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Ayurvedic Management of *Santarpana Janya Vikara* (Metabolic Syndrome).

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Abstract:-

Metabolic syndrome is a rapidly emerging disease related to sedentary lifestyle and faulty dietary habits. The major features of metabolic syndrome include central obesity, raised triglycerides, low levels of High-density lipoprotein (HDL), hyperglycemia and hypertension. These abnormalities confer an increased risk of cardiovascular diseases and diabetes mellitus. In *Ayurveda,* metabolic syndrome may be correlated with the conditions like, *Medoroga, Santarpanajanya Vyadhi* including *Santapanajanya Madhumeha, Ati sthaulya*. All these conditions are interrelated and have similar pathological pathway. *Ayurvedic* approach to the management of metabolic syndrome hence is largely in the direction of the treatment of *Medoroga*. It includes the principles like *Nidana parivarjana Ahara,Vihara* and *Chikitsa* including the procedures like *Virechana karma,* oral administration of herbal products.in this case study 47 year old male patient history of diabetes mellitus, Dyslipidemia since 3 months .He came for *Ayurvedic* treatment in Govt.Akhandananda ayurveda college and hospital, Ahmedabad. Patient was treated on the principle of treatment mentioned for *Santarpanjanya Vyadhi Shodhana karma (Virechana), Shamana Aushadhi* having *Deepana, Pachana, Meda-kleda Upshoshana, Lekhana* Properties.

KEYWORDS :- Metabolic Syndrome, *Santarpanajanya Vyadi, Pramhea, Medoroga,Virechana karma,Shamana Aushadhi*

INTRODUCTION:

Lifestyle diseases occur primarily based on people's daily habits and result from an inappropriate relationship between people and their environment. The onset of these lifestyle diseases is gradual; they take years to develop and, once diagnosed, are difficult to treat.The most common lifestyle diseases include hypertension, diabetes, arthritis, obesity, insomnia etc. Metabolic Syndrome is a lifestyle disorder that has become a major public-health Challenges around the world, owing to rising obesity and sedentary lifestyles. Abdominal obesity, insulin resistance,

hypertension and hyperlipideamia were the common pathological condition involved in Metabolic syndromes. Metabolic syndrome states to a constellation of several interrelated risk factor that promote the development of atherosclerotic, cardiovascular disease (CVD) and Type 2 diabetes mellitus. Metabolic Syndrome is a disease of modern era occurs due to life style changes like modernization, decreased level of physical activities and increased intake of calories. In *Charaka Samhita*, Lack of physical activity and unhealthy eating habits which are the causing of lifestyle disorders are mentioned in *Santarpajaniyam adhyayam*.Aetiology and Symptomatology of *Santarpanajanya Vikaras* shows a remarkable similarity with Metabolic syndrome since it includes sedentary lifestyle and dietary factors. Excessive consumption of *Madhura, Amla, Lavana,Guru, Snigdha,Nava annapanas ,Gramya oudaka anupa mamasa rasa, Payas,Guda ikshu vikrtis* are the *Aharaja nidanas* mentioned in *Prameha,Atisthoulya* and *Santharpanajanya vikaras.Viharaja nidanas* include *Asyasukha, Nidra,Avyayama, Divaswapna , Avyavaya ,Achintana* is mentioned in the *Nidanas* of *Sthoulya, Prameha and Santarpanotha vikaras.Harshnityatvata* is specifically stated among *Sthoulya nidanas.Acharya Charaka* mentioned *Vamana karma* and *Virechana karma* in the management of *Santarpanajanya Vyadhi.* If the patient does not have sufficient *bala* to undergo *Shodhana* therapy or when Dosha are Moderately vitiated *Shamana aushadhi* adopted in Metabolic Syndrome. *Shamana aushadhi* having *Deepana,Pachana,Lekhana,Medakleda Upashoshana ,Tridoshashamana,Ushna virya* will the more appropriate which helps in alleviating *Agni vaishamya,* Removing *Srotoavrodha* and *Kapha-Medo Dushti.*

Case report

A male patient age 47 years old, k/c/o Diabetes mellitus type -2 and Dyslipidemia came to *Kayachikitsa* OPD Government Akhandananda *Ayurveda* Hospital,Ahmedabad with the Complaints of *Sharirabharahani, Daurbalya, Trishnaadhikya ,Kshudhaadhikya, Ayasa adhika Adhika mutra pravruti* since last 3 Months with Intermittent occasional *Udar Gauravta,Uraha Daha ,Shirah Shola* since last 10 days.

