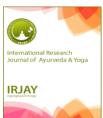
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# A Survey Study To Assess The Status Of *Bala* And Morbidity Among The Individuals Of Jaipur City In *Yamadamstra Kala*

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## **ABSTRACT: -**

**Introduction:** Various health care measures are mentioned in Ayurveda to maintain the health of the healthy persons, like *Dincharya*, *Ritucharya*, *Ahara-Vihara*, *Adharniya-Dharniya Vega*, *Achar rasayan*, *Rasayana* and *Vajikarana*. *Ritucharya* or seasonal regimen teaches us how to adapt various seasons and seasonal changes in terms of small adjustments which we need to make during various seasons with respect to diet, lifestyle and behaviour. *Ritusandhi* is the transition period between two seasons. Therefore, the status of *Bala* (*Sharira Bala*, *Satva* and *Agni*) should be assessed.

**Method:** In this study the assessment of *Bala* (*Sharira Bala*, *Satva* and *Agni*) and morbidity of people during *Yamadamstra Kala* (6 to 21 November 2019) and one month before (5 to 20 October 2019) has been done with the help of survey and the hospital's OPD data respectively.

**Result:** Insignificant change has been found in *Bala* (*Sharira Bala*, *Satva* and *Agni*) of 300 healthy individuals. Morbidity was increased in new OPD patients during *Yamdanstra Kala*.

**Conclusions:** There was no effect of *Yamadamstra Kala* on *Bala* (*Sharira Bala*, *Satva and Agni*) according to survey of healthy volunteers but morbidity is increased during *yamadamstra kala* in comparison of one month before.

Keywords: - Ritucharya, Lifestyle, Ritusandhi, Yamadamstra Kala, Seasonal Disease.



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## **INTRODUCTION**

The basic principal followed in the Ayurvedic system of medicine is Swasthasya Swasthya Rakshanam, [1] which means to maintain the health of the healthy person. For this purpose, various health care measures are mentioned in Ayurveda like Dincharya, Ritucharya, Ahara-Vihara, Adharaniya-Dharaniya Vega, Achara Rasayana, Rasayana and Vajikarana, to maintain proper healthy state of people. Most of us have capacity to get adjusted to one or more season. Summer is comfortable for some of us while winter is compatible for others. Only few of us are easy to adjust in all the seasons. These few people were having good immunity and tolerance. Many times, it becomes very difficult for us to get adjusted to different seasons as and when they change. This difficulty is more experienced during the transition phase where in one Ritu changes to other. While describing the Ritucharya or Ritulakshana Acharya clearly mentioned that each *Ritu* has a different level of body strength and different level of Agni i.e. digestive fire, on the basis of which all the measures are taken accordingly to adapt that particular Ritu or

season. Therefore, it is clear that we cannot follow the same diet, lifestyle and same behavior during the whole year. It is very difficult to adapt when we move from one season to another or at the time of *Ritusandhi*.<sup>[2]</sup>

### MATERIAL AND METHOD

It was an observational study. The data were collected from in and around the Jaipur district Rajasthan for assessment of *Bala* (*Sharira Bala*, *Satva* and *Agni*) of individual. The sample size for this study was 300 apparently healthy volunteers for assessment of *Bala*. People were registered during period one month before *Yamadamstra Kala* [3](5 to 20 0ct.2019). A proforma having general details and *Bala* assessment was filled before and during *Yamadamstra Kala*.

Assessment of Bala (Sharira Bala, Satva and Agni)

### **Inclusion criteria**

- Age between 18 to 60 yrs.
- Irrespective of gender and occupation

### **Exclusion criteria**

Person suffering from any chronic diseases.

### **Assessment criteria:**

| S.N. | Bala                 | Prava <mark>ra (3)</mark> | Madhyama (2)                                 | <mark>Avara</mark> (1)  |
|------|----------------------|---------------------------|--|-------------------------|
| 1    | Satva <sup>[3]</sup> | Able to cope up           | <mark>Ab</mark> le to co <mark>pe u</mark> p | Unable to cope up with  |
|      |                      | adverse conditions        | adverse conditions                           | adverse conditions even |
|      |                      | easily himself            | with the help of                             | with the help of other  |
|      |                      |                           | other  |                         |
| 2    | Agni <sup>[4]</sup>  | Takes more than           | Takes normal diet                            | Takes less than normal  |
|      |                      | normal diet               |  | diet                    |
| 3    | Sharira              | Do not exhaust even       | Do not                                       | Exhausts even after     |
|      | Bala <sup>[5]</sup>  | after more than           | exhaust after normal                         | normal workout          |
|      |                      | normal workout            | workout                                      |                         |

## Assessment of morbidity status

Data of new patients was collected from NIA, OPD registers. This data was compiled and classified according to diseases. The trend of morbidity was compared during one month before *Yamadamṣtra Kala* (6to 21 oct.2019) and during *Yamadamṣtra Kala*. (5to 20 Nov.2019)

## **OBSERVATION AND RESULT**

If we see the disease wise classification about the number of patients, it was revealed as follows:

- The patients suffering from the diseases like *Amvata*, *Arsha*, *Madhumeha*, *Manas Rog and Sweta Pradara* showed a spike between 15 to 20%.
- While the patients of the diseases like *Amlapitta*, *Bhrama*, *Hridya Rog*, *Katishul*, *Mutra Vikara and Vibandh* shows the increment between 10 to 15%.
- Diseases like Ashmari, Bhagandra, Jvara,

- *Kasa, Tamakswas and Uccharakatchap* showed increment between 5 to 10%.
- Gridharisi, Kamla, Pradara and Sandhivat patients showed below 5% increase.
- Some diseases like *Netraroga* showed 12.60% decrease in number of patient while *Pandu* and *Atisara* patients showed 0.46% and 6.29% decrease respectively.

