

THE LITERARY TREATMENT PROTOCOL FOR MEDOROGA FROM AYURVEDA TEXT, ITS CLINICAL APPLICATION AND EFFICACY IN PRACTICE – A REVIEW

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ABSTRACT

In literary review *Acharya Charaka* and *Sushruta* have discussed the important basic principles regarding *Sthaulya*, afterward all pioneers have given few additional medications only. Abnormal excessive increase of fat and flesh, pendulous buttocks, belly as well as breast, disproportion in growth, furthermore condensed enthusiasm is labeled as *Atisthula*. It is a vital public health concern throughout world. Development of human in injudicious track without natural health concern lead to hazardous change in human lifestyle, dietary habits and genetic impacts which is underline cause of major diseases. *Medoroga* is one of vital among them. In *Medoroga* eaten food articles transforms in to abnormal unctus fat. It predisposes variety of diseases hence causative factors must be discontinued. The *Vata*, *Kapha*, and *Meda* alleviating *Ahar*, *Bheshaja* and variety of exercises should be continued to save from *Medoroga* and its complications. It is witnessed that in curable condition *Shodhana* with *Medohar ahar* and *vihar* are the best measurements for *Medoroga* and transform ill health to healthy one. This review article highlights the literary treatment protocol for *Medoroga* from *Ayurveda* text, its clinical application and efficacy in practice.

Keywords: *Sthaulya*, *Atisthula*, *Medoroga*, *Astonindita*, Obesity, Dyslipidaemia. Complications of Obesity

INTRODUCTION

In literary view *Acharya Charaka* and *Sushruta* have discussed an essential basic aspect regarding *Sthaulya*. Afterward in all literature few additional medications are given.

Acharya Charak states that abnormal excessive increase of fat and flesh, pendulous buttocks, belly as well as breast, disproportion in growth, furthermore condensed enthusiasm is *Atisthula*. Development of human in injudicious track without natural health concern lead to hazardous change in human lifestyle, dietary habits and genetic impacts which is underline cause of major diseases. *Medoroga* is one of vital among them.

In *Atisthula* humans, due to abnormal phenomenon of assimilation, eaten food contents gets converted into fatty substances hence he is sufferer of diseases lifetime or long term or short term hence should be kept

on proper *Karshan* treatment for prolong period. The diet and medicine should be *Vata*, *Kapha* and *Meda* alleviating. One desirous of getting rid of *Sthaulya* must indulge in *Medohar* diet, gradually increase in night awakening, physical as well as mental exercise.

Hetu Parivarjan Chikitsa

Atisampurana: Overeating cause unduly *Meda* formation¹ hence one fourth part of stomach should be kept empty while eating. It improves assimilation and prevents undue fat formation.

Madhur, Sheet, Snigdha Ahar: This category diet is *Guru Santarpan* which cause disproportionately fat and flesh formation¹ hence diet should be changed to *Guru Atarpan* which takes long time to digest and will not disproportionate *Meda* formation. In diet *Prashatika*, *Priyangu*, *Shyamak*, *Yavak*, *Yava*, *Jurnav*, *Kodrav*, *Mudga*, *Kullatha*, *Chakramudgak*,

Adhakibeej with Patol and Amalak followed by Madhodaka are beneficial.²

Avyayam: Lack of exercise leads to excessive deposition of Meda¹ and in preventive care least one-hour Vyayam is required. Vata and Pitta prikriti humans need minimum one-hour exercise. Kapha predominant and Atisthula humans necessitate least two to three-hour exercise per day. Variety of exercises can be practiced like Yoga, Pranayam, walking, running, jogging, swimming, playing etc. as per choice.

Avyavaya: Avyavaya is contributing factor for Sthaulya in few cases.¹The suitable person is eligible for Vyavaya in cold season as per need, in Vasant, Sharad and Varsha rutu minimum gap should be of 3 and 15 days respectively.³ Bala and Vriddha are not eligible for Vyavaya.⁴ Excessive Vyavaya leads to disorders.⁵ Hence Vyavaya may be continued as per guidelines.

