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Review Article

CRITICAL REVIEW ON PREVENTION OF THE HRIDROGA ON THE BASIS OF SHAT KRIYAKALA THEORY OF AYURVEDA

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ABSTRACT

Objective: (1) To explore the measures available in the literature for prevention of *Hridroga* on the basis of *Shat Kriyakala* the theory of Ayurveda. (2) To develop a general preventive measure through Ayurvedic principles for the prevention of heart diseases. Data source: Classical Ayurvedic textbooks *Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya,* commentaries, modern literature, and research journals available from database PubMed and Google Scholar were searched to interpret the concept of *Shat Kriyakala* (six stages of disease progression) for the prevention of *Hridroga*. Review methods: Both Ayurvedic classics and recent research on *Hridroga*, its risk factors, preventive strategies were explored. Results: Integrating preventive strategies like *Nidana Parivarjanam* (avoiding causative factors), *Dinacharya* (daily regimen), *Ritucharya* (seasonal regimen), *Vyayama* (regular exercise), *Sadvritta* (ideal code of conduct) and *Yoga* and *Pranayama* at each stage of *Shat Kriyakala* facilitates early detection, appropriate management, and restoration of homeostasis. Conclusion: By embracing Ayurvedic principles alongside contemporary medical insights, individuals can mitigate cardiovascular risks, enhance well-being, and optimize longevity.

INTRODUCTION

cardiovascular diseases are Nowadavs. considered as a global burden, mainly due to improper diet, sedentary lifestyle, smoking, and tobacco usage, lack of physical exercise, increased mental stress and environmental changes[1]. As WHO cardiovascular diseases (CVD) are the leading causes of death globally, taking an estimated 17.9 million lives each year [2]. CVD's remained the top cause of death worldwide in 2023, with a significant impact on lowand middle-income countries. However, changes in social and economic conditions, lifestyle choices, dietary habits, and increased stress related to earning a livelihood likely have contributed to its heightened occurrence. This underscores the need for scientists and the scientific community to thoroughly investigate and describe this phenomenon.



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In Ayurveda, prevention of the disease is the foremost part of treatment by modifying human lifestyle with the course of nature. Acharya Sushrutha has mentioned the concept of Shat Kriyakala in Sushrutha Samhitha Sutra Sthana, 21st chapter Vranaprashna Adhyaya. As per the concept of Shat Krivakala. the stages of Shat Kriyakala Sanchayavastha (stage of accumulation), Prakopavastha (stage of aggregation), Prasaravastha (stage of dissemination), Sthansamshraya Avastha (stage of localization), Vyakthavastha (stage of manifestation) Bhedavastha and (stage complication) as shown below in (fig.1)[3]. The role of Ayurveda in prevention and management of heart disease can be explained in a very systematic manner by inculcating the principles of Shat Kriyakala for early of disease and providing diagnosis management at specific stage of the disease. With the proper understanding of the prognosis of the disease, physicians can detect the changes in an early stage, like Sanchaya, Prakopa etc., based on the manifestation of Dosha and would be able to advise on the appropriate treatment at that stage and disease progress could be

checked and homeostasis could be restored. The disease becomes stronger in successive stages making poor prognosis of the disease and reducing the chance of recovery.

MATERIALS AND METHODS

All the available relevant data were collected from Ayurveda classics: *Charaka Samhita, Sushruta Samhita, Ashtanga Hrudaya,* commentaries, modern literature, and research journals available from the Database PubMed and Google Scholar. Clinical manifestations of heart disease have been studied and

incorporated based on *Shat Kriyakala* and possible preventive measures has been proposed.

Review of Literature

Concept of Shat Kriyakala

Stages of the Shat Kriyakala (Vyadhi Kriyakala)

- 1. Sanchaya Avastha (stage of accumulation)
- 2. Prakopa Avastha (stage of provocation)
- 3. Prasara Avastha (stage of propagation)
- 4. Sthanasamshraya Avastha (stage of localisation)
- 5. Vyakta Avastha (stage of manifestation)
- 6. Bheda Avashta (stage of chronicity)

