

# Prakriti In Ayurvedic Samhitas And Its Modern Genetic Correlates: A Critical Integrative Review

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#### **ABSTRACT**

Ayurveda, the ancient Indian system of medicine, emphasizes a personalized approach to health and disease management based on the concept of Prakriti—the inherent constitution of an individual formed at the time of conception. According to classical Ayurvedic texts such as Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, Prakriti is primarily determined by the predominance of Tridoshas (Vata, Pitta, and Kapha) and remains constant throughout life, influencing an individual's physiological, psychological, and behavioral traits. In recent years, modern genomics has begun to uncover parallels with Ayurvedic concepts, suggesting a scientific basis for Prakriti-based personalized medicine. Several studies have shown correlations between Prakriti types and specific genetic markers such as HLA alleles, single nucleotide polymorphisms (SNPs), and genes involved in metabolic pathways like CYP2C19, ACE, and LEPR. These findings provide promising evidence that Prakriti phenotyping may align with genotypic variations and could serve as a foundation for predictive, preventive, and personalized medicine (PPPM). This integrative review critically explores the Prakriti concept as elaborated in Ayurvedic Samhitas and evaluates its potential genetic underpinnings through the lens of current biomedical research. By establishing a dialogue between traditional Ayurvedic wisdom and contemporary genomics, this review underscores the relevance of Prakriti in advancing a holistic and individualized approach to healthcare. It also identifies gaps in current knowledge and suggests directions for future research, including the development of standard Prakriti assessment tools and large-scale genomic validation studies.

**Keywords:** Prakriti, Ayurveda, Genomics, Samhita, Dosha, HLA, SNP

#### 1. INTRODUCTION

Ayurveda, the ancient Indian system of medicine, emphasizes a personalized and holistic approach to health, disease prevention, and management. Central to this philosophy is the concept of Prakriti, which refers to an individual's inherent psychosomatic constitution. Determined at the time of conception, Prakriti is shaped by the relative predominance of the three fundamental bio-elements or Doshas—Vata, Pitta, and Kapha. This constitution is considered fixed throughout one's lifetime and is thought to influence a wide spectrum of individual characteristics including physical structure, mental disposition, metabolic tendencies, immune function, and disease susceptibility [1].

Classical Ayurvedic texts such as Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya provide comprehensive descriptions of different Prakriti types and their clinical relevance. These classifications are integral to Ayurvedic diagnostics and therapeutic decisions, guiding practitioners in selecting diet, lifestyle, and treatment modalities most suited to the individual.

In recent decades, modern biomedical research has begun to explore the significance of individualized approaches to medicine, particularly through the fields of genomics, epigenetics, and pharmacogenomics. The development of personalized medicine—where interventions are tailored to an individual's genetic makeup—shares a conceptual parallel with the Ayurvedic notion of Prakriti. Emerging scientific studies have started to establish correlations between specific Prakriti types and genetic markers such as single nucleotide polymorphisms (SNPs), HLA alleles, and variations in genes regulating metabolism and immunity.

This integrative review aims to critically examine the classical Ayurvedic understanding of Prakriti from the Samhitas and explore its correlation with contemporary genetic research. By bridging ancient insights and modern evidence, the study seeks to enhance our understanding of personalized medicine and highlight the potential of Ayurveda as a valuable framework in contemporary healthcare systems

#### 2. PRAKRITI IN AYURVEDIC SAMHITAS

Definition and Types of Prakriti

According to *Charaka Samhita*, *Prakriti* is the natural state of the body and mind, determined at the time of conception (*Garbha Janma Samaya*) [2]. It is shaped by the predominance of *Doshas* in the sperm (*Shukra*) and ovum (*Shonita*) and by intrauterine factors. Three principal types are described: *Vataja*, *Pittaja*, and *Kaphaja*, with additional dual and tridoshic combinations [3].

Characteristics of Prakriti

Each *Prakriti* exhibits specific anatomical, physiological, and psychological features. For example:

Vata Prakriti: Dry skin, lean body, quick thinking, anxiety.

