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ORIGINAL ARTICLE

Development of Ayurvedic Diagnostic tool for *Prameha Roga* and its Inter-rater reliability

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ABSTRACT

Prameha diagnostic Proforma (PDP) is a tool designed to diagnose Prameha disease and its subtypes with an indication of dosha involvement. This study aims to validate and check the reliability of the Ayurvedic Diagnostic tool for Prameha Roga. The intended outcome of this study is to obtain a uniform diagnosis at the dosha level. A cross-sectional study including 96 patients of Prameha was conducted at 10 centres. Patients were screened and enrolled using an Assessed questionnaire (to be filled by the patient) and Physician Screening Format (PSF), which was assessed by the Physician, specifically designed for screening of Prameha patients. Centres participating in this study have followed uniform protocol for Prameha Diagnostic Proforma Inter-rater reliability (kappa and percentage agreement), as well as interrater significance (p-value), were reported. The level of agreement was represented by kappa values more than 0.20 and percentage agreement greater than 70%. The GRRAS guideline for reporting of studies of reliability and agreement was followed. Each patient was examined by two Ayurvedic physicians independently. The total no of participants included in the analysis were 95.PDP contains a total of 359 items (PSF-27 and Detailed Proforma-332), Out of total 359 items, all the items of PSF-27 were reported, while out of 332 items of detailed proforma, only 305 were reported. Out of 27 items of PSF, 23 items had good to very good (Almost perfect) agreement having kappa value in between 0.6-1.0 and percentage agreement in between 82.10% -95.80%. All the reported 305 items of detailed proforma had percentage agreement ranging from 57.9% to 99.0% and kappa values ranging from 0.059 to 0.95. In ten items, there was a poor

level of agreement. There were 213 items with a fair to moderate level of agreement and 82 items with a good to a very good level of agreement. Study findings indicate that PDP is a reliable tool for diagnostic purpose. Removal of unreliable items may produce a shorter more relevant instrument. PDP provides an evidence-based approach to diagnosis and management by which diagnosis of Prameha roga at the level of doshic sub-types may be made accurately. **Keywords:** Prameha, Inter-rater reliability, Validation, Diagnostic tool

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INTRODUCTION

The *Prameha* disease mentioned in the ancient Ayurvedic texts is a group of diseases rather than a single illness that includes clinical symptoms characterized by *Prabhuta Aavil Mutrata*. As per *Sushruta, Prameha* can be diagnosed by combining features of *Prabhuta Avila mutrata* with *Prameha puravarupa,* but for diagnosis at the level of *doshas, mutra pariksha* is necessary. Due to the interaction of the three *Doshas* and ten *Dushyas, Prameha* is divided into 20 subtypes. These twenty types of*Prameha* have been differentiated based on*Mutra pariksha* (Urine examination). *MutraPariksha* examination parameters can be widely divided into two categories i.e. *Mutra-ashrita* parameters examination which includes *Varna, Rasa, Gandha, Varna, sparsha, svarupa, sandrata* and *Mutra-pravritti jnaya* examination parameters which include parameters related to micturition frequency, amount and flow of urine. Apart from urine examination *Dosha, Dushya* and *Srotas pariksha* playa significant role in diagnosis at the level of *doshas. Prameha* has been also classified on an etiological basis into *Sahaja/Jata pramehi* and *Apathya Nimattaja Pramehi*. Therefore while defining the diagnostic criteria of *Prameha Roga*, the above-mentioned points should be kept in mind. This study aims to validate and check the reliability of the Ayurvedic Diagnostic tool for *Prameha Roga*. The intended outcome of this study is to obtain a uniform diagnosis at the level of *Dosha*.

Despite the clinical importance of *Prameha Roga*, no such diagnostic criteria was available which can comprehensively assess this disease .Lack of uniformity in diagnostic methods leads to variation in final diagnosis with dosha involvement. Therefore an attempt is made to develop *Prameha* disease diagnostic tool entirely based on Ayurvedic principles of diagnosis.The evaluation and interpretation of diagnostic tools used to make uniform diagnoses are frequently not standardised, however, this is important for accurate and reliable testing.We conducted the study to determine the reliability of the *Prameha Diagnostic tool*that points towards the diagnosis of *Prameha* and its*doshic* sub-types.The inter-rater reliability of the Ayurvedic diagnostic criteria based on Ayurvedic principles has remained mostly unknown till now. For uniformity in clinical diagnosis and clinical trials, it is necessary to develop validated standard assessment parameters/Ayurvedic diagnostic tools for the diseasesentirely based on Ayurvedic principles which may provide an evidence-based approach to diagnosis and management.

Tuble no 1. Grading of Kappa Value.				
S.N.	Value of Kappa	Level of	No of items in Physician	No of items in Detailed
	(Altman)	agreement	Screening Format	Diagnostic Proforma
1.	< 0.20	Poor	00	12
2.	0.21-0.40	Fair	01	96
3.	0.41-0.60	Moderate	03	115
4.	0.61-0.80	Good	22	72
5.	0.81-1.00	Very good	01	10

A detailed structured diagnostic proforma for *Prameha Roga* (Prameha Diagnostic Proforma: PDP) has been developed as per principles of diagnostic methods described in Ayurvedic literature by the Central Council for Research in Ayurvedic Sciences (CCRAS), New Delhi. A final draft of the proforma has been developed in a sequential phase-wise manner consisting of various phases including literature search, the clinical consensus from experts of the field for face validity and content validity testing and pre-testing of proforma at the OPD level. *Prameha* Diagnostic Proforma (PDP) is a compilation of the best available evidence for *Prameha Roga* mentioned in classical Ayurvedic text. PDP consists of two parts, the first is the screening proforma (physician screening proforma:PSF) and the second is diagnostic proforma. Physician Screening proforma has 27 outcome variables/items related to screening of *Prameha* disease. Diagnostic proforma has seven domains from A to G namely, *Mutra Pariksha, Dosha pariksha, Dushya pariksha, Srotas pariksha, samprapti Nirdharan, upadrava and Nidana vivechan,* consisting of 332 outcome variables/items. Almost all the outcome variables in the proforma were clearly defined and consisted of binary/dichotomous responses (Yes/No or present/absent).

Raters for inter-rater reliability testing were of the same background with post-graduation in the Ayurvedic system of medicine having 5 to 10 years of clinical experience in the desired disease condition. According to McHugh, kappa is the best choice for determining reliability when raters have a strong guessing characteristic in scoring[1]. However, if raters are well-trained and unlikely to make guesses when scoring, percent agreement is the best way to measure the instrument's reliability [1]. The chance agreement can be corrected with Kappa, but the chance agreement cannot be corrected with the percent agreement [1].