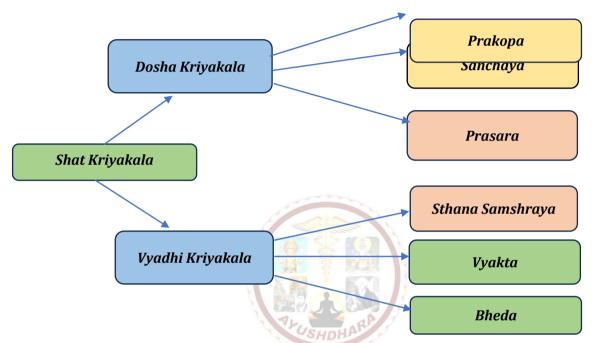


Fig.1 Stages of Shat Kriyakala

Sanchaya

Sanchaya marks the initial phase of Kriyakala, wherein Doshas accumulate in their designated locations within the body without being displaced. [4] This accumulation arises from diverse factors like causative agents, age, Ritu (seasonal variations), and fluctuations in Doshas throughout the day and night. The body naturally strives to maintain Dosha equilibrium, hence resisting factors that exacerbate their imbalance. [5]

• Clinical Manifestation of Sanchaya Stage in Hridroga

Individuals with high-fat diets, obesity [6], sedentary lifestyles [7], smoking habits [8], excessive alcohol consumption, genetic predispositions to dyslipidaemia, [9] family histories of cardiovascular disease [10], or conditions like hypertension [11], diabetes [12], hypothyroidism [13], and postmenopausal status [14] are at heightened risk for heart disease[15]. These factors contribute to the accumulation of *Tridosha's (Prana Vayu, Vyana Vayu, Sadhaka Pitta,* and *Avalambaka*

Kapha) in their respective sites. Gradually if these factors are not treated or continued it can potentially lead to the *Samprapti* (pathogenesis of disease) of the *Vyadhi*.

Prevention at the level of Sanchaya

At this stage, to prevent the occurrence of disease, one should follow the basic principle on which Ayurveda relies upon:

- *Nidana Parivarjanam* (prevention of the causative factors).
- Following Satvika Ahara (healthy diet).
- Regular exercise, Yoga, and meditation.
- Following the principles of *Dinacharya* (daily regimens), *Ritucharya* (seasonal regimen) and *Ratricharya* (night regimen).
- Specific *Ojovardhaka Kriya's* (that help in enhancing the *Ojas*), avoiding mental stress, anxiety, sorrows, or grief, iatrogenic factors like toxic effects of drugs

- *Dharana Vega* (suppression of urges) and *Adharaneeya Vegas* (non-suppression of natural urges) are the concepts described in the Ayurveda which must be followed to maintain the health and prevent the diseases.
- Rasayana (rejuvenating therapy) agents impede brain aging, assist in the renewal of neural tissues, and deliver anti-stress, adaptogenic, and memoryboosting effects.

Prakopa

Doshas that accumulate migrate from their own site to other sites. This is *Kriyakala* second stage and a second opportunity for protection against disease. [16] In this stage, the *Doshas* continue to accumulate in their respective sites. *Acharya Vagbhata* described this stage as the *Doshas* beginning to leave their original locations. [17]

• Clinical manifestation in Hridroga

The *Prana Vayu*, *Vyana Vayu*, *Sadhaka Pitta*, and *Avalambaka Kapha* in *Hridaya* gets vitiated and provoked due to the continuous *Nidana Sevana*. These dosha's gets accumulated in their other sites and further vitiate the *Rasa Dhatu* and cause *Vikriti*. To avoid the disease occurrence in stage of *Prakopa*, one must avoid taking the *Nidhana's* specifically mentioned below:

- (i) Samanya Nidana i.e., general etiological factors of *Hridroga* which are common for all types of *Hridroga* [18,19].
- (ii) *Vishesha Nidana* i.e., specific etiological factors of *Hridroga* which provoke humors of type either *Vata*, *Pitta* or *Kapha* [20].

Prevention at the level of Prakopa

The amount of *Doshas* accumulated determines the treatment. *Doshas* build up slowly if *Prakopa* is not adhering to *Chaya*; hence, *Shamana*, or suppression, is necessary. *Shodhana* (elimination of *Doshas*) is necessary if *Dosha Prakopa* is excessive or if *Chaya* is following them rather than in their own sites.

- Firstly, *Nidana Parivarjanam*, along with the *Nidana Parivarjanam*, proper diet good for healthy heart, healthy lifestyle, *Vyayama* and all the mentioned prevention at *Sanchaya* level can be advised in this stage also.
- Secondly Guna Viparita Chikitsa must be adopted as a treatment strategy for the already aggravated Doshas.

