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Research Article

FITNESS AND HEALTH-PURVIEW OF UNDERSTANDING

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ABSTRACT

Dhatukshayjanya vatvyadhi also called *Nirupstambhita Vatavyadhi*. Nowadays occurrence of this disease is seen in young age though it is *Vardhman avastha* of life. It is usually due to not only change in *Ahara* and *Vihara* but prominently excessive exercise for fitness. Which may leads to *Dhatukshaya*. A case of 32years old male patient suffering from *Dhatukshayjanya vatvyadhi* is being discuss here. Ayurved chikitsa in terms of different ways like *Snehana, Swedana, Mustadi Yapan Basti* and various *Ayurvedic* preparations were used according to *Dosha, Vyadhi avastha* and *Rugna bala*. *Rasayana chikitsa* and *Nidan parivarjan* was strictly followed by the patient during the course of treatment. It leads to satisfactory results.

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INTRODUCTION

Ayurveda is an ancient system of medicine that originated in India over 5,000 years ago. It focuses on achieving balance in the body, mind, and spirit to promote overall health. Ayurveda identifies three doshas—Vata, Pitta, and Kapha. Treatment in Ayurveda often involves lifestyle adjustments, herbal remedies, and practices like yoga and meditation to restore harmony and prevent illness. Vitiating of *Vata* can be caused by two main reasons *Margaavranjanya* and *Dhatukshayjanya*. Due to the changing lifestyle today, conditions like Vata-related disorder e.g. *Dhatukshayjanya vatvyadhi* seen in the youth too. This can be understood through the following example.

Fitness icon (Cyclist) Anil Kadsur dies of heart attack at 45

In February, I read above news. When thinking about it, I wondered why Anil Kadsur, who was accepted as a fitness icon for cycling 100 kilometres every day for 42 months, passed away at the age of 45. It makes us question the connection between intense physical exertion and personal health. The explanation to this can be found in ancient Ayurveda, which is existing since about four thousands of years.

During the cold and spring seasons, individuals who follow a *Snigdha Aahara* and is *Balawan* should do *Ardhashaktya vyayama* (moderate exercise) to keep their bodies healthy. In other seasons, they should practice *Alpa Vyayam* (minimal exercise).

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According to Ayurveda, excessive exercise is included in *Sahasa karma*, which is comparable to a lion attacking an elephant. This behaviour can lead to significant harm to health or even death. The reference above makes it clear that our *Granthas* offer guidance on who should exercise, when and how to do it. They also explicitly cautions against excessive exercise and explains the consequences of such extremes, as seen in the principles mentioned above.

Individuals who always carry out excessive exercise, often show prominent symptoms of vitiated *Vata dosha*. Here the *Vata dosha* is vitiated due to *Dhatukshaya* due to over-exertion. We can understand how Ayurvedic treatment may be provided to such individuals, through the following case study.

Aim

To study the efficacy of Ayurvedic chikitsa in *Dhatukshayjanya Vatavruddhi*^{*1}

Objective

The objectives can be summarized as follows:

1. Evaluate the effectiveness of local therapeutic procedures (*sthanika karma*).
2. Assess the effectiveness of *Mustadi Yapan Basti*^{*2} (a specific Ayurvedic treatment).
3. Examine the effectiveness of various Ayurvedic preparations in addressing *Dhatukshayjanya Vatavruddhi* based on factors like the *vyadhi bala* and *dehabala*.

4. Explore the combined impact of local therapeutic procedures and internal Ayurvedic medicines in managing *Dhatukshayajanya Vatavruddhi*.

MATERIALS AND METHODS:

In simpler terms, it involves presenting a detailed analysis of a clinical case where the patient is experiencing *Dhatukshayajanya Vatavruddhi* and is treated using Ayurvedic principles. The treatment plan includes procedures like oleation therapy (*snehan*), sudation therapy (*swedan*), and a specific Ayurvedic treatment called *Mustadi Yapan Basti*, along with the use of oral medications (*shaman aushadha*). Additionally, the treatment plan also involves considering what the patient eats (*Pathyapathya* or proper diet), what is his lifestyle practices (*Vihara*), and includes *Rasayana Chikitsa* as part of the overall approach.

Primary Case Data

Patients Name: ABC.
Age: 32 Years.
Sex: Male.
Occupation: Business.

Present Complaints

Pindikodweshtan (Calf muscle paining)
Uru shool (Hamstring paining)
Malavarodh (Constipation)
Ashakti (Generalised weakness)
Shramajanya Shwas (Breathlessness after hard work)
Tandra (Excessive sleepiness)
Trushna (Excessive thirst)
Mukhapak (Discomfort, pain, and sores inside the mouth)
Twak Rukshata (Dryness of skin)
Pipilika Sancharavat Vedana (Sometimes tingling sensation in the fingers of the foot)

