

CONCEPTUAL STUDY OF STHAULYA THROUGH AYURVEDIC TEXTS W.S.R. TO CHARAK SAMHITA

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ABSTRACT –

Obesity is the most common metabolic disease of the recent times. As a matter of fact, it is not a single disease entity but a syndrome with many causes including combination of genetic, nutritional, and environmental factors. The World Health Organization (WHO) considers obesity as “insidious, creeping pandemic which is now engulfing the entire world. Obesity is now becoming a serious matter of concern day by day. Authorities view it as one of the most serious public health problems in 21st century. Obesity is stigmatized in much of the modern world (particularly in the Western world), though it was a symbol of wealth and fertility at other times in history and still is in some parts of the world. All classical texts of Ayurveda have explained very well about *sthaulya* (obesity). Keeping these facts in view, this paper is going to be an effort to comprehend etiology (*hetu*), pathogenesis (*samprapti*) and treatment (*chikitsa Siddhant*) of *sthaulya* through purely ayurvedic perspective.

Key words – *Sthaulya, Santarpanjanya, Ayurvedic, Charaka Samhita, Medo dhatu*

INTRODUCTION –

In recent decades, lifestyle has played a major role in affecting health due to various reasons. It has shown a chief role in giving rise to many diseases. One of them being obesity i.e., *sthaulya*. Moreover, *sthaulya* comes along with many other ailments. Ayurveda has described *sthaulya* as an independent disorder or complication. Ayurveda expects to consider *sthaulya* to be studied under the heads like etiology, pathogenesis, and treatment step by step.

Aims and objectives: -

- to re- evaluate, discuss, and elaborate the concept of *sthaulya* and its etiology, pathogenesis, and treatment through ayurvedic perspective w.s.r.to *Charak Samhita*.

Materials and methods: -

It is based on a review of ayurvedic texts. Materials related to *sthaulya* and *medorog* have been collected. the main texts used are *Charaka Samhita*, *Sushruta Samhita*, *Ashtang hridaya* and *Ashtang Sangraha* with available commentaries on them.

The concept is categorized under: -

- A) Etymology
- B) Definition of *Sthaulya*
- C) *Nidana*
- D) *Samprapti*
- E) Management of *Sthaulya*

A) ETYMOLOGY: -^[1]

- The word *Sthaulya* is delivered from root "Sthu" with suffix "Ach", which stands probably for thick or solid or strong or big or bulky.
- The term *Sthaulya* is derived from *the Atmanepadi Sthoolayate Dhatu* having meaning to grow, to increase.

B) DEFINITION OF STHAULYA: -^[2]

It is stated under *medo vrudhi* and *medo dosh* according to *Sushrut Samhita* and *Ashtang hruday* but in *Charaka Samhita* it is described under *Santarpan janya vyadhi* and *Kaphaj nanatmaj vikara*.

मेदोमांसातिवृद्धत्वात् चलस्फिग्दस्तनः ।

अथोपचयोत्साहो नरो अतिस्थूल उच्यते ॥ च.सु.२१/९

Aacharya charaka has mentioned that a person in whom there is excessive and abnormal increase of *medo* dhatu and *mansa dhatu* is found which results into pendulous appearance of buttocks, belly and breasts is not matched by the corresponding increase in energy is called as *atisthula purusha*.

C) **Hetu / nidana (etiology):** - [3]

- **Atisampurana** - to eat excessive amount of unhealthy food.
- **Adhyashana** – either to eat excess amount of *madhura*, *guru*, *snigdha*, *sthira* i.e., fatty food despite having partial or incomplete digestion of the previous meal or even after having hunger sensation properly if the food is taken in surplus quantity that leads to the formation of *aam rasa*.

अध्यशन्शीलस्येति अजीर्णभोजनाभ्यासिनः इत्यर्थः।

दीप्ताग्निन्त्वे अपि अध्यशन्शीलत्वादात्मरसो भवति। (डल्हण टिका सु.सु १७/३२) [4]

- **Avyayam** - lack of exercise
- **Avyavaya** - lack of coitus
- **Diwaswapa** - sleep during daytime
- **Beejadosha** - hereditary obesity when the obesity comes through maternal or paternal genes.
- **Harshanityata** - to remain happy without any tension and without any mental illness.
- **Tail abhyanga**
- **Snigdha udvartana**
- **Madhur snigdha basti**

Role of aaharaja hetu in sthaulya -

Ahararasa plays a major role for increasing *Meda Dhatu* in *Sthaulya*. *Sthaulya* and *Karshya* depend upon the quality and quantity of *Ahararasa*. Based on *Samanya Vishesh Siddhanta*, the excess food consumption of similar substance of similar quality, similar in action helps in the over production of *Dhatu*. In the same manner increased intake of *Aharatmaka Nidana* causes over production of *Medodhatu* which is abnormal and of unwanted qualities.

