

A CRITICAL APPRAISAL ON ROLE OF *SHLESHMA-MEDOHARI KRIYA* IN THE MANAGEMENT OF *STHAULYA*

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ABSTRACT

Background: In the management of *Sthaulya*, the prime aim of treatment is *Rukshana* of *Dravata* in *Meda* and *Shleshma*. Acharya Charaka has mentioned the '*Shleshma-Medohara Kriya*' in the form of *Aushadha*, *Ahara* and *Vihara* to pacify the *Shleshma* and *Medodushti*.

Objective: To explain the fundamental concept of *Medodushti* and *Shleshma-Medohari Kriya* as per the Ayurveda doctrine. **Data Source:** Classical texts of Ayurveda, mainly *Charaka Samhita* along with its commentaries and data available on internet were referred for this review article. **Review Methods:** An extensive search of literature was done to collect scattered literary materials on concept of *Madodushti* and *Shleshma-Medohari Kriya* followed by compilation, rearrangement and critical analysis. **Discussion and Conclusion:** *Shleshma-Medohari Kriya* can be considered under *Shanshamana*

Chikitsa for *Sthaulya*. The *Shleshma-Medohari Kriya* is performed by any *Ahara Dravya*, *Aushadha Dravya* or *Vihara*, and it has qualities like *Rukshata* and *Laghuta*. By virtue of its *Ruksha* quality, the *Shleshma-Medohari Kriya* leads the body to diminished excess *Meda*, *Mamsa*, and *Shoshana* of *Drava Dhatu* or *Kleda*. *Nitya Vyayama*, *Jirne Ashana*, and *Yava-Godhuma Ahara* have all been mentioned as *Sthaulya's* preventative elements.

KEYWORDS: Medodhatu, Medodushti, *Shleshma-Medohari Kriya*, *Sthaulya*, Obesity.

INTRODUCTION

As per the Ayurveda doctrine, three *Doshas* and seven *Dhatus* are the main constituents of the body. When *Doshas* and *Dhatus* are in state of equilibrium they are responsible for health and when these are vitiated, they develop diseases in the body. Among these seven *Dhatu*,

Medodhatu is the fourth in sequence. Functions of *Medodhatu* are *Sneha*, *Sweda*, *Dridhatwa* and *Asthiposhana*. In *Ashtanga Samgraha*, *Acharya* has mentioned additional functions of *Meda* i.e., *Netra* and *Gatrasnigdhatu*.^[1] *Snehana* is the main function of *MedoDhatu* and with *Sneha* property it helps to maintain lustre of skin, hairs, eyes etc. The channels which supply nutrition to *Medodhatu* are known as *Medovaha Srotasa*. *Acharya Charaka*^[2] has mentioned *Vrikka* and *Vapavahana* as *Moola* of *Medovaha Srotasa*, *Sushruta*^[3] has mentioned *Vrikka* and *Kati* while *Vagbhata* has mentioned *Vrikka* and *Mamsa*. All three *Acharya* of *Brihatrayi* have collectively considered *Vrikka* as one of the *Moola* of *Medovaha Srotasa* but *Vapavahana*, *Kati* and *Mamsa* are considered as second *Moola* separately. *Dhatu*s, which are shelter for *Doshas* of its allied nature, depicts the concept of *Ashryashrayeebhava*.^[4] Similarly allied properties of homogenous *Dosha* or *Dhatu* may serve as a cause for nutrition or vitiation of a *Dosha* or *Dhatu*. According to this *Meda dhatu* can be considered as *Ashraya* for *Kapha*, since *Meda* plays a major role in nutrition or vitiation of *Kapha* and vice versa.

