

Shifting the Integrative Medicine Paradigm: Alternative Medicine-Based Constitutional Individualization Models for Developing Precision Therapeutics

Kaushik, Aditi

Department of Biotechnology, NIILM University, Kaithal, India

Abstract

Ayurveda provides a comprehensive and personalized framework for understanding human health by combining nutrition, digestion, emotional control, behavioral patterns, and preventive lifestyle practices into a cohesive systems-based approach. The concept of prakriti, or innate biological constitution, is central to this medical system. It refers to stable phenotypic patterns molded by genetic inheritance, developmental processes, and environmental exposure. This constitutional classification governs inter-individual diversity in metabolic efficiency, immunological response, neuroendocrine regulation, and disease susceptibility, giving a tailored lens for assessing health and making therapeutic decisions. This review combines traditional Ayurvedic principles such as the tridosha theory (Vata, Pitta, Kapha), the five-element doctrine (Pancha Mahabhuta), digestive and metabolic capacity (Agni), incompatible dietary combinations (Viruddha Ahara), raw food consumption, and the bidirectional psychosomatic interactions between emotional states and organ systems. Digestive homeostasis is highlighted as a key factor of metabolic transformation, nutritional assimilation, and toxin accumulation (Ama), as well as its downstream impact on inflammatory, metabolic, neurological, and degenerative disease pathways. Dosha-specific predispositions to illnesses such as insulin resistance, cardiovascular dysfunction, neurodegeneration, and chronic inflammatory states are reviewed, emphasizing the importance of constitution-based dietary modulation and lifestyle customization in disease prevention and treatment. The review delves deeper into Ayurvedic viewpoints on emotional imprinting, stress

memory, and intergenerational implications on health, drawing conceptual connections with current studies in psychoneuroimmunology, epigenetics, and trauma biology. The therapeutic value of breath regulation (pranayama) is investigated in terms of autonomic nervous system balance, neuroendocrine modulation, and stress-related illness prevention. Finally, this paper emphasizes the complementary strengths of Ayurveda and Western biomedicine, advocating for an integrative healthcare paradigm that incorporates constitution-based preventive strategies, lifestyle interventions, and mind-body regulation alongside evidence-based diagnostics and acute medical care. Overall, this review emphasizes Ayurvedic constitutional frameworks' translational promise in influencing precision treatments, treating modern lifestyle-related disorders, and promoting holistic, customized models of human health.

Keywords: Ayurveda; Prakriti (Individualized Constitution); Integrative and Alternative Medicine; Precision Therapeutics; Psychosomatic Health; Preventive Medicine

INTRODUCTION

The growing worldwide burden of chronic lifestyle-related diseases has rekindled interest in conventional medical systems that prioritize prevention, tailored care, and overall well-being. Conventional biological models, while extremely effective in acute care and disease management, frequently use a standardized approach that may fail to account for inter-individual diversity in metabolism, digestion, mental resilience, and long-term lifestyle factors. In this context, Ayurveda, a traditional system of medicine that originated in the Indian subcontinent, provides a comprehensive and personalized framework for understanding health and disease by combining biological constitution, dietary practices, digestive function, emotional balance, and environmental adaptation [1]. Ayurveda views health as a dynamic balance of functioning biological energies known as doshas; Vata, Pitta, and Kapha resulting from different quantities of the five primary elements: earth, water, fire, air, and ether (space) [2]. These aspects jointly control structural integrity, metabolic transformation, movement, and communication in the human body. Unlike reductionist models that isolate organs or biochemical pathways, Ayurvedic physiology sees the human body as an integrated system in which physical, mental, and emotional processes are

constantly influencing one another. Ayurveda's defining principle is the concept of prakriti, or individual constitutional type, which influences a person's physiological tendencies, psychological qualities, digestive capacity, and susceptibility to disease [3]. This notion opposes uniform dietary and lifestyle guidelines by claiming that nutritional needs and tolerances differ greatly between individuals. Foods, beverages, and stimulants that benefit one constitution may exacerbate imbalance in another, emphasizing the significance of customized diet and lifestyle treatments.

