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A Review Of Article On Effect Of Sheetali Pranayam And Pathya Apathya In Amlapitta W.S.R To Nidan Panchak

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Abstract

A major problem in the modern day is Amlapitta, which is brought on by excessive use of katu, snigdha, viruddha, Abhishyandi, Atyushna, Vidahi, Pista Anna, altered lifestyles, and indulgence in Diwaswapna, Ati Udaka Panam, and chinta. These contributing variables also cause Agnimandya and vitiate Pitta's Dravata, which results in shukhtatva and vidagdhata of the ahara rasa. Therefore, improving Agni and adhering to appropriate pathya are crucial for treating Amlapitta in order to prevent the condition. Vitiated Agni (appetite) is the cause of Amlapitta, one of the most prevalent Annavahasrotas (gastrointestinal tract) disorders. Amlapitta is a condition in which Samata causes a rise in the Amlaguna (sour taste) of Pachak Pitta (gastric juice). These days, disruptions to a person's lifestyle extend beyond his or her habits and activities to include the type and manner of food consumed. In order to maintain excellent health, Ayurveda has placed the highest value on an ideal diet and how it varies depending on the season, Agni, Prakruti, age, and place of residence. Acharya Charaka provided a scientific explanation of Ahara Vidhi Vidhan and Asta Aharavidhi Visheshayatana. Failure to follow these results in an imbalance in Doshas, which in turn causes sickness to emerge. An essential tool for disease diagnosis is Nidana Panchaka. Studying Nidanapanchaka contributes to a thorough comprehension of Amlapitta's Nidana, Lakshana, Samprapti, Upashaya, and Anupashaya, all of which support Samprapti Vighatana. According to Hathyoga Pradipika, Sheetali Pranayam performs exceptionally well in Pitta Vikara. Since pathya apathya is the most important aspect of life and its imbalance is the main cause of Vyadhi Samprapti, it is imperative that individuals understand its significance, as well as when and how to have Aahar.

Keywords: Amlapitta, Nidana Panchaka, Pathya Apathya, Hyperacidity, Annavahastrotas, Sheetali, Pranayama.

Introduction:

Amlapitta is one of the illnesses that result from improper and flawed eating habits, which also induce dushti of annavaha strotas. Brihattrayi makes no reference of Amlapitta. The Kashyapa Samhita was the first to mention it. It has also been described Madhava aptly by Nidana. Bhavaprakasha, and Yoga Ratnakara. According to Vagbhata, Mandagni is the root cause of all illnesses. Pitta dosha is aggravated by consuming too much Amla, Katu, Ushna, Vidahiaharsevana, and Viruddhashana. Pitta typically has Katu rasa, however Amlapitta results when Katu rasa is changed to Amla rasa^[1]. People today are dealing with tough situations. Not only did westernisation restrict their activities and habits, but it also altered the type of food they ate and how they consumed it. Westernisation is linked to a rise in the use of junk food, carbonated drinks, sweets, tobacco, and alcohol. Fast food includes a variety of simple meals. Therefore, the primary causes of the rise in obstinate disorder, the prevalence of an Amlapitta^[2]. The most prevalent issue in the society, are irregular and inappropriate eating habits, a busy and stressful lifestyle, and According westernisation. contemporary to science, amlapitta can be correlated hyperacidity^[3]. It is estimated that over 75% of people are impacted. HCL has a significant part in the digestive process. Through a process known as proteolysis, HCL transforms the inactive enzyme pepsinogen into the active enzyme pepsin, which aids in digestion by rupturing the bonds that bind amino acids. Hyperacidity is the result of the stomach producing too much acid. Heartburn, a deep-seated searing discomfort behind the sternum

in the chest, is a common symptom of hyperacidity. In the modern era, a fast-paced, stressful lifestyle, mental stress, incompatible eating habits, unhealthy routines like smoking, drinking, and taking medications like NSAIDS, steroids, and certain vitamin supplements, as well as lack of sleep at night, irregular eating patterns, eating too late at night, and stifling cravings are all contributing factors to gastric irritation and *hypergastric* secretions that result in hyperacidity

Definition [4]:

According to Shrikanthdutta's description in Madhava Nidana, "Amlapitta" is the state in which the Amla guna of Pitta is raised when different pitta prakopaka nidana sevan is performed. The utpatti of vyadhi known as amlapitta results from pitta vitiation, which also causes the pitta's katu rasa to change into an amla rasa and raises its drayta.