Sr. No.	Present Complaints	Duration
1	<i>Pindikodweshtan</i> (Calf muscle paining)	3 Months
2	<i>Uru shool</i> (Hamstring paining)	3 Months
3	<i>Malavarodh</i> (Constipation)	2 Months
4	<i>Ashakti</i> (Generalised weakness)	3 Months
5	<i>Shramajanya Shwas</i> (Breathlessness after hard work)	1 Month
6	<i>Tandra</i> (Excessive sleepiness)	2 Months
7	<i>Trushna</i> (Excessive thirst)	2 Months
8	<i>Mukhapak</i> (Discomfort, pain, and sores inside the mouth)	15 Days
9	<i>Twak Rukshata</i> (Dryness of skin)	1 Month
10	<i>Pipilika Sancharavat Vedana</i> (Sometimes tingling sensation in the fingers of the foot)	1 Month

History

H/o daily heavy cycling/ running and gym for last 6 months
H/o constipation
H/o taking diets which excludes oil and ghee
H/o eating smaller portions of food spread across 4-5 meals throughout the day
No H/o DM/HTN/ Bronchial asthma
No H/o any addiction
No H/o Ascites/pleural effusion/knee effusion
No H/o any bleeding disorder
No H/o fall/trauma/weight lifting
No H/o Blood transfusion
No H/o any surgical illness

The pain intensified, and the patient's weight decreased due to extensive cycling, running, gym workouts, and a diet low in oil and ghee, with smaller meals 4-5 times throughout the day.

Srotas Parikshan^{*3}:

Pranavaha Srotas: *Shramajanya Shwas* (Breathlessness after hard work)
Udakavaha Srotas: *Trushna* (Excessive thirst)
Annavaha Srotas: *Trushna* (Excessive thirst)
Rasavaha Srotas: *Daurbalya, Angamarda, Karshyatva*, Excessive sleepiness
Tandra Medovaha Srotas: *Medohani, Karshyatva, Trushna* (Excessive thirst)
Asthivaha Srotas: Pain and weakness of both lower limbs
Purishavaha Srotas: Irregular bowel habits, taking long time for defecation

Nidan Panchak

Hetu

Daily heavy cycling / running and gym, taking diets which excludes oil and ghee, eating smaller portions of food including 4-5 meals throughout the day, *Ratrau jagaranam*.

Purvarupa

Weakness, Cramps

Rupa

Pindikodweshtan (Calf muscle paining)
Uru shool (Hamstring paining)
Malavarodh (Constipation)
Ashakti (Generalised weakness)
Shramajanya Shwas (Breathlessness after hard work)
Tandra (Excessive sleepiness)
Trushna (Excessive thirst)
Mukhapak (Discomfort, pain, and sores inside the mouth)
Twak Rukshata (Dryness of skin)
Pipilika Sancharavat Vedana (Sometimes tingling sensation in the fingers of the foot)

Upashaya

Patient gets relief after slight massage over hamstring and calf muscle.

Samprapti

Hetusevan- Rukshatwa takes place in different *Srotas-vataprakop -prakupita* *vayu 'kha'* *vaigunya sthanasanshraya-dhatukshayajanyavatavruddhi*
Dosha: Mainly *Vata Dosha, Vyana* and *Apana*.
Dushya: *Rasa, Meda, Asthi*.
Upadhatu: *Sira, Kandara, Snayu*.
Mala: *Purisha*.
Srotasa: *Pranavaha, Udakavaha, Annavaha, Rasavaha, Medovaha, Asthivaha, Purishavaha*
Abhivyakti sthan: *Uru* and *Jangha*
Roganmarga: *Madhyam*
Vyadhi swabhav: *Chirakari*.

Sr. No.	Parikshana	Findings
1	<i>Nadi</i>	88/min, Regular
2	<i>Mootra</i>	<i>Prakrut</i>
3	<i>Mala</i>	Malabaddhata
4	<i>Jivha</i>	<i>Saam</i>
5	<i>Shabda</i>	<i>Kshaam</i>
6	<i>Sparsha</i>	<i>Ruksha</i>
7	<i>Drika</i>	<i>Prakrut</i>
8	<i>Aakriti</i>	<i>Madhyam</i>

Table No. 3 Investigations		
Sr. No.	Investigations	Value
1	Hb	10.2 gm/dl
2	BSL Fasting	82.3 mg/dl
3	BSL Postprandial	96.9 mg/dl
4	ESR	20 mm/hr

Treatment

The patient's treatment plan included

- *Sthanika karma* and *Mustadi Yapan basti karma*
- *Shamana Aushadhies*
- *Pathya- apathya*
- *Rasayana chikitsa*

Sthanika karma^{*4}

The patient mainly had pain in the calf and hamstrings, along with weakness in both lower limbs. To address these issues and bring relief, targeted therapies focusing on those specific areas were carried out.

- Sarvanga Snehana* with *Mahamasha taila*
- Sarvanga Nadisweda* by using *Bala, Ashvagandha Dashamula kwatha*
- Shalishashtika pindasweda* over both lower limbs.

Mustadi Yapan Basti karma

Mustadi Yapan Basti and *Bala-Narayani siddha sneha basti* were given for 10 days alternately.

Shamana Aushadhies

Oral Ayurvedic preparations were selected based on their useful properties to pacify vitiated *Doshas* and for the *Sampraptibhanga* of the disease. These *Aushadhies* were administered for the period of one month.