Ayurvedic health philosophy revolves around the concept of digestive fire (Agni), which governs food digestion, assimilation, and transformation into bodily tissues [4]. Balanced digestive function is seen as the foundation of vitality, whereas defective or overactive digestive fire is thought to cause metabolic malfunction and toxic accumulation. Ayurveda expands on this physiological framework by emphasizing dietary compatibility (Viruddha Ahara), modest raw food consumption, and constitution-specific dietary regulation as critical techniques for preserving metabolic equilibrium [5]. Beyond physical digestion, Ayurveda emphasizes a profound psychosomatic dimension of health, arguing that unresolved emotional moods lead to organ dysfunction and chronic disease. Emotional control, mindful breathing practices (pranayama), and inner awareness techniques are thus essential components of both preventive and therapeutic treatment [6]. Ayurveda also recognizes the possibility of emotional imprints being passed down through generations, emphasizing the importance of lifestyle and mental practices in breaking disease-predisposition cycles [7].

With the increased interest in integrative medicine, there is a greater need to critically investigate and convey Ayurvedic beliefs within a scientific framework. This review seeks to summarize fundamental Ayurvedic principles about customized nutrition, digestion, emotional health, and illness prevention, while positioning them within the larger discourse of contemporary healthcare. By illuminating these historic perspectives, the review aims to contribute to a more comprehensive knowledge of health that supports modern biological techniques and addresses the complexity of chronic disease management in the present times.

METHODOLOGY

A qualitative, narrative methodology grounded in classical Ayurvedic literature analysis and contemporary interpretative synthesis was adopted. The primary objective of the methodology is to systematically organize and critically contextualize traditional Ayurvedic concepts related to nutrition, digestion, constitutional typology, emotional physiology, and preventive health, without experimental intervention or statistical modeling. Classical Ayurvedic sources, including foundational texts such as the Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, were conceptually referenced to ensure doctrinal consistency of key constructs including prakriti, dosha theory, agni, viruddha ahara, and psychosomatic organ-emotion associations [8, 9, 10]. These principles were examined through thematic extraction rather than direct textual exegesis, allowing for coherent integration across physiological, nutritional, and psychological domains. A structured thematic analysis approach was used to divide the content into core domains: constitutional assessment, digestive physiology, dietary modulation, incompatible food combinations, raw food consumption, emotional-organ relationships, breath regulation, and integrative healthcare perspectives. A representative illustration of the Integrative Framework is depicted in figure 1. Each topic was examined chronologically and thematically in order to maintain internal logical continuity and avoid selective omission of traditional perspectives. Secondary literature, including peer-reviewed reviews, integrative health publications, and contemporary Ayurvedic lifestyle frameworks, was explored to ensure interpretive clarity and modern contextual relevance. However, this review does not seek to validate Ayurvedic notions using biological measures; rather, it presents them as traditional health paradigms with possible applications in preventive and lifestyle medicine.

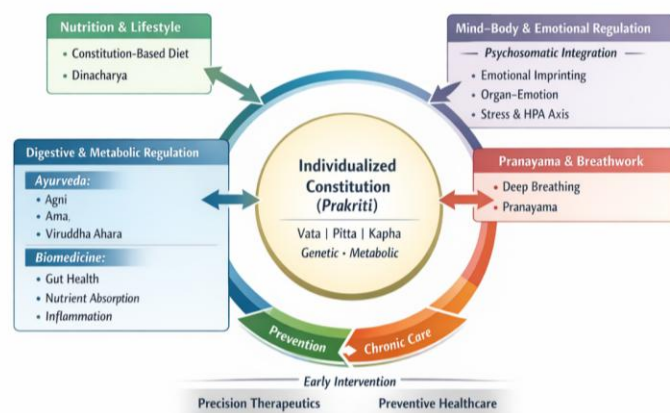


Figure 1: Integrative Health Framework Model. Traditional Ayurvedic ideas, based on the concept of Individualized Constitution (Prakriti), serve as a bridge to current biomedicine. It holds that all health interventions must be adapted to an individual's specific genetic and metabolic composition, which is divided into the Vata, Pitta, and Kapha doshas. The framework is built on four interactive pillars: Digestive & Metabolic Regulation, Nutrition & Lifestyle, Mind-Body & Emotional Regulation, and Pranayama & Breathwork. The concept describes a continuum of treatment, from preventive to chronic management, with the goal of transitioning healthcare to a more proactive, precision-based approach.

