

**CASE STUDY OF OBESITY (STHAULYA) ASSOCIATED
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ABSTRACT

Obesity (sthoulya), in general, is a significant health problem and is associated with several comorbidities and various discomforts that can cause negative impact on physical, mental, and social well-being of a person. In this case study, an obese patient was suffering from severe multiple joint pains (aam vata) and was unable to climb stairs, and had extreme difficulty in walking. The patient also suffered from stress-related complaints, such as sleep disturbances (anidra) and poor digestion. The treatment was aimed at restoring psycho-physiological and physical health of the patient.

KEYWORDS: Obesity, Sthoulya, Pachana, Udwartana, Swedana, Rukshana, Basti.

INTRODUCTION

Obesity is defined as abnormal or excessive fat accumulation in the body that may impair health of an individual. Obesity, in general, is a significant health problem and is associated with several comorbidities and various discomforts that can cause negative impact on physical, mental, and social well-being of a person. Obesity negatively impacts the musculoskeletal system,^[1] respiratory system,^[2] endocrine system,^[3] and digestive system^[4] Thus, obesity can lead to various potentially life threatening diseases and cause shortening of life span of a person. Although symptomatic treatment may be available to give temporary relief but there is no permanent treatment available in the modern medical system. Atisthoola purusha is considered worst among them due to its complicated

pathogenesis variable complication and treatment. The word Atisthoola is made up of prefix 'Ati' and 'Sthoola' dhatu. Ati means excessive and Sthoola means bulky. The meaning of Atisthoola is excessively fat.^[5] There is so much increase in fat and muscles that hips, abdomen and breast become Ayurveda management of any disease is divided into three parts 1. Nidanparivarjan, 2. Shodhana, 3. Shamana.

We present a case of obesity (sthoulya) having aam vata which was satisfactorily treated with the help of integrated therapy of Ayurveda. Traditional Ayurvedic therapy involves complex treatment approaches, such as lifestyle and nutritional advice, manual therapies, medication, dietary supplements, detoxification techniques, and yoga.^[6]

AIMS AND OBJECTIVE

1. To explore the importance of ayurveda to treat obesity.
2. To study the etiological factors of Sthaulya (Obesity).
3. To study the various Ayurvedic approaches in the management of Sthaulya.

Hypothesis

Ayurvedic management of Shodhan chikitsa followed by Shaman Chikitsa is effective in the management of sthauilya (obesity) associated disorders.

CASE REPORT

Here we report a case of 54-year-old female with the complaint of

1. Multiple joint pain with swelling (Sarva-Sandhi Shoola & Shotha)
 2. Extreme difficulty in walking and movements(Chankraman Kastata)
 3. Sleep disturbances(Nidra-Vibhramsha)
 4. Exertional dyspnoea(Ayasan Shwaskashtata)
 5. Lethargy(Utsahhani)
 6. Constipation(Malavstambha)
- K/C/O-Hypothyroidism since 6 years (under treatment) K/C/O-Rheumatoid arthritis since 2 years
 - Family History - Nil
 - Past medical history - Nil
 - Past surgical history - Nil
 - Drug Allergies - Not yet known.

- Addiction - Nil
- S/E - RS - AEBE Clear CVS - SIS2 Normal CNS - Conscious, oriented
- P/A- Soft, fatty, Non tender with gaseous distention

Investigation

The patient's past biochemical tests were done on which revealed borderline increase in Thyroid stimulating hormone (TSH) while T3 and T4 were within the normal range.

Liver function tests, blood sugar, Antinuclear antibodies (ANA), and HbA1c were WNL but RA factor and C-Reactive Protein (CRP) were positive.

Asthtavidha parikshana

Nadi	Guru
Maia	Asanyaka (saam)
Mutra	Prakrit
Jivha	Uplipta (saam)
Shabda	Prakrit
Sparsha	Anushnasheeta
Drik	Prakrit
Akriti	Sthoola

Anthropometry, personal history, body weight and BMI before starting treatment.

