

Assessment of causes of obesity in present era**Pravin Prabhakar Patil*¹, Arun S. Dudhamal²**

1. Assistant professor, Sanskrit Samhita Siddhant Department,
2. H.O.D. and Associate Professor, Rognidan Dept.,

Ayurved Mahavidyalay, Sion, Mumbai, India

*** Corresponding author:** E-mail: drpravinpatil2011@gmail.com; Mob. No. 9765590061**ABSTRACT-**

Now a days, in this present era “*santarpanottha vikaras*” (diseases due to excessive nutrition) are increasing day by day. Due to this type of lifestyle, there is dushti of meda dhatu. In which meda dhatu is over nourished and due to that rest all dhatus are not properly nourished to serve the body.

Ayurveda which is 5000 years old science of life, meant for physical, mental and social well being of individual has described 8 persons are despicable in its charak samhita sutrastaana “*asthauninditiya adhayaya*” which includes over obesity¹.

In chapter 23rd, charak samhita, sutrastaana “*santarpaniya adhayaya*” acharya charak has mentioned all the santarpanottha causes for santarpanjanya vyaadhis which includes obesity. So here, a survey was done of 100 obese patients to assess the causes of obesity.

KEYWORDS:

obesity, *sthaulaya*, causes, *santarpanottha*, *meda dhatu*,

INTRODUCTION:

Growing prevalence of obesity worldwide is an increasing concern surrounding the rising rate of other metabolic disorders like diabetes, coronary and cerebrovascular diseases with the consequent health and financial implications for the population. Obesity promotes a cascade of secondary pathologies.

Over obese person has 8 defects- shortening of life span, hampered movement, difficulty in sexual intercourse, debility, foul smell, over sweating, too much hunger and excessive thirst.²

Sthaulaya is not only included in asthauninditiya but also in shleshma nanatmaja³ atinindita¹, ati brihmana nimittaja⁴ and bahu dosha janita vikaar.⁵

Moreover sushruta has emphasized on metabolic disturbances

(dhatvaagnimandya) in the etiopathogenesis of sthauila.⁶

AIM AND OBJECTIVE:

To assess the causes of obesity in obese individuals in present era mentioned in classical ayurveda texts.

MATERIAL AND METHODS:

Ayurved classical texts were referred to study causes of obesity and a survey was carried out in 100 obese patients in a camp to find out which are the causes mentioned in our texts are seen in present era individuals.

CRITERIA OF DIAGNOSIS:

The diagnosis was mainly based on the clinical presentation as mentioned in the ayurveda texts as well as along with body mass index (BMI).

CRITERIA FOR SELECTION OF PATIENTS-

Patients in the age group of 20-60 years were selected for the present study.

INCLUSION CRITERIA-

Subjective criteria-

Patients having clinical presentation of sthauila (obesity) as mentioned in the ayurveda texts.

Objective criteria-

- 1) BMI (body mass index).
- 2) Weight.

For the present study BMI more than 25 was taken considering the patients as obese.

BMI calculated on the basis of height and weight of each individual.

BMI calculated by its formula = weight (in kg) / height (meter)².

EXCLUSION CRITERIA-

Patients in the age group of less than 20 years and more than 60 years were not included for the study.

Obese patients suffering from hypothyroidism, obesity due to hormonal imbalance, cardiovascular diseases, hemiplegia, associated with severe hypertension and from other such diseases in which the patient cannot follow his routine physical activities were excluded.

Very obese patients having BMI more than 35 were excluded.

CRITERIA OF ASSESSMENT-

- a. All Santarpanotha nidana (unctuous, sweet, heavy, sticky, newly made alcohol, new grains, marshya and aquatic animals flesh, jaggery preparations) consumption of all these food in excessive amount.⁷
- b. Adhyasana²
- c. Divaswap⁷
- d. Avyavaya²
- e. Avyayama²
- f. Shayya-Asana sukha⁷
- g. Achintanata²

h. Bijadosha²

DEFINATION OF OBESITY (STHAULAYA)-

A person in whom there is excessive accumulation of meda(fat/adipose tissue) and mamsa(flesh/muscle tissue) leading to flabbiness of hips, abdomen and breast and suffers from deficient metabolism and energy.⁸

WHAT IS MEDA DHATU?

Meda dhatu is formed from mamsa dhatavagni. Meda dhatu consist of drava and snigdha guna. Medovaha strotas are affected due to lack of physical exercise, day sleep, excessive intake of fatty food and alcoholic drinks.⁹

SAMPRAPTI--

Vayu, due to passage having been obstructed with fat, moves about abundantly in kostha and thus stimulates digestion and absorbs food. Hence the person digests food quickly and desires excessively the intake of food. These two- agni and vayu as such burn the obese like the forest fire burning the forest. In the event of excessive increase of fat, vayu and other doshas suddenly give rise to severe disorders and thus destroys the life shortly.¹⁰

There is excess of fat and futher only fat is accumulated and not the other dhatus so, thus the life span is shortened, because of laxity, softness and heaviness of fat there is hampering in movement, due to non abundance of semen and the passage having been covered with fat,

there is difficulty in sexual intercourse, due to disequilibrium of dhatus there is debility, foul smell is due to defect and nature of fat and also sweating due to association of medas with kapha, its oozing nature, abundance, heaviness and intolerance to physical exercise, there is over sweating, because of intensified agni and abundance of vayu in kostha there is excessive hunger and thirst.²