Items (<i>Pradhan Vedana</i> -Presenting complaint)	Percentage Agreement	Kappa value	p- value
Prachura Mutrata (Increase in quantity of urination)	93.7%	0.219	< 0.027
<i>Mutra-Abhikhshanata</i> (Increase in frequency of urination)	90.6%	0.612	< 0.001
Avila Mutrata(Turbidity in urine)	86.3%	0.668	< 0.001
Mutra-Vaivarrnyam(Altered colour in urine)	88.4%	0.743	< 0.001
<i>Madhur-shukla-Mutrata</i> (Manifestation of abnormalities in urine)	80.0%	0.410	< 0.001
Mutra-Daurgandhyam(Foul smell from urine)	88.4%	0.756	< 0.001
Shatpadpippilikabhih cha Sharir Mutraabhisaranam (Attraction of Ants towards excreted urine)	93.6%	0.785	< 0.001
Mukh-Talu-Kantha-Shosha (Dryness of mouth, palate and throat)	86.3%	0.722	< 0.001
Pipasa/Trit (Increased Thirst)	85.3%	0.692	< 0.001
<i>Karpaaddaha/hastapadataldaha</i> (Burning Sensation in palm/soles)	84.4%	0.767	< 0.001
Angeshuparidaha (Burning sensation all over body)	85.3%	0.590	< 0.001
Kar-padyo-suptata (Numbness in hands and feet)	84.2%	0.681	< 0.001
Angeshu-suptataam(Numbness in body parts)	86.3%	0.667	< 0.001
Gatranam Gurata(Feeling of Heaviness in body)	84.2%	0.679	< 0.001
Nidra, Tandra cha Sarvakalam(Always feeling sleepy and drowsy)	82.1%	0.637	< 0.001
Alasyam (lazyness)	83.2%	0.574	< 0.001
<i>Shayya-Asana-Swapna-sukherati</i> (Preference for sleeping, resting and lying down always)	82.1%	0.608	< 0.001
Sithilangata/Saad(Laxity of muscles and body in general)	83.2%	0.681	< 0.001
Swasa-daurgandhyam (Bad breath)	92.6%	0.790	<0.001
Vishra-sharirgandham(Foul Body odour)	91.5%	0.763	< 0.001
Sveda(Excessive Sweating)	84.2%	0.675	< 0.001
<i>Talu-gal-jhihva-danteshu-malotpatti/Kayachhidreshu- updeham</i> (Deposition of grime or dirt over throat-palate-tongue and teeth)	91.6%	0.805	<0.001
Asyamadhuryam (Sweet taste in mouth)	91.5%	0.699	< 0.001
Jatilibhava Keshanam (Matted hair)	95.8%	0.833	< 0.001
Vriddhi cha Nakhanam (Excessive growth of nails)	92.7%	0.715	< 0.001
Vriddhi cha Keshanam(Excessive growth of hairs)	93.7%	0.750	< 0.001
Sitapriyatvam(fond of coldness)	85.3%	0.683	< 0.001

Internal consistency reliability, test-retest reliability, parallel form's reliability, intra-rater reliability, and inter-rater reliability are some of the ways for determining reliability [2]. Inter-rater reliability is a recommended reliability measurement for the consistency of raters [2]. Recommended reliability measurement for consistency of raters is by using inter-rater reliability. Statistical test for determining inter-rater reliability is the Kappa coefficient combined with percent agreement [3]. Reliability relates to the precision of the measurement or the reproducibility of the scores acquired with the examination, says one definition. Interrater reliability refers to raters' agreement on the same data as a result of scale classification on the same instrument or process. Higher inter-rater reliability means that the results of

the raters are more consistent. The subject to be observed, the raters, the atmosphere at the moment of measurement, and the device are all factors that influence inter-rater reliability.

One of the statistical methods used to assess inter-rater reliability is percentage agreement. Only a value of >70% indicates acceptable percent agreement. In addition to percentage agreement, the kappa statistic can be used to assess inter-rater reliability. Various scholars, such as Landis and Koch, Fleiss, and Altman, have proposed various interpretations of the kappa coefficient. There are three-point of views that defines the unacceptable kappa value. According to Landis and Koch, a kappa value of 0.00 is inappropriate although Altman suggests a value of 0.20. Feinstein, Chiccheti, and Morris, on the other hand, claim that a kappa value of less than 0.41 is unacceptable [1].

Parameters	Items	Percentage Agreement	Kappa value	p-value
Mutra-Varna (Colour of urine)	Samanya Varna(Normal colour i.e.Amber coloured)	78.9	0.352	<0.001
(conour or armo)	Udakonam(Colourless)	92.7	0.0719	< 0.001
	Kandekshurasa-samkasham(Colour similar to sugarcane jujce)	98.9	0.795	< 0.001
	Svetam (Whitish)	99	0.662	< 0.001
	Shukla-pishtanibham(Dense white)	-	-	-
	Shukrabham (Whitish/ Semen like white)	-	-	-
	Ksharodaka-samkasham(Slight Hazy)	-	-	-
	Kaal (Black)	-	-	-
	Neela (Blue)	-	-	-
	Rakta (Red/Dark Red Colour)	-	-	-
	Manjisthodaka sadrisham (Pale red)	96.8	0.555	< 0.001
	<i>Haridrodaka-samkasham</i> (Colour similar to turmeric water, Yellowish)	95.8	0.833	<0.001
	Vasa-sadrisham(Creamy white)	-	-	-
	Sarpi varnam (Colour similar to Ghrita: Slight yellowish whitish)	-	-	-
	Pandu/kshaudra varnam (Pale yellow/ honey colour)	73.6	0.428	<0.001
	Anya(Others)	92.7	0.549	< 0.001
<i>Mutra-Gandha</i> (odour of Urine)	Samanya Gandha(Normal faint odour of urine)	79.5	0.448	< 0.001
	Nirgandha (Odourless like water)	65.2	0.327	0.001
	Kshargandha (smell like Alkali-Kshar)	62.1	0.259	0.007
	Amlagandha(Sour smell like vinegar)	65.3	0.324	0.001
	Vishra-gandha(Fleshy smell)	64.2	0.319	0.001
	Madhugandha(Honey like sweet smelling)	71.6	0.441	< 0.001
	Anya(Others)	62.1	0.259	0.007
Mutra-Rasa (Taste	Samanya (Normal)	65.3	0.299	0.003
of Urine	Atyartha Madhuram/ Madhura(Sweet)	81.1	0.483	< 0.001
	Amlam (Sour)	68.4	0.39	< 0.001
	Lavanam(Salty)	63.1	0.332	< 0.001
	Katukam (Pungent)	67.4	0.365	< 0.001
	Kshar sadrisha Rasa (Alkaline taste)	62.1	0.27	0.001
	Kashaya-madhuram/Kshaudra Rasam (Astringent-sweet, similar to taste of honey)	65.3	0.324	0.001
	Anya(Others)	63.2	0.28	0.003
Mutra-Sparsha	Samanya (Normal)	-	-	-
(Temperature of	Ushna (Scalding or hot)	62.1	0.259	0.007
urine during	Shita (Cold)/ Atyartha-shita (Extremely cold)	64.2	0.302	0.001
voluliigj	Anya (Others)	64.2	0.3	0.002
Swaroopa (Physical appearance of	Samanya (Normal looking without any turbidity)]	76.8	0.434	<0.001

