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CONCEPTUAL STUDY ON ROLE OF LIFESTYLE MODIFICATION IN THE MANAGEMENT OF OBESITY

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ABSTRACT

Ayurveda is all about healthy living standards. According to Ayurveda health starts with daily regimens. Nowadays urbanization has led to faulty dietary habits and sedentary lifestyle which is found the main cause of obesity. It works for the cause of several other diseases and root cause of most of the metabolic disorders. No medication is proving a permanent solution of obesity without life style modification. In Ayurveda, only medicines are not prescribed in the management but 3D management is suggested- Drug, Diet and Daily exercise. Practically, it is also seen that diet modification and exercise therapy along with medicine is effective to reduce weight.

Key Words: Obesity, life style modification, *Sthaulya*.

INTRODUCTION

Acharya Charak has beautifully given the definition of healthy build person: The man who is well proportioned in flesh and well-knit in figure is called healthy build.¹

There has been a global shift in diet towards increased intake of energy-dense foods that are high in fat and sugars but low in vitamins, minerals and other micronutrients and this along with a trend towards decreased physical activity has a large impact on worldwide increase in obesity rates. The increasingly sedentary nature of many forms of work, changing modes of transportation and increasing urbanization have added to the problem. Moreover, in today's fast life none is able to follow the proper daily regimen (*Dinacharya*), seasonal regimen (*Ritucharya*) or dietetic rules

and regulations (*AaharAayatanani*) which results into *Sthaulya*. Obesity is a medical condition in which excess body fat has accumulated to the extent that it may have an adverse effect on health, leading to reduced life expectancy and increased health problems. Therefore, the WHO recognized obesity as a global epidemic disease in 1997. *Ayurvedic*literatures has also given a great importance to *Sthaulya*.

Need of Study:

Obesity is the burning problem of modern era, which works as a cause for several other diseases. Obesity is the reason for about 80% of type 2 diabetes, about 70% of cardiovascular disease and 42% of breast & colon cancers. Obesity is said to be a hazard of modern civilization and a root cause of majority of metabolic diseases where modern medical science is proving to be helpless.

Modern drugs are unsafe to use for a longer period. Surgery done for fat removal has so many temporary and long term complications like Burns, Thromboembolism, Contour irregularities, Fluid imbalance etc. ⁴Hence there is need of hour to find an effective and safe treatment of obesity.

Prevalence of Obesity: The prevalence of obesity is not related with quantum ofmoney but it depends upon faulty eating habits and life style. Obesity has reached epidemic proportion in India in the 21st century, with morbid obesity affecting 5% of the country's population. At present, Gujarat is second largest state in India regarding prevalence of obesity and heart diseases. Every 6 person out of 10 have either generalized obesity or abdominal adiposity.

DISEASE REVIEW: *CharakSamhita* has described scientific study on obesity (*Sthaulya*). Obesity has been classified under "*AshtaNindit Purusha*".⁶

Causative Factors: *AcharyaCharaka* has mentioned the causes of obesity analytically which can be classified intofour groups.

- 1.AharatmakaNidana,
- 2.ViharatmakaNidana,3.ManasNidana,4.Anya Nidana

Role of AharatmakaNidana in Obesity: Ahararasa plays a major role for increasing Medadhatu in Sthaulya. So, AcharyaSushruta has mentionedSthaulya and Karshya depends upon the quality and quantity of Ahararasa. Guru, Madhur, Shita dominant diet, excessive intake of food, and Snigdh food intake are responsible factors for obesity.

Role of *ViharatmakaNidana* in Obesity: Decreased physical activity increases *Kapha* and deposition of *Meda excessively*. *ViharatmakaNidana* like *Divaswapna* (day sleep), *Avyayam*(lack of exercise), *Avyavaya*(lack of intercourse) are also responsible factors. ¹⁰

Role of *Manas Vyapara* in Obesity: *Harshanitya* and *Achintana* are two psychological factors mentioned by *Acharya Charaka*, which are responsible for *Medavriddhi*. 11

Role of *Beejadosha: AcharyaCharaka* has mentioned that *Beejadosha* plays a major role for *Medovriddhi*. ¹²

Purvarupa (Premonitory symptoms): Purvarupa of obesity has not been described by any Ayurvedictexts. According to Charaka, the MedovahasrotodustiLakshanas which are also mentionedasPurvarupa of Prameha can be considered as Purvarupa of Sthaulya. 13 The symptoms with MedaDushti like related Atinidra, Tandra, Alasya, Visra Shariragandha, Angagaurav, Shaithilya etc. can be considered as *Purvarupa* of *Sthaulya*. ¹⁴

Rupa (Symptoms): According to *Charaka*, the inordinate increase of fat and flesh is disfigured by pendulous buttocks, abdomen and breast and that increased bulk reduces the corresponding increase in energy. So, the person has less enthusiasm in his physical activity. ¹⁵

