A Review Article on Various Ayurvedic Approaches in the Management of Sthaulya (Obesity)

By Dr. O.P. Vyas, Dr. Nikita Mishra, Dr. Nimina Nanu Manikkoth & Dr. Muraree Girare

Abstract- A person having heaviness and bulkiness of the body due to extensive growth especially in Udaradi region is termed as "Sthula" and the state (Bhava) of Sthula is called "Sthaulya". Sthaulya or Medorog (obesity) is commonest metabolic disorders in affluent societies caused by irregular diet and sleep patterns, lack of physical activities, stress etc, and it is a direct result of modernization combined with lifestyle changes by exposing oneself to these factors. we unknowingly invited several diseases out of which Sthaulya is one which affects someone’s social, physical, and mental features. Acharya Charaka has mentioned Sthaulya under Santarpanajanya Vyadhi. The present study deals with all the details of Sthaulya according to ayurvedic classics and its preventive methods like Nidan Parivarjan, therapeutic management along with medicine, diet, Pathya and Apathya.

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GJMR-K Classification: NLMC Code: WB 55.A9
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I. Introduction

Acharya Charaka has included Atisthoola in eight varieties of impediment which are designed as Astha Nindita purusha. Atisthoola comprises one of them. Acharya Charak mentioned that a person in whom excessive and abnormal increase of Medodhatu along with Mamsadhatu is found which results into pendulous appearance of buttocks, belly, breast and whose increased bulk is not matched by a corresponding increase in energy is called Sthulpurusha. Sthaulya a Dushya dominant Vyadhi, plays a major role in pathogenesis of Sthaulya, therefore it is important to know different aspects of Meda. Substance which has Snigdha property is called Meda. There are many oily substances in the body like vasa Majja etc.

Sthauyaroga of Ayurveda comes under the heading of Medoroga which results due to dysfunction of Medodhatvagni (factors responsible for metabolism / nourishment of Medodhatu). Ayurveda also described Sthaulya as

1. Kapha Pradhanaja– predominantly caused due to vitiated Kapha Dosha
2. Meda Pradoshaja– Meda is dhatu/tissue which is predominantly affected
3. Bahudos Avastha– Multi factorial conditions.
4. Santarpanjanya Vyadhi– Disease caused by due to defected anabolism/overnutrition.

a) Sthana and Swarupa of Meda Dhatu

1. Poshya (Immobile in nature)- which stored in Medodharakala ie; in its sites like., Udana, Sphika, Stana, Gala, etc and Vasa (Mamsagata) According to modern science, it can correlated with adipose tissue / fat.
2. Possak (Mobile in nature)- which is circulated in whole body along with Gatiyukta Rasa-Rakta Dhatu for nourishing the Poshya Meda Dhatu/Sneha. According to modern science it can be correlated with cholesterol and lipids which are present in circulating blood.

II. Nidana (etiological factors)

The knowledge of Nidan not only aids the physician towards therapeutics but also in advising about Pathyaapathy. For easy management it is very important to know the Nidana of diseases. Acharya Sushruta and Vagbhat have mentioned endogenous type of cause, Vagbhat has mentioned “Ama” as a causative factor. only Charaka has define “Beejadosha” as one of the causes besides other. In context with Sthula, exogenous causes are diet and whereas Dosh, Dhatu, Mala, Srotas etc. comes under the endogenous causes. Mainly four type of Nidana described in ayurvedic Samhitas-

1. Aharatmaka Nidan (Dietary factors)
2. Viharatmaka Nidan (Functional factor)
3. Manas Nidan (psychological factor)
4. Beejadosha (Hereditary factors)

Role of Aharatmaka Nidana in Sthoulya– On the basis of “Samanya Vishesh Siddhant” that is “Sarvada...
Sarvabhavanam Samanyam Vrddhi Karanam" The excessive food consumption of similar substance (Dravya Samanya), similar quality (Guna Samanya) or similar in action (Karma Samanya) help in the overall production of dhatu. In the same manner increase intake of these Aharatmaka Nidana which are described above overproduction of medodhatu. Acharya Sushrut has mentioned “Rasnimmitameva Sthoulva Kathryam Cha” means Sthaulya and Karshya depends upon the quantity and quality of Aharasana. Aharasana plays a major role for increasing Meda Dhatu in Sthaulya.

