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RANDOMIZED CONTROLLED CLINICAL STUDY OF SHUNTHYADI KVATHA IN AGNIMANDYA DESCRIBED BY CHAKRADATTA

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Abstract:

In the present era, the life style of urban society is becoming very fast and stressful. This circumstance frequently leads people toward irregular and bad habits of *Ahara* (food) and *Vihara* (behaviour) with the suppression of natural urges like *Kshudha* etc. and creating disorders like *Agnimandya* (dyspepsia / weak digestive power) and *Ajirna* (indigestion). The *Jatharagni* is considered as the master *Agni* and is claimed to govern the function of all other *Agnis* besides its own function. *Agnimandya* is responsible for many diseases. Thus, to prevent further progress of the other diseases, it is necessary to cure it at the first stage. Hence for breakdown of pathogenesis (*samprapti-bhanga*), *deepana chikitsa* has vital role in Ayurvedic management. The present study is carried out to evaluate the effect of *Agnidipana* by using *Shunthyadi kvatha*. This was also taken as applied study described in the *Grahani chikitsa* of *Chakradatta*. In the present study, an attempt is made to study the efficacy of *Shunthyadi kvatha* described by *Chakradatta* in *Agnimandya*.

Keywords: *Agni, Agnimandya, Agnideepana, Shunthyadi kvatha, deepana chikitsa, Aam.*

Introduction:

In the present era, due to fast moving world, the life style of urban society is becoming very fast and stressful. This frequently leads people towards irregular and bad habits of *Ahara* (food)

and *Vihara* (behavior) with the suppression of natural urges like *Kshudha* etc. and creating disorders like *Agnimandya* (dyspepsia / slowness of digestion / diminution of digestive power) and *Ajirna* (indigestion). This is

the reason for the day by day increase in the incidence of the diseases due to gastrointestinal derangement. "Rōga: Sarvē api mandāgnau...."

Agnimandya is responsible for many diseases. This was taken as applied study described in the *Grahani chikitsa* of *Chakradatta*.² Ayurveda has fundamental principle that doshas are the only reason for the formation of any disease. Vitiated doshas causes vitiation of dhatus and ultimately diseases are produced.³ Agni is said to be sheltered by pitta dosha. In such condition, Ayurveda has guided deepana chikitsa. The term Grahani dosha implies the malfunctioning of Agni. The Agni is primarily located in Grahani. Functionally weak Agni i.e., Mandagni causes improper digestion of food which ingested leads Agnimandya. The detailed description of *Agni* is available in Charaka Samhita⁴, the process of digestion and metabolism has been given but the main importance is given to the Jatharagni. It is the most essential and chief amongst all other Agnis.

Thus, to prevent further progress of the other diseases, it is necessary to cure it at the first stage. *Agnimandya* is root cause for many diseases, *Agnideepana* is the major line of treatment in all

these disorders. Hence to find out effective solution over this issue, we have studied efficacy of *Shunthyadi kvatha* in *Agnimandya*.

Agni (Digestive power):

Agni is responsible for *ayu* (longevity of (complexion), life), varna bala (strength), svasthya (health), utsaha (enthusiasm), upachaya (proper metabolism), *prabha* (glow) and *oja.* Prakrita agni (normal digestive power is essential for long and healthy life while, vitiated agni is responsible for roga avastha (disease)⁵. Agimandya derived from two words Agni (digestive fire) and manda (low), so the condition in which food is not properly digested due to diminished power of jatharagni, is known as Agnimandya.

Grahani and agni are interdependent.
Therefore, all the aetiological factors of agnidushti are also the causes of grahani dosha.⁶

Normal activity of digestive fire is essential for the complete and proper digestion of food. But due to low digestive fire the food will not get digest properly, and toxic product is formed. Therefore, its absorption becomes sluggish and it gets retained in the intestine for a longer time. Due to this retention, it turns fermented. This toxic

product remains unabsorbed in the intestine, because of its incomplete digestion it is the root cause of all diseases.