Table no 3 (a): Category A: Mutra Pariksha (Urine Examination)

urine)	Achha (Extremely clear)]	60	0.22	0.023
	Aavila (Turbid)]	68.4	0.38	< 0.001
	<i>Sikta-anuviddha</i> (Crystal like small sediments in hazy urine)]	68.4	0.399	<0.001
	Tantuyuktam (Thread like components in urine)	65.3	0.341	< 0.001
	Mutre snigdha padartha/sakapham /salaseekam (Oily or unctuous looking components in urine)	64.2	0.319	< 0.001
	Sashukram (Urine mixed with semen)	65.2	0.334	<0.001
	Pichchhila(Sliminess in urine)	63.2	0.299	0.001
	Safena(Frothy urine)	65.2	0.331	< 0.001
	Anya(Others)]	64.2	0.327	< 0.001
Sandrata Shreni	Samanya (Normal)	70.5	0.319	0.002
Sedimentation)	Svalpa-sandra(Slight sedimentation)	68.4	0.238	0.005
Seumentation	Ghana (More sedimentation)	64.2	0.321	< 0.001
	Anya (Others)	68.4	387	< 0.001
Mutra-parivartan:	Samanya (Normal)	68.5	0.113	0.272
Sadyah (Density	Svalpa-sandra (Slight sedimentation)	61	0.208	0.02
within minutes	Ghana(More sedimentation)	62.1	0.284	0.002
after voiding	Anya (Others)	64.2	0.312	0.001
Mutra-	Aparivartana (No change)]	90.5	0.42	< 0.001
parivartan:yaamaat	Upari-achham-adho-ghanam(Sediments settling	68.4	0.395	< 0.001
urine after keeping	in the lower part with clear urine in the upper portion)			
for 3 hours	Sandribhavati-bhajane (Upto half or more than half of the urine appear dense with only a small	63.2	0.299	0.001
	(Othors)]	60	0.246	0.006
Mutra matra (urino	Samanya (Normal quantity)]	57.9	0.240	0.000
a_{u} and a_{u} and a_{u}	Prabhut-mutrata / Rahu (large quantity) /Rahu-	04.9	0.194	0.039
hours)	prabhuta (hastivat) (Excessive quantity)]	54.0	0.239	0.011
	Alpa-matra(Less quantity)	65.3	0.324	0.001
Mutra-Abhikshanata (frequency of	<i>Samanya/Aparivartana</i> (Normal/no alteration in frequency)	70.5	0.412	<0.001
urination	<i>Bahu-abhikshna-alpa matra (stokam)</i> (Frequent urination with low quantity)	71.6	0.39	<0.001
	Bahu-Abhikshna-Bahu-matra (Frequent urination with large quantity)	61.1	0.152	0.108
	Alpa (Decrease frequency of micturition)	63.2	0.293	0.002
	Ratrimutrata (Nocturnal Polyurea)	70.5	0.093	0.263
<i>Mutra-dhara</i> (flow of Urine)	Samanya dhara evam vegaसामान्यधारम्तथावेग:	-	-	-
or or mey	Mandam-mandam avegam (Slow stream without force)	61.1	0.235	0.017
	Shighram vega-vivarjitam (Urgency without force)	68.4	0.378	<0.001
	Aiashram (Continuous Flow)	61.1	0.237	0.015
	Anva (Others)	65.2	0 332	<0.001
Others	Savedana-Mutra pravritti(Pain on micturition)	97.9	0.877	<0.001
	Savidaha-Mutra pravritti (Burning on micturition)	78.1	0.595	< 0.001
	<i>Mutrakrichhata</i> (Difficulty in urination)	90.5	0.586	< 0.001
	Ruksha Mutrata (Absence of unctuous feeling in	90.5	0.699	< 0.001
	Urine)			

MATERIAL AND METHODS

Development of Prameha Diagnostic proforma:

A detailed structured diagnostic proforma for *Prameha Roga* (Prameha Diagnostic Proforma: PDP) has been developed as per principles of diagnostic methods described in Ayurvedic literature by the Central Council for Research in Ayurvedic Sciences (CCRAS), New Delhi. The final draft of the proforma has been developed in a sequential phase-wise manner consisting of various phases including literature search, the

clinical consensus from experts of the field for face validity and content validity testing and pre-testing of proforma at the OPD level. *Prameha* Diagnostic Proforma (PDP) is a compilation of the best available evidence for *Prameha Roga* mentioned in classical Ayurvedic text. The screening proforma (physician screening proforma:PSF) and the detailed diagnostic proforma are the two elements of the PDP. The Physician Screening Proforma has 27 outcome variables/items linked to *Prameha* disease screening. *Mutra Pariksha, Dosha pariksha, Dushya pariksha, Srotas pariksha, Samprapti Nirdharan, upadrava,* and *Nidana vivechan* are the seven domains of the diagnostic proforma, which contain 332 items. The outcome variable of the proforma was well-defined and consisted of binary/dichotomous responses (Yes/No or present/absent).