LITERATURE REVIEW

The cornerstone of shifting toward a precision medicine paradigm lies in the Ayurvedic concept of Prakriti (constitutional typology). Recent critical reviews, such as Venkatesh et al. (2025), emphasize the need for scientifically valid assessment tools to standardize these ancient categories within a modern clinical context. This individualization is further supported by the diagnostic correlations explored by Perera and Jayasuriya (2025), who link traditional *nadi pariksha* (pulse diagnosis) with specific genotypic variations. By establishing that these traditional phenotypes have a measurable biological basis, these studies provide the necessary justification for using constitutional models as a precursor to personalized therapeutic interventions. The bridge between ancient typology and modern precision therapeutics is best represented by the burgeoning field of Ayurgenomics. As detailed by Sood (2024), this conceptual framework allows for the mapping of genomic data onto Ayurvedic constitutional profiles, offering a roadmap for "precision" in a way that standard Western protocols often miss. Furthermore, the work of Mills et al. (2019) provides empirical evidence for this shift, demonstrating significant relationships between Ayurvedic diagnostic imbalances and Western measures of psychological states. This intersection suggests that integrative medicine must look beyond the physical symptoms to the underlying constitutional "blueprint" to effectively treat complex, multi-systemic disorders. A critical mechanism for individualizing therapy is the regulation of Agni (digestive fire), which functions as the Ayurvedic equivalent of metabolic health. Dixit (2025) and Singaria and Sharma (2025) provide a comparative lens, mapping the stages of *Avasthapaka* (digestion) onto modern physiological

processes. This ancient focus on digestion aligns remarkably well with contemporary research on the gut microbiome, such as the pathogenesis of dysbiosis explored by Shen et al. (2025). By integrating these perspectives, your paper can argue that precision therapeutics should prioritize gut-centric individualization using Ayurvedic dietary principles (like avoiding *Viruddha Ahara*, discussed by Sabnis, 2012) to modulate the microbiome in a constitution-specific manner. The ultimate goal of this research is the development of a new conceptual framework that integrates these individualized models into the broader public health domain. Sharma, Satyal, and Kamakshi (2025) propose exactly such a framework, moving away from reactive "one-size-fits-all" treatments toward proactive, preventive care rooted in Ayurvedic principles. This shift is supported by Jhade et al. (2025), who highlight innovations in Ayurvedic nutrition as a tool for holistic healing. Together, these sources argue that the future of precision medicine lies not just in high-tech genomics, but in the sophisticated, time-tested individualization models of traditional systems, modernized for the 21st century.

RESULTS

Classical Ayurvedic ideas were combined to form a coherent framework with various conceptual and practical implications for preventive health, lifestyle medicine, and integrative treatment. The fundamental goal is the systematic articulation of a customized health evaluation based on prakriti, highlighting that food tolerance, metabolic capacity, emotional resilience, and illness susceptibility are all constitution dependent. This emphasizes the importance of personalized nutrition and lifestyle changes over generic health guidelines. A second important conclusion is the identification of digestive fire (Agni) as a major driver of metabolic health. The review emphasizes how normal digestive function promotes appropriate tissue nourishment, whereas deficient or excessive digestive fire leads to metabolic inefficiency, toxin accumulation, inflammatory processes, and chronic disease progression. These findings highlight digestion as a fundamental treatment target in lifestyle-related disorders. The analysis also identifies constitution-specific illness predispositions as a key consequence of Ayurvedic evaluation. Pitta dominance is related with inflammatory and hepatometabolic illnesses, Kapha dominance with lipid and endocrine dysfunction, and Vata dominance with neurological, musculoskeletal, and degenerative disorders

[11]. These relationships offer a classic risk-stratification model that could help inform early preventive actions. Another noteworthy effect is the systematic presentation of dietary modulation tactics, such as the therapeutic use of cooling, warming, and astringent foods, as well as hydration and eating timing [12]. The identification of unsuitable food pairings (Viruddha Ahara) as contributors to digestive dysfunction and gut-related illness is a significant finding, especially in light of modern dietary patterns and rising gastrointestinal disorders [13]. The need of moderate raw food consumption, emphasizing the balance between enzymatic preservation and digestive efficiency is also discussed. By identifying foods that are undesirable for raw eating and those that are traditionally regarded helpful when uncooked, the review provides outcome-based nutritional advice based on digestive ability rather than dietary ideology. Another aspect of this synthesis is the incorporation of emotional physiology into disease knowledge. The review articulates organ-specific emotional linkages while also recognizing unresolved emotional patterns and intergenerational trauma as contributors to chronic illness [14]. This finding broadens the scope of preventive medicine beyond physical parameters to encompass emotional and behavioral aspects. Finally, Breath regulation (pranayama) and inward awareness practices as essential lifestyle outcomes, with implications for autonomic regulation, stress resilience, and longevity are also identified. The integrative perspective given views Ayurveda and Western medicine as complementary systems, resulting in a comprehensive, preventive health model capable of tackling the multifaceted nature of current chronic diseases [15].