Agni is divided into 4 types with reference to its *Bala* or strength:⁷

- 1. Samagni
- 2. Vishmagni
- 3. Tikshnagni
- 4. Mandagni

Actiological factors

Agn<mark>imandya⁸ -</mark>

- A. Ahara (Food) -
- a) Abhojana
- b) Atibhojana
- c) Samashana, Vishamashana, Viruddhashana
- B. Indigestion due to -
- a) Asatmya bhojana
- b) Atiguru bhojana
- c) Atisheeta bhojana
- d) Atiruksha bhojana

...... Sa duṣṭonnam na tatpacati laghvapi l

Apacyamānam śuktatvam yātyannam viṣatām ca tat II - Ca. Ci. 15/41¹⁰

- e)
- f) Dushta bhojana
 - C. *Vyapada* (adverse effect of therapeutic measures)
- a) Vamana
- b) Virechana
- c) Snehana
 - D. Viruddha or incompatibility of -
- a) Desha
- b) Rutu

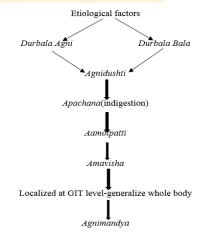
c) Kala

of

E. Suppression of natural urges

Pathogenesis of Agnimandya -

Doshas are passing through different stages and ultimately produce disease. Process of pathogenesis of a disease begins with vitiation of Doshas with consumption of Nidanas (Hetu sevan). Because of Agnidushti, ingested food is not properly digested and results in Apachana/Ajirna(indigestion) and Ama formation.



Principles of *Agnimandya chikitsa*

Sanśōdhanam sanśamanam nidānasya ca varjanama l
Ētāvada bhiṣajā kārya rōgē rōgē yathāvidhi l - Ca. Vi.7/30¹¹
Dōṣāḥ kadācita kupyanti jitā laṅghanapācanaiḥ l Jitāḥ sanśōdhanairyē tu na tēṣām punarudbhavaḥ ll —
Ca. Sū.16/20¹²

The *Agnidushti* is one of the very important factors responsible for the initiation of Agnimandya. So before going through the actual treatment, the recognition of full *agnidushti* is essential. There is general line of treatment described in the classics for almost all the diseases. First there is shodhana of doshas, in which vitiated doshas are eliminated out of the body by processes like Vamana, Virechana etc. This modality is always preferred by Acharyas because, if doshas are thrown out of the body, disease not only gets cured but the chances of recurrence also become less.

Shunthyadi kvatha -

In *Agnimandya*, as *deepana chikitsa* Acharya Chakradatta has described *Shunthyadi kvatha* in *Grahani chikitsa adhyaya*. The four drugs described in the formulation of *Shunthyadi kvatha* are as follows -

Śuṇṭhī samustā atīviṣām guḍūcīm pibējjalēna kvathitām samanśāma l Mandānalatvē satatāmatāyāmānubandhē grahaṇīgadē ca ll Cakra. Grahanī adhyā. 4/6¹³

- 1. Shunthi¹⁴ (Zinziber officinale Rose.)
- 2. *Musta*¹⁵ (*Cyprus rotundus Linn*.)
- 3. *Atasi*¹⁶ (*Aconitum hetrop<mark>hyl</mark>um Wall*)
- 4. Guduchi¹⁷ (Tinospora cordifolia)

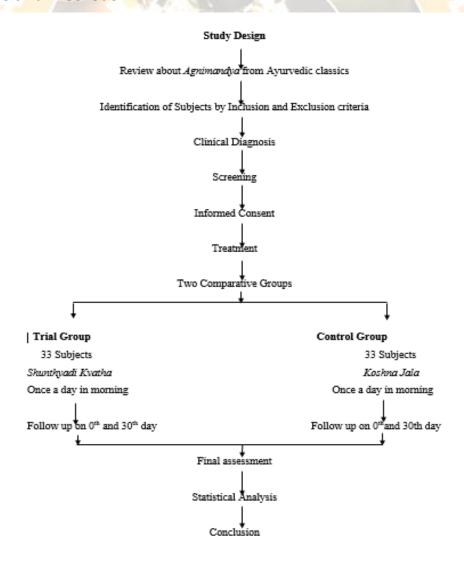
 Charak samhita has de

Charak samhita has described deepaneeya gana. Due to predominant of agni mahabhuta, deepana dravyas perform agni deepana. All the drugs mentioned above are Tikta, Katu rasatmak and deepniya in nature.

