

Heart Disease Diagnosis and Diet Recommendation System Using Ayurvedic Dosha Analysis

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Abstract

The current healthcare system often fails to account for individual health needs, leading to ineffective preventive measures and dietary guidance. Ayurvedic principles, which focus on the Dosha, offer a profound understanding of an individual's constitution, influencing their health, vulnerability to specific diseases, and ideal dietary choices. This paper explores the evolving intersection of ancient Ayurvedic wisdom and modern technology in the realm of disease diagnosis. Ayurveda, with its emphasis on personalized well-being, has long been a source of holistic health practices. In this context, the study delves into the intricate system of Ayurvedic Dosha analysis and its potential applications in contemporary healthcare. The research introduces an innovative way that seamlessly integrates traditional Ayurvedic pulse examination with state-of-the-art technology. By employing pulse sensors and advanced algorithms, the system not only identifies specific ailments but also classifies patients into Ayurvedic Prakriti types. Going beyond conventional diagnosis, this holistic approach extends to personalized recommendations, encompassing diet, lifestyle, Ayurvedic treatments, exercise, and daily routines. While addressing the challenges of harmonizing ancient principles with modern technology, the paper also presents the performance metrics of the model. The accuracy rates are as follows: Logistic Regression (LR) - 85.94%, Random Forest - 89.21%, Decision Tree - 99.70%, and k-Nearest Neighbors (KNN) - 86.43%. These metrics underscore the robustness of the system. In addition to outlining core concepts, methodologies, and model accuracies, the study explores current trends and recent developments in the field, offering readers a comprehensive understanding of Ayurvedic Dosha-based disease diagnosis. The research contributes to the broader discourse on healthcare by paving the way for early detection and individualized, holistic well-being for patients.

Keywords: Ayurveda, Disease diagnosis, Dosha analysis, Machine learning, Nadi Parikshan

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1. Introduction

The "Heart Disease Prediction and Diet Recommendation through Dosha Analysis" initiative aims to improve health by combining contemporary data analysis and machine learning methods with Ayurvedic knowledge. The Dosha, consisting of Vata, Pitta, and Kapha, serves as a foundational

framework for individualized treatment and nutritional advice. The current healthcare system often fails to account for individual health needs, leading to ineffective preventive measures and dietary guidance. Ayurvedic principles, which focus on the Dosha, offer a profound understanding of an

individual's constitution, influencing their health, vulnerability to specific diseases, and ideal dietary choices. The research uses advanced data analysis, machine learning, and Ayurvedic knowledge to bridge this gap and provide a proactive approach to health management. The ultimate goal is to improve heart disease prevention and management by providing tailored insights and actionable advice derived from Ayurveda and contemporary medical developments. This innovative fusion of technology and conventional wisdom has the potential to fundamentally alter the way we think about health and well-being.

Harshi Pogadadanda's study in [1] highlights the challenge of interpreting pulse data in Ayurvedic medicine. A proposed solution uses Internet of Things sensors and machine learning algorithms for remote patient diagnosis, bridging the gap between traditional and modern technologies. The study [2] suggests that the radial artery, a vital diagnostic tool in ancient Ayurvedic medicine, could be a modern, non-invasive examination for various illnesses. Sonali Joshi et-al research in [3] uses hardware, software, and artificial neural networks to analyze pitta vata and kapha pulses to determine an individual's Prakriti, utilizing various tools. Nadi Pariksha in [4] uses an Ayurvedic diagnostic method, it uses pulse signal analysis to identify disease causes. A healthcare monitoring system uses pulse signals to assess patients' conditions. Nidhi Garg, Ramandeep Kaur's in their paper [5] on pulse diagnostics emphasizes the importance of selecting suitable, quantifiable sensors for accurate disease identification, ensuring a straightforward, affordable, and reliable system design. The study by Bheemavarapu, Rani, et al. reviews machine learning models for Ayurvedic Prakriti identification through Prasha Pariksha, highlighting the need for more comprehensive research, open datasets, and standardized questionnaires. The study in [7] evaluates machine learning models for predicting body composition in Ayurveda, achieving an accuracy of 0.95 using CatBoost with optimization, a novel approach to identifying Ayurvedic doshas. Choudhury, Majhi et al. conducted a study using biomarker data from the Fox Insight dataset to assess participants' motor and nonmotor skills related to Parkinson's disease. Nadi Pariksha, an ancient Ayurvedic medical examination, is used in [9] for assessing pulsatile bioelectric response (PBER) of cells using the energy vibration method (EPP). This analysis can help evaluate Tridosha and measure bioenergetics. The research paper [10] proposes a pulse diagnostic system using three sensors for wrist detection, a Tektronix MSO 2014 oscilloscope, and real-time monitoring using LabVIEW myRIO software.

1.1 Related work

We conducted a thorough literature analysis as the first step in our investigation into the field of ayurvedic dosha analysis,

ensuring that our findings were supported by a wide range of reliable sources. Our main attention was focused on carefully reviewing study report and the previous researches and accomplishing the highest level of authenticity on the sources.

We began by reading the study by Harshi Pogadadanda in [1], which discusses how difficult it is for contemporary Ayurvedic practitioners to interpret pulse data correctly. Experts in Ayurvedic medicine have long evaluated a patient's health by feeling their right hand's radial pulse, which is located beneath the wrist. This pulse is referred to as the "radial pulse" or Hasta Nadi and is thought to be the best pulse for thorough pulse measurements. In order to alleviate the challenge faced by contemporary Ayurvedic physicians in precisely interpreting these pulse values and administering appropriate treatment, a suggested solution utilizes Internet of Things sensors and predictive machine learning algorithms to facilitate remote patient diagnosis. A wearable device collects patient data continuously, uploading it to Amazon Web Services (AWS) for processing and archiving. This data is then used by machine learning models to produce treatment suggestions for physicians and other healthcare professionals, allowing for more precise and knowledgeable healthcare decisions. In order to improve patient treatment, this strategy seeks to close the gap between conventional pulse diagnostic and contemporary technologies.

The second study, authored by Dr. Prof. A. B. Kakade et-al, extensively presented instances from historical texts illustrating the diagnostic potential of a person's pulse in identifying various illnesses. In contrast to contemporary clinicians who focus on pulse rate, rhythm, and volume, ancient practitioners heavily relied on clinical experience for conclusive diagnoses. The proposal suggests that the radial artery, studied by Ayurvedic doctors and others, could become an important tool in diagnosis if it could be examined in a modern, non-invasive way.

As per the findings presented in Sonali Joshi's research [3], an individual's pitta vata and kapha pulses are captured, documented, and subjected to analysis for the determination of their Prakriti (health stat.). The hardware arrangement comprises a front-end amplifier, a swiftly programmable analog-to-digital converter, and a sophisticated PIC microcontroller seamlessly linked with the host system. The primary objective of the intricate software is to record these pulses and store the data in a text file (.txt). The design process utilizes tools such as OrCAD, MATLAB, Visual Studio, and Pro-Mikroc. During the feature extraction phase, consideration is given to the frequency spectrum of the recorded VPK pulses. An artificial neural network classification procedure employs the output matrix to further categorize an individual's Prakriti.

Nadi Pariksha, commonly known as pulse diagnosis, is an Ayurvedic diagnostic approach employing pulse signal analysis to identify the root causes of diseases based on Tridosha. In their research, M. C. Chinniah and Sanjay Dubey et al. delve into the intricacies of this method. Specialists leverage this time-honored technique to assess a patient's condition and offer customized care, a crucial aspect in the current context of health monitoring. This paper introduces a healthcare monitoring system designed to continuously capture pulse signals through sensors. The aim was to determine the predominant dosha through a comparison of the Pitta, Kapha and Vata signal amplitudes over time. The behaviour of these doshas was assessed for three individuals during each session in order to monitor the subjects' health. The evaluations were then uploaded to an IoT cloud platform for consultation with Nadi Vaidhya, or Ayurvedic doctors. Moreover, repeating frequencies of these doshas in two participants were estimated, which allowed the dominating dosha at different sessions to be identified using the biological clock. The research underscores the importance of mean values for , Pitta, vata and Kapha within the age bracket of 41 to 50

The research by Nidhi Garg, Ramandeep Kaur, and others in [5] covered research on pulse diagnostics. In this publication. Radial signals were typically recorded using sensors. It is important to choose the right sensors for this activity. It is imperative that the sensors be able to be quantified. Different aspects were taken from the signal to identify illnesses. Several methods were employed to extract characteristics. Even though the goal was the same, different diseases required varied accuracy levels, which were attained by various ways. A key factor in system design is having a straightforward, reasonably priced, and dependable instrument that can be quantified

The study by Lakshmi Bheemavarapu, K. Usha Rani et. al. is based on the literature pertaining to the utilization of machine learning models in Ayurvedic Prakriti identification through Prasna Pariksha has been thoroughly reviewed. This paper encompasses a detailed examination of machine learning concepts, Ayurveda, the necessity for the advancement of machine learning models for disease diagnosis and Prakriti identification, as well as an overview of existing literature concerning Prakriti identification via Prasna Pariksha. Given the limited extent of research conducted in this domain, there arises a compelling demand for more comprehensive investigations. There is a pressing need for the development of more precise machine learning models for Prakriti identification, particularly in light of the absence of openly available Ayurvedic datasets. Additionally, the creation of an open dataset dedicated to Prakriti identification is deemed essential. Furthermore, the establishment of a standardized

questionnaire for Prakriti identification via Prasna Pariksha is also considered a crucial requirement.

Produced by Anjali Goyal, Vishu Madaan and others in [7] delves into Ayurvedic principles regarding the composition of the human body (prakriti) and the role of the Tridosha doshas (kapha pitta and vata) in determining the body and emotional labour. The main aim of this study is to evaluate the effectiveness of various machine learning models in predicting body composition according to Ayurveda. The survey was developed in collaboration with medical experts. After that, the user's data is collected, analysed and prioritized. With or without hyperparameter tuning, different machine learning methods are used, such as K-Nearest Neighbor, Artificial Neural Networks, Support Vector Machine, Naive Bayes, Decision Trees, XG-Boost and CatBoost. Comparing the performance of these methods, this study achieves an accuracy of 0.95 using CatBoost with optimization. The novelty of this study is that it uses advanced machine learning to identify Ayurvedic doshas.

Research by Bishnu Choudhury, Vinayak Majhi et al. involves selecting participants based on appropriate biomarker data from the Fox Insight (FI) dataset funded by the Michael J. Fox Foundation. The FI database contains various classifications of information related to Parkinson's disease (PD). Self-reported information on motor and nonmotor skills related to Parkinson's disease was obtained from data sheets labelled "Your motor experience" and "Your experience knowledge is not motor." Exercise data were obtained using the MDS-UPDRS II scale, and non-exercise data were obtained using the MDS-NMSQ scale (16, 18).

Radial pulse measurement was performed using Nadi Pariksha, an ancient Ayurvedic medical examination revisited in a study by Kulkarni Dattatraya and Doddoli Suchitra et al. It recommends assessing the pulsatile bioelectric response (PBER) of cells with the energy vibration method (EPP), a product of Nadi Pariksha. The different pulse patterns result from the collision of weak PBER with nerve vibrations. In the conceptual model, phase angle, bioimpedance, and bioreactance are all elements of the relationship. This relationship can be used to understand the relationship between PEP (pulsating electrical path) and EPP (energy pulsating path). Nadipariksha is an Ayurvedic diagnostic procedure based on this modification. The model shows that evaluation of Tridosha can be done through the analysis of bioelectric variables that represent different energy patterns with specific functions, including bioenergy consumption, distribution and conservation of energy. Nadipariksha's analysis has the potential to be a reliable and reliable way to measure the bioenergetics of the body's entire

vibratory energy distribution in relation to the psychophysiological demon of insight.

In the design of a pulse diagnostic system as described in the research paper by Krittika Goyal and Akhil Gupta et al., three sensors will be used for direct wrist detection. The pulse signal will be received using the FREESCALE MPXM2053D sensor, which works on the piezo resistance principle. The signal generator will be combined with the meter and a Tektronix MSO 2014 mixed signal oscilloscope with 16 CH MSO will be used to view and analyse the amplified signal. The myRIO DAQ card in National Instruments' LabVIEW myRIO 2014 software will be used for real-time monitoring and data will be exported to MATLAB via an Excel spreadsheet. Evaluation of three-channel wrist pulse signals will be used for diagnosis.

1.1 Research gap

The creation of precise and trustworthy dosha analysis techniques is where there is a research void. Conventional Ayurvedic techniques, such as physical characteristic observation and pulse diagnosis, are subjective and have no scientific backing. Research on quantitative and objective dosha evaluation techniques, such as metabolomics, genomic profiling, or other contemporary diagnostic tools, is required.

Integration of dosha analysis with illness diagnosis is another area lacking in study. While Ayurveda recognizes the role of doshas in the genesis of sickness, contemporary research does not provide strong evidence for the specific dosha imbalances associated with certain maladies. To use Ayurvedic principles for a more accurate medical diagnosis, further research is needed to clearly link dosha imbalances to specific disorders.

Moreover, there is a research gap in the field of personalized meal recommendations based on dosha analysis. For people with different dosha constitutions, Ayurveda suggests modifying food to maintain balance and prevent sickness. More research is required to determine how dietary dosha affects health outcomes and to develop evidence-based guidelines for individualized diet recommendations.

