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# From Junk To Fragility: Nutritional Pathways Linking Obesity And Osteoporosis- A Review Study

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#### Abstract:

Obesity and osteoporosis, once considered unrelated or even inversely correlated, are now understood to share a complex and interconnected pathophysiology. This review explores how unhealthy dietary patterns—especially those rich in processed, calorie-dense, nutrient-poor foods—contribute to obesity and, subsequently, lead to bone fragility and osteoporosis. Integrating insights from modern science and classical Ayurvedic texts, the article examines mechanisms such as chronic inflammation, hormonal imbalances, marrow adiposity, and micronutrient deficiencies. Obesity-related metabolic changes, including elevated cytokines and disrupted leptin and insulin signaling, significantly impair bone remodeling. Ayurveda explains this degeneration through the concept of **Meda Dhatu Vriddhi**, which disturbs the sequential nourishment of **Asthi Dhatu**, leading to **Asthi Kshaya**. The review underscores how Ama formation, Agni Dushti, and Kapha-Meda accumulation further obstruct bone nourishment. Through a dual-lens approach, the paper emphasizes the urgent need for dietary reform and integrative preventive strategies. Promoting Agni, reducing Kapha-aggravating foods, and adopting balanced nutrition may not only address obesity but also strengthen skeletal health. This fusion of Ayurveda and biomedicine offers a comprehensive understanding of the "junk to fragility" transition and guides future research and public health initiatives.

Key Words - Obesity, Osteoporosis, Ayurveda, Meda Dhatu, Diet and Bone Health

## INTRODUCTION

Obesity and osteoporosis—two major public health concerns—are paradoxically co-existing conditions with significant health burdens globally. While obesity is commonly associated with excess body fat and systemic inflammation, osteoporosis is characterized by reduced bone mass and increased fragility fractures. Historically considered mutually exclusive, emerging evidence indicates that obesity may, in fact, predispose individuals to poor bone health and osteoporosis, especially when it is driven by unhealthy dietary patterns such as high-fat, high-sugar, and nutrient-deficient "junk" foods [1,2].

From an Ayurvedic perspective, the condition of **Medoroga** (obesity) arises due to the vitiation of **Kapha Dosha** and **Meda Dhatu**, often as a result of improper **Ahara** (**diet**) and **Vihara** (**lifestyle**). Classical texts like *Charaka Samhita* and *Sushruta Samhita* describe how accumulation of Meda can lead to **Dhatu Shaithilya** (**tissue laxity**), which may reflect early signs of degenerative changes including bone weakening [3]. Osteoporosis can be compared with **Asthi**-

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Majjakshaya, a progressive depletion of bone and marrow tissues due to chronic vitiation of Doshas and improper nutrition.

Modern studies have highlighted that obesity-induced inflammation and altered hormonal profiles (like leptin, adiponectin, and insulin resistance) negatively affect bone remodeling [4]. Moreover, dietary deficiencies of calcium, vitamin D, and protein—often prevalent in obesogenic diets—contribute further to bone loss [5]. Hence, there is a critical need to understand the **nutritional pathways** linking these two disorders from both Ayurvedic and biomedical lenses.

#### Need of study

This review aims to explore the dietary factors that contribute to obesity and their subsequent impact on bone health, integrating classical Ayurvedic insights with contemporary scientific evidence.

#### MATERIALS AND METHODS

This integrative review utilized both classical Ayurvedic scriptures and modern scientific literature to examine the dietary connections between obesity and osteoporosis.

- Ayurvedic Sources: Relevant references were taken from *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*, focusing on Medoroga, Asthikshaya, and Ahara-Vihara. Translations and commentaries by renowned scholars were used for clarity.
- Scientific Databases: Articles were retrieved from PubMed, ScienceDirect, Scopus, and Google Scholar using keywords such as "obesity and osteoporosis," "diet and bone loss," "junk food and bone health," "inflammatory cytokines," and "Ayurveda and bone metabolism."
- **Inclusion Criteria:** Studies published from 2000–2024, in English, focusing on human models and dietary mechanisms linking obesity with bone health.
- Exclusion Criteria: Animal-only studies, case reports, and articles lacking nutritional or bone health relevance.
- Review Strategy: Selected articles were reviewed and synthesized under themes: Ayurvedic understanding of Medoroga and Asthikshaya, dietary factors causing obesity, their metabolic influence on bone remodeling, and integrative approaches to prevention and management.

## **OBESITY-PROMOTING FOODS AND DIETARY PATTERNS**

#### **Ayurvedic Understanding**

In Ayurveda, the etiology of Medoroga (obesity) is deeply rooted in Ahara (diet) and Vihara (lifestyle). Obesity is described as a result of excessive consumption of specific food types that increase Kapha Dosha and promote abnormal accumulation of Meda Dhatu (adipose tissue). These foods impair Agni (digestive fire) and block the proper transformation of nutrients into subsequent Dhatus (body tissues), especially Asthi Dhatu (bone tissue).

