TO STUDY THE ABNORMALITIES IN ST-T SEGMENT OF ECG IN HEALTHY FEMALES IN DIFFERENT DEHA PRAKRITI

1Dr Ankur Saxena, 2Dr Shiv Om Dixit, 3Dr Irina S Chandran, 4Dr Neetika Gautam, 5Dr Jolly Saxena

INTRODUCTION

Prakriti is formed by the Utkatata (predominance) of one, two or all three doshas at the time of union of Shukra (sperm) and Shonita (ovum) in the Garbhashaya (uterus). For example, at time of birth if vatadosha is predominant as compare to pitta and kapha, then individual is having vatajapraprakriti. Predominant vatadosha affect anatomy, physiology, psychology & immunity of that person. Features are seen according to properties & functions of vatadosha.

Doshaja or DehaPrakriti Doshaja prakriti is also known as Deha Prakriti/Sharirika Prakriti. There are seven types of doshaja prakriti described in Ayurveda on the basis of predominance of one or more doshas. Vata, Pitta and Shleshma are ekdoshaja i.e. due to the predominance of one dosha. Vata-Pittala, Vata-Shleshma and Pitta-Shleshma are dviodshaja i.e. due to the predominance of two doshas. Sama-prakriti occurs due to the predominance of all three doshas. Here are a large number of recognizable phenotypic features described for the prakriti types. Of these, the key features include the following: There are distinct properties of each dosha. The main properties of Vata dosha are – dry, cold, light, subtle, clear, rough, astringent taste, responsible for movements and catabolic in nature.

Pitta dosha possesses properties of hot, unctuous, sharp, liquid, spreading, sour-pungent-bitter taste, responsible for digestion and metabolism,

Abstract- Ayurveda says each & every individual is unique. Their size and shape are different, even physiological and psychological characters are also different. This is because they have predominant Pancharakriti, Doshas (Vata, Pitta &Kapha), Tri-gunas (Satva, Raja& Tama) at the time of birth which decides their constitution. Once this constitution is set, it is permanent for that individual. These individualistic features are the manifestation of prakriti. In Ayurveda, prakriti represents the traits appearing at the time of union of Shukra (sperm) and Shonita (Ovum). Prakriti in reference to the present study has been used with meaning Swabhava or nature of the individual, which covers the physical, social, mental and spiritual characteristics of life. According to Ayurveda the psychosomatic constitution, as also known as Deha Prakriti, is represented by a description of the Physique, Physiology & psychological make-up of an individual. The Deha Prakriti is essentially genetically determined and is likely to be influenced by a variety of environmental factors such as environment and genetics; tell us more than the eyes can see. We have learned that, while we are all born with some genetic information from our parents, throughout our lives genetic expression is governed by the micro-environment that surrounds the cell. This surrounding micro-environment contains hundreds of chemical signalling molecules, like hormones, cytokines, etc., that travel from near and far to communicate with the cell. These signalling molecules travel all around the body to help synchronize the actions of all the organs. Majority of these signalling molecules that interact with the cells are derived from the foods we eat.

Keywords: Prakriti, Doshas, Tri-gunas, Psychosomatic constitution.
Kapha dosha possesses the qualities of cold, heavy, soft, oily, stable, slimy, sweet taste and anabolic in nature (Vagbhata’s Ashtanga Hridayam, Sutra Sthana 1/10-12, 2003).

There are seven types of physical prakriti viz., Vata, pitta, kapha, vata-pitta, pitta-kapha, kapha-vata and tridosha prakriti—(combination of all three doshas vata, pitta-kapha in equal proportions), and three broad types of mental constitution viz., satwa, rajas and tamas prakriti (Vimana Sthana 8/9,5, Charaka Samhita, 2003). Even though, Ayurvedic texts have explained the characteristic features of all seven types of physical and three types of mental constitution, only three main types of Prakriti viz., Vata predominant, Pitta predominant and Kapha predominant constitution are usually taken for the examination of a person/patient.

QUALITY ASSESSMENT OF PRAKRITI

According to Acharya Charaka the ekadoshajaprakriti are rare. The persons having ekadoshajaprakriti is always prone to be sick while persons having samdoshajaprakriti is healthy. Among all types of doshajaprakriti, samdoshajaprakriti is the best but found rarely. Dvidoshajaprakriti is nindniya or bad. Out of this pitta-kaphaja is bad, vata-kaphaja is worse and vata-pittaja is worst. Ekadoshajaprakritiis better. Out of this vatapraakriti is good, pitta prakriti is better and kaphaprakriti is best. Vagbhata has mentioned that the person having vata, pitta and kapha predominance are said to be inferior, average and superior respectively.

