

STUDY OF KRODHA (ANGER) AND IT'S CO-RELATION WITH PRAKRUTINitin Sharma¹, Rashi Sharma², Gaurav R. Parekh³, Kavita V. Indapurkar⁴¹MD(Ayu), Lecturer, SRM Govt. Ayurvedic College, Bareilly, Uttar Pradesh, India²PhD Scholar, ⁴MD(Ayu), PhD, HOD, Dept. of Kriya Sharir, B.V.D.U.C.O.A., Pune, Maharashtra, india³MD(Ayu), B.V.P., Pune, Maharashtra, india**ABSTRACT**

Anger is a compounded phenomenon. It has dispositional properties, expressive and motivational components, situational and individual variations, cognitive and excitatory interdependent manifestations and psycho physiological (especially neuroendocrine) aspects.

According to *Ayurveda*, anger is *guna* of *Rajas* and when *Rajas* is predominant gives rise to emotions like anger. In *CharakSamhitha* it is mentioned that indulgence in *kama* (lust), *krodha* (anger), *lobha* (avarice), *irsya* (jealousy), *mana* (pride), *mada* (vanity), *shoka* (grieve), *chinta* (anxiety), *udvega* (agitation), *harsha* (exhilaration) causes the vitiation of *manasikdoshas* (*satva*, *rajas*, *tamas*) these in turn vitiate *Sharirikdoshas* and cause diseases like *jvara* (fever), *atisara* (diarrhea), *Shosha* (emaciation), *meha* (diabetes) and *kustha* (skin disorders) etc. *Prakruti* is the fundamental principle of *ayurveda*. All our natural tendencies are dependent on *prakruti* of a person. So it is imperative that *krodhi* tendency too shall vary in accordance with *prakruti* according to this rule. Thus, an effort was made to find out this *prakruti* wise variance. In modern science a tool which quantitatively measure level of anger has been mentioned. Using such tool study of *krodha* from *Ayurveda* as well as modern science and its correlation between *sharirprakruti* and level of anger was done.

Keywords: Anger, *Prakruti*, *manasdoshas*, *krodha*.

INTRODUCTION

In present fast paced life *Krodha* is increasingly becoming contributory factors for ill health. *Ayurveda* as well as Indian philosophy has explained anger as a *dhar-neeyavega* (suppressible urge) and its importance. To control anger is very essential to prevent psychosomatic diseases

A person should refrain from satisfying the urges relating to greed, grief tear, anger, vanity, shamelessness, jealousy, too much attachment and malice¹. Being the function of *mana* it is natural for *mana* to wander into negative thoughts like jealousy, anger,

fear etc. *Acharyas* have therefore advised to have a control them otherwise they are certain to become disease causing *hetus*.

Anger can be defined as a part of the fight or flight brain response to the perceived threat of pain. It is an aversive, unpleasant emotion. It is intended to generate action in order to eradicate this uncomfortable sensation. It is coupled with physiological arousal. But it is not clear whether action diminishes anger or anger is used up in action. Anger is induced by numerous factors. It is almost a universal reaction. Any threat to one's welfare (physical, emotional, social, financial, or mental) is met with anger².

CAUSES OF ANGER³

- Fatigue
- Hunger
- Pain
- Sexual Frustration
- Recovery from illness
- Puberty
- Hormonal changes associated with PMSOR menopause.
- Use of certain drugs.

SYMPTOMS⁴

- Heightened blood pressure. [May cause red face].
- Shortness of breath
- Heart palpitation
- Animated and exaggerated body movement
- Dilated pupils
- Sleeplessness
- Increased Swearing
- Irritation
- Tense Muscles
- Speech and motion are faster and more intense increased physical strength.
- Anxiety
- Blood sugar level increases to provide more energy.
- Sleeplessness
- Constipation
- Stiffness of posture
- Dulled senses
- Yelling
- Trembling

Anger is one of the most important causes of psychosomatic illness. Anger can turn into dangerous emotion if we experience high levels of anger day in and day out. So, we should reduce health risks by effective anger management strategies and redirecting our energy towards positive directions⁵.

AIM

Study of *Krodha* (Anger) and its co-relation to *Prakruti*

OBJECTIVES

The present study was conducted with following objectives in mind.

- All references were compiled in *Ayurvedic* classics which might indicate anger.
- To study *Krodha* with modern perspective.
- To study the science of *prakruti* in detail.
- To study *prakruti* in relation to anger.
- To compare level of anger with *sharir-prakruti* of a person.

