



The Effect Of Chandrayana Vrata - A Type Of Austerity In A Proto Type Group

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Abstract : The present study entitled “The Effect of Chandrayana Vrata – A Type of Austerity in a Proto Type Study” was conducted at Tapaswi School of Yoga, Bikarnakatte - Kaikamba, Mangaluru, Karnataka, India. 12 healthy female subjects aged between 25 to 60 years who are willing to follow this dietary regimen along with yogic practices were selected for this study. Body Height, Weight, BMI, Individual Skin Fold Measurements, Girth Measurements, Total Serum Cholesterol, HDL Cholesterol, LDL Cholesterol, Triglyceride and Blood Pressure were taken before and after the study. The duration of the study was one month. Similarly other health issues were recorded before and after the treatment. Various practices of yoga which involves physical postures, breathing techniques and meditation were given to the subjects. In the present study we have noticed significant decrease in the Body Weight, Total Serum Cholesterol and LDL Cholesterol along with significant increase in HDL Cholesterol. Although in this study the diet regimen could not be strictly supervised, as the subject was not in a controlled set up. Within the limitations this investigation concludes that CV along with selected yogic practices reduced Body Mass Index, increased HDL Cholesterol, decreased Total Serum Cholesterol and LDL Cholesterol level. Study showed significant results. So, the study proves that with yogic practice will work positively.

Key words: Chandrayana Vrata, Yoga, Weight, BMI, HDL Cholesterol, LDL Cholesterol, BMI

Introduction

Maharshi Patanjali tells “*Kayendriyasiddhih Ashuddhikshayat Tapasah*” [II 43], the purification of body along with sensory organs which are the parts of mind can be achieved by adopting proper Tapas – Austerity¹. With this idea Chandrayana Vrata has been introduced to a proto type group of people to see the therapeutic values.

Nature and Scope of Chandrayana Vrata: According to ‘Chaturvarga Chintamani’ of Hemadri In the beginning of the Chandrayana Vrata, various Gods have to be invoked, offerings be made in the sacrifice. The Hutasista [the remaining food after offering in the sacrifice be consumed] is done. The Vrata details that “the food shall be consumed with gradual reduction. On the full moon day it will be 15 times the size of an egg. The next day it shall be 14 times the egg size. Like this it shall be ‘nirahara’ on the new moon day. Further the consumption of the food shall be in the ascending order of an egg size every day”.

*“Kukkutandopaman grasan purnamasyanca bhaksayet
Krutva pancadasiya grasayettu dine dine”*

The fruit of Chandrayana Vrata (CV) is described at length. Having followed this Vrata for a year one shall get wealth, health, prosperity and pleasure in this world and one later enjoys heaven².

CV is also mentioned in the book ‘Madana Maharnava Karma Vipaka Grantha’ to purify oneself. There are a few codes of conduct for undertaking this Vrata. Telling truth, keeping off the company of the bad, to be in *dhyana* all the time addition to the daily routine. One should take bath thrice and offer *Jala tarpana* after cleaning oneself through *Mantra* (marjana). In the beginning of this Vrata it is advised to perform a sacrifice.

The Vrata dictates the food system as follows: 15 units (grasa) of food on the full moon day, gradually decreasing the units to zero thus fasting on the 15th day. From the next day onwards, the units ascend gradually and the 15 units of food is to be taken on the full moon day.

Performing this Vrata will purify the person from all his sins. Doing it second time releases the sin of the past ten births^{6,7}. The sacrifice for various Gods during this Vrata is equally important. Chandra is the preceding diety of this vrata and so it is called Chandrayana Vrata. In Madana Maharnava Karma Vipaka Grantha grasa is a unit of food equal to the volume of an egg of the peacock³.

The role of mind in the creation of health and ill health has been well emphasized in ancient Indian texts wherein they state: diseases arise in the body due to the problem of mind like raga (excessive desire). The great influence of the mind over the body, its health and functioning were well understood by our ancients. Hence throughout our glorious history control of the mind was given prime importance to achieving health of the body and happiness of the mind¹.

The phases of moon are said to influence emotions of a person. In Chandrayana Vrata, the diet varies according to the phases of the moon, thus it is comparatively easier to control the crave for food and this induces proper eating habits. It is important to maintain proper eating habit, because faulty eating habits are the root cause of ill health⁵. The real aim of any fasting procedure adopted is not only to reduce weight and regulate other body parameters, but it should also be able to maintain the reduction and regulation thereafter. This is where the Chandrayana Vrata fits perfectly well⁴.