Santarpaniya Adhyaya is the third chapter of *Yojanachatushka* (23rd of the *Sutrasthana*). *Santarpaniya Adhyaya* of *Charaka Samhita* contains the causative factors, signs & symptoms and line of treatment for *Santarpananimittaja* as well as *Apatarpananimittaja Vyadhi*. Description of same subject is also found in *Ashtanga Hridayam Sutrasthana* 14th chapter named *Dwividhoupkramaniyaadhyaya*. Both *Santarpananimittaja* and *Apatarpananimittaja Vyadhi* can be easily correlated with the life style disorders of the present era. *Acharya Charaka* described *Sthaulya* as *Santarpanjanya Vyadhi* and *Atisthula Purusha* has been considered as one of the *Ashtaunindita Purusha*. *Acharya Sushruta* further said that *Madhyama Sharira* is best but *Atisthula* and *Atikrisha* always have some complaints. According to *Acharya Sushruta*, *Rasadhatu* is responsible for *Sthaulya* and *Karshya*.^[5] Qualities of *Ahara* like *Guru*, *Snigdha*, *Madhura*, *Sheeta*, *Manda* etc. increases the *Kapha* excessively and improperly formed *MedhoDhatu* which leads to further complications like *Sthaulya*.

Describing the principle of management of *Sthaulya*, *Acharya Charaka* has given emphasis on '*Guru Cha Atarpanam*' *Siddhanta*.^[6] As per this principle; patients suffering from *Sthaulya* should be treated with diet and medicines which are heavy and non-nourishing in nature. This principle of *Sthaulya Chikitsa* is so important that it has been applied at various contexts throughout the *Samhita*. As *Sthaulya* is a *Shleshma* and *Medodhatudushtijanya* disease, medicines having *Shleshma-Medohara*^[7] properties and appropriate diet and lifestyle

modifications are indicated in its management. Considering these aspects, the present work has been planned to evaluate the effect of *Shleshma-Medohari Kriya* along with diet and lifestyle modifications in the management of *Sthaulya*.

MATERIALS AND METHODS

For this review, relevant materials and information have been compiled from Ayurveda texts like Charaka Samhita, Sushruta Samhita and Ashtanga Hridaya also from the websites of World Health Organization (WHO) and Ministry of AYUSH. The obtained data was screened, reorganized, critically analyzed and rearranged in order to frame the structure of the article.

OBSERVATIONS AND DISCUSSION

Medodhatu

According to Acharya Charaka, the *Rakta Dhātu* combined with *Tej* and *Apa* and get solidified by the *Agni* and converted into *Mamsa*. This *Mamsa* again assimilated by its own *Agni*, i.e., *Mamsadhatvagni* and stirred up by the *Agni* and getting combined with the quality of *Apa* and oleaginous substances and finally gets converted into the *Medodhatu*.^[8] The resemblance of *Kapha* and *Medas* in respect of *Gunas* like *Snigdha*, *Guru*, *Drava*, *Pichhila* etc. proves that the physiological site of *Sleshma* is *Meda*.^[9] On the basis of “*Ashrayaashrayee Bhava*” of the *Doshas* and the *Dhatus* the *Kapha* is the content and the *Medas* is the container. From treatment point of view also, the *Kapha* aggravating factors are leading to *Medo* vitiation. *Dhatus*, which are shelter for *Doshas* of its allied nature, depicts the concept of *Ashryashrayeebhava*.^[10] Similarly allied properties of homogenous *Dosha* or *Dhatu* may serve as a cause for nutrition or vitiation of a *Dosha* or *Dhatu*. According to this *Meda Dhātu* can be considered as *Ashrya* for *Kapha*, since *Meda* plays a major role in nutrition or vitiation of *Kapha* and vice versa.

Etiopathology of *Medodhatudushti*

As it is discussed previously, the *Kapha* becomes excited at its own place. Further the same *Kapha* becomes aggravated; this aggravated *Kapha* acts on *Jatharagni* and produces the *Jatharagni Mandya* and *Ama*. This *Ama* and the aggravated *Kapha* unite together and spread all over the body with the help of *Vayu*. Side by side due to the *Nidanas* also, the *Medovaha Srotas* becomes vitiated i.e., *Viguna*. The aggravated *Kapha* and *Ama* are confined to the *Medo Dhātu* due to the *Sroto Vaigunya* and then vitiate the *Medodhatu*. If the aggravated *Kapha* vitiates the whole *Medodhatu* (adipose tissue) *Sanga* or *Avarodha* type of *Medovaha Srotovaigunya* occurs that further develops *Sthaulya – Medoroga – Medodhatudushti* type of

diseases. When the *Dosha* (*Kapha*) vitiates the related structure (especially the lymphatic tissue) of *Medodhatu* then *Siraja - Granthi* type of *Srotovaigunya* occurs, which develops *Gandamala* (lymphadenitis), *Apachi* (scrofula), *Arbuda* (tumors benign or lipoma), *Galagnada* (Goitre), *Alaji-Pidika* (a variety of carbuncle), *Vridhi* (elephantiasis of scrotum) and *Granthi* (Sebaceous cyst).