Drug name	Shunthi	Musta	Atasi	Guduchi
Family	Zinziberaceae	Cyperaceae	Ranunculaceae	Menispermeaceae
Botanical name	Zinziber officinale Rose.	Cyprus rotundus Linn.	Aconitum heterophylum wall.	Tinospora cordifolia
Rasa (Taste)	Katu	Tikta, katu, Kashaya	Tikta, katu	Tikta, katu, Kashaya
Guna (properties)	Laghu, snighdha	Laghu, ruksha	Laghu, ruksha	Aardra- Snighdha, mrudu

				Ruksha- Ruksha, laghu, mrudu
Virya (potency)	Ushna	Sheeta	Ushna	Ushna
Vipaka (post digestive effect)	Madhur	Katu	Katu	Madhur
Karma (action)	Hridya, Shothahara	Raktaprasada na	Raktashodhaka, Shothahara	Hridya, Rakta- shodhaka, Rakta- vardhaka
Doshghnata (Balances dosha)	Kapha-vata shamak	Kapha-pitta shamak	Kapha-vata Shamak	Tridoshaghna
Upayuktanga (useful parts)	Kanda	Kanda	Mula	Kanda

Materials and Methods:



Inclusion Criteria:

- Weak Abhyavaharana Shakti¹⁸ (Food intake capacity)
- Decrease in *Jarana Shakti*¹⁹ (Digestive capacity)
- Symptoms of Agnimandya described in classics of Ayurveda, viz. indigestion,
- Abdominal heaviness, hyper salivation, dislike of food, vomiting, constipation
- Subjects having age between 25 to 50 years.

Exclusion Criteria:

- Subjects suffering from chronic systemic diseases
- Agnimandya caused due to constant medication were excluded.
- Subjects having *Tikshnagni* were also excluded from the present study.

Method of Preparation of Drug:

A. Shunthyadi kvatha (for trial group):

Shunthyadi kvatha will be prepared by Kvatha Kalpana given in Sharangdhar Samhita.²⁰

B. Koshna jala (for control group):²¹

According to *Acharya Vagbahata*, *koshna jala* is *deepana* in nature that means it stimulates hunger. *Laghu*

means easy to digest. Drinking warm water aggravates Agni, which helps to regulate digestive system and speed up the metabolism. This makes easier for body metabolism without storing food as fat. In Ayurveda koshna jala is given as *anupan* with many medicines, as it is easy to digest and koshna jala enhances property of that medicine taken along with. Reduction of water boiling to one eight part, one fourth part or half to its original quantity is called as *Ushnodaka*.²² That water which does not spill out during boiling, which is free of froth is clean, light and reduced to one fourth quantity after boiling is said to be ideal. For the present study, we took water which is reduced to 1/2 of its original quantity and advised to take it in lukewarm form, 80 m.l., once in the morning.

Observation and Results:

In the present study, out of 66 subjects, maximum subjects, i.e., 50% were in 25-45 years of age group. 60% were of females. 37.8% womens are housewives, whereas 33.3% subjects were doing service.

Table-1:

Diotany Battorn	Trial Group					
Dietary Pattern	Yes	% Yes	No	% No	Total	
Samashana	26	78.8	7	21.2	33	
Vishamashana	7	21.2	26	78.8	33	
Adhyashana	14	42.4	19	57.6	33	
Viruddhashana	24	72.7	9	27.3	33	

Dioton, Dottorn	Control Group					
Dietary Pattern	Yes	% Yes	No	% No	Total	
Sama <mark>sha</mark> na	17	51.5	16	48.5	33	
Vishamashana	13	39.4	20	60.6	33	
Adhyashana	19	57.6	14	42.4	33	
Viruddhashana	21	63.6	12	36.4	33	

Table-2:

Abaraia Hotu	Trial Group						
Aharaja Hetu	Yes	% Yes	No	% No	Total		
Alpabhoj	21	63.6	12	36.4	33		
Atimatra	4	12.1	29	87.9	33		
Atiambu	18	54.5	15	45.5	33		
Asuchibhoj	10	30.3	23	69.7	33		

Aharaja Hetu	Control Group						
	Yes	% Yes	No	% No	Total		
Alpabhoj	19	57.6	14	42.4	33		
<i>Atimatra</i>	9	27.3	24	72.7	33		
Atiambu D	22	66.7	11	33.3	33		
Asuchibhoj	12	36.4	21	63.6	33		

Table-3:

		Trial Group				
Viharaja Hetu	Yes	% Yes	No	% No	Total	
Diwaswap	15	45.5	18	54.5	33	
Ratrijagarana	20	60.6	13	39.4	33	
Atidrutabhoj	2	6.1	31	93.9	33	
Ativalambita bhoj	13	39.4	20	60.6	33	
Ativyayama	17	51.5	16	48.5	33	

Atijalpana	23	69.7	10	30.3	33
Atmanabhunjita	21	63.6	12	36.4	33
Vegavidharana	9	27.3	24	72.7	33

