



## Research Article

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## AYURVEDIC MANAGEMENT OF STHOOLA PRAMEHI: A CASE REPORT

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## ABSTRACT

Sthoolapramehi is a type of santarpanajanyavyadhi (disease due to overnutrition) which has been included in classification of prameharoga according to Shareeraprakruti. In allied science, the disease is correlated as disbesity due to resemblance of sign and symptoms. Ayurveda has a holistic treatment approach for sthoolapramehi. According to Ayurveda Shodhananga Snehapana followed with Virechana and internal medication is considered as the best line of management. Objective: To evaluate the efficacy of ayurvedic management in sthoolapramehi. Methods: it is single case study on sthoolapramehi was advised with ayurvedic treatment with modified diet and lifestyle. The treatment planned was Deepana-pachana (Rukshana) with Udwarthana and Parisheka, Snehapana (Shodhananga Snehapana) followed by Virechana. After the whole course of therapy, it was found significant relief in sign and symptoms. The therapy marked relief. Conservative management of Sthoolapramehi through Ayurvedic principle provides significant relief and improves quality of life so has been presented in this article.

**Keywords:** Sthoolaprameha, Disbesity, Apatarpana, Ayurveda

## INTRODUCTION

Ayurveda is a science of life which mainly high lightened on healthy living in which pathyaapathya ahara and vihara has been explained for the disease free living. The changed ahara (food habits) and vihara (sedentary lifestyle) if continued is the major causative factor for the occurrence of prameha. Sthoolapramehi is one of the type based on the shareera prakruti.<sup>1</sup> The term diabetes is coined later by the contemporary science from sthoola pramehi.<sup>2</sup> The international prevalence of diabetes is approximately 347 million of the total global population.<sup>3</sup> Since 1980 the prevalence rate of diabetes is increased globally and the concurrent increase in obesity prevalence is closely related.<sup>4</sup>

## MATERIALS AND METHODS

A 48-year-old male subject who was a software engineer by profession was admitted as In patient Department of Sri Dharmasthala Manjunatheshwara Ayurvedic College and Hospital, Hassan, Karnataka, India (IP-156806) presenting with subsequent complaints was admitted on 19-10-2018 for 15 days. He complaints of increased body weight especially on central portion of body for 12 years associated with knee joint pain for 4 months. He also complaints of snoring for 4 years. Past history revealed that patient was known case of diabetes mellitus for 3 years and there is family history from maternal side. After taking detailed history, the consent was taken from the subject and study was un accordance with ICH GCP guidelines. Ethical clearance for the study has been obtained from institutional ethics committee of SDM college of Ayurveda and Hospital, Hasaan(SDM/IEC/85/2017-2018).

TABLE 1 INTERVENTION SCHEDULE

|              | Intervention                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Observation                                                                                                                      |
|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Day 1 to 5   | <ul style="list-style-type: none"> <li>• Sarvangaudwarthana</li> <li>• Sarvangaparisheka with dashamoolakwatha</li> <li>• Janu basti with dhanvantharaTaila and Murivenna</li> <li>• Janu upanaha with jatamayadichoorna+ kottamchukadichoorna+ DhanwantharaTaila</li> <li>• Internally- Asanadikashaya 20ml with 60ml lukewarm water twice daily, morning and evening before food</li> <li>○ Amla juice 20ml with 100ml of lukewarm water twice daily</li> <li>○ Decrin plus 2BD before food</li> <li>○ Anu taila 2 drops on each nostrils</li> </ul> | <ul style="list-style-type: none"> <li>○ Patient got relief from knee joint pain</li> <li>○ Weight reduced to 4.56 kg</li> </ul> |
| Day 6 to 9   | Snehapana with SukumaraGhrita                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1 <sup>st</sup> day- 30ml, 2 <sup>nd</sup> day- 50 ml<br>3 <sup>rd</sup> day – 100ml, 4 <sup>th</sup> day- 140 ml                |
| Day 10 to 12 | SarvangaAbhyanga with BrihatsaindhavadiTaila and Bhaspasweda                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                  |
| On Day 12    | Sarvanga Abhyanga with BrihatsaindhavadiTaila and Bhaspasweda followed by Virechana with trivritleha(50gm) and triphalakashaya (100ml)                                                                                                                                                                                                                                                                                                                                                                                                                 | Vega pravriti – 14 till 4:00 pm<br>Udgarashudhi – 2:00pm<br>Kshudpravriti – 3:00 pm                                              |

TABLE 2 DIET SCHEDULE DURING TREATMENT

|               | Diet advised                                                                                                                                                                                                                                                                                  |
|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Day 1 to 5    | 6: 30 am - Amaharakashaya (100ml)<br>8:30 am - Mudga amalaka Yusha (300ml)<br>11:30am - JeerakasidhaTakra (200ml)<br>1:00 pm - Yavarottika (2-60 gm) + boiled Vegetables (300gm)<br>5:00 pm - Papaya Juice / Salad (200 ml/gm)<br>8:00 pm - Yavarottika (2 -60gm) + Boiled vegetables (300gm) |
| Day 6 to 9    | Peya (300ml) at the time of hunger                                                                                                                                                                                                                                                            |
| Day 10 and 11 | 8:30 am - Mudga amalaka Yusha (300ml)<br>11:00am - JeerakasidhaTakra (200ml)<br>1:00pm - YavaRottika (2- 60 gm) + Boiled Vegetable (300gm)<br>5:00pm - papaya juice / Salad(200ml/gm)<br>8:00 pm - Anna, Rasam                                                                                |
| Day 12        | Virechana<br>Advice for peya after samyagvirechanalakshana                                                                                                                                                                                                                                    |
|               | Samsarjana karma for 3 days<br>Day 1 - Peya<br>Day 2 - Peya<br>Day 3 -Kichidi                                                                                                                                                                                                                 |

