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Study On Weight Loss Using A Combinatorial Approach Of (Diet, Yoga, And Dhauti)

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Abstract

Scientists have thoroughly studied numerous approaches to weight reduction, and some of them are being used among overweight or obese people. This includes diet, exercise, yoga, barometric surgery, intermittent fasting, etc. Despite the successes and failures of each approach, a one-size-fits-all approach may not be practical for individuals with regular daily routines who aim to shed excess weight to prevent future health issues. The downsides of some methods, such as dieting and intermittent fasting, include headache, dullness, and excessive cravings. The ease and practicality of these approaches for typical working individuals, along with the continuation of daily routine, are challenging.

In the present case series, 21 participants (Ages 18 to 60 years) were willing to embark on a weight loss journey without significantly disrupting their normal lives. Each individual revealed their history, focusing on the cause of weight gain. Also, their unique Prakriti (*Vata, Pitta, Kaph*) and weight were assessed. Further, they have been given a customized combinatorial approach, which contains changes in their lifestyle, diet, and yoga practice, and they followed the recommended Dhauti technique as per Prakriti. After the follow-up, each case was assessed based on their BMI, body weight, and subjective psycho-physical changes. This Combinatorial Approach (Dhauti, Yoga, and Diet) yielded promising results for all individuals, leading to healthy weight loss with fewer challenges. Furthermore, subjective psychological status also improved.

Key-words: Weight loss, Dhauti, Diet, Yoga, Holistic, Rejuvenation

Introduction:

Humans possess a unique trait among all species on Earth—our stomach can accommodate food more than required to satiate our cravings. Overeating, an irregular lifestyle, leads to challenges like being overweight. Obesity, or '*Sthaulya*,' is notably associated with

sedentary lifestyles and is recognized as a metabolic disorder (1). This becomes social awkwardness to be obese and to carry the impression of being inefficient. Hence, it is very much required socially to be in proper shape.

There are approaches like a low-carb diet, a low-fat diet, and intermittent fasting. These approaches result in high cravings, dullness, and sometimes headaches. Similarly, heavy gym exercise increases cravings and may result in more than food intake. Further stopping exercise may result in additional weight gain and lethargy. Hence, an approach that can handle these challenges continues your daily activities is required.

Various Approaches to managing obesity

1. In *Charak Samhita* (22/18), *Langhana* therapy (1) has been advised for managing obesity.
2. Intermittent fasting is another approach (2), which have some adverse effects, as mentioned
3. Eating habits and hypocaloric diets such as high protein, low carbohydrate, low-fat diet, high fiber diet, and very low-calorie diet (3)
4. Anti-obesity drugs intake such as adrenergic and serotonergic agents, drugs affecting fat absorption like lipase and amylase inhibitors, surgery (3)
5. Increased physical activities through running, walking, and gymnasium(3)
6. Daily Yog
7. Barometric Surgery

The effect of fasting may cause negative emotions (depression, anxiety, anger, irritability, fatigue, and tension) and decrease positive emotions and vitality(4). Fasting increases the anger(5). Gym exercise has side effects like sudden cardiac death, uneven strenuous actions, injuries in gyms, and addiction to exercise(6). Many types of research have been carried out on *Dhauti*. However, very little research has been conducted on ‘how if *Dhauti* is done with excessive frequency, it will cause harm.’ Hence, the frequency of *Dhauti* is adjusted to the extent of craving in this research.

Also, no research has shown a combination of *Dhauti* and diet. Very high frequency of *Dhauti* may cause an imbalance in sodium and potassium ion concentration of the body, Dental erosion, and reduction in hunger to a very high extent(7). It is very important to know the correct frequency of *Dhauti* for individuals.

So, one approach may not work alone. Hence, a combinatorial approach is used. In light of this, the wealth of knowledge embedded in our traditions holds great significance for the well-being of our society. One such traditional practice that stands out is yoga, which encompasses various techniques, like 'Shuddhi Kriyas.', *Yogasan*. These age-old practices offer valuable insights and methods that can effectively contribute to healthy weight reduction, increase metabolism, and manage hormonal concentration and overall health rejuvenation.

The hereditary (*bij dosha*), Diet regimen, and psychological factors cause 'Sthaulya' (obesity) as per *Charak Samhita* and(21/26) (1). One more main cause of obesity is a long-term imbalance between calories consumed and calories expended (8). A high-fiber, low-carb diet with a limited needed quantity of carbs and a moderate quantity of protein can support weight loss.

Also, maintaining good digestion and cleaning the stomach with fibrous material daily will help maintain GI health. Hence, every day in the evening, fibrous fruits or seeds are consumed along with water to help proper defecation.

Materials and Methods

Pre-requisites and selection of Health Aspirants:

Health aspirants aged (18 to 60 years) who are overweight/obese and approached the author to reduce their weight or who have been advised by physicians to reduce their weight have been selected for this study. Proper consent was obtained from them after they had explained the complete process. Data provided in the results is only from those health aspirants who have consented to use their data for research purposes without disclosing their names.

Assessment Tools:

- Electronic weighing machine(9)
- Measuring Tape used to measure height and waist
- 10-point Scales of Hunger, Anger, Enthusiasm
- *Prakriti, tridosh* questionnaire
- Tongue and skin color were examined through visual observation
- Every month interview

Individual Analysis

We have collected detailed information about health aspirants. The health aspirant's history, current diet, past diet when weight increased, exercise habits, lifestyle, body cleaning habits, weight, height, and professional background are all included. This is to determine what factors are associated with weight gain. A self-reporting checklist was shared with the health aspirants for this purpose, where each entered their information, followed by researchers' open-ended interview with them.

Also, a questionnaire has been shared to determine individual *Prakriti/Tridosh (Vata, Pitta, Kaph)*. This questionnaire provides insight into the individual's body type (10). It was useful in developing individual diet plans, yoga routines, and *Dhauti* prescription regimens.

Table 01: The template to capture the Vata pitta kaph characteristics/profile is as follows

Type	Fields	<i>Prakriti</i> Type- options
Behavioural Profile	Achieving Goals	Distract Easily, Focussed, Slow and Steady
Behavioural Profile	Eating Speed	Quick, Medium, Slow
Behavioural Profile	Finances	Doesn't Save-Spend Quickly, Saves Big, Saves Regularly Accumulates Wealth
Behavioural Profile	Friendship	Quick And Short term, Longer Occupational Related, Long Lasting
Behavioural Profile	Food and Drink	Warm, Cold, Dry, and Warm
Behavioural Profile	Hunger Level	Irregular, Needs Food When Hungry, Can miss meals
Behavioural Profile	Donation	Small Amounts, Nothing or Large Amounts, Regular donations and Generous
Behavioural Profile	Works Best	While Supervised, Alone, In Groups
Behavioural Profile	Reaction to Stress	Quickly Excited, Medium, Slow to Get Excited
Mental Profile	Ability to learn	Grasp Very Fast, Medium to Grasp, Slow to Learn

Mental Profile	Dreams	Fearful Flying Running, Angry Fiery Violent, Cloud Romance
Mental Profile	Concentration	Short Term Best, Better than Average, Good Ability for Long Term Concentration
Mental Profile	Mental Activity	Quick Mind Restless, Sharp Intellect Aggressive, Calm Steady Stable
Mental Profile	Memory	Short Term, Good Memory, Best Long Term
Mental Profile	Thoughts	Changes Constantly, Somewhat Steady, Stable, and Fixed
Mental Profile	Sleep	Interrupted and Light, Sound Medium, Heavy Long
Mental Profile	Speech	Fast, Sharp Clear Cut, Slow Clear
Mental Profile	Voice	High Pitch, Medium Pitch, Low Pitch
Physical Profile	Quantity of Hair	Average, Thin, Thick
Physical Profile	Bowel Movement	Dry Constipated, Several Times Soft, Heavy Slow
Physical Profile	Complexion	Darker, Pink Red, Pale White
Physical Profile	Eyes	Small, Medium, Large
Physical Profile	Hair Type and Colour	Dry Brown, Reddish Soft Oily, Oily Dark Brown Black
Physical Profile	Skin Temperature	Cold hands and feet, Warm, Cool
Physical Profile	Size of Teeth	Large Small, Small Medium, Medium Large
Physical Profile	Weight	Thin Hard to Gain, Medium, Heavy Easily Gains
Physical Profile	Conjunctiva	Blue Brown, Yellow Red, Glossy White
Emotional Profile	Express Affection	With words, With Gifts, With Touch
Emotional Profile	Emotional Trauma Cases	Anxiety, Denial, Depression
Emotional Profile	Mood	Quickly Changes, Changes Slowly, Steady Unchanging
Emotional Profile	Reacts to Stress	Own Feeling, Anger, Indifference

Emotional Profile	Sensitive Towards	Changes, Not Sensitive, Other Feelings
Emotional Profile	When threatened, tend to	Run, Fight, Make Peace
Emotional Profile	Relationship	Clingy, Jealous, Secure
Emotional Profile	When hurt	Cries, Argues, Withdraws
Emotional Profile	Confidence Level	Timid, Self-Confident, Inner Confident

