Role of Khadira Asana Sara Bhavita Triphala Churna in Atisthaulya

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ABSTRACT: -

Objective: Atisthaulya (Obesity) has been mentioned among Ashtaninditha Purusha, one among the most hatred persons in the world. An obese man is feeling ashamed of his body size in the public, and thus Obesity turns to be a serious health concern. In the present-day life style, due to the advanced technology and busy work schedule, life has become more sedentary and variety of junk foods are ingested resulting in Atishtaulya. The potential of Ayurveda in tackling non-communicable diseases such as obesity wants to be explored as it contains an array of formulations. This article is an attempt to explore the causative factors, pathogenesis, symptomatology, and treatment modalities of Atisthaulya and to explain the role of Khadira Asana Sara Bhavitha Triphala Churna (Triphala Churna prepared by triturated with Kwatha of Khadira and Asana) in the management of Atisthaulya.

Data source and Review methods: Data was collected through literature review of Classical Ayurvedic Literatures such as Charaka Samhita, Susruta Samhita, Astanga Hridaya and journal articles related to the subject,

Conclusion: Atisthaulya is a disease in which mainly Kapha Dosha and Medas Dushya are involved which causes Medo-dhatvagnimandya (decreased fat digestion) and Srotas obstruction, ultimately causing abnormal Medo Dhatu Upacaya and then Staulya. In Khadira Asana Sara Bhavitha Triphala Churna and Medhoharaguggulu, most of the ingredients have Katu and Tikta Rasa, Ruksha, Laghu and Tikshna guna, Ushna Virya and Katu Vipaka, and Vata-Kaphasamaka property which may be effective to control Atisthaulya.

Keywords: Atistaulya, Obesity, Staulya, Triphala Churna
INTRODUCTION

Athisthaulya is defined as a disease condition in which there is increased deposition of adipose tissue (Medo Dhatu) in the body especially in the regions of buttocks, abdomen and chest with tiredness and fatigue [1].

The human life is rapidly changing in terms of food, standard of living, environment, profession, fashion etc. In the present-day lifestyle, due to the advanced technology and busy work schedule, life has become more sedentary and variety of junk foods are ingested resulting in the accumulation of extra calories. Changing life style of an individual by neglecting the suitability of Ahara, Vihara and Vichara according to ones Prakriti may lead to Medodushi and gives rise to Santarpanattha Vikara like Sthaulya, Prameha, Srotosamlepa and Dhamnipratichaya as explained in Kaphaja Nanatmaja Vikara [2].

Although being a serious health issue, the modern medical management currently available is not effective in the management of obesity and the possible ray of hope is only surgical intervention. The potential of Ayurveda – the traditional Indian health system in tackling non-communicable diseases such as obesity wants to be explored as it contains an array of formulations and medicaments addressing multi-dimensional systematic disease approach. This article is an attempt to explain the role of Khadira Asana Sara bhavitha Triphala Churna (Triphala Churna prepared by triturated with Kwatha of Khadira and Asana) and in the management of Athisthaulya.

Concept Of Medodhatu

The human body is made up of seven body elements called Dhatu (tissues) and out of these, Medodhatu (Fatty tissue) is the fourth in the sequence. It is called Medas because it gives smoothness to the body. It is also Snigdha (unctuous) and Mrudu (soft) in nature. Thesymptomatology of increased medodhatu (lipid tissue) includes disease affecting neck region like Galaganda - goitre, Gandamala - cervical lymphadenitis, Arbudha (large tumors, including malignant ones), Granti (benign lumps), increased fat deposits upon cheeks, thighs, abdomen and Adhimamsa (extra muscular bulk) at and around the neck.[4]

