

A CRITICAL REVIEW ON THE CONCEPT OF ALPA PITTA AND BAHUPITTA KAMALA WITH A SPECIAL REFERENCE TO ITS NAIDANIKA SAMPRAPTI

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ABSTRACT

The concept of *Varna* (colour) has been explained in Ayurvedic classics with great details. It has been classified broadly in two categories: 1. *Prakruta Varna*, 2. *Vaikruta Varna*. In the present disease *Kamala*, the important sign which a doctor comes across is the *Vikruta Varna* i.e. *Haridra netra, twak, mutra* etc. *Tejo mahabhuta* is said to be responsible for the *Varna*. In *Kamala* the main culprits are *Pitta* and *Rakta* vitiation, both are *Agni mahabhuta pradhana* entities. Hence the disease *Kamala* needs to be studied in terms of *Pitta-Agni* and *Rakta* in detail. The difference between explanations of Acharya Charaka and Acharya Sushruta are not difference of opinions as such, but are merely showing the *mrudu* and *darunatwa* of disease condition and difference in *pramana* of *Pitta* involved. The details of *Hetu-Linga-Aushadha* of *Kamala vyadhi* with special reference to *Alpa Pitta* and *Bahu Pitta* variety are discussed in this article.

Keywords: *Kamala, Alpa pitta Kamala, Bahu pitta Kamala, Rudhapatha Kamala, Koshtashrita Kamala,*

INTRODUCTION

Rakta is considered as *Jiva (Prana)* of living creature. In its *Prakrut avastha*, it endows with strength, complexion, happiness and longevity. When vitiated causes diseases such as *Pandu, Kamala* etc¹. In *Kamala Roga*, there will be derangement of normal colour and complexion of the skin, alteration in *mala pravrutti* and accumulation of excess *mala roopi Pitta* takes place.

The word *Kamala* is derived from the root word *Kamu*, which means *Kaanthi*. The term *Lunathi*

means *Nasha*. And *Kaanthim Lunathi* means, a pathological condition in which normal colour of a skin is lost. In this *vyadhi*, the hunger and appetite for food is diminished, all *malas* get vitiated and discoloured (*peeta, haridra, harithadi*)².

Relation between *Kamala* and *Rakta dushti*:

In classical texts of Ayurveda, we come across the explanation of *Rakta pradoshaja vikaras*. Among them *Kamala* is also an important disease which

catches the concentration of the reader. Explanation of *Kamala* among the major ailments such as *Kushtha*, *visarpa*, *Raktapitta*, *Rakta Pradara* etc. shows its seriousness as per the health is concerned.

Nidanas explained for the manifestation of *Kamala* are same as that of *nidanas* of *Raktavahasrotodushti*. Hence it is clear that as *Rakta* and *Pitta* are *Ashrayashrayi* the *vardhana* and *kshapana* of both is dependent on each other.³

Kamala is explained as one of the *Raktapradoshaja vyadhis*⁴. There is direct involvement of *Raktavaha srotas* in *Kamala vyadhi*. *Rakta* and *Pitta* are *Ashrayashrayi*, hence if there is any *dushti* in *ashraya* it will definitely hamper the normalcy of the *ashrita dhatu*.

Nidanas like, *Nishpava*, *Masha*, *Pinyaka*, *Tilataila*, *ushna*, *Vidahi*, *Dadhi*, *Taila*, *Drava*, *Snigdha*, *Kshara*, *Anupa mamsa sevana* and *krodha* etc. which cause vitiation of *Rakta dhatu*, are also responsible for *Kamala*.⁵ When there is *dushti* of *Rakta dhatu*, definitely it will be affecting the *srotas* through which it is circulating. Hence there will be *dushti* of *Raktavaha srotas* ultimately leading to *Dushti* of its *moola sthana* i.e. *Yakrut* and *pleeha*.⁶

Critical review of *Nidanas* of *Kamala*:

