

A Conceptual Review of *Sthoulya Roga* and Role of *Lekhaniya Mahakashaya* in its Management

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Abstract--

Introduction: *Sthoulya* is one of the *Santarpanotha Vikaras* described in Ayurveda and has become a major global health concern because of its association with metabolic disorders such as diabetes mellitus, hypertension, dyslipidemia, and cardiovascular diseases. *Acharya Charaka* has described *Lekhaniya Mahakashaya*, a group of ten drugs possessing *Medohara*, *Kaphahara*, *Deepana*, *Pachana*, and *Lekhana* properties, specifically useful in reducing excessive *Meda Dhatu*. Although several studies have evaluated individual *Lekhaniya* drugs, a comprehensive review regarding the conceptual basis and therapeutic role of *Lekhaniya Mahakashaya* in *Sthoulya* is limited.

Methodology: The present review is based on classical Ayurvedic texts including *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Bhavaprakasha*, and published research articles indexed in PubMed, Google Scholar, Scopus, and AYUSH databases.

Results: Ayurveda considers *Sthoulya* as a disorder resulting from excessive accumulation of *Meda Dhatu* due to impaired *Agni*, *Kapha* predominance, *Santarpana Ahara*, and sedentary lifestyle. *Lekhaniya Mahakashaya* consists of ten herbs possessing *Deepana*, *Pachana*, *Medohara*, *Kaphahara*, and *Lekhana* properties that improve lipid metabolism, reduce adiposity, enhance digestive fire, and correct metabolic dysfunction.

Discussion: Experimental and clinical studies suggest that drugs of *Lekhaniya Mahakashaya* possess anti-obesity, hypolipidemic, antioxidant, anti-inflammatory, and insulin-sensitizing activities. Therefore, *Lekhaniya Mahakashaya* can be considered an effective Ayurvedic therapeutic approach for the management of *Sthoulya*.

Keywords: *Sthoulya*, *Lekhaniya Mahakashaya*, *Medoroga*, *Medohara*, *Agni*, *Kapha*, *Ayurveda*.

I. INTRODUCTION

Obesity has emerged as one of the most significant public health challenges worldwide. According to the World Health Organization (WHO), obesity is defined as abnormal or excessive fat accumulation that presents a risk to health.^[1] The prevalence of obesity has increased dramatically over the past few decades due to unhealthy dietary habits, physical inactivity, stress, urbanization, and sedentary lifestyles.^[2] Obesity is recognized as an important risk factor for type 2 diabetes mellitus, hypertension, dyslipidemia, cardiovascular diseases, non-alcoholic fatty liver disease, osteoarthritis, infertility, and certain malignancies.^[3]

Ayurveda has described obesity under the term *Sthoulya* or *Medoroga*, one of the eight undesirable bodily constitutions (*Ashta Nindita Purusha*) described by *Acharya Charaka*. *Sthoulya* is characterized by excessive accumulation of *Meda Dhatu* leading to pendulous movement of the buttocks, abdomen and breasts (*Chala Sphika-Udara-Stana*), diminished physical activity, excessive appetite, thirst, sweating, lethargy and reduced life expectancy.^[4] The *Samprapti* primarily involves vitiation of *Kapha Dosha*, excessive *Meda Dhatu*, impaired *Jatharagni*, and obstruction of *Srotas* (*Srotorodha*), resulting in abnormal nourishment of *Meda Dhatu* at the expense of other *Dhatus*.^[5]

Among the fifty *Mahakashayas* described by *Acharya Charaka*, *Lekhaniya Mahakashaya* is specifically indicated for reducing excessive *Meda* and *Kapha*. The term *Lekhana* literally means "scraping" or eliminating excessive pathological tissues. The drugs included in *Lekhaniya Mahakashaya* possess predominantly *Tikta*, *Katu*, and *Kashaya Rasa* along with *Laghu* and *Ruksha Guna*, *Ushna Virya*, and *Katu Vipaka*. These pharmacodynamic properties facilitate *Ama Pachana*, improve *Agni*, reduce excessive *Kapha* and *Meda*, remove obstruction of *Srotas*, and restore normal metabolic homeostasis.^[6]