Digestive fire (Agni) plays an important function in Ayurvedic health theory. Jatharagni is largely found in the gastrointestinal tract and governs food digestion and assimilation [16]. Agni, when properly operating, converts consumed food into plasma, blood, muscle, bone, and reproductive tissues, hence maintaining physiological life. Excessive digestive fire is linked to inflammatory diseases like acidity, ulcers, and tissue irritation, whereas low fire causes incomplete digestion, tiredness, bloating, and the buildup of metabolic wastes [17]. Maintaining a regulated digestive fire is consequently viewed as essential for illness prevention. Ayurveda defines people based on prevalent doshic tendencies. Pitta-dominant people have a fire-based personality, which manifests psychologically as ambition, competition, and leadership tendencies, emotionally as resilience accompanied by irritability, and physiologically as a tendency to inflammatory and metabolic

illnesses. Common symptoms include acid reflux, liver sensitivity, visual problems, skin issues, hair loss, and premature graying. Kapha-dominant people, who are earth and water dominating, have robust skeletal structures and stable physiology, but they are prone to obesity, diabetes, dyslipidemia, hypertension, thyroid diseases, fibroids, tumors, and polycystic ovaries. Individuals with Vata dominance, which is ruled by air and ether, are prone to neurological sensitivity, anxiety, dry skin, digestive irregularities, musculoskeletal deterioration, and fluctuating body weight [15]. Traditional pulse diagnosis was used to determine constitutional type, but in current practice, systematic questionnaires examining digestion, sleep, bowel movements, hair and skin features, and mental tendencies have been added [18]. Understanding one's constitutional type is analogous to knowing a vehicle's characteristics, allowing for suitable dietary and lifestyle choices to avoid dysfunction.

Dietary modification remains a key treatment method in Ayurveda. Individuals with high digestive fire should consume cooling and astringent meals to regain balance. Water-rich foods include sweet grapes, melons, cucumbers, zucchini, sabja (sweet basil) seeds, leafy greens, bitter herbs, and medicinal plants like neem, moringa, and fenugreek. Astringent grains and millets are traditionally used to reduce water retention and promote metabolic balance. Individuals with heightened fire should avoid sour, salty, and highly spicy foods since they worsen inflammatory tendencies [16]. Notably, Ayurveda notes that people frequently crave meals that only exacerbate their main imbalance. Hydration methods are also unique, with traditional recommendations such as adding soaked sabja seeds to drinking water to cool and relax the gastrointestinal tract. Disease propensity is further classified based on doshic dominance, with Kapha associated with lipid and metabolic illnesses, Pitta with inflammatory conditions, and Vata with neurological and degenerative diseases [19]. Incompatible food pairings (Viruddha Ahara) are an important topic in Ayurvedic nutrition. According to classical sources, certain combinations disrupt digestion and metabolic balance, converting potentially beneficial foods into harmful compounds [5]. One frequently mentioned example is the combination of milk and acidic fruits, which is thought to hinder digestion and contribute to gut inflammation, skin diseases, and metabolic waste accumulation when ingested in excess. Notable exceptions include ripe mango and avocado with milk, which are regarded suitable due to their similar post-digestive effects. Milk with ghee is

beneficial for bowel management, milk with warming spices improves digestion, and fruits with nuts moderates' glycemic response [20].

