

Proforma for Deciding Doshaja Prakriti In Children

Review article

Lode Dattatraya Somaji¹, Bakal Nilesh Ganeshrao^{2*}

Assistant professor & H.O.D. Department of Kaumarbhritya tantra
 Assistant professor & H.O.D. Department of KriyaSharir,
 G. S. Gune Ayurvedic College, Ahmednagar (M.S.) - 414001

Abstract

Prakriti is sum total of morphological, physiological and psychological traits in human beings. *Prakriti* of human being has genetic and acquired aspects. The genetic aspects depends upon *shukra* and *shonita*. Due to this predominance of *dosha* proportion, people show psychosomatic expressions called as *Deha prakriti*. Preventive aspects of *prakriti* has been described by *charak*. Importance of *prakriti* is prescribing dietary regimen and life style management in healthy individuals and treatment point of view in diseased individuals. *Brihatrayi granthas* mentioned about criteria for deciding *doshaja prakriti* in view of adults. Out of all criteria, some are really related with growth and some with development of child. Most of criteria are *prashna* pariksha (history taking) nature. In this study we have tried to highlight the difference of criteria for deciding *prakriti* in children and adults.

Key Words: Prakriti, children, proforma, kashyapa, genetic constitution

Introduction:

The word *prakriti* means "nature" a natural form of build and constitution of human body. *Prakriti* is sumtotal of morphological, physiological and psychological traits in human beings. *Prakriti* of human being has genetic and acquired aspects. The genetic aspects depend upon *shukra* and *shonita*.

While acquired constitution develops in relation to environmental factors like climate, season, time factor, age, race, familial inheritance. *Dosha (vata, pittta, kapha)* is dominant during the union of *shukra*(sperm) and *shonita*(ovum), forms *prakriti*(1). *Charaka*

*Corresponding Author: **Bakal Nilesh Ganeshrao,** Assistant Professor & HOD, Dept. of Kriya Sharir, G. S. Gune Ayurvedic College, Ahmednagar. Maharashtra - 414001 E-mail: nbakal@rediff.com Ph. N: +91-9423417057 and *Vagbhata* has explained that *prakriti* is not only depend on *shukra shonita samyoga* but also on *kala*, diet and behavior of pregnant mother or woman, condition of *garbhashaya* and *mahabhuta*(2).

Kashyapa has described that the fetus is nourished by mother, so depending on embryonic nourishment, type of prakriti of human being is formed from embryonic life(3). These prakriti are of mainly three types having *vata*, *pitta* and kapha predominance(4). Prakriti is not output of those *dosha*, which undergo constant variations. Dosha which remains from birth till death constant are responsible for prakriti. Once formed prakriti is also influenced though not changed due to environmental factors. Change is so impossible that any real drastic change in original characters should be taken seriously by ayurvedic physician(5).

In charak samhita sutrasthana, charak has mentioned prakriti for first



time in *swasthya chatushka* that people are born with various proportions of *dosha*, have body constitution according to them(*dosha*) (6). Those born with equal proportion of three *doshas(sama prakriti)* are generally healthy people and get little morbidity. Some show predominance of *kapha* are *shleshmala* and *pitta* are *pittala* and *vata* are *vatala*(7).

Due to this predominance of *dosha* proportion, people show psychosomatic expressions called as *Deha prakriti*. *Charakadi* eminent of *ayurveda* have divided the human constitution into seven types on the basis of relative prevalence of three basic humors viz. *vatala, pittala, sheshmala, vata-pittala, vata-shleshmala, pitta-shleshmala* and *sama doshika*(8).

Both Vagbhata says that individuals with sama prakriti are excellent while with mixed type prakriti are denounce. The persons with vata, pitta, kapha predominance are said to be inferior, mediocre, and good respectively. In single doshaj predominance , vatala prakriti person always remain ill(9).

The importance of *prakriti* of patient for physician has been greatly emphasized in *ayurveda*. *Shushruta* and *kashyapa* has described an opinion that patient should be treated according to *prakriti* of person(10). An improper administration of medication without proper determination of *prakriti*, may be injurious to life of patient.

Charak has enumerated points, which should be examined by physician through *pratyksha*, *anuman*, *upadesh pramans* and *trividh(darshan, sparshan, prashna)* and dashvidh pariksha to ascertain *prakriti*(11). He has described the clinical, therapeutic utility of the knowledge of *prakriti*, whereas the detailed regimen that is to be followed by different *prakriti* individuals, has been dealt separately. Preventive aspects of *prakriti* has been described by *charak*. Importance of *prakriti* is prescribing dietary regimen and life style management in healthy individuals and treatment point of view in diseased individuals.

