



A SURVEY STUDY OF IMPLEMENTATION OF DAILY REGIMES FOR HEALTH BY AYURVEDA STUDENTS, PRACTITIONERS, TEACHERS AND PHARMACISTS.

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ABSTRACT

Background: Health care providers are known to neglect their own health. Laying an immense importance towards prevention of diseases, Ayurveda has described rules of daily conduct in the form of *Dinacharya* (daily regimen). **Methods:** To find out whether they practice what they preach, a survey amongst Ayurveda practitioners, Ayurveda students, and other professionals related to Ayurveda was carried out. A total 1200 google forms were sent across the country and total 515 completed forms were received. **Findings:** It was found that younger age group was enthusiastic to take the survey. It was also found that majority of subjects do regular *Vyayama* (exercise), *Avegadharana* (not suppressing natural urges), *Jeernashana* (eating when previous food is digested); but they do not follow getting up at *Brahmuhurtha* (getting up around 5 am), *Kaashthdhavana* (using herbal sticks to brush teeth), chewing of betel leaves, *Dhoompana* (medicated smoking), *Anjana* (collyrium), *Nasya* (nasal drops), *Udvardana* (powder massage), *Rutushodhana* (seasonal purification). The subjects had shown readiness to answer question about bad deeds. **Interpretation:** The survey underlines the necessity of creating re-awareness through continuous education so that the healthy principles of Ayurveda will come into practice once again. The article also initiates the possible solutions to this.

KEYWORDS : *Dinacharya*, Awareness, Ayurveda students, Ayurveda physicians, Ayurveda teachers.

INTRODUCTION:

Through centuries, Health care providers have stressed upon healthy living. The strong advocacy of healthy food, healthy lifestyle and attending to simplest of the symptoms with great care has always been the mainstay of suggestions in their practice. Doctors are often said to be healthier than the general population because their standard mortality rate is lower.^[1] Their health plays as a role model and tend to positively affect the outcome in patient's health. One of the strongest predictors of health promotion counseling by primary care physicians is practicing a healthful behavior oneself – many physicians report difficulty counseling patients about behaviors they themselves do not practice.^{[2], [3]} However, doctors have similar rates of chronic illness and have the same preventive health needs as the general community.^[4] The survey conducted by The Harris poll on behalf of Samueli integrative health programs, says that physicians from all over the world neglect their own health.^[5] Various reasons found for not practicing their desired amount of self-care are of time, job demands, family demands, being too tired and burnout.^{[5], [6], [7]}

The science of Ayurveda is to safeguard the health of a healthy individual and to alleviate the disorders of a diseased.^[8] "Prevention is better than cure" is conventional adage and to achieve this Ayurveda included various methods like *Dinacharya* (daily regimen),^[9] *Rutucharya* (seasonal regimen),^[10] *Rutushodhana* (seasonal purification),^[11] *Aacharasayana* (code of conduct).^[12] These methods are described as a part of achieving longevity, prevention, prophylaxis and treatment of disease. Out of the various practices indicated by science of Ayurveda, one of them is *Dinacharya*. The word *Dinacharya* is made up of two terms i.e. *Dina* = Daily, *Charya* = Activities or Regimen. Activities or regimen needs to be followed daily is *Dinacharya*. A good healthy life is not merely a single day job, the proverbial phrase "many a little makes a mickle" fits here as to maintain a healthy life person must follow *Dinacharya* religiously. *Dinacharya* deals with activities we should do (or we do) from the time of awakening in the morning till we go to bed at night. As Ayurveda students learn and advise patients to follow *Dinacharya*, it would be interesting to see whether they practice what they preach. A countrywide (India) pilot survey was carried out to analyze the gap or otherwise, between practice and propagandizing of the principle of *Dinacharya* in their daily life.

Aim: To Study implementation of *Dinacharya* (Daily regimen) in the group of Ayurveda students, Ayurveda physicians, Ayurveda Pharmacists and Ayurveda teachers.

Objectives:

Primary objectives

- To know the actual implementation of events quoted in *Dinacharya* (Daily regimen) by Ayurveda students in their daily life.
- To know the actual implementation of events quoted in *Dinacharya* by Ayurveda physicians in their daily life.
- To know the actual implementation of events quoted in *Dinacharya* by Ayurveda teachers in their daily life.
- To know the actual implementation of events quoted in *Dinacharya* by Ayurveda Pharmacists in their daily life.

Secondary objectives

- To find out the level of awareness of *Dinacharya* in the group of Ayurveda students, Ayurveda physicians, Ayurveda Pharmacists and Ayurveda teachers.
- To create awareness of *Dinacharya* among Ayurveda students, Ayurveda physicians, Ayurveda Pharmacists and Ayurveda teachers.