He was relatively healthy before 3 months. Then his gradually decreased body weight since 3 months. In the last 3 months the patient's weight Increased from 78 kg to 92 kg and noticed symptoms like Excessive Urination, Weakness, Excessive thirst, Excessive hunger. So he consulted family physician. Patient did his recent investigation on 22/5/2023 and came to OPD for Ayurvedic Treatment of raised Blood Sugar Level, raised lipid level.

Personal history revealed the patient is vegetarian and used to take Milk, Sweet items, Curd diet frequently and he is irregular in taking his meals because of his field work.

He had no relevant family history or Past history.

Astavidh pariksha:

Nadi	72/min
Mala	2 times/day
Mutra	8-9 times/day
Jihva	Prakruta
Sabda	Prakruta

Sapsha	Prakruta
Akruti	Sthoola

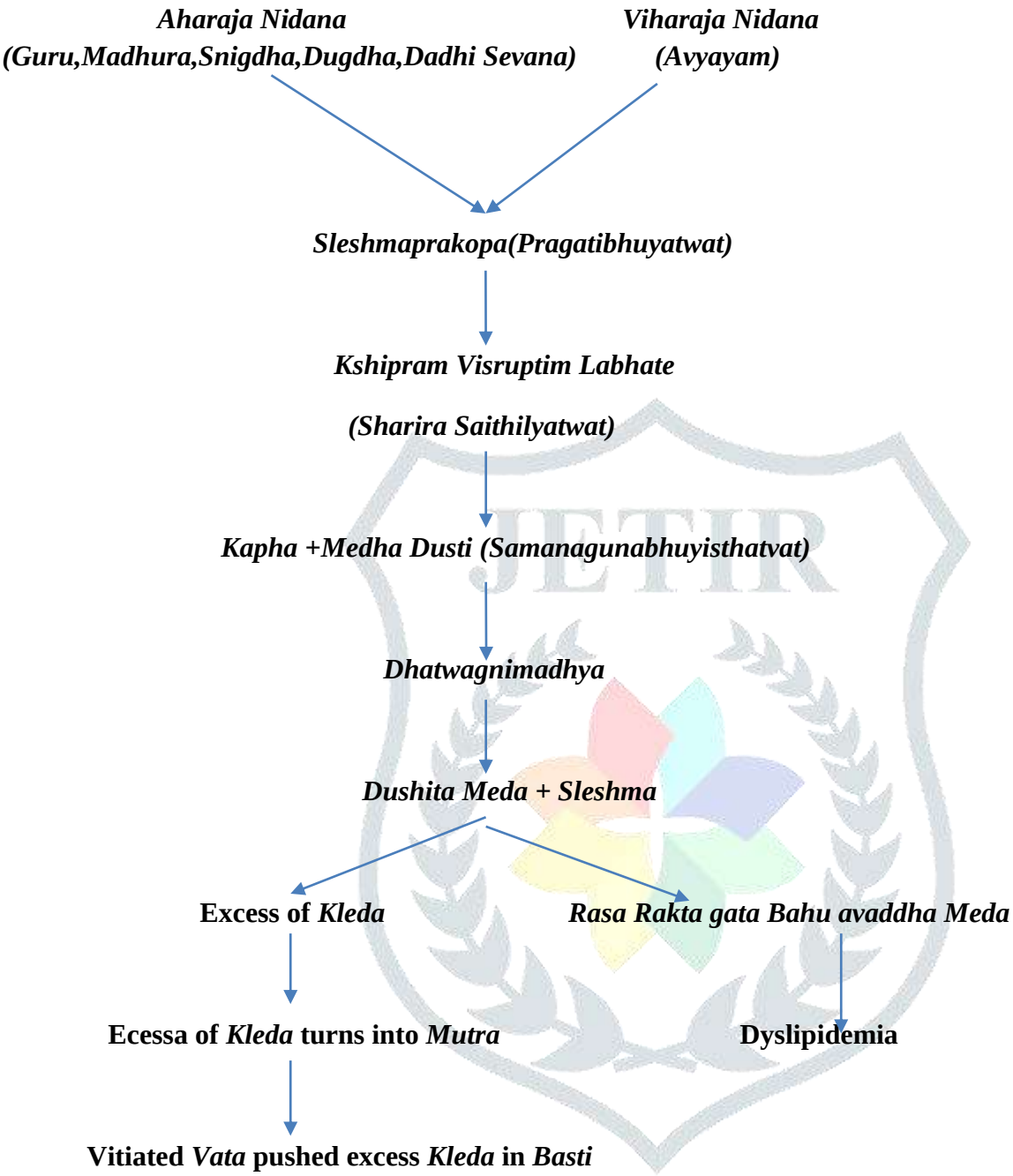
General Examination

Blood pressure	140/98 mmHg
Pulse	70/min
Weight	92 kg

Samprapti Ghataka-

Dosha	Tridosha - Vata (vyana,apana),Pitta,Kapha **Main**- Kapha (Bahudrava shleshma)
Dushya	Rasa,Meda,Mamsa,Kleda,Shukra,Rakta,Vasa,Majja,Lasika,Oja,Ambu,Sweda **Main**- Meda,Mamsa,Kleda
Srotas	Mutravaha,Medovaha,Udakavaha,Swedavaha,Mamsavaha
Srotodushti	Atipravruti,Sanga,Vimarga gamana
Agni	Dhatvagnimandhya
Udabhvasthana	Amashaya
Vyaktasthana	Mutravaha Srotasa,
Adhisthana	Basti, Sharira
Marga	Madhyama Marga
Shadhya-ashadhyata	Chirakari, Anushangi

Samprapti


Aharaja Nidana
