



# International Journal of Indian Medicine

[www.ijim.co.in](http://www.ijim.co.in)

**ISSN: 2582-7634**

**Volume - 4, Issue - 2**

**February 2023**



# IJIM

INDEXED



# International Journal of Indian Medicine

Access the article online



International Category Code (ICC): ICC-1702

International Journal Address (IJA): IJA.ZONE/258276217634

## SYSTEMIC REVIEW AND ANALYSIS OF RESEARCH ON OBESITY (STHOULYA)

Pawar A.<sup>1</sup>, Kulkarni P.<sup>2</sup>, Gogate V.<sup>3</sup>, Dongare P.<sup>4</sup>

1. PG Scholar, Dept. of Kayachikitsa, GACH Nanded.
2. Assistant Professor, Dept. of Kayachikitsa, GACH Nanded.
3. Associate Professor, Dept of Kayachikitsa, GACH Nanded.
4. Professor, Dept of Kayachikitsa, GACH Nanded.

### Abstract:

In 21<sup>st</sup> Century, With its Continuous Changing Lifestyles, Environmental and Dietary Habits have made man the victim of many Diseases. *Sthoulya* is one of them and it affects Someones Social, Physical and Mental features. Obesity is a common metabolic disorder. It occurs due to vitiation of *Kapha* and *Vata*. Frequent and increased intake of food which increases *Kapha* and *Medodhatu*. it is a chronic disease, Prevalent in both developed and developing countries. As obesity not only reduces life span of an individual but also lead to life threatening complications like Stroke, Ischemic Heart Disease (IHD). *Sthoulya vyadhi* explained by *Acharya Charaka* in *Santarpanjanya Vyadhi* and it is considered as one of the *Ashtoninditiya Purusha*. The actual Pathology in *Sthoulya* Patient is due to Obstruction of all *Strotasas* by *Meda*, There is *Vridhhi* of *Koshtasthita Saman Vayu* which in turn causes *Atisandhukshana* of *Jatharagni* leads to Rapid consumption of food. *Acharya Charaka* has Prescribed *Apatarpana Chikitsa* as the main *Chikitsa* of *Sthoulya*. *Lekhana* is the treatment which can removed abnormally increased *Sama Medodhatu*. *Pathya Apathya* and Lifestyle Modification play important role in the management of Obesity. In modern science there is Appetite Suppressant, Lipid reducing drug and surgical procedures are also available but they have more sideeffect and limitations also so there is need of treatment modality with fewer Sideeffect. Prevention of this condition is the need of the hour. So here an attempt has been made to analyze the research work about to manage Obesity(*Sthoulya*). In this Article Systemic Review of 4 Research ( held at Government Ayurved college and Hospital Nanded) had been carried out.

**KEY-WORDS:** *Sthoulya, Obesity, Rukshana, Lifestyle Disorder.*

### Corresponding Author:

**Vd.Apeksha Prakash Pawar**

PG Scholar, Dept. Of Kayachikitsa,  
GACH Nanded.

Email: [apekshapawar236@gmail.com](mailto:apekshapawar236@gmail.com)



**How to cite this article :** Pawar A., Kulkarni P., Gogate V., Dongare P. Systemic Review and Analysis of Research on Obesity (Sthoulya). J Ind Med 2023;4(2):16-20

**INTRODUCTION:**

The World Health Organization has defined Obesity as a condition with excessive fat accumulation in the body to the extent that health is adversely affected.<sup>(1)</sup> It results from a positive energy imbalance expressed by Body Mass Index (BMI) of 25-29.9 and >30 kg/m<sup>2</sup> respectively. WHO labelled Obesity as a most visible but most neglected health problem worldwide<sup>(2)(3)</sup>. It has become a major public health problem in both developed and developing countries.

According to Ayurveda, Obesity can be correlated with *Sthoulya* that originated from *Kapha* and *Medodushti*. *Sthoulya* is one of the major Diseases under *Santarpanjanya Vyadhi* caused due to *Dushti of Medovaha Strotasa*. It is an Abnormal and Excessive accumulation of *Meda Dhatu* in the body<sup>(3)</sup>. *Acharya Charaka* considered *Atisthula* as one among *Ashtonindita Purusha*.<sup>(4)</sup>

*Medas* increased in the body due to lack of Physical Exercise, Sleeping during the daytime and consuming food which increases *Kapha Dosha*. All the channels that continuously supply nutrient to other tissues are blocked by *Medas* (fats). So further tissue are not properly formed and only *Medas* get accumulated because of these unequal distribution of fat in the body. The Person is called *Sthula*. In *Sthoulya Acharya Charaka* describes *Ayushorhasa*, *Kshudhadhikya*, *Pipasadhikya*, *Nidradhikya*, *Swedadhikya* and *Ayasena Shwaskashta*<sup>(5)</sup> which affect Someones Social, Physical and Mental Status. Prevalence rate of *Sthoulya* in India is 10.95%.<sup>(6)</sup>

There are different treatment modalities described by modern science for Management of Obesity like various Appetite

Suppresant, lipid reducing drug, Physiotherapy, Surgical procedures but they have sideeffects and limitations. therefore it is necessary to search for simple but effective treatment modalities in *Ayurveda*. *Ayurveda* helps to follow better and healthy lifestyle. *Acharya* had mentioned *Gurucha Apatarpana* as a line of treatment in *Sthoulya*. *Rukshana*, *Udvardana*, *Sadyavamana*, *Basti* are some of treatment modalities of *Apatarpana* described by *Acharya Charaka*<sup>(7)</sup>.

