International Journal of Pharmaceutical Research and Applications
Volume 10, Issue 2 Mar – Apr 2025, pp: 914-918 www.ijprajournal.com ISSN: 2456-4494

Review of Samprapti of Pramehaby Studyingsedentary Lifestyle as a Causative Factor.

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Date of Submission: 25-03-2025 Date of Acceptance: 05-04-2025

ABSTRACT
In order to live a disease-free life, Ayurveda has long stressed the importance of adhering to a healthy dietary and seasonal regimen, Acharrasayan (noble behavior pattern), and eating and living a healthy lifestyle. Due to the rapidly expanding population and the need to compete, many have neglected or jeopardized their mental and physical well-being in recent years. Diabetes mellitus is the most common metabolic disorder caused by poor eating habits and an unsuitable lifestyle. Diabetes mellitus disease presents similarly to Prameha vyadhi, which is listed in Ayurvedic compendia. The Latin term diabetes mellitus means "sweet urine" (diabetes means syphon, and mellitus means honey). Prameha illness is defined in Ayurvedic compendia as "prabhoot Avil Mootrata," which is a condition in which a person's urine has a micturate, often murky, appearance. Sedentary lifestyle, the ingestion of too many fatty and difficult-to-digest foods, too much milk, too much jaggery and jaggery-related products, Kapha Dosha aggravating diet and lifestyle, and genetic factor [1]. All of these elements contribute to an excessive rise in Kapha Dosha, particularly its Dravaguna, which produces the dushyasorshaithilya in bodily tissues.

KEYWORDS: Asyasukham,Kleda ,Prabhut Avil Mutrata.

I. INTRODUCTION

The causes of Prameha include overindulging in the pleasures of a sedentary lifestyle, sleeping too much, eating foods like curds, soup made from the meat of aquatic and domesticated animals, animals living in marshy areas, milk and its preparations, freshly harvested food items, jaggery preparations, and all Kapha aggravating factors[2].Among the twenty types of Prameha, ten are curable because they share the same site (i.e., Medas - fat tissue), are primarily caused by Kapha, and have a balanced (manageable) pathology[3].

When some but not all of the diagnostic criteria for diabetes are satisfied, the condition is known as prediabetes. The "gray area" between normal blood sugar and diabetes levels is how it is frequently referred to. A condition known as impaired fasting glycaemia, or impaired fasting glucose (IFG), occurs when the fasting blood glucose level is higher than what is regarded as normal but not high enough to be categorized as diabetes mellitus. A pre-diabetic condition of dysglycemia known as impaired glucose tolerance (IGT) is linked to insulin resistance and an elevated risk of cardiovascular disease. Although prediabetes is described in a variety of ways by different healthcare systems, the diagnostic criteria are essentially the same everywhere.

With the assistance of the World Health Organization, the Indian Council of Medical Research (ICMR) develops national guidelines to ensure consistency in the management of diabetes nationwide. The condition known as prediabetes is defined as having a fasting blood glucose level of 110 and less than 126 mg/dl, which appears to meet the WHO's criterion of 110 and less than 125 mg/dl. Prediabetes is a diverse collection of metabolic failures that precede diabetes as well, rather than a single condition[4].

It could be a warning sign of diabetes or an opportunity to make a change in your life. Many terms are used universally, such Chemical Diabetes, Touch of Diabetes, and Borderline Diabetes. Impaired glucose tolerance (IGT) (two-hour plasma glucose = 140–199 mg/dL) was adopted by the National Diabetes Data Group in 1979 as a transitional stage between normal glucose tolerance and overt diabetes, replacing the phrases borderline and chemical diabetes.

Aim:
To study samprapti of Prameha by studying sedentary lifestyle as a causative factor.

International Journal of Pharmaceutical Research and Applications
Volume 10, Issue 2 Mar – Apr 2025, pp: 914-918 www.ijprajournal.com ISSN: 2456-4494

Objectives:
1.to study samprapti of Prameha
2.to study sedentary lifestyle as a causative factor of Prameha.

II. METHODOLOGY

Dosha Dushya Sangraha

Complete enumeration is sangraha[5]. Sangraha is the process of compiling several descriptive subjects in a condensed format in one location[6,7]. Thus, Dosha Dushya,the sum of all the Doshas and Dushya involvedin a disease's pathophysiology is called Sangraha. Dosha Dushya Sangraha was specifically employed in the classics to describe the pathology of three diseases: Visarpa (erysipelas), Kushtha (skin diseases), and Prameha[8,9]. A description of the disease's configuration is always included in the Dosha Dushya Sammurchhana(amalgamation of Dosha and Dushya)[10]. In diseases other than Prameha, KushthaandVisarpa, Dushya participating in pathology are specific and limited, but for these three diseases there is array of Dushya and each of them can participate in pathology.Therefore, the main distinction between these three diseases and others is that, whereas the symptoms of other diseases will be particular because of the specific and limited involvement of Dushya, the symptoms of these three diseases can vary if Dushya participating in the pathology changes. Only the Dosha Dushya Sangraha can comprehend Prameha, Kushtha, andVisarpa's characteristics. Prabhuta Avila Mutrata, or excessive urination with turbidity, is the only Prameha symptom that is referred to as a common symptom[11,12.]Prameha is classified based on certain characteristics of urine, which are the sole symptoms according to the various forms of Prameha[13,14,15,16,17]. According to Sushruta, Prameha's precursor symptoms persist after pathology has resolved and ought to be regarded as disease symptoms[18]. It definitely considers the Dosha andDushyasinvolved. However, given the variety of Dosha and Dushya that can contribute to pathology, it makes sense to have some understanding of the enormous number of possible permutations and combinations that can cause pathology. This is because each combination can produce a unique set of symptoms and may not always be mentioned in traditional treatises. We must comprehend the idea of Dosha Dushya Sangraha in order to handle the circumstance. Some Dushyaare involved in pathology at a specific stage, depending on differences in etiological causes. Other Doshas or Dushya may participate in pathology throughout time for a variety of reasons, including changes in the etiological component, season, strength (Bala), etc. These changes will modify the disease's symptoms.

