



**International Journal of Biology, Pharmacy
and Allied Sciences (IJBPAS)**

'A Bridge Between Laboratory and Reader'

www.ijbpas.com

LITERATURE REVIEW ON STHOULYA ELUCIDATE IN AYURVEDA CLASSIC

SIROHA V^{1*} AND KORE N²

1: Ph.D. Scholar, Department of Kayachikitsa, Parul Institute of Ayurved, Parul University,
Vadodara, Gujarat, India

2: Professor, Department of Kayachikitsa, Parul Institute of Ayurved & Research, Parul
University, Vadodara, Gujarat, India

***Corresponding Author: Dr. Vandana Siroha**

Received 12th Dec. 2021; Revised 14th Jan. 2022; Accepted 7th Feb. 2022; Available online 5th March 2022

<https://doi.org/10.31032/IJBPAS/2022/11.3.1101>

ABSTRACT

Obesity is a strange collection of muscle to fat ratio, normally 20% or more over a singular ideal body weight. In Ayurveda, Obesity is portrayed as Medo Roga or Sthoulya. Constant extravagance in high-fat food, seared things, and so forth, alongside an inactive way of life prompts overabundance collection of muscle versus fat which gets stored in the various body channels. Suitable Ayurvedic inside prescriptions alongside Shodhan strategies are utilized to accomplish the best outcomes, with next to no incidental effects. Vamana, Virechan, Basti, Udvartan as indicated by vitiation of Dosha, these Shodhana strategies gives compelling outcomes. Pathya-Apathya (Diet the board) and Lifestyle adjustments assume a significant part in the administration of Obesity. Sthoulya (Obesity) is such a sickness, which gives the stage to such countless perils like hypertension, diabetes mellitus and so forth just as mental problems like pressure. The mortality and dismalness rates are more in hefty individual. It is one of the most widely recognized, yet among the most dismissed general medical issues in the current world. In rich nations, weight is more normal among the less taught, yet in helpless nations, heftiness is more normal among the exceptionally instructed. In works of art Sthoulya (Obesity)

has been portrayed under the SantarpanjanyaVikara and in Bahudoshavastha condition. Ayurvedic treatment points not just at the extreme evacuation of the causative variables of the infection, yet in addition at the reclamation of Doshika balance.

Keywords: Obesity, Sthoulya, Lifestyle problem

INTRODUCTION:

It's undeniably true that great wellbeing assumes a significant part in human turn of events. As indicated by the ideas of Ayurveda, great wellbeing depends on the balance territory of Dosha, Agni, Dhatu, and Mala. Besides, in Ayurveda there is obvious accentuation on keeping up with physical, mental and otherworldly prosperity. The World Health Organization (WHO) characterizes great wellbeing as a condition of complete physical, mental and social prosperity and not simply a shortfall of infection or sickness, which is in nearness to the meaning of good wellbeing referenced in Ayurvedic works of art. With the development of human advancement man has become increasingly more actually dormant. Presently a day the codes and directs described in the old messages of Ayurveda are disregarded. Modernization, opulence, science and mechanical improvement lead to even more stationary ways of life. By presenting oneself to this multitude of variables people unconsciously welcomed various illnesses, out of which Sthoulya is one which upsets physical, mental just as

friendly soundness of a person. Sthoulya is the unusual and abundance gathering of Medo Dhatu. Regular and additionally overabundance admission of Kapha expanding food sources, inactive way of life, absence of mental and actual exercise are the most well-known etiological elements. Sthoulya can likewise happen because of Beeja Dosha i.e., innate causes. In present day clinical science Sthoulya is contrasted and Obesity [1] and it is characterized as overabundance of muscle versus fat that represents a wellbeing hazard. It is brought about by abundance calorie consumption; however endocrine issues like hypothalamic issues, Hypothyroidism, Cushing's disorder and so on can likewise be the reason for Obesity. Heftiness can likewise be drug prompted or because of hereditary legacy.

Etymological inference of Sthoulya:

In Sanskrit punctuation every single word is gotten from a specific root word called as Moola Dhatu. Comparably the word Sthoulya is gotten from Moola Dhatu "Sth" with "Ach" Pratyaya, which stands likely for cumbersome or enormous or thick.

Meaning of Sthoulya:

A individual in whom extreme and strange increment of Medo Dhatu alongside Mamsa Dhatu is found, which result into pendulous appearance of rump, gut and bosoms is called as Sthoola. The expanded mass isn't matched by relating expansion in energy.