Diwaswapa: It causes Kapha and Meda vitiation.¹ Hence divaswap habit should be changed. If not, possible sleep may be permitted in uncomfortable sitting position.

Harshnityatvat and Achintanat: Excessive cheerfulness is contributing factor for Sthaulya¹ hence should be minimized and mental exercise is increased to contribute in reducing unduly Meda and Mansa formation.

Beeja Swabhavat: Genetically Sthaulya is transferred to their progeny,¹ in such cases treatment response is poor. Genetic Atisthoulya generally may not be changed to normal hence patient should maintain his health with more efforts.

Iatrogenic and secondary causes should be managed properly.

Samprapti Vighatana Chikitsa

Kapha dosha aggravating food, frequent food eating habit before digestion of eaten food, lack of exercise and day sleep after food may lead to Ama ahar rasa which is madhurtara which circulates in body and converts in to atisnidgha Meda in body.⁶

Above explained predisposing factors for Ama and Meda formation should be corrected. Frequency of food eating gradually changed to once or twice per day by practice. Habit of frequent eating is difficult to change but possible by practice. Gap between two meals should be minimum 8-12 hours. In between two meals skip tea, snacks, coffee, chocolates, biscuits etc. Change in eating habit, Medohar diet, regular exercise and Shodhana treatment normalize Agni as well as prevents abnormal Meda formation.

Lakshana Chikitsa: Ayushohrasa: In Atisthula, Ahar rasa gets converted into Meda and other Dhatus become malnourished hence life span gets reduced.¹ Vital power Prana gets hampered.⁷ This disturbed equilibrium and early degenerative phenomenon should be changed to normal. Patient is convinced for Shodhana

and Rasayana treatment, for example Virechana, Lekhana basti, Guduchi rasayana, Shilajatu rasayana etc. for prolong period. It will help to prevent early ageing.

Javoprodha: Abnormal excessive Meda is strength less, delicate and heavy in nature hence enthusiasm gets decreased.¹ Shodhana, Medohar chikitsa and gradual increase in exercise will improve enthusiasm.

Kricchra Vyavayata: Excessive Meda cause Avritta-margatva and deficient Shukradhatu hence Atisthula feels difficulty in sexual activity.¹ Capacity of copulation becomes poor.⁷ Virechan, Basti and Sthaulyahar treatment improves sexual and copulation aptitude.

Daurbalya: In Atisthula equilibrium of Dhatus is disturbed hence sufferer experiences weakness.¹ Virechan, Basti, Rasayana and Sthaulyahar chikitsa improves the condition.

Daurgandhya: Body of Atisthula emits foul smell due to inherent defect and nature of Meda as well as due to excess sweating.¹ Shodhana, Medohar treatment, Deha daurgandhyahar udvartan and Pralep are useful.

Swedabaddha: On account of the admixture of fat with Kapha, its fluidity, excessive quantity, heaviness and its inability to bear the physical exercise, it brings about excessive sweating in the body.¹ Shodhan and Medohar conduct, Hastapadaswedadhikyahar yoga like Panchatiktakghrita guggulu or Panchatiktakghrita along with Dehadaurgandhyahar udvartan and Pralep are helpful.

Tikshna Agnitva and Pipasatiyoga: In Atisthula due to avrittamargatva by Meda, Vayu is excessive in Kostha hence Agni becomes tikshna and leads to excessive hunger and thirst.¹ Shodhan therapy, Medohar chikitsa and Shadangapaniya relieves the excessive hunger and thirst.

Symptoms like Swasa, Atinidra, Ayasa, Gaurava, Gadgadatva, Krathana, Agyan, and Shaithilya will subside after proper Shodhan and prolong Medohar treatment in curable state.

Upadrava Chikitsa: Due to Avritta margatva by Meda, activity of Vayu in Kostha gets aggravated, hence Agni become more vigorous and food is absorbed more aggressively, results in fast digestion of food and frequent desire of food intake. After hunger sensation, if Atisthula will not give food, may lead to serious disorders.⁸ Aggravated Agni and Vayu are most complicating; they damage the Atisthula like fire damage the forest.⁹ Such patient should not be kept on fasting. Shodhan, Medohar management and Guru Atarpan diet is advised. Agni will become normal in curable condition.

