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CLINICOPHARMACOLOGICAL EFFECT OF HARITAKI CHURNA AS A LEKHANA KARMA IN OBESITY (STHAULYA) – PILOT STUDY

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ABSTRACT

Lekhana Karma refers to the "scraping" or "reducing" action described in Ayurveda, where a substance helps remove excess accumulation of Meda (fat/adipose tissue), Kapha, Ama, and other unwanted bodily deposits from the body. To assess the effectiveness of Haritaki's Lekhana Karma, which is referenced in Dhanwantari Nighantu, a clinical investigation was carried out on obese individuals with Sthaulya-like diseases. Assessing the effectiveness of Haritaki Churna Karma on Sthaulya was the study's goal. Kaphaghna, Medoghna, Deepana, Pachana, Ruksha, Laghu, Guna, Katu, Tikta Rasa, and Ushna Veerya are among the qualities of Haritaki, which performs the Sthaulya Samprapti Vighatana. A number of research have also suggested that Haritaki has hypolipidemic and antiobesity effects based on its biologically active components, including as corilagin, chebulinic acid, phytosterols, and saponins, as well as Kaphanashak and Medoghna characteristics. As a result, Haritaki may aid in the treatment of obesity. A preliminary investigation was conducted on five Sthaulya cases related to obesity. Kshudrashwasa, Atiswedapravruti, and Aniyamit Mala Pravrutti are examples of subjective criteria that the study's results showed to be effectively relieved. Also displayed the outcome of objective criteria such as the lipid profile. Pilot trial results offer initial support for further work on a larger sample size at the OPD level.

KEY WORDS : *Lekhana Karma, Haritaki Fruit, Haritaki Churna, Sthaulya, Obesity*

INTRODUCTION

Lekhana Karma is an important therapeutic action described in Ayurveda that denotes the scraping, reducing, and eliminating effect of certain drugs or therapies on excessive and abnormal accumulations within the body. It primarily acts by removing excess Meda Dhatu (adipose tissue/fat), aggravated Kapha Dosha, Ama (metabolic toxins formed due to improper digestion), and other unwanted deposits that obstruct normal physiological functions.

This action helps in reducing excessive unctuousness, heaviness, and pathological tissue growth by promoting the breakdown and expulsion of accumulated substances. Lekhana drugs cleanse the Srotas (micro and macro body channels), restore proper metabolic activity (Agni), and improve the movement of nutrients and wastes throughout the body.

Lekhana Karma is particularly beneficial in disorders caused by over-nourishment and excessive accumulation, such as Obesity, Hyperlipidemia, and other Kapha-Meda predominant conditions. By reducing excess fat and toxins, it promotes lightness of the body, improves mobility, and helps maintain metabolic balance.

Ayurveda is a clinical science and its concepts and principles are molded in such a way that it becomes useful in clinical parlance. *Sthoulya* (Obesity) is one among major diseases of modern era with continuous changing lifestyles environment and dietary habits. *Sthoulya* is characterised by an overabundance of Meda. Mansa Dhatu, which is pendulous in *Sphika*, *Udara*, and *Stana*, is linked to a lack of sufficient nourishment for *Uttarottara Dhatus* and a decline in enthusiasm. The first person to give a thorough account of *Sthoulya* was *Acharya Charaka*. One of the *Ashtaunindita Purushas* mentioned by *Acharya Charak* is *Atisthula*. He has explained its etiopathogen-esis, prognosis, and therapy, primarily focussing on exogenous and *genetic causes (Bijadosha). As Ras-Nimittaja Vikara in Sushruta Samhita*, *Medapradoshaja Vikara* in *Charaka Samhita*, and *Santarpanottha Vyadhi* (an excess nutritional condition), *Sthoulya* falls within these categories[1].

Chronic, progressive, and relapsing, obesity is a very common disease that carries a significant risk of developing systemic conditions like diabetes mellitus, hypertension, cardiovascular disease, and musculoskeletal disorders, particularly osteoarthritis.