In conclusion, there is a study gap regarding the combination of modern disease diagnosis and dietary recommendations with Ayurvedic dosha analysis. More investigation is needed in order to determine the validity of dosha diet recommendations and show a connection between dosha imbalances and certain diseases, as well as provide unbiased techniques for evaluating doshas. Comprehensive and personalized approaches to disease management and prevention can be developed in light of this research gap.

1.2 Novelty and contribution

In particular, the inclusion of traditional Ayurvedic principles with modern data analytics and machine learning techniques has made the research that envisages a Dosha Analysis and Heart Disease Predictive System stand out for its uniqueness and novelty in the area of healthcare technology. This unique combination offers several significant contributions, as listed below. The unique thing about this system is that it offers users a holistic analysis of their health, combining personal dosha insights with precise predictions on heart disease.

1.3.1 Holistic Health Assessment -

An analysis of the user's Dosha type is performed by a system based on Ayurveda techniques to provide an objective and precise healthcare evaluation. Taking into account not only physical features but also psychological and emotional factors, the Dosha Analysis component offers an in-depth view of the user's constitution. By providing more personalized and refined health analysis, this methodology contributes to strengthening the user's relationship with his or her well-being.

1.3.2 Fusion of Ancient Wisdom and Modern Technology –

The initiative is connected to traditional healing practices through newer data-driven approaches, making it possible to combine old Ayurvedic wisdom with current technologies. This combination provides consumers with knowledge of Ayurveda and also allows them to use data analytics and machine learning in order to make accurate health forecasts. In the field of healthcare, this kind of integration should be viewed as an example of multidisciplinary cooperation.

1.3.3 Personalized Recommendations –

The system offers personalized dietary recommendations, workout regimens, lifestyle changes, and Ayurveda treatments for the user according to his type of Dosha. With this personalized guidance, users will be better able to make health and well-being decisions. User motivation and engagement increase as these recommendations are individually tailored, thereby motivating users to lead healthier lives.

1.3.4 Predictive Health Analytics –

With the addition of a module forecasting cardiomyopathies based on logistic regressions, an analytic component has been added to this research. The system uses neural networks to determine the risk of heart disease for

users based on specific health factors. This predictive power, which not only informs the user of possible health problems but also allows timely intervention and preventive measures to take place, greatly contributes to proactive healthcare.

1.3.5 Empowering User Awareness –

One of the main contributions made by this research is to ensure that it provides users with information on health issues. The system provides users with information on their health concerns and the effects of lifestyle choices, which explains the findings of the Dosha analysis and what each piece of advice is based upon. Users who have good knowledge are more likely to be active in their health care, promoting better choices in life and improving general well-being.

2. Proposed system

This study presents a thorough framework for creating a Dosha Analysis and Heart Disease Prediction System, combining contemporary data-driven methodologies with Ayurvedic principles to improve holistic health and well-being. The research starts with requirement analysis, where the main aims are to identify user needs and comprehend research goals. Important elements, including the Dosha Quiz, personalized suggestions, the heart disease prediction module, and the integration of heart rate data, are highlighted. The next steps are data collection and preparation, which include selecting questions relating to dosha and developing techniques for gathering heart rate data for model training.

System design explores the architectural design, separating

frontend and backend elements. It defines the workflow for dosha analysis, recommendation creation, and heart disease prediction and introduces an SQLite database schema for storing user profiles, Dosha Quiz results, and heart rate data. The development of user-friendly interfaces and integration devices for the collection of heart rate data is a next step, which involves using HTML, CSS or JavaScript. Utilizing Ayurvedic methods, the Dosha Analysis component analyses user responses from the Dosha Quiz to identify the predominant dosha type and compute the dosha percentage for in-depth analysis results. Based on the user's dosha type, personalized recommendations provide customized food plans, workout regimens, and Ayurvedic medication recommendations using data processing libraries.

The Heart Illness Prediction Module uses Python modules like scikit-learn to apply logistic regression, handle missing values and feature scaling, and preprocess the heart illness dataset. This module establishes a threshold for probability scores in order to assess whether the user is at risk of heart disease. Integration and testing are essential activities in order to guarantee a smooth communication between the components of the system. In order to identify and correct problems, a comprehensive test is conducted by using unit testing, integration tests as well as user acceptance tests. Training and deployment include setting up the system on a secure server so that users can be informed of the Dosha Quiz, help them assess what has come out of their dosh studies as well as explain recommendations. This study is an excellent basis for the creation of a revolutionary system combining old, Ayurvedic wisdom and contemporary technologies to improve health and well-being. Pictorial representation of proposed system is given in *Fig. 1*.

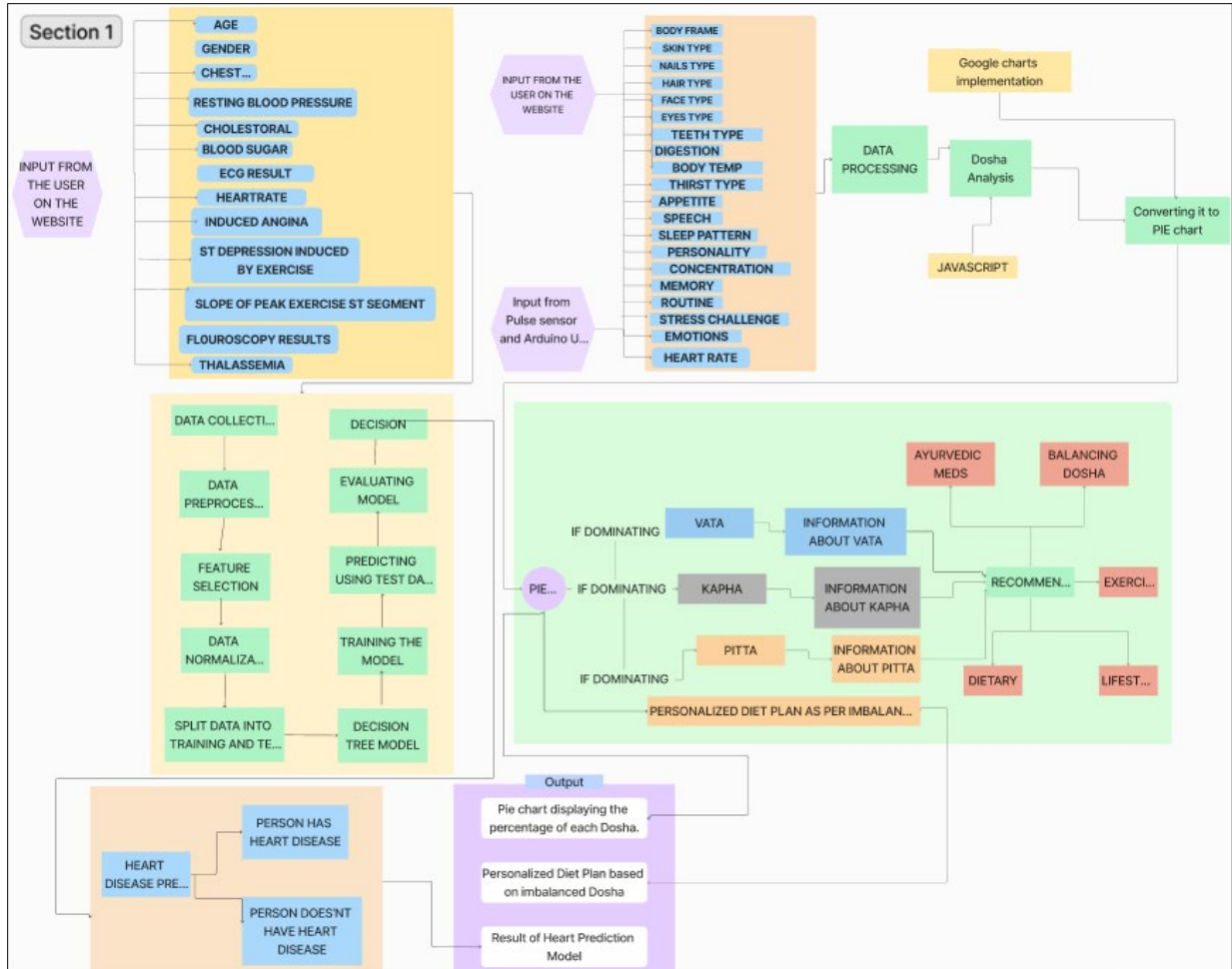


Figure 1. Proposed Diagram

3. Methods

3.1 Hardware Setup

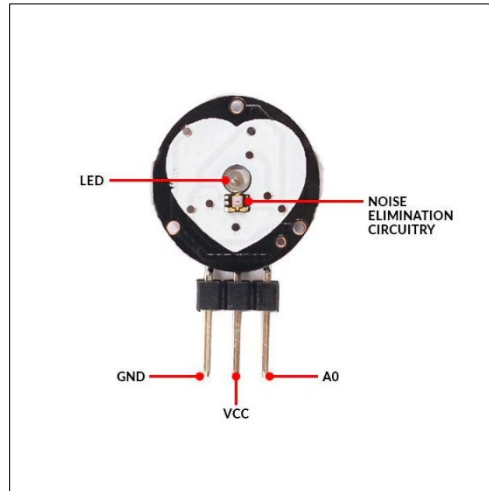


Figure 2. Heart Pulse Sensor

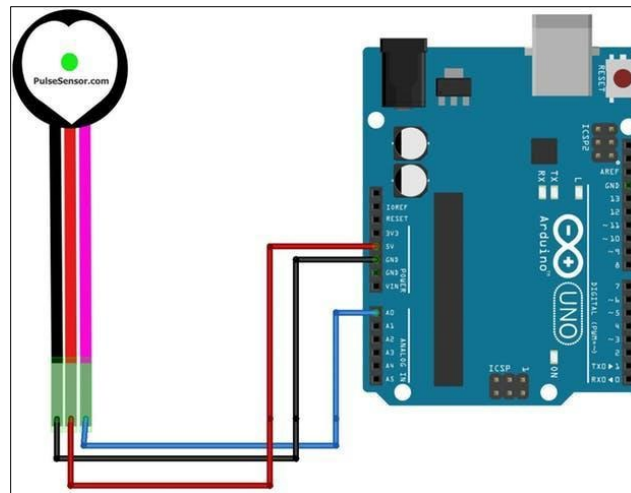


Figure 3. Interfacing of Pulse sensor with Arduino Uno

The Dosha Evaluation and Disease Forecast System possesses a crucial heart rate reader. It operates live. Utilizing a high-grade, light-based technology named photoplethysmography - known as PPG, it monitors minute blood fluctuations in the skin. In this way, heart rates are measured with precision. Forget clumsy bands or belts. The gadget illuminates the skin and uses light-detection devices to determine the light absorption in the blood vessels. The sensor, using these figures, calculates the heart rate. It bases

this on absorption changes caused by blood pressure shifts. Often placed on watches and activity monitors, these sensors have a significant role in health-check tech. In our research, we crafted a complete system. It was meant to collect sensor details instantly. It then transfers this from an Arduino UNO controller to a web platform.

We built a joined-up system put together to collect information from sensors, process it using a microcontroller, and send it safely online. To achieve this,

we used heart pulse sensors *Fig. 2* linked to an Arduino device *Fig. 3*. It helped in gathering vital research facts and figures. The internet connection, made possible by the Ethernet shield built into the Arduino, allowed us to pass sensor information to an online server script. The script dealt with the data coming in and kept it in a data bank. Users found it simple to view their data because of an easily understood interface.

Combining a heart-rate tracker in a Dosha Analysis and Heart disease prediction System is key. The tracker, powered by an Arduino Uno microcontroller module, gathers steady heart-rate details. It works as a bridge between hardware and software. This real-time heart rate information is sent to the Heart Disease Predict unit, giving individual health information to the user. It gives complete health tracking, like constant heart-rate checks. The system gives users accurate, trustworthy heart health data. It uses live body information for better Dosha analyses and heart disease predictions. This preserves health by providing timely health solutions.

Also, the feature called Dosha Analysis and Heart Disease Prediction uses real-time heart rate information in a Dosha Quiz section. It pushes users to strap on matching wristwatches during the test. It gets the user's heart rate, shows it on the screen while they answer a Dosha Quiz

question. Doing this makes the user's experience better and quickly gives them information about their heart health. This helps them understand fitness better. Plus, it works as a fun tool that makes people want to interact and makes it easier for folks wondering about their heart rates. This custom method makes our system better at sharing correct health details. It supports proactive healthcare and overall wellness.

3.2. Quiz Website

Using common web development technologies like HTML, CSS, and JavaScript, a user-friendly platform was created to start the development of the web-based Dosha Analysis and Diet Recommendation System. Our main goal was a smooth experience for the user. We focused on making the system work well on different devices. It also had to get along with today's Internet browsers. The Dosha Quiz, a key element of the system, is intended to gather data from users about their lifestyle, food preferences, physical and mental attributes, and other aspects pertinent to Ayurvedic dosha analysis. This test has multiple-choice questions, each carefully constructed based on Ayurveda *Fig. 4*. These questions help figure out the user's dosha type. Using Ayurveda, a special method was made to identify Vata, Pitta, or Kapha dominance. The method scores your answers related to each dosha.