Authors and commentators of different Ayurved classical texts explained etiological factors of *Kamala vyadhi* in scientific way as far as *samprapti* (etiopathogenesis) are concerned. *Acharya* Sushruta quoted very peculiar *nidanas* in context of *Pandu* such as; *vyayama*, *amla*, *lavana*, *madya*, *mrudbhakshana*, *divaswapna*, *ati teekshna-ushna ahara* etc.⁷ In the same way *Acharya* Charaka also mentioned etiological factors such as intake of *kshara*, *amla lavana*, *ati ushna*, *viruddha asatmya ahara*, *nishpava*, *masha*, *pinyaka*, *tila taia*,⁰⁸ etc. On critically reviewing the above said *Nidanas*; *vyavaya*, *Divaswapna*, and *Mrutbhakshana* are known to vitiate *Tridoshas*.

Divaswapna means sleeping in day time. Except *Greeshma rutu* day sleeping is not advocated. By doing *divaswapna*, there will be *Kapha* and *Pitta prakopa*⁰⁹. People with such lifestyle are more prone to get diseased.

Vyayama even it is good for the health, *Acharyas* advised to perform only half the capacity of an individual, if *Ati vyayama* is done, without proper food and rest, there are chances of severe *Vata prakopa*¹⁰. Usage of excessive *Amla rasa dravyas* due to their *sara guna*, *ushna veerya* and *kledana* properties, excessive indulgence causes *shithilata* of *dhatu*, *vardhana* of *Pitta* and vitiation of *Rakta*, hence *ati sevana* of *amla rasa* also causes *Kamala*. Similarly *Lavana rasa* if used in excess due to its *ushna*, *teekshna*, *snigdha* properties, causes *Pitta prakopa*, *pramanataha vrudhi* of *Rakta* hence contributes in *Kamala samprapti*.

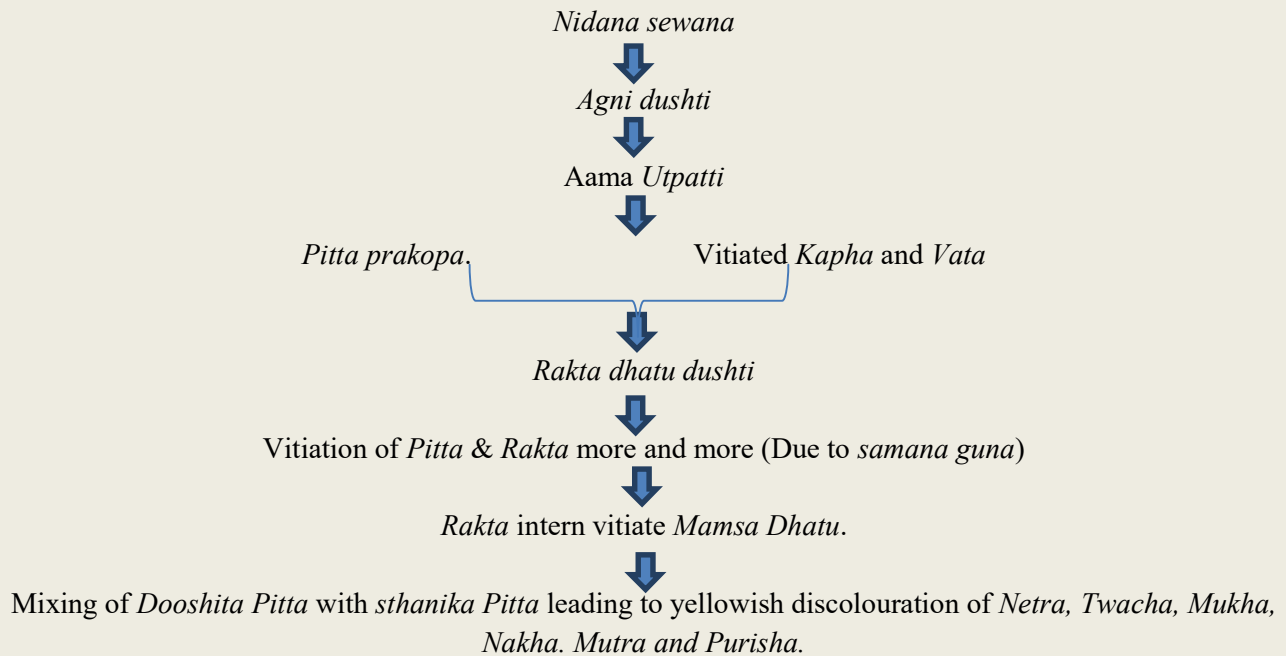
Madya is mentioned as one of the *nidanas* for *Kamala*. *Madya* is known for its *teekshnata*, *ushnata*, *vyavayi*, *vikasi*, *sukshma*, *ruksha* and *vidahi* properties. It makes the *annarasa utkleda* and *vidagdha*, ultimately adding on to *Pitta* and *Rakta dushti*¹¹. Therefore *Acharyas* explained that if *Madya* is used with proper *yukti*, it acts like nectar, but improper usage of *madya* proves to be fatal. *Madya* due to its above said *gunas* causes vitiation of *Pitta* and *Rakta*, hence causing *vidagdhata* and *Raktadushti*.