It is merely not only from beauty purpose but a severe concerned related to many systematic complications lasting even with life risk[2]. Ayurveda places *Haritaki (Terminalia chebula Retz)* in a very high place. One of the most significant and widely utilised herbs in folk, household, and traditional medicine is this one. The *Haritaki* was initially mentioned by Acharya Bhavamishra, a 16th-century Ayurvedic scholar, in his *Nighantu*. Once, while Indra was consuming Amrita (nectar), a drop of it dropped to the ground, and *Haritaki* sprang from that holy drop, he explained in the account of *Haritaki's* emergence.

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Haritaki, according to Acharya Charaka, is the best herb to utilise on a regular basis. All of the Pathya (wholesome) Dravya are superior to *Haritaki*[3].
Haritaki is the best among *Pathya* (wholesome) Dravya[4].According to *Achraya Sharangdhar*, it is the best among *Anulomana* (mild laxative) *Dravyas*[5].

Haritaki is a marvelous Ayurvedic drug prized as "king of medicine" and used since ancient time for therapeutic purposes. It has been widely used in the traditional Indian medicine system of Ayurveda because of its wide spectrum of pharmacological actions that contains biologically active chemicals[6] .In 2013, the American Medical Association (AMA) declared Obesity a disease that requires a range of interventions to advance treatment & prevention[7]. Antioxidant and free radical scavenging activity, Hypolipidemic and hypocholesterolemia activity, Gastrointestinal motility improving, Purgative property and Immunomodulatory activity etc[8].

In order to cure and prevent the illness, it is imperative that a better treatment protocol be developed. Ayurveda has the ability to help obese patients avoid problems, control their condition, and live better lives.

REVIEW OF LITERATURE

Lekhana Karma is an Ayurvedic therapeutic action that helps scrape out and reduce excess Meda (fat), Kapha, Ama, and other unwanted accumulations from the body. It clears bodily channels (srotas), improves digestion and metabolism, and is mainly useful in conditions like Obesity and other disorders caused by excessive fat accumulation.

Ayurveda is an ancient Indian medical system that has been used for thousands of years to promote physical health and healing. Its treatments aim to both cure the body and preserve balance. Many medicinal plants that are listed in the ancient Samhitas are used to accomplish this.

Haritaki, or *Terminalia chebula Linn*, is a medicinal herb that has a profound impact on a number of illnesses.
It is a species of the *Combrataceae* family, which has many species worldwide. It is located in the sub-Himalayan region of India, ranging from raw eastwood to west Bengal and Assam, and it reaches up to 1500 meters in the Himalayas. Fruits and leaves are used to treat a variety of conditions, including wounds, diabetes, ulcers, inflammation, constipation, and hepatoprotection.

AYURVEDIC CLASSIFICATION

Classification of Haritaki in Ayurveda Samhitas
Charak Samhita – Classified under *Prajasthapana, Jwaragna,Kasaghna, Arshoghna*
Sushrut Samhita – *Triphla, Amlakyadi, Parushakadi*
Ashtang Hriday – *HaritakyadiVarga, TriphlaVarga*
Ashtang Sangraha – *Arshoghna, Kushtghna, HidhmaNigrahana, Kasaghna, Garbhasthapan, Vayasthapan, Varnadi Gana*

In Nighantus
Bhavprakash Nighantu – *HaritakyadiVarga*16th Cent. A. D.) is written by *Acharya Bhava Mishra.*
Adarsh Nighantu – *HaritakyadiVarga*
Raj Nighantu – *AmradiVarga* (17th Century A.D.) is also known as *Abhidana Chudamani* or *Nighanturaja,* written by *Narhari Pandita.*
KayvadevNighanti – *AushadhiVarga*
Dhanvantari Nighantu – *GuduchyadiVarga (10th Century A.D.) iscomposed by Mahendra Bhougika.*
Shodhala Nighantu - (12th Century A.D.) is written by *Acharya Shodhala.*
Madanapala Nighantu -(14th century A.D.) is also known *as Madan Vinoda written by Madan Pal.*
Kaiyadeva Nighantu - (14th Century A.D.) is written by *Kaiyadeva*
Modern medical databases (PubMed, Scirus, Science Direct and Scopus)

***CHARAKA SAMHITA*: (only sutra sthana)**
Abhaya is one of the drugs under Falini *dravya* (which useful part is fruit). (Su. 1/82)
Haritaki is one of the ingredients of *vatanulomani yavagu* that helps carmination (passing of flatus). (Su.2/29)