Ayurvedic system of diagnosing *prakriti* offers a unique approach in understanding and assessing one's health. It is not merely a diagnostic tool but also a guide to action for good health. The psychosomatic constitution of a person is considered to determine the following-

- *Bala* (natural strength of body and mind)- the *vata prakriti* persons are having less strength than *pittala* and *shleshmala prakriti*.
- Susceptibility to different diseasesthe *shleshmala prakriti* persons are more prone to *kaphaja vikara* like *agnimandhya*, *pratishyaya* etc. similarly *pittala* and *vatala prakriti* persons are more prone to *pittaja* and *vataja vikara* respectively.
- *Prakriti* is also considered for deciding the line of treatment. e.g. in *amamj vyadhi* like *jwara*, for *shlaishmala* person, one can adopt complete *apatarpana chikitsa* whereas in case of *vatala* person that cannot be adopted completely.
- Drug dosage- drug dosage is decided according to *prakriti* e.g. *vatala*, *pittala*, *shlaishmala* persons, *matra* of *bheshaja* is adopted in *alpa*, *Madhya*, and *pravara* quantity respectively.

Preventive measures- on the basis of *prakriti*, person can adopt *dincharya* as per need of *deha prakriti* to keep *dosha* in equilibrium state and to maintain health, e.g. shlaishmala prakriti person need more exercise, *laghu ahar* to keep their body fit and they should avoid *diwaswap*, whereas vatala prakriti persons are advised to take nutritious and healthy food, less exercise and can enjoy diwaswap. Brihatravi granthas mentioned about criteria for deciding doshaja prakriti in view of adults. But when deciding *prakriti* of an infant, child, adolescent and prepuberty age, some criteria may be similar to pathological conditions, which should be



differentiated with the help of associated features of pathological condition.

AIM AND OBJECTIVES-

- 1. To suggest a proforma for evaluating *prakriti* in different stages of child.
- 2. To study and differentiate between physiological and pathological conditions while deciding *prakriti*.
- 3. To help *vaidyas* in deciding *prakriti* and management of childhood illness accordingly.

Material:

Classical literature of ayurved as well as modern medical science on subject of *sharirkriya* (PHYSIOLOGY) and *Kaumarbhritya* (PEDIATRICS) from the library of G. S. Gune ayurved college, Ahmednagar were explored for the study. The internet services of the G. S. Gune ayurved college library were also used. The data obtained were critically analysed and presented.

Methods:

This was purely literary study wherein the explored literature was analysed and interpreted.

As per the ayurvedic concept of *prakriti* from various *samhita*, each physical and physiological features, specific for deciding different *doshaja prakriti* are tabulated in table 1&2.

 Table- 1 Physical Criteria applicable in age group 0-10 years

Criteria	Vatik (12,13,14)	Paittik (15,16,17)	Kaphaja(18,19,20)
General examination	Height- tall	Medium	Short
	Weight- thin/ poorly built	Medium	Strong and stout
	Disproportionate body parts	Delicate, flabby and soft muscular	Proportionate and impressive body Pleasant look
Skin colour	Brown/ black/ blackish dark Blackish complexion	Pale yellow/ red/ yellow Reddish white	Fair, white, Pale complexion with good luster.
Feel	Dry, rough Cool and crack	Warm touch Slightly oily	Cool and oily touch. Soft, thick, wet
Body hairs	Dry , scanty, horny (hard consistency) Grayish black	Soft, pinkish, scanty, grayish, yellowish	Thick, soft, oily, blackish, wavy
Special characters	Prominent veins/ tendons	Moles- black/ pink spots(naevi) Eruptions(birth marks)	
Scalp hairs	Dry, rough Brittle, Smoky/ dusty, Bifurcated, scanty, kinky, Slight black,	Soft, thin Sparse, Pinkish brown, Early graying and baldness,	Soft , Dark black, Thick, Shiny, silky, Abundant, Dense and oily
Forehead	Small(narrow) Less than 4 self-fingers	Medium 4 self-fingers	Large Greater than 4 self- fingers



