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# Sthoulya Review With Special Reference To Obesity

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Abstract: An abnormal accumulation of body fat, usually 20-30% or more over an individual ideal body weight is known as Obesity. Obesity is given as Sthoulya or Medo Roga in Ayurveda. When a person's food intake is with high-fat food, fried items, fast food items etc., along with their lifestyle is sedentary leads to excess fat accumulation in the body which gets deposited in the numerous body channels. Appropriate Ayurvedic Shamana Chikitsa with Shodhan Chikitsa are used to reduce obesity that also with no side effects. Udavartana, Basti, Virechana, Vamana these Shodhana procedures gives effective results, according to Dosha vitiation. There is an important role in the management of Obesity by proper lifestyle modifications and PathyaApathya. Sthaulya (Obesity) is such a disease, which leads to so many hazards like hypertension, diabetes mellitus etc. as well as psychological disorders like stress. The mortality and morbidity rates are more in obese person. It is one of the most common and most neglected public health problems in the present world. In rich countries, obesity is more common among the highly educated. In classics Sthoulya (Obesity) has been described under the Santarpanajanya Vikara and in Bahudoshavastha condition. Ayurvedic treatment aims not only at the radical removal of the causative factors of the disease, but also at the restoration of Doshika equilibrium.

**KEY WORDS:** : Obesity, *Sthoulya*, Lifestyle disorder

#### INTRODUCTION

Good health plays an important role in human development, it is universally accepted. Good health is based on the equilibrium state of Agni, Dosha, Dhatu, and Mala, according to Ayurveda. Also, in Ayurveda there is clear-cut emphasis on maintaining physical, mental and spiritual well-being. The World Health Organization (WHO) defines good health as a state of complete physical, mental and social well-being and not merely an absence of disease or infirmity, which is in close proximity to the definition of good health mentioned in Ayurvedic classics. With the evolution of civilization man has become more and more physically inactive. Now a day the codes and conducts narrated in the ancient texts of Ayurveda are being ignored. Modernization, science and technological development and other modern things lead to still more sedentary life styles. And due to which human beings unknowingly invited a number of diseases, from which Sthoulya is one which disturbs physical, mental as well as social health of an individual. Sthoulya is the abnormal & excess accumulation of Medo Dhatu. Frequent and excess intake of Kapha rising food items, sedentary lifestyle, lack of physical and mental exercise are the most common etiological factors of this disease. Sthoulya can also occur due to Beeja Dosha i.e., hereditary causes. In modern medical science Sthoulya is compared with Obesity and it is defined as excess of body fat that leads to a health risk. It is caused by excess calorie intake, but endocrine disorders like hypothalamic disorders, Hypothyroidism, Cushing's syndrome etc. can also be the cause of Obesity. Obesity can also due to genetic cause. Etymological derivation of Sthoulya in Sanskrit grammar each and every word is derived from a particular root word called as Moola Dhatu. Similarly the word Sthoulya is derived from Moola Dhatu "Sthu" with "Ach" Pratyaya, which stands probably for bulky or big or thick. Definition of Sthoulya - A person in whom excessive and abnormal increase of Medo Dhatu along with Mamsa Dhatu is found, which result into pendulous appearance of buttocks, belly and breasts is called as Sthoola. Obesity- it can be defined as an excess of body fat that cause health risk. The term is normally reserved to describe people who are grossly overweight, while the term overweight is more frequently used to designate mild degree of adiposity. Approximately 20% of excess over desirable weight imparts a health risk.

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#### Meda

Sthoulya is a Dushya dominant disorder, in which Meda plays a major role in its pathogenesis. Meda is said to be an important Dhatu among Sapta Dhatu with it's main function to smoothen the body by its Sneha property.