Medodhatu is of two types. Poshaka Medodhatu/Abaddha (Mobile) Medas and Poshya Medodhatu/Baddha (Immobile) Medas. Poshaka Medodhatu/Abaddha (Movable) Medas [5] is the type of Medo Dhatu which is Gatiyukta (mobile) and is circulated in the Medovaha Srotas. This is also called as Poshaka MedoDhatu because it circulates with the Rasa-Rakta Dhatu to give nutrition to Poshya Medo Dhatu. Poshya Medo Dhatu/Baddha (Immobile) Medas is the type of Medo Dhatu which is Gativivarjita (immobile) and is stored at various sites of the body. This is also called as Poshya Medo Dhatu/ Shhayi, Medodhatu

Pramana of Medodhatu: [6]

The total quantity of Medodhatu is 2 Anjali.
**Pancabhautika composition:** [7]

The *Panchabhautika* composition of Medodhatu has the dominance of Pruthvi (earth) and Jala (water). The presence of Jala (water) reveals the nourishing nature of fatty tissue and the presence of Pruthvi (earth) reveals its role in stabilizing the functions of the body and mind.

**Karma of Medodhatu:**

Snigdha and Guru Guna are predominant in Medodhatu. It is responsible for Bala and causes Brimhanatva (nourishment) and Stihulata (bulky appearance) of the body. It produces Sneha and Snigdha which helps in producing Dridhata (strength) of the Shareera. This Medadhatu nourishes Asthi dhatu. Snigdhatwa of body is attained due to presence of Medodhatu.

**Medodhatu Vridhi Lakshana:**

Medodhatu vridhi (increase) causes Snigdhata (unctuousness) of Shareera (body) and Udara (abdomen). Parshvavridhi (bulky appearance of the flanks), Kasa (Cough), Shwasa (Breathlessness), Hikka (Hiccup), Daurgandhata (foul smell) of Shareera (body) are caused due to the increased Medodhatu.

**Medovaha Srotas**

Medovaha Srotas is the channel which carry nutritive material to the site of Medodhatu and provide nutrition to Medodhatu. The Medovaha Srota Mula described by various Acharyas


Injury to this Srotas results in Siddha lakshana and they include Atisweda (excessive sweating), Snigdhangata (unctuousness of the body), Talushosha (dryness of throat), Sthula (obesity), Sopha (swelling) and Pipasa (thirst).

**Description Of Sthaulya**

According to Acarya Caraka [11], a person having pendulous movement of buttocks, abdomen and breasts due to the excess deposition of fatty tissue and muscular tissue and having unequal and abnormal distribution of fat with reduced vital capacity is known as Atisthula purusha. Atisthula is also mentioned as the Nanatmajaa Vikara of Kapha in Caraka samhitha Sutrasthana. Sthaulya has been renamed by Madhavakara as Medoroga. He has used Medasvina, Sthula and Atisthula as the synonyms of Medoroga.

Sthaulyas a disease in which Kapha Dosha and Meda Dushya are mainly involved in the etiopathogenesis of the disease. Vitiated Kapha causes Medo-dhatvagnimandya (decreased digestive fire which severely affects fat digestion) and obstruction to Srotas, ultimately causing abnormal Meda Dhatu Upacaya and Medoroga finally resulting in Staulya.

**Nidāna (Etiological factors)**

According to Madhavanidana, [12] the etiological factors of Sthaulya include Aavyayama (Lack of exercise), Divasavapna (Day time sleep), Slesma Ahara Sevana (Food items which causes increase of Kapha doṣa), Madhura Annarasa (Sweet foods) and Sneha (unctuous substances).

According to Caraka, [13] the etiological factors include Atiguvadi Sevana (Excess intake of heavy food), Atimadhuradi Sevana (Excess intake of sweet food), Atisita Ahara Sevana (Excess intake of cold food), Atisnigdhadi Sevana (Excess intake of fatty diet), Aavyayama (lack of physical exercise), Aavyavaya (abstinence from sexual intercourse), Divā Svpnam (sleeping during the day), Acinta (Lack of mental stress), Harṣa (Always cheerfulness) and Bijasvabhavadosa (Genetic factors). Susruta [20] has added Adhyasanasil (intake of food before digestion of previous meal) as a causative factor for Sthaulya.
The Nidana of Sthautlya can be understood in two ways as Bahya karanas (Medas potentiating diet) and Abhyantara karanas (Dosha, Dhatu, Mala, Srotas etc.). Only Charaka has defined Beejadosa as one of the nidana besides other causes.

