A Survey for - Awareness about Dinacharya in General Public

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ABSTRACT

Dinacharya is a concept from Ayurveda, the traditional system of medicine in India. In Sanskrit term, Dinacharya, translates into daily routine or “daily regimen.” It refers to daily routines and practices that are believed to promote overall health and well-being. These routines are designed to align with natural circadian rhythms and include activities such as awaking up early, oral care, bowel movement, hygiene practices, exercise, dietary habits, meditation and mindfulness, work and rest and seasonal adaptation. Ayurveda places a strong emphasis on preventive healthcare and maintaining a balance of the body, mind and spirit to promote overall well-being. The main aim of this work is to know how aware is the public? This survey assesses public awareness, revealing that urban populations are more informed about Dinacharya than rural ones. It is important to note that individual variations exist and Ayurveda recognizes the uniqueness of each person’s constitution, known as Prakriti, Doshas etc.

Key words: Dinacharya, Circadian rhythm, Prakriti, Doshas.

INTRODUCTION

From the very beginning man has been in quest of means by which he can attain a flawless health and happiness. According to Charaka,

Prayojanam Chasya Swasthyasya Swasthya Rakshnam Aaturasya Vikarprashamanamcha[1]

It is to be said that the objective of Ayurveda is to protect the health of the healthy and alleviate disorders in the diseased person.

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According to Sushruta,

Samdosah Samagnischa Samdhatu Malkriya Prasannatameindriya Manah Swasthya Itibhidhiyae.[2]

If the Doshas, Agni (digestive power), Malas (waste products) and their activities are in a Prakriti form, the soul, sense organs and mind are calm and clear; only then it is called Swasthya. For the fulfilment of this Prayojan, knowledge of Dinacharya is required, along with maintaining a natural circadian rhythm. Circadian rhythm is explained in terms of important function in the human body, such as sleep patterns, appetite, digestion, hormone release, etc.

AIM AND OBJECTIVES

The aim of this study is to evaluate the awareness status regarding Dinacharya in the general public.

MATERIALS AND METHODS

A randomized survey of 100 people (50 males and 50 females) in society was conducted to assess awareness status regarding Dinacharya, with the help of questionnaires.
Questionnaires related to public awareness with reference to Dinacharya include:

1. Do you wake during the Brahramamuhurta period?
2. Do you have the habit of proper morning ablutions?
3. Do you drink water in the morning?
4. Are you familiar with auspicious objects?
5. Do you have the habit of using Anjana?
6. Are you familiar with Koval and Gandus?
7. Do you engage in activities like Karanpurana, Nasya, Dhupapaan, Tambulsevan?
8. Do you hold fragrant substances in your mouth?
9. Are you aware of Abhyang?
10. Are you aware of Chakraman?
11. Are you aware of Snana?
12. Are you aware of Vyayam?

Observation

Waking during Brahramamuhurta\(^3\): Out of 100 people, only 30 males and 35 females were waking up in Brahramamuhurta. Brahramamuhurta means the time period about 1 & 1/2 hours before sunrise.

Morning ablutions (washing oneself): Out of 100 people, 41 males and 48 females were regular in this practice. Some of them were not consistent due to issues like constipation.

Drinking water in the morning: Out of 100 people, 22 males and 18 females were consuming water on an empty stomach in the morning.

Auspicious objects: Out of 100 people, only 11 males and 09 females, i.e., very few participants were aware of auspicious objects.

Anjana\(^4\): Out of 100 people, no male participants and only 05 females were using Anjana.

Koval and Gandusa\(^5\) Out of 100 people, 48 males & 49 females were aware of Koval and Gandusa in terms of gargling. They were introduced to some medicated gargling practices for regular use to maintain their health such as cold milk with honey, decoction of Yasthimadhu etc.

Karanpurana, Nasya, Dhupapaan, Tambulsevan\(^6\): Out of 100 people, very few, 08 males and 02 females were aware of these practices.

Holding fragrant substances in the mouth: Out of 100 people, 20 males and 25 females were aware of this practice.

Abhayang (oil massage): Out of 100 people, 35 males and 18 females were aware of it.

Chakraman (a walk on foot): Out of 100 people, 41 males and 21 females were aware of it.

Snana (bath): Out of 100 people, 46 males and 35 females were aware of it.

