

MANAGEMENT OF OBESITY IN AYURVEDA: A REVIEW

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INTRODUCTION

Obesity is an abnormal accumulation of fat usually 20% or more over an individual's ideal body weight. People are generally considered obese when their body mass index (BMI) is 30kg/m, with the range 25-30kg/m² defined as overweight. In Ayurveda, obesity (Medo-roga) is described as a condition in which buttocks; abdomen and breast become flabby due to fat accumulation and move while walking. The incidences of obesity are increasing very rapidly. In 2015, 600 million adults and around 100 million children were obese. Obesity is most commonly caused by a combination of excessive food energy intake and a lack of physical activity. Some genetical factors, medical reasons or psychiatric illness also causes obesity. In Ayurveda, high calorie food, frequent eating, avoidance of physical work and sleeping in day time are described as causative factors of obesity (Medo-roga). Diet and life style play important role in management of obesity. Indulgence in physical work and use of low calorie food are mentioned in the treatment of Medo-roga. Various herbs such as Triphala (combination of Terminalia chebula, Terminalia bellirica and Emblica officinalis in equal parts.), Sunthi (Zingiber officinale), Amalaki (Emblica officinalis), Guduchi (Tinospora cordifolia), Guggulu (Commiphora mukul), Madhu (Honey) and Munga (a type of cereal) etc. should be used by obese person.

KEYWORDS: obesity, BMI, Ayurveda, medoroga.**Nidana of atishoulya**

There are eight causative factors for the manifestation of Atishoulya. They are as follows:-

- ✓ Atisampuranat.
- ✓ Avyayamat.
- ✓ Avyavayat.
- ✓ Diwaswapnat.
- ✓ Harsha Nityatwat.
- ✓ Achintanat.
- ✓ Beeja Swabhavat.

We have to understand the role of these eight causative factors in the manifestation of Atishoulya. These can be explained as follows:

Atisampuranat:- The word Atisampoorana is derived from the word poorana. According to charka samhita, purana is a synonym of tarpana. Hence the word sampoorana can be considered as santarpana. Santarpana is also considered as brimhana. It is one among shadvidha upakrama. In langhana bramhaniya adhyaya of charka samhita, shadvidha upakrama are explained on the basis of twenty shareera guna. Sthula guna is one of the shareera guna and it is present in brimhana dravya.

Similarly the causes for Atishoulya such as guru, sheeta and snigdha are also explained as brimhana dravya guna. According to samanya vishesha siddhanta, similarity in guna will lead to increase. Due to similarity in the gunatah hetu of atishoulya and brimhana dravya guna we can say that brimhana dravya is responsible for Atishoulya. The prefix Ati in ati sampoorana word indicates excessive addition of these shareera guna to the body. Hence it is mentioned that Atibrimhana will lead to Atishoulya.

Guru madhura sheeta snigdha upayogat

Here the three gunas such as guru, sheeta and snigdha are mentioned. These are the gurvadi guna. Along with these guna, madhura rasa is mentioned. Madhura is one of the artha guna. Hence all these four terms come under guna concept.

One can observe an interesting fact in the above causative factor of Atishoulya. Guru, sheeta and snigdha are the gurvadi guna which are directly related to madhura rasa. In Atreya bhaudrakapya adhyaya of charaka samhita, it is mentioned that madhura rasa has three guna eg. Guru, sheeta, and snigdha. In this causative factor there are four terms. Three terms are

sharirika guna and a term is artha guna. If we convert that artha guna in to sharirika guna using hetvarth tantrayukti then we will get meaning as gurutara, sheeta tara and snigdha tara upyogat. The addition of Tara word to guru, sheeta and snigdha word suggests excessive accumulation of these gunas in the body. It produces Atisthoulya.

Out of these three sharirika guna, the snigdha guna is very important in the manifestation of Atisthoulya. As explained earlier shleshma and medas are the two important factors of Atisthoulya. Both these two factors have snigdha guna.

Avyayamat, Avyavayat

Absence of physical activities and sexual act are considered as atisthoulya. In roganika vimana adhyaya of charaka samhita, the management of shleshma prakopa in shleshma prakriti person is mentioned. Proper vyayama and vyavaya are explained as treatment for shleshma prakopa. According to viparyaya tantrayukti if vyayama and vyavaya subside aggravated shleshma, then the absence of vyayama and vyavaya will lead to aggravation of shleshma.

Diva swapnat

Sleeping during day time is a cause for atisthoulya. As mentioned previously, the snigdha guna has a major role in the atisthoulya. Divaswapana will increase snigdha guna in the body.

Harsha nityatwat

A continuous state of happiness will lead to Atisthoulya. According to charaka, harsha is anumana gmaya bhava and it can be inferred by amoda. Harsha of a person can be examined by his amoda i.e. amoda is nothing but involving in joyful activities such as dancing, vocal music and instrumental music etc.

Acintanat

Cinta refers to thinking process. This factor is related to mind absence of thinking or less thinking is a cause for Atisthoulya. Acintana is considered as major cause for brimhana. While explaining the prevention of sthoulya, cintana is mentioned. If a person wants to avoid sthoulya, then cintana should be practiced in a gradual increasing form.

