

# Role of Life Style and Other Factors in Etiopathogenesis of *Malavstambha* (Constipation)

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**Abstract:** Background: to investigate the association between intestinal constipation, lifestyle and eating habits in adult aged fifteen to seventy years old. Methods: In this study with a sample sixty adult aged fifteen to seventy years old. Excess weight was classified by the body mass index. Variables that could be associated with constipation, such as maternal constipation, lifestyle, food and water intake, were selected. Considering the clinical importance and the impact intestinal constipation can cause during adulthood, the present study aims to investigate the association between intestinal constipation, lifestyle and eating habits among adult. Results: the intestinal constipation was express in percentage of incidence different age, sex, occupational, Nature of work, rural urban & Ahar, Koshta, dehaprakriti. Conclusion: an association between intestinal constipation and unhealthy habits, such as non-consumption of fruits and vegetables, and regular consumption of fried food was observed. Preventing intestinal constipation requires changes in the lifestyle and eating habits of the adults.

**Keywords:** Constipation, Eating habits, Lifestyle

## 1. Introduction

Today is the era of modernization and fast life. Everybody is busy and living stressful life, changing of life style of modern human being has created several disharmonies in his biological system. Advancement of busy, professional and social life, improper eating habits, continuous sitting work in office (1).

Charkacharya advised this in 'Nidansthana' but because of fast life or changing life style, society can't follow these concepts about 'Aahar' & 'Vihar' (e.g. Pav or Bread, fast food, Chinese, RatriJagarana.) Hence now a day's maximum people are suffering from problem of constipation i.e. *Malavstambha*. In Ayurvedic samhitas, in 'AshtangHriday', *Malavstambha* mentioned as a *lakshana*. Many types of diseases were caused by *Malavstambha* (2). Constipation may be associated with an organic local lesion or generalized systemic disease. In the majority of cases constipation is a functional disorder caused due to delay in the passage of fecal matter or due to an insufficient bulk of the feces.

The physician should first seek the nature of the disease, the derangement caused by the *Dosha* and *Dhatu*, the organ where the derangement is manifested and the causes which are responsible for this derangement, begin to start the disease. The physician examining the patient must consider, the condition of the *dhatu* and the *malas*, the place of his residence, his strength and the power of digestion, body constitute and diathesis, the age, the mental state, the habit and idiosyncrasies, the food usually taken and other minute items related to the patient and then arrive at a diagnosis and commence the treatment. One who will follow their method will never commit any mistake (3).

*Doshas* get vitiated by external or internal factors causing imbalance in them in the form of aggravation, depletion or

both. Abnormal variation and functioning of *dosha* is the root cause of development of disease (4).

The traditional Indian system of medicine, 'Ayurveda' characterizes by the principle of treating not just the symptoms superficially but the actual root cause of the disease which is situated deep inside the body and mentioned Nidanparivarjan (avoid the causes of diseases) (5).

## 2. Material and Methods

Total 60 patients of *Malavstambha* were registered from O.P.D. of V.N.H.T. Ayurvedic College, Rahuri Factory fulfilling the clinical diagnostic criteria of the disease based on Ayurvedic & modern parameters. Patient were selected the specific age group i.e. 15 to 70 years, Selection was irrespective to religion, occupation, and habitat, Patients with irrespective to sex & prakriti, Patients with *vatanubandhitmalavstambh* *lakshane*. Patients having *kshaya*, Patients having Hypertensive, Renal failure, Diabetes Mellitus, *Garbhini*, were excluded.

## 3. Observation and Results

The demographic data of 60 registered patients of *Malavstambha* revealed that maximum patients (25%) had *VataKaphadeha prakriti* followed by 23.33 % *vata-Pittadeha prakriti*. Maximum (23.33%) patients belong to age group of 15-25 years and maximum patients were males (71.66%). *Aahar* wise maximum patients were mixed (78.33%). Majority of patients were housewives (28.33%), maximum patients were from urban area (85%). Maximum patients had history of sedentary type of work (56.66%). *Koshtha* wise 48.33% patients were having *Krurakoshtha*.

**Table 1:** Showing age incidence

Age	No. of Patients	Percentage
15 - 25 Yrs.	14	23.33%
25 - 35 Yrs.	8	13.33%
35 - 45 Yrs.	8	13.33%
45 - 55 Yrs.	12	20.00%
55 - 65 Yrs.	7	11.66%
65 - 75 Yrs.	11	18.33%
Total	60	

**Table 2:** Showing sex incidence

Sex	No. of Patients	Percentage
Male	43	71.66%
Female	17	28.33%
Total	60	

**Table 3:** Showing incidence of occupation in Malavstambha

Occupation	No. of Patients	Percentage
Gruhini	17	28.33%
Service	12	20.00%
Student	13	21.66%
Worker	7	11.66%
Business	5	8.33%
Retired	6	10.00%
Total	60	

