

A COMPARATIVE CLINICAL STUDY ON VARANADI KASHAYA AND VIDANGADI CHURNA IN THE MANAGEMENT OF STHOULYA VIS-A-VIS OBESITY

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ABSTRACT

Sthoulya is a *Santharpanajanya Vikara*, having unique *Samprapthi*. Unlike other diseases here there will be *Teekshna Jatharagni* and *Manda Dhatvagni*. *Srotorodha* caused by *Kapha* and *Meda* will lead to *Tiryakgati* of *Vata* which inturn intensify the *Jatharagni*. Due to *nidana sevana medo dathu vriddhi* will occur and it leads to *srotho avarodha* and case *Sthoulya*. As enumerated earlier *Meda* as *Dhushya*, *Kapha* and *avritavata* as *Dosha* and *Medo Dhatwagni Mandya* are main responsible factors in pathogenesis of *Sthoulya*. So that type of drugs should be used which pacify these factors and it can be accomplished by combination of *Katu Tikta Rasa Pradhana*, *Laghu Ruksha Ushna Virya Oushadhas* like *Varanadhi Kashaya* and *Vidangadi Churna* as in presentstudy.

Key words: *Sthoulya*, *Varanadi Kashaya*, *Vidangadi Churna*.

INTRODUCTION

Sthoulya is a major health care challenge for this century. There has been an immense increase in the prevalence of obesity in almost all the countries in the world. Obesity is a state of excess adipose tissue mass^[1] and it “*Shortens the life-span* “of an individual by imposing an extra burden on all the system of the body. It is found that obesity is a type of disease which invites many major and minor diseases.^[2,3] Hence the treatment of the disease is highly risky.

In fact obesity is a curse of modern age of machine and materialism which occurs due to lack of physical activates and increased intake of foods and change of deictic habits leading impairment of metabolism in an individual making him prone to series of disorders called the life style disorders. 22 million Indians are obese, especially abdominally obese.^[4]

Now a day’s an individual spent much money for the purchase of packaged or processed food items and soft drinks and the intake of such food items leads to obesity i.e the body mass index also increased.^[5] The amount spent for the food as well as the treatment is also a huge national waste. The emergence of these diseases as a public health problem indicates the need of prevention. The treatment available is unsatisfactory as it provides only temporary relief and cannot be used persistently. *Ayurveda* on the other hand offers natural and effective remedies which is cost effective and helpful in the privation of the diseases.

Now, A comparative clinical study on *Varanadi kashya* and *Vidangadi churna* in the management of *Sthoulya* vis-a-vis Obesity brought to light the fact that *Vidangadi churna* is more effective. For these purpose 40 patients of *Sthoulya* were selected irrespective of cast, creed or place. 20 patients were

administrated with *Varanadi kashya* and other 20 patients were treated with *Vidangadi churna*. Duration of treatment in both group are one month. The results of the study indicates that the patents of the both groups obtained significant relief in almost all the symptoms and signs of *Sthoulya* with promising results. The patients those who were administered with *Vidangadi churna* show an upper hand.

The objective of the study is to evaluate the efficacy of *Varanadhi Kashaya* in *Sthoulya*, To evaluate the efficacy of *Vidangadi Churna* in *Sthoulya* and to compare the efficacy of *Varanadhi Kashaya* and *Vidangadi Churna* in *Sthoulya*. A sample size of 40, Diagnosed cases of a *Sthoulya* from age group between 16 – 60 yrs were selected from OPD of Ashwini Ayurveda Medical College Hospital, Camps and other referrals.

METHODOLOGY

SOURCE OF DATA:

A) Sample source:

Subjects were recruited from the In Patient Department of Ashwini Ayurvedic Medical College, Hospital and Research Centre, Tumkaru.

B) Literary source:

All the classical, modern literature, contemporary texts including journals and websites will be studied and documented for the intended study

C) Sample size:

Total number of patients taken for the study will be 40 excluding dropouts.

D) Source of Material:

The raw drugs for *Varanadi Kashaya* and *Vidangadi Churna* collected from the market and identified by the botanist.

DIAGNOSTIC CRITERIA:

Diagnosis will be done according to the signs and symptoms as per Ayurvedic classics & contemporary medical text books and modern reference books.

- *Pratyatma lakshana* of *Sthoulya*
- BMI > 25kg/m²

INCLUSION CRITERIA:

- Patients presenting with *Prathyatma Lakshanas* of *Sthoulya*.
- BMI greater than 25 and less than 40 (kg/m²)
- Age - 16-60years.

