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An Observational Study of Sthaulya Inconcern with Obesity

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Article History	Abstract:
Received; 26 August2023 Revised: 05 September2023 Accepted: 15 September2023	Obesity, as considered, is the most common nutritional based disorder in all affluent societies. WHO 2010 report, considering the same, worldwide obesity seem too had doubled since 1980. 65% of the world's population lives in countries where overweight & obesity both does kill more people although being underweight. So obesity is gaining absolutely more attention at the global zone. That seems to be the reason for which many countries are absolutely making an effort to find perfect remedy for this ascending problem. The incidence of Diabetes mellitus, hypertension, angina pectoris and myocardial infarction. Etc. is with the raising source among obese individuals. Commonly, it seems that the obesity is due to excessive eating and lack of adequate exercise. Hence this topic is selected for research. Objectives: This study is conducted with the objectives to evaluate that, how the lifestyle modification does affect overweight and obesity both. Material and Methods: An attempt has been made in the present study that the 30 patients of Sthaulya have been selected between the age group 18 years to 50 years. Observations were well noted. Data collected from the patients was tabulated under following two sections, General observations like age, sex, marital status, diet and lifestyle etc. Results: Statistical analysis was thorough resulting the illustrations alike; if people do habituate with the following type of lifestyle, but obviously, they may obese themselves, in case of Mind related causative factors. There are majority of the patients alike 80% were habituated with Happiness and only 20% were carrying lack of stress. Hence, we had mentioned that if in case the people are habituated with the same i.e., happiness, but obviously they will turn up obese.
CC License CC-BY-NC-SA 4.0	<i>Conclusion:</i> Sthaulya is the main over nutritive disorder which further causes other complications if not cured properly. <i>Keywords:</i> Sthaulya, obesity, overweight, lifestyle, etc.

1. Introduction

Considering the current scenario, it is detected that objectives of the living life are transformed. People are more towards becoming acquisitive. They all are knowingly adopting the unhealthy life style.¹ Dietary habits, daily activities, earning sources, etc., seem that things are well changed. This unwanted & unhealthy changes are undoubtedly with the momentary happiness but on the contrary, its constant use results into various

pathological conditions & people suffer through the vicious chain of disorders.² These disorders are caused by two modes viz. disorders due to over nourishment and disorders due to lack of nourishment. Aamong these two; disorders due to over nourishment are selected for research work because these disorders finally results in the obesity.³

Key Factors Regarding Obesity⁴

- Since 1975, the global rate of obesity has nearly quadrupled.
- Over 1.9 billion persons aged 18 and older were overweight in 2016. Over 650 million of these people were obese.
- In 2016, 13% of people 18 and older were obese and 39% were overweight.
- The majority of people on earth reside in nations where being overweight or obese kills more people than being underweight.
- In 2020, there were 39 million under-fives who were overweight or obese.
- In 2016, there were approximately 340 million overweight or obese kids and teenagers between the ages of 5 and 19.
- Obesity may be avoided.

Facts About Overweight and Obesity⁵

- Here are some recent WHO worldwide estimates.
- Over 1.9 billion persons who were 18 years of age and older were overweight in 2016. Over 650 million of these individuals were obese.
- 39% of adults over the age of 18 in 2016 were overweight (40 % of women and 39% of males).
- In 2016, 11% of men and 15% of women in the adult population worldwide were obese.
- Between 1975 and 2016, the prevalence of obesity nearly quadrupled globally.
- A whopping 38.2 million kids under the age of five were reportedly overweight or obese in 2019. Overweight and obesity, formerly thought to be an issue only in high-income nations, are increasingly becoming more prevalent in low- and middle-income nations, especially in metropolitan areas.

Causes of Obesity and Overweight⁶

- Obesity and overweight are primarily caused by an imbalance in energy between calories ingested and calories burned. Around the world, there have been
- An increase in the consumption of fattening and sugary foods that are rich in energy, as well as an increase in physical inactivity because of the changing modes of transportation, growing urbanization, and the sedentary nature of many occupations.
- A lack of supporting policies in areas including health, agriculture, transportation, urban planning, environment, food processing, distribution, marketing, and education often leads to environmental and sociological changes that affect dietary and physical activity habits.

Burden Over Malnutrition⁷

- Malnutrition is now "double burdened" on many low- and middle-income nations.
- These nations still struggle with issues like infectious illnesses and undernourishment, but they are also seeing a sharp rise in non-communicable disease risk factors like obesity and overweight, especially in urban areas.
- In the same nation, the same neighbourhood, and the same home, under nutrition and obesity are not unusual.
- Children in low- and middle-income nations are more susceptible to malnutrition during pregnancy, as a new-born, and as a young kid. These kids are also exposed to diets that are heavy in fat, sugar, salt, and energy, but low in micronutrients. These foods are typically less expensive, but their nutritional value is also reduced.