KEY DISTINGUISHING FEATURES FOR PRAKRITI DETERMINATION

VATA 10
1. Thin body frame, does not gain weight
2. Skin dry, rough, dark complexion, cracked
3. Hair dry and splitting
4. Quick performance of activities
5. Variable and/or poor appetite.
6. Physical working capacity less, resistance to disease usually poor
7. Prefers warm or hot food and climate.
8. Scanty perspiration, variable thirst
9. Tendency for constipation
10. Light sleep with many dreams
11. Prone to anxiety, worry and depression, unpredictable nature.

PITTA 11
1. Medium body frame
2. Skin delicate, reddish complexion, warm to touch
3. Good/excessive appetite
4. Feels warm/hot sensation
5. Prefers cold food and climate, intolerance to hot food and climate
6. Tendency for loose motion
7. Excessive thirst and perspiration
8. Bright eyes, reddish sclera, yellow iris, sharp penetrating vision
9. Hair soft, premature graying, baldness
10. Intelligent, sharp memory, hot tempered, brave, jealous, aggressive, commanding nature

KAPHA 12
1. Large, board body frame, tendency to gain weight
2. Skin thick, soft, smooth, firm, glossy, fair complexion
3. Good stamina but slow in physical activities
4. Deep and pleasant voice
5. Moderate appetite
6. Moderate perspiration, low thirst
7. Deep and sound sleep
8. Large eyes, calm, stable with whitish sclera
9. Hair thick, oily, wavy dark coloured
10. Calm, cool, joyful, polite good nature

CLINICAL SIGNIFICANCE OF PRAKRITI ASSESSMENT

Prakriti has prime importance in both healthy and diseased persons. Prakriti pariksha is the
component of Dashavidhapariksha. The clinical and therapeutic utility of the knowledge of prakriti has been vibrantly described by the Charaka, where the detailed regimen that is to be followed by different dosajaprakriti individuals and treatment according predominance of doshas is mentioned. Prakriti is not changeable; if it changes it indicates death of an individual within six months. Prakriti has prime importance in both healthy and diseased persons i.e., importance of prakriti in prescribing dietary regimen and life style management in healthy individuals and treatment point of view in diseased individuals. By understanding the individual constitution of every individual, we know which food, drink, exercise etc. are appropriate for maintaining their health. If the daily activities, diet, occupation and behaviour are not adjusted to balance this.

Study of Prakriti will help clinician in the following respects.
1) Early prediction of disease susceptibility.
2) Prevention of possible diseases.
3) Successful prognostication in disease state.
4) Selection of appropriate and specific treatment in a given disease.

Prakriti and Sattva Pariksha (investigations) have been included in ten fold investigation methods i.e. Dashavidha-Atura-Pariksha in Ayurveda. The particular type of psychosomatic constitution with specific Doshik constituents predisposes a particular individual to a particular type of illness. In view of this fact, the different diseases to which an individual is predisposed can be prevented or postponed by appropriate diet, drugs or regimen. This is in this context, that Ayurveda advocates extensive preventive measures in terms of SwasthaVritta, Sadvritta, Dincharya, Ritucharya etc.

The observations showing greater incidence of certain diseases in which the patients of certain prakriti are predisposed, support the fact showing greater susceptibility of Vatika individuals to anxiety neurosis, thyrotoxicosis, peptic ulcer and tuberculosis, Paittik individuals to hypertension, peptic ulcer, bronchial asthma and rheumatoid arthritis and Kaphaja individuals to diabetes mellitus, obesity, osteoarthritis, hypertension, and ischaemic heart diseases.

MATERIALS AND METHODS

Inclusion criteria
- The healthy female volunteers were selected from locality around college and hospital.
- All subjects signed written informed consent forms for the respective study protocols and were able to understand and comply with the protocol requirements, instructions and protocol-stated restrictions. Age of each subject was noted.
- Only normotensive subjects having resting blood pressure (>90 mm Hg and <140 mm Hg systolic; >60 mm Hg and <90 mm Hg diastolic) and normal resting heart rate (>50 bpm and <100 bpm) Individuals with a body mass index <18 or >30 kg/m2 were included.
- Female subjects were not pregnant (negative urine pregnancy test in women of childbearing age) or lactating.
- Only non-smokers or subjects who did not use any tobacco/nicotine products in the 6-month period preceding the screening visit were included.

