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COMPARATIVE STUDY OF MEDAVRIDDHI & STHAULYA QUOTED IN BRIHATRAYI FROM THE DESK OF KRIYA SHARIR

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ABSTRACT

Overweight and obesity are blessings of modern age of machines and materialism. It occurs as a result of lack of physical activity with increased intake of food. Symptoms of Medavriddhi & Sthaulya both are given in our Samhitas. Charaka has not stated Medavriddhi but explained Sthaulya . So whether Medavriddhi & Sthaulya are same or different. On the other hand, most of these symptoms are overlapping. So it is a difficult task to differentiate between the two. The old adage, 'prevention is better than cure' holds true in the case of Sthaulya also. This study will contribute in diagnosing & preventing the hazards of Sthaulya & its complications. So the present study has been selected. This is an attempt to study and compare the symptoms of Medavriddhi & Sthaulya quoted in Brihatrayi and to study whether these symptoms are same or different. Literature regarding *Medavriddhi& Sthaulya* has been collected from Brihatrayi. Basic concept of MedaDhatu & Nidana panchaka of Sthaulya has been learned. Symptoms of these two have been reviewed and compared. The difference between the two has been plotted to diagnose these conditions earlier. By summing up all observations, Purvarupa of Sthaulya could be considered as Medavriddhi& vice versa. Treatment prescribed for *Heen Sthaulya* by Vagbhata could be useful to control *Medavriddhi*. Hence Heen Sthaulya could be considered as Medavriddhi. It is concluded that Medavriddhi& Sthaulya are definitely not same. If Sthaulya is diagnosed earlier at the stage of Medavriddhi, hazards of Sthaulya could be prevented. These sincere efforts will contribute in maintaining sound health.

Key words: Anguli Pramana; Heen Sthula; Medavriddhi; Sthaulya; Nidana panchak; Overweight; Obesity

INTRODUCTION

Overweight is a blessing of the modern age of machines and materialism. It occurs as a result of lack of physical activity with increased intake of food. The industrialization, stress during the work, dietary habits, lack of exercise & various varieties in daily diet e.g. fast food, canned foods, freezed fruits, increased amount of soft drinks and beverages, results into the clinical entity which can be called as obesity. The condition of obesity can be diagnosed earlier & i.e. overweight.

According to definition of Swastha Purusha (healthy individual) by Charaka¹ and Sushruta², a healthy body is the only one media to achieve the ultimate goal among the Chaturvidha Purushartha (four objectives of life). Acharya Sushruta also said that Madhyama Sharira (moderate physique) is the best but *Ati Sthula* (too obese) and Ati Krusha (too thin) are always affected with some complaints.³ Acharva Charak has thrown light on the eight varieties of impediments which are designated as *Nindita Purusha* (undesirable constitution); *Ati Sthaulya* comprises one of them.

It is a difficult task to differentiate between the symptoms of *Medavriddhi* (aggravated adipose tissue) & *Sthaulya* as most of these symptoms are overlapping. The old adage, 'prevention is better than cure' holds true in case of *Sthaulya* also. This study will contribute in diagnosing & preventing the hazards of *Sthaulya* &its complications. This will be a sincere effort to maintain global health. So after looking vital importance of *Sthaulya*, present study is selected.

AIMS & OBJECTIVES

- To study the symptoms of Medavriddhi & Sthaulya quoted in Brihatrayi.
- 2. To compare the symptoms of *Meda-vriddhi & Sthaulya* quoted in Brihatrayi.
- **3.** To study whether the symptoms of *Medavriddhi & Sthaulya* are same or different.

MATERIALS & METHODS

A] Literature search- Review of literature regarding *Medavriddhi & Sthaulya* is collected from Brihatrayi.

B] Type of study- Conceptual study

CONCEPTUAL STUDY OF MEDA DHATU

Etymology-Literally, the word *Meda* (adipose tissue) is derived from root "*Jhimida Snehana*". This stands for fat, oil etc. It means the substance which has *Snigdhata* (unctuousness) property is called *Medas*.

Quantity of Meda Dhatu -The total quantity of Meda Dhatu is two Anjali (handfuls). ⁵

Functions of *Meda Dhatu*- According to Sushruta, *Snehana (lubrication), Swedana (sweating), Drudhata (stability)* and *Asthipushti* (nourishment to bones) are the

functions of *MedaDhatu*. Again *Netra* and *Gatrasnigdhata* (unctuousness of eyes & body)are the additional functions of *MedaDhatu*. Snehana is the main function of *MedaDhatu* and with *Sneha* property it helps to keep lustre of skin, hair, eye, etc. Another function of *Meda* is creation of *Sweda* and *Sweda* is mentioned as mala (excretory product) of *MedaDhatu*.