Role of Viharatmaka Nidanin Sthaulya— All the Aharatmaka Nidana ultimately decrease physical activity, which aggravates Kapha and leads to Meda deposition. Viharatmaka Nidan Ayayam, Sukhasana etc. which possesses the qualities same as Meda which increases Meda in the body, Divaswap having Snigdha property leads to blockage of the micro channels of the body.

Role of Manas Vyaparain Sthaulya– Acharya Charak mentioned some psychogenic causes of Sthaulya. “Tatra Atisthoulya … Harshanityatvat Achintanat” Harshinitya and Achinta are two psychological factors mentioned by Acharya Charaka which are responsible for Meda Vriddhi. These factors are responsible for Meda Vriddhi. This type of psychological wellbeing and jolliness that person indulge more in worldly pleasure and excess energy stored in the form of Meda.

Due to adaptation of modern lifestyles, a person has reduced his physical activity and instead of that the mental work is increased, as a result now a days the diseases caused by psychogenic factors are seen extensively more.

Role of Beejadosha in Sthaulya– Acharya Charaka has mentioned that Beejadosha plays a major role for Medovriddhi, defect of Beejabhagavayava that is the part of Beeja which resembles with genes may lead to defective development of that organ. Also, Bhavamishra has mentioned that increased proportion of Meda and decreased development of Sthool but weak body. Moreover, overnutrition particularly with Madhura rasa during pregnancy is as a causative factor for birth of obese child which indicate role of hereditary factor in genesis of Sthaulya.

III. Samparapit (pathogenesis)

a) Role of Agni in Sthaulya According to Ayurveda

Jatharagni is main responsible factor for digestion of food. In Medoroga (Sthaulya) due to obstruction of Meda, Vata remains in Koshta and causes Tikshnagni. here the question arise, how Ama formation can occur in the presence of Tikshnagni. Chakrapani and Dalhana have clarify this by giving explanation thatin the stage of Tiksnagni, person goes for Adhryasana and Akal Bhojan Seven, which leads to disturbance in Agni and subsequently formation of Ama may take place. Moreover, Dalhana has explained that in the Sthaulya formation of ama is more due to decrease level of Medodhatavagni than Jathragni.

As per Vaghbata Pachakans present in each Dhatu is refered to Dhatvagni. Usma present in Dhatu is part of Jatharagni and is controlled by it. Dhatavagnimandhya of specific Dhatavagni causes Vriddh of that Dhatu and vis.a.vis. In the state of Hatavagnimandhya Kshaya of Uttar Dhatu take place.

In the case of Sthaulya Medodhatvagni Poshkansh started at Jathragni level is vitiating, this Poshak Ras which comes in large quantities to Meda Dhatu slow down the Medodhatvagni. Due to continuous excess of nutrient, the work of Medadhatvagni reaches almost to its lowest level, which leads to the increases of Meda dhatu in their depot. In addition due to decreased production of Sukshma and Sara part at Medadhatvagni level the further Asthi, Majja, Shukra dhatu get less Poshak Ras due to this Uttarottar Dhatu (Ashti Majja Shukra) is not formed properly.

In another word, due to etiological factors, there is increase in the fatty tissue in the body. This increased fatty tissue produces obstruction in various system. Specifically, this causes obstruction to ‘Vata’. This obstructed Vata starts wandering in abdominal cavity. It gives hyperstimulation to the digestive power (Jatharagni). This causes more and quick digestion and absorption of food. As a result of this appetite is increased to satisfy this increased hunger the person goes on eating more and more. This leads to increase in fatty tissue and vicious circle goes on. Even though the digestive power in the stomach (Jatharagni) is increased, there is reduced digestive power at the tissue level. The digestive power responsible for the production of fatty tissue (Medo Dhatwagni) from the muscle tissue into fatty tissue does not take place properly. This causes excess faulty deposition of fat in the body and Medorogais produced.
IV. Lakshana of Sthaulya (Sign and Symptoms)

According to Charak, Chala Sphika, Chala Udara, Chala Stana, Ayathopcayotsaha, and Atimeda Mansavruddhi are obvious in all the patient of Sthaulya. hence these may be considered as cardinal symptoms or PratyatmLakshan.  