MATERIALS & METHODS

A questionnaire was prepared with the help of data collected from Ashtang Hridayam – a popular treatise on Ayurveda, which covered various points of *Dinacharya* (Daily regimen). They were formatted in Google Form which was circulated on various social media platforms and through e mails to all known Ayurveda students, physicians, pharmacists, and teachers across India.

The information of details like name, Date of Birth, E-mail id and similar which could be the point of identity were not solicited to avoid any security breach in personal data.

Google forms were chosen because it is a convenient, accurate, easy way of filling and receiving the form, especially in the time of lockdown due to Corona Pandemic. During the period of 3 weeks, 1200 forms were sent. Out of which 515 people responded with complete, filled forms.

Inclusion criteria

- 1) Ayurveda students from all over India

- 2) Ayurveda physicians from all over India
- 3) Ayurveda pharmacists from all over India.
- 4) Ayurveda teachers from all over India.

Exclusion criteria

- 1) General public
- 2) People who are not in the field of Ayurveda.
- 3) The forms which were incomplete.

DISCUSSION:

Total numbers of responses were 515. Out of the total respondents 41% were of age group 17-23 years and 0-5% were above 60yrs. It may be since the young adults are more enthusiastic to undergo a survey rather than the other age group.

Majority of the respondents were students (49.7%) followed by 28.7% practitioners and least were researchers.

Out of the total respondents 24.5% respondents get up every day at *Brahmamuhurtha* (getting up one and half hour before sunrise), whereas 15.9% gets up more than once a week and 15.3% gets up once a week only at *Brahmamuhurtha* but majority of the respondents 44.3% do not get up at *Brahmamuhurtha* which reflects that our age old tradition of getting up early in the morning is getting washed away, this may be due to multiple reasons like changed lifestyle, late night sleeping habits etc. Ayurveda has advocated to get up one and half hour before sunrise which is around 4.30 to 5.00 am in Indian context.^[13]

Out of the total respondents 73% respondents use toothpaste for *Dantadhavana* (cleaning of teeth) this may be due to the wonderful marketing strategies done by the various companies for the use of toothpaste or they choose toothpaste sheerly out of habit. Natural non-foaming toothpaste is done by 19.6% respondents and our tradition of doing *Kaashthdhavana* (teeth cleaning twig) is practiced by less than a percent. The lower % of natural non-foaming toothpaste and *Kaashthdhavana* user may be either because of lack of awareness or due to absence of usual foamy feeling in the mouth. Ayurveda has advocated season-wise specific herbs for this job.^[14]

Majority of the respondents (75.9%) do not apply *Anjana* (collyrium), 15.9% respondents apply *Anjana* everyday others do it occasionally. This may be due to propaganda by health care provider against it or because of their irritating nature. *Anjana* is advocated to prevent eye diseases.^[15]

Similarly, 76.3% respondents do not perform *Nasya* (nasal drops) regularly. This may be due to unpleasant feeling. *Nasya* is indicated for health of respiratory tract, sense organs and scalp.^[16]

Out of the total respondents 55.1% respondents perform *Gandusha* (mouth gargling) regularly whereas 40% do not, others do it occasionally. This may be due to unpleasant feeling. This procedure is to maintain health of oral cavity.^[17]

Majority of the respondents (84.8%) do not inhale *Dhuma* (medicated smoke) on regular basis, this may be due to reason that either they feel it is required only when they are suffering from some ailments or they feel it is insignificant. Inhaling medicated smoke is an important process to reduce mucous from the sinuses.^[18]

Even 82.3% respondents do not practice chewing of betel leaves. This may be due to various policies showing that betel leaf consumption is linked with cancers or oral diseases.^{[19], [20]} The other reason may be unawareness of its benefit. Betel leaf chewing is useful to reduce *kafa* (mucous) related diseases.^[21]

Out of the total respondents 41.2% respondents do not practice *Abhyangam* (oil massage) on a regular basis, 26.2% respondents do it rarely. And 20.4% respondents practice *Abhyangam* only at *Shira* (head), *Shravan* (ear) and *Pada* (leg) whereas 12.2% only do it *Sarvangam* (whole body). This may be due to people disliking oily feeling or lack of time. This habit goes a long way in maintaining good immune status and increasing longevity.^[22]

