

A SURVEY STUDY ON STATUS OF *SHARIRIKA BALA* & *AGNI BALA* W.S.R. TO  
*HEMANTA RITU*

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## ABSTRACT

*Hemanta Ritu* is one of the six Indian seasons that welcomes the colder months. During this period, cold climatic conditions prevails and is referred as the Pre-Winter season. As per *Ayurveda*, *Hemanta Ritu* prevails during the 'Margasheersha' and 'Pausha' Masa. In Gregorian Calendar, it is from mid-October to mid-December. Due to cold environment in *Hemanta Ritu*, *Agni* checked by the contact of cold wind, becomes stronger and capable of digesting food items which are *Guru* (heavy). If an individual does not consume *Aahara* according to the increased strength of *Agni*, then it starts digesting and depleting the first *Dhatu* of body i.e. *Rasa* resulting in *Prakopa* of *Vayu*. Thus, *Agni Bala* is optimum in this *Ritu*. In a similar way, it has been mentioned by *Acharya* that *Sharirika Bala* is superior during the start and end of *Aadana* (*Shishira Ritu*) and *Visarga Kaala* (*Hemanta Ritu*) respectively. As such, the aim of the study was to see if *Uttama Sharirika* and *Agni Bala* prevails in *Hemanta Ritu* in apparently healthy volunteers.

KEYWORDS: *Margasheersha*, *Pausha*, *Hemanta Uttama Bala*.

## INTRODUCTION

The year according to *Ayurveda* is divided into two periods or *Ayana* (solstice) depending on the direction of movement of Sun that is:-

- *Uttarayana* (northern solstice)
- *Dakshinayana* (southern solstice).

Each is formed of three *Ritu* (seasons).

Difference between *Uttarayana* and *Dakshinayana* is listed as below:

S.No.	<i>Uttarayana</i> ( <i>Aadana Kaala</i> )	<i>Dakshinayana</i> ( <i>Visarga Kaala</i> )
1.	Sun is moving in northern direction.	Sun is moving in southern direction.
2.	Sun above north of equator.	Sun above south of equator.
3.	Sun and Air attaining more strength.	Moon attaining more strength.
4.	Strength and vitality decreased.	Strength and vitality increased.
5.	<i>Teekshna</i> , <i>Ushna</i> , <i>Ruksha Guna</i> increases.	<i>Teekshna</i> , <i>Ushna</i> , <i>Ruksha Guna</i> decreases.
6.	Decreased moisture content and dry air.	Increased moisture content.
7.	<i>Aagneya Bhava</i> - <i>Shoshana</i> in nature.	<i>Soumya Bhava</i> - <i>Apayayana</i> in nature.

*Hemanta Ritu* being the last *Ritu* of *Visarga Kaala* experiences maximum strength of Moon which is *Apayayana* in nature and the individual experiences maximum strength of *Sharirika Bala* in this *Ritu*.

Due to cold environment in *Hemanta Ritu*, *Agni* checked by the contact of cold wind, becomes stronger and capable of digesting food items which are *Guru* (heavy). Thus, *Agni Bala* is also in its maximum strength.

## AIMS AND OBJECTIVES

1. To assess the status of *Sharirika Bala* in 500 apparently healthy volunteers in *Hemanta Ritu*.
2. To assess the status of *Agni Bala* in 500 apparently healthy volunteers in *Hemanta Ritu*.

## MATERIAL AND METHODS

For the survey study, 500 apparently healthy volunteers were randomly selected from the college campus and surrounding areas of R.G.G.P.G. Ayu. College &

Hospital, Paprola, Himachal Pradesh. The method adopted in this study was simple randomized selection by interview method. A special proforma was prepared

for the present study to collect the relevant data from the 500 apparently healthy volunteers.

#### Criteria for the Assessment of *Sharirika Bala*

Sr. No.	Name of Symptoms	Score
1.	Occasional feeling of general weakness which hampers routine work	0
2.	Occasional feeling of general weakness but can do work	1
3.	Full energy after normal daily routine work	2
4.	Full energy after exertional and normal routine work	3

#### Criteria for the Assessment of *Agni Bala*

Sr. No.	Name of Symptoms	Score
1.	Normal digestion of meals taken in adequate quantity	0
2.	Unable to digest meals taken in excessive quantity	1
3.	Normal digestion of meals taken in excessive quantity	2
4.	Early digestion of meals taken in excessive quantity	3