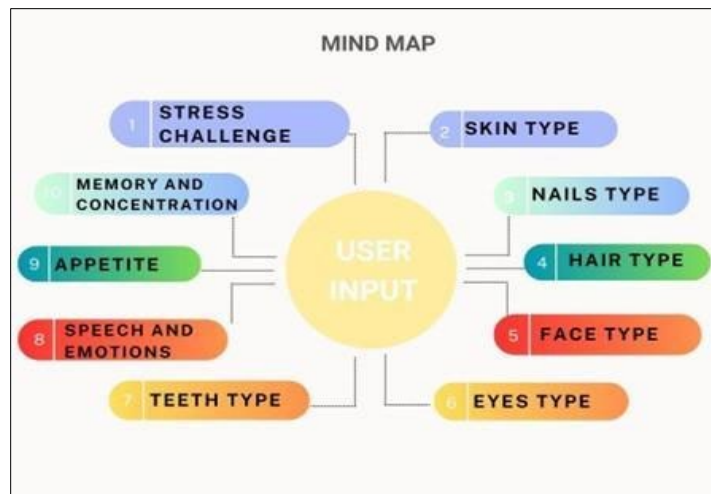


Figure 4. Inputs taken from user inn form of quiz for analysing percentage of each Dosha – Vata, Pitta and Kapha

Based on Ayurvedic principles, an algorithm was created to ascertain the user's dosha constitution. Each dosha (Vata, Pitta, and Kapha) is given a score by this algorithm, which considers the user's answers to questions related to each dosha. The system then determines which dosha(s) are prevalent in the user's constitution and evaluates how balanced or unbalanced these doshas are in relation to each other. A JavaScript function is used by the system to

dynamically construct a personalized wellness plan after the user's dosha constitution and imbalances have been determined. This plan is carefully designed to rectify the dosha imbalances that have been found, and it includes detailed suggestions for a number of areas. These include dietary adjustments, yoga and exercise regimens based on the user's dosha constitution, mindfulness and meditation techniques that support mental and emotional well-being,

and lifestyle adjustments that adhere to Ayurvedic principles regarding daily routines and sleep patterns. The steps involved in Dosha Analysis are depicted in **Fig. 5**.

Apart from offering customized suggestions, the platform gives users access to an extensive library of Ayurvedic teaching materials. Through the exploration of articles, videos, and expert insights, this educational component enables users to get a deeper grasp of doshas, Ayurvedic concepts, and holistic health practices.

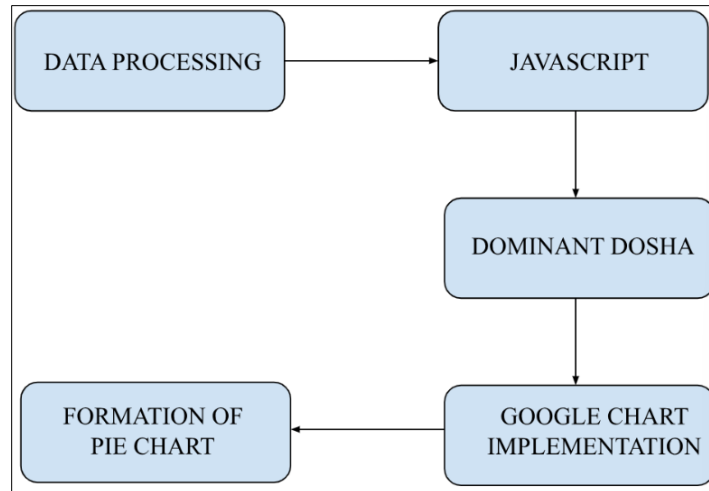


Figure 5. Steps involved in Dosha Analysis

Individuals possessing diverse knowledge about Ayurveda took the Dosha Quiz. They explored the advice offered. The device's ability to identify dosha fluctuations was evaluated. We accomplished this by assessing the feedback and data from users. This involved procedure employs savvy technology for a custom wellness check. It matches this with Ayurvedic principles to promote overall health. The system recommends exercise, dietary plan, lifestyle modifications to balance the imbalanced Doshas.(refer to Fig.6.1)

To enhance the system's relevance and acceptance across diverse cultural contexts, we incorporated several strategies:(refer to Fig.6.2)

- **Cultural Sensitivity in Design:**The system's design was mindful of varying cultural attitudes towards Ayurveda. In regions where Ayurveda is a longstanding tradition, the system integrates seamlessly with established health practices. In contrast, for areas with less familiarity with Ayurveda, we emphasize the scientific aspects of the technology to bridge the gap between traditional and modern approaches.
- **Regional Adaptation:**Users are prompted to provide information about their geographic region during the registration process. This data helps us tailor the Dosha Analysis and recommendations according to

regional cultural norms and health practices. Understanding the user's geographic background allows us to offer culturally appropriate advice and ensure the system's recommendations are relevant and respectful of local traditions.

- **Client Feedback and Customization:**We collected feedback from users with diverse levels of familiarity with Ayurveda to evaluate the system's cultural appropriateness and effectiveness. This feedback guided adjustments to the platform, ensuring that the recommendations align with users' cultural expectations and practices.
- **Educational Outreach and Adaptation:**Tailored educational materials and outreach efforts were developed to address cultural variations. This included creating context-specific explanations of how the integration of Ayurveda with modern technology can benefit users and how it aligns with their cultural beliefs.

By integrating cultural considerations into the system's development and implementation, we aim to enhance its acceptance and effectiveness across different regions. This approach ensures that the system not only provides accurate health insights but also respects and aligns with the diverse cultural contexts of its users.

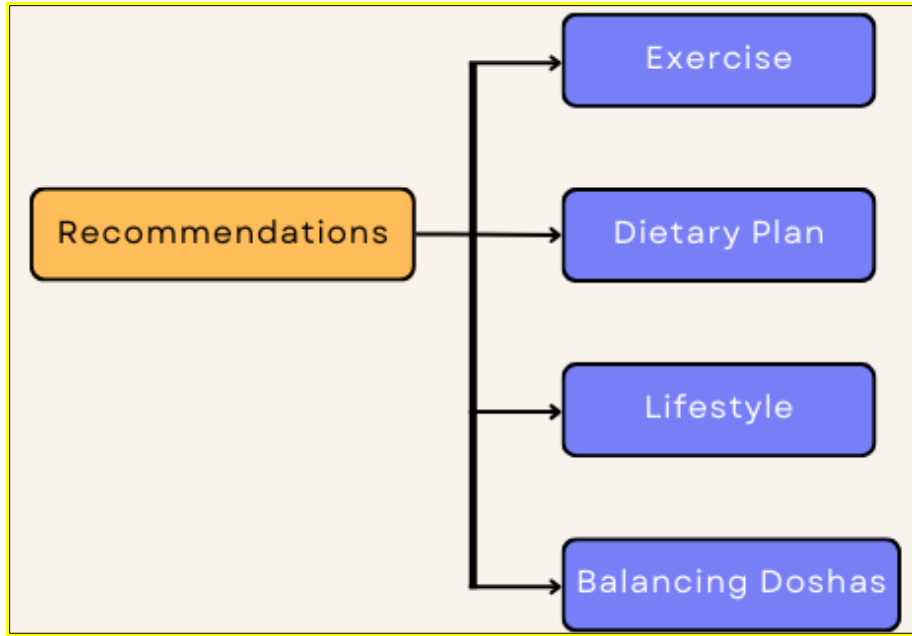


Figure 6.1 Recommendations given based on Dosha Analysis

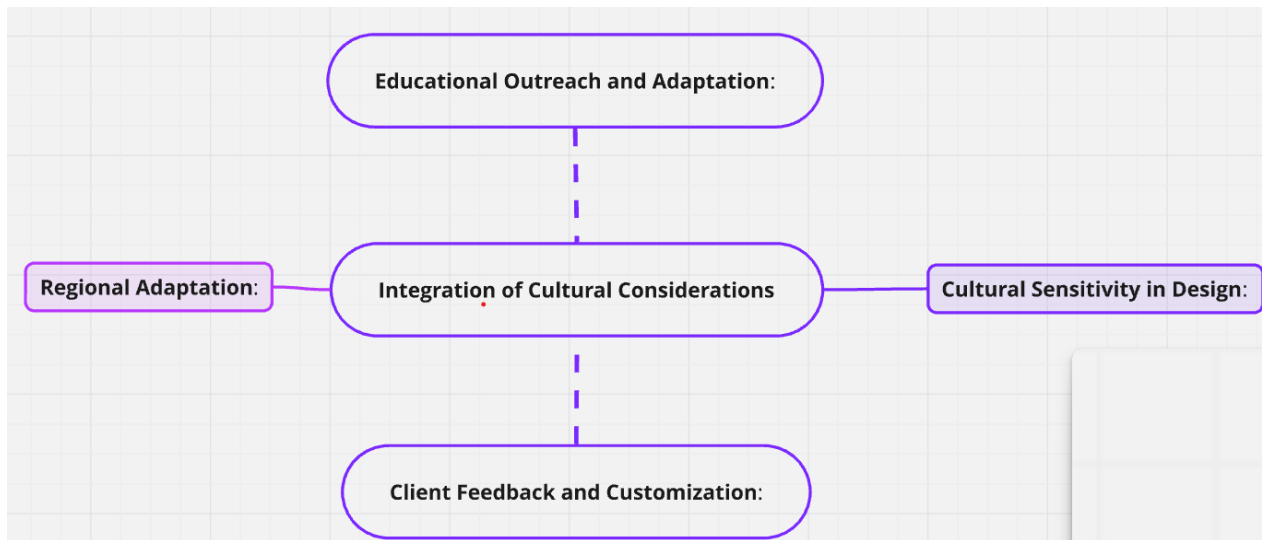


Figure 6.2 Cultural Implications:

3.3. Integration

1. Hardware Integration: The core hardware components of the system include pulse sensors and an Arduino UNO microcontroller. The pulse sensors, which utilize photoplethysmography (PPG) technology, are directly interfaced with the Arduino UNO through its analog input pins. This setup allows the sensors to continuously monitor minute fluctuations in blood volume, which are indicative of the heart rate. The Arduino UNO is connected to an Ethernet

shield, which provides network connectivity capabilities. This Ethernet shield is crucial as it enables the Arduino to communicate over the internet, facilitating data transfer from the sensors to a remote server.

2. Data Transmission: The process of data transmission begins with the Arduino’s conversion of the analog signals from the pulse sensors into digital data using its built-in analog-to-digital converter (ADC). This digital data, representing heart rate measurements, is then formatted into a standardized data format such as JSON, ensuring

compatibility with web technologies. Using the Ethernet shield, the Arduino sends HTTP requests containing the formatted heart rate data to a designated web server. This step ensures that the real-time health data collected by the sensors is securely transmitted to the backend system for further processing.

3. Server-Side Handling: Upon reaching the web server, the incoming data is received and processed by server-side scripts. These scripts handle various tasks including data validation, formatting, and storage. The processed data is then saved into a database, which serves as a central repository for all incoming health data. This database is integral for managing and retrieving user-specific data, facilitating further analysis and integration with other system components.

4. Integration with Machine Learning: The stored heart rate data is utilized as input for machine learning models to derive actionable insights. In the feature extraction phase, relevant characteristics from the raw data are identified and prepared for analysis. These features might include heart rate variability, average heart rate, and other pertinent metrics. The machine learning models use this processed data to perform tasks such as predicting the risk of heart disease or assessing dosha imbalances. The predictive capabilities of these models are essential for providing users with personalized health recommendations based on their real-time heart rate data.

5. User Feedback: The final step in the integration process involves presenting the results to users through a web-based interface. The insights derived from the machine learning models, along with the real-time heart rate data, are displayed to users in an easily understandable format. This interface provides personalized health recommendations, including diet adjustments and lifestyle changes, based on the user's heart rate data and dosha analysis. By integrating real-time health monitoring with user feedback mechanisms, the system enhances user engagement and supports proactive health management.

3.4. Prediction Model Using Decision Tree

In the Dosha Analysis and Heart Disease Prediction System, a decision tree model is utilized as a predictive analytics tool for heart disease prediction. In this context, the decision tree model is employed for binary classification, where the goal is to predict whether a user is at risk of heart disease (1) or not (0) based on specific health parameters. The architecture of Decision Tree is given in *Fig. 7*.

The Decision Tree algorithm's architecture can be outlined as follows:

1. Training Phase:
 - Input Data: In the training phase, you provide the Decision Tree algorithm with a labelled dataset. Each data point consists of a feature vector (attributes) and a corresponding class label for classification tasks or a target value for regression tasks.
 - Tree Construction: The algorithm begins by selecting a feature from the dataset that best splits the data into distinct groups. This selection process is typically based on criteria like Gini impurity (for classification) or mean squared error (for regression). The chosen feature becomes the root of the tree.
 - Recursive Splitting: A tree is constructed through a recursive process. The algorithm divides the data into smaller subsets at each node (including the root) by choosing a different feature. The point at which more impurity or error reduction improvements are not feasible are examples of halting conditions that may be met by this method.
 - Leaf Nodes: The phrase "leaf node" or "terminal node" refers to the tree's terminal nodes. These nodes represent the final predicted class label (for classification) or target value (for regression) for the data points that reach them.

