

**AYURVEDIC APPROACH TO WEIGHT MANAGEMENT – A
STHAULYA CASE STUDY**

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ABSTRACT

Sthaulya (obesity) is a non-communicable disease, which provides the platform for so many threats like Hypertension, Cardiovascular disease, diabetes and Osteoarthritis, infertility, Impotency as well as psychological disorders like stress, anxiety, depression, etc. Thus, the mortality and morbidity are more in obese person compared to others. In condition of *Sthaulya*, *Jatharagni* is found in excessive condition where as *Medodhatvagni* is found in *manda* condition. It is due to Avarana of Vayu in *Kostha*. So, the person indulges more food, which produce excessive *Medo* and vitiated Vayu, this cycle go on. This cycle can be broken (*Samprapti Vighatana*) by *Katu-Rasa* and *Ushna-Virya Pradhana* drugs. Acharya Charaka has prescribed *Apatarpan chikitsa* as the main *Chikitsa* for *Sthaulya*. The present article is about a case of *Sthaulya* treated by *Apatarpan chikitsa* mainly with *Pachana, Udwartana, Swedana* and *Rukshana*. The drugs in *Guduchyadi Yoga* ie. *Guduchi, Musta, Amalaki, Bibhitak* and *Haritaki* which decreases *Meda* by its *Lekhana, Shoshana* and *Kaphanashaka* properties, *Kaphanashaka* properties due to *Agni* and *vayu mahabhuta* dominance

in them. So Patients got significant relief in all the complaints and a remarkable weight loss in 25 days only.

KEYWORDS: Obesity, *Sthaulya*, *Apatarpan*, *Pachana*, *Udwartana*, *Swedana*, *Rukshana*.

INTRODUCTION

Obesity is an abnormal accumulation of body fat, usually 20% or more over an individual ideal body weight. In Ayurveda, Obesity is described as *Medo Roga* or *Sthaulya*. Continuous indulgence in high fat food, fried items, etc., along with a sedentary lifestyle leads to excess accumulation of body fat which gets deposited in the numerous body channels. Appropriate Ayurvedic internal medicines along with Shodhan procedures are used to achieve the best results, without any side effects. *Vamana*, *Virechan*, *Basti*, *Udvartan* according to vitiation of *Dosha*, these *Shodhana* procedures gives effective results.^[1] *Pathya Apathya* (Diet management) & Lifestyle modifications play an important role in the management of Obesity.^[2] *Sthaulya* (Obesity) is such a disease, which provides the platform for so many hazards like hypertension, diabetes mellitus etc. as well as psychological disorders like stress. The mortality and morbidity rates are more in obese person. It is one of the most common, yet among the most neglected public health problems in the present world. In rich countries, obesity is more common among the less educated, but in poor countries, obesity is more common among the highly educated. In classics *Sthaulya* (Obesity) has been described under the *Santarpanajanya Vikara* and in *Bahudoshavastha* condition.^[3] Ayurvedic treatment aims not only at the radical removal of the causative factors of the disease, but also at the restoration of Doshika equilibrium.

MATERIAL AND METHODS

A clinical case study of *Apatarpan Chikitsa* with *Pachana*, *Udwartana*, *Swedana* and *Rukshana* was given to the patient having *sthaulya*.^[4]

CASE STUDY

Primary Data

Patient name –XYZ

AGE/ SEX - 60 year/female

Address - Parbhani

Occupation- Housewife

Table 1: Present complaints with duration.

Sr.no	Present complaints	Duration
1.	Increased body weight (Bharvruddhi)	2 years
2.	Heaviness in body (gurugatrata)	2 years
3.	Exertional dyspnea (Ayasen swasankashtata)	1.5 years
4.	Excessive Sweating (Swedadhikya)	1 years
5.	Continuous feeling of laziness (Utsahahani)	2 years

Past History of illness

No H/O- Hypertension, diabetes mellitus, Thyroid and bronchial Asthama.