Vyayam: Out of 100 people, 30 males and 16 females were aware of it.
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**DISCUSSION**

*Brahramamuhurta*: *Brahramamuhurta* refers to the time period about 96 minutes before sunrise.

**Morning ablutions**: The practice involves no suppression of natural urges, along with ensuring cleanliness of the face, teeth, eyes, and tongue. Participants were educated about the benefits, such as feeling more energetic, overcoming laziness and drowsiness, and increasing appetite. For those experiencing constipation, recommendations included the consumption of leafy vegetables, ghee, guava, figs, bananas, date sprouts, black grapes, etc.

**Drinking water in the morning**: They were advised to drink water in the morning because it helps the body recover from its nightly dehydration.

**Auspicious objects**[^1]: These objects are believed to enhance positive energy. In the Indian tradition, auspicious objects include a 6-inch *puja kalash* with a coconut, a 19-inch *Om* wall hanging, 6-inch *Charan Paduka* in brass, images of the Sun, *Vishnupadam*, *Kritimukh* (also known as *Shrimukha*), etc.

**Anjana**: It is not only for beautification and maintenance of eye health but also for preventing various eye disorders.

**Kaval and Gandusa**: These practices are valuable for both preventive and curative purposes. They play a significant role in maintaining oral health and treating oral diseases.

**Karanpurana, Nasya, Dhumapaan, Tambulsevan**: In *Karanpurana*[^8] daily putting it in the ears does not cause disease and does not lead to disorders like *Manyastambha* and *Hanustambha*. It also prevents issues related to high hearing and deafness.

**Nasya**: This procedure is recommended to be included in the daily routine to nourish the *avalambakakapha*. In conditions of constant trinities (*Karananada*), blackouts, blurred vision, etc., *Nasya* is the preferred choice of treatment.

**Dhumapaan**: Generally *Dhumapaan* is termed as *Ayurvedic* smoking. It is far from the cancerous smoking. The term *Dhuma* refers to smoke or fumes, and *paan* refers to inhalation. The key distinction between smoking and *Dhumapaan* is that the fumes are to be exhaled immediately through the mouth.

**Tambulsevan**: It is practiced for the maintenance of perfect oral hygiene and as a preventive measure against diseases of the oral cavity and throat.

**Holding fragrant substances in the mouth**: For example, Clove is a practice with various benefits. Clove, known for its spicy scent and pungent flavour, contains eugenol, a chemical with therapeutic properties. Clove is often utilized in dentistry to treat pain caused by a condition called dry socket.

**Abhayang (oil massage)**: Many people are aware that regular oil massage is beneficial for health. The use of medicated oil and specific time periods for the massage, along with details about the type of oil (*Kharpak*) to be used, are commonly suggested for optimal results.
**Chakraman (a walk on foot):** Everyone was well aware that taking a walk on foot is a beneficial practice for health. The specific benefits were highlighted to reinforce their understanding of the positive impact of this activity on their well-being.

**Snana (bath):** While everyone generally understands that bathing is a way of cleansing the body, it was observed that some rural individuals were not taking it seriously. The importance of bathing, such as eliminating body odor, addressing itching and burning sensations, providing a feeling of refreshment, and contributing to overall health and longevity, was explained. Daily bathing was recommended to emphasize its significance to individuals in rural areas.

**Vyayam:** Everyone knows about exercise, and rural youngsters are more aware than the elderly. Even the older population was encouraged to engage in regular exercise, with very old individuals being suggested meditation. The distinction between yoga and exercise was explained, and meditation was detailed in terms of its ability to promote mental health, which plays a significant role in overall well-being.

**CONCLUSION**

All in all, the conclusion drawn is that educated individuals residing in urban areas tend to adhere better to *Dinacharya* compared to their rural and illiterate counterparts. While many illiterate individuals do follow the regimens of *Dinacharya*, they often do so improperly and lack awareness of its benefits. They may not comprehend the necessity of hand washing before eating or the significance of cleanliness for health. The underserved populations living in slums were provided counselling for health and hygiene. A certain segment of educated people from rural areas and the elderly in urban lifestyles demonstrated a commitment to both *Dinacharya* and *Ritucharya*. In conclusion, it is emphasized that surveys based on Ayurvedic regimes and rules should be conducted regularly and in a more scientific manner. Overall, the experience gained from this survey was very pleasant and satisfactory.

**REFERENCES**


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