## **Key Obesity-Causing Diets According to Ayurveda:**

## 1. Guru Ahara (Heavy Foods):

Foods that are dense, difficult to digest, and slow in gastric emptying. Examples include curd, cheese, meat preparations, and deep-fried items. These lead to *Agni Mandya* (low digestive fire) and accumulation of Ama (toxins). *Charaka Samhita* mentions that habitual intake of heavy and oily foods without proper physical activity results in Meda accumulation [6].

# 2. Snigdha Ahara (Unctuous/Oily Foods):

Excess ghee, oil, butter, and fatty animal products nourish Kapha and Meda Dhatu disproportionately. While moderate use is nourishing, excess use under sedentary conditions is harmful. *Sushruta Samhita* warns that high intake of Snigdha and Madhura (sweet) items promotes **Sthaulya** (obesity) [7].

## 3. Madhura Rasa (Sweet Taste):

Foods rich in sugar and carbohydrates (jaggery, rice, sweets, milk) aggravate Kapha. Long-term overconsumption weakens metabolism and increases fat storage.

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## 4. Adhyashana (Frequent and Untimely Eating):

Eating again before the previous meal is digested disturbs Jatharagni (digestive fire) and causes metabolic waste accumulation. This leads to *Srotorodha* (blockage of channels) and inefficient nutrient assimilation. According to *Ashtanga Hridaya*, untimely and excessive food intake without hunger is a major cause of Kapha and Meda vitiation [8].

#### 5. Vihara Factors:

Sedentary habits (Avyayama), sleeping during the day (Divaswapa), lack of mental discipline, and emotional overeating also contribute to Medoroga. These factors disturb Dosha balance and hamper fat metabolism. In essence, the Ayurvedic dietetics emphasize **light**, **wholesome**, **timely**, **and balanced meals**, along with appropriate physical activity to maintain metabolic balance.

## **Modern Nutritional Science Perspective**

Modern medical research identifies several **dietary patterns and food choices** that are closely linked with the development of obesity and metabolic syndrome:

## 1. High-Calorie, Low-Nutrient Diets (Empty Calories):

Diets high in sugar, fat, and salt—but low in essential nutrients—are a hallmark of modern fast food culture. These foods are energy-dense and palatable, leading to **passive overconsumption**.

- Examples: Sugar-sweetened beverages, pastries, fried snacks, refined cereals, chips, fast food.
- These diets promote **insulin resistance**, chronic low-grade inflammation, and hormonal imbalances that increase fat storage and appetite [9].

## 2. Ultra-Processed Foods (UPFs):

UPFs contain additives, preservatives, emulsifiers, and flavor enhancers. They lack fiber, protein, and micronutrients while being rich in trans fats and refined sugars.

Monteiro et al. demonstrated that UPFs are dominant contributors to the global obesity epidemic [10].

#### 3. Low-Fiber, High-Glycemic Diets:

Low-fiber diets reduce satiety and cause frequent hunger, while high-glycemic foods spike insulin levels, promoting fat deposition.

• Lack of vegetables, fruits, legumes, and whole grains increases the risk of abdominal obesity, a predictor of bone loss in later years [11].

## 4. Disordered Eating Patterns:

- Skipping meals, especially breakfast, leads to overcompensation later in the day.
- Mindless eating while watching screens or under emotional distress increases caloric intake.
- Night eating syndrome and circadian misalignment affect hormonal regulation of metabolism.

## 5. Excessive Portion Sizes and Frequent Snacking:

Modern lifestyle encourages snacking multiple times a day on calorie-dense foods. This keeps insulin levels chronically high and leads to continuous fat storage.

## Ayurveda Meets Modern Science: Dietary Overlap

Ayurvedic Foods Causing Medoroga	Modern Counterparts Promoting Obesity	
Guru Ahara (heavy to digest)	Red meat, dairy-heavy meals	
Snigdha Ahara (oily, fatty foods)	Deep-fried snacks, fast food	
Madhura Rasa (excess sweets)	Desserts, sugary drinks, high-fructose products	
Adhyashana (untimely eating)	Frequent snacking, binge-eating	
Avyayama, Divaswapa	Sedentary lifestyle, lack of exercise	

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This integrative table highlights how ancient Ayurvedic guidelines are echoed in current nutritional science, validating their timeless relevance.

