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A randomized controlled clinical study on the efficacy of *Chinnadi Kashaya* in *Amlapitta* (Chronic Gastritis)

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ABSTRACT

Nearly 25–30% of Indians suffer from *Amlapitta* or chronic gastritis. In this open-label, randomised clinical study, the effectiveness of *Patoladi Kwatha* and *Chinnadi Kashayam* in treating *Amlapitta* (chronic gastritis) was studied. Heartburn, nausea, and indigestion are some of the symptoms of *Amlapitta*, a disorder associated with the vitiation of *Pitta dosha* brought on by unhealthy eating and lifestyle choices. Two groups of forty *Amlapitta* patients were formed: For 30 days, Group B received *Patoladi Kwatha*, while Group A received *Chinnadi Kashaya*. When compared to *Patoladi Kwatha*, observations revealed that *Chinnadi Kashaya* had considerably reduced symptoms such as bloating, acid reflux, and indigestion. On the other hand, *Patoladi Kwatha* was far more effective in lowering appetite loss and fatigue. With each formulation providing distinctive benefits, these results offer credence to the therapeutic implementation of *Ayurvedic* medicines in the management of disorders like gastritis. The study demonstrates the therapeutic potential of both *Ayurvedic* formulations in treating digestive diseases, primarily *Amlapitta*, and indicates that *Chinnadi Kashaya* may provide superior overall comfort. Both formulations exhibited no adverse reactions. The long-term consequences and possible combinations of these medicines need to be investigated further.

Key words: *Amlapitta*, *Chinnadi Kashaya*, *Patoladi Kashaya*, *Chronic Gastritis*

INTRODUCTION

The science of *Ayurveda* emphasizes a balanced lifestyle for overall well-being, but modern materialistic living has led to increased stress, anxiety, and health issues, including gastrointestinal disorders like *Amlapitta* (gastritis). *Amlapitta* can be compared

to chronic gastritis in modern medicine, characterized by heartburn, increased stomach acid, and upper abdominal pain, affecting 25-30% of people in India.^[1] *Ayurveda* attributes this condition to the vitiation of *Pitta Dosh*a due to improper diet and lifestyle choices, leading to symptoms like bloating, nausea, and indigestion. Being an of *Annavaha Srotas* disease, due to *Nidana Sevana*, the *Shuktata* of *Pitta Dosh*a gets elevated and causes *Mandagni* and results in a pathological condition called *Amlapitta* with the prodromes like *Avipaka*, *Klama*, *Utklesha*, *Tiktamlodgara*, *Gourava*, *Hrutkantadaha*, and *Aruchi*.^[2] According to *Ayurveda*, *Amlapitta* arises from an imbalance in *Agni* (digestive fire), which is central to health. This study aims to assess the efficacy of the classical *Ayurvedic* formulation *Chinnadi Kashayam*,^[3] compared to *Patoladi Kwatha*.^[4] The research seeks to provide evidence of *Chinnadi Kashaya*'s effectiveness in managing *Amlapitta* and its symptoms.

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OBJECTIVES

1. To determine the efficacy of *Chinnadi Kashayam* in the management of *Amlapitta*.
2. To compare the efficacy of *Chinnadi Kashayam* and *Patoladi Kwatha* in the management of *Amlapitta*.

MATERIALS AND METHODS

Study Design: An open-labelled, randomized, comparative, interventional clinical study

Source

Clinical source: A minimum of 40 candidates were selected based on inclusion and exclusion criteria from the OPD and IPD of PG studies in *Kayachikitsa* of MIAMS, Manipal & medical camps, and other referrals.

Drug: *Chinnadi Kashaya Choorna* contains *Guduchi*, *Khadira*, *Yastimadhu*, and *Daruharidra* in equal quantities prepared in *Rasashala* of Muniyal Institute of Medical Science and Hospital, Manipal after collecting the authenticated drugs. Method of collection of data: A special case proforma was prepared incorporating the clinical manifestations and assessment criteria including the classical signs of *Amlapitta* mentioned in the texts with a minimum of 40 patients suffering from *Amlapitta* selected as per inclusion and exclusion criteria including detailed history and physical examination.

