



Research Article

TO EVALUATE COMBINED EFFICACY OF AMRUTADYA GUGGULU AND UDVARTANA FOLLOWED BY BASHPA SWEDA IN THE MANAGEMENT OF STHAULYA

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ABSTRACT

Obesity (*Sthaulya*) is increasing at an alarming rate in developed industrialized countries which are undergoing rapid nutrition and lifestyle disorders like Diabetes mellitus (T2DM), Coronary Heart Disease (CHD), hypertension. In Ayurveda, *Sthaulya* (obesity) is regarded as *Medoroga*, a disorder of *Meda Dhatu* which includes fat tissue and fat metabolism. In Ayurveda *Sthaulya* is regarded as *Medoroga*. In *Sthaulya Meda* causes obstruction all *Strotasa* which leads to of *Koshthasthit Saman Vayu Vriddhi*, which in turn causes *Jatharagnivardhana*. It leads to *Medadhatvagni Mandya* and augmentation of *Meda* which results in *Chalaspika, Chalaudara, Chala stana*. According to WHO World Health Statistics Report 2012, globally one in 6 adults are obese and nearly 2.8 million individuals die each year due to overweight. *Amrutadya Guggulu* shows *Rasa-Katu, Tikta, Kashaya, Guna-Laghu, Ruksha* and *Virya-Ushna, Vipaka-Katu, Dosha, Karma-Kapha Vatashamaka* is effective in the management of *Sthaulya*. The ingredients of *Udvaratana Triphala (Kaphahara, Deepan), Musta, Darvi, Devdaru* are *Tikta, Kashay, Laghu, Ruksha Gunatamak* having *Sthaulyahara* property. *Bashpa Sweda* given after *Udvaratana* will make *Vilayana* of *Vikruta meda*. Due to this property, it breaks the *Samprapti* of *Sthaulya*. Hence the present attempt is done to encompass the upto date comprehensive literature to study the mode of action of *Amrutadya Guggulu* and *Udvaratna* followed by *Bashpa Sweda* in the management of *Sthaulya* w.s.r. to Ayurvedic properties. Total 40 patients were enrolled in this study, significant result was seen in all subjective criteria, also 4 to 4.5kg weight loss is seen in all patients. For statistical analysis paired student 't' test, Wilcoxon test were used.

INTRODUCTION

In Ayurveda, the equilibrium of *Dosha, Dhatu, Mala, Agni* and more important the mind, results in health and disequilibrium causes disease. In Ayurveda *Sthaulya* is regarded as *Medoroga*. *Sthaulya* was mentioned by Acharya Charak under *Ashtanindita Purusha*.^[1] In *Sthaulya Meda* causes obstruction all *strotasa* which leads to of *Koshthasthit Saman Vayu Vriddhi*, which in turn causes *Jatharagnivardhana*. It leads to *Medadhatvagni Mandya* and augmentation of *Meda* which results in *Chalaspika, Chalaudara, Chala stana*.

According to WHO World Health Statistics Report 2012, globally one in 6 adults are obese and nearly 2.8 million individuals die each year due to overweight. Obesity is linked with physical and psychological ill-health and premature death^[2]. According to WHO overweight and obesity are fifth leading risk for Global Health^[3].

The aetiology of obesity is multi factorial; lifestyle is changing drastically and become very fast and busy. Over use of fast food, pizza and burger culture, vehicle friendly lifestyle, faulty dietary habits, lack of exercise, more mental work than physical, to use of medications that have weight gain as an undesirable side effects, over burden of work and mental stress leads to obesity and obesity induced disorders. Obesity is related to a wide spectrum of chronic non communicable diseases, including type2 diabetes, cardiovascular diseases.^[4]

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Sthaulya is mentioned under the “*Santarpanjanya*” *Vikara*, in Ayurveda. A detailed study of *Sthaulya* reveals its similarity to *Asthayi Medo Dhatu Vriddhi* on the basis of its pathophysiology. Also this *Ama* (*Asthayi Medo Dhatu*) is retained in the body for a longer time resulting in further complications. In the pathogenesis of *Sthaulya*, all the three *Doshas* are vitiated, especially *Kledak kapha*, *Pachak pitta*, *Saman* and *Vyana vayu* are the *Doshika* factors responsible for the *Samprapti* of *Sthaulya*.