All the Nidanas described by various Acharyas for Sthautlya can be classified into
1. Aharaja Nidana
2. Viharaja Nidana
3. Manasika Nidana
4. Anya Nidana

These Ahara Dravya, have properties like Madhura Rasa, Snigdha, Guru, Slakshana and Tamoguna, Madhura Vipaka, Sheeta Virya, Brihmana and Santarpana Karma and predominance of Pruthvi & Jala Mahabhuta, which are similar to qualities of Kapha and Meda.

Manasika nidanas cause aggereation of Kapha and Tamoguna and in turn influence indirectly by the association with Shariraka Dosha’s in the materialization of the disease Sthautlya. Beejadoshaha is considered has the Upadaka Hetu in the manifestation of Medoroga. Hence individual who is having Beejadushthi and indulge in Ahara which increase the Kapha and Meda, may predispose Sthautlya

Purvarupa (Prodromal Symptoms):
There is no direct description of Purvarupa of Sthautleyan classical texts. Acharya Caraka has mentioned Prameha purvaroopa can be considered as Purvarupa of Sthautlya. Bahudrava slesmadAbaddha Medus are the two main components in samprapti ghataka of Prameha and Medoroga. So, symptoms of sleshma samcaya and Medodusti related Purvarupa of Prameha and symptoms of Medovaha Srotodushthi can be considered as Purvarupa of Sthautlya.

Symptoms
The symptoms of Sthautlya include Atinidra (Excessive sleep), Tandra (Incomplete sleep), Alasya (Laziness), Visra Sarira gandha (Bad bodyodor), Angagaurava (Heaviness) and saithilya (Flabbiness). According to Madhavakara Kshudrasvasa (Dyspnoea), Trishnā (Thirst), Moha (Drowsiness), Svapna (Sleepiness), Krathana (Sudden obstructive respiration) Flabbiness of body parts, Kshuth (Voracious appetite), Sveda (Excessive sweating), Daurgandhya (Bad odor from body), Alpa prāṇa (Decreased vital capacity), Alpamaithūna (Decreased sexual potency), Accumulation of fat in abdomen and small bones and Udare Vruddhi (Abdominal expansion) are seen as the symptoms of Sthautlya.

Ashtadosha of Atisthautlya (Eight Peculiar features of Obesity)

The peculiar features of Sthautlya mentioned by Charaka are Ayuṣhoṛiṣa (Deficient in Longevity), Javaparodha (Slow in movement), Krīcchrayavayata (Difficulty to indulge in sexual intercourse, Daurbaliya (Weakness), Daurgandhya (Foul smell), Sveda abādha (Excessive Sweating), Atikshu (Voracious Appetite) and Pipasa (Increased Thirst)

Samprapti (Pathogenesis)
Acarya Caraka and Acarya Susruta have different opinion about the Samprapti of Sthautlya. Acarya Caraka has considered Ahara as most common Samprapti ghataka whereas Acarya Suruta has accepted Ama is the main factor.

According to Caraka, the obstruction of body channels by fatty tissue causes the avarana of Vata Dosha that results in its aggravation. The aggravated Vata moves mainly into stomach, and increases the Jatharagni. The increased digestive fire results in increased appetite, quicker digestion and absorption of the food. The next hunger reflex occurs quickly and person craves for more food. This excessive eating produces more
production of Ahara Rasa which causes over growth of fatty tissue leading to Sthaulya. According to Susruta\textsuperscript{[20]}, the etiological factors like Kapha Dosha aggravating food items, excessive eating, lack of exercise and day sleep causes the improper digestion of food and results in the production of Ama Rasa. The sweet part of Ama Rasa moves with in the body and Snigdhamsa (unctuous part) of the Anna Rasa causes Medoroga which produces Atishaulya.