#### Synonyms of *Meda*

- 1) Mamsaja and Mamsatej: The formation of Medo Dhatu is from Mamsa Dhatu by Mamsa Agnipaka. So, it is known as Mamsaja or Mamsatej.
- 2) Asthikrita: The formation of Asthi Dhatu is also from Medo Dhatu so it is known as Asthikrita.
- 3) Vasa and Vapa: Vasa is the fatty substance which locates in Mamsa, when it is deposited in abdomen, it is termed as Vapa.
- 4) Majja: Asthi Madhya Gata Sneha is called as Majja.

The total quantity of Meda and Vasa is 2 and 3 Anjali respectively. Thus, there is 5 Anjali total Meda content of body. The proportion is raised in Sthoulya.

# Karma of Meda Dhatu

Snehana, Sweda, Drudhatva, Asthipusti and Netra, Gatra, Snigdhata are the main functions of the Medo Dhatu.

- Snehana: The luster of skin, hairs and eyes etc is due to Sneha Property.
- Sweda: To produce Sweda is the main function of Meda. Sweda is mentioned as Mala of Meda.
- \*Asthi Pusti: Another function of Meda is nourishment of further Dhatu i.e., Asthi.
- •Drudhatva: It is possible with the help of Snayu, the Upadhatu of Meda. Both Snayu and Sandhi are directly related to the Asthi Dhatu. Snayu provides supports to Asthi and Sandhi helps in joint formation.
- •Netra and Gatrasnigdhata: These are the symptoms of Sthoulya which may arise through increased Snehana function of Meda.

#### Medovaha Srotas

The channels, which give nutrition to the *Medodhatu* or the vessels carrying the nutritive material up to the site of *Medodhatu* can be considered as Medovaha srotas.

#### Nidana Panchaka

The need for proper diagnosis of a disease before planning its management needs no special emphasis as it has been rightly described by *Charaka*. He says;

The meaning says, before prescribing any medicine the Rogapareeksha should be done properly before prescribing the medicines. Nidana is to arrive at the conclusive diagnosis of the disease due consideration of the Nidana Panchaka which are: Hetu (Etiology), Purvarupa (Prodromal symptoms), Rupa (Symptomatology), Upashaya (Relieving and Aggravating factors) and Samprapti (Pathogenesis).

#### Nidana

The knowledge of *Nidana* help the physician towards therapeutics and also in advising about *Pathyaapathya*.

Sthoulya is due to the vitiation of Meda and Shleshma. Acharya Charaka has mentioned more about the exogenous causes and Acharya Sushruta and Avharya Vagbhatta mentioned about the endogenous causes of Sthoulya. Exogenous causes are due to the diets that increases the Meda or body fat where as Dosha, Dhatu, Mala, Srota are under endogenous causes.

Nidana of Sthoulya can be categorized as;

- Aharaja Nidana
- Viharaja Nidana
- Manasika Nidana
- Anya Nidana

# Samprapti:

Series of pathological events taking place during the journey of a healthy human body towards any disease is known as *Samprapti*. In the disease manifestation there is mandatory involvement of *Dosha*, *Dushya*, *Strotas*, *Agni*, *Ama* etc. They are called as *Samprapti Ghataka*.

Where as *Acharya Sushruta's* concept of *Kriyakala* says the mode and stages of the development of disease. A good knowledge and understanding of *Samprapti* is very essential for early diagnosis and prognosis. It is also required for preventive and curative measures. To study and understand the *Samprapti* of *Sthoulya* it is dealt under the headings:

- 1.Samanya Samprapti
- 2.Samprapti Ghataka
- 3.Naidanika Samprapti
- 4. Samprapti based on Kriyakala.

# Purvarupa (Prodromal symptoms)

The symptoms which appears before the complete manifestation of the disease are known as *Pruvarupa*. No one has described the *Purvarupa* of *Sthoulya*. Similar pathogenesis of *Prameha* and *Sthoulya* are mentioned in *Nidana Sthana* of *Acharya Charaka*, in both there is vitiation of *Kapha* and *Meda*. Therefore, *Purvarupa* of *Prameha* and *Medovaha Strotodushti Lakshana* can be considered as *Purvarupa* of *Sthoulya*.



