The Conceptual Study on Medoroga

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Abstract— When all the Dhatus in the body are at their optimum levels, each of them contribute towards the Health of the body. But when there is vikriti in any of the Dhatus, whether it is Pramanatatha or Gunatatha, then it surely affects both the body and the mind. Medoroga is one of the best example of disease caused due to pramanatatha vrudhdi and Gunatatha vrudhdi of the dhatus. Meda is mentioned as one among the saphtha dushya and is considered as prime dushya in context of different diseases like- Prameha, Medoroga, Sthaulya etc. Abnormal accumulation of Meda dhatu in body is known as Medo dushti. Medo dushti includes several Medo vikara, which are collectively known as Medoroga. Sthaulya can be included under Santaranapajamaya vrudhdi as “Medo roga”. Medoroga is mainly due to imbalance of energy; intake is greater than output. In the context of Medoroga, ‘Madhuksoha’ mentions sneha as the factor from which meda is formed. All the Dhatu nourish mainly by Sneha. Medas is mentioned as one among the saptha mahabhuta & Pratvi Mahabhuta. He has sneha as the factor from which meda is formed. All the Dhatu nourish mainly by Sneha. Medas is mentioned as one among the saptha mahabhuta, leads to unnaturally dep

Keywords— Medo Dhatu, Medoroga, Sthaulya.

I. INTRODUCTION

The word ‘Medas’ is derived from root ‘Jhimida Snehana’. This stands for Sneha, Fat, oil etc. It means the substance which has snigdhatva property is called Medas. There are other dhatu which also have snigdhatva property such as Vasa, Majja etc. Meda is present mainly in Udara, but if it is present inside Anu Asthi, it is called Sarakta Medas and when in Sthoola Asthi, the same is called Majja. The pure form of Meda present in Mamsa (peshi) is called Vasa. Thus all forms of lipids in body are present mainly in Meda Dhatu which has role in developing many metabolic disorders like Medoroga, Prameha etc. When Medodhatu is produced in excellent condition individuals is known as Medosara Purusha. The disturbance in Medo Dhatu metabolism is very common in present era because of increased cravings towards fast foods. Pancha mahabhuta involvement in Medo Dhatu are Jala & Pratvi Mahabhuta. Similar allied properties of Medo Dhatu may serve as a cause to the nutrition or vitiation of Kapha Dosha. Medo Dhatu and Kapha Dosha have Ashrayashraye bhava.

II. STHAULYA & MEDOROGA

Sthaulya, Medoroga and Medodoshda have been described to be synonymous to each other. The term Medoroga was first used by Acharya Madhava to define obesity and related lipid complications. Literally it means a disease in which Medo Dhatu is deranged. It is only one type of disease according to Ayurvedic texts, but Adhamalla has tried to distinguish between two types of Medoroga; 1) Sthaulya: including its clinical features of Adiposity & 2) Lipid Disorders where Meda acts as an etiological factor in the genesis of other Diseases (secondary). The word Sthaulya is derived from the word ‘Sthula’ which means to grow or increase in size. In context of Sthaulya it refers to excessive growth of adipose tissue in body.

Acharya Charaka has described Sthaulya as excessive increase in quantity of Meda and Mamsa Dhatu leading to pendulous movements of Sphik, Udara and Sthana with morphological disproportion. Such a person suffers from lack of energy. In Ayurveda Meda also considered as prime dushya in context of different diseases like- Prameha, Medoroga Sthaulya etc. In the Metabolic Syndrome, the abnormal Meda, when deposited into subcutaneous tissue, it gives the clinical presentation of Obesity and similarly when Abaddha Meda extracted to Basti it creates the manifestations of Prameha, and when this Meda is unnaturally deposited in the arterial wall and increase the peripheral resistance (Dhamnipratichaya/arteriosclerosis), it shows clinical manifestation like Hypertension and when these unnatural Meda present in the Raktu-vaha srotas leads to increased level of unwanted fat level- Hypercholesterolemia. The formation of Meda not only depends on over consuming but also due to less utilization. The modern life style makes the human beings more comfortable. The basic concept of utilization of excess energy should be done through physical exercise but in this era, we prefer mental exercise than that of physical exercise. That is why it is rightly said by Sushruta- walking without rest for distance of hundred Yojana, one of the best remedies for Sthaula prameha. So it is clear that proper exercise as well as low calorie diet may be one of the potent remedy for the particular state. Vaghbata is the first to describe the types of Sthula Purusha and has categorized them into (i) Heena Sthula, (ii) Madhya Sthula and (iii) Atisthula. He has considered Madhura Rasa over consumption leading to Sthaulya and has recommended Langhana therapy for Sthula person in Dwividha Upkramaniya Adhyaya. He has stated that Medovriddhi induces Sthaulya, Purvarupa of Prameha and complication related with various diseases of Sleshma, Rakta and Mamsa.

