

A Critical Analysis of Obesity WSR to Sthoulya

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Abstract

Sthoulya is a burning problem in the world scenario and has acquired the status of an epidemic by WHO . WHO global estimated as about 13% of the world's adult populations (650 million adults and 41 million children) were obese. Obesity is a complex , multi factorial disease which invites several pathological complications like hypertension, type -2 diabetes mellitus, atherosclerosis, Infertility, Hepatic Stealosis/ Fatty Liver, Endocrine Abnormalities, Obstetric Complications, Osteoarthritis of weight bearing joints , certain type of Cancers(*Arbuda*) , and possibly immunological impairment as well as it hampers the cosmetic value of the affected person. Obesity i.e *Sthoulya roga of Ayurveda* comes under the heading of *Medoroga* which results due to dysfunction of *Medo Dhatvagni*(factor responsible for nourishment / metabolism of *Medo dhatu*) and is considered as metabolic disorder. It is well described in *Charak Samhita by Acharya Charak* in chapter 8 . in *Ayurveda*. *Atisthoulya* (obesity) is described as accumulation of *Meda*(fat/ adipose tissue) and *Mamsa* (flesh/ muscle tissue) leading to flabbiness of hips, abdomen, and breast. It is considered as *Santarpanotha Vikaras*(disease due to consumption of excessive calories) in *Ayurveda*.

Keywords: *Ayurveda* , *Medo dhatu* , Obesity , *Sthoulya* , Fat

Introduction

The important concept of *Ayurveda* is keeping of good health. WHO defines good health as not merely disease – free state , but as a state of complete physical , mental , and social well – being. *Acharya charak and Acharya Sushruta* defined it as the only way to achieve the ultimate goal among *Chaturvidha Purushartha*. *Sushruta* further said that *Sharira Madhyama Sharira* (average body) is best but *Ati Sthula and Ati Krishna Sharira* always may have some complaint. *Sthoulya vyadhi* is explained in *Santarpanajanya Vyadhi in Ayurveda and Atisthoula Purusha* has been considered as one of the *Asthanindita Purusha*. Good health, according to *Ayurveda* is achieved by the equilibrium of *Shareer Dosha, Dhatu and Mala* . *Meda* or fat is one of these *Dhatu*s, which serves many purposes, important of which is to create and maintain body-heat, which keeps us alive. In the present era of modernization , the use of latest technology by human in every lifestyle has brought about drastic changes in dietary habits, modes of lifestyles and various regimens of life. Most of the individuals are habituated to luxurious and comfortable lifestyle lead to various chronic and non- communicable diseases. Hypertension, Diabetes Mellitus, Ischaemic Heart Disease , Varicose Veins, Atherosclerosis , Cancer, Pcos , etc are recognized as major non- communicable diseases for which *Sthoulya* (Obesity) is traced to be a major risk factor. *Sthoulya* is the commonest nutritional disorder in affluent societies and most prevalent in developing countries. *Sthoulya* may be compared with obesity. Enlargement of fat cell in its size or an increase in number or both leads to abnormal growth of adipose tissue which is known as obesity .¹ In such condition body fat is extensively accumulated under the skin and around certain organs such as belly, buttocks , breast , thighs and individual becomes significantly overweight ². It has been categorized as *Atisthoulya* (obesity). *Sthoulya* is thus abnormal and excess accumulation of *Medodhatu*. *Sthoulya* (obesity) is a major risk factors for number of chronic disorders such as Coronary heart disease, High blood pressure , Stroke , Diabetes, Cancers, Osterarthritis etc³. The common way to find out whether you are *Sthoulya or Atisthoulya* is to calculate your body mass index (BMI). BMI is an estimate of body fat and can indicate risk for disease . BMI is a simple index and calculated by dividing persons weight in kilograms by his height in meter squares . The World Health Organization (WHO) defines

A normal weight as a BMI range : 18.5 to 24.9

Sthoulya (Overweight) as a BMI range : 25.0 to 29.9

Atisthoulya (Obese) as a BMI range : 30 to 39.9

Athsthoulya (Extreme Obesity) as a BMI : 40.0 and above.

The Hetus (causes) of *Sthoulya roga* have been clearly explained in *Ayurveda* ⁵. A lack of energy balance most often causes *Sthoulya* (obesity).

