

"Preventive potential of dinacharya and ritucharya in lifestyle disorders: bridging ayurveda and modern preventive medicine"

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1. **ABSTRACT:**

Lifestyle disorders represent a growing global health challenge, largely resulting from disturbances in daily routines, seasonal maladaptation, physical inactivity, inappropriate dietary habits, and persistent psychosocial stress. Modern preventive medicine increasingly recognizes the importance of sustainable, non-invasive strategies that reduce disease risk while limiting unnecessary medical interventions. *Ayurveda*, the traditional system of medicine of India, offers a structured preventive framework through *Dinacharya* (daily regimen) and *Ritucharya* (seasonal regimen), which emphasize harmony between human behavior, biological rhythms, and environmental changes. These regimens aim to preserve metabolic balance, optimize digestive and neuroendocrine function, and enhance the body's adaptive capacity across daily and seasonal cycles. *Dinacharya* focuses on regularity in sleep-wake patterns, physical activity, dietary timing, and personal habits, whereas *Ritucharya* addresses seasonal variations through appropriate dietary choices, lifestyle modifications, and periodic cleansing practices. Contemporary scientific evidence increasingly supports the relevance of such rhythm-based interventions in improving metabolic regulation, reducing chronic low-grade inflammation, stabilizing hormonal responses, and promoting behavioral consistency—factors central to the prevention of lifestyle-related disorders including obesity, metabolic diseases, cardiovascular conditions, and stress-associated illnesses. This review examines the preventive potential of *Dinacharya* and *Ritucharya* by integrating classical *Ayurvedic* concepts with modern perspectives in preventive and lifestyle medicine. The analysis highlights these regimens as ethically sound, cost-effective, and sustainable approaches that may complement existing preventive healthcare models, while underscoring the need for further methodologically robust clinical research to support their broader implementation.

Keywords: *Dinacharya*, *Ritucharya*, Lifestyle disorders, Preventive medicine, *Ayurveda*, Circadian rhythm, Seasonal adaptation, Health promotion.

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2. **INTRODUCTION:**

Lifestyle disorders have emerged as one of the most significant public health challenges of the modern era, reflecting profound changes in human behavior, environment, and daily living patterns. Rapid urbanization, technological advancement, altered food habits, reduced physical activity, irregular sleep patterns, and persistent psychosocial stress have collectively contributed to a sharp rise in non-communicable diseases worldwide. Conditions such as obesity, type 2 diabetes mellitus, cardiovascular diseases, metabolic syndrome, stress-related disorders, and sleep disturbances are increasingly prevalent across all age groups, placing a substantial burden on individuals, healthcare systems, and national economies. Unlike infectious diseases, lifestyle disorders develop gradually and are strongly influenced by long-term behavioral and environmental factors, making prevention a central component of effective disease control.^{1,2,17}

Modern preventive medicine has increasingly shifted its focus from disease treatment to risk reduction and health promotion. While pharmacological and surgical interventions play an essential role in managing advanced disease states, their long-term effectiveness in lifestyle disorders is often limited by issues related to cost, accessibility, adverse effects, and poor adherence. Moreover, excessive reliance on medical interventions may contribute to over-medicalization, diverting attention away from behavioral and environmental determinants of

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health.³ As a result, there is growing interest in non-pharmacological, sustainable, and ethically sound preventive strategies that emphasize lifestyle modification, behavioral regulation, and long-term self-care.

In this context, traditional systems of medicine offer valuable insights into preventive healthcare. *Ayurveda*, the traditional system of medicine of India, places prevention at the core of its healthcare philosophy. Rather than viewing health merely as the absence of disease, *Ayurveda* defines health as a dynamic state of equilibrium involving physiological, metabolic, psychological, and behavioral factors. This holistic perspective recognizes that disturbances in daily routines, dietary habits, seasonal adaptation, and mental balance gradually disrupt internal regulation and give rise to disease.^{4,5,6,7} Consequently, *Ayurveda* emphasizes structured lifestyle guidelines aimed at maintaining harmony between the individual and the external environment.

Two foundational preventive concepts in *Ayurveda* are *Dinacharya* (daily regimen) and *Ritucharya* (seasonal regimen). These regimens function as practical frameworks for aligning human behavior with natural biological rhythms. *Dinacharya* provides guidance on daily activities such as waking and sleeping patterns, personal hygiene, physical activity, dietary timing, and mental discipline, while *Ritucharya* focuses on seasonal adjustments in diet, lifestyle, and cleansing practices to counter environmental and climatic variations. Together, these regimens are designed to preserve metabolic efficiency, support digestive and neuroendocrine balance, and enhance the body’s adaptive capacity to both internal and external stressors.