Haritaki and 9 other drugs are anti-haemorrhoidal (*arshoghna*). (Su.4/12)

Haritaki along with 9 other drugs are mentioned as age-sustaining drugs. (Su. 4/50)

Haritaki along with some other drugs are mentioned as vegetable source of uncting substances. (Su.13/10)

In the next part of the same chapter, one with soft bowel gets purgation after taking *triphala* along with some other drugs, gets purgation after drinking hot water or fresh wine.
(Su. 13/66)

People suffering from leprosy, oedema and *prameha,* according to their condition should be uncted with innocuous uncting substances cooked with long pepper, *haritaki* or three fruits or with soup of grapes and *amalaki* and sour curd.
(Su. 13/92)

In the chapter *Santarpaniya adyaya* (oversaturation), preparation of *haritaki* i.e. *abhya prasha* is indicated in treatment of *santarpana*. (Su. 23/9)

SUSHRUTASAMHITA
Haritaki is mentioned in *Vachadi gana* along with some other drugs in chapter *Dravya Sangrahaniya*. (Su.38/26)

In the same chapter, *Haritaki* is mentioned in *Mustadi gana* along with some other drugs.(Su.38/54)

Similarly, *Haritaki* is mentioned in *Triphala* along with *Aamalaki* & *Bibhitaki.* (Su.38/56)

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In the same chapter, *Haritaki* is mentioned in *Amalakyadi gana* with *amalaki, pippali* & *chitraka* which is beneficial for eyes, *dipana, vrishya, kapha* & anorexia.(Su.38/60)
In the chapter on *Samsodhana samsamaneya, Haritaki* is mentioned in *Adhovagahar drava* along with some other drugs.(Su.39/4)

ASHTAANGA SANGRAHA
In the chapter on Vividha *gana sangraha Adhaya (haritaki*) is mentioned in *Vachadi gana* along with *Vacha, mustha, devdaru* and *ativisha.* (Su. 16/29)
In the chapter on *Jvara chikistha*, decoction of *haritaki* along with *devdaaru, sthira, sunthi, vaasa, dhatri* mixed with more of honey and sugar mitigate the five types of fevers. (Ci. 1/65) In the chapter on *Jirna jvara*, medicated ghee prepared with *haritaki* along with some other drugs cures fevers. (Ci. 2/10) In the same chapter medicated ghee prepared from *pathya* along with some other drugs acts like nectar in fever with predominance of kapha and in that caused by all three dosas. (Ci. 2/19)
Similarly, *haritaki* is also listed in *Aparaajita dhuma,* which may done in all types of fevers. (Ci. 2/126)

ASHTAANGA HRIDAYA
In the chapter on *Annasworoop*, properties of *haritaki* is described as *kashaya rasa*(all 5 rasas except *lavana), vipaka madhura, ruksha, laghu, medhya, agnideepaka, ushna virya, vayasthapaka, sara, vishama jwara, kaamalaa, arsha,* and *kapha vatajanya rogas*. (Su.1/157)
In the *Rasavediya adhyaya, haritkai* is mentioned along with some other drugs in *kashaya ganas*.(Su.10/31)
Haritaki is mentioned in *vachadi gana* along with other drugs.(Su.15/35)

Sharangadhar Samhita
Haritaki is one of the *Anulomana* drug described in ―*Dipana pachanadi* chapter. (Pra.kha.4/3-4)
In the next part of the same chapter while describing *Rasayana* drug, *haritaki* is one of the drug. (Pra.kha.4/13-14)
In the third part of the same chapter, *haritaki* is described as *Sukhrashosana Dravya* (dries of semen). (Pra.kha.4/17)

Interpretation and etymology of synonyms[9]
Haritaki- It provides a good complexion or colour.
Abhaya- It relieves fear against all diseases.
Avyatha- Its usage provides relief from many diseases.
Pathya- It cleanses the channels hence beneficial to the body.
Kayastha- Once used internally it always remains useful(fruitful) in eliminating diseases.
Putana-Cleanses the body by purgation.
Amrita- It has a rasayana property and rejuvenates the body and removes the diseases.
Hemvati- Grows (everywhere and) in *Himalayas*.
Chetaki- It cleanses the channels in the head and improves mental function.
Shreyasi- It is highly beneficial due to its good properties.
Shiva- It brings good fortunes.
Vijaya- It specifically conquers diseases.
Jivanti- It provides Rasayana (Rejuvenative) effect for a long time and thus increases longevity.
Rohini- It is useful for healing of wounds.

