

**SHARIRIK VYADHI'S (NON COMMUNICABLE DISEASES)
DUE TO EFFECT OF STRESS - A SURVEY STUDY**

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ABSTRACT :

This stress is affecting not only mental health but also the physique. which is leading to more and more diseases . Aayurveda” has solutions to every problem. It is well said that” Prevention is always better than Cure”.Researcher has been selected the 10 noncommunicable diseases to observe related to stress.The stress score had been counted and analysed.The persons having low stress score have remain healthy or less diseased but those having high stress score are more suffer.

KEY WORDS : stress, noncommunicable diseases

INTRODUCTION

Human being is the most intelligent creature of this universe. In 21st century, each and everything in the world get closer and closer i.e. the world becomes small. This is because of the highly developed technologies.

The human has done more and more use of his brain as he recognize, that it is the most powerful and unique thing in him which is able to differentiate himself from all other creatures. Along with this, his intelligence and various facilities human have done a lot of progress.

By increasing his level of thinking he tries to enhance the development & working facilities.Now he became more greedy & having vigor for achieving success. He

always put himself in the race or competition of success. It tremendously increases

the stress i.e. affect on mind & indirectly act worse on body. The stress is the byproduct of modern life. The mental stress is the worst enemy of health. It is deadlier than the deadliest disease as it affects on mind & and also responsible for tremendous increasing number of non communicable diseases.

According to Ayurveda, health is the possession of healthy mind, senses & soul. The worry, anger, jealousy, hate, ill will, grudges, vindictiveness, irritation, resentment, guilt, depression, anxiety, lack of joy & all other negative emotions & thoughts are due to stress. And these all affect on body & are an open invitation to sickness & disease.

MATERIALS –

130 volunteers are selected for the study .

Life stress test is used to rule out degree or level of stress.

For the study purpose 10 non communicable diseases viz. HT,MI,DM,CA,RHD,IBD,obesity,allergy,vit.deficiency,infertility are selected.

REVIEW OF LITERATURE –

The stress is one of the character of instable mind. Stress disturbs the 3 guna's of mind and first of all their will be the changes in manasik bhava's of person.

Some changes are seen in his nature, behavior like anger, restlessness, dismood, loss of concentration.

All these are going to affect the day to day workout of person like food intake, sleep, exercise, working process etc.

It also alters the hormonal balance which affect on body.

METHOD –

First randomly selected 130 persones for the research project.

Asking the questionnaires from life stress scale test.

Then depending upon their obtained score divide them into 4 groups.

score 15

score 16-

30 score

31-45

score

46-60.

Then take a brief history of their illness.

Those who are suffering from each above disease are counted.

Compare the number of diseases with the stress score.

Apply the statistical test.

Put the result.

Inclusion criteria –

- 1) Peoples having age group of 30-50 years.
- 2) Mentally stable.

Exclusion criteria –

- 1) Person who is taking psychiatric treatment.
- 2) Drug addict
- 3) Person having age of below 30 and above 50 years.

Statistical Analysis:-

Chi-square test of goodness of fit was used to test whether the higher stress level is one factor responsible for manifestation of non communicable disease. The null hypothesis is of the form –

H_0 : The stress level of patient is not associated with incidence of disease. i.e. the stress level is equally distributed among patients of specific disease.

H_1 : The stress level of patient is associated with incidence of disease. i.e. the stress level is not evenly distributed over patients of specific disease.

Table No 1 : Distribution of stress score

Sr. No.	Diseases	Stress Score				d.f.	Chi-square	P-value	Decision
		1-5	16-30	31-45	46-60				
1	CA	0	0	2	1	3	3.667	0.3	Reject
2	HT	3	4	7	13	3	9	0.029	Reject
3	MI	0	1	1	5	3	8.429	0.038	Reject
4	RHD	1	0	2	2	3	2.2	0.532	Reject
5	DM	2	3	6	11	3	8.909	0.031	Reject
6	OBESITY	1	1	4	8	3	9.429	0.024	Reject
7	IBD	0	2	4	3	3	3.889	0.274	Reject
8	ALLERGY	0	0	1	3	3	6	0.112	Reject
9	VIT.DEF	1	0	2	6	3	9.222	0.026	Reject
10	INFERTILITY	0	1	1	6	3	11	0.012	Reject
11	Total	8	12	30	58	3	57.63	<0.001	
12	Healthy volunteers	1	9	1	0	3	19.091	< 0.001	Reject

(Source: Primary Data)

The distribution of stress in patients of diseases CA, RHD, IBD, and Allergy was found to be insignificant at 5% level of significance with P- values of 0.3, 0.532, 0.274 and 0.112 respectively. Therefore we can say that, stress is not associated factor with diseases – CA, RHD, IBD and Allergy.