(Guru,Madhura,Snigdha,Dugdha,Dadhi Sevana)
Viharaja Nidana
(Avyayam)
Sleshmaprakopa(Pragatibhuyatwat)
Kshipram Visruptim Labhate
(Sharira Saithilyatwat)
Kapha +Medha Dusti (Samanagunabhuyisthatvat)
Dhatwagnimadhya
Dushita Meda + Sleshma
Excess of Kleda
Rasa Rakta gata Bahu avaddha Meda
Ecessa of Kleda turns into Mutra
Dyslipidemia
Vitiated Vata pushed excess Kleda in Basti
Leads leads to sign& Symptoms of Prameha
Like Bahu Avilamutrata, Trishnadhikya

Treatment plan-

Internal medicine -

Name of medicine	**Dose**	**Duration**	***Anupana***	**Time of administration**
Arogyavardhini Vati	2/2/2	90 days	*Sukhoshna Jala*	After meal
Sudarshan Ghanvati	2/2/2	90 days	*Sukhoshna Jala*	After meal
Mamejava Ghanvati	2/2/2	90 days	*Sukhoshna Jala*	After meal
Shankh Vati	2/2/2	90 days	*SukhoshnaJjala*	After meal
Chandraprabha Vati	2/2/2	90 days	*Sukhoshna Jala*	After meal
Manjishthadi Kwath *Pathyadi Kwatha* *Khadira Churna* *Dhatrinisha Churna-* *Vijayasara Churna*	10 gm 10 gm 5 gm 5 gm 5gm /2time/day	90 days		Empty stomach

Virechana plan-

	Drug name	**Dose**	**Duration**	***Anupana***
Snehapana Arohi krama	*Triphala Taila*	50 ml to 250 ml	5 days	Luke warm water
Sarvanga Abhayanga	*Nirgundi Taila*	-	3 days	
Sarvanga Nadi Swedana	*Dashmoola Kwath*	-	3 days	
Virechana Dravya	*Triphala Kwatha* *Panchasakar Churna* *Abhayadi Tablet* Castor oil	50 ml 20 gm 4 Tablet 50 ml	1 days	*Shitambu*
Sansajana Krama	*Peyadi Krama*		5 days	