Detailed Concept Of Obesity :

The concept of obesity has been known since ancient world; the current standard definition of obesity was endorsed only about a decade ago. Overweight was defined that exceeded the threshold from the reference value wherever reference value was derived from the distribution of population based upon association of body weight with mortality ⁶.

Definition Of Obesity According To World Health Organization:

Overweight and Obesity are defined as abnormal or excessive fat accumulation that presents a risk to health. A crude population measure of Obesity is the body mass index(BMI), a persons weight (in kilograms) divided by the square of his/ her height(in meters). A person with a bmi 30 or more is generally considered as obese. A person with a BMI equal or more that 25 is considered as overweight ⁷.

Aim and Objective

1. To evaluate the critical analysis of obesity with special reference to *Sthoulya* .

Methodology

Different textbooks, *Ayurvedic* and modern, authoritative pages, reputed journals, literature, manuscripts, *Sanskrit Shabdakosha* , etc were reviewed for this study.

Review Of Literature

The concept of *Sthoulya* could be seen in *Samhitas*, Commentaries and *Nighantus*. Various references are as follows:

Charak Samhita (2BC)

The concept of *Sthoulya* had been mentioned under *Kaphajananatmaja Vikara* ⁸, *Santarpanotha Vikara*⁹, *Bahu Dosha Lakshana* ¹⁰, *Contra – indication of sweda and under eight nindita purushas*.

Sushruta samhita (2AD)

Sthoulya had been described as a consequence of *rasa nimitha vikara*, wherein he details the *nidana, poorvaroopta samprapti, roopa and treatment principle of Sthoulya*.¹¹

Ashtang Sangraha (6AD):

It is a *Vikara of Kapha Dosha* that undergoes *dushya samoorchana with medas*.

Ashtang Hridaya (6AD)

Sthoulya is mentioned in *Sutra Sthana* wherein *karshya* is considered to be better than *Sthoulya* because *Sthoulya* is considered as *krich sadhya vyadhi* and is difficult to cure ¹². *Sthavima* is mentioned as a synonym to *Sthoulya* in the same context.

Kashyapa Samhita(7AD)

Medovridhi is indicated in the context of venesection. It is also been considered under eight nindita purusha .¹³

Bhela Samhita (7AD)

It is mentioned under *medo vikara* ¹⁴.

Madhava Nidana (7AD)

The *samprapti* , *lakshana* of *Sthoulya* is explained in detail.¹⁵

Sharangadhara samhita (13th century)

He had described *medodosha* as one in number under *roga ganana adhyaya*. He also points out the role of *vrikka* in the nourishment of *jatharasthi medas*.¹⁶

Commentator chakrapani (11th Century)

Sthoulya is considered as incurable and if again a *sthoula* person is given nourishment it leads to *atisthoula* stage. Acharya Chakrapani had commented that *guru and apatarpana* type of food when administered helps to alleviate *vridha agni* and reduces *meda dosha* respectively.

Commentator Dalhana (12th Century)

Under the *samprapti* of *Sthoulya* ; he gives an enumeration on how *medo vardhana* occurs and leads to the stage of *atisthoula* ¹⁷.

Commentator Arunadutta (13th Century)

Sthavima is mentioned as a synonym of Sthoulya. He gives the reason for the contraindications of swedana in sthoulyaas vilayana roopa vridhi.

Bhavprakasha (16th Century)

In the chapter of Sthoulya ; the Nidana , Poorvaroopa, Roopa and Updrava of Sthoulya mentioned

Yogaratanakara (17th Century)

In medo roga nidana chikitsa prakarana of uttharaartha, various herbal and mineral preparations have been described.

NIDAN (HETU) OF STHOULYA

Aetioloical factors as per *Charak Samhita*

Ati sampooranat – Food consumption in excess quantity

Ati guru upayogat – Excessive intake of food which is heavy to digest

Ati madhur upayogat- Excessive intake of sweet food

Ati sheet upayogat - Intake of cold or sheet virya food

Ati snigdha upayogat - Intake of excess unctuous food

Avyayamat- Lack of exercise

Avyavayat- Lack of sexual activity

Divaswapnat- Sleep during day time

Harsha-nityayvat- Always being happy

Achintanat- Free from tensions and worries

Beejaswabhavat- Hereditary.