The stress in patients of diseases HT, MI, DM, Obesity, Vitamin deficiency and Infertility was found to be non-uniformly distributed with large number of patients having higher stress scores.

Out of 27 patients of HT, 3 (11%) were having stress score 1-5, 4 patients (15%) were having stress score 16-30, 7 patients (26%) were having stress score of 31-45 while 13 patients (48%) were with stress score of 46-60. This distribution of score is significant at 5% level of significance (P-value = 0.029). Therefore we can say that, stress level and incidence of HT is associated.

Out of 7 patients of MI, 1 patient (14%) was having stress score 16-30, 1 patient (14%) was having stress score of 31-45 while 5 patients (71%) were with stress score of 46-60. This distribution of score is

significant at 5% level of significance (P-value = 0.038). Therefore we can say that, stress level and incidence of MI is associated.

Out of 22 patients of DM, 2 (9%) were having stress score 15, 3 patients (14%) were having stress score 16-30, 6 patients (27%) were having stress score of 31-45 while 11 patients (50%) were with stress score of 46-60. This distribution of score is significant at 5% level of significance (P-value = 0.031). Therefore we can say that, stress level and incidence of DM is associated.

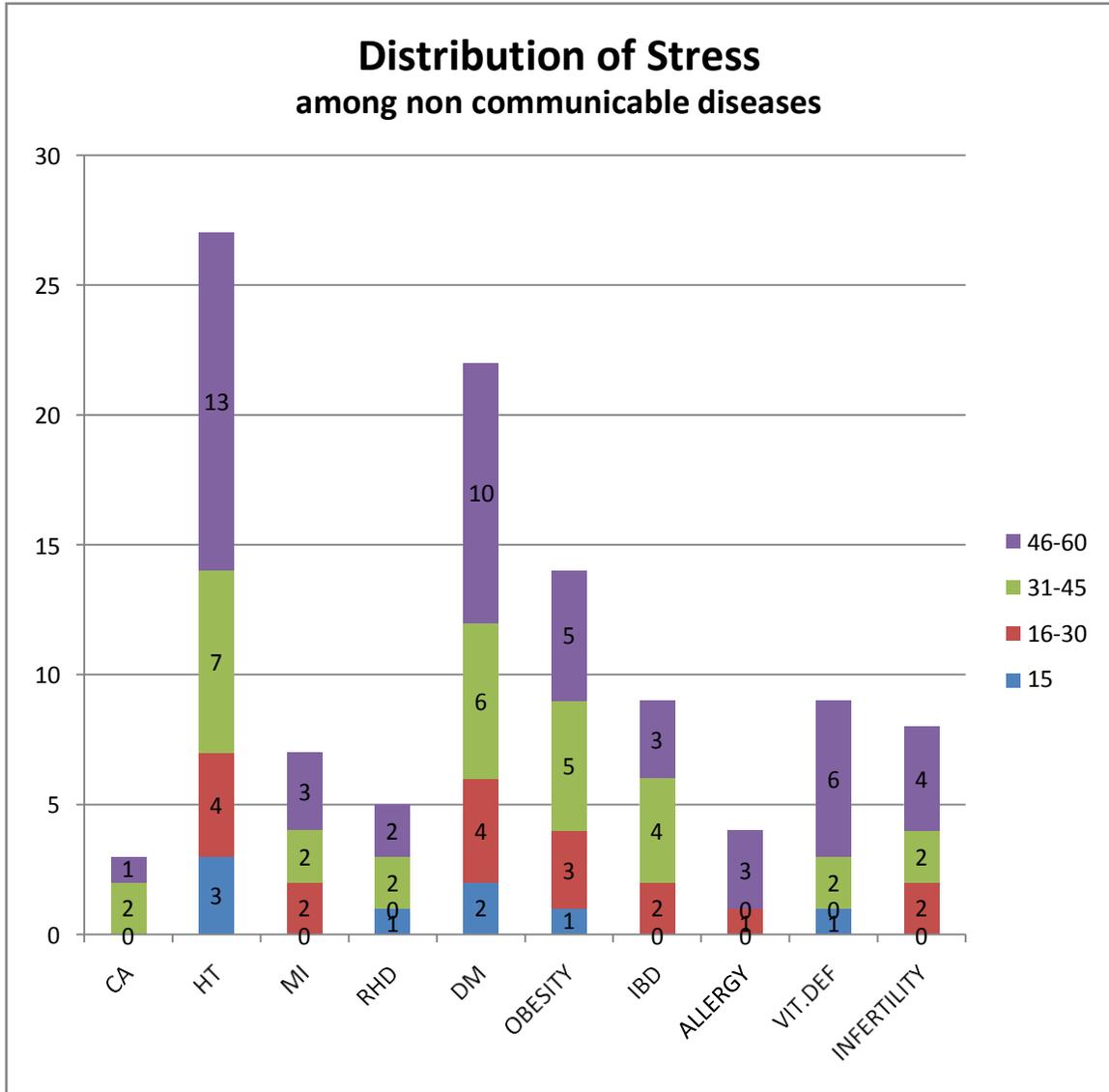
Out of 15 patients of Obesity, 1 (7%) was having stress score 15, 1 patient (7%) was having stress score 16-30, 4 patients (29%) were having stress score of 31-45 while 8 patients (57%) were with stress score of 46-60. This distribution of score is significant at 5% level of significance (P-value = 0.024). Therefore we can say that, stress level and incidence of Obesity is associated.