Recent pharmacological and clinical studies have demonstrated that many constituents of *Lekhaniya Mahakashaya* exhibit anti-obesity, hypolipidemic, antioxidant, anti-inflammatory, hepatoprotective, and insulin-sensitizing activities. These scientific findings substantiate the classical Ayurvedic concept of *Lekhana Karma* and support the therapeutic utility of *Lekhaniya Mahakashaya* in the comprehensive management of *Sthoulya*.^[6]

Therefore, the present review aims to critically compile and analyze the available classical literature and contemporary scientific evidence regarding the concept of *Sthoulya* and the therapeutic role of *Lekhaniya Mahakashaya* in its management.

AIM

To comprehensively review the Ayurvedic concept of *Sthoulya* and critically evaluate the therapeutic role of *Lekhaniya Mahakashaya* in its management based on classical literature and contemporary scientific evidence.

II. METHODOLOGY

This review is narrative in nature and is based on an extensive literature search of classical Ayurvedic texts including *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Ashtanga Sangraha*, *Bhavaprakasha*, *Sharangadhara Samhita* and *Yogarajnakara*, along with published research articles indexed in PubMed, Google Scholar, Scopus, AYUSH Research Portal and DHARA database. Relevant articles related to *Sthoulya*, Medoroga, obesity, *Lekhanya Mahakashaya* and *Medohara* drugs were critically reviewed.

III. OBSERVATIONS AND RESULTS

1. Concept of Sthaulya- *Sthaulya* is one of the major *Santarpanotha Vikaras* described in Ayurveda and is considered a disorder of excessive nourishment (*Ati Santarpana*). It is characterized by abnormal accumulation of *Meda Dhatu*, resulting in disproportionate increase in body fat and body weight.^[4] *Acharya Charaka* included *Sthaulya* among the *Ashta Nindita Purusha* because it predisposes an individual to multiple systemic disorders and reduces both quality and expectancy of life. *Sthaulya* primarily involves vitiation of *Kapha Dosha*, *Meda Dhatu*, *Medovaha Srotas*, and impairment of *Jatharagni* and *Medodhatvagni*.^[5]

According to the World Health Organization (WHO), obesity is defined as abnormal or excessive fat accumulation that presents a risk to health. The prevalence of obesity has nearly tripled worldwide during the last five decades and is now considered one of the leading causes of preventable morbidity and mortality.^[3] Obesity significantly increases the risk of type 2 diabetes mellitus, hypertension, dyslipidemia, coronary artery disease, stroke, non-alcoholic fatty liver disease, infertility, osteoarthritis, obstructive sleep apnea, and several cancers.^[2] These modern concepts closely resemble the Ayurvedic description of *Sthaulya* and its complications.

Ayurveda considers *Sthaulya* not merely as excessive body weight but as a metabolic disorder involving deranged *Agni*, abnormal *Dhatu Poshana*, excessive accumulation of *Meda Dhatu*, and obstruction of body channels (*Srotorodha*).^[7,8] Therefore, treatment aims at correcting the underlying metabolic dysfunction rather than simply reducing body weight.

2. Nidana- The etiological factors responsible for *Sthaulya* can be classified into dietary, lifestyle, psychological, hereditary, and metabolic causes.^[7,9]

Table-01: Nidana (Etiological Factors) of Sthaulya^[7,9]

