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Effect of *Virechana Karma* and *Basti* in the management of *Sthaulya* - A Case Study

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ABSTRACT

Sthaulya (obesity) is a predominant metabolic disorder, which is described by *Charaka* in *Ashtanindita Purusha*. Sedentary life, lack of exercise, faulty food habits, urbanization, psychological factors along with genetic predisposition play a major role in the aetiopathogenesis of *Sthaulya*. Females are more prone to obesity due to feminine factors like menopause and aggravating factors like delivery, I.U.C.D., O.C.P, and miscarriage. Being overweight and Obesity contributes to Diseases like Heart attacks, stroke, arteriosclerosis, Diabetes, Mental Retardation/affection like Mood swings, and even depression. According to the *Ayurvedic* text, *Sthaulya* is caused due to *Medovridhi* which includes an abnormal and excessive accumulation of *Medodhatu* in the body. In the *Sthaulya* etiological factors mainly vitiate the *Meda-Kapha*. This vitiated *Meda* obstructs the path of *Vata*, which results in the provocation of *Vata*. In the *Samprapti* of *Sthaulya*, two factors are of prime importance, *Tikshna Jatharagni*, and *Medodhatvagnimandya*. Irrationality between two levels of *Agni* makes the disease *Krichha Shadhya*, but *Panchkarma* therapy can give a better solution for this problem. So, treatment modality should be planned considering vitiated *Meda*, *Kapha*, and *Vata*. *Lekhana Basti* and *Virechana Karma* are selected for the management of *Sthaulya*.

Key words: *Sthaulya*, *Medovridhi*, *Lekhana Basti*, *Virechana*

INTRODUCTION

Everybody in the present era is quite busy with their daily activities. Nobody has the time to consider living a healthy life. Despite knowing the significance of it, none of us follow *Dinacharya* and *Ritucharya*. Due to this artificial living life-style, person is suffering from various life style disorders. *Sthaulya* is one of them. *Sthaulya* is a condition in which vitiation & aggravation of *Meda Dhatu* occurs due to which *Srotasa* get obstructed causing improper nourishment of other

Dhatu and only *Meda* gets increased.^[1] *Acharya Charaka* mentioned it in *Santarpanajanta Vyadhi*^[2] and *Ashtanindita Purusha*^[3] which is characterised by heaviness and bulkiness in the body, due to accumulation of fat especially in abdominal and hip region.^[4] In modern science, its sign and symptoms are similar to obesity. According to the World Health Organization (WHO), obesity is one of the most common, yet among the most neglected, non-communicable health problems in both developed and developing countries.^[5] Obesity is a condition in which an individual's body weight increases due to the accumulation of excess adipose tissue. It is normally caused by a sedentary lifestyle, irregular diet, lack of physical activity, sleep pattern and stress etc. Obesity not only reduces the life span of an individual but also leads to life threatening complications, like stroke and Ischemic heart diseases, diabetes mellitus, HTN as well as psychological disorders like depression, mental retardation etc. Most widely used method to quantify obesity is BMI (body mass index) which is equal to weight/height² (kg/m²). BMI^[6] of 25 or more indicates obesity that leads to rise in morbidities

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steadily. In modern science, there is no particular treatment for obesity. They mainly focused on dietary habit and exercise for weight loss. *Guru & Aptarpana Chikitsa*^[7] & *Shodhana*^[8] is mentioned as line of treatment for *Sthaulya* in *Ayurveda* alongside varied formulations like *Udwartana*, *Basti* etc. Here *Virechana* and *Lekhana Basti* was selected for the management of *Sthaulya*. *Lekhana Basti*^[9] was chosen for the management of *Sthaulya* because it has the *Lekhana* property, which lowers *Meda* and also pacifies the *Vata* by affecting its seat, *Pakvasaya*. *Virechana* is also mentioned in the treatment of *Santarpana Janita Vyadhi*.^[10] So, here attempt was done to evaluate the effect of *Virechana* as well as *Lekhana Basti* in the management of *Sthaulya*.

AIM

To study the effect of *Virechan Karma* and *Lekhana Basti* in the management of *Sthaulya*.

CASE REPORT

Patient information

A 23yrs old female patient in the OPD of Panchakarma comes with complaint of increased body weight since 5 years. Associated symptoms are excessive sweating, excessive thirst and excessive hunger since 3 years.

Past history

No history of diabetes mellitus, hypertension, thyroid dysfunction or any major illness.

