STUDY OF DANTASAMPAT LAKSHANE WITH REFERENCE TO PRAKRUTI

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ABSTRACT

Prakruti is a basic concept of *Ayurveda*. This concept of understanding human being is important for the maintenance of health and prevention of disease. *Vata*, *Pitta, Kapha* are the three basic *Doshas*. Dominating dosha determines the *Prakruti*. Description of *Dantaswarup* in *Vatalprakruti* is done by Acharya Charaka only. For convenience of study the charecteristics of *prakruti* can be studied as *Rachanausarini, Kriyanusarini*, *Manogunanusarini*. *Dantas* are structurally located in oral cavity. *Acharya Kashyap* states four types of *Dantasas Samudga*, *Samvruta, Vivruta*and *Dantasampat.* These can be studied under concept of *Prakruti*. Therefore persons of different *prakrutis* were observed in Jalgaon District of Maharashtra. 30 Male and Female aged 30 to 45 years were observed. Volunteers having pregnancy, menopause, and chronic hormonal diseases like Diabetes mellitus. hypo/ hyperthyroidism, parathyroidism,boned eformities like osteoarthritis malignancy were excluded. *Prakrutiparikshan* chart is determined. *Dantasampat* symptoms were verified according to *Trividh Pariksha*. Opinion of dentist was taken. *Pittakaphajprakruti* persons have *dantasampatlakshane* as *Purnata 88%, Samata 88%, Shuklata 75%, Snigdhatha 63%, Sthirmula 88%. In Vatakphaja Prakruti*persons have *Dantasampat Lakshane*as *Purnata 30%*, *Samata* 30%, *Shuklata* 70%, *Snigdhata* 70%, *Sthirmula* 30% and in *Vatapittaja Prakruti* persons have *Purnata 50%, Samata 33%, Shuklata 83%, Snigdhata 75%, Sthirmula 42%*. Thus correlation is made between *Prakruti* and *Dantasampat Lakshne*. Conclusion-Symptoms of *dantasampat* examined by in *trividhpariksha* with the help of modern technology can be co-related in different *Prakrutis*. In this *Pittakaphaj Prakruti* volunteers have *dantasampat* symptoms (Ideal structure).
Keywords: *Prakruti, Dantsampat.*

INTRODUCTION

Ayurveda is an ancient science related to our life.Prakruti (Biological constitution of human body) is a basic concept of Ayurveda. Maintenance of health, prevention of disease depends on this fundamental concept of understanding human being . 1

The constitution of man (*Prakruti*) is basically determined by the genetic variation of different humors *(Dosha)* in the body within physiological limits. *Vata, Pitta, Kapha* is the three basic *Doshas*. Dominating *Dosha* determines the *Prakruti* singly or in combination (seven types) and depending

upon the relative predominance of the humors present in the Sukra (sperm), Asrik (ovum) at the time of their union (genetically inherited).[2] Also the *Bhojyadrayas* (consumed food), *Chesta* (activities) done by the *Garbhini* (pregnant woman) *Garbhashyasthiti* (condition of uterus) and Rutu (season) affects *Prakuti* produced.[3]

In *Kriyasharir* (Ayurvedic physiology) for convenience of study, the characteristics of *prakruti* can be studied as *Rachananusarini, Kriyanuarini, Manogunanusarini* and thus the symptoms in are grouped in three categories. *Dantaparikshan* comes under *rachanausarini* characteristic of *prakruti*. *Acharya Kashyapa* has given a detail information regarding *Danta* in *Dantajanmikadhyaya* which states that among the thirty two teeth, eight are *Sakrujjata* while the remaining are *Dwjj.*[7] He described four types of *Danta*s as *Samudga, Samvruta, Vivruta* and *Dantasampata*.[4] These can be studied under concept of *Prakruti* (anatomical, physiologicaland psychological)

AIM:- To study *Dantasampatlakshane* with reference to *prakruti*.

OBJECTIVE:-To develop *Dantasampat* examination criteria.