In excessive Meda, generally vitiated Vata and Agni cause very complicated and serious diseases which may lead to death.¹⁰ Atisthaulya may lead to Prameha, Pidaka, Jwara, Bhagandar, Vidradhi, Vata-vikar and other various diseases which may lead to

death if not treated. Prompt management of associated diseases along with *Sthoulyahar* treatment is required. In *Sthoulya* maximum diseases are due to *Avritta-margatva* in *Strotas* and are powerful therefore preventive measures should be followed since beginning.¹¹

Chikitsa Sidhanta: *Atisthula* is sufferer of life time or long term or short term diseases hence should be kept on proper *Karshan* treatment for prolong period.¹² In *Atisthula* diet and medicine should be *Vata*, *Kapha* and *Meda* alleviating.¹³ *Meda*, *Mansa*, *Kapha* alleviating *Arishta* should be given as *Anupan* in proper dose.¹⁴ One desirous of getting rid of *Sthaulya* must indulge in gradually increase in night awakening, sexual act, physical and mental exercise.¹⁵ Regular exercise, food intake after complete digestion of eaten food, *Yava*, *Godhuma* diet relieves *Santarpan* induced problems and *Sthoulya*.¹⁶ Diseases induced by *Santarpan* should be managed by *Ullekhan*, *Virechan*, *Raktamokshana*, *Vyayama*, *Upavas*, *Dhumapan*, *Swedan Karma*, *Madhu*, *Abhayoprasha* and *Rukshan*.¹⁷

Shodhan Chikitsa: *Shodhana* treatment eliminates the abnormal or excessive *Dosha*, eradicates curable diseases and restores normal strength and complexion. If taken properly, it brings about normal healthy life span.¹⁸

Shodhana Purva Karma: Convince and educate the person about *Shodhana karma* procedure. Diet should be changed to *Pachniya yavagu* or *Mungdal* soup.

Investigations: Routine and specific investigations may be advised as per associated conditions.

Complete examination of patient, daily record of vital functions, weight etc.

Snehapan: *Panchatiktak ghrita* for three to seven days. Dose-start with *hrisiyasimatra* (least dose- 60 ml) and increase per day least by 20 ml. Dose and duration of *Snehapan* should be decided after *Agni* and *Kostha* examination. Generally, peoples having *Mrudu*, *Madhyama* and *Krura koshta*, the *Snehapan* is given for 3, 5 and 7 days respectively¹⁹ or till *samyaka snigdha lakshana*. In cold season and *Kapha* predominance *Snehapan* is given at morning while in hot season and *Pitta* or *Vata* predominance it is given in evening. *Snehapana* should be given on sunny day.²⁰

Abhyanga and Swedan

After *samyak snigdha lakshana*, *Snehapan* is discontinued and *Abhyanga* by *Triphala taila* for 20 to 30 min. in seven postures (sitting, supine, left lateral, right lateral, prone, and again supine as well as sitting) and *Swedana* by *Triphala kwath* till sweating on forehead for 1 to 3 days. Excessive *Swedana* should be avoided.

Effects of Snehana and Swedana: *Snehana* alleviate *Vata*, makes the body soft and separates *Mala* form *Dhatu*,²¹ while *Swedana* liquefies the abnormal *Dosha* at cellular level of the person who has

undergone *Snehana* therapy.²² Hence abnormal excessive *Dosha* can be removed easily by *Shodhana*.

Pathya during Snehapana: Use of boiled lukewarm water for drinking, follow *Brahmacharya* and avoid the subsequent; sleep during day, suppression of natural urges, excessive physical exercise, loud speech, anger, anxiety, excessive cold, air, and sun exposure.²³ *Yusha* or *Peya* or *Vilepi* or *Krishara* can be advised in diet after hunger sensation.

