

A Preliminary Clinical Evaluation of Prakriti

Ragitha¹, M .Rakesh², C H Maanu³

^{1,2,3}Assistant Professor

Community Healthcare Center of Shangzhuang

ABSTRACT

Ayurveda explains 10 important processes in the examination of patients, one of which is determining the patient's Prakriti (individual constitution). It is believed that the best people have a balanced Vata, Pitta, and Kapha constitution, whereas individuals with a predominance of only two of these doshas are inferior. People that have one Dosha dominating their constitution are categorized as either inferior, average, or excellent. Various factors have led to the neglect of Prakriti evaluation in modern clinical practice. The purpose of this research was to examine the role of external characteristics in determining Prakriti at the most basic level. Substances and Techniques: Twenty-five healthy adults gave their agreement to participate in the current pilot investigation, which was a single-group, single-center, selective-sampling survey study. They were given a specifically designed questionnaire to determine how they rated on 16 physical characteristics of the various Prakriti described in the old Ayurvedic texts. A percentage was computed by adding together the values assigned to each characteristic based on the observations obtained. The percentages for each Dosha were used to evaluate Prakriti. The results showed that 36.75 percent of the 25 subjects exhibited characteristics indicative of Vata Dosha, whereas 38.75 percent exhibited Pitta Dosha characteristics and 24.5 percent exhibited Kapha Dosha characteristics. Eighty percent of the subjects were found to be Tridoshaja Prakriti types, whereas twenty percent were Dwidoshaja Prakriti types. Lumbago, menstrual abnormalities, digestive issues, and constipation were among the main clinical complaints reported by the individuals. Conclusion: Direct observation during clinical examination allows for a rough estimate of an individual's Prakriti, which is a useful tool in the formulation of primary health care methods in modern clinical practice. Individuals with communication impairments were also assessed for Prakriti in the research. Further proof will need studies on a wider scale.

Keywords: Individual Constitution, Physical Features, Pratyaksha Pramana, Prakriti, Tridosha

Introduction

Ayurveda is the science of life which stick on to the individualistic approach in both health care and cure of diseases. According to the principles of Ayurveda all individuals cannot be considered or treated in the same way or with same medicines. One of the major factors which makes individuals different from each other is *Prakriti* (Individual constitution) which influences their physical, mental, emotional and spiritual attitudes. The formation of individual constitution happens at the time of formation of *Grabha* (embryo).^[1] This individual constitution is formed due to the dominance of three *Dosha* (body humors) which are called as the three pillars of life and on which the formation, health and disease state of an individual are dependent upon. At the time of formation of embryo which *Dosha* dominates, the

constitution of the individual will be of the same *Dosha* dominancy.^[2] The individuals possessing *Prakriti*

formed by the balanced state of three *Dosha* is said to remain disease free in general and those who

While describing the examination of patients, *Acharya Charaka* specifies that to understand and analyze the strength of an individual and the affected disease a clinician should examine a patient on the basis of *Dasha Vidha Pariksha* (Ten parameters of examination).^[5] *Prakriti* is the first among them which shows the importance of its assessment in successful health care. There are seven major types of constitution explained in the classics of Ayurveda depending upon the predominance of individual *Dosha* namely *Vata*, *Pitta* and *Kapha*; predominance of two *Dosha* namely *Vata Pitta*, *Vata Kapha* and *Pitta Kapha* and equal dominance of three *Dosha* named *Sama Dosha Prakriti*.^[6] *Prakriti* of an individual is influenced by these *Dosha* and accordingly physical, mental, emotional and intellectual features are seen in individuals. Thus a precise analysis of *Prakriti* incorporates exploration of multiple factors due to which it becomes time consuming task in routine clinical practice.