Aama is simply a key in the pathogenesis of obesity, this *Aama annaras* travelling in the *Strotasa* gets obstructed in the *Medovaha srotasa*. This *Aama* combines with *Kapha* and *Meda*, decreasing the *Medo dhatvagni* which in turn gives rise to augmentation of *Meda*, Then *Apachita meda* gets deposited to its sites with vitiated *Vyana vayu* viz., *Udar*, *Sphika*, *Stana*, *Gala* resulting in *Sthaulya*. It is highly impossible to treat imbalance of physiology when *Aama* is present and it is in order to lose weight and keep it off permanently.

There are different *Shodhan* and *Shaman Chikitsa* for *Sthaulya* in different classics. Among these treatments of *Sthaulya*, *Guggulu Kalpa* shows good result^[5] on *Sthaulya* as it's a *Medo Vriddhijanita Roga*.^[6] The *Purana Guggulu* due to its *Ruksha Gunas* act as *Lekhana*, *Medohara* and *Vatakaphashamaka*.^[7] The ingredients of *Amrutadya Guggulu*, *Triphala* (*Kaphahara*, *Deepan*), *Guggulu* (*Medohara*, *Lekhana*) *Ela*, *Kutaj*, *Vidang* (*Ruksha*, *Laghu Guna*), having *Katu Vipaka*, *Ushna Veerya* shows *Shoshan*, *Kaphavata-shamak*, *Medorogahara* properties. *Udvartana* and *Bashpa Sweda* that eliminates vitiated *Dosha* through skin and help in *Vilayana* of *Meda* as it is *Apatarpana chikitsa* ^[8]. Also *Ruksha Udvartana* is *Kaphahara*, *Medohara* in properties.^[9] The ingredients of *Udvartana Triphala* (*Kaphahara*, *Deepan*), *Musta*, *Darvi*, *Devdaru* are *Tikta*, *Kashaya*, *Laghu*, *Ruksha Gunatamak* having *Sthaulyahara* property. *Bashpa Sweda* given after *Udvartana* will make *Vilayana* of *Vikruta Meda*^[10].

Hence this protocol has been designed to study the combined efficacy of *Amrutadya Guggulu* (mentioned in *Bhaishjya Ratnavali*) and *Udvartana* (mentioned in *Ashtanga sangraha*) followed by *Bashpa Sweda* in management *Sthaulya*.

OBJECTIVES

1. To evaluate combined efficacy of *Amrutadya Guggulu* and *Udvartana* followed by *Bashpa Sweda* in the management of *Sthaulya*.
2. To evaluate the combined efficacy of *Amrutadya Guggulu* and *Udvartana* followed by *Bashpa Sweda* over anthropometric parameters i.e., abdominal circumference, mid arm circumference, hip circumference, mid thigh circumference, chest circumference.

MATERIALS AND METHOD

For the present study 40 patients of either gender of age group between 25-60 years and diagnosed as *Sthaulya* selected.

Study Design: Prospective clinical study

Sample size- 40

Center of study

Ayurved Rughnalya connected to College.

Sampling technique- Simple Random sampling.

Duration of treatment- 37 days

Assessment day- On 0th, 7th, 22nd, 37th day

Follow up- 7th, 22nd, 37th

Eligibility Criteria

Diagnostic Criteria

- BMI more than 25
- *Chalaspika*, *Chalaudar*, *Chalastana*, *Swedaadhikya*, *Kshudha Adhikya*, *Pipasa Adhikya*, *Kshudra Shwas*, *Nidra Adhikya*

Objective Criteria

- BMI - BMI = Kg/m²
- Lipid profile assessed before and after treatment.
- Anthropometric Assessment/Body circumference: Assessment done before and after treatment:
 - Chest Circumference: In the normal expansion at the level of nipple.
 - Abdomen Circumference: At the level of umbilicus.
 - Hip Circumference: At the level of the highest point of distension of the buttock.
 - Mid Thigh Circumference: Mid of the thigh between pelvic and knee joints
 - Mid Arm Circumference: Mid of the arm between shoulder joint and elbow joint.