Prasara

The word "Prasara" itself means to spread. Aggravated Doshas have tendency to move all over the body in all directions. [21]

Clinical manifestation of Prasara stage in Hridroga

Due to the *Nidana Sevana*, *Dosha's* are vitiated in their own sites as well as other sites which provoke the *Dosha's* to spread out of their seat and vitiate *Rasa Dhatu*. They travel to the *Hridaya* along with the vitiated *Rasa Dhatu* and manifest the *Vyadhi*. At this stage the *Ojas* (essence of vitality) is also affected by the vitiated *Dosha's*, which also cause *Oja Kshaya*. Because of the vitiation of *Tridosha* and *Oja Kshaya*, this stage includes the development of *Samarasa* and the deterioration of *Hridaya* and *Dashadhamanis*.

• Prevention at the level of Prasara

Prevention must be done mainly at the level of *Sanchaya*, *Prakopa* and *Prasara* because the disease has not yet established. According to the contemporary science the avoidance of risk factors can be considered in this stage for the prevention of heart disease. One must stop taking *Nidana*, should not violate the rules of food intake, follow *Dinacharya*, *Ritucharya*, *Sadvritta*, non-suppression of *Adharaneeya Vega's*, regular exercise, Yoga and Meditation, regular intake of *Rasayana* and certain lifestyle modifications. Along with the initial methods of prevention *Dhatu Shodana* should also be incorporated.

Sthanasamshraya

Sthanasamshraya, (the localization of Doshas), occurs when these imbalanced elements settle in specific areas, known as Srotovaigunya (devoid of normal quality), where there is a depletion of tissue. [22] In this stage of Kriyakala premonitory signs and symptoms of the disease are seen [23].

• Clinical manifestation of *Sthanasamshraya* in *Hridaya*

Poorly manifesting symptoms of *Hridroga* (heart disease) may qualify as *Purvarupa*, according to *Acharya Dalhana*. In Ayurveda, prompt intervention and successful treatment depend on recognizing and comprehending these preliminary signs, or prodromal symptoms, of a disease.

At this stage the main *Dushya* or *Srotas* (channels) that are getting affected are:

- Rasavaha Srotas
- Pranavaha Srotas
- Manovaha Srotas
- Saminavaha Srotas

Samjnavaha Srotas have their root in Hridaya

These references give the importance of the *Srotas* and its *Dusti* that happen in the stage of *Sthanasamshraya* that are capable in producing *Hridroga* in future, if not avoided in starting stage. The

Rasa has a tendency of *Srotorodha* (obstruction of channels), *Gaurava* (feeling of heaviness in the body) etc. Whenever it mixes with vitiated *Doshas* (mainly *Vata*) and circulates all over the body and enters the heart and *Dashadhamanis* (affected arteries), and causes the *Sanga* (obstruction) of *Pranavaha* and *Rasavaha Srotas*, *Hridroga* is produced. *Hridaya* is the principal seat of *Rasa*, so whenever there is *Rasadushti*, it is likely to be responsible to produce *Hridroga*. *Atikashaya* (excessive astringent taste), *Tikta* (bitter), *Ushna*, *Ruksha* (excessive intake of hot and dry substances) are responsible for the vitiation of *Vata* which is the precipitating causes for the *Hridroga*.

In Hridaya, due to Karshana, Vyayama, Chinta, Bhaya, Trasa, Dushti of Doshas (Vyan Vayu, Sadhaka Pitta, Avalambaka Kapha etc.), will affect the Ojovaha Srotas and Ojakshaya will also take place. These are responsible for the dysfunctioning of the heart due to increased catecholamine and free radicals which in sequence causes the injury of the endothelium and dysfunction of the endothelium in the arterial wall (Dashadhamanis) leading to cardiovascular diseases. Other Nidhana's like Bhaya, Chinta, Trasa, Krodha, chintha cause Manovaha and Samjyavaha Srotodusti that can also be a causative factor that affect Hridaya and gradually cause Hridroga in future [24].

Prevention at level of Sthanasamshrava

The first line of treatment should always be *Nidana Parivarjanam*, should not violate the rules of food intake, follow *Dinacharya*, *Ritucharya*, *Sadvritta*, non-suppression of *Adharaneeya Vega's*, regular exercise, Yoga and meditation, regular intake of *Rasayana* and certain lifestyle modifications.