Obesity Definition:

Obesity can be characterized as an overabundance of muscle to fat ratio that represents a wellbeing hazard. The term is regularly saved to depict individuals who are horribly overweight, while the term overweight is all the more often used to assign gentle level of adiposity. Roughly 20% of overabundance over positive weight confers a wellbeing hazard.

Meda:

Sthoulya being a Dushya predominant confusion, Meda plays a significant job in its pathogenesis. Meda is a significant Dhatu among Sapta Dhatu and its fundamental capacities is to smoothen the body by its Sneha Property. "Medhyati Snihayati Anen Iti Medah" Synonyms of Meda 1. Mamsaja and Mamsatej: Medodhatu is shaped from Mamsa Dhatu by Mamsa Agnipaka. In this way, it is known as Mamsaja or Mamsatej. 2. Asthikrita: Meda is answerable for development of Asthi Dhatu so it is known as Asthikrita. 3. Vasa and Vapa : The greasy

substance which situates in Mamsa is called as Vasa and when it is stored in mid-region, it is named as Vapa. 4. Majja : Asthi Madhya Gata Sneha is known as Majja. 5. Goda : "Mastishka Gata Sneha" is known as Goda or Mastulunga. The complete amount of Meda is 2 Anjali and the Vasa is 3 Anjali. In this manner, absolute Meda content of body is listed as 5 Anjali. In Sthoulya, this extent is viewed as raised. Karma of Meda Dhatu The fundamental elements of Meda Dhatu are Snehana, Sweda, Drudhatva, Asthipusti and Netra, Gatra, Snigdhatva. Snehana: Sneha property keeps up with the gloss of skin, hairs and eyes and so on Sweda: The capacity of Meda is to deliver Sweda. Sweda is referenced as Mala of Meda. Asthi Pusti: Another capacity of Meda is sustenance of additional Dhatu i.e., Asthi. Drudhatva: It is conceivable with the assistance of Snayu, the Upadhatu of Meda. Both Snayu and Sandhi are straightforwardly identified with the Asthi Dhatu. Snayu provides supports to Asthi and Sandhi helps in joint development. Netra and Gatra Snigdhatva: These are the side effects of Sthoulya which might emerge through expanded Snehana capacity of Meda. Medovaha Srotas The channels, which give sustenance to the Medodhatu or the vessels conveying the nutritive material up to the site of Medodhatu can be considered as

Medovahasrotas. As an assessment of different creators, it very well may be related with vessels of perinephric tissue or omentum and so on Utpatti as indicated by Mahabhuta hypothesis According to Charaka (Ch.Chi.15/29-30), the Rakta Dhatu is joined with Vayu, Tej, Apa and is set by the Ushma so it gets changed over into Mamsa. This Mamsa is again processed by Mamsagni, Medodhatvagni and gets joined with the nature of Apa and SnigdhaDravya. Like this it at long last gets changed over into the Medodhatu. Nidana Panchaka The requirement for appropriate conclusion of an infection prior to arranging its administration needs no unique accentuation as it has been properly depicted by Charaka. He says; Rogamadau Parikshet Tato Anantaram Aushadham | It implies that the Rogapareeksha ought to be done appropriately prior to recommending the meds. Nidana means to show up at the convincing determination of the illness later due thought of the NidanaPancaka viz., Hetu (Etiology), Purvarupa (Prodromal manifestations), Rupa(Symptomatology), Upashaya (Relieving and Aggravating elements) and Samprapti i.e., Pathogenesis. NidanaThe information on Nidana helps the doctor towards therapeutics as well as in prompting about Pathyaapathya. The

vitiation of Meda and Sleshma are supposed to be answerable for Sthoulya. Charaka has focused on favoring the exogenous causes while Sushruta and Vagbhatta referenced the endogenous reasons for Sthoulya. Exogenous causes relates to the weight control plans that has the capability of expanding the Meda or muscle to fat ratio where as Dosha, Dhatu, Mala, Srotas and so on goes under endogenous causes. To put it plainly, Nidana of Sthoulya can be sorted under four classifications; ▪Aharaja Nidana ▪Viharaja Nidana ▪Manasika Nidana ▪Anya Nidana Samprapti Series of obsessive occasions occurring during the excursion of a solid human body towards any illness s known as Samprapti. Association of Dosha, Dushya, Srotas, Agni, Ama and so forth is required for sickness sign. They are known as Samprapti Ghataka. Then again, Acharya Sushruta's idea of Kriyakala portrays the mode and phases of the advancement of illness. A decent information and comprehension of Samprapti is exceptionally fundamental for early conclusion and visualization. It is additionally needed for adjusting preventive and therapeutic measures. To study and comprehend the Samprapti of Sthoulya it is managed under the four headings: 1.Samanya Samprapti 2.Samprapti Ghataka 3.Naidanika Samprapti