Category	Etiological Factors (Nidana)
A. Aharaja Nidana	<i>Guru Ahara</i> , <i>Snigdha Ahara</i> , <i>Madhura Rasa</i> , <i>Sheeta Ahara</i> , <i>Navanna</i> , <i>Ikshu Vikara</i> , <i>Dadhi</i> , <i>Ghrita</i> , <i>Mamsa</i> , <i>Ati Bhojana</i> , <i>Adhyashana</i> (eating before the previous meal is digested).
B. Viharaja Nidana	<i>Avyayama</i> (absence of exercise), <i>Divaswapna</i> (day sleep), sedentary lifestyle, excessive sleeping, lack of physical activity, comfortable living habits.
C. Manasika Nidana	Stress, anxiety, depression, emotional eating, lack of mental discipline.
D. Beeja Dosha	Genetic predisposition (<i>Beeja Dosha</i>), making certain individuals more susceptible to the development of <i>Sthaulya</i> .
E. Other Factors	Advancing age, hormonal imbalance, endocrine disorders, certain medications, and alcohol consumption.

Purvarupa and Rupa -

Table-02: Purvarupa and Clinical Features (Rupa) of Sthaulya^[10,11]

Category	Clinical Features
Purvarupa (Premonitory Symptoms)	Mild increase in body weight, easy fatigability, <i>Atisweda</i> (excessive sweating), <i>Atikshudha</i> (increased appetite), <i>Atitrishna</i> (increased thirst), <i>Alasya</i> (laziness), <i>Gaurava</i> (heaviness of the body), and reduced physical activity.
Cardinal Features (Rupa)	<i>Chala Sphika</i> (pendulous buttocks), <i>Chala Udara</i> (pendulous abdomen), <i>Chala Stana</i> (pendulous breasts).
Associated Symptoms	<i>Atikshudha</i> (excessive appetite), <i>Atitrishna</i> (excessive thirst), <i>Atisweda</i> (profuse sweating), <i>Dourgandhya</i> (body odor), <i>Alasya</i> (laziness), <i>Kshudra Shwasa</i> (dyspnea on exertion), reduced enthusiasm, difficulty in physical activities, excessive sleep, and general weakness despite obesity.

3. *Samprapti*- The *Samprapti* of *Sthaulya* begins with prolonged intake of *Guru*, *Snigdha*, and *Madhura Ahara* along with sedentary habits, leading to aggravation of *Kapha Dosha* and impairment of *Jatharagni*. This results in excessive formation of *Meda Dhatu* due to *Medodhatvagni Mandya*.

The accumulated *Meda* causes *Srotorodha* of the *Medovaha Srotas*, which obstructs *Vata Dosha* and stimulates excessive appetite (*Kshudha Vriddhi*). Increased food intake further aggravates *Meda* accumulation, creating a vicious cycle that ultimately results in *Sthaulya*.^[12,13]

Table-03: Samprapti Ghataka of Sthaulya^[12-16]

Factor	Description
<i>Dosha</i>	<i>Kapha</i> (predominant), <i>Vata</i> (secondary)
<i>Dushya</i>	<i>Meda</i> , <i>Rasa</i> , <i>Mamsa</i>
<i>Agni</i>	<i>Jatharagni Mandya</i> , <i>Medodhatvagni Mandya</i>
<i>Ama</i>	Present
<i>Srotas</i>	<i>Medovaha Srotas</i>
<i>Srotodushti</i>	<i>Sanga</i>
<i>Udbhava Sthana</i>	<i>Amashaya</i>
<i>Adhithana</i>	Entire body, especially adipose tissue
<i>Vyaktasthana</i>	Whole body
<i>Rogamarga</i>	<i>Abhyantara</i>

4. *Upashaya–Anupashaya-Upadrava*

Table-04: Upashaya, Anupashaya and Upadrava of Sthaulya^[17,18]

Category	Details
Upashaya (Relieving Factors)	<i>Langhana</i> , <i>Lekhana</i> , <i>Rukshana</i> , <i>Deepana</i> , <i>Pachana</i> , regular <i>Vyayama</i> (exercise), <i>Laghu Ahara</i> (light diet), <i>Yava</i> , <i>Kulattha</i> , <i>Mudga</i> , <i>Madhu</i> (honey), and <i>Upavasa</i> (fasting).
Anupashaya (Aggravating Factors)	<i>Guru Ahara</i> , <i>Snigdha Ahara</i> , <i>Madhura Ahara</i> , <i>Divaswapna</i> (day sleep), physical inactivity, excessive sleep, and frequent overeating.
Upadrava (Complications)	<i>Prameha</i> , <i>Hridroga</i> , <i>Sandhivata</i> , hypertension, dyslipidemia, coronary artery disease, stroke, fatty liver disease, infertility, sleep apnea, and metabolic syndrome.