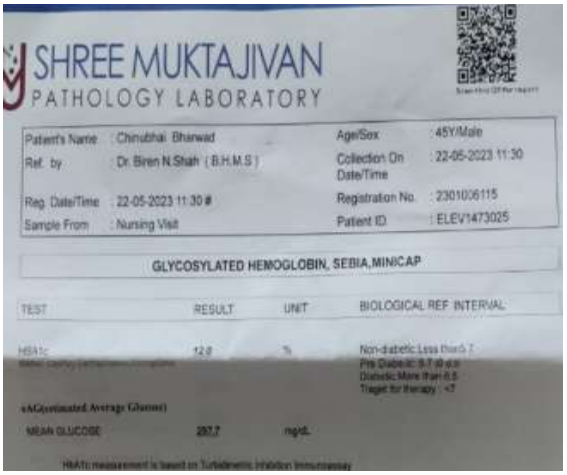
After *Virechana* treatment:-

Internal medicine

Medicine name	Dose	Duration	Time of administration	Anupana
Mamejava Ghanvati	2/2/2	1 month	After meal	Luke warm water
Sudarshan Ghanvati	2/2/2	1 month	After meal	Luke warm water
Arogyavardhini Vati	4/0/4	1 month	After meal	Luke warm water
Sutshekhar Rasa	2/0/2	1 month	After meal	Luke warm water
Chitrakadi Vati	2/0/2	1 month	After meal	Luke warm water
Manjishthadi Kwath *Pathyadi Kwatha* *Khadira Churna* *Dhatrinisha Churna* *Vijayasara Churna*	10 gm 10 gm 5 gm 5 gm 5 gm /2times /day	1 month	Empty stomach	-
Triphala Ghrita (Samana Matra)	10 ml	1 month	Empty Stomach (*Pratah kala*)	Luke warm water

Result:-

	Before treatment	After treatment
Trishnaadhikya	++++	-
Kshudhaadhikya	++++	+
Aayas adhika	++++	-
Uadar gauravta	+++	-
Uraha daha	+++	-
Daurbalyanubhuti	+++	-


SHREE MUKTAJIVAN
PATHOLOGY LABORATORY

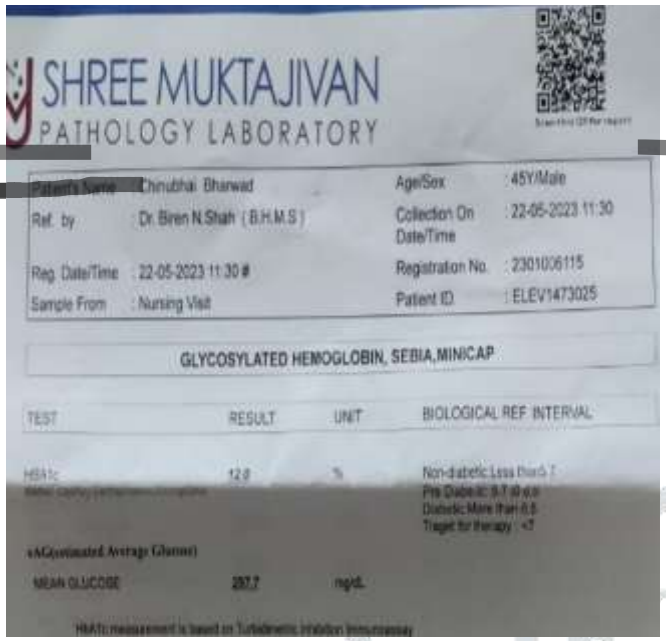
Patient's Name : Chinubhai Bharwad
Ref. by : Dr. Biren N.Shah (B.H.M.S)
Reg. Date/Time : 22-05-2023 11:30 #
Sample From : Nursing Visit
Age/Sex : 45Y/Male
Collection On Date/Time : 22-05-2023 11:30
Registration No. : 2301006115
Patient ID : ELEV1473025

GLYCOSYLATED HEMOGLOBIN, SEBIA,MINICAP

TEST	RESULT	UNIT	BIOLOGICAL REF. INTERVAL
HbA1c	12.8	%	Non-diabetic Less than 5.7 Pre Diabetic 5.7 to 6.4 Diabetic More than 6.5 Target for therapy : <7
MEAN GLUCOSE	297.7	mg/dL	