From a contemporary scientific perspective, increasing evidence highlights the importance of circadian and seasonal rhythms in regulating metabolism, hormonal secretion, immune function, and behavior. Disruption of these rhythms—through irregular sleep–wake cycles, late-night eating, sedentary behavior, and inconsistent daily routines—has been associated with metabolic dysregulation, chronic low-grade inflammation, hormonal imbalance, and increased susceptibility to lifestyle disorders.^{8,9,10} The growing field of chronobiology underscores the health consequences of misalignment between biological clocks and behavioral patterns, reinforcing the relevance of rhythm-based preventive strategies.

Dinacharya aligns closely with modern concepts of circadian regulation by promoting regularity and consistency in daily habits. Structured sleep–wake cycles, timely meals, appropriate physical activity, and disciplined daily routines contribute to stable neuroendocrine signaling, improved insulin sensitivity, and efficient energy utilization.^{11,13} Similarly, *Ritucharya* reflects principles of seasonal adaptation that parallel modern observations of seasonal variations in metabolism, appetite, physical activity, and energy expenditure. Seasonal lifestyle adjustments help mitigate the physiological stress imposed by environmental changes and reduce the risk of cumulative metabolic burden.^{15,20}

Lifestyle disorders are inherently multifactorial, involving interactions between metabolic, behavioral, psychological, and environmental factors. Preventive strategies that address only one dimension are often insufficient for achieving sustained health benefits. *Ayurveda*’s lifestyle-centered approach offers a comprehensive framework that integrates physical activity, dietary discipline, mental well-being, and environmental adaptation into daily living. Importantly, these practices are non-invasive, cost-effective, and adaptable across populations, making them particularly relevant for large-scale preventive healthcare initiatives.

Despite their long history of use, *Dinacharya* and *Ritucharya* have only recently begun to receive attention within contemporary preventive medicine discourse. Emerging scientific studies suggest that many of the practices described within these regimens exert measurable effects on metabolic regulation, inflammatory pathways, hormonal balance, and behavioral consistency.¹⁶ Such effects are directly relevant to the prevention of lifestyle disorders, which are often characterized by metabolic inflexibility, chronic inflammation, stress dysregulation, and disrupted biological rhythms. However, much of the existing evidence remains fragmented, and there is a need for integrative analyses that systematically examine these regimens through both *Ayurvedic* and modern scientific lenses.

Bridging *Ayurveda* with modern preventive medicine does not imply replacing contemporary healthcare practices, but rather complementing them through evidence-informed lifestyle strategies. Integrative preventive models that combine objective risk assessment with individualized lifestyle regulation may enhance long-term adherence, reduce disease progression, and limit unnecessary medical intervention. In an era where healthcare

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systems are increasingly strained by the rising burden of chronic disease, such approaches hold significant public health relevance.

Against this background, the present review explores the preventive potential of *Dinacharya* and *Ritucharya* in the context of lifestyle disorders. By integrating classical *Ayurvedic* concepts with contemporary perspectives from preventive and lifestyle medicine, the review aims to examine how daily and seasonal regimens contribute to metabolic stability, behavioral regulation, and long-term health maintenance. The objective is to highlight areas of conceptual convergence, assess their relevance to modern preventive healthcare, and identify gaps that warrant further scientific investigation. Understanding and contextualizing these traditional preventive frameworks may support the development of more holistic, sustainable, and patient-centered approaches to lifestyle disorder prevention.

3. MATERIALS AND METHODS

3.1 Study Design

The present article is a narrative, integrative review conducted to examine the preventive potential of *Dinacharya* and *Ritucharya* in lifestyle disorders by synthesizing classical *Ayurvedic* principles with contemporary concepts of preventive and lifestyle medicine. The review focuses on conceptual understanding, preventive mechanisms, and lifestyle-centered strategies rather than evaluating the efficacy of a single intervention or clinical outcome.

3.2 Literature Search Strategy

A comprehensive literature search was carried out across multiple electronic databases, including PubMed, Google Scholar, Science Direct, and the AYUSH Research Portal. Relevant keywords and search terms such as “*Dinacharya*,” “*Ritucharya*,” “*Ayurvedic* daily regimen,” “seasonal regimen,” “lifestyle disorders,” “preventive medicine,” “circadian rhythm,” and “health promotion” were used in various combinations. Boolean operators were applied to refine and broaden the search where appropriate. Articles published in English were considered for inclusion.