Exclusion Criteria
- Subjects with history of long QT syndrome (personal or family) or other cardiac conduction disorder, or other clinically significant cardiac disease were excluded
- Those with clinically significant abnormality at the screening medical assessment (history, physical examination, clinical laboratory tests, or ECG)
- History of drug or alcohol abuse were excluded

Study Population
Patients were selected from OPD and IPD of college and Hospital.

Questionnaire proforma for prakriti Nirdharan is used

Sample size & grouping:
Total number of 90 samples will be selected and allocated into following groups;
Group A: Consisting of 30 healthy persons of Vata pradhanaprakriti
Group B: Consisting of 30 healthy persons of Pitta pradhanaprakriti
Group C: Consisting of 30 healthy persons of Kapha pradhanaprakriti

SUBJECTIVE PARAMETER:
The Prakriti of the individuals has been assessed using a standard Questionnaire. (Index)

OBJECTIVE PARAMETER: ECG recordings for ST-T elevation assessment
ECG criteria for diagnosis of abnormalities
<table>
<thead>
<tr>
<th>Non-specific ST changes</th>
<th>ST deviation not fulfilling the criteria for injury/ischaemia</th>
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<tbody>
<tr>
<td>Non specific T wave changes</td>
<td>T wave flattening/inversion/other T wave abnormalities like biphasic, notched, or asymmetric. Not meeting criteria for ischaemia.</td>
</tr>
<tr>
<td>T wave inversion suggestive of ischaemia</td>
<td>Symmetrically and/or deeply inverted T waves in &gt; 2 contiguous leads. ST depression with T wave inversion in &gt; 2 contiguous leads.</td>
</tr>
<tr>
<td>U wave: abnormal</td>
<td>Amplitude of U wave &gt; 25 % of accompanying T wave amplitude in &gt; 2 leads. U wave is negative in &gt; 2 leads other then aVR &amp; III.</td>
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</tbody>
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**OBSERVATION AND RESULT**

**Colour and Texture of hair**

Out of total 90 patients in *Vata pradhan* group out of 30 patients maximum 18 had thin coarse and dry hair, 10 had thick black wavy hair and only 2 had thin fine soft hair. In *Pitta pradhan* group 10 had thin coarse dry hair, 16 had thick black wavy hair and only 4 had thin fine soft hair. In *Kapha Pradhan* group 16 had thin fine soft hair, 6 had thin coarse dry hair and only 3 had thick black wavy hair.

**Body Hair**

Out of total 90 patients in *Vata pradhan* group out of 30 patients maximum 22 had scanty body hair, 6 had moderate hair and only 2 had thick & plenty body hair. In *Pitta pradhan* group 26 had scanty body hair, 2 had moderate hair and only 2 had thick & plenty body hair. In *Kapha pradhan* group 24 had scanty body hair, 3 had moderate hair and only 2 had thick & plenty of body hair.

**Face features**

Out of total 90 patients in *Vata pradhan* group out of 30 patients maximum 18 had dark rough skin, 6 had skin rash and only 2 were bright attractive calm. In *Pitta pradhan* group 6 had dark rough skin, 20 had skin rash and only 6 are bright attractive calm. In *Kapha pradhan* group 4 had dark rough skin, 3 had skin rash and only 23 are bright attractive calm.

**Eyes**

Out of total 90 patients in *Vata pradhan* group out of 30 patients maximum 15 had dusky unsteady eyes, 6 had unsteady red streak and only 2 had steady white eyes. In *Pitta pradhan* group 7 had dusky unsteady eyes, 18 had unsteady red streak and only 2 had steady white eyes. In *Kapha pradhan* group 4 had dusky unsteady eyes, 3 had unsteady red streak and only 22 had steady white eyes.

**Lips**

Out of total 90 patients in *Vata pradhan* group 25 had small thin cracked lips, 6 had soft pink moist and 2 had thick large glossy lips. In *Pitta pradhan* group 4 had small thin cracked lips, 22 had soft pink moist and 4 had thick large glossy lips. In *Kapha pradhan* group 10 had small thin cracked lips, 4 had soft pink moist and 16 had thick large glossy lips.

