

Study of *Viruddhahara* as a *Vyadhi Hetu* w. s. r. to *Amlapitta*:

A Case Control Study

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Abstract

Ayurveda emphasizes consuming a healthy and nutritious diet. In *Ayurvedic* classics, *Ahara*, *Nidra*, and *Brahmacharya* are mentioned as the *trayopstambas* (three pillars) of the body. The intake of a healthy and balanced diet is important for proper physiological health, but the intake of harmful and unwholesome (*Ahita*) food causes pathological effects on the body. The concept of *Viruddhahara* is mentioned in *Ayurvedic* classics, and the consumption of *Viruddhahara* gives rise to various disturbances of a mild to violent nature and diseases of an acute to chronic nature. As per the *Acharyas* of *Ayurveda*, *Viruddhaahara* plays an important role in the etiopathogenesis of *Amlapitta Vyadhi*, and the regular intake of *Viruddhahara* causes signs and symptoms of *Amlapitta* such as *Avipaka*, *Klama*, *Utklesha*, *tikta Amlodgar*, *Gaurava*, *hritkanthadaha*, and *Aruchi*. The present study was conducted to establish the relationship between the consumption of *Viruddhahara* and the signs and symptoms of *Amlapitta* caused by it.

Keywords

Amlapitta, *Viruddhahara*, *trayopstambas*, *Vyadhi Hetu*

Introduction

In *Ayurvedic* classics, *Ahara*, *Nidra*, and *Brahmacharya* are mentioned as the three *upasthambas* (sub-pillars of the body) which support the three main *sthambas* (pillars) of the body. Here, *Ahara* has been enumerated first, which shows its prime importance. *Ayurveda* emphasizes consuming a healthy and nutritious diet. The unique concept of *Viruddhaahara* is mentioned in *Ayurveda*, which may be defined as a diet that disturbs the balance among the body elements. *Viruddhaahara* has a pathological effect on each and every *Dhatu* and is capable of causing disease. The consumption of *Viruddhaahara* gives rise to various disturbances of a mild to violent nature and diseases of an acute to chronic nature, including the eight *Maharogas*, genetic disturbances, and even sometimes the death of the person. This points towards the potency and

lethal effect of *Viruddhaahara*. Therefore, *Ayurveda* has given keen attention to the concept of wholesome and unwholesome food.

However, in the 21st century, as a consequence of rapid globalization and urbanization accompanied by stress and anxiety, the food and food habits of individuals have rapidly altered. Due to the increased frequency as well as the quantity of incompatible food and a changing lifestyle, people nowadays are suffering from various types of G.I. disturbances such as hyperacidity, gastritis, dyspepsia, and gastric ulcers. All these symptoms can be covered under the heading of *AMLAPITTA vyadhi* in *Ayurveda*. The etiopathogenesis of *Amlapitta Vyadhi* has been explained by *Madhav Nidana*, where the *Acharya* used the word *Viruddhahara* as a *Vyadhi Hetu*. *Acharya Charaka* explained 18 types of *Viruddhaahara* in his classical treatise, *Charaka Samhita*, and also mentioned a list of diseases occurring due to the recurrent intake of *Viruddhahara*, which includes *Amlapitta*. So, the first group of etiological factors of *Amlapitta Vyadhi* may be considered as faulty dietary habits, i.e., *Viruddhahara*. Thus, the present study was conducted in order to revalidate the fact that *Viruddhahara* is a risk factor for the causation of *Amlapitta vyadhi*.

Aim and Objectives

To study the association between the consumption of *Viruddhahara* and the signs and symptoms of *Amlapitta* produced by it, and also to create awareness in the current population regarding the consumption of *Viruddhahara* (incompatible food).

Methodology

A population-based (of cases) Case-Control Study was conducted in the O.P.D. of R.T. *Ayurved Mahavidyalaya*, Akola.

Cases: The participants of either gender belonging to the age group of 18 to 60 years,

who have symptoms of *Amlapitta* as mentioned in the classics as per *Madhava Nidana* (i.e., *Avipaka*, *Klama*, *Utklesha*, *Tiktaamlodgar*, *Gaurava*, *Hritkanthadaha*, *Aruchi*), were considered as Cases. *Amlapitta* was assessed in participants having four or more symptoms for a duration of more than 6 months. Routine blood investigations such as CBC, ESR, and routine urine examinations were performed.

Controls: The participants of either gender belonging to the age group of 18 to 60 years who are healthy individuals were selected as Controls. To assemble a Control series for particular Cases, participants were selected from the general population.

Sampling Method: A random sampling method, through which *Viruddhahara*-exposed individuals can be traced easily, was applied for the study, and participants were selected from the O.P.D. of R.T. *Ayurved Mahavidyalaya*, Akola. Controls were selected from the general population by a purposive sampling method and matched with cases as far as possible by age and gender, but remaining free from disease.