Inclusion criteria

1. Subjects who fulfill the diagnostic criteria of *Sthaulya*.
2. Age group having 25 to 60 years age –irrespective of any gender.
3. BMI- 25 to 35 kg/m²

Exclusion Criteria

1. Pregnant, lactating women, Women on oral contraceptive
2. Known case of uncontrolled diabetes with its complications, hypothyroidism, cardiovascular, renal disorders and drug induced obesity.
3. Known case of acute complications like CHD, Hepatitis.
4. Known cases of major systemic diseases such as AIDS, IHD, carcinoma, renal and cerebral diseases.
5. Subject suffering from any skin lesion over fatty area.

Table 1

S.No	Parameter	Grade 0	Grade 1	Grade 2	Grade 3	Grade 4
1	<i>Chala Spika Udara Stana</i>	Absence of <i>Chalatva</i>	Little visible movement (in above areas) after rapid movement	Little visible movement (in above areas) after moderate movement	Movement (in above areas) after mild movement	Movement (in above areas) even after changing postures
2	<i>Swedaadhikya</i>	Sweating after heavy work and fast movement or in hot weather	Profuse sweating after moderate work and movement	Sweating after little work and movement (stepping ladder etc)	Profuse sweating after little work and movement	Sweating even at rest or in cold weather
3	<i>Kshudha Adhikya</i>	As usual/routine	Slightly increased (1 meal extra with routine diet)	Moderately increased (2 meals extra with routine diet)	Markedly increased (3 meals extra with routine diet)	-
4	<i>Pipasa Adhikya</i>	Feeling of thirst (7-9 times/24 hours) & relieved by drinking water	Feeling of moderate thirst (>9-11 times/24 hours) and relieved by drinking water	Feeling of excess thirst (>11-13 times/24 hours) and not relieved by drinking water	Feeling of severe thirst (>13 times/24 hours) and not relieved by drinking water	-
5	<i>Kshudra Shwasa</i>	No dyspnoea even after heavy work	Dyspnoea after moderate work but relieved later and tolerable; Dyspnoea by climbing upstairs of 10 steps and time taken will be more than 15 seconds	Dyspnoea after little work but relieved later and tolerable; Dyspnoea by climbing upstairs of 10 steps and time taken will be more than 25 seconds	Dyspnoea after little work but relieved later and not tolerable; Dyspnoea by climbing upstairs of 10 steps and time taken will be more than 35 seconds	Dyspnoea in resting condition
6	<i>Nidra adhikya</i>	Normal & sound sleep for 6-8 hrs/24 hrs with feeling of lightness and relaxation in the body and mind	Sleep>8-9hrs/24hrs with slight heaviness in the body	Sleep >9-10hrs/24hrs with heaviness in the body associated with <i>Jrimbha</i>	Sleep>10 hrs/24hrs with heaviness in the body associated with <i>Jrimbha</i> & <i>Tandra</i>	

Table 2

Drug Used	<i>Amrutadya Guggulu</i>
Route	Oral
Doses	500mg
<i>Kaal</i>	<i>Pragbhakt</i>
<i>Anupan</i>	<i>Madhu</i>
Duration	30 days
Follow Up	7 th , 22 nd , 37 th

Table 3

Drug Used	<i>Udvartana Dravyas (Triphala, Musta, Darvi, Devdaru)</i>
Route	External application
Doses	As per requirement
<i>Kaal</i>	<i>Abhakta</i>
<i>Anupan</i>	
Duration	7 days for 30 mins
Follow Up	7 th day