Upadrava (Complications): Obesity is a type of disease which invites many major and minor diseases. Charaka has described 8 specific complications i.e. Ayusohrasa, Javoparodha, KricchaVyavaya, Daurbalya, Daurgandhya, Svedabadha, Kshudhatimatrata and Pipasaatiyoga. 16

CHIKITSA (TREATMENT):

General principles of management of any disorder in Ayurveda is¹⁷:

- 1) NidanParivarjan 2) Sanshaman 3) Sanshodhan
- 1. *NidanParivarjan*: This indicates that the root of *Samprapti*process, *Nidan* must be avoided for best management of the disease.
- 2. Sanshaman (Pacifying Therapy): CharakaSamhita has been given treat-

ment in following words. Administration of Guru and Apatarpan articles additional which possess Vata, Shleshma and Medonasaka properties are considered as an ideal for pacifying therapy. 18 Thecausative factors of Karshya i.e. Ruksha Annapana Prayoga, Langhana, Pramitasana, Shoka, Nidravegavinigraha, Ruksha Snana, RukshaUdavartanetc. can be practiced as line of treatment for *Sthaulya*. ¹⁹

3. Sanshodhana(Purification Therapy):
This therapy especially useful in
Atisthaulya. AcharyaSushrutahas mentioned LekhanBastiinAtisthaulya.
CharakaAcharyaalso has mentioned
RukshUshnaTikshnaBastiin Sthaulya.
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PATHYA – **APATHYA** (DO'S AND DON'TS):

Practising appropriate Pathya-Apathya along with the treatment of disease is one of the unique characteristics of Ayurvedichealth science. Keeping in view, the ancient Acharyas have listed numerous Pathya-Apathya for Sthaulya. If we take a brief insight into the pathophysiology of Sthaulya, ApatarpankarAhara¹⁸ (Low-calorie diet) and Vyayama²² (Physical activity) has more roles in the management of obesity. Therefore Pathya and Apathya should be strictly carried out by obese patients for optimal result. A special plan of diet and physical regimen for obese scheduled according to his/her life style and necessary modification done in his/her life style can be very useful in the management of obesity.

Dietary modification: Diet plays a major role in the prevalence of obesity. The effect of dietary restriction is also accepted by recently researchers. Intake of junk food and restaurant food frequently are also responsible for obesity, since they have large source of fat. So person should be advised to avoid such food. Instead of that he ad-

vised take low fat diet like *Roti*, *Shabji*, *Dal*, *Bhat* etc. diet and only taken when he/she feel hungry. Diet taken at late in night and late in noon is also not digested very well and converts into fat which is of no use. So schedule for diet should be followed. The aim of designed diet is *Apatarpana*¹⁸ (reduction of calories).

Behaviour modification: Obese persons are addicted by some behavioural pattern. This living pattern invites obesity, so that this therapy guides the patient to observe his life style, eating habit etc. and encourage changing it. Initially, in the education process, patients should learn not only what and how much should be eaten, but where, with whom, how their feelings, and their degree of hunger. New modes of eating should be suggested, including not eating between meals, eating always at table, eating only three times per day, watching the portions of food eaten, not doing other activities while eating, not drinking excess amount of water before or after meal and eating slowly with concentration. These behavioural modifications have been suggested in the Ayurvedic classics in term of AstavidhaAahara Ayatanani.²³ Particular situations that trigger eatingshould be avoided or controlled.

Exercise Therapy: Exercise is also an integral component of a successful weight management programme. Acharya Sushrutahas described Vyayama as a part of treatment of obesity.²³ Exercise in the morning is suggested for keeping metabolism higher all the day. Patient should be emphasized to start with light exercise, gradually increase it and then maintain it regularly. In addition increased physical activity may help to burn excess of fat and prevent the decrease in muscle mass often found during weight loss. Yoga and Pranayamare the best option for exercise than gym. Yoga poses work on endocrine glands,

improve blood circulation and improve body's metabolism. Deep breathing while doing Yoga reduces body fat for bringing body weight to optimal levels. Yoga practice will reduce weight gradually in a permanent manner. Trikonasana, Tadasana, Pawanmuktasana, Uttanpadasana, Bhuja-Sarpasana, Shalbhasana, gasana, Makarasanaare few Asanas which are useful to reduce weight. The BhastrikaPranayamis useful to those who suffer from obesity related to thyroid gland malfunction. Kapalbhati Pranayama is also known way to reduce fat around the abdomen and waist.24

CONCLUSION:

Obesity is a disease, caused due to faulty life style and unwholesome dietary habits. Hence it is necessary to modify our life style with wholesome dietary habits along with exercise, *Yoga* and *Pranayama*.

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