Combined association of treating both the *Moola* of any *Srotas* and the *Vyadhi Pratyanika Chikitsa* will be a constructive endeavour in treatment modalities in Ayurvedic field.

- 1. As mentioned above specific *Srotodusti Chikitsa* must be adopted by examining the patient thoroughly and based on his/her clinical presentation.
- 2. Satvavajaya Chikitsa: Satvavajaya Chikitsa potentiates Sattva with the intentions of modifying maladaptive symptoms caused by Rajas (arrogance) and Tamas (indolence) which are considered as illness-causing mental humors [25].

Vyakta

• Clinical Manifestation of *Vyakta* stage in *Hridroga*

All the signs and symptoms of *Hridroga* based on the *Dosha's* involved are collectively seen in this stage. Also, the cardinal signs due to which disease can be identified are also seen in this stage.

Prevention at level of Sthanasamshraya and Vyakta

Sthanasamshraya and Vyaktavastha have been considered together here. Samarasa and vitiated Doshas circulate in Rasavaha Srotas and Pranavaha Srotas at the Sthanasamshraya stage (Hridaya and Dashavahadhamanis). Even though the Sama Rasa is moving along its susceptible pathways (Dashavahadhamani), it is unable to fit through tiny pores in areas where Srotodushti has occurred. Dhamanipratichaya (atherosclerosis) is caused by this Dushta Rasa, which settles in such areas.

Hridroga signs and symptoms will appear in the Vyakta stage. At this point, the lumen (Sanga) of the Rasavaha and Pranavaha Srotas continues to narrow due to the continued progression of settled Dushita Rasa in Dashavaha Dhamanis (Dhamanipratichaya). Hridroga is produced because of this. Therefore, as mentioned above specific line of treatment must be adopted based on the Dosha, Dushya, Desha, Kala, Agnibala and Vyadhibala of the patient and prevent the further progression of the disease which is also a type of prevention.

Managing heart disease with an integrative approach involves using modern scientific methods to stabilize the condition during its acute stage. After stabilization, treatment can incorporate both contemporary science and traditional practices to manage the disease, prevent its progression, and improve the patient's quality of life.

Bheda (Stage of Complication or Chronicity)

The disease process advances to stage *Bheda* if appropriate treatment is not received for *Vyaktavastha*. When a condition reaches this point, it may serve as a risk factor for developing other illnesses, which is why we refer to it as *Nidhanarthakara Vyadhi*. If proper intervention and treatment are not initiated during this stage, the condition can progress and become untreatable.

• Clinical manifestation of *Bheda* stage in *Hridroga*

In this stage only *Bhedavastha* has been considered, as this stage is confined as *Upadravavastha* i.e. the stage of complications. *Klama, Avasada, Bhrama, Shotha* are the complications of *Hridroga* ^[26]. Likewise, heart failure, cardiac arrhythmia, heart block, Myocardial infarction and cardiogenic shock can occur, if due special and emergency measures are not taken.

Even if it is the stage of complication, all the preventable measure discussed above must be employed along with the specific treatment protocol has to be performed for the better living and to ensure no further complications of the disease.

RESULT

Unique concepts of Ayurveda have thrown light on the number of ways to prevent a disease as well as enhance the quality of life. Dinacharva, or a structured daily routine, helps prevent non-communicable diseases by promoting a healthy lifestyle. Early morning activities, like waking up during Brahma Muhurta, enhance health due to higher oxygen levels and a calming environment. Practices like Abhyanga massage). *Snana* (bathing), and (exercise) support well-being. Both traditional and modern sciences emphasize that consistent daily routines reduce stress and improve overall health, preventing lifestyle disorders. Acharya Sushrutha emphasized the preventive benefits of Vyayama (exercise) by specifying the optimal duration for therapeutic purposes, known as Balaardha Lakshanam.[27] This guidance ensures exercise is beneficial for health. However, modern incidents in gyms often occur because individuals exceed their capacity, focusing more on physical fitness than overall harmonious health. In Ayurveda, the Manas (mind) resides in the Hridaya so mental disturbances affect the heart first, causing discomfort or pain. This connection highlights the importance of the heart as the seat of the mind. Hence, meditation and yoga, which soothe the mind, are vital in preventing cardiovascular diseases. Diets high vegetables, whole grains, and lean proteins, while avoiding processed foods and sugars, are key to preventing cardiovascular diseases. This aligns with Ayurvedic principles of *Pathya Aahara*. Mediterranean diet[28], DASH diet[29], and plant-based diets are cardioprotective and endorsed by health experts [30]. Both contemporary and Ayurvedic approaches emphasize diet, along with sleep and moderation, for cardiovascular health. To prevent Hridroga (heart disease), early detection based on Shat Krivakala can be combined with Rasayana therapy. Rasayana enhances nutritional status and the quality of *Dhatus* (tissues), which improves overall vitality, strength, and longevity.

