AN UNCONTROLLED, OPEN, PARALLEL STUDY TO EVALUATE THE KARSHANAM & BRIHANAM PROPERTIES OF TILA TAILA ABHYANGA IN STHOULYA & KARSHYA W.S.R. TO PRAVRUTTIRUBHAYASSYA TU.

Dr. Krishna Rathod*a, Dr. Manoj Nimbalkarb and Dr. Narayan Sabuc

1P.G. Scholar Ayurved Samhita & Siddhant, R.A. Podar Medical College, Worli, Mumbai.

*a)Corresponding Author: Dr. Krishna Rathod
P.G. Scholar Ayurved Samhita & Siddhant, R.A. Podar Medical College, Worli, Mumbai.

INRODUCTION
The normal natural tendency of human body is as such that doshas, dhatus and malas increase upto a certain limit only. But when the limits have been crossed, the tendency of body becomes to reduce the doshas dhatus and malas and vise versa. STHULA person desires to KRISHA and Krisha person desires to Shhula. But when kapha dosha increases one feels drowsy then there is natural tendency to awaken around which is kapha virodh (anti kapha or kaphagna) at the same time vata dosha increases i.e. vata vruddhi. When ushna, tiksa guna dravyas due samana of both dosha. Pitta dosha increases the tendency of body becomes to consumes shita dravyas both tendency induced. Abhyanga performed as preventive therapy or therapeutic procedure or even as rejuvenative therapy also. It is applied all over the body Tila taila Abhyanga is specially indicated for specifically in Sthoulya and Karshya.

Tila taila has unique explanation in Ayurveda. That is why it is elaborated as pravruttirubhayassya tu. As per SAMANYA VISESH SIDDHANTA similar bhav padarthas (elements) in the body increased by such qualitative lakshana still in normal body why there is enormous growth of such elements due to similar qualitative bhav padarthas cÉëmÉÉhÉ 10ûMûÉ. Mentioned. This explains that at the same time that bhavs are increased (Vriddhi) due to samanya, other side reduction or decrease (Kshaya) due to visesa. This is called प्रवृत्तिरुब्धयस्य तु तिलाताल्याब्यंगः प्रावृत्तिरुब्धयस्य तुलयेव तिलाताल्याब्यंगः नारिख हुष्ट्न्यदक्षताः प्रकोष्ठानां शास्त्रां वर्णितां.

MATERIAL AND METHODS
Material: 1. Literary: For the present study the primary sources of literature were different classical text books of Ayurveda and different Indian journals. 2. Assessment tools multidimensional scoring system. Medicines (Drug - Tila taila.) a) Sukhoshna Tila Taila Abhyanga 4. Total no. of patients is 60 from our Academic institute.

METHODOLOGY
1. Methods of Tila Taila Abhyanga as per procedure:
2. Methods of collection of Data
   a) A clinically patients attending the OPD and IPD of our Academic Institute was made and patients fulfilling the criteria of diagnosis as per the Performa were selected for the study.
   b) Clinical evaluation of patients was done by collection of data through history, physical examination, and laboratory tests. c) Review of literature was collected from Library and from Authentic Research Journals, Websites, Digital Publications etc. d) The data which were obtained by the clinical trial were statistically analyzed.

Source of Data: Patients attending the OPD And IPD in our Academic institute selected for the study.

3. Methods of Conduct of trial: a) Sample size: A total of 60 subjects fulfilling the criteria for diagnosis of Sthoulya and Karshya irrespective of their age, sex, religion, economic status were selected for the present study by simple random sample technique and they were randomly divided into two groups with 30 patients in each group. Group A: This group was labeled as —Group A-Al in which 30 patients were included and treated with Tila Taila Abhyanga. Group B: This group was labeled as —Group B-Al in which 30 patients were included and treated with Tila Taila Abhyanga.

   b) Design of the study: Randomized uncontrolled open parallel trial. Screening of patients for inclusion Assessment of textual of Sthoulya and Karshya. In patients Group allocation by Randomization Trial group (Group-A) Intervention by Tila Taila Abhyanga and Pathy-Aphtya Trial group (Group-B) Intervention by Tila Taila Abhyanga and Pathy-Aphtya.
Drugs and Doses: Drug: SUKHOSHNA TILA TAILA. 
Dose: quantity sufficient. Duration: 20 to 25 minutes.

Follow up: Follow up taken every week (7 days) for TOTAL 4 Weeks.

c) Criteria for diagnosis: 1. Subjects presented with lakshanas of Sthoulya and Karshya as per Ayurvedic texts. 2. Detailed history was taken and clinical examinations were done on the basis of a special Performa incorporating all the Lakshanas of the Sthoulya and Karshya disease. 3. The routine hematological examination such as Hb, CBC etc. were done to rule out systemic pathology.

d) Criteria for selection: Inclusion Criteria: Age: 18 to 60 years, Sex: Male and Female, Presence of clinical features of STHOULYA AND KARSHYA were sorted out, processed further by subjecting to varied statistical methods, and presented with tabular form in the following sequence. A) General observations viz. age, sex, religion, etc B) Results of therapy evaluated based on improvement in signs and symptoms.

Clinical Lakshanas in Ayurvedic text for assessment

The changes observed in Lakshanas were assessed by adopting suitable scoring method by using multidimensional scoring system. The efficacy of the therapy will be assessed on the basis of subjective criteria of STHOULYA AND KARSHYA before and after treatment by multidimensional scoring system adapted for easier statistical analysis of the result. Scores for before and after treatment will be given as clinical tools. The details of the assessment of Lakshanas are mentioned and attached with C.R.F- STHOULYA AND KARSHYA SUBJECTIVE SCORING CRITERIA gradation, The results are drawn by assessing the lakshanas of Sthoulya and Karshya as per Ayurvedic texts.

Resentation of Data

The data collected and compiled from this clinical trial were sorted out, processed further by subjecting to varied statistical methods, and presented with tabular form in the following sequence. A) General observations viz. age, sex, religion, etc B) Results of therapy evaluated based on improvement in signs and symptoms.

Statistical Analysis

Null Hypothesis (H0)::- TILA TAILA has either Karshanam or Brihanam properties. Alternative Hypothesis (H1)::- TILA TAILA has both Karshanam and Brihanam properties. In the present study the effect of Tila Taila Abhyanga on 30 patients in Group-A and on 30 patients in Group-B were analyzed properly. Scores of Lakshanas in each group separately were analyzed by comparing before treatment with after 28 days (after treatment) by using Wilcoxon match pairs test (i.e. non parametric test). The results of both group after treatment was analyzed by p-value statistics.
SCOPE: In the present study, no side effects were observed in both Trial group. The plus point observed in a case of Ayurvedic management, which is really benefit to the patients and is of vital importance in view of global acceptance of Ayurveda. The present work was carried out with institutional research criteria and was undertaken with some specified parameters only, with many of unavoidable limitations. However, the results are quite encouraging. Still to come to concrete results, large number of patients should be taken and duration of Tila Taila Abhyanga procedure should be more than one month in the considerations for further study. The topic is open to the research scholars for further study.