CASE REPORT

AYURVEDIC MANAGEMENT OF OBESITY (ATISTHOULYA) - A SUCCESS STORY

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Summary

A female patient aged 28 years hailing from Chennai working in the department of human resource (HR), a known case of hypothyroidism & polycystic ovarian syndrome (PCOS) complained of nearly about 25 kg weight gain from April 2012. She was treated for infertility with hormonal therapies. On examination she had a BMI of 42.09 kg/m² and diagnosed as Atisthoulya (~obesity grade III). It was managed successfully based on the Ayurvedic principle of “Guru Cha Atarpanam” which means the foods and medicines should be non-nourishing and give a sense of satiety.

Keywords:

Obesity, Atisthoulya, Udvtartana, Navaka Guggulu, Embilica officinalis, Tripala,

Key Messages:

1. Lifestyle changes are key factors in handling obesity. Promotion healthy lifestyle not only prevents complications, but also improves quality of life.

2. Consumption of right quantity and appropriate quality of foods and drinks according to one’s Agni (~digestive and metabolic ability) along with suitable exercises will help to reduce weight and tackle obesity.

Purpose: To highlight the importance of consistent lifestyle changes prescribed by Ayurveda needed in lifestyle disorders / non-communicable disorders.

Introduction:

Obesity is an abnormal growth of adipose tissue due to an enlargement of fat cell size or an increase in fat cell number or a combination of both¹. Even Ayurveda, the science of life, describes obesity as a health condition with laxity and mobility in either or all of buttocks, breast and abdomen due to excess of fat (Meda Dhatu) and muscle (Mamsa Dhatu) tissues². As per World Health Statistics 2012 one in six adults is obese³. As a chronic disease, this burden causes a heavy economic and human loss due to its complications. Obesity is key factor in natural history of other chronic and non communicable diseases. A battery of adverse effects of obesity to emerge in population in transition are hypertension, dyslipidemia and glucose intolerance, while coronary heart disease, infertility, diabetes are few important long term complication of it. A change in lifestyle will have tremendous effect in managing obesity.

The Case: A female aged 28 years hailing from Chennai working in the department of HR, a known case of hypothyroidism and PCOS complained of nearly about 25 kg weight gain
from April 2012. She was treated for infertility with hormonal therapies.

**Clinical Examination:**
Prakriti (Constitution): Kapha-Pitta
Vikriti (Pathology): Kapha-Vataja
Sara (Essence of tissues): Least
Samhanana (Compactness): Least
Satva (Mind): Superior
Satmya (Habituation): Superior
Aharashakti (Intake & Digestion power): Superior
Vyayamashakti (Exercise capacity): Superior
Anthropometry: Excess
Age: Young.

The causes elicited with one-to-one interview are sedentary lifestyle, excessive consumption of junk food, deep fried foods, less water consumption, secondary to hypothyroidism and the side effect of hormone therapy. The anthropometric measurements and laboratory investigations are given in Table 1.

**Treatment plan:**
During admission she was treated with Udvarthana (dry massage against hair follicle) with dry powders of drugs having hot potency and remove dampness followed by Bhaspa Sweda (steam bath) for eight days. On ninth day Virechana (purgation), one of the purificatory therapy, was administered with 75 gms of Trivrit Lehyam\(^4\) and 100 ml of Trikatu Kashaya (decocction prepared form combination of black pepper, long pepper and dry ginger). During the first eight days, she was also treated with therapeutic Yoga consisting of combination of Asana, Pranayama & deep relaxation techniques (a method of Dhyana) along with some of the physiotherapy techniques like treadmill, cycling, and tummy twister for around 3 hours at different times of the day. The oral medications included two pills of Navaka Guggulu\(^5\) twice daily before food and Amla juice 20 ml with 100 ml of water at 6 am & 6 pm for eight days. The diet during this period consisting Guru & Atarpaka Ahara (heavy to digest and non nutritive foods, Jeeraka Siddha Jala (water medicated with cumin seeds), Yusha\(^6\) (boiled whole legumes in 1:18 proportion), buttermilk, Yava Rotika (Indian bread made of dehusked and powdered barley). Boiled vegetables, Madhudaka (water added with that amount of honey to sweeten it up)\(^7\), preparations of finger millet, fruits etc along with 2.5 to 3 liters of water per day. The clinical and laboratory findings during discharge are given in table 1.

