



HYPERLIPIDIDEMIA AND ITS TREATMENT IN AYURVEDA

Khatotra Sukhdev*

PG Scholar, Kaya Chikitsa, JIAR, Jammu (India).

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*Corresponding Author

Khatotra Sukhdev

PG Scholar, Kaya
Chikitsa, JIAR, Jammu
(India).

ABSTRACT

Hyperlipidemia is the abnormally elevated level of lipids in the blood. It is the most common form of dyslipidemia. Hyperlipidemia is of two types, they are primary and secondary. Hyperlipidemia is one of the major concerns in the modern era as it can lead to cardiovascular

diseases and stroke. Ayurveda aims at maintaining health through maintaining the equilibrium of *Doshas*, *Dhatu*s and *Malas*. Excessive intake of *Snigdha*, *Guru ahara* and reduced physical activity will in turn cause the increase in the *Kapha*, especially the *Snaihika guna* and leads to *Kapha prasara*. Due to *Ashraya ashrayibhava* of *Kapha* with that of *Rasa*, *Rasa dushti* occurs. It is important that we understand and analyse this condition and choose the treatments which will seize the *Kapha prasara* and helps to reverse it. We have a vast treasure of individual drugs, *ganas*, *yogas* and *bahya kriyas* scattered throughout our *Samhitas* that can help in bringing back the disturbed equilibrium between the *Doshas*, *Dhatu*s and *Malas*.

KEYWORDS: Dyslipidemia, Hyperlipidemia, *Kapha prasara*.

INTRODUCTION

Dyslipidemia is a disorder of Lipoproteinmetabolism, which includes overproduction or deficiency of Lipoproteins or both.^[1] The disorder can manifest as an elevation of plasma Cholesterol, Triglycerides, or both, or a Low density lipoprotein level or all three together that contributes to the development of all atherosclerosis. Hyperlipidemia is the elevated level of lipids or lipoproteins in the blood serum. Hyperlipidemia caused due to sedentary lifestyle has a high significance since Dyslipidemia, especially hypercholesterolemia, elevated LDL and decreased HDL levels are strongly associated with increased risk for Coronary Artery

Disease. As per the Ayurvedic view, when the *Avastha paka* and *Nishtapaka*³ is occurring in the body in equilibrium, the *Dhathu parinama* and *poshana* will also be proper. When there is a disruption in this rhythm due to sedentary lifestyle habits like *Avyayama*, *Adhyashana*, *Divaswapna* etc..., it can lead to *Kapha vruddhi* and *Ama* formation which can affect the *Adhya Dhathu* and cause more *Kitta* than *Sara* during the *Parinama* of *Rasa Dhatu*.^[2]

Cause of Obesity (Modern & Ayurveda)

In modern science, Many Cause of obesity is:

1. Genetic factor
2. Environmental factor:- life style behaviour like diet , physical activity
3. Social:- poverty, lower level of education
4. Cultural: - type of food way of cooking in different.
5. Drugs: -steroids, antidepressants.
6. Diseases: -hypothyroidism, cushion syndrome.

Endocrine factor of obesity: Obesity is associated with several endocrine diseases like.

1. Hypothyroidism
2. Cushing syndrome
3. Polycystic ovarian syndrome
4. Hypothalamic disorder
5. Diabetes mellitus

The *Ayurvedic* classics describe various endogenous and exogenous causes for *medhodhatuvriddhi* (excess depositions of fat tissue in body).^[3]

1. Dietary Causes: *Kaphavardhaka Ahara*
2. Life style and behaviour cause:- sedentary life style , lack of physical exercise , excessive sleep , sleeping during day especially soon after meal, lack of sexual life.
3. Psychological causes: lack of thinking , anxiety
4. Genetic:- “*beejswabhavat*”

PATHOPHYSIOLOGY: *Madhura* and *Snigha ahara*, *Adhyashana* and *Divaswapna* leads to the *Kapha vruddhi*, especially the *Snaihika guna* of *Kapha* and formation of *Amarasa* due to the excessive *Madhura* of *Anna rasa* during *Avasthapaka*.^[4]

- Due to the *Ashrayaashrayi bhava* between *Kapha* and *Rasa*⁴, *Snaihika guna* of the *Rasa dhathu* increases and there will be formation of *Ama* in the *Rasa Dhatu*.

- Due to this *Ama* the *Rasa Dhatwagni* will be unable to digest it, resulting in increased formation of *Malarupi Kapha*.
- This increased *Snaihika guna* of *Rasa Dhathu* and *Malarupi Kapha* reaches the *Rasavaha Srothas*, this condition can be considered as hyperlipidemia. If not treated properly and timely will further lead to *Dhamani Prathichaya*. In due course it can affect other *Dhatus* and manifest as *Hridroga*, *Vatavyadhi*, *Sthoulya*, *Prameha*, etc. Even in *Krusha* persons hyperlipidemia occurs. This is due to the *Vata vruddhi* occurring because of *Nidanas* like *Chinta*, *Krodha*, *Udvega* etc..., *Here Vata vruddhi* occurs due to these *Nidanas* which will lead to *Vishamagni*, which in turn leads to the *Aprakrutha Rasa Utpathi* and *Malarupi Kaphavriddhi* and the pathology will carry on further to hyperlipidemia.

