD, gastric ulcer and peptic ulcer. From Ayurvedic point of view, *Vidagdhajirna*, *Vishtabdh- ajirna* and *Urdhwaka Amlapitta* are included in the differential diagnosis (table 1).

Table 1: Differential Diagnosis of Dyspepsia and Amajirna

S.No.	Disease	Inclusion	Exclusion
1	GERD ¹⁵		No nausea. Chest pain and sensation of lumb in the throat present
2	Peptic ulcer ¹⁶	Abdominal discomfort, loss of appetite	Pain relieved by food intake and increased pain between meals
3	Gastric ulcer ¹⁷	Bloating, nausea, fullness of abdomen	Symptoms of gastric ulcer such as vomiting and pain in the abdomen are absent
4	Dyspepsia	Early satiety, abdominal discomfort, nausea and bloating	
5	Vidagdhajirna ¹⁸	Udgara, Aruchi, no Bhaktakamksha	No <i>Praseka, Utkleda</i> and <i>Yadhabhukta</i> Avidagdha Udgara
6	Vishtabdhajirna ¹⁹	Adhmana (distention), Aruchi, no Bhaktakamksha	No <i>Praseka, Utkleda</i> and the patient have <i>Vibandha</i>
7	Urdhwaga ²⁰ Amlapitta	Aruchi, Yadhabhukta Avidagdha Udgara	Patient do not have symptoms like Chardi, Daha, Sirashoola
8	Amajirna	Yadhabhukta Avidagdha, Udgara, Praseka, Utkleda	

The patient had symptoms such as nausea, bloating, early satiety, abdominal discomfort, *Yadhabhukta Avidagdha Udgara*, *Praseka* and *Utkleda*. In view of similarity of symptoms and comparability established in previous published work the case was diagnosed as *Amajirna* (dyspepsia).

Ayurvedic Management

The patient was assessed by *Dasavidha Pareeksha* and *Ashtasthana Pareeksha* before planning the Ayurvedic treatment. No conventional medicines were administered during this period. Advised and notified the patient about the importance of *Pathya* (diet) during the treatment. Patient's consent was collected before the starting the treatment. 5gm of *Pathyadi Churna* with 60ml of *Masthu* (curd water) was given to the patient 2 hours before the breakfast, on the 1st day of treatment. For around 2 hours, patient had *Yadhabhukta Avidagdha Udgara* and later, when the pure burping started, patient was given *Laja Peya*15 with a pinch of *Saindhava Lavana*. Advised to take *Kanji* (rice gruel) for lunch and not to take any pickle and oily food items. Evening at around 6.30pm, 5gm of *Pathyadi Churna* with 60ml of *Masthu* was given to the patient. *Avidagdha Udgara* continued for around 2 hours. At around 8.30pm, he took rice and garlic *Rasam* for dinner. For the next 7 days, the medicine with its *Anupana*1169 continued 2 hours before food twice a day via morning and evening 2 hour before food. A special diet chart was given for the first 3 days of treatment (table 3). After 7 days of medications, the patient examination was conducted to check any symptoms still persisting and also advised him about the do's and don'ts for the next 1 month.



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Outcome

The follow up of the patient through telephone was done for next 4 months. The effect of the treatment was assessed based on the subjective parameters and QoL scale^[17]. After the treatment, the patient didn't report the reoccurrence of symptoms till 4 months. Overall condition of the patient was improved. The symptoms of *Amajirna* like *Yadhabhukta Avidagdha Udgara, Praseka* and *Utkleda*^[18] were completely disappeared in 7 days of treatment along with the symptoms of dyspepsia^[19] like early satiety and nausea. Abdominal discomfort and bloating were disappeared after 10 days of medications. The QOL (Quality of Life) changed from 10 to 100 in 7 days.