TABLE 3 ASANAS PRANAYAMA AND PHYSIOTHERAPY ADVISED

| Asanas Advised   | Names                                                                                                                                                      |
|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Warmup Exercises | Eyeball rotation, Head & Neck rotation, Elbow, finger and knee flexion and extension, Shoulder, wrist, hip and ankle Clock wise & anti clock wise rotation |
| Standing Posture | Trikonasana, Ardhakatichakrasana, Ardhashakrasana, Padahastasana                                                                                           |
| Sitting Posture  | Vajrasana, Gomukhasana,                                                                                                                                    |
| Prone posture    | Dhanurasana, Bjujangasana                                                                                                                                  |
| Supine Posture   | Pavanamuktasana, Shavasana                                                                                                                                 |
| Pranayama        | Kapalabhati, Bhastrika Pranayama, Surya anulomaviloma, Nadhishudhi pranayama Bhramari pranayama                                                            |
| Physiotherapy    | Stationary Bicycle Exercise<br>Manual Tread Mill, Tummy twister, Vibratory Belt                                                                            |

TABLE 4 ANTHEPOMETRY MEASUREMENT BEFORE AND AFTER TREATMENT

| Observation           | Before                            | After                              |
|-----------------------|-----------------------------------|------------------------------------|
| Weight                | 88.5kg                            | 80kg                               |
| Height                | 178cm                             | 178cm                              |
| Body mass index       | 27.932kg/m <sup>2</sup>           | 25.249kg/m <sup>2</sup>            |
| Chest circumference   | 108cm                             | 104cm                              |
| Abdomen circumference | 116cm                             | 109cm                              |
| Mid arm circumference | Right arm: 33cm<br>Left arm: 33cm | Right arm: 32cm<br>Left arm: 32 cm |
| Waist circumference   | 106cm                             | 104.5cm                            |
| Hip circumference     | 106cm                             | 105cm                              |
| Waist Hip Ratio       | 1                                 | 0.995                              |

TABLE 5 LIPID PROFILE BEFORE AND AFTER TREATMENT

| RANGE  | Total cholesterol | HDL           | LDL           | Triglycerides | VLDL        |
|--------|-------------------|---------------|---------------|---------------|-------------|
| Normal | (150-200mg/dl)    | (35-170mg/dl) | (65-170mg/dl) | (40-140mg/dl) | (5-35mg/dl) |
| Before | 221               | 50.1          | 119           | 259           | 51.8        |
| After  | 196               | 56.6          | 94            | 245           | 50          |

TABLE 6 FASTING AND POST PRANDIAL BLOOD SUGAR LEVEL BEFORE AND AFTER TREATMENT

| RANGE  | FBS         | PPBS         |
|--------|-------------|--------------|
| Normal | 70-100mg/dl | 100-140mg/dl |
| Before | 230         | 340          |
| After  | 190         | 250          |

## RESULTS

After the treatment plan for 12 days the patient got a gradual relief of symptoms from the 4<sup>th</sup> day of admission and has considerable decreased in subsequent days of treatment and reduction in weight and associated symptoms at the time of discharge.

## DISCUSSION

Apatarpana (depletion therapy) is the main treatment protocol in santarpanajanyavyadhi<sup>1</sup> (diseases due to over nutrition) hence in sthoolapramehi application of shodhana karma (purification) would be helpful, which is done with Sarvanga udwarthana (Powder massage) and sarvangaparisheka (Fomentation), snehapana (oleation) followed by vama karma. Here udwarthana and parisheka will do the rookshana karma (dry therapy) along with amapachana as it is a poorvakarma (preparatory therapy) which plays an important role before shodhana (purification) and it provides dryness and helps in depletion of medhohatu in the body. It is especially indicated for mamsala (fleshy), meddura (fatty) and in kapha predominant condition to prevent the complication of snehana (oleation). Udwarthana (powder massage) with choorna of amalakai, haritaki, vibhitaki, kulatha, yava, sarshapa, methika, mudga and Parisheka with Dashamoola (bilwa, agnimantha, shyonak, gambhari, patola, brihati, kantakari, prishniparni, shalaparni, gokshura) which is tridoshahara and amapachana<sup>5,6</sup>

Along with some palliative treatment for anubandavyadhi (Associated complaints) with janubasti (External oleation) and januppanaha (Knee Poultice) which provides flexibility, the pain can be removed by repeated application of snehana (oleation) and swedana (Fomentation). Janu basti (External oleation) is asthiposhana and may help in blood circulation. Virechana (Purgation) with trivritleha is kaphashamaka and considered as hridyavirechakaushdhi (Purgative medicine) due to kashaya rasa, rukshaguna and katuvipaka.

Shamanaushadhi (Internal medicine) were given are Asanadiganakashaya specially indicated medicine for kapha and medoroga and parameha,<sup>7</sup> Decrin plus capsule which consists of Amrita guggulu powder 250gm, Navakaguggulu powder 60mg, shudhashilajit powder 30mg and agada beeja powder 60mg of each 400gm capsule which is also indicated in kapha and medoroga and has significant role in reduction in level of serum lipids and reduces the adiposity and blood sugar level with in the body.

## CONCLUSION

From the case study, it is observed that Udwarthana (Powder massage), Parisheka/Swedana (Sudation), Snehana (oleation) followed by virechana (purgation) with Shamanaushadhi (internal medicine) and Nidanaparivarjana (Ahara and Vihara) has a vital and valuable role in the management of sthoolapramehi. The case illustrated significant difference in reducing weight, blood sugar and triglyceride level and symptoms. But a larger sample size study has to be done to get more precise conclusions.

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