



ISSN 2456-3110

Vol 8 · Issue 3

March 2023

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Maharshi Charaka
Ayurveda

Indexed

Concept of *Meda Dhatu* with special reference to *Sthoulya*

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ABSTRACT

Ayurveda is the science of life which is based on *Adharbhuta Siddhanta* that is Basic principles. Many Basic principles are explained in *Ayurveda* which are helpful for better understanding of Ayurvedic concepts. Among them *Dhatu* is also having prime importance which is explained in *Ayurveda*. Now a days *Sthoulya* has become a very common lifestyle disorder due to improper food habits, sedentary life style and change in sleep pattern. The role of *Meda Dhatu* in *Sthoulya* is inevitable since the derangement in *Medadhatwagni* arrests the formation of further *Dhatu*s and may even harm the longevity of the individual. Hence proper and healthy life style is very much essential in *Sthoulya*.

Key words: *Adharbhuta Siddhanta, Dhatu, Meda Dhatu, Medadhatwagni, Sthoulya*

INTRODUCTION

Ayurveda has mentioned theories of *Tridosha, Sapta Dhatu* and *Trimala* which governs physiological functioning of body and helps to maintain general health. The equilibrium of these three is very important for healthy physical and mental state. The imbalance in *Doshas* and *Dhatu*s leads to pathological manifestation in the body. Amongst them the concept of *Dhatu* is very essential for describing structural and physiological components of body.

Sharira is made up of *Sapta Dhatu* but *Sthoulya purushas* are nourished excessively by *Meda Dhatu* and other remaining *Dhatu*s get malnourished. When *Kapha* increases in abnormal fashion, fat metabolism is hampered and person becomes *Sthoola*.

The *Mamsa* which is digested completely by *Medadhatu*s is called as *Meda Dhatu*. *Sthoulya* is abnormal and excess accumulation of *Meda Dhatu*. The fact that Acharyas had a comprehensive idea of the disease is clear from the explanations found.

Both Acharya Charaka and Susruta perceived it as a very serious health problem and hence Acharya Charaka considered it among the *Astanindita purusha*. Acharya Susruta mentions both *Sthoulya* and *Karshya* as *Rasa Nimita*, thus highlighting the importance of the type, frequency and amount of food consumed by a person in causing either *Sthoulya* or *Karshya*.

REVIEW OF LITERATURE

Nirukti of Meda Dhatu

The *Mamsa* which is digested completely by *Medo Dhatu Swaagni* is called as *Meda Dhatu*.^[1]

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Submission Date: 13/01/2022 Accepted Date: 21/02/2023

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.8.3.25

Panchabhautika Sanghatana

According to Acharya Charaka, *Meda Dhatu* is predominantly formed of *Jala Mahabhuta*.^[2]

According to Acharya Susruta, *Meda Dhatu* is predominantly formed of *Jala* and *Pruthvi Mahabhuta*.^[3]

According to Astanga Sangraha, *Meda Dhatu* is also considered as a *Sneha* dominant *Drava Dhatu*, which is *Guru* and *Snigdha* *gunayukta*. It is also *Teja* and *Bhrajishnutayukta* which is dominated mainly by *Jala Mahabhuta*.

Meda Dhatu Guna

Meda Dhatu is *Snigdha*, *Sthira*, *Guru*, *Sandra* and *Mrudu*.

Properties of *Meda Dhatu* are similar to *Kapha Dosha*, as both of them are predominantly formed of *Jala* and *Prithvi Mahabhuta*.^[4]

Meda Dhatu Karma

Snehana, *Swedana*, *Dridatva* and *Asthiposhana* are the main *Karma* of *Meda Dhatu*.

Karma	CS	SS	AH	AS
<i>Snigdhatwa</i>	+	+	+	+
<i>Asthiposhana</i>	+	+	+	+
<i>Netrasnigdhatwa</i>	-	-	-	+
<i>Gatrasnigdhatwa</i>	-	-	-	+
<i>Sharira poshana</i>	-	-	-	+

Medavahasroto Moola

Charaka	<i>Vrukka</i>	<i>Vapavahana</i>
Sushruta	<i>Vrukka</i>	<i>Kati</i>
Vagbhata	<i>Vrukka</i>	<i>Mamsa</i>

Upadhatu of Meda Dhatu

Snayu and *Sandhi* are *Upadhatu* of *Medadhatu*.