Table 1: Synonyms of *Haritaki*

Synonyms	*D.N.*[10]	*S.N.*[11]	*M.P.N.*[12]	*K.N.*[13]	*Bh.N.*[14]	*R.N.*[15]
Abhaya	+	+	+	+	+	+
Amogha	-	-	+	-	-	-
Amrita	+	+	+	-	+	+
Avyatha	+	+	-	-	+	+
Bhishagvara	-	-	-	-	-	+
Chekati	+	+	+	-	+	-
Chetanika	-	-	-	-	-	+
Devi	-	-	-	-	-	+
Divyaa	-	-	-	-	-	+
Haritaki	+	+	+	+	+	+
Haimavati	+	+	+	+	+	+
Himaja	-	+	-	-	-	-
Jaya	+	+	+	-	-	+
Jeevaniya	-	-	+	-	-	-
Jivanti	-	+	-	-	+	+
Jeevpriya	-	-	-	-	-	+
Jeevya	-	-	-	-	-	+
Jivanika	-	-	-	-	-	+
Kalika	-	+	-	-	-	
Kayastha	-	+	+	+	+	+
Nandini	+	+	+	-	-	-
Pathya	+	+	+	+	+	+
Pranada	+	+	+	+	-	+
Prapathya	+	+	+	+	-	+
Prathama	-	-	+	-	-	-
Putana	+	+	+	-	+	+
Ramturyaka	-	+	-	-	-	-
Rohini	+	+	+	-	+	+

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Ropani	-	+	-	-	-	-
Shiva	+	+	+	+	+	+
Shreyasi	-	+	+	+	+	+
Surabhi	-	+	-	-	-	-
Vayastha	+	+	+	-	+	-
Vijaya	+	+	+	+	+	+
Vratna	-	-	+	-	-	-

D.N. - *Dhanvantari Nighantu*, S.N. - *Shodhala Nighantu*, K.N. -*Kaiydeva Nighantu*, M.P.N. - *Madanpala Nighantu*, Bh.N. - *Bhavprakasha Nighantu*, R.N. - *Raj Nighantu*

STHAULYA

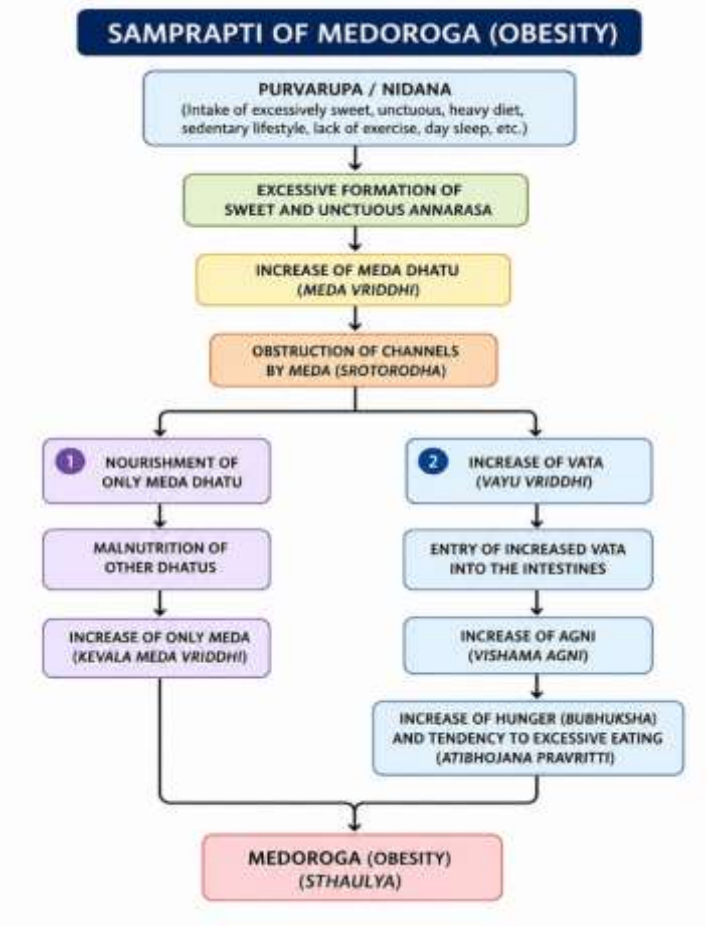
Obesity is a medical condition in which excess body fat has accumulated to an extent that it may have a negative effect on health. A body mass index (BMI) over 25 is taken into account overweight, and over 30 is obese[16].