Beeja swabhavat

Here beeja refers to shukra and shonita. Any defect in the shukra or shonita will lead to defect in the progeny. Such disorders are called adibala pravitta vyadhi. Adibala pravritta vyadhi is produced due to presence of vatadi doshas in shonita and shukra. Any defect in the matraja bhava pr pitrajabhava will lead to adibala pravritta vyadhi in the progeny.

Ashta dosha of atisthoulya

Ayusho hrasa [Reduced lifespan]: Ayusho hrasa is produced due to increase of medodhatu and other dhatu are not nourished. In sushruta samhita similar pathology is explained in Atisthoulya and it produces alpa prana.

Javoparodha (Reduced physical activities) : The word meaning of java or vega of speed. Javoparodha is reduction of speed. But no proper meaning can be taken if charaka samhita is referred alone. In sushruta samhita the word sarva kriyasu adamartha is mentioned for the same context.

Kricchra vyavayata (Difficulty in the courtship): This dosha is produced due to marga avarodha by medas and abhutva of shukra. According to sushruta, Alpa vyavaya is produced due to margavarodha by kapha and medas. In both references marga avarodha is common and it is responsible for reduction in the guna and karma of shukra.

Dourbalya (Debility): dourbalya is produced due to imbalance in the dhatus. The word dourbalya is connected to the word bala according to sushruta the bala is nothing but the essence of all dhatu.

Dourgandhya and swedabhada (Bad smell and profuse sweating): The bad odour from the body is produced due to vitiation of medas and it is the nature of medo dhatu. It is also produced due to sweating. In other condition sweda, meda and dourgandhya are interrelated. Medas is the mula of swedavaha srotas and vitiation of medas leads to vitiation of swedavaha srotas. Atisweda is a feature of swedavaha sroto dusti.

Kshut atimatra, pipasa atiyoga (Excessive hunger and thirst): The quantity of the food and drinks of a person will be noticed by others. Once should consume food and drinks considering agni, quantity and time. One should consume hita ahara.

Ayurvedic management line of treatment (Under strict supervision of Registered Ayurvedic Physician)

Shamana (Palliative) treatment

Langhan (Fasting),

- Ama pachan (oral use of digestives to augment the fat metabolism),
- Ruksha Udwartan (Dry medicated powder massage),
- Heavy and non-nourishing diet/items like Honey, salad etc are advised.
- Physical exercises, mental work is also recommended.

Samshodhana Chikitsa (Purificatory procedures)

Panchakarma Vaman (Therapeutic emesis),

- Virechan (Therapeutic purgation),
- Lekhan vasti (Medicated enema) are advised for the management of Sthaulya.

- Single drugs: Guduchi, Vidanga, Musta, Sunthi, Amla, Vaca, Daruharidra, Guggulu, etc
- Compound Formulations: Trikatu, Navak Guggulu, Triphala Guggulu, Vidangadi Churna,
- Takrarishta, Navayasa lauha, Arogya Vardhini Vati etc.

Life Style modifications such as

Mild to Moderate exercise according to individual capacity.

- Regular habit of Brisk morning walk for 30 minutes.
- Avoid sedentary habits.
- Avoid excessive sleep.
- Avoid watching TV while having food.
- Avoid Alcohol and Smoking.

DISCUSSION

Ayurveda describes the aetiopathology of Medo roga (sthoulya or obesity), pathogenesis, risk factors, complications and its management. In addition to the dietary regimen, one of the best medications guggulu has tremendous potential to cut off the extra fat. Many researches and studies have been done in this regard in the past, however, the desired result can't be seen among the patients who take it. It might be because the guggulu they use may not be of pure kind. So, it is required to select the best raw herb prior to use it as a medication.

CONCLUSION

Obesity is not because it runs in the family; it is because the lifestyle and concept responsible for the people turn obese. Sthaulya has been included by Acharya Charak among ashtauninditiya pursha. Obesity has become epidemic today and it is essential to understand the consequences of obesity. In a world where food supplies are intermittent, fat cells, residing within widely distributed adipose tissue depots, are adapted to store excess energy efficiently as triglyceride and, when needed, release stored energy as free fatty acids for use at other sites. This physiologic system, orchestrated through endocrine and neural pathways, permits humans to survive starvation for as long as several months. Recent study reveals that obesity and its related disorders occupying major share in the spectrum of health, disease and management. Fraction A in hypercholesterolemia. It is one of the disorders of non-communicable disease, which has laid down foundation stone of diabetes mellitus, metabolic syndrome, hypertension and others. The etio-pathogenesis, management and consequences of obesity are not very clear and it is still evolving in biomedical sciences. As a disease entity it is a multi-factorial metabolic disorders, very near to Medoroga/Sthaulya of Ayurveda. 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 the sedentary and overeating habit. 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 coupled with the core principles

drawn from Ayurveda may form a scientific basis for the management of obesity.

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