Table 02: Template used for capturing participant's individual information

Columns to be captured in the form	Scale/Unit
Username	Alphanumeric
First Name and Surname	Alphanumeric
Age When have you started reducing weight, (e.g., 21 or 25 or 46)	Years of age
Gender	Male/Female
Height in Cm (E.g. 155 or 178 CM)	Cms
Body Weight Before Weight Loss (E.g., 100 kg)	Kgs
Body Weight After Weight Loss E.g., 65 kg	Kgs
Period for Weight loss E.g., 11 months to 15 months	Months
Are there any other health issues you had before starting weight loss?	Disease, habit, variation from normal
Craving for Food Before Weight Loss a scale of 10(Highest 10, Lowest 0)	0 to 10 (Definition is given separately)

Craving for Food After Weight Loss a scale of 10(Highest 10, Lowest 0)	0 to 10(Definition is given separately)
Anger Before Weight Loss at scale of 10(Highest 10, Lowest 0)	0 to 10(Definition is given separately)
Anger After Weight Loss at scale of 10(Highest 10, Lowest 0)	0 to 10(Definition is given separately)
Skin Glow Effect after Weight Loss	0 to 10(Definition is given separately)
Colour of Tongue Before Weight Loss	Whitish, White, Yellowish pink, pink, Any other
Colour of Tongue After	Whitish, White, Yellowish pink, pink, Any other
Body Feeling Before Weight Loss	Heavy, OK, Light, Athlete, Joyous,
Body Feeling After Weight Loss	Heavy, OK, Light, Athlete, Joyous,
Mood Enthru Before	0 to 10(Definition is given separately)
Mood Enthru After	0 to 10(Definition is given separately)
Stomach Ulcers After Weight Loss	Yes/No
Challenges faced during the weight loss process	Descriptive
Sleep Before	Deep, Shallow, long, short choices given
Sleep After	Deep, Shallow, long, short choices given
Any other comment on sleep	Descriptive

Table 03: 10-point Scale Used for Anger (11) measurement

Level	Anger (1 lowest anger, 10 Highest Anger)
1	Smiling Always, Feel happy
2	Smile sometime occasionally
3	No Smile but thoughtful, furious
4	Feel irritated in between, depressed sometimes, extent is less
5	Not able to concentrate because of anger, sometimes eat a lot
6	Feel dejected, curse people, sometimes aggressive

7	Shout at times and then calm down, then feel bad, anger reoccur
8	I tremble because of anger shout and can't control sometimes
9	I frequently get angry, shout, curse, and feel I am increasing my BP
10	I throw things and always want to find someone to bite every time; violent during anger

Table 04: 10-point scale for Hunger and Craving(12–14)

Level	Hunger (1 Lowest, 10 highest)
1	Heavy stomach Belching, sometimes gases and Hates eating anything, nauseous
2	Feel stomach satisfied, Uncomfortable feeling
3	No food is needed, but if I eat, that is fine
4	Feeling that can stretch some more time without food but drink water
5	Feeling that if I get food, then good
6	Will think of food frequently, feeling hungry
7	My face can tell I am hungry; my stomach is growling, and my face is dull and down, thinking of food
8	My hands and legs are shaking, no energy feeling, trying to eat whatever comes in front, and I am uncomfortable feeling
9	Thinking of eating only, searching for anything, food in the head
10	Pit in the stomach, stomach depleted, headache sometimes

Table 05: 10-point Scale of Enthusiasm(15,16)

Level	Enthusiasm (1 lowest, 10 highest)
1	Most of the time, sitting or sleeping and depressed or saggy, thinking all are fools whoever is enthusiastic and dancing, singing
2	Always thinking of sitting or sleeping
3	Not sitting always but making mistakes because of dullness
4	My face shows I am not in the mood, have less energy, No energy

5	Always thinking, furious but feel neither enthusiastic nor depressed
6	Feel enthusiastic sometimes only
7	Feel enthusiastic as per the requirement of work otherwise, keep quiet, calm
8	Feel to do work throughout the day with normal enthusiasm and sound sleep at night
9	Feel energetic and smiling, think of doing something new, less sleep, and sleep does not matter
10	Very agile, makes mistakes because of over-enthusiasm, takes very little sleep

Approach 1: Dhauti

Dhauti (17) is an ancient yogic stomach-cleaning technique. As per the Ayurvedic approach, this process is divided into a) Purva karma (preprocess) b) Pradhan Karma (main process) c) Paschat Karma (after process). (18)

Purva karma is performed in the early morning with an empty stomach after emptying the bowel.

Pradhan karma- The actual process of Dhauti is as follows. Plenty of normal-temperature water is consumed in high quantities to the extent that there should be a nauseating feeling. In a standing position, lean forward over a wash basin bowl, keeping the trunk horizontal. (1, 19–22). The mouth should be opened wide, and breathing should be done through the mouth. Slowly and gently slide the fingers along the tongue's surface towards the throat while simultaneously pressing the root of the tongue. This induced the water to gush out from the stomach suddenly and effortlessly. Continue in this way until there is no more water in the stomach. This is indicated when tickling the back of the throat does not bring up more water. A person needs to rest after *Dhauti* so that the gut will be soothed and further work, as usual, can be started.

Paschat karma- After the stomach is empty, wash the mouth and face and take some rest. There should not be any consumption of food immediately is advised. (18)

Limitation of Dhauti: The Subject suffering from high BP, ulcers in the stomach, and hernia may cause more harm than benefit (19). The health aspirant with high BP, Poor heart conditions, peptic ulcer, duodenal ulcer, and ulcerative colitis should not be attempted with Dhauti (18). This is the reason individual discussion with the health aspirant is needed.

Depending on whether craving exists or the extent of *kapha*, the frequency of *Dhauti* every month will be adjusted. Hence, its frequency differs individually.

Table 06: Timelines for proposed *Dhauti* intervention to each participant:

First 15 days	Every Day
Next 15 days	Alternate day
Next 30 days	Twice a week
Further	Once in a week and as per craving shoots up

Approach 2: Yoga

Why Yoga?

It is given in references that yogic practices have considerable health benefits, including improved cognition, respiration, reduced cardiovascular risk, BMI, blood pressure, and diabetes mellitus. It also influenced immunity and ameliorated joint disorders(23).It is overall wellbeing(24), improved the quality of life of these patients.(25)

Yoga interventions improve obesity-related outcomes, including body mass index (BMI), body weight, body fat, and waist circumference, yet it is unclear whether these improvements are due to increased physical activity, increased lean muscle mass, and/or changes in eating behaviors (26). It was also found that every day yoga for 45 minutes resulted in a significant reduction in all body weight measures, such as a decrease in Body Mass Index (0.001), Waist-hip ratio (0.001), and physiological measures such as Systolic Blood Pressure (0.01), Diastolic Blood Pressure (0.038), Pulse Rate (0.001)(P values < 0.05) all of which were -statistically significant.(27). Yoga has been found to be effective in abdominal obesity, BMI, and weight and has also been studied in lifestyle factors(28). Psychophysiological adaptations to yoga practice in obese and overweight individuals have been studied and found to work well toward wellness(29).

Two distinct groups who had lost weight through yoga responded: those who were overweight and had repeatedly struggled in their attempts to lose weight (55%, $n = 11$) and those who were of normal weight and had lost weight unintentionally (45%, $n = 9$)(26).

Continuous yoga practice tends to decrease BMI and BFM and increase muscle mass, and it can be an alternative therapy for obesity prevention and health promotion in

adolescents with obesity(30). Yoga is used to reduce abdominal obesity in women (31). Various asanas have been prescribed by researchers and have found very positive effects on obesity and weight loss(32).

Regular practice of yogic exercises has reduced to a great extent the weight and improves the performance of female students. yoga is a science that deals with the health of the body and harmony of mind(9). Also, Reducing distress and obesity is the key effect of yogic exercise (33,34).

Dr Chandra Nanthakumar has presented a case study that revealed positive physiological outcomes in terms of mood and a slight weight reduction. This has, up to a large extent, proven the effectiveness of yoga in obesity management.(35).

It is already proven that yoga could offer diverse behavioral, physical, and psychosocial effects that may make it a useful tool for weight loss.(26). Yogic exercises and Asanas affect obesity.(9).

As per Lutfian Lutfian, yoga therapy could maintain the balance and health of the physical, emotional, and spiritual dimensions(36).

Key case studies were there with obese adolescents using yoga as a tool, there was a significant change in BMI, Waist Heap ratio, triceps skin fold thickness, fat %, and BFMI(Body Fat Mass Index), which proves that yoga can be an effective technique for handling obesity(37).

Improvement in anthropometric and psychological parameters such as Weight, Percentage body fat, PSS (Psychological Support Service) were observed in the outcome by P.B. RSHIKESAN(38)

yoga is tool to improve anxiety and depression symptoms as well as obesity in obese subjects(33).

A seven-day yoga intervention does cause some weight reduction(39). The effect of Pranayama and certain Yogic asanas on parameters of obesity viz. weight reduction (BMI and waist-hip ratio), has been studied(40).