Materials and Methods

The present study was conducted to assess the effect of selected yogic practices with Chandrayana Vrata on the body parameters, where 12 healthy female subjects of varying ages (25-60 years) were advised to adopt the diet regimen prescribed under Chandrayana Vrata along with regular yogic practices for a period of one month. Height, Body Height, Weight, Individual Skin Fold Thickness, Girth Measurements, Total Serum Cholesterol, HDL Cholesterol, LDL Cholesterol, Triglycerides and Blood Pressure was measured before and after one month of Chandrayana Vrata and yogic practices.

The method adopted to determine the body parameters was as follows:

- Body Weight in kilograms was measured without shoes by a weighing machine.
- Individual Height was determined in feet and inches by a wall scale.
- Skin Fold Thickness was measured in centimeter by using a skin fold caliper. The measurements were done on sites of arm, chest, abdomen, hip and thigh region.
- Girth Measurements were measured in centimeter using a measuring tape. Measurements were taken at the arm, chest, abdomen, hip and thigh.
- Blood Pressure was measured using a mercury sphygmomanometer in lying down position.
- Lipid Profile test was done in a renowned laboratory at Mangaluru.

The case sheets along with their physical characteristics and measurements taken in the beginning and at the end.

Mode of admitting the subjects

Initially an announcement regarding the conduction of this particular study was made among people gathered for a spiritual discourse connected to yoga. People especially women willing to undergo yogic practices and CV were asked to voluntarily come forward. Among them subjects who fulfilled the required criterias for this study and those willing to undergo the diet regimen were selected.

Diagnostic methods adopted after the selection

A detailed case history was taken 3 days prior to the commencement of the research work. Each subject was asked to give a detailed report of daily routine work and nature of food they usually consume. The subjects were asked to undergo blood tests to determine hemoglobin (HB), WBC total count (TC), differential count (DC), and erythrocyte sedimentation rate (ESR) to know their health status and to rule out any form of pre-existing infection if any. Lipid profile test was also done to determine the level of Serum cholesterol, HDL cholesterol, LDL cholesterol and Triglycerides.

Diet Plan

Considering the sedentary life style of the subjects a diet providing 1900 calories approximately was taken as a standard. Care was taken to include all the necessary ingredients required by the body in adequate to maintain health. The diet was planned considering the tastes and eating habits of the subjects.

The diet consisted of strictly vegetarian food stuff naturally low in calories, very low in fat and high in nutrition and fiber. These are high volume foods that fill the stomach and give one the feeling of satiety. Protein depletion was avoided by including green gram juice regularly.

The intake of food was reduced by approximately 126 calories each day for the next 15 days. On the 15th day, all subjects observed complete fast. Some of them who felt weakness were allowed to drink tender coconut water, very minimum yogic practices were done on that day. The diet was then increased by 126 calories each day to reach the normal diet of 1900 calories a day.

The daily diet regimen was given to the subjects one day earlier. The daily yogic schedule was practiced everyday for duration of 90 minutes and this consisted of

- A brief introduction on the system of yoga, benefits of healthy food habits and life style, risk factors associated with weight gain, preliminary preparations for yoga practices was given for the first 15 minutes.
- The *Asanas* were practiced for the next 30 min. in the following order. Swastikasana, Vajrasana, Supta Vajrasana, Tadasana I, Tadasana II, Trikonasana, Parshvakonasana, Veerabhadrasana, Paschimottanasana, Purvottanasana, Pavanamuktasana, Bhujangasana, Shalabhasana, Vakrasana, Uttanapadasana, Shavasana 1 and 2.
- Initially two Asanas were taught and one new Asana taught every next day. The sthiti in each Asana was maintained for 5 breathings.
- The practice of Pranayama followed for the next 20 minutes. Ujjayi Pranayama and Anuloma Viloma Pranayama were practiced for 10 minutes each.
- Meditation was then practiced for 10 minutes.
- Shavasana 1 and 2 were practiced for the last 15 minutes.

