THE ROLE OF AYURVEDIC MANAGEMENT OF KARSHYA W.S.R. TO UNDERWEIGHT - A CASE STUDY

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ABSTRACT:

Karshya means emacitation (It is one among disorder of improper nutrition Apatarpananjanyavyadyadhi) It results from less intake of food. Rukshannapana (Nutritionally deficient food). Langhana (fasting). Pramitashana (intake of nutritionally deficient food). Shoka (Psychological disturbances). By nature in vataja prakriti. Excessive drastic purifactory measures and other reasons like nidra (sleep) vegadharana (excessive awakening in the night), suppression of urges, excess physical activity and so on which leads to vitiation of vata and The meaning Krusha according to Ayurvediyashabdakosh is Amedasvi, Durbala, Alpamamsa, and Nirmamsa. Aahar factor is the main factor for this disorder and Alpashana and Vishamashana specially results in the development of Karshya. Karshya is included under VatajNanatmaja Vatavyadhi. Both Charak and Sushrut classify it under RaspradoshajaVyadhi. Karshya is a Kshudavegadharanjanya Vyadhi. Karshya is a symptom of Vatvriddhi. The patient was advised shaman chikitsa for 45 days. Improvement was seen in both subjective and objective assessment. So this treatment modality which can be helpful to treat Karshya and restoring the functional capacity of Rasavah strotas. After 45 days treatment, the patient gained 4.4 kg weight and patient showed marked improvement in gaining weight.

KEY WORDS: - Karshya, Underweight, Agni, Ksuidhaasahatva, Nidrakshaya

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INTRODUCTION

In developing nations, karshya is one of the most pervasive health and dietary issues. An Apatarpananjaya Vyadhi is Karshya.) As said by Charaka Karshya is classified under the eight vile individuals (Ashtauninditipapurush). In the end, Karshya sufferers experience Balahani, or loss of immunity, and eventually pass away. The unintended clinical and societal complications of these eight physical states are discussed. Ayurveda mentions Karshyavyadhi, which is associated to underweight and causes the body to gradually emaciate. It is believed that Karshya is a dietary deficiency. In contemporary medical practice. According to NFHS-4 (2015–2016), Nagpur, Maharashtra's adult population's nutritional status (age group 15–49 years). Men with a BMI of 19.1% and women with a BMI of 23.0% are the two groups. Underweight patients are treated in modern medicine with protein powder and steroid supplements together with a nutritious diet. However, using protein powder and steroids excessively might have major side effects. Additionally, not every patient will benefit from the same food plan if Agni is not taken in to account. Reduced formation of Rasa Dhatu results from altered Vayu and Agni functions. Rasadhatu's upshoshan occurs, resulting in Dhatukshaya.

Adult underweight is characterised by weight loss, muscle atrophy, subcutaneous fat loss, physical impairment, social stress, and symptoms resembling general weakness. In our society, Karshya is prevalent across all social classes. One probable issue that may be linked to Karshya is underweight. A BMI of less than 18.5 kg/m2 indicates undernutrition. (6) Research conducted in India has revealed that adolescents experience widespread, chronic dietary deficits, which cause them to become underweight (Krisha) and weak (Durbala) on the physical and mental levels. The usual range for BMI is 18.5–24.99 kg/m2.

CASE STUDY

Case: A 26 years male came to O.P.D. of Kaychikitsa department of Pakwasa Ayurved Hospital, Nagpur with chief complaints of Kshudhaasahatva (Intolerance of hunger), Nidrakshaya (Impaired sleep), Daurbalya (Weakness)

1.Place of study : IPD department of Kayachikitsa, Pakwasa Ayurved hospital Nagpur

2.Chief Complaints :

A 26 years male came to O.P.D. of Kaychikitsa department of Pakwasa Ayurved Hospital, Nagpur with chief complaints of -

1. Kshudhaasahatva (Intolerance of hunger),
2. Nidrakshaya (Impaired sleep),
3. Daurbalya (Weakness)

Patient having above complaints from since 1 years
4. **History of present illness :-**
The patient came to kayachikitsa OPD with the Complaints Of Kshudhaasahatva (Intolerance of hunger), Nidrakshaya (Impaired sleep), Daurbalya (weakness), He started allopathic medicine like protein powder and multivitamin etc but with these Drugs he got only temporary relief for some days. His symptoms worsened as he stopped Talking medicine. So he come to Kaychikitsa O.P.D. Pakwasa Ayurvedic hospital for further Treatment.

