

ROLE OF PANCHAKARMA IN THE MANAGEMENT OF *STHOULYA*(OBESITY) - A CASE STUDY

Dr. Tike S. G.¹, Dr. Patil Shilpa^{2*}, Dr. Panzade S. M.³, Dr. Pansare T. A.⁴, Dr. Todkari
Madhuri⁵

¹Assistant Prof. and Incharge HOD of *Panchakarma* Department, Govt. Ayurved College
Osmanabad.

^{2,5}PG Scholar Department of *KriyaSharir*, Govt. Ayurved College, Osmanabad.

³Assistant Prof. *Shalakyatantra* Department, Govt. Ayurved College Osmanabad.

⁴Associate Prof. *Dravyaguna* Department, Govt. Ayurved College Osmanabad.

Article Received on
11 Dec. 2019,

Revised on 01 Jan. 2020,
Accepted on 22 Jan. 2020

DOI: 10.20959/wjpr20202-16747

*Corresponding Author

Dr. Patil Shilpa

PG Scholar Department of
KriyaSharir, Govt. Ayurved
College, Osmanabad.

ABSTRACT

Now a days Obesity is burning health problem of society due to change in day to day life style, indiscriminate dietary habits, sedentary life style, stress, lack of mental and physical exercise therefore the superiority of human health is falling. In Modern science *sthoulya* can be compared to Obesity. It is a chronic disease prevalent in both developed and developing countries and affect Child as well as Adults, which can act as root cause of several disease. *Sthoulya* is *Santarpanjanya Vikar* and being counted under the eight verities impediments which are called as *Astaninditpurusha*. The present case

is used to show *Ayurvedic* management of a case of *sthoulya* (Obesity). A 31-yr. female patient came to *Panchakarma* OPD of Govt. Ayurved Hospital Osmanabad with complaints of weight gain since 3yrs, Heel pain and *Aayasenshwaskashtata* since 2-3 months for better management we suggested her to take *Panchakarma* and gave her *Lekhana Basti* and *Udvardana*. *Sthoulya* identified in the category of *Bahudoshavastha*. *Sthoulya* being *Atisthula* condition *panchakarma* is not prescribed as treatment modality but the present single case study Showed that *Panchakarma* play an important role in the management of *Sthoulya* by detoxification to reduce *Kaph-Meda* from the body and prevents its further accumulation. Therefore, *panchakarma* has major role as Promotive, Preventive and Curative procedure.

KEYWORDS: *Sthoulya*, *Panchakarma*, *Lekhana Basti*, *Udwardana*.

INTRODUCTION

Sthoulya has become the most important, alarming problem. In present era it is a most challenging lifestyle disorder. Obesity is a medical condition in which Abnormal and Excessive accumulation of fat in body which causes adverse effect on body. Prevalence of obesity in India has increased threefold within the last 20 years. In 21st century with morbid obesity affecting 5% of nation's population.^[1] In *sthoulya* etiological factors mainly vitiated *Meda-Kapha* and *Vata* get Aavrita by excessive *Meda*. In *Sthoulya Medovaha Strotas* is mainly affected the site of metabolic trouble is *Medo dhatu* caused due to additional intake of *Snigdha* and *Madhura Ahara*.^[2]

As *Sthoulya* is *Santarpanjanya Vikara* having *Bahudoshavstha Panchakarma* that is *Shodhana Chikitsa* plays an important role in it. Acharya Charaka told the importance of *Shodhana Chikitsa* as- there is chance of recurrence of disease treated by *Shamana Chikitsa* but *Shodhana Chikitsa* cures the disease from its root and there is no chance of recurrence.^[3] From this perspective the study is conducted to know the efficacy of *Lekhana Basti* and *Udwartana* in the management of *Sthoulya*.

MATERIAL AND METHODS

A Case Study

A 31-year Female patient Came to Panchakarma OPD No.2997 of Govt. Ayurved Hospital Osmanabad having complaints of weight gain since 3 yrs., Heel pain & *Ayassenashwasakashata* since 2-3 months. Patient was not having any history of Hypertension, Diabetes Mellitus, Bronchial Asthma and any Surgical illness. *Ashtavidha Pariksha*, Systemic and general physical examination with Anthropometry was done. Lab investigation was done there were changes in values of Lipid Profile. Weight was 91.6kg and BMI was 35.75. On the basis of symptoms through examination and test she was diagnosed as Grade -2 obesity.

General Examination

G.C.-fair	B.P.-130/80 mm of Hg
Temp-Afebrile	Pulse-80/min
Wt.-91.6 kg	Ht.-160.5 cm

Systemic Examination

R.S.: AEBE-clear

Personal history

Appetite: Good

CVS: S₁ S₂ – normal

Bowel: Regular with Normal consistency

CNS: Conscious, Well oriented

Micturation: Normal

Sleep: Sound Sleep

Aahara: Mixed NonVeg on daily basis

Ashtavidha Parikshana

Nadi: Prakrita

P/A- Non tender

Mala: Nirama mala

Soft

Mutra: Prakrita

Liver - Not Palpable

Jivha: Alpasaam

Spleen- Not Palpable

Shabda: Prakrita

Sprsha: Anushna

Habits- Sweets

Drika: Prakrita

Junk food

Aakruti: Sthoola

Bakery Products

Table 1: Anthropometry before starting treatment.