Observations

In the initial days subjects found it difficult to resist the crave for food especially junk food. Few of them were non-vegetarians and as they had to undergo strict vegetarian diet, they felt a bit tempted in the beginning. Almost all the subjects felt their level of mental stress had decreased and the quality of sleep had improved. As days advanced when the diet was minimum some of them felt mild weakness which was defeated by advising them to take tender coconut. One of them had the complaint of hard stool and after taking plenty of leafy vegetables and warm water at night it was alright. All subjects felt they could not over eat even unknowingly as lesser amount of food itself produced satisfaction.

Results

Table -1

The following table shows the initial and final data obtained.

Sl. No.	Reading	Weight (in kg.)	B.P. (in mm Hg)	Skin fold Measurement (in cm)				
				Navel	Hip	Thigh	Chest	Arm
1.	Before	61	130/70	3.0	2.54	3.45	2.0	1.45
	After	57.5	116/74	2.9	2.54	3.1	1.53	2.1
2.	Before	58	150/90	3.11	2.05	4.05	2.22	2.09
	After	56	130/90	3.04	2.07	3.25	2.02	2.23
3.	Before	68	120/80	2.46	1.45	3.45	1.52	2.23
	After	63.5	114/72	3.0	1.47	2.51	1.5	2.04
4.	Before	67.5	130/80	2.27	2.47	3.49	2.4	3.0
	After	62	120/80	2.49	1.52	3.25	2.13	2.0
5.	Before	61	130/90	2.22	3.03	4.0	1.47	2.22
	After	58.5	122/84	3.04	1.49	2.3	1.53	2.3
6.	Before	59	150/80	2.3	2.02	2.46	1.45	2.53
	After	56	140/90	2.02	2.05	3.35	1.46	2.25
7.	Before	61	110/70	2.2	3.3	4.05	1.47	2.32
	After	56	110/70	2.48	2.48	3.44	1.51	2.03
8.	Before	60.5	140/90	2.48	2.44	3.3	2.06	1.4
	After	58	150/80	2.3	2.1	3.29	2.00	3.1
9.	Before	65	130/89	2.48	2.44	3.3	2.06	1.4
	After	63	110/80	2.28	1.21	2.46	1.5	1.47
10.	Before	61	110/80	2.48	2.05	3.29	1.45	2.4
	After	58	120/80	2.21	2.31	3.26	1.5	2.03
11.	Before	68	130/80	2.3	1.3	3.3	2.1	3.03
	After	67.5	140/100	2.2	1.2	3.3	2.0	3.03
12.	Before	61	120/70	2.27	2.08	2.55	1.46	2.0
	After	59	120/80	2.22	2.05	2.54	2.04	2.45

Table -2

The following table shows the initial and final data obtained.

Sl. No.	Reading	Weight (in kg.)	B.P. (in mm Hg)	Girth Measurement (in cm)				
				Navel	Hip	Thigh	Chest	Arm
1.	Before	61	130/70	98	104	57	90	28
	After	57.5	116/74	93	100.5	50.5	87	27
2.	Before	58	150/90	108	121	70	94	28
	After	56	130/90	100	111	63.5	94	27.5
3.	Before	68	120/80	102	102	59	94	29.5
	After	63.5	114/72	96	100	53	90.5	31.5
4.	Before	67.5	130/80	114	113	55	98	32
	After	62	120/80	99	110	49	93	30
5.	Before	61	130/90	106.5	108	61.5	89	28.5
	After	58.5	122/84	99	102.5	55	86	28
6.	Before	59	150/80	113	113.5	58.5	98	34.5
	After	56	140/90	110	110.5	51.5	86	28
7.	Before	61	110/70	107	106	52.5	92	29
	After	56	110/70	97.5	99	48.5	87	26.5
8.	Before	60.5	140/90	97	105	51	98	26
	After	58	150/80	97	98	45	95	28
9.	Before	65	130/89	87	101	54	93	29
	After	63	110/80	86	97	47	88	27

10.	Before After	61 58	110/80 120/80	99 99.5	100.5 101.5	58.5 48	94 91	30 29.5
11.	Before After	68 67.5	130/80 140/100	93.5 94.5	105.5 106	50.5 50	92 92	31 31.5
12.	Before After	61 59	120/70 120/80	103.5 98.5	114 99	61.5 47	94.5 99	32.5 28