Usage of *nishpava*, *pinyaka tila taila* like *nidanas* are also known to be vitiating *Pitta*. *Vegadharana* mainly causes *Vataprakopa*.

Manasika nidanas mentioned such as, *Kama*, *Chinta*, *Bhaya*, *krodha*, *Shoka* are also equally important as they cause deep rooted injury to the mind. Such disturbed mind cannot cope up with the body, food intake and digestion also gets hampered, in long run these may also precipitate into the on-going *samprapti* of *Kamala*.

Overall the above discussed etiological factors are directly or indirectly responsible for the pathogenesis of the disease *Kamala*.

Understanding of *Samprapti*¹²



Kamala Roga.

Classification of Kamala;

Acharya Charaka considers *Kamala* as a later stage of *Pandu Roga* or else we can say it as an *avastha vishesha* of *Pandu*. Hence such type of *Kamala* is also known as *Pandu poorvika Kamala*.¹³ Acharya Sushruta opines that *Kamala* can occur without the pre-existing *Pandu Roga* As independent (*swatantra*) *vyadhi*¹⁴ and Acharya Vagbhat also supported Sushrutas view¹⁵. Acharya Chakrapani clarifies beautifully that, *Kamala Roga* can be seen with the preceding *Pandu Roga* or independently without pre-existing *Pandu Roga*. Just like in case of *prameha pidakas*, these *Prameha pidakas* may be seen in *prameha Roga* or without *prameha* independently. If it is preceded by *Pandu Roga*, the condition is *Paratantra* or *BahuPitta Kamala*. If the *Kamala Roga* is seen with *alpa pramana Pitta prakopa*, independently without pre-existing *Pandu roga*, it is said to be *Swatantra* or *Alpa Pitta Kamala*¹⁶. Hence we see two types of *Sampraptis* here, one is with Pre-existing *Pandu Roga* and the other is

without *Pandu Roga* excessively due to *Pittaja ahara vihara* or *pitta Paratantra prakopa*

Understanding of BahuPitta Kamala.

When the patient suffering from *Pandu Roga* indulges in the diet and regimen which cause aggravation of *Pitta*, the aggravated *Pitta Dosha* burns the normal *Rakta* and *Mamsa* resulting in the disease *Kamala*¹⁷. Here the Vitiated *Pitta* is vitiating the *Rakta dhatu*. Due to the equivalent properties of both *Rakta* and *Pitta* they get vitiated more. These intern burn the *Mamsa dhatu* causing *Shithilata*. *Dushita Pitta* mixes up with the *Sthanika Pitta* leading to yellowish discoloration of *Netra*, *twacha*, *mutra*, *nakha* etc. *Peeta Varna* of *mootra* (urine) and *varchas* (stools) is due to Increase in *malaroopata* of *Pitta* in *koshta*. His complexion becomes yellowish just like that of the frog of rainy season (*Bheka varna*), his senses get impaired. The patient suffers from different series of symptoms such as indigestion, burning sensation in the body, anorexia etc. As

