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A CLINICAL STUDY ON ROLE OF UDARTANA IN THE MANAGEMENT OF OBESITY (STHALUYA) – AN AYURVEDIC PROSPECTIVE

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ABSTRACT

A person's metabolism is affected, which raises his chance of contracting various ailments referred to as lifestyle diseases. According to santarpanajanya vyadhi, Sthaulya is categorized as "Medo roga." Due to medodhatvagnimandya, which causes an improper and excessive synthesis of medo dhatu, abnormalities in the levels and metabolism of plasma lipids and lipoproteins account for over 50% of coronary heart diseases (CHD). The agni aberration that gives birth to amarasa is the etiology of this sickness. Over the previous 20 years, CHD has become more common in India. While Charak mentions obesity in most of his texts, Ashtonindatiya adhyaya, the 21st chapter, is essential for defining this illness. Understanding the history of meda dhatu is essential to comprehending obesity. What was once called "Sthoola" is now called "Sthaulya." The guna called "Sthoola" is responsible for bulkiness, or Brumhan. This causes the tissue weights to rise. Sthoola: a substantial Jadyata: Sluggishness of body and intellect Gaurava: Heaviness associated with Guru guna an excessive accumulation of fat, or vikruta medovruddhi, is the source of the disease called "Sthaulya," which results in a rise in body fat.

KEYWORDS: Ushnodaka, Obesity, Sthaulya, etc.

INTRODUCTION

When all of the Dhatus are operating at peak performance, the body as a whole benefits. Whether it is Pramanataha or Gunataha, when vikruti is present in any of the Dhatuys, it certainly affects the body and the mind. Thaulya, here the Medo dhatu, is one of the best illustrations of a disease caused by dhatu pramanataha. This is often known as Sthaulya. Sthaulya is the product of Medo dhatu vikruti, although Medovaha srotasa's

vitiation also yields other vikrutis. Numerous additional ailments surface as a result of Medovaha srotasa vitiation. Doctors often deal with the most of them in their regular practise. Although "Sthaulya" is usually thought to mean or symbolize "Sthaulya," Ayurveda may also be used to treat a number of other disorders that also suit this description. Upakramas and Siddhanta Chikitsa. 1.

Acharya Charak states that the source of meda dhatu is mamsa dhatu. Meda is made from the food's nitrogen-deficient proteins, carbohydrates, and sneha. Medodhara The Kala concept originates from Kala Ayurveda. Similar to how pith, or heart wood, appears when a tree's stem is split or cut, kala also appears when dhatus, like muscles, are severed. The ligament-covered, ligament-made Snayu praticchana and the extension, jarayu santata. The medodhara kala is the third kala, as per Acharya Sushruta. The body mass index (BMI) uses an overall categorization system based on an adult's height and weight to identify whether they are underweight, normal weight, Sthaulya, or obese. Kala can now be referred to as "membranes." The body mass index (BMI) of an individual is a significant predictor of potential future health issues and has been widely utilized in the creation of several public health programs. Metric or imperial (US) units can be used to calculate BMI. The formula for calculating BMI in metric units is weight in kilograms divided by height in square meters. Weight is equal to 703 (pounds per square inch) times height, divided by weight. For a deeper discussion of BMI, concerns, illness states, and clinical relevance, it is imperative to grasp the current cut-off values for each category established by the World Health Organization (WHO) and the Centers for illness Control and Prevention (CDC).2.

What was once called "Sthoola" is now called "Sthaulya." The guna called "Sthoola" is responsible for bulkiness, or Brumhan. This causes the tissue weights to rise. Sthoola: a substantial Jadyata: Sluggishness of body and intellect Gaurava: Heaviness associated with Guru guna An excessive accumulation of fat, or vikruta medovruddhi, is the source of the disease called "Sthaulya," which results in a rise in body fat. Based on current research, obesity is defined as a body weight that is 20% more than the optimal weight. Physical deformities or an accumulation of fat throughout the body, a bulging abdomen, an inability to function, lethargy, dyspnea during physical exertion, breathing difficulties, loss of tone, and excessive thirst, hunger, and sweating are all signs of obesity. inadequate body odor Diminished energy, erectile dysfunction, indolence, and somnolence Limited lifespan, drab disposition, or mental health issues.3.

Sara is put through a test to determine her level of strength. Acharya Charak states that one characteristic of medasara purush is that the individual's eyes, hair, nails, teeth, lips, urine, and excrement are all snigdha. The Vimanasthana's Rogabhishagjitiya adhyaya, chapter 8, makes this claim. The individual is helpful, empathetic, hedonistic, and vulnerable. The statement made by Sushruta that the medasara purush is covered with snigdha sweat, urine, and speech is documented in the Aaturopakramaniya adhyaya of the sutra sthana. He can't exert himself strongly because of his enormous weight. In order to more accurately identify the various kinds of obesity, researchers may be interested in finding out the range of BMI at which certain physical characteristics appear in obese individuals. Meda Dhatu Kshaya 4 Not only are increases in meda dhatu's amount undesirable, but their kshaya also has to be closely monitored. The signs and symptoms listed in the ayurveda literature by several ancient writers can be used to determine the meda dhatu kshaya.