Table 4: Amrutadya Guggulu, its proportion, Rasa, Guna, Virya, Vipaka

S.No	Drug Name	Latin Name	Praman	Rasa	Veerya	Vipaka	Guna	Doshghanta
1	Guduchi ^[12]	<i>Tinospora Cordifolia</i>	1 part	Tikta Kashay	Ushna	Madhura	Guru, Snigdha	Tridoshgh nghna
2	Choti Ela ^[13]	<i>Elattaria Cardamomum</i>	2 part	Katu Madhura	Sheeta	Madhura	Laghu, Ruksha	Tridoshgh nghna
3	Vidang ^[14]	<i>Embelia Ribes</i>	3 part	Katu kashay	Ushna	Katu	Laghu, Ruksha, Tishna	Kaphavata shamak
4	Kutaja ^[15]	<i>Holarrhena Antidysenterica</i>	4 part	Tiktakatu	Sheeta	Katu	Laghu, Ruksha	Kaphapitt ashamak
5	Bibhitaki ^[16]	<i>Terminalia Bellirica</i>	5 part	Kashaya	Ushna	Madhura	Laghu, Ruksha	Tridoshgh Nghna
6	Haritaki ^[17]	<i>Terminalia Chebula</i>	6 part	Panchrasatmak (Kashay pradhan)	Ushna	Madhura	Laghu, Ruksha	Tridoshgh nghna
7	Amalaki ^[18]	<i>Emblica Officinalis</i>	7 part	Panchrasatmak (Amlapradhan)	Sheeta	Madhura	Guru, Ruksha, Sheeta	Tridoshgh nghna
8	Guggulu ^[19]	<i>Commiphora Mukul</i>	8 part	Tikta Katu Kashay	Ushna	Katu	Laghu, Ruksha, Vishada, Sukshma, Sara, Sugandhi	Tridoshgh nghna

Table 5: Udvartana dravya taken in equal quantity

S.No	Drug Name	Praman	Latin name	Rasa	Veerya	Vipaka	Guna	Doshghanta
1	<i>Haritaki</i> ^[17]	1 part	<i>Terminalia Chebula</i>	Kashay Rasa Pradhan Panchrasatmak	Ushna	Madhura	Laghu, Ruksha	Tridoshghnghna
2	<i>Amalaki</i> ^[18]	1 part	<i>Emblica officinalis</i>	Amlarasa Pradhan Panchrasatmak	Sheeta	Madhura	Laghu, Ruksha	Tridoshghnghna
3	<i>Bibhitaki</i> ^[16]	1 part	<i>Terminalia Bellirica</i>	Kashay	Ushna	Madhura	Guru, Ruksha, Sheeta	Tridoshghnghna
4	<i>Daruharidra</i> ^[20]	1 part	<i>Berberis aristata</i>	Tikta Kashay	Ushna	Katu	Laghu, Ruksha	Kaphapittaghanta
5	<i>Musta</i> ^[21]	1 part	<i>Cyperus Rotundus</i>	Tikta Katu Kashay	Sheeta	Katu	Laghu, Ruksha	Pittakaphghnta
6	<i>Devdaru</i> ^[22]	1 part	<i>Cedrus Deodara</i>	Tikta	Ushna	Katu	Laghu, Snigdha	Kaphavatghnat

OBSERVATIONS AND RESULTS

The analysis of observation of clinical study is done by using the appropriate statistical data. In the present study, 40 patients of *Sthaulya* were registered and treated with *Amrutadya Guggulu, Udhvartana* followed by *Bashpa sweda* for 37 days. Each disease feature was scored according to the assessment criteria and each patient was assessed and scored with respect to his/her presenting complaints. Respective scores were subjected for statistical analysis using paired student 't' test, Wilcoxon test.