REVIEW OF LITERATURE:-

Acharya Charak and *Sushruta* have described *danta* as a type of *Asthidhatu* (bone) On the other hand *Acharya Sharangadhara* (Cha .sha.7/6, Su, sha, 5/20) has described *Danta*as *Asthiupdhata (biproduct).*[5] *Prakruti* related description is very less in *Ayurveda*. In Ayurveda, terminologies regarding *prakrutadanta* are given in description of *prakruti*. *Danta* in *Vataprakruti* is rough in attribute. They are small in size, and may be one above another P*ittaprakruti*-- persons have white colour teeth. (Ref-Ha. part-1/5,17,18)[6] *Dantasam-*

patlakshane (symptoms) are descricbed in *Kashaypsamhita.*

Dantasampatlakshane(symptoms of ideal denture)

Poornata	-Total in number
Samata	- Equal in size.
Ghanata	-Thickness
Udaronnata	- Slightly forwarded
Shuklata	-White
*Snigdhat*a	-Lusterous
Slkshanata	- Smooth surface
Dantabandhansamata-	Tight gums
Bruhat-sthirmula-	Big strong roots

Dantaparikshan can be done by *Darshan,Sparshan, Prashna pariksha* i.e. according to *Ayurveda* and with the help of modern dental examination.(Physical examination and interview) Co-relation can be made between *Prakruti* and D*dantasampat lakshane.*

MATERIALANDMETHODS:-

A complete literature review related to subject present in *Ayurvedic Samhitas,*

Various Books and Articles Written by and relevant modern literature have been taken. Persons of different *Prakrutis* were observed with *Dantasampat* symptoms by *Trividha Pariksha* and their photographs were taken. *Prakruti* is determined according to P*rakruti Parikshan* chart.

Study site - Jalgaon Dist. - Maharashtra

Sample size- 30

Inclusion - Criteria

Sex-   Male and Female

Age - 30-45   years.   Community– Maharashtrian **Exclusion Criteria:-**

1) Pregnancy, Menopause, Chronic Hormonal diseases, like Diabetes Mellitus, hypo/hyperthyroidism, parathyroidism, bone deformities like osteoarttritis, malignancy.

Study Evaluation:-

1) **Clinical assessment has been done**

according to **Dantsampat lakshane (symptoms of ideal denture**).

2)Observation has been done by Darshan,Sparshan and Prashna Pariksha(Trividh Pariksha).

3)Prakrutiparikshan has been done according to chart.

1. *Poornata* -**Total** in number
2. *Samata* -Equal in size. Observedbymaxillary and mandibular casts
3. *Ghanata* -Thickness by vernier caliper&studyModels

4. *Udaronnata* -Photographs, dental shade guide
5. *Shuklata* -Dental shade guide
6. *Snigdhata* -By blotting paper
7. *Dantabandhansamata*- By palpating gum and watchingcolour of gum.
8. *Brhat-sthirmula*-(Strong root) Checking with the help of mirror and probe.

OBSERVATION:-

Observation based on correlative symptoms of *Dantasampat* and *Prakruti.*

Table No.1

Pittkaphaj Prakruti				
Sr. No.	Variable	Groups	Frequency	%
1	Age	31-35	4	50
		36-40	2	25
		41-45	2	25
2	Gender	Male	3	38
		Female	5	63
3	*Purnata*	Yes	7	88
		No	1	13
4	*Samata*	Yes	7	88
		No	1	13
5	*Shuklata*	A1	1	13
		A2	6	75
		A3	1	13
6	*Snigdhata*	<50%	2	25
		50%	5	63
		>50%	1	13
7	*Sthirmul*	Yes	7	88
		No	1	13

Table 2

VatkaphajPrakruti				
Sr.No.	Variable	Groups	Frequency	%
1	Age	31-35	5	50
		36-40	3	30
		41-45	2	20
2	Gender	Male	4	40
		Female	6	60
3	*Purnata*	Yes	3	30

		No	7	70
4	*Samata*	Yes	3	30
		No	7	70
5	*Shuklata*	A1	0	0
		A2	7	70
		A3	3	30
6	*Snigdhata*	<50%	7	70
		50%	3	30
		>50%	0	0
7	*Sthirmul*	Yes	3	30
		No	7	70