3.3 Ayurvedic Textual Sources

Classical *Ayurvedic* literature was critically reviewed to understand the conceptual foundations of *Dinacharya* and *Ritucharya*. Primary texts consulted included *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*. Descriptions related to daily and seasonal regimens, maintenance of *Doshic* balance, regulation of *Agni*, lifestyle discipline, and preventive health practices were examined. These concepts were interpreted in relation to contemporary lifestyle disorders and preventive health frameworks.

3.4 Modern Scientific Literature

Contemporary biomedical literature was reviewed to explore current scientific perspectives on lifestyle disorders and preventive strategies. Studies addressing circadian biology, seasonal metabolic variation, lifestyle modification, behavioral regulation, and non-pharmacological prevention of chronic diseases were analyzed. Emphasis was placed on literature that examined metabolic regulation, inflammatory processes, neuroendocrine balance, and behavioral consistency in relation to daily and seasonal lifestyle patterns.²⁰

3.5 Inclusion and Exclusion Criteria

Publications discussing lifestyle disorders, preventive healthcare, daily routines, seasonal adaptation, or lifestyle-based interventions from either *Ayurvedic* or modern medical perspectives were included. Review articles, clinical studies, observational studies, and conceptual papers relevant to prevention and lifestyle regulation were considered. Studies focusing exclusively on pharmacological or surgical management without a lifestyle or preventive component were excluded. Animal studies, *in vitro* studies, and articles unrelated to lifestyle disorders were also excluded.

3.6 Data Synthesis and Analysis

Data from selected sources were reviewed qualitatively and synthesized narratively. The analysis focused on identifying common themes, conceptual overlaps, and complementary insights between *Ayurvedic* regimens and modern preventive medicine. Findings were organized to highlight the preventive relevance of *Dinacharya* and

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Ritucharya, their potential mechanisms of action, and their applicability within contemporary lifestyle disorder prevention models.

4. DINACHARYA AS A PREVENTIVE FRAMEWORK IN LIFESTYLE DISORDERS:

Dinacharya, the Ayurvedic concept of a structured daily regimen, represents a practical and preventive framework aimed at maintaining physiological balance through regularity and discipline in everyday activities. Lifestyle disorders often develop due to cumulative disruptions in daily routines, including irregular sleep–wake cycles, inconsistent meal timing, physical inactivity, and chronic stress. *Dinacharya* addresses these determinants at their behavioral root by promoting alignment between individual habits and intrinsic biological rhythms.

From a preventive perspective, *Dinacharya* emphasizes consistency in daily activities such as waking early, maintaining proper hygiene, engaging in appropriate physical activity, consuming meals at regular intervals, and ensuring adequate and timely sleep. These practices collectively support circadian regulation, which is now recognized as a critical determinant of metabolic, hormonal, and behavioral health. Disruption of circadian rhythms has been associated with insulin resistance, altered appetite regulation, chronic inflammation, and increased susceptibility to lifestyle disorders. By reinforcing predictable daily patterns, *Dinacharya* helps stabilize neuroendocrine signaling, optimize digestive efficiency, and regulate energy metabolism.

Dietary discipline within *Dinacharya* extends beyond food composition to include timing, quantity, and context of eating. Regular meal timing supports digestive capacity and prevents metabolic overload, while avoidance of overeating reduces the risk of chronic low-grade inflammation and metabolic imbalance. Similarly, physical activity recommended within *Dinacharya* is moderate, regular, and tailored to individual capacity, aligning with modern evidence that sustained, moderate exercise improves insulin sensitivity, reduces inflammatory markers, and supports long-term metabolic health.

Sleep regulation is another central component of *Dinacharya* with strong preventive relevance. Adequate and timely sleep supports hormonal balance, appetite regulation, stress resilience, and cognitive function. Chronic sleep disruption has been linked to altered leptin and ghrelin levels, increased appetite, weight gain, and heightened cardiovascular risk. By prioritizing regular sleep–wake patterns, *Dinacharya* contributes to long-term metabolic and psychological stability.