Viharaia Hatu	Control Group					
Viharaja Hetu	Yes	% Yes	No	% No	Total	
Diwaswap	15	45.5	18	54.5	33	
Ratrijagarana	21	63.6	12	36.4	33	
Atidrutabhoj	4	12.1	29	87.9	33	
Ativalambita bhoj	9	27.3	24	72.7	33	
Ativ <mark>yaya</mark> ma	15	45.5	18	54.5	33	
A <mark>tijalpana</mark>	25	75.8	8	24.2	33	
Atmanabhunjita	23	69.7	10	30.3	33	
Vegavidharana	6	18.2	27	81.8	33	

Discussion:

In the present study, 50% of the subjects of *Agnimandya* were between 25 45 to of years age. Viruddhahara, Ratrijagarana and other irregularities are also common in this age group. Thus, the population of this age generally does not follow the behavioural correct dietetic and regimens which eventually impair the status of their *Agni*. It was revealed that 50%, 30.3%, 68% and 65% of the subjects were having the habit of Adhayshana, Vishamashana, Virudd hahara and Samashana respectively.

These dietary patterns are responsible

for many diseases. Nearly 60% of subjects had the habit of more water intake. More water intake is again a causative factor for *Agnimandya*. Around 72.7% of subjects had the habit of water intake during meal. Almost 62% and 45.4% of subjects had the of *Ratrijagarana* (night habit and *Diwasvapna* (day awakening) sleep) respectively. Ιt shows that Swapnaviparyaya is one of the important found causes the for *Agnimandya* in study elaborated in classics. It was found that 60% of subjects had unsatisfactory Mala Pravritti, while 50%

and 40% subjects had *Durgandhita* and *Pichhila Mala Pravritti* respectively, which suggests that food is incompletely digested by weakened *Agni*. *Acharya Chakradatta* indicated *Shunthyadi kvatha* in the management of *Grahani roga*. *Shunthyadi kvatha* consist of *Shunthi*, *Guduchi*, *Musta and Ativisha*.

Rasa Panchaka of all these dravyas is as follows -

Rasa - Tikta, Katu and Kashaya. Due to combination of all four drugs, it possess Tikta, Katu and Kashaya rasa. Katu rasa consist of Agni mahabhoota. All these three rasas have Kapha-vata shamak and Kapha-pitta shamak action.

Action on *Dosha -* Shunthyadi Kvatha is *Kapha-vata shamak* and *Tridoshghna* in nature.

Veerya – Acharya Bhavprakash explained that Ushna Veerya has a great significance to prevent vitiation of Kapha dosha. Except Guduchi all other drugs in the group posess Ushna Veerya. Sheeta veerya of Guduchi compensate with Ushna Veerya of other drugs.

Karmukata - All drugs in *Shunthyadi* Kvatha are *Ushna veeryatmaka* and Katu, *Tikta, Kashaya rasatmak*. All these factors help to aggrevate *Agni* functionally.

Change in lifestyle affects the digestion which produces *Ama* (toxins). It leads to Agnimandya. Hence for breakdown of pathogenesis (samprapti-bhanga), Deepana Chikitsa has vital role in Ayurvedic management. *Charaka samhita* has well explained all the details regarding deepana chikitsa like options of drugs, useful tastes diagnosis of samata. Physician should always focus on deepana chikitsa while doing Ayurvedic management of Agnimandya.

The Rasa of the combination of Shunthyadi kvatha is Katu predominant followed by Tikta, Guna is Laghu followed by Ruksha, Veerya is Ushna-Sheeta and Vipaka is Katu- Madhura. The doshghnta is Kapha-Vata shamak followed by Kapha-Pitta shamak. These characteristics of Shunthyadi Kvatha are exactly opposite to Aam and then furher useful in samprati-bhang of Agnimandya.

Conclusion:

There is significant difference in Trial Group and Control Group for factors such as *ajirna*, *udara gaurava*, *annadvesha*, quantity of food, frequency of food, intensity of hunger,

laghuta, utsaha, udgara shuddhi, kshudha, loose consistency and presence of undigested food.

In present study it has revealed that efficacy of Shunthyadi kvatha was found clinically significant. It was also recorded that maximum subjects were found with improper diet styles like samashana, vishamashana, adhyashana and viruddhashana, which further results into Agnimandya. Symptoms such as *Ajirna*, *Udara* gaurava and Annadvesha of Agnimandya had significant result with Shunthyadi kvatha as compared with Koshna jala. Abhyavaharan shakti such as quantity of food, frequency of food and intensity of hunger had significant result with Shunthyadi kvatha with Koshna jala. Factors of Jarana shakti such as *Laghuta*, *Utsaha*, *Udgara* shuddhi and Kshudha had significant results with Shunthyadi kvatha as compared with Koshna jala. Also factors such as Loose consistency of stool and Presence of undigested food had significant result with Shunthyadi kvatha as compared with Koshna jala.