Dosha Dushya Sangraha provides us with a comprehensive understanding of the various combinations and permutations of Dosha and Dushya that may contribute to Prameha pathology. Different bodily symptoms will be produced by each of these combinations. As a result, identifying a single set of symptoms for Prameha is quite challenging. Therefore, in practice, it is feasible to identify symptoms associated with several Doshas or Dushya for their potential participation in Prameha pathology, even if excess urine with turbidity (Prabhuta Avila Mutrata)[17,18]. is described as the only symptom of the disease.

Bahudrava Shleshma Dosha Vishesh

Prameha is not an acute illness; rather, it is the result of Dosha building up in the body over an extended period of time. Therefore, etiological factor consumption is high, frequent, and primarily habitual [19]. Because of this, the body accumulates Dosha over a lengthy period of time in comparatively lesser proportions. Dosha gathered in this way may not exhibit any symptoms and therefore go undiscovered, or it may result in sporadic, milder ailments that are ambiguous and frequently overlooked as signs of Prameha. One crucial element implicated in the pathophysiology is Bahu Drava Shleshma (increased Kapha with liquid state) [20].According to its etymology, the word "Kapha" is derived from "Ka" (Jala) and signifies Dosha, which is fed by Jala (water)[21].Additionally, Chakrapanidatta has emphasized that Prameha is caused by Kapha's more liquid nature [20].Therefore, the word "Bahu Drava Shleshma" can be accurately described as "increased accumulation of Jala (liquid) in the body that causes Prameha" rather than "just accumulation of Kapha."

Effects Of Kleda

Although the term Kleda appears in several classical treatises, nothing is known about its nature or function in bodily maintenance. Kleda, a natural bodily component, is vitiated in Prameha disease. Its body is characterized as Jala (~water) [22,23.] In the body, it is sometimes referred to as Snigdha Bhava (lubrication)[24] or Aadra Bhava (moisture)[25]. It is linked to UdakaDhatu (the body's water component) and keeps a variety of bodily tissues and systems hydrated. Fraction of Kleda, that is worn, is collected and forwarded by

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channels carrying Udaka towards Basti where it is collected and excreted from the body with urine[26].Hence the role of Basti to control amount of Udaka and Kleda in body is pivotal.

Excess Kleda and Dosha are transferred to Basti in the pathology of Santarpanajanya Prameha and interfere with its physiological function; this condition is known in classics as MutravahaSrotasa (urinary system) and becomes "Guru" (bulky). They grow heavy and lose their flexibility when Kleda and Dosha build up in Basti-related pathways. Kleda and Dosha block the channels in Basti, changing how it works. Urine that has Dosha vitiation will alter in color, flavor, smell, and other aspects. Therefore, a change in the typical features of urine is observed, which is known as "Prabhuta Avila Mutrata" (excess urine with turbidity), and it is a hallmark of Prameha.Because there is less Kleda in ApatarpanajanyaPrameha, body tissues are flaccid, which causes dryness. It allows Vata to move in a different way. Body tissue components are thus improperly transported to the Basti, where they are transformed into urine and expelled from the body. Similar pathology occurs in cases of obstruction-induced Madhumeha (MargavarodhajanyaMadhumeha). Thus, It is clear that disease occurring at Basti, in addition to the flaccidity of bodily tissues, is a necessary component of Prameha's overall pathology.

Sedentary Lifestyle

Adults who engage in high levels of sedentary behavior—defined as "any waking behavior characterized by an energy expenditure ≤1.5 metabolic equivalents (METs), while in a sitting, reclining, or lying posture[27]"—are more likely to suffer from cardiovascular disease, type 2 diabetes mellitus, cancer, and all-cause mortality, among other detrimental physical health outcomes[28]. Sedentary behavior may also have a detrimental effect on mental health because it has been linked to an increased chance of developing anxious or depressive symptoms[29,30].Furthermore, poor mental health and work-related sedentary behavior have both been linked to decreased productivity at work on their own[31].

III. DISCUSSION

Diabetes is known as the Silent Killer. Prameha'ssamprapti involves ten Dushyas. The degree of Dushti depends on the patient's symptoms. For example, not all forms of PramehaRugna are seen in PramehaPidaka. Only after Dushya Dushti took place could SandhivishleshSirashyathilya occur. At the location of Kha Vaigunya, Dosh sanga takes place. More signs of the disease will manifest where Kha Vaigunya is more prevalent. A single Dosha can disturb various Dushya types to cause distinct forms of Lakshana.

IV. CONCLUSION

Long periods of sitting and ongoing stress might eventually make it very difficult to maintain excellent internal health. Being sedentary weakens our body and impairs our cognitive function, increasing our susceptibility to stress and its harmful effects. Ongoing stress, however, can exacerbate a sedentary lifestyle, resulting in a vicious cycle that compromises our interior health. To break this pattern, we must incorporate regular exercise into our daily routines and learn more effective stress-reduction techniques. By doing this, we can improve our general quality of life, improve our internal health, and elevate our mood. Adopting a more balanced, active lifestyle is essential for maintaining our mental health in addition to our physical fitness.

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International Journal of Pharmaceutical Research and Applications
Volume 10, Issue 2 Mar – Apr 2025, pp: 914-918 www.ijprajournal.com ISSN: 2456-4494

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