Many a times assessment of *Prakriti* considering multiple factors stay unfeasible due to lack of proper time, effort and interest of individuals in current clinical practice. But to have a proper treatment or health care strategy, examination of *Prakriti* of an individual is of utmost importance in clinical practice. Many a times it happens so that the patient or individual will be suffering from some disorders which hamper effective communication as in deafness, dumbness, behavioural disorders, psychological disorders and paralysis. Especially in younger children lack of proper communication stands as a major problem in history taking and clinical examination too. These issues initiated the present study as a preliminary attempt of *Prakriti* assessment by means of physical features alone which may give a gross idea about the *Dosha* involvement and thus a clinician can plan a primary treatment protocol or healthy lifestyle and diet based on the same. The present study was aimed at analysis of *Prakriti* at a gross level by assessment of physical features.

Methodology

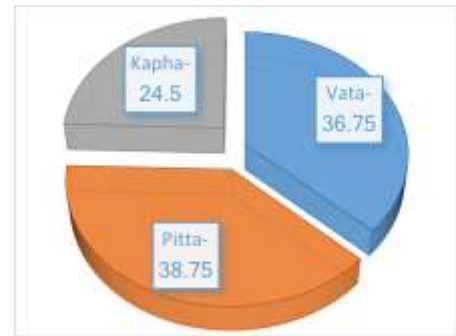
The present study was planned as a pilot study which was single centre single arm selective sampling survey study to monitor the feasibility and significance of assessment of *Prakriti* depending upon the physical features of the selected participants. The inclusion criteria was fixed as healthy volunteers of age between 17 to 70 years and those who gave consent to be included in the study. The exclusion criteria was those individuals suffering from any active illness and who are under treatment for the same. A total of 25 healthy volunteers were included in the study.

The method of data collection was by the use of a specially prepared questionnaire containing 16 selected physical features of *Prakriti* assessment according to the classical textual references in Ayurveda (Table no. 1). Each response was recorded and given scores accordingly from 0 to 1 to calculate the final score of individual features related to each *Dosha*. The sum was calculated and percentage of each *Dosha* specific features and according to each *Dosha* involvement, gross *Prakriti* was assessed.

Observations & Results

Among the 25 participants, physical features of each *Dosha* was calculated and presented as percentage. The features of *Vata*, *Pitta* and *Kapha* *Dosha* were found to be in the following percentages respectively. (Chart no.1)

Chart No.1: Percentage of individual *Dosha* features in the participants



By analyzing the features of individual *Dosha*, percentage of participants belonging to *Tridoshaja* and *Dwidoshaja* *Prakriti* were also calculated as per shown in the Chart no.2.

Apart from *Prakriti*, it was also observed that the participants had a few clinical symptoms in common such as lumbago, menstrual irregularities, digestive disorders and constipation.

Discussion

Prakriti is a state where there will be balance of all *Dosha* and when there is derangement in this balanced state, onset of a disease happens. Assessing *Prakriti* is a better tool in selecting diet and lifestyle and planning the treatment strategy. Being one among the *Dasha Vidha Pariksha*, it is necessary to assess *Prakriti* of every individual during clinical examination. Although questionnaires are available which incorporates all the features of individual *Prakriti*, many times patients or individuals do not spare their time and take efforts to answer those questions to assess their *Prakriti*.

Table no. 1: Questionnaire containing 16 selected physical features of *Prakriti* assessment

