

World Journal of Pharmaceutical and Life Sciences WJPLS

www.wjpls.org



A SCIENTIFIC REVIEW OF ASTHANINDITA PURUSHA

Namrata Shrivastav*

Associate Professor, Dept. of Samhita Simdhant, L.N. Ayurveda College & Hospital Bhopal.

Corresponding Author: Namrata Shrivastav

Associate Professor, Dept. of Samhita Simdhant, L.N. Ayurveda College & Hospital Bhopal.

Article Received on 23/04/2023

Article Revised on 13/05/2023

Article Accepted on 03/06/2023

ABSTRACT

Ayurveda is considered as one of the oldest of the traditional systems of medicine (TSMs) accepted worldwide. The ancient wisdom in this traditional system of medicine is still not exhaustively explored. The junction of the rich knowledge from different traditional systems of medicine can lead to new avenues in herbal drug discovery process. In ayurvedic text, 'Charakacharya' has described eight 'Nindya prakrities' (undesirable constitution) according to the body constitution. These eight despised persons are Atidirgha (very tall), Atihriswa (very short stature), Atigaura (very fair colored or complexion), Atikrishna (very black colored or complexion), Atiloma (with excessive body hairs), Aloma (absence of body hairs), Atikrisha (excessive thin or emaciated persons) and Obese (obese or overweight). Astaninditha purusha refers to those people who are generally considered as socially unacceptable because of their peculiar characteristics.^[1] However, it is more than a social stigma due various systemic disorders that may crop up and may be a life-threatening condition in many situations.

KEYWORDS: Sthaolya, Astanindit purusha, Krisha, Atiloma, Aloma, Atihswa, Atidaidhya, Atikrishna, Atigaurya.

INTRODUCTION

Ayurved, the science of life deals with every aspect of life. Ayurved, the science of life deals with every aspect of life. Ayurveda has two main objective i.e. protection and promotion of health and secondly cure from the diseases. To fulfill these main objectives, various Samhita texts were composed. These Samhita texts deal with Anatomy, Physiology, diagnosis and treatment of the various diseases. In Charak Samhita, Acharya Charak has mentioned the symptoms of Prashasta purusha (Ideal person). Eight types of physical abnormalities were explained by Ayurveda. People with these malformations are considered to be difficult to treat, and they are prone to a wide range of diseases.

- **1. Ati-hrasva** (Dwarfism/ shortstatured/ Excessive small person).
- **2. Ati-dirgha** (Excessive tall person Gigantism and Acromegaly),
- **3. Ati-loma** (Hairy body)
- 4. A-Loma (Hairless body)
- **5. Ati-krishna**(Tanned body)
- **6. Ati- Gaur** (Albine body)
- 7. Ati-sthula (Obesity)
- 8. Ati- krusha (Emaciated body)

Among above said undesirable persons, Atisthula and Atikrisha purusha are more commonly found. Ayurveda

further stated that Atisthula and Atikrisha person are more despised among all eight despised persons. [4] These two people are more favorable to get any kind of diseases easily. Therefore they are described in details. According to Acharya Charak, people who are Atisthula are more liable to be at a health risk than Atikrisha. [5]

Atideergha and Atihrasva

Adhikaanga-heenanga-vikritangapraja occurs due to defects of Beeja (sperm and ovum), Atma karma (deeds associated with soul), Ashaya (Uterus), Kala (period of conception) and Maturaaharavihara dosha (defects in mother's food and activities). Atideergha and Atihrasva can be considered as Vikritanga. [6] (Atideerghagrahanartham.^[7] khubjadininditha Virupapraja considered as a Shukrapradoshaja Vyadhi. Short stature and tall stature have common normal variants like familial short and tall stature, constitutional delay or early puberty and growth and idiopathic tall and short stature. Pathological tall stature includes excessive growth hormone (Gigantism, Acromegaly), genetic disorders like Klinefelter's syndrome, Marfan's syndrome and precocious puberty. Pathological short stature includes: growth hormone deficiency (Dwarfism), genetic disorders like Turner's syndrome.