Diagnostic criteria

History of diabetes with any of the following signs and symptoms

1. *Avipaka*
2. *Klama*
3. *Utklesha*
4. *Tiktamlodgara*
5. *Gourava*
6. *Hrutkantadaha*
7. *Aruchi*

Inclusion criteria

1. Patients with classical *Lakshanas* of *Amlapitta*.

2. Age 18 - 60 years.
3. Subjects of either gender irrespective of caste, creed, occupation, religion, and socio-economic status.
4. Patients with recurrent symptoms over 6 weeks or more.

Exclusion criteria

1. Patients pre-diagnosed with Gastric carcinoma gastric ulcer and Duodenal Ulcer.
2. Patients with a history of systemic illness like Cardiac pathology, and Immune deficiency disorders were excluded.
3. Patients on diabetic or Hypertension medications are excluded.
4. Patients are presenting with hematemesis and melaena.
5. Pregnant woman/Lactation mother.

Investigations

Hb %, TC & DC, ESR, RBS, Gastroscopy (when required).

Assessment criteria

The clinical features of *Amlapitta* mentioned as per *Ayurvedic* texts will be the basis for diagnosis.

1. *Avipaka*
2. *Klama*
3. *Utklesha*
4. *Tiktamla Udgara*
5. *Gaurava*
6. *Hrit Kanta Daha*
7. *Aruchi*

Intervention**Group A (Study group)**

Chinnadi Kashaya Choorna with lukewarm water will be given 30 minutes before food twice a day (Morning and Night) for 30 days with honey as *Anupana*.

Group B (Control group)

Patoladi Kwatha Choorna with Lukewarm water will be given 30 minutes before food twice a day (Morning and Night) for 30 days with honey as *Anupana*.

OBSERVATIONS

Among the 40 patients taken for the study 35% of the patients were 18-30 years. 62.5% of patients were females and 37.5% were males. 85% of the patients belonged to Hindu Religion. 60% of patients were married. 55% of patients had sedentary lifestyles and were graduates. Most of the patients belonged to the middle class i.e., 67.5%. 77.5% of the patients had the dietary habit of taking a mixed diet. 57.5% of the patients had mental stress. 60% of the patients had a sedentary lifestyle. 67.5% had an irregular bowel habit. Most patients belonged to *Vatapitta Prakruti* i.e., 42.5%; 77.5% of patients had *Madhyama Akruti*, 92.5% of patients exhibited *Madhyama Sara*, 87.5% recorded *Madhyama Samhanana*, 82.5% patients had *Madhyama Saatmya*, 67.5% patients having *Madhyama Satva* and *Vishama Agni*, 55% of the patients had *Madhyama Abhyavarana Shakti*. And 55% had *Madhyama Koshtha*.

RESULTS

Effect on Avipaka: there was 72.7% relief in Group A which is slightly more when compared to Group B (71.4%). Hence, the result on the effect of treatment on *Avipaka* in Group A was better than Group B ($p=0.002$).

Effect on Klama: there was 88.3% relief in Group B which is more when compared to Group A (70%) ($p=0.031$).

Effect on Utklesha: There was 85.1% relief in Group A which is slightly more when compared to Group B (80%). Hence, the result on the effect of treatment on *Utklesha* in Group A was better than Group B ($p<0.001$).

Effect on Tiktamlodgara: There was 87.5% relief in Group A which is significantly more when compared to Group A (63.4%). Hence, the result on the effect of treatment on *Tiktamlodgara* in Group A was better than Group B ($p<0.001$).

Effect on Gourava: There was 79.1% relief in Group A which is slightly more when compared to Group B (63.3%). Hence, the result on the effect of treatment on *Gourava* in Group A was better than Group B ($p<0.001$).

Effect on Hrutkantadaha: There was 87.8% relief in Group A which is slightly more when compared to Group B (73.6%). Hence, the result on the effect of treatment on *Hrutkantadaha* in Group A was better than Group B ($p<0.001$).

Effect on Aruchi: There was 80% relief in Group B which is slightly more when compared to Group A (60%). Hence, the result on the effect of treatment on *Aruchi* in Group B was better than Group A ($p= 0.016$).

Table 1: Effects of Chinnadi Kashaya and Patoladi Kwatha on the symptoms of Amlapitta.