Daily patient is examined for *Agni*, *Mala*, *Mutra*, *Nidra*, *Jihva*, vital function, weight, *Snehapan lakshan* etc. Associated diseases and medicine doses should be monitored carefully.

Shodhana Paschat Karma

Samsarjana Krama

It means graded administration of diet after *Shodhana*. The main purpose of *Samsarjana krama* is not only *Agni sandhukshan* but also to make *Agni mahan* and *sthira*, which can digest all food preparations even of *Guru gunas*.²⁴ The planning of *Samsarjana krama* should be based on the type of *shudhi* i.e. for *Hina*, *Madhyama* and *Pravara shudhi*, it is of three, five and seven day's respectively.²⁵

Various food items used in *Samsarjana krama* are as follows,

Peya (Rice water): *Peya* is the only liquid which can be easily digested. It is prepared by adding rice with 14 times of water and made thin in consistency.

Vilepi (Liquid rice): *Vilepi* is semi-solid. *Vilepi* is prepared by adding rice with 4 times of water and thicker in consistency and should contain rice particles.

Yusha (It is like Green gram soup): In the *Akritayusha*, salt and *Ghrita* is not added, where as in *Kritayusha* both are added.

Mamsa rasa (Meat soup): for vegetarian peoples instead of meat, black grams can be used. In *Akrita mansarasa*, salt and *Ghrita* is not added, whereas in *Kritamamsarsa* both are added.²⁶

After hunger sensation diet should be given in sequence- *Peya*, *Vilepi*, *Akritayusha*, *Kritayusha*, *Akritamamsa rasa*, *Kritamamsarasa*. In *uttama shudhi* each *kalpana* for 3 *anankala*, in *madhyama shudhi* for 2 *annakala* and in *heena shudhi* for 1 *annakala*.

Shodhana Pradhana Karma

Vamana Karma: The *Panchakarma* procedure used to remove the abnormal excessive *Dosha* through the oral route is known as *Vamana*.²⁷

Vamana Yogyata: *Kapha* and *Kapha* predominant conditions, *Swasa*, *Kasa*, *Kustha*, *Prameha*, *Sthaulya*, *Unmada*, *Apasmar* etc.²⁸

Vamana Ayogyata: Infant and old persons, pregnant women, emaciated, *Atisthula* or morbid obesity, severe lung and heart diseases, obstructive diseases of abdomen etc.²⁹

Vamana Dravya: Madanaphala, Madhuka, Nimba, Jimutaka, Kritavedhana, Pippali, Kutaja, Ikshvaku, Ela, Dhamargava etc.³⁰ Suitable Vamana dravya can be used.

Daily patient is examined for Agni, Mala, Mutra, Nidra, Jihva, vital functions, weight, Snehapan lakshan etc. Associated diseases and medicine doses should be monitored carefully.

Yusha or Peya or Vilepi or Krishara can be advised in diet after hunger sensation. Curd and rice is given to patient in the dinner a day before Vamana.

Early in morning, Abhyanga Swedana and akanthapana Mungadal soup is given.³¹ Madanaphala yoga (Madanaphala pippali 3-5gm, Vacha 1gm, Pippali 2gm, Yastimadhu 2gm, Saindhava 10gm and Madhu 100gm) is to be given after recitation of Vamana mantra. Dose is variable as per Vaidya, patient and potency of Madanaphala yoga. Vamanavega starts immediately or up to 1 Muhurta (48 min.). In some patients few loose motions and mild spasmodic abdominal pain may occur and subsides gradually. After completion of Vamana procedure person should be given rest on the bed. Vamanavega continued till the Vamana dravya effect lasts hence pot is required near bed. After complete Samyaka vama lakshana, Dhumapana is given to alleviate remaining Dosha. Lukewarm water is given after proper thirst. After hunger sensation Samsarjanakrama should be given in sequence.