EXCLUSION CRITERIA:

- Subjects who are suffering from psychiatric illness with obesity.
- Pregnancy with obesity.
- IHD with obesity.
- Allergic Bronchitis, Asthma and other systemic diseases which intervene with the course of treatment.
- Patients with age less than 16 years and more than 60 years.

OBSERVATIONS

In my study females were dominant. It is due to the occupational speciality and their sedentary life. Most patients in this study in the age group of 21 to 30 were under the clutches of *Sthoulya*. The sedentary life of the housewife's leads to *Sthoulya* and the married people were more cautious about their health. The Irregular exercises were the reasons for *Sthoulya*.

DATA ANALYSIS

Data will be collected using case report form designed by incorporating all aspects (*Ayurveda* & modern medicine) for the study. Such collected data will be tabulated and analyzed using SPSS (Statistical package for social sciences) version 20 by using appropriate statistical test. Demographic data and other relevant information will be analyzed with descriptive statistics. Continuous data will be expressed in mean \pm standard deviation, and nominal and ordinal data will be expressed in percentage. Obtained data will be analyzed statistically with Un Paired T test.

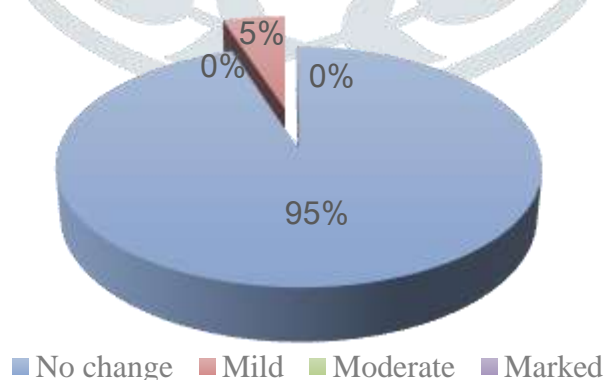
RESULTS

Effect of *Varanadi Kashaya* (Group A) and *Vidangadi Churna* (Group B) in *Sthoulya*

Overall effect of VARANADI KASHAYA Group-A

EFFECT OF TREATMENT IN GROUP – A		
Class	Grading	No of patients
0-25%	No change	19
26%-50%	Mild	1
51% - 75%	Moderate	0
76% - 100%	Marked	0

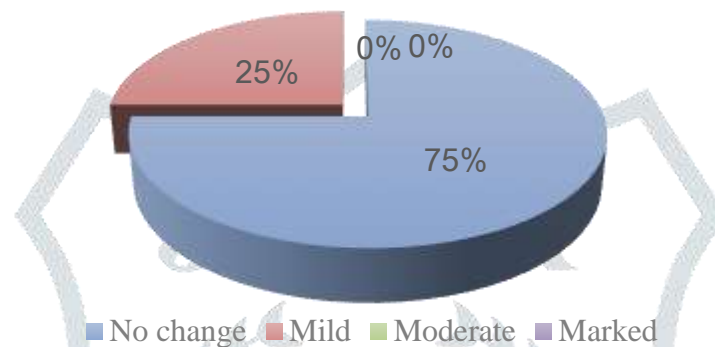
Overall Effect of Group A



Overall effect of VIDANGADI CHURNA Group-B

EFFECT OF TREATMENT IN GROUP – B		
Class	Grading	No of patients
0-25%	No change	15
26%-50%	Mild	5
51% - 75%	Moderate	0
76% - 100%	Marked	0

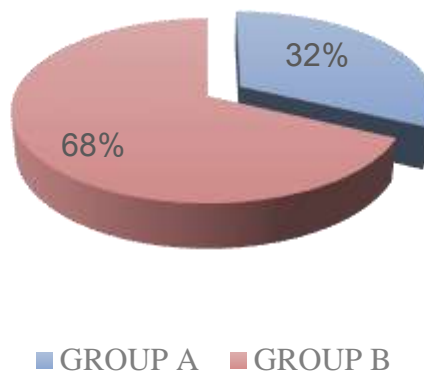
Overall Effect of Group B



Comparative results of Group A and Group B

Group A	Group B	Mean Difference	SE (±)	T Value	P value
7.28	16.47	9.19	4.46	2.35	<0.05

OVERALL RESULT OF GROUP A & B



Comparative analysis of the overall effect of the treatments in both the groups was done by statistically with Un Paired T test. The test shows that the treatment is significant in Group B when compared to Group A. Group A overall result is 7.28% and Group B overall result is 16.47%.