Ayurvedic Principles of Management- Management of *Sthaulya* focuses on correcting metabolism rather than simply reducing body weight.

The major principles include *Nidana Parivarjana*, *Langhana*, *Rukshana*, *Lekhana*, *Deepana*, *Pachana*, *Shodhana* (*Vamana* and *Virechana*), *Lekhaniya Mahakashaya*, *Medohara* drugs, Dietary regulation, Lifestyle modification, Regular *Vyayama* and Yoga^[17,18,19,20]

Among these, *Lekhaniya Mahakashaya* described by Acharya Charaka is considered one of the most important therapeutic groups due to its *Lekhana*, *Kapha-Medohara*, *Deepana*, and *Pachana* properties, making it highly relevant in the management of *Sthaulya*.^[21]

Lekhaniya Mahakashaya- Acharya Charaka has described *Lekhaniya Mahakashaya* under the fifty *Mahakashayas* in *Sutra Sthana*. The term *Lekhana* literally means "scraping" or "removing excessive pathological tissue." This group comprises ten medicinal plants possessing predominantly *Tikta*, *Katu* and *Kashaya Rasa*, *Laghu* and *Ruksha Guna*, which perform *Lekhana Karma* by reducing excessive *Kapha* and *Meda Dhatu*. These drugs stimulate *Jatharagni* and *Dhatvagni*, digest *Ama*, remove obstruction in *Srotas*, improve lipid metabolism, and restore normal tissue homeostasis. Owing to these properties, *Lekhaniya Mahakashaya* is considered one of the most important therapeutic groups for the management of *Sthaulya*, *Medoroga*, hyperlipidemia, and other *Santarpanottha Vikaras*.^[22]

Table-05: Lekhaniya Mahakashaya described by Acharya Charaka^[21-23]

Sr. No.	Drugs	Botanical Name	Part Used
1	Musta	<i>Cyperus rotundus</i> Linn.	Rhizome
2	Kushtha	<i>Saussurea costus</i> (Falc.) Lipsch.	Root
3	Haridra	<i>Curcuma longa</i> Linn.	Rhizome
4	Daruharidra	<i>Berberis aristata</i> DC.	Stem Bark/Root
5	Vacha	<i>Acorus calamus</i> Linn.	Rhizome
6	Ativisha	<i>Aconitum heterophyllum</i> Wall. ex Royle	Root
7	Katurohini (Kutaki)	<i>Picrorhiza kurroa</i> Royle ex Benth.	Rhizome
8	Chitraka	<i>Plumbago zeylanica</i> Linn.	Root
9	Chirabilva	<i>Holoptelea integrifolia</i> (Roxb.) Planch. (accepted source)	Stem Bark
10	Hemavati	Classical drug (identity controversial)	Whole plant/Root

Table-06: Pharmacological Properties of Lekhaniya Mahakashaya^[21-23]