In Astang Sangrah Vagbhata also mention these Lakshan of Sthaulya  
1. Kshudhavridhi (Excessive hunger)  
2. Atitrishna (Excessive thirst)  
3. Atishevida (Excessive Sweating)  
4. Sharamjanya Swasa (Breathlessness on mild exertion)  
5. Aatinindra (Excessive sleep)  
6. Karyaodourblyata (Difficulty to perform heavy work)  
7. Jadythia (Stishness)  
8. Alpaayu (Short life span)  
9. Alpabala (Decreased bony strength)  
10. Uatshahahani (Inertness)  
11. Sharir Durgandhta (Foul odour of the body)  
12. Gadgadtava (Unclear voice)  

Ashtadosha of Sthula

Eight consequences of Sthaulya as described in Charaka Samhita  
1. Aayushohrasa (Decreasing life span)  
2. Javoparodha (Slowness in movement)  
3. Kricchavyavayata (Difficulty in sex)  
4. Daurbalya (Weakness)  
5. Daurgandhyam (Bad odour)  
6. Svedabadha (Excessive sweating)  
7. Kshudatimatra (Excessive hunger)  
8. Atipipasa (Excessive thirst)  

Complications  
1. Visarpa (Erysepellas)  
2. Bhagandara (Fistula in Ano)  
3. Jwara (fever)  
4. Aatisar (Diarrhoea)  
5. Prameha (Diabetes)  
6. Arsha (Piles)  
7. Shipada (Filariasis)  
8. Apachi (Indigation)  
9. Kamla (Jaundice)

Classification  
In Ashtanga Hridaya and Ashtanga Sangraha Vagbhata have been mentioned three types of Sthaulya i.e., Adhika, Madhyama and Hina with management point of view.

This classification can be correlated with modern as given below -

1. Hina Sthaulya (overweight)  
   - B.M.I. 25-29.90 kg/m²  
   - Mild degree of overweight,  
   - without any complication or secondary disease  
   - less than four undesirable symptoms  
   - duration of less than 1 year

2. Madhyam Sthaulya (Obese)  
   - B.M.I. 30-40 kg/m²  
   - Moderate degree,  
   - least complications without secondary disease,
3. **Adhika Sthaulya** (Very Obese)
   - B.M.I. > 40 kg./m²
   - Excessive degree, with complication and secondary disease
   - all 8 undesirable symptoms
   - more than 5 years duration

### Chikitsa of Sthaulya (Management of Obesity)

In Ayurveda, **Sthaulya** comes under Santarpanajanya, Medo Pradoshaja and Kapha Pradhana Vyadhi where Apatarpana is the line of treatment.

“Guru Cha Apterpan Chestham Shtaulanam Karsanam Prati”

**Nidan parivarjan**

“Sankshepta Kriyayoga Nidan Parivarjanam”

Nidan Parivarjan Chikitsa means avoiding all the Aharatmaka, Viharatmaka, Manasika and Anya Nidan responsible for the manifestation of diseases. Both Charaka and Sushrut have laid great emphasis on the principle of Nidan Parivarjana. Sushrut in particular has recommended Nidan Parivarjan as essential component in the management of any disorder.

### Samshodhana Chikitsa (Purificatory procedures)

- **Vaman** (Therapeutic emesis)— Vaman Karma is specifically indicated to cure Kapha related diseases and disorders like obesity.
- **Virechan** (Therapeutic purgation).— Virechana is beneficial for Sthaulya. Virechana helps to initiate the weight loss mechanism in the body. Virechana being an appropriate Shodhan procedure is not only specific for the elimination of vitiated Pitta Dosha but also helps in the elimination of vitiated Kapha and Vata a where it is also indicated in Sthoulya.
- **Lekhan Vasti** (Medicated enema)— Lekhan Vasti, the name is self-explanatory hence Lekhan property reduces med and simultaneously pacifies Vata Dosha by affecting its main seat i.e Pakvashaya. Due to Laghu, Ushna and Tikshna properties of Basti Dravya, obstruction of channels may be broken down thus the morbid material from all over the body will expelled out breaking the pathogenesis of obesity. Acharya Charaka has mentioned Lekhaniya Dashemani Dravyas—a group of 10 drugs, these drugs are 1. Mustaka 2. Kustha 3. Haridra 4. Vaca 5. Ativisha 6. Katu Rohini 7. Chitraka 8. Chirabilva 9. Daruhradra 10. Haimvati (Karanj).