DISCUSSION

Table 2: Course of the Disease

Date/ Year	Incidence
2019 May/June	Patient felt very much bloated after drinking soft drink in the afternoon and by night, he started feeling pain in the abdomen. Consulted doctor next day and took Pantoprazole tab and symptoms reduced gradually.
2019 December	Again, he started feeling bloated and abdominal discomfort after having Biriyani. He didn't consult doctor, but took Pantoprazole tab and symptoms temporarily relieved.
2020 August	Already he had mild bloated feeling, but he observed after eating non-vegetarian food, oily food and curd, the symptoms got worse. Then he consulted doctor and took LFT (19/08/20) and the results were normal.
2021 January	Continues bloating and discomfort in the abdomen. Whenever he takes sweets and oily food, the started getting <i>Utkleda</i> /Nausea, <i>Praseka, Yadhabhukta Avidagdha Udgara</i> . Then he reduced intake of sweets and oily food items. Other than bloating and discomfort, other symptoms gradually reduced. Didn't consult any doctor.
2021 June	After taking fish curry and rice, already persisting bloating and abdominal discomfort got worse. Also, the symptoms like Nausea, <i>Utkleda, Praseka, Yadhabhukta Avidagdha Udgara</i> , early satiety etc. started. Symptoms continued for more than 8 days and then he consulted doctor and LFT done on 13/06/2021 and the results were normal.
2021 November	Abdominal discomfort and bloating got very worse. Recurrent onset of other symptoms like Nausea, <i>Utkleda, Praseka, Yadhabhukta Avidagdha Udgara</i> , Early satiety etc. appeared. Then he consulted at <i>Kayachikitsa</i> OPD of Vishnu Ayurveda College on 16/11/2021. LFT taken and the results were normal. QoL scale showed the value 10 (scale is ranging from 0-100).



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Table 3: Timeline of Ayurveda Management

Incidence	Intervention
Udgara, Praseka and Utkleda were present at the tire of visit. LFT taken. Bilirubin (Total)- 0.9mg/dl, Bilirubin (Direct 0.3mg/dl, Bilirubin (Indirect)-0.6mg/dl, SGOT-IU/L, SGPT-40 IU/L, Alkaline Phosphate- 64 IU/L, total protein- 7.0gm/dAlbumin- 4.1gm/dL, Globulin- 2.9 gm/dL, A/G ratio	hegiven at 11 am and advised to take <i>Laja</i> ty, <i>Peya</i> for lunch. Evening at 6.30pm, 5gm of haPathyadi Churna + 60ml of Masthu taken ne Dinner taken at 8.30pm. Only rice grued without any pickle was taken. No tea and the snacks were taken in the evening.
2:All symptoms still persist QoL= 15	5gm Pathyadi Churna+ 60ml Masthu at 7am. Breakfast at 9.30am- Laja Peya+ Dadima. Lunch- Rice + Rasa. 6pm- 5gm Pathyadi Churna+ 60ml Masthu. Dinner at 8.30pm. 3 Idly.
3: Nausea, <i>Utkleda</i> and <i>Praseka</i> absent. Other sympton like early satiety, Abdominal discomfort, bloatin <i>Yadhabhukta Avidagdha Udgara</i> present. QoL= 30.	ng,Lunch: Rice and <i>Rasa</i>
No continues bloating present. Abdominal discomforms 4: still present. no early satiety. Duration of <i>Yadhabhuk Avidagdha Udgara</i> reduced 50%. QoL=50	1.10m P(1101)(11111 COUP) + DUM1
Only persisting symptoms are Bloating and abdomin discomfort. All other symptoms are absent. QoL= 75: Only occasional bloating present. no significate abdominal discomfort felt. QoL = 90	5gm <i>Pathyadi Churna</i> + 60ml <i>Masthu</i> at 6.30am and 6pm. No special diet.
6:	5gm Pathyadi Churna+ 60ml Masthu at 7am and 6.30pm. Normal diet started Minimal quantity of oily food items and non-vegetarian food.
No symptoms present. also felt good appetite. Qol 100	_= 5gm <i>Pathyadi Churna</i> + 60ml <i>Masthu</i> at
7:	6.30am and 6pm. Normal diet with minimal oily and non-vegetarian food recommended.
	1: Patient consulted at <i>Kayachikitsa</i> OPD of Vish Ayurveda College, Shoranur, Palakkad, Kerala. T symptoms like nausea, bloating, early satie abdominal discomfort, <i>Yadhabhukta Avidagd Udgara</i> , <i>Praseka</i> and <i>Utkleda</i> were present at the tir of visit. LFT taken. Bilirubin (Total)- 0.9mg/dl, Bilirubin (Direce 0.3mg/dl, Bilirubin (Indirect)-0.6mg/dl, SGOT-IU/L, SGPT- 40 IU/L, Alkaline Phosphate- 64 IU/L, total protein- 7.0gm/d Albumin- 4.1gm/dL, Globulin- 2.9 gm/dL, A/G ratil.4 2: All symptoms still persist QoL= 15 No continues bloating present. Other symptom like early satiety, Abdominal discomfort, bloatin <i>Yadhabhukta Avidagdha Udgara</i> present. QoL= 30. No continues bloating present. Abdominal discomfort still present. no early satiety. Duration of <i>Yadhabhuk Avidagdha Udgara</i> reduced 50%. QoL=50 Only persisting symptoms are Bloating and abdominal discomfort. All other symptoms are absent. QoL= 75: Only occasional bloating present. no significa abdominal discomfort felt. QoL= 90 6: No symptoms present. also felt good appetite. Qol 100