2. Prediction Phase (Classification):

During the prediction phase in classification tasks: A new, unlabelled data point is provided. Using the feature values of the new data point, From the root of the tree to a leaf node, the Decision Tree algorithm climbs.

3. Prediction Phase (Regression):

In regression tasks, the prediction phase involves: Providing a new input feature vector. The Decision Tree algorithm searches the tree for the leaf node that matches the new data point's feature values. The expected target value is frequently determined by taking the mean (or median) of the target values of the training data points that arrived at that leaf node.

4. Decision Criteria:

Decision Trees use different criteria to evaluate how well a feature splits the data. Gini impurity and entropy are frequently employed as classification criteria, and mean square error is frequently used as a regression criterion.

5. Pruning trees:

Particularly when they are deep and catch noise in the data, trees can be vulnerable to overfitting. Techniques for pruning trees can be used to streamline the tree and lessen overfitting. Pruning entails cutting off branches (subtrees) that don't considerably increase forecasting precision.

6. Handling Categorical and Continuous Features:

Different algorithms exist for selecting the best split point for continuous features, such as the binary split and multiway split.

7. Visual Representation:

Decision Trees are continuously visualized as tree structures, with each node denoting a feature and each branch split based on the value of a feature

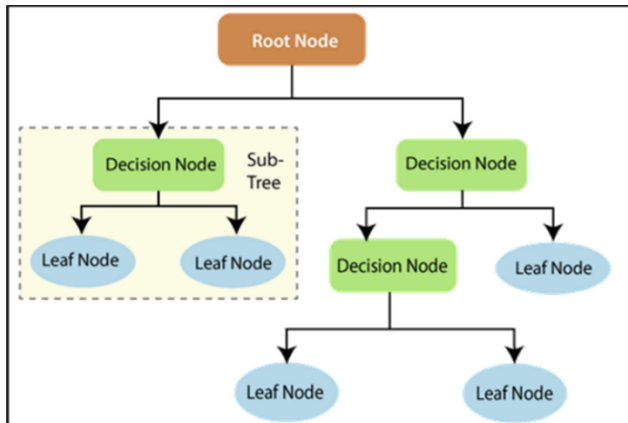


Figure 7.1. Architecture of Decision Tree

Data is sorted using a decision tree by repeatedly going through a division process into smaller groups according to the characteristics of the data. At each point, the tool chooses the optimal property to split the data into. The largest possible decrease in misunderstanding regarding the target variable is the goal. In this case, it's the existence or absence of heart disease. The splitting keeps going until no more division is possible or set rules are met. The outcome is a tree-like outline. Each inside point stands for a property. All branches show a decision based on that property. And each endpoint shows the expected class label.

In this setup, an information tree form is taught using past health-specific data. This data encompasses elements like age, cholesterol measures, blood pressure, and more. These different factors are then closely examined, which lets the data tree formula create forecasts about someone's potential for heart disease. When making a forecast, certain health details specific to the user are placed into the well-learned information tree. The formula uses this tree's layout to give out a two-way forecast: the user either has a heart disease risk, or they don't.

In this situation, decision trees come in handy. Why? Because they're clear to understand! This allows doctors and users to see what influences the final answer. Moreover, decision trees can work with numbers and categories, which makes them handy for including many health details in the forecasting process. This model's openness and preciseness are vital to the Dosha Analysis and Heart Disease

Forecasting System. It helps users understand their heart health and act ahead based on the system's forecasts.

3.5. Data Security Measures for the Dosha Analysis and Diet Recommendation System (refer to fig.7.2)

1. Encryption

- Data Transmission Encryption: For our Dosha Analysis and Diet Recommendation System, all data transmitted between users and the server is encrypted using Secure Sockets Layer (SSL) technology. SSL provides a secure channel over the internet by encrypting the data, such as quiz responses and personal details, during transmission. This ensures that sensitive information is protected from interception by unauthorized entities during data exchange.
- Data at Rest Encryption: Data stored on our servers, including user profiles, quiz results, and personalized wellness plans, is encrypted using Advanced Encryption Standard (AES). AES is a widely recognized encryption algorithm that protects stored data by converting it into a secure format. This encryption prevents unauthorized access and ensures that user information remains confidential even if storage systems are compromised.

2. Access Controls

- Role-Based Access Controls (RBAC): We implement

RBAC to manage access to different parts of the system based on user roles. For instance, only authorized personnel such as administrators and support staff have access to sensitive user data and system settings. Regular users can only access their own quiz results and wellness plans. RBAC helps in limiting exposure and ensuring that only those with appropriate permissions can view or modify critical data.

- Granular Permissions: Within RBAC, granular permissions are set to control specific actions users can perform. This means that roles are assigned precise permissions for viewing, editing, or deleting data. This detailed control minimizes the risk of accidental or unauthorized data manipulation.

3. Multi-Factor Authentication (MFA)

- Enhanced Security: To protect sensitive areas of the platform, we use Multi-Factor Authentication (MFA). MFA requires users to provide multiple forms of verification before accessing critical functions. Typically, this includes a password, a verification code sent to a mobile device, and sometimes biometric authentication. MFA adds a significant layer of security, reducing the likelihood of unauthorized access even if login credentials are compromised.
- Application: MFA is applied to administrative logins and access to sensitive user data. This ensures that only verified and authorized individuals can access and manage critical system functions.

4. Regular Security Audits

- Purpose and Process: We conduct regular security audits to identify and address potential vulnerabilities in the system. These audits involve detailed assessments of our system's security posture, including network security, application vulnerabilities, and data protection practices.
- Audit Methods: Security audits include penetration testing to simulate attacks, vulnerability assessments to identify weaknesses, and code reviews to spot potential security flaws. Findings from these audits are used to implement corrective measures and enhance system security.
- Continuous Improvement: Insights gained from security audits drive continuous improvement in our security practices. This ensures that the system

evolves to address emerging threats and maintains a high level of protection.

5. Data Anonymization

- Technique: Data anonymization techniques are used to protect user privacy by removing personally identifiable information (PII) from data sets. For example, user responses to the Dosha Quiz are anonymized to ensure that individual identities are not discernible from the collected data.
- Purpose: Anonymizing data helps mitigate risks associated with data breaches and unauthorized access. It allows us to perform analysis and generate insights without compromising user privacy.
- Implementation: Anonymization is applied to user data used for research and system improvements, ensuring that any insights drawn from the data do not reveal individual identities.

6. Regulatory Compliance

- GDPR (General Data Protection Regulation): We adhere to GDPR requirements to protect the personal data of users from the European Union. This includes obtaining explicit consent for processing personal data, providing users with access to their data, and allowing them to request data deletion. Our system is designed to align with GDPR principles to ensure user rights are respected.
- CCPA (California Consumer Privacy Act): Compliance with CCPA involves providing California residents with control over their personal data. This includes transparency about data collection practices, the ability to access and delete personal information, and the option to opt out of the sale of data. Our system is structured to meet CCPA standards, ensuring that user privacy is maintained.
- Implementation: We regularly review our data handling practices to ensure compliance with these regulations. This includes managing user consent, maintaining data protection policies, and ensuring that all data processing activities adhere to regulatory standards.

By implementing these data security measures, the Dosha Analysis and Diet Recommendation System ensures the confidentiality, integrity, and availability of user data. These practices are essential for building user trust and maintaining the security of personal health information within the system.

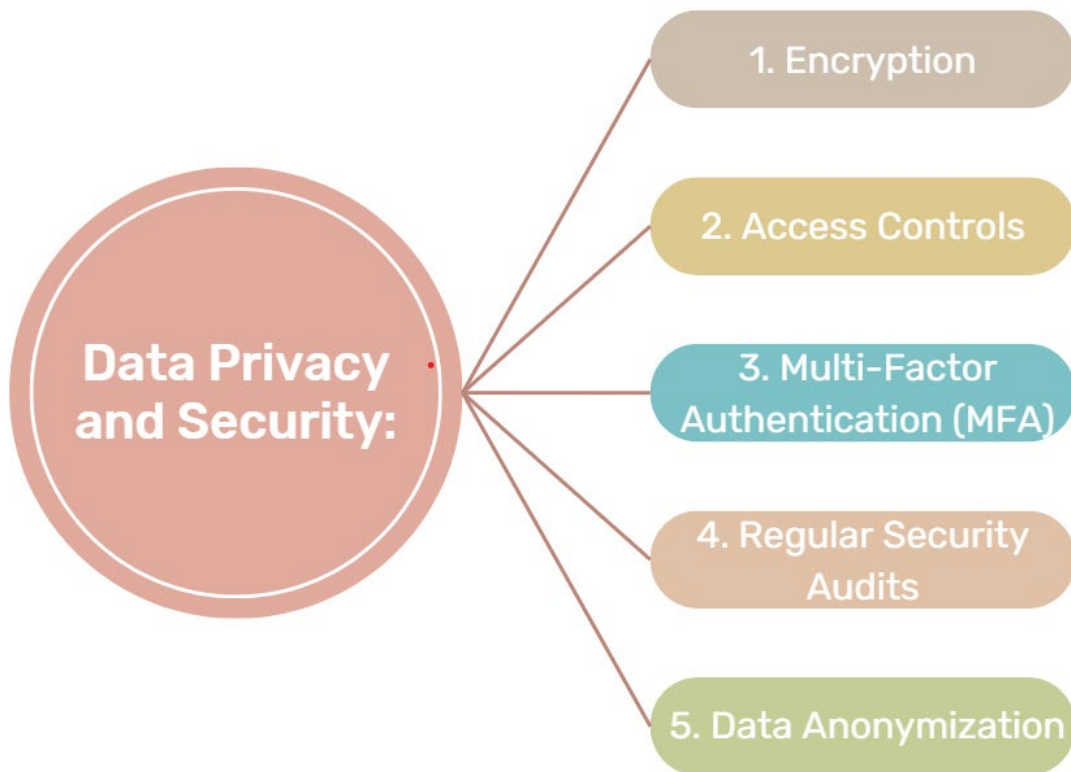


Figure 7.2 Data Privacy and Security

4. Dataset Augmentation

4.1 Dataset

This heart disease dataset contains 1025 data tables. Each reveals details about different patient. Information ranges from age and gender to complex health conditions. For gender, 1 stands for male and 0 for female. Types of chest pain are classified into four types. Resting blood pressure and cholesterol levels are given in scientific units, mm Hg and mg/dl. The fasting blood sugar level is marked 1 if it exceeds 120 mg/dl, else marked 0. The data also show resting electrocardiographic results, tagged as 0, 1, or 2 based on the analysis. These values hint at different

electrocardiogram results. The dataset collects maximum heart rates during exercise, exercise-induced chest pain (1 for yes, 0 for no), the 'Old peak' (a measure of exercise-induced ST depression compared to rest), the form of the highest exercise ST portion, the number of large vessels seen by fluoroscopy (ranging from 0 to 3), and the type of thalassemia defect (0 for normal, 1 for permanent, and 2 for temporary).

This full dataset is very useful for predicting health conditions and creating machine learning models. Health workers and data experts can use this dataset. They can create reliable models that assist in finding heart conditions. This dataset gives much-needed insight on factors affecting heart health and greatly helps in medical research and finding diagnoses. The details of databases are given in *Table 1*.

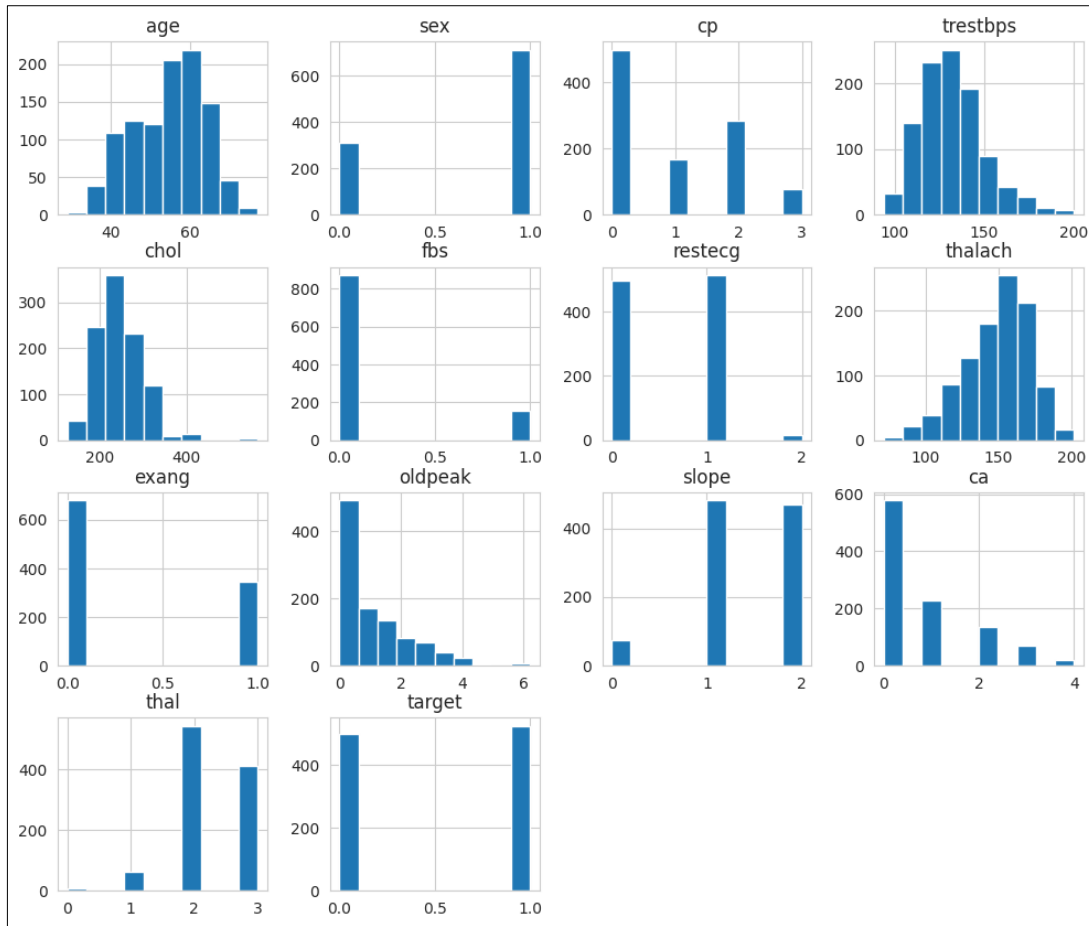


Figure 8. Bar Graphs for each feature in dataset

The above figure *Fig. 8* present a set of histograms ,each depicting the distribution of individual features within the heart disease dataset. Histogram are essential tools for visualizing the frequency and pattern of numerical data .They offer a thorough summary of the distribution of important characteristics in this context, including age, maximum heart rate attained, serum cholesterol levels, and resting blood pressure. Each histogram showcases the range of values along the horizontal axis and the corresponding

Frequency of occurrence on the vertical axis. By examining these histograms, healthcare professionals and data analysts can discern the data’s central tendencies, spreads and potential outliers. Understanding these distributions is pivotal for grasping the dataset’s characteristics, aiding in feature selection, and guiding the construction of accurate predictive models. Correlation between different fields in dataset is given in *Fig. 9*.