Virechana Karma: The Panchakarma procedure used to remove the abnormal excessive Dosha via the anal route by giving Virechana dravya through oral route is known as Virechana.³²

Virechana Yoga: Pitta and Vata predominant conditions, Kapha predominance in lower body, Santarpan induced Vyadhi, Srotorodha etc.³³

Virechana Ayogya: Infant and old persons, pregnant women, emaciated, severe lung and heart diseases, obstructive piles, obstructive diseases of abdomen etc.²⁹

Virechana Dravya: Trivritta mula, Tilvaka tvaka, Haritaki phala, Eranda taila, Karvellika swarasa, Sudha paya etc.³⁴ Suitable Virechana dravya can be used.

After Abhyanga Swedana; Virechana yoga is given to the patient. Virechana dravya and dose is according to the choice of Vaidya. For example, Trivrittavaleha dose: Patient having Vibandha or Krurkostha, minimum 60-100gm and in Mridukostha patient least 30-50 gm may be given. Dose is variable as per patient and potency of drug. Virechana Vega starts after one to three hours. In some patients few vomiting and mild spasmodic abdominal pain may occur and subsides gradually. Patient becomes hungry after completion of Virechana procedure, then Samsarjana krama is to be started.

During Vaman or Virechana, record the vital functions, number of Vega, lakshana etc. Regular doses of

allopathy medications for associated diseases should be monitored carefully. If Vamana or Virechana drug and dose is properly administered, no adverse effect happens. Lukewarm water is given after thirst.

On the day of Vamana or Virechan, weight reduction occurs in kilograms or grams. Panchakarma procedure may be repeated as per patient's response.

Lekhan Basti: Basti used for Lekhana karma or Medohar karma or Kledahar karma or weight reduction is accepted as Lekhan basti.

Lekhana Basti Yogya: Medomamsa vridhhi, Kapha vitiation, Kleda vridhhi etc.

Lekhana Basti Ayogya: Karshya, Apatarpanjanya vyadhi, Bala, Vrddha, Garbhini etc.

Preparation of Basti Dravya: Ingredients: Triphala kwath-3 pala (120 ml), Gomutra-3 Pala (120 ml), Saindhava-1 Aksha (10gm), Madhu-4 Pala (160ml), Yavakshara-3 Karsha (30gm), Katu taila- 6 Pala (240ml), Ushakadigana (Ushaka, Saindhava, Shilajatu, Kasisdvaya, Hingu, Tuthaka)- 2 Pala (80gm).³⁵ Mix all ingredients uniformly in sequence- Madhu, Lavan, Katutaila, Ushakadi kalka, Triphala kwath and Gomutra. Uniform mixture should be prepared. Quantity of Basti ingredients and dose of Basti should be adjusted after complete assessment of the patient by Siddha vaidya.

Purvakarma: Utsadana and Swedana

Pradhan Karma: After Utsadana and Swedana the patient is given Basti with the help of Basti yantra in left lateral and little head low position to move basti dravya easily. Patient should be empty stomach and educated to withhold the Basti dravya till proper administration. Basti may be given for 8 to 30 days, if Vata vitiation symptoms observed, Triphaladi taila (120 ml) Anuvasana basti may be combined interchangeably.

Pascchatt Karma: After Samyaka basti lakshana or hunger sensation lukewarm Mungdal soup and rest is advised.

Lekhana Basti Effects: The Lekhana Basti cause Sroto shodhana, normalize the function of Agni and Vayu by its Virya. It's Katu, Tikta, Kashaya Rasa reduces the Kapha, Ama, and Meda. It is Meda, Kapha and Kledahar by its prabhava.

Udvardhana: The term Udvardhanam can be split as Urdhava (upward) and Vartanam (movement), to do massage in upward direction.

Udvardhanam is that which brings about Pravilapanam (liquification) and Vimlapanam (demolition).³⁶

Udvardhana Types

Udgharshanam: Rubbing the powders of medicinal drugs over the body without the addition of Sneha is called Udgharshana.³⁶

Utsadana: In Utsadana, the powders of medicinal drugs are mixed with Sneha to make paste. The paste is rubbed over the body in reverse.³⁶

Purvakarma: Udvartana is done after Abhyanga³⁷ hence Abhyanga by Triphala taila for 14 min. in seven postures

Pradhan Karma: Udvartana churna sarvanga gharshana in 7 postures for 20 to 30 min. and Swedana by Triphala kwath till sweating on forehead. Excessive Swedana should be avoided.

