GUEST EDITORIAL



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The Ramayana: Lessons for Health

"Humble is my lot, and my ambition high; my only hope is that all good men will be gratified to hear what I say, though the evil minded may laugh."

-Ramcharitmanas, Baalkaand, Doha 8

The Ramayana, our ancient epic, is much more than history. An integral part of the ethos of India, it shares wisdom that is relevant for all of humanity. Various versions of the Ramayana are available^{1,2} and experts have used these to expound upon the lessons that we gain from this epic.^{3,4} In this opinion piece, we view the Ramayana from a health perspective, and share learnings that we have gained.

PHYSICAL WELL-BEING

Physical health is clearly visible in the pages of the Ramayana. Lord Rama and his brothers were put through comprehensive education which included games, exercise and martial arts. Lord Rama and his family were able to traverse long distances in the forest on foot. Athletic prowess of various fighters including Lakshman and Hanuman has been described.

The importance of hygiene and self-care is also highlighted in the text. There are repeated references to appropriate care of one's clothes, skin and hair in the Ramayana, including use of natural cosmetics. The description of Lord Rama, and other characters, as wellproportioned, handsome/beautiful personae, reinforces the importance of physical health.

PSYCHOSOCIAL WELL-BEING

Mental, emotional and social health care has been described in the Ramayana. Lord Rama, when faced

with the stress of exile, handles it with confidence. When challenged by separation from Sita, he goes through various phases of grief, before moving towards optimism, planning and action.

The role of social relationships - family, friends, peers and public - in maintaining health and achieving desired outcomes, is portrayed beautifully.

The need for patience (for example, when the rains prevent Sugriv's army from launching the search for Sita), and perseverance (when his army that headed south faces multiple obstacles, they do not give up) is highlighted. Compassion towards fellow creatures, even during hard times (Kaushalya and Subhadra), as well as spirituality are shown as important aspects of health in the Ramayana.

ENVIRONMENTAL WELL-BEING

Apart from the learning related to the traditional biopsychosocial construct of health, the Ramayana shares wisdom regarding the need for environmental health. Urban planning (Ayodhya, Lanka Nagri), rural architecture (ashramas) and protection of greenery (Dandaka forest) are mentioned. The symbiotic role of plants (berries, lotus), birds (Jatayu, Sampati), and animals (vanara sena, Jambavan) in our life is illustrated with clarity.

HOLISTIC HEALTH

The World Health Organization definition of health focuses not only on physical health, but emotional, mental and social well-being as well. This operational construct of health is clearly evident in the Ramayana.

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An analysis of the thoughts and action of its characters uncovers the integration of this definition of health in their daily routine and behavior.

Equal focus on body (physical well-being), mind (mental well-being) and soul (spiritual well-being) is evident in the upbringing of Lord Rama, in the behavior of his friends and family, and in the reactions of the various people he encounters during his travails. Similarly, coexistence with our environment, including flora and fauna is highlighted. The Ramayana reminds us that we have a bidirectional and symbiotic relationship with the plants, forests, animals and birds that co-habit our planet Earth. Resilience, i.e., taking life as it comes, while being prepared to manage unanticipated stresses and strains, is another lesson that we learn.⁵

HEALTHY ATTITUDE

Reading and reciting the Ramayana is just the first step towards enhanced realization. That imbibing and inculcating its wisdom needs a change in our attitude is described at various places in the holy book.

Self-confidence, as exemplified by Lord Rama, Lakshmana and Sita, is necessary for optimization of health. These heroes encountered many obstacles, and faced multiple trials and tribulations, but did not lose sight of their Karma. They maintained their confidence and composure, maintained their relationships and fulfilled their responsibilities.

Self-confidence, if not accompanied by hard work, is not enough. We note all characters of the Ramayana working hard, doing justice to their allotted roles. Whether it is Shabri who keeps her ashrama clean for Lord Rama's impending visit, or Bharata, who keeps the throne warm for his elder brother, these individuals exemplify action for the sake of action without desire for the fruit there of. This is especially true in the geriatric age group, as we see Jatayu, Sampati and Shabri add value to their years by serving the Lord. All these, and others, lived a meaningful, as well as fulfilling life.