Table 1. Details of Training Dataset and Testing Dataset for Decision Tree

Dataset	Description	Rows	Feature Columns	Target Columns
Training	numerical data, with a single column containing floating-point values	820	Characteristics such as age, gender, type of chest pain, blood pressure, cholesterol, Records include fasting blood sugar levels, ECG findings, maximal heart rate, exercise induced angina, ST depression, peak exercise ST segment slope, number of major vessels, and thalassemia type.	Target (Have a heart disease or not)
	numerical data, with a single		thalassemia type, age, gender, blood pressure, cholesterol level, fasting blood sugar, electrocardiogram findings,	Target

Testing	column containing floating-point values	205	maximal heart rate, angina brought on by exercise, ST depression, peak exercise ST segment slope, and the number of major vessels.	(Have a heart disease or not)
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Here's a chart. It's about heart disease facts. It shows how things are related, from -0.4 to 1.0. When numbers are close to 1.0, they match well. A change in one usually means a change in another. If it's near -0.4, there's a smaller, opposite

connection. Knowing these numbers is important. They tell us how changes in one thing can affect the others for heart disease. So, numbers from -0.4 to 1.0 explain balance and slight imbalance among the facts. This helps doctors and data people sort out key heart disease clues.

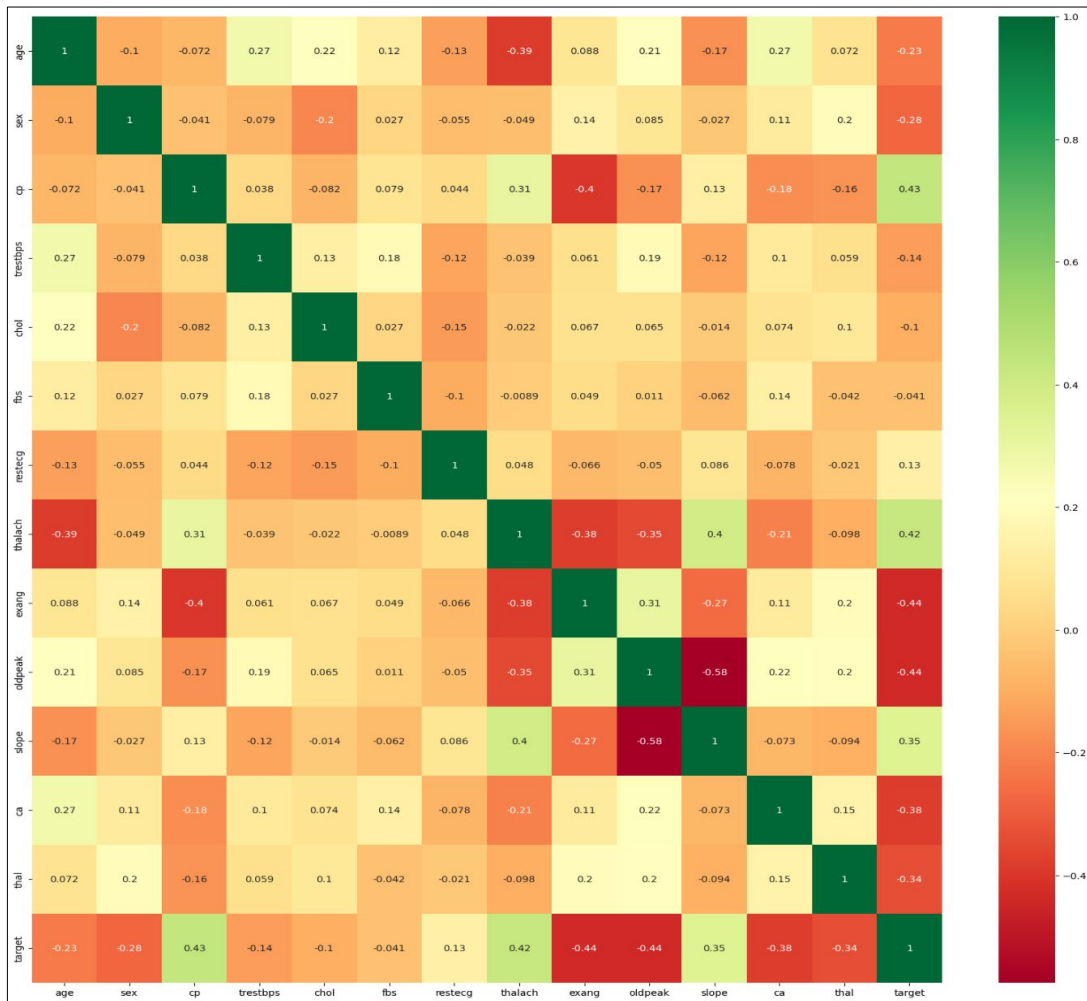


Figure 9. Correlation between features of dataset

4.2 Comparison of Different Algorithms

1. Decision Tree : A well-known method in supervised machine learning known as decision trees, is used for sorting and predicting tasks. Though straightforward, they are potent and can illustrate intricate decisions and connections in the data. Decision trees are particularly

valuable for tasks involving the selection of features resembling human decision-making processes.

- Data Collection and Preparation: Steps to predict heart disease using decision trees start with getting together and sorting out a variety of datasets. These contain key health factors and matching tags that indicate if heart disease is there or not. The data gets worked on first, taking care

of any missing values and giving codes to label variables. This is done to ensure that everything is set for examination.

- **Decision Tree Training:** Following this, we pre-prepare the data set and ready it for the decision tree process. Throughout the training, the system checks attributes at each point, it picks the one that offers the most information to divide up the data. We use strategies like Gini impurity or entropy, these helps improve the tree formation and lessen confusion about class labels.
- **Decision Making Process:** Picture a growing decision tree. Inside, branches signify decisions linked to certain features. The leaves, though, are the expected results, letting us know if someone's likely tagged with heart disease. Plug in fresh data, and watch the decision tree. It uses its learning, measures attributes against set limits until it hits the leaf the final say. Steady checking makes sure the model's guesses stay right. This helps patient results get better over time. It also boosts how well we prevent and handle heart disease.
- **Interpretation and Decision Path:** The interpretable nature of decision trees enables healthcare professionals to comprehend the logic behind each prediction. Decision paths offer insights into the contributing factors, empowering

clinicians in diagnosis and aiding in the formulation of personalized healthcare strategies for individuals at risk.

- **Evaluation and Refinement:** The algorithm's effectiveness is assessed by the use of model performance indicators, such as F1-score, recall, accuracy, and precision *Fig. 10*. The process of fine-tuning involves changing hyperparameters, such as the minimum number of samples per leaf or the depth of the tree, in order to maximize a model's accuracy and generalizability.
- **Deployment and Continuous Monitoring:** Once the model is validated and fine-tuned, it is deployed in healthcare systems, enabling timely interventions and personalized healthcare recommendations. Continuous monitoring ensures the model's predictions remain accurate over time, enhancing patient outcomes and promoting effective heart disease prevention and management.
- **Empowering Healthcare Professionals:** Decision trees are really useful tools for healthcare workers. They make things clearer and help with making right guesses. They can also help create personal plans. All of these benefits lead to better care for patients.

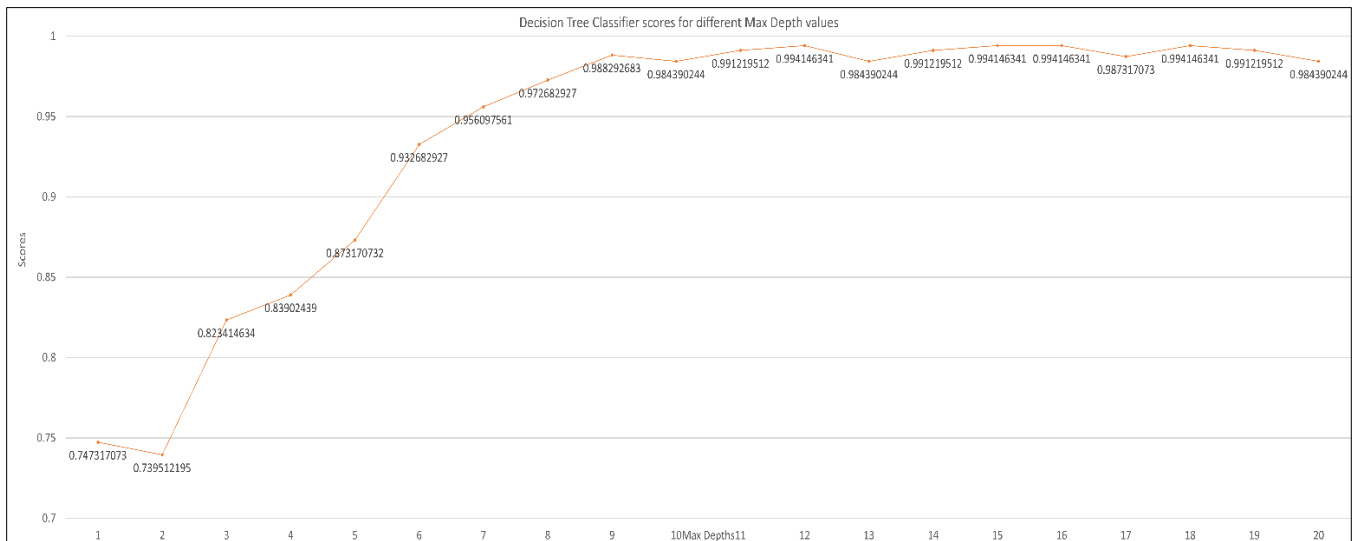


Fig. 10. Decision Tree Classifier scores for different Max Depth values

2. **K-Nearest Neighbors (KNN):** In short, is a handy tool in supervised machine learning. We often use it to

classify things or for regression (which is predicting numbers). What sets it apart from other methods is it doesn't rely on set rules. Instead, it's based on similarity

between data. Its fundamental principle is pretty simple: similar data often have similar labels or outcomes.

- **Data Collection and Preparation:** We pull together a full set of health details. This includes your age, cholesterol levels, blood pressure, and even your exercise habits.
- **Choosing a Suitable 'k' Value:** The 'k' parameter shows the count of neighbors close by to think about while giving predictions. Methods like cross-validation are frequently utilized to conclude the perfect 'k' value. This minimizes the errors in prediction and improves the model's correctness.
- **Distance Calculation and Neighbor Selection:** This uses measurements like the Euclidean or Manhattan lengths. Then, it picks the 'k' closest points that have the shortest lengths.

- **Voting Procedure:** Contemplate it as a ballot. When predicting heart disease, the algorithm assumes that the new data point also has heart disease if the majority of its closest neighbors are flagged as having the condition. The rule of majority applies here. This approach makes a more accurate prediction by using traits shared by people who are similar to each other.
- **Model Evaluation and Hyperparameter Tuning:** The performance of our trained KNN (K-Nearest Neighbor) model is checked using measures like accuracy, precision, recall, and the F1 score. This is done on a dataset used for validation. Plus, we refine the model further through hyperparameter tuning. This involves testing with different measures of distance and 'k' values to improve its ability to forecast. **Fig. 11**
- **Prediction and Interpretation:** This gives a forecast of heart disease in new patients using their health details. It helps doctors act fast and create custom health plans.