## Comparison between Sharira Bala of survey volunteers before Yamadamstra Kala and during Yamadamstra Kala

Table I: Assessment of *Sharira Bala* by feeling tiredness during exercise (workout).

| S.N. | Befor <mark>e Yamad</mark> amstra Kala | During Yamadamstra | Total              |  |
|------|--|--------------------|--------------------|--|
|      | (Count in %)                           | Kala (Count in %)  | O.                 |  |
| A    | 147(49.0%)                             | 128(42.7%)         | <b>275(4</b> 5.8%) |  |
| В    | 116(38.7%)                             | 127(42.3%)         | 243(40.3%)         |  |
| C    | 37(12.3%)                              | 45 (15.0%)         | 82(13.7%)          |  |

A = More than normal, B=Normal, C= Less than normal

Table II: Statistical analysis of Assessment of Sharira Bala

|                    | Value | Df | P-Value |
|--------------------|-------|----|---------|
| Pearson Chi-Square | 2.591 | 2  | 0.274   |
| N of Valid Cases   | 600   |    |         |

From above table we can observe that P-Value is greater than 0.05. Hence, we conclude that there is no significant change observed in

responses before and during Yamadamstra Kala.

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## Comparison between quantity of Agni Bala of survey volunteers before Yamadamstra Kala and during Yamadamstra Kala

• Table III: Assessment of quantity of food of an individual

| S.N. | Before Yamadamstra | During           | Total      |
|------|--------------------|------------------|------------|
|      | Kala (Count in %)  | Yamadamstra Kala |            |
|      |                    | (Count in %)     |            |
| A    | 36(12.0%)          | 30(10.0%)        | 66(11.0%)  |
| В    | 236(78.7%)         | 242(80.7%)       | 478(79.7%) |
| C    | 28(9.3%)           | 28(9.3%)         | 56(9.3%)   |

A= More than normal B= Normal C=Less than normal

#### • Table IV:

|                    | Value | Df  | P-Value |
|--------------------|-------|-----|---------|
| Pearson Chi-Square | 0.621 | 2   | 0.733   |
| N of Valid Cases   | 600   | 670 | DUITE   |

From above table we can observe that P-Value is greater than 0.05. Hence, we conclude that there is no significant change observed in

responses before and during Yamadamstra Kala.

# Comparison between facing adverse condition before Yamadamstra Kala and during Yamadamstra Kala of survey volunteers.

• Table V: Assessment of *Satva* by facing of adverse condition by individual.

| S.N. | Before Yamadamstra        | During Yamadamstra | Total      |
|------|---------------------------|--------------------|------------|
|      | Kala (Count in %)         | Kala (Count in %)  |            |
| A    | 84(28.0%)                 | 84(28.0%)          | 168(28.0%) |
| В    | 185(61.7 <mark>%</mark> ) | 177(59.0%)         | 362(60.3%) |
| C    | 31(10.3%)                 | 39(13.0%)          | 70(11.7%)  |

A= Easily without any help/ assistance B = With

condition.

help/ assistanc C=Not able to face adverse

### Table VI:

|                    | Value | Df | P-Value |
|--------------------|-------|----|---------|
| Pearson Chi-Square | 1.091 | 2  | 0.580   |
| N of Valid Cases   | 600   |    |         |

From above table we can observe that P-Value is greater than 0.05.

Hence, we conclude that there is no significant

change observed in responses before and during *Yamadamstra Kala*.