5. **Past History :**
   - No any major illness  
   - No H/o HTN, DM, Thyroid, TB  
   - No surgical history.

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6. **Drug History**- No  
7. **Past Surgical History**- No  
8. **Family History**- No  
9. **History of Allergy**- No  
10. **Personal history** : - Work – sedentary  
11. **Addiction** – no any addiction
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- **Dinacharya – Table No.1**

<table>
<thead>
<tr>
<th>Time of getting up in the morning</th>
<th>At 6 am</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face wash including tooth brushing (Mukha prakshalana)</td>
<td>Twice daily</td>
</tr>
<tr>
<td>Attaining toilet ie, Bowel evacuation habit (Vegothsarga)</td>
<td>Use to evacuate daily</td>
</tr>
<tr>
<td>Doing physical exercises (Vyayama)</td>
<td>Not performing</td>
</tr>
<tr>
<td>Taking bath(Snana)</td>
<td>Use to take bath daily</td>
</tr>
<tr>
<td>Taking breakfast (Pratahakaleena Bhojana)</td>
<td>Samosa, upma, poha</td>
</tr>
</tbody>
</table>
• Afternoon regimen (Madhyanha charya) Table No.2

<table>
<thead>
<tr>
<th>Lunch (Madhyahna bhojana)</th>
<th>Roti &amp; curry / rice with Dal</th>
</tr>
</thead>
</table>

• Night regimen (Ratri charya):

Since many day’s patient is having disturbed sleep.

• Rules & regulations while intake of food (Bhojana vidhi):

Not followed

• Nutritional status:

Poorly built and poorly nourished

• Emotional Status- Tensions

CLINICAL EXAMINATIONS VITALS -

BP- 110/70 mmhg
PR- 74/min
Temperature – Afebrile
Spo2 – 97% on R.A.
RR- 18/min
Height – 160 cm
Weight – 44 kg
BMI – 17.2 kg/m²
SYSTEMIC EXAMINATION -

CVS – S1S2 heard, no murmurs
CNS -Conscious & well Oriented,
RS- Air Entry Bilaterally equal
P/A- Soft & No tender

ASHTHAVIDH PARIKSHAN-
1. Nadi – 74/min, kaphapitta.
2. Mala – Asamyak
3. Mutra – Samyak
4. Jivha – Sam
5. Shabda – spashta.
6. Sparsha-Samshitoshna
7. Druk – shwtabh
8. Akruti – Madhyam

DASHAVIDHA PARIKSHAN –
1. Prakriti–a) Doshaj-Vata –kaphaja
   b) Manas –Rajasik
2. Saratah – Avar
3. Samhananah –Madhyam
4. Pramana– Height -160c, Weight – 44kg
5. Satmya- Madhyam
6. Satvatah- Madhyam
8. Vyayamshakti – Madhyam
9. Vayatah–Tarunavastha
10. Deshatah—Sadharan

STROTAS PARIKSHAN-
1. Rasavaha strotas—Daurbalya
3. Medovaha strotas-
   a) Udar—Sushkata
   b) Sphila—Sushkata
   srotodushti Lakshan—Udar, Spika, Griva--Sushkata
INVESTIGATION -

Date:- 12/4/23

Hb-13.2gm%

Samprapti Ghataka of Karshya –
1. Dosha - Vata – kaphaja
2. Dooshya—Rasa, Mamsa, Meda
3. Agni—Jatharagni (manda & vishama)
4. Srotodushti Prakara—Sanga
5. Udbhva Sthaana -- Amashaya
6. Vyakta sthaana -- Sarva shareera
7. Sanchara Sthaana -- Sarva shareera, rasayanees
8. Vyakta Sthaana -- Sarva shareera
9. Vyadhi bheda – Chirakari

MATERIALS AND METHODS

Method-

1. A case study
2. Centre- Department of Kayachikitsa Pakwasa Ayurvedic Hospital, Nagpur Affiliated to Shri Ayurved College, Nagpur.
3. Chief Complaints : A 26 years male came to O.P.D. of Kaychikitsa department of Pakwasa Ayurvedic Hospital, Nagpur Affiliated to Shri Ayurved College, Nagpur.

Chief Complaints -
1. Kshudhaasahatva (Intolerance of hunger),
2. Nidrakshaya (Impaired sleep),
3. Daurbalya (Weakness)

Patient having above complaints from since 1 years
Material- Management of Karshya – Table No.3

<table>
<thead>
<tr>
<th>Dravya</th>
<th>Dose</th>
<th>Duration</th>
<th>Anupana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gokshura Churna</td>
<td>3gm</td>
<td>Twice a day</td>
<td>100ml Milk</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Before meal</td>
<td></td>
</tr>
</tbody>
</table>

Panchkarma chikitsa :-Bruhan basti

1) Sarvang Snehan and Swedan for 3 days was given.