Pascchatta Karma: Rest and Snana karma after 30 min.

Effects of Udvartana: Udvartana over the body eliminates bad smell, decrease heaviness, drowsiness, itching and removes undesirable dirt and unpleasantness due to sweating.³⁷

Udvartana helps to normalize the excessive Vata, Kapha and Meda. It increases stability of the extremities, Promotes skin beautification and complexion.³⁶

Udvartan yoga: Jambudaladi udvartana, Shirishadi udvartana, Shyama aragvadhadi udvartana etc.

Bheshaja: Guduchi, Bhadramusta, Haritaki, Bibhitaki, Amalaki, Takrarista, Madhu, Vidanga, Nagar, Yavakshara, Loha bhasma, Yava churna, Bilva panchamula, Shilajeet with Agnimantha swarasa³⁸ Mustadi kwath, Triphaladi kwath, Kusthadi churna, Takradi prayoga, Tryushanadi mantha, Yoshadya saktu³⁸ Shilajeet, Guggulu, Gomutra, Triphala, Loharaja, Rasanjana, Madhu, Yava, Mudgaka, Kordushaka, Shyamaka, Koddalaka, Virukshana, Chedana dravya, Vyayam and Lekhana basti³⁹ Madanaphala kwatha, Vatsakadi kwatha, Hingu gomedadi churna with Takra or Dadhimanda or Kolarasa, Krimaghnadi mantha, Yoshadi mantha⁴⁰ Vidangadi yoga, Yoshadi yoga⁴¹ Madhuodaka, Saktu, Vidangadya churna, Vdangadya lauha, Vyoshadya saktu, Siddha peya, Shilajatu, Amritadya guggulu, Navaka guggulu, Loharasayana, Triphaladi taila, Tvakdoshar udvartana, Gatra daurgandhyahar lepa, Haritkyadya angaraga, Kakshadi daurgandhyahar yoga, Dehadaurgandhyahar udvartana, Dehadaurgandhyahar pralepa, Panchatiktak ghrita guggulu.⁴²

Rajani udvartana, Kusthadi gatrlepa, Jambudaladi udvartana, Shirishadi udvartana, Hribberadidaurgandhyahar lepa, Shyamaaragvadhadi udvartana, Rodhradi lepa.⁴³

Triphaladi yoga, Triphala churna, Bilvadi panchamula, Karkashadala yoga, Vataripatra yoga, Gavedhuk, Yavasaktu, Guduchi yoga, Atimukta or Chitrakmula yoga, Eranda mula yoga, Madhodaka, Badripatrayoga, Shaileya gadha udvartana, Dashanga guggulu, Lauharista, Mahasugandhi taila⁴⁴

Tryushana churna, Yograj guggulu, Neghrodhadi kwatha, Bilvadi kwath, Triphala kwath, Shakhaktaktvaka kwatha, Varunadi gana, Brihan mangistadi kwath, Usnodaka.⁴⁵

Tryushnadi guggulu, Bilvadi udvartana, Malayani dhupam, Chandanshuk udvartanam, Abhayaphala churn, Mallikusumadi lepa.⁴⁶

Ushnamanda, Chavyadi yoga, Talapatra kshara, Guduchyadi yoga, Tryushnadya lauha, Shirishadi pragarsha, Rasabhasma yoga, Trimurti rasa, Vadvagni rasa⁴⁷

Tryushnadya lauha, Vadvagni lauham⁴⁸

These Bheshaja can be used after complete, examination of patient in proper doses for proper time. Choice of Bheshaja is as per Vaidya, all are experienced by Acharya and useful in curable condition. Efficacy of drug depends upon selection of doses and duration of treatment by Siddha Vaidya and nidan parivarjana by patient