DISCUSSION

The concept of *Shat Kriyakala* holds huge importance in public health and disease control strategies. The fundamental principle of Ayurveda is to maintain the health of the healthy and treat the diseased, which can be accomplished by knowledge gained from *Shat Kriyakala*. The natural history of disease is a branch of modern research that employs the same idea. The factors that must be protected and maintained for preventing *Hridroga* are the main dosha's involved like *Avalambaka Kapha*, *Sadhaka Pitta*, *Vyana Vayu*, *Para Ojas* that is seated in *Hridaya*, *Srotas* involved like *Pranavaha*, *Rasavaha*, *Manovaha*,

and *Chetana* that is situated in *Hridaya* as shown in (fig. 2).

During the *Sanchaya* stage to prevent the occurrence of disease, one should follow the basic principle i.e., *Nidana Parivarjanam* (avoiding the causative factors) and thus *Doshas* get back to state of equilibrium.

In the next stage-*Prakopa*, when *Doshas* starts to get further vitiated one must adhere to the preventive principles like *Nidana Parivarjanam*, *Dinacharya* (daily regimen), *Ratricharya* (nocturnal regimen), *Ritucharya* (seasonal regimen), *Ritu sandhi Charya* (regimen during seasonal junction), *Sadvritta* (code of conducts), *Achara Rasayana* (ideal code of conduct), *Pathya Aahara Vihara* (healthy food and activities), Yoga, and meditation etc along with *Guna Viparita Chikitsa*.

During *Prasara* stage, when aggravated *Doshas* along with vitiated *Vata* move around the body, and cause derangement in *Rasa Dhatu* the same preventive measures along with *Hetu Linga Chikitsa* and *Vyadhi Chikitsa* should be followed, this prevents the further progression of *Vyadhi*.

In Sthansamshraya, the Dushya and Dosha interact and the disease arises anytime favourable conditions are met, here along with Rasa Dhatu, specific Srotas like Pranavaha, Rasavaha, Manovaha involved.So, along with the first line of treatment like Parivarianam, following Nidana Dinacharva, Ritucharya, Sadvritta, non-suppression of Adharaneeya Vega's, regular exercise, yoga and meditation, regular intake of Rasayana and certain lifestyle modifications, combined association of treating both the moola of any Srotas and the Vyadhi Pratyanika Chikitsa will be a constructive endeavour in treatment modalities.

Next in *Vyakta* stage all the symptoms characteristic of a particular disease becomes evident. By viewing the sign and symptoms at this stage, the diagnosis of a disease can easily be made and proper *Vyadhi Pratyanika Chikitsa* must be administered along with the preventive measures to arrest the progression of disease which is also one kind of prevention methodology.

The disease process advances to stage *Bheda* if appropriate treatment is not received for *Vyaktavastha*. Even if it is the stage of complication, all the emergency treatment protocol as well as preventable measure discussed must be employed along with the specific treatment protocol has to be performed for the better living and to ensure no further complications of the disease.

Proper following of *Dinacharya*, which includes regular exercise, bath, prayer, meditation, and wholesome diet, *Ritucharya* i.e., the seasonal

purification and *Sadvritta* as well as *Achaara Rasayana* which includes personality development and mental health care aids to this primordial prevention level by prevention of the possible risk factors. Incorporating dietary changes like reduced intake of salt, increased consumption of vegetables, fruits, pulses and cereals, vitamin C rich supplements and lifestyle modification like daily exercise, control hypertension, avoidance of alcohol and smoking etc. lies at the level of primary prevention by delaying or preventing the onset of disease. The aim of secondary prevention is to prevent the recurrence and progression of the disease.