At GACH Nanded different studies were carried out to rule out their significance in management of *Sthoulya*. In this Article Systemic Review of 4 Research work held at GACH Nanded (1990 – 2022) had been carried out.

**MATERIAL AND METHODS :**

Post Graduate Thesis Work done in Post Graduate Department at GACH Nanded.

**Study 1 – Vd. Ravindra Kute (2011)**

In this Study, There are total 60 number of Patients which were Randomly divided into 2 groups.

**Group A Trial Group**

Drug *Triphala Kwatha* with *madhu* (internally) with *Musta churna Udwardana* along with *Pathya- apathya* for 60 days

Dose 40 ml *Triphala Kwatha* and 10 ml *madhu* BD in the morning and Evening on Empty stomach

*Musta churna Udwardana* applied in the morning for 21 days.

**Group B Control Group**

Drug *Triphala Kwatha* with *madhu* with *Pathya- apathya*.

Dose 40 ml *Triphala Kwatha* and 10 ml *madhu* BD on Empty Stomach.

Table no.1 Total effect of Therapy on BMI

	Trial Group		Control Group		Total	
	No.of pt.	%	No.of Pt.	%	No. of Pt.	%
Complete improvement	3	10%	0	0%	3	5%

Marked Improvement	4	13.33%	0	0%	4	6.67%
Moderate improvement	16	43.34%	3	10%	19	31.67
Mild Improvement	7	23.33%	22	73.33%	29	48.33 %
No improvement	0	0 %	5	16.67%	5	8.33%

By Study result, it is suggested that Group A shows better result in reducing the BMI of patient.

### Study 2 - Vd. Kishor Patil (2015)

In this Study there are total 60 no. of pt. which were randomly divided into 2 groups.

#### Group A Trial group

Drug *Triphaladi Kwatha* was given along with *Pathya - apathya* for 90 days.

Dose 40 ml *Triphaladi Kwatha* twice a day empty stomach.

#### Group B Control group

Drug *Pathya - apathya* for 90 days.

Table no.2 Total effect of Therapy on BMI

Decrease in BMI	Trial Group	Control group
< 1	4 (13.33%)	15(50%)
1 - 2	21(70%)	13(43.33%)
>2	5(16.66%)	2(6.66%)

By Study result, the treatment of Trial group was found more significant than control group.

### Study 3 – Vd. Pooja Bhagwan Bidade(2017)

In this Study, There are total 104 no.of patient which were randomly divided into 2 groups.

#### Group A Trial group

Drug *Triphaladi taila* was given along with diet and exercise for 30 days.

Dose 30 ml *Triphaladi Taila* once a day along with *Koshna jala* in the morning, empty stomach.

#### Group B Control group

Drug only diet and exercise was advised for 30 days.

Table no.3 Effect of therapy according to % Decrease in BMI

Sr.no	Improvement Grade	criteria	No.of Pt.	
			Group A	Group B
1	Excellent	75-100%	18	8
2	Good	50-70%	12	8
3	Moderate	25-49%	19	16
4	Poor	00-24%	03	20

% of Decrease in BMI was observed more in Pt. of Group A than in pt. of Group B. According to % decrease in BMI it is concluded that *Triphaladi Taila* is effective in *Sthoulya*.

### Study 4 Vd. Deepika Arunrao Chakole (2018)

Total no.of Pt. i.e. 60 were divided into 2 groups with 30 Pt. in each group based upon Random selection.

#### Group A Trial Group

Drug combination of *Triphala, Musta and Chitraka Churna* with Exercise and diet for 45 days

Dose 9 gm of combined *churna* given twice a day before meal an empty stomach.

#### Group B Control group

Appropriate diet with calories restriction and suitable exercise such as brisk walking for 30-45 min for 45 days.

Table no.4 Assessment of Sr.insulin level for improvement in result.

Improvement in result	Sr.Insulin	Group A		Group B	
		No.of Pt.	% relief	No.of Pt.	% relief
Complete	Comes to normal level (upto 25 mll/U)	24	80%	19	63.33%
Marked	25% more than normal (25.1 to 31.7)	3	10%	7	23%
Moderate	50% more than normal Level (31.8 to 42.6)	3	10%	4	13.3%
Mild	75 % more than normal	0	-	0	-

By Study result, The treatment of Trial Group A was found more significant than Group B.

