THE STUDY OF NIDRA IN DIFFERENT DEHA PRAKRUTI

1*Vd. Shilpa Yadav and 2Vd. P. U. Deshmukh

1P.G. Scholar (Kriya Sharir).
2Professor, Guide & H.O.D. of Kriya Sharir Department, R. A. Podar Medical College (Ayu.), Worli, Mumbai -400018.

ABSTRACT

Prakruti is the constitution of an individual which is decided by birth depending on the factors like predominance of doshas at the time of conception, condition of mother’s womb, food habits of mother and predominance of Pancha Mahabhuta. Depending upon the predominance of Dosha 7 different types of Prakruti have been mentioned. According to Vagbhata, Nidra is Tama and Kapha pradhana and hence the Kapha Prakruti persons will have more Nidra. By this statement it can also be understood that Nidra will be less in Vata and Pitta pradhana prakruti persons. Hence the present study is designed to see the pattern of Nidra in Various groups of Prakruti among the healthy individuals.

KEYWORDS: Prakruti, Nidra, Sleep.

INTRODUCTION

Ayurveda is based on the principle of maintaining a balance between the interrelated relationships within the body and mind. And one of the important component for maintaining balance between body and mind is Trayopstambha which includes Aahar, Nidra and Brahmacharya i.e. three supportive pillars of life. Out of which Nidra is a very important factor.

Nidra plays an important role in development, sustenance, reproduction and termination of life. Importance of Nidra has been stated as Sukhakara (Happiness), Pushtikar (Nourishment), Balyakar (Strength), Vrishya (Sexual Urges), Dnyanakar (Learning), Jeevankar (Life giving). So properly and timely taken sleep maintain the health of the body, mind as well as soul.
According to modern science, sleep is a fundamental requirement, not an optional extra in life. It plays a very important role in physical, mental, and emotional health.

During sleep, tired muscles recover and new proteins are synthesized. Some hormones are produced selectively during the night, such as the growth hormone in developing infants and children. Indeed, among the most striking effects of loss of sleep are inattention, disorientation and memory problems because sleep loss causes fatigue, drowsiness and ultimately an inability to remain awake during the day. If we are to be alert and mentally fit in our everyday lives, we need to sleep well. Sleep is extremely important for our emotional functioning also. When we have not had enough sleep it is likely that there will be emotional consequences like irritability, depressed mood etc.

Any kind of disturbance in sleep leads to many health problems. According to Charaka, Indulging in work, old age, disease, habitus and aggravated Vata are the reason of Nidranash or insomnia.

According to Vagbhata, Nidra is Tama and Kapha pradhana and hence the Kapha Prakruti persons will have more Nidra. By this statement it can also be understood that Nidra will be less in Vata and Pitta pradhana prakruti persons. Hence the present study is undertaken to expose the importance of Nidra and comparative study of variation in different deha prakruti.

MATERIAL AND METHODS

Literary source
All classical text of Ayurveda and modern text were referred. All available magazines, journals, research paper, MD dissertation and related source of data from Web were referred.

Type of study: An Open Randomized Prospective comparative clinical study.

Selection: Patients were selected randomly.

Written consent: An informed written consent of all 30 patients included in study was taken in the language best understood by them and procedure was also explained to them.

Medium of study: English, supported by Ayurveda terminology, wherever necessary in Sanskrit.

Study center: Institute.
Total number of subject: 30 (10 in each group) as follows-
1) Vata Pradhan Prakruti- 10.
2) Pitta Pradhan Prakruti- 10.
3) Kapha Pradhan Prakruti- 10.

Healthy individuals of either gender will be selected from College, Hospital and Hostels as per Inclusion and Exclusion criteria; their Prakruti will be assessed as per the approved assessment parameter (PSQI scale). A questionnaire will be structured for this study to assess pattern of Nidra on individuals of different Prakruti. A special Performa in the form of a questionnaire will be generated and data will be collected from the individuals who participate in present study.

INCLUSION CRITERIA
1. Healthy individuals of either gender of age group 17-30 years.