H/O – Abortion -30 years back

No H/O-Any addiction

No H/O – Any drug allergy

Menstrual history- Menopause

Present History

A 60 year female patient apparently healthy before 3 years, Gradually she observed that there Was gradual increase in body weight, excessive sweating (Swedadhikya), exertional dyspnea (Ayasena Swasankashtata), heaviness in body (Gurugatrata), continuous feeling of laziness (Utsahahani). So, she came to OPD of our institute for the Ayurvedic treatment where she diagnosed with Sthaulya (obese class-per BMI=32.6 kg/m²).

Table 2: Classification of adults for underweight, overweight and obese according to BMI.^[5]

S. No	Classification	BMI
1.	Severely underweight	less than 16.5kg/m ²
2.	Underweight	BMI greater than or equal to 18.5 to 24.9kg/m ²
3.	Normal weight	BMI greater than or equal to 25 to 29.9kg/m ²
4.	Overweight	BMI greater than or equal to 30kg/m ²
5.	Obesity	BMI greater than or equal to 30kg/m ²
6.	Obesity class I	BMI 30 to 34.9kg/m ²
7.	Obesity class II	BMI 35 to 39.9kg/m ²
8.	Obesity class III	BMI greater than or equal to 40kg/m ²

History of laboratory investigations - Complete blood count report – Within normal limit

Table 3: Lipid profile report.

Serum cholesterol	211mg/dl
Serum HDL Cholesterol	52mg/dl
Serum LDL Cholesterol	136 mg/dl
Serum Triglycerides	115mg/dl

Table 4: Astavidha Pareeksha.

1	Nadi	Prakrita
2	Mala	Prakrita, Niraama mala – 1 or 2/day
3	Mootra	Prakrita-3-4 veg /day1 or 2 Vega at night
4	Jivha	Upalipita
5	Shabd	Prakrita
6	Shparsh	Anushnasheetha
7	Druk	Prakrita
8	Akurti	Sthoola

Table 5: Anthropometry, personal history, body weight and BMI before starting treatment.

B.P.	120/80mm of Hg
Pulse	80 /min
Height	168 cm
Weight	92kg
BMI	32.6kg/m ²
Chest girth	99.5cm
Abdomen girth	90.5cm
Hip girth	105cm
Ahara	Madhur Rasa, Snigdhaahar- Like Milk and Milk Products And Pistanna-Like Rice and Bakery Products
Vihara	Vihara Avyayam, Diwaswap, Achinta
Kshudha	Good
Nidra	Sound sleep

Table 6: General physical and systemic examination, no evident changes noted.

General condition	Fair
Fever	Afebrile
RS	Air entry B/L equal and clear
CVS	S1 S2 Normal
CNS	Conscious and oriented to time, place and person
P/A	Soft, fatty

Table 7: Srotas Parikshan.

Name of Srotas	Dushtilakshana
Rasvaha	Exertional dyspnea (Ayasena swaskasthata) heaviness in body (Gurugatrata), continuous feeling of laziness (Utsahahani)
Mansvaha	enlargement of Spik and Udara
Medovaha	increased body weight Excessive perspiration (Swedabadha) Polydipsia (Atitrushna) Polyphagia (Atikshuda)

Table 8: Nidana Panchaka.

• Nidan 1.Ahara	• Madhur rasa, Snigdhaahar- like milk and milk products and Pistannalike rice and bakery products (Guru, Snigdha, Sheeta and Abhishyandi)
2.Vihara	• Avyayam, Diwaswap, Achinta
• Poorvaroopa	Avyaktka
• Roopa	Weight gain, Excessive sweating, dyspnea on exertion, heaviness in body, continuous feeling of laziness, polydipsia, polyphagia, enlargement of Spik and Udara
• Upashaya	Apatarpan Chikitsa Anupashaya Santarpanjanya Ahara
• Anupashaya	Santarpanjanya Ahara

Flow chart 1: Samprapti of Sthaulya.^[6]**Table 9: Samprapti Ghataka.**

Dosha	Kapha and Vata
Dushya	Medo, Mansa, Rasa
Srotasa	Medovaha, Mansavaha, Rasavaha
Srotodustiprakara	Sanga
Rogamarga	Bahya
Vyaktasthana	Sarvashareera

Treatment Plan

1. Pachana
2. Udwartan
3. Swedana
4. Shaman Chikitsa (Rukshana)

Table 10: Treatment schedule.