Optimizing Asanas and Kriyas

Those asanas or positions which cause challenges concerning current ailments existing with subjects were prohibited. Other Asanas were allowed to do. This is discussed with every individual subject.

Table 07: Yoga Suggested to health aspirants

Dhyan	Either morning or evening, 10 minutes, to increase internalization
Sukshma Yoga	15 min Video is provided (41) to warm up and free up the joints
Asanas	<i>Asanas</i> (42) suggested increasing metabolism, The Fact is kept in mind that the twist given to the trunk will impart better digestion(43), clearing the bowel, <i>Asanas</i> were (<i>Markatasan, Kandarasan, Pavanmuktasan, Namanmudra -3, Shalabhasan, Naukasan, Sarvangasan, Ardha Sarvangasan</i> , Leg movement in Supine position, Planks, Army crawling, <i>Merudandasan, Matsyasan</i> , Sun Salutations—total 30 minutes.
Kriya	<ul style="list-style-type: none"> At least one <i>Kriya</i> was suggested daily (<i>Agnisar, Uddiyan Bandha, Kapalbhathi</i>). This is to reduce hyperacidity(44) and to give movement to the tummy

It has been advised to health aspirants to perform Asanas as per capacity

Approach 3: Diet Suggested

There was no compromise on vitamins and ions consumed. However, there was a compromise on oil, fat, and type of carbohydrate intake.

Table 08: Diet Suggestions to Health aspirants

Serving	Edible Content Meal/Breakfast	Reason
Breakfast (Repeat after seven days)	<ul style="list-style-type: none"> Day 1: Apple (2), Salad (Cucumber, Carrot) Chili flakes, two walnuts Day 2: Two apples and 1 Banana, 	<ul style="list-style-type: none"> Cucumber (to reduce acidity and increase fiber) (46) 1 Egg(to provide proteins albumen and globulin and vitamins (fat soluble) (45)

	<ul style="list-style-type: none"> • Day 3: Soup with less corn flour + Fruit or one egg (45) • Day 4: Decanted Dal, Cornflakes with milk (Once in a week), • Day 5: Eat-Oats. Any vegetables except potato+ lemon water without sugar • Day 6: Sprouts, puffed rice, cucumber(to reduce acidity and increase fiber) (46), onion, Beet+ hot lemon water without sugar. (47) • Day-7 Sprout 1 Katora and Butter Milk with ginger/curry leaves/ Jeera/Ajowan 	<ul style="list-style-type: none"> • To provide a source of good fat/unsaturated fat, 2 to 3 walnuts daily were advised.(48) • Advised to consume Lemon water(Vit C source) without sugar and salt twice a day 1 glass (49) • Buttermilk was used as filler and a source of a precursor of melatonin(50). Ginger gives a partial antiseptic effect (51)
Lunch	<ul style="list-style-type: none"> • 1. Soup (47) (With Very less Corn Floar) - Unlimited with more vegetables, High garlic, and black paper • 2.Salad Unlimited, 3. vegetables at least 3 <i>katora</i> with Half <i>bhakri</i>(Depending on weight) • 4. Decanted <i>Daal</i> -1 <i>katora</i>, <i>Daal</i> (3 spoon) • 5. <i>Bhakri</i> (Half to 1 with a diameter of 8 inches and thickness of not more than 2 mm) • 6. Butter Milk with Ginger/ Garlic 	<ul style="list-style-type: none"> • <i>Dal</i> water contains soluble proteins and fewer carbs • Jowar/'Sorghum Bicolor' (gluten-free millet(52) and also includes fibers; the restriction was kept on jawar roti quantity because Sorghum is also a carb and can trigger lipogenesis from pyruvate/Acetyl COA (53). • Cooked <i>Vegetables</i>: contains very little carb and high fiber. It provides roughage and keeps the gut clean and defecation easy (54). Potato is avoided as per (55)
Dinner	<ul style="list-style-type: none"> • Dinner should be the same as lunch except for a reduced amount of <i>Bhakri</i> than in lunch 	<ul style="list-style-type: none"> • In the night, as there is less activity and hence metabolism and carbs should be reduced

Before 1 hour of sleep	<ul style="list-style-type: none"> Advised to take milk with turmeric (56): 1 cup around 50 ml daily without sugar 	<ul style="list-style-type: none"> Milk contains tyrosine, the precursor of melatonin(sleep hormone) (57). will help you to get better sleep. Turmeric has partial antibiotic/antiviral and an anti-obesity effect.
Daily	<ul style="list-style-type: none"> Two Fruits (source of antioxidants and fibers) are advised to be taken mandatorily, e.g., pare, apple, banana, guava 	<ul style="list-style-type: none"> Avoid Sapota(58), Grapes(7), and Custard Apple (59) to avoid extra fruit sugar consumption
Avoid	<ul style="list-style-type: none"> Sweet bakery product, <i>Chana Daal/Besan</i>, other milk products except buttermilk, potato, white flour 	<ul style="list-style-type: none"> To avoid glucose load

An advice 'Optimize diet but no need to be over accurate. '

It is advised to the Health Aspirant that this diet may not be observed to a very strict extent. A practical approach was taken. It was experienced from practice that following 100% is practically difficult. Hence, sometimes, there are cheat days and diets that are not followed fully but partially. This may be because of festivals, travel, hosting a guest for meals, and different celebrating occasions. However, it is a practical living condition that health aspirant has to optimize mostly and not get frustrated because of repentance of cheat days. This helps in the resurgence of health aspirants to bring them to the proper track. Hence derailed diet resumes.

Cleaning Gut Approach:

This is to be consumed in the evening as to mix it with food properly in the next 12 hours before defecation.

Almost 80% of health aspirants do not have proper bowel movement, and most of them have gases in the evening or night.

Table 09: Gut Cleaning Fiber Suggestion, one of them each day, at 6 pm, and then repeat

Day-1	One spoon <i>Ispaghula</i> (Psyllium husk, ' <i>Plantago ovata</i> ' (60) flocculated in water
Day-2	<i>Triphala</i> (61) half spoon with water
Day-3	castor oil (62) 1 spoon
Day-4	2 dates(63) smashed in water(to be avoided for diabetic health aspirant)
Day-5	20 Raisins(64)smashed in water(to be avoided for diabetic health aspirant)
Day-6	200 gm ripened papaya
Day-7	Roasted/Barbequed vegetables for dinner

Stimulation and cleaning:

A bath was recommended twice, in the morning and the evening. This will not only clean the dust and sweat but also stimulate the body's metabolism.

Periodic Review personal discussion interview method with Health Aspirants

Every month, a counseling meeting was scheduled with the Health Aspirant/Subject. Detailed discussion on Digestion problems, Cravings, Anger and weight, feelings, and challenges in any following suggestions was noted. Further steps were decided so that weight loss and rejuvenation could occur further. A motivational and enthusiastic discussion was conducted with a tentative dream of a positive outcome. To continue the yoga diet and Dhauti, continuous time-to-time counseling was very much found to be needed.

Table 10: Individual Analysis and Uniqueness of Each Health Aspirant

Subject	Individual Uniqueness	Special adjustment in Diet Yoga and Dhauti
1	She had irregular periods, frustration, and had dark skin colour she became fair and had regular periods	The frequency of Dhauti was kept daily for a long time as there was huge acidity and a very heavy craving for food.
2	She followed the Jain fasting religion and we had to mould her diet as per their religion. She was always in stress because of her daughter's ill health.	In Jainism, anything underground is not consumed, so we need to find protein sources, e.g., broccoli, buttermilk, and mixed <i>Dal</i> . Also, she is quite old age, so the exercises given were simple Asanas

	She could perform Halasan also at the age of 60	
3	He has put on weight because of sitting in one place as a software engineer. Hair loss occurred when he started dieting.	We also prescribed that he take breaks in his office. Hence, consulted with the Doctor and started multivitamins and eggs to stop hair loss.
4	She is a doctor and had an abortion; she was afraid that the abortion was partial. We need to take that fear out of her, and she was fond of jogging, which I incorporated in her daily life. She used to be irritated and disturbed during my periods, especially the first two days. However, when she reduced weight periods were painless.	The concept “Body can shed off and heal the remnants of abortion, and you will become healthy if you do lumber, groin exercise” was installed in her mind. As she is fond of running, more jogging is recommended to her; sweating in jogging could be key, as well as yoga. Asanas like <i>Ashwasanchalanasan</i> , <i>Paschimottanasan</i> , and butterfly were recommended.
5	She was most angry and very talented in her profession; once her weight was reduced, her anger decreased. She used to be very acidic and a lot of anger. She ripped her new dress using scissors into pieces because of anger. She was feeling very awkward because of her high obesity. It is a social problem and taboo to become obese.	To reduce anger, more <i>sheetali</i> and <i>sheetkari</i> along with meditation/ <i>Dhyan</i> were recommended to her. This mellowed down her anger. She found that once there is sweat in her body, her anger reduces automatically on that day. This induced in her mind that yoga could reduce anger
6	She has challenges of eating a lot of sugar at her place around. She had to fight to stop that naturally. She did it and achieved the goal in less time	She found that various combinations of Asanas could be interesting every day, so she continued that way, and we supported that time could be reduced.
7	He was just 18 and could not reduce his weight by going to the gym,	He was fond of rice, which contributed to his carb intake. He reduced rice to almost

