

LIFE STYLE MANAGEMENT PLAN FOR HRUDROG (CARDIOVASCULAR DISORDER) AS PER AYURVEDA

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INTRODUCTION

Infectious disease were leading cause of death, a century ago. About 6,10,000 people die of heart disease in the United States every year i.e. 1 in every 4 deaths.^[1] Heart disease is the leading cause of death in men and women. More than half of the death due to heart disease in 2009 were in men.^[2] Chronic diseases caused by a variety of life style and other factors are leading cause of death , today. Dinacharya and Rutucharya are mentioned in our classical text, but how to implement them in our day-to-day practice is a problem! Actually life style management means ahara, vihara and aushadh management program in the patients of any disease. For the management of life style only, ayurveda is the best answer because ayurveda is the basic Indian science which is only made for swasthya rakshan of swastha people. The prevalence has increased and indicated by studies in the last decade projections for future also estimate a similar trend, Need of the hour is to track down and closely monitor the prevalence and disease with maintenance of proper and detailed database at hospital community and other levels.^[3]

PROBLEM STATEMENT

Prevalance of Hrudrog (Cardiovascular disorders) among population is on rise.

Year	% of population affected
1990-2000	4-6%
2000-2007	8-10%

Some cardiovascular disorders such as Myocardial infarction, Ischemic heart disease are occurring in young adults. It was uncommon scenario two decades ago.

Chronic Heart Disease deaths (W.H.O. study)

Year	Deaths
1990	1.17 million
2003	2.03 million

IHD (Ischemic heart disease) causes death as well as disability in those who survives. Few interesting stats and facts regarding Myocardial infarction/ IHD 55% population has right coronary artery dominance but most infarct occurs in left coronary artery. Most death caused by Acute Myocardial Infraction or IHD occurs in night time because of Tama guna prabhava. Quality and quantity of patients life detoriates in various cardiovascular disorders.

Scenario faced by Ayurvedic physician

Patients of Hrudrog (CVS disorder) may visit in following situations.

- 1) Immediately after diagnosis e.g. - after angiography.

- 2) After receiving modern treatment for 6 month – 1 year e.g. – Post CABG, Post MI etc.
- 3) Terminally ill patients in which patients relatives call for Ayurvedic physician.
- 4) In many cases, Ayurvedic doctors has to go for diagnosis.

In all these scenario, we (Ayurvedic practioners) has to plan for patients life style management.

Role of Ayurvedic Physician

- 1) Ayurvedic treatment
- 2) Life style modification plan as per ayurved.

This research paper is dedicated for life style modification plan and it’s implementation in the patients suffering from Hrudrog. Hereby, this paper presenting strategy and action plan regarding life style management as per ayurveda.

Life style management plans as per Ayurvedic Hrudrog

- 1)Model dinacharya plan/ nidra (sleep) implementation.
- 2)Behavior modification plan implementation.
- 3)Model ahara (diet).

ESSENTIAL STEPS

- A) Detailed chart wise analysis of lifestyle, food habit and behavior pattern.
- B) Creating a strong planning for patients as well as doctors.
 - 1. Set goals
 - 2. Select activity.

3. System of mini goal and reward system.
4. Strong commitment.

C. Post implementation analysis.

1. Doctor specific – for improvement in his/her practice.
2. Patient specific – to make him/her realize the benefits.

Few precautions to be taken while implementation

It should be serenity procedure to change the life style rather than punishment. No “Hoiler than thou approach” rather “I am with you” approach.

1) Model Dinacharya Plan/Sleep Pattern

Most of the death related to CVS disorder happens at night (Tamo guna prabhava). So sleep regulation and profound diet regulation before sleep is essential.

Patients might be suffering from cardiovascular diseases having following problems.

- 1) Stress/ Anxiety.
- 2) Irritability/ Anger.
- 3) Disturbance in sleep.
- 4) Other miss emotional problem.

Majority of patients of Hrudrog suffers from negative thought process.

Ayurvedic physicians plan for modification

1) Sleep

Most of cardiovascular deaths occurs at night time, so diet prior to sleep has to be satvik guna pradhan. Early sleep and early awakening.

2) Music therapy for hrudrog

Listening to classical raga at appropriate time can have beneficial effect on health.