The analysis of *Ayurvedic* classics reveals that Sthaulya is a *Santarpanjanya Vikara*. Consumption of *Guru, Snigdha, Madhura Rasa Aahara* along with lack of exercise and sedentary lifestyle results in excessive nourishment of *Medas* and derangement of *Agni* leads to *Aama* production which disturbs *Medodhatwagni* and block proper formation of other Dhatus. Thus improperly formed *Medodhatu* accumulates in the body leading to flabbiness of hips, abdomen and breast has been categorized as *Atisthaulya Roga*[17]

Haritaki performs *Sthaulya Samprapti Vighatana* because it possesses qualities such as *Kaphaghna, Medoghna, Deepana, Pachana, Ruksha, Laghu Guna, Katu, Tikta Rasa,* and *Ushna Veerya*. Because of its physiologically active components, which include saponins, phytosterols, chebulinic acid, and corilagin, several studies have also demonstrated the beneficial effects of *haritaki* on weight control, lipid control, and glycaemic control. Thus, include *harid* in a regular diet helps with digestion and is crucial in lowering obesity.

PATHOPHYSIOLOGY OF *STHAULYA*

The pathophysiology of *Sthaulya* is largely influenced by *Meda*, which is *Rasa* and *Meda Dushyadominant Vyadhi*. Thus, it is crucial to understand the various facets of *Meda*, which are explained below. The term "*Medais*" is literally derived from the root "*Jhimida Snehana*," which represents *Sneha*, Fat, Oil, etc. It indicates that the material with *Snigdhatva* characteristic is known as *Meda*. The body contains a lot of oily compounds, such as *Majja* and *Vasa*.[18]



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CAUSES

Avyayam, Divaswap, Sleshmal Aharsevan, Madhur Rasa Sevanleads to Sneha Meda Vardhan as per Madhav Nidan, Medorog[19]

Samprapti Ghataka

Dosha *- Kapha*

Dushya*- Meda*

Agni *-Jatharagni, Dhatvagni (Medodhatvagni)*

Srotas*-Rasavaha, Mansavaha, Medovaha*

Strotodushti*-Medovaha*

Adhisthana-Whole body*(Vapavahan* and *Medodhara Kala)*

Udbhavasthana*-Amashya*

Prasara*-Medadhatu*

Rogamarga*-Bahya*

Ama *-Jatharagni Vaigunyata* and *Dhatvagni Mandhya Janit*

Vyaktisthana*-Sarvanga, specially* in *Sphic, Udara* and *Stana,Gala*

MATERIAL AND METHODS

Source Of Data :

Botanically identified *Terminalia chebula Retz*. Belonging to family *Combretaceae*, its fruit was procured from Keshav *Srushti ,Uttan* and identified by Department of *Dravyaguna,* K.G.Mittal Ayurved College, Charni Road, Mumbai, India. Authenticated by Agharkar Research Institute,Shivajinagar Pune in January 2025 and standardized by Alarsin pharmaceuticals, Andheri, Mumbai, India in March 2025.

Source of the patients :

Patients were selected after subjection them through clinical examination from OPD of Dravyaguna Department of K.G. Mittal Ayurved College, Charni Road, Mumbai, India.

Preparation of Medicine

Raw material procured from Keshav Srushti ,Uttan and churna preparation was done. After standardization and authentication from authentic laboratory as per GCP. Fruits were cleaned and kept at concerned department museum. Later It was crushed into *Bharad* form and Churna preparation was done. Haritaki Churna used in research or pharmaceutical preparation, 80 mesh is commonly followed for uniformity and standardization.