Table 6

<i>Chalaspika, Udar, Stana</i>	Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
BT	2.45	2.00	0.50	0.08	-5.671 ^b	0.000000142	62.24	Sig
AT	0.93	1.00	0.27	0.04				
<i>Swedaadhikya</i>	Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
BT	2.55	3.00	0.50	0.08	-5.806 ^b	0.000000064	76.47	Sig
AT	0.60	1.00	0.55	0.09				
<i>Kshudha adhikya</i>	Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
BT	2.45	2.00	0.50	0.08	-5.660 ^b	0.000000151	63.27	Sig
AT	0.90	1.00	0.30	0.05				

Table 7

<i>Pipasa adhikya</i>	Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
BT	2.53	3.00	0.51	0.08	-5.769 ^b	0.0000000080	76.24	Sig
AT	0.60	1.00	0.55	0.09				
<i>Kshudra Shwasa</i>	Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
BT	2.45	2.00	0.50	0.08	-5.670 ^b	0.0000000143	61.22	Sig
AT	0.95	1.00	0.22	0.03				
<i>Nidra Adhikya</i>	Mean	Median	SD	SE	Wilcoxon W	P-Value	% Effect	Result
BT	2.58	3.00	0.50	0.08	-5.710 ^b	0.0000000113	77.67	Sig
AT	0.58	1.00	0.50	0.08				

Table 8

Weight	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	82.03	40	9.78	1.55	24.254	0.000	5.52	Sig
AT	77.50	40	9.81	1.55				
BMI	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	30.19	40	2.79	0.44	12.367	0.000	5.03	Sig
AT	28.67	40	3.17	0.50				
Chest circumference	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	111.03	40	6.87	1.09	15.559	0.000	2.70	Sig
AT	108.03	40	6.74	1.07				

Table 9

Thigh Circumference (Left)	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	63.63	40	1.98	0.31	23.238	0.000	4.72	Sig
AT	60.63	40	1.50	0.24				
Arm Circumference (Right)	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	35.83	40	1.30	0.21	25.262	0.000	8.37	Sig
AT	32.83	40	1.30	0.21				
Arm Circumference (Left)	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	35.58	40	1.39	0.22	25.886	0.000	8.85	Sig
AT	32.43	40	1.24	0.20				

Table 10

Abdominal Circumference	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	117.80	40	5.75	0.91	15.742	0.000	2.23	Sig
AT	115.18	40	5.55	0.88				
Hip circumference	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	123.95	40	4.70	0.74	20.448	0.000	2.28	Sig
AT	121.13	40	4.50	0.71				
Thigh Circumference (Right)	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	64.03	40	1.27	0.20	21.053	0.000	4.53	Sig
AT	61.13	40	1.42	0.22				

Table 10

S.Cholesterol	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	194.78	40	25.86	4.09	6.190	0.000	12.03	Sig
AT	171.35	40	14.16	2.24				
S. Triglycerides	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	126.23	40	34.86	5.51	5.156	0.000	11.11	Sig
AT	112.20	40	30.68	4.85				
HDL	Mean	N	SD	SE	t-Value	P-Value	% Change	Result
BT	61.68	40	9.94	1.57	0.118	0.907	0.16	NS
AT	61.58	40	7.96	1.26				