Vyayama (exercise) is done by 79% respondents whereas 21% do not. This may be due to either time constraints or due to laziness. Out of 79% respondents, yoga is practiced by majority (190 respondents), walking (36 respondents), yoga and walking (35 respondents), gym (25 respondents), HIIT (14 respondents), yoga along with HIIT (19 respondents), yoga with gym (5 respondents), walking with HIIT (3 respondents). This may be due to respondents are socially influenced, have to be socially present so motivated or for self-satisfaction or are hardcore theory followers. The majority practicing yoga may be due to increased awareness about yoga. *Vyayama* is major immune builder according to ayurveda.^[23]

Majority of the respondents (79.2%) do not practice *Udvardana* (powder massage), 9.1% do it rarely and 11.7% practice *Udvardana* every day. This may be due to lack of time or lack of practice. Massaging powder on the body helps to reduce weight and give glow to the skin.^[24]

Out of the total respondents 57.7% respondents have their meals only after the digestion of previous one whereas 34.6% eat according to their fixed schedule. This may be due to their fixed office timings because of which they do not have any other alternative. This may be also due to their biological clock being set to the fixed time. Ayurveda proposes eating before digestion of previous meal as a cause of many diseases.^[25]

Out of the total respondents 89.5% do not induce natural urges forcefully.

Similarly, 80.2% respondents do not practice *Vegadharana* (suppression of natural urges) but 13.4% do *Vegadharana*. This may be due to their busy/fixed schedule or hesitancy. Suppression of natural urges is a major cause of many diseases characterized by pain, degeneration, scaling and emaciations.^[26]

Out of the total respondents 59% respondents do not practice any bad deeds whereas 41% respondents do. Of which *Drgviparyaya* (misunderstands, finding fault) were 59 respondents, *Paisunya* (using abusive or harsh speech)- 46 respondents, *Shankhitaha* (suspects everything around)-34 respondents, *AnrutaVacana* (speaking untruth) - 27 respondents, *Abhidya* (jealousy/ not tolerating good of others)-17 respondents, *Sambhinna Alapa* (speech causing separation/ breaking of company) -17 respondents, *Vyapada* (quarrel, intention of harming) -8 respondents, *Himsa* (causing injury/torture)- 6 respondents, *Anyathakama* (unlawful sexual activity/ desiring for others)- 5 respondents, *Steya* (stealing, robbing) -2 respondents. The high moral conduct is important cause to keep away many psychosomatic diseases.^{[27], [28], [29]}

Majority of the respondents (90.3%) cover their mouth during sneezing/yawn/laugh.

Out of the total respondents, 46.2% respondents do not undergo *Rutushodhana* (seasonal purification) whereas 15.7% undergo *Rutushodhana* once a year and 7.7% in two years and 26.6% rarely undergo *Rutushodhana*. Hardly 3.8% respondents undergo all three *Rutushodhana*. This may be due to their busy schedule. *Rutushodhana* is essential to keep away diseases and according to theory of ayurveda, internal

milieu changes according to seasons.^[30]

CONCLUSION

The World Medical Association (WMA) has updated the oath sworn by doctors to reflect the importance of them taking care of their own health. The revised oath, now referred to as a pledge, offers a refocus to ensure that doctors are attentive to their personal health.

"I WILL ATTEND to my own health, well-being, and abilities in order to provide care of the highest standard," the amendment states.^[31]

Individual, who follows *Dinacharya* religiously, attains long life, good health, wealth, reputation and the eternal world.^[32]

The immediate conclusion drawn from the above survey is, majority of the respondents do not follow proper *Dinacharya*. The reason for such outcome could be casual approach towards education, personal lifestyle, falsely assuming the difference between theory and practice, workloads leading to exhaustion which kills the passion for doing anything different from their previous years of life. Low percentage of people practicing *Dinacharya* activities like *Nasya*, *Gandusha*, *Dhoompana*, *Abhyangam*, *Udwartana* highly suggests that in future these procedures would remain as *Panchkarma* (fivefold purificatory treatments)/*Pre Panchkarma* procedures only and will be done only in designated *Panchkarma* centers. The respondents are enthusiastic towards *Vyayama*, *Avegadhaarana* and *Jeernashana* and this is a very assuring fact.

The heightened and purposeful efforts are needed to implement *Dinacharya* in daily life. We suggest a few strategies to achieve this goal. They could be as follows –

- Implementing Ayurveda principles in middle and high school educational syllabi,
- conducting researches to provide evidence to prove efficacy of these principles in prevention of diseases,
- Conducting Programs targeting Ayurveda students through NSS camps, Social Service schemes.

Future scope

A detailed multi-centric personal interview style research should be carried out across the globe amongst the Ayurveda students, Ayurveda physicians and Ayurveda teachers.

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Conflicts of interest: No

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