The Dharan, or Sanskrit for maintaining one's body, mind, and life, is carried out by Meda, the fourth dhatu, according to the sabdakalpadrum. You may find that explanation and derivation there. Vasa definition The Dhatwagnipaka of the Mansa dhatu creates the upadhatu Vasa. Vasa is the term for the fatty part of mansa. While Meda has a major influence on the aetiology of the illness, Dushya dominates the pathophysiology of Sthaulya. introduction of Meda Dhatu According to Charaka, mamsa tissue makes up the meda dhatu. This happens when the mamsa dhatu utilizes its own heat to continue cooking, also known as metabolizing or digesting. The pleasant characteristics of the mamsa dhatu are used to construct medas. 5

Causes of Obesity as per Modern Science

- Genetic and Hereditary Obesity and medodoshas can occasionally be attributed to genetic or hereditary factors. 6.
- Obesity developed: Sthaulya's obesity was caused by his overindulgence in fatty meals, inactivity, overindulgence in relaxation, and midday naps. 7
- Endocrine gland dysfunction: resulting from a pituitary, adrenal, thyroid, or testicular gland malfunction or from reduced hormone output from these glands.
- A faulty metabolism causes fat to accumulate, which ultimately results in obesity. 8
- Steroids and antidepressants are among the drugs that cause fat.

METHDOLOGY-The collection of data of Sthaulya and Ushnodaka has been collected from different articles, manuscripts, and authentic websites like PubMed, NCBI etc.

DISCUSSION:

Ushnodaka Pana is the best thing we can do for our body. It not only satisfies thirst but also maintains health. The study's findings suggest that Ushnodaka Pana improves IT workers' overall well-being. 9. It has been found to improve digestion and appetite. It maintains samastithi, or balance, of Agni, the digestive fire. According to the literature, drinking warm water causes the Srotas (channels that carry digestive juices) to expand, increasing flow and resulting in better food digestion.¹⁰

After meals, Ushnodaka Pana significantly alters the body's sensation of lightness. This is as a result of its improved digestion and softer Dosha.¹¹ Belching caused by indigestion has been reported to decrease with Ushnodaka Pana. The effects of Ushnodaka Pana on constipation and bowel movements are especially noteworthy. 12 Feces can be softened and forced out of the body by warm water, which opens the Srotas (channel) and helps Ushnodaka Pana clean the bladder. 13 During the boiling process, the water's composition changes, becoming lighter. Warm water can clear the Srotas (channels) and reach deeper levels since it hydrates tissues and makes it easier for the body to eliminate toxins and pollutants.¹⁴

COMPLICATION OF STHAULYA

Ayurveda says that Sthaulya persons, or Medorogi, are more likely to have issues or develop other illnesses if their obesity is not well managed. The Dhatuposhana karma expressly states poorvam dhatu parama kuryata, which means that the previous Dhatu fosters the subsequent one. 15 When Meda Dhatu receives more nutrition

than it should, Asthi, Majja, and Shukra, the Dhatu that follow Meda, are the ones that do not get the proper nourishment. Thus, Kshaya (depleted) Shukra Dhatu is Sarvadehika (Abeeja) and Sthanika (Sabeeja). 16 Along with the symptoms of Sarvadaihika Shukraksheenata, the repercussions include Indriya Shaithilya and difficulty initiating sexual intercourse. In addition, Asthi dhatu, or porous and feeble bones, grow.

CONCLUSION

The primary causes of medomoroga (fat) include overeating, inactivity, low metabolism, and a genetic predisposition that throws off the equilibrium of Agni, dosha, and dhatu. Obesity is a terrible condition that can lead to ischemic heart disease, hypertension, diabetes mellitus, dyslipidemia, and other diseases. The majority of the Sthaulya patients in this research were married, female, between the ages of 31 and 40, employed in sedentary, sitting jobs, belonging to the lower middle socioeconomic class, and getting 10 to 12 hours of good sleep per night. In addition to having huge numbers, the majority of patients were obese, according to Krura-Koshta. Based on the data collected by Dashvidha Rogi-pariksha, most patients possessed Tamsika Prakriti and Kapha-pitta Prakriti, Madhyama Sara and Satmya, as well as Avara Samhanana and Satva. Jarana Shakti and Pravara Abhyavaharana Shakti handled most of the patients. The detailed dietary history revealed that Madhura Rasa pradhan, Guru Snigdha, and Sheeta Ahara constituted the bulk of the patients' meals. According to Nidana's history, the majority of patients ate a lot of godhuma, dadhi, sarpi, mamsa rasa, and other high-calorie meals (aetiological factors). Most of the patients practiced avyavyama, or absence of physical exercise, and slept all day.

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