#### DISCUSSION

Obesity is a metabolic disorder which happens as majority as a result of faulty lifestyle. In *Sthoulya* abnormal formation of *Medodhatu* occurs and no other *Dhatu* gets properly nourished. The Pathology Suggest that the *Vata* gets trapped inside the stomach which further increases the Digestive fire and the patient feels frequent need of meal and if the meal is not provided the increased *Agni* will start to digest normal *Dhatu*.

In the 1<sup>st</sup> study, There was a use of *Triphala Kwatha* with *madhu* with *Musta churna Udwartana* as a trial drug and only *Triphala Kwatha* with *madhu* were used as control drug. Statistical study were showed Trial drug is more effective than control drug shows better result in reducing the BMI of patient due to *laghu*, *Ruksha Guna*, *Katu Vipaka*, *Agni mahabhuta* dominance. With the help of all these properties *Triphala Kwatha* and *madhu* along with *Musta churna Udwartana* breaks down pathogenesis of *Sthoulya*.<sup>(8)</sup>

In the 2<sup>nd</sup> Study, There was a use of *Triphaladi Kwatha* along with *Pathya - apathya* as a Trial group and only *Pathya - apathya* as a control

group. Statistical result shows the total effect of Therapy on BMI shows Significant result in Trial group than Control group. *Triphala Kwatha* due to *laghu*, *Ruksha*, *lekhana* properties shows *Medoghna*, *Kaphaghna* effect which plays important role in pathogenesis of *Sthoulya*.<sup>(9)</sup>

In the 3<sup>rd</sup> Study There was use of *Triphaladi Taila* with *Koshna jala* as a Trial Group and only diet and Exercise was advised in control group, the Statistical result shows there is % of decrease in BMI was observed more in trial group so it is concluded that *Triphaladi Taila* is effective in *Sthoulya*. *Triphaladi Taila* having *Kapha - Pitta Shamaka*, *Deepana*, *Kledanashaka* properties. It also correct *Dhatvagni mandya*.<sup>(10)</sup>

In the 4<sup>th</sup> Study, There was combination of *Triphala*, *Musta* and *Chitraka churna* along with Exercise and diet used as a Trial group and appropriate diet with Calories Restriction and suitable exercise such as brisk walking for 30-45 min as a control group the Statistical result shows treatment of trial group was found more significant than control group. All drug in *Rukshana churna* have *Shothahara* property, *Deepana*, *Pachana* and *Rukshana Karma*. This help to remove *Sthanika Shotha* and thus help to lower the Sr.Insulin level.<sup>(11)</sup>

## CONCLUSION

In this Article, Four Research Article Studies on the management of Obesity(*Sthoulya*). All these works had been carried out on *Shamana Chikitsa*. Review shows better result along *Shamana Chikitsa* with following *Pathya - apanya* in such lifestyle dependant disease like Obesity (*Sthoulya*).

## REFERENCES

1. D.R.Wagner and V.H. Heyward, " Technique of body composition Assesment : A review of laboratory and field methods " Research quarterly for exercise and sport, Vol. 70 no.2, Pg 135-149, 1999,2014 control CFD Prevention. Overweight or Obesity : adult obesity fact.
2. E.S Kasu , A Ayim and J Tampouri, Assessment health care service among health care workers in holy Karbala governorate, " Journal of Biology, Agriculture and Healthcare, Vol 5, 2015.
3. World Health Organization, Obesity : Preventing and managing the Global Epidemic, World Health Organization, Geneva, Switzerland, 2000.
- 4.Vaidya Yadavji Trikamji Acharya, Charaka Samhita, Chaukhamba Prakashana, Varanasi, Reprint 2013, Sutrasthan 21/3.
5. Vaidya Yadavji Trikamji Acharya, Charaka Samhita, Chaukhamba Prakashana, Varanasi, Reprint 2013, Sutrasthan 21/4.
6. <http://www.icjmph.com> – Community based study on prevalence of Obesity among urban population of Shivamogga, Karnataka, India, kanchana Nagendra, nandini C. mangala Belur, International Journal of Community Medicine and Public Health.
- 7.Vaidya Yadavji Trikamji Acharya, Charaka Samhita, Chaukhamba Prakashana, Varanasi, Reprint 2013, Sutrasthan 21/20.
- 8.Vd.Ravindra Kute, To Study efficacy of *Triphala Kwatha* and *Madhu*(internally) along with *Musta churna Udwartana* in *Sthoulya*, Department of *Kayachikitsa*, GACH Nanded.
- 9.Vd.Kishor Patil, Study of the effect of *Charkokta Triphaladi Kwatha* in *Sthoulya* with Special reference to BMI, Department of *Kayachikitsa*, GACH Nanded.
- 10.Vd.Pooja Bidade, Study of efficacy of *Triphaladi Taila* in *Sthoulya* with Special reference to Overweight individuals, Department of *Kayachikitsa*, GACH Nanded.
- 11.Vd.Deepika Chakole, A Randomized, open labelled, controlled clinical Study of *Rukshaniya Dravya*( *Triphala, Musta, Chitraka*) in Individuals with central obesity and insulin resistance with special reference to *Sthoulya Chikitsa*.

**Source of Support : None declared**

**Conflict of interest : Nil**