B.P.	120/80mm of Hg
Pulse	80bts/min
Height	158 cm
Weight	83 kg
BMI	33.2 kg/m ²
Chest girth	99.5 cm
Abdomen girth	90.5 cm
Hip girth	105 cm
Ahar	Snigdha, guru, milk and bakery products
Vihara	Avyayam, Diwaswap
Kshudha	Asamyaka
Nidra	Disturbed sleep

Strotas Parikshana

Rasavaha	Exertional Dyspnoea (Ayasen Shwaskashtata), Heaviness in body (Gurugatrata), Lethargy (Utsahhani)
Mansavaha	Enlargement of thighs and abdomen (spikaudara lambanam)
Medavaha	Excessively perspiration (Atisweda)
Asthivaha	Multiple joint pain with painful movements and swelling (Sandhivedana and shophya)
Purishvaha	Constipation (Malavsthambha)

SAMPRAPTI GHATAK

Dosha: Vata and Kapha

Dushya: Rasa, Mansa, Meda, Asthi

Srotas: Rasavaha, Mansavaha, Medovaha, Asthivaha Srotodushti: Sanga

Rogamarga: Abhyantar

Agni: Ama, Jathargnimandya, and Dhatvagnimandya Udbhavasthana: Aamashayottha

Vyaktasthana: Udar, Janu sandhi

SAMPRAPTI

NIDAN SEVEN (AHARAJ, VIHARAJ & MANSIKA)



AGGRAVATION OF KAPHADI DOSHAS



DISTURBANCE OF AGNI



FOOD REMAINAMA (UNCOOKED) & TURNS TO SWEETER (MADHURA AVASTHAPAKA)



THIS ADYA RASADHATU (AMA) CIRCULATING THROUGHOUT THE BODY PRODUCES MEDAS BECAUSE OF ITS UNCTUOUSNESS



STHAULYA

Therapeutic intervention**Treatment protocol**

1. Deepan pachan
2. Sodhan Chikitsa
3. Saman Chikitsa
4. Stanik Chikitsa
5. Yoga
6. pathyapathya

1. Deepan pachan

Drug name	dose	Kal and duration
Aganitundi vati	250mg BD	Before food 1MONTH
Sunthi sidhh erand sneh	15ml HS	After dinner 1month

2. Sodhan chikitsa

Procedure name	Drug	Kal and duration
Abhyang	Vishgrabh tel	In Morning 20min. – 15 days
Nadi swedan	Nirgundi patr	After abhyanga 20 min. -15 days
Vaitran basti	Amlika, Guda, Saindhava, Gomutra and Tila tail in the ratio 4:2: 1: 16:4 as perrequire-ment.	Before food - 15 days

3. Saman chikitsa

Drug name	Dose	Kal and duration
Sinhanad guggul	250mg BD	After food 1 MONTH
Dashmool + rasna kwath	20ml BD	After food 1month
Trikatu choorna	3gm bd	Before food 1month

4. Stanik Chikitsa

Procedure name	Site	Duration
lep	Bilateral knee joint	For 1hr 1 month

5. Yoga

Procedure name	Duration
Suryanamaskar	20 min. for 2 month
Pavanmuktasana	5 min. for 2 month
pranayama	20min. for 2 month

6. pathyapathya- Purana Shali, Rakta Shali, Shali, Yava, Kulatha, Shruta Sheeta Jala, Panchkolashruta Jala, Shunti Siddha Jala, Madhu, Lasuna, Adraka, Takra, Patol.

