

SWASTHAVRITTA IN PREVENTING LIFE STYLE DISORDERS IN OBESITY

Dr Mahesh M. Rathod¹ & Dr. Bhairav B. Tawshikar Kulkarni²

¹Assistant Professor, Swasthvritta Deptt. _S R C AYURVED COLLEGE CHIKHLI

²Associate Professor, Kayachikitsa Deptt, Ashvin Rural Ayurved College, Manchihill

Email: drmaheshrathod2008@rediffmail.com

ABSTRACT

Because of modernization and inactive way of life, metabolic issues have risen quickly. Sthaulya is an abnormal and excess accumulation of Medodhatu. Sthaulya can be compared with obesity. As per World Health Organization (WHO) report currently half a billion people (12% of the world total population) are considered obese. For developing countries like India obesity is becoming public health priority. India is one of the capitals of diabetes and cardiovascular disorders. A way of living in present lifestyle which includes altered food habits, sleep pattern, stress, strain, working environment, pollution leads to various life style disorders like obesity, hypertension, cardiovascular accidents (CVAstroke), diabetes mellitus, and tobacco-alcohol-nutrition induced cancers, arthritis etc. Ayurveda being a holistic health science constitutes preventive aspects as well as treatment aspects of disease Sthaulya. The preventive aspects of obesity have been taken under the heading Swasthvritta.

Keywords: Obesity, Swastavritta

INTRODUCTION

Lifestyle diseases (also sometimes called diseases of longevity or diseases of civilization) are diseases that appear to increase in frequency as countries become more industrialized & people live longer. They can include obesity, hypertension, cardiovascular accidents (CVA- stroke), diabetes mellitus, and tobacco-alcohol nutrition induced cancers, arthritis etc. Diet and lifestyle are major factors thought to influence susceptibility to many diseases. Drug abuse, tobacco smoking, and alcohol drinking, as well as a lack of exercise may also increase the risk of developing certain diseases, especially later in life²⁻⁴. As per World Health Organization (WHO) report currently half a billion people (12 % of the world total population) are considered obese⁵.

In India obesity is emerging as an important health problem, paradoxically co-existing with significant malnutrition prevailing in different sections (classes) of the population. In today's scenario, food is plenty and majority of the world's population overeats regularly, with resultant fat storage. Sthaulya is included under eight undesirable conditions (Ashtau Nindita)¹, Shleshma Nanatmaja,² Santarpana Nimittaja,³ Atinindita,⁴ AtiBruhmana Nimittaja,⁵ and Bahu Dosha Janita Vikara.

The patient of Sthaulya exhibits very strange phenomenon. Their appetite is excessive⁸ and whatever they eat is quickly digested, which indicates hyperfunctioning of the Jatharaagni. Besides this, the patient suffers from laziness, may be due to under supply of energy, which may be due to hypofunctioning of Bhutaagni. Further Dhatvaagni also seems to be disturbed,

as in Sthaulya patient mainly Medo-Dhatu is formed and there is deficiency of other Dhatu.⁹ Hence, it can be inferred that in Sthaulya, Jatharaagni is Tikshna, Bhutaagni is Manda and Dhatvaagni is disturbed in their respective functions. The Obesity is a physical state where Hypertension, Osteoarthritis, Diabetes Mellitus, Cardio Vascular accidents, impotency and many other grave complications frequently converge. Many institutions and Medical schools are making efforts to find a perfect remedy for this burning problem. MATERIAL AND METHODS Literature regarding obesity is reviewed from various classical texts of Ayurveda (Samhitas), research journals, web sites and from western medical books and prevention levels of diseases mentioned in community medicine science in context with obesity are correlated with Ayurvedic Swasthavritta with reference to sthauya (Obesity). Data has been collected. Matter is also collected regarding the pathya Apathya and Vyayam, yoga in Sthaulya and all Compiled matter is reorganized and critically analyzed for the discussion and trial has been made to draw conclusions Problem Magnitude According to the Centre for Disease Control and Prevention (CDC), more than 72 million adults are obese and no state has an obesity rate less than 15 % - the national goal. Among U.S. adults, obesity has ballooned exponentially from forty-six percent to sixty-four percent of the population between 1980 and 2000. Etymology (Vyutpatti) of Word Sthaulya The word Sthaulya is delivered from root "Sthu" with suffix "Ach", which stands probably for thick or solid or strong or big or bulky. According to Vachaspathyam, the word Sthaulya means heaviness of the body. ¹⁰ According to Amarakosha, it stands for excessive growth of the

body.¹¹ As per Hemachandra, Sthaulya indicates the state of over nutrition of body or dullness of intellect. According to Kautilya, the word "Sthulata" means largeness or bigness or bulkiness or stoutness of body. Nirukti of Sthaulya A person having heaviness and bulkiness of the body due to extensive growth especially in Udaradi region is termed as "Sthula" and the state (Bhava) of Sthula is called "Sthaulya" Definition (Vyakhya) of Sthaulya Sthula is defined as a person, "who on account of the inordinate increase of fat and flesh, is disfigured with pendulous, buttocks, belly and breasts and whose increase bulk is not matched by a corresponding increase in energy".¹³ Sthaulya can be correlated to obesity. Excess deposition of adipose tissue is obesity. A recent National Institute of Health Nidana (etiological Factors) of Sthaulya Various causative factors of Sthaulya related to different aspects of life that affect the body from outside and inside are described in classical texts of Ayurveda. The hereditary (Beeja Dosha), dietetic, regimen and psychological factors cause Sthaulya as per Charaka Samhita¹⁴. Aetio-pathogenesis of Sthaulya: All the Nidana described by various Acharyas for Medoroga can be classified under four broad categories as follows^{15,16}