Out of 9 patients of Vitamin deficiency, 1 (11%) was having stress score 15, 2 patients (22%) were having stress score of 31-45 while 6 patients (67%) were with stress score of 46-60. This distribution of score is significant at 5% level of significance (P-value = 0.026). Therefore we can say that, stress level and incidence of Vitamin deficiency is associated.

Out of 16 patients of Infertility, 1 patient (13%) were having stress score 16-30, 1 patient (13%) was having stress score of 31-45 while 6 patients (75%) were with stress score of 46-60. This distribution of score is significant at 5% level of significance (P-value = 0.012).

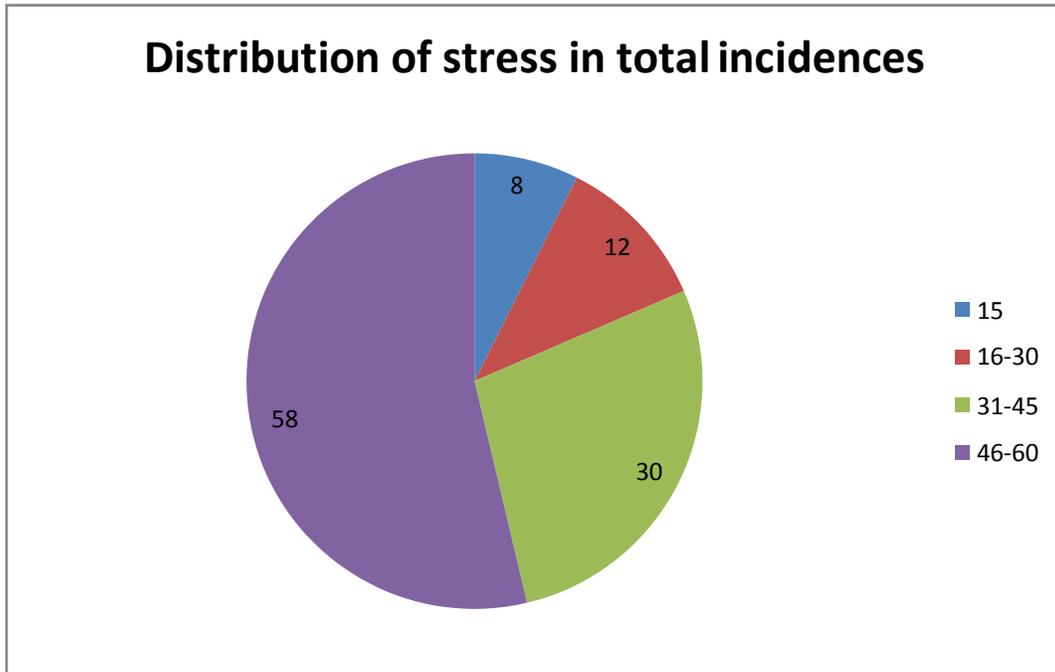
Therefore we can say that, stress level and incidence of Infertility is associated.