Role of Viharatmaka Nidana in Sthaulya -

All the *Aharatmaka Nidana* ultimately decrease physical activity, which aggravates *Kapha* and leads of *Meda* deposition. *Viharatmaka Nidana* like *Divaswapna* having *Abhishyandi* property leads to blockage of the micro channels of the body, specifically in *Medovaha Strotas*.

D) Samprapti / (Pathogenesis) ^[5]

Samprapti means the knowledge of the way in which a disease occurs, and it deals with the process of manifestation of the disease by the vitiated *doshas*. In pathogenesis of *Sthaulya*, all the three *Doshas* are vitiated; especially *Kledaka Kapha*, *Pachaka Pitta*, *Samana* and *Vyana Vayu* are the responsible factors for proper digestion and metabolism of food at the level of alimentary tract and body tissue. *Dushti* of these *Tri-Dosha* components results in indigestion metabolic deformity and formation of *Ama* at tissue level as well as alimentary tract.

Can be studied under following heads-

- *Kapha dosh prakop*
- *Medovaha stroto dushti*
- *Vitiation of agni*
- *Meda dhatu agni mandya*

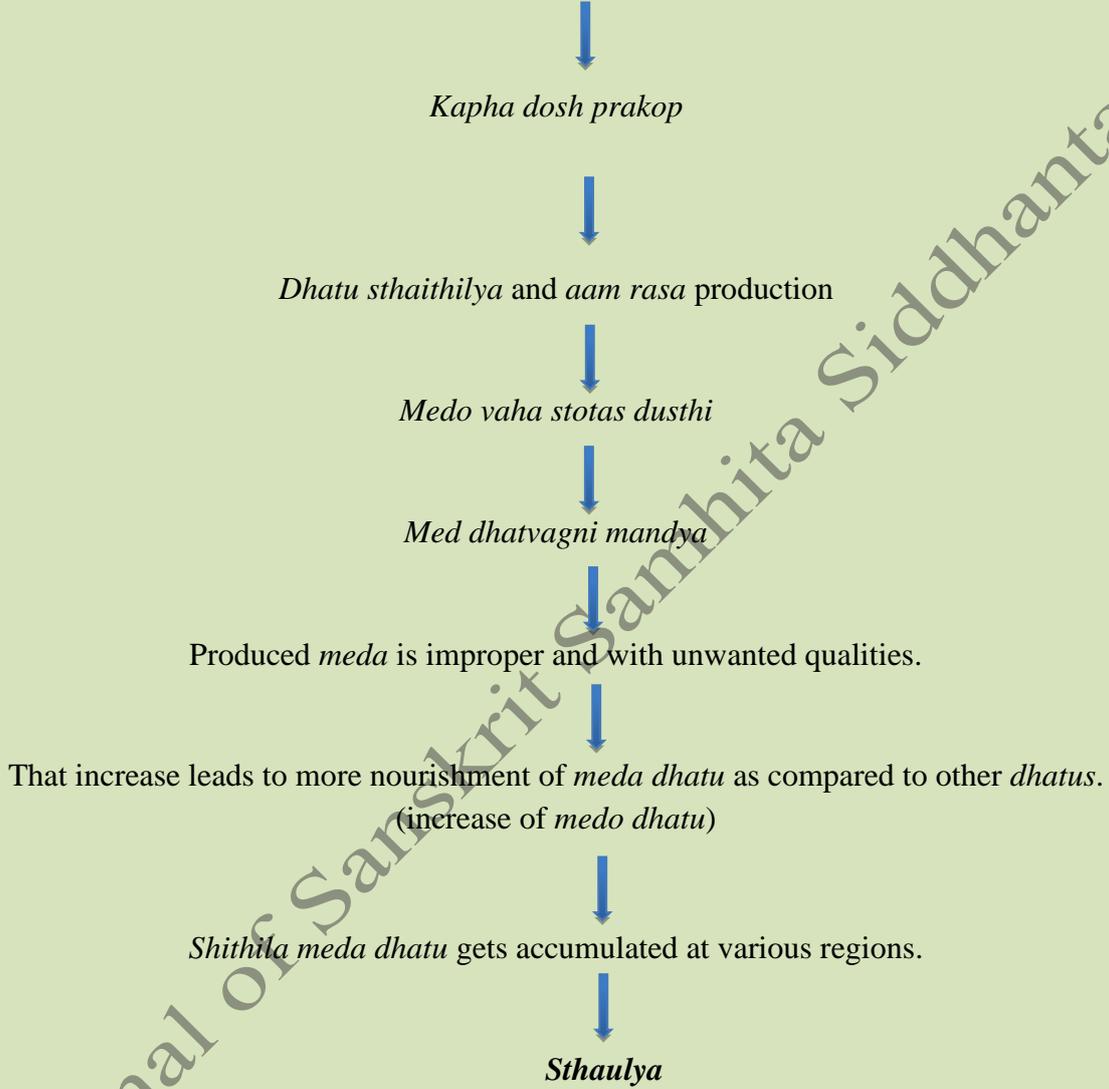
Table 1.1 *Madhuradi aahar sevan (nidan sevana)*