**Tongue**

Out of total 90 patients in *Vata pradhan* group 18 had rough granular patchy tongue, 6 had pink thin uniform tongue and 5 had clear moist thin coat tongue. In *Pitta pradhan* group 6 had rough granular patchy tongue, 22 had pink thin uniform tongue and 4 had clear moist thin coat tongue. In *Kapha pradhan* group 4 had rough granular patchy tongue, 6 had pink thin uniform tongue and 16 had clear moist thin coat tongue.

**Teeth and gums**

Out of total 90 patients in *Vata pradhan* group 18 had thin irregular teeth, 7 had yellowish teeth and 5 had white teeth. In *Pitta pradhan* group 8 had thin irregular teeth, 21 had yellowish teeth and 2 had white teeth. In *Kapha pradhan* group 4 had thin irregular teeth, 3 had yellowish teeth and 22 had white teeth.
Skin
Out of total 90 patients in vata pradhan group 16 had dry rough cracked skin, 3 had soft warm yellow skin and 12 had cold smooth oily skin. In pitta pradhan group 6 had dry rough cracked skin, 22 had soft warm yellow skin. 2 had cold smooth oily skin. In kapha pradhan group 4 had dry rough cracked skin, 3 had soft warm yellow skin and 18 had cold smooth oily skin.

Nails
Out of total 90 patients in vata pradhan group 22 had rough brittle thin nails, 6 had coppery pink oily nails and 3 had thick glossy white nails. In pitta pradhan group 9 had rough brittle thin nails, 18 had coppery pink oily nails and 3 had thick glossy white nails. In kapha pradhan group 7 had rough brittle thin nails, 4 had coppery pink oily nails and 16 had thick glossy white nails.

Voice and speech
Out of total 90 patients in vata pradhan group 16 had low pitch hoarse excessive speech, 4 had high pitch sharp organised speech and 9 had deep slow speech. In pitta pradhan group 2 had low pitch hoarse excessive speech, 26 had high pitch sharp organised speech and 2 had deep slow speech. In Kapha pradhan group 4 had low pitch hoarse excessive speech, 7 had high pitch sharp organised speech and 16 had deep slow speech.

Body frame
Out of total 90 patients in vata pradhan group 16 are thin tall with visible veins, 4 are medium build soft and less visible veins 4 are thick short and no visible veins. In pitta pradhan group 6 are thin tall with visible veins, 20 are medium build soft and less visible veins 4 are thick short and no visible vein. In Kapha pradhan group 4 are thin tall with visible veins, 7 are medium build soft and less visible veins 16 are thick short and no visible vein.

Gait
Out of total 90 patients in vata pradhan group 18 are with very quick swift gate, 4 are with medium speed & movement and 4 are with slow steady gait. In pitta pradhan group 7 are with very quick swift gate, 16 are with medium speed & movement and 6 are with slow steady gait. In Kapha pradhan group 4 are with very quick swift gate, 5 are with medium speed & movement and 22 are with slow steady gait.

Body Temperature
Out of total 90 patients in vata pradhan group 18 felt cold, 4 are warm and 7 are with moderate temperature. In pitta pradhan group patients in 3 felt cold, 22 are warm and 6 are with moderate temperature. In Kapha pradhan group 3 felt cold, 4 are warm and 18 are with moderate temperature.

Taste Preference
Out of total 90 patients in vata pradhan group 18 had sweet taste preference, 8 had sour astringent taste preference and 4 had salty bitter taste preference. In pitta pradhan group 5 had sweet taste preference, 22 had sour astringent taste preference and 3 had salty bitter taste preference. In Kapha pradhan group 4 had sweet taste preference, 8 had sour astringent taste preference and 16 had salty bitter taste preference.

Thirst
Out of total 90 patients in vata pradhan group 17 had irregular thirst, 4 had frequent thirst and 10 had occasional thirst. In pitta pradhan group 9 had irregular thirst, 19 had frequent thirst and 3 had occasional thirst. In Kapha pradhan group 4 had irregular thirst, 6 had frequent thirst and 22 had occasional thirst.

Appetite and Digestion
Out of total 90 patients in vata pradhan group 16 had frequently altered irregular appetite and digestion, 8 had usually strong appetite and 10 had normal appetite slow digestion. In pitta pradhan group 3 had frequently altered irregular appetite and digestion, 23 had usually strong appetite and 5 had normal appetite slow digestion. In Kapha pradhan group 4 had frequently altered irregular appetite and digestion, 3 had usually strong appetite and 22 had normal appetite slow digestion.