Mala of Meda Dhatu

Sweda is the *Mala* of *Meda Dhatu*.^[5]

Meda Vridhhi

According to Acharya Sushruta, increase of *Medas* produces *Snigdhatwa* in the *Sharira*, increase of abdomen and flanks, cough, dyspnoea, bad smell etc.^[6]

According to Acharya Vagbhata, *Meda Vridhhi* causes fatigue, increased breathing even after little work, drooping of the buttocks, breasts and abdomen.^[7]

Meda Kshaya

According to Acharya Charaka, in the event of *Meda Kshaya*, there is cracking of the joints, lassitude of the eyes, exhaustion and thinness of the abdomen.^[8]

According to Acharya Susruta, decrease of *Meda* gives rise to enlargement of spleen, feeling of emptiness of joints, dryness and craving for fatty meat.^[9]

According to Acharya Vagbhata, decrease of *Medas* causes loss of sensation around waist region (*Katiswapa*), *Pleeha Vrudhhi* (Splenomegaly), *Krishangata* (Patient looks very thin and emaciated).^[10]

Sthoulya

Sthoulya is the condition in which there is increase of the *Meda* and *Mamsa Dhatu* which causes flabbiness and pendulous appearance in the *Udara*, *Spik* and *Sthana* (Abdomen, Buttocks and Breasts). This improperly formed *Medodhatu* causes *Uthsahani* in the individual.^[11]

Samprapti

Acharya Charaka has narrated the pathophysiology of *Sthoulya* by highlighting the *Medasavruta Vata*. It states that the *Nidana* increases *Medas* alone at the cost of other *Dhatu*s in vulnerable people. Due to *Avarana* of *Vayu* by *Medas*, *Vata* is specially confined to *Koshta*, resulting in exaggerated speed of digestion. This causes the habit of over eating and repeated intake of food.^[12]

Derangement of *Agni* leads to production of *Ama*, which disturbs *Dhatvagni* of *Medadhatu* and blocks the proper formation of further *Dhatu*s. Improperly formed *Medadhatu* accumulates in the body causing

Obesity. Accumulated fat causes disturbance to the movement of *Vata*, which in turn increases appetite. Patient therefore eats more and entire food is then converted into improper fatty tissue creating a vicious circle.

The version of Susruta Samhita regarding the pathophysiology of *Sthoulya* differs slightly from that of Charaka Samhita. It states that *Sthoulya* is *Rasanimitaja*. Due to indulgence of *Nidana*, there will be formation of *Annarasa* (*Amarasa*), which is predominantly *Madhura* in nature. As a consequence of this, the process of *Dhatu Parinama* is hindered resulting in excess *Sneha* and *Medas* due to *Dhatwagnimandya* ultimately leading to *Sthoulya*.^[13]

Nibandha Sangraha Vyakhya of Dalhana on Sushruta Samhita elaborates and throws more light on this process of pathogenesis. The commentary tries to critically analyze how *Ama* is produced in people who are predominant of *Medas*, though they have *Teekshnagni*. The reasons attributed for *Amotpati* are *Dhatwagnimandya* and *Adhyashana*. Even though *Medasvi* people have *Tikshnagni* the *Dhatwagnimandya* eventually leads to the production of *Ama*.

The *Amarasa* which is produced due to *Rasadhatwagnimandya*, remains in *Ama Avastha* itself in the *Dhatu Poshana Krama*, still *Medadhatu Upachaya* takes place at the cost of *Rakta* and *Mamsa Dhatu*. There are three reasons attributed for this.^[14]

1. Due to intake of *Vishista Ahara* (specific diet) which is conducive to *Medadhatu*.
2. Due to *Adrushta* (for which specific reasons cannot be attributed).
3. Due to *Marga Avarana* by *Medadhatu*.

In *Ashtanga Sangraha*, the *Samprapti* of *Sthoulya* is explained as follows:

Due to the intake of *Nidana* such as *Guru Ahara*, the *Anna Rasa* produced is predominantly in *Amavastha*, which mixes up with *Sleshma* which will be adherent or concealed (*Samleena*) in *Dhatu*. The resultant

material causes the *Shlatheekarana* of *Dhatu*. As an end result of this process *Sthoulya* occurs.^[15]

Indu Teeka on Ashtanga Sangraha adds that the increase of *Meda Dhatu* is correspondingly high when compared to other *Dhatu* in *Dhatu Pariposhana Krama* because of the specific reasons which are favorable for *Meda Vriddhi*.

Madhava Nidana tried to integrate the views of both Charaka Samhita and Susruta Samhita in formulating the pathophysiology of *Sthoulya*.

Indulgence in *Nidanas* such as *Avyayama*, *Divaswapna*, *Sleshmala Ahara* forms the *Anna Rasa* which has the predominance of *Madhura Rasa* as a result of which there is increase of *Sneha Guna* and *Meda Dhatu* in the body. The *Medadhatu* thus excessively produced causes *Margavarodha*. As a result of which other *Dhatu* are depleted causing symptoms such as inability to perform all the activities, *Ksudra Shwasa*, *Trushna* and *Moha*.