www.wjpls.org | Vol 9, Issue 7, 2023. | ISO 9001:2015 Certified Journal | 87

Ati-loma

Ati-loma as the name suggests, a person suffering from this disorder has more body hairs(loma) on body than normal this excess can be in many forms such as thicker than normal or presence of more than one loma from single lomakoopa. The normal amount of loma that is assumed by acharyas are three and a half crores of loma, more than this is called as atiloma. the complications faced by a person suffering from this disorder are as follows Since loma koop are the minute openings on skin that becomes the passage for the mala "sweda" or sweat so that it can escape the body, now in case of ati-loma the sweat that releases cannot dry off properly and becomes sticky and thus can lead to skn disorders or bad smell etc. If more than one loma comes from a lomakoop then in such a condition, the lomakoop will be blocked and being blocked it will not be able to perform its normal function of letting out sweat from body properly as in a way it will be blocked. In dincharya, there is mention of doing abhyanga on a daily basis, in the condition of ati-loma, if the person does abhyanga on a daily basis then there are chances that from pressurized movements the heir may break off that can lead to formation of vrana there. These become the reason of presence of this disease in the lst of ashta-nindita. Modern perspective- Ati-loma in modern sciences can be correlated with the disorder named as hyper-trichosis. this disease also has a name of werewolf syndrome; it is a condition where excessive of hair can be found on whole body or a part of body. Tis can effect men and women equally but is an extremely rare condition. The causes of this disorder is not well known, it is congenital and hormonal issue. Treatment for this disorder is not available in modern sciences as well, temporary treatments like waxing, shaving etc are some options only.

A-loma

A-loma as the name suggests, this is a condition where body is devoid of hair follicles throughout the body, in this condition the person suffering has to face many complications as Due to less amount of loma on body there is low amount of loma-koopa on body as well, which results in blockages/presence of low amount of outlets for sweda, thus creating a complication as this means that due to reduced amount of loma-koopa the sweda and thus the mala-bhaga that excretes out of body through this pathway is not able to excrete properly that can lead to various complication in body. Other than that, these loma are responsible for perception of temperature on body or any other sudden touch, thus reducing the sensing ability of sparshendriya as it is also a part of twacha (aashraya of sparshendriya). These hairs are also responsible for preventing body from various foreign microscopic organisms or pollutants thus plays a role of protecting the body but its absence marks the absence of that protection that can lead to various infections. These factors and the fact that this disorder is non-treatable becomes the reason of presence of this disorder in this list of ashtanindita.

Atikrishna and Atigaura

Susruta Acharya describes the formation of Garbha varna from the combination of different Panchamahabhuta.

- Tejo Mahabhuta + Pritvi Mahabhuta = Krishna varna
- Tejo Mahabhuta + Ap Mahabhuta = Gaura varna
- TejoMahabhuta + Pritvi Mahabhuta + Akasha Mahabhuta = Krishna Shyaya
- Tejo Mahabhuta + Jala Mahabhuta + Akasha Mahabhuta = Gaura shyava

So, any change in this permutation and combination of Mahabhuta can cause changes in garbhavarna which shows the formation of congenital, inherited, hormonal pigmentation disorders. Hyper-pigmentation and Hypopigmentation occur due to imbalance in the production of melanin by melanocytes. Overactive melanocytes and underactive melanocytes result in excessive dark or light skin which makes cosmetic disfiguration leading to psychological upset. Hyper-pigmentation seen in Addison's disease, Cushing's disease, Hyperthyroidism and hypo pigmentation seen in Vitiligo, Albinism can be considered as nindita, as it causes great mental stress in patients of ace society. In Charaka Samhita Indrivasthana Prakrita and Vaikrita varna is explained. Krishna varna and Gaura varna (avadhata) are prakrita varna but svava and shukla varna are vaikrita varna. This varna bheda in purusha is considered as arista which can be compared with the hyper pigmentation seen in Chronic Kidney, Liver diseases and even presence of lifethreatening Melanomas.