**Table 3:** Showing Nature of work in Malavstambha

Nature of Work	No. of patients	Percentage
Sedentary	34	56.66%
Moderate	19	31.66%
Hard	7	11.66%
Total	60	

**Table 4:** Showing incidence of rural and urban in Malavstambha patients

Habitation	No. of Patients	Percentage
Urban	9	15.00%
Rural	51	85.00%
Total	60	

**Table 5:** Showing Aharin Malavstambha patients

Aahar	No. of Patients	Percentage
Vegetarian	13	21.66%
Mixed	47	78.33%
Total	60	

**Table 6:** Showing Koshtain Malavstambha patients

Koshta	No. of Patients	Percentage
Mrudu	8	13.33%
Madhyam	23	38.33%
Krura	29	48.33%
Total	60	

**Table 7:** Showing incidence of *dehaprakriti* in Malavstambha

Prakruti	No. of Patients	Percentage
Vatapitta	14	23.33%
Vatakapha	15	25.00%
Pittakapha	7	11.66%
Pittavata	12	20.00%
Kaphavata	12	20.00%
Total	60	

## 4. Discussion

Maximum patients had *malavstambha* between 15-25 year age group, however, patients in different age group i.e. 45-55 year and 65-75 year were maximum 20% and 18.33 % respectively. Constipation is a common functional gastrointestinal disorder, with prevalence in the general population of approximately 20% (4). In the elderly population the incidence of constipation is higher compared to the younger population i.e. student which is 21.66%, with elderly females (Housewives) 28.33% suffering more often from severe constipation. Nature of work wise maximum patients were sedentary which is 34 (56.66%). Studies showed marked occupation and nature of work difference in the incidence rate. Housewives have tendency to develop *malavstambha* due to some factors like less physically active, emotionally unstable, pregnancy and ultimately produces the *Malavstambha*. So majority of patients were housewives and previous study showed *malavstambha*. Maximum patients were from rural area. Unawareness of roughage diet and less intake water are more common in rural people. Maximum patients had history of sedentary type of work. Maximum patients had *vatakapha* (15, 25%) *deha Prakriti* followed by *vatapittadehaprakriti* (14, 23.33%). Thus most of the patients had *vata* dominant *prakriti*. According to *Charaka*, *malavstambhipurusha* have *vata* dominant *prakriti* (6).

As maximum patients had *krurakoshtha* (29, 48.33%) in general is suggestive of *vata* dominancy which is prime factor for *malavstambha*. Majority of the patients had day sleep and late night sleep (*ratrijagran*).

To understand the causes of constipation, it helps to know how the colon (large intestine) works. As food moves through the colon, the colon absorbs water from it while forming waste products known as stool. Muscle contractions in the colon push the stool toward the rectum. By the time it reaches the rectum, the stool is solid because most of the water has been absorbed. The hard and dry stools of constipation occur when the colon absorbs too much water or if the colon's muscle contractions are slow or sluggish. Slow contractions cause the stool to move through the colon too slowly, allowing too much water to be absorbed.

Lack of physical activity (*avyayama*, *diwaswapa* and *ratrijagaran*), *Agnimandya*, lack of fluid intake and stress were noted as major cause of *malavstambha*. The energy expenditure in human being is under volitional control of physical activity. Due to restricted physical activity and excessive fermented food, dry food, *ratrijagaran*, metabolism diminishes and it gradually develops *malavstambha*.

A fibre-rich diet accelerates transit time, softens stool and increases stool weight, but a diet that is poor in fiber can induce constipation (7).

Delayed colonic transit is associated with small and hard stool. That is difficult to evacuate. It has been found that fecal consistency and water content significantly correlate with colonic transit time (8).

Relaxed anal sphincters, long time of sitting or squatting could make anal opening larger, the larger opening brings out more leaking gases including water; the more leaking water gases lead to more desiccated stools; fewer physical activities could result in uneven oil distribution in stools, though the total amount of edible oils (fats) are sufficient. That's why older people have higher probability to have constipation than younger adults and due to same cause for some infants or children have constipation (9).

Most of the subjects were leading sedentary life style, not doing any type of exercises. Lack of the muscle tone as a result of inactivity, decreases the facilitative function of the abdominal and pelvic floor musculature in evacuating stool and causes constipation especially in geriatric people (10).

The diet taken during constipation must be easily digestible, Plenty of fruits, vegetables, salads, freshly cooked food, Including probiotic foods like curd inand chew food thoroughly. Eating Vitamin C and Magnesium rich your daily diet. During eating keep yourself in present mind and pay full attention on food (11).

## 5. Conclusion

The sedentary life style, lack of physical exercise, faulty dietary habits (excessive intake of fermented food, dry food) and urbanization precipitate the disease *Malavstambha*. *VataKapha prakriti* persons were found more prone to *Malavstambha* so they should be advised proper diet regimens and exercise. Lifestyle changes, such as daily exercise and drinking enough fluids, can help with constipation relief.

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