Ayurveda also takes a cautious approach to raw food eating. While certain fresh herbs can be ingested raw, severe raw food diets are discouraged because heating decreases digestive strain and saves metabolic energy for higher cerebral activities [21]. Grains, legumes, spinach, kale, and dry fruits are usually advised against raw ingestion, the latter of which must be soaked before consumption. Coriander and parsley, on the other hand, are widely taken raw as chutneys and have long been thought to aid in cleansing. Beyond nutrition, Ayurveda highlights the close relationship between emotional states and organ function. Chronic anger and frustration are linked to liver malfunction, grief to cardiac health, sadness to pulmonary illnesses, fear to renal imbalance, and guilt or humiliation to pancreatic dysfunction, all of which are frequently seen in metabolic diseases like diabetes [22]. These findings support Ayurveda's psychosomatic paradigm of disease, in which unresolved emotional patterns contribute to physiological pathology [23].

DISCUSSION

The conceptual framework offered in this review, based on traditional Ayurvedic ideas addressed in the source material, discovers exciting parallels and points of interaction with new scientific research, particularly in the realms of tailored nutrition and the gut-brain axis. The Ayurvedic paradigm is based on the premise that an individual's constitution (prakriti) influences dietary demands and metabolic reactions, which is deeply anchored in classical texts and validated by modern research into customized dietetics. Ayurvedic researchers highlight that prakriti-based meals assist preserve doshic balance and avoid disease, similar to the current concept of tailored nutrition and precision medicine. Ayurgenomics research reveals those biological variations in constitution correlate with genetic and physiological variances, paving the way for the incorporation of genomic markers and conventional constitutional types into health prediction and prevention models [24]. In classical Ayurveda, digestive fire (Agni) is essential for metabolic health. Imbalances in Agni, whether excessive or inadequate, are thought to cause systemic dysfunctions, which aligns with present understandings of gut function in illness etiology and metabolic control. Contemporary review research emphasizes the need of a balanced diet aligned

with traditional Ayurvedic classifications such as Pathya-Apathya (wholesome vs unwholesome foods) in managing metabolic illnesses such as diabetes, obesity, and cardiovascular disease. Whole grains and millets, which have historically been advised in Ayurveda, are now known for their low glycemic index and high fiber content, which promote metabolic health and lower illness risk [25].

One of the most apparent similarities between Ayurveda and current studies is the gut-brain axis. Traditional assertions relating emotional moods to organ function are based on an intuitive understanding that psychological stress affects physical health, notably digestion and metabolic processes. This is consistent with considerable biological studies demonstrating that the gut microbiome communicates bidirectionally with the central nervous system via neuronal, immunological, and endocrine pathways known as the microbiota-gut-brain axis. Dysbiosis and stress-induced changes in gut microbiota are linked to increased intestinal permeability, dysregulated hypothalamic-pituitary-adrenal (HPA) axis activity, elevated cortisol levels, and systemic inflammation, all of which contribute to mood disorders and cognitive symptoms like anxiety and depression [26]. Notably, gut microbes generate and influence critical neurotransmitters such as serotonin and dopamine, which play proven roles in mood regulation. According to research, the gut produces nearly 90% of the body's serotonin, underscoring the importance of intestinal health to emotional well-being. Individuals with depressive illnesses have altered gut microbial populations, and psychiatric manifestations are linked to systems including the vagus nerve, immunological signaling, and microbial metabolites [27]. These scientific findings provide empirical support for Ayurvedic claims that emotional states like anger, sadness, fear, guilt, and shame affect organ systems and lead to disease. While traditional models credit such effects to dosha and elemental imbalances, current research explains similar phenomena using neuroimmune pathways, microbiome dynamics, and stress physiology. This confluence implies that food, stress management, and gut health are essential for both physical and emotional well-being.

The review also looks at dietary combinations and gastrointestinal compatibility. Classical Ayurveda defines incompatible meal combinations (Viruddha Ahara) as those that hinder digestion

and accumulate toxins. Modern nutrition science acknowledges that poorly matched foods and imbalanced diets can change gut flora and cause chronic inflammation, which is a risk factor for a variety of metabolic and neuropsychiatric disorders. While the biomedical literature does not directly validate Ayurvedic incompatibility rules, the underlying concern; that diet composition and timing influence digestive efficiency and systemic inflammation is an active area of research, supported by clinical studies linking diet quality to gut microbial diversity and health outcomes [28]. Furthermore, contemporary stress physiology research shows parallels to Ayurvedic lifestyle characteristics such as conscious breathing (pranayama), meditation, and stress management. Chronic psychological stress has been linked to altered gut motility, impaired mucosal barriers, and exacerbated inflammatory cascades, all of which have an impact on metabolic and mental health. Structured breathing practices have been linked to decreased stress reactions, enhanced autonomic balance, and lower cortisol levels in clinical investigations, while thorough randomized controlled trials are still being developed.