Table 1.2

Medo Dhatu obstructs the channels related to digestive system (*Koshtha*).

This results in obstruction of *Vata Dosha* in the digestive system.

It increases *Agni* (digestive fire) and dries up food in the stomach and intestines.

Food digestion speeds up increasing hunger.

Patient digests food quickly and becomes a voracious eater.

If he does not get food on time, he becomes prone to serious disorders.

The *Agni* (digestive fire) influenced by *Pitta* and *Vata Dosha* get vitiated. They burn the food as the forest fire burns the forest. Hence the body weight increases.

Sthaulya

Factors involved in *Samprapti* of *Sthaulya*: -

- *Doshas*: Vata, Pitta, Kapha
- *Dushyas*: Rasa, Rakta, Mamsa, Meda
- *Strotas*: Rasavaha, Mamsavaha, Medavaha
- *Strotodushti*: Sanga
- *Agni*: Teekshna Jatharaagni
- *Aam*: Dhatwaagni - Maandya-Janya
- *UdbhavaSthana*: Aamashaya
- *VyaktaSthana*: Sarva Shareera
- *Adhishthana*: Mamsa Dhatu, Meda Dhatu
- *Rogamarga*: Bahya Rogamarga
- *Sadhyasadhyatva*: Krucchra Sadhya

Treatment: –

As *sthaulya* is *santarpanjanya* disease it is advised that *guru* and *apatarpanjanya* medicines should be used for the treatment.^[7]

- ***Langhana chikitsa***:^[8]

Langhana is an ayurvedic therapy due to which there occurs lightness in one's body.

Langhana is also called as *karshan* or *apatarpan chikitsa*. According to Ayurveda, *sthaulya* patient priorly supposed to be started with *langhana* therapy, *langhana chikitsa* is the basic *chikitsa* for *sthaulya*.

- **Benifits of *langhana***: -

1. *Indriya prasannata*-improve efficacy of sense organ.
2. *Mala utsarajan*-easy urination and defecation.
3. *Deha laghuta*-lightness of body.
4. *Ruchi and Kshudha*- increase in appetite.
5. *Hrudashuddhi*
6. *Tandranash*
7. *Deha laghuta* is one of the symptoms seen in *langhana* therapy. This indicates decrease in the *meda* (fat) from the body.

The medicines that reduce *kapha*, *vata* and *meda* should be used for the treatment of *sthaulya*. For example, *triaktu*, *nagarmotha*, *guduchi*, *patha*, *vidang* are used for the effective treatment of *sthaulya*. For *anupana*, different *arishtas* are used along with the *medohara churna*.

Guggula: -^[9]

Guggul is *Kashaya*, *katu* and *tikta* in taste with *ushna*, *laghu*, *sara*, *deepana*, *vat kaphaghna* and *sthaulyanashak* properties. So, a wise use of *guggula* in *sthaulya* turns out giving miraculous results in various patients.

Panchakarma therapy: -

Role of *panchakarma* procedures especially *vaman*, *virechana*, *nasya*, *raktamokshan* in *atisthul* patients is utmost. In the patients with enormous amount of *kapha*, these procedures are to be started with *rukshana*.

- *Rusksha pottali swed* (containing *ovadi churna*)
- *Ruksha udvartana* - *Udvartana* is the procedure where powdered medications are rubbed over the body towards the direction of heart. It helps to liquify the *meda* and *kapha* from the body and makes the body stronger. ^[10]
- Bathing by *nimba*, *kutaj*, *khadir* and *panchavalkal pradaha* are used for *rukshana*
- Before starting *panchakarma* therapy when *snehan* is to be done it should be done with the oil processed with *ruksha dravyas* e.g., *lavan tela*
- *Kanchanar kwath* or *nimb twak kwath* can be used for the process of *vamana*.
- *Aaragvadh phal majja* can be used for *virechana* procedure.
- For *basti* procedure oil is not advised to use so, giving *niruha basti* becomes ideal.