Graph No 1:



(Source: Primary Datra)

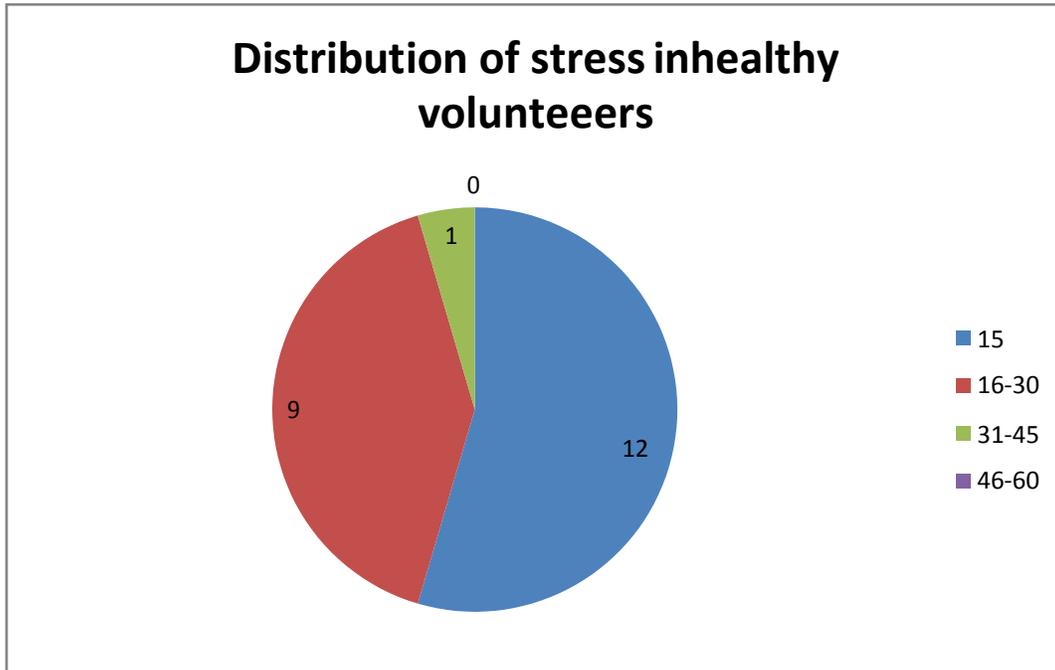
Table No 2: Distribution of stress in total incidence



(Source:Primary Data)

12 (54.55%) volunteers among them were having stress score of 15, 9 (40.91%) were having stress score 16 – 30 and only 1 volunteer (4.54%) was found with stress score 31 – 45. This distribution of score is significant at 5% level of significance (P-value < 0.001). As level of stress increases chances of suffering from non communicable disease get increases.

Table No 3: Distribution of stress in unhealthy volunteers



(Source:Primary Data)

22 volunteers were found to be totally healthy and free from any diseases mentioned above. Therefore we can say that, stress level for healthy volunteers is significantly lower.

CONCLUSION:

There were in total 108 incidence of various diseases mentioned above. Out of them 8 incidences (7%) were having stress score 15, 12 incidences (11%) were having stress score 16-30, 30 incidences (28%) were having stress score of 31-45 while 58 patients (54%) were with stress score of 46-60. This distribution of score is significant at 5% level of significance (P-value < 0.001). Therefore we can say that, stress level and incidence of non communicable diseases is associated.

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