Despite these similarities, it is vital to note that Ayurvedic principles are primarily conceptual and intended for holistic interpretation, whereas current research is based on factual, mechanical evidence. Current Ayurvedic investigations, especially those relating prakriti to genotype and metabolic phenotypes, are preliminary and require larger, more methodologically rigorous replications for validity. Nonetheless, the overlap between traditional claims and evidence from gut-brain axis research, personalized nutrition literature, and lifestyle medicine points to a promising future for integrative treatments. Future interdisciplinary research, combining Ayurvedic diagnostics with genomics, microbiome analysis, and neurophysiological measurements, could shed more light on the molecular basis for these ancient insights and their relevance to modern health concerns.

CONCLUSION

This review combines historical Ayurvedic knowledge, concepts and convergent themes from contemporary biological research to give a comprehensive picture of health as an individualized, integrated, and preventive process. The Ayurvedic worldview is based on the notion that human physiology, digestion, emotional control, and illness susceptibility are constitution-specific, with

doshas, elemental forces, and digestive fire (Agni) interacting dynamically. The insights support this viewpoint by underlining how incorrect dietary choices, incompatible food pairings, emotional suppression, and imbalanced lifestyles can transform nutrients into illness, notably by affecting digestion and gut health. The importance of the gastrointestinal system is a common concept in both traditional discourse and current research. Ayurveda's portrayal of the gut as a fundamental regulator of physical and emotional well-being is consistent with recent findings on the gut-brain axis, microbiome-mediated neurotransmitter synthesis, and stress physiology. The discussion of anxiety manifesting in the abdomen, emotional states influencing digestion, and chronic anger contributing to liver malfunction resonates with current findings relating psychological stress, cortisol dysregulation, inflammation, and metabolic disease. While Ayurveda explains these events in terms of elemental and doshic imbalances, biomedicine identifies comparable mechanisms via neuroendocrine, immunological, and microbial pathways. Dietary principles discussed such as constitution-based food selection, avoidance of incompatible food combinations (Viruddha Ahara), moderated raw food consumption, and the therapeutic use of cooling, astringent, or warming foods, emphasize the importance of digestive compatibility over dietary absolutism. These ideas challenge one-size-fits-all nutritional approaches and contribute to the increased scientific emphasis on customized nutrition, metabolic individuality, and lifestyle-based disease prevention. Similarly, the emphasis on breath regulation (pranayama), deep breathing, and inward awareness techniques reflects a growing understanding of autonomic regulation and stress resilience supported by clinical and neurophysiological studies. Importantly, this synthesis emphasizes that Ayurveda and allopathic (Western) medicine do not have to be in competition. This review, views Ayurveda as particularly effective in the prevention, early intervention, lifestyle modification, and management of chronic, noncommunicable diseases, while acknowledging the critical role of allopathy in acute care, emergencies, infectious diseases, trauma, and advanced diagnostics. When these approaches are linked, they provide a continuum of treatment in which preventative wisdom, individualized lifestyle advice, and mental health techniques supplement evidence-based pharmaceutical and surgical procedures. In an era marked by rising chronic disease burden, mental health challenges, and lifestyle-related disorders, an integrative model that draws from both traditional knowledge systems and modern biomedical science is increasingly relevant. Such collaboration allows for a more complete understanding of

health one that addresses not only symptoms and organs but also digestion, behavior, emotions, and long-term resilience. This research supports the view that thoughtful integration of Ayurveda and allopathy can contribute meaningfully to holistic, patient-centered healthcare and guide future interdisciplinary research aimed at improving global health outcomes.