Overall, *Dinacharya* functions as a preventive behavioral framework that addresses lifestyle disorders at an early stage by promoting rhythm, moderation, and self-regulation. Its non-invasive and adaptable nature makes it particularly suitable for long-term disease prevention and health promotion across diverse populations.^{13,14,15,16}

5. RITUCHARYA AND SEASONAL REGULATION OF HEALTH:

Ritucharya refers to the Ayurvedic concept of seasonal regimen, which emphasizes adaptive changes in diet, lifestyle, and daily habits in response to environmental and climatic variations. Seasonal transitions impose physiological stress on the human body, influencing metabolism, appetite, physical activity, and immune function. Failure to adapt to these changes can lead to internal imbalance and increase vulnerability to lifestyle-related disorders.

Modern scientific research supports the concept of seasonal variation in metabolic rate, energy expenditure, and eating behavior. Resting metabolic rate, appetite, and physical activity levels fluctuate across seasons, often contributing to weight gain, metabolic stress, and inflammatory responses when adaptive mechanisms are insufficient. *Ritucharya* provides a structured approach to mitigate these seasonal challenges by encouraging anticipatory and responsive lifestyle adjustments.

Dietary modifications form a central component of *Ritucharya*, with emphasis on selecting foods that are compatible with seasonal digestive capacity and environmental demands. Such adaptations help maintain digestive efficiency, prevent accumulation of metabolic waste, and support immune resilience. Seasonal regulation of physical activity and daily routines further aids in maintaining energy balance and reducing physiological strain.

Ritucharya also incorporates periodic cleansing and restorative practices designed to counter seasonal accumulation of metabolic imbalance. When applied judiciously, these interventions may support metabolic flexibility, reduce inflammatory burden, and enhance the body’s capacity to adapt to environmental stressors.

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Importantly, *Ritucharya* is not a rigid protocol but a flexible framework that emphasizes awareness, moderation, and responsiveness to seasonal cues.

By addressing health through seasonal alignment, *Ritucharya* complements daily routine regulation and extends preventive care beyond short-term behavior modification. Its emphasis on adaptation rather than uniformity aligns with modern concepts of personalized and context-sensitive preventive medicine.^{15,17,20}

6. RELEVANCE TO MAJOR LIFESTYLE DISORDERS:

The preventive principles of *Dinacharya* and *Ritucharya* are highly relevant to the contemporary burden of lifestyle disorders, which share common behavioral and metabolic origins. Conditions such as obesity, metabolic disorders, cardiovascular disease, and stress-related illnesses are strongly influenced by disrupted daily rhythms, sedentary behavior, dietary excess, and chronic psychosocial stress.

In obesity and metabolic disorders, irregular eating patterns, poor sleep quality, and physical inactivity contribute to insulin resistance, chronic inflammation, and altered energy homeostasis. *Dinacharya* addresses these factors by promoting regular meal timing, balanced physical activity, and sleep regulation, while *Ritucharya* supports seasonal metabolic adaptation and prevents cumulative metabolic stress.

Cardiovascular risk is closely linked to chronic inflammation, hormonal dysregulation, and behavioral factors such as inactivity and stress. Rhythm-based lifestyle practices help stabilize autonomic balance, reduce stress responses, and support vascular health. Similarly, stress-related disorders are exacerbated by irregular routines, sleep deprivation, and poor lifestyle discipline. The structured daily and seasonal routines advocated in *Ayurveda* support psychological resilience, emotional regulation, and behavioral consistency.

Collectively, *Dinacharya* and *Ritucharya* provide a preventive, lifestyle-centered framework that addresses the shared root causes of multiple lifestyle disorders rather than targeting individual diseases in isolation. Their emphasis on regularity, moderation, and environmental alignment makes them valuable complementary strategies within modern preventive healthcare, particularly for long-term risk reduction and health maintenance.^{14,17,18}

7. DISCUSSION:

The present review highlights the relevance of *Dinacharya* and *Ritucharya* as preventive lifestyle frameworks within *Ayurveda* and examines their applicability in addressing the growing burden of lifestyle disorders through a modern preventive medicine lens. Lifestyle disorders arise from long-term disturbances in behavior, metabolism, circadian regulation, and stress adaptation. The findings of this review suggest that rhythm-based lifestyle regulation, as emphasized in *Ayurveda*, aligns closely with contemporary scientific understanding of metabolic and neuroendocrine health.