Wherever *Purvarupa* of disease are not mentioned, the weak manifestation of *Rupa* should be considered as *Purvarupa* of the concerned diseases says *Acharya Charaka*. Keeping the views of *Acharya Charaka* in mind, *Lakshana* of *Kapha Vriddhi* like *Alasya, Angashaithilya, Madhurasyata, Atinidra, Atipipasa*, etc. may also be considered as *Purvarupa*.

# Roopa (Symptomatology)

The most important diagnostic parameter of a disease is *Roopa* or *Lakshana*. At this stage, *Dosha Dooshya Samurchana* is completed & the onset of the diseases takes place, which gives rise to appear symptoms of the disease. According the progress of disease these sign & symptoms may change from time to time. Certain symptoms may newly appear while some may disappear as the disease progresses. All the symptoms are not seen in every patient at a time.

The symptomatology of Sthaulya is elaborated as follow.

According to *Charaka*, *Chala Sphika*, *Chala Udara*, *Chala Stana* and *Ati Meda-Mamsa Vrddhi* are very obvious in all the patients of *Sthaulya*, hence these may be considered as cardinal symptoms or *Pratyatma Lakshana*.

Besides these cardinal symptoms, Ashta Dosha of Sthaulya are Ayusyahrasa, Javoprodha, Kricha Vyavayata, Daurbalya, Daurgandhya, Svedabadha, Ksudha Atimatrata, Pipasa Atiyoga are the most prominent clinical features of Sthaulya as stated by Charaka, Susruta and Ashtanga Samgraha.

# Chikitsa (Treatment)

The actions, which bring the equilibrium of Dhatu is known as Chikitsa.

Acharya Charaka has further stated the scope of the term Chikitsa. According to him, "Chikitsa aims at the radical removal of the causative factors of the disease, and also at the restoration of the Doshika equilibrium".

While describing the *Chikitsa* of *Sthoulya*, *Charaka* has said that it is very difficult to treat *Atisthoola* people because, if *Karshana* therapy is applied then it leads to further aggravation of already aggravated *Jathragni* and *Vayu* and if *Brimhana* therapy is applied it further increase the *Meda*. General principles of management of any disorder is;

Thus, in any disorder management is divided into 3 parts.

- 1.Samshodhana
- 2.Samshamana
- 3.Nidana Parivarjana

Sthoulya management is explained in detail as follows;

# • Bahya Chikitsa

Ruksha Udvartana is the Bahi Parimarjana Chikitsa which is indicated for the management of Sthoulya. Acharya Charaka has mentioned Rooksha Udavartana for Sthoulya. And Acharya Vaghbhata has mentioned the benefits of Rooksha Udavartana as it is Kaphahara, Medasa Parivilayana, Sthirikarnam Angam etc.

#### • Samshodhana

Shodhana is the therapy in which the Dosha which are vitiated are eliminated after mobilizing them from their respective sites by Adha Marga or Urdhva Marga from the body.

Samshodhana therapy is highly recommended for Sthoulya management by Charaka being a syndromic i.e. Bahudosha Lakshanas. Atisthoulya patients with Adhika Dosha and Bala should be treated by Samshodhana therapy according to Vagbhata.

Description of various *Poorva Karma* and *Pradhana Karma* of *Shodhana* for *Sthoulya* given by various *Acharya* is as follows:

#### Snehana

For the patients of *Sthoulya*, *Snehana Karma* is always restricted. However, *Lekhaniya*, *Medohara* properties and *Sthulatvahara Karma* of *Taila* are described in *Ayurveda*. So, usage of *Taila* is recommended.

#### Swedana

For obese patient, Sweda is contraindicated but if essential Mrudu Sweda can be given, as it is advised. Anagneya Sweda mentioned by Charaka can also be adopted, it is given in Sutrasthana.

#### Vamana

Most of the texts have prohibites the use of *Vamana Karma* due to inability to bear the potency of medicine and therapy causing *Pranaparodha* (life threatening condition).

