



## CLINICAL EVALUATION OF MEDOHAR GUGGULU IN THE MANAGEMENT OF STHAULYA (OBESITY) WITH SPECIAL REFERENCE TO HYPERLIPIDEMIA

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### ABSTRACT

Ayurveda is most ancient of medical science. In Ayurveda, sthaulya has been described since very early days in various Samhitas, Songraha Granthas etc. Sthaulya (obesity) is one such life style disease. As a disease entity it is multi-factoral metabolic disorders, is very near to Medoroga / Sthaulya of Ayurveda. Medohara Guggulu is an anti-obesity herbal medicine and harmonizes the body for proper digestion of the food and helps in controlling the weight.

**KEYWORD:** Sthaulya, Obesity, Hyperlipidemia Atisthaulya.

### INTRODUCTION

Obesity is described as excessive accumulation of Meda (fat / adipose tissue) and Mamsa (flesh / muscle tissue) leading to flabbiness of hips, abdomen and breast. It is considered as one of Santarpanotha Vikaras (disease due to consumption of excessive calories) in Ayurveda.

Environmental and behavioural changes brought about by economic development, modernization and urbanization has been linked to the rise in prevalence of life style related disorders like obesity.

WHO identifies main global leading risk factors causing today's diseases, disability and deaths.

According to Ayurveda dyslipidemia is the corresponding output of Medovaha Srotodushti. Hyperlipidemia is one such condition where the direct reference is not mentioned in any of the Ayurvedic classical texts. In Ayurvedic system of Medicine, Hyperlipidemia can be considered under the title of 'Medoroga' which stands among 'Ashta Ninditiya Roga' as 'Sthaulya Roga' in Charaka Samhita.

Acharya Charaka has thrown light on the eight varieties of impediments which are designated as Nindita Purusha, Atishaulya comprises one of them. In the pathology of Sthaulya, Kapha is main Dosha and Meda is main Dushya, while Agnimandya takes place at Medodhatvagni level. So that ideal drug therapy to be selected should have Kapha Medanashaka property and efficacy to correct the function of

Medodhatvagnimandya. All the ingredients of "Medohara Guggulu" are Katu, Tikta, Kashaya in Rasa, Possessing Ushna Virya and Laghu. Ruskha Guna are largely responsible for Medohara and Lakhaneeya activities.

Total 60 patients were selected for this clinical study. These 60 patients were randomly divided into two groups.

Hence the present research work is undertaken to study 'The effect of 'Medohara Guggulu' in the management of Sthaulya (obesity) w.s.r to hyperlipidemia.

### Aims and Objectives

- To assess the clinical efficacy of Medohara Guggulu on hyperlipidemia.
- To assess the preventive aspect of Sthaulya (obesity).
- To study aetiopathogenesis of sthaulya (obesity) according to Ayurveda and Modern Classics.

### MATERIAL AND METHODS SOURCE OF DATA

Patients who were attending the O.P.D and I.P.D of Kayachikitsa Department fulfilling. The criteria were selected for the study.

### Criteria for inclusion

The obese patients who were having BMI > 25 and increased lipid profile in the age of group of 16 – 60 years.

Clinical history of patients was taken in special prepared proforma.

### Subjective Parameters

1. Alasya
2. Anga Gourava
3. Kshudraswarsa
4. Daurbalya
5. Atipipasa

### Objective Parameters

- Skin fold thickness : > 23mm in males  
> 30mm in females
- Waist circumference : > 102cm for males  
> 88cm for females
- BMI : above 25 (kg/m)

### Criteria of Exclusion

1. Age below 16 years and above 60 years.
2. Pregnant women.
3. Patient who have BMI 40.
4. Patient having DM, Tb, HTN, Asthma.
5. Any Endocrinological disorder.

### Drug Review

#### Group-A:- Medohara Guggulu

All the ingredients of Medohara guggulu were taken in equal quantity and pounded well so as to prepare Medohara Guggulu.