Haritaki Phala

Haritaki Phala Bharad

Haritaki Churna **Making**

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Haritaki Churna

Place of work
Clinical trial was done at Dravyaguna department of K.G. Mittal Ayurved College ,Mumbai, India.

Methods of collection of data
Written and informed consent was taken of the enrolled patients based on the classicals signs and symptoms of Sthaulya, the patients screening for inclusive criteria irrespective of sexes between the age group 18-65 years were selected from the OPD of Dravyaguna department of K.G. Mittal Ayurved College, Mumbai, India.Pilot study was carried out on 5 patients according to inclusion and exclusion criteria.

Drug Administration Details

1.	*Drug*	*Harikati Fruit*
2.	*Kalpana*	*Churna*
3.	Dose	3gm for 3 month
4.	*Sevan Kala*	*Pragbhakta*
5.	*Anupan*	*Sukhoshna Jala*
6.	Mode of Administration	Oral

Inclusive Criteria
1. Patients with classical symptoms of *Sthaulya* as mentioned in *Ayurvedic Samhitas*.
2. Patients irrespective of gender.
3. Patients in the age group of 18 to 65 years.
4. Patient with BMI ranging between 25 to 40 kg/m2.

Exclusive Criteria
1. Age below 18 yrs & above 65 yrs of age.
2. Patient with immunodeficient disease and systemic illness.
3. Pregnant or lactating women.
4. BMI> 40 kg/m2
5. Medicolegal cases, patient on prolonged medication like corticosteroids, NSAIDS, etc

Plan of study
In this pilot study 5 patients were selected as per inclusion and exclusion criteria.3gram of *Haritaki Churna* has been given to each patient twice before meal with *Sukhoshna Jal* for 3 months.

Name of Center	Concern Institute OPD
Written Consent	Before Starting Treatment
Number Of Patients	5
Drug	*Haritaki*
Kalpana	*Churna*
Dosage	3gram before meal twice a day
Sevan Kala	*Pragbhakta*
Period Of Clinical Study	90 days
Mode Of Administration	Oral
Follow Up	Every 15 days till completion of 90 days

Objective Criteria
1) Calculation of BMI
2) Weight in kg – Weight measured using only the same standard electronic weighing machine.
3) Waist circumference in cm – The waist circumference will be measured midpoint between the top iliac crest and the lower margin of last palpable rib in mid axillary line.
4) Hip circumference in cm -will be measured at a level parallel to the floor, at the largest circumference of buttocks.
5) Mid-upper arm circumference (MUAC) in cm
6) Lipid Profile.

Subjective criteria
Angagandha,
Swedadhikya,
Kshudh adhikya,
Pipasa adhikya,
Kshudra shwasa,
Nidra adhikya

Grades

0	Absent
1(+)	Mild
2(++)	Moderate
3(+++)	Severe

OBSERVATION
In this all 5 patients completed the study. In this 4 patients were female and 1 was male.
Effect on objective criteria was also statistically significant.

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Demographic detail of patient selected in pilot study :

SN	Registration No.	Age	Sex	Education	Economic Status	Diet	Addiction	Family History	*Prakriti*	*Agni*
1.	202507254	40	F	Literate	Middle	Non Veg	Yes	No	KP	*Manda*
2.	202506000	42	F	Literate	Middle	Non Veg	Yes	No	KP	*Tikshna*
3.	202506070	38	F	Literate	Middle	Veg	Yes	No	VK	*Tikshna*
4.	202506561	44	M	Literate	Middle	Veg	Yes	No	VK	*Manda*
5.	202506179	37	F	Literate	Middle	Non Veg	Yes	No	KP	*Manda*

Subjective criteria with gradation before and after treatment

SN	*Angagandha*		*Swedadhikya*		*Kshudh adhikya*		*Pipasa adhikya,*		*Kshudra shwasa,*		*Nidra adhikya*	
	BT	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**
1.	3	2	3	2	3	2	3	2	3	2	3	2
2.	3	2	3	2	2	2	2	2	2	2	4	2
3.	2	2	2	2	2	2	2	2	2	1	2	1
4.	2	2	2	2	2	2	3	2	2	2	2	2
5.	2	2	2	2	2	2	3	2	2	2	3	2