DISCUSSION

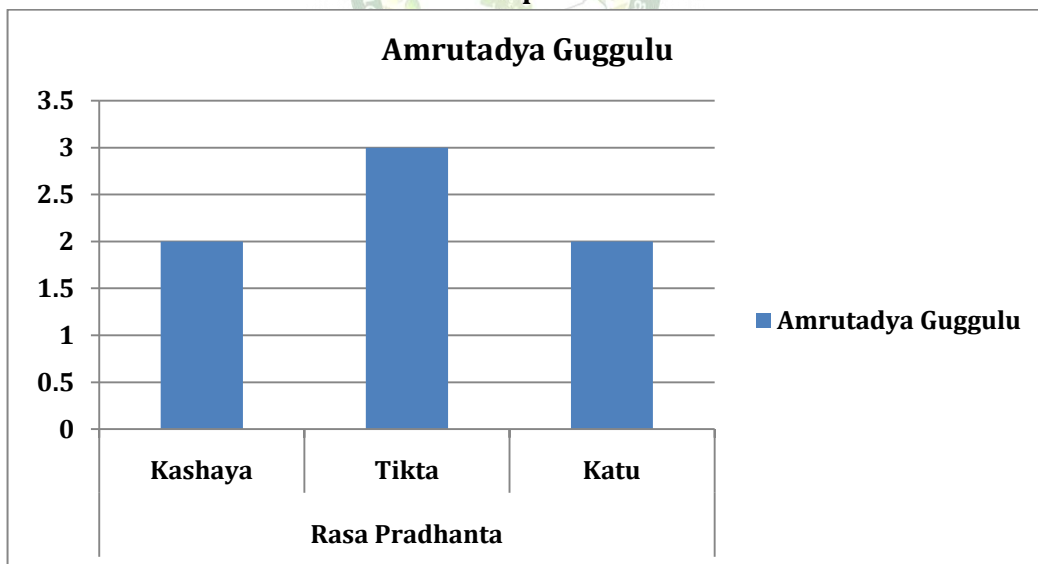
Discussion on concept of *Sthaulya* and probable mode of action drug

The disease *Sthaulya* originates due to consumption of *Kapha Vriddhikara Aahara Vihara* and *Anyā Nidana*. These factors derange *Jatharagni* causing *Ama Aanarasa* which results in *Medodhatu Agnimandya*. This condition leads to excessive growth and accumulation of *Medo Dhatu* causing the disease *Sthaulya*. In the pathology of *Sthaulya*, *Kapha* is main *Dosha* and *Meda* is main *Dushya*, while *Agnimandya* takes place at *Medodhatvagni* level. So, drug having *Kapha* and *Medanashaka* property and efficacy to correct the function of *Medodhatvagnimandya* is effective to control *Medoroga*. *Amrutadya Guggulu* possesses *Rasa- Katu* (pungent), *Tikta* (bitter), *Kashaya* (astringent) *Guna Laghu* (lightness), *Ruksha* (dryness) and *Virya- Ushana*, *Vipaka- Katu*, *Kapha-Vatashamaka* property and *Udvardana* is *Medohara*, is effective in the management of *Sthaulya*.

Table 11

	<i>Rasa Pradhanta</i>		
	<i>Kashaya</i>	<i>Tikta</i>	<i>Katu</i>
<i>Amrutadya Guggulu</i>	2	3	2

Graph 1



Guduchi- *Guduchi* having *Tikta*, *kashaya rasa*, *Ushna virya*, *Tikta Rasa* is a combination of *Vayu* and *Akasha Mahabhuta* reduces excessive *Meda Dhatu*, also do *Dhatwagnivardhana*. *Vayu* and *Akasha Mahabhuta* have qualities opposite to *Kapha*.

Choti Ela- Helps in *Dhatwagnivardhana* by *Katu rasa*, *Laghu suksham guna*. *Vidanga* having *Katu rasa*, *Ushna virya* do *Aampachan* and *Dhatwagnivardhan* which helps to reduce further *Apachita meda dhatu* formation.

Kutaja having *Tikta*, *Katu rasa*, *Katu virya*, *Laghu*, *Ruksha guna* helps in *Dhatwagnivardhan*, do *Shoshan* and *Lekhana* of excessive *Meda*.

Bibhitaki, *Haritaki*, *Amalaki-* Having *Kashaya rasa pradhanya*, *Shoshana*, *Kledanashak* and *Sleshamaprashaman* properties. So it clarifies the *Srotorodha* and scraps excess *Medodhatu* from body and dries up excessive *Vasa*.

Guggulu- Guggulu helps to remove Dushta kapha by Tikta, Katu, Kashaya rasa, Ushna virya, do Vata anuloman, Lekhana.