	<p>running, or weight lifting. As a teenager, he believed only in the gym. He could reduce it with this approach. He is a very intelligent and laborious student.</p>	<p>zero and continued his yoga, and heavy Asanas were prescribed to her, which had a fast effect on him. <i>Mayurasan</i>, Sun Salutation, and Push-ups were be included.</p>
8	<p>She has thyroid and many depressive thoughts. She has a lot of acidity and also uric acid. She also suffers from cervical spondylosis. Hence, she is not given any forward-bending yoga. She could become more enthusiastic and flexible after reducing weight.</p>	<p>We had to design more ujjayi, all three types of ujjayi <i>Simhamudra</i>. This is to provide more blood to the throat and effect <i>Vishudhi</i> Chakra. We also included <i>Bhramari</i> and <i>Anulom Vilom</i>. We advise her not to do forward bending Asanas to prevent aggravation of spondylosis.</p>
9	<p>He is a government manager and gets challenged by eating sweets in the office. His build is strong, but he could not reduce weight at the gym. He has a habit of cycling. His body was less flexible.</p>	<p>As he liked cycling, that was one prescribed activity to consume energy. He has a strong build originally; hence, more vigorous asanas in number could be provided. <i>Sukshma</i> yoga was very important as his body was less flexible.</p>
10	<p>She is a doctor but cannot refrain from eating sweets and junk. After this, she could stop. She always felt lethargic and refrained from exercising. Being a physician, she knows physiology, anatomy, and medicine</p>	<p>Direct Asana or exercise was not accepted by the body; hence, <i>Sukshma</i> yoga was prescribed, which increases metabolism and paves her to get rid of lethargy. This has removed starting trouble in yoga.</p>
11	<p>He is a statistician and has a very calculative mind. He used to do some small daily exercises, which were not enough. His job was continuously sitting in the office, and hence, his lifestyle was sedentary.</p>	<p>Overall, walking may not be a good stimulus for weight loss. This was determined when the weight was not moving. So, we use the principle of 20 drops a day of sweat and further <i>Vigor</i> to do exercise. He was walking for 20 min 2 to 3 days a week.</p>

12	She was always fond of eating, especially farm meals and sweets. We need to control that with less craving and convince her of the high glycaemic index effect.	A detailed discussion on how sweets contribute to fat and weight was done and advised to refrain from Sweets and follow the regime prescribed.
13	He had a habit of smoking. We had multiple sessions and got rid of the habit of smoking, which helped us gain more confidence. He had Ankle Pain, and because of his weight, he could not do exercise. On the other hand, he tried to do, could not squat in the gym for longer, and lethargy	A detailed discussion on smoking was done with him. How smoking contributes to his brain imbalance, dependence, and stimulation was discussed. Further, instead of heavy gym, daily yoga will save time as well as bring more flexibility was convinced which reduces lethargy. Sukshma yoga was made mandatory to reduce lethargy.
14	She has thyroid, and in Corona, her muscles were weakened. She also tried Zumba but could not reduce her weight. She was suffering from Fibromyalgia and hip bursitis. Hence little complications	For thyroid, she has been provided with Ujjayi, Bhramari, and <i>Simhamudra</i> and given a more protein-rich diet like broccoli, mushrooms, sprouts, soybean, and <i>Daal</i> .
15	He is a businessman and has irregular eating habits. He also has a neck ache. So, we need to design exercises where the neck should not get stretched too much. During counselling, it was revealed that the health aspirant was involved in extensive traveling, irregular food habits, eating late at night, and lack of proper/enough physical activities.	Advised to get house food rather than outside food as outside food has more oil and MSG (Monosodium Glutamate). As his neck has a problem, Neck exercises were avoided. He was fond of <i>kapalbhati</i> , so he started <i>kapalbhati</i> up to 1500 strokes per day, which gives heavy stimulation to him along with other yoga prescribed to him. His good time was regularly optimized.
16	Earlier, she was very thin, but she put on weight after her marriage and could not control it. The first time, she reduced	Peanuts powder was controlled to almost zero. She liked jogging; hence, along

	her weight. She used to eat peanut powder in every edible	with prescribed yoga and diet, jogging was also prescribed.
17	She is highly fond of eating sweets, so she has an Ascaris/worms' infection. We need to treat her ascaris first. She was also suffering from PCOD as well as back pain.	Chocolates were restricted as she was fond of eating them. Also, after consulting with a physician, Albendazole was prescribed by the doctor, which reduced her ascaris and her craving for sweets.
18	She has very little walking in a day, and hence, to increase her Vigor, she had to walk and do yoga	Her walking and flexibility Asanas increased slowly as there was a lot of plasticity in her body, and very few movements were there earlier.
19	She was never thin and hence believed that she could not reduce weight. We need to change her mentality and then need to convince her that a BMI <24 will be the best health	She could not do Dhauti throughout, but she tried many times. But she could drink water. First, her belief that it is not natural to be fat was convinced. Her rice eating was reduced.
20	He has no control over eating. He was eating every time till he got one belching and had to reduce chapati and rice to reduce weight. Craving was heavy, which was reduced by Dhauti.	Here, I establish the principle that if yoga and Dhauti are done, then craving can be controlled. The night meal is key to reducing tummy fat. Dhauti frequency should be monitored continuously. If over the killing of craving or <i>Jatharagni</i> , we should stop <i>Dhauti</i>
21	She has high blood pressure. We allow her to continue her BP tablet.	Her BP tablet was continued, and without the BP tablet taken, the Dhauti was not allowed. Also, too vigorous yoga was avoided. She checks regularly with her physician and reduces her intake of salt and extra calcium.

Results

- Out of 100 health aspirants, only 40 people have given consent to get data; till now, only 21 health aspirants have given data and consent in actual.
- There were 14 females and seven males in the data