A. Formation of Medo Dhatu

According to Charaka, the Rakta Dhatu is combined with Teja, Apa mahabhuta and is made solid by the Agni so that it gets converted into Mamsa, that again being digested by its own Agni (Medodhatvagni) and stirred up by the Agni and getting combined with the quality of Apa mahabhuta and Snigdha dravya and finally gets converted into the Medodhatu.
There are three theories about the modes of dhatu formation.

B. Kshira-Dadhri-Nyaya

The law of Transformation: According to this concept, the preceding dhatu get transformed into the succeeding dhatu. This is on the analogy of transformation of milk into curd. Thus the whole Rasadhatus being cooked by the respective Agnis becomes Rakta dhatu similarly the Raktadhatus changed into mamsadhatus and Mamsadhatus changed into Medo dhatu and likewise, termed as Kshira - dadhi nyaya.

C. Kedari Kulya Nyaya

The law of transmission: According to this theory, the process of nourishment of dhatus can be related to the irrigation of different fields by water from a canal. The water first irrigates the nearby fields and only thereafter the distant ones are irrigated. Thus, the Rasa dhatu after supplying nutrition to the Rakta, it proceeds to provide the nourishment to Mamsadhatus. In this way, the nourishment take place to all the dhatus by Aharaharasa and each dhatu can pick-up its own nutrients. According to this concept, one dhatu alone can get nourishment without involving other dhatu.

D. Khale Kapota Nyaya

The law of selectivity: According to this concept, the nourishment of dhatus takes place by selection. The nourishing fluid travels to different dhatus through different channels. In the beginning, the nearby dhatu draws its nutrient fraction from the nourishing fluid and the distant ones get nourished at later stages. Thus, the nourishment of tissues takes place through different channels. This is on the analogy of the pigeons carrying grains from a thrashing field and flying out in different directions.

III. STHANA AND SWARUPA OF MEDO DHATU:

There are 2 types of Medo Dhatu. One is Poshaka (nourishing) and second is Poshya (which get nourishment). Among these two, Poshaka Medo Dhatu is mobile in nature, which circulates in the whole body along with Rasa- Rakta Dhatu to give nutrition to Poshya Medo Dhatu. Second, Poshya Medo Dhatu is immobile nature, which is stored in Medodharakala. The site of Medodharakala is Udara and Anuasthi.

Dwarkanath, the channels through which nutrition to the adipose tissue are to be termed as the Medovaha Srotas. As per Dr. C. Dwarkanath, the channels through which nutrition to the adipose tissue is transported are to be termed as the Medovaha Srotas. Dr. Ghanekar B. G. considered the Medovaha srotas as the capillaries of the perinephric tissue and Omentum. The internal transport system of the body is represented as Srotamso. It has been given a place of fundamental importance in Ayurveda both in health and disease condition. Dhatu are nourished through their respective srotas. The Medo Dhatu gets nutrition from the preceding dhatu i.e. Mamsa (Poshaka) through its own srotas called Medovaha Srotas. As per Dr. C. Dwarkanath, the channels through which nutrition to the adipose tissue are to be termed as the Medovaha Srotas. Dr. Ghanekar B. G. considered the Medovaha srotas as the capillaries of the perinephric tissue and Omentum.

IV. ASHRAYA AASHRAYEEBHAVA OF MEDAS

Dhatu, which is the shelter for any dosha of its allied nature, depicts the concept of Ashraya Aashrayeebhava. Similar allied properties of homogenous Dhatu or Dosha may serve as a cause to the nutrition or vitiation of a Dosh or Dhatu and in this context, Medas can be considered as a location of the resident Kapha, since Medas plays a major role in nutrition or vitiation of Kapha and vice versa.

Medovaha Srotas:

Each and every srotas has two parts or endings. One is from which the srotas is originated i.e. the moola and another is through which the nutritive material travel to their respective places in the body. The Moola may be enumerated as:

Charaka - Vrikkha and Vapavahana
Sushruta - Vrikkha and Kati
Vagbhat - Vrikkha and Mamsa

Vrikkha: One of the Kosthanga formed by the Saara of Rakta and Medo dhatu. There are two Vrikkas, situated in both the sides of the Mid-vertibro line inside the abdominal cavity.