Chest Circumference	101 cm
Hip Circumference	137 cm
Waist Circumference	128 cm
Mid Arm Circumference	Right hand-35.5 cm Left hand-34.5 cm
Thigh Circumference	Right Leg -64 cm Left Leg -67 cm

INVESTIGATION DONE BEFORE TREATMENT**Table 2: Lipid Profile On-06/02/2019**

Sr. Cholesterol	198 mg/dl
Triglycerides	169 mg/dl
HDL	51 mg/dl
LDL	113 mg/dl
VLDL	33.8 mg/dl

Table 3: RFT On- 06/02/2019.

Sr. Urea	13 mg/dl
Sr. Creatinine	0.76 mg/dl
Sr. Uric Acid	3.8 mg/dl

➤ Treatment Given

Shaman Chikitsa

1. *Arogyavardhini Vati*^[4] 250mg 2BD After meal For *Dipapachan*
2. *Chandraprabha Vati*^[5] 250mg 2BD after meal For *Vata kapha Harana*
3. *Triphala Guggulu*^[6] 250mg 2BD after meal For *Lekhana Karma*
4. *Medohara Guggulu*^[7] 250mg 2BD after meal For *MedaDhatu Karshana*

Shodhana Chikitsa• **Bahya Shodhana**

1. *Sarvanga Udwartana*^[8]
2. *Peti sweda*

• **Abhyantara Shodhana**

Lekhan Basti -Karma Basti

Table 4: Udawartana Dravyas: 15 days.

1)Vacha ^[9]	25gm
2)Triphala ^[10]	50gm
3)Shunthi ^[11]	25gm
4)Lodhra ^[12]	50gm
5)Chandana ^[13]	50gm
6)Badara	50gm
7)Haridra ^[14]	50gm
8)Rava	50gm
9)Gram flour	50gm

Table 5: Plan of Lekhana Basti for 30 days.

3 cycles of *Niruha*

1 *Anuvasan* in between 3 *Niruha*

Basti	Basti Aushadhi	Matra
1. <i>Anuvasan Basti</i>	<i>Saindhavadi Tail</i> ^[15]	60 ml
2. <i>Niruha Basti</i>	<i>Triphala</i> ^[10]	20gm — <i>siddha</i>
	<i>Dhashamula</i>	20gm — <i>kashaya</i>
	<i>Madanaphala</i>	10gm — 600ml
	<i>Saindhava</i>	2.5gm
	<i>Madhu</i>	30ml
	<i>Til tail</i>	In increasing Order
	<i>Gomutra</i> ^[16]	50ml – 75ml – 100ml

After scheduled treatment patient was assessed for any changes before and after treatment. Regular weekly follow up of patient was maintained. Details are noted in the tabular form as follows:

Table 6: Assessment of Anthropometry on every follow up.

Sr.no.	Measurements	Initial (On First Visit) *Before t/t 06/02/2019	1 st follow up 18/02/2019	2 nd follow up 25/02/2019	3 rd follow up **After/t 08/03/2019
1	Weight (kg)	91.6	89	87	86
2	Mid Arm circumference(cm)	Right.hand-35.5 Left Hand-34.5	Rt. Hand-34 Lt. hand- 33	Rt. Hand-32 Lt. hand-31	Rt. hand- 33.5 Lt. hand- 31
3	Thigh circumference(cm)	Right -64 Left-67	Rt.- 61 Lt.- 65	Rt.-57 Lt.-56.5	Rt-56 Lt-56
4	Waist circumference(cm)	128	115	106	102
5	Chest circumference(cm)	101	99	98	96
6	BMI	35.64			33.4

Table 7: Lipid Profile before and after treatment.

	Before T/t 06/02/2019	After T/t 08/03/2019
Sr. Cholesterol (mg/dl)	198	159
Triglycerides(mg/dl)	169	109
HDL (mg/dl)	51	72
LDL (mg/dl)	113	99.2
VLDL (mg/dl)	33.8	21.8

RESULT

On the day of first visit date- 06/02/2019 Patient's weight was **91.6 kg** which got reduced to **86kg**. BMI reduced to **33.4** & In Lipid profile HDL increased to **72** LDL decreased to **99.2** in 1month duration results showed that there were significant changes.

DISCUSSION

In *sthoulya* all three *Doshas* are involved mainly *Kapha-Vata* and *Medo Dhatu*. Therefore, *Kaphaghna*, *Medoghna*, *Lekhaniya*, *Rukshniya dravyas* Should be used for treating *Sthoulya*.

Lekhana Basti

Basti is called as *Ardhachikitsa*. *Dravya* used in it are having properties

Rasa-Katu, *Tiktha*, *KashayaGuna* – *Sukshma*, *Laghu*, *Teekshna*. *Vipaka-Katu* and

Veerya -Ushna. Due to these properties there is *Dipan-Pachana*, reduction in *meda dhatu*, breakdown in *Dosha Sanghata*, increases *Medodhatvagni*. *Lekhana Bastidravyas* are also having the qualities of *Karshana* and *Rukshana* property of *Gomutra*.