Table No. 4 Shaman Aushadi				
Sr. No	Shaman Aushadi	Matra	Sevan Kaal	Anupana
1	<i>Ashvagandha Ghana Vati</i>	500mg	<i>Vyanodane</i>	<i>Koshna Jal</i>
2	<i>Panchanguladi Choorna</i>	500mg	<i>Apaane</i>	<i>Koshna Jal</i>
3	<i>Cap. Ksheerabala 101Aavarti</i>	500mg	<i>Vyanodane</i>	<i>Koshna Jal</i>

Rasayaa Chikitsa^{*5}

After completing various treatments, including therapies to improve digestion and reduce hamstring and calf pain, the patient showed positive results. However, generalised weakness persisted. To address this, specific preparations were used to boost strength, provide nourishment, and promote rejuvenation. These preparations aimed to enhance the overall well-being of the patient through therapies that focus on strengthening and revitalizing.

Table No. 5 Rasayan Chikitsa				
Sr. No.	Rasayan	Matra	Sevan Kaal	Anupana
1	<i>Ajashwagandha Rasayanam</i>	10g	<i>Rasayan Kaal</i>	<i>Koshna Dugdha</i>
2	<i>Cap. Maharajaprasarini Taila</i>	500mg	<i>Vyanodane</i>	<i>Koshna Jal</i>

RESULT

The application of the mentioned Ayurvedic treatments, both externally and internally, resulted in enhanced digestive function and proper bowel movements results *Samyak Malapravartan*. The pain in the calf and hamstrings notably decreased, and there was a significant reduction in overall weakness and weakness in both lower limbs. As a result, the patient's quality of life improved.

DISCUSSION

The patient had a condition related to *Dhatukshayajanita Vatavruddhi*, which create pain in the hamstrings and calf, along with symptoms such as generalized weakness, *Tandra*(drowsiness) and *Trushna* (thirst). Ayurvedic treatment was employed to address these specific symptoms and the underlying condition.

Acharya Charaka recommends the use of *Sneha Dryavyas* or *Snehana karma* in various when there is an extreme *Kharata, Rukshata, Parushata* developed in different *Srotasas*. Therefore, *Bahya* and *Abhyantara Snehana* was chosen as a part of the treatment plan in this case. Additionally, various types of *Swedana* such as *Sarvanga Nadisweda, Shalishashtika Pindasweda* were incorporated at different times of the day. To achieve this, specific substances with properties to *Vatahara, Balya* and *Brihana* were chosen. The aim was to alleviate *Kharata, Rukshata, Parushata* of *Srotasas*, reduce pain intensity, administer sufficient internal oleation, and enhance muscle strength.

Acharya Charaka emphasized that *Basti* is the primary treatment for diseases dominated by *Vata dosha*. In this case, where there is intense pain, disruption in *Aamashaya* and *Pakvashaya, Mustadi Yapana Basti* was administered. *Musta, Ushir, Bala, Aaragwadha, Rasna, Manjishtha, Katuka, Trayaman, Punarnava, Bibhitaki, Guduchi, Laghu Panchamoola, Yashtimadhu, Indrajav, Rasanjan, Priyangu, Madhu, Ghee* and *Jangal Mamsarasa* which are the ingredients of the *Mustadi Yapana Basti* which is stated in *Charaka Siddhistan 12* along with making procedure which is excellent for pacifying *Vata*. This specific *Basti* is beneficial for conditions related to bone, joints and muscular pain *Asthisandhigata vataas* well as those affecting the *Koshtha Gata Vata*. It possesses qualities such as *Balya* (strengthening), *Brihana*(nourishing), and promoting *Pushtikara*(nourishment).

Shamana Aushadhies were selected having mainly *Anulomaniya, Deepaniya, Balya, Snehaniya* and *Sandhaniya* properties.

Ajashwagandha Rasayanam(Proprietary medicine) and *Cap. Maharajaprasarini Taila*(B.R. Vatvyadhi 26/419-429) were used to boost strength, provide nourishment, and promote rejuvenation. These preparations aimed to enhance the overall well-being of the patient through *Rasayan Chikitsa* that focus on strengthening and revitalizing.

Nidana Parivarjana was strictly followed by the patient *Ardhashakti Vyayama*, take adequate oil and *Desi ghee* in meals and avoid recurrent food intake.

CONCLUSION

Charaka have explained in detail about the different treatment modalities like *Snehana* in all possible *Bahya* and *Abhyantara* ways and various types of *Swedana Vidhis*. These were used here which gave excellent results to the patient. Along with

these, *Shamana Aushadhis* and *Rasayana Chikitsa* were administered. At the same time, *Nidana Parivarjana* was strictly followed by the patient. Patient was having marked improvement in *Agnisandhukshana* (improved digestive capacity) and bowel habits were also markedly improved as well as *Lakshana* like *Tandra* and *Trushna* were completely disappeared. The results were satisfactory and encouraging and this led to improvement in the quality of life of patient. This Ayurvedic multidimensional approach is helpful in the treatment of *Dhatukshayajanita Vatavyadhi*.

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