#### **OBESITY TO OSTEOPOROSIS**

## **Pathophysiological Pathways**

Though traditionally obesity was believed to protect against osteoporosis due to increased mechanical loading on bones, recent evidence reveals the contrary—obesity is a significant risk factor for poor bone quality and increased fracture risk, especially in cases of visceral (central) obesity. Ayurveda also recognizes that excessive Meda Dhatu disrupts the balance of other tissues, especially Asthi Dhatu (bone tissue).



#### **Modern Scientific Mechanisms**

#### 1. Adipocyte-Osteoblast Lineage Competition

- Mesenchymal stem cells (MSCs) in bone marrow can differentiate into either osteoblasts (bone-forming cells) or adipocytes (fat cells).
- In obesity, the shift favors adipogenesis over osteoblastogenesis, leading to reduced bone formation and marrow adiposity.
- Fat-rich bone marrow environments are toxic to osteoblasts and impair bone remodeling.

#### 2. Chronic Inflammation

- Obesity is a **pro-inflammatory state**, with increased release of cytokines such as **TNF-α**, **IL-6**, and **CRP**.
- These cytokines **enhance osteoclast activity**, promoting bone resorption and reducing bone mineral density (BMD).

#### 3. Hormonal Imbalances

- Leptin, secreted by adipose tissue, has a dual role. Central leptin inhibits bone formation via the hypothalamus.
- Insulin resistance, common in obesity, reduces anabolic effects of insulin and IGF-1 on bone.
- Adiponectin, a bone-protective hormone, decreases with obesity.
- **Vitamin D deficiency** and **secondary hyperparathyroidism** are common in obese individuals due to fat sequestration of vitamin D, leading to bone demineralization.

#### 4. Mechanical Loading Paradox

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- Although increased body weight may add mechanical loading beneficial for bone, **visceral fat and sarcopenic obesity** (high fat with low muscle mass) increase fall risk and impair bone strength.
- Fat-induced **oxidative stress** damages bone-forming cells, offsetting any mechanical benefits.

## 5. Nutrient Deficiencies and Dietary Impact

- Obese individuals often consume **energy-dense but nutrient-poor diets**, lacking calcium, magnesium, vitamin D, and protein—all vital for bone health.
- Excessive **sugar and phosphoric acid (in sodas)** disrupt calcium-phosphate balance and bone mineralization.

# Ayurvedic Perspective: Medoroga's Impact on Asthi Dhatu

In Ayurveda, the development of body tissues (Dhatus) follows a sequential transformation: Rasa  $\rightarrow$  Rakta  $\rightarrow$  Mamsa  $\rightarrow$  Meda  $\rightarrow$  Asthi. Hence, any excess or dysfunction in Meda Dhatu can negatively impact the quality of Asthi Dhatu.

#### 1. Dhatuparinama Nyaya (Sequential Nourishment Theory)

- If **Meda Dhatu becomes excessive or pathological**, the transformation into Asthi Dhatu is compromised.
- This results in **Asthi Kshaya** (bone tissue depletion) and poor bone strength.

#### 2. Agni Dushti and Ama Formation

- Poor digestion (Agni Mandya) in obese individuals leads to **Ama (toxins)**, which obstruct channels (Srotas) responsible for nutrient transport to bones.
- Obstruction in **Asthivaha Srotas** leads to improper nourishment and **Asthi Dhatukshaya** (degeneration of bone tissue).

#### 3. Kapha-Meda Vriddhi and Bone Health

- Excess **Kapha and Meda** obstruct metabolic fire and circulation, slowing tissue regeneration and causing structural weakness.
- Ayurveda also links **low Basti function (colon health)** to Asthi depletion, as Asthi is considered a seat of **Vata Dosha**, which becomes imbalanced in Medoroga.

## 4. Lakshanas of Asthi Kshaya (Symptoms of Bone Loss)

• Classical symptoms include **danta patana** (tooth loss), **kesha-patana** (hair loss), **nakha bhanga** (brittle nails), and **sandhi shoola** (joint pain)—many of which overlap with osteoporotic manifestations.

Pathway	Modern View	Ayurvedic View
Stem cell lineage shift	↑ Admocyte differentiation   osteoblasts	Meda Dhatu Vriddhi disrupts Asthi formation
Inflammation	Cytokine-mediated bone resorption	Ama and Agni Dushti impair tissue nutrition
Hormonal Imbalance	↓ Adiponectin, ↑ Leptin, insulin resistance	Kapha-Meda aggravation and Vata Kshaya
Vitamin D deficiency	Fat sequestration → secondary hyperparathyroidism	Poor digestion → Malabsorption of vital nutrients
Mechanical and nutritional factors	Sarcopenic obesity, nutrient-poor diet	Improper Ahara-Vihara, heavy/sweet/oily food intake
Marrow adiposity and oxidative stress	Fat-filled marrow reduces bone formation	Blocked Asthivaha Srotas due to Kapha- Meda Vriddhi