#### Virechana

Though *Virechana* has not been recommended for patients of *Sthoulya* but *Virechaka Dravya* mentioned in *Ayurvedic* texts like *Haritaki*, *Katuki*, *Aragvadha*, *Trivruta*, *Danti Dravanti* etc., which have *Medonashaka* property could be applied to the patients of *Sthoulya*. Practically also *Virechana Karma* seems to be beneficial for the *Sthoulya* management.

#### Basti

Acharya Charaka suggested Ruksha, Ushna & Tikshna Basti for Chikitsa of Sthoulya. In Ayurvedic texts a number of Basti Kalpa are also mentioned but Lekhana Basti is considered as the best therapy for Sthoulya/Medovriddhi.

# • Raktamokshna

Raktamokshana is recommended by Maharshi Kashyapa and Bhavamishra for the treatment of Sthoulya in Chikitsasthana, Medasvi Dhatri Chikitsa. Charaka has also mentioned Raktamokshana for treatment of Santarpana Janya Vyadhi including Atisthoulya.

#### Nasya

The use of Triphaladi Taila Nasya in the patients of Medovriddhi has recommended by Acharya Sushruta.

#### • Samshamana

The therapy, which does not do Shodhana of the Dosha, not disturb the equation of balanced Dosha and simultaneously bring equilibrium of imbalance of Dosha is known as Samshamana

Santarpana Janya Vyadhi, Shleshmika Vikara, Amashayotha Vikara, Rasaja Vikara- Langhana is advisable and it is the best remedy for the Sama state of disease. Charaka Samhita has given treatment of Sthoulya in following words.

i.e., Administration of Guru and Apatarpana articles which possess additional Vata, Shleshma and Medonashaka properties are considered as best for Shamana therapy. Chakrapani has explained that Guru property is essential to alleviate vitiated Agni by suppressing the Atikshudha. Along with Guru Dravya, Apatarpana Dravya provides nonnourishment and thus helps to reduce the Meda. Such as, Madhu possess Guru and Ruksha properties, hence it is ideal for management of Sthoulya.

The drugs planned for Sthoulya should have Deepana & Pachana property to enhance Agni. They should also be Amapachaka as obstruction of Medovaha Srotas by Ama is main factor for Medoroga.

The drugs must have Rookshna & Chedana property to produce Srotovishodhana. Along with these Teekshna, Ushna, Rooksha, Guna Dravya are adviced as they are opposite to Manda, Snigdha & Sheeta Guna of Kapha & Meda.

Again, it is told that the causative factors of Karshya i.e., Ruksha Annapana Prayoga, Langhana, Pramitashana, Shoka, Nidra Vega Vinigraha, Ruksha Udavartana, Krodha etc. can be practiced as line of treatment for Sthoulya.

Some important references about Shamana Chikitsa of Sthoulya are mentioned as follows;

Some Samshamana Yoga like Guduchi, Triphala, Mukshika, Bhadramusta, Takrarishta, Vidangadi Lauha, Bilvadi Panchmula and Shilajatu with Agnimantha Svarasa are advised for prolonged period.

- In Charaka Samhita, drugs and preparations like Karshana Yavagu of Gavedhuka, Lekhaniya Mahakashaya, Bibhitaka, Venuyava and Madhudaka are advocated as Medonashaka and Lekhana.
- Akasha and Vayu Mahabhuta dominant Dravya are attributed to have Laghavakara action, so these can be used for management of Sthoulya.
- Katu and Kashaya Rasa are having Karshana, Upchayahara properties, while Tikta Rasa is having Lekhana and Medo Upshoshana Karm<mark>a.</mark>

