



## CLINICAL STUDY TO EVALUATE THE EFFICACY OF ASHWGANDHARISHTA WITH VYAYAMA IN KARSHYA

**Vd. Suhas Uttamrao Sakhare<sup>\*1</sup> and Dr. Yeshwant Rajpal Patil<sup>2</sup>**

<sup>1</sup>(PG Scholar) Dept. of Swasthavritta & Yoga, Govt. Ayurved College, Nanded, Maharashtra.

<sup>2</sup>Guide & HOD, Dept. of Swasthavritta & Yoga, Govt. Ayurved College, Nanded, Maharashtra.

**\*Corresponding Author:** Vd. Suhas Uttamrao Sakhare

(PG Scholar) Dept. of Swasthavritta and Yoga Govt. Ayurved College Nanded, Maharashtra, India, 431601.

Article Received on 22/07/2018

Article Revised on 12/08/2018

Article Accepted on 2/09/2018

### ABSTRACT

*Karshya* is a clinical condition that can be correlated with under nutrition in which body gets emaciated gradually. Among the eight socially undesirable physical state mentioned by *Charak*, *Karshya* has been categorized under nutritional deficiency. Altered function of *Vayu* and *Agni* leads to insufficient production of *Rasa Dhatu*. *Uposhoshan* of *Rasa Dhatu* takes place leading to *Dhatu Kshaya* chronologically. Hence the subject of *Karshya* suffers from indigestion, malabsorption, defective metabolism. *Meda Dhatu* and *Mamsa Dhatu Kshaya* at microscopical level ultimately express its symptom macroscopically. So, the purpose of my study is to provide an Ayurvedic management and prove the efficacy of *Ashwgandharishta* with *Vyayama* in the management of *Karshya*.

**KEYWORDS:** *Karshya*, Under nutrition, *Ashwgandharishta*, *Vyayama*.

### INTRODUCTION

*Karshya* is a disease in which the body gets emaciated gradually. In treaties of Ayurveda *Karshya* is mentioned as an undesirable clinical condition because untreated cases of *Karshya* become susceptible to major diseases, like *Pleeha*, *Kas*, *Kshaya*, *Swas*, *Gulma*, *Arsha Udar*, *Grahani*.<sup>[1]</sup> Ultimately the subjects of *Karshya* subjected to *Bala Hani* (loss of immunity) and proceed towards death.<sup>[2]</sup> Since pre-historic era the stalwarts of medicine were in search of the medicaments which prevent the disease affecting the general health of the community. In *Charak Samhita* eight physical states are described considering its unwanted clinical and social complications.<sup>[3]</sup> These undesirable diseases are hereditary, hormonal, and nutritional in origin. In course of time following the untried exploration of ancient physician, afterward the social or community medicine is developed. An approach is made to prevent and treat the disease that is based on the study of human heredity, environmental social structure and values. As per UNICEF Under nutrition is defined as the outcome of insufficient food intake and repeated infectious diseases. It includes being under weight and height from one's age (stunted growth) with associated vitamin and mineral deficiency. According to FAO reports there are about 460 million, i.e., 15 % of the world population excluding China who are malnourished, of which about 300 million live in South Asia constituting one third of the population. Globally priority is given to malnourished

persons as kwashiorkor, marasmus, xerophthalmia, nutritional anaemia, endemic goiter, morbidity in young children, retarded physical and mental growth takes place as a squeal.

**Method:** 10 subjects were diagnosed as *Karshya* from O.P.D. Govt. Ayurvedic College Nanded, on the basis of subjective and objective parameters which includes signs and symptoms. *Ashwagandharishta* is administered to every patient at the dose of 20ml/day in two divided doses and in daily morning one hour *Vyayama* with warm up exercises advised to the subjects for 1 month.

### AIMS AND OBJECTIVE

#### The study is aimed on.

- i) To evaluate the efficacy of *Ashwagandharishta* with *Vyayam* in *Karshya*

### MATERIAL & METHODS

#### Selection of the Subjects

10 Subjects complaining of gradual weight loss with apparent lean and thin look were selected from OPD of *Swasthavritta* Department of Govt. Ayurved College Nanded, irrespective of sex and religion. The subjects are included in the study following the mentioned screening criteria as below.

#### Exclusion Criteria

- a) Age above 30 yrs and below 20 yrs.

- b) Pregnant and lactating women.
- c) Subjects suffering from any type of illness and previous surgeries.
- d) The person who are here dietary lean and thin.
- e) Patient unwilling to participate in the study.

During study period if diagnosis favor any of the exclusion criteria then the patient would be excluded from the study. Subjects are excluded from the study following the above mentioned exclusion criteria. Subjects lying within the limit of inclusion criteria are included in the study. Inclusion criteria are mentioned below:

#### Inclusion Criteria

- 1) Patient in between 20 to 30 years of age.
- 2) Patient following the maximum subjective criteria as mentioned earlier.
- 3) Avitaminosis and mineral deficiency.
- 4) Patient not presenting *Pleeha, Kasa, Kshaya, Swasa, Gulma, Arsha, Udar, Grahan*.