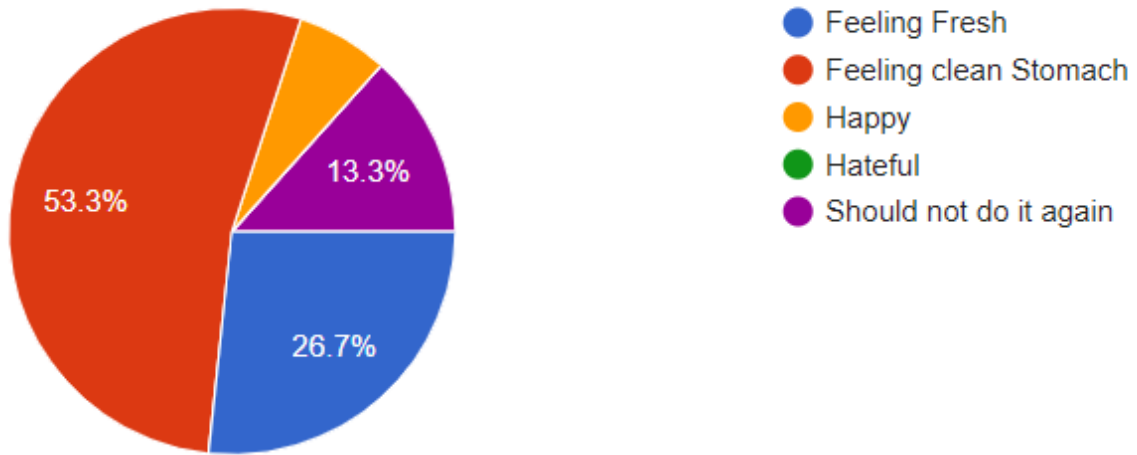


Figure 1: Dhauti Experience of Health Aspirant

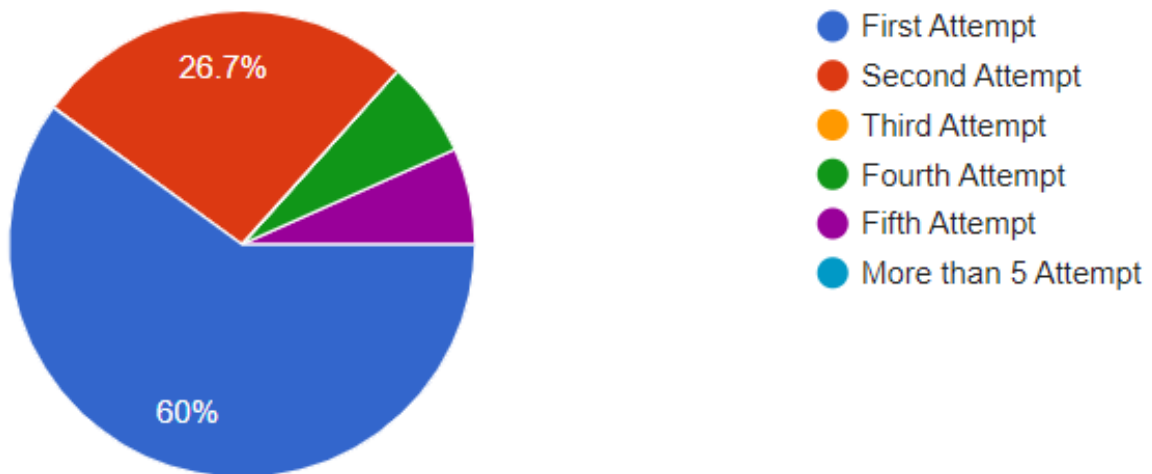


Figure 2: How many attempts do health aspirants make to success

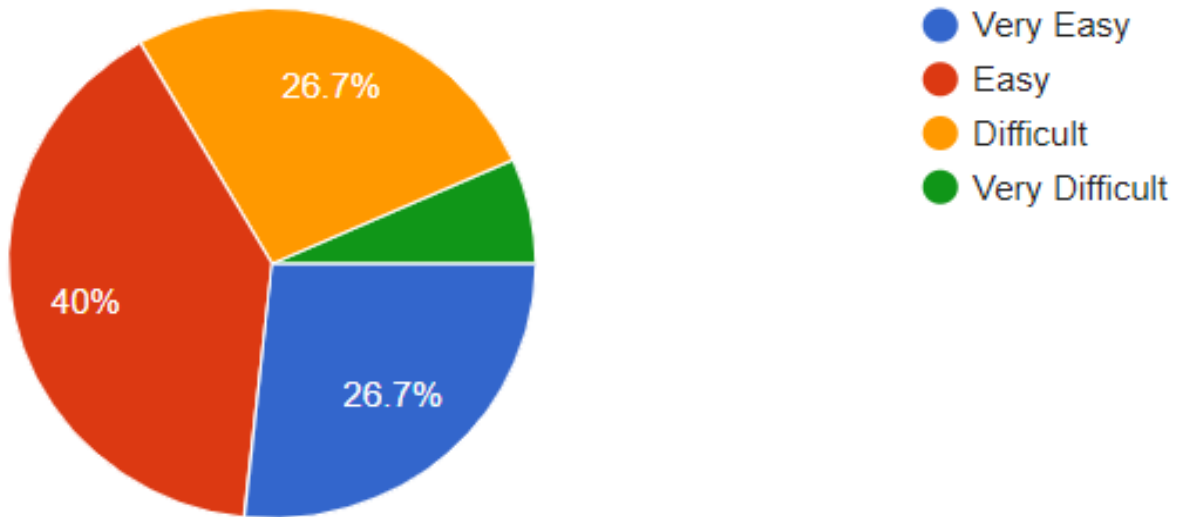


Figure 3: How was the Dhauti Experience concerning the difficulty level

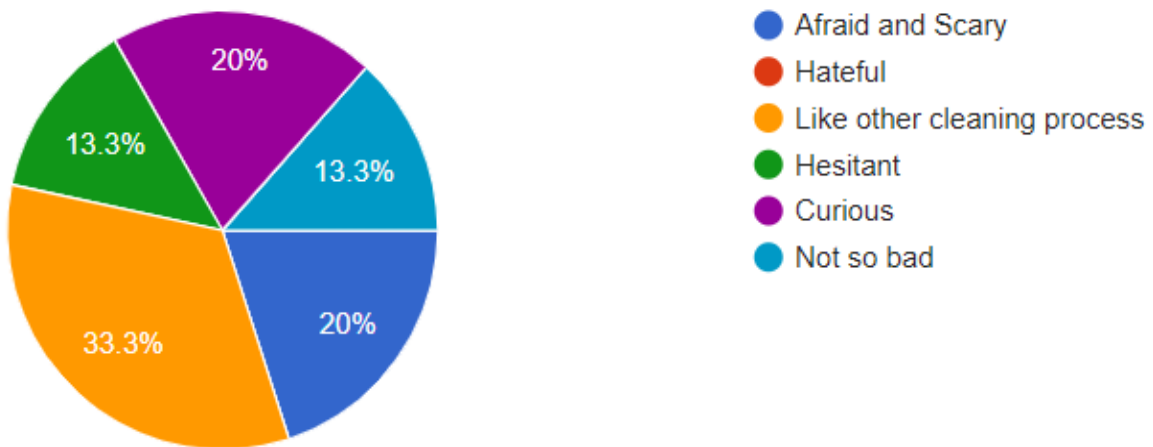


Figure 4: How was the assumption about Dhauti Before performing Dhauti

Table 11: Change in weight and percentage of weight

Subject	Body Weight Before Weight Loss in (kgs)	Body Weight After Weight Loss in (kgs)	Weight Loss (Kgs)	% Weight Loss
1	102	64	38	37.3

2	72	62	10	13.9
3	92	71	21	22.8
4	61	53	8	13.1
5	80.4	66	14.4	17.9
6	78	74	4	5.1
7	76	64	12	15.8
8	66	59	7	10.6
9	91	78	13	14.3
10	80	64	16	20.0
11	87	75	12	13.8
12	90	78	12	13.3
13	96	80	16	16.7
14	64	58	6	9.4
15	92	74	18	19.6
16	84	67	17	20.2
17	73	60	13	17.8
18	78	77	1	1.3
19	72	63	9	12.5
20	76	60	16	21.1
21	74	57	17	23.0

Table 12: Study of variation in Craving and anger against % weight loss

Subject	% Weight Loss	Craving for Food before Weight Loss a scale of 10(Highest 10, Lowest 0)	Craving for Food after Weight Loss a scale of 10(Highest 10, Lowest 0)	Anger Before Weight Loss at scale of 10(Highest 10, Lowest 0)	Anger After Weight Loss at scale of 10(Highest 10, Lowest 0)
1	37.3	10	1	6	1
2	13.9	10	1	3	1
3	22.8	5	5	1	1
4	13.1	8	4	7	3
5	17.9	9	5	10	3
6	5.1	8	3	10	6
7	15.8	10	7	7	3
8	10.6	4	1	6	2
9	14.3	6	3	7	3
10	20.0	9	6	9	7

11	13.8	6	6	5	5
12	13.3	8	3	8	4
13	16.7	8	4	7	2
14	9.4	8	5	8	4
15	19.6	8	6	8	5
16	20.2	4	8	9	3
17	17.8	8	2	5	5
18	1.3	8	5	0	0
19	12.5	8	4	7	4
20	21.1	9	5	8	3
21	23.0	8	4	7	5

Table 13: Effect on Skin(65), and tongue color(66,67), against weight loss

Subject	Weight Loss Kg	Skin Glow Effect after Weight Loss	Color of Tongue Before Weight Loss	Colour of Tongue After
1	38	Skin Highly glowing	Yellowish pink	Pink
2	10	Become Fair	Pink	Pink
3	21	Become Fair	Pink	Pink
4	8	Skin Highly glowing	White	Whitish Pink
5	14.4	Acne gone	Yellowish pink	Whitish Pink
6	4	Become Fair	Whitish	Whitish Pink
7	12	Acne gone	Yellowish pink	Whitish Pink
8	7	Same as Before	Whitish	Pink
9	13	Same as Before	Yellowish pink	Pink
10	16	Skin Highly glowing	Whitish	Pink
11	12	Same as Before	Yellowish pink	Pink
12	12	Skin Highly glowing	Whitish	Pink
13	16	Skin Highly glowing	Yellowish pink	Pink
14	6	Same as Before	Yellowish pink	Whitish Pink
15	18	Skin Highly glowing	Whitish	Pink
16	17	Skin Highly glowing	Yellowish pink	Pink
17	13	Acne gone	Pink	Pink
18	1	Same as Before	Pink	Pink
19	9	Acne gone	Whitish	Pink
20	16	Skin Highly glowing	Whitish	Pink
21	17	Become Fair	Whitish	Pink

Table 14: Study of body weight feeling against weight loss

Subject	Weight Loss	%Weight Loss	Body Feeling Before Weight Loss	Body Feeling After Weight Loss
1	38	37.3	Heavy	Light
2	10	13.9	Heavy	Light
3	21	22.8	Heavy	Light
4	8	13.1	Heavy	Joyous
5	14.4	17.9	Heavy	Happy
6	4	5.1	Heavy	Joyous
7	12	15.8	Heavy	Like Athlete
8	7	10.6	Heavy	Light
9	13	14.3	OK	Happy
10	16	20.0	Heavy	Happy
11	12	13.8	Heavy	Happy
12	12	13.3	Heavy	Happy
13	16	16.7	Heavy	Like Athlete
14	6	9.4	Heavy	Light
15	18	19.6	Heavy	Happy
16	17	20.2	Heavy	Like Athlete
17	13	17.8	Heavy	Light
18	1	1.3	Heavy	Happy
19	9	12.5	Heavy	Happy