a result of less nutrition, the patient becomes emaciated and weak.¹⁸

Increased levels of *Ranjaka Pitta* are observed in *Koshta* as well as in *shakha*. Here *koshta* refers to *Mahasrotas*, and *Shakha* refers to *Raktadi dhatus*. Therefore the condition is called as *Koshtashakhashrita Kamala*. Because of the same reason it is also called as *Ubhayashrita Kamala*.¹⁹

If we analyse these symptoms in the light of contemporary sciences, *koshtashakhashrita Kamala* can be correlated to a great extent with that of haemolytic jaundice/ Prehepatic jaundice, because of the similarities in between pathogenesis and symptoms.

Excessive amount of bilirubin into the duodenum (*Bahu Pitta*) leads to increased urobilinogen in urine that causes dark yellow urination. Stercobilinogen formed in excess amount is responsible for dark yellow stools, Some parts of the *Ranjaka Pitta* is responsible for the *Mala ranjana karma*, more the amount of *Ranjaka Pitta* in *koshta*, more darker the stool would be, hence we can consider *Dravyatah* and *karmatah vrudhhi* of *Ranjaka Pitta* in *Koshta*. As there will be severe *Raktakshaya* (Anemia), *dourbalya durbalendriyata* (Diminished perception power of sense Organs) are observed in patients.

Chikitsa of BahuPitta Kamala:

In *BahuPitta Kamala*, there is a greater amount of *Dosha sanchaya* and *Dosha dushti* in *koshta*, hence the main aim of the *vaidya* is to remove the vitiated *Dosha* out of the body. At the same time to prevent the destruction of *Rakta* and *Mamsa*. Acharya Charka explained *mrudu shodhana* (Purification through mild purgation) in *Kamala* with drugs like *Aragwadha*, *trivrut*, *Draksha* etc. which help in eliminating *Sanchita Doshas*²⁰. *Tikta rasa dravyas* are used as they are *Pitta shamaka* in nature.

Acharya vagbhata also explains that in *Kamala Roga* one should do treatments in such a way that they are *Pitta shamaka* and at the same time they should not cause adverse effect on *Pandu Roga*²¹. Hence the protocol of the treatment should be *snehana* with *dravyas* such as *Panchagavya ghrita*, *Mahatiktaka ghrita*, *Kalyanaka ghrita*, *dadeemadi ghrita*, *Indu-*

kanta ghrita etc. in which major number of ingredients are *Tikta rasa pradhana*, *Pitta shamaka dravyas*.²² After *shodhana shamanoushadhis* which are containing *Tamra* such as, *Arogyavardhini*, *suthashekhara rasa*, *Pittashamaka dravyas* like *kumaryasava*, *Pravala panchamita*, *usheerasava*, *Chandanasava*, *phalatrikadi kashaya*, *Navayasa loha*, etc. can be used. Fresh juices of leaves of *Guduchi*, *Nimba*, *Bhumi amalaki*, *Eranda*, or freshly prepared *kwatha* of *triphala* also proved beneficial in *Kamala chikitsa*.²³

Critical analysis of Alpa Pitta Kamala:

Alpa Pitta as the word suggests there is *Kamala vyadhi* in the patient with the amount of *Pitta* being involved is less as compared to that of *Bahupitta Kamala*. In *Alpa Pitta Kamala* patient will not give history of much *Pittakara nidana*, there will be sudden *prakopa* of *Pitta* hence the *pramana* of *Pitta* will be *Alpa*. Here the *Pitta prakopa* is *Paratantra*.