Udwartana

It is included in *Rukshanakarma* which is *Purvakarma* of *ShodhanaChikitsa*. *Udwartana* is a *Bahirparimarjana Chikitsa*. It is having properties like – *Kaphahara*, *Medaspravilapanam* and *Twakprasadakara Sthireekaranam Anganam*.^[8] As we know in *Sthoulya* due to excess sweating there is unpleasant smell therefore *Udwartana* restricts the production of excessive sweating and removes the fortid odour. *Udwartanadravyas* used are having *Rasa- Katu, Tikta, Katu Vipaka* and *Ushna Veerya* which are *Lekhana* and *Karshana* in nature due to this they reduce *Meda dhatu*.

CONCLUSION

After diagnosis we treated patient by *Sarvanga Udwartana* along with *Peti Sweda* Followed by *Lekhana Basti* and restricted diet, exercise in the duration of one month there is significant changes were observed in reducing weight objective parameters like Lipid Profile, BMI. As Ayurvedic procedures are having excellent effect on Obesity and also other Lifestyle disorder diseases. Comparatively it is most cost effective than other treatment.

REFERENCES

1. World Health Organisation (2000). Obesity: Preventing and managing the global epidemic (Report). World Health Organisation, 1 February 2014; 1-2. Retrived.
2. Dr. Tripathi Ravidatta edited charaka Samhita(Hindi translation), sutrasthana, adhyaya23, verse 3, Caukhambha Sanskrit Pratishthan, Delhi, 2011; 317.
3. Dr. Tripathi Ravidatta edited charaka Samhita(Hindi translation), sutrasthana, adhyaya16, verse20, Caukhambha Sanskrit Pratishthan, Delhi, 2011; 252.
4. Ambikadatta shastri Rasratna Samuchya 20th chapter, verse87, edition 9th; 1994; 400.
5. Tripathi Bramhanand Edited Sharangdharacharya virachit Sharangdhara Samhita dipika Hindi vyakhya teeka, Madhyam Khanda, Vataka Kalpana, Chaukhambha Surbharati Prakashana, 2019; 134.
6. Tripathi Bramhanand Edited Sharangdharacharya virachit Sharangdhara Samhita dipika Hindi vyakhya teeka, Madhyam Khanda, Vataka Kalpana, Chaukhambha Surbharati Prakashana, 206.

7. Krushna gopal edited Rastantrasara va siddhaprayog sangraha dwitiya khanda medorog chikitsa krushana gopal Ayurveda bhavan edition, 2014; 16th: 190.
8. Garde Ganesh Edited Sarth Vagbhat (Marathi Translation) Sutrasthana, Adhyaya 2, Verse14-15, Chaukhambha Surbharati Prakashana, Varanasi, 2011; 8.
9. Sharma Priyavat, Dravyaguna vidknyana part-2, Chaukhambha Bharati Akadami, Varanasi, 2018; 31.
10. Chunekara Krushnachandra edited BhavaPrakash Nighanatu Haritkyadivarga verse43 Chaukhambha Bharati Akadami, Varanasi, 2018; 12.
11. Sharma Priyavat, Dravyaguna vidknyana part-2, Chaukhambha Bharati Akadami Varanasi, 2018; 335.
12. Sharma Priyavat, Dravyaguna vidknyana part-2, Chaukhambha Bharati Akadami Varanasi, 2018; 617.
13. Sharma Priyavat, Dravyaguna vidknyana part-2, Chaukhambha Bharati Akadami Varanasi, 2018; 716.
14. Sharma Priyavat, Dravyaguna vidknyana part-2, Chaukhambha Bharati Akadami Varanasi, 2018; 165.
15. Shatri Shriharidatta Bhaishjya Ratnavali Nadivrana Rogadhikara verse31, Motilal Bnarasidasa, Varanasi, 1970; 563.
16. Shrivastav Shailaja Edited Sharangdhar Samhita (Hindi Translation) Uttarkhanda, adhyaya6, Verse20, Chaukhambha Orientalia, Varanasi, 2005: 384.
17. Sinha k et al. Critical Review on Role of Panchakarma In Sthaulya with special reference to obesity, Int. J. Res. Ayurveda Pharma., 2017; 8(6).
18. Mahesh Raju et al. Management of Obesity (sthoulya) A success story-A case study, IAMJ, 2017; 5(4).
19. Chaturvedi s. et al Observational study of role of Lekhana Basti and Virechna Karma in sthoulya(obesity)Int. Res. J. Pharm., 2014; 5(3).
20. Nisargi R. et al The effect of Lekhana Basti in the management of sthoulya IJAM, 2012; 3(2): 104-112.
21. Nirmal p. et al Ayurvedic Panchakarma management of sthoulya (obesity): A case Report, IJAM, 2017; 8(3): 143-147.
22. Shruti S. et al Panchakarma Approach to sthoulya, IJAM, 2017; 5(9).