General examination

Pulse - 74/min

Temp - 98.1°F

Blood Pressure - 130/72 mm/Hg.

Respiration rate - 16/min.

Height - 162.5 cm

Weight - 77kg

Astavidha Pariksha

Nadi (pulse) - *Vatakaphaj*

Mala (stool) - *Samyag Pravritti*

Mutra (urine) - 4-5 times in a day

Jeevha (tounge) - *Niraam*

Shabda (speech) - *Prakrit*

Sparsh - *Anushna Sheeta*

Drik - *Prakrit*

Akriti - *Sthula*

Dashavidha Pariksha

1. *Prakriti* - *Vatkaphj*
2. *Vikriti* - *Medodhatu Dushti*
3. *Sara* - *Madhya*
4. *Samhanana* - *Pravara*
5. *Pramana* - *Adhik*
6. *Satmya* - *Madhyama*
7. *Satva* - *Madhyama*
8. *Aharashakti* - *Madhyama*
9. *Vyayamashaki* - *Madhyama*
10. *Vaya* - *Madhyama*

Patient was conscious and well oriented about the place, time, and person. The respiratory and cardiovascular systems were normal.

Criteria of Assessment

Subjective parameters^[11]

- *Atikshudha*
- *Atitrishna*
- *Swedadhikya*
- *Daurbalya*

Objective parameters

- Body weight (kg)
- BMI (Body mass index)
- Waist Circumference (cm)

- Chest Circumference (cm)

MATERIALS AND METHODS

Centre of study

O.P.D of Panchkarma Department of CBPACS, Khara Dabar, Najafgarh, New Delhi.

Study design: Simple Clinical Single Case Study

Materials

Virechana and Lekhana Basti treatment given to the patients

Ingredients for Virechana Karma

Abhayantara Snehapana - Mahatriphala Ghrit

Drugs for Deepana - Pachana - Chitrakadi Vati

Virechana - Triphala, Amaltasa Kwath (150ml) with Trivrit Avleha (60gm)

Ingredients of Lekhana Basti

Table 1: Ingredients of Lekhana Basti

SN	Drugs	Dose
1.	Triphala Kwath (Amalaki, Haritaki, Vibhitaki)	400ml
2.	Saindhava	10-12gm
3.	Gomutra	100ml
4.	Madhu	50gm
5.	Katu Taila	50ml
6.	Yavakshaar	2gm
7.	Shilajeet	5gm
8.	Tuttha	5gm
9.	Kasisa	5gm
10.	Hingu	2gm

Method

Virechana Karma followed by Lekhana Basti

1. Virechana

Purvakarma

Deepana - Paachana - For 3 days by Chitrakadi Vati

Table 2: Abhyantra Snehapana

Mahatriphala Ghrita	1 st day	2 nd day	3 rd day	4 th day	5 th day	6 th day
Quantity	40m	60m	90m	120m	150m	180m

Bahya Snehana and Swedana for 4 days

Sarvang Abhayang - Tila Taila for 30 min.

Sarvang Swedana - Vashapa Sweda for 10 min.

Pradhana Karma

Administration of Virechana drugs - Triphala + Aaragvada Kwath with Trivrit Avaleha

Paschata Karma

Sansarjan Karma - According to Shuddhi of patient.

2. Lekhana Basti Schedule

Given in the form of Kala Basti^[12] for 16 days with Murchita Tila Tail Anuvasana Basti

Table 3: Kala Basti Schedule

D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D
a	a	a	a	a	a	a	a	a	a	a	a	a	a	a	a
y	y	y	y	y	y	y	y	y	y	y	y	y	y	y	y
1	2	3	4	5	6	7	8	9	0	1	1	1	1	1	1
A	A	N	A	N	A	N	A	N	A	N	A	N	A	A	A

A - Stands for Anuvasana Basti

N - Stands for Niruh / Asthapana Basti

Time of administration of Lekhana Basti - Empty stomach in the morning

Quantity of administration - 450ml

Time of administration of Murchit Tila Tail^[13] Anuvasana Basti - After taking light diet in the afternoon

Frequency - Once in a day

OBSERVATION AND RESULTS

Table 4: Subjective criteria

Lakshanas	Before Treatment	After Virechana	After Basti
1) Atikshudha	++	+	-
2) Atitrishna	++	+	-
3) Swedadhikya	++	+	-
4) Daurbalya	++	++	-