EXCLUSION CRITERIA
1. Individuals with any systemic diseases.
2. Subjects who work on night shifts.
3. Subjects who are on sedatives.
4. Individuals who hold key posts / executive post.

PARAMETER OF THE STUDY
Healthy individuals of either gender will be selected from College, Hospital and Hostels as per Inclusion and Exclusion criteria; their Prakruti will be assessed as per the approved assessment parameter (PSQI scale). A questionnaire will be structured for this study to assess pattern of Nidra on individuals of different Prakruti. A special Performa in the form of a questionnaire will be generated and data will be collected from the individuals who participate in present study.

The Pittsburgh Sleep Quality Index (PSQI)
The Pittsburgh Sleep Quality Index (PSQI) (Buysse et al. 1989a) was developed to measure sleep quality during the previous month and to discriminate between good and poor sleepers. The PSQI is composed of 19 self-rated questions and 5 questions rated by a bed partner or roommate (only the self-rated items are used in scoring the scale). The self-administered scale contains 15 multiple-choice items. Sleep quality is a complex phenomenon that
involves several dimensions, each of which is covered by the PSQI. The covered domains include Subjective Sleep Quality, Sleep Latency, Sleep Duration, Habitual Sleep Efficiency, Sleep Disturbances, Use of Sleep Medications, and Daytime Dysfunction which are defined as:

**Components of PSQI scale**
- **C1.** Component 1: Subjective Sleep Quality:
- **C2.** Component 2: Sleep latency:
- **C3.** Component 3: Sleep duration:
- **C4.** Component 4: Sleep efficiency:
- **C5.** Component 5: Sleep disturbance:
- **C6.** Component 6: Use of Sleep medication:
- **C7.** Component 7: Day time dysfunction:
- **C8.** Global PSQI: **Global PSQI score** is the sum of all the seven components of PSQI.

**Interpretation of scores**
In scoring the PSQI, seven component scores are derived, each item is scored from 0 (no difficulty) to 3 (severe difficulty). The component scores are summed to produce global score (range 0 to 21). LOWER score indicate good sleep quality.

Questionnaires of Pittsburgh Sleep Quality Index (PSQI) scale is mentioned in Case Record Form (CRF), henceforth -
- 21-28 – very good sleep.
- 15-21 – good sleep.
- 8-14 – average sleep.
- 0-7 – no sleep.

These component scores are further divided into three main categories for further differentiation of sleep (Nidra) in different deha prakruti as follows,
- 20-28 – very good sleep (Nidraalu) i.e. Kapha Pradhan Deha Prakruti.
- 11–19 average sleep (Saamanya) i.e. Pitta Pradhan Deha Prakruti.
- 0-10 – no sleep (Jaagruk) i.e Vata Pradhan Deha Prakruti.
OBSERVATIONS AND CONCLUSION

- In Vata Pradhan Prakruti individuals, 4 out of 10 subjects were of moderate sleep and one individual was very sleepy, came under Nidraalu category. 5 individuals were Less Sleepy or Jagruk Category.

- In Pitta Pradhan Prakruti individuals, 8 out of 10 subjects were of moderate sleep and one individual was very sleepy, came under Nidraalu category. One was of Less Sleepy or Jagruk Category.

- In Kapha Pradhan Prakruti individuals, 3 out of 10 subjects were of moderate sleep and 6 individual were very sleepy, came under Nidraalu category. One was of Less Sleepy or Jagruk Catogary too.

- For statistical analysis one way ANOVA with post test is applied. The P value is 0.0085, considered very significant. Variation among column means is significantly greater than expected by chance. So the level of sleepiness among these three Deha Prakruti was as follows:

Kapha Pradhan Prakruti > Pitta Pradhan Prakruti > Vata Pradhan Prakruti.

RECOMONATION FOR FURTHER STUDY

- The same study could be done in collaboration with a larger sample for more accurate results and conclusion.

- With the help this study and sleep scale, various sleep disorders can be studied in collaboration with sleep laboratory.
BIBLIOGRAPHY