Symptoms Of *Amlapitta*^[5,6,7]

- **a.** *Vataja Amlapitta*: Signs consist of *Angasada Jrumbha* (yawning), bodily discomfort, and sensitivity to greasy foods, as well as relief from lubricating or oily substances.
- b. *Pittaja Amlapitta*: Symptoms include *Bhrama*(dizziness), *Vidah*, sensation of cold, relief with cold substances, and altered taste sensation.
 - **c.** *Kaphaj amlapitta* Heaviness is one of the symptoms of *Kaphaja Amlapitta*. Dryness, nausea, dry substance alleviation and heat sensitivity.

Ahara Paka Kriya:

Following two phases (Avastha)

- 1. Avasthapaka (1st phase of digestion)
- 2. *Nisthapaka* (2nd phase of digestion)

Avasthapaka^[8]:

The process of digestion by Pachakagni is known as Avasthapaka. OURNAL OF

- 1. Madhura Avasthapaka
- 2. Amla Avasthapaka
- 3. Katu Avasthapaka

$Nidana^{[9]}$:

Following an evaluation of Amlapitta's Nidanas, it can be roughly categorized as

- Aharaja
- Viharaja
- Manasika
- Agantuja

Aharaja Hetu (Dietary factors)

Dietary variables, or Aharaja Hetu, are regarded as the initial group of etiological factors. Here, the ideas of Ahara vidhividhana and Ahara vidhi visheshaayatana can be taken into consideration. Pitta dosha prakopa will result from irregular intake of ahara factors such as katu, amla, vidahi, etc.

- Abhojana
- Atibhojana
- Ajeerna
- Amapurana
- Vishamashana
- Adhyashana
- Gurubhojana
- Pishta Atisevana
- Phanita Atisevana
- Ikhuvikara Atisevana
- > Usha Atisevana
- Katu-Amla Rasa Atisevana
- Drava- Ruksha Atisevana
- Kulatha Atisevana
- Madhya Atisevana

Viharaja Hetu:

A code of habits is part of Viharaja Hetus. The viharaja Hetus comprises Bathing after eating is known as bhukte bhukte snana. After eating, bhukte bhukte avagaha (tubbath), Diwaswapna bhukte (slumbering after food), Vegadharana (repression of instincts).

Mansik Hetu:

Psychological elements that cause pitta to rise Dosha are Chinta (pondering), Krodha (rage), Bhaya (dread), Shoka (sorrows).

Kalaja Hetu (Other related factors):

Those that fall within *Kalaja Hetu* include *Varsha* Ritu (season of rain) Pravrut ritu, which occurs in the early rainy season

1.Doshas:

Π.

- Saman Vata-One of the panchavatas is Samana Vata. It is located close to the stomach, or *amashaya*. It is beneficial. In igniting the jataragni, and following that, pachana assists in separation of the material that has been digested into Sara and Kitta Once its functionality Bhagam. compromised, it can result in Ajeerna and Mandagni.
 - Pachak Pitta-situated in the space between and Amashaya. Pakwashaya This essential to the Pachana process, which means that all Bhutagnis rely on it. The Amla and Dravaguna of Pitta will rise in Amlapitta.
- Kledaka Kapha-Through the breakdown of III. food particles, it aids the Pachaka Pitta in the digestive process. It will divert the digestive process if it is compromised.

2.Dushya:

Since it receives the *anna* rasa first, Rasa is the primary *dushya* that experiences vitiation.

3.Agni:

The locations of *Jataragni* are *Amashaya* and *Grahani*. The *Samana Vata* and *Kledaka kapha* start the digestive process. *Tikshnagni*, *Vishamagni*, and *Mandagni* can result from any aspiration in Agni. The main contributing element to the path physiology of *Amlapitta* is *Mandagni*.

4.Strotas:

Amlapitta incorporates all three forms of Srotodushti. While taking Nidanas into consideration, it incorporates Annavaha, Rasavaha, and Purishavaha Srotas.

5.Udbhavsthana:

Each of the three *srotodushti* types is incorporated into *Amlapitta*. It includes *annavaha*, *rasavaha*, and *purishavaha srotas* when considering *nidanas*.

6.Rogmarga:

Amlapitta is regarded as falling under Abhyantara
Roga Marga since it is a Koshta Sambandha
Vyadhi.