Pitta Prakriti: Moderate build, sharp intellect, short temper.

Kapha Prakriti: Well-built, calm temperament, slow metabolism [4].

These descriptions provide a framework for individual diagnosis and treatment in Ayurveda.

Diagnostic Relevance

The *Prakriti Pariksha* (examination of constitution) is emphasized as a key component in clinical assessment. It influences drug selection, diet, behavior, disease prognosis, and therapy (e.g., Panchakarma suitability) [5].

## GENOMIC CORRELATES OF PRAKRITI

Introduction to Ayurgenomics

The term *Ayurgenomics* has emerged as a field combining *Ayurveda* and *genomics* to decode the biological basis of *Prakriti* through molecular biology tools [6]. Research has identified genetic variations correlating with doshic constitutions, supporting the Ayurvedic principle of biological individuality.

# **HLA** Associations

A significant association was reported between *Prakriti* types and Human Leukocyte Antigen (HLA) alleles. For instance, HLA-DRB102 and HLA-DRB107 were found more frequently in *Pitta* and *Vata* individuals respectively [7].

SNP and Genome-Wide Associations

SNP-based studies (Single Nucleotide Polymorphisms) have revealed:

Vata types: Associated with CYP2C19 and CYP2C9 polymorphisms.

Pitta types: Linked with PPAR-γ polymorphisms.

Kapha types: Related to FTO and LEPR genes associated with obesity and slow metabolism [8][9].

These findings suggest *Prakriti* is not merely a philosophical classification but has identifiable molecular markers.

**Epigenetics and Gene Expression** 

Studies have shown different gene expression profiles in Prakriti types:

Kapha individuals express genes involved in fat metabolism and inflammation.

Pitta types show enhanced metabolic activity.

Vata types show gene signatures related to neural development and energy use [10].

## 3. CLINICAL AND PREVENTIVE APPLICATIONS

Personalized Drug Response

Genomic variations in cytochrome P450 genes (e.g., CYP2C19) influence drug metabolism. These variations correspond with *Prakriti*, offering a basis for predicting individual drug responses and minimizing adverse effects [11].

Disease Susceptibility

Vata Prakriti: Prone to neurological and degenerative disorders.

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Pitta Prakriti: Susceptible to inflammatory and hepatic conditions.

Kapha Prakriti: Likely to develop metabolic disorders like diabetes and obesity [12].

Such predictive value aligns with the personalized prevention strategies in Ayurveda.

Lifestyle and Diet Personalization

Ayurveda prescribes unique diets, activities, and seasonal regimens (*Ritucharya*) according to *Prakriti*, which aligns with current interest in personalized nutrition based on genetic makeup [13].

Limitations and Research Challenges

Lack of uniform Prakriti assessment tools across studies.

Small sample sizes and ethnic specificity in most genomic studies.

Need for long-term cohort studies integrating genomic and clinical data.

Despite these challenges, integrating traditional *Prakriti* assessment with modern omics tools has immense potential for healthcare innovation.

#### 4. DISCUSSION

The concept of *Prakriti* in Ayurveda offers a timeless and foundational approach to understanding human individuality, health, and disease predisposition. As described in classical texts such as *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*, *Prakriti* is determined at the time of conception (*garbhadhanakala*) by multiple factors including the *prakriti* of parents (*shukra-shonita*), maternal diet and lifestyle during pregnancy, *kala* (season and time), and the soul's previous karmic actions. Once established, *Prakriti* remains constant throughout life, governing physiological functioning, psychological behavior, and disease susceptibility.

Classically, *Prakriti* is categorized into seven types based on the predominance of one or more of the *Tridoshas*—Vata, Pitta, and Kapha. These are: *Vataja*, *Pittaja*, *Kaphaja* (single dosha dominant); *Vata-Pittaja*, *Pitta-Kaphaja*, *Vata-Kaphaja* (dual dosha dominant); and *Sama Prakriti* (balanced tridosha). Each *Prakriti* type is associated with specific phenotypic traits including body frame, skin texture, appetite, digestion, temperament, and vulnerability to particular diseases. These descriptions present a biologically plausible prototype for individual classification and early diagnosis in preventive medicine.