Madhukosha commentary on *Madhava Nidana* emphasizes the role of untimely food as the cause of the formation of *Ama* in people who are obese. In addition to this there is an *Upalepa* of *Madhura Rasa* in *Annava Srotas*. As a result of that *Annava Srotas* predominantly contains *Madhura Anna Rasa* irrespective of *Rasa* consumed initiating the pathophysiology of *Meda Vriddhi*.^[16]

The *Samprapti* of *Sthoulya* explained in *Yoga ratnakara*, *Bhavaprakasha*, *Sharangadhara*, *Vangasena*, *Basavarajeyam* and *Gadanigraha*, is same as that mentioned in *Madhavanidana*.

Lakshanas

Lakshana	CS ^[17]	SS ^[18]	AS ^[19]	MN ^[20]	BP ^[21]	YR ^[22]
<i>Ayuhrasa</i>	+	-	+	+	-	-
<i>Alpa Prana</i>	-	+	+	+	-	-
<i>Alpa Vyavaya</i>	-	+	-	+	+	-
<i>Aayasa</i>	-	-	+	-	-	-
<i>Angashaithilya</i>	+	+	-	+	+	-

Chala Udhara	+	-	+	+	+	+
Chala Sthana	+	-	+	+	+	+
Chala Spik	+	-	+	+	+	+
Daurbalya	+	-	+	-	+	+
Daugandhya	+	+	+	+	+	+
Gatrasada	-	+	-	+	+	-
Gadagadatva	-	+	+	-	-	-
Javaparodha	+	-	+	+	+	+
Krichra Vyavayata	+	+	+	+	+	+
Kshudadikya	+	+	+	+	+	+
Kasa	+	+		+	+	-
Kshudra Shwasa	+	+	+	+	+	+
Moha	-	-	-	+	+	+
Nidradhikya	-	+	+	+	+	+
Pipasadhikya	+	+	+	+	+	+
Swedadhikya	-	+	+	+	+	+

CS – Charaka Samhita, SS – Sushruta Samhita, AS – Astanga Sangraha, MN – Madhava Nidana, BP – Bhava Prakasha, YR – Yoga Ratnakara.

DISCUSSION

Ayurveda clearly explains the concept of *Meda Dhatu* in classics. *Meda Dhatu* plays a prominent role in the pathogenesis of *Sthoulya*. Due to *Nidana Sevana* like *Atibhojana*, *Adhyashana*, *Guru Ahara Sevana*, *Atisantarpana*, *Ayayama*, *Avyavaya* etc. *Kapha Dosha* gets increased. This *Kapha Dosha* in turn increases *Meda Dhatu* due to *Ashraya Ashrayi Sambandha*. *Medadhatwagni Mandya* takes place and *Vikruta Meda Dhatu* gets formed. It leads to *Vata Dosha Avarana* in *Kosta* which makes the *Agni Teekshna*. Like the way the heap of grass on fire starts burning more when the wind blows, the same way the *Vata Dosha* increases the *Agni*. The person will start consuming

more food due to *Teekshnagi*. Therefore, excessive formation of *Medas* occurs and further *Dhatu*s remains unformed due to the *Dhatwagnimandya* of *Medas*, thereby resulting into *Sthoulya*.

Sthoulya is *Santarpana Janya Roga* and it results due to derangement in metabolism thereby only *Medas* sustains and restricts the formation of other *Dhatu*s. The disease progression takes place on the basis of *Avarana* due to *Medas* which affects *Vayu* and *Agni* in *Kosta*. *Agni* and *Medas* do possess a vibrant role in *Sthoulya Samprapti* and correction of these through proper *Shodhana* followed by *Shamana Chikitsa* and modification of life style helps to maintain a healthy life.

CONCLUSION

The *Mamsa* which is digested completely by *Medo Dhatu Swagni* is called as *Meda Dhatu*. *Sthoulya* is abnormal and excess accumulation of *Meda Dhatu*. *Spik*, *Sthana*, *Udara Lambana* are *Pratyatma Lakshanas* of *Sthoulya*. *Meda Dhatu* plays a prominent role in *Sthoulya Samprapti*.

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How to cite this article: Reethapriya B.R., J.C. Huddar, Pushpa Biradar, Shilpa Nimbale. Concept of Meda Dhatu with special reference to Sthoulya. J Ayurveda Integr Med Sci 2023;03:134-138.
<http://dx.doi.org/10.21760/jaims.8.3.25>

Source of Support: Nil, **Conflict of Interest:** None declared.