MATERIALS

- *Prakrutiparikshan* of subjects was done with the help of Ayusoft standard questionnaire, the validity and reliability was already done.
- Standard Anger questionnaire – for assessment of level of anger. Level of anger is divided into three levels.

Level of anger -

Low	: 31 - 43,
Moderate	: 44 - 65
High	: 66 - 124

The level of anger of the subjects was assessed in the morning with the help of standard questionnaire, (Reference: Anger management: Glennrschirraldi and Melissa Hallmark Kerr).

- Statistical chi square test was used to verify and assess the observations.

METHODS

The work to be done in this topic was divided into three phases

1. Literary

2. Practical
3. Integration of the above said clinical and practical to draw conclusions.

LITERARY

- In the beginning all information in *ayurvedic* literature regarding *prakruti* was compiled. Here the *ayurvedic* literature included was the *brahatrayeelaghutrayee* and other available texts.
- Modern and *Ayurvedic* information about anger was studied and its effect on health was also added.
- A study on inter-relation of body and mind according to Ayurveda as well as modern science was done with quoting of necessary classical quotations.

PRACTICAL

- *Prakruti* of 100 subjects was taken with a *prakruti* questionnaire.
- Level of anger of 100 subjects was taken with an anger questionnaire.
- Reading of these 100 subjects was taken in morning time.
- The quantitative readings of anger were collected and it was subjected to statis-

tical analysis and comparative study was done.

INCLUSION CRITERIA

The subjects included in the study were healthy volunteers between the age group of 18-22 yrs. Both male and female students were taken.

EXCLUSION CRITERIA

Any student suffering from known systemic illness or any chronic health disorder was excluded from the study.

STATISTICS

Findings from the survey were evaluated using proper tests of significance and depicted using diagrams. The test was chi-square.

Theoretical analysis was done using references from classical text.

OBSERVATIONS

Prakruti of hundred subjects was evaluated using the standard *prakrutiquestionnaire*. We have studied *pradhanprakruti* with *anubandha* the result are as follows:

	High	Moderate	Low
<i>Pitta Vata</i>	20	4	0
<i>Pitta Kapha</i>	22	16	0
<i>Kapha Pitta</i>	8	6	0
<i>KaphaVata</i>	4	0	1
<i>Vata Pitta</i>	4	10	1
<i>VataKapha</i>	0	4	0

Statistical analysis was done with *Pradhan-Prakruti* with the help of Chi Square test.

Anger level of these hundred subjects was evaluated using the standard anger questionnaire

