Reliability of self-reported constitutional questionnaires in Ayurveda diagnosis

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1. Introduction

The traditional Indian medical model known as Ayurveda is one of the most ancient and widely practiced forms of medicine today, along with Traditional Chinese Medicine. As demand in the western world for traditional medicine increases, there is a growing interest in ensuring quality in training, research, and practice [1]. Treatment efficacy is the most prolific type of research in Ayurveda [1]; however there is little research examining reliability of the various diagnostic techniques upon which treatment prescription and efficacy depend. The Ayurveda diagnosis consists of determining an individual’s constitution and current imbalance(s) through the use of multimodal approaches. Ayurveda practitioners may choose to include either a self-reported or structured interview constitutional questionnaire as part of the Prakriti assessment. Currently, there is no standardized or validated self-reported constitutional questionnaire tool employed by Ayurveda physicians or western Ayurveda educational institutions. In order to ensure quality in training, research, and practice [1], reliability and validity is therefore imperative.

According to the philosophy of Ayurveda, humans have physical and behavioral differences that are classified into one or more of three metabolic forces, or doshas [2]. These doshas, known as vata, pitta, and kapha, are the vital bioenergies responsible for promoting and sustaining the health of each individual. Each dosha comprises

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of five elements: earth, air, fire, water, and space. Vata is the combination of air and space, pitta—of fire and water, and kapha—of earth and fire.

An individual’s specific Prakriti or constitution refers to the physical and behavioral qualities that remain stable throughout one’s life [3]. Ayurveda considers seven Prakriti classifications, however, there are ten possible combinations depending on relative predominance of dosha: vata, pitta, kapha, vata-pitta, pitta-vata, vata-kapha, kapha-vata, pitta-kapha, kapha-pitta, or Tridosha; the dosha listed first being the more dominant of the two for an individual who is Dvidoshic. Each Prakriti classification describes the predominant dosha(s) that is likely to overpower the others, producing a certain set of characteristic physiologic imbalances. From an Ayurvedic point of view, knowing one’s Prakriti enables a person to make educated lifestyle choices in order to minimize the effects of such inherent tendencies [4].

Vikriti on the other hand, is a term used to describe the changed condition of body, mind, and consciousness [4]. While Prakriti remains stable throughout one’s life, Vikriti is a temporary state of imbalance of the doshas, constantly changing depending on one’s lifestyle habits. It is imperative for the success of an Ayurveda treatment plan that the physician correctly diagnoses an individual’s Vikriti; but, it is very helpful for the individual and the physician to know the underlying Prakriti or constitution as well as it can inform potential future imbalances, disease susceptibility, and long-term treatment plans [5,6]. When evaluating effectiveness of an Ayurveda prescription, for example, it is important to consider Prakriti. An appropriate constitutionally based prescription can enhance therapeutic effects and minimize adverse effects.

Traditionally, there are four methods of determining or diagnosing an individual’s Prakriti: observation, physical exam, pulse diagnosis, and health history [4]. These methods used together are preferable to any used alone as individually, they may lead to bias in Prakriti diagnosis [7]. Several studies have examined reliability and validity of Prakriti diagnosis by way of various methods: pulse taking alone [1,6], interview-based or self-reporting questionnaires in combination and alone [8–10], and incorporating several of the diagnostic methods together [1,8,9]. To date, results of these studies have varied greatly, from low to moderate levels of reliability, and there is not a validated standard by which to compare one method to another.

Ayurveda practitioners may choose to include either a self-reported or structured interview constitutional questionnaire as part of the Prakriti assessment. At present, there is no standardized or validated self-reported constitutional questionnaire tool employed by Ayurveda Physicians or western Ayurveda educational institutions. Rather, there are a wide variety of questionnaires, many of which are publicly available. It is our intention to contribute to the existing literature on examination of the reliability of self-reported constitutional questionnaires by investigating three publicly available questionnaires developed by two of the most well known western Ayurveda educational institutions and by a private international Ayurveda products company.

We studied three constitutional questionnaires used at prominent western Ayurveda educational institutions and made publicly available on their websites. Two questionnaires were developed by the institutions, while the other originated with an established private international Ayurveda products company. Questionnaire 1 and 2 were a degree of agreement on a scale from 0 to 6 (0 = does not apply, 3 = applies somewhat, 6 = applies most); items were grouped into sections labeled as related to vata, pitta, or kapha dosha. Questionnaires 1 and 2 came three distinct answers to each item, corresponding to the three doshas and labeled as V, P, and K (and therefore also not disguised). None of the questionnaires assign a numerical scoring key nor is there an established guideline provided for in previous research.

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<th>Table 1 Inclusion/Exclusion criteria.</th>
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<td>Subject inclusion criteria</td>
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<tr>
<td>Adults 18+ years of age</td>
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<td>Willingness to complete the three questionnaires online at two separate time points, one month apart</td>
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<tr>
<td>Access to a computer and internet</td>
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<td>Ability to read and write in English</td>
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| Subject exclusion criteria            |
| Self-reported history or current diagnosis of cognitive impairment that would reduce his or her ability to complete the questionnaires |
| Anyone who has previously completed an Ayurveda constitutional questionnaire and can recall his or her constitutional type |
| Anyone who has previously been given an Ayurveda constitution (such as: vata, pitta, kapha, or any combination thereof) by a healthcare professional and can recall his or her constitutional type |

Participants were recruited by two methods: 1) an email sent to the local naturopathic school’s student body and 2) flyers posted on the school’s campus and throughout the greater Portland area. Eligible participants (Table 1) were administered three Ayurveda constitutional questionnaires at two separate time points, one month apart, using REDCap [17], an online survey tool. Participants were able to access the questionnaires online from any computer with Internet access. They were given exactly one week to complete the questionnaires at each time point. All participants provided informed consent.

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