Variable	Percentage Agreement	Kappa value	p-value
Vak-parushya (Hoarseness of voice)]	93.7	0.634	< 0.001
Karshug (Emogistion)]	05.2	0.652	<0.001
Kashnya (Blackish discoloration)]	863	0.637	<0.001
Catra-sphurana (Essciculation)/1	00.3	0.037	<0.001
Catra kampa (Tromore)]	92.7	0.023	0.001
Ushna kamta (Liking of hot onvironment and feed	00.5	0.29	0.003
articles)]	81.1	0.602	<0.001
Nidra nasha Loss of Sleen)]	82.1	0.623	<0.001
Alna hala (Decreased strength)]	79.0	0.46	<0.001
Gadha varcha (Hard stool/constination)]	84.3	0.62	< 0.001
Angha (Flatulance)]	82.1	0.596	< 0.001
Bala-indriva-bhransha/ sanava nasha (Loss of	0211	0.070	0.001
consciousness)]	91.6	0.163	0.08
Pralapa/Bhrama (Dellirium)(A.H)]	99	0.662	< 0.001
Dinata (Depressed)	82.1	0.43	< 0.001
Manda Chestata (low activity)]	78.9	0.544	< 0.001
Alpa- Vak (talking less)]	83.1	0.47	< 0.001
Mudh-Sangyata (no thoughts)]	97.9	0.657	< 0.001
Moha (Delirium)]	-	-	-
Angasada (Body ache) A.H.]	73.7	0.476	< 0.001
Apraharsha (Unhappy)	83.1	0.531	< 0.001
Pitavabhasata (appearance of yellowish discoloration)]	97.9	0.489	< 0.001
Santapa (Rise of body temperature)]	84.2	0.37	< 0.001
Sitakamitva (Desire for cold substances)]	81	0.484	< 0.001
Alpa nidrata (Decreased Sleep)]	88.4	0.755	< 0.001
Murchha(Fainting)]	-	-	-
Bala-hani (Loss of Strength)]	73.6	0.357	< 0.001
Indriya –daurbalya (Improper functioning of senses)]	89.4	0.671	< 0.001
<i>Pita-Vita-Mutra-netra-Tvaka</i> (Yellowish color of Stool Urine & eyes and skin)]	95.8	0.692	<0.001
Kshudha (Hunger)]	77.9	0.554	< 0.001
Daha (Burning Sensation)]	75.8	0.502	< 0.001
Santapa(Elevated body temperature)]	86.4	0.059	0.562
Trishna (Thirst)]	81	0.565	< 0.001
Mandoshmata /Shita (Feeling of Cold)]	93.7	0.632	< 0.001
Mandagnita (Decreased digestive fire)]	85.2	0.502	< 0.001
Nishprabhata (loss of luster]	88.5	0.496	< 0.001
Shauklyam(whitishness of body]	95.8	0.581	< 0.001
Shaitya (Cold on touch/feeling of cold]	89.5	0.486	< 0.001
Sthairya(sturdiness)]	-	-	-
Gaurav (heaviness)	75.8	0.514	< 0.001
Avasada (lassitude)]	85.3	0.696	< 0.001
Tandra (drowsiness)]	78.9	0.579	< 0.001

Table no 4: Category B-Dosha Pariksha (Examination of Dosha)

Nidra (sleepiness)	75.8	0.464	< 0.001
Sandhi-Vishlesh (feeling of looseness in joints	78.9	0.368	< 0.001
Slathangatvam (Flaccid body)]	80	0.433	< 0.001
Alasyam (Laziness)	72.6	0.354	< 0.001
Anutsaaha (less interest in surroundings)	85.3	0.416	< 0.001
Praseka (Excess salivation)-]	92.8	0.549	< 0.001
Swasa (Breathlessness/shortness of breath)]	93.7	0.733	< 0.001
Kasa (Cough)]	96.9	0.65	< 0.001
Hrillasa(Nausea)]	91.6	0.29	0.004
Agnisada(Decreased Digestive Fire)]	86.3	0.472	< 0.001
Rukshata (dryness)]	94.8	0.808	< 0.001
Antardaha(Internal burning sensation)]	87.4	0.386	< 0.001
Amashayetara Sleshma Ashaya shunyata(Feeling of			
emptyness in Sleshna sthana except Amashaya i.e head,			
neck and thorax)	97.9	0.789	< 0.001
Sandhi-Shaithilya(Subluxation of joints)]	86.3	0.183	0.031
Trishna (Thirst)]	71.6	0.4	< 0.001
Daurbalya (Weakness)]	72.6	0.382	< 0.001
Prajagara (No Sleep at night)]	87.4	0.675	< 0.001
Bhrama(Giddiness)A.H.]	93.7	0.467	< 0.001
Angamarda (body ache)]	83.2	0.655	< 0.001
Hrid-dravatvam(tachycardia/Palpitation)	93.7	0.692	< 0.001

Defining the diagnostic criteria/Initial draft of diagnostic criteria:

The initial draft of diagnostic criteria has been developed through an extensive literature search in various classical Ayurvedic texts and focused group discussions. The focused group consists of experts in the concerned subject. In the process of item generation, seven domains have been framed and accordingly, variables of their domain have been categorized. Sanskrit terminologies of the outcome variables were taken up for discussion and an operational definition for each variable has been finalized so that any differences in clinical observations may be minimized. Type of response scale, dichotomous responses (Yes/No or present/absent) was decided for each variable.

Face validity and content validity of diagnostic criteria:

For validity testing, a clinical consensus survey has been conducted among ten experts of the field through email by zero draft distribution. For clinical consensus, well experienced Ayurvedic clinicians having >5 years of experience related to the subject were selected. Clinicians were asked to evaluate the items of the proforma and give their consensus by mentioning whether they agree or disagree to retain that item in the proforma. Those variables on which experts did not agree were further evaluated by a focused group. After evaluation items were either modified or discarded. Focused group members who conceptualized the study supervised the entire process.

Parameter	Percentage Agreement	Kappa value	p-value
Hridyotkleda(Nausea)	95.8	0.644	< 0.001
Praseka (excess salivation)	87.7	0.665	< 0.001
<i>Hrit-Pida</i> (cardiac pain)	93.7	0.219	0.027
<i>Hrit-kampa</i> (palpitation)	88.4	0.552	< 0.001
Hrit-shunyata(Feeling of emptiness in cardiac region)	-	-	-
Trishna(Feeling thirsty)	71.6	0.379	< 0.001
Raktangakshita (redness of whole body and eyes)	94.7	0.417	< 0.001
Sirapurnatva (fullness of veins)	90.5	0.265	0.005
Tvakparushya(Roughness of skin)	83.1	0.452	< 0.001
<i>Amla-shita prarthana</i> (desire of sour and cold substances)	82.1	0.521	<0.001
Sira-Shaithilya(Sluggishness of veins)	-	-	-
<i>Sfig-ganda-ostha-upastha-uru-bahu-janghashu vriddhi</i> (overgrowth of muscular portion of body)	92.6	0.325	0.001

Table no 5: Category C-Dushya Pariksha(examination of Dushya)