Ashryashrayeebhava (reciprocal relationship) of *MedaDhatu* - Similar allied properties of homogenous *Dhatu* (tissue)or *Dosha* (biological humors) may serve as a cause to the nutrition or vitiation of a *Dosha* or *Dhatu* and in this context, *Meda* can be considered as a location of the resident (energy of cohesion), since *Meda* plays a major role in nutrition or vitiation of *Kapha* and vice versa. ⁹

Root of Medovaha Srotas (channel carrying adipose tissue)-According to Charaka, Vrikka (kidneys) and Vapavahana (omentum)¹⁰, according to Sushruta, Vrikka and Kati (waist) Moolsthana (roots)of Medovaha Srotas .Dr. Ghanekar B.G. considered the Medovaha Srotasas as the capillaries of the and omentum. 11 perinephric tissue According to Vagbhata, Vrikka and Mamsa (muscular tissue) are Moolsthana (roots)of Medovaha Srotas. 12

Formation of *Medadhatu*-According to Charaka, *Mamsa* being digested by *Agni* (digestive fire) and combines with the quality of liquidity and unctuous substance and finally gets converted into Meda *Dhatu*. ¹³

Characteristics Of Meda sara (excellence of adipose tissue) person-The salient features of Meda sara persons are: Varna (complexion), Swara (voice), Netra (eyes), Kasha (hairs), Loma (small hairs), Nakha (nails), Danta (teeth), Oshtha (lips), Mutra (urine), Purisha (faeces) are excessively

unctuous. This *Medasarata* gives *Vitta* (wealth), *Aishvarya* (sovereignty), *Sukha* (happiness), *Upabhoga* (enjoyment), *Pradaan*a (charity), *Aarjava* (kindness), *Sukumaropacharata* (delicacy\cannot tolerate severe treatment). ¹⁴ *Medasara* is known to pass unctuous urine and sweat, has a mellow voice, a bulky body and to be incapable of doing physical labor. ¹⁵

Symptoms of *Medakshaya* (alleviated *Medadhatu*)- Decrease of *Medadhatu* gives rise to enlargement of *Pliha* (spleen), feeling of emptiness of the joints, dryness & craving for fatty meat. Decrease of *Medadhatu* produces enlargement of spleen, loss of sensation in the waist, emptiness of joints, roughness & emaciation of the body, fatigue, desire for fatty meat & other symptoms. Decrease of *Meda* causes loss of sensation in the waist, enlargement of spleen & emaciation of the body. 18

Symptoms of *Medavriddhi* –Aggravated *Medadhatu* produces unctuousness of body, enlargement of abdomen & flanks, cough, dysnoea, bad smell etc.¹⁹

Meda when increased produces the same symptoms as *Mamsavriddhi* & in addition, it causes fatigue, breathlessness even after little work, sagging of buttocks, breasts & abdomen.²⁰

Meda when increased produces enlargement of glands in the neck & scapula, malignant tumors, benign tumors, diseases of the palate, tongue & throat; increase in size & heaviness of buttocks, neck, lips arms, abdomen, chest & thighs; & other symptoms of increase of *Kapha & Rakta* (blood tissue).²¹

CONCEPTUAL STUDY OF STHAU-LYA

Hetu (aetiology) - *Sthaulya* is caused by over intake of heavy, sweet, cooling & unctuous food, lack of physical exercise,

abstinence from sexual intercourse, day sleep, uninterrupted cheerfulness, lack of mental exercise & heredity.^{22, 23}

Samprapti (pathogenesis) - Due to obstruction of passage by the fat, the movement of *Vata* (energy of propulsion) is specially confined to *Koshtha* (abdominal viscera) resulting in the stimulation of the digestive power & absorption of food, so the patient digests food quickly & becomes a voracious eater. If he does not get food as & when he needs it, he can be subjected to many diseases of serious nature.²⁴

Purvarupa (prodromal features)-None of the textual authorities have described prodromal symptoms and signs of *Sthaulya*. But, as manifestation of disease is preceded by premonitory signs as per *Nidana panchaka* (five stages of pathogenesis), the weak manifestation of *Rupa* (clinical features) should be considered as *Purvarupa*. 25, 26