HbA1c measurement is based on Turbidimetric inhibition immunoassay

	Before treatment (22/5/2023)	**During treatment (30 /6/2023)**	**During treatment (5/9/2023)**	**After treatment (5/10/2023)**
Weight	92 kg	80 kg	82 kg	79 kg
FBS	180 mg/dl	176 mg/dl	170 mg/dl	118mg/dl
PPBS	250 mg/dl	200 mg/dl	180 mg/dl	140 mg/dl
Hba1c	12.0 %	9.80%	7.60 %	6.90 %
S.Cholesterol	222.63 mg/dl	180.0 mg/dl	200 .0 mg/dl	170 mg/dl
Hypertension	140/98 mmhg	136/90 mmhg	130/90 mmhg	120/80mmhg
Waist Circumference	110 cm	108 cm	100 cm	96 cm
Tryglyceride	690.54 mg/dl	240 mg/dl	200 mg/dl	160.5 mg/dl


SHREE MUKTAJIVAN
PATHOLOGY LABORATORY

Patient's Name : Chhubhai Bharwad
Age/Sex : 45Y/Male
Ref. by : Dr. Biren N.Shah (B.H.M.S)
Collection On Date/Time : 22-05-2023 11:30
Reg. Date/Time : 22-05-2023 11:30 #
Registration No. : 2301006115
Sample From : Nursing Visit
Patient ID : ELEV1473025

GLYCOSYLATED HEMOGLOBIN, SEBIA,MINICAP

TEST	RESULT	UNIT	BIOLOGICAL REF. INTERVAL
HbA1c	12.9	%	Non-diabetic:Less than 5.7 Pre Diabetic: 5.7 to 6.5 Diabetic:More than 6.5 Target for therapy : <7
eAG(estimated Average Glucose)			
MEAN GLUCOSE	297.7	mg/dL	

HbA1c measurement is based on Turbidimetric inhibition immunoassay


SCIENTIFIC
DIAGNOSTIC CENTRE

TEST REPORT
Reg. No. : 1023203271

Name : CHINUBHAI BHARWAD
Age/Sex : 4 Years / Male
Passport No.
Ref. By
Client Name : SHREEJI LAB, VATVA
Sample Type : Whole Blood EDTA
Status : Final
Reg. On : 05-Oct-2023 01:37 PM
Collected On : 05-Oct-2023 01:37 PM
Approved On : 05-Oct-2023 02:37 PM
Generated On : 05-Oct-2023 02:43 PM
Ref ID :

Parameter	Result	Unit	Biological Ref. Interval
HEMOGLOBIN A1 C ESTIMATION			
HbA1C	6.90	% of Total Hb	< 5.7% - NON DIABETIC 5.7-6.4% - PRE DIABETIC >=6.5% - DIABETES 7.0% - ADA TARGET FOR DIABETIC PATIENT REF: ADA GUIDELINES 2018
Estimated Average Glucose (eAG) *	151.33	mg/dL	

HbA1c value is a more accurate index of long term diabetic control for preceding 2-3 months of doing the tests.
HbA1c is a determination of long term glycemic control than blood glucose determination as blood glucose levels fluctuates on daily basis.
We Perform HbA1c using gold standard HPCL technology free from interference from Diff type, Hgemo, temperature fluctuation, pH and sample degradation.

End Of Report


SHREE MUKTAJIVAN
PATHOLOGY LABORATORY

Patient's Name : Chhubhai Bharwad
Age/Sex : 45Y/Male
Ref. by : Dr. Biren N.Shah (B.H.M.S)
Collection On Date/Time : 22-05-2023
Reg. Date/Time : 22-05-2023 11:30 #
Registration No. : 2301006115
Sample From : Nursing Visit
Patient ID : ELEV1473025

LIPID PROFILE

TEST	RESULT	UNITS	BIOLOGICAL REF. INTERVAL
Serum Cholesterol	222.62	mg/dL	Less Than 200
Serum Triglyceride	696.54	mg/dL	Upto 150
Serum HDL Cholesterol	28.34	mg/dL	40 to 60
LDL Cholesterol(Calculated)	48.182	mg/dL	65 to 100
Serum VLDL*	139.70	mg/dL	5 to 40
Chol./HDL Cholesterol Ratio	7.86		Upto 5.0
LDL/HDL Ratio	1.69		Upto 3.5

End Of Report


SHREEJI
PATHOLOGY LABORATORY
(COMPUTERISED DIAGNOSTIC CENTRE)

Rahul Patel (B.Sc., M.L.T.) Ashok Patel (B.Sc., M.L.T.)