Table No.3

VatapittajPrakruti				
Sr.No.	Variable	Groups	Frequency	%
1	Age	31-35	7	58
		36-40	2	17
		41-45	3	25
2	Gender	Male	5	42
		Female	7	58
3	*Purnata*	Yes	6	50
		No	6	50
4	*Samata*	Yes	4	33
		No	8	67
5	*Shuklata*	A1	0	0
		A2	10	83
		A3	2	17
6	*Snigdhata*	<50%	9	75
		50%	3	25
		>50%	0	0
7	*Sthirmul*	Yes	5	42
		No	7	58

Table No.4

Total *Prakruti*				
Sr. No.	Variable	Groups	Frequency	%
1	Age	31-35	16	53
		36-40	7	23
		41-45	7	23
2	Gender	Male	12	40
		Female	18	60

3	*Purnata*	Yes	16	53
		No	14	47
4	*Samata*	Yes	14	47
		No	16	53
5	*Shuklata*	A1	1	3
		A2	23	77
		A3	6	20
6	*Snigdhata*	<50%	18	60
		50%	11	37
		>50%	1	3
7	*Sthirmul*	Yes	15	50
		No	15	50

Graph No. -1
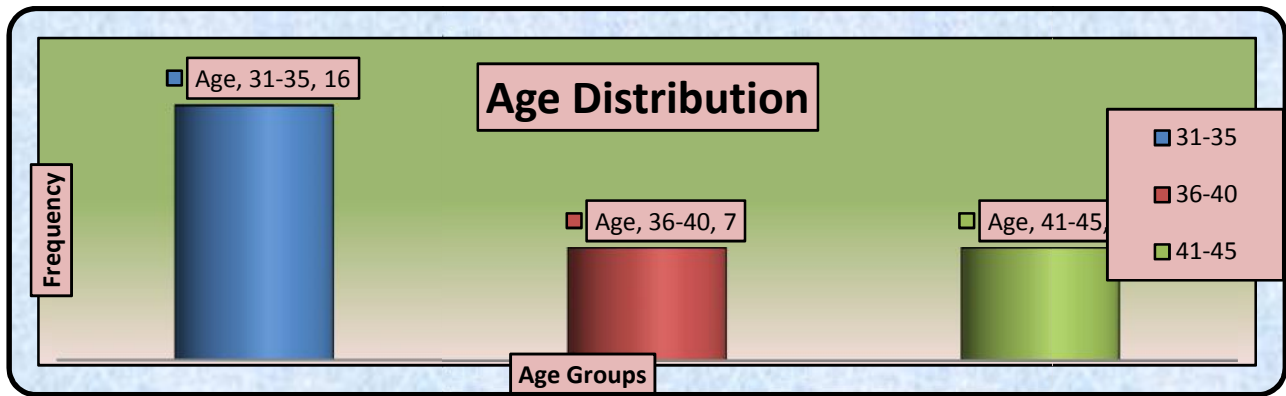
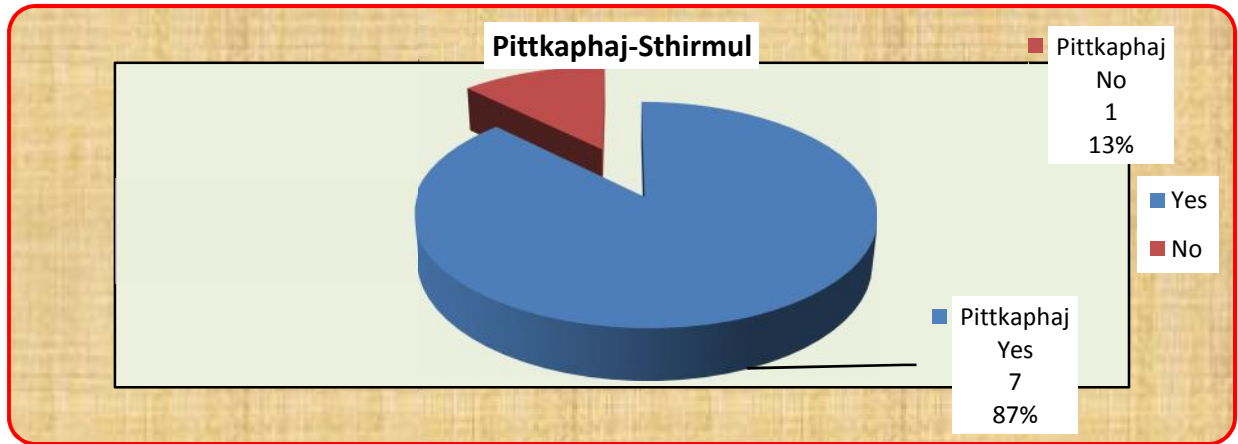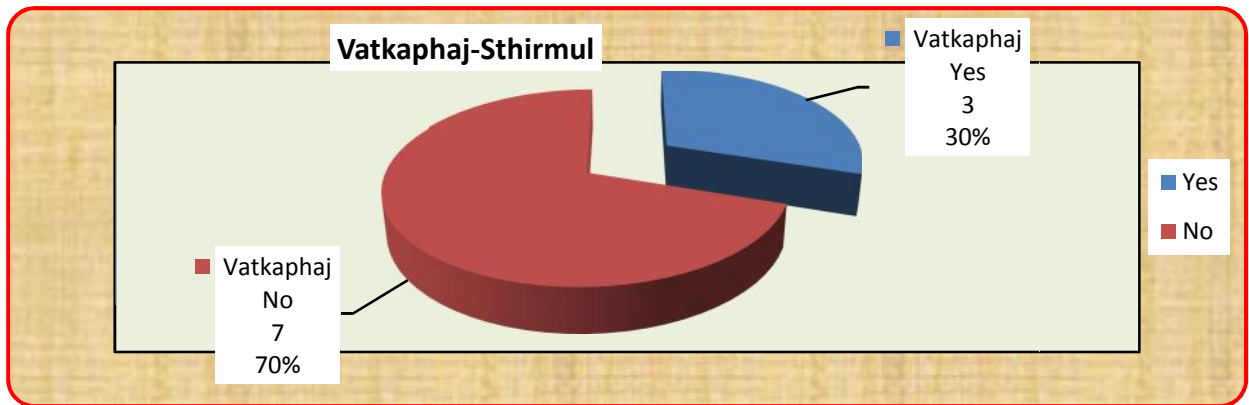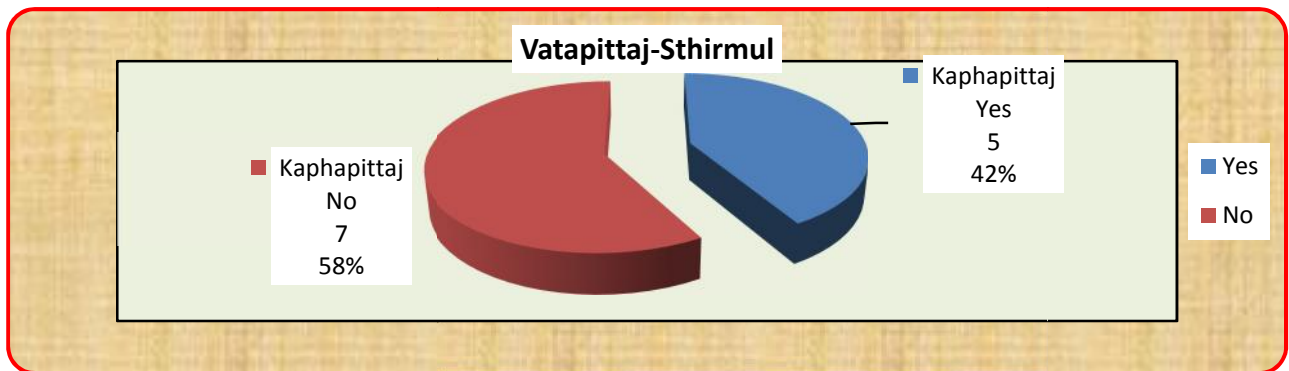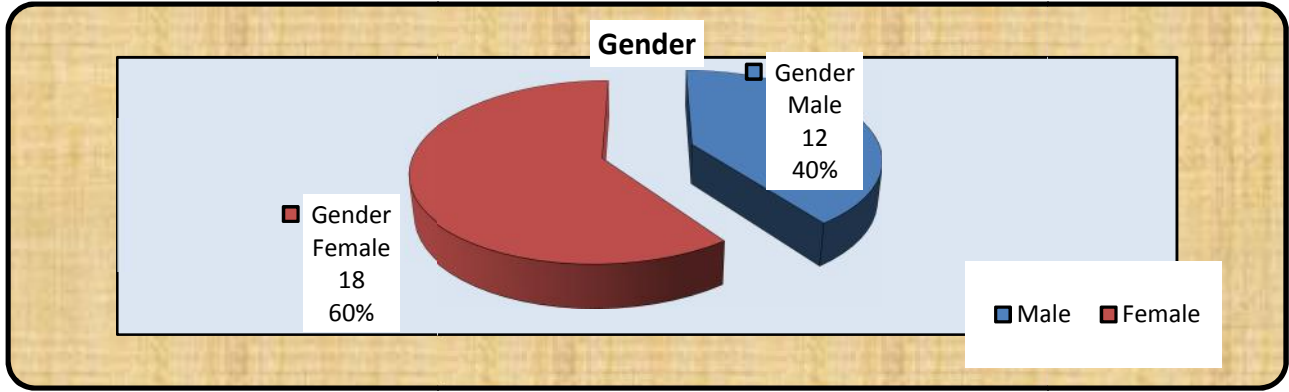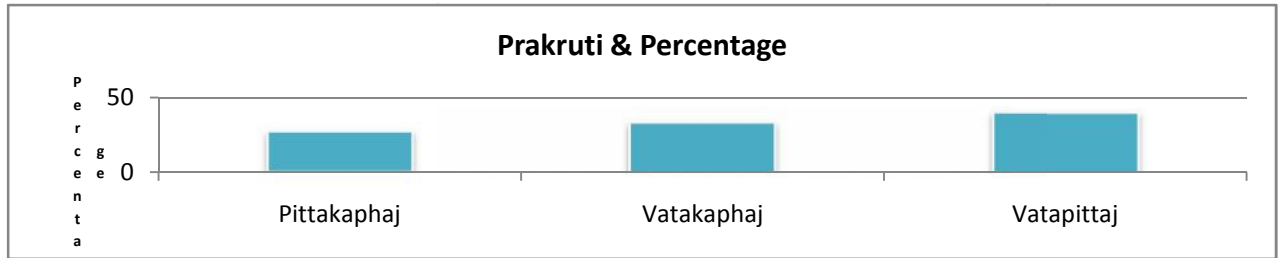| Gender	Male	12	40
	Female	18	60