Upadrava \textsuperscript{[21]}

The Upadrava (complications) of Sthaulya includes Pramehadipika (Diabetic carbuncle), Jvara(Fever), Bhagandara(Fistula-in-ano), Vidradhi(Abscess), Swasa (Dyspnoea), Udara roga (Ascites) and Urushthamba (Stiffness of thigh). Kushta, Visarpa, Kamala, Jvara, Atisara, Prameha, Arsa, Apachi and Slipada may develop in Sthaulya person. Due to bad smell of sweat minute worms may develop in the skin (B.P.M.39/9-10)

Sādhya- Asādhyatā (Prognosis)-

Sthaulya (Obesity) is Kricchasadhya (difficult to treat) and Sahaja Sthaulya (Hereditary obesity) is Asādhyat (incurable). According to Acārya Caraka, Sthaulya if not duly managed, a Sthula person is prone to death due to complications as a result of excessive hunger and thirst. Diseases of Medas like Sthaulya (Obesity) and Prameha (Diabetes) are curable in patients having good strength and only if onset of the disease is recent.

Cikitsa (Treatment) \textsuperscript{[22],[23],[24]}

The main aim of Sthaulya Cikitsa is to restore the Medodhatvagni to its normal state and the correction of unbalanced Doṣa, vitiated Srotas, Dhatu and Mala which are the main factors involved in the Samprapti of Sthaulya. The equilibrium of Vata Dosa, Kapha Doṣa, Meda dhatu and restoration of Jatharagni and Medodhatvagni is essential. In this regard Vata, Kapha and Medohara drugs are indicated for the treatment of Sthaulya. The Dravya which possess Katu, Tikta, Kashaya Rasa, Tikshna, Ushna Guna, Dipana, Pacana, Lekhana, and Chedana properties which reduce Kapha, Meda, Ama and increases power of Agni are choice of drugs for treatment of Sthaulya.(Table no I)

Emaciation is better than obesity, since the later is difficult to cure. Neither Brimhana (nutritive therapy) nor Langhana (attenuation therapy) is capable of pacifying the increased Medas (adiposity), Agni (digestion) and Vata in Sthaulya .

Obesity – Modern Review

Unwanted weight gain leading to overweight &obesity has become a main concern for the global rise in the incidence of non-communicable diseases. Because of the psychological and social stigmata that accompany being overweight & obese, those affected by these conditions are also vulnerable to discrimination in their personal and work lives, low self-esteem, and depression. These medical and psychological sequel of obesity contribute to a major share of current healthcare expenditures and generate additional economic costs through loss of worker productivity, increased disability, and premature loss of life.\textsuperscript{[25]}

Obesity is generally caused by eating excess & Lack of physical activity \textsuperscript{[26]}If a person consumes high amounts of energy, particularly fat &sugars, but do not burn off the energy through exercise& physical activity, much of the surplus energy will be stored in the body as fat and leads to obesity. (Table no. II)

Role Of Khadira Asana Sara Triphala Churna In Sthaulya

Sthaulyais a disease in which Kapha Dosha and Meda Dushya are mainly involved in the etiopathogenesis of the disease. Vitiated Kapha causes Medo-dhatvagnimandya (decreased digestive fire which severely affects fat digestion) and obstruction to Srotas, ultimately causing abnormal Meda Dhatu.
Upacaya and Medoroga finally resulting in Sthaulya. In Khadira Asana Sara Bhavitha Triphala Churna most of the ingredients have katu-thikta rasas, ruksha, laghu guna and teekshna guna, usha virya, katu and madhura vipaka and vata-kapha samaka property which is effective in controlling Sthaulya.

