TO STUDY THE BRIMHAN SIDDHANT ON THE BASIS OF EFFICACY OF VIDARIKAND ON KARSHYA VYADHI

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ABSTRACT
Karshya (Leanness) is an Apatarpana janya Vyadhi. Aahar factor is the main predisposing factor for this disorder and Alpashana and Vishamaana specially results in the development of karshya (Leanness). As Krishata is a pre stage, it is to be treated with proper care and attention, which otherwise leads to Atikarshy. Karshya and Atikarshya are two forms of malnutrition that is mild or moderate and severe respectively. Pharmacotherapies like Brimhana, Rasayana and Vrishya have been advocated in the classics for the patients of Karshya. The ultimate aim of treating karshya is to achieve a proportionate body. Probable mode of action of brimhana dravya’s can be accessed on the ground of its Gunapanchaka. It is found that majority of brimhana have predominance of guru, snigdha, sheet and manda guna, madhura rasa and madhur vipaka causing brimhana effect.

Keywords: Karshya, brimhana, vidarikand, rasayana.

INTRODUCTION
Karshya (Leanness) is a most wide spreading health and nutritional problem in developing countries. The word ‘Krush’ is derived from root ‘Krush Tanukarane’ with ‘Acha Pratyaaya’[1]. Its literal meaning is to become Krusha and thin. It means a condition or disease in which the body of person becomes emaciated, having less quantity of rasa dhatu further causing a status of mansahinata or manskshaya. According to Acharya Charaka inadequate intake of food in less quantity is prime factor producing karshya (Leanness). Acharya Dalhana comment karshya (Leanness) as “Karshyam Mamsakshayam” means person having kruscha and thin body personality is karshya (Leanness). Karshya (Leanness) and atikarshya show all forms of Malnutrition that is mild, moderate and severe respectively[2]. Karshya (Leanness) being vata pradhan vyadhi, bruhan and rasayana, has been advocated in the classics for its management. The selected drug Vidarikand churna is described in Brihniya Mahakashaya in Charaka Samhita[3]. It has properties of brimhana. Karshya (Leanness) is the condition of being excessively krusha. Both the Krusha and Sthula fall under “Ashtoninditiya” persons as per Charaka[4]. It can be observed that tolerating excess physical exercise, over hunger, thirst, disease and drug is not possible for krusha person. He or she would feel

atishitoshna and can’t indulge in sexual activities. Acharya Charaka described krush as; the person has wasting up buttocks, abdomen, and neck, prominent vascular network, eminent of skin and bone and thick nodes. The pleeha would enlarge in the krush person. They would be victim of cough and wasting kshaya would become a habit. They might be victim of shwasa, gula, arsha, abdominal diseases udar, rakatpitta, disorders of vata[5].