#### OBSERVATIONS

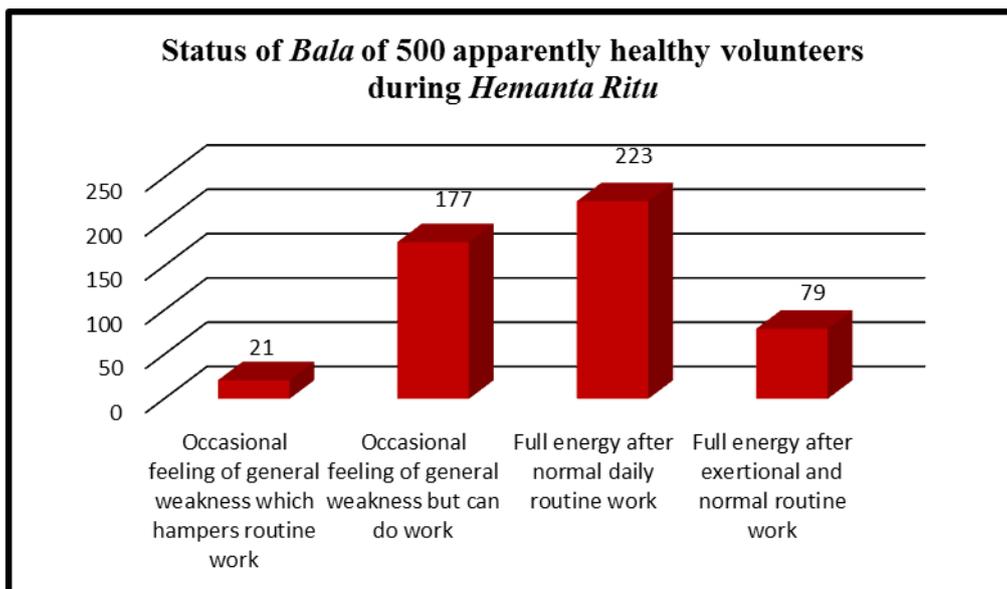
In present study comprising of 500 apparently healthy volunteers, maximum volunteers i.e., 58.6% (293) were between age group of 20-30 years, followed by 14.4% (72) in age group of 41-50 years and 14% (70) in the age group of 51-60 years. Only 13% (65) were in between 31-40 years of age. Majority i.e., 61.6% (308) were females and 38.4% (192) were males. 56.4% (282) volunteers were belonging to rural area whereas 43.6% (218) volunteers were from urban area. Out of 500 volunteers, maximum volunteers 44.2% (221) were belonging to lower-middle class, followed by 32.4% (162) upper-middle class. 21.2% (106) volunteers were from upper-lower class followed by 1.4% (07) lower class whereas only 0.8% (04) volunteers were from upper class. It was observed that appetite of maximum volunteers 72.6% (363) was normal where as 14% (70) volunteers had decreased appetite. Only 13.4% (67) volunteers had increased appetite. Data revealed that diet of maximum volunteers i.e., 57.4% (287) was mixed (vegetarian as well as non-vegetarian) type where as 42.6% (213) volunteers were vegetarian. Maximum volunteers 35.4% (177) had normal dietary habit, followed by 31% (155) volunteers who had habit of *Adhyashana*. 22% (110) volunteers had habit of *Samashana*, 11.2% (56) *Vishamashana* and 0.4% (02) volunteers had dietary habit of *Samashana-Adhyashana-Vishmashana*. Maximum volunteers i.e., 55.8% (279) were taking tea followed by 18.8% (94) with no beverage. 13.4% (67) volunteers were taking coffee and 5.6% (28) were taking cold drinks. Only 3.4% (17) volunteers were taking tea and coffee both and 3% (15) other. Out of 500 volunteers, 34.4% (172) volunteers were taking junk food for 5-10 times per month whereas 32% (160) volunteers were taking junk food <5 times. 20.6% (103) volunteers denied of intake of junk food and 13% (65) volunteers were taking junk food >10 times per month. Maximum volunteers i.e., 73.4% (367) had regular bowel habit, followed by 14.4% (72) with irregular bowel habit and 9.8% (49) with complaint of

constipated bowel. Only 2.4% (12) volunteers had loose bowel habit.

#### RESULTS

##### Status of *Sharirika Bala*

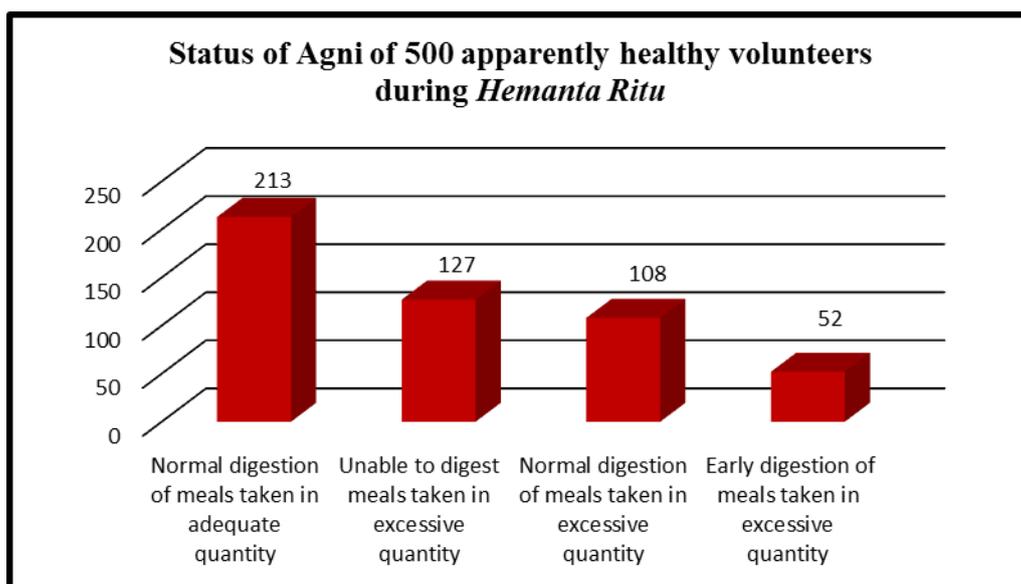
In this survey, it was revealed that maximum volunteers i.e., 44.6% (223) felt full energy after normal daily routine work followed by 35.4% (177) who occasionally felt general weakness but were able to do work. Full energy after exertional and normal routine work was found in 15.8% (79) volunteers. Only 4.2% (21) volunteers had occasional feeling of general weakness which hampered their routine work.