CAUSES-

Causes is divided into-

1) Aaharatmaka nidan-

- i. Santarpana (over saturation)²
- j. Adhyasana (consumption of food when earlier food is not yet digested)²
- k. Excessive consumption of guru (heavy), madhur(sweet), sheeta(cold) and snigdha(unctuous food)²
- l. Slimy substances, new cereals.¹¹
- m. Nava madya(use of newly made alcohol)¹¹
- n. Gramya rasa (meat of marshy animals) audak rasa(meat of aquatic animals)¹¹
- o. Paya vikar (milk and its products)¹¹
- p. Dhahi(curd), sarpi(ghee), ikshu vikar (jaggerys preparation)¹¹
- q. Shali(rice), godhum(wheat), masha(blackgram)¹¹
- r. Bhojanutar jalpan

2) Viharatmaka nidan-

- a) Divaswap (Indulgence in day sleeping)²
- b) Avyavaya (lack of sexual life)²

- c) Avyayama (no exercise)²
- d) Shaya-Asana sukha (luxurious sitting)⁷
- e) Bhojanutar snana(bathing after taking meals)
- f) Bhojanutar nidra (sleeping soon after meals)

3) Mansika nidan-

- a) Achintanat (Lack of anxiety)²

4) Other-

- a) Bijadoshasvabhavat (Genetic defect)²

IMPACT OF STHAULAYA-

Disproportionately increased medas is accountable for several serious consequences said in charak and sushrut-

- Ayuhrasa (decreased life span)²
- Javoparodha (decreased in enthusiasm and activity)²
- Krichravayavayata (difficulty in sexual act)²
- Dourbalya (decrease in strength)²
- Dourgandhya (bad odour)²
- Swedabadha (excess perspiration)²
- Kshut pipasadhikya (excessive hunger and thirst)²
- Mandotsaham (less activity referring to sedentary lifestyle)
- Atisnigdham (excessive intake if fatty substance)²
- Atisthaulayam (gross obesity)
- Mahashanam (excessive eating)²

OBSERVATIONS-

In the study, 100 obese patients were assessed, out of that-

Maximum number of patients were in the age group of 20-50years and the pwas 74.50%.

According to gender, female percentage was 64.50% as compared to males.

According to vegetarian diet and non vegetarain diet, 50.40% were vegetarian.

66.70% individuals were having adhyashana.

88.60% individuals were doing sedentary work.

92.30% individuals were not doing exercise at all.

94.60% individuals were doing divaswap daily.

74.60% individuals were happy and jolly in nature, no mental stress and worries.

89.20% individuals were taking guru, madhur, shleshma guna diet.

46.30% individuals were taking food 4-5 times in a day.

According to lakshana of sthaulaya-

88.66% individuals had sphika chalatva, 55.70% had stana lambanam and 93.33% individual had udar lambanam.

90.76% individuals had daurgandhya, 78.30% had daubalya, 84.80% atipipasa, 86.44% had swedabadh,

All most all 98.20% individuals has meda stroto dushti.

DISCUSSION-

In this study, 100 individuals fulfilling the criteria for the diagnosis of sthulaya were selected. Complete history of individuals were taken. Proforma form was prepared along with questionnaire based on causes of sthulaya for this study and accordingly questions were asked through deep interview method following the inclusion and exclusion criteria. Consent form was also made for taking consent from individual to undergo survey study.

CONCLUSION:

The present survey study was carried in individuals of sthulaya to assess the main causes like santarpanotha and also other causes like ahaaratmak, viharatmka, mansik and bijdosha nidan. So from this whole study it is concluded that santarpanotha nidan (ahaaratmka and vihaaratmka), divaswap, ayayaama, avyayaya, adhyashan, mahashana, achintana contribute a lot in causing obesity. Other than this causes, there are few other also which we observed are included in the observations.

Along with this, in majority of patients lakshans of sthulaya were seen like shpika, stana, udar lambanam.

Atishudha, atipipasa, daurbalya, daurgandhya, nidraadhikya were also seen.

The Purpose of this study was to know the major contributing factors of obesity so accordingly we can advise diet, exercise, yogasanas and “nidan

parivarjan” which is the most important *chikitsa siddhant* of *ayurveda* and prevent the whole from obesity and further from its dangerous complications.

REFERENCES:

1. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 21st chapter verse 3) chaukhamba orientalia 1st edition 2005, pg.309.
2. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 21st chapter verse 4) chaukhamba orientalia 1st edition 2005, pg.309.
3. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 20th chapter verse 17) chaukhamba orientalia 1st edition 2005, pg.305
4. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 22nd chapter verse 38) chaukhamba orientalia 1st edition 2005, pg.309.
5. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 16th chapter verse 13) chaukhamba orientalia 1st edition 2005, pg.309.

6. Acharya vaidya yadavji trikamji, acharya narayan ram., editor. Sushrut samhita, sutrastana (dosha dhatu mala kshaya vriddhi vignyaniam adhyaya) chaukhamba orientalia;2007, pg.73.
7. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 23rd chapter verse3- 4) chaukhamba orientalia 1st edition 2005, pg.327
8. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 21st chapter verse 9) chaukhamba orientalia 1st edition 2005, pg.310
9. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (vimanstana 5th chapter verse 16) chaukhamba orientalia 1st edition 2005, pg.633
10. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 21st chapter verse 5-8) chaukhamba orientalia 1st edition 2005, pg.310
11. Vd. Harish chandra singh kushwala, editor.charak samhita, ayurveda- dipika's ayusi hindi commentary, (sutrastana 23rd chapter verse 3) chaukhamba orientalia 1st edition 2005, pg.327.

Cite this article:

Assessment of causes of obesity in present era

Pravin Prabhakar Patil, Arun S. Dudhamal

AYURLINE: INTERNATIONAL JOURNAL OF RESEARCH IN INDIAN MEDICINE 2017; 1(1) : 69-74