Sharangadhara says that they nourish the Medo dhatu in Amashaya of the abdominal cavity13. While Charaka considered as “Moola”, so these structures must be directly related with fat metabolism. The upper part of the kidney - supra-renal gland, which control the secretion of epinephrine & non-epinephrine hormones actively participate in the break down process of the Triglycerides.

Vapavahana: It is also a Koshtha and second root of Medovaha Srotas. Chakrapani has interpreted it as Tailavartika while Dr. Ghanekar has considered it as omentum, where the maximum Medas is stored.

Kati: Acharya Sushruta has clearly pointed out the exact site of the Kati but normally the Kati is the place where the fat accumulates.

Mamsa: Vagbhata has considered Mamsa as the moola of Medovaha Srotas. It is not easy to explain correctly. But we might have considered the Vasa (Mamsagata Sneha) below the skin

Pariñāma of Medas:

Agni is responsible for all metabolic activities of the body. It is solely responsible for any increase or decrease of Doṣa, Dhātu or Mala. The vitiation of Agni has serious impact on health at various levels depending on type of Agni involved. When Agni is decreased, it will lead to various metabolic disorders at various levels and produces “Āma” i.e., Agni fails to convert the Vijātya Dravyas into Saジャṭyia ones and the end products cannot be assimilated by the Dhātus. Such products will be dangerous to body and can cause signs and symptoms according to their presence at various physiological levels. If Agnimāndya is present at the level of Jatharāgni only, then Āma is usually restricted to Koषtha. There will be no production of Āhāra Rasa & result will be Dhātu Kśaya. If Agnimāndya is present at the level of Bhūtāgni, then Āma is restricted to Āhāra Rasa and this Āhāra Rasa which is improperly formed cannot be assimilated by the Dhātus and results in Dhātukśaya. If Agni-māndya is present at the level of Dhātvāgni, then the particular Dhātu cannot assimilate nutrients present in the circulating Āhāra Rasa or circulating Poṣaka Dhātu. So, such Poṣaka Dhātus will be accumulated in Āhāra Rasa in abnormal quantities and they may further get accumulated at abnormal sites. This sort of process can be called as Leenatwa of Āma in Dhātus. Such Leenatwa can cause a number of disorders but it should always be kept in mind that once Jatharāgni is impaired, the Bhūtāgni and Dhātvāgni would also be having impairment. Hence during treatment of any kind of Agnimāndya or Āma conditions, one should think about all the three levels. Such a way if Medo Dhātvāgni is impaired and the homologues nutrients present in Poṣaka Medo Dhātu will be in excess in circulation and this can be referred to the conditions such as hyperlipidaemia. This is because the Poṣaka Medo Dhātu cannot be assimilated into Sthāyi Medo Dhātu by Medodhātvāgni. The cause for excess Poṣaka Medo Dhātu in circulation is not only the Medodhātvāgni, but there may be decrease in other Agni also. Any cause, which can lead to Kapha Vriddhi, Pitta or Vāta Prakopa, can lead to this condition. In Medoroga, due to the excessive supply of Snīgda, Madhura, Guru etc. types of āhāra, the āhārārasa contains excessive nutrition homologous to Medas. Due to persistent overload, the Medoagni is diminished leading to excessive accumulation of Medas in Āma form and thus causing Medoroga.

Ashta doshas of Sthoulya: 

Ayushohrasa: Life expectancy decreased because of over production of Medo Dhatu at expense of other Dhatus. Therefore, other Dhatus cannot be nourished properly. Obesity leads to various co-morbidity conditions thereby decreasing the life expectancy of the obese person.

Javoparodha - The Shaitihlya, Saukumarya and Guruta properties of Meda Dhatu causes Javoparodha. Thus these persons are slow to initiate the work.

Kriechavyavaya - Due to obstruction in genital passage by Meda Dhatu and less production of semen, the sexual act becomes difficult.

Daurbalya - This is because of the deranged metabolism owing to malnourishment of the Dhatus.

Daurgandhya - Bad smell results due to excessive sweating, innate quality of Meda Dhatu and morbid nature of vitiated Meda.

Swedabadha - On account of the admixture of Kapha with Meda, Vishyandi, Bahutva and Guru Properties of Meda and its inability to bear the strain of exercise, it results in Swedabadha.

Kshudhatimatrata or Pipasatiyoga - because of increased Agni in Koṣtha and vitiation of Vata by obstruction of Meda, it results in excessive appetite and thirst.