#### Status of *Agni Bala*

This survey revealed that maximum volunteers i.e., 42.6% (213) were able to digest meals taken in adequate quantity whereas 25.4% (127) volunteers were unable to

digest meals taken in excessive quantity. 21.6% (108) volunteers were able to digest meals taken in excessive quantity and 10.4% (52) volunteers were able to digest meals early taken in excessive quantity.



#### DISCUSSION

In this survey, majority volunteers (58.6%) were between age group 20-30 years. This is because of highest younger age group population present in India and the same is being reflected in Paprola and surrounding areas. Maximum volunteers were females because the survey was conducted in college campus where proportion of female students was more than that of males. Maximum volunteers were belonging to rural area because most of the volunteers were from villages surrounding Paprola. Appetite of maximum volunteers was normal because most of the volunteers were apparently healthy. Decreased appetite can be due to faulty dietary habits which is common in present era. Increased appetite can

be attributed to seasonal changes in *Hemanta Ritu*. Data revealed that diet of maximum volunteers was mixed (vegetarian as well as non-vegetarian) type. It may be due to the fact that they take non-vegetarian diet off and on. Majority of volunteers had faulty dietary habit which indicates unawareness regarding food selection, food intake and faulty lifestyle. Maximum volunteers were consuming tea. It may be due to easy availability of tea as this *Nagar Panchayat* is located in an area which is famous for tea gardens and it is also a preferable drink during winter season. Majority volunteers were taking junk food due to unawareness regarding their food value and nutrition. Moreover, most of the volunteers were belonging to younger age group and they are mostly inclined towards junk food items. It was observed that

inspite of junk food habits maximum volunteers had normal bowel habit. It may be due to their fixed body clock or tuning. Rest of the volunteers had problem with their bowel habits which may be due to their faulty dietary habits and lifestyle.

Present survey revealed that, 60.4% volunteers had feeling of full energy during *Hemanta Ritu*. Out of them 44.6% volunteers felt full energy after doing normal daily routine work (*Samanya Bala*) followed by 15.8% volunteers, who had feeling of full energy after exertional and normal daily routine work (*Uttama Bala*). This may be attributed to *Hemanta Ritu*.

35.4% volunteers had occasional feeling of general weakness but they were able to do their work and only 4.2% volunteers had occasional feeling of general weakness which hampered their routine work. It was mostly found in people of age group 45-60 years. Thus, this may be due to the physiologically deteriorating changes occurring in the body in this age group due to which an individual may feel weakness occasionally.

This survey revealed that maximum volunteers (42.6%) had *Samanya Agni Bala* i.e. they were able to digest adequate quantity of meals followed by volunteers (25.4%) who were unable to digest meals taken in excessive quantity. *Samanya Agni Bala* may be due to the fact that survey was conducted on apparently healthy volunteers which reflects that effect of *Hemanta Ritu* on *Agni Bala* was not upto the mark in Paprola and surrounding areas.

21.6% had normal digestion of meals taken in excessive quantity. Only 10.4% volunteers had early digestion of meals taken in excessive quantity.

Increased *Agni Bala* was found in rest of the volunteers that might be attributed to *Hemanta Ritu* because of the external cold environment persisting during this *Ritu*.

## CONCLUSION

According to the survey findings, full energy (*Uttama Bala*) is observed during *Hemanta Ritu* but status of *Agni* is almost unaffected.

## REFERENCES

1. Pt. Kasinatha Sastri, Caraka Samhita, Sutrasthana; Tasyashitiya Adhyaya 6. Chaukhamba Sanskrit Sansthan Varanasi, Reprint, 2007.
2. Kaviraj Atrideva Gupta, Ashtanga Samgraha, Sutrasthana, Dincharya Adhyaya 3. Chowkhamba Krishnadas Academy Varanasi, 2005.
3. Kaviraj Ambikadutta Shastri, Sushruta Samhita, Sutrasthana, Aaturoprakramniya Adhyaya 35, Chaukhambha Sanskrit Sansthan, Varanasi, Reprint, 2011.