Alpa Pitta Kamala is also known as *Shakhashrita Kamala*, here *shakha* is one among the *trividha Rogamargas*.²⁴ The careful observation of *samprapti* of *Shakhashrita Kamala* reveals that it is nothing but *Ruddhpatha Kamala* resulted from *kapha* obstructing the *Pittavaha srotas*. Due to the obstruction in *srotas* the *srotovahi dravya* does *vimargagamana* and moves from *koshta* to *shakha*. To understand the exact pathology of *shakhashrita Kamala*, it is necessary to know the phenomenon of *Doshagati*.

For the performance of normal functions of the body, *Doshas* must pervade the whole body. *Doshas* move from *koshtas* to *sakhas* and from *sakhas* to *koshtas* constantly, according to requirements. They enter the *koshtas* for their *prakruta karma* and get back to the *sakhas* when that particular function is over. This to and fro passage of *Doshas* takes place smoothly under normal physiological conditions. When *Doshas* get vitiated this smooth transit is hampered for the following reasons. *Vyayama* (exercise), *Ushmanat thaikshnyat* (due to effect of digestive fire) *Ahitacharanat* (due to non-observance of wholesome regimen) *Vatasya drutatvam* (increased

activity of *Vata*) vitiated *Doshas* due to these *nidanas* Instead of freely moving between *sakha* and *koshta*, same *Doshas* stick on to the already vitiated *srotasas*. The whole process is called ‘*Sthana-samsraya* of *Doshas* in *dathus*’²⁵. This diversion of *Doshas* from physiological to pathological activity is known as *Shakhagati* of *Doshas*. Due to such *Vimarga gamana*, One of the *prakruta karma* of *mala-roopi Pitta*, i.e. *Malaranjana* gets hampered resulting in *Tilapishtanibha varchas* (faeces resembling paste of sesame seeds)²⁶.

Acharya Charaka stated this pathology very clearly in *samprapti* of *Rudhapatha Kamala* as ‘*Shleshmana rudhamargam tat Pittam kaphahare jayet*’ Which clearly means there is obstruction for the passage of *Pitta* by *Kapha*²⁷. In view of *Amshamsha Kalpana*, the vitiation of *Kapha* is more of its *manda guna*, *Pitta* due to its *sara guna* and *Vata* due to its *Chala* and *Ruksha guna*. This obstruction may be of two types, 1. *Nija* (by *Kapha*) and 2. *Agantuja* (physical). The obstructions may be happening due to *dushtarbuda*, *krimi*, *Pittashmari*, etc. Also come under the purview of *shleshmana rudha marga*. The physical obstruction due to stenosis, calculi, trauma, etc. may be included under *agantuja* type.

Understanding of *shakhashrita Kamala samprapti* through concept of *Ashayapakarsha*:

This peculiar type of *Doshagati* has been explained by *Madhukosha*, a commentator of *Madhavanidana*. *Ashaya* is resting place or abode. *Apakarsha* is to carry away, drag or remove, and *Gati* is movement. *Ashayapakarsha* means dragging away something from its site of location to some other place. This is the special quality of *Vata Dosha*, Vitiated *Vata Dosha* displaces normal *Pitta* and *kapha* from their place causing imbalance. It is important to note that the *Pitta* and *kapha* are normal and not vitiated, but the vitiated *Vata* which displaces them from their abode²⁸. The nature of treatment required for the same is also peculiar. Therefore this phenomenon deserves special consideration. In short, the treatment for *asayapakarsa* is nothing but the treatment

for *Vata Dosha* irrespective of the symptoms which are of *kapha* or *Pitta*.

In *Shakhashrita Kamala* due to independent etiological factors, *prakopa* of *Vata* and *Pitta* takes place. The vitiated *kapha* causes obstruction in the normal passage of *Pitta*. Normal colour of *mala* is said to be due to the same *Pitta* hence *Teekakara* called it as *Malaranjaka Pitta*. Due to the *samsarga* of this *Pitta*, there will be less *ranjana* of *mala*, causing *tilapishtanibha varchas*. *swatantra Prakopita vata* takes away the *Sanchita Pitta* (due to *avarodha* by *kapha*) to *twacha*, *netra*, etc. This pathology is said to be one of the best examples of *Ashayapakarsha*.²⁹

Clinical features of *Shakhashrita/ Alpa Pitta Kamala*.