After examining the condition of patients, for treating vitiated *agni* and for *shamana* of *kapha dosha*, medicines like *chitrakadi vati*, *agnitundi vati*, *Hingvashtak churna* can be used accordingly.

Also, to reduce excessive *meda* medications like *medohar guggula*, *navayas loha*, *shilajatu kalpa* can be used prudently.

Pathya in sthaulya: - ^[11]

Anna varga, Purana Shali, Rakta shali, Shasthikashali, Yava, Chanaka, Kulatha, Shruta Sheeta Jala, Panchkolashruta Jala, Shunti siddha jala, Madhu, Purana Sidhu, Gomutra, Lasuna, Ardraka, Sunthi, Takra, Shakavarga, Patola, Karavellaka, Varthaka, Nimbapatra, Shigru, Jangala Mamsaa.

Along with these dietary supplements, continuous working, proper exercise and maintaining proper sleep helps in the treatment. Sleeping during daytime as well as exercise done at wrong time and by wrong way can disrupt the ongoing treatment and may show adverse effects.

Apathya in sthaulya: -

Masha, Taila, DushitaJala, SheetaJala, Nutana Madya, Aluka, Dadhi, Ksheera, Guda Anupa Mamsa, Ahara having Guru Snigdha, Ati Drava, Picchila and Abhishyani Guna

DISCUSSION AND CONCLUSION-

From the study of *sthaulya* through various ayurvedic texts brings us to a point that the pathophysiology of *sthaulya* is different from *medavrutta vata* and *medogata vata*.

The food which is made of two *veeryas* (*ushna* and *sheet*), six tastes, and five *mahabutas* is converted into very minute particles by the *jatharagni* which is then further transformed by *bhutagni* and *dhatvagni* into again micro components. Then this converted *aahar rasa* does all the nourishment and development of our body. Now when this *aahara rasa* does not form in its normal amount or properties due to excessive quantity of *madhura, snigdha etc aaharaj* factors, lack of exercise, sleeping during day etc., *viharaj* factors and many other stated reasons, there occurs the abnormality in production of *medo dhatu* which later obstructs the micro channels in which it flows resulting into deposition of abnormal *medo dhatu* at various places in body resulting into *sthaulya*.

With lifestyle changes, proper medications, exercise, and diet *sthaulya* can be treated well.

REFERENCES-

1. Sanskrit English Dictionary written by Sir Monier Williams Published by Motilal Banarasidass Publication New Delhi Reprint 1986 Page no.1266
2. *Charaka Samhita* by Agnivesha, revised by Charaka and Dridhabala with Ayurveda Dipika commentary of Chakrapani-Datta published by chaukhamba surbharati publication, 2017, (sutrasthan 21/9) page 117.
3. *Charaka Samhita* by Agnivesha, revised by Charaka and Dridhabala with Ayurveda Dipika commentary of Chakrapani-Datta.

published by chaukhamba surbharati publication, 2017, (sutrasthan 21/4) page 116.

4. Sushrut Samhita by aacharya Sushrut with Nibandhasangraha vyakhya by Dalhan

Published by chaukhamba surabharati publication 2015, (sutrasthan 15/32) page 73-74.

5. Kayachikitsa written by VaidyaY.G.Joshi published by Pune SahityaVitarana Publication 2010 Chapter 21 Page no 212

6. Charaka Samhita by Agnivesha, revised by Charaka and Dridhabala with AyurvedaDipika commentary of Chakrapani-Datta published by chaukhamba surbharati publication, 2017, (sutrasthan 21/5-8) page 116.

7. Charaka Samhita by Agnivesha, revised by Charaka and Dridhabala

with AyurvedaDipika commentary of Chakrapani-Datta published by chaukhamba surbharati publication, 2017, (sutrasthan 21/20) page 117.

8. Ashtang hridaya by shrimadbhagvata;sutrasthana chapter no.14 shloka no.11 written by Dr.Brahmanand Tripathi and published by chaukhamba prakashan.

9. Dravya guna shastra by Vaidya Go. Aa. Phadke, edited by vd. Na.ha. joshi, published by Shuddha Ayurved Pathyakram Samiti, part 1, Year 1960, page 191.

10. Ashtang Hridaya sutrasthana chapter no. 02 shloka no.15 'Udvertana guna' written by Dr.Brahmanand Tripathi

11. Kayachikitsa written by VaidyaY.G.Joshi published by Pune SahityaVitarana Publication 2010 Chapter 21 Page no. 212.