Preferred food and drinks
Out of 90 patients in vata pradhan group 16 preferred warm moist oily food,4 preferred cold food and 10 like warm dry hot food. In pitta pradhan group 8 preferred warm moist oily food,16 preferred cold food and 4 like warm dry hot food. In kapha pradhan group 4 preferred warm moist oily food,3 preferred cold food and 23 like warm dry hot food.

Bowel movements
Out of 90 patients in vata pradhan group 16 had hard irregular strain on defecation bowel movements, 4 had soft frequent normal consistency bowel movements and 8 had normal consistency bowel. In pitta pradhan pradhan group 4 had hard irregular strain on defecation bowel movements, 20 had soft frequent normal consistency bowel movements and 6 had normal consistency bowel movements. In kapha pradhan group 2 had hard irregular strain on defecation bowel movements, 7 had soft frequent normal consistency bowel movements and 21 had normal consistency.

Perspiration
Out of 90 patients in vata pradhan group 16 had rarely perspiration, 7 had very easily body odour and 5 had normal perspiration. In pitta pradhan group 4 had rarely perspiration, 23 had very easily body odour and 3 had normal

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perspiration. In kapha pradhan group 3 had rarely perspiration, 7 had very easily body odour and 20 had normal perspiration.

Sleep and Dreams
Out of 90 patients in vata pradhan group 16 had interrupted less running sleep, 4 had normal sleep 10 had excessive deep sleep. In pitta pradhan group 8 had interrupted less running sleep, 18 had normal sleep 4 had excessive deep sleep. In kapha pradhan group 3 had interrupted less running sleep, 4 had normal sleep 21 had excessive deep sleep.

Reaction to stress
Out of 90 patients in vata pradhan group 18 had fear and anxiety on reaction to stress, 9 had frustration irritability on reaction to stress and 4 remain calm and steady reaction to stress. In pitta pradhan group 18 had fear and anxiety on reaction to stress, 9 had frustration irritability on reaction to stress and 4 remain calm and steady reaction to stress. In kapha pradhan group 18 had fear and anxiety on reaction to stress, 9 had frustration irritability on reaction to stress and 4 remain calm and steady reaction to stress.

Grasping power, memory
Out of 90 patients in vata pradhan group 17 patients had quick short term grasping power and memory 9 had medium suddenly reliable grasping power and memory and 4 had slow long term grasping power and memory. In pitta pradhan group 6 patients had quick short term grasping power and memory 19 had medium suddenly reliable grasping power and memory and 5 had slow long term grasping power and memory. In kapha pradhan group 3 patients had quick short term grasping power and memory 11 had medium suddenly reliable grasping power and memory and 16 had slow long term grasping power and memory.

Resistance to diseases
Out of 90 patients in vata pradhan group 18 had poor resistance to disease, 7 had medium resistance to disease and 4 had good resistance to disease. In pitta pradhan group 4 had poor resistance to disease, 18 had medium resistance to disease and 8 had good resistance to disease. In kapha pradhan group 4 had poor resistance to disease, 6 had medium resistance to disease and 20 had good resistance to disease.

Activity performance
Out of 90 patients in vata pradhan group 21 were quick very enthusiastic in activity performance 6 were moderate medium initiative in activity performance 3 were slow in initiation of activity performance. In kapha pradhan group 5 were quick very enthusiastic in activity performance 17 were moderate medium initiative in activity performance 7 were slow in initiation of activity performance. In kapha pradhan group 8 were quick very enthusiastic in activity performance 4 were moderate medium initiative in activity performance 18 were slow in initiation of activity performance.

Thoughts and moods
Out of 90 patients in vata pradhan group 18 had thought and moods change frequently, 4 had steady pointed thought and moods, 8 had firm decision slow to change thoughts and mood. In pitta pradhan group 7 had thought and moods change frequently, 20 had steady pointed thought and moods, 3 had firm decision slow to change thoughts and mood. In kapha pradhan group 3 had thought and moods change frequently, 4 had steady pointed thought and moods, 23 had firm decision slow to change thoughts and mood.

Quality of mind
Out of 90 patients in vata pradhan group 17 were quick creative restless, 9 had sharp intelligent mind and 4 were stable and calm. In pitta pradhan group 6 were quick creative restless, 22 had sharp intelligent mind and 2 were stable and calm. In kapha pradhan group 4 were quick creative restless, 7 had sharp intelligent mind and 19 were stable and calm.