One of the key insights emerging from this analysis is the central role of biological rhythms in maintaining metabolic stability. Modern research in chronobiology has demonstrated that irregular sleep-wake cycles, inconsistent meal timing, and sedentary behavior disrupt hormonal regulation, energy metabolism, and inflammatory pathways. *Dinacharya*, by promoting regularity in daily routines, directly addresses these disruptions. Practices related to sleep regulation, physical activity, dietary timing, and personal discipline support circadian alignment, which is increasingly recognized as a foundational element in preventing metabolic and cardiovascular disorders.

Similarly, *Ritucharya* offers a structured approach to seasonal adaptation, which is often overlooked in contemporary lifestyle medicine. Seasonal variations influence appetite, physical activity, energy expenditure, and immune function. Failure to adapt lifestyle behaviors to these changes contributes to cumulative metabolic stress and disease susceptibility. The seasonal dietary and lifestyle adjustments advocated in *Ritucharya* correspond with modern observations of seasonal metabolic fluctuation and highlight the importance of adaptive, context-sensitive preventive strategies rather than uniform recommendations.

The relevance of these regimens extends beyond obesity to a broader spectrum of lifestyle disorders. Obesity, metabolic syndrome, cardiovascular disease, and stress-related conditions share common etiological factors, including chronic low-grade inflammation, insulin resistance, autonomic imbalance, and behavioral dysregulation. By addressing these shared pathways through lifestyle discipline and rhythm regulation, *Dinacharya* and *Ritucharya* offer a unified preventive framework rather than disease-specific interventions. This approach

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supports the concept that sustainable prevention requires modification of daily and seasonal behaviors rather than episodic medical treatment.

Another important consideration is the ethical and practical dimension of preventive care. Modern healthcare systems face increasing challenges related to over-medicalization, rising costs, and limited long-term adherence to pharmacological interventions. The non-invasive, low-cost, and self-regulatory nature of *Ayurvedic* lifestyle practices makes them particularly suitable for large-scale preventive implementation. These regimens empower individuals to take an active role in maintaining health, thereby enhancing adherence and long-term sustainability.

Despite their conceptual and practical strengths, the integration of *Dinacharya* and *Ritucharya* into modern preventive healthcare requires careful scientific validation. Much of the existing evidence remains observational or fragmented, and there is considerable heterogeneity in study designs, outcome measures, and intervention protocols. Standardization of lifestyle interventions, objective assessment of outcomes, and long-term randomized controlled trials are necessary to establish causal relationships and quantify preventive benefits. Additionally, translating traditional concepts into measurable biomedical parameters remains a methodological challenge that warrants interdisciplinary collaboration.

Overall, the discussion underscores that *Ayurveda*'s preventive lifestyle frameworks are not incompatible with modern medicine but rather complementary. When viewed through the lens of circadian biology, behavioral science, and preventive medicine, *Dinacharya* and *Ritucharya* emerge as scientifically plausible strategies for reducing lifestyle disorder risk. Their integration into contemporary healthcare models may enhance preventive capacity while reducing dependence on pharmacological and invasive interventions.

8. CONCLUSION:

Lifestyle disorders represent a growing challenge to global health systems, primarily driven by disruptions in daily routines, seasonal maladaptation, sedentary behavior, unhealthy dietary practices, and chronic psychosocial stress. Addressing these conditions requires preventive strategies that go beyond short-term symptom control and focus on sustainable lifestyle regulation. This review highlights the preventive potential of *Dinacharya* and *Ritucharya* as structured, lifestyle-centered frameworks derived from *Ayurvedic* principles that closely align with contemporary concepts of preventive medicine. *Dinacharya* emphasizes regularity and discipline in daily habits, supporting circadian alignment, metabolic stability, hormonal balance, and behavioral consistency. *Ritucharya* complements this approach by promoting seasonal adaptations that enhance physiological resilience to environmental changes. Together, these regimens address shared behavioral and metabolic determinants underlying major lifestyle disorders, including obesity, metabolic disturbances, cardiovascular risk, and stress-related conditions. Their non-invasive, cost-effective, and self-regulatory nature makes them particularly suitable for long-term health promotion and disease prevention. From a modern healthcare perspective, integrating rhythm-based lifestyle practices with existing preventive strategies may improve adherence, reduce reliance on pharmacological interventions, and support patient-centered care. However, wider application requires systematic scientific validation, standardization of protocols, and development of objective outcome measures. Strengthening the evidence base through well-designed, long-term clinical studies may facilitate the incorporation of *Dinacharya* and *Ritucharya* into contemporary preventive healthcare models and contribute to more holistic and sustainable approaches to lifestyle disorder prevention.

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