



STHOULYA AND IT'S PANCHKARMA MANAGEMENT

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ABSTRACT

Charak has described obesity as a disease of fat tissue (Medoroga) leading to Sthoulyam. The prevalence of obesity is higher in urban areas than in rural populations of India, due to a steady erosion of the holistic way of life in the cities as well as sedentary and overeating habits. The spiritual, psychological and physical levels of human health and disease is given due importance in Ayurveda. The current understanding of adipose tissue as an endocrine organ and the concept derived from Ayurveda to get rid of it may form a scientific basis for the management of Obesity.

INTRODUCTION

Obesity is a penalty of the modern era, the world wide latest report on prevalence of Obesity according to W.H.O. states that around 250 million cases of obesity are reported every year.

Many medical research institutions are making efforts to find out a reliable remedy for this burning problem, so many modern medicines are found for the treatment of Obesity. They give damaging side effects. This failure made the people look anxiously towards the Ayurveda for better management.

Lakshan

1. Atikshuda (Excessive Hunger)
2. Ati Trishna (Excessive thirst)
3. Ati Swda (Excessive sweating)
4. Shwaskrichita (Breathlessness on mild exertion)
5. Atinidra (Excessive sleep)
6. Jadata (Sluggishness)
7. Apla-aayu (Short life span)
8. Apla Bala (Decreased body strength)
9. Utsaha Hani (Inertness)
10. Dargandhya (Foul body odour)
11. Gadgadata (Unclear voice)

Classification

1. Charak- Sthula and Atisthula
2. Sushruta- Sthaulya and Medoroga
3. Vagbhata: Sharangdhara- Adhika, Madhya and Hina Medodosh.

Hetu

1. Madhur rasa dravya

2. Ati sampurna ahar
3. Avyayama
4. Avyavaya
5. Diwaswapa
6. Manasika Niadana
7. Bija Swabhava

Purvaroop

Purvaroop of sthoulya is not mentioned in our classics. According to Charak, Wherever Purvaroop of disease are not mentioned, the weak manifestation of Rupa should be considered as Purvaroop of the concerned diseases.

Keeping the views of Acharya Charak in mind, Lakshana of kapha vridhhi like Alasya, Angashaithilya, Madhurasya, Atinidra, Atipipasa etc. may be considered as Purvaroop.

Rupa

Acharya Charak has described 8 specific rupas which are as follows

1. Aayushryasa
2. Javoparodha
3. Krichhavyavayata
4. Daurbalya
5. Daurghandhyam
6. Swedabadha
7. Kshuditmatram
8. Atipipasa

Samprapti ghatak

- ❖ Dosha- Kapha- Kledaka.
- ❖ Pitta- Pachak.

- ❖ Vata- Saman, Vyana.
- ❖ Dushya- Rasa, Meda.
- ❖ Agni- Jatharagni, Dhatvagni.
- ❖ Strotas- Medovaha
- ❖ Stotodushti- Sanga
- ❖ Adhishtan- Sarvang (Particularly Vapavahan and Medodhara Kala.
- ❖ Udbhav Sthan- Aamashay
- ❖ Prasaar- Rasagni.
- ❖ Rogmarga- Bahya
- ❖ Aam- Jatharagni Vaigunya janit, Dhatvagni Mandya janit
- ❖ Vyaktidthan- Sarvang (Specially in Sphik, Udar and Sthan).

Pathya- apathya

Aahar vargapathya apathya

- Shuka Dhanya Puran Shaali, Kodrava, Yava, Priyangu, Laja, Nivar, Koradushak, Jirna. Godhuma, Navadhanya, Navshaali.
- Shami Dhanya Mudga, Kulattha, Chanak, Masoor, Makushtha. Masha, Tila
- Shaak Varga Patola, Patrashaak, Shigru, Vrutank, Vastuka, Vartak, Aadraaka, Mulak, Suras. Kandashaak
- Phal Varga Kapittha, Jambu, Aamlaki, Ela, Bibhitaki, Haritaki, Maricha, Pippali, Errand, Karkataki, Ankol, Narang. Madhura Phala.
- Drava Varga Madhu, Takra, Ushna Jala, Tila Tail, Sarshap Tail, Aasav Arishtak. Milk preparations, Ikshu Varga.
- Mamsa Varga Rohit matsya Anup, Audak, Gramya mamsa

Viharaj

- ❖ Pathya- Shrama, Jagrana, Nitya Bhramana, Ashwadi Rohan, Vyavay.
- ❖ Apathya- Sheeta Jala Sevan, Diwaswap, Avyavaya, Avyayam, Atiaashan, Sukha Shaitya Sevan.

Manas

- ❖ Pathya- Chinta, Shoka, Krodha.
- ❖ Apathya- Nitya Harsha, Achinta, Manasonivrutti, Priya Darshan.

Yogasana

Pashchimotanasan, Saral hasta bhujangasan, Sarvagasan, Halasan, Dhanurasan, Virasan, Trikonasan, Ardha Matsendrasan, Suryanamaskar, Pranayam, Agnisar, Uddiyana Bandh.

Chikitsa siddhant

According to Acharya vagbhata, Karshya vyakti is better than sthoulya vyakti; because there is no such treatment for sthoulya.

Due to bruhan, agni and vayu decreases but this leads to increase in meda, whereas due to langhana, meda decreases but agni and vayu increases rapidly

Samanya chikitsa

- Some Samshamana Yoga like Guduchi, Bhadramusta, Triphala, Takrarishta, Mukshika, Vidangadi Lauha, Bilvadipanchmula 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 Karma.

Langhan

Langhana is an ayurvedic therapy due to which there occurs lightness in ones body. Langhana is also called as karshan or apatarpan chikitsa.

According to ayurveda, stoutly patient priorly has to be started with langhana therapy, langhana chikitsa is the basic chikitsa for sthoulya.

Benefits of langhana

- ❖ Indriya prasannata- improve efficacy of sense organ
- ❖ Mala utsarajan- easy urination and defecation
- ❖ Deha laghuta- lightness of body
- ❖ Ruchi and Kshudha- increase in appetite
- ❖ Hrudashuddhi
- ❖ Tandranash
- ❖ Deha laghuta

This indicates decrease in the meda (fat) from the body.

CONCLUSION

Prevention is better than cure, you must take precautions rather following treatment after increase in weight. 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.

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