Treatment for Krush: Sthula and krusha person are always prone to various disease. Hence these people must be treated by karshan and brihan chikitsa respectively. In Charak Samhita Vidarikand is included in Bruhaniya Mahakashaya so we have decided to use in karshya chikitsa[6]. So much emphasis is placed on the topic of sthaulya and weight loss that the subject of low body weight is often neglected. Factors such as malnutrition, disease, eating disorders and compulsive exercise can contribute to an unwholesome weight. Being seriously krusha poses major health risk to adults and children, including ashtikshaya, a weakened immune system and interrupted menstrual cycle in women. In a culture obsessed tries to be slim and avoiding sthaulya, health issues associated with being krush recessive relatively little attention. Based on a number of health measure, however, the risk of being krush are comparable to the detrimental effects of sthaulya. While popular American culture may portray thinness as a positive trait to be achieved, overachieving thinness can lead to numerous negative health effects, including death. According to Center for Disease Control and Prevention, krush individuals with a body mass index below 18.5 have a higher-than-expected risk of death when compared to individuals with a normal or overweight body mass index of 18.5 to 30. The human body was designed to operate with a certain amount of fuel and fat stores, and falling below the intended level can detrimentally affect physical and well-being. Although being krush is not at the same epidemic level as being overweight, it has a problem many men and women face. 8 to 9% of the population had a body mass index below 18.5 and falls under the American Dietetic Association definition of krusha. The health problems faced by the krusha are different from those generally associated with being overweight, but they are just as serious. Many people who diet and exercise claim to be so for health reasons, but envy of stick-thin models in the media also helps fuel a multi-billion dollar per year diet and fitness industry. The problem with trying to achieve a certain super-thin ideal is that it’s not the natural, healthy body size for all women. You may be well versed on the potential dangers of sthaulya, but you rarely hear about the reverse. Being krush comes with its own health consequences. A person’s ideal, healthy body weight varies depending on a variety of factors, including age, height, gender, bone density and frame size. Maintaining a weight below one’s ideal weight range poses a number of risks, including increased risk for infection, anemia, osteoporosis and other conditions. The news is often filled with stories of the health issues for those who are overweight or sthula, but being krusha poses its own set of health risks. Men, women and children who are krusha are more prone to some diseases, illnesses and problem during or after surgery, and krusha women may have difficulty becoming pregnant or having healthy pregnancies. Being krusha causes nutritional effects
Vijay Vitthal Bhagat et al: To Study The Bruhan Siddhant On The Basis Of Efficacy Of Vidarikand On Karshya Vyadhi

Aims And Objectives:

AIM: To Study the Bruhan Siddhant on the basis of efficacy of Vidarikanda on Karshya.

Objective: Clinical evaluation of principles in view of effect of Vidarikanda in Karshya.

Material And Methods:

Plan Of Work: Retrospective single blind randomized control trial.

Inclusion Criteria
1. BMI: <20
2. Age: <18-25 years

Exclusion Criteria
1. Suffering from any major systematic, infective, allergic diseases.
2. Hyperthyroidism, endocrine disorders.

Diagnostic Criteria

SpecialCase record form was prepared incorporating signs and symptoms of karshya. Detailed history was taken and complete systematic examination was carried out according to research performed [8]. Flavone present in Vidarikand is free radical scavenger and polyphenol modulate hepatic cholesterol metabolism and reduce inflammation in GIT [9].

Table No.-1

<table>
<thead>
<tr>
<th>Dravya</th>
<th>Latin name</th>
<th>English Name</th>
<th>Rasa</th>
<th>Vipak</th>
<th>Virya</th>
<th>Guna &amp; doshkarma</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vidarikand</td>
<td>Pueraria tuberosa D.C.</td>
<td>Tuberous root</td>
<td>Madhur</td>
<td>Guru, snigdha</td>
<td>Sheet</td>
<td>Vataghna, Pittaghaa</td>
</tr>
</tbody>
</table>

Standard Operating Procedure of Vidarikand Churna: Dried crude vidari root were obtained from the local market and its powder form was obtained with the help of grinder. This powder was allowed to filter through clean four folded cloth piece [10].

Standardization of Vidarikand Churna shows the following results, Table No. 2

<table>
<thead>
<tr>
<th>No.</th>
<th>Testing Parameter</th>
<th>Obtained results</th>
<th>A.P.I. standards</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total ash</td>
<td>14.32%</td>
<td>Not more than 17%</td>
</tr>
<tr>
<td>2</td>
<td>Acid insoluble ash</td>
<td>3.12%</td>
<td>Not more than 4.5%</td>
</tr>
<tr>
<td>3</td>
<td>Alcohol soluble extract</td>
<td>6.96%</td>
<td>Not less than 4%</td>
</tr>
<tr>
<td>4</td>
<td>Water soluble extract</td>
<td>28.68%</td>
<td>Not less than 24%</td>
</tr>
</tbody>
</table>

Formulations Dose: According to Sharangadhar Acharya, dose of churna is 1 karsha therefore One Karsha i.e. 10gm of vidarikanda churna were the dose of study.[11].