- 1) Aharaj Nidana (dietary): Madhura Aharasevana (excessive sweat intake), Guru Aharasevana (heavy digestible food), Santarpana, Adhyashan, Snigdha Aharasevana, Navanna sevana (new seed), Nava Madyasevana (new alcohol), Mamsa Sevana, (Non vegetarian), Dadhi Sevana, (yoghurt), Ikshu Vikara Sevana, Guda Vikara Sevana etc.
- 2) Viharaj Nidana (life style related): Avyavaya (lack of sexual life), Avyayama (lack of physical exercise), Diwaswaap (day time sleep), Swapnaprasangat (long sleep),

Gandhamalyanusevana (using perfumes, garlands), Bhojanottara nidra (sleeping after meal), Asana Sukham (excessive sitting), Bhojanottar snaana (bathing after taking the meal) etc.

- 3) Manas Nidan (Psychological factors): Achintanat (lack of tension), Harshnityatvata (uninterrupted cheerfulness), Manasonivritti (mental relaxation), Priyadarshana (watching of beloved), Saukhyena (complete happiness) etc.
- 4) Anya Nidana (other causative factors): Amarasa (free radicals), Bijadoshaswabhava (hereditary), Snigdha Madhur Basti Sevana (administration of Unctuous & Sweet enema), Snigdha Udvartana (unctuous unction), Tailabhyanga (oil massage). The causes of obesity are distributed in three main groups according to modern medicine. Exogenous: Where the chief causes are excessive appetite or over eating, dietary habits, drinking habits and smoking. Endogenous: Where endocrine factors are also important. Miscellaneous: A number of factors are known to be associated with obesity like age, sex, occupation, socioeconomic factors, psychogenic factor, environment factors, constitution, drugs, hypothalamic trauma, physical activity, caloric balance and heredity. The etiological factors described by Acharyas can be categorized broadly under 4 categories-
 1. Guru, Madhur, Snigdha and Sheeta Guna predominant diet.
 2. Avyayaam, Avyavaya, Achintana, etc are the Khavaigunyakara (Srotodushtikara) entities.
 3. Atibhojana, Atimadhura, Atisnigdha etc are the Agnimandyakara entities.
 4. Beejadosha. Samprapti: In Samprapti (pathogenesis) of Sthaulya, all the three Doshas are vitiated especially Kledaka Kapha, Pachaka Pitta, Samana and Vyana Vayu are the responsible factors for proper digestion and

metabolism of food at the level of alimentary tract and body tissue. Dushti of these Tri-Dosha components results in indigestion metabolic deformity and formation of Ama at tissue level as well as alimentary tract. Sthaulya is a dushya dominant disorder. Due to excess Agni more Annarasa is produced and the quality of diet i.e. Guru, Madhur, Snigdha, Sheeta Guna dominance Dhatu Poshakansha is formed in more quantity. At start the Rasagata, Raktagata and Mamsagata Sneha also increase production of Medodhatu. But due to medodhatwagnimandya this condition worsens and nourishment of further dhatus doesn't happen properly. Due to binge eating, rasa, rakt, mamsagat sneha tends to increase. Patient shows the symptoms of rasavridhi and kaphavridhi. eg. angagaurav, alasya, tandra and nidradhikya. Medadhatu gets increase with physical signs like chalsphik-udar-stana, kshudra shwas, swedadhikya etc and finally lands into Sthaulya. Common health consequences of obesity: Obesity is a major risk factor for non-communicable diseases²⁹ like; Cardiovascular diseases (mainly heart disease and stroke), Diabetes mellitus, Musculoskeletal disorders, Some cancers (endometrial, breast, and colon), Gynecomastia, Menstrual abnormalities, Gall stones, Obesity hyperventilation Syndrome. Youth corpulence is related with a higher possibility of weight, sudden passing and handicap in adulthood but notwithstanding expanded future dangers, stout youngsters experience breathing challenges, expanded danger of breaks, hypertension, and early markers of cardiovascular infection, insulin opposition and mental impacts. WHO has developed the "Global Action Plan for the prevention and control of noncommunicable diseases 2013- 2020"

Swasthavritta and Sthaulya Swasthavritta has a great potential in preventing all life style disorders. Obesity can be prevented by intervention in its cycle of pathogenesis as early as possible beginning from the avoidance of predisposing factors of the disease. Measures for prevention of Sthaulya (obesity) can be classified as: 1. General and 2. Specific measures. General measures include properly observing Dinacharya and Ritucharyasadavritta, self control and knowledge of various factors affecting health, good habits, avoiding food in excess quantity (Atyashana), Apathy Aacharana, Virudhashana avoiding Diwa Swapna (Sleeping in day time), doing regular exercise and many others. Prevention: Prevention is defined as the art and science of health promotion, disease prevention, disability limitation and rehabilitation³⁰. Levels of Prevention: – Primordial Prevention: Prevention of development of risk factors in countries or population group in which they have yet not appeared.

CONCLUSION

Obesity is a non-communicable disease is largely preventable. There is no specific treatment for obesity, Supportive environments and communities are fundamental in shaping people's choices, making the healthier choice of foods and regular physical activity the easiest choice (accessible, available and affordable), and therefore preventing obesity. Obesity occurs more in female than male. Life style modifications as per given in classical texts i.e following dinacharya, ruksha Udavrtana in context with Sthaulya can be useful in avoiding Sthaulya. Rutunusar Shodhana procedures like Vamana in Vasanta Ritu according to classical methods will

definitely help in preventing obesity and longevity can be increased.

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