INTRODUCTION
Indian System of medicine is almost as old as Indian Civilisation and is a rich heritage of India.

The history of origin of drugs goes back to the beginning of history of mankind. Plants have been used in the field of treatment of various diseases from time immemorial. The Indian sages invented drugs and their therapeutic uses long ago. This was based on the observation of the effect of drug on animals and human beings. Plants, animals and minerals are the three different sources of drugs used to maintain health and to eradicate the disease. The drugs of plant origin come first in the series, because of their easy availability, safe and easy processing.

The branch that deals with herbals is known as Dravyaguna. It was not included among the astangas as far as Samhitas are concerned, but have given transcendental value to it. Samhita Kala is followed by Niganthu Kala which include Niganthus like Dhanavantari, Raja, Madanpala, Bhava Prakash and others. Rajanarahari the author of Rajaniganthu has given first priority to Dravyaguna among Astangas of Ayurveda.
In the present study an attempt has been made to evaluate antipeptic ulcer activity of the drug "Yestimedhu" or "Glycerrhiza Glabra Linn".

Peptic ulcer is an excoriated area of the mucosa caused by the digestive action of the gastric juice. The ulceration mainly appears near the acid bearing region of gastrointestinal tract.

Peptic ulcer both gastric and duodenal may occur at any age and in both sexes. Duodenal ulcers have their greatest frequency in middle aged men (35-40). Gastric ulcer is frequently seen with increasing age. Occurrence of the disease varies from place to place in the same country, for example in India peptic ulcer is more common in south than in north.

Occurrence of Peptic ulcer is increasing in the present day due to irregular food habits and unhealthy personal habits like smoking, intake of alcohol, excess intake of beverages like coffee, tea etc. Added to this the physical strain and mental tension caused due to present day busy life. The disease peptic ulcer is presented with clinical features like dyspepsia, heart burn, acidity, acid regurgi-
tation and pain, vomiting may be present, sometimes it is spontaneous or may be induced also. There are limitations to modern medical drugs including side effects or toxic effects.

Modern medicines include antacids used in liquid and tablet form. Liquids are unpalatable, Antacids have calcium, magnesium and Aluminium salts. Calcium and Aluminium salts cause constipation and Magnesium causes diarrhoea. Cimetidine and Rantidine are widely used these days. H2 blocker cimitidine gives rise to Gynecomastia in some patients. Rantidine may disturb liver function. Though the symptoms are reduced within 48 hours they reoccur periodically. Conservative treatment is repeated and in patients in whom surgery is contraindicated as due to old age, cardiac disease and respiratory disease, Rantidine is given as maintenance dose.

When ulcers fail to heal by conservative treatment surgery is the last resort. Vagotomy is preferred to partial gastrectomy because of lesser mortality and lower incidence of long term complications.

In Ayurveda there is no direct reference about peptic ulcer. But the symptomology of peptic ulcer scatter here and there in different diseases like Amlapitha, Vrana, Shoola etc.
No reference to shoola is got in vedas. In vishnu purana there is reference to shoola and is included under "Shareeri-ka Vyadhis". Though charaka has not mentioned about shoola separately he has considered it as a symptom in diseases like Pravhika, Atisara and Udavaratha. Sushrutha has mentioned the word shoola in Gulma Chapter, later Madhavakara the author of Madhava Nidana has dealt with almost all types of shoola including Parinama Shoola. Chakrapani dutta has mentioned treatment of all types of shoola including Parinama Shoola.

Drug Yestimadhu which has been selected for the present study has Madhura rasa, Madhura Vipaka, and Sheetha Veerya. It has Shoolaghna and Vrana Ropana, actions along with other actions as mentioned by various authors.

In Bhaishajaya Rathnavalli Yestimadhu Gritha Sechana is recommended in Sadhyovrana Chikitsa. Along with its other actions Bhavanishra, the author of Bhavaprakash has recorded Vranashothghna action of Yestimadhu. In Sushrutha the drug has been indicated as Sarvopghat Shamneeya. Its kalka mixed with gritha is said to have very good vrana ropana action.
In "Indigenous drugs of India", "Chopra mentions that Yestimadhu has Antispasmodic, Anti-inflammatory and Antiulcer activity. Rajaniganthu also mentions about its Vranaropana action.

Keeping in mind the above mentioned points the present drug was selected to give safe, economical and easily available drug to the mankind.

Roots of "Yestimadhu" was purchased from Bangalore Market. Roots after being identified, was washed well and dried in shade. Later the roots were made into kashaya and fine churna to be used in different preparations. Roots were subjected for various organoleptic studies.

Roots of Yestimadhu was prepared into four different preparations like Ksheerapaka, Hima, Gritha and Churna were used in the study. Experimental studies were carried out on experimentally induced peptic ulcer in Albino rats. Parameters like volume of Gastric juice, value of free acid, total acid and ulcer score were fixed. Histopathological studies of gastric mucosa was also included in the study. The study also included standard and control groups. Standard group of animals received cimetidine and control group of animals did not receive any drug.
Clinical studies were carried out on a total number of 48 patients. Patients were selected from both sexes and different age groups. Treatment was for a period of three months. Clinical findings like U rashoola, U rashaha, U daradha, U darashoola, A mlodgara and others were recorded at the end of each month. Above all Barium-meal X-ray was fixed as a standard parameter for the evidence of peptic ulcer. Endoscopic examination was also done, wherever possible. At the end of experimental and clinical studies the results were subjected for statistical analysis by applying T - Test and X2 Test respectively.

In experimental studies it was observed that Yestimadhu Ksheerapaka and Churna were Highly significant and effective in reducing the level of gastric juice, values of free acidity and total acidity. Whereas Yestimadhu Gritha was very effective, and Highly significant as far as Ulcer preventive effect is concerned. Ksheerapaka and Hima also have ulcer preventing activity where as Churna has no ulcer preventing effect. It is observed that ulcer preventive action of yestimadhu Gritha was more significant than that of Cemitidine.

The Clinical studies showed that Yestimadhu Ksheerapaka is very effective and the results obtained are Highly significant and encouraging. Significance of other prevention in order are Hima, Gritha and Churna.