<i>Guru-aatrata</i> (heaviness in body)	76.7	0.541	< 0.001
Sfia-aanda-ostha-upastha-uru-vaksha-kaksha-pindika-			
<i>udar-areeva-shushkta</i> (Emaciation of various muscular			
parts of body)	89.5	0.387	< 0.001
Catua Tada (Drieling Dain in subala hada)	00.0	0.251	-0.001
Gaura (Concucting Pain III Whole body)	90.6	0.351	< 0.001
Sadana (Generalised Weakness)	/9	0.428	<0.001
Dhamani-shaithiya (Laxity of Dhamni	97.9	0.489	<0.001
Sniganangata(Unctousness of body)	83.1	0.496	<0.001
obdomon)	01.6	0 500	<0.001
<i>Kang guagadinam daurgandhuam (had breath during</i>	91.0	0.309	<0.001
coughing and broathing)	99.4	0.647	<0.001
Dlooba-abhivridhi(splonomogaly)	00.4	0.047	<0.001
Sandhi-shunyata(emptiness/hollowness of joints)	91.6	0.384	< 0.001
Raukshaya (Rough skin)	90.5	0.685	< 0.001
Medurmamsa Prarthana (desire for unctuous			
substances)	86.3	0.314	0.001
Adhvasthi evam Adhidanta(additional bone and teeth)	-	-	-
Kesh-nakha ativriddhi(excessive growth of hairs and			
nails)	94.7	0.817	< 0.001
	00.1	0.500	0.001
Asthi-shula (Bony pain)	82.1	0.538	<0.001
Danta-nakha bhanga(falling of teeth/nails)	93.7	0.538	< 0.001
Ruksha Deha(Dryness in whole body)	89.5	0.629	< 0.001
Sarvanga gaurav(generalised heaviness)	85.3	0.704	< 0.001
Netra-gaurav(heaviness in eyes)	81.1	0.54	<0.001
Alpa-shukrata(decreased semen quantity)	93.7	0.367	< 0.001
Parvabheda(breaking pain of joints)	80	0.268	0.009
Asthinistoda (Pricking pain of bones)	86.3	0.167	0.085
Asthi-shunyata (Hollowness of bones)	-	-	-
Shukrashmari(Shukra-ashmari)	95.8	0.312	0.002
Shukra ati-pradurbhava(Excess semen discharge)	95.8	0.312	0.002
Medhra-vrishan vedana (Pain in Penis and testis)	97.9	0.492	< 0.001
Maithuna-ashakti (inability during intercourse)	92.6	0.495	< 0.001
Shukra Chira Praseka (Delayed ejaculation)	96.8	0.555	< 0.001
Praseke cha alpa-rakta-shukra-darshanam(Less & bloody			
semen discharge)	-	-	-
<i>Mutra-vriddhi</i> (Increase volume of urination	82.1	0.219	0.031
Mutra-Muhur-muhur-pravritti(Increased frequency of			
micturition)	87.3	0.549	< 0.001
Basti-toda(Piercing pain in bladder)	90.3	0.475	< 0.001
Rasti- adhamana (over fullness of bladder)	01.6	0 500	<0.001
Aling mutrate (Degrapse amount of uning)	91.0	0.509	<0.001
Atong(bloating)	-	-	-0.001
Kukshi shula(Pain in abdomen)		0.514	<0.001
Kukshi-shulu(Palli III abuolileli)	09.5	0.441	<0.001
<i>Hriduyu-pidu</i> (cal ulac palit)	91.0	0.29	0.004
Sashahdagua yayo yirdhug gamanam luyahi	92.0	0.335	<0.001
sushubuusyu vuyo-urunvu yumunum-KuKSm sancharanam(Movement of your in unword direction			
producing sound)	93 7	0716	<0.001
Tvak-dauraandhva(had smell from skin)	82.1	0.455	<0.001
Kandu(Itching)	85.2	0 599	<0.001
Stabdha-romkunata(Blockage of hair follicles)	97.9	0.657	<0.001
Tvak-shosha(cracking of skin)	96.9	0.384	<0.001
Sparsha-vaigunva(altered sensation of touch)	99	0.662	<0.001
		0.002	
	040		.0.001

Method of inter-rater reliability testing: Study Design:

This was a cross sectional study combining qualitative and quantitative methods. A total of 95 cases of *Prameha* were included in this study, screened through assesses questionnaire and physician screening format. At each centre both the raters independently assessed the same ten patients of *Prameha* disease using the same Ayurvedic diagnostic proforma. Entrées participating in this study have followed uniform detailed protocol for PDP. The GRRAS (Guideline for Reporting of Reliability and Agreement Studies) guidelines were followed for reporting. Each patient was examined by two Ayurvedic physicians independently. To reduce the chance of confounding, consultation took place on the same day. Before the study, raters were given a training session to achieve as much uniformity as feasible in the methodology and standardization of test procedures. Written informed consent was obtained from all the participants. Steps for inter-rater reliability are shown in flow diagram 2.

	Demonstration	Kanna	1
•	Percentage	карра	
Items	Agreement	value	p-value
Ati-srishtam-mutrayantam (passing excess urine with			
effort)]	86.3	0.633	< 0.001
Ati-baddham-mutrayantam (obstructed urination)]	95.8	0.694	< 0.001
Alpaalpam mutrayantam(dribbling urination)]	95.8	0.727	< 0.001
Abhikshanam mutrayantam (intermittent micturition)]	83.3	0.664	< 0.001
Bahalam mutrayantam (excess urination)]	76.8	0.535	< 0.001
Sashulam mutrayantam (urination with pain)]	95.8	0.692	< 0.001
Chal-sfig-stan-udar (Pendulous buttock-abdomen etc)]	88.4	0.456	<0.001
Anutsaha(Lacking energy/deficient enthusiasm)]	78.9	0.575	< 0.001
[avoparodha (Impairment in movement)]	86.3	0.511	< 0.001
Kricchravyavayata (Difficulty in coitus)]	93.7	0.537	< 0.001
Daurbalya (Weakness)]	84.2	0.453	< 0.001
Vishra-Sarir-gandha (Foul body odour)]	87.3	0.665	< 0.001
Svedabadha (Excessive sweating)]	83.1	0.639	< 0.001
Kshuda-ati-matra(Excessive appetite)]	76.8	0.488	< 0.001
Pipasa-ati-matra (Excessive thirst)]	76.8	0.518	< 0.001
Jhiva-talu-ostha-kantha-kloma-shosham (dryness of tongue.palate.lips.throat)]	89.5	0.783	< 0.001
Ati-pravriddha Pipasa (excessive thirst)	82.1	0.618	< 0.001
Asvedanam(lack of sweating)]	94.8	0.524	< 0.001
Ati-svedanam(excess sweating)]	88.4	0.762	< 0.001
Tvak Parushyam (coarse and dry skin)]	87.4	0.634	< 0.001
Atislakshana Tvak (waxy skin)]	94.8	0.52	< 0.001
Angasya paridaham(burning sensation of body)]	81.1	0.524	< 0.001
Loma-harsha(horripilation)]	97.9	0.489	< 0.001

Table no 6: Category D-Strotas Pariksha (Examination of Strotas)

Study Population:

The disease *Prameha* mentioned in Ayurvedic classics is the population of interest. Patients were enrolled and screened using an Assesses questionnaire (to be filled by the patient) and Physician screening format (Assessed by Physician), specifically designed for screening of *Prameha* patients. Inclusion criteria is '*Prabhuta Mutrata'* which is mandatory for the inclusion of patients. This study intended to differentiate the type of *Prameha* among 20 types of *Prameha* so primarily inclusion of *Madhumehi* patients has been avoided. Initially diagnosed cases, uncontrolled Diabetes Mellitus (with medication/without medication) cases, cases with co-morbidity were also considered for enrollment. Cases with controlled diabetes were excluded from the study.