Obesity (Atisthoulya)

Obesity is very well said in Ayurveda by the name of sthoulya and atisthoulya. Acharya Charaka, who may be called as the Indian Hippocratus described obesity as a disease of fat tissues (medoroga) leading to hugeness (sthoulyam). It has been classified under "Eight despicable personalities" (ashta nindita purusha) and defined as excessive and abnormal increase of meda dhatu along with mamsa dhatu resulting in the pendulous appearance of buttocks, belly, and breasts. Hence the excess weight is both due to retention of water and storage of fatty tissue. Obesity is a state of excess adipose tissue mass. Ayurveda has described its causative factors of obesity (sthoulya) mainly to be exogenous and hereditary type (bijdosha). Exogenous causes of fat (meda) potentiating diet and regimens, whereas dosha, dhatu, mala, strotas etc come under the endogenous factors. In the pathogenesis of obesity (sthoulya), all the three doshas are vitiated, especially kledak kapha, pachaka pitta, samana and vyana vayu are the doshika factors responsible for the etiopathogenesis of obesity (samprapti of sthoulya). Aama annarasa travelling in the body channels gets obstructed in the medovaha srotas owing to the khavaigunya due to bijaswabhava or sharir shaithilya and combines with kapha and meda, decreasing the medo dhatwagni which in turn gives rise to augmention of meda. Vitiated vyana vayu propels this augmented meda dhatu to its sites viz. abdomen (udara), hip region (sphik), breast (stana), neck

(gala) et.al. resulting in sthoulya and atisthoulya, chala sphika, chala udara, chala stana and atimedamansa vruddhi are very obvious in all the patients of sthoulya. Manifestations of these rupas are associated with either excessive accumulation of meda dhatus or obstruction in various channels (strotas) by medojanya margavrodha or the aama or vitiation of vata and shleshma dosha, so excessive accumulation of medo dhatu produces various signs and symptoms in sthoulya patient. High intensity and severity of sthoulya due to increased apptite(ati kshudha) and increased thirst (ati pipasa) manifestations of severe complications and even death due to its ignorance have been mentioned with example of davanala by Chakra. Obesity occurs when a person consumes more calories from food than burns. Obesity is caused by various series of factors like genetic factors carried by genes such as Leptin, LepR, POMC (propiomelanocortin), MC4R (melanocortin-4 receptor) and PC-1 and environmental factors such as lifestyle, behaviour, diet, physical activity, social factors like poverty and lower level of education. Diseases like hypothyroid, cushing's syndrome, polycystic ovarian syndrome and drugs like steroids, anti depressants can make a person obese. Pathophysiology of obesity seems simple, a chronic excess of nutrient intake relative to the level of energy expenditure. Obesity has also been defined as body content greater than 25% of total body weight for male, greater than 30% for female. Obesity is defined as BMI greater than 30kg/m2

The international classification of overweight and obesity according to BMI as per WHO.

Classification BMI(kg/m2) Normal Range 18.50-24.99 Over weight >25.00 Pre-obese 25.00-29.99

Obese >30.00 Obese class 1 30.00-34.99

Obese class 2 35.00-39.99 Obese class 3 >40.00

Etiology of obesity according to modern science

A number of factors are responsible for obesity as

- 1. Sedentary lifestyle-: Physical inactivity is a major element in the development of obesity. Physical inactivity may be due to enforced job related, internet addiction or due to aging. Prolonged sitting in comfortable seat which is very common in businessman, government job holder and most of the white collar jobs. That's why role of obesity is increasing day by day.
- 2. Stress or psychological cause-: Emotional disturbances caused by stress. Stress may be induced by a number of routine disturbances as out burst activities like fighting, arguing, family events, marriages, deaths, travelling long distances et.al. These factors are directly or indirectly responsible for weight gain.
- 3. Dietary intake-: The increased prevalence of obesity in recent decades may be more due to the excess intake of food than the physiological needs, rapid eating habit and increased consumption of high fat foods or sweetened drinks. In Ayurveda excess food intake in a single meal

(ati sampurna) and frequent food intake before digestion of previous meal (adhyashna) are recognized as the basic factors for the development of obesity (sthoulya roga).