S.No.	Drugs	Rasa	Guna	Virya	Vipaka	Dosha Karma
1	Musta	Tikta, Katu, Kashaya	Laghu, Ruksha	Sheeta	Katu	Kapha-Pitta Shamaka
2	Kushtha	Tikta, Katu	Laghu, Tikshna	Ushna	Katu	Kapha-Vata Shamaka
3	Haridra	Tikta, Katu	Laghu, Ruksha	Ushna	Katu	Kapha-Pitta Shamaka
4	Daruharidra	Tikta, Kashaya	Laghu, Ruksha	Ushna	Katu	Kapha-Pitta Shamaka
5	Vacha	Katu, Tikta	Laghu, Tikshna	Ushna	Katu	Kapha-Vata Shamaka
6	Ativisha	Tikta, Katu	Laghu, Ruksha	Sheeta	Katu	Kapha-Pitta Shamaka
7	Katurohini	Tikta	Laghu, Ruksha	Sheeta	Katu	Kapha-Pitta Shamaka
8	Chitraka	Katu	Laghu, Tikshna	Ushna	Katu	Kapha-Vata Shamaka
9	Chirabilva	Tikta, Kashaya	Laghu, Ruksha	Ushna	Katu	Kapha Shamaka
10	Hemavati	Tikta, Katu	Laghu, Ruksha	Ushna	Katu	Kapha-Meda Shamaka

IV. DISCUSSION

Pharmacological Analysis of Lekhaniya Mahakashaya
 Analysis of the constituent drugs reveals that the majority possess predominantly *Tikta, Katu*, and *Kashaya Rasa*, *Laghu* and *Ruksha Guna*, *Ushna Virya*, and *Katu Vipaka*. These pharmacodynamic attributes collectively exert *Lekhana*, *Deepana*, *Pachana*, *Kapha-Medohara*, *Ama Pachana*, and *Srotoshodhana* actions.

Among the ten drugs, most exhibit strong *Kapha-Pitta Shamaka* activity, while several also alleviate *Vata*. The predominance of *Tikta* and *Kashaya Rasa* facilitates drying (*Rukshana*) and scraping (*Lekhana*) of excessive *Meda Dhatu*. *Katu Rasa* stimulates digestive and metabolic activity by enhancing *Jatharagni* and *Dhatvagni*, thereby reducing pathological fat accumulation.

Experimental and clinical studies have demonstrated that many drugs included in *Lekhaniya Mahakashaya*, particularly *Haridra*, *Daruharidra*, *Musta*, *Chitraka*, *Vacha*, and *Kutaki*, possess anti-obesity, hypolipidemic, antioxidant, anti-inflammatory, hepatoprotective, insulin-sensitizing, and digestive stimulant activities. These pharmacological actions correlate well with the classical Ayurvedic concept of *Lekhana Karma*. By improving lipid metabolism, reducing oxidative stress, enhancing insulin sensitivity, and promoting proper digestion, these drugs help interrupt the pathological cycle of *Sthaulya*.

Furthermore, *Lekhaniya Mahakashaya* improves the function of *Medovaha Srotas*, corrects *Agnimandya*, removes *Ama*, promotes proper *Dhatu Poshana*, and restores metabolic homeostasis. Consequently, it not only reduces excessive adipose tissue but also prevents recurrence of obesity-related metabolic disorders.

V. CONCLUSION

Sthaulya is a chronic metabolic disorder characterized by excessive accumulation of *Meda Dhatu* resulting from impaired *Agni*, aggravated *Kapha Dosha*, *Ama* formation, and obstruction of *Medovaha Srotas*. The classical principles of Ayurvedic management emphasize correction of the underlying metabolic disturbance rather than mere weight reduction.

Lekhaniya Mahakashaya, described by Acharya Charaka, represents a unique therapeutic group specifically indicated for reducing excessive *Kapha* and *Meda*. The predominance of *Tikta, Katu*, and *Kashaya Rasa*, along with *Laghu-Ruksha Guna*, *Ushna Virya*, and *Katu Vipaka*, enables these drugs to perform *Lekhana*, *Deepana*, *Pachana*, *Srotoshodhana*, and *Medohara* actions. Contemporary pharmacological studies further validate their anti-obesity, hypolipidemic, antioxidant, anti-inflammatory, and insulin-sensitizing properties.

Therefore, *Lekhaniya Mahakashaya* offers a scientifically supported and holistic therapeutic approach for the management of *Sthaulya* by correcting metabolic dysfunction, reducing excessive adiposity, and restoring physiological balance.

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