Study Setting: The study was conducted in OPD of ten peripheral institutes of CCRAS in India.

	Doncontogo	Vanna	
	Percentage	карра	_
Variable	Agreement	value	p-value
Intermittent occurrence of symptoms of kaphaavarana	71.6	0.424	< 0.001
Intermittent manifestation of symptoms of Pitta avarana	78.9	0.249	0.015
Kapha- medo-prakopakar-aahara- Vihara (diet and			
lifestyle exaggerating meda and Kapha)	73.7	0.457	< 0.001
Pitta –rakta-prakopakara-ahara-vihara (diet and lifestyle			
exaggerating Pitta and Rakta)	81.1	0.439	< 0.001
Pramehapidaka (95.8	0.479	< 0.001
Sthoola to madhyamasareera(75.7	0.412	< 0.001
Atisnigdha	91.6	0.454	< 0.001
Mahashana	91.6	0.553	< 0.001
Visible dhatukshayam(karshyam)	93.7	0.749	< 0.001
Very chronic	89.5	0.704	< 0.001
Patient following ruksha- laghuahara	92.6	0.765	< 0.001
Restricting all types of snigdhaahara-vihara	92.6	0.655	< 0.001
Agantunidana such as abhigata, surgery, rogaetc following			
which disease manifested	94.7	0.426	< 0.001
Balakshaya	81	0.543	< 0.001
Atiruksha	95.8	0.478	< 0.001
Alpashana	97.9	0.822	< 0.001

Table no 7: Category E-Samprapti

Inter-rater reliability data collection:

Data was collected through separate Google forms of PDP, submitted by both the raters independently. Information provided by each centre included data related to PDP along with urine examination (Routine and Microscopic) and blood examination reports, images related to urine examination.

Assessment Criteria:

Specifically designed and developed Prameha Diagnostic Proforma (PDP) was used for assessment. The outcome variables in the proforma were clearly defined and consisted of binary/dichotomous responses (Yes/No or present/absent). All the assessments were done as per the instructions given in the manual of the disease proforma. All the raters were trained for the use of proforma, have independently assessed each item for presence or absence of the clinical entity to determine inter-rater reliability.

Table no 8: Category F-Upadrava	observations on Complications)

	Percentage		
Items	Agreement	Kappa value	p-value
Upadrava (Complications)	68.4	0.085	0.402
Makshiko-upsarpanam (Attraction of flies towards excreted			
Urine)]	95.8	0.795	< 0.001
Alasya (Laziness/lethargy)]	77.9	0.39	< 0.001
Mamsopchaya(Growth of fleshes)]	92.7	0.188	0.051
Pratishyaya (Rhinitis)]	97.9	0.888	< 0.001
Shaithilya (laxity of muscle and body)]	71.6	0.425	< 0.001
Arochka (Anorexia/loss of taste)]	88.5	0.295	0.002
Avipaka(Indigestion)]	90.5	0.72	< 0.001
Kapha-praseka(excess salivation)]	94.7	0.732	< 0.001
Chhardi (Vomoting)]	97.9	0.657	< 0.001
Nidra (Sleepiness)]	82.1	0.626	< 0.001
<i>Kasa-sa-pinasa</i> (Coughing with sputum)]	94.7	0.417	< 0.001
Swasa (Dyspnoea/breathlessness)]	98.9	0.954	< 0.001
Tridoshaja Pidika(Presence of Carbuncle)]	97.9	0.492	< 0.001
<i>Vrishanyo-avadaranam</i> (breaking type of pain in scrotum)]	-	-	-
Basti-bheda (breaking type of pain over bladder)]	97.9	0.789	< 0.001
Medhra-toda(Pain over Penis)]	97.9	0.492	< 0.001
Hrid-shula (cardiac Pain)]	95.8	0.314	0.001
Amlika (Sour belching)]	82.1	0.534	< 0.001
Jvara(fever)]	97.9	0.489	< 0.001
Atisara/vidbheda(Diarrhoea)]	96.9	0.384	< 0.001

Arochaka (Anorexia/loss of taste)]	88 5	0.29	0.005
Vamathy (Vomiting)]	97.9	0.657	< 0.001
Paridhupana (Feeling of warmth all over body)]	93.7	0.538	< 0.001
Daha (burning sensation like burn)]	86.3	0.5	< 0.001
Murcha(loss of consciousness)]	95.8	0.321	< 0.001
Pipasa (exceesive thirst)]	74.8	0.483	< 0.001
<i>Nidra-nasa</i> (loss of sleep)]	81.1	0.572	< 0.001
Pandu roga(presence of Pallor)]	98.9	0.883	< 0.001
<i>Pita-vid-mutra-netra</i> (yellowish discoloration of stool, urine and			
eyes)]	96.8	0.712	< 0.001
Pidaka(Tridoshaja)]	-	-	-
Tridodshaja pidika (Presence of Carbuncle)]	99	0.662	< 0.001
Hrid-graha (Feeling of tightness in cardiac region)]	99	0.662	< 0.001
Laulya (excess desire to all type of taste of food)]	91.6	0.645	< 0.001
Anidra (loss of sleep)]	81	0.576	< 0.001
Stambha(Feeling of stiffness in body)]	87.4	0.386	< 0.001
<i>Kampa</i> (involuntary movement like tremors)]	95.8	0.645	< 0.001
Shula(Any type of pain in body)]	74.7	0.469	< 0.001
Baddha purisha(Hard stools)]	87.4	0.682	< 0.001
Shosha (Emaciation)]	90.5	0.655	< 0.001
[Kasa(cough)]	96.8	0.711	< 0.001
Svasa (Dyspnoea/breathlessness)]	93.7	0.734	< 0.001
Udavarta (upward movement of Vata)]	88.4	0.578	< 0.001
Tridoshaja Pidika (Presence of Carbuncle)]	96.9	0.39	< 0.001

Sample Size: Total sample size of the study is 100, with 10 participants at each centre (10 centres). Assuming that at least 50% (p_0) of the raters could correctly identify the Prameha patients without using the questionnaire.By using the questionnaire an improvement of 15% in the diagnosis is expected that is 65% (p_1). For achieving 80% power with 95% confidence interval, a sample of 85 will be needed. Adding a non-response rate of 15%, the required sample size for the study is 98 (rounded off to 100).