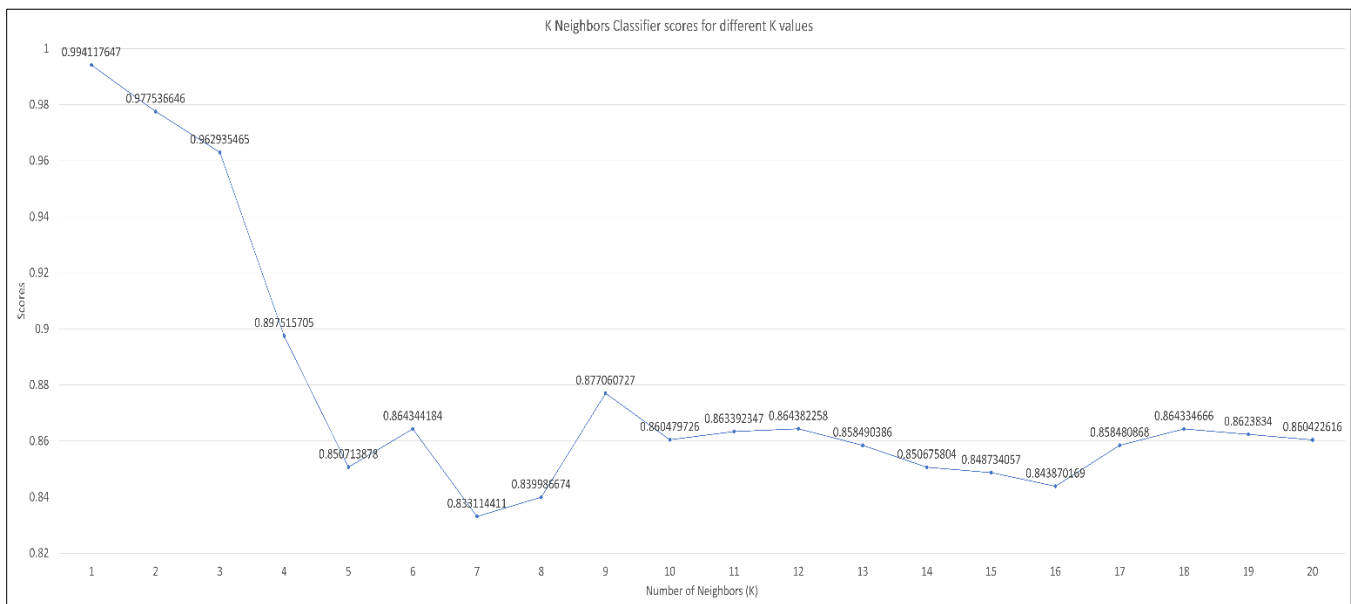


Figure 11. K Neighbors Classifier Scores for different K values

3. **Random Forest:** This popular combo method of machine learning, known as Random Forest, is often used for sorting and prediction tasks. It's trusted because it is flexible and can manage complex data with different features. The methods it uses are group-based, it combines results from several decision trees. This helps to get highly accurate and dependable predictions.

- **Ensemble of Decision Trees:** This method involves combining multiple decision trees into one group. Every tree gains knowledge from a distinct subset of the data. Subsequently, they all independently speculate about the features of a new piece of data.

- **Decision Making and Voting:** The last forecast gets its result from a voting system. This group method greatly cuts down the danger of fitting too tightly and boosts the model's skill to widely apply to new data.
- **Feature Importance:** A standout characteristic of Random Forest is its knack for offering score ratings for every trait in a set of data. These ratings measure how each trait helps shape the final prediction.
- **Model Evaluation and Hyperparameter Tuning:** The effectiveness of Random Forest models gets

tested based on some numbers. These are F1-score, recall, accuracy, and precision. For this, we employ a test dataset. So, they help us make right guesses. Adjusting settings such as how many trees are in the group and how deep each tree can go helps make the prediction model work better. **Fig. 12**

- **Deployment and Continuous Monitoring:** Once checked and adjusted, the Random Forest model can start in a health system. It's crucial to keep watching the model's guesses to make sure it stays correct over time.

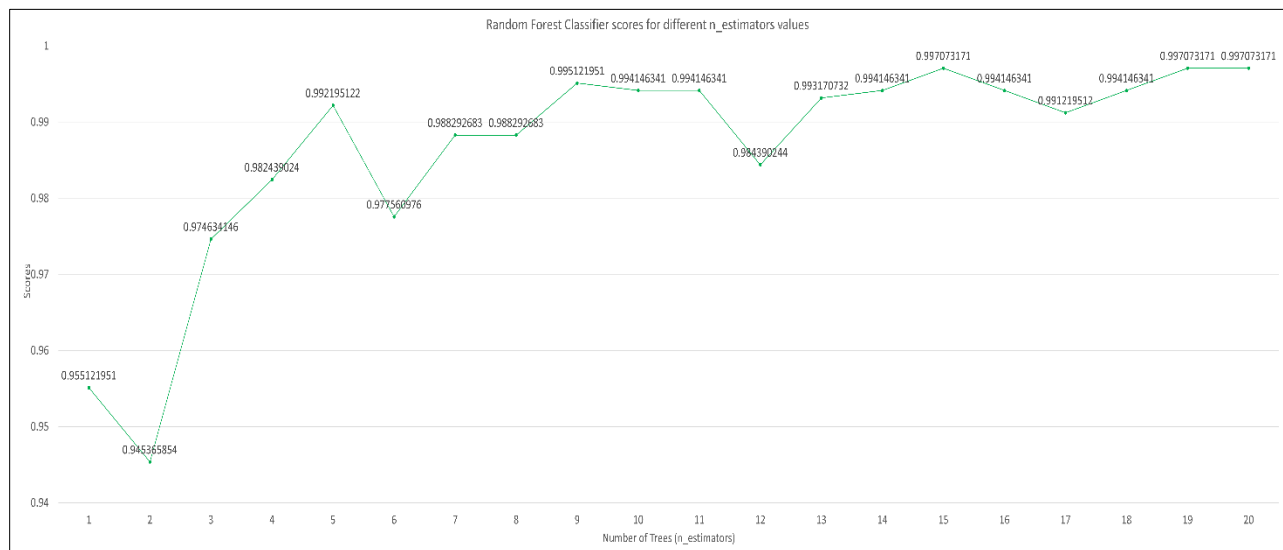


Figure 12. Random Forest Classifier scores for different n estimators' values

4. **Logistic Regression:** Using logistic regression to foresee heart disease includes the use of a math-based plan. This plan models how different health factors relate to whether heart disease will happen or not.
 - **Data Collection and Preparation:** We need a full dataset. It must have key health details like age, cholesterol, blood pressure, and exercise routines. It should also have binary labels showing if heart disease is present (1) or not (2) in the person.
 - **Model Training:** Logistic regression predicts the chance of having heart disease based on the input factors. It utilizes a logistic feature (sigmoid) to convert the mixed features into a possibility rating from 0 to 1.
 - **Decision Boundary and Prediction:** The model develops a decision line, dividing the dataset into two groups based on calculated probable

outcomes. A selected chance cut-off (usually 0.5) settles if a data point is guessed to have heart disease (1) or not (0)

- **Model Evaluation and Interpretation:** The model develops a decision line, dividing the dataset into two groups based on calculated probable outcomes. A selected chance cut-off (usually 0.5) settles if a data point is guessed to have heart disease (1) or not (0).
- **Regularization and Hyperparameter Tuning:** The examined logistic regression model are reviewed using different measures like accuracy, precision, recall, and F1-score on a separate test dataset. These measures test the model's skill to accurately predict heart disease cases. Plus, coefficients show a positive connection with heart disease, while minus coefficients signal a negative connection. This helps health care professionals recognize

what factors contribute.

- **Deployment and Continuous Monitoring:** Methods like L1 or L2 keeping, keep models from going too far and help them adapt to unknown data. Settings like intensity of keeping are fine-tuned to get the best performance from the model and make sure it does not overfit or underfit the data. After being checked and adjusted, the logistic model is engaged in a health system. It forecasts heart disease in new patients by considering their health traits, offering crucial information for health experts.

5. Experimental Setup

Our research's key part is obtaining real-time heart rate data from a person using a pulse

sensor connected to an Arduino gadget. This heart rate information is then seamlessly transmitted to a web server, which houses a MySQL database. The pulse sensor ensures a reliable connection to the person's heart rate, a crucial component for our heart disease detection system. The hardware setup of research is given in *Fig. 13*.

In addition to monitoring heart rate, we have developed an online tool for checking Ayurvedic dosha balance, presented in the form of a quiz. Users answer questions

related to their lifestyle, habits, and wellness, providing us with data to calculate their unique dosha mix. The end result is a personalized diet recommendation generated specifically for each user. To visually represent the dosha balance (Vata, Pitta, and Kapha), we utilize Google Charts to create a simple pie chart based on the user's responses. JavaScript, along with if-else coding, is employed to determine the main dosha, making it easier for users to understand their Ayurvedic type.

Our research focuses on providing personalized diet advice rooted in Ayurveda. We leverage the main dosha identified in the analysis to craft a tailored diet plan that aligns with the user's individual composition. The dietary recommendations are designed for overall good health and aim to help individuals maintain a balanced body.

On the research site, users receive their specific diet plan, offering valuable guidance for making food choices that suit their unique makeup. Additionally, users can assess their risk of heart disease through an additional feature. We employ a machine learning method known as the Decision Tree for this risk assessment, providing a straightforward 'yes' or 'no' answer. The Decision Tree makes use of a dataset that is split into testing and training sections. This dataset contains variables like age, gender, blood pressure, cholesterol, and the type of chest pain. With an accuracy of 99.70%, this assessment of heart disease risk improves the system's overall worth and increases its efficacy.

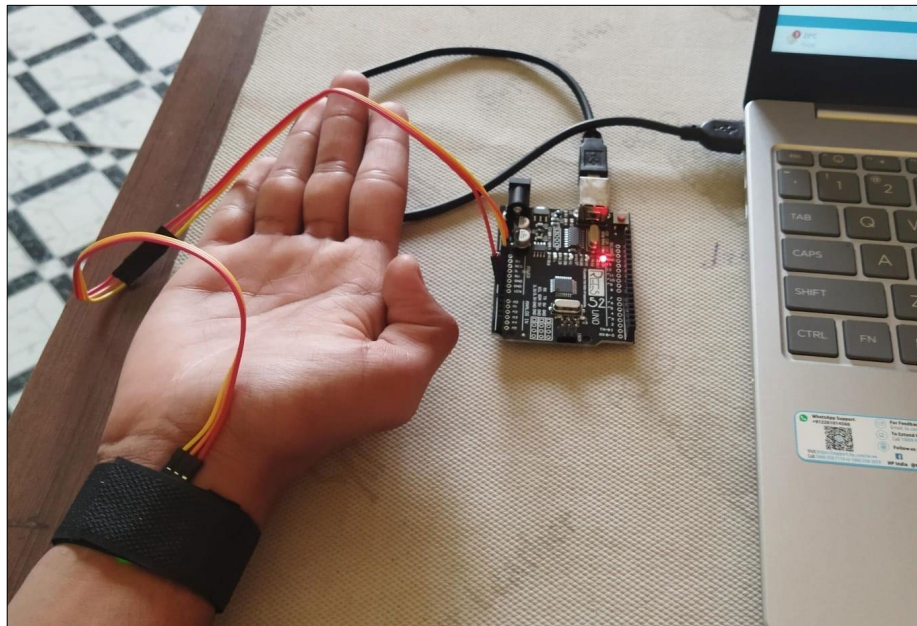


Figure 13. Hardware Setup of pulse sensor along with Arduino Uno

6. Results And Analysis

We tested our online dosha checker and recommendation tool with real users. We looked at how accurate it was in finding dosha imbalances and how personalized its advice was. We also asked our users what they thought of the service. We've made real strides in our research. Our dosha checker tool is precise. It works out a person's dosha makeup and finds imbalances by looking at their responses. Tests show it can accurately find the main dosha or doshas for a person **Fig. 14**. This is due to the program following Ayurvedic beliefs and carefully created quiz questions. It shows that the service mixes old Ayurvedic knowledge with a modern, easy-to-use design. How well the system worked and user satisfaction relied a lot on what the users thought. We found out what they thought through questionnaires, interviews, and testing the system. Users were all kinds of people, some knowing a lot about Ayurvedic medicine, others not so much **Fig. 16**. The customers liked the system.

They thought it was easy to find information about dosha, easy to use, and it looked nice. The Dosha quiz was both fun and a learning experience. Being able to see their dosha makeup, they felt they could learn something new about Ayurveda and find ways to live a healthier lifestyle. Users really liked how Google Charts made it easier to visualize their dosha balance. Looking at the pie chart, they can easily see the size of each dosha. Users enjoyed the fun, interactive feature of the graphic. By hovering over parts, they saw detailed dosha percentages.

We plan to add user accounts for progress monitoring, integrate health tracking wearables, and include more Ayurvedic resources. These new features aim to fuse potential with better health and wellbeing. With an accuracy of 99.70%, this assessment of heart disease risk improves the system's overall worth and increases its efficacy. The accuracy of different machine learning models is given in **Fig. 15**.