Social movements with newcomers
Out of 90 patients in vata pradhan group 17 hesitates in social movements with newcomers, 8 move easily in social movements with newcomers and 7 thinks a while before having social movements with new comers. In pitta pradhan group 4 hesitates in social movements with newcomers, 24 move easily in social movements with newcomers and 4 thinks a while before having social movements with new comers. In kapha pradhan group 4 hesitates in social movements with newcomers, 8 move easily in social movements with newcomers and 18 thinks a while before having social movements with new comers.

Incidence of ST -T segment changes
Out of 90 patients in vata pradhan group 6 patients had ST-T segment changes in ECG. In pitta pradhan group 4 patients had ST-T segment changes in ECG. In kapha pradhan group 3 patients had ST-T segment changes in ECG. One-Way ANOVA
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The f-ratio value is 0.61702. The p-value is .541893. The result is not significant at p < .05. Data of three groups were compared they found to be statistically non-significant and is found by chance.

**RESULTS**

When data of three groups were compared they found to be statistically non-significant. The f-ratio value is 0.61702. The p-value is 0.541893. The result is not significant at p< .05. The small sample size did not sufficient to assess all the parameters. For further explorations and analysis further study is needed.

**DISCUSSION**

Ayurveda have put forth a strong foundation to make an understanding of human constitution. The Ayurvedic concept of Prakriti (constitution) is helpful in maintaining health, understanding disease and its management. Also, attainment of Purusharth Chatushtaya (Dharm-Artha-Kama-Moksha) which is only possible by an healthy individual. Knowledge of one’s own prakriti (constitution) can be helpful in maintenance of one’s health by following appropriate life style, diet and regimen suitable in the particular environmental condition. Despite of the fact of fundamental similarities in the mankind, dissimilitude from individual to individual is very common and natural. The factors responsible for these differences are multifarious and they together exert effect on constitutional, temperamental, psychological and spiritual make up of each individual.
CONCLUSION
Nutritional genomics is the attempt of scientists to understand the interaction between our food and our genetic activity. “Nutrigenomics seeks to provide a genetic understanding for how common dietary chemicals (i.e., nutrition) affect the balance between health and disease by altering the expression and/or structure of an individual’s genetic makeup.”

The some of the most effective dietary supplements, vitamin preparations, and other similar products are based on studies that look at how the particular food or nutrient affects the body. The powerful impact of the chemical compounds from natural foods and herbs have on the body is a result of the co-evolution of humans and plants. In other words, humans evolved a model of health that is complementary to food that was most easily available. Humans also evolved the physiology that could use nutrients from food for a medicinal effect. Therefore, human physiology is specifically designed to respond to the balancing and healing effects of the food we eat. Before the advent of modern drug industry, the kitchen was the most accessible pharmacy to people. Herbal supplements are used as an extension of dietary interventions. Rodriguez claims that using genetic studies to determine the susceptibility of individuals will allow us to prescribe functional foods as preventive medicine.

Cardiovascular disease has received a lot of attention in the nutritional genomic field. Researchers have been able to develop some individualized outlines for using specific fish oils, salt intake, mineral intake, carbohydrate and fat intake and much more. These studies have been able to generate useful observations of how specific dietary components affect blood pressure, obesity, vascular plaques, and other components of heart disease. Cancer is another disease that has demonstrated relationship to food-gene interactions. Nutrients like vitamin D can help in proper activation and inactivation of genes. Methylation of folate can help with DNA methylation, which prevents abnormal expression of genes. Phytoestrogens from plant based foods can help to modulate effect of human estrogen; thus reducing risk of estrogen based cancers of breast, ovaries, cervix, etc. These discoveries are every exciting for the scientific-minded holistic practitioners. However, researchers admit that our knowledge and our ability to apply this knowledge is very limited at this time. Thus, in the west, nutritional genomics represents a hope for a future of scientific individualized medicine. Individualized medicine is one of the core principles of Ayurveda. Scientists of India grappled with this requirement of medicine more than 5000 years ago.

The following conclusion can be made with the help of present study, on the basis of obtained facts and figures. Different deha prakriti doesn't have specific and significant effect on ECG segment ST-T segment in Healthy females which is analysed statistically.

SUMMARY
In the present world today people are more conscious about their health. Today, changed life style and indifferent dietary habits have made cardiac problems of the people a cumulative problem.