Few e.g.

A) Raga for listening in morning and their beneficial effect

Rag - Bhairavi, Rag - Ramkali, Rag - Jogiya, Rag-Komal-Rishabha, Rag-todi, Bhilawal. The effect of listening this ragas cause emotional strength, devotion and peace, integration, compassion, serenity, happiness.

B) Raga for listening in afternoon and their beneficial effect: Rag-Sarang, Rag-Ahir lalita, Rag-Multani, Rag-Madhuvati, Rag-Bhimpalsi. Their effect are happiness, celebration, harmony, integration, rejuvenation.

C) Raga for listening in evening and beneficial effect

Rag-Kafi, Rag-Mishrapillu, Rag-Puriya dhanashree, Rag-Marawa, Rag-Maru-Bhiga.

Their effect are happiness, celebration, harmony, integration, rejuvenation.

D) Raga for listening at night and beneficial effects

Rag-Bageshwari, Rag-Abhogi, Rag-Lalita, Rag-Darbari Kanhra. Their effect are quality sleep, relaxation, gentleness, serenity.

3) Yoga/ asana

Simple shawasan and padmasan, Daily omkar, Dirgha shwasan and yognidra. All these things are very effective for stress/ Anxiety disorder.

4) Simple Meditation, Prayer, Mantra pathan

By doing this one can control irritability/ anger.

5) Behavior modification plan

- a) Build positive and accurate expectations about result
- b) Precisely define the behavior, activity to be changed.
- c) Help patients to set realistic goals.
- d) Use SELF CONTRACT method to enhance commitment.

Tools used for behavior modification plan.

MODEL COPY OF SELF CONTRACT

Sample–Self Contract for Behavior Change.

I Mr/ Mrs, agrees to incorporate the following behavior into my daily routine.

1. I will eat nutritious breakfast every day.
2. I will do simple Shawasan, Padmasan two times a day.
3. I will monitor my negative self talk and consciously replace critical thoughts with positive one.
4. I will begin my program on specified date.

I will add one behavior about every week/ 2 week/ month.

I will reward myself at least once during each week that I successfully stay with my program.

Signature of Vaidya Signature of patient Witness, if essential

Date: Date: Date:

**MODEL DIET MANAGEMENT PLAN FOR PATIENTS OF HRUDROGA
MODEL DIET PLAN CAN CHANGE, ACCORDING TO PATIENTS PRAKRUTI, DESH, KALA ETC.**

TIME	DAY, BREAKFAST, LUNCH, DINNER
	MONDAY
At morning 8-8:30 AM	Breakfast – A hot tasty pan cake, Thalipeet with ingredients like cabbage+ rice flour+garlic+dry ginger Quantity – 1-2 Without taking tea, 1 cup cow's milk + little bit dry ginger.
Lunch 12:30-1:00 PM	Home made flat bread of rice flour + mudga yush 1 small bowl + amala spice + lemon pickle + mixed dish of curds with raw vegetables salad with cabbage + plain rice
Solution for tea	1 cup sweet corn soup
Dinner 6:30- 7:30 pm	Flat cake of wheat flour 1-2, a snake gourd e.g.- padwal + ginger pickle + plain rice + beet root salad
	TUESDAY
At morning	
Breakfast 8-8:30 am	Mung laddu 1-2 small or mung pancake 1-2 (dhirde) Instedd of tea take – Arjun shirpak 1 cup
Lunch 12:30- 1:00 pm	Home made flat bread of wheat 1-2 + palak veg + a hot potch with mung + pickle of ginger + a small bowl of beet root salad
Solution for tea	1 cup of orange juice
Dinner 6:30- 7:30 pm	Home made flat bread of jawar 1 + brinjal veg + mung soup + jeera rice + 1 small bowl carrot salad.

DICUSSION AND CONCLUSION

Post implementation analysis

- 1)Pre Contemplation – No intension to change the life style.
- 2)Contemplation – Willing to take action six months.
- 3)Preparation - Planning to take in one month.
- 4>Action and maintainance – Taking action affirmatively and successful.
- 5)Termination – Take action and forget.

CONCLUSION

If this type of management plan is induced to the patient the patient can live qualitative life and the life will be added into the days of the patient.

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