4. Samprapti dependent on Kriyakala. Purvarupa are the indications that show up preceding the total sign of the infection. None of the Ayurvedic texts has depicted the Purvarupa of Sthoulya. Acharya Charaka, in Nidana Sthana, has referenced comparative pathogenesis of Prameha and Sthoulya the explanation being that in both there is vitiation of Kapha and Meda. In this manner, Purvarupa of Prameha and Medovaha Strotodushti Lakshana can be considered as Purvarupa of Sthoulya. These are as per the following: ▪Atinidra ▪Tandra ▪Alasya ▪Visra Sharira Gandha ▪Anga Gaurava ▪Anga Shaithilyata and so on As per Charaka, any place Purvarupa of infection are not referenced, the powerless appearance of Rupa should be considered as Purvarupa of the concerned illnesses. Remembering the perspectives on Acharya Charaka, Lakshana of Kapha Vriddhi like Alasya, Angashaitilya, Madhurasyata, Atinidra, Atipipasa etc. may likewise be considered as Purvarupa. Roopa Roopa or Lakshana is the main indicative boundary of an infection. At this stage, Dosha Doosha Samurchana is finished and the beginning of the infections happens, which brings about the symptomology of the illness. These sign and indications might change every now and then as per the advancement of the sicknesses.

Certain manifestations may recently show up while some might vanish as the illness advances. We may not track down every one of the manifestations in each tolerant at a time.

The symptomatology of Sthoulya:

It is affirmed by Acharya in wide way. To get them, it is explained as follow. As indicated by Charaka, Cala Sphika, Cala Udara, Cala Stana, Ayathopchayotsaha, and Ati Meda-Mamsa Vrddhi are hard to miss in every one of the patients of Sthoulya, consequently these might be considered as cardinal manifestations or Pratyatma Lakshana. Other than these cardinal side effects, Ashta Dosha of Sthoulya viz. Ayusyahrasa, Javoprodha, Kricha Vyavayata, Daurbalya, Daurgandhya, Svedabadha, Ksudha Atimatrata, Pipasa Atiyoga are the most conspicuous clinical elements of Sthoulya as described by Charaka, Susruta and Ashtanga Samgraha. Chikitsa Chikitsa overall is characterized as the activities, which bring the harmony of Dhatu. Acharya Charaka has additionally enhanced the extent of the term Chikitsa.

As indicated by him, "Chikitsa points not just at the extreme expulsion of the causative variables of the sickness, yet in addition at the reclamation of the Doshika equilibrium". While portraying the

Chikitsa of Sthoulya, Charaka has said that it is truly challenging to treat Atisthoola individuals on the grounds that, assuming Karshana treatment is applied then it prompts further exacerbation of currently exasperated Jathragniand Vayu and assuming Brimhana treatment is applied it further increment the Meda. General standards of the board of any problem is; Samshodhanam Samshamanam Nidanasya Cha Varjanam | Thus, in any issue the executives is separated into 3 sections. 1.Samshodhana 2.Samshamana 3.Nidana Parivarjana The administration of Sthoulya is additionally clarified exhaustively as follows; Bahya Chikitsa Ruksha Udvartana is the Bahi Parimarjana Chikitsaindicated for the administration of Sthoulya. Acharya Charaka has additionally referenced RookshaUdavartana for Sthoulya. Vagbhata has referenced the advantages of RookshaUdavartana overall as Kaphahara, Medasa Parivilayana, Sthirikarnam Angam and so on Samshodhana Therapy The treatments in which the vitiated Dosha are killed in the wake of preparing them from their separate locales by Urdhva or Adha Marga from the body is known as Shodhana treatment. Being a syndromic element (Bahudosha Lakshana), Samshodhana treatment is strongly suggested for Sthoulya the executives by Charaka. As per Vagbhata,

