



# STUDY THE CLINICAL EFFICACY OF BALAASHWAGANDHADI TAIL ABHYANGA AND ASHWAGANDHA KSHEERPAKA IN KARSHYA W.S.R. TO UNDERWEIGHT.

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## Abstract:

In Ayurveda; Ahara (Nutrition) is considered as one among the Trayopastambha and its irregular intake leads to Santarpanjanya (Overnutrition) and Apatarpanjanya (Undernutrition) diseases. The nutritional disease is by far the most common throughout the world and among them Karshya is the common one.

In adolescent population, approximately 22% of Indian population; underweight remains a major problem.

This Trial carried out on 10 Underweight Patients by treating them with Balashwagandhadi Taila Abhyanga as an external procedure and internal medication with Ashwagandha Ksheerapaka. The results have been assessed by Subjective and Objective Criteria and further analysed statistically by Mean difference.

On overall effect of therapy; BMI increased by 0.48 and weight by average 1.59 kg along with this trial shows positive changes in other parameters like Arm, Abdomen, and Thigh Circumference, Kshudha, Nidra etc.

Continuing the study for more days along with follow up and also with more number of sample size will further shows better conclusions.

Key Words: Under nutrition, Abhyanga, Ksheerapaka

## INTRODUCTION :

In the present era, physical appearance carries an important role as it is one among the factor for a person to be fit.

Many diseases are known to afflict human being and these include infectious, genetic and nutritional deficiency disorder. Of these, the nutritional disease is by far the most common throughout the world and among them Karshya is the common one.

Karshya is a clinical condition which can be correlated with underweight. In this disease the body gets emaciated gradually.

Emaciation is defined as the state of extreme thinness from absence of body fat and muscle wasting.

The main cause of emaciation is undernutrition and the main treatment to fight emaciation is proper nutrition. If it remains untreated it may lead to low social, mental or educational achievements.

Karshya is very common in our society in all age groups. India is one of the leading country this respect, where about 212 million people are registered as underweight.

In India around 3/4<sup>th</sup> of our paediatric population is suffering from karshya. Lots of attempts have been made to minimize this at National level.

For this, Immunization plans and milk distribution or mid-day-meal to school going children were initiated.

In adolescent population who contribute near about 20% of global population and approximately 22% of Indian population underweight remains a major problem.

The National Family Health Survey shows that 37% children under the age of five are stunted

In Ayurveda Karshya is included in Apatarpanjanya vyadhi.

According to Acharya Charak and Acharya Kashyap it is described under eight despicable persons (Ashtau Ninditiya Purush) Ultimately the patients of Karshya are subjected to Balahani.

According to Acharya Sharangdhara it comes under eight vataja nanatmaj vyadhi.

Due to oral intolerance found in Underweight persons response to treatment is limited. So present study is about to find a new simple way that can easily introduce in adolescent and younger generation to treat Karshya so that in future they can produce healthy sibilings to break the cycle of underweight.

There are many limitations is modern science therefore Ayurveda is preferable.

Ayurveda science of life, has always emphasized to maintain the health and prevent the disease by following proper diet and lifestyle instead of treatment and cure of disease.

The basic is “Swasthasya Swasthya Rakshanam” which means to maintain health of healthy rather than “Aturasya Vikara Prashamanamcha” means to cure the disease of the diseased.

For this purpose Panchakarma plays a vital role because of the fast relief it provides by expelling out the toxins from the body in a proper way detoxifying the body.

According to Ayurveda Karshya occurs because of Agni dushti and Dhatu kshaya.

So Panchakarma helps in restoring agni and also assists balance of all the three doshas and boosts body’s immunity levels.

In Karshya , predominant dosha is Vata dosha and for treatment of Vata dosha tail is the best medicine.

Abhyanga with Bala Ashwagandhadi tail adds extra benefit as it is a growth promoting drug.

By the process of Abhyanga medicated oil is applied all over the body which gets absorbed through skin. Taila possesses property of Sushkma and Vyavayi guna which helps to reach in constricted Srotasa and provide nourishment to them.

As an internal medicine Ashwagandha ksheerpaka works efficiently on karshya as milk is one of the major nourishing item and Ashwagandha is a Bruhana dravya. The combination of these two in the form of ksheerpaka improves the general growth of the body.

#### AIM:-

Study the efficacy of Balashwagandhadi tail for abhyanga and ashwagandha ksheerpak in the management of karshya.

#### OBJECTIVES:-

- 1) To review the concept of karshya in ayurvedic literature.
- 2) To review the underweight as per modern medicine.
- 3) To study the role of abhyanga in karshya .
- 4) To study the role of Ashwagandha ksheerpak as internal medicine in karshya.
- 5) To study the importance of diet modification in the management of karshya.

#### MATERIAL AND METHODOLOGY:-

STUDY PLACE- Dhanvantri Hospital ,Ashta.