Haridra netra mutra twak (Yellowish discolouration of eyes, mouth, skin & nails), *Shwetavarchas* (White coloured stools), *Vishtambha* (Constipation), *Atopa* (Flatulence), *Alpagni* (Indigestion), *Aruchi* (Anorexia) *Jwara* (Fever), *Dourbalya* (Weakness), *Hrudaya Gourava* (epigastric discomfort), *Hikka* (Hiccough), *Shwasa* (Dyspnoea) are the clinical features.³⁰ If we see the above signs and symptoms in light of contemporary sciences, *Ranjaka Pitta* which is not flowing in its flow normally instead being obstructed can be compared to the diseases such as Obstructive jaundice, Intra hepatic cholestasis as the pathological factors and clinical symptoms are almost same in these diseases.

Chikitsa of *Alpa Pitta Kamala*.

As discussed above there is *avarodha* of *Kapha* in *Pitta sthana*, for *samprapti vighnana*, it is necessary to do *kapha hara chikitsa*. As *Doshas* are in *shakha*, they need to be brought back to *koshta*, for that purpose, *acharyas* quoted some important modalities such as, *srothomukha visodhanat* (clearance of obstruction from *srotas*), *Vridhi* (further increase of vitiated *Doshas*), *Abhishyandanat* (increase in fluidity), *pakat* (subjection to change of consistency by the action of *Agni*), *vatasya nigrहत* (reduction in intensity of stimulation of *Vata Dosha*).³¹ It is important to have the knowledge of this movement of

Doshas to formulate treatment protocols. Analysis of strength of *Doshas*, differentiation between *sthanika Dosha* and *Agantu Dosh*a should be done first, and the treatment protocol should be such that, the stronger is treated first. As there is *kapha avarodha*, usage of *teekshna*, *ushna dravyas*, having *katu*, *lavana* and *amla rasa* like *pippali*, *maricha*, *shunthi* etc. are to be used.

Amla rasa due to its *snigdha*, *deepana*, *Vatanulomana* and *kledana* properties help in balancing vitiated *Vata Dosh*a and cleansing the channels of *ranjaka Pitta*³³. *Lavana rasa dravyas* due to their *chedana*, *bhedana*, *teekshna*, *kledana*, and *marga vishodhana* properties help in removing the obstruction. In the same way *katu rasa dravyas* are *kapha shamaka*, *mala shodhana*, dissolves the *shonita sanghata*, *srotoshodhana*, and *deepana* in nature which are also the desired qualities in the treatment³³.

For the removal of obstruction in *Ruddhapatha Kamala*, *Teekshna virechana* is administered. For that, *kalpas* containing *Danti*, *Trivrut*, *Katuki* and *Jayapala* etc. Which are *Ushna*, *Teekshna*, *Lekhana*, and *katu Rasatmaka dravyas* should be used. Chakrapani opines that, *Pitta vardhana chikitsa* is to be continued till the mala gets its normal colour³⁴. After those therapies such as *Yapana bastis*, *Ksheerabastis*, along with *Anuvasana bastis* can be performed according to the conditions³⁵.

For Shaman Chikitsa (Dosha pacification treatment) medicines like *Trikatu choorna*, *pippali choorna*, *Arogyavardhini rasa*, *Vasa guduchyadi Kashaya*, *Patola Katuturohinyadi Kashaya*, *Shilajatu*, *Nimba twagadi kashaya*, *kumaryasava*, *Rajapravardhini vati* etc. are proven helpful as far as *Alpa Pitta Kamala* is concerned.