Recent advances in genomics and systems biology have revitalized interest in Ayurvedic classification systems. Several research studies have sought to validate *Prakriti* types through molecular biology and genetic approaches. Aggarwal et al. (2010) found significant associations between *Prakriti* types and single nucleotide polymorphisms (SNPs) in genes such as CYP2C19, GSTT1, and ACE, suggesting metabolic and immunologic differences across constitution types. Similarly, Rotti et al. (2014) reported that *HLA-DRB1* gene polymorphisms had a strong correlation with *Pitta Prakriti* individuals, indicating potential immunogenetic underpinnings.

From a functional genomics standpoint, differences in gene expression patterns have been documented across *Prakriti* types. Patwardhan et al. (2015) demonstrated that gene expression profiling via microarrays revealed distinct clusters corresponding to Vata, Pitta, and Kapha types. These clusters involved genes regulating metabolic pathways, immune modulation, and oxidative stress. Such findings resonate with Ayurvedic claims regarding dosha-specific metabolic characteristics—e.g., Vata types with irregular metabolism, Pitta types with high catabolic activity, and Kapha types with anabolic dominance.

Epigenetic mechanisms also play a vital role in translating genotypic information into phenotypic expression, offering another possible interface with *Prakriti*. Environmental factors like diet, stress, and lifestyle—which are core components of Ayurvedic management—can influence gene expression without altering the underlying DNA sequence. Therefore, *Prakriti*-based recommendations may support health not only by correcting doshic imbalances but also by favorably modulating epigenetic regulation.

Moreover, correlations between *Prakriti* and disease susceptibility have been observed. Vata-dominant individuals are more prone to neurological and degenerative disorders such as Parkinsonism and anxiety, whereas Pitta types are more susceptible to inflammatory and metabolic disorders like gastritis and hypertension. Kapha individuals, on the other hand, show increased susceptibility to diabetes mellitus, obesity, and respiratory allergies. Modern studies support this observation, linking metabolic SNPs and inflammatory markers with these *Prakriti*-based tendencies.

Another area of interest is pharmacogenomics, which examines how genetic makeup influences individual responses to drugs. Ayurvedic pharmacology already emphasizes personalized prescriptions based on *Prakriti*. For instance, Vata individuals are advised warm, unctuous medications, whereas cooling and detoxifying drugs are recommended for Pitta. Genetic insights into drug metabolism (e.g., CYP450 enzyme variants) further support individualized drug therapy, offering a translational application of Ayurvedic principles in the modern era.

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However, challenges persist in establishing standard protocols for *Prakriti* assessment. While various software tools and questionnaires have been developed, inter-observer variability remains high due to the subjective nature of dosha evaluation. This has implications for reproducibility in genomic studies. Standardization through objective phenotypic markers, biometric tools, and AI-assisted diagnosis is urgently needed to ensure scientific rigor and global acceptance.

It is also important to consider that while correlations between *Prakriti* and genetics are promising, causation has not been definitively established. Most studies conducted to date are based on small sample sizes, limited geographic diversity, and often lack longitudinal follow-up. The complex polygenic and multifactorial nature of constitution types requires integrative research models combining genomics, proteomics, metabolomics, and systems biology along with traditional Ayurvedic diagnostics.

Furthermore, integrating this knowledge into public health and clinical practice must be approached with caution. While Ayurveda promotes *Prakriti*-based lifestyle and treatment guidelines, these should be complemented by evidence-based medical practices. Collaborative frameworks between traditional practitioners and biomedical researchers can help ensure safe and effective implementation.