S.No.	Days	Treatment	Drugs used	Details
1.	DAY 1-3	Pachan	Ativisha Musta Shunthi Haritaki Each- 500mg with warm water twice a day after food.	Deepan-Pachan
2.	DAY 4-10	Udavartan Followed by Peti swed	Triphala, Musta, Daruharidra, Devdar	Medohar
3.	DAY 4-25	Rukshana	Triphala, Musta, Guduchi-3gm with Madhu Pragbhakta	Kaphahar

- Shaman chikitsa(Rukshan) will be continue after aampachan till last day of treatment.

During treatment schedule patient was instructed to follow *Nidanaparivarjana*, *Pathyakara Ahara* and *Pathyakara Vihara*.

RESULTS

There was remarkable reduction in symptoms like *Utsahahani* and *Gurugatrata* after *aampachan* but there was mild reduction in other symptoms, which got significant relief after *Udvartan* and *Rukshana*. There were significant positive changes in lipid profile and also weight loss of 6 kg in 25 days of treatment.

Table 11: Anthropometry changes before and after treatment.

Observation	Before treatment	After treatment
Weight	92kg	86kg
BMI	32.6 kg/m ²	30.5kg/m ²
Chest girth	99.5cm	97.5 cm
Abdomen girth	90.5 cm	86 cm
Hip girth	105 cm	101 cm

Table 12: Changes in lipid profile.

Lipid	Before treatment	After treatment
Serum Total cholesterol	211mg/dl	181mg/dl
Serum HDL Cholesterol	52mg/dl	52mg/dl
Serum LDL Cholesterol	136 mg/dl	71.60mg/dl
Serum Triglyceride	115mg/dl	97mg/dl

Table 13: Changes in sign and symptoms.

S.No	Signs and symptoms	Before treatment	After Pachana	After Udvartan	After Rukshana	After Basti
1.	Increased body weight (Bharvruddhi)	++++	++++	+++	++	+
2.	Exertional dyspnea (Ayasena swasankashtata)	++	++	+	+	+
3.	Excessive perspiration (Swedadhikya)	+++	+++	++	+	+
4.	Continuous feeling of laziness (Utsahahani)	++	++	+	+	-
5.	heaviness in body (Gurugatrata)	+++	++	+	+	-
(++++)- Severe presentation of symptom, (+++) – Moderate presentation of symptom, (++)- Mild presentation of symptom, (+)- least/sometimes presentation of symptom, (-)- no symptoms.						

DISCUSSION

The Dravya(drug) possessing Katu (Pungent), Tikta(bitter) and Kashaya Rasa (astringent essence) and also with Lekhana Karma (scrapping) facilitates for Shoshana (drying up) and removal of liquefied or detoxified Kapha and Meda (fat). Kaphahara, Vatahara and Medohara Dravyas are helpful in the management of Sthaulya (obesity).^[7] These drugs are Agni-Deepak (appetizer) and AamPachaka (digestives). All of these prescribed Ayurvedic medicines reduce Meda(fat), Kapha, kleda (moisture), Ama & Vata. Exercise and walking normalize the fat metabolism and increase the Dhatavagni (metabolism at the level of tissues), mobilize the Medodhatu (fat) and gives fitness to the body. The line of treatment is Guru (Heavy) and aptarpana (non-nourishing (diet) therapy).

As Sthaulya is considered as Santarpanjanya vikara, Aptarpana becomes its special regimen. Considering the Hetus of patient which leads to Kapha Dosha predominance and Vata Prakopa by Avrodhajanya Samprapti following treatment protocol was given.^[8]

1. Pachana- As Doshas were in Sama Avastha Pachana was given for 3 days.
2. Udawrtana- As it reduces Kapha Dosha and melts excess of fat.
3. Swedana- Swedana (Petisweda) was given for 7 days. As patient was reluctant to take Snehapana, so to avoid Snehavyapada, Sadyavamana was given.
4. Rukshana- Rukshana was given as Shamana chikitsa for remaining vitiated Doshas with Triphala, Musta and Guduchi churna.

CONCLUSION

Sthaulya can be successfully managed with Ayurvedic Apatrapan Chikitsa. In present case study, combined use of Nidanaparivarjana, Shodhana, Rukshana 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.^[9]

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