Objective criteria of patient with grades before and after treatment

SN	Height	Weight		BMI		WHR(Waist Hip Ratio)		WC(Waist Circumference)		MC(Mid Arm Circumference)	
		BT	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**
1.	154	69.8	66	29.4	27.8	0.8	0.85	90	88	30	25
2.	154	92.7	88	39.1	37.1	0.93	0.89	120	105	39	30
3.	149	78	76.2	35.1	34.2	0.89	0.9	114	100	32	25
4.	161	71	68	27.4	26.2	1.02	1.02	101	90	31	24
5.	153.5	79.1	77	33.6	32.9	0.97	0.92	110	96	32	28

Laboratory parameters with grades before and after treatment :

SN	LIPID PROFILE							
	Sr. Cholesteorl		Sr. Triglyceride		Sr. HDL		SR. LDL	
	BT	**AT**	**BT**	**AT**	**BT**	**AT**	**BT**	**AT**
1.	186	150	64	50	58	46	115	94
2.	159	140	139	120	49	45	79	60
3.	139.25	130.2	92.15	80	51.47	48	69.35	66
4.	265	200	212	190	42.8	46	179.80	150
5.	202	162	92	70	37	45	147	130

DISCUSSION

According to the grading, five patients were chosen for the pilot study in this investigation, and the following observations were made and documented in the before and after therapy charts. Furthermore, *Lekhana Karma* of *Haridrain Medodushtialso Malashodhan* has been observed in all five patients, and the HDL of the patients has been restored to normal.

PROBABLE MODE OF ACTION OF *LEKHANA HARITAKI* IN *STHAULYA*

In *Sthaulya, Medodhatvagni Poshakansha* stated at *Jatharagni* level is vitiated. *Medodhatvagni* does not function properly and leads to accumulation of fats in depots and *Kshay* of *Utar Dhatu*.Assessing the effectiveness of *Haritaki Churna Karma* on Sthaulya was the study's goal. *Kaphaghna, Medoghna, Deepana, Pachana, Ruksha, Laghu, Guna, Katu, Tikta Rasa,* and *Ushna Veerya* are among the qualities of *Haritaki*, which performs the *Sthaulya Samprapti Vighatana. Kledak Kaph* and *Pachak Pitta* are the doshas involved in *Sthaulya. Rasavaha, Medovaha*, and other rottas are engaged.

Laghu Gunatmak works on the *Mala* of *Rasa Dhatu*, which is *Kaph (Kleda),* while *Swedavaha* and *Haritaki* form *Ruksha*. Because *Haritaki* is *Katu-Tikta Rasatmak* and is listed in *Ajirna*, it results in the *Karma* that is mentioned in *Tikta Rasa*, such as *Deeppan, Pachan, Kledhara,* and *Medohara.*

Jathargani is corrected by *Deepan Pachan Karma*, which results in *Vatanuloman. Ushna Veerya* and *Katu Vipak* of *Haritaki* have been found to cure *Vibandha, Malabadhata* (constipation) in *Sthaulya Rogi,* which results in *Srotoshodhan*. With the properties of *Ruksha, Laghu, and Lekhana* in addition to the aforementioned properties, it corrects the *Medodhatvagni*

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Mandya. As *Lekhana* of accumulated *Medodhatu* corrects the aetiology of *Sthaulya,* it may be *Haritaki's* most likely mechanism of action in *Sthaulya.*

CONCLUSION

From the above discussion it is observed that all five of the patients chosen for this study exhibit *Haritaki churna*, *Lekhana Karma*, and even *Mala Shodhan Karma*. Comparing the results before and after treatment reveals a considerable difference, and the study can be chosen for more in-depth research with a larger sample size and a longer time frame than one month. It may tend to perform *Lekhana* of accumulated *Medodhatu* and cure the pathophysiology of Sthaulya since it heals the *Medodhatvagni Mandya* and possesses *Ruksha*, *Laghu*, and *Lekhana* properties along with Anuloman Karma.