DISCUSSION

While explaining the *Samprapti* of *RaktaPitta* *Acharya Charaka* says *tadyonitwat prapannam cha vardhate tat pradushaya*³⁶. Which means that the *yoni (utpatti)* of *Pitta* is *Rakta*, when *Pitta* combines with its *utpada amsha*, *vrudhi* of it takes place,

similar *samprapti* is happening here. Vitiated *Pitta* vitiates *Rakta* and *mamsa* resulting in *Kamala*. The peculiar sign in *Alpa Pitta Kamala* is *Tilapish-tanibha varchas*. Only by looking at *Shweta varchas* doctor should not come to the conclusion that it is *Alpa-Pitta Kamala*, as the same symptoms are seen also in *Shleshmatisara*³⁷. In the same way looking at the *Haridra netra* and *mutra* it may not be always *Kamala*, as these are observed also in *Pittaja Gulma*, *pittodara*, *Pittaja jwara* etc. therefore careful observations of *nidana* and *upashaya*, *anupashaya* should be done.

Interpretation of Laboratory Investigations in Kamala;

If we look into the Liver function tests, Serum Bilirubin amount (unconjugated hyperbilirubinemia) mostly raised in conditions of *Koshta shakhashrita Kamala*³⁸. *Rakta dhatu mala* is *Pitta*, when there is *Dhatvagnimandya*, the formation of *Saara* and *Mala bhaga* will be hampered. Serum bilirubin can be taken as *Malaroopi Pitta* which is found more in conditions like haemolytic jaundice where there is excessive damage to *Rakta dhatu*. This can be compared with the *samprapti* of *BahuPitta Kamala (asruk mamasam dagdhwa Rogaya kalpate)*³⁹.

Aspartate aminotransferase (AST; SGOT) and alanine aminotransferase (ALT; SGPT); are sensitive indicators of liver cell injury; ALT more specific measure of liver injury; ethanol-induced liver injury usually produces modest increases with more prominent elevation of AST than ALT. Both these enzymes can be considered as *Tejo mahabhoota pradhana* entities in view of Ayurveda. Whenever there is increase in these enzymes they indicate the *Agni dushti* and *Pitta vrudhi*.

Alkaline Phosphatase is a Sensitive indicator of cholestasis, biliary obstruction (enzyme increases more quickly than serum bilirubin), and liver infiltration; mild elevations in other forms of liver disease⁴⁰. Hence the raised values can be indicating the possibility of *Shakhashrita Kamala* or *Alpa-Pitta Kamala*. In Stool examination, the whitish bulky and *Tilapish-tanibha varchas* is seen, on examination we

can find excess amount of fat in it as there will be less fat metabolism in liver.

CONCLUSION

Acharya Charaka considers *Kamala* as an *avastha vishesha* of *Pandu Roga*, whereas Acharya Sushruta's opinion on *Kamala* is more of Independent origin, without Pre-existing *Pandu Roga*. The difference between explanations of Acharya Charaka and Acharya Sushruta are not difference of opinions as such, but are merely showing the *mrudu* and *darunatwa* of the disease condition and difference in *pramana* of *Pitta* involved.

Koshtasritha Kamala is *Bahu Pitta* because in this type of *Kamala*, there is *Swabhavata, pramanatah vrudhi* of *Pitta* due to its own *prakopa hethu*.

In *koshtasritha Kamala samprapthi, prakupitha Pitta* does *dusti* of *Rakta* and *mamsa*. This can be considered as due to Haemolysis according to modern authors. Haemolytic jaundice is nothing but *BahuPitta Kamala / kosta shakeshrita Kamala. (paratantra)*

In *Alpapitta Kamala* patient may not give much history of *Pittakara nidana*, the amount of *Pitta* vitiated will be *Alpa*. So, *Shakhashrita Kamala* can be *Alpa Pitta* because in this type of *Kamala*, there is obstruction to the *Marga* of *Pitta* due to *Avarodha* by *Kapha*. We can compare this phenomenon to the Obstructive Jaundice.

Advanced liver diseases like cirrhosis, encephalopathy etc can be compared with *Kumbha Kamala* as they have similar signs & symptoms (*Kalantarat kharibhuta*) like oedema, ascites, mental confusions, coma, anorexia etc.

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