Doctors use BMI as a technique to determine whether or not a person has the right weight for their height, sex, and age. It combines a person's height in meters squared with their weight in kilos. When a person's BMI is between 25 and 29.9, they are considered overweight. A BMI of 30 or above indicates obesity in a person.⁸ The amount and distribution of a person's fat, as well as their waist-to-hip and waist-to-height ratios, among other things, also affect how healthy their weight is. A person's chance of having a variety of additional health issues, such as metabolic syndrome, arthritis, and some forms of cancer, can rise if they do have obesity.⁹

Need of Study

Acharya Charak has clearly mentioned that, treating obesity is a challenging task, as compared to treating emaciation. In today's era, percentage of overweight & obesity is increased in all age groups. So it is primarily

considered for research work. Currently the disorders like diabetes, skin diseases, urinary problems, infertility, etc. are observed in huge percentage. They are mainly caused due to obesity. They are certainly cured after treating obesity. Untreated obesity provides the platform for so many health hazards like Hypertension, Chronic Heart Diseases, Diabetes, Mellitus, Osteoarthritis, Infertility, Impotency as well as psychological disorders like stress, anxiety, depression etc. Thus, the mortality & morbidity both is more in obese person as compared to others.

2. Materials and Methods:

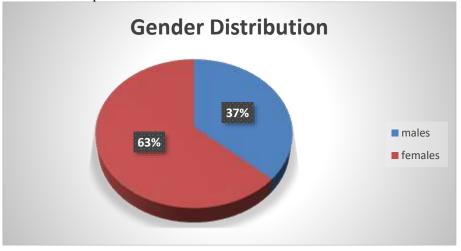
This prospective observational study was conducted. The period of study was for an year and 30 patients with obesity were enrolled for the same. Consecutive sampling method was adopted for this study. Data collection undergone for a year carrying in all 4 follow-ups recognizing with the gap of 15 days. Observations depending upon assessment criteria (mentioned below) were noted with each follow up. Inclusion criteria included Patients having BMI =25 and above and so also the Age group-18yrs to 50yrs. Patients with Obesity hampered with the severe complications like coronary heart disease and Obesity with Pregnancy were excluded. Various clinical, and also the metabolic parameters were compared in this study as Assessment Criteria with sign & symptoms of obesity according to the Brhattrayi, BMI and Body Girth Measurement including Waist circumference and Hip circumference. Sthaulya is caused due to Medo vridhi along with Kapha dosha vitiation.

Observations:

The end result of each patient assessed individually on various parameters and finally the inferences were drawn and are presented here. Data collected from the patients was tabulated under following two sections, General observations like age, sex, marital status diet and lifestyle etc.

Observations: -

a) Gender distribution: -When do we undergo through gender wise distribution of obesity in 30 samples then there are 19 female and 11 male patients found affected. We see there are majority of the patients i.e. 63% were female and 37% patients were male.



- **b)** Age wise distribution:- According to the age, we see that, there are majority of the patients i.e. 47% were with the age group 30-40 years old, and only 20% were observed with the age group 40-50 years old.
- c) Marital status: The present study recognizes that the maximum number of patients found to be married counting 87% and so also 13% seem unmarried.
- **d) Profession wise Distribution:-**Maximum 60% patients were with the work portfolio with the siting posed work, 23% were house wives, and 17 % are students.
- e) Addiction wise Distribution:-Study of addiction reveals that 53% of patients were found to be habituated with sharing cup of tea followed by 17% were sharing coffee. And moreover who are habituated to drinking tea and coffee both are about 18%. Alcohol drinkers are 12%.

f) Diet Lifestyle and Psychological Causes Wise Distribution: -

Diet	FOOD ITEMS	% Of Patients
Heavy food items	Maggii, Noodles, Burger, Pizza, Bread	76.66
Sweet food article	Bakery products, fruit Salad, Shrikhand.	63.33

Cold items	Soft Drinks, Ice cream, Pastries, Cold Cake, Juice etc.	33.33
Oily food article	Bread Pattice, Noodles, Butter, Cheese, Oily food	90
Unctuous food items	Pasta, Butter etc	23.33
Newly harvested food	New harvested crop	26.66
New beverage	-	3.33
Milk products	Curd, paneer, Milk Shake etc. Salty food with Milk etc	73.33
Meat	Aquatic & meat of animals from Marsay land etc.	60
Lifestyle		
Exercise		13.33
Coitus		23.33
Sitting posture		90
Hate to do activities		83.33
Day sleep		63.33
Excessive sleep		10
Psychological factors		
Happiness		80
Lack of stress		20