Preparation of Proforma: To rule out the consumption of *Viruddhahara* in both cases and controls, a specially designed case record format was prepared with details of history taking and the symptoms of *Amlapitta Vyadhi*. A *Viruddhahara* complete assessment table was prepared to gauge the ingestion of *Viruddhahara*, featuring specific questionnaires according to each type of *viruddha* with gradings related to the frequency and duration of *Viruddhahara* consumption.

Table no:1Viruddhahara complete assessment table

18 types of Viruddhahara	Viruddhahara in present era	Present Absent	Frequency (Grade) No Consumption - 0 1 to 2 times in a week - 1 3 to 4 times in a week - 2 More than 4 times in a week - 3	Duration(Grade) No Consumption-0 One to three months- 1 Four to Six months-2 More than six months- 3
1)Desha	To have Ruksha and Tikshna substances in dry region			
2)Kala	Ice cream in winter season, Hot spicy food in summer			
3)Agni	Mandagni- Heavy food taken Tikshnagni- Light/less food taken			
4)Matra	Honey + Cow's ghee			
5)Satmya	Chinese food, Pizza, Tobacco, Madyapan			
6)Dosha	Ex- Pitta prakruti person consuming pittakara ahara ex- Spicy oily amla rasa pradhan food			
7)Sanskar	Heated honey Reheated food items ex- French fries			
8)Veerya	Fish + Milk Fish + Meat			
9)Koshtha	Ex - Krura kostha person consuming dry food items			
10)Avastha	Ex- After exertion, excercise if person consume vataprapakopaka ahara, intake of kapha			

	aggravating food after sleep			
11)Parihar	Cold drink after samosa, cold water immediately after taking hot tea			
12)Krama	Sweet dish after meal, Curd at night			
13)Paka	Uncooked, Partially cooked or overcooked food items			
14)Upachara	Shita jalapana after intake of snigdhaahara/ after taking ghee			
15)Samyog	Fruit salad+Milk, Milkshake, Milk+Banana Milk with food, Sour substances with milk			
16)Hriday	Food items not pleasant to consumer			
17)Sampat	Paryushit Ahara			
18)Vidhi	Not consuming food which is hot and fresh ex food from tiffin box			
Total Score of Viruddhahara (Out of 54)	Mild - 1 to 18 Moderate- 19 to 36 Severe-37 to 54			

Table no 2 : Symptoms of Amlapitta as per Madhava Nidana

Sr No	Lakshanas (Symptoms)	Present	Absent
1	<i>Avipaka</i> (Indigestion)		
2	<i>Klama</i> (Lethargy)		

3	<i>Utklesha</i> (Nausea)		
4	<i>Tiktaamlodgar</i> (Sour & bitter belching)		
5	<i>Hritkanthadaha</i> (Burning sensation in epigastrium and chest)		
6	<i>Aruchi</i> (Anorexia)		
7	<i>Gaurava</i> (Heaviness)		

Observations: The following observations were seen from the collected data of Cases and Controls.

Table no: 3 Distribution of Cases and Controls according to type of *Viruddhahara Sevana* (n=60)

Sr no	Types of Viruddhahara	No of Cases	Percentage	No of Controls	Percentage
1	<i>Desha Viruddha</i>	55	91.6%	43	71.6%
2	<i>Kala Viruddha</i>	36	60%	13	21.6%
3	<i>Agni Viruddha</i>	53	88.3%	29	48.3%
4	<i>Matra Viruddha</i>	01	1.6%	00	00
5	<i>Satmya Viruddha</i>	28	46.6%	17	28.3%
6	<i>Dosha Viruddha</i>	53	88.3%	50	83.3%
7	<i>Sanskar Viruddha</i>	05	8.3%	04	6.6%
8	<i>Veerya Viruddha</i>	06	10%	00	00
9	<i>Koshtha Viruddha</i>	53	88.3%	15	25%
10	<i>Avastha Viruddha</i>	14	23.3%	05	8.3%
11	<i>Parihar Viruddha</i>	15	25%	05	8.3%
12	<i>Krama Viruddha</i>	48	80%	29	48.3%
13	<i>Paka Viruddha</i>	26	43.3%	12	20%
14	<i>Upachara Viruddha</i>	17	28.3%	10	16.6%
15	<i>Samyog Viruddha</i>	35	58.3%	18	30%
16	<i>Hriday Viruddha</i>	19	31.6%	18	30%
17	<i>Sampat Viruddha</i>	39	65%	36	60%
18	<i>Vidhi Viruddha</i>	32	53.3%	21	35%

Table no 4: Distribution of Cases and Controls according to total frequency of *viruddhahara sevana*

Sr no	Gradation of Frequency	Cases	Percentage	Controls	Percentage
1	Mild (1 to 18)	18	30%	58	96.6%
2	Moderate (19 to 36)	38	63.3%	02	3.3%
3	Severe (37 to 54)	04	6.7%	00	00
Total		60	100	60	100

Table no 5: Distribution of Cases and Controls according to total Duration of *viruddhahara sevana*