RESULT

Symptomatic relief

Symptoms	Before treatment	After treatment
Multiple joint pain (Sarva- Sandhi Shoola)	4	2
Difficulty in movement (chestha hani)	4	1
Exertional dyspnea (Shrama Jaanya Shwasa)	3	1
Disturbed sleep (khandit nindra)	3	1
Lethargy (Alasya)	4	2

Changes in anthropometry

Observation	Before treatment	After treatment
weight	83 kg	76 kg
BMI	33.2 kg/m sq	30.4 kg/m sq

Chest girth	99.5 cm	97.5 cm
Abdomen girth	90.5 cm	86cm
Hip girth	105 cm	101 cm

DISCUSSION

According to Ayurveda, **Stoulya** (obesity) is classified as a **Santarpanajanya Vyadhi** (a disease caused by over-nourishment), primarily due to the vitiation of **Kapha dosha** and **Medo dhatu**. In this patient, the **hetus** (causative factors) include excessive intake of Atisnigdha, Guru, and Madhura Ahara (excessively unctuous, heavy, and sweet food), along with Avyayama (lack of physical activity), Divaswapna (habitual daytime sleep), Achinta (absence of mental stress), and Beeja Dosha (hereditary factors), leads to the vitiation of Kapha dosha and the excessive accumulation of Meda dhatu, resulting in the development of Stoulya (obesity). These causative factors disturb the balance of Agni, especially Jatharagni and Meda Dhatvagni, leading to Mandagni (low digestive fire). As a result, the conversion of Rasa dhatu to Meda dhatu increases disproportionately, and the improperly metabolized Meda accumulates in various body sites like the Udara (abdomen), Sphik (hips), and Stana (chest). The Medovaha srotas become obstructed (Srotorodha) due to the increased Meda and Kapha, resulting in Sanga type of Srotodushti, forming the basis of the Samprapti of Stoulya.

If this condition remains unaddressed, it leads to the formation of Ama due to persistent Agnimandya and improper digestion, especially in a Kapha-dominant individual. This Ama combines with vitiated Vata, leading to the manifestation of Aamavata, which is characterized by symptoms such as joint pain, stiffness, and systemic inflammation. The Samprapti of Aamavata involves the interaction of Ama and Vata dosha, where Ama obstructs the Shrotas, particularly in Sandhis (joints), and Vata carries the Ama to different parts of the body, resulting in pain, swelling, and stiffness. The Sanga and Margavarodha of Vata by Ama are the hallmarks of Aamavata's pathogenesis.

To achieve Samprapti Vighatana (breaking the disease pathway) in both Stoulya and Aamavata, a combination of Shodhana (purificatory) and Shamana (palliative) therapies is employed. Abhyanga (therapeutic massage) with Sunthi Siddha Eranda Taila improves circulation, liquefies the accumulated Meda, and reduces Kapha. Nadi Swedana (steam sudation therapy) helps open up obstructed srotas, facilitates the removal of Ama, and pacifies Kapha and Vata. Vaitarana Basti, a type of Niruha Basti, is highly effective in expelling vitiated Kapha, Meda, and Ama via the rectal route, while also regulating the

function of Apana Vayu. Internally, Trikatu Churna, with its Deepana, Pachana, and Lekhana properties, stimulates Agni, digests Ama, and reduces excess Meda. Agnitundi Vati enhances Jatharagni and Dhatvagni, particularly Meda Dhatvagni, thereby restoring proper metabolic function.

These interventions collectively reduce Sama Meda, eliminate Ama, unblock the srotas, normalize Vata, and restore the balance of doshas, effectively breaking the Samprapti of both Stoulya and Aamavata. Thus, the combined therapeutic approach not only treats the root cause but also prevents further complications, ensuring long-term health benefits.