Table - 3

The below table shows the initial and final data of lab investigations obtained

Sl.No.	Lipid profile Before (mg.dl)				Lipid profile After (mg.dl)			
	Serum Cholesterol	HDL Cholesterol	LDL Cholesterol	Triglycerides	Serum Cholesterol	HDL Cholesterol	LDL Cholesterol	Triglycerides
1.	208	46	124.20	189	176	42	97.20	184
2.	220	43	145.40	158	224	48	147.80	141
3.	195	42	116.20	184	178	44	103.60	152
4.	169	39	107.00	115	171	40	106.00	125
5.	201	43	138.40	98	156	40	90.60	127
6.	171	42	97.20	159	175	41	89.00	225
7.	197	41	128.60	137	179	45	107.40	133
8.	198	41	84.80	361	178	44	81.20	264
9.	184	40	116.60	162	178	39	120.60	92
10.	192	41	112.20	199	185	42	110.20	164
11.	192	44	132.80	76	178	42	112.80	116
12.	181	42	121.40	88	174	43	103.40	138

- Therefore, as far as body weight is concerned all the subjects showed a decrease. However, the reduction is not uniform.
- The Skin Fold Thickness measurements and Girth Measurements were found to decrease in few sites and increase in few sites in some subjects, where as in others there was a uniform reduction. This indicates that the proper proportionate shape of the body was maintained.
- The Triglyceride level has decreased in 7 subjects and increased in 5 subjects.
- The Total Serum Cholesterol level has reduced in all the 6 subjects however the reduction is not uniform. With a slight increase in 3 of them.
- The LDL Cholesterol level has also been reduced in 10 of the 12 subjects which are not uniform. One subject in particular shown an increase in the LDL Cholesterol level.
- The HDL Cholesterol increased in 7 of the 12 subjects. Whereas 5 subjects shown mild decrease in HDL Cholesterol level.
- The Blood Pressure was comparatively stable.

Discussion

There have been many ways of reducing weight and invariably regulating other body parameters most of which based on caloric restriction. It has been shown that with low caloric diet, initial loss of body weight, occurs due to fluid loss. Later on as caloric restriction continues reduction in body weight occur from the fat and lean body mass. However, reduction in lean body mass produces undesirable effects on heart muscle (Frederick et al., 1965). So, in the management of weight reduction only caloric restriction in diet may not be a scientifically advised procedure. Running and jogging are examples of physical activities that reduce body fat mass by increasing caloric expenditure. However vigorous exercise is not advised beyond the age of 40 yrs as it increases cardiac rate and output, which it might precipitate ischemic heart disease (Ref: Yoga mimamsa vol-xxxiv, No.2)⁸. Thus, one needs to adopt a diet regimen along with those practices where fat mass will decrease, lean body mass will increase and heart rate will remain normal. This is possible by yogic practices alone. In the present study we have noticed significant decrease in the Body Weight, Total Serum Cholesterol and LDL Cholesterol along with significant increase in HDL Cholesterol.

Conclusion

The present study indicates that selected yogic practices with along with when administered in a controlled set up under strict vigilance can yield better results. Therefore, Chandrayana Vrata along with selected yogic practices can be effectively used in patients suffering from diabetes mellitus, hypertension, atherosclerosis and obesity.

Bibliography

1. Swami Vivekananda, Raja Yoga, Ramakrishna Ashrama, Kolkata; 19th Edition, 2011, Page 46.
2. Chaturvarga Chintamani of Hemadri, volume 2, part II, Chaukamba Publications, Sanskrit Sanstana, Varanasi.
3. Madana Maharnava Karma Vipaka Granta by Sri Vishweshwara Bhatta, Published by Maharaja Sayajirao University of Baroda, 1953, Page 468.
4. Rangappa, Dr. K. Krishna Sharma “A Study On The Impact Of Yogic On Improving Pulmonary Function and Quality of Life” International Journal of Yoga and Allied Sciences, ISSN: 2278 – 5159, Volume 9, Issue 1, Jan-June 2020.
5. Dr. K Krishna Sharma, Mr. Rangappa. “Effect of Yoga Therapy to Control Body Weight and Body Mass Index of the obese women”, International Journal of Research and Analytical Reviews (IJRAR). Volume. 5, Issue 4, December 2018.
6. Yug Nirman Yojana by Shri Ram Sharma Acharya, Yug Nirman Yojana Vistar Trust Publication, Gayatri Tapobhoomi, Mathura.

7. Chandrayana Kalpa Sadhana by Shri Ram Sharma Acharya, Akhand Jyoti Sansthan Publication, Mathura.
8. <https://kdham.com/yog-mimamsa/>