TREATMENT: *Nidana parivarjana* should be advised as the first step towards the correction of this condition. It is very important since without *Nidana parivarjana* there will be further exacerbation of the condition. Avoiding of *Adhyashana*, *Vishamashana*, *Ajeernashana* and *Divaswapna* should be followed. Keeping the mind calm and collected, by avoiding *Chintha*, *Shoka*, *Krodha* since it will lead to *Agnivaishamyia* is also important.^[5]

In hyperlipidemia, line of treatment should be

- Langhana*
- Langhana Pachana*
- Doshavasechana*

Langhana: *Langhana* should be done when there is *Alpa Doshavastha*. *Langhana* will stimulate the *Agni* and *Vata*, which will dry up the *Alpa Dosha* like the wind and sun drying up the little water. So in hyperlipidemia caused due to sedentary life style and if there is only borderline rise in the lipid levels, different types of *Langhana* will be beneficial like *Upavasa*, *Vyayama* etc..., *Langhana-Pachana:* It is beneficial when the vitiation of the *Dosha* is moderate. In the condition of hyperlipidemia where there is a moderate elevation of lipid levels *Langhana* can be done as previously mentioned and along with that *Pachana* can be done with formulations like *Chitrakadi vati*, *Trikatu churna*, *Panchakola churna*, *Vaishvanaram churna* etc..., which will help in the *Agni Deepana* also which is necessary. If the moderate increase of lipid levels have been persisting for a long duration then it is better to follow the *Langhana- Pachana* with *Guggulu* preparations since there is a chance that the *Dhamani Prathichaya* would have started occurring and because of its property to clean the *Srothas* it will prevent further complications.^[6,7]

In *Krusha* persons who are affected by hyperlipidemia, *Langhana* is not necessary but *Pachana* and *Deepana* should be carried out properly and administration of *Ghrithas* like *Panchamooladhya Ghritha*, *Doshamooladhya Ghritha* etc.,. which are *Vataghna* and will not increase *Kapha* and *Medhus* are beneficial. *Doshavasechana*: *Doshavasechana* is beneficial when there is abundance of *Doshas* involved. If the lipid levels come under the high risk level, *Doshavasechana* should be done with *Vamana*, *Virechana* or *Basti*. After the *Langhana*, *Pachana* and *Doshavasechana Rasayana* can be given, especially in cases of that of prolonged duration and high risk level of hyperlipidemia to avoid the complications. *Shilajathu Rasayana* and the *Rasayanas* told in the *Abhayamalaki Rasayana pada* can be given as per the condition of the patient. *Pathya* is an important component in the treatment of Hyperlipidemia. For those whom hyperlipidemia is due to the sedentary causes the *Ahara* which are *Laghu*, *Apatarpaka* and *Vyamama* should be followed. For *Krusha* persons *Vataghna Annapana* which does not increase *Kapha* and *Medha* should be followed. For both the groups intake of *Takra* regularly will be beneficial.

DISCUSSION

After studying the above comparison of the facts, it seems that hyperlipidaemia can be considered as Medoroga. No separate disease in the name of Medoroga is described in CharakaSamhita, but Atisthaulya is mentioned under Ashtauninditiya, which is actually Medoroga. It is in Madhava Nidana that the term Medoroga is used while describing its etiology. Abnormal accumulation of MedaDhatu in body is known as Medodushti. Medodushti includes several numbers of other Medovikaras, which are collectively known as Medoroga. Acharya Charaka has described Medoroga under the title of Atisthaulya. According to Acharya Charaka Atisthaulya is the Dushti of Medovah Srotas and can be understood as synonym of Medoroga. In nutshell, it can be stated that abnormal and unequal distribution/collection of Medo Dhatu in body seems to be known as Medoroga. This idea is supported by Madhukoshakara and Bhavamishra by describing separate chapter of Medoroga. Madhavakara has described the disease under heading of Medoroga in 34th chapter and has used Medasvina , Atisthula and sthula words as synonyms. Madhavakara has mentioned the Nidana, Rupa and gives clear picture of Medoroga – borrowing all the thoughts of previous authors.^[8,9,10]