#### Group-B:- Shuddha Guggulu

Guggulu Shodhan was done in Triphala Kwath. Triphala Kwath was prepared as per standard procedure of Kwath preparation as mentioned by Acharya Sharangdhara.

### Research Methodology

After doing complete examination and investigations, the patients selected for research trial were randomly divided into two groups.

#### Group-A

30 patients were kept on Medohara Guggulu in 500mg dose BD on empty stomach with Ushna Jala for 90 days.

#### Group-B

30 patients were kept on Shuddha Guggulu in 500mg dose BD on empty stomach with Ushna Jala for 90 days.

### Criteria for Assessment

- The patients subjected to clinical trials were observed for improvement at weekly intervals for the duration of three months.
- Reduction in body circumference & skin fold thickness 12%.
- Reduction in body wt. 10% & BMI ration 10%.

## OBSERVATION AND RESULTS

### Age wise distribution of 60 Sthaulya patients.

Age	Group-A		Group-B		Total	
	No. of Patient	%	No. of Patient	%	No. of Patient	%
15-25	03	10%	05	16.67%	08	13.33%
26-35	02	6.67%	07	23.33%	09	15%
36-45	04	13.33%	06	20%	10	16.67%
46-55	08	26.67%	07	23.33%	15	25%
55-65	13	43.33%	05	16.67%	18	30%

### Sex wise distribution of 60 Sthaulya patients.

Sr. No.	Sex	Group A		Group B		Total	
		No. of Patient	%	No. of Patient	%	No. of Patient	%
1	Male	06	20%	09	30%	15	25%
2	Female	24	80%	21	70%	45	75%

### Comparison between symptoms of two groups.

Sr. No.	Symptoms	Group A		Group B		Combine SE	Zeal
		AMI	SDI	AMI	SDI		
1.	Weight	68.66	9.113	74.7	12.202	12.800	0.4685
2.	BMI	28.45	3.338	29.570	3.702	5.2362	0.2138
3.	Waist	116.53	10.234	116.95	8.444	4.9742	0.0844
4.	Hip	114.3	7.273	11.1	7.683	10.4044	0.3171
5.	SHR	1.0222	0.961	1.0561	0.07553	0.1366	0.2481
6.	Skin in fold Thickness	31.61	7.065	33.10	5.174	10.092	0.1476

**Comparison between Objective parameters of two groups.**

Sr. No.	Symptoms	Group A		Group B		Combine SE	Zeal
		AMI	SDI	AMI	SDI		
1.	Weight	68.66	9.113	74.7	12.202	12.800	0.4685
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**Comparison between Bio chemical parameters of two groups.**

Sr. No.	Symptoms	Group A		Group B		Combine SE	Zeal
		AMI	SDI	AMI	SDI		
1.	Tot. Cholesterol	168.96	22.69	171.5	18.150	32.1028	0.0791
2.	Serum Triglyceride	126.54	21.980	147.73	31.131	21.2666	1.4379
3.	LDL	98.7	21.64	101.52	21.331	31.1447	0.0905
4.	HDL	38.53	3.714	41.246	2.507	6.5785	0.4128
5.	LDL/HDL Ratio	2.611	0.679	2.476	0.500	1.0745	0.12563

**Overall effect of therapy**

Sr. No.	Assessment	Group-A		Group-B		Total	
		No. of Patient	%	No. of Patient	%	No. of Patient	%
1.	Excellent	06	20%	0	0	06	10%
2.	Marked	19	63.33%	19	63.33%	38	63.33%
3.	Moderate	05	16.67%	11	36.67%	16	26.67%
4.	Mild	0	0	0	0	0	0

**CONCLUSION**

- In group A, 20% patients had excellent improvement, 63.35% got marked improvement 16.67% patients got moderate improvement in all subjective and objective parameters.
- In group B, 63.33% patients having marked improvement, 36.67% patients having moderate improvement in all subjective and objective parameters.
- The study reveals that the patients got satisfactory highly significant results in subjective parameters in both groups.
- As for as the disease chronicity is concerned for more effective results the treatment duration should be lengthened.

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