Avipaka	Mean			AT % Relief	AF % Relief		SD	SEM	M	Z (+/-)	P
	BT	AT	AF								
Group A	1.10	0.3	0.4	72.7%	63.6%	BT	1.252	0.280	0.5	-2.889	0.002
						AF	0.598	0.134	0.0		
Group B	1.050	0.3	0.35	71.4%	66.6%	BT	1.356	0.303	0.0	-2.640	0.008
						AF	0.489	0.109	0.0		

Klama	Mean			AT % Relief	AF % Relief		SD	SEM	M	Z (+/-)	P
	BT	AT	AF								
Group A	1.0	0.30	0.35	70%	65%	BT	1.257	0.281	0.0	-2.739	0.004
							AF	0.366	0.0819		
Group B	0.850	0.15	0.10	82.3%	88.2%	BT	1.348	0.302	0.0	-2.251	0.031
							AF	0.308	0.0688		

Utklesha	Mean			AT % Relief	AF % Relief		SD	SEM	M	Z (+/-)	P
	BT	AT	AF								
Group A	1.350	0.20	0.150	85.1%	88.8%	BT	1.348	0.302	1.5	-2.980	<0.001
							AF	0.366	0.0819		
Group B	1.250	0.250	0.20	80%	84%	BT	1.482	0.331	0.0	-2.714	0.004
							AF	0.410	0.0918		

Tiktamlodgara	Mean			AT % Relief	AF % Relief		SD	SEM	M	Z (+/-)	P
	BT	AT	AF								
Group A	2.0	0.250	0.100	87.5%	95%	BT	1.170	0.262	2.0	-3.601	<0.001
							AF	0.308	0.0688		
Group B	2.050	0.750	0.750	63.4%	63.4%	BT	1.191	0.266	2.5	-3.640	<0.001
							AF	0.444	0.0993		

Gourava	Mean			AT % Relief	AF % Relief		SD	SEM	M	Z (+/-)	P
	BT	AT	AF								
Group A	1.20	0.25	0.3	79.1%	75%	BT	1.152	0.258	1.0	-3.140	<0.001
							AF	0.470	0.105		
Group B	1.50	0.55	0.5	63.3%	66.6%	BT	1.433	0.320	2.0	-3.127	<0.001
							AF	0.513	0.115		

Hrut-kanta daha	Mean			AT % Relief	AF % Relief		SD	SEM	M	Z (+/-)	P
	BT	AT	AF								
Group A	1.650	0.20	0.10	87.8%	93.9%	BT	1.387	0.310	2.0	-3.247	<0.001
							AF	0.308	0.0688		

Group B	1.9	0.5	0.55	73.6%	71%	BT	1.447	0.324	3.0	-3.354	<0.001
						AF	0.510	0.114	1.0		

Aruchi	Mean			AT % Relief	AF % Relief		SD	SEM	M	Z (+/-)	P
	BT	AT	AF								
Group A	0.500	0.2	0.15	60%	70%	BT	0.946	0.212	0.0	-2.070	0.063
						AF	0.366	0.0819	0.0		
Group B	0.750	0.15	0.25	80%	66.6%	BT	1.070	0.239	0.0	-2.428	0.016
						AF	0.444	0.0993	0.0		

DISCUSSION

The consumption of excessive salty and other (*Lavanadi Rasa*) foods leads to purification (*shuktatva*), which further results in the formation of toxic substances (*Ama Visha*), ultimately causing *Amlapitta*. A basic impairment of digestion (*Agnimandya*) can develop into indigestion (*Vidagdhajirna*), and if this is neglected and poor dietary habits continue, it escalates into *Amlapitta*. Since *Amlapitta* is predominantly a pitta-related condition (*Pitta Pradhana Vyadhi*), the qualities of *pitta*, such as fluidity (*Dravaguna*) and sourness (*Amlaguna*), become aggravated, initially leading to indigestion (*Vidagdhajirna*) and eventually causing inflammation and erosion of the stomach and duodenal mucosal membranes (*Amashaya*). *Amlapitta* corresponds to chronic gastritis, starting with the initial phase (superficial gastritis) and advancing to the active phase (moderate gastritis). In superficial gastritis, inflammation is often caused by factors like H. pylori infection, NSAID use, or dietary irritants that increase stomach acid and irritate the lining. This manifests as symptoms akin to *Amlapitta*, including indigestion, bloating, and nausea. In moderate gastritis, the inflammation becomes more severe, leading to deeper mucosal damage and worsening symptoms such as epigastric pain, early satiety, nausea, and vomiting, with inflammatory cells penetrating deeper into the mucosa. The herbal formulation *Chinnadi Kashaya*, which contains *Guduchi*, *Khadira*, *Yastimadhu*, and *Daruharidra*, is effective in pacifying *Pitta* (*Pitta Shamana*). *Guduchi*, *Khadira*, and *Daruharidra* are