Atisthoulya patients with Adhika Doshaand Adhika Bala ought to be treated by Samshodhanatherapy. Portrayal of different Poorvakarma and Pradhanakarma of Shodhana for Sthoola given by different Acharya is as per the following: Snehana Karma is constantly confined for the patients of Sthoulya. Be that as it may, Lekhaniya, Medohara properties and Sthulatvahara Karma of Taila are depicted in Ayurveda. Thus, on exigency utilization of Taila is suggested. Swedana for corpulent patient is contraindicated however assuming fundamental Mrudu Sweda is encouraged. Anagneya Sweda referenced in Sutrasthana of Charaka can likewise be taken on. Vamana Most of the texts have precluded the utilization of Vamana Karma because of powerlessness to bear the strength of medication and treatment causing Pranaparodha (perilous condition). Virechana Though Virechana has not been suggested for patients of Sthoulya yet Virechaka Dravya referenced in Ayurvedic texts like Haritaki, Katuki, Aragvadha, Trivruta, Danti Dravanti etc., which have Medonashaka property could be applied to the patients of Sthoulya. Essentially additionally Virechana Karmaseems to be productive for the administration of Sthoulya. Basti Ruksha, Ushna and Tikshna Basti are recommended

by Acharya Charaka for Sthoulya Chikitsa. Various Basti Kalpa are additionally referenced in Ayurvedic texts yet Lekhana Basti is considered as the best treatment for Sthoulya/Medovridhi. Sharangdhara has given an unmistakable depiction with respect to the properties of Lekhana Dravya and attributes of Lekhana Basti. Raktamokshna Maharshi Kashyapa and Bhavamishra have suggested Raktamokshana for the treatment of Sthoulya in Chikitsasthana, Medasvi Dhatri Chikitsa. Charaka has additionally referenced Raktamokshana for treatment of Santarpana Janya Vyadhi including Atisthoulya. Nasya Sushruta has suggested the utilization of Triphaladi Taila Nasya in the patients of Medovridhi. Samshamana Therapy Shamana is characterized as the treatment, which doesn't do Shodhana of the Dosha, not upset the condition of adjusted Dosha and at the same time bring balance of unevenness of Dosha. Langhana is fitting in Santarpana Janya Vyadhi, Amashyotha Vikara, Shleshmika Vikara, Rasaja Vikara and it is the best solution for the Sama state of illness. Thus, every one of the ten sorts of Langhana can be applied for the patients of Sthoulya as per Rogi-Roga Bala. Charaka Samhita has given treatment of Sthoulya in after words. Master Cha Apatarpanam Chestam Sthoolanam Karshanam Prati |

Vatagnanyanaapanani Sleshma Medo Harani Cha || i.e., Administration of Guru and Apatarpana articles which have extra Vata, Shleshma and Medonashaka properties are considered as great for Shamana treatment. Chakrapani has clarified that Guru property is needed to lighten vitiated Agni along these lines stifling the Atikshudha. Alongside Guru Dravya, Apatarpana Dravya gives non-sustenance and in this way prompts exhaustion of Meda. For instance, Madhu have Guru and Ruksha properties, henceforth it is great for the executives of Sthoulya. Gangadhara has deciphered that Guru Property is appropriate to ease Tikshnagni and vitiated Vata especially Kosthagata Vata and along these lines Atikshudha, and Apatarpana property is what doesn't give Tarpana (sustenance) and cause decrease of Meda. The medications got ready for Sthoulya ought to have Deepana & Pachana property to upgrade Agni. They ought to likewise be Amapachaka as check of Medovaha Srotas by Ama is principle factor for Medoroga. The medications should have Rookshna and Chedana property to deliver Srotovishodhana. Alongside these Teekshna, Ushna, Rooksha, Guna Dravya are advised as they are inverse to Manda, Snigdha and Sheeta Guna of Kapha and Meda. Once more, it is informed that the causative

elements of Karshyai .e.g, Ruksha Annapana Prayoga, Langhana, Pramitashana, Shoka, Nidra Vega Vinigraha, Ruksha Udavartana, Krodha and so forth can be rehearsed as line of treatment for Sthoulya. Some significant references about Shamana Chikitsa of Sthoulya are referenced as follows; ▪Some SamshamanaYogalike Guduchi, Bhadramusta, Triphala, Takrarishta, Mukshika, Vidangadi Lauha, Bilvadipanchmula and Shilajatuwith Agnimantha Svarasa are prompted for delayed period. ▪In CharakaSamhita, medications and arrangements like Karshana Yavagu of Gavedhuka, Lekhaniya Mahakashaya, Bibhitaka, Venuyavaand Madhudaka are pushed as Medonashaka and Lekhana.▪Akasha and VayuMahabhuta prevailing Dravyaare ascribed to have Laghavakara activity, so these can be utilized for the board of Sthoulya. ▪Katu and Kashaya Rasa are having Karshana, Upchayahara properties, while Tikta Rasa is having Lekhana and Medo Upshoshana Karma.