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| Features | Vata | Pitta | Kapha |
|-------------------------------|---|--|--|
| Frame of arms | Short and thin | Medium | Tough, thick, well built |
| Forehead z | Small irregular margin | Medium sized irregular margin | Large straight margin |
| Eyebrows and eyelashes | Scanty, dry, irregular | Scanty brownish | Dense, smooth and moist |
| Hair | Scanty dry irregular | Brownish baldness | Dense, smooth and moist |
| Eyes | Small sized lacks glow, round unsteady, remains partially open during sleep | Medium sized reddish/yellowish | Almond sized and beautiful |
| Sclera o | Smoky, blackish | Reddish/yellowish | White, glowing |
| Iris | Blackish | Blue/green/grey | Black |
| Nose d | Small with their covering skin | Suitable for face | Big with thick covering skin |
| Lips | Dry, small sized cracked | Thin, red, small sized | Thick moist Big sized |
| Teeth e | Irregular in shape & placement cracked & muddy | Yellowish regular in shape and placement | With big sized, regular in shape and placement |
| Tongue | Dry, small sized cracked | Thin, red small sized | Thick, flashy moist, big sized |
| Skin p | Thin, dry, cracked rough | Soft, oily, has tendency to develop skin disease | Thick moist smooth |
| Complexion | Dark brown blackish | Pinkish | Fair |
| Palms t | Small sized, dry, cracked has numerous palm lines | Medium sized, soft hot on touching sweating | Big sized fleshy, soft less palm lines |
| Soles | Small sized, dry cracked | Medium sized, soft, sweating | Big sized, fleshy, soft, big sized moist |
| Nails w | Small sized, dry, brittle | Medium sized, pinkish, soft | Medium sized, pinkish, soft |

anguli Pramana (measuring through ones own finger). The size of middle phalanx of middle finger of the volunteer is measured and converted into cms. Later the above parts are measured through tape and converted into *Anguli Pramana*, based upon which Small, Medium and Big sizes are defined.

The present study was planned to assess *Prakriti* at a basic level by observing the physical features of the participants which can be done in an easier way even at clinical set up. Although *Prakriti* assessment is based upon the physical, mental and emotional characteristics of an individual, assessing all the parameters in a limited time always stand as a challenging task. To overcome this limitation, the present study was planned to check the feasibility of assessing gross level *Prakriti* by considering only physical appearance of an individual.

Ayurveda insists on four *Pramana* (tools which helps in gaining any sort of knowledge) namely, *Aptopadesa* (Words of wisdom by scholars/sages), *Pratyaksha* (Direct observation), *Anumana* (Supposition) and *Yukti* (Logical reasoning).^[7] In the present study for analysis of *Prakriti*, both *Aptopadesha* and *Pratyaksha Pramana* were used. *Pratyaksha Pramana* (direct observation) is a tool to validate the knowledge in the form of inspection of patients which can be adopted as an easy method to assess *Prakriti* at a gross level. By direct observation of physical features, the participants have filled the questionnaire with the assistance of the researchers.

Among the 25 participants, those with *Tridoshaja Prakriti* were more compared to *Dwidoshaja Prakriti*. As this was a pilot study involving only physical features, the importance of type of *Prakriti* according to number of *Dosha* involved stands trivial. The clinical ailments revealed by the participants such as lumbago, menstrual irregularities, digestive disorders and constipation need more thorough evaluation to connect its incidence in relation to their *Prakriti*. It is stated in Ayurveda that the individuals are prone to suffer from similar complaints to that of predominant *Dosha* forming their *Prakriti*.

The present study of *Prakriti* analysis plays an important role in case of individuals with defective communication such as disorders of speech, deafness, dumbness, facial palsy, psychological disorders and also in infants and children. In such cases, information regarding emotional and physiological factors involved in *Prakriti* cannot be assessed well. So to assess *Prakriti* in such cases direct observation of physical features will be an effective tool.

On an average, the time taken by the selected participants to fill the questionnaire of *Prakriti* was 10-15 minutes. Thus this can be made use of in the large scale study of *Prakriti*. The data analysis of the present study was a preliminary assessment which should be under the guidance of a statistician for the large scale study.

Conclusion

The present study demonstrated the preliminary assessment of *Prakriti* on the basis of only physical features of participants using questionnaire method. A main study with large sample size will be feasible with the same protocol for assessing gross *Prakriti* of individuals by analyzing physical features. As *Prakriti* does not only depend upon the physical features of an individual, the present method may be used as a preliminary tool to assess *Prakriti* and specifically in such individuals who are restricted in effective communication both in healthy and diseased. The protocol followed in this study is limited to only physical features in relation to *Prakriti* and so this cannot be considered as a complete assessment of *Prakriti*.

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