Criteria like *Ayase Swasa*, *Athi kshudha*, *Sahatva*, *Anga sithilatha*, *Gatra sada*, Abdomen Circumference, Hip Circumference, Waist Circumference, Waist- hip ratio, BMI, LDL and TC were more reduced in Group A when compared to Group B. *Ayata upachaya*, *utsaha hani*, *Sweda adikyata*, *Nidradhikya*, *Ahara matra*, *Ahara kala*, *kshudha souhitya*, *Alpa vyayama*, *Anga gourava*, Chest Circumference, Mid arm Circumference-right, Mid arm Circumference-left, Mid thigh Circumference-right, Mid thigh Circumference-left, Hb%, HDL, VLDL, Serum cholesterol and Serum triglycerides was seen to be more reduced in Group B when compared to Group A. There is no significant difference between in the two groups in *Chala spik*, *stana* and *Udara*, *Athi Pipasa* and *Alpa vyavaya*. The overall result shows that there is statistical difference between the two groups and Group B showed better results than Group A. Average improvement in Group B is 16.47% and Group A is 7.28%.

DISCUSSION

Discussion on Probable mode of action of the *Varanadi Kashaya*:-

The *Kwatha Kalpana* is the basic *Alpana* among *Panchavidha Kashaya Kalpanas*. It is very potent formulation. *Varanadi Kashayam* also known as *Varanadi Kwatha*, is a well-known *Ayurvedic* herbal decoction used traditionally for the treatment of obesity. *Varanadi Kashayam* is an *Ayurvedic* polyherbal decoction containing 16 ingredients.

The disease *Sthoulya* originated due to consumption of *Kaphavridhikara Ahara*, *Vihara* and *Manasa Nidanas*. These factors derange *Jatharagni* causing *Amaannarasa*, which results in *Medodhatvagni - Mandya*. This condition leads to the excessive growth and accumulation of *Medodhatu*, causing the disease *Sthoulya*.

Drugs of *Varanadi Kashayam* having *Katutikta rasa pradhana*, *Laghu Ruksha Ushnavirya*, *Katuvipaka*, *Kaphavatasamana*, *Durmedo hara*, *Srotosodhana*, *Lekhaniya*, *chedana*, *Dipana*, Slightly *pachana* properties, which normalizes the state of *agni*, thus regulated *jatharagni* checks the excessive growth and accumulation of *medodhatu* and there by causing *lakshana Upshamana* of disease *Sthoulya*.

Discussion on Probable mode of action of the *Vidangadi Churna*:-

Churna is included in *kalka*. *Kalka* is of two types, with liquid and without liquid. *Churna* comes in the latter category. *Churna* is a fine dry powder of a drug or drugs.

Vidangadi Churna is a mixture of herbal powder along with *lauha bhasma*. Most of the drugs of *Vidangadi churna* are having *Katu*, *tikta*, *kasaya kshara rasa pradhana*, especially *kapha samana*. *Laghu ruksha tikshna*, *ushna virya oushadha*. *Srotosodhana*, *lekhana*, *chedana* properties, Due to these properties, it breaks the *Samprapti* of *Sthoulya*. Which normalize the state of *Agni*. Doing the function of *Stroto - Vibandhanasana* and acts against *Kapha*, *Kleda* and *Meda*.

Vidangadichurna encounters *Vatakapha Dosh*a by virtue of its *Katu rasa* dominance & *UshnaVirya*. By the dint of its *Laghu*, *Ruksha*, *Ushna*, *Tikshnagunas* it causes *medodhatvagnideepan* at the same time it removes *avarana* of *meda* on *vatadosha* hence bring *jatharagni* to its normalcy. By virtue of aforesaid *gunas* it removes *abhisyanda* from *srotas* & absorbs excessive *kleda*.

Vidangadi Churna is administrated in the patients along with *madhu* as *anupana*. *Madhu* have *kashayaraasa* and *lekhana* property and helps in scraping of the body.

CONCLUSION

The clinical study in the light of demographic data brought to light that *Vidangadi Churna* is more effective in the treatment of obesity. The test reveals that there is statistical difference between the two groups with comparatively better results in Group B. Both interventions did not produce any complications during the treatment period.

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