7.Lakshana^[10]:

- ➤ Avipaka(Improperdigestion)
- Klama(Dizziness)
- Utklesha(Belching)
- ➤ *Tiktaudgara*(Bitter Belching)
- ➤ Amlaudgara(Sourbelching)
- ➤ Gaurava(Heaviness)
- Hritdaha(Burning Sensation In The Epigastric Region)
- Kantadha(Burning In Throat)
- > Aruchi(Anorexia)
- ➤ Antrakujana(Gurgling Sound In The Abdomen)
- > Vidbheda
- Udara Adhmana(Distention Of Abdomen)
- ➤ Hritshula(Epigastric Pain)
- ➤ Angasada(Tiredness Of Extremities)
- ➤ Gurukoshtata(Heaviness Of Abdomen)

- ➤ Romaharsha(Horripilation)
- Shiroruk (Head Ache)

8.Purvaropa [11]:

Amlapitta does not have a distinct Purvarupa listed in ancient Ayurvedic scriptures.

9.Rupa^[12] : Acharya Sushruta asserts that rupa manifests during the Vyakti stage.

		Vishishta Rupas	Vata	Pitta	Kapha
		According to Kashyapa	Shoola, Angasada	Bhrama, Vidaha	Gaurava, Chhardi
		Samhita	Jrimbha		
		According to Madav	Kampa ,Pralapa,	Tiktodgar,	Kaphanishthivana, Gaurava,
١		Nidan	Murchha, Chimchimitva	Amloudagar,	Jadata, Aruchi,Shita, Saada,
			,Shoola, Vibhrama,	Katuudagar,	Vami,Lepa, Agnimandya,
			Vimoha ,Harsha,	Hriddhaha, Bhrama,	Kandu, Nindra
١			tamodarshan	Aruchi, Chharadi,	
١				Alasya,	

Vishista Rupa

10.Upashaya Anupshaya^[13]:

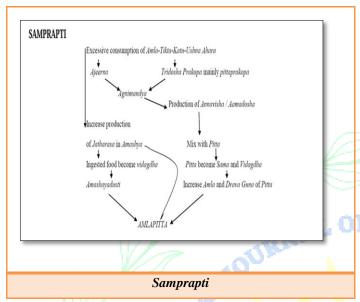
Acharya Kaypasha states that:

- 1. Vataja Amlapitta Snigdha Upasaya
- 2. Pittaja Amlapitta- Sita Upasaya and Swadu
- 3. Kaphaja Amlapitta -Ruksha and Ushusaya

11.Samprapti(Pathogenesis)¹⁴:

Samprapti Ghatak:

- 1. Dosha: Tridosha (mainly Pitta)
- 2. Dushya: Rasa, Rakta
- 3. Srotasa:Annavaha
- 4. Agni: Jatharagni
- 5. Ama: Jatharagnimandhyajanya
- 6. Udbhavasthana: Amashaya
- 7. Adhisthana: Adhoamashaya
- 8. Sanchara: Annavaha
- 9. Swabhava: Chirkari
- 10. Pradhanta: Pitta Doshapradhana



12.Updrava [15] :

Atisara, Pandu Shotha, Aruchi, Bhrama, Dhatukshinata, Shoola are Upadrava (kashyapa Samhita)

13.Sadhyasadhyata:

Acharya Madhava Nidana states that amlapitta of recent onset is sadhya, but in the chronic stage it turns into yapya or krichhasadhy. Acharya Kashyapa states that amlapitta turns into asadhya (incurable) when it is linked to upadrava.

14.Chikitsa:

Samanya chikitsa of Amlapitta:

- 1) Vamana (Patol + Neem + Madanfal) is the initial treatment for Amlapitta, according to Acharya Yogaratnakara and Acharya Kashyapa.
- 2) Virechana: Amlapitta (triphala + madhu) is then recommended for mrudu virechan.
- 3) *Basti*: In cases of chronic *Amlapitta*, *Anuvasan* and *Asthapan Basti* should be given.
- 4) Shaman *chikitsa*: *Shodhan Chikitsa* is followed by Shaman *Chikitsa*. *Ahar* and *Aushdi* based on *Dosha* predominance. (The *Samhitas* provide for *Patoladi Kwath*, *Bhunimbadi Kwath*, and *Guduchi Moodak* in different ways.)

Plan For Sheetali Pranayama^[16]:

Pranayama was performed for three minutes after two minutes of *Prarthana* (prayer), followed by Breathing Awareness. *Pranayama* was followed by two minutes of *Shawasana*. Steer clear of oral consumption both before and after *Pranayama*.