The clinical study was conducted by random sampling method. The patients were divided in to three groups “Vata pradhan” “Pitta pradhan” and “Kapha Pradhan” in each group 30 patients were selected after evaluation. At the end of the study, through the results obtained and statistical analysis, it was concluded that Different deha prakriti doesn't have specific and significant effect on ECG segment ST-T segment in Healthy females. The study was carried out on a small sample. Better conclusive results can be obtained by conducting studies on large sample. Electrocardiogram form the mainstay reflects the cardiac physiology and serves as the prime investigation for determining the presence cardiac abnormalities. Electrocardiogram (ECG) has become an indispensable tool for prompt diagnosis and management of cardiac patients because of easy availability, non-invasiveness and being inexpensive. The demographical statistics related cardiovascular diseases are explained. Similarly the problem statement related to the detection of cardiac diseases that led to formulate the research objectives is described.

The objective of the work is also explained and the scope of the work is briefly narrated.

REFERENCE:


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INDEX
Questionare proforma for prakriti Nirdharan

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<td>04</td>
<td>Eyes</td>
<td>Unsteady rolling Dusky Squint</td>
<td>Unsteady Red streaked</td>
<td>Steady white</td>
</tr>
<tr>
<td>05</td>
<td>Lips</td>
<td>Small Thin Cracked</td>
<td>Medium Soft Pink/reddish</td>
<td>Thick Large Glossy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td>---</td>
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<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Tongue</strong></td>
<td>Black</td>
<td>Pale pink</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Teeth and Gums</strong></td>
<td>Thin, irregular</td>
<td>Yellowish</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Skin</strong></td>
<td>Dry, cracked</td>
<td>Soft, warm</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Nails</strong></td>
<td>Rough, brittle</td>
<td>Coppery, pink</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Voice and Speech</strong></td>
<td>Low pitch</td>
<td>High pitch</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Body Frame</strong></td>
<td>Small, thin</td>
<td>Medium</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Gait</strong></td>
<td>Very quick</td>
<td>Medium speed</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Body Temperature</strong></td>
<td>Cold extremities</td>
<td>Feels warm</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Taste Preference</strong></td>
<td>Sweet</td>
<td>Sweet</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Thirst</strong></td>
<td>Irregular</td>
<td>Frequent</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Appetite and Digestion</strong></td>
<td>Frequently altered</td>
<td>Usually strong</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Preferred Food and Drinks</strong></td>
<td>Warm</td>
<td>Cold</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Bowel Movements</strong></td>
<td>Hard</td>
<td>Soft, semisolid</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Perspiration</strong></td>
<td>Rarely</td>
<td>Very easily</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Sleep and Dreams</strong></td>
<td>Interrupted</td>
<td>Normal sleep</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Reaction to Stress</strong></td>
<td>Fear</td>
<td>Frustration</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Grasping Power, Memory</strong></td>
<td>Quick grasping</td>
<td>Quick grasping</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Resistance</strong></td>
<td>Poor</td>
<td>Medium</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diseases</td>
<td>Disease-prone</td>
<td>Disease-prone</td>
<td>Less disease-prone</td>
<td></td>
</tr>
<tr>
<td>----------------------------------</td>
<td>--------------------------------</td>
<td>------------------------</td>
<td>----------------------------------------</td>
<td></td>
</tr>
<tr>
<td>24 Activity Performance</td>
<td>Quick Very enthusiastic</td>
<td>Moderate Medium initiative</td>
<td>Slow Methodical Require more initiative</td>
<td></td>
</tr>
<tr>
<td>25 Thoughts and Mood</td>
<td>Too much Change frequently</td>
<td>Steady Pointed</td>
<td>Steady Firm decision Slow to change</td>
<td></td>
</tr>
<tr>
<td>26 Quality of Mind</td>
<td>Quick Creative Restless</td>
<td>Sharp Penetrating</td>
<td>Stable Calm</td>
<td></td>
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<tr>
<td>27 Social Movements with Newcomers</td>
<td>Hesitates</td>
<td>Moves easily</td>
<td>Thinks a while</td>
<td></td>
</tr>
<tr>
<td>28 Developing Friendship</td>
<td>Soon forming Easily breakable</td>
<td>Maintains friends</td>
<td>Slowly develops Firm</td>
<td></td>
</tr>
</tbody>
</table>

Prakriti of Individual: Vata pradhan/pitrapradhan/kapha pradhan