Methodology: The total 60 subjects fulfilling the criteria of diagnostic have been selected for study form the OPD irrespective of their sex, religion, occupation etc. Selected subjects have been divided randomly into experimental and control groups having 30 subjects in each group. Vidarikand churna and milk (200ml) at morning daily given to experimental group and only 200ml milk in morning daily were advised to control group. Total duration of treatment was of 45 days with follow up after every 10 days.

Duration of Treatment: 45 days with follow up at every 15 day. Clinical evaluation Subject were assessed and evaluated on the basis of objective and subjective parameters.

Objective Parameters
1. Weight
2. BMI in Kg/m²
3. Waist circumference.
Subjective Parameters: Most of the symptoms and signs of karshya, described in Ayurveda are subjective in nature. To give results objectively and for easy statistical analysis, multidimensional scoring pattern were adopted. This gradation score was obtained before and after the treatment through statistical analysis and percentage relief were taken out to assess the efficacy of therapy. Gradational score was according to the severity symptoms.

Vyayam Sahatwam:
1. Tired by very less physical activity  3
2. Tired by less physical activity  1
3. Tired by doing exercise  0

Sauhityam Satwam
1. Very less than normal diet  3
2. Less than normal diet  2
3. Normal diet  1
4. More than normal diet  0

Shitoshna Satwam
1. Intolerance to little variance  3
2. Little variance tolerated but cold/hot wind/temperature not tolerated  2
3. Local cold/wind weather is tolerated  1
4. Tolerance to extreme conditions  0

Observation and results:
Total Effect of Therapy on BMI:
Table No.-3

<table>
<thead>
<tr>
<th>Total effect of therapy on BMI</th>
<th>Experimental</th>
<th>Control</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of patients</td>
<td>percentage</td>
<td>No. of patients</td>
<td>percentage</td>
</tr>
<tr>
<td>Complete improvement</td>
<td>4</td>
<td>10.22</td>
<td>0</td>
</tr>
<tr>
<td>Marked improvement</td>
<td>2</td>
<td>6.66</td>
<td>2</td>
</tr>
<tr>
<td>Moderate improvement</td>
<td>8</td>
<td>26.66</td>
<td>2</td>
</tr>
<tr>
<td>Mild improvement</td>
<td>16</td>
<td>53.33</td>
<td>26</td>
</tr>
<tr>
<td>No improvement</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>

In experimental group, the therapy shows complete improvement in 4 patients (10.22%), marked improvement in 2 patients (6.66%), moderate improvement in 8 patients (26.66%) and mild improvement in 16 patients (23.33%). In control group, the therapy shows moderate improvement in 2 patients (6.66%), mild improvement in 26 patients (86.00%) and No effect in 2 patients (3.33%).

DISCUSSION
Karshya is an Apatarpana janya Vyadhi. Aahar factor is the main predisposing factor for this disorder and alpashana and vishamaana specially results in the development of karshya. As krishata is a pre stage, it is to be treated with proper care and attention, which otherwise leads to atikarshya. Karshya and atikarshya are two forms of malnutrition that is mild or moderate and severe respectively. Pharmacotherapies like brimhana, rasayana, and vrishya have been advocated in the classics for the patients of Karshya. The ultimate aim of treating karshya is to achieve a proportionate body. Probable mode of action of brimhana dravya’s can be accessed on the ground of its gunapanchaka. It is found that majority of brimhana have predominance of guru, snigdha, sheet and manda guna, madhura rasa and madhur vipaka causing brimhana effect.
CONCLUSION

Vidarikanda having a property of madhura rasa and madhura vipaka which has vata effect Aharpaka vrisya property helps in triglyceride synthesis, which is de-havridhikar bhava. On other hand, guru, snigdha sheet in body and mrudu guna are directly responsible for brimhana effect in body. Rasayan property improves general health and immunity. Jeevaniya property maintains equilibrium of dosha, dhatu and malas. Flavone present in Vidarikand is free radical scavenger and polyphenol modulate hepatic cholesterol metabolism and reduce inflammation in GIT.

REFERENCES

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