Table VII: OPD patients of NIA Hospital, Jaipur

| Disease     | Before      | During       | Total | Before  | During  | Diff%    |
|-------------|-------------|--------------|-------|---------|---------|----------|
|             | Yamadamstra | Yamadam stra |       | Yamadam | Yamadam |          |
|             | 6 to 210ct. | 5 to 20 Nov  |       | stra    | stra    |          |
|             | 2020        | 2020         |       |         |         |          |
| Amavata     | 213         | 294          | 507   | 42.01%  | 57.99%  | 15.98%   |
| Amlapita    | 204         | 269          | 473   | 43.13%  | 56.87%  | 13.74%   |
| Arsha       | 205         | 292          | 497   | 41.25%  | 58.75%  | 17.51%   |
| Ashmari     | 79          | 89           | 168   | 47.02%  | 52.98%  | 5.95%    |
| Atisaara    | 93          | 82           | 175   | 53.14%  | 46.86%  | -6.29%   |
| Bhagandara  | 229         | 262          | 491   | 46.64%  | 53.36%  | 6.72%    |
| Bhrama      | 29          | 37           | 66    | 43.94%  | 56.06%  | 12.12%   |
| Gridhrisi   | 109         | 118          | 227   | 48.02%  | 51.98%  | 3.96%    |
| Hridrog     | 152         | 187          | 339   | 44.84%  | 55.16%  | 10.32%   |
| Jvara       | 245         | 295          | 540   | 45.37%  | 54.63%  | 9.26%    |
| Kamala      | 143         | 158          | 301   | 47.51%  | 52.49%  | 4.98%    |
| Kasa        | 232         | 263          | 495   | 46.87%  | 53.13%  | 6.26%    |
| Katishula   | 205         | 276          | 481   | 42.62%  | 57.38%  | 14.76%   |
| Madhumeha   | 177         | 243          | 420   | 42.14%  | 57.86%  | 15.71%   |
| Manasrog    | 26          | 36           | 62    | 41.94%  | 58.06%  | 16.13%   |
| Mutarvikar  | 141         | 181          | 322   | 43.79%  | 56.21%  | 12.42%   |
| Pakshaghata | 99          | 99           | 198   | 50.00%  | 50.00%  | 0.00%    |
| Pandu       | 219         | 217          | 436   | 50.23%  | 49.77%  | -0.46%   |
| Pradara     | 132         | 139          | 271   | 48.71%  | 51.29%  | 2.58%    |
| Sandhivata  | 257         | 277          | 534   | 48.13%  | 51.87%  | 3.75%    |
| Shweta      | 102         | 148          | 250   | 40.80%  | 59.20%  | 18.40%   |
| Pradara     |             |              |       |         |         |          |
| Tamakshwas  | 191         | 228          | 419   | 45.58%  | 54.42%  | 8.83%    |
| а           |             |              |       |         |         |          |
| Udarshula   | 205         | 207          | 412   | 49.76%  | 50.24%  | 0.49%    |
| Uccha-rakat | 148         | 171          | 319   | 46.39%  | 53.61%  | 7.21%    |
| Chap        |             |              |       |         |         |          |
| Vibandha    | 183         | 234          | 417   | 43.88%  | 56.12%  | 12.23%   |
| Netarroga   | 277         | 215          | 492   | 56.30%  | 43.70%  | -12.60%  |
| Anay Roga   | 1641        | 1793         | 3434  | 47.79%  | 52.21%  | 4.43%    |
| Pratiksha   | 1643        | 1618         | 3261  | 50.38%  | 49.62%  | -0.77%   |
| Rat         |             |              |       |         |         |          |
| Total       | 7579        | 8428         | 16007 | 47.34%  | 52.65%  | 5.31%    |
| Patients    |             |              |       |         |         | <u> </u> |

## **DISCUSSION**

The survey's findings were insignificant because the peoples do not come under the direct influence of the *Ritu* due to the comfort zone created by them with the help of various gadgets and different appliances. That's why we aren't able to evaluate the actual effect of *Ritu* on the human beings.

For every study, there should be sufficient time and even this study on *Yamadamstra Kala* need to be done in all the *Ritusandhi Kala* of whole year. This survey study was conducted only for one *Yamadamstra Kala*, Therefore study should be done on more *Yamadamstra Kala* in different years for achieving more specific and accurate results.

Through the observation of hospital's OPD data it was revealed that the number of patients were more in Yamadamstra Kala as compared with before Yamadamstra Kala. Disease shows increase in number because of the increasing debility in Yamadamstra Kala. The individuals take the time to adapt the next season because they are habitual of previous season, and this failure of adaptation is seen more in this modern era, because people don't give much importance to the Ayurvedic way about how to adapt the changing weather in a gradual shifting order. This inability to adapt the weather also results in the faulty digestive system or Agnidusti, which results in the production of Aam. This Aam production causes the origin of diseases. Because, Aam is the root of all diseases. [6] Another cause of Aam origin is faulty food habits. In Charaka Samhita Sutra Sthan Acharya says that Vishamabhojana is Agreya in Agnivaishamya [7] which ultimately results in the production of Aam.

### **CONCLUSION**

 Bala is the vital factor and a multi-dimensional functional identity of the body. Bala is conjugative expression in the form of physical strength, psychological strength and immunity strength of body. In this survey there is no significant difference has been found before and during *Yamadamstra Kala* in *Bala* of an individual.

- Satva is a Mansik Bala of an individual which support the strength in healthy as well as diseased condition. There is no significant difference has been found before and during Yamadamstra Kala in Satva of an individual.
- Agni is a physiological entity of an individual.
   Samagni of an individual maintain digestion and health. There is no significant difference has been found before and during Yamadamstra Kala in Agni of an individual.
- Morbidity increased in *Yamadamstra Kala*. Data showed 5.31% increase in the *Yamadamstra Kala*. Hence it is clear that this time showed significance regarding morbidity and extra care should be taken during this period.

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