Dyspepsia is a very common, with surveys reporting a point prevalence of 25-40%[21,22,23]. This would only be important if dyspepsia resulted in a reduction in the length or quality of life. Unfortunately, although the usual



causes of dyspepsia are rarely fatal, it may be associated with a reduction in quality of life^[24]. Investigations and treatments for dyspepsia continue to be more sophisticated and expensive. Resources however are limited and health care decision makers are increasingly under pressure to contain costs^[25].

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The modern management of dyspepsia with several drug classes like proton pump inhibitors, H2 blockers, prokinetic drugs etc., have been performed frequently without validated disease specific test instruments for the outcome measurements^[26]. Also, there occurrence of the symptoms is very common.

In the present case, the patient has symptoms such as nausea, abdominal discomfort, early satiety, bloating, Yadhabhukta Avidagdha Udgara, Praseka and Utkleda. These symptoms come under dyspepsia in modern view and Amajirna in Ayurvedic view.

Agni has an important role in the physiological functioning of body^[27]. Agni converts Ahara into Dhatu and nourishes the body^[28]. Ajirna is a pathological condition in which the diminished Agni causes improper digestion of food. Amajirna is one among the 6 types of Ajirna which has Kapha predominance. The main organ involved in the manifestation of Ajirna is Grahani^[29].

The general treatment protocol for *Ajirna* is *Langhana*^[30]. *Langhana* is of 12 types^[31]. *Upavasa*, *Dipana*, *Pachana* etc. are some of them. Generally, if Ama is very excessive in quantity, Sodhana is done^[32]. If Ama is moderately present, Pachana and Dipana medicines are consumed[33]. If the Ama formed is very less, Upavasa or fasting is enough[34].

When we closely observe the ingredients of Pathyadi Churna, all three of them are Agni Dipana and Ama Pachana in nature. The other properties of ingredients, like Laghu Guna, Ruksha Guna, Ushna Virya, Katu Rasa, Anuloma Guna helps to digest the Ama quickly and increase the digestive fire (Jadharagni).[35]

The antimicrobial activities, especially antibacterial and antifungal activity of Pathya has been discovered[36] which may help to cure dyspepsia. An active content in *Pippali* called Piperine is found to have antimicrobial activities[37]. Also, a content called Piperlongumine is found to have antispasmodic effect[38]. These may help to relieve the symptoms of dyspepsia.

Both Ushna Jala and Masthu are indicated as Anupana for Pathyadi Churna^[39], but preferred Masthu over Ushna Jala for the patient because of the probiotic nature of Masthu/curd water. Masthu has the same properties of Takra, like Laghu Guna, Kashaya-Amla Rasa, Dipana and Kapha-Vatahara^[40]. These qualities help to digest the Ama and increase the Jadharagni. Masthu/ curd water is rich in Lactobacillus bacteria^[41]. It helps to promote digestion, so when consumed with Pathyadi Churna, it helps to cure dyspepsia/Amajirna.

Pathyadi Churna with Masthu is prescribes before food, because it helps to increase the activity of probiotic organisms and secretion of digestive enzymes. By that way, the Ama will be digested and appetite is restored

CONCLUSION

This case report demonstrates clinical improvement in dyspepsia/Amajirna with Pathyadi Churna with Masthu as Anupana. Asthis is a single case study, this may be a new path to the clinicians and explore the herbo-mineral preparations added with probiotic ingredients as an option for the treatment of dyspepsia/Amajirna.

Limitations

To establish the treatment as preferred one, a large sample size should be taken. As one third of the ingredient is Salt, it may adversely affect those who have hypertension. Also, there may be some adverse effect for *Pathya* or *Pippali* in some people.

Declaration of Patient consent

The authors certify that they have obtained all appropriate patient consent forms.



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