Similar to this, contemporary science acknowledges the value of researching the natural history of diseases to create strategies for treatment and prevention.

In general, Ayurveda and contemporary science both stresses how important it is to understand how diseases progress to promote health and deliver the best possible therapy. The traditional classics have also mentioned various ways to prevent the *Hridroga*.



Fig. 2 Factors to Be Protected and Maintained for Preventing Hridroga

CONCLUSION

Preventive measures, including proper Aahara (diet), Vihara (activities), Dinacharya (daily regimen), Ritucharva (seasonal regimen), Sadvritta (ethical conduct). (rejuvenation). Rasavana Yoga, meditation. improve quality of life and reduce intervention cardiovascular risk. Timely medications, lifestyle modifications (Pathya), and exercises can break the pathology cycle, enhance patient quality of life, and manage both short-term and long-term consequences effectively, highlighting the need for early detection and stress management.

REFERENCES

- 1. National Heart, Lung, and Blood Institute. "What Are the Risk Factors for Heart Disease?" February, 2017.
- 2. WHO. (n.d.0. cardiovascular diseases (CVDs). Retrieved from https://www.who.int/news-room/facts-sheets/detail/cardiovascular-disease-(cvds)
- 3. Sushrut, Shushrut Samhita,PV sharma, Editor reprint 2018. Chaukhambha visvabharati Varanasi; 2018; P.237.
- 4. Sushruta, Shushrut Samhita. Acharya YT (editor), 9th ed., Choukhamba Orientalia, Varanasi, 2007, Sutrasthana 21/18, p. 103.

- 5. Sushrut, Shushrut Samhita, Ambika dutta shastri, Editor reprint 2008. Chaukhambha Sanskrit Sansthan Varanasi; 2008; p.60.
- Powell-Wiley, T. M., Poirier, P., Burke, L. E., Després, J. P., Gordon-Larsen, P., Lavie, C. J., Lear, S. A., Ndumele, C. E., Neeland, I. J., Sanders, P., St-Onge, M. P., & American Heart Association Council on Lifestyle and Cardiometabolic Health; Council on Cardiovascular and Stroke Nursing; Council on Clinical Cardiology; Council on Epidemiology and Prevention; and Stroke Council (2021). Obesity and Cardiovascular Disease: A Scientific Statement From the American Heart Association. Circulation, 143(21), e984–e1010. https://doi.org/10.1161/ CIR.000000000000000073.
- 7. Leiva AM, Martínez MA, Cristi-Montero C, et al. Sedentary lifestyle is associated with metabolic and cardiovascular risk factors independent of physical activity]. Rev Med Chil. 2017; 145(4): 458-467. doi:10.4067/S0034-98872017000400006.
- 8. Kondo, T., Nakano, Y., Adachi, S., & Murohara, T. (2019). Effects of Tobacco Smoking on Cardiovascular Disease. Circulation journal: official journal of the Japanese Circulation Society, 83(10), 1980–1985. https://doi.org/10.1253/circj.CJ-19-0323.