Table 10 9: Category G-Midunu Analysis				
	Percentage	Карра	р-	
Variable	Agreement	value	value	
Pituh Kulaja Svabhava(Genetic predisposition from				
Paternal side)	97.9	0.948	< 0.001	
Maatuh Kulaja Svabhava(Genetic predisposition from				
Maternal side)	96.8	0.933	< 0.001	
Yauvan-Pravyakti bhav(Disease manifested in early age,				
preferably before 18-20)	95.8	0.314	0.001	
Alpashi (Habituated to eating less)	93.7	0.749	< 0.001	
Bhrisha Pipashu (Excess thirst)	77.9	0.548	< 0.001	
Parisaranshila (Restless disposition)	84.2	0.479	< 0.001	
Alpa-hetu (Hardly any evidence of apathyasevan)	84.2	0.463	< 0.001	
[निदानपरिवर्जनेनैववाअल्पसुखोत्पत्तिः/Less response to				
pathya or nidanaparivarjana in symptoms]	84.2	0.551	< 0.001	
अपथ्यनिमत्तज / Factors supporting Apathyanimittaja				
[प्रायेणस्थूलः /Predominantly obese or over weight]	88.4	0.734	< 0.001	
अपथ्यनिमत्तज /Factors supporting Apathyanimittaja				
[प्रायेणस्निग्धः /Predominantly unctuous]	76.8	0.457	< 0.001	
अपथ्यनिमत्तज / Factors supporting Apathyanimittaja				
[प्रायेणबह्वाशी /Habit of overeating]	73.7	0.427	< 0.001	
अपथ्यनिमत्तज / Factors supporting Apathyanimittaja				
[शय्यासनस्वप्नशीलः/Habit of always resting, sleeping or				
sitting without any physical activity]	73.7	0.467	< 0.001	
अपथ्यनिमत्तज / Factors supporting Apathyanimittaja				
[प्रमेहःहेतुःसेवनःIndulgence in pramehahetu]	72.7	0.276	0.007	
उभयनिमित्तज /Factors pointing to role of both sahaja&	92.7	0.852	< 0.001	

apathyanimittaja [कुलजस्वभावः/familial tendency (either			
जभयनिमित्तज /Factors pointing to role of both Sabaja &			
apathyanimittaja [अपथ्याहारविहार H/o			
Nidanasevan(Apathyahara-vihara)]	85.3	0.333	0.001
अतिप्रमाणेननवधान्योपयोगः	69.4	0.394	< 0.001
सर्पिरुपयोगः	69.5	0.333	0.001
ग्राम्यानूप-औदकमांसातिसेवनं	72.6	0.452	< 0.001
इक्षुविकारः	75.8	0.355	< 0.001
गुडविकार:	79	0.515	< 0.001
पिष्टान्नः	73.7	0.472	< 0.001
क्षीरविकारः (क्षीर/दधिः)	70.5	0.368	< 0.001
मधुरद्रव्योपयोगः	69.5	0.355	0.001
नवमद्यः	96.9	0.65	< 0.001
उष्णाहारः	77.9	0.516	< 0.001
अम्लाहार:	82.1	0.623	< 0.001
लवणाहारः	71.6	0.431	< 0.001
क्षारभोजनः	92.6	0.774	< 0.001
कटुभोजनः	80	0.6	< 0.001
अजीर्णभोजनः	83.1	0.237	0.021
विषमाहारसेवनः	82.1	0.536	0.021
कषायभोजन:	-	-	-
कटुभोजन:	66.3	0.324	0.002
तिक्तभोजनः	85.3	0.349	< 0.001
रूक्षभोजन:	84.2	0.516	< 0.001
लघुभोजन:	82.1	0.27	0.007
शीतभोजनः	81	0.21	0.029
अनशनः	92.6	0.333	< 0.001
मृजावर्जनं	85.2	0.379	< 0.001
व्यायामवर्जनं	68.4	0.369	< 0.001
स्वप्नशय्यासनप्रसङ्गः	76.8	0.471	< 0.001
तीक्ष्णातपसेवः	87.4	0.527	< 0.001
आग्नसतापः	88.5	0.29	0.005
श्रम: रेक	75.8	0.391	< 0.001
קסוע:	84.2	0.517	< 0.001
	-	-	-
प्यायामः पञ्चकर्मातियोगः	90.5	0.588	<0.001
संधारण:	87.4	0.437	< 0.001
अभिघातः	-	-	-
उद्वेगः	91.6	0.454	< 0.001
शोकः	82.1	0.625	< 0.001
शोनितातिषेकः	-	-	-
जागरण:	84.2	0.45	< 0.001

Sampling method:

For inter-rater reliability testing, the same patient was examined by both the raters independently on the same day but the sequence of questioning was changed by the second rater to avoid the chance of getting the same answers. Both the raters examined the urine sample separately on the same day without sharing information.

Statistical analysis:

The percentage agreement and kappa coefficient were used to assess the inter-rater reliability of each item in the proforma. The Kappa results were interpreted as no agreement if the value ranges between 0 and 0.20, indicate minimal agreement for values between 0.21-0.39, weak agreement for values ranging between 0.40-0.59, values between 0.60-0.79 indicate moderate agreement, 0.80-0.90 indicate strong agreement and 0.90-0.90 indicate almost perfect agreement [4]. Items were retained only if percentage agreement was more than 70% [5]. SPSS version 28.0 was used to analyze the data. A p-value of <0.05 has been considered as significant.

RESULTS AND DISCUSSION

Two raters were identified at each centre and ten participants were assessed at every nine centres (except 5 participants at one centre) by the two raters independently. Overall, 95 cases were included in the study for statistical analysis.

Raters for inter-rater reliability testing were of the same background with post-graduation in the Ayurvedic system of medicine having 5 to 10 years of clinical experience in the desired disease condition. Before the study initiation, raters were given a training session to achieve as much uniformity as feasible in methodology and standardisation of test procedures, during which each item on the diagnostic criteria list was rated on its presence or absence. The total no of participants included in the study analysis were 95, out of which 34 were female and 61 were male.

PDP contains a total of 359 items (PSF-27 and Detailed Proforma-332), out of which 332 items were reported. Consolidated grading of items according to kappa value has been given in Table no 1(a) and domain wise details of percentage agreement and kappa values were in table no 2 to 9)

Physician Screening Format (screening for Prameha): Refer to Table no 1(a) and Table no 2.

This format is used for screening of *Prameha* patients, contains 27 items. All the items were reported, having percentage agreement between 80-95% and kappa value from 0.219 to 0.865 with significant p-values. Out of 27 items, 23 items had good to very good (Almost perfect) agreement having kappa value in between 0.6-1.0 and percentage agreement in between 82.10-95.80%. The variables having good to very good agreement were *Mutra Abhikshanta, Mutra avilata, Mutra Vaivarnya, Mutra daurgandhya, Nidra Tandra cha sarvakalam, Angeshu suptata, Sveda, kar-pada suptata, kar-pada daha, Gatra Gurata, Gatra Daurgandhya, Shithila Angata, Pipasa, Sita Priyatvam, Madhurasyata, kesh and Nakha vriddhi, Mukh-Talu kantha shosha, Vishra Sharira Gandha, Svasa daurgandhya, Talu-gal-jhiva-danta malotpatti and jatilibhaya-kesheshu.*

Detailed Prameha Diagnostic Proforma:

Detailed proforma contains 332 items. All the reported 305 items (27 items of the proforma were not reported for any case by any rater) had percentage agreement ranging from 57.9% to 99.0% and kappa values ranging from 0.059 to 0.95.