**Ingredients of Khadira Asana Sara Bhavitha Triphala Churna** [27][28]

(Drug Latin name Part used Quantity)  
*Pathya*: Terminalia chebula Retz. Fruit 1 part  
*Vibhitaki*: Terminalia bellerica (gaertn) Roxb Fruit 1 part  
*dhatri*: Emblica officinalis Gaertn. Fruit 1 part  
*Khadira*: Acacia catechu (Linn.f.)Willd. Heart wood 1.5 part  
*Asana*: Pterocarpus marsupium Roxb Heart wood 1.5 part

**Preparation of Khadira Asana Sara Bhavitha Triphala Churna**  
Triphala Churna was prepared by mixing equal quantity of Harithaki, Vibhitaki and Amalaki. Khadira-Asana Kwatha was prepared by boiling one part of Asana and Khadira in eight times of water and reduced to one by eight part [29]

**Triphala** [30]  
In Ashtanga Hridaya Sutrasthana, the explanation of “Triphala” comes under Aushada varga in Annasvarupavijnaniya chapter. These three fruits constitute the best-known rejuvenative drugs and hence the name “Triphala”. Triphala was used in the management of eye diseases, promote wound healing, skin diseases, Kleda (discharges/exudates), Medas (adiposity), Prameha (diabetes), Kaphaja and Raktaja vikaras (diseases predominant of Kapha and Rakta)(Table No.III.)

Most of the drugs in both Khadira asana sara bhavitha Triphala churna have following properties.  
- **Rasa**: Katu, Kashaya  
- **Guṇa**: Ruksha, Laghu  
- **Virya**: Ushna  
- **Vipaka**: Katu  
- **Doshakarma**: Kaphavatamasaka

Katu Rasa has the action of, Meda soshana, Kleda soshana, Sneha soshana,Srotovivarana, Dipana Pacaana Ruksha Guna has the action of soshanaLanghana (Apatarpaṇa) action is achieved by virtue of LaghuGuna. Usha Virya is Kaphavata samaaka and helps in Pāka (metabolism). Katu Vipaka has action similar to katurasa. In case of Sthaulya, treatment (Samprapti Vighatana) is aimed at the following levels and it is attained in the sequence explained below.

1. Ama Pacana- Katu Rasa, Ushna Virya and KatuVipaka  
2. Agni Dipana (Dhatvagni)- Katu Rasa, Usha Virya  
3. Medahara- Katu -Tikta Rasa, Ruksha - Laghu Guna, UshnaVirya  
4. Srotosodhana(Srotovivarana)- Katu Rasa, TikshaGuna  
5. Vata samana (Specially Samsna Vata)- UṣṇaVirya  
6. Kapha Harā- Katu -Tikta Rasa, Laghu- Ruksha Guna And Ushna Virya

**CONCLUSION**  
Sthaulya is a disease in which mainly Kapha Doṣa and Medas Dushya are involved. Vitiating Kapha causes Medodhatvagnimandya (decreased fat digestion) and Srotas obstruction, ultimately causing abnormal Medo Dhattu Upacaya and then Medoroga. InKhadira Asana Sara Bhavitha Triphala Churna and Medhoharaguggulu”, maximum ingredient
havekatu rasa and tikta rasa, rukshaguna, laghu guna and tikshguna, Virya is Ushna, katuvipakaand madhuravipaka, and Vata-Kaphasamaka property which may be effective to control Sthaulya.

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REFERENCES

Table no I. Principle of treatment of *sthaulya* in Classical texts

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<th>Name of <em>Samhita</em></th>
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<td>Caraka Samhita[22]</td>
<td><em>Guru Aptarpana,</em>[Food substances ,which are <em>Guru</em> (heavy) and <em>Atarpana</em> (emaciating)] <em>Sthula Karshana, Vata, sleshmahara and Medohara Aushadha,</em> <em>Ruksha ushna Basti Tikshna, Ruksha Udvartana</em></td>
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<td>Susruta Samhita[23]</td>
<td><em>Nidana Parivarjana Virukshana Chedana and Lekhana Basti</em></td>
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<td>Ashtanga Hrdaya[24]</td>
<td><em>Meda Anila and slesmahara Ausadha sodhana</em></td>
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Table no. II. BMI values and its interpretation according to ICMR Hyderabad, AIIMS Delhi, Diabetic Foundation of India and NIN[27]

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Table No.III. Approximate *Rasa Pañcaka* of *Khadira Asana Sara Bhavitha Triphala Churna*

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