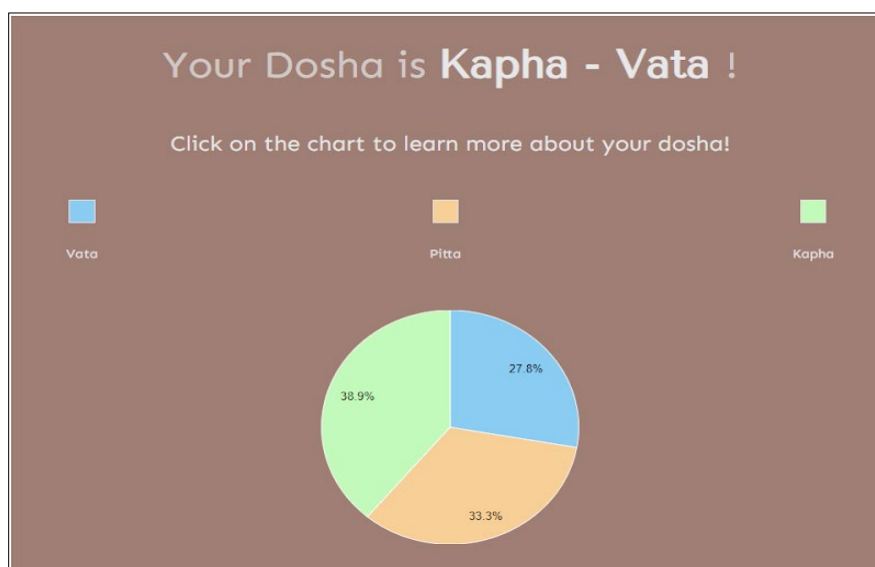


Figure 14. Resulting Pie chart based on answers for quiz

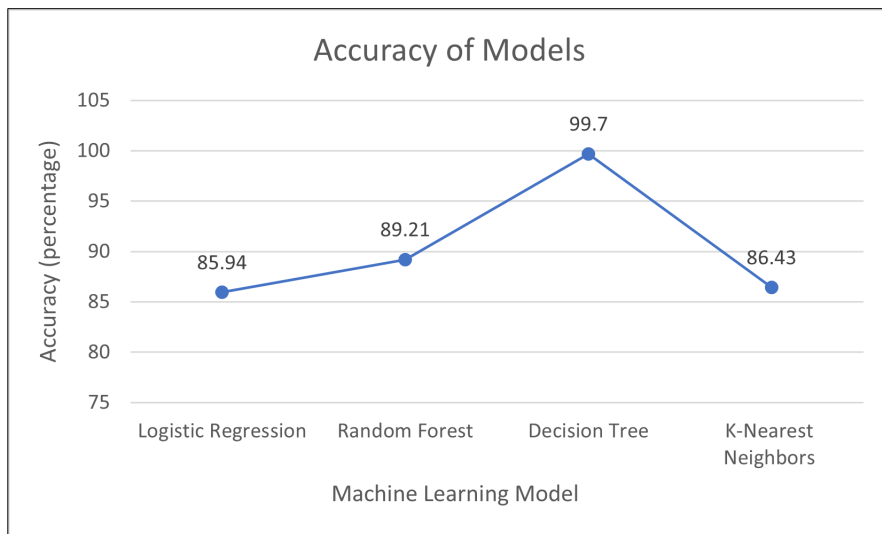
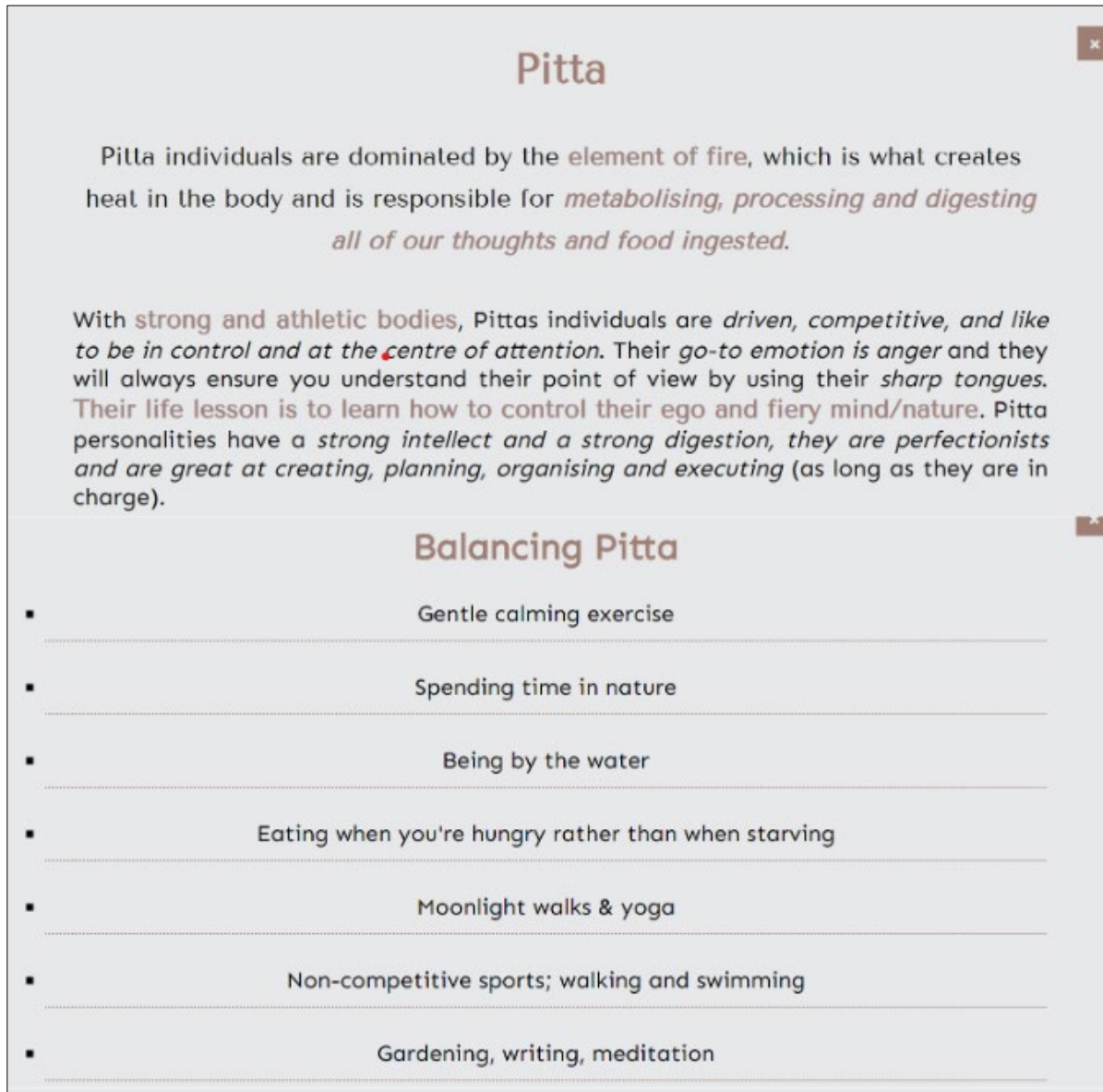


Figure 15. Accuracy score for different algorithms during training.



Pitta

Pitta individuals are dominated by the **element of fire**, which is what creates heat in the body and is responsible for *metabolising, processing and digesting all of our thoughts and food ingested.*

With **strong and athletic bodies**, Pittas individuals are *driven, competitive, and like to be in control and at the centre of attention.* Their *go-to emotion is anger* and they will always ensure you understand their point of view by using their *sharp tongues.* Their **life lesson is to learn how to control their ego and fiery mind/nature.** Pitta personalities have a *strong intellect and a strong digestion, they are perfectionists and are great at creating, planning, organising and executing* (as long as they are in charge).

Balancing Pitta

- Gentle calming exercise
- Spending time in nature
- Being by the water
- Eating when you're hungry rather than when starving
- Moonlight walks & yoga
- Non-competitive sports; walking and swimming
- Gardening, writing, meditation

Figure 16. Dominant Dosha and overall analysis

7. Limitations

For our Heart Disease Diagnosis and Diet Recommendation System to work properly, we need to focus on many important factors. The correctness and reliability of diagnosing diseases and providing dietary guidance can be doubted if Ayurvedic dosha analysis proves scientifically valid. This is due to its contrast with current data-supported healthcare approaches. There's no set standard for Ayurvedic dosha analysis which can bring inconsistencies in diagnosis and treatment, affecting the system's trustworthiness. Having a limited amount of data also creates problems. It's tricky to locate large collections of information for machine learning programs specifically for Ayurvedic dosha studies. The system must ensure safety and security of patients' personal health details too. When using Ayurvedic ideas in different situations, it's important to be culturally sensitive. Plus, combining this approach with today's healthcare systems and processes could be tough. We need detailed study to see if Ayurvedic dosha-based diagnoses and treatments are safe and work well. Because this research focuses on a narrow topic, it might not impact overall health care much. These points all set the stage for a deep look at the Heart Disease Diagnosis and Diet Recommendation System.

8. Results And Discussion

Our study represents a significant step forward in personalized healthcare by seamlessly integrating traditional Ayurvedic principles with modern technology. This innovative approach offers a fresh perspective on disease diagnosis and personalized health management, merging ancient wisdom with contemporary advancements. Our system leverages pulse sensors and sophisticated algorithms to analyze health conditions based on Ayurvedic Dosha principles. This integration provides real-time predictions and personalized recommendations, including diet, lifestyle adjustments, Ayurvedic treatments, exercise, and daily routines. The system's performance metrics highlight its effectiveness and reliability:

- **Logistic Regression (LR):** 85.94%
- **Random Forest:** 89.21%
- **Decision Tree:** 99.70%

- **k-Nearest Neighbors (KNN):** 86.43%

These accuracy rates reflect the system's ability to deliver precise and actionable health insights. Notably, the Decision Tree model's exceptional accuracy underscores its potential to provide highly accurate diagnostics and tailored recommendations.

8.1 Blending Tradition and Innovation:-

The integration of Ayurvedic principles with modern technology brings a new dimension to healthcare. Ayurveda's focus on Dosha provides a deep understanding of individual health, which, when combined with advanced algorithms, offers a comprehensive diagnostic tool. This fusion respects traditional practices while enhancing them with modern technology, presenting a balanced approach to personalized health.

8.2 Real-time Insights and Personalization:-

One of the standout features of our system is its ability to offer real-time predictions and personalized recommendations with minimal manual intervention. Through the use of advanced algorithms, the system analyzes pulse data to classify patients and suggest specific health interventions. This streamlined approach not only enhances accessibility but also ensures that users receive timely and relevant health guidance.

8.3 Navigating Challenges:-

Integrating ancient Ayurvedic principles with modern technology is not without its challenges. A key consideration is ensuring that the technology aligns with traditional Ayurvedic practices while taking full advantage of contemporary advancements. Our system addresses this challenge by thoughtfully integrating Ayurvedic concepts with modern diagnostic methods.

Another challenge lies in achieving broader acceptance within the medical community. While our system's accuracy rates are promising, further validation through clinical trials and peer-reviewed research will be crucial for establishing credibility and gaining wider support.

8.4 Analysis of Cultural Implications

The cultural implications of merging Ayurvedic principles with modern technology are significant and varied. Different cultural contexts may influence how this integration is received:

1. **Eastern Cultures:** In regions like India, where Ayurveda is deeply embedded in cultural practices, integrating traditional methods with modern technology is likely to be embraced. The familiarity with Ayurvedic principles makes this integration a natural extension of existing practices, enhancing both its relevance and acceptance.
2. **Western Cultures:** In Western regions where Ayurveda is less familiar, acceptance may depend on the demonstration of scientific validation and effectiveness. Educating stakeholders about the benefits of this integration and providing empirical evidence will be key to overcoming skepticism and fostering acceptance.
3. **Middle Eastern and African Cultures:** In these regions, where traditional health practices vary, integrating Ayurvedic principles with modern technology must be approached with sensitivity to local traditions. Emphasizing the universal benefits of personalized health management while respecting existing practices will be crucial for successful adoption. Adapting the system to fit local contexts and acknowledging diverse health practices will facilitate smoother integration.

8.5. Comparative Analysis

8.5.1. Common Ground:

- **Interest in Holistic Health:** There is a global trend towards holistic health approaches, which supports the acceptance of integrating traditional wisdom with modern technology. Many regions are increasingly interested in health solutions that address the whole person—mind, body, and spirit.
- **Desire for Personalization:** The growing

emphasis on personalized medicine aligns well with Ayurveda's individualized approach. This shared focus on personalized health care enhances the system's appeal across various cultural contexts.

8.5.2. Variations:

- **Cultural Significance of Ayurveda:** In Eastern cultures, Ayurveda's deep roots make the integration of traditional methods with technology more straightforward. In contrast, Western regions may require additional education and demonstration of Ayurveda's benefits to gain acceptance.
- **Regulatory and Acceptance Levels:** Different regions have varied regulatory frameworks for traditional medicine. Some areas have well-established structures for integrating alternative medicine, while others may be more resistant or lack formal recognition.
- **Healthcare Infrastructure:** The openness to integrating traditional and modern practices varies by region. Areas with existing frameworks for alternative medicine are more likely to adopt and integrate new technologies effectively.