References:

 Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji

- Trikamji, New Delhi: Chaukhamba publication; reprint edition 2000, Cikitsasthana, Chapter no.13, Verse no. 9:491
- Chakrapanidatta, Chakradatta, by Vd.Indradev Tripathi, Chaukhamba Prakashan, Grahani adhyaya, reprint 2019, Verse no. 4-6:46
- 3. Vaghbhat, Ashtanghridayam, by Bramhanand Tripathi; Varanasi: Chaukhamba Surbharti prakashan; reprint 2017, Sutrashtan, Chapter no.12, Verse no. 32:197
- 4. Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, New Delhi: Chaukhamba publication; reprint 2011, Chikitsasthana, Chapter no.15, Verse no. 51:388
- Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, New Delhi: Chaukhamba publication; reprint 2011, Chikitsasthana, Chapter no.15, Verse no. 1:376
- Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, New Delhi: Chaukhamba publication; reprint 2011,

- Chikitsasthana, Chapter no.15, Verse no. 56-57: 388
- 7. Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, New Delhi: Chaukhamba publication; reprint 2010, Vimanasthana, Chapter no.6, Verse no. 12: 255.
- 8. Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, Chaukhamba Sanskrit Pratishthan; reprint 2012, Chikitsasthan, Chapter no.15, Verse no. 42-43:367
- 9. Madhavnidanam, by K.R. Shrikanta Murthy, Chaukhamba Orientalia, Varanasi 1995.
- 10. Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, Chaukhamba Sanskrit Pratishthan; reprint 2000, Chikitsasthan, Chapter no.15, Verse no. 44:386
- Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, Chaukhamba Sanskrit Pratishthan; reprint 2009,

- Vimansthan, Chapter no.7, Verse no. 30:620
- 12. Agnivesha, Samhita of Charaka,
 Chakrapanidatta, Ayurveda Dipika
 Commentary, edited by Yadavaji
 Trikamji, Chaukhamba Sanskrit
 Pratishthan; reprint 2009,
 Sutrasthan, Chapter no.16, Verse no.
 no. 20:225
- 13. Chakrapanidatta, Chakradatta, by Vd.Indradev Tripathi, Chaukhamba Prakashan, Grahani adhyaya, reprint 2019, Verse no. 4-6:46
- 14. Priyavat Sharma, Dravyaguna vidnyana, Chaukhmba Bharati Academy Prakashan Varanasi Reprint 2013:331-335
- 15. Priyavat Sharma, Dravyaguna vidnyana, Chaukhmba Bharati Academy Prakashan Varanasi Reprint 2013:370-372
- Priyavat Sharma, Dravyaguna vidnyana, Chaukhmba Bharati Academy Prakashan Varanasi Reprint 2013:355-357
- 17. Priyavat Sharma, Dravyaguna vidnyana, Chaukhmba Bharati Academy Prakashan Varanasi Reprint 2013:721-724
 - 18. Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji

- Trikamji, Chaukhamba Sanskrit Pratishthan; reprint -, Vimansthan, Chapter no.no.8, Verse no. 120:781
- 19. Agnivesha, Samhita of Charaka, Chakrapanidatta, Ayurveda Dipika Commentary, edited by Yadavaji Trikamji, Chaukhamba Sanskrit Pratishthan; reprint -, Vimansthan, Chapter no.8, Verse no. 120:781
- 20. Sharangdhara, Sarth Sharangdhara Samhita by Dr. Smt.Shailaja Shrivastava, Jiwanprada Hindi Commentry, Chaukhamba Orientalia Prakashan, Varanasi; Reprint edition

- 2011, Madhyam Khanda, Chapter no.2, Verse no. 1-2:135
- Vaghbhata, Ashtanga hridaya, Vd.
 Bramhanand Tripathi, Chaukhmba
 Prakashan, Reprint 2017,
 Sutrasthan, Chapter no.5, Verse no.
 16-17:68
- 22. Sushruta, Sushrut samhita, Ed. by
 Kaviraj Ambikadatta Shastri,
 Varanasi: Chaukhamba Sanskrit
 Sansthan; reprint 2012, vol.1,
 Sutrasthana, Chapter no.45, Verse
 no. 40:221

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