Amrutadya guggulu has Katu, Tikta and Kashaya Rasa in maximum proportion. Katu Rasa has Deepana (stimulating digestion); Sneha Kleda- Sweda- Abhishyandinashaka; Kapha Shamaka and Srotoshodaka properties. Katu Rasa is formed by Vayu (a synonym of Vata, one of the three bodily Doshas) and Agni Mahabhuta the five proto-elements Akasha, Vayu, Teja, Jala and Prithvi which are the basic constituents of all substances) having qualities opposite to Kapha (Prithvi and Jala), thus helps in reducing excessive Meda deposition. Tikta rasa has also got Deepana, Lekhana, Kleda-Meda-Vasa-Sweada Shoshana and Pachana (digestion) properties. Tikta Rasa shows presence of Vayu and Akasha Mahabhuta. Substances that are made up of Vayu Mahabhuta cause Rukshata (dryness) and Laghuta (lightness) in the body whereas Akasha Mahabhuta causes Laghuta in the body thereby reducing excessive Meda Dhatu. Vayu and Akasha Mahabhuta have qualities opposite to Kapha. Tikta Rasa also shows Chedana and Shodhana properties. Kashaya Rasa is mainly formed by conjugation of Vayu and Prithvi (Earth. Indicative of solidity, mass, stability, compactness) Mahabhuta. Vayu is Ruksha in quality and dries up the excessive Sneha present in the body while Prithvi by virtue of Kathina and Sthira (stability) Guna which are opposite to Drava and Sara Guna reduces the Shaithilta. Kashaya Rasa shows Shoshana, Kledanashak and Sleshamaprashaman karma. So it clarifies the Srotorodha and scraps excess Medodhatu from body and dries up excessive Vasa^[11].

Effect of Udvartana and Bashpa Sweda- Udvartana process possesses Kapha-meda vilayana property. Drugs used in Udvartana enhance this Medavilayana