Pathyapathya

Pathya: Excessive physical and mental exercise, Madhu-udak at early morning, lukewarm water before meal, regularly Lekhana basti, night awakening, lukewarm fresh food, Manda, Katu Tikta Kashaya rasa dravya, Vata Kapha Medohar dietary articles, Puranshali, Mudga, Kullatha, Uddalak, Kodo, Sava, Nivar, Priyangu, Java, Masur, Arhar, Madhu, Madira, Chingatmatsya, roasted Brinjal, Triphala guggulu, Lauha bhasma, Trikatu, Sarso, Ilayachi, Tela taila, Ruksha dravya, Sheelajatu etc.⁴⁹

Apathya: Atisampurana, Madhur, Sheet Snigdha aahar, Avyayam, Diwaswapa, Brimhana dravya etc.

DISCUSSION

Normal proportion of every entity of human given by Acharya differs due to its uniqueness and Prikriti. This consideration is more deliberate while assessing BMI. Kapha predominant Prakriti peoples are universally prone while Vata and Pitta predominant Prikriti humans are usually not prone for Medoroga. The above mentioned indicates that Bijadosha or genetic impacts have major role in Medoroga.

Development of human in injudicious track without natural health concern leads to hazardous change in human lifestyle, dietary habits and genetic impacts predispose Medoroga and in prone humans due to abnormal phenomenon of assimilation, eaten food contents gets converted into fatty substances.

Medoroga is worst condition and may predispose number of incurable diseases hence preventive measures should be followed since beginning. Causative factors must be discontinued, Vata, Kapha, and Meda alleviating Ahar, Bheshaja and exercises should be continued to save ourselves from Medoroga and its complications.

If Medoroga is not responding with preventive measures and Shaman treatment, underlying cause should be ruled out and treated. He is advised Shodhana treatment. If taken properly, it brings about normal healthy life span in curable condition.⁵⁰ Shodhan

treatment should be given by experienced practitioner only. It is witnessed that in curable condition this is best treatment, if patient wants to transform his life to healthy one. If patient won't be ready to modify the causative factors, the treatment is least effective.

Vamana Karma is contraindicated in morbid *Medoroga* as his abdomen muscles can't help in *Vamana* process and leads to inappropriate *Vamana* and complications. *Virechana*, *Basti* and *Nasya* can be practiced easily. It is experiential that *Virechana* and *Basti* are easy as well as more effective in curable *Medoroga*. *Raktamokshana* can be practiced in selected cases only.

As a preparative process of *Shodhana* treatment, *Snehana* and *Swedana* is mandatory. Excess *Snehana* and *Swedana* should be avoided. It is experiential that during *Snehapan*, daily weight reduction occurs up to seven days in acquired *Sthoulya* as compared to *Bijdosha* *sthoulya*. After seven days *Snehapan* cause weight gain.

Samsarjana krama literally means graded administration of diet after *Shodhana*. It is very important in giving optimum strength to *Agni* and in efficacy of *Panchakarma* as well as to normalize comprehensive metabolism.

Acharyas guidelines regarding dietary articles, preparation methods and intake are very beneficial. One should practice under the guidance of expert. Frequency of food intake should be once⁵¹ in *Kapha* predominant *Prikriti* and twice in *Vata* and *Pitta* predominant *Prikriti* as per hunger sensation. It is possible by practice. It is experiential that *Kapha* predominant *Prikriti* peoples taking diet once or twice are healthier as compare to frequent eaters.

It is perceived that *Vata*, *Pitta prikriti* peoples require least one-hour exercise and *Kapha* predominant *Prikriti* humans require minimum 2 hours exercise as a preventive measure. *Atisthula* cases require gradual increase in variety exercises more than 2 hours to save ourselves from *Medoroga* complications

Lot of researches are carried out on all aspects of *Medoroga* and all have significant output in curable state. In incurable condition treatments are insignificant.

CONCLUSION

In *Medoroga* eaten food articles transforms in to abnormal unctus fat. It predisposes variety of diseases hence causative factors must be discontinued, *Vata*, *Kapha*, and *Meda* alleviating *Ahar*, *Bheshaja* and variety of exercises should be continued to save from *Medoroga* and its complications.

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