Table 5: Objective Criteria

Parameters	Before Treatment	After Virechana	After Basti
1) Body Weight	77kg	71.2kg	70kg
2) Body Mass Index	29.2Kg/m ²	27 Kg/ m ²	26.5 Kg/ m ²
3) Waist circumference	87cm	82cm	82cm
4) Chest circumference	86cm	81cm	81cm

DISCUSSION

In Ayurvedic texts different *Shodhana* procedure i.e., *Vamana*, *Virechana*, *Lekhana Basti*, *Raktamokshana* are mentioned for the treatment of *Sthaulya*. In present study, *Lekhana Basti* and *Virechana Karma* were selected for the management of *Sthaulya*. As we know, *Charaka* has prescribed *Ruksha*, *Ushna* and *Tikshna Basti* for *Sthaulya* patients and *Sushruta* has mentioned *Lekhana Basti* for *Shodhana* or *Lekhana Karma*.

Usually, *Virechana* is to be administered when *Pitta* has undergone increase alone or in association with *Kapha* or when *Kapha* has got localised in the seat of *Pitta* and *Sthaulya* is *Kapha Pradhana Tridoshaj Vyadhi* so *Virechana* is very helpful for reducing *Meda* and *Kapha* from the body. In *Virechan Karma* maximum ingredients have *Katu Rasa*, *Laghu*, *Ruksha Guna*, *Ushna Virya* and *Katu vipaka*, *VataKaphahara*,

Karshana, *Lekhaniya*, *Amapachana*, *Dhatu-Shoshana* properties, which normalize the state of *Agni*. Thus, regulated *Jathargani*, checks the excessive growth and accumulation of *Medo-Dhatu*^[14] and thereby causing *Lakshana Upashamana* of disease *Sthaulya*. By *Virechankarama*, all *Dosha Vata*, *Pitta* & *Kapha* are alleviating so the weight of the body automatically decrease which leads to *Sthoulyanasha*. *Meda* and *Kleda* are the chief culprits in *Sthaulya*. *Tikta* & *Katu Rasa* performs *Medokledopashoshana* action. *Ushna Virya* also helps in *Kleda* and *Meda-Vilayana* action. After *Virechana Karma*, followed by *Samsarjana Karma*, it leads to *Agnivridhi* and *Amanasha*. By *Virechana Karma* all *Srotas* especially *Medovaha* and *Rasavaha Srotas* gets purified.

Lekhana Basti prepared with *Triphala Kwatha*, *Gomutra*, *Madhu*, *Kshara* etc. *Triphala Kwath* having *Tikshana*, *Ushana* properties, and consists of *Katu*, *Tikta*, *Kashaya Rasa*. These drugs, by virtue of their *Ushna Virya* acts on *Kapha-Vata*. In *Sthaulya*, *Meda* and *Mamsa Vridhi* occurs along with production of *Ama Rasa*. The *Lekhan Basti* breaks the *Srotosanga*. So the active principle reaches to the cellular level. The drugs of *Triphala Kashaya* causes *Shoshana*, *Lekhana*, *Amahara Karma* due to *Tikta*, *Katu* and *Kashaya Rasa*. Most of these drugs having *Deepana* and *Pachana* properties, and by these properties mainly corrects *Medodhatvagnimandya* and checks the further progression of *Meda Sanchaya* by stopping the formulation of *Meda*.

CONCLUSION

Sthaulya is a *Dushya Dominant Vyadhi*. There is an involvement of all the three *Doshas* in *Sthaulya* but the vitiation of *Kapha-Vata* and *Meda* of prime importance. The management of *Sthaulya* done by reducing the alleviated *Vatadosha* and *Kaphadosha*. The *Dravyas* used in both procedures possessing *Katu*, *Tikta* and *Kashayarasa* and also with *Lekhana Karma* facilitates for *Shoshana* and removal of liquefied or detoxified *Kapha* and *Meda*. Majority of drugs possessing *Kaphahara*, *Vatahara* and activity which is *Medohara* in action. These all drugs help in maintaining digestion and inhibit *Ama* production. Due to *Laghu*,

Ushna and *Teekshana* properties of *Basti*, when absorbed through intestinal mucosa, obstruction of channels broken down. Thus, morbid material from all over the body will expelled out and it breaks the pathogenesis of obesity. *Virechana Karma* followed by *Lekhana Basti* can be considered as a good modality for management of *Sthaulya*. And on the basis of modern parameters, we can conclude that by overall comparison of all the parameters before and after treatment, showed that effect of *Virechana* with *Lekhana Basti* is significant in *Sthaulya*.

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