Amrutadya guggulu and udvartana dravya photographs

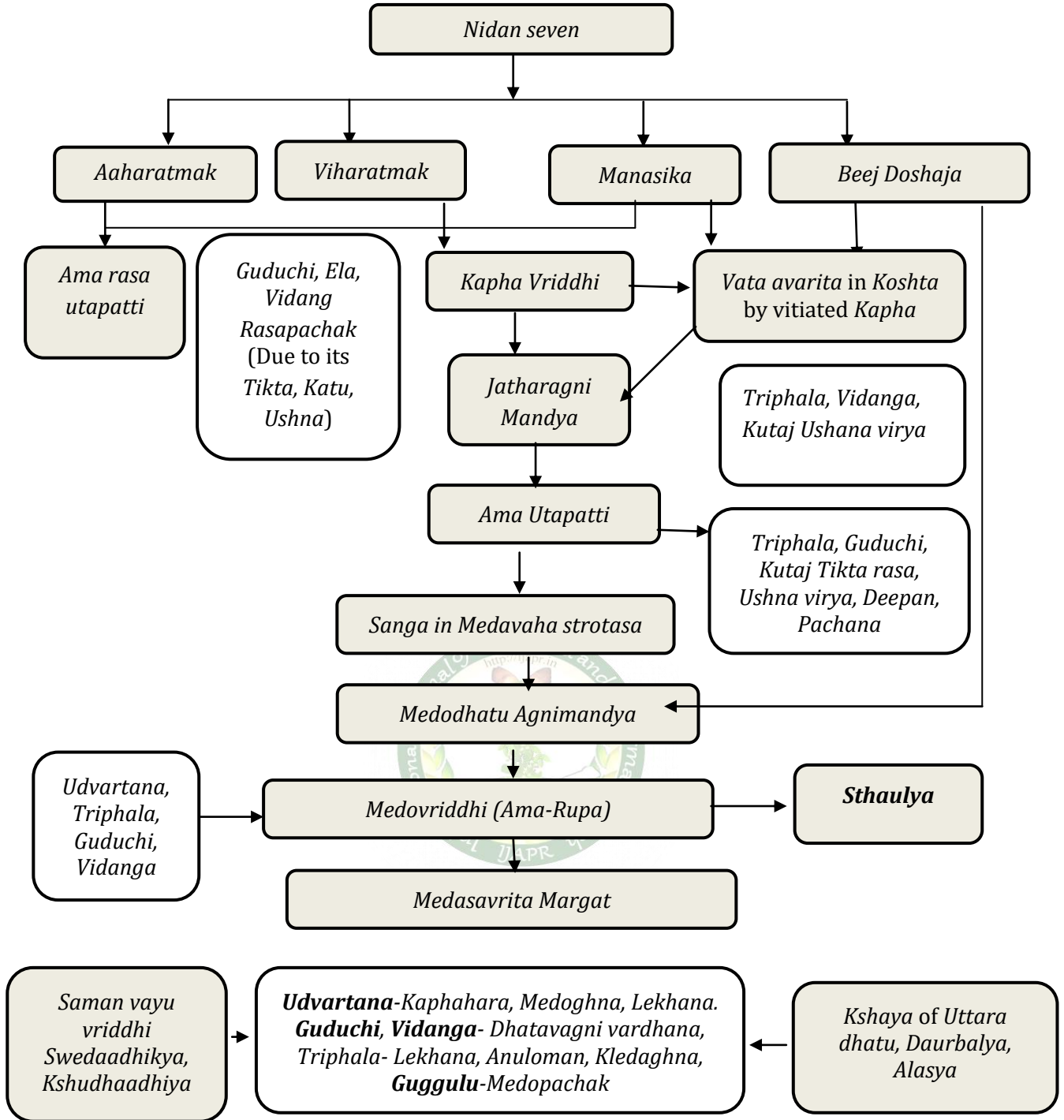


property, due to *Katutikta Rasa, Ushnavirya Laghu Ruksha, Tikshna Guna. Darvi, Devadaru, Musta, Triphala* have *Katu, Tikta, Kashaya Rasa* acts as *Kaphahara, Krumighna, Kandughna. Ushna Virya* helps in *Srotoshuddhi*, decreases *Kledatwa*. The drugs applied and rubbed over skin were digested by *Bhrajakapitta/ Twachagni* (local temperature increases) which is present in the skin, its *Ushna-Virya* enter *Rasadhatu* remove the obstruction in the *Rasa* and *Swedavaha Srotasa*, its *Gunas* and *Vipaka, Veerya* spreads all over the body. By doing *Udvartana* the increased *Twakgata Agni/Bhrajakapitta* will increase *Uttarottara Dhatwagni* functions, by increased *Medodhatwagni*, the *Dhatupaka* process increases, thus excessive accumulated *Vikruta Medo Dhatu* decreases. *Udvartana* followed by *Bashpa sweda* also causes *Kapha vilayana* and *Laghavata* in the body. When the vitiated *Medo Dhatu* gets dissolved, formation of excessive *Sweda*, diminishes thus cures, *Daurgandhyata, Swedatipravritti* (*Sweda* being a *Mala* of *Medo Dhatu* excessive sweating results into bad smell of the body), thus normalizes *Dosha Dhatu Poshana Kriya*. The *Sthaulya Roga Lakshanas*, such as *Kandu, Daurgandhyata, Swedatipravritti*, and so on, are managed, resulting in lightness in the body. The *Udvartana* process gradually reduces the *Sthaulya Roga Lakshanas*.

CONCLUSION

In Ayurveda, as equilibrium of *Doshas* is the main aim of treatment of disease, properties like *Srotoshodhana, Ama Pachana Shodhana, Vata Shamana, Lekhana, Shoshana, Kleda* as well as *Meda Vilayana* will be beneficial in *Sthaulya*. So, *Udvartana* followed by *Bashpa Sweda* and *Amrutadya Guggulu* is considered to be a safe Ayurvedic treatment of *Sthaulya* and its associated disorders mentioned in Ayurveda classics.

Flow chart no 2- Probable mode of action



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