Hence the patient satisfying the subjective criteria of *Karshya* and lying within the limit of inclusion criteria are included in the study.

#### Subjective Criteria

- a. *Sushka Sphiga*
- b. *Sushka Udar*
- c. *Sushka Griba*

The subjects satisfying the above mentioned criteria are subjected for verification of exclusion and inclusion criteria

#### Objective criteria

Objective criteria are observed in the selected subjects

- a) BMI (Body Mass Index) = Weight in kgs/height in meter square Patient measuring BMI < 18.5 should be taken as underweight (as per WHO categorization).

#### Dosage and Duration of Drug

*Ashwagandharishta* is administered to every patient at the dose of 20ml/day in two divided doses per day for 1 month with having regular *Pathyapathy*.

**Table 1: Showing the effects of therapy on BMI.**

	Mean	S.D.	S.E.	t Value	P value	Decision based on P value
BT	173.4	7.604	2.405	5.379	0.0004	P<0.05
AT	176.4	7.214	2.281			

P < 0.05 = Significant

#### DISCUSSION

In *Charak Samhita*, the disease *Karshya* is described in a view of nutritional deficiency. As *Charak* considered this condition as undesirable phenomenon, hence principle of management and line of treatment is advised as because *Karshya* patients are prone to develop various diseases



#### Administration of Vyayama

*Vyayama* were administered daily in morning for 30 days.

- 1) **Warm up:** for 10 min

- 2) **Vyayam (exercises):** For 1 Hr.

- a) Sit ups
- b) pull ups
- c) Push ups

#### Follow up

All the patients were reviewed, after each 15 days for a period of 30 days. And BMI was observed on 0<sup>th</sup> day and 30<sup>th</sup> day.

#### Study Sample

Total 10 patients of *Karshya* were included in the study; all of them were completed study.

#### Statistical Analysis

The obtained data from 10 subjects were analyzed statistically. Data were analyzed by Paired 't' Test.

#### OBSERVATION & RESULT

The patients were selected on the basis of Subjective criteria and objective criteria, but Statistical analysis was done on the basis of Objective parameter (BMI).

*Pleeha, Kas, Kshaya, Swas* etc. *Rukshannapan, Langhana, Promitasan, Kriyatiyoga* etc., are the main aetiological factor of *Karshya Roga*<sup>[4]</sup> All of these causes aggravation of *Vayudosa* and *Upososhan* of *Rasa Dhatu*<sup>[5]</sup> Hence as per *Bhaishajyaratnavali* *Ashwagandharishta* is useful remedy to treat *Karshya*<sup>[6]</sup> because it helps to improve *Dhatu Bala* & *Vyayama*

(Exercise) helps to improve metabolism of digestive system which is directly effects on BMI. In this present study it is observed that p value of BMI is <0.005 which indicates the significant efficacy of *Ashwagandharishta* with *Vyayama* in *Karshya*.

## CONCLUSION

Western approach for *Karshya* based on wrong footing. Treating *Karshya* without any modern drugs, Supplements related to increase weight is also wrong footing for young generation because it has so many side effects, it may damage vital organs too. So having Proper *Ayurvedic* remedy with exercise helps to increase BMI.

In this study subjects with *Karshya* Showing significant results for *Ashwagandharishta* with *Vyayama* (exercise) & having regular *Pathyapathy*.

## REFERENCES

1. Agnivesh, Charak Samhita, edited by Kushwaha Vd. Harish Chandra Singh, 1st Part, Chaukhamba Orientalia, Varanasi Reprint, Sutra sthan, 21st chapter, Shloka, 2012; 13: 412.
2. Sushruta, Sushruta Samhita, edited by Anantaram Sharma, Volume -1, Chaukhamba Sanskrit Samasthan, Varanasi, 12th edition, Sutra sthan, 15th chapter shloka, 2001; 39; 63.
3. Agnivesh, Charak Samhita, edited by Kushwaha Vd. Harish Chandra Singh, 1st Part, Chaukhamba Orientalia, Varanasi Reprint, Sutra sthan, 21st chapter, Shloka, 2012; 3: 407.
4. Agnivesh, Charak Samhita, edited by Kushwaha Vd. Harish Chandra Singh, 1st Part, Chaukhamba Orientalia, Varanasi Reprint, Sutra sthan, 21st chapter, Shloka, 2012; 12: 411.
5. Sushruta, Sushruta Samhita, edited by Anantaram Sharma, Volume -1, Chaukhamba Sanskrit Samasthan, Varanasi, 12th edition, Sutra sthan, 15th chapter shloka, 2001; 38: 63.
6. Kaviraj Govind Das Sen, Bhaishajyaratnavali, edited by Prof. Siddhi Nandan Mishra, Volume 1, Chaukhamba Surbharti Prakashan, Varanasi, 1<sup>st</sup> edition, 21<sup>st</sup> Chapter Shlok, 2005; 22: 492.