- 4. Age, sex and Race-: However, obesity may occur at any stage of life, but the persons of middle age group are more prone to be obese. Adolescent and middle aged female are more sufferer than that of male due to hormonal changes in their body during puberty, menstrual stage, pregnancy, menopausal phase and hormonal deficiency of thyroid, pituitary and ovarian glands.
- 5. Socioeconomic status-: Usually it is seen that the person of higher socioeconomic status prefers more luxurious and sedentary lifestyle. Therefore, obesity is much more frequent among them.
- 6. Drug induced-: Long term use of some of the modern medicines induces obesity, i.e. antiepileptic corticoids, oral contraceptive pills, antidepressants, hypoglycemic antihypertensive drugs etc. Prevention of obesity according to Ayurveda In Ayurveda, it has been described systematically concerning the symptoms and complications of obesity.

Following preventions should be undertaken

- ♣An obese person should be well aware regarding the cause of obesity and the person
- ♣ should be careful about to reduce the fat instead of losing of weight Although an obese person has an extreme desire for hurried loss of weight, but this
- ♣ tendency should be discouraged. If weight loss is rapid, not only the fat metabolism and electrolyte disturbances occur and the muscles and liver are also affected. One should keep himself away from the sedentary and lethargic lifestyle such as more
- * watching television, continuous sitting in a single posture, eating at late nights etc. Excess intake of high caloric and fatty diet should be avoided. A diet containing moderate
- A amounts of salads, fresh fruits and vegetables, cereals and other fibrous food should be consumed. The bulk of vegetables and fruits containing few calories but high cellulose and fibers help in filling of the stomach and reliving from hunger.

Management of obesity according to Ayurveda According to Charak Acharya, the principle of treatment for obese is "Heavy and non nourishing diet" (guru apatarpana) Because by virtue of their heaviness such diets would minimize the force of the aggravated power of digestion and due to their non nourishing nature they would help to reduce fat. Ayurveda emphasizes the holistic care and treatment in any disease. Spiritual, psychological and physical, these all three aspects are given importance in the management of disease. Minimal intake of food and exceed expenditure of energy would be the basic rule to get rid of obesity.

Now a day Ayurvedic management is recognized as the better option for those whom are suffering from the remedy of obesity (sthoulya).

- Diets and drinks that alleviate vata and kapha and which can reduce fat.
- ♣ Enema with drugs that are sharp (tikshna), ununctous (ruksha), and hot.
- ♣ Unction with ununctous (ruksha) drugs.
- ♣]Intake of guduchi (tinosporia cordifolia Miers), musta (cyperus rotundus Linn), haritaki
- ♣ (terminalia chebula Linn), bibhitaka (terminalia belerica Roxb) and amalaka (emblica officinalis Gaertn). Administration of takrarishta.
- ♣Administration of honey.
- ♣ Intake of vidanga (embella ribes Burm F.), nagara (zingiber officinale Rose.), yavaksara
- ♣ A preparation of barley containing among others sodium and potassium bicarbonate), powder of black iron along with honey and powder of yava (Hordium vulgare Linn.) and amalaki (Emblica officinalis Gaertn)

Atikrishta

Atikrisha (Excessive thin person or emaciated persons) In Charak Samhita, Karshya is included under Nanatmaja Vatavyadhi. Karshya is the condition in which a person suffers from severe nutritional deficiency, due to which the body of that person becomes extremely thin and there is almost no observable flesh all over the body. Krushata is well explained & defined in Ayurveda by our Acharyas in Ashtonindatiya Purusha chapter but they have also mentioned a separate disease which is closely similar to the Krushata that is known as Rajyakshma (Tuberculosis).

Causes of Krushata According to Acharya Charak

- Excessive consumption of Aahara which aggravates Vata dosha i.e. Katu (pungent), Sheet (cold), Ruksha (dry) and Kashaya (astringent)
- Excessive intake of kaphahara dravyas (which reduces Kapha dosha)
- Intake of Guru (heavy to digest) food when there is Mandagni (low digestion power)
- Continues Upavas (Fasting) for long period
- Pramitashana (Intake of little amount of diet)
- Kriyatiyoga (Excessive subjection to evacuative therapy)
- The person who indulge too much in study and keeping awake at nights
- The person who indulge too much in Shoka (grief), worry and fear,
- Vegdharan (Suppression of natural urges, like Nidra (sleep), Trishna (thirst) and Shudha (hunger) etc.
- Ati vyayama (Excessive exercise) and Ati vyavaya (Excessive sexual intercourse)
- Habitual indulgence in dry massage and bath
- Ruksha udvartan (Excess non unctuous anointing to the persons)
- Prakruti (Body constitution)
- Due to Beej dosha (Heredity)
- Jarajanya (Due to old age) Symptoms of Krushata