DISCUSSION:

According to Charaka Acharya, the rule of treatment for hefty is "Weighty and non-feeding diet" (GuruApatarpana). Since by ideals of their weight such eating regimens would limit the power of the exasperated force of assimilation and because of their

non-sustaining nature, they would assist with lessening fat. Ayurveda stresses the all encompassing consideration and treatment in any illness. Otherworldly, mental and physical, these each of the three angles are given significance in the administration of infection. Insignificant admission of food and surpass use of energy would be the fundamental guideline to dispose of heftiness. Presently a day Ayurvedic the board is perceived as the better choice for those whom are experiencing the cure of heftiness (Sthoulya). Diets and beverages that lighten Vata and Kapha and which can lessen fat. Bowel purge with drugs that are sharp (Tikshna), ununctous (Ruksha) and hot. Unction with ununctous (Ruksha) drugs. Admission of Guduchi (*Tinospora cordifolia* Miers), Musta (*Cyperus rotundus* Linn), Haritaki (*Terminalia chebula* Linn), Bibhitaka (*Terminalia belerica* Roxb) and Amalaka(*Emblica officinalis*Gaertn). Organization of Takrarishta. Organization of honey. Admission of Vidanga (*Embelia ribes* Burm F.), Nagara (*Zingiber officinale* Rose.), Yavaksara (a planning of grain containing among others sodium and potassium bicarbonate), powder of dark iron alongside honey and powder of Yava (*Hordium vulgare* Linn.) and Amalaki (*Emblica officinalis* Gaertn).

CONCLUSION:

Prevention is superior to fix, you should avoid potential risk rather following treatment later expansion in weight. When you are corpulent it is truly challenging to treat yourself. The individual experiencing stoutness or inclined to the corpulence ought to be urged to stay away from the food varieties with high calories, high sugar substance. Follow up of appropriate Dinacharya, legitimate Vyayama. Asana and Pranayama like Paschimottanasana (the back extending present) Bhujangasana (the cobra present), Pawanmuktasana (the breeze delivering present) are useful in the decrease of muscle versus fat. Customary activities like lively strolling, running and swimming in morning hours for the length of 30-45 minutes and this span ought to be broadened step by step as could be expected.

REFERENCES:

- [1] Amin H. Biochemical and anthropometric profile of different prakriti (constitution), International Journal of clinical and experimental physiology, 2015; 2(1): 16 -22.
- [2] Charak, Charaka Samhita, Sutra Sthana, Ashtouninditiya Adhyaya In: 21/3-4, Tripathi B. vol-I 4th ed 1995, Chowkhamba

Surbharti Prakashan, Varanasi: 1995;p.398.

- [3] Harison T. R. Harison's Principle of Internal Medicine Evaluation and Management of Obesity, In: 416 Vol- II ed 19th;p.2392
- [4] Gaurav Kumar, Sharma Meenakshi, Kaundal Ramesh, Rana Ashwani, Sharma Om Prakash, A Review on Sthoulya (obesity) and its management in Ayurveda, 2014; 2(6): 66.
- [5] Tortora G. C. Principles of anatomy and physiology, Metabolism and Nutrition, In: 25 ed11, p.986.
- [6] World Health Organization, The Global Burden of Diseases. Update 2004. Part 2, causes of Death. Geneva, Switzerland: WHO; 2008;p.8-10
- [7] Charaka, Prof. Priyavat Sharma (ed), Charak Samhita, Sutrasthana, Ashtouninditiya Adhyaya, In; 21/4, Vol-I, Ist ed, Chowkhamba Sanskrit Series, Varanasi: 1976;p.144-145.
- [8] Charak, Dr. Ram Karan Sharma, Vd Bhagwan Dash (eds), Charak Samhita, Sutrasthana, Ashtouninditiya adhyaya In:

Chowkhamba Sanskrit Series,
Varanasi: 21/21-28, Vol-I: P. 378-
380.

[9] Charak, Dr. Ram Karan Sharma,
Charak Samhita, Vimanasthana,
Srotovimana Adhyaya, In: 5/16,
Vol-II, Ist ed, Chowkhamba
Sanskrit Series Office Varanasi:
1977;p.175.