On discharge she was given Decrin plus 2 capsules twice daily 1 hour before food, Triphala Kashaya (decoction prepared from combination of Haritaki / *Terminalia chebula*, Vibhitaki / *Terminalia belerica*, Amalaki / *embelica officinalis*) 100 ml freshly prepared at 6 am & 6 pm, exercise for 2 hours in a day along with low calorie high fiber diet rice less preparations and 7 to 8 hours of sleep. The don’ts included tea and coffee with milk, deep fried foods, meat, curds, sweets, too much oil/ghee, refined flour and its preparations, ice cream, chocolate, junk foods, cola, sedentary life. The clinical and laboratory findings on discharge and during follow up are given in table 1.

**Table 1**

<table>
<thead>
<tr>
<th>Parameters</th>
<th>August 2012</th>
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**Discussion:**

Udwarthanam and Bhashpa Sweda remove the blockage in Srotas due to their Rooksha guna, cause liquefaction of Medas and mobilize it. Virechana with Trivrit Lehyam with Trikatu Kashaya adjuvant reduces Medas.

Yoga and other physical exercises normalize the fat metabolism and helps in energy expenditure. Exercises increase the level of Dhathvagni (~ability for metabolism), mobilize Medhodhatu and hence give shape and stiffness to the body.

Low calorie high fiber diet fulfills the principle of treatment “Guru Cha Atarpanam”. Due to high fiber content food is Guru (heavy to digest) and due to low calorie it is Atarpaka (non-nourishing).

Navaka Guggulu has Trikatu (Shunti/Zingiber officinale, Maricha/Piper nigrum, Pippali/Piper longum), Triphala (HAritaki, Vibhitaki, Amalaki), Chitraka (Plumbago zyliicum), Musta (Cypruss rotundum), Vidanga (Emblica ribes) one part each and nine parts of Shudhha Guggulu (purified Commifera mukul). It is said to reduce Meda, Kapha, Ama and Vata. Triphala causes reduction in Kleda (excessive moisture), Meda, Kapha.

Each capsule of Decrin Plus, a proprietary medicine by SG Phyto Pharma Pvt. Ltd., contains Amrutadi Guggulu 9250 mg, Navaka Guggulu 60 mg, Purified Shilajit 30 mg, Apamarga beeja (seeds of Achyranthus aspera) 60 mg, Bhavana (trituration) with juices of Guduchi (Tinospora cardifolia), Punarnava (Boerhaavia diffusa) & Gokshura (Tribulus terrestris).

Amla Juice, a preparation of Divine Laboratories, with predominance of Amalaki (Embelica officinalis), flavoured with Tulsi (Ocimum sanctum), Ela (Elattoria cardamomum
- cardamom). It normalizes Tridosha\(^1\), acts as Rasayana and reduces Medas. Both Tripala & Amla juice have a high antioxidant quality.

**Conclusion:**

“Obese” is one among the Ashtanindita Purusha (eight kinds of undesired constitution), because it causes ample of diseases and thus shortens the life span. Once the carbohydrate and fat metabolism is hampered free radicals are formed in the body which in turn causes the death of the cell, ending up in shortened life span. Hence, it can be considered not as a disease but as a health condition which has its own list of complications. In this regard the condition of Atistoulya has to be dealt with continuous motivation for lifestyle changes including changes in foods, activities, and supplemetations in the form of Rasayana (rejuvenatory drugs). Some of the therapies which are also part daily and seasonal regimen can be adopted to enhance the recovery process.

**References:**


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