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ABSTRACT: Ayurveda preventive medicine include Rasayan, Ritucharya & Dincharya Palan (follow Daily routine and seasonal routine according to ayurveda). Present study was survey a study. A total of 100 subjects were enrolled, class 6 to 8 students of Govt. Upper Primary School, Suket Kota Rajasthan. They were interviewed and examine for health issue.

Present study show the importance of includes the basic knowledge of Dincharya, Ritucharya in class 6 to 8 syllabus. Result show that the decrease frequency of suffering from diseases through the regularly follow Dincharya.

INTRODUCTION

Ayurveda's primary aim is prevention, followed by cure—a principle echoed in the adage "prevention is better than cure." Classical texts describe preventive tools such as Rasayana, Dincharya, Ritucharya, and Ahar Vidhi Visheshayatan. Dincharya provides a structured daily regimen incorporating Ayurvedic techniques, including optimal wake-up times, eating schedules (what, how, and when to eat), hair and nail care, oral hygiene, Ushapan, Pratimarsha Nasya, Anjan, and more.

OBJECTIVE

This study assessed the importance of incorporating basic knowledge of Dincharya and Ritucharya into the Class 6–8 syllabus.

MATERIALS AND METHODS

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STUDY SUBJECTS

The study was conducted at Govt. Upper Primary School, Suket Kota, Rajasthan, India. A total of 100 students (all female, aged 11–14 years; mean age 12 years) were enrolled after obtaining written informed parental consent.

Groups

Participants were divided into two groups based on their baseline knowledge of and interest in Dincharya, confirmed via interviews:

- **Group A** (n=50): Students with basic knowledge of Dincharya and Ayurvedic preventive techniques.
- **Group B** (n=50): Students without such knowledge.

STUDY DESIGN

This cross-sectional study evaluated the role of Dincharya awareness in health prevention among Class 6–8 students. Both groups underwent interviews using pre-designed, pre-tested questionnaires and checklists, plus health examinations by a qualified Ayurvedic physician. Assessments covered general health issues, including immunity (via disease frequency), physical ability (Bal Pariksha), mental ability, and height-weight ratio. Data were collected and analyzed descriptively.

RESULTS

(1) Height-Weight Ratio

Group A showed 60% normal height-weight ratio, compared to 24% in Group B.

Table 1: Height-Weight Ratio

Group	Total Students	Normal Ratio	%
A	50	30	60
B	50	12	24

(2) Immunity Level

Group A: 30% good, 50% medium, 20% low.
Group B: 18% good, 34% medium, 48% low.

Table 2: Immunity Levels

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Group	Total Students	Good	Medium	Low
A	50	15	25	10
B	50	9	17	24

(3) Mental Ability

Group A: 40% good, 50% medium, 10% low.

Group B: 18% good, 34% medium, 48% low.

Table 4: Mental Ability

Group	Total Students	Good	Medium	Low
A	50	20	25	5
B	50	6	14	30

(4) Physical Ability (Bal Pariksha)

Group A: 34% good, 36% medium, 30% low.

Group B: 22% good, 28% medium, 50% low.

Table 5: Physical Ability

Group	Total Students	Good	Medium	Low
A	50	17	18	15
B	50	11	14	25

DISCUSSION

Group A demonstrated superior height-weight ratio, immunity, mental ability, and physical ability compared to Group B. These findings underscore the benefits of Ayurvedic daily regimens (Dincharya) in children aged 11–14 years, a critical period for reproductive maturation and secondary sexual characteristics. Proper nutrition and digestion during this phase support optimal development. Future studies should involve larger, mixed-gender samples. Integrating Dincharya and Ritucharya into upper primary school syllabi could yield broader health benefits.

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