# DISCUSSION

"Heavy and non-nourishing diet" (Guru Apatarpana) is the principle treatment for obese according to Charaka Acharya. Due to their heaviness diets like these would minimize the force of the aggravated power of digestion and because of their non-nourishing nature, they would help to reduce fat. Ayurveda emphasizes the holistic care and treatment in any disease. In the management of disease spiritual, psychological and physical, these all three aspects are given importance to. Exceed expenditure of energy and minimal food intake would be the basic rule to reduce obesity. Now a days Ayurvedic management is recognized as the better option for those whom are suffering from the remedy of obesity (Sthoulya). Vata and Kapha reducing diets and drinks and which can reduce fat are adviced. Enema with drugs that are sharp (Tikshna), ununctous (Ruksha) and hot, unction with ununctous (Ruksha) drugs, Intake of Guduchi (Tinosporia cordifolia Miers), Musta (Cyperus rotundus Linn), Haritaki (Terminalia chebula Linn), Bibhitaka (Terminalia belerica Roxb) and Amalaki (Emblica officinalis Gaertn). Administration of Takrarishta. Administration of honey. Vidanga (Embelia ribes Burm F.), Nagara (Zingiber officinale Rose.), Yavaksara (a preparation of barley containing among others sodium and potassium bicarbonate), powder of black iron along with honey and powder of Yava and Amalaki can be taken.

# **CONCLUSION**

You must take precautions rather following treatment after increase in weight, as it is sais 'Prevention is better than cure'. Once you are obese it is very difficult to treat yourself. The person suffering from obesity or prone to the obesity should be encouraged to avoid the foods with high calories, high sugar contents. Follow up of proper Dinacharya, proper Vyayama, Asana and Pranayama such as Paschimottanasana (the back stretching pose) Bhujangasana (the cobra pose), Pawanmuktasana (the wind releasing pose) are helpful in the reduction of body fat. Regular exercises like brisk walking, running and swimming in morning hours for the duration of 30-45 minutes and this duration should be extended day by day as possible. Also it will keep you healthy and away from diseases.

#### REFERENCES

- 1.Amin H. Biochemical and anthropometric profile of different prakriti (constitution), International Journal of clinical and experimental physiology, 2015; 2(1): 16 -22.
- 2.Charak, Charaka Samhita, Sutra Sthana, Ashtouninditiya Adhyaya In: 21/3-4, Tripathi B. vol-I 4th ed 1995, Chowkhamba Surbharti Prakashan, Varanasi: 1995;p.398.
- 3. Harison T. R. Harison's Principle of Internal Medicine Evaluation and Management of Obesity, In: 416 Vol- II ed 19th:p.2392
- 4.Gaurav Kumar, Sharma Meenakshi, Kaundal Ramesh, Rana Ashwani, Sharma Om Prakash, A Review on Sthoulya (obesity) and its management in Ayurveda, 2014; 2(6): 66.
  - 5.Tortora G. C. Principles of anatomy and physiology, Metabolism and Nutrition, In: 25 ed11, p.986.
- 6. World Health Organization, The Global Burden of diseases. Update 2004. Part 2, causes of death. Geneva, Switzerland: WHO; 2008;p.8-10
- 7. Charaka, Prof. Priyavat Sharma (ed), Charak Samhita, Sutrasthana, Ashtouninditiya Adhyaya, In; 21/4, Vol-Chowkhamba Sanskrit Series, Varanas: 1976;p.144-145
- 8. Charak, Dr. Ram Karan Sharma, Vd Bhagwan Dash (eds), Charak Samhita, Sutrasthana, Ashtouninditiya adhyaya In: Chowkhamba Sanskrit Series, Varanasi: 21/21-28, Vol-I: P. 378-380.
- 9.Charak, Dr. Ram Karan Sharma, Charak Samhita, Vimanasthana, Srotovimana Adhyaya, In: 5/16, Vol-II, Ist ed, Chowkhamba Sanskrit Series Office Varanasi: 1977;p.175.
- 10.Charak, Priyavat Sharma (ed), Charak Samhita, Sutrasthana, Shadvirechanashratashritiya Adhyaya In: 4/9, Chowkhamba Prakashan, Varanasi:p 25





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