Poor level of agreement was found in 10 items viz.normal findings of urine quantity and urine density (within minutes after voiding),nocturnal polyuria, frequent urination with large quantities, *Santapa, Sangya nasha, Sandhi-shaithilya,Asthi-nistoda, Upadrva* and *Mamsa-upachaya*. A fair to moderate level of agreement was found in 213 items and good to very good level of agreement was found in 82 items of PDP. A very good/almost perfect level of agreement was observed in 10 items.

Category wise results: (A to G category):Refer to table no 3 to 9

Category A: Mutra Pariksha (Urine examination)

This category contains 74 items, out of which 10 items (8 items in urine colour subgroup i.e. *Shuklapishtanibham, Shukrabham, Ksharodaka sankasham, Kaal, Neela, Rakta, Vasa, Sarpi* and one in temperature subsection i.e. *Sparsha samanya* and one inflow of urine sub group i.e. *samanya Dhara and Samanya Vega*) were not reported from any rater. All the reported items (64) except one item (normal quantity of urine) had percentage agreement >60, kappa ranging from 0.07 to 0.87. All the items had significant to highly significant *p-values* except 3 items, frequent urination with large quantities, Nocturnal polyuria and urine density (within minutes after voiding).

Category B: Dosha Pariksha

This category contains 60 items out of which 3 items (*Moha, Moorchha* and *Sthairya*) were not reported by any rater. All the items had kappa value >0.20 except 3 items namely *Santapa, Sangya nasha* and

Sandhi shaithilya. Percentage agreement was found >70% in all the items. All the items had significant to highly significant p-values except *Santapa*.

Category C: Dushya Pariksha

This category contains 58 items out of which 7 items (*Hrit-shunyata, Sira-shaithilya, Pleeha-abhivriddhi, Adhyasthi* and *adhidanta, Asthi-shunyata, Alpa-rakta shukra darshanam, Alpa mutrata*)were not reported by any rater. All items had a kappa value >0.20 except one item, *Asthi-nistoda.* More than 70% inter-rater agreement was observed in all the items.

Category D: Strotas Pariksha

This category contains 23 items, all the items were reported in this category with highly significant p-values, >0.40 kappa values and more than 76% percentage agreement.

Category E: Samprapti

All 16 items were reported by the raters having >0.40 kappa values except one item, *Pitta-avaranajanya samprapti* (kappa value, 0.249), >71% agreement and significant to highly significant p-values.

Category F: Upadrava:

This category contains 44 items out of which 2 items (*Vrishana-Avadaran* and *Pidika*) were not reported by any rater. All items had kappa values >0.20 except one item (*Mamsa-upachaya*), percentage agreement >68% and p-values were significant to highly significant.

Category G: Nidana Analysis

This category has 54 items, out of which 5 items (*Kashaya Bhojan, Vyavaya, Panchkarma Atiyoga, Abhighata* and *Shonita-atisheka*) were not reported by any rater. All items had >0.20 kappa values, more than 66 % inter-rater agreement and significant to highly significant p values.

DISCUSSION

This study created diagnostic criteria/tools for Prameha Roga that can be used in clinical practice as well as in clinical trials for research purposes. This criterion contains items selected by extensive literature search and clinical consensus survey among well experienced Ayurveda clinicians. While developing the diagnostic criteria seven domains have been identified namely *Mutra Pariksha, Dosha pariksha, Dushya pariksha, Srotas pariksha, samprapti Nirdharan, upadrava and Nidana vivechan,* this categorization made the proforma more comprehensive as well as more precise for evaluating *Prameha* patients. Inclusion of multiple items is necessary because any single item cannot alone sufficiently evaluate *Prameha Roga* and its subtypes. In this study inter-rater reliability of all possible components for diagnosis of *Prameha Roga* was performed. Inter-rater agreement is best measured using Kappa. Kappa has the advantage of being statistically chance-corrected [6].

Based on percentage agreement values most of the observable items of PDP had slight (fair) to very good (almost perfect) reliability estimates.

Physician screening proforma used for screening of *Prameha patients* includes variables related to *Prameha* cardinal features and *purvarupa*. In this proforma, all 27 items have good reliability estimates. *Mutra Abhikshanta* (percentage agreement - 90.6%, kappa -0.612), Mutra Prachurata (percentage agreement - 93.7%, kappa -0.219) and *mutra avilata* (percentage agreement - 86.0%, kappa -0.668) were important variable in prameha diagnosis all these were reported good reliability estimates with significant p-values. Good to very good agreement was observed in all the variables related to purvarupa of Prameha. These findings were indicating good reliability of physician screening proforma.

Ten (10) items of the proforma had poor inter-rater reliability indicating that these items had less value for clinicians and may be discarded from the proforma once identified. Low kappa value items may indicate that these variables were assessed differently by the raters. In these ten variables having poor reliability, normal findings of urine examination were reported. As these normal findings were not related to the diseased condition, so these items had lower kappa values. *Sangya nasa mamsopchaya* also have poor reliability indicating that these items need to be modified /more clearly defined/discarded.

Those items having fair to the moderate agreement require more subjective judgement than other signs and symptoms or descriptors of these items that needed to be revised.

In *Dosha pariksha* Moha and Moorcha were not reported because in recent times due to advancement in medical care facilities and increased awareness among patients, these symptoms were not observed frequently, also in these conditions' patient requires hospital admission. Dushya Pariksha domain 7 items were not reported indicating less utility for clinicians. All of the items in the Srotas Pariksha domain had a moderate to the high level of agreement. Except for non-reported items, all items in the Samprapti and Nidana domains demonstrated a fair to a very good level of agreement.

Non reported items indicate that either these outcome variables were not reported in recent times when compared with ancient times when medical care facility was low or these items needed to be revised or

these items had less clinical importance. After thorough discussion, these items may be discarded or modified.

CONCLUSION

As per the observations, it can be concluded that PDP is a reliable tool for the assessment and resulting treatment actions in patients of *Prameha roga*. Findings indicate that the PDP is a reproducible tool for clinical assessment and diagnosis on the level of doshas. Removal of unreliable items may produce a shorter more relevant diagnostic tool. Diagnostic parameter's low reliability severely restricts their predictive validity. PDP provides an evidence-based approach to diagnosis and management by which diagnosis of Prameha roga at the level of doshic sub-types may be made accurately.

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