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Eye br	ows	Dry, scanty,	Thin, soft	Dark black with
		irregular	Regular,	thick hairs,
			Bow shaped	Regular,
Eyes	shape	Round / irregular	Small	Big, fish shaped
-	_	Unequal		
	Lashes	Dry, rough	Soft, thin,	Long,
		Scanty, irregular	Scanty	Black and thick
	Sclera	Smoky, dry	Yellowish,	White, clear
			Marked	Watery with luster,
			capillaries,	Reddish at limbus
			Red conjunctiva	
	Iris	Smoky, lusterless	Yellowish brown,	Dark black with
				luster
	Look	Dead look,	Sharp and luster	Soft oily look
		Sunken,	1	5
		,		
	Nature	Unsteady	Normal	Steady, soft
			movement,	, , , , , , , , , , , , , , , , , , ,
			Easily become red	
			due to sunlight/	
			anger.	
			Prefer cold touch	
			to eyes.	
Eyelid	S	Remains partially Open		Slow movement
Ljena	.0	during sleep		
Teeth		Dry, rough	Yellowish white	White lusterful
		Blackish, short/ big	Moderate size	Strong,
		Crooked		Proportionate,
		Crooked		Well arranged.
Nails		Dry, small, rough	Soft, smooth	Big, smooth, oily
1 (unio		Fragile, cracked	Pink,	Shiny, convex
		blackish	Luster`	Whitish pink.
Tongu	e	Dry,	Red,	Pinkish white,
rongu	· · ·	Cracked, rough	Thin,	Slimy and thick
		Short	long	Shiniy and thick
Mouth	1	Dry and open	Increased oral	Excess salivation
Wibuth	L	Dry and open	temperature,	
			Foul smelling	
Lips		Dry, cracked,	Thin, soft	Soft, oily
Lips		Blackish	Delicate,	Properly shaped
		Irregular shaped	Reddish, medium	rioperty snaped
Gums		Blackish,	· · · · · ·	Pink
Guills		Emaciated	Spongy, Soft	r IIIK
Noss				Dig and straight
Nose		Blunt, short	Medium, delicate	Big and straight
C1 ·			Sharp Thin, a sints 1	Due 1 (1 1
Chin		Uneven,	Thin, pointed	Broad, thick
<u>C1</u>		Bifurcated		D 1 '11
Chest		Small, narrow	Medium	Broad, expansible
			Well nourished.	



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Arms-Legs	Short,	Medium	Long, strong
_	Ill nourished	Flabby	Stout and steady
	Unsteady		
Palms-Soles	Dry, cracked	Soft, delicate	Soft, smooth
	Rough, hard	Reddish,	Thick, pinkish
		Perspired	Well developed.
Joints	Prominent,	Loose and soft	Strong,
	Irregularly placed,		Well developed.
	Noisy on movement,		Well covered,
	Unsteady,		Bony markings not
	Bony markings well seen		easily seen.

Table 2:

Physiological Criteria applicable in age group 10 to 16 years.

Activites	Fast, unsteady	Fast,	Slow, and
	Tremors,	Definite	Steady
	Cramps		
Voice/ cry	Rough, dry	High pitched	Deep, resonating
	Weak	Clear	Pleasant,
	Stammering	Average	Sweet/ commanding
	Unclear, split		
	Vibrating,		
	shrill		
Speech	Talkative and fast,	Fast, smooth,	Slow and steady
	Incoherent,	Debating,	Monotonus,
	Exciting	Impressive speech	Pleasant,
		Insulting attitude	Continuous
		Sharp and cutting	impressive talk
Apetite (Agni)	Frequent eating,	Good,	Slow but steady
	Irregular,	Excessive,	
	Variable quantity,	Unbearable hunger	
	scanty		
Thirst	Variable	Excessive	Scanty
Acceptance of taste	Sweet, sour	Sweet, bitter,	Astringent, bitter
(Rasa)	Salty,	Astringent,	Hot
	Hot, oily	cold	Spicy,dry
Bowel movement	Krura	Mrudu	Madhyama
(Koshtha)			
Urine / sweating	Small quantity	Profuse,	Normal
	Frequent	Foul smelling	
Stool	Dry, hard	Loose(not of	Thick oily
	Small quantity,	diarrhea)	Heavy
	Constipated	Yellow,	Whitish yellow
		Large quantity,	
		Oily, foul smell	
Sleep	Disturbed	Moderate sleep,	Deep sleep,
	(interrupted) scanty,	Little and sound	Heavy, prolonged
	Awakefulness		Day time too



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Dreams	Flying in the sky,	Lights, stars,	Cold, pleasant
	Mountain lumping,	Fire, electricity,	Water, lake
	Running fearful,	Violence,	Swimming, ocean,
	(Maximally related	Battle	clouds,
	with motion/		Swan.
	velocity)		
Strength	Weak	Moderate	Strong
Memory	Weak,	Good,	Good,
	Grasps easily, and	Sharp	Grasps slow,
	Forget easily also.		Steady and
	Recent memory-		prolonged
	good		
	Remote memory-		
	poor		
Concentration	Unsteady	Steady	Steady
Nature	Nonreligious,	Nonreligious,	Religious,
	Undevoted,	Fanatic, undevoted	Devoted,
	Devoid of truth and	Kindly to friends	Loves truth and
	kindness,	only,	kindness,
	Uncultured,	Good conduct,	Calm and quiet,
	Quarrelsome on	Quarrelsome,	Helping and steady
	helping.	Helping to those who	in relations.
		seek for help.	
Anger	Quickly angry,	Quickly angry	No quick anger,
	Quickly relaxed.		But if it is, long
			lasting.
Friendship	Unsteady,	No friends due to	Many friends,
	So no real friends	Hot temper nature	Long lasting

Discussion:

Out of all criteria, some are really related with growth and some with development of child. Most of criteria are *prashna pariksha* (history taking) nature. In history taking, one has to form one's own opinion about a mother's memory (21). One has to form one's own conclusion as to whether she is fabricating a reply, as to whether she is trying to make one believe that the child was 'normal' when he was not.