Rupa (clinical features)-The symptoms are pendulous buttocks ,abdomen & breasts; disproportionate body ,lethargy, deficiency in longevity, slowness in movement, difficulty in sexual activities, weakness, heaviness of body, foul body odour, excessive sweating ,excessive hunger & thirst, excessive sleep, snoring and stammering. ^{27, 28, 29, 30}

Upadrava (complications)- Difficulty in breathing, fever, rectal fistula, diabetes, loss of movement of thighs, nodules, abscesses & such other diseases are the complications of *Sthaulya*. 31

Sadhyaasadhyata (prognosis) - There is no treatment for *Sthaulya* neither *Brihana* (nutrition therapy) nor *Langhana* (reduction therapy) are enough to overcome excess of fat, digestive activity & *Vata*. 32, 33

DISCUSSION & RESULTS

After reviewing the literature regarding Medavriddhi& Sthaulya, it is observed that Acharya Charaka has not stated Medavriddhi but explained Sthaulya whereas Vagbhata has explained Medavriddhi & not Sthaulya in detailed form of Nidana panchaka. But he has stated types of Sthaulya .On the other hand those who have explained symptoms of Medavriddhi as well as Sthaulya, most of the symptoms are overlapping.

It is also found that in *Nidana panchak*, *Purvarupa* of *Sthaulya* is not given. As per Charaka, the weak manifestation of *Rupa* should be considered as *Purvarupa*.

Vagbhata has for the first time classified Sthaulya in three types while prescribing Chikitsa (treatment).34 These are Heena Sthula (mildly obese), Madhya Sthula (moderately obese) and Ati Sthula (excessively obese). Heena Sthula or mildly obese person has been advised fasting and enduring thirst for treatment of Medo Aadhikya (aggravation of Meda Dhatu). This can be conceptualized that a person who is not suffering from any complications of Sthaulya and has less than four features among eight cardinal features of Sthaulya and suffering from Sthaulya for less than a year can be considered as Heen Sthula.

Madhyama sthula person has been prescribed Deepana (carminative), Pachana (digestive) and Samshodhana (purifying therapy) following it. This can be conceptualized that a person who is not suffering from any complications of Sthaulya but has more than four cardinal features of Sthaulya and duration of Sthaulya more than one year but less than five years can be considered as Madhyama Sthula. Ati Sthula person has been prescribed Samshodhana therapy. This can be conceptual-

ized that a person who has all the eight

features of *Sthaulya* and duration more than five years can be considered as *Ati Sthula*. The treatment procedures can be adopted logically after considering the strength of *Desha,Kala* etc.³⁵

Sushruta has not mentioned any type of *Sthaulya* but has classified *'Deha'* or morphological constitution as *Sthula, Krisha* (emaciated) and *Madhyama* (medium physique) and has prescribed *Karshana* (reduction therapy), *Brimhana* and *Rakshana* (preservation therapy) for them. ³⁶ By summing up above observations, *Purvarupa* of *Sthaulya* can be considered as *Medavriddhi*& vice versa. Treatment prescribed for *Heen Sthaulya* by Vagbhata could be useful to control *Medavriddhi*. Hence *Heen Sthaulya* can be considered as

Medavriddhi is a group of symptoms & it is also not described in the form of Nidana panchaka like any other disease. However Medavriddhican be a premonitory symptom of Sthaulya. In case of Sthaulya, One should consider not only Medadhatu vitiation but also should not neglect vitiation of Mamsadhatu as per Charaka.³⁷ By literature search, it is summarized that Medavriddhi & Sthaulya are definitely not same. Along with literature, Medavriddhi & Sthaulya can be differentiated. In Ayurvedic compendia, quantitative parameter is described in terms of Anguli Pramana (anthropometry).In Anguli Pramana, standard measurements of different body parts like abdomen, chest, neck, thigh etc. are mentioned.³⁸ With the help of this *Anguli* Pramana, the symptoms of Medavriddhi & Sthaulya like pendulous abdomen, buttocks etc. can be assessed. By grading these measurements, the symptoms of Medavriddhi & Sthaulva can be differentiated.

Medavriddhi.

CONCLUSION

By literature search, it is summarized that *Medavriddhi & Sthaulya* are definitely not same. If *Sthaulya* is diagnosed earlier at the stage of *Medavriddhi*, one can prevent hazards of *Sthaulya*. This study will also contribute in diagnosing & preventing complications of *Sthaulya*. These sincere efforts will contribute in maintaining sound health.

With the help of this literary research, Ayurvedic parameters & modern parameters can be developed for proper assessment of *Medavriddhi* & *Sthaulya* to bring objectivity in area of research.

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