Importance Of *Pranayama* :

The practice of *pranayam* aids in mental stability and concentration. One can maintain control over their mental and physical activity because of Pranayam. Pranayam lowers the respiratory rate, allowing the body to preserve critical force and energy. The end result of this is a long life with a high standard of living. By correct practice of Pranayama all ailments are curable. On the other side, improper *Pranayam* practice leads to a variety of illnesses. Pranayam has a significant impact on brain function. The main goal of *Pranayam* is to acquire mental and emotional calm through the systemic synchronization of nervous system activities. The mind is unstable as long as breathing continues; when it ceases, the mind becomes calm and the yogi achieves total stillness. As a result, one should control their breathing.

Sheetali Pranayama [17]:

An knowledgeable *Sadhak* should slowly expel the air through both nostrils after performing *Kumbhak* as previously (as in *Suryabhedana*) and inhaling air via the tongue. We call this *Pranayam Sheetali*. This *Pranayam* is called *Sheetali* because of its cooling properties. The feminine form of "*Kumbhak*" is "*Kumbhika*," while "*Seetali*," which means "cool," is the feminine form of "*Sheetal*" and qualifies "*Kumbhika*."

प्रज्वालितो जानग

Technique: The following quotation from Hath Yoga *Pradipika* does not fully describe the method. However, the tradition is quite clear in this respect, and *Jyotsana Tika's* commentary dispels any question. Shiva *Samhita* 3/84 contains a similar reference. The research used a similar methodology.

- 1. The first step in doing this *Pranayam* is to extend the tongue approximately 3/4 of an inch from the lips.
- 2. After this is finished, the tongue should be folded twice lengthwise, within and outside the mouth, creating a tube-like structure beneath the lower lip.
- a narrower channel that slopes in the direction of the tongue tip.
- 4. In this configuration, the tongue resembles the lower portion of a bird's beak.
- 5. During *Purak*, air from the outside has to be inhaled through this lingual duct. After taking a breath, the lips should be closed and the tongue should be pulled back.
- 6. Kumbhak is a typical kind.
- 7. *Rechak* should be done slowly while simultaneously using both nostrils.

Pathya And Apathya In Amlapitta^[18]:

Both illness prevention and some disease therapy involve the use of pathya and apathya. Pathya (wholesome) was used by Acharya Charak as a synonym for therapy. This demonstrates how crucial Pathyapathya is to Ayurveda. Along with medication, it places a strong emphasis on nutrition and routine. Ayurveda uses a fairly scientific approach to explain pathyavyavastha, or diet-dietetics planning. Pathya (wholesome) diets are those that are good for the body

and mind, while apthyaahar (unwholesome diets) are those that have the opposite effect. *Amlapitta* is one of the disorders that most often arise as a result of poor eating habits. Dietary variables may be the initial and most important category of etiological factors for Amlapitta.Food consumption that violates Aharavidhividhana Aharavidhiviseshayatana and codes of dietetics is included in this group. Amlapitta ahar is regarded as Pathya if it possesses qualities such as Laghu, snigdha, shitaguna, madhur rasa, madhurvipak, and shitavirya. Ahar's aforementioned qualities cause agnidipana, amapachan, vatanulomana, calm samanavayu, and prevent pitta from being agitated. Snigdhaahar controls the Vayu and reduces the intestinal mucosa's rukshata. Puranashaali, mudra, masura, harenu, milk and gogrita, jangalamamsa, kalayashaaka, pautika, and the blossoms of Vasa and Vasuka are all regarded as Pathya in Amlapitta, according to Kashyapa Samhita.

Do's (*Pathya*) In Amlapitta ^[19]:

- Light meals, coconut water, and items with cooling qualities.
- Leafy vegetables, with the exception of *methi*, such as white pumpkin, bitter gourd, and developed ash gourd.
- > Sugar candy, cucumber, green grams, barley, wheat, and ancient rice.
- Fruits like pomegranates, sweet limes, dry grapes, black grapes, gooseberries, figs, and dry figs.
- ➤ Drink enough water, such as pomegranate juice, lemon juice, amla juice, sweetlime juice, coriander seeds or ushir (wala) in a medicinal water, or lukewarm water made from puffed rice (laja).