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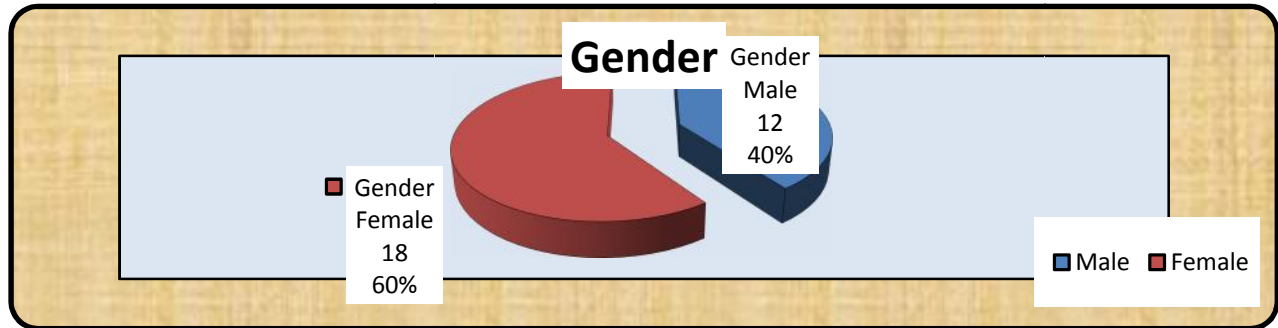
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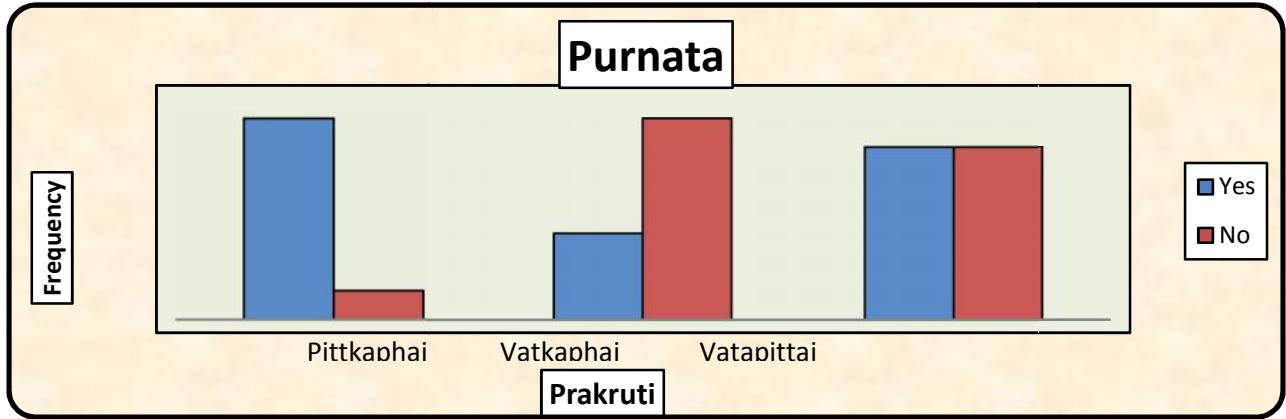
Graph No. -4