CLINICAL VIGNETTES

The Ramayana's detailed description of some personalities serves as a teaching tool for modern students of medicine. Manthara, with her hump back, serves as an example of osteoporosis, while Kaikeyi may have had an acute episode of metabolic or infective encephalopathy.

King Dasharatha probably succumbed to Takotsubo cardiomyopathy or acute myocardial infarction, while

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Physical being

- Discipline
- · Good nutrition and physical activity
- · Hygiene and self-care

Emotional mental and social well-being

- Stress management
- Family and friends
- · Compassion and spirituality

Environmental health

- · Physical environment: urban and rural
- · Flora: plants
- · Fauna: birds and animals

Attitude

- Self-confidence
- Patience
- Perseverance

Holistic health

- · Body, mind and soul balance
- · Harmony with environment
- Take life as it comes

Bharata experienced malnutrition due to psychosocial deprivation.

The episode of Lakshmana regaining consciousness with the help of Sanjeevani booti, prescribed by Vaid Sushena, and procured by Hanuman, needs special mention. Lakshmana may have experienced hypoglycemia, hyponatremia or hypokalemic paralysis, and may have been revived by an ingredient like glucose or electrolytes. Similarly, Hanuman, when bound with the Brahmastra of Indrajeet, may have been anesthetized or sedated with a short-acting drug. The speedy recovery, and the fact that his burning tail did not hurt him, support this hypothesis.

LESSONS FOR US

What teaching does the Ramayana hold for us as health care professionals?

Emphasis on holistic health, while optimizing social and spiritual well-being in our daily life, are important aspects of not just our work, but also, we as society, and the world at large. Our focus should be on prevention of disease, disability and dysfunction. This can be achieved by promotion of health lifestyles, as described in the Ramayana. We thank Lord Rama, for helping us explore newer facets of health through the Ramayana. This is the beginning of a never-ending journey, and we enjoin all readers to join us in health, happiness and harmony.

Acknowledgments

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Glycemic Status in the Young Type 1 Diabetes Patients

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Suboptimal or inadequate glycemic control in young patients, children and adolescents, with type 1 diabetes is quite common and has been linked to an increased risk of future diabetes-related complications and mortality. Hence, it is crucial to maintain optimal blood glucose levels to minimize the potential complications. For this, regular monitoring, adherence to treatment plans and lifestyle modifications are essential.

A new study recently published in the journal *Diabetic Medicine* sought to define distinct HbA1c trajectories in 5,889 children and adolescents, aged 2 to 19 years, with type 1 diabetes; 47% of them were female.¹ Additionally, it examined the associations between these trajectories and clinical and socio-demographic factors. The goal was to understand the prevalence of inadequate glycemic control in this population and its potential impact on diabetes-related complications and mortality later in life.

The data for the study were obtained from the Danish Registry of Childhood and Adolescent Diabetes (DanDiabKids), which includes information on all Danish children and adolescents diagnosed with type 1 diabetes between 1996 and 2019. These children underwent a median of 6 HbA1c measurements per child resulting in a total of 36,504 measurements. To identify subgroups with distinct mean trajectories of HbA1c, data-driven latent class trajectory modeling was used. This approach allowed for the identification of different patterns of HbA1c levels over time in the study population.

The study identified four distinct trajectories of mean HbA1c levels: "Stable but elevated HbA1c" in 3%, "increasing HbA1c" in 5%, "late HbA1c peak" in 7% and "early HbA1c peak" in 5%.

In contrast to the "stable but elevated HbA1c" group, glycemic control was found to decline rapidly in the other three groups during late childhood or adolescence. These groups had higher HbA1c levels at the beginning of the study, fewer patients using insulin pumps, more frequent instances of inadequate blood glucose monitoring, and parents with lower educational status; hypoglycemic events were more severe. These groups also had fewer patients of Danish origin. Additionally, there were significant between-group differences based on the health care region.

This study demonstrates that although the majority of children and adolescents with type 1 diabetes show stable but elevated HbA1c trajectories on average, there are variations in the rate and severity of HbA1c level decline. It is necessary to address the causes and long-term repercussions of these heterogeneous trajectories on health.

Reference

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