REFERENCES

1. *Agnivesha, Charaka Samhita, edited by Vaidya Yadavaji Trikamji, Chaukhambha Subharati Prakashan, Varanasi reprint 2011, Sutrasthana 21/5-6,8-9,20-21,25; page no.411, (31)414,415*
2. *Harisson's Principles of Internal Medicine, Braunwald, Kasper et.al. 17th Edition, New York: McGraw Hill: 2008.*
3. *Bhavaprakasa Nighantu, Vol-1 Edited by Dr.S.D.Kamat, Haritakyadi Varga, Shloka No. 1/5, Chaukhamba Sanskrit Pratishthan:Delhi, 1" ed,2018,p.1*
4. *Agnivesha Charaka Samhita Edited by Dr. Brahmananad Tripathi Vol.I, Sutrasthana. 25/ 40, Chaukhamba Subharati Prakashana Varanasi, 2006;p.454*
5. *Dr. Shailaja Srivastava,'Jivanprada' hindi commentary on Sharangdhara Samhita of Acharya Sharangadhar, Sharangdhra Samhita, 1" Part 4/3-4, Chaukhambha Orientalia, Varanasi, 2009.*
6. *Singh Rajani, Rath Sudipta Kumar. Review of Haritaki (tTrminalia Chebularetz.) as an ekal dravya chikitsa in Brihatrayee. Int J Ayu Pharm Res [Internet]. 2021Feb.9 [cited 2021 Jul.20];9(1):33-0. Available from: https://ijapr.in/index.php/ijapr/article/view/1762*
7. *Medscape.Is Obesity a Disease or a Choice? 2018 July 05. [last cited 14 February 2019]. Available from: https://www.medscape.com/viewarticle/898921*
8. *Meher Sudhanshu et.al. Pharmacological Profile of Terminalia chebula Retz. and Willd. (Haritaki) in Ayurveda with Evidences. RJPPD.2018; 10(3):115-124.*
9. *Bhavaprakasa Nighantuh Vol-1 Edited by Dr.S.D.Kamat, Haritakyadi Varga, Chaukhamba Sanskrit Pratishthan: Delhi, 1" ed, 2018; p.5-6*
10. *Dhanvantari Nighantu" Sanskrit Text And English Translation, Vol-1, Commented by Dr. S.D. Kamat, Guduchyadi Varga, Shloka No. 209-210, Chaukhamba Sanskrit Pratisthan: Delhi, 2011;p.76*
11. *Acharya Shodhala, "Shodhala Nighantu", Text with English-Hindi Commentaries, Commentated by Prof. (Dr.) Gyanendra Pandey et al.. Guduchyadi Varga, Shloka No.231-233, Chowkhamba Krishnadas Academy: Varanasi.1" ed, 2009;p.45*
12. *Madanpala Nighantu, English Translation by Dr. J.L.N.Sastry. Abhayadi Varga, Shloka No. 20-21, Chaukhambha Orientalia: Varanasi, 2017;p.4*
13. *Kaiyadeva Nighantu. (Pathyapathya-Vibodhakah) Edited and Translated by Prof. Priyavrata and Dr. Guru Prasada Sharma, Aushadhi Varga, Shloka No.221, Chaukhambha Orientalia: Varanasi, 2017,p.45*
14. *Bhavaprakasa Nighantuh Vol-1 Edited by Dr.S.D.Kamat, Haritakyadi Varga, Shloka No.6-7, Chaukhamba Sanskrit Pratishthan: Delhi, 1" ed,2018;p.2*
15. *Sri Narhari Pandit, Raj Nighantu, (English Translation With Critical Commentary) Edited By Prof. K.C.Chunekar et al., Amradi Varga, Shloka No-214-215, Chaukhambha Orientalia: Varanasi, 2017;p.621*
16. *WHO. Obesity & overweight. 2018 February16. [last February 2019]. Available from: cited 14 https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight*
17. *Shashtri Kashinath. Charak Samhita of Agnivesha. Sutra Sthana. Ch.21, Vers 4. Vol. 1. Vidhyotini Hindi Commentary. Varanasi: Chaukhambha BhartiAcademy; 2017. P. 409*
18. *Professor Ramharsh Singh, Kayachikitsa ,2nd Part , Chaukhambha Sanskrut Pratisthan,Medoroga Adhyay Medorogasamprapti ,pg no. 311*
19. *Brahmanand Tripathi, Madhav Nidan, Chaukhambha Surbharti Prakashan, Uttarardha, Adhyay 34 Medoroganidan, pg no.35*