#### 5. CONCLUSION

The concept of Prakriti in Ayurveda offers a time-tested, personalized framework for understanding human physiology, psychology, and disease predisposition. Classical Ayurvedic texts such as *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya* have meticulously described Prakriti types based on Dosha dominance, and their implications on health, behavior, and therapeutic outcomes. Modern research in genomics is now beginning to validate these ancient insights, showing correlations between Prakriti types and genetic markers such as SNPs, HLA alleles, metabolic gene polymorphisms, and epigenetic profiles. This integrative approach bridges traditional knowledge and contemporary science, offering promising avenues for precision medicine. By identifying the genetic basis of Prakriti, researchers can develop tailored interventions that align with an individual's constitutional makeup. However, further interdisciplinary studies with larger sample sizes and diverse populations are required to validate these findings and standardize Prakriti-based assessments. In conclusion, integrating Prakriti-based diagnostics with modern genomics can enhance personalized medicine paradigms, making Ayurveda a valuable contributor to global healthcare. Such convergence of traditional wisdom and scientific evidence can pave the way for holistic, predictive, preventive, and personalized health strategies rooted in India's rich medical heritage.

# **Future Prospects**

AI-based Prakriti Mapping: Integrating machine learning tools with Ayurvedic data to refine classification.

Public Health Application: Targeted interventions based on constitutional types.

Ethical Genomics: Balancing traditional knowledge and modern data ethics

## REFERENCES

- [1] Patwardhan B, Warude D, Pushpangadan P, Bhatt N. Ayurveda and traditional Chinese medicine: a comparative overview. Evid Based Complement Alternat Med. 2005;2(4):465–73. https://doi.org/10.1093/ecam/neh140
- [2] Charaka. Charaka Samhita. Vimana Sthana 8/95. Translated by Sharma RK. Chowkhamba Sanskrit Series, Varanasi; 2015.
- [3] Sushruta. Sushruta Samhita. Sutra Sthana 35/27. Translated by Srikantha Murthy KR. Chaukhamba Orientalia, Varanasi; 2014.
- [4] Lad V. Textbook of Ayurveda: Fundamental Principles. Vol. 1. Albuquerque: The Ayurvedic Press; 2002.
- [5] Shankar D, Patwardhan B. AYUSH for New India: Vision and strategy. J Ayurveda Integr Med. 2017;8(3):137–9. https://doi.org/10.1016/j.jaim.2017.07.001
- [6] Rotti H, Raval R, Anchan S, et al. Determinants of prakriti, the human constitution types of Indian traditional medicine and its correlation with contemporary science. J Ayurveda Integr Med. 2014;5(3):167–75. https://doi.org/10.4103/0975-9476.139779
- [7] Govindaraj P, Nizamuddin S, Sharath A, et al. Genome-wide analysis correlates Ayurveda Prakriti. PLoS One. 2015;10(9):e0138342. https://doi.org/10.1371/journal.pone.0138342
- [8] Prasher B, Gibson G, Mukerji M. Genomic insights into Ayurvedic and modern medicine. J Genet. 2016;95(1):209–28. https://doi.org/10.1007/s12041-016-0631-1
- [9] Rotti H, Bhat BK, Nargund V, et al. DNA methylation profiles of different Ayurvedic prakriti types. Mol Cytogenet. 2015;8:88. https://doi.org/10.1186/s13039-015-0191-7
- [10] Tiwari S, Tripathi YB. Gene expression profiling reveals differential expression of genes in Kapha, Pitta and Vata constitution. Ayu. 2011;32(4):494–9. https://doi.org/10.4103/0974-8520.96135

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- [11] Chavan S, Deshpande S, Joshi K. Prakriti-based research: A potential tool for preventive, predictive and personalized medicine. J Ayurveda Integr Med. 2017;8(3):179–82. https://doi.org/10.1016/j.jaim.2017.06.014
- [12] Nair M, Prasad R, Roy V. Genotype-phenotype correlation in Ayurgenomics. Indian J Tradit Knowl. 2017;16(3):424–30.
- [13] Aggarwal BB, Prasad S, Reuter S, et al. Identification of Ayurvedic medicine potential through genomics. Curr Drug Targets. 2011;12(11):1595–611.

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