CONCLUSION

Obesity is the one and only disease, which is gaining more and more attention of scientists at global level. Obesity is a disease of middle & upper middle class due to their ignorance towards health in reference to faulty diet pattern and sedentary life-style .Ayurvedic classics give sufficient focus on obesity (*Sthaulya*). *Sthaulya* is a disorder of *Santarpananidana* with the involvement of mainly *medhodathu* and *kapha -pardhanatridosha* .Excessive indulgence in oily and fatty food, sendentary life style, mansika factors along with genetic pre-disposition play a major role in aetiogenesis of *Sthaulya*. *Medo* as *dushya* , *Kapha* & *Avrutta Vataas dosha* and *Medo-dhatvagnimandhya* are main responsible factors in pathogenesis of *Sthaulya*. So that type of drug/therapy should be recommended which pacify these factors and it can be accomplished by combination of *Tiktarasa* (bitter) *pradhana*. There is no specific treatment for obesity, only diet & exercise can play important part. The main line of treatment of *Sthaulya*.is *Nidhan - parivarjana*& *Apatarpana*.. *Apatarpana* consists of dietary regimens, treatment modalities which decrease the fat from the Body.^[11,12]

- It is important to understand and control the pathophysiology of hyperlipidaemia due to its relation with many arterial diseases like Coronary Artery Disease.
- 1% reduction in cholesterol causes a 2% to 3% reduction in Chronic Heart Disease risk⁶.
- *Nidhana parivarjana* and the correct following of *Ritucharya* and *Dinacharya* will help towards maintaining the *Agni* and the equilibrium between *Doshas Dhathus* and *Malas* and thereby preventing the occurrence of the pathology. When once the pathology is started it is important to identify and understand the condition properly through Ayurvedic principles.
- Timely intervention will prevent progression into further stages like *Dhamani Prathichaya* and further diseases like *Hridroga*, *Vatavyadhi*, *Sthoulya*, *Prameha* etc...^[13,14]»

REFERENCES

1. Kaviraj Ambikadutta Shastri, *SusrutaSamhita*, *Ayurveda Tatva Sandipika*, hindi commentary, Chaukhamba Sanskrit Sansthan, Varanasi; reprinted., 2011; 107.
2. Dr. Nirmal Saxena, *Vangasena's Chikitsa Sara Sangraha*, 1st edition, Chaukhamba Sanskrit Series Office, Varanasi, 2004; 805.
3. Vaidya Harishchandra Kuswaha, *Shri Chakkarpani commentary on Charak Samhita*, *Ayurvedipika ki Ayushi vistrit hindi vyakhya*, Chaukhamba Orientalia, Varanasi; reprinted., 2011; sutrasthana 20/19.
4. *Ayurvedacharya Kaviraj Shri Ambikaduttshastri*, *Bhaisajya Ratnavali*, *Vidyotini hindi vyakhaya*, Chawkhamba Parkashan, Varanasi; reprinted., 2010; 50.

5. Shri Krishan Gopal, Ras Tantra Saar va Sidhprayogsangrah, Krishangopal Ayurveda Bhavan, Rajasthan; part-2, 13th edition, 2011; 190.
6. Vaidya Harishchandra Kuswaha, Shri Chakkarpanicommentary on Charak Samhita, Ayurvedipika ki Ayushi vistrit hindi vyakhya, Chaukhamba Orientalia, Varanasi; reprinted., 2011; 60.
7. Kaviraja Ambikadutta Shastri- Susrutasamhita of Maharsi –susruta Ayurveda, Tattva-Sandinpika Hindi Commentary, Pulishedby-Chaukhambha Sanskrit Sansthan Varanasi 2010; 214, Su. chikitsa.
8. Prof. P.V. Sharma Dravyaguna Vigyana Vol-2 Published By– Chaukhambha Bharati Academy, Varanasi., 2006; 196-197.
9. Prof. P. V. Sharma Dravyaguna Vigyana Vol-2, Published By–Chaukhambha Bharati Academy, Varanasi., 2006; 112-113.
10. Prof. P. V. Sharma Dravyaguna Vigyana Vol-2, Published By –Chaukhambha Bharati Academy, Varanasi., 2006; 681.
11. Prof. P. V. Sharma Dravyaguna Vigyana Vol-2, Published By –Chaukhambha Bharati Academy, Varanasi., 2006; 467-468.
12. Dr. Indradeva Tripathi Chakradatta of Sri Chakrapanidatta, Vaidayaprabha Hindi commentary, Published By –Chaukhambha Sanskrit Sansthan, Varanasi., 2002; 222.
13. Prof. Siddhi Nandan Mishra Bhaisajya Ratnavali of Kaviraj Govind das Sen, Siddhiprada Hindi Commentary, Published By- ChaukhambaSurbharatiPrakashan Varanasi., 2011; 728.
14. Kaviraja Ambikadutta Shastri- Susrutasamhita of Maharsi –susruta Ayurveda, Tattva-Sandinpika Hindi Commentary, Pulishedby-Chaukhambha Sanskrit Sansthan Varanasi., 2010; 214. Su.chikitsa.