Principle of Treatment of Krushata

For Atikrusha person, foods which is light (easy to digest) and nutritious (which make the body stout) are desirable. Apatarpana Chikitsa (emaciation therapy) is the line of treatment adopted in this type which includes Langhana (fasting therapy), Rukshana (drying therapy) and Sweden (fomentation therapy) Importance of sleep in the management of Krushata According to Acharya Charak, proper sleep brings happiness, stoutness, Strength, virility. It increases knowledge and life of a person. Person indulging in sound sleep on a comfortable bed for a long duration grows like a pig. Treatment of Krushata • Take Day sleep (diva-swapna) • Take Sound sleep on comfortable bed • Relaxation of mind and avoidance of excessive worry • Keep away from mental work, sexual intercourse and physical exercise. • Use Snigdha udvartan (unctuous anointing) • Always wear white (clean) dress, perfumery & garlands • Always consume Sweet and nourishing food • Use unctuous and sweet enema • Regular use of Rasayana (bulk promoting) and Vajikarana (aphrodisiac drug) formulations.

CONCLUSION

In ayurvedic text, 'Charakacharya' has described eight 'Nindya prakrities' (undesirable constitution) according to the body constitution. These eight despised persons are Atidirgha (very tall), Atihriswa (very short stature), Atigaura (very fair colored or complexion), Atikrishna (very black colored or complexion), Atiloma (with excessive body hairs), Aloma (absence of body hairs), Atikrisha (excessive thin or emaciated persons) and Obese (obese or overweight). Astaninditha purusha refers to those people who are generally considered as socially unacceptable because of their peculiar characteristics.

REFERENCES

- Agnivesha, Charakasamhita, Commentary by Chakrapanidatta, Yadavji Trikamji Acharya, Chaukamba Surabharathi Prakashana, Varanasi, U.P, 2000, 4th ed., Pp No-738, Pg No-116.
- Vagbhata, Ashtanga Hridaya, with Vidyotini Hindi commentary of Kaviraj Atrideva Gupta Sutra Sthana, Chapter 1, Verse No. 5 Page.3 Chaukhambha Prakashan, Varanasi 2009.
- 3. Agnivesha, "Charak Samhita", with Charak Chandrika Hindi commentary, by Dr. Brahmanand Tripathi and Dr. Ganga Sahay Pandey, Sutra Sthana Chapter 21, Verse 18 page No. 403 Chaukhamba Surbharti Prakashan, 2007.
- Agnivesha, "Charak Samhita", with Charak Chandrika Hindi commentary, by Dr. Brahmanand Tripathi and Dr. Ganga Sahay Pandey, Sutra Sthana Chapter 21, Verse 4 page No. 399 Chaukhamba Surbharti Prakashan, 2007.
- Agnivesha, "Charak Samhita", with Charak Chandrika Hindi commentary, by Dr. Brahmanand Tripathi and Dr. Ganga Sahay Pandey, Sutra Sthana

- Chapter 21, Verse 17 page No. 402 Chaukhamba Surbharti Prakashan, 2007.
- Agnivesha, Charakasamhita, Commentary by Chakrapanidatta, Yadavji Trikamji Acharya, Chaukamba Surabharathi Prakashana, Varanasi, U.P, 2000, 4th ed., Pp No-738, Pg No-305.
- Agnivesha, Charakasamhita, Commentary by Chakrapanidatta, Yadavji Trikamji Acharya, Chaukamba Surabharathi Prakashana, Varanasi, U.P, 2000, 4th ed., Pp No-738, Pg No-116.

www.wjpls.org | Vol 9, Issue 7, 2023. | ISO 9001:2015 Certified Journal | 91