Graph No. -5

Graph No. -6

Pittkaphaj-Sthirmul

Pittkaphaj
No
1
13%

Yes
No

Pittkaphaj
Yes
7
87%

Graph No. -7

Vatkaphaj-Sthirmul

Vatkaphaj
Yes
3
30%

Yes
No

Vatkaphaj
No
7
70%

Graph No. -8

Vatapittaj-Sthirmul

Kaphapittaj
Yes
5
42%

Yes
No
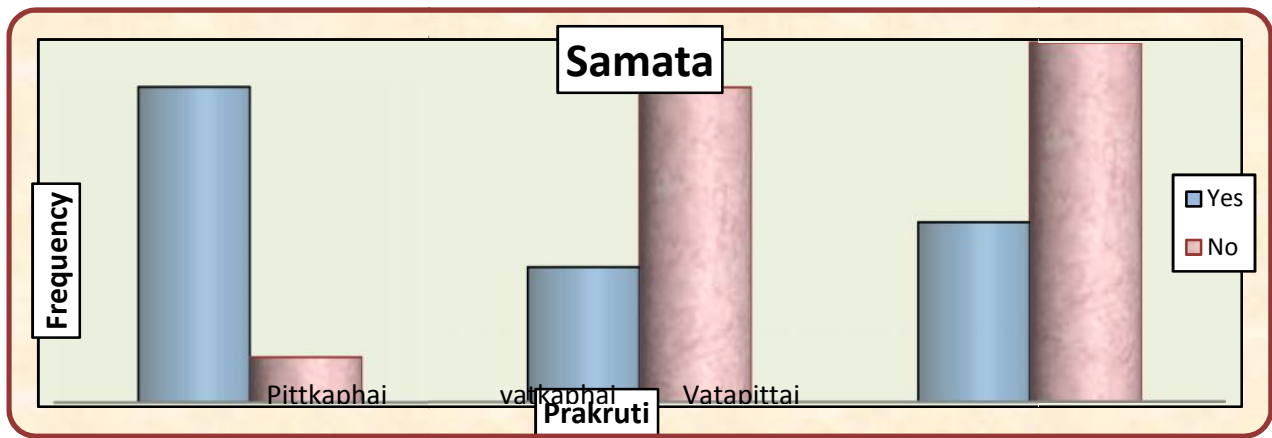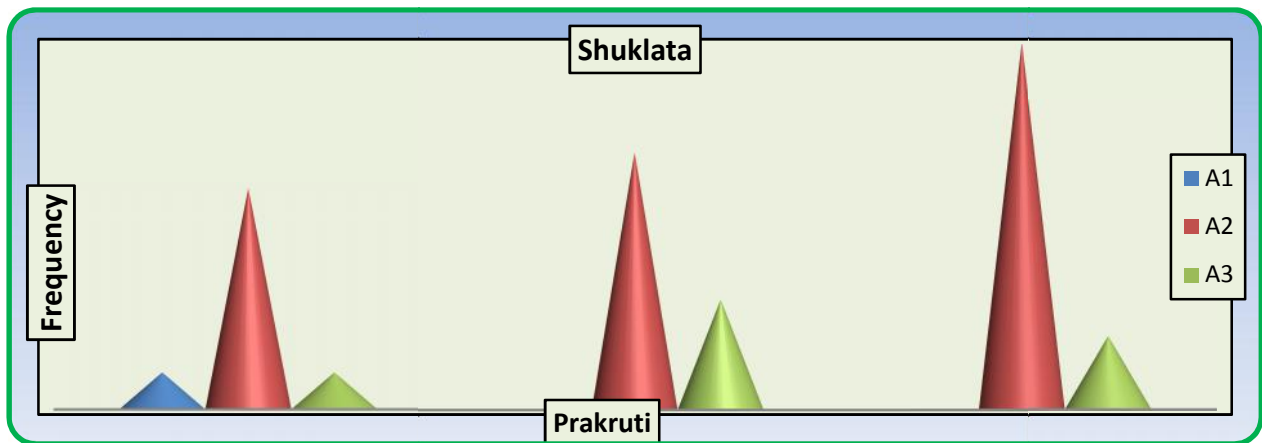
Kaphapittaj
No
7
58%

Graph No. -9

Graph No. 10

Prakruti	Percentage
Pittakaphaj	8
Vatkaphaj	10
Vatpittaj	12

DISCUSSION

From the above observations, examination of *Dantsampat* symptoms can be done by *Trividhpariksha* (physical examination and interview) and modern techniques with the help of Cast, probe, mirror, torch, dental shade guide as-

In the above study combination of *Prakruti* in volunteers were formed as *Pittakaphaj*26.66%, *Vatakaphaj* 33.33% and *Vatapittaj*40%

CONCLUSION

From the above observations and discussion it is concluded that symptoms of *Dantasampat* examined by *TrividhPariksha* with the help of modern technolodgy can be co-relate in different Prakrutis. In this*Pittakaphaj Prakruti* volunteers have *Dantasampat* symptoms (ideal denture).

REFERENCES

1. A text Book of Physiology – Gyton& Hall .chapter ,page no.912-914.
2. KavirajAmbikadattaShastri Sushrita-Samhita, Chaukhamba Sanskrit Sansthan, 1993   Purvardha, Ni. 16/29, page no. 297.
3. VaidyarajJadhavjiTrikamjiacharya, Chakrapanidatta, 4th edition, Munshiram-Mahoharlal publishers, 1941m Cha.sha. 7/6, page no. 337
4. Vd. GangadharShastriSathe, Raghuvan-

shiparkashan, 4th edition, 1983 Sharang dharsamhita, part - 1 5/13, page no. 31

5. KavirajAmbika data ShastriSushrita-Samhita, Chaukhamba Sanskrit Sansthan, 1993 Purvardha, Ni. 16/29-32, page no. 297

6. Harit Samhita Part 1/5, Shloka no. 17/18.

7. Nepa1lRajguruPanditHemrajsharma and Shristyapal Bhishagacharya, Chaukhamba Sanskrit Sansthan, 7th edition Vi. San.2057, KashyapaSamhita Su. 20/8, page no. 130

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