STUDY TYPE- Open

SAMPLE SIZE- 10 patients

STUDY DESIGN-

- 1) Selection of patient –  
10 patients were selected from opd of Hon. Shri Annasaheb Ayurved Medical College and Dhanwantari hospital Ashta , irrespective of sex, religion, occupation, marital status showing signs and symptoms of karshya vyadhi.

Prior to participation in study, all patients were informed about aim of study, its benefits, and risk factors.

- 2) Written consent-  
Written consent was taken from all the patients before doing procedure.

## 3) Study Plan-

Karma	Dipan-Pachan	Mrudu anulomana	Abhyanga	Ksheerpaka
Drugs	Shunthi churna	Avipattikar churna	Balashwagandhadi tail	Ashwagandha ksheerpaka
Route of Application	Internal	Internal	External	Internal
Dose	3 gm	6 gm	50-60 ml	30 ml
Duration	3 days	3 <sup>rd</sup> day night	7 days	14 days
Time	Vyana - Udaan	Nisha	Pratah kaal	Pratah kaal

## CRITERIA FOR SELECTION OF PATIENT-

## INCLUSION CRITERIA:-

1. Patient diagnosed as karshya were selected for study.
2. Patients of age group 12-30years irrespective of sex, religion, socio-economic status were selected for study.
3. Patient fit for abhyanga were included.
4. Patient who have given written consent were included.
5. Patient whose BMI is less than 18.

## EXCLUSION CRITERIA:-

1. Infectious disease.
2. Systemic disease.
3. Congenital problem.
4. Malignancies.
5. Malabsorption syndrome.
6. Inborn error of metabolism.

## ASSESSMENT CRITERIA-

## Objective criteria-

## 1) BMI

CATEGORY	BMI (kg/m <sup>2</sup> )
Underweight (severe)	Less than 16
Underweight (moderate)	16-16.9
Underweight (mild)	17-18.4
Normal weight	18.5-24.5
Overweight	25-29.9
Obese	More than 30

## 2) ANTHROPOMETRY

- ❖ Mid arm circumference
- ❖ Abdomen circumference
- ❖ Buttock circumference
- ❖ Thigh circumference

## Subjective criteria-

## 1) Daurbalya-

ASSESSMENT	GRADE
Tiredness for whole day	3
Tiredness upto 12 hr	2
Tiredness upto 6-8 hrs	1
No Tiredness	0

2) Kshudha-

ASSESSMENT	GRADE
Do not eat even by force	3
Do not ask but take food on request	2
Himself ask food but not take adequately	1
Himself ask food and take adequately	0

3) Chesta-

ASSESSMENT	GRADE
Dull	3
Involves when forced	2
Actively involves on motivation	1
Very active	0

4) Nidra-

ASSESSMENT	GRADE
Crood	3
Disturbed	2
Short but sound	1
Long and sound	0

#### ASSESSMENT GRADING :- OBJECTIVE ASSESSMENT-

CRITERIA	DAY 0	DAY 11	DAY 25
BMI	17	17.2	17.4
Weight	50 kg	51 kg	53 kg
Mid arm circumference	10 cm	10 cm	11 cm

#### OBSERVATION & RESULT :-

Patient	1			2			3			4			5		
	0	11	25	0	11	25	0	11	25	0	11	25	0	11	25
DAY															
CRITERIA															
BMI	15.2	15.3	16	17	17.6	17.9	17.3	17.4	17.6	15.3	15.7	16	15.1	15.4	15.5
Weight (Kg)	39.7	39.9	41	55	57	58	50	50.2	51	43	44	45	41	42	43
Mid arm circumference (cm)	7	9	10	11	11	13	9.5	10	10	9	9.5	10	9	9.5	9.5
Abdomen circumference(cm)	27	28	28.5	27	30	30	28	29	30	25.5	27	28	26	26	27
Buttock circumference(cm)	33	33	34	30	32	33	34	35	36	33	33	34	31	32	32
Thigh circumference(cm)	15.5	16	16.5	19	19	20	19	19	19	16	16	17	15	15	16
Daurbalya	4	2	1	1	1	0	2	1	0	2	1	1	2	1	1
Kshudha	3	1	1	2	1	1	2	1	1	1	1	0	2	2	1
Chesta	2	1	1	1	1	1	3	2	1	1	0	0	2	1	1
Nidra	4	2	1	2	1	0	1	0	0	2	1	1	1	0	0