Sushruta has mentioned so many etiological factors regarding the *Dushti* of *Medodhatu* in *Sutrasthana*, 15th chapter, in the context of the description of *Vridhhi - Kshaya - Lakshanas* of *Doshas*, *Dhatu*s and *Malas*. In other texts no such *Nidanas* are available for *Medodushti*. We find various etiological factors for the over production and accumulation of *Medodhatu* inside the body under different headings in different ayurvedic texts, like *Sthaulya* in Charaka Samhita and Ashtanga Samgraha, *Medoroga* in *Madhava Nidana*, *Bhavaprakasha*, *Shrangadhara* etc. Sushruta and Vagbhata have mentioned the *Medodushti* as an endogenous entity being caused by the disturbance of internal intracellular metabolism and the respective *Agni* (enzyme). Charaka has mentioned the etiological factors for *Medodushti*, which are mostly exogenous and he has also particularly mentioned '*Beejadosha*' as a causative factor for over production of the *Medodhatu*. Out of the above mentioned *Nidanas*, the exogenous causes excite the endogenous causes and act for the over production and accumulation of the *Medodhatu*. After taking the *Guru*, *Madhura*, *Shita* and *Snigdha* diet, the *Jatharagni* and *Bhutagni* act upon it and produce *Annarasa*. This *Annarasa* contains all the *Upadana Dhatu*s, but the concentration of *Medo - Upadana-Dhatu* i.e., *Snehamsha* (triglycerides, fatty acid and glycerol) are more because the food articles are homologous to the *Medodhatu*. Side by side, the *Kapha* also becomes aggravated. These aggravated *Kapha* and *Annarasa* circulate all over the body. At the time of circulation, the *Dhatwagni* act upon their *Upadana - Dhatu*s and produce respective *Sthayi Dhatu*s, *Upadhatu*s and *Malas* one after another. Likewise, the *Poshaka Meddhatu* is formed after the *Mamsaagni Kriya* upon it. Now the *Medoagni* is ready to digest the *Poshaka Medodhatu*, but due to its *Mandya* condition, it cannot digest properly. Here the *Medo-agni* (enzyme) is not inferior in quality but qualitatively it is weak in respect of rich quantity of *Upadana Medodhatu* in *Annarasa* and hence it is not able to perform the *Dhatwagni Paka Kriya* properly. Again, the mentioned *Viharas* (regimen) aggravate the *Kapha*, therefore they do not stimulate the *Agni* rather sometimes they inhibit the *Agni* by the action of *Kapha*.

As discussed earlier, due to the weakness of *Medoagni* the *Apakkava Medodhatu* is formed.

This *Apakkava Medodhatu* is called as *Ama*. This *Ama* travels all over the body along with the *Rasadhatu*. Hence the concentration of *Apakkva Poshaka Medodhatu* in serum is elevated. This *Apakkva Poshaka Medodhatu* is nothing but the abnormal and excess total lipids, total phospholipids, triglycerides, fatty acids and cholesterol etc. In the blood, therefore the biochemical estimation of blood of an obese patient leads to the understanding of the *Apakkva Medhodhatu/Ama*. On the other hand, the mentioned diet and regimen affect the *Medovaha Srotas* and produce the *Sanga* and *Avarodha* types of *Srotovaigunya*. Due to this *Srotovaigunya* the circulating *Kapha* and the vitiated *Medodhatu (Ama)* unite with each other i.e., *Sammurchana* of *Dosha* and *Dushya* takes place, therefore that vitiated *Medo Dhatu* is accumulated abnormally anywhere in the body hence the thickness of the skinfolds is increased abnormally. In *Sahaja* (hereditary) type of *Medodushti* the *Medo - agni* and *Medovaha Srotas* are defective right from the birth time due to some *Beejadosha* (genetic factors). During the course of life, this defective condition may flare up at any time due to some predisposing factors and at that time the abnormal *Medo Dhatu* is formed and accumulates abnormally inside the body.