2) Bruhan basti given for 8 days
   - Bruhan Basti-

1. Poorva Karma: Sarvang Snehana Swedana with Bala Tail and Mrudu Vashpa Swedan.
2. Pradhan Karma: Patient was made to lie in left lateral position for administration of Basti.
3. Paschat karma:
   Patient is asked to keep lying for 3-4 minutes for better absorption of Basti
   Patient is advised to take light diet.
   Patient is advised to avoid fast foods and spicy foods.

After completion of complete cycle patient is advised to follow the Sansarjan Karma.

Pathya Apathya –

Pathya –

Dhanya,Yava, Godhuma, Mudga, Soya Jangala-anooap–oudaka praanija mamsa rasa (kruta),
Go-dugdha & ghrita , Sukhoshna jala / kwathita jala , Paalakya, Methika, Tila taila ,Phala
varga (in fruits) Draaksha, Dadima, Kushmanda Jeeraka, ajamoda, Vyayama ,Walking,
jogging / loosening exercises ,Abhyanga With Mahamasha taila / Tila taila etc

Apathya –

Rookshya ahara ,Rooksha paana ,Pramitashana, Upavasa
Criteria of Assessment –

A) Subjective Criteria

Table no.4
1) Kshudhaasahatva (Intolerance of hunger)

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade-0</td>
<td>Usual/Routine</td>
<td>0</td>
</tr>
<tr>
<td>Grade-1</td>
<td>Slightly Increased (1 Extra meal with routine Diet)</td>
<td>1</td>
</tr>
<tr>
<td>Grade-2</td>
<td>Moderately Increased (2 Extra meal with routine Diet)</td>
<td>2</td>
</tr>
<tr>
<td>Grade-3</td>
<td>Markedly Increased (3 Extra meal with routine Diet)</td>
<td>3</td>
</tr>
<tr>
<td>Grade-4</td>
<td>Severely Increased (4 Extra meal with routine Diet)</td>
<td>4</td>
</tr>
</tbody>
</table>

Table no.5
1) Pipasaasahatva (Intolerance of thirst)

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade-0</td>
<td>Can tolerate thirst for more than 3 hrs</td>
<td>0</td>
</tr>
<tr>
<td>Grade-1</td>
<td>Can tolerate thirst for maximum 3 hrs</td>
<td>1</td>
</tr>
<tr>
<td>Grade-2</td>
<td>Can tolerate thirst for more than 1 hr</td>
<td>2</td>
</tr>
<tr>
<td>Grade-3</td>
<td>Cannot tolerate thirst for more than 30 mins</td>
<td>3</td>
</tr>
<tr>
<td>Grade-4</td>
<td>Cannot tolerate thirst for more than 15 mins</td>
<td>4</td>
</tr>
</tbody>
</table>
### Table no.6

1) Daurbalya (Weakness)

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade-0</td>
<td>No weakness</td>
<td>0</td>
</tr>
<tr>
<td>Grade-1</td>
<td>Occasionally feeling of weakness without work and remains for sometimes</td>
<td>1</td>
</tr>
<tr>
<td>Grade-2</td>
<td>Weakness without tiredness daily for sometimes</td>
<td>2</td>
</tr>
<tr>
<td>Grade-3</td>
<td>Weakness without tiredness daily for long duration</td>
<td>3</td>
</tr>
<tr>
<td>Grade-4</td>
<td>Always feel weakness</td>
<td>4</td>
</tr>
</tbody>
</table>

### Table no.7

2) Nidrakshaya (Impaired sleep)

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade-0</td>
<td>Normal sleep</td>
<td>0</td>
</tr>
<tr>
<td>Grade-1</td>
<td>Sleep less than 8 hrs</td>
<td>1</td>
</tr>
<tr>
<td>Grade-2</td>
<td>Sleep less than 6 hrs</td>
<td>2</td>
</tr>
<tr>
<td>Grade-3</td>
<td>Sleep less than 4 hrs</td>
<td>3</td>
</tr>
<tr>
<td>Grade-4</td>
<td>No sleep at all</td>
<td>4</td>
</tr>
</tbody>
</table>
Objective Criteria-

Table no. 8:

Body Mass Index (BMI)