Apart from other symptoms, Kshudra shwasa arises due to obstruction of Pranavaha Srotas by the accumulating Medodhātu. Excessive Meda Dhatu when obstructs various microchannels of body results in symptoms like Krathana, Gadgada Dhwani, Alpa Shukrata, Gatrasada, Jadya and Sarvakriya Asamartha. Along with these symptoms, Purvarupa of Prameha also included as symptoms of Medoroga.

V. SAMPRAPTI

Frequent consumption of Shleshmala ahara, over indulgence in Kapha & Meda Sadharmi without physical activity

- Amaras by Kapha predominant Dosha increase by its nature.

- This Āma goes directly to Meda Dhatu & leads to increase and accumulation of Meda by creating Medodhātvāgni-māndya.

- Vitiates Kapha & Meda causes Medovaha Sroto Sanga, Leading to Margavrodha of Vata.

- Vitiates Vata circulates in whole body especially in the

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Kostha, does Jatharagni Sandhukshhana which results in Kshudhaadhikya & Shighra Jarana of Ahara.

Medodhatwagni Mandhyā leading to the formation of Apakwa Meda which is incapable of nourishing the further Mamsa Dhatu.

The Ama Meda gets accumulated in Sarvanga especially in the Sphik-UDara-Stana Sthaulya.

VI. STHOULYA – NIDANAARTHAKARA ROGA FOR PRAMEHA

In sthoulya the path of Vayu will be obstructed by Medas and hence Vayu will get aggravated easily, which is confined to Kostha (Samman vayu) resulting in the stimulation of digestive fire and consequently absorption of food. So the food digests quickly and individual becomes Voracious eater. By this Medodhatwagni becomes more manda and puts pressure on its Medosthana ie Vapavahana, hence there will be relative insulin deficiency. On the other hand excessive increase of fat and muscle cause insulin resistance. So both insulin resistance and insulin deficiency shows the poorvaroopa of Madhumeha finally ends up in disease manifestation.

VII. DISCUSSION

Concept of abnormal & unequal distribution or collection of Medodhātu in body can be inferred as Medoroga. Charaka given causes of Medoroga as, Medas potentiating diet, Harshnityatwat, Achintanat, excessive indulgence with Brimhana Basti, Taila Abhyanga, Snigdha Udvartana and Beejadosh. Whereas Sushruta & Vagbhata stressed mainly on endogenous causes including deranged functions of Doṣaṣ, Dhātus, Mala, Srotas etc. Āmadoṣa is the cause behind Medoroga specially mentioned by Vagbhata. According to Samānaya Viśeṣa Siddhānta & Ashraya ashrayee Sambandha between Doṣa-Dushyas, there is direct relation between Kapha Doṣa & Medodhātu i.e. increased consequences of Kapha directly leads to increment in Medas proportion. All Acharyas have given nearly same pathogenesis in which Kapha & Medodhātu play vital role leading to Medoroga. Hence, these two are main Doṣa-Dushya Ghataka in pathogenesis. Accumulation of Kapha & Meda leads to Srotavarodha causing trapping of Samānay Vāyu in Kostha leading to Āvaraṇa to Samānay Vāyu, it leads to Jathāragni Sandhukoṣaṇa & increased Jathāragni leads to rapid digestion of ingested food & leaves the person craving for food. This vicious cycle continues resulting in Meda Atipupachaya. Sushruta has mentioned Medoroga as Rasamittaja Vikārāa i.e. Dushya dominant disorder. According to Ayurveda, when food, it is first of all acted by Jathāragni to form Āhāra Rasa, thus Āhāra Rasa acts as Substrate for Dhātuposhana by respective Dhātvāgni. Dhātvāgnimandhya develops when the substrate for Medodhātvāgni i.e. Meda Poṣaka Rasa is present in excess form than the digestive power of Medodhātvāgni. Sushruta says that the Atisnehayukta Anna Rasa leads to excess formation of Meda dāhuṭ. The three Acharyas have considered Vrikka as one of the moola of Medovaha Srotas but Vapavahana, Kati and Mamsa are mentioned as second mooola separately.

Sushruta and Vagbhata have given more anatomical preference then the physiological view by considering Kati and Mamsa as “Moolaa” of the Medovaha Srotas. While Charaka’s consideration was a physiological one.

VIII. CONCLUSION

The Medo Dhatu plays an important role in two important functional aspects i.e. Dharaṇa & Poshana of the body. Jatharagni is impaired, the Bhutagni and Dhatwagni especially Medo Dhatwagni is impaired resulting of the homologues nutrients present in Poshaka Medo Dhatu will be in excess in circulation and ultimately develops Medoroga. Lastly, Agni plays a very important role in growth, development & maintenance of the body. So the Agni should be maintained at equilibrium by changing the life style.

REFERENCES


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