Shleshma-Medohari Kriya

In the management of *Sthaulya*, the prime aim of treatment is *Rukshana* of *Dravata* in *Meda* and *Shleshma*. In *Shadupakrama* also, '*Rukshana Upakrama*' is indicated for *Sthaulya* and *Prameha* by Acharya Chakrapani.^[11] Acharya Charaka has also described the '*Shleshma-Medohara Kriya*' *Rukshana Chikitsa* in the form of *Aushadha*, *Ahara* and *Vihara* was applied to reduce the *Kapha* and *Meda*. Under this, Acharya Charaka has incorporated various diet and lifestyle modifications (*Ahara-Vihara*) along with *Aushadha* aimed at the *Rukshana* of *Shleshma Dosha* and *Meda Dhatu*. The literal meaning of phrase '*Shleshma-Medohari Kriya*' is the *Kriya* (action) of any *Ahara Dravya*, *Aushada Dravya* or *Vihara* and mental activities (like *Atichinta*) possess the properties like *Rukshata*, *Laghuta* that are opposite to the *Kapha* and *Meda* which pacify the *Shleshma / Kapha Dosha* and *Dushta Meda Dhatu*. *Ahara Dravya* and *Aushada Dravya* acts by their properties while physical and mental activities act by their effect. In the treatment protocol for the disease *Sthaulya*, Acharya Charaka has advocated the specific treatment under the title '*Shleshma-Medohari Kriya*' along with other modalities like *Vatashamaka Annapana*, *Tikshna Basti* and *Ruksha Udvartana* etc.^[12] Use of various herbs such as *Guduchi* (*Tinospora cordifolia* Miers), *Musta* (*Cyperus rotundus* Linn), *Triphala* (*haritaki*-*Terminalia chebula* Linn, *bibhitaka* (*Terminalia belerica* Roxb) and *Amalaki* (*Embllica officinalis* Gaertn). *Takrarishta* (a fermented medicinal preparation of

buttermilk) and honey are recommended for the management of obesity. Similarly, *Bilvadi Panchamula* (five major roots) mixed with honey and *Shilajatu* along with the juice of *Agnimantha* (*Clerodendrum phlomidis* Linn.f.) are also very effective preparations for weight-loss.

A diet consisting of *Prashatika* (*Setaria italic* Beauv.), *Priyangu* (*Aglaia roxburghiana* Mig.), *Shyamaka* (*Echinochloa frumentaea* Linn.), *Yavaka* (small variety of *Hordeum vulgare* Linn), *Yava* (*Hordeum vulgare* Linn), *Jurnahva* (*Sorghum vulgare* Linn), *Kodrava* (*papalum scrobiculatum* Linn.), *Mudga* (*Phaseolus mungo* Linn.), *Kulattha* (*Dolichos biflorus* Linn.), *Chakramudgaka*, *Aadhaki* (*Cajanus cajan* Millsp.) along with *Patola* (*Trichosanthes cucumerina* Linn) and *Amalaki* (*Emblica officinalis* Gaertn) is very effective in tackling obesity and maintaining good health. Honey water and alcoholic preparations may be taken as postprandial drinks that help in reducing excessive fat and muscle tissues, while also alleviating *Shleshma Dosha*.^[13] After analysing the principles of treatment for *Sthaulya* and also the formulations given in *Ashtauninditiya Adhyaya*, one can conclude that all these treatment modalities are based on the common principle of '*Shleshma-Medohari Kriya*'.