20	16	21.1	Heavy	Light
21	17	23.0	Heavy	Light

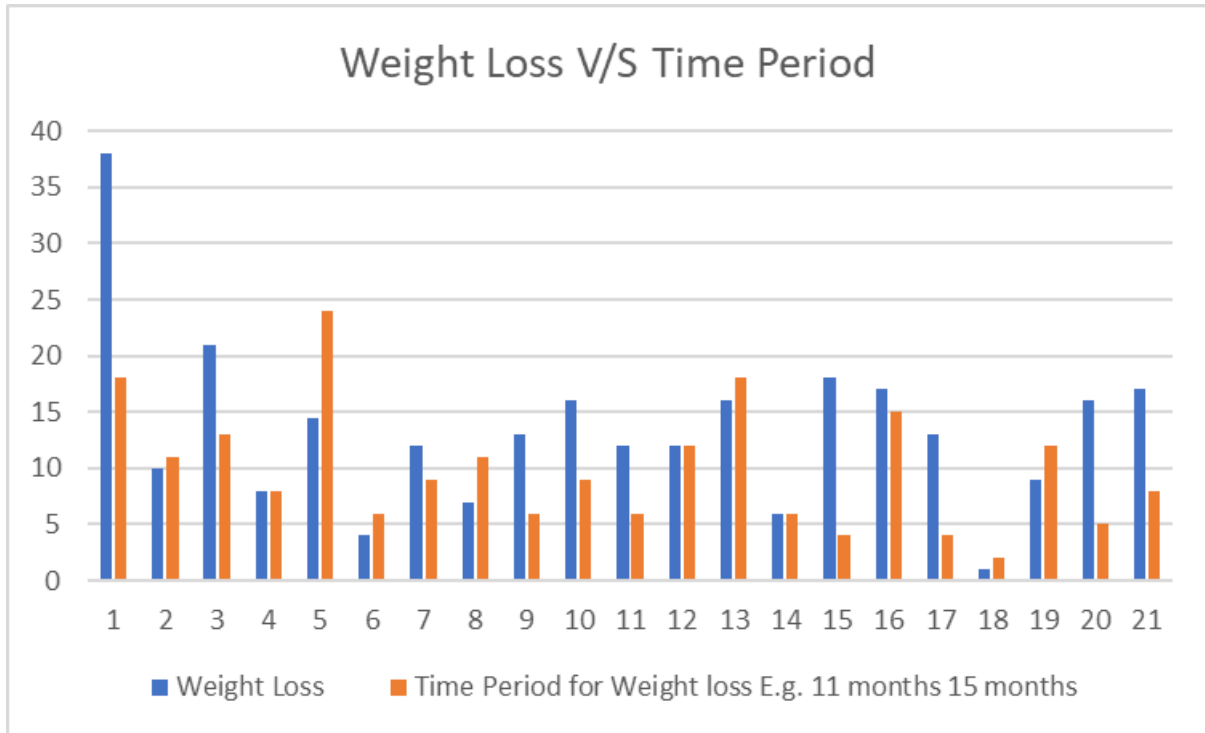


Figure 5: Time and Weight Loss

All people who have done Dhauti yoga and Diet have Good weight loss or almost 1kg/month.