REFERENCES

1. Jaiswal, Y. S., & Williams, L. L. (2016). A glimpse of Ayurveda - The forgotten history and principles of Indian traditional medicine. *Journal of traditional and complementary medicine*, 7(1), 50-53. <https://doi.org/10.1016/j.jtcme.2016.02.002>
2. Jhade, S. K., Verma, P., Pathak, P. K., Kalidoss, K., Tripathi, M. K., & Shrivastava, R. (2025). Ayurvedic biology for holistic healing. In A. Kumar, M. K. Tripathi, N. V. Maheshwari, & S. Kumar (Eds.), *Innovations in Ayurvedic nutrition* (pp. xx-xx). Springer. https://doi.org/10.1007/978-981-95-1213-3_11
3. Venkatesh, A., Johansson, L., Sivanandan, P. V., Gopakumar, S. P., Sankaranarayanan, K., Kessler, C. S., Ravani, S., & Puthiyedath, R. (2025). Prakriti (constitutional typology) in Ayurveda: a critical review of Prakriti assessment tools and their scientific validity. *Frontiers in Medicine*, 12. <https://doi.org/10.3389/fmed.2025.1656249>
4. Singaria, S., & Sharma, A. K. (2025). Avasthapaka: Modern and Ayurvedic concept of digestion. *International Journal of Health Sciences and Research*, 15(10), 96-104. <https://doi.org/10.52403/ijhsr.20251011>
5. Sabnis M. (2012). Viruddha Ahara: A critical view. *Ayu*, 33(3), 332-336. <https://doi.org/10.4103/0974-8520.108817>
6. Bentley, T. G. K., D'Andrea-Penna, G., Rakic, M., Arce, N., LaFaille, M., Berman, R., Cooley, K., & Sprimont, P. (2023). Breathing Practices for Stress and Anxiety Reduction: Conceptual Framework of Implementation Guidelines Based on a Systematic Review of the Published Literature. *Brain sciences*, 13(12), 1612. <https://doi.org/10.3390/brainsci13121612>

7. Soni, S. K., & Sharma, S. (2024). Ayurvedic insights for psychological wellness. *International Journal of Multidisciplinary Research and Growth Evaluation*, 5(5), 132-134. <https://doi.org/10.54660/IJMRGE.2024.5.5.132-134>
8. Baragi, U. C., & Ganer, J. M. (2025). Charaka Samhita: The timeless gem of Ayurveda [Editorial]. *Journal of Ayurveda and Integrated Medical Sciences*, 10(5), 1-3. <https://doi.org/10.21760/jaims.10.5.1>
9. Qureshi, U. A., & Gosain, A. K. (2024). Sushruta: The Father of Indian Surgical History. *Plastic and reconstructive surgery. Global open*, 12(11), e6309. <https://doi.org/10.1097/GOX.0000000000006309>
10. Gore, V., Bhatkar, A., Nimbalkar, M., Bagde, A., & Fulkar, S. (2023). A bird eyeview on Ashtanga Hridaya. *World Journal of Pharmacy and Pharmaceutical Sciences*, 12(8), 784-792. <https://doi.org/10.20959/wjpps20238-25516>
11. Moharana, P., & Roushan, R. (2019). A critical review of Pachaka Pitta in modern physiological perspective. *International Journal of Research in Ayurveda and Pharmacy*, 10(1), 18-20. <https://doi.org/10.7897/2277-4343.10015>
12. Wu, Q., Gao, Z. J., Yu, X., & et al. (2022). Dietary regulation in health and disease. *Signal Transduction and Targeted Therapy*, 7(1), 252. <https://doi.org/10.1038/s41392-022-01104-w>
13. Balikai, V. (2024). Conceptual study of Viruddha Ahara in Ayurveda along with modern perspective. *Journal of Ayurveda and Integrated Medical Sciences*, 9(12), 168–174. <https://doi.org/10.21760/jaims.9.12.27>
14. Kearney, B. E., & Lanius, R. A. (2022). The brain-body disconnect: A somatic sensory basis for trauma-related disorders. *Frontiers in neuroscience*, 16, 1015749. <https://doi.org/10.3389/fnins.2022.1015749>
15. Sharma, R., Satyal, S., & Kamakshi. (2025). Integrating preventive principles of Ayurveda into modern public health domains: A narrative review and proposed conceptual framework. *International Journal of Applied Ayurved Research*, 7(5), 223-236. <https://doi.org/10.70057/ijaar.2025.70505>