SHODHAN CHIKITSA MODE OF ACTION

- 1) **Abhyanga**- Abhyanga is done on the skin with Vishgarbha Taila (oil) which is best among all Vata-Kaphahara drugs which alleviates Vata. Sparsanendriya is the place of Vata.
- 2) **Nadiswedana**- Vata Dosha is Sheeta, Ruksha in nature and Sweda being Ushna and with prior Snehana, alleviates vata dosha and thereby reduces pain and stiffness.
- 3) **Vaitaran basti**- Basti, a part of the elimination procedure, has been given special status from classical period. One of the treatment of Amavata according to Yogaratnakar is Basti. Owing to the diversity of combination of drugs used in the Basti, it can perform diverse functions like Shodhana (cleansing) Shaman (pacifying), Sangrahana (checking). In Amavata as disease progresses, Margavarodha (obstruction) increases. So, it requires cleansing therapy which can cleanse the closed channels and restore its normal function. Vaitarana Basti has very potent cleansing action.^[7]

SHAMAN CHIKITSA MODE OF ACTION

- 1) **Simhanada Guggulu**- is Kapha-vatahara, Pittavardhaka, Agnideepaka and Amapachaka. The contents of Simhanada Guggulu may act as Disease Modifying Anti Rheumatic Drugs (DMARDS). It has analgesic and anti-inflammatory properties and it modify the immune response to autoantigens.
- 2) **Agnitundi vati**- Through the digestion of Ama, the primary cause of illness appearance, AgnitundhiVati strengthens Agni.
- 3) **Shunthi siddha Eranda Sneha**- Eranda Taila is a combination of Kashaya, Madhur and Katu Rasatmak, Madhur Vipaka, and Ushna Viryatm which balances the Doshas Vata, Kapha, and Pitta. It is Anti-inflammatory and has the purgative, or Bhedaniya, function of destroying excrement. Rechana removes excess Doshas.

- 4) **Trikatu choorna**- is predominantly having I-J»a, Tik»a, Laghu, Ruksha gupa, Katu rasa, Katu vapid & Uspa virya. Hence it exhibits Kapha-vata shamaka, Deepana, Pachana, Srotovishodhana & Shothahara properties. In Ayurvedic tradition, Trikatu is known as Heating Formula. Its Thermogenic action or Usna guna promotes Agni or digestive fire which burns the harmful toxins and revitalizes the metabolism.

Yoga, an ancient Indian science, helps us in improving physical and mental well-being of an individual. According to past research findings, yoga helps us in decreasing obesity and its related disorders along with improving quality of life of an obese individual. [S] As per traditional texts, panchakarma and complementary therapies are recommended in obesity and rheumatoid arthritis.^[2] As per the past research studies involving obesity and its related disorders, yoga and Ayurveda panchakarma therapy complement each other and are highly beneficial when given together.

At the time of arrival, patient's joint pain was extremely aggravated due to a recent injury. The patient had difficulty in walking and climbing stairs, along with reduced functional abilities. Hence, the treatment was initiated in accordance to the line of treatment of aam vata and sthoulya as per Ayurveda along with yoga therapy. [U] Yoga therapy has been found to be highly beneficial for obese patients with related disorders, who have limited movements and sometimes can barely walk.^[11] Yoga involves passive stretching, which was, perhaps, helpful in loosening stiff joint muscles and reducing inflammation of the joints of the patient.

CONCLUSION

Sthoulya can be managed successfully by Ayurvedic chikitsa. In present case study, combined of Nidanaparivarjana, Shodhana, Rukshana and Baste chikitsa as per Dosha Avastha gave remarkable relief to the patient with significant weight reduction. To prevent relapse, patient was advised to follow Pathyakar Ahara and Vihara.

The result of this case study revealed significant improvement in functional ability, pulmonary function, musculoskeletal pain, and quality of life after 4 weeks of integrated therapy.

Panchkarma therapy offers a promising ayurvedic approach for managing obesity by addressing the root metabolic imbalances, promoting detoxification and reducing accumulated fat tissue.

It's effectiveness is well supported by significant reduction in weight from 83kg to 76 kg and reduction in BMI from 33.2 to 30.4 kg/m² and other related symptoms. However for safe and sustainable results, it should be part of a comprehensive, professionally supervised ayurvedic treatment plan that includes diet, lifestyle changes, and other therapeutic procedures.

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