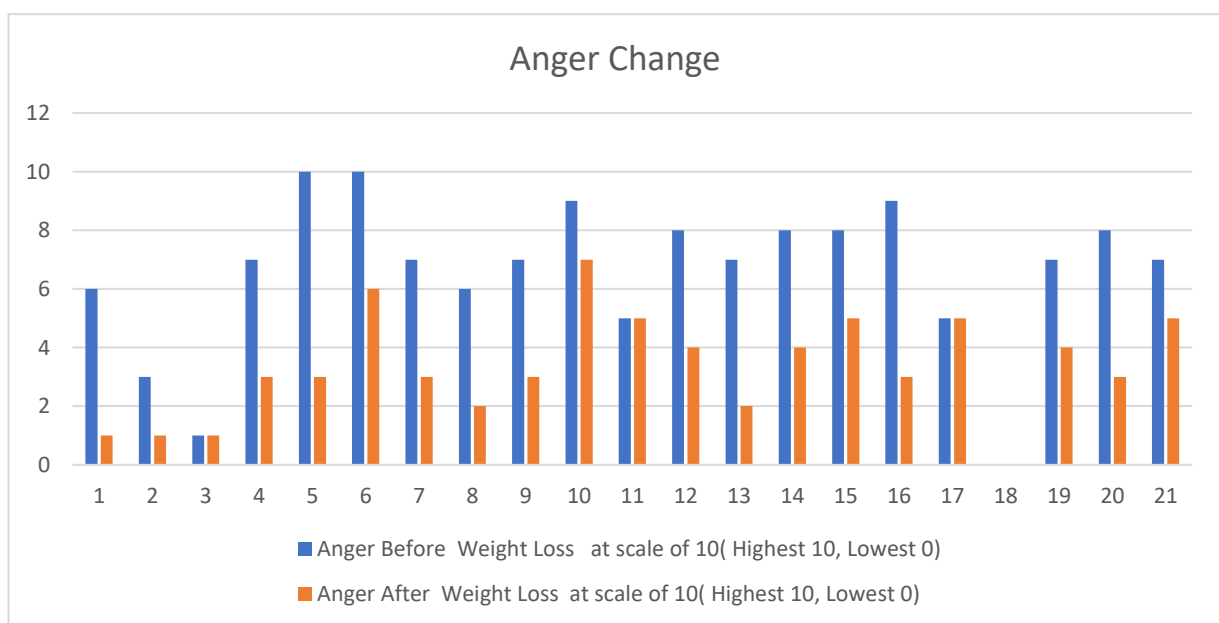


Figure 6: BMI Reduction v/s Anger

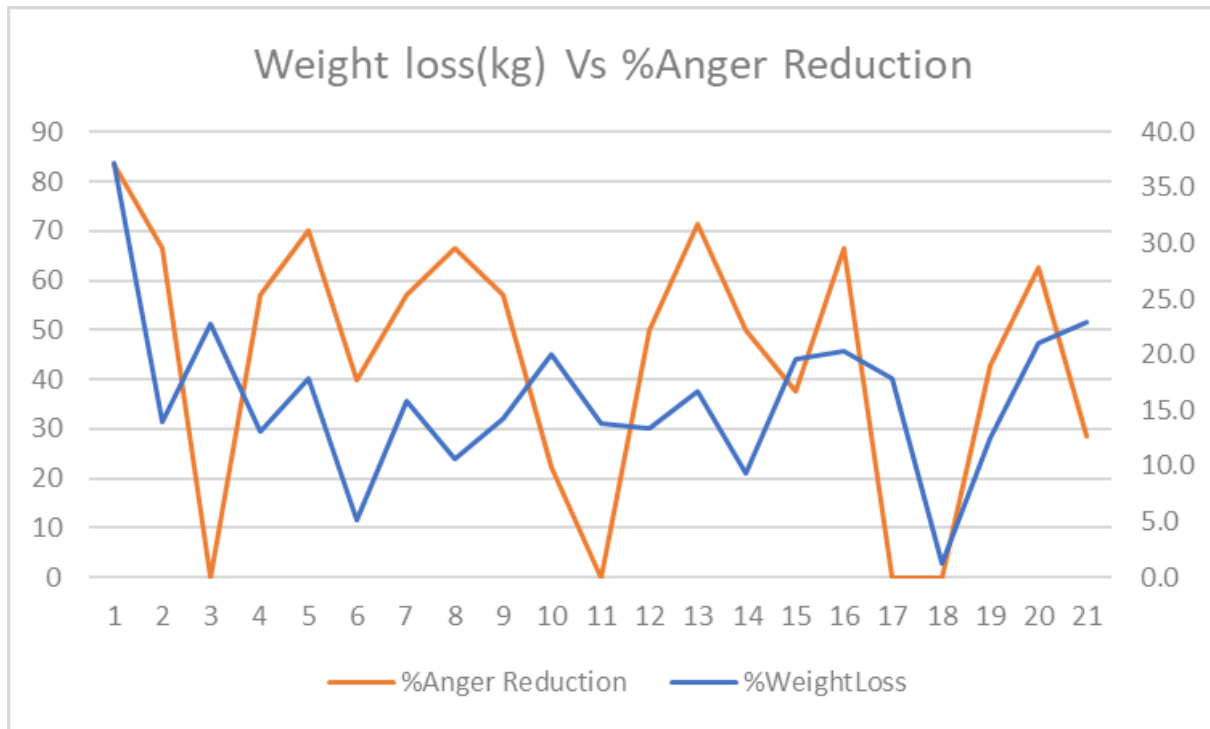


Figure 7: Weight loss v/s Anger Reduction

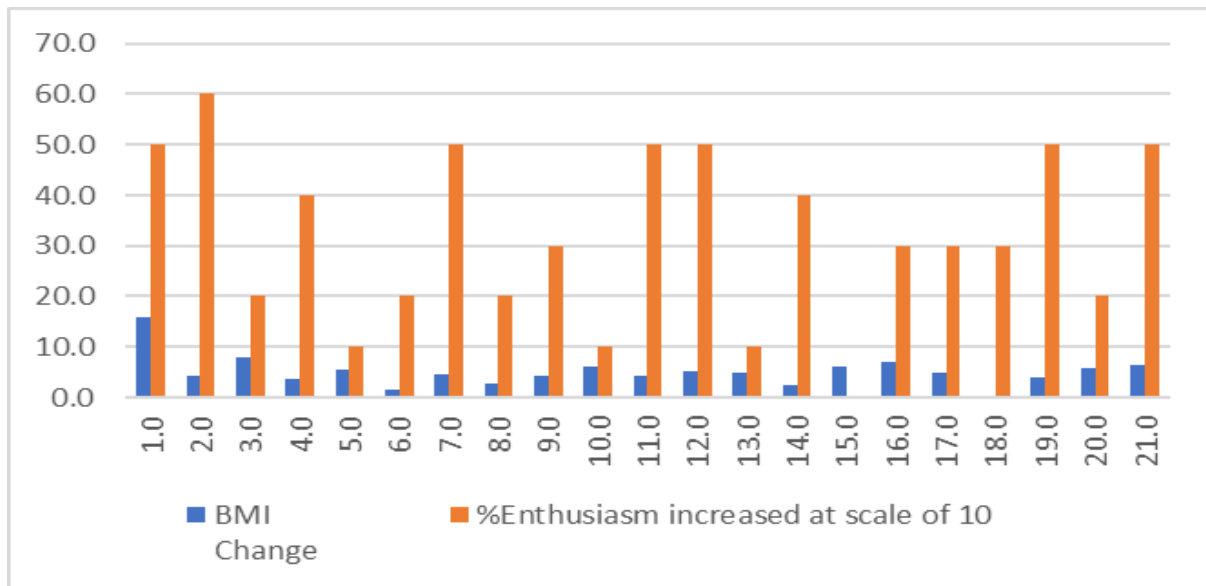


Figure 8: Enthusiasm Vs BMI Change

Though there was no direct relation was found between enthusiasm enhancement and reduction of BMI, Anger was found to be reduced corresponding to weight loss and reduced BMI. Anger

was found to be reduced with weight loss. Except in a couple of cases, anger was found to be significantly reduced before and after the weight loss.

It was found that when enthusiasm was studied along with weight loss, a significant enhancement of enthusiasm occurred with weight loss. Though no direct relationship could be established between weight loss and the percentage of enthusiasm, there is a remarkable increase in enthusiasm found after weight loss.

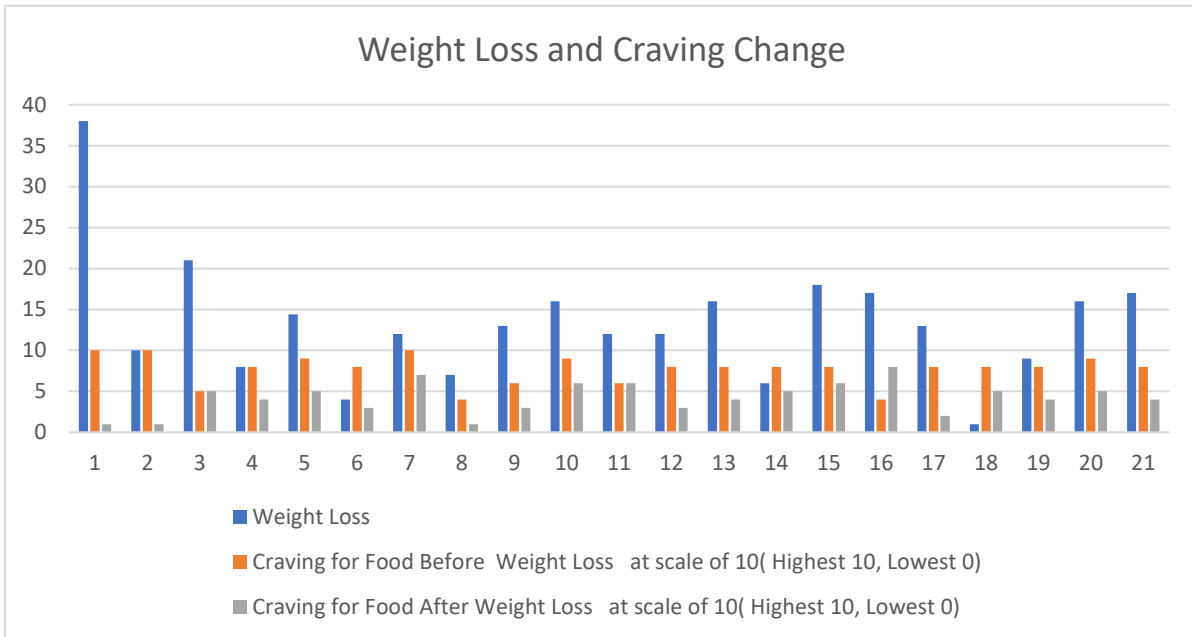


Figure 9: Weight loss and Craving

It was found that craving was reduced significantly, whereas weight loss was greater. In many cases, it is reduced proportionately but it cannot be concluded directly so. It is true that most of the subjects were feeling reduced cravings, and hence, they could control their diet.

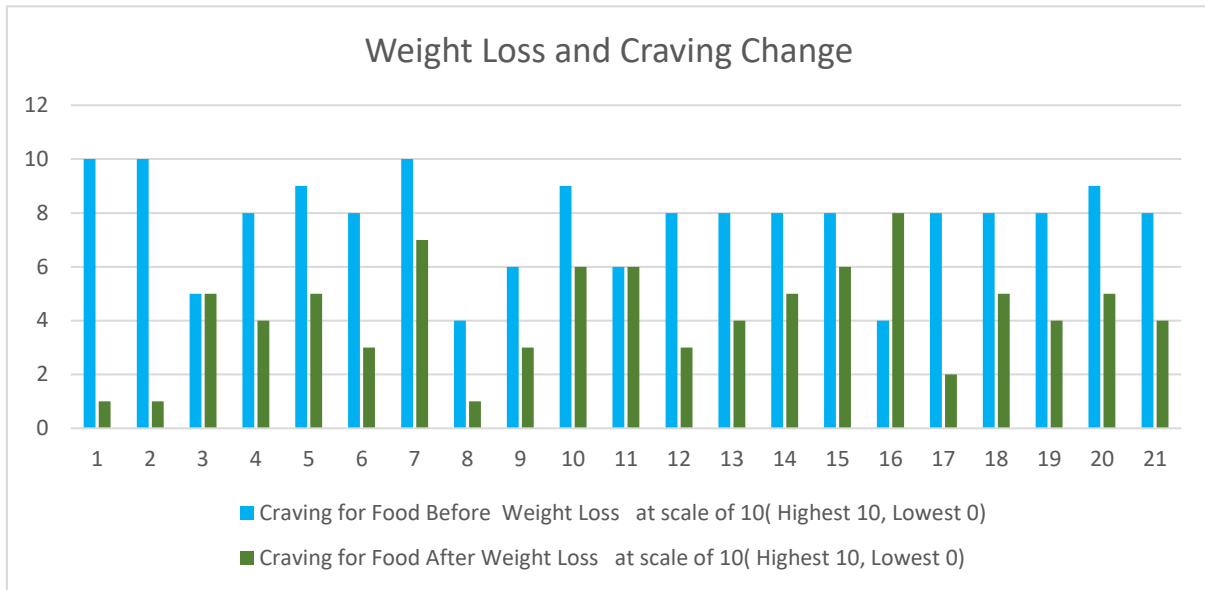


Figure 10: Weight loss and change in Craving

Effect on Skin:(65)

Most of the health aspirants have reported that the skin glows. This could be seen directly on the before and after face. Some 25% of health aspirants got rid of acne. This is a big achievement. Around 25% have reported that their skin become more fair than earlier. This may be effect of positivity as well as losing excess of weight and becoming happy by achieving goals.