16. Dixit, A. (2025). A conceptual study on the role of Jatharāgni in human digestion: An Ayurvedic perspective. *Journal of Swasthavritta and Yoga*, 2(1), 38-41. <https://doi.org/10.33545/30787157.2025.v2.i1.A.11>
17. Chavda, V. P., Feehan, J., & Apostolopoulos, V. (2024). Inflammation: The Cause of All Diseases. *Cells*, 13(22), 1906. <https://doi.org/10.3390/cells13221906>
18. Perera, A., & Jayasuriya, M. (2025). Prakriti (constitution)-based personalized medicine: A critical review of diagnostic correlations between nadi pariksha (pulse diagnosis) and genotypic variations. *Journal of Ayurvedic Maulik Siddhant*, 2 (2), 38-44. <https://www.doi.org/10.33545/siddhant.2025.v2.i2.A.25>
19. Mills, P. J., Peterson, C. T., Wilson, K. L., Pung, M. A., Patel, S., Weiss, L., Kshirsagar, S. G., Tanzi, R. E., & Chopra, D. (2019). Relationships among classifications of ayurvedic medicine diagnostics for imbalances and western measures of psychological states: An exploratory study. *Journal of Ayurveda and integrative medicine*, 10(3), 198-202. <https://doi.org/10.1016/j.jaim.2018.02.001>
20. Desai, N., Vaghamshi, N., Antaliya, K., Vansia, A., Tapaniya, A., Ghelani, A., Chaudhari, R., Patel, R., Dudhagara, P., & Shyu, D. J. H. (2026). Preliminary Assessment of Cow-Derived Fermented Product (CDFP) Effects on the Human Gut Microbiome: A Single-Subject Case Study. *Microbiology Research*, 17(1), 25. <https://doi.org/10.3390/microbiolres17010025>
21. Calcagno, M., Kahleova, H., Alwarith, J., Burgess, N. N., Flores, R. A., Busta, M. L., & Barnard, N. D. (2019). The Thermic Effect of Food: A Review. *Journal of the American College of Nutrition*, 38(6), 547-551. <https://doi.org/10.1080/07315724.2018.1552544>
22. Gangopadhyay, A., Ibrahim, R., Theberge, K., May, M., & Houseknecht, K. L. (2022). Non-alcoholic fatty liver disease (NAFLD) and mental illness: Mechanisms linking mood, metabolism and medicines. *Frontiers in neuroscience*, 16, 1042442. <https://doi.org/10.3389/fnins.2022.1042442>
23. Behere, P. B., Das, A., Yadav, R., & Behere, A. P. (2013). Ayurvedic concepts related to psychotherapy. *Indian journal of psychiatry*, 55(Suppl 2), S310-S314. <https://doi.org/10.4103/0019-5545.105556>

24. Sood, S. (2024). Ayurgenomics - A conceptual study. *Journal of Ayurveda and Integrated Medical Sciences*, 9(12), 118-123. <https://doi.org/10.21760/jaims.9.12.18>
25. Jacob, J., Krishnan, V., Antony, C., Bhavyasri, M., Aruna, C., Mishra, K., Nepolean, T., Satyavathi, C. T., & Visarada, K. B. R. S. (2024). The nutrition and therapeutic potential of millets: an updated narrative review. *Frontiers in nutrition*, 11, 1346869. <https://doi.org/10.3389/fnut.2024.1346869>
26. Shen, Y., Fan, N., Ma, S. X., Cheng, X., Yang, X., & Wang, G. (2025). Gut Microbiota Dysbiosis: Pathogenesis, Diseases, Prevention, and Therapy. *MedComm*, 6(5), e70168. <https://doi.org/10.1002/mco2.70168>
27. Bibolar, A. C., Nechita, V. I., Lung, F. C., Crecan-Suciu, B. D., & Păunescu, R. L. (2025). Gut Feelings: Linking Dysbiosis to Depression-A Narrative Literature Review. *Medicina*, 61(8), 1360. <https://doi.org/10.3390/medicina61081360>
28. Bajaj, P., Sharma, M. Chrononutrition and Gut Health: Exploring the Relationship Between Meal Timing and the Gut Microbiome. *Curr Nutr Rep* 14, 79 (2025). <https://doi.org/10.1007/s13668-025-00670-z>

Received: Feb 02, 2026

Accepted: Mar 05, 2026

Published: Apr 01, 2026

Shifting the Integrative Medicine Paradigm: Alternative Medicine-Based Constitutional Individualization Models for Developing Precision Therapeutics, authored by Aditi Kaushik, is licensed under a Creative Commons Attribution 4.0 International License (CC BY-NC-ND 4.0) Published by ICERT