### Shamana Chikitsa (Palliative Treatment)

- **Langhan** (Fasting).- Only in initial stage if Stha+ Ulya caused due to Adhyashan, then Langhan, Laghu Aahar, Alpa-Aahar should be taken
- **Ama Pachan** (oral use of digestives to augment the fat metabolism).
- **Ruksha Udwartan** (Dry medicated powder massage).- Dry powder of herbs is used hence it is known as Ruksha Udwartana. Udwartana opens the circulatory channels, facilitates the metabolic activity and improves the complexion of skin.

### Common classical preparations used in Sthaulya (obesity)

1. Vati– Aarogyavardhani Vati, Bhedani Vati
2. Churna – Triphala Churna, Trikatu Churna, Vidangadi Churna, Vacha Churna
3. Kwath— Mustadi Kwath, Aghimanta Kwath, Phalakriti Kwath
4. Asav Arista- Vidangasav, Lodhrasav
5. Loha- Vidangadiloha, Trayaushanloha
6. Guggul- Navak guggul, Amritadya guggul, Medohar Guggul
7. Rasayan– Shilajatu Rasayan, Guggulu Rasayan, Amlaki Rasayan
8. Akal Aushadh- Guggul, Shilajatu, Vacha, Haritaki, Bhivitaki, Amalaki, Guduchi, Nagarmoth, Vindang, Shunthi, Aghimanta.

### Yoga and exercise

**Yoga Asana**

- Suryanamaskar, Pawanmuktasana, Bhujangasana, Shalabhasana, Dhanurasana, Pachimottanasana, Adha Vyakrasana, Halasana, Ardha Chakrasana, Naukasana, Trikonasana, Veerbhadr rasana, Ustrasana etc.

**Yogic breathing or Pranayama**

It is said in the yogic text Hatha Yoga Pradeepika and others that practice of pranayama make the body slim and fit. Pranayama can help to burn excessive fat in the body. There are two pranayama practices that are good for weight reduction—Kapalabhati and Anulom Vilom Pranayama.
1. **Aharavarga (food)**

| Shuka Dhanya (Food grain) |
|---------------------------|
| Shami Dhanya (Pulses)    |
| Shaka Varga (Vegetables) |
| Drava (liquid stuff)     |
| Mamsa (meat)             |

2. **Pathya (Suitable)**

| Yava, Venuyava, Kodrava, Nivara |
|---------------------------------|
| Mudga, Rajmasha, Kullatha, Masura, Adhaki |
| Vrintaka, Patrashaka, Patola    |
| Takra, Madhu, Ushnodaka, Dugdha, tilativa, Asava, Arishtha |
| Rohita Matsya                   |

3. **Apathya (Unsuitable)**

| Godhuma, Navanna, Sali Shami Dhanya (Pulses) |
|----------------------------------------------|
| Masha, tila                                  |
| Madhurstaphala                               |
| Ikshu, Navnita, Ghrita, Dadhi                |
| Anup, Audaka                                 |

**Pathya Apathya Vihar**

4. **Pathya**

| Shrama (Hardwork) |
|-------------------|
| Jagarana (Late nights) |
| Vyavaya (Sexual activity) |
| Nitya Langhana (Regular use of Reducing therapy) |

5. **Apathya**

| Sheetal Jala |
|--------------|
| Divaswapa (Day sleeping) |
| Avyavaya (less exercise and less indulgence in sexual activity) |
| Swapna Prasanga (Excessive sleeping) |
| Sukhashaiyya (Comfortable bedding) |

**V. Discussion**

Sthaulya is considered as one of the Santarpanjanya Vyadhi with the involvement of mainly Medodhatu and Kaphapradhanatridosh. Excessive accumulation of Kapha and Meda with other factors eventually leads to Sthaulya Roga. Line of treatment for Sthula is Apatarpana and Langhana, which can be done by Shodhana and Shama Yoga therapy. Vayyam, proper dietary and lifestyle modification can play a crucial role in prevention of Sthaulya. Acharya Charaka has illustrated that Krishna is better than Sthula because when Sthula Purusha affected by disease sufers more due to it as compared to Karshya. Kapha Prakriti persons are more prone to become obese (Sthula).

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