The table mentioned above and the graph, we find that there are majority of the patients (76.66%) were taking oily diet, and only 3% taking alcohol. Hence we mentioned that if people taking oily, high carbohydrate, and milky diet, they do turn up into an obese. In the case of lifestyle wise observation, we find that there are majority of the patients (90%) follows sedentary lifestyle, and moreover 83.33% do follow dislike exercise. Hence if the people are following lifestyle with their own structural type then they may turn up to an obese. As per the Psychological examination, we see that there are majority of the patients viz. 80% were habitual to pleasurable performance every time always happy, and only 20% are with thoughtlessness and lack of stress, Hence we mention that if in case people follows the habit alike pleasurable performance every time, they turn up into an obese person.

The cornerstone of therapy for obesity, according to Charaka Acharya, is "Heavy and non-nourishing food". Due to their weight, such diets would lower the force of the exacerbated power of digestion, and because they are not nutritious, they would aid in the reduction of fat.¹⁰ Ayurveda places a strong emphasis on the comprehensive care and treatment of all diseases. In the treatment of sickness, emphasis is placed on the spiritual, psychological, and physical components of a person.¹¹ The fundamental guideline for eradicating obesity would be to consume as little food as possible and burn more energy than you take in. Ayurvedic management is now considered as the preferable choice for individuals who are dealing with the treatment of obesity (Sthoulya).¹² Diets and beverages that balance Vata and Kapha and can lessen. Enema using medications that are hot, unctuous, and sharp (Tikshna, Ruksha). Utilizing unctous (Ruksha) medicines for unction intake of Bibhitaka (Terminalia belerica Roxb), Musta (Cyperus rotundus Linn), Guduchi (Tinosporia cordifolia Miers), Haritaki (Terminalia chebula Linn), and Amalaka (Emblica officinalisGaertn). Takrarishta administration using honey as a treatment.¹³ Intake of Embelia ribes Burn F.'s Vidanga, Zingiber officinale Rose's Nagara, Yavaksara (a barley preparation containing, among other things, sodium and potassium bicarbonate), black iron powder mixed with honey, Yava (Hordium vulgare Linnpowder)'s and Amalaki (Emblica officinalis Gaertn).¹⁴

The World Health Organization (WHO) closely resembles the Ayurvedic concept of good health in that it views health as a full condition of physical, mental, and social well-being rather than only the absence of illness or infirmity.¹⁵ The physical inactivity of man has increased as civilization has progressed. The rules of behavior described in the ancient Ayurvedic writings are no longer followed. Modernization, wealth, scientific advancement, and technological advancement all contribute to an increase in sedentary behavior. Humans inadvertently induced a variety of diseases by exposing themselves to all these elements, among them Sthoulya, which affects a person's physical, mental, and social health.¹⁶

The present study reveals that, maximum patients were with sitting posed portfolio in the work and house wives, while the other was with the business and student. The reason behind this might turn up for the light nature of work, advancement of new techniques, tool and moreover the common cause of obesity in housewife is because of the day time sleep. Moreover with this study, maximum patients are recorded as married. Obesity is common with the married females compared to unmarried, owing to hormonal imbalance occurring after marriage and pregnancy. Considering dietetic factors, 90% were consuming oily food and 76.6% were having heavy food items. There are 73.3% patients consuming milk products. Also in lifestyle factors, it seems that

the majority of the patients (90%) follow sitting posture, and 83.33% does hate physical activities needed. Hence, we predict, if people are with this type of lifestyle, they may become obese. In case of psychological related causative factors, there are majority of the patients counting 80%, were with the habit of Happiness and only 20% were with the lack of stress, hence we mention that if people follow in this type of habit like happiness then they turned to be an obese.

4. Conclusion:

Obese carry higher risk of adverse outcomes like hypertension, IR, metabolic syndrome, and endometrial hyperplasia. On the basis of above mentioned observational study, following conclusions has been drawn. Apart from all diet, lifestyle, and psychological factor given in Ayurved Samhita, it has been observed that Stress, use of Oral contraceptive pills, changed Dietary habits, Consuming fast food instead of meal etc. are also responsible for Sathulya now-a-days. Obesity occurs more in female than male and specially increases after marriage, light nature of work, contraceptive pills, after delivery and in menopausal period, etc. Sthaulya is the main over nutritive disorder which further causes other complications if not cured properly.

Conflict Of Interest -- Nil

Source Of Support -None

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