THE KEY ROLE OF VIDHIYUKTA AHARA AND AHARVIDHI VISHESH AYATANA IN THE PREVENTION OF PRAMEHA

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ABSTRACT

Background: Ahara is one of the most important factor of trayopastambha. The benefits of having vidhiyukta ahara is mentioned in samhita. When we study prameha hetu, most of the causes are related to diet. Though the person who takes a healthy food but fails to follow the methods of food intake and its preparation, may lead to variety of lifestyle disorders like obesity, prameha etc. If individual consumes the food in proper manner then it leads to dirghayu.

Objectives: To establish the effect of Vidhiyukta ahara and ahar vidhi vishesh ayatana for maintaining health and preventing lifestyle disorders like prameha.

Methods: The available charak samhita and related commentaries were studied to explore concept of vidhiyukta ahara and Ashtavidh ahar vishesh ayatan and prameha. 50 patients of both genders, between age 40-50 yrs, who were suffering from prameha vyadhi were selected for survey. A questionnaire was made related to their ahar vidhi and data was collected.

Results: On the basis of collected data, efforts were made to throw light on the importance of vidhiyukta ahara and aharvidhi vishesh ayatana in prevention of prameha.

Conclusion: After scrutinizing the compiled data, we can conclude that vidhiyukta ahara and Ashtavidh ahar vishesh ayatan plays an important role in the prevention of prameha.

Keywords: Ashtavidh Ahar vishesh ayatan, vidhiyukta ahara, prameha

INTRODUCTION: Prameha is explained as one of the ashta maharogas in Ashtang hriday samhita1. There are 20 types of prameha described in samhita. These are made on the basis of colour, texture and consistency of urine. Bahudrava shleshma doshvishe is a famous quotation for prameha which indicates samprapti of prameha vyadhi2. In prameha, dravatwa of sharir dhatu along with mala is increased and these excess mala are excreted in the form of mutra. Causes of prameha, given in samhita, includes most of the dietary hetu like excess intake of dadhi, soup of meat of domesticated or aquatic animals and animals from marshy land, excess intake of milk and milk products, freshly harvested grains, intake of jaggery and all kapha aggravating factors. As we are aware that most of the causes of prameha are related with ahar. If we understand the vidhiyukta ahara and all the concepts explained under it, like matravat ahara, satmya ahara, asatmya ahara, virudha ahara, ahar parinamkar bhav, aharvidhi vishesh ayatana and its benefits, it will imply that a proper ahar vidhi and following methods of ashtavidh ahar vishesh ayatana can prevent prameha. All the hetu of prameha leads to kapha vrudhhi and it vitiates meda, mamsa and kleda of the body and leads to different types of prameha. If we consume vidhiyukta ahara and also follow
ashtavidh ahar vishesh ayatana, it only promotes lifespan.
Diet is one of the major factor now linked to a wide range of diseases including diabetes mellitus. The amount and type of food consumed is a fundamental determinant of human health. Diet is individualized depending on age, weight, gender, health condition and occupation etc.,

**AIM AND OBJECTIVES:** To conduct a survey to find out cause and effect relationship between vidhiyuktahara and ashtavidh ahar vishesh ayatana and prameha.

**MATERIALS AND METHODS:** To conduct a survey study to gather the data for vidhiyuktahara and ashtavidh ahar vishesh ayatana, a duly prepared proforma was made. A survey study was conducted at OPD, IPD of Y.M.T. Ayurved college and Hospital Kharghar, Navi Mumbai. Patients were screened on the basis of questionnaire.

1) **Rugna parikshan-** We did complete examination of patients and asked questions related with prameha vyadhi lakshnas.

2) **Preparation of questionnaire-** To fulfil above aims, materials related to vidhiyuktahara and ashtavidh ahar vishesh ayatana, prameha and other relevant topics have been collected. The main ayurvedic texts used in this study were bruhatrayi and available commentaries.

Total 45 questions were made. The questions of survey were based on vidhiyuktahara and ashtavidh ahar vishesh ayatana and prameha. The first few questions were based on demographic information. Questionnaire includes the questions of vataj, pittaj, kaphaj prameha lakshanas, about frequency of urination, consistency, colour of urine, other lakshanas related with purvarupa of prameha. Food habits, methods of preparation of food, daily schedule, exercise, viruddha aharra, questions related with food quality, food combinations, food proportion, etc.,

3) Survey study- In this section, 50 patients of either gender between the age 40-50 years who were suffering from prameh were selected.