- Dadimpak (pomegranate-based sweet dish), Moramla (amla-based jam), and Gulkand (rose-petal-based jam) with milk.
- ➤ Drink a cup of lukewarm milk every two or three hours; mix one teaspoon of ghee with warm milk; get enough relaxation and sleep; Engage in meditation, *pranayam*, and yoga.

Don'ts In Amlapitta [20]:

- Steer clear of too salty, sour, and spicy foods.
- > Steer clear of junk and fried foods.
- > Don't stay hungry. Don't be too quick.
- Eat small, frequent meals instead of overindulging.
- Steer clear of erratic and premature eating habits.
- Steer clear of foods that have too much oil, salt, garlic, chilies, etc.
- Steer clear of sour fruits, curd, and rice.
- Steer clear of the supine position and lying down right after eating. The left lateral position is the most advised.
- > Steer clear of aspirin-type medications, alcohol, tea, coffee, and smoking.
- > Steer clear of stress.

Pathya Ahar (Beneficial Diet):

Harenuk, mudga, and puranshali are good for amlapitta. Jangal Mansa, Godugdha, and Goghrit are also appropriate for Amlapitta. For amlapitta, kalay shak, pautik, vasa pushp, and vastuk are suitable options. In amlapitta haritaki and puran madira are advised.

Pathya Vihar (Beneficial Lifestyle) [21]:

Amlapitta can benefit from Vamana, Virechana, Basti, and Shital Jalpan.

Apathya Ahar (Harmful Diet):

Avoid *Til*, *Urad*, and *Kulthi* in *Amlapitta*. *Dhanyamla* and *Avi Dugdha* are inappropriate for *Amlapitta*. Avoid using *Lavana*, *Amla*, and *Katu* Rasa *dravya* in *Amlapitta*. It is not advised to use Guru Anna, *Dadhi* or *Madya* for *Amlapitta*.

Apathya Vihar (Harmful Lifestyle):

- In Amlapitta Veg Dharan (suppression of natural impulses) should be avoided.
- Amlapitta should minimize Atap Sevan or heat exposure.
- In *Amlapitta Diwaswapn* or midday sleep should be avoided.

Discussion and Conclusion:

Amlapitta is a prevalent illness in the current context of bad eating patterns and practices. There are sporadic mentions of Amlapitta in the Brahtrayi Granthas, but no thorough description or treatment methodology is provided. Based on *Doshagati*, Acharya Madavakara separated Amlapitta into Urdwva and Adha, while Madavanidana is a compendium of all Samhitas that solely covers the Nidana element. The first person to provide a thorough treatment protocol for Amlapitta was Acharya Kashypa. In Vamana, the Dushita Drava Yukta Pitta leaves and Agni returns to normal, according to the instructions given by Acharya. Aushadi is then provided to perform the Pachana of Dosha and is thereafter expelled from the body through purgation.A unique feature of Kashyapa Samhita is the Acharya's recommendation to relocate Amlapitta treatment when all of the aforementioned treatment methods are ineffective.

the Desha that is more susceptible to Amlapitta because it is more prevalent in marshy areas. A thorough grasp of Amlapitta's Nidana, Lakshana, Samprapti, Upashaya, and Anupashaya facilitated by studying Nidanapanchaka. The straightforward comprehension of this aids in improved treatment by combining Samprapti Vighatana and Nidana Parivarjana. A deeper comprehension of the etiology (*Nidana*), symptoms (Lakshana), pathogenesis (Samprapti), treatment options (*Upashaya* and *Anupashaya*) for Amlapitta is made possible by the thorough examination of *Nidanapanchaka*, the five-fold approach of diagnosis. With this thorough knowledge, the best course of treatment combines Samprapti Vighatana (disruption of the disease process) with *Nidana Parivarjana* (eliminating the causal elements). In line with the tenets of Ayurvedic treatment, this integrated approach guarantees a more successful management of Amlapitta and is founded on a clear understanding of the disorder's underlying origins and evolution. Ayurveda holds that there are no medications that can replace a healthy diet. Improving digestion is the primary strategy for treating Amlapitta vyadhi. Amlapitta is one of the most urgent issues facing the entire world. because of the high rate of prevalence. Appropriate adherence to pathya and apathya is crucial since Amlapitta vyadhi if left untreated can lead to serious issues and recur frequently. In order to treat Amlapitta, a balanced diet, herbal remedies, and yogic techniques like Sheetali Pranayam aid to calm the stomach's inner layer, reverse inflammatory changes, and regulate digestive secretions.

According to *Acharya*, one should stay away from

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