Shleshma and *Meda* are closely related with each other due to the factors like *Ashraya-Ashrayee Sambandha* and nearly similar *Panchabhautika Sanghatana*. *Dosha* and *Dushya* are interrelated on the basis of "*Asharyashrayibhava*" i.e., having similar properties or homogeneity of a *Dhatu* & *Dosha* may serve as a cause to the nutrition and vitiation of both *Dosha* or *Dhatu*. In this context *Meda* is considered as seat for *Kapha*; since *Kapha* plays a major role in nutrition and vitiation of *Meda* and vice-versa due to similar properties of them.^[14] According to Acharya Charaka, the *Rakta Dhatu* combines with *Teja* and *Apa* and gets solidified by the *Agni* and it is converted into *Mamsa*. This *Mamsa* is again assimilated by *Medodhatvagni* and stirred up by the *Agni* and gets combined with the quality of *Apa* and oleaginous substances and finally converted into the *Medodhatu*. *Kapha* is also made up of *Prithvi* and *Jala mahabhuta* whereas, *Medo Dhatu* is made by union of *Prithvi*, *Agni* and *Jala Mahabhuta*.^[15] Therefore, both *Shleshma* and *Meda* are regarded as *Ambugunabhuyishtha*.

CONCLUSION

Sthaulya is one of the diseases that develops as a result of excessive dietary intake (*Santarpanajanya*). *Apatarpana Chikitsa* is the guiding principle of treatment for *Santarpanajanya Vyadhi*. The two varieties of *Apatarpana Chikitsa* i.e., *Shodhana* and *Shamana*, may also be distinguished. *Shleshma-Medohari Kriya* can be considered under

Shanshamana Chikitsa for *Sthaulya*. The *Shleshma-Medohari Kriya* is performed by any *Ahara Dravya*, *Aushadha Dravya* or *Vihara*, and it has qualities like *Rukshata* and *Laghuta*. By virtue of its *Ruksha* quality, the *Shleshma-Medohari Kriya* leads the body to diminished excess *Meda*, *Mamsa*, and *Shoshana* of *Drava Dhatu* or *Kleda*. *Nitya Vyayama*, *Jirne Ashana*, and *Yava-Godhuma Ahara* have all been mentioned as *Sthaulya's* preventative elements.

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हिंदी सारांश

पृष्ठभूमि: स्थौल्य चिकित्सा में, उपचार का मुख्य उद्देश्य मेद और श्लेष्मा में द्रवता का रक्षण करना है। आचार्य चरक ने श्लेष्मा और मेदोदुष्टि के शमन के लिए औषध, आहार और विहार के रूप में 'श्लेष्म-मेदोहरी क्रिया' का उल्लेख किया है। **उद्देश्य:** आयुर्वेद सिद्धांत के अनुसार मेदोदुष्टि और श्लेष्मा-मेदोहरी क्रिया की मूल अवधारणा को समझाना। **सामग्री एवं विधियाँ:** आयुर्वेद के शास्त्रीय ग्रंथों, मुख्य रूप से चरक संहिता, इसकी टिप्पणियों और इंटरनेट पर उपलब्ध डेटा को इस समीक्षा लेख के लिए संदर्भित किया गया था। **समीक्षा:** मेदोदुष्टि और श्लेष्मा-मेदोहरी क्रिया की अवधारणा पर बिखरी हुई साहित्यिक सामग्री एकत्र करने के लिए साहित्य की व्यापक खोज की गई, जिसके बाद संकलन, पुनर्व्यवस्था और आलोचनात्मक विश्लेषण किया गया। **चर्चा एवं निष्कर्ष:** श्लेष्मा-मेदोहरी क्रिया को स्थौल्य के लिए शंशमना चिकित्सा के अंतर्गत माना जा सकता है। श्लेष्मा-मेदोहरी क्रिया किसी आहार द्रव्य, औषध द्रव्य या विहार द्वारा की जाती है और इसमें रूक्षता और लघुता जैसे गुण होते हैं। अपनी रूक्ष गुणवत्ता के आधार पर, श्लेष्मा-मेदोहरी क्रिया शरीर को द्रव धातु या क्लेदा के अतिरिक्त मेदा, ममसा और शोषन को कम करने की ओर ले जाती है। नित्य व्यायाम, जीर्ण आशाना और यव-गोधुमा आहार सभी का उल्लेख स्थौल्य के निवारक तत्वों के रूप में किया गया है।