And a detailed history is an essential part of developmental assessment, also in *prakriti* determination. Most of the children less than 10 year age may / may not express prompt or actual history/ feeling. e.g. dreams. These children are having less understanding about criteria interrogated for deciding

prakriti explained in table no.2. In order to avoid variability and biasness in deciding *prakriti*, it is pertinent to consider anatomical criteria in 0 to 10 years age group rather than physiological criteria. Most of the children came at our O.P.D. with complaints, that time we need to decide his/ her *prakriti* on the basis of history produced by relatives, regarding the period when he /she was absolutely free from complaints.

Following associated pathological conditions needs to be clarified while deciding *prakriti* in children. Because these pathological condition may mimic *Prakriti*.

1) Kinky hairs are described under *vata prakriti lakshana*, but a child presents with kinky hairs need to be differentiate from pathological condition i.e. Menkes



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Kinky Hair Syndrome (Trichopoliodystrophy). In this syndrome, Male child with this sex-linked recessive trait are born to an unaffected mother after a normal pregnancy. Neonatal problems include hypothermia, hypotonia, poor feeding, seizures, and failure to thrive. Hair is normal to sparse at birth but is replaced by short, fine, brittle, lightcolored hair(22).

2) Thin, dry, brittle and lustureless hairs are described under vata prakriti lakshana, but a child presents with these type of hairs need to be differentiate from the hair changes seen in protein energy malnutrition in children specially kwashiorkor. The hair changes are variable. Hair may be thin, dry, brittle and lustureless. These become straight and hypopigmented – become gravish white or reddish brown(23).

3) Body hairs are scanty in *vata prakriti* and also in *pitta prakriti*, but Lanugo hairs are thin and abundant in premature babies. One has to assess gestational age while deciding this *lakshana* as *vata prakriti lakshana*.(24)

4) In pitta prakriti, sweating is profuse and foul smelling which we have differentiate from bacterial to decomposition of apocrine sweat gland which accounts for the unpleasant odor perspiration.(25) associated with Hyperhidrosis may be associated with disorders may be neural numerous mechanisms or non-neurally mediated e.g. emotional (volar hyperhidrosis), dysautonomia. antipyretics, exercise. infection defervescence, hyperpituitarism, hyperthyroidism, hypoglycemia, cardiovascular etc.

Scanty sweating in *vata prakriti* should also been clarified from Anhidrosis / hypohidrosis in children may be due to disturbance in neural pathway from the control centre in the brain to the peripheral efferent nerve fibers that activates sweating. Peripheral segmental neuropathies may be associated with anhidrosis of innervated skin. Eccrine glands are largely absent throughout the skin or are present in a localized area among patients with Anhidrotic ectodermal aplasia or localized congenital absence of sweat glands, dehydration or anticholinergic drugs may suppress sweating.(26)

5) In pitta prakriti, early graving of scalp hairs and early baldness are seen. But due to hereditary factors, vitamin B12 deficiency, anemia, vitiligo, leukemia or excessive intake of carbohydrates and foods like cakes. sugary candies. chocolates may lead to early graving of hairs in children(27). And acquired localized hair loss seen in childhood, may be due to Three conditions- traumatic alopecia, alopecia areata, inflammatory conditions such as pyoderma or tinea capitis.(28)

6) In vata and pitta prakriti, there is discoloration of teeth. This lakshana must be confirmed that these are not a of incorporation of result foreign substances developing enamel. into Neonatal hyperbilirubinemia may produce blue to black discoloration of the primary teeth. Porphyria produces a red-brown discoloration. Tetracyclines are extensively incorporated into bones and teeth and, if administered during the period of formation of enamel, may result in brown-vellow discoloration and hypoplasia of the enamel. Iron therapy temporarily causes blackish discoloration of teeth.(29)

Conclusion:

At this particular juncture, the fruitful conclusions, which have automatically emerged through the discussion of the available concept, are being presented as follows:-

Prakriti is genetic constitution of human being. Health of a child is dependent on *prakriti*. Prompt prevention and management of disease can be done on accurate determination of *prakriti*. Some



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points regarding determination of prakriti is to be distinguished from pathological pathological states Because these lakshanas may interfere while deciding the prakriti of child, may mislead physician. In order to avoid variability and biasness in deciding *prakriti* specially in children of age group 0-10 year, it is pertinent to consider anatomical criteria rather than physiological criteria whereas both types of criteria (anatomical and physiological) should be used for deciding prakriti in children of age group 10-16 years.

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