primarily bitter (*Tikta Rasa*), which aids in digesting toxins (*Ama Pachana*) and cooling *pitta*. *Daruharidra* and *Khadira* also possess drying (*Ruksha Guna*) and light (*Laghu Guna*) qualities, which help reduce the excess fluidity (*Dravatwa*) and acidity (*Amlatwa*) of *Pitta*. Furthermore, the cooling properties (*sita veerya*) of *Khadira* and *Yastimadhu* help reduce the heat and intensity (*Ushna* and *Teekshna Guna*) of *Pitta*, making them useful in treating acid reflux and heartburn. The warming properties (*Ushna Veerya*) of *Guduchi* and *Daruharidra* enhance digestion (*Deepana*) and improve indigestion (*Pachana*), reducing symptoms such as nausea, indigestion, and heaviness. *Guduchi* and *Yastimadhu* also have a sweet post-digestive effect (*Madura Vipaka*), which soothes *pitta* and strengthens the mucosal lining (*Shleshmadhara Kala*) of the stomach (*Amashaya*) due to their nourishing (*Guru Guna*) and oily (*Snigdha Guna*) properties. By preventing the formation of excessive acidity (*Amlatwa Nirodhatwa*), *Guduchi* and *Yastimadhu* eliminate vitiated *Pitta* (*Vidagdha Pitta*) and restore digestive fire (*Agni*), effectively treating symptoms of *Amlapitta* such as acid belching, heartburn, and digestive issues. *Amlapitta*, being a psychosomatic disorder, can be managed with *Chinnadi Kashaya*. *Yastimadhu*, a cognitive-enhancing herb (*Medhya drug*), helps stabilize mood and reduce symptoms of depression and anxiety.

Guduchi, known as a nerve tonic and adaptogen (*Medhya Rasayana*), alleviates stress, making it beneficial for managing psychosomatic conditions.

Avipaka

Both the *Kashayas* exhibited similar *pitta* and *kapha* balancing properties. However, during the follow-up, symptoms reappeared as the medication was discontinued. The recurrence was linked to *Hetu Sevana*, which increased the *Drava Guna* of *Pitta*, leading to *Agni* dysfunction and causing *Avipaka*.

Klama

Klama was significantly reduced in the patients who used *Chinnadi Kashaya*, due to the *Kapha*-reducing and *Pitta*-cleansing effects of ingredients like *Guduchi*, *Khadira*, *Daruharidra*, and *Yastimadhu*. However, once the medicine was stopped, the pre-existing *Ama* (toxicity) associated with *Pitta* might have caused the symptoms to return. The recipients of *Patoladi Kashaya* continued to show improvement during follow-up, as it further reduced *Kapha* and *Pitta* and improved *Agni* (digestive fire) and *Rasa Dhatu* (nutritional fluid), resulting in sustained relief.

Utklesha

Utklesha typically occurs due to an excess of *Samapitta* combined with *Kapha Dosha* involvement. The significant relief observed in the recipients of *Chinnadi Kashaya* may be attributed to the sweet (*Madura Rasa*) taste of *Yastimadhu* and the bitter (*Tikta Rasa*) taste of the other ingredients. Here the result was sustained even after the stoppage of the medications.

Tiktamlodgara

Tiktamlodgara is one of the symptoms of imbalanced *Pitta*. Normally, *Pitta* has a pungent (*Katu Rasa*) taste, but in its vitiated state, it transforms into a sour (*Amla Rasa*) taste. This increase in *Amla* and *Drava Guna* of *Pitta* leads to impaired digestion and results in sour or bitter belching (*Amla* or *Tikta Udgara*). The significant relief in this symptom was due to the correction of *Agni* (digestive fire) through the *Amapachana* (digestion of toxins) properties of *Khadira* and *Daruharidra*, along with the *Amashaya Amlatwa Nirodhatwa* and *Anulomana* actions of *Guduchi* and *Yastimadhu*.