Total subject	100
Low anger	02

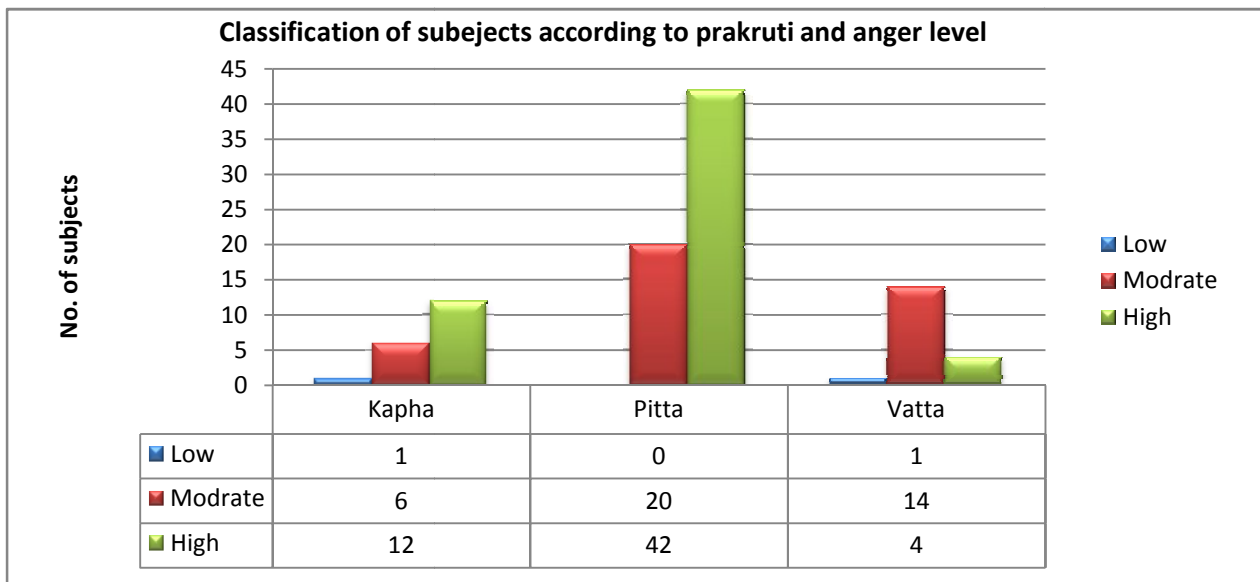
Moderate anger	40
High anger	68

x axis : PradhanPrakruti

y axis : No. Of subjects

Among the randomly chosen 100 subjects 62 were of *pitta pradhanprakruti*, 19 were of *kapha-pradhanprakruti* and 19 were of *vatapradhanprakrut*

Total subject	100
KaphaPradhanPrakruti	19
Pitta PradhanPrakruti	62
VataPradhanPrakruti	19



x axis - Prakruti

y axis – No. Of subjects

Correlation with *prakruti* using chi test, since very few values are there in low type. We compare with other two here p-value is 0.0038 which is less than 0.01 i.e. there significant correlation between *prakruti* and anger level.

RESULT

Statistical analysis indicates that anger level was high in *Pitta PradhanPrakruti* and moderate in *KaphaPradhanPrakruti* and low in *Vata PradhanPrakruti*.

DISCUSSION

Prakruti is the fundamental principle of *ayurveda*, all our natural tendencies are dependent on *prakruti* of person⁷. So it was decided to correlate between level of anger and *sharirprakruti*.

Statistical analysis and observations were done, it was found that in *pitta pradhanprakruti* there was high anger level, in *kapha-pradhanprakruti* there was moderate, as compared to that *vatapradhanprakruti* showed low anger level.

Literary also it proves that *pitta prakruti-pradhan* person level of anger was high. In our *samhitas*

Pitta prakrutilaksanaswere⁸ :

- *Klesaasahsinuta* – Intolerance to distressing conditions.
- *KsipraKopa* – Gets angry easily.
- *Usnatiksnagunavan* - Hot and sharp temperament.

Kaphaprakrutilaksanas were :

- *KlesaKsana* – Tolerant to distressing situation.
- *AlpaSantapa* – Not easily prone to krodha.
- *AsighraKsobha* – Does not get agitated easily.

VataPrakrutilaksanas were :

- *Krathi / Krodhi* – Angry
- *SeeghraSamarambhaKshobhaVikara* : Get disturbed and pleased easily.
- *Alpabala* – Less physical and mental strength.

In this present study it is proved statistically that *pitta pradhan* persons show high anger level. So literary and practically observations are same but it is not so about *kapha-pradhan* and *vatapradhanprakruti*.

CONCLUSION

After a careful practical and theoretical study following conclusions were drawn in the research. The conclusions are drawn under two headings theoretical and practical for the purpose of evaluation.

CONCLUSION FROM THE THEORETICAL STUDY

Conclusions were derived through a careful study of classical as well as contemporary literature.

- *VataPradhanprakruti* persons are easily prone to anger and returns back immediately.
- *Pitta Pradhanprakruti* persons are easily prone to anger and returns back in long time.
- *KaphaPradhanprakruti* persons are not easily prone to anger and returns back in short time.
- The *Krodha* of a person depends on his / her *prakruti* and it varies in accordance with *prakruti*.
- In the literary study of *samhitakrodha* was included in *dharneeyavegas* and it were found to be main etiological cause of diseases.
- In *Ayurveda atiyoga, heen yoga* and *mithya yoga* of a *satmendriyasamyoga, pradnya-paradha* and *parinama* were found to be the main etiological cause of anger.
- Anger pathology affects all the systems of body, it was found to be a main etiology of most of the psychosomatic illness.
- Yoga and pranayama was found to be the best remedies for anger.

CONCLUSION FROM THE EXPERIMENTAL STUDY

- The anger varies considerably in people according to *prakruti*.
- *Pitta pradhanprakruti* people showed high anger level.
- *Kaphapradhanprakruti* peoples showed moderate anger level.
- *Vatapradhanprakruti* peoples showed low anger level.

- Standard anger questionnaire was found to be an effective tool in measuring level of anger in any person.

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Source of support: Nil
Conflict of interest: None Declared