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade-0</td>
<td>18.50-24.99</td>
<td>1</td>
</tr>
<tr>
<td>Grade-1</td>
<td>18.49-17.00</td>
<td>2</td>
</tr>
<tr>
<td>Grade-2</td>
<td>16.99-16.00</td>
<td>3</td>
</tr>
<tr>
<td>Grade-3</td>
<td>&lt;16.00</td>
<td>4</td>
</tr>
</tbody>
</table>

Table No.9

Evaluation of symptoms:

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kshudhaasahatva</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Nidrakshaya</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Daurbalya</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>
Table No.10

<table>
<thead>
<tr>
<th>Objective Criteria</th>
<th>Before</th>
<th>After</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neck circumference</td>
<td>38 cm</td>
<td>38 cm</td>
</tr>
<tr>
<td>Hip circumference</td>
<td>80 cm</td>
<td>83 cm</td>
</tr>
<tr>
<td>Abdominal circumference</td>
<td>63 cm</td>
<td>66 cm</td>
</tr>
<tr>
<td>Mid arm circumference</td>
<td>25 cm</td>
<td>27 cm</td>
</tr>
<tr>
<td>Weight in kg</td>
<td>44 kg</td>
<td>48.4 kg</td>
</tr>
<tr>
<td>BMI</td>
<td>17.2 kg/m²</td>
<td>18.9 kg/m²</td>
</tr>
</tbody>
</table>

INVESTIGATION AFTER TREATMENT -

Date : - 16/05/23

Hb-14.5 gm%

DISCUSSION

Karshya is apatarpana janya vikara (rasapradoshaja vikara) seen in majority of adult population in developing countries. This result due to inadequate intake of nutritious food and lack of awareness regarding its importance. Poverty & lack of personal hygiene are the other causative factors which contribute in the manifestation of the karshya. Under-nutrition may be seen in an adult population due to deciency of essential nutrients such as proteins, carbohydrates, vitamins, minerals & other micro-nutrients. Karshya patients are prone for infections hence treatment should be aimed to full their nutritional requirements. The formulation Gokshura churn is such a nutritious medicament which possesses guru, snigdha guna, sheeta veerya, kaphavardhaka, vatashamaka & brihmana properties, economical, easy to administer, palatable & can be practiced for longer duration. Gokshura churn having Madhura rasa, Snigdha guna, and Madhura Vipaka and sheeta virya improve agni and act as vatanulomka.
Mode Of Action –

a) Gokshura churn –

The principle management of Karshya is Balya, Brimhana, laghu, Santarpana. Gokshura (Tribulus Terrestris) is an Ayurvedic herb most commonly known for its immunity-boosting, aphrodisiac, and rejuvenation, Gokshura is Sheeta in potency and Madhura in taste. It has the Balya property benefiting in providing strength to the body. Gokshura possesses various medicinal properties, especially the Fruit. Gokshura helps in managing Weight by suppressing appetite and decreasing the Urge to overeat. The Gokshura have Madhura rasa, Snigdha guna, and Madhura Vipaka and sheeta virya. Snigdha, Madhura properties causes Vatashamana and increase the Kapha level in the body. Madhura rasa and sheeta virya control the Pitta Madhura rasa and madhura vipaka Nourishes rasa and shukra dhatu. The strotoshodhaka property of Gokshura helps in clearance of channels and Improves the circulation of rasa dhatu appropriately all over body which Leads to good nutritious and nourishment of all further dhatu. On other hand Guru Snigdha gunas, Vrishya properties are directly responsible for Balya, Brimhana and effect in body. It improves general health and Immunity. It maintains equilibrium of Dosha Dhatu and Malas. It also Improves immunity due to its Rasayana (rejuvenating) property. Due to these properties Gokshur Churna breaks the Samprapti of Karshya Vyadhi and gives good result.

CONCLUSION

Karshya is a clinical condition that can be correlated with underweight in which body gets emaciated gradually. Among the eight socially undesirable physical state mentioned by Charak. In this case, it can be concluded that Goshura churna acts both on agni & poshaka rasa. Being rich in protein when given through the go-ksheera as an anupana, it is having the ability to nourish all the tissues of the body by increasing the adya dhatu i.e, rasadhatus. Karshya is a chronic disease, which needs long term treatment to get good response. Apart from concentrating therapeutic aspects of this disease, it is advised to improve the socio-economic status & also awareness of nutrition education. ing all the results of the study it can be concluded as Gokshura churn can be a drug of choice in the management of Karshya.

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