Sr. no	Gradation of Duration	Cases	Percentage	Controls	Percentage
1	Mild (1 to 18)	4	6.7%	47	78.3%
2	Moderate (19 to 36)	52	86.6%	13	21.6%
3	Severe (37 to 54)	4	6.7%	00	00
Total		60	100	60	100

Table no: 6 Amlapitta symptoms-wise distribution of 60 Cases

Sr no	Symptoms of <i>Amlapitta</i>	No of Cases	Percentage
1	<i>Avipaka</i> (Indigestion)	43	71.6%
2	<i>Klama</i> (Lethargy)	51	85%
3	<i>Utklesha</i> (Nausea)	51	85%
4	<i>Tiktaamlodgar</i> (Sour or bitter belching)	52	86.6%
5	<i>Hritkanthadaha</i> (Burning sensation)	37	61.6%
6	<i>Aruchi</i> (Anorexia)	48	80%
7	<i>Gaurava</i> (Heaviness)	27	45%

Statistical Analysis: As *viruddhahara* is considered a *hetu* of *amlapitta*, and there are a total of 18 types of *viruddha* having gradations of mild (1), moderate (2), and severe (3), the total came to $18 \times 3 = 54$. Therefore, the chi-

square test of association was applied to prove whether there is an association between the frequency and duration of *viruddhahara* and the cases by making a bifurcation of 1 to 18, 19 to 36, and 37 to 54.

Table no: 7 Chi square table

Frequency of <i>Viruddha Ahara</i>	Cases	Controls	Total
Mild (1 to 18)	18	58	76
Moderate (19 to 36)	38	2	40

Severe (37 to 54)	4	0	4
Total	60	60	120

Chi-square (χ^2) value of the above table is 57.45. Degrees of freedom (df) = (2 – 1) (3 – 1) = 2. Chi-square (χ^2) tabulated value of df=2 is 5.99 at P<0.05, i.e., at a 95% level of significance.

Table no: 8 Chi square table

Duration of <i>Viruddha Ahara</i>	Cases	Controls	Total
Mild (1 to 18)	4	47	51
Moderate (19 to 36)	52	13	65
Severe (37 to 54)	4	0	4
Total	60	60	120

Chi-square (χ^2) value of the above table is 63.65. Calculated chi-square value is higher than the tabulated value, so the probability of the difference occurring by chance is less than 5%. Therefore, frequency and duration of *Viruddhahara* and cases are interdependent.

Results

A total of 120 participants were interviewed (60 Cases and 60 Controls). In the present study, all 18 types of *Viruddhahara* were taken into consideration. Observations related to *viruddhahara sevana* on parameters of frequency and duration showed that 63.3% of Cases were taking *Viruddhaharain* moderate frequency, whereas 96.6% of controls were taking it in mild frequency.

Out of 60 Cases, 86.6% were in the moderate grade of duration. In the control group, 78.3% were in the mild grade of duration. All cases and controls were taking more than one type of *Viruddhahara*. The study shows a higher consumption of *Desha viruddha*, *Agni Viruddha*, *Dosha Viruddha*, *Kostha Viruddha*, *Krama Viruddha*, and *Sampat Viruddha Ahara sevana* in Cases. The frequency and duration-wise consumption of *Viruddhahara* is significantly higher in Cases as compared to the Control group.

Discussion

Health as well as disease is caused by *Ahara*. In the majority of diseases, *Aharaj Nidana* (dietary causative factors) has been given prime importance. The unique concept of *Viruddhaahara* is mentioned in *Ayurvedic* classics as the cause of many systemic disorders. Regular consumption of *Viruddhahara* can cause many diseases, and *Amlapitta Vyadhi* is one among them. *Amlapitta* is a disease of *Annavaha Srotas* and is common in the present scenario of unhealthy diet. Recurrence of *Amlapitta vyadhi* is very high, leading to chronicity. As per *Ayurvedic* classics, *Amlapitta Vyadhi* is *Chirakali* (chronic), and frequent intake of *Viruddhahara* over a long duration is a causative factor. *Nidan sevana* of *Viruddhahara* causes vitiation of *Doshas* and *Agni*, resulting in *Agnimandya* and *Avipaka*. Undigested food attains *shuktata*, leading to *Amavisha*, which mixes with *pitta* to develop *Amlapitta*.

Conclusion

The present study revalidates the repercussions mentioned in *Ayurvedic* classical literature regarding *Viruddhahara* as a *Vyadhi Hetu* for the causation of *Amlapitta vyadhi*. A positive association exists between the consumption of

Viruddhahara in higher frequency over a longer duration and *Amlapitta vyadhi*. This study supports the *Ayurvedic* claim regarding *Viruddhahara* as a *vyadhi hetu* for *Amlapitta vyadhi*. As per *Ayurvedic* classics, *Nidanparivarjan* (avoidance of causative factors) is the first line of treatment. The study is helpful to guide patients regarding faulty dietary habits and to advise them on avoiding such etiological factors.

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