- 9. Trautwein, E. A., & McKay, S. (2020). The Role of Specific Components of a Plant-Based Diet in Management of Dyslipidemia and the Impact on Cardiovascular Risk. Nutrients, 12(9), 2671. https://doi.org/10.3390/nu12092671.
- 10. Caussy, C., Aubin, A., & Loomba, R. (2021). The Relationship Between Type 2 Diabetes, NAFLD, and Cardiovascular Risk. Current diabetes reports, 21(5), 15. https://doi.org/10.1007/s11892-021-01383-7.
- 11. Fuchs, F. D., & Whelton, P. K. (2020). High Blood Pressure and Cardiovascular Disease. Hypertension (Dallas, Tex.: 1979), 75(2), 285–292. https://doi.org/10.1161/HYPERTENSIONAHA.119.14240.
- 12. Strain, W. D., & Paldánius, P. M. (2018). Diabetes, cardiovascular disease, and the microcirculation. Cardiovascular diabetology, 17(1), 57. https://doi.org/10.1186/s12933-018-0703-2.
- 13. Zúñiga, D., Balasubramanian, S., Mehmood, K. T., Al-Baldawi, S., & Zúñiga Salazar, G. (2024). Hypothyroidism and Cardiovascular Disease: A Review. Cureus, 16(1), e52512. https://doi.org/10.7759/cureus.52512.
- Heravi, A. S., Michos, E. D., Zhao, D., Ambale-Venkatesh, B., Doria De Vasconcellos, H., Lloyd-Jones, D., Schreiner, P. J., Reis, J. P., Wu, C., Lewis, C. E., Shikany, J. M., Sidney, S., Guallar, E., Ndumele, C. E., Ouyang, P., Hoogeveen, R. C., Lima, J. A. C., Vaidya, D., & Post, W. S. (2022). Oxidative Stress and Menopausal Status: The Coronary Artery Risk Development in Young Adults Cohort Study. Journal of women's health (2002), 31(7), 1057–1065. https://doi.org/10.1089/jwh.2021.0248.
- 15. World Health Organization, Management of noncommunicable disease, "Prevention of cardiovascular disease: guidelines for assessment and management of total cardiovascular risk," January 1 2007
- 16. Sushrut, Shushrut Samhita, PV sharma, Editor reprint 2018. Chaukhambha visvabharati Varanasi; 2018; p.231.
- 17. Vagbhata, Astanga Hridayam, Gupta KA (editor), Choukhamba Prakashan Varanasi, reprint 2007, Sutrasthana 3/18-19, p. 91.
- 18. Sharma A, Shushrut Samhita of Maharshri Shushrut: Uttara tantra, 43/3. Varanasi, Chaukhamba Surbharati Prakashana, 2015: p.350.

- 19. Shastri S, Madhava Nidanan of Shri Madhavakara with Madhukosha Sanskrit commentary of shri Vijayarakshita: poorvakhanda 29/1. Varanasi: Chaukhamba Prakashana; Reprint 2010: p. 545.
- 20. Yadavji TA, Charak Samhita of Agnivesa with Ayurveda dipika commentary by Chakrapani Datta: Chikitsa sthana 26/78-80, chakrapani tika. Varanasi: Chaukhamba Prakashana; reprint 2020: p.602.
- 21. Sushrut, Shushrut Samhita, PV Sharma, Editor reprint 2018. Chaukhambha visvabharati Varanasi; 2018; p. 234.
- 22. Dalhana on Sushrutha Samhita, Sutra Sthana, Vranaprashna Adhyaya, 21/33. Available from: https://niimh.nic.in/ebooks/esushruta/?mod=adhi
- 23. Sushrut, Shushrut Samhita, PV Sharma, Editor reprint 2018. Chaukhambha visvabharati Varanasi; 2018; p.235.
- 24. Sharma A, Shushrut Samhita of Maharshi Shushrut: Uttara tantra, 43/3. Varanasi, Chaukhamba Surbharati Prakashana, 2015: p.350.
- 25. Prof. Ajay Kumar Sharma, Psychotherapy in Ayurveda. Varanasi; Chaukhamba Visvabharati; 2010. p.103.
- 26. Pandye G. S. editor, (6th edi.) Charaka Samhitha Sthana Chapter 9/6, Chaukhamba Publications, Varanasi.
- 27. Ambikadutta Shastri, editor, Sushruta Samhita, Chaukhamba Sanskrit Sansthan, Varanasi, 2007. p.107
- 28. Rees, K., Takeda, A., Martin, N., Ellis, L., Wijesekara, D., Vepa, A., Das, A., Hartley, L., & Stranges, S. (2019). Mediterranean-style diet for the primary and secondary prevention of cardiovascular disease. The Cochrane database of systematic reviews, 3(3), CD009825. https://doi.org/10.1002/14651858.CD009825.pub3
- Chiavaroli, L., Viguiliouk, E., Nishi, S. K., Blanco Mejia, S., Rahelić, D., Kahleová, H., Salas-Salvadó, J., Kendall, C. W., & Sievenpiper, J. L. (2019). DASH Dietary Pattern and Cardiometabolic Outcomes: An Umbrella Review of Systematic Reviews and Meta-Analyses. Nutrients, 11(2), 338. https://doi.org/10.3390/nu11020338.
- 30. Trautwein, E. A., & McKay, S. (2020). The Role of Specific Components of a Plant-Based Diet in Management of Dyslipidemia and the Impact on Cardiovascular Risk. Nutrients, 12(9), 2671. https://doi.org/10.3390/nu12092671.

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