Patient	6			7			8			9			10		
DAY															
CRITERIA	0	11	25	0	11	25	0	11	25	0	11	25	0	11	25
BMI	17.5	17.7	18	17.2	17.6	18	16.4	16.6	17	15.9	16.2	16.4	17	17.2	17.4
Weight (Kg)	41	41.8	43	45	46	48	38	38.5	40	37	37.6	38.1	50	51	53
Mid arm circumference (cm)	10	10	11	11	11	12	11	11.5	12	11	11.5	11.6	10	10	11
Abdomen circumference(cm)	26	26	27	30	30.5	31	34	34	35	30	30	31	25	25	26
Buttock circumference(cm)	34	34.5	35	36	37	38	20	21	22	31	31.5	32	29	30	32
Thigh circumference(cm)	20	20.5	21	18	18	19	18	18.5	19	15	15	16	18	18	19
Daurbalya	2	1	1	2	1	1	3	2	1	2	2	1	2	2	1
Kshudha	3	3	2	1	1	1	3	2	1	3	2	1	2	1	1
Chesta	3	3	1	2	2	1	2	1	1	2	1	1	2	1	1
Nidra	3	2	1	2	1	0	3	1	0	1	0	0	1	0	0

**RESULT:**

The mean value of BMI at the time of commencement of study was 16.41, which was increased significantly to 16.89.

The mean value of weight was found to be 43.97 Kg & 45.56 Kg in pre & post treatment respectively showing a difference of 1.59 Kg.

The mean value of Mid arm circumference at the time of commencement of study was 9.85 & after completion of treatment was 11.01 showing a mean difference of 1.16.

The mean value of Abdomen circumference at the time of commencement of study was 27.85 & after completion of treatment was 29.35; showing a mean difference of 1.5.

The mean value of Thigh circumference at the time of commencement of study was 17.35 & after completion of treatment was 18.25; showing a mean difference of 0.9.

The mean value of Buttock circumference at the time of commencement of study was 31.1 & after completion of treatment was 32.8; showing a mean difference of 1.7.

The mean value of Dourbalya at the time of commencement of study was 3.6 & after completion of treatment was 0.8; showing a mean difference of 2.8.

The mean value of Kshudha at the time of commencement of study was 2.2 & after completion of treatment was 0.9; showing a mean difference of 1.3.

The mean value of Chesta at the time of commencement of study was 2 & after completion of treatment was 1; showing a mean difference of 1.

The mean value of Nidra at the time of commencement of study was 2 & after completion of treatment was 0.3; showing a mean difference of 1.7.

**STATISTICAL ANALYSIS:-**

CRITERIA	BT	AT	DIFFERENCE	RELIEF
BMI	16.41	16.89	0.48	97 %
WEIGHT	43.97 kg	45.56 kg	1.59 kg	96.5 %

MID ARM CIRCUMFERENCE	9.85	11.01	1.16	89.4 %
ABDOMEN CIRCUMFERENCE	27.85	29.35	1.5	94.8%
THIGH CIRCUMFERENCE	17.35	18.25	0.9	95%
BUTTOCKS CIRCUMFERENCE	31.1	32.8	1.7	94.8 %
DAURBALYA	3.6	0.8	2.8	22.2 %
KSHUDHA	2.2	0.9	1.3	40.9%
CHESTA	2	1	1	50 %
NIDRA	2	0.3	1.7	15%

#### DISCUSSION :-

In the present study highly significant effect was found in BMI, Weight, Abdomen, Thigh circumference & in Daurbalya.

Probable mode of action Balaashwagandhadi Tail Abhyanga

- BALA-it is a nerve enhancing herb, it promotes muscle health.
- ASHWAGANDHA -used to rejuvenate joint strength nerve and muscle.
- MANJISTHA- promotes muscle health, their natural nutrient helps fortify the muscle fibres in body and support the natural development of muscles in the body.
- DURVA –promotes a regular sleep cycle.
- USHIR- produce relaxing effect on mind.
- ANANTMUL-supports healthy bones.
- LAKSHA – promotes strength
- CHANDAN- produce relaxation effect on mind
- RASNA- increases rasa dhatu.
- KUSHTA- decreases vata
- TIL- improves strength and decreases vata dosha.
- PADMAK –used to treat vata dosha
- AGURU-it act as digestive and carminative.

Abhyanga with such oil having properties mentioned above helps in Shramahara, Vatahara, Pushtikara, Jarahara, Swapanakara, Ayushakara which ultimately leads to weight gain.

Probable Mode of Action Ashwagandha Ksheerapaka:

Ashwagandha has madhura, katu, tikta rasa madhur vipaka, bruhana, balya and rasayan properties. Therefore ashwagandha siddha ksheer improves appetite, memory status, skin texture, and immunity. So this ashwagandha improves overall sleep quality and reduce stress.

**CONCLUSION :-**

It reveals that external as well as internal combined therapy proved to be effective in Karshya with special reference to Under nutrition. The improvement shown symptomatically along with BMI, Weight, circumference of body parts. As there was no complications observed so we conclude that present study is safe and effective in the management of Karshya. For further study and for better conclusions, there should be increased duration of treatment protocol along with large number of sample size.

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