1, Dhara Appartment, Near Mahrishaya Hospital, Unchi Sheri, Vatva Gam, Ahmedabad-382440.
Time :- 8.30 a.m. to 8.30 p.m. • E-mail : shreejilab.vatwa@gmail.com • Sunday : 9.00 a.m. to 1.00 p.m.

Patient Name : CHINUBHAI BHARWAD
Age & Sex :
Reference: DR. SELF
ID: 153689
Reg. Date: 05/09/2024

LIPID PROFILE

Test	Observed Value		Biological Reference Interval
Sample	Fasting Blood Serum		
Cholesterol	170.0	mg/dL	< 200 : Desirable 200-239 : Borderline High >= 240 : High
Triglyceride	288.0 H	mg/dL	< 150 : Normal 150 - 199 : Borderline High 200 - 499 : High >= 500 : Very High
HDL Cholesterol	46	mg/dL	< 35 : Low (High Risk) >= 60 : High (Low Risk)
VLDL	32 H	mg/dL	0 - 30
LDL Cholesterol	92.0	mg/dL	< 100 : Optimal 100 - 129 : Near/Above Optimal 130 - 159 : Borderline High 160 - 189 : High >= 190 : Very High
LDL Chol. / HDL Chol. Ratio	2.0		1.0 - 3.4
Cholesterol / HDL Chol. Ratio	3.7 H		0 - 3.5

Discussion:

As per *Ayurvedic* Parlance, metabolic syndrome is the outcome of over nutrition due to *Dhatwagni Mandhya* .Obesity and lipid disorders compared with *Ayurveda* with context of *Prameha* and *Medoroga.*

Treatment of *Santarpanjaniya vyadhi* According to *Acharya Charaka Satmyachesta sevya,Panchakarma*, e.g. *Vamana,Virechana,and Raktamokshana ,Udvartana ,Ruksha, Guru, Atarpana ahara sevan* e.g *Vyayama vihara sevan* etc are beneficial in preventing and treating the *Santarpanajanya Vyadhi* . *Shodhana* and *Lekhana karma* which are helping in elimination of excess *Kapha* and *Meda* and also be helpful in management of *Medovaha dusti Vikara.*

- *Arogyavardhini Vati* mainly ingredient katuki which acts as *Bhedana karma* one type of *Virechana karma* and acts on *Yakruta,* improve metabolic system, Supports metabolism and weight management, protecting against metabolic syndrome disorders such as Obesity, Cholesterol, Diabetes and Heart disease.

- *Sudarshana Ghanvati* mainly ingredient *Kirata Tikta* which acts *as Srotoshodhana ,Pitta Rechana,Anulomana* properties.*Tikta rasa* having *Kapha Medo Shoshna* properties acts on Diabetes and Cholesterol.

- *Chandraprabha Vati* exhibited anti hyperglycemic effects and attenuated alterations in lipid Profile.Also use in *Mutrakriccha,Daurbalya,Mandagni*.

- *Mamejava ghanvati* used in diabetes,it *has tikta rasa,laghu guna ,ushna virya, katu vipaka kapha, pitta shamaka* and Anti diabetic properties.

- *Virechana Karma* Acts as Removing *Srotoavrodha,*Promotes detoxification and installing *Rasayana* properties through Toxins and stagnant excreta waste metabolites from body and also eradicate the root cause of diseases leading to a permanent cure of diseases.

- *Virechana karma* acts on liver Which is the seat for all microsomal enzymal activity. It improves metabolism which in turn reduces free fatty acids accumulation. This in turn results into weight loss and reduction in waist circumference. All these Conditions together help in pacifying symptoms of Metabolic Syndrome.

Conclusion

Thus on the basis of observations made in the present study it can be concluded that metabolic syndrome is *Meda* dominant disorders has strong resemblance with *Prameha* and *Sthaulaya/Medaroga*. Thus, it can be concluded that *Virechana karma* is *Samshodhana* procedure which helps in removing harmful diseases causing chemical by-products from the body, hence pacifying the symptoms of Metabolic Syndrome by *Srotoshodhana* of the body.

Reference

1.Sushruta Samhita sutra sthana 38/8-9.

2.Charaka Samhita, volume-1, Vidhyotini Vyakhaya, By Shree Satyanarayana Shastri, published by Chaukhamba Bharti Academy Nidana sthan 4/5, page no-632