4) Selection criteria- All the patients were selected with the following criteria:-

   - **Inclusion criteria** - patients with signs and symptoms of prameha vyadhi and of the age group of 40-50 years. Patients belonging to either gender were selected in the survey study.

   - **Exclusion criteria** - patients below 40 years and above 50 years, patients with paralysis, malignant diseases, cardiac problems, other systemic disorders were excluded from survey study.

**OBSERVATIONS:**

1) **Age-** In survey study, out of 50 patients, 10 patients were found in the age group of 41 years, 17 patients were found in the age group of 48 years, 5 patients were found in the age group of 48 years, 2 patients were found in the age group of 50 years, 7 patients were found in the age group of 48 years, 2 patients were found in the age group of 50 years, 7 patients were found in the age group of 43 years, 6 patients were found in the age group of 47 years and 3 patients of 40 years old age group (Graph 1)

2) **Among 50 patients, 28 were females and 22 were males (Graph 2)

3) **Distribution of marital status-** out of 50 patients, 42 were unmarried and 8 were married (Graph 3)

4) **Out of 50 patients, 23 were from service class, 7 from farming sector and 20 were house wives.** (Graph 4)

5) **Out of 50 patients, 40 were from urban area and 10 were from rural area (Graph 5)
Out of 50 patients, only 18 were following vidhiyukta ahara (Graph 6)
7) Ashtavidh ahar vishesh ayatana-
   a) Prakriti of ahara: The nature of food or it’s quality is known as prakriti. Depending on whether the food is easily digestible or not, food can be classified as heavy (guru) or light (laghu) in quality.
   b) Karana: Methods of processing of food like cleaning, frying, storing, roasting, baking, drying, boiling, fermenting etc, it includes jalsanyog, agni samyog, manthan, churning.
   c) Samyog: Mixing of two or more substances.
   d) Rashi: It consists of sarvagraha and parigraha.
   e) Desh: It is related to place of growth and distribution of food materials.
   f) kaal: When the previous food has been properly digested then only the next should be consumed.
   g) Upayogsamsita: All the rules related with food intake – aharvidhi.
   h) Upyoka: The person having food.
DISCUSSION:

Age: We selected the age group between 40 – 50 years because in this age group people are well settled, do not follow ahar, neglect health issues and live a relaxed life. In the study, maximum number of patients were found in the age group of 48 years.

Gender: Among 50 volunteers, 28 were females and 22 were males. Gender has no direct relation with prameha. But here reported data shows that female are more prone to prameh may be due to ignorance or carelessness about own health and diet.

Marital status: It is difficult to say that marital status has any relation with prameha.

Occupation: In this study maximum patients are from service class. It may be due to staying away from home, daily travelling and workload due to which they have improper diet and irregular eating habits. Most of the housewives, it is observed that eating stale food, divaswap may lead to kapha vruddhi.

Habitat: 40 patients were selected from urban population as such people are supposed to have a sedentary lifestyle, less physical activities, fast food eating habits.

Ahar vidhi: In this section, questions were asked about ahar matra, viruddha ahar, about the ahar mentioned in the causes of prameh, methods of having food. Out of 50 patients, only 18 followed vidhi yukta ahar. Rest of the patients were unaware of the importance of ahar vidhi.

Ashtavidh ahar vishesh ayatana:

Prakriti- Among 50 patients, only 11 people knew about nature of food while eating it, for eg food is heavy to digest, whether it is ushna or shita guna.

Karana- 14 people followed proper method of food processing.

Rashi- Only 22 patients knew about the quantity of food while eating it.

Desh- Only 19 patients had knowledge of food intake with respect to the surroundings.

Kaal- Only 8 people knew how to eat according to the climatic conditions – seasonal changes.

Upayog samstha- only 11 patients follow rules of ahar vidhi.

CONCLUSION: Study reveals that not having vidhi yukta ahar and ashtavidh ahar vishesh ayatana, definitely leads to life style disorders like prameh and following these methods may prevent prameha vyadh. Study supports the ayurvedic classical claim regarding causes of prameh.

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