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#### **OBSERVATION**

This review article explores the bidirectional and complex relationship between dietary patterns, obesity, and osteoporosis through both **contemporary biomedical literature** and **Ayurvedic classical wisdom**. Based on the analysis of current scientific findings and Ayurvedic Samhita references, the following key observations were made:

## 1. Dietary Patterns and Obesity:

- o Excessive intake of **high-calorie**, **low-nutrient foods** such as ultra-processed snacks, sugary drinks, refined carbohydrates, and trans fats contributes significantly to the obesity epidemic.
- o Frequent eating, snacking, and emotional eating, especially during inactive hours (e.g., late night), disturb metabolic homeostasis and promote fat accumulation.

#### 2. **Ayurvedic Correlation:**

- O Such dietary behaviors directly align with the **Kapha- and Meda-aggravating factors** described in **Charaka**, **Sushruta**, and **Ashtanga Hridaya**.
- o The Ayurvedic concept of Adhyashana (eating without digestion of previous meal) and Guru-Snigdha-Madhura Ahara (heavy, oily, sweet foods) strongly resembles modern obesity-inducing diets.

# 3. **Obesity's Impact on Bone Health:**

- o Contrary to earlier assumptions, central obesity **increases the risk of osteoporosis**, especially in women and the elderly, due to hormonal, inflammatory, and nutrient-related factors.
- Obesity promotes marrow adiposity, reduces osteoblast activity, and increases osteoclastic bone resorption, ultimately reducing bone mineral density (BMD).
- 4. Ayurvedic Explanation of Osteoporosis via Medoroga:
- O Ayurveda explains bone depletion (Asthi Kshaya) as a result of Meda Vriddhi disrupting the Dhatuparinama (tissue transformation) chain.
- O The blockage of **Asthivaha Srotas** due to **Ama** and aggravated **Kapha-Meda** causes improper nourishment of bones, leading to fragility.

#### 5. **Nutrient Imbalance:**

- Obese individuals often lack essential nutrients (Vitamin D, calcium, magnesium, protein), contributing further to osteoporosis risk.
- o Ayurveda also emphasizes **Agni Dushti** as a cause of **Malnourishment despite over-nourishment**—a concept reflected in "hidden hunger" or **nutritional paradox** seen in obesity today.

## CONCLUSION

The convergence of Ayurveda and modern nutritional science reveals that imbalanced, Kapha-Meda-promoting diets and sedentary lifestyles are central to the twin epidemics of obesity and osteoporosis. Obesity, often misinterpreted as a protective factor for bone health, actually impairs bone quality through metabolic inflammation, hormonal disruption, and nutrient deficiencies.

From an Ayurvedic standpoint, the excessive accumulation of **Meda Dhatu** obstructs the transformation into **Asthi Dhatu**, reflecting the ancient understanding of how overnourishment can paradoxically lead to tissue depletion.

Therefore, preventive and therapeutic approaches must focus on:

- Balanced dietary patterns rich in whole grains, fresh vegetables, fruits, and bone-supportive nutrients,
- Avoidance of Guru, Snigdha, and Madhura Ahara when not indicated,
- Enhancing digestive Agni and reducing Ama,
- And adopting **Vyayama** (exercise), mindful eating, and proper lifestyle practices.

By integrating Ayurvedic principles with modern nutrition and endocrinology, a **holistic framework** can be developed to **prevent and manage obesity-induced osteoporosis**, contributing significantly to public health and personalized care.

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## REFERENCES

- 1. Zhao LJ, Liu YJ, Liu PY, Hamilton J, Recker RR, Deng HW. Relationship of obesity with osteoporosis. J Clin Endocrinol Metab. 2007;92(5):1640-6.
- 2. Dimitri P, Bishop N, Walsh JS, Eastell R. Obesity is a risk factor for fracture in children but is protective against fracture in adults: a paradox. Bone. 2012;50(2):457-66.
- 3. Sharma RK, Dash B (Transl.). *Charaka Samhita* of Agnivesha, Sutrasthana, Chapter 21. Varanasi: Chowkhamba Sanskrit Series; 2012.
- 4. Cao JJ. Effects of obesity on bone metabolism. J Orthop Surg Res. 2011;6:30.
- 5. Biver E, et al. Bone fragility and fracture risk in obesity. Curr Opin Rheumatol. 2016;28(4):416-22.
- 6. This integrative review utilized both classical Ayurvedic scriptures and modern scientific literature to examine the dietary connections between obesity and osteoporosis.
- 7. Ayurvedic Sources: Relevant references were taken from Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, focusing on Medoroga, Asthikshaya, and Ahara-Vihara. Translations and commentaries by renowned scholars were used for clarity.
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