

HYPERLIPIDIDEMIA AND ITS TREATMENT- AN AYURVEDIC APPROACH

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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*, *Dhatus* 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*, *Dhatus* and *Malas*.

Keywords: Dyslipidemia, Hyperlipidemia, *Kapha prasara*, *Chikitsa*

INTRODUCTION:

Dyslipidemia is a disorder of Lipoprotein metabolism, which includes overproduction or deficiency of Lipoproteins or both¹. 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.² 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 *Dhatu 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*.

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

- 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 *Vishmaggni*, 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 *Agnivaishmya* is also important. 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 Dosh* like the wind and sun drying up the little water⁵. 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.

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.

CONCLUSION:

- 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 *Hri-droga, Vatavyadhi, Sthoulya, Prameha* etc....

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