Poorvarupa Of Sthoulya

None of the *Ayurvedic* texts has described the *poorvarupas* of *Sthoulya* . *Acharya Charaka* , in *Nidana Sthana*, has mentioned similar pathogenesis of *Prameha* and *Sthoulya* , the reason being that in both there is vitiation of *kapha* and *meda* . Therefore *purvarupa* of *Prameha* and *Medovaha* srotodushti lakshanas can be considered as *Purvarupa* of *Sthoulya*

Lakshana (Symptoms) Of Sthoulya

As per the definition, *Acharya Charaka* has enlisted some cardinal *Lakshana (symptoms)* of *Sthoulya*

Medomamsa Ativriddhi

Chala sphika

Chala udara

Ayatha upachaya

Anutsaha

Beside these cardinal symptoms , *Acharya Charak* in *Sutrasthana* has mentioned eight disabilities or *ashta doshas of atisthoola purushas* :

Ayushorhas – Reduced life span

Javoparodha – Early signs of senility

Kruchravayavayata – Difficulty in sexual intercourse

Daurbalya – Fatigue

Daurgandhya – Foul body odour

Swedabadh- Excessive perspiration

Atiksudha – Increase in hunger

Atitrushna – Increase in thirst

Samprapti ghatakas :

Dosha : *Kapha* , *Kledaka*

Pitta : *Pachaka*

Vata : *Samana* , *Vyana*

Dushya : *Rasa* , *Mamsa* and *Meda Dhatu*.

Agni : *Jathragni* , *Rasa* and *Meda Dhatvagni*

Srotas : Medovaha Srotas, Rasa vaha Srotas, Sweda vaha Srotas , Udaka vaha Srotas

Sroto Dushti: Sanga

Adhisthan: Vapavahana and Meda dhatu kala

Udhhava Sthana- Amashya

Sanchara Sthana- Rasayani

Roga Marga – Bahya

Vyaktsthana – Sarvanga .

Sadhyasadhyata Of Sthoulya :

Ancient scholars keeping in view the success rate of treatment have explained the concept of sadhyasadhyata. Acharya Charaka has mentioned bad prognosis for sahaaja (hereditary) disease. Hence sahaaja sthoulya can be considered as asadhya .

Chikitsa (treatment)

According to Acharya Charak , all the actions that lead to the restoration of the equilibrium of doshas (vitiated), constitute to the chikitsa of a disease . The chikitsa aims not only at the radical removal of the causative factor of the disease , but also at the restoration of the dosha equilibrium.

(a) Bahir Parimarjana Chikitsa

There is description of external purification therapy in the management of Sthoulya . Acharya Charaka has mentioned “ rooksha udavartana” for Sthoulya. Vagbhata has mentioned the benefits of rooksha udavartana like kaphahara , medasa parivilayana, sthirikanam angam etc.

(b) Abhyantar Samsodhana

Vagbhata has advocated the use of samsodhana therapy including Vamana , Virechana , Rooksha niruha and raktamokshana etc in atisthoola persons . Charaka has considered Sthoulya as a santarpanya vyadhi and has recommended the use of vamana , virechana and rakta mokshana in all santarpanjanyavyadhis includind sthoulya. He has also mentioned rooksha , teekshana , ushna basti for the management of Sthoulya. Acharya Charaka has contraindicated snehapana in sthoola purusha but at the same time he has mentioned that if vamana , virechana . Samsodhana therapy is needed to be given to the patient then he should be given katu , tikta , kashya rasa pradhan dravyas and then snehpana can be done followed by samsodhana therapy. Vagbhata has also advocated the use of a taila in Sthoulya due to its sookshmagamitva property because of which it reduces margaavrodha.

Similarly Niragni Sweda in the form of vyayama (exercise), atapa sevan and upnaha can be recommended in Sthoulya.

Conclusion

The main aim of Ayurveda is to maintain the health of a healthy individual and to treat the diseased conditions. So, for maintaining health one should follow proper daily and seasonal regimen which is proposed by our Acharyas. Prevention of Sthoulya with healthy life style has to be focussed. In cases where Sthoulya is due to Beeja Dushti, interventional so may not help much. Sodhana as per ritucharya, kriyas adviced in Dinacharya.

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