Gourava

Gourava is caused by *Kapha* aggravation, and the significant relief observed in the patients of *Chinnadi*

Kashaya is attributed to the pacification of *Kapha* and the *Kaphachedhana* action of *Yastimadhu*. Additionally, the *Deepana* (digestive stimulant) and *Pachana* (digestive corrective) actions of *Guduchi* and *Yastimadhu* further contributed to this improvement.

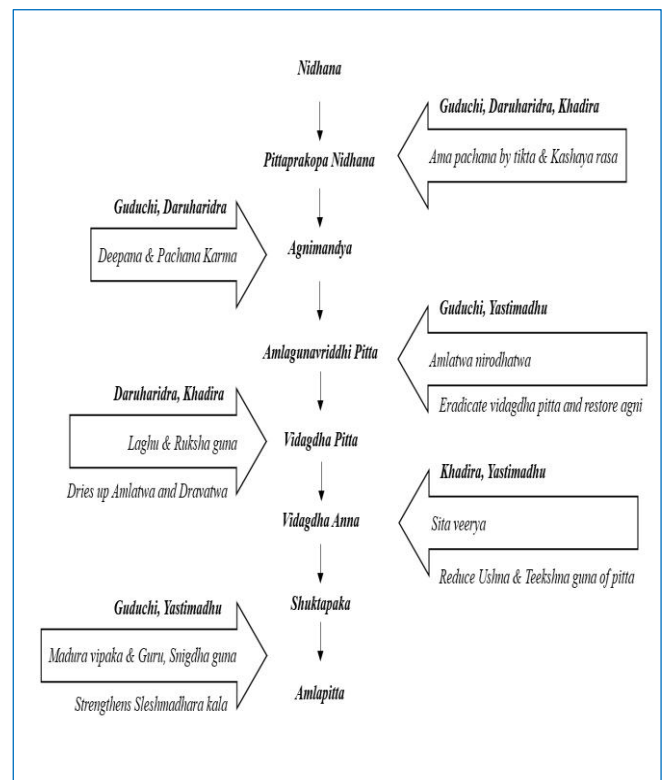
Hrutkantadaha

Hrutkantadaha is primarily caused by *Pitta* aggravation and *Kapha* depletion. The significant relief observed in this symptom can be attributed to the *Sita Veerya* properties of *Khadira* and *Yastimadhu*, as well as the *Daha Prashamana* actions of *Guduchi* and *Yastimadhu*. *Yastimadhu* contains licorice, which has soothing properties that can reduce the burning sensation in the stomach lining caused by acid reflux.

Aruchi

The effectiveness of the *Chinnadi Kashya* is due to the bitter (*Tikta Rasa*) and astringent (*Kashaya Rasa*) tastes of its ingredients, which help dry up excess *Kapha* and *Pitta* due to their light (*Laghu Guna*) and rough (*Ruksha Guna*) qualities. These medicines also aid in the digestion of *Ama* (toxins) through their *Deepana Pachana* actions, which ultimately improve *Aruchi*.

Flowchart 5: Chart showing the probable mode of action of Chinnadi Kashaya.



CONCLUSION

Amlapitta is an *Ayurvedic* disorder primarily attributed to unhealthy lifestyle choices, such as irregular eating habits and the overconsumption of spicy, acidic foods, as well as stimulants like alcohol and caffeine. It is considered both a physical and psychosomatic condition, with stress often playing a role in its onset. Managing impaired digestion (*Agnimandhya*) involves addressing the root causes (*Nidana Parivarjana*) and adopting appropriate dietary and lifestyle practices (*Pathya-Palana*). In a study of 40 patients with *Amlapitta*, two groups were formed: Group A was treated with *Chinnadi Kashaya* and Honey, while Group B received *Patoladi Kwatha* and Honey. The key findings were

- A higher prevalence was observed in middle-aged individuals, especially women and those with sedentary lifestyles.
- The condition was more common in patients with *Vatapittaja Prakruti* and *Vishama Agni*, with symptoms progressively worsening.
- *Chinnadi Kashaya* showed significant improvement in symptoms like indigestion, nausea, burning sensation, acid belching, and heaviness, except for fatigue and loss of appetite, where *Patoladi Kwatha* was more effective.
- No adverse reactions were reported.

In summary, *Chinnadi Kashaya* is more effective for digestive-related symptoms, while *Patoladi Kwatha* is better for addressing fatigue and loss of appetite, highlighting the therapeutic value of these treatments.

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