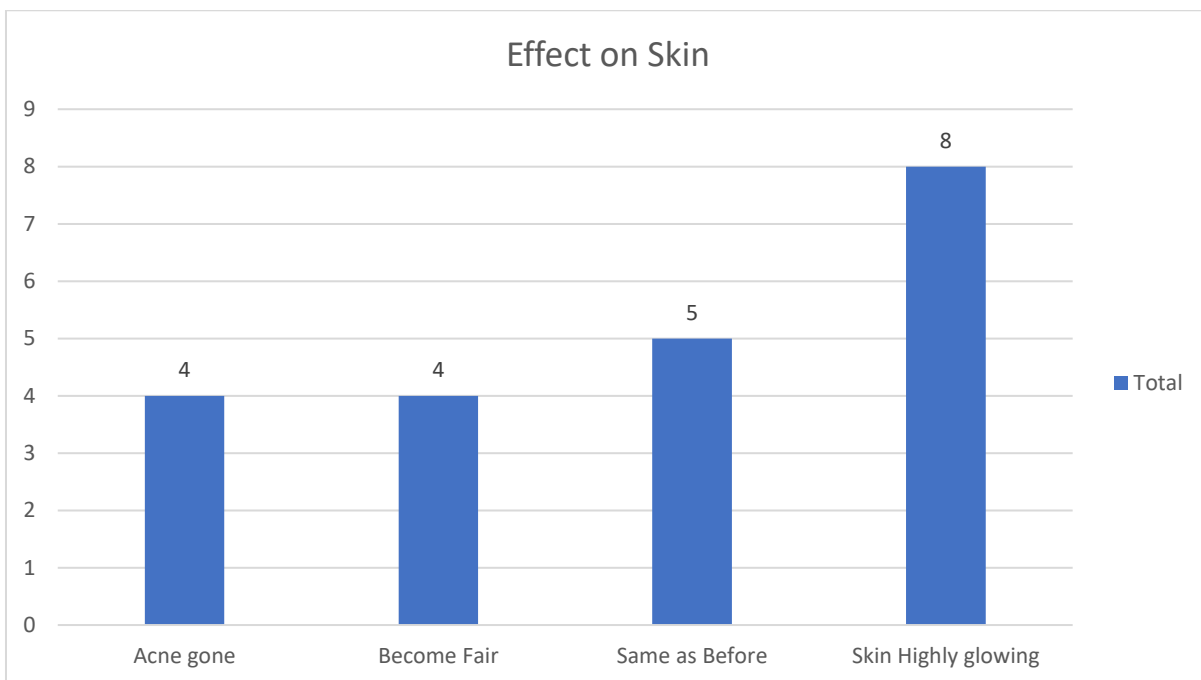


Figure 11: Effect of weight loss on skin

Change in Tongue Color(66,67)

The change in color of the tongue is mainly from Whitish to Pink. This significantly notifies that there is a change in the health of digestion. Generally, people having bad digestion have a whitish or yellowish color.

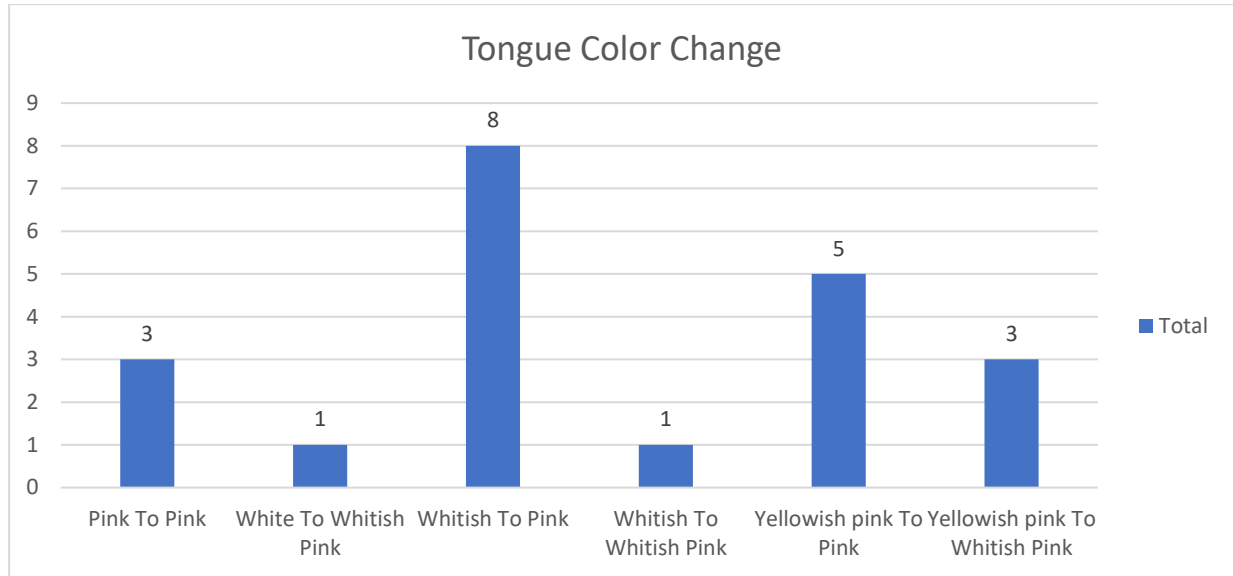


Figure 12: Effect of weight loss on tongue color

Change in Sleep Pattern(68)

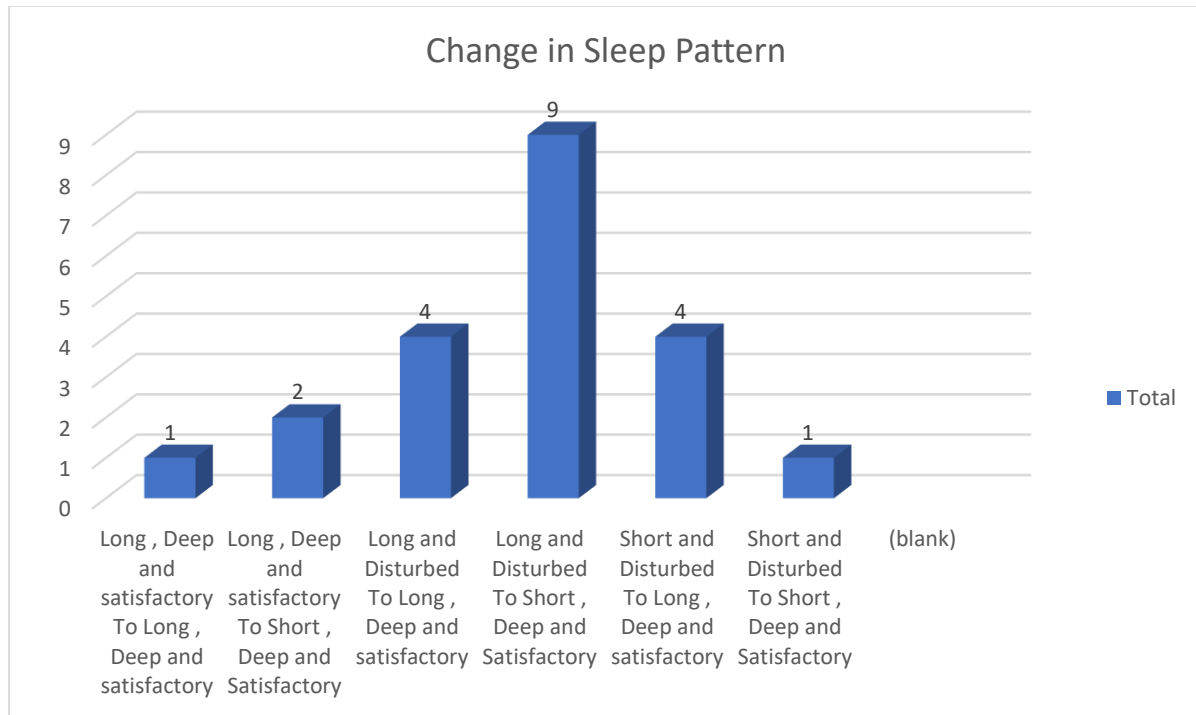


Figure 13: Effect of weight loss on Sleep pattern

Most of people have been found to get an advantage of the change in sleep pattern from “Long and Disturbed To Short, Deep and Satisfactory”

Analysis and Discussion

The combinatorial approach seems to be more promising than the individual approach. It is well received by most of the health aspirant. In any weight loss journey, individual challenges, history, and approach of aligning with the liking and disliking of exercise/yoga/diet is very important. This can be a game changer if utilized wisely. Depending on the type of body challenges, yoga is designed, prescribed, or restricted. Depending on the type of body health, aspirants have different types of diets, and keeping the core principle of a high fiber/low diet should be designed.

Dhauti reduces cravings and hence helps manage uneasiness that occurs because of hunger or craving. It takes a lot of time to reduce weight, and many challenges must be addressed if Dhauti is not done. If Dhauti is done, then there will be fewer craving challenges. Before performing Dhauti, most of them thought it was like other cleaning processes, and nobody was afraid of it; this means that people can accept this as one of the generic routine processes and can be followed with proper checks. Dhauti can be a widely accepted cleaning technique as many people were successful in the first attempt of Dhauti. Most of the people felt a clean stomach after performing Dhauti. Ease of Dhauti is a good conclusion as most of the people were able to perform Dhauti in the first attempt itself. Most people found Dhauti easy or very easy to perform, which indicates that this could be a process that can be used for weight loss very popularly.

Overall, skin complexion changes for the better when weight is reduced. This may be because of better blood flow or the shedding of extra kg of weight. Overall, anger was reduced concerning the reduction of weight. Overall enthusiasm increases concerning the reduction in weight but there is no graphical relation between the amount of weight reduced and the increase in enthusiasm. Reduction of weight was ultimately found to affect better tongue color, which represents better digestion. This may be attributed to the balancing of acidity and craving.

Earlier defecation was not proper, and health aspirants have uneasy feelings. However, it is found that after the weight loss process, proper defecation occurred, and health aspirants were

found to be satisfied with it. This may be the effect of harmonizing the digestion process because of increased metabolism, fibers, and proper diet.

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