So our study illustrates the potential of merging Ayurvedic principles with modern technology to enhance personalized healthcare. By considering cultural implications and regional responses, we gain valuable insights into how this integration can be effectively implemented and accepted across different contexts. This approach not only advances global health management but also bridges the gap between ancient wisdom and contemporary innovation.

8.6. User Feedback and Usability Testing:-

To gain a deeper understanding of the system's practical application, we conducted user feedback and usability testing. Participants from diverse cultural backgrounds and varying familiarity with Ayurvedic practices were included. This section summarizes the key findings from the feedback.

Positive Feedback: Users appreciated the personalized recommendations and the system's ease of use. Many found the real-time insights particularly beneficial, as it allowed them to make immediate lifestyle adjustments. One user commented, "The personalized diet and exercise recommendations have been very effective for my overall health." Several participants also highlighted the system's ability to integrate seamlessly into their daily routines, providing valuable health insights without being intrusive.

Participants also noted the system's accuracy in identifying health conditions and offering suitable Ayurvedic treatments. The real-time nature of the predictions was particularly praised, as it enabled users to take prompt action based on the recommendations. For instance, a participant mentioned, "The instant feedback on my health status motivated me to follow the suggested lifestyle changes more diligently."

Areas for Improvement: Some users highlighted the need for more detailed explanations of Ayurvedic terms and concepts, particularly those unfamiliar with traditional practices. Users suggested incorporating a glossary or a help section that elaborates on Ayurvedic terminologies and principles. A participant noted, "Having a section that explains the Ayurvedic terms used in the recommendations would help me understand and trust the advice more."

Additionally, there were suggestions for enhancing the user interface to make it more intuitive. Some users found the navigation slightly complex and suggested simplifying it to improve the overall user experience. A user noted, "While the system is helpful, a more user-friendly interface and clearer explanations would enhance the experience." Participants recommended features such as guided tutorials, tooltips, and a more streamlined layout to make the system easier to navigate for first-time users.

9. Conclusions

The study's conclusion highlights the transformative potential of blending ancient Ayurvedic principles with modern technology in healthcare. This innovative approach not only identifies an individual's dosha balance but also translates this

knowledge into practical insights. By using dosha analysis as a tool for proactive health management, individuals can better anticipate potential health risks, particularly those related to heart disease. The personalized advice on diet and therapies reflects the holistic philosophy of Ayurveda, providing a well-rounded path to better health.

This integration goes a step further by considering cultural nuances, making the system more acceptable and applicable across different regions. By acknowledging and respecting cultural diversity, the system can be adapted to meet the specific needs and preferences of various populations, encouraging greater engagement and adherence to health recommendations.

Data Privacy and Security

In addition to the technical achievements, ensuring data privacy and security remains a top priority. Our system employs several web-based security measures to protect sensitive health data:

- **Encryption:** Data is encrypted both in transit and at rest using advanced encryption protocols such as AES (Advanced Encryption Standard). This ensures that patient information is securely transmitted over the internet and stored in a manner that prevents unauthorized access.
- **Access Controls:** We implement strict access control mechanisms to restrict data access to authorized personnel only. Role-based access controls (RBAC) are used to ensure that users can only access data relevant to their role, minimizing the risk of unauthorized data exposure.
- **Multi-Factor Authentication (MFA):** To enhance security, multi-factor authentication is required for accessing the system. This additional layer of security helps protect user accounts from unauthorized access, even if login credentials are compromised.
- **Regular Security Audits:** The system undergoes regular security audits and vulnerability assessments to identify and address potential weaknesses. These audits help ensure that the system remains secure against emerging threats and vulnerabilities.
- **Data Anonymization:** To further protect patient privacy, data anonymization techniques are employed. By removing personally identifiable information, the risk

of compromising patient confidentiality is significantly reduced.

- **Compliance with Regulations:** The system adheres to relevant data protection regulations such as GDPR (General Data Protection Regulation) and HIPAA (Health Insurance Portability and Accountability Act). Compliance with these regulations ensures that data handling practices meet established standards for privacy and security.

These measures collectively contribute to a secure and trustworthy system, addressing critical concerns related to data privacy and security in healthcare. By implementing robust web-based security protocols, we ensure that user data is protected against unauthorized access and breaches, thereby enhancing trust and acceptance among users.

The unique combination of dosha analysis, heart disease prediction, and customized dietary suggestions creates a robust framework. It empowers individuals to take charge of their health, allowing them to make informed decisions rooted in both traditional wisdom and modern medical knowledge. The focus on early intervention and personalized care marks a significant shift towards a more proactive and individualized healthcare model. This culturally sensitive approach not only bridges the gap between traditional and modern medicine but also sets the stage for a more inclusive and effective global healthcare system.

10. Future Scope

Looking ahead, the potential advancements in healthcare are immense. By integrating Ayurvedic principles with cutting-edge technologies like DNA profiling and big data analysis, we open new possibilities for understanding individual characteristics, habits, and Ayurvedic body types. This paves the way for more precise and targeted healthcare interventions.

Our innovative combination of Ayurvedic dosha-based food suggestions and heart disease diagnosis is just the beginning. As technology continues to

advance, this approach could revolutionize not only heart health management but also the diagnosis and treatment of various other diseases. This study lays the groundwork for a more personalized and preventive healthcare system, with the potential to extend its benefits to a wide range of health conditions.

Blockchain technology is another promising area for the future. By incorporating blockchain, we can significantly enhance data privacy and security. Blockchain's ability to create transparent and tamper-proof records ensures that patient data is securely stored and protected from unauthorized access or alterations. This can build greater trust among users and healthcare providers, knowing their sensitive health data is safeguarded.

The ongoing evolution of this research holds the promise of transforming healthcare practices, reducing the impact of heart disease, and paving the way for a more personalized and effective approach to overall health and well-being. The exciting trajectory of integrating traditional wisdom with modern technology, including advancements like blockchain, presents a bright future for healthcare, ensuring secure and reliable personalized health solutions.

Declarations

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References

- [1] Harshi Pogadadanda, U Shwetha Shankar, K.R. Jansi, "Disease Diagnosis using Ayurvedic Pulse and Treatment Recommendation Engine", 2021 7th International Conference on Advanced Computing and Communication Systems (ICACCS), 2021.
- [2] Bharat S. Shete, A. B. Kakade, "Pulse Diagnosis Based Automated Diagnostic System", International Journal of Computational Engineering Research, 2012.
- [3] Sonali Joshi, Preeti Bajaj, "Design & Development of Portable Vata, Pitta & Kapha [VPK] Pulse Detector to Find Prakriti of an Individual using Artificial Neural Network", 2021 6th International Conference for Convergence in Technology (I2CT), 2021.
- [4] Sanjay Dubey, M. C. Chinnaiah, "An IoT based Ayurvedic approach for real time healthcare monitoring", AIMS Electronics and Electrical Engineering, 2022.
- [5] Vinayak Majhi, Bishnu Choudhary, "Development of a machine learning-based Parkinson's disease prediction system through Ayurvedic dosha analysis", International Journal of Ayurvedic Medicine, 2013.
- [6] Ramandeep Kaur, Manu Chopra, Nidhi Garg, Hardeep S Ryait, "Role of Pulse Diagnosis: A Review", International Conference on Computing, Communication & Automation, 2015.
- [7] Lakshmi Bhemavarapu, K. Usha Rani, "Machine Learning Models Used for Prakriti Identification Using Prasna Pariksha in Ayurveda - A Review", Mathematical Statistician and Engineering Applications, 2023.
- [8] Vishu Madaan, Anjali Goyal, "Predicting Ayurveda-Based Constituted Balancing in Human Body Using Machine Learning Methods", IEEE Access, 2020.
- [9] Kulkarni Dattatraya, Doddoli Suchitra, "A Bio-Electrical Model for Physiological Evaluation of Nadi Pariksha (Ayurvedic Pulse Diagnosis)", International Journal of Ayurveda and Pharma Research, 2014.
- [10] Kritika Goyal, Akhil Gupta, "A Literature Survey on Different Types of Pulse Based Sensor for Acquisition of Pulse", International Journal of Control Theory and Applications, 2016.
- [11] Dr. Ravi Prakash Arya, "Vedic Svasthya Vijnan", 2020.
- [12] Vaidehi v., "ResNet based classification in CNN for ayurvedic plant categorization using deep learning", 2023.
- [13] J McLaughlin, MMcNeill, B Braun & P.D. McCormack, "Piezoelectric Sensor determination of arterial pulse wave velocity", 2003.
- [14] M. Karabulut and T. Ibrikci, "Analysis of cardiocogram data for fatal distress determination by decision tree based adaptive boosting approach", 2014.
- [15] M. M. Mathpati, S. Albert, "Ayurveda and medicalization today: The loss of important knowledge and practice in health", 2020.
- [16] Pavana MG, Shashikala N, Joshi M, "Design, development and comparative performance analysis of Bessel and Butterworth filter for Nadi Pariksha Yantra", 2016 IEEE International Conference on Engineering and Technology (ICETECH), 2016.
- [17] Chaudhari S, Mudhalwadkar R, "Nadi Parikshan system for health diagnosis", International Conference on Intelligent Computing and Control (I2C2), 2017.
- [18] Hankey, "Ayurvedic Physiology and Etiology: Ayurveda Amritanaam. The Doshas and Their Functioning in Terms of Contemporary Biology and Physical Chemistry", The Journal of Alternative & Complementary Medicine, 2005.
- [19] Y. S. Jaiswal, L. L. Williams, "A glimpse of Ayurveda – The forgotten history and principles of Indian traditional medicine", Journal of Traditional and Complementary Medicine, 2017.
- [20] H. M. Manjula, S. P. AnandaRaj, "A comprehensive survey on the importance of Ayurveda and Artificial Intelligence", Turkish Online Journal of Qualitative Inquiry, 2021.
- [21] Jayanka and T.G.I. Fernando, "Recognizing Ayurvedic Herbal Plants in Sri Lanka using Convolutional Neural Networks.", 2020.
- [22] Mohamed Elleuch, Fatma Marzougui, "A Deep CNN Approach for Plant Disease Detection", 2020.
- [23] Oge Marques, "Integrating contemporary technologies with Ayurveda: Examples, challenges, and opportunities", 2015 International Conference on Advances in Computing, Communications and Informatics (ICACCI), 2015.
- [24] Trivedi, Arpit & Patel Dharmendra, "Survey on Human Prakriti and Tridosha (Vata, Pitta and Kapha) Based on Physiological Features Using Machine Learning and Image Processing Techniques", 2021.
- [25] Rajasekar, Vani & Krishnamoorthi, Sathya & Saračević, Muzafer & Pepic, Dzenis & Zajmović, Mahir & Zogic, Haris, "Ensemble Machine Learning Methods to Predict the Constituents in the Human Body", 2022.
- [26] Keniya, Rinkal and Khakharia, Aman and Shah, Vruddhi and Gada, Vrushabh and Manjalkar, Ruchi and Thaker, Tirth and Warang, Mahesh and Mehendale, Ninad, "Disease Prediction From Various Symptoms Using Machine Learning", July 27, 2020.
- [27] Bhushan U Bawankar, "Nadi Parikshan: IOT based patient monitoring and disease prediction system", 2021.
- [28] V. Kurande, R. Waagepetersen, E. Toft, R. Prasad, L. Raturi, "Repeatability of Pulse Diagnosis and Body Constitution Diagnosis in Traditional Indian Ayurveda Medicine", 2012.
- [29] V. Kurande, R. Waagepetersen, E. Toft, R. Prasad, "Interrater Reliability of Diagnostic Methods in Traditional Indian Ayurvedic Medicine", Sep 2013.

- [30] R. Guguloth, Yadav C.R., Dr. K. Vasam, "Nadi Pariksha (Pulse Diagnosis) A Traditional Diagnostic Approaches as per Ayurveda", International Journal of Innovative Research in Medical Science, 2017.
- [31] Kachare, Kalpana, "Nadi Pariksha: An Ancient Ayurvedic Method of Diagnosis", STM journals, Journal of AYUSH: Ayurveda, Yoga, Unani, Siddha and Homeopathy, 2016.
- [32] Shailendra Singh and Dinesh Kumar Maurya, "Clinical Assessment of Dosha Predominance in Shalya Karma Using an Electronic Device Nadi Tarangini", 2023.
- [33] Kumar, P. V. G., Deshpande, S., & Nagendra, H. R., "Traditional practices and recent advances in Nadi Pariksha: A comprehensive review", Journal of Ayurveda and integrative medicine, 2017.
- [34] Roopini N, Dr. Joshi Manisha Shivaram, Dr. Shridhar, "Design & Development of a System for Nadi Pariksha", International Journal Of Engineering Research & Technology (IJERT), 2015.
- [35] Singh, "Traditional Development of Pulse Examination as Diagnostic Tool in Ayurveda", Journal of Natural Remedies, 2020.
- [36] Anu .S. Prasad Anand Katti, "Utility of Medical Instruments in Nadi Pareeksha: A Critical Review", International Research Journal of Ayurveda & Yoga, February 2022.
- [37] Miss. Apurva Pandurang Patil, "Review on diseases diagnosing by using Nadi Parikshan", International Research Journal of Engineering and Technology (IRJET), Nov 2017.
- [38] K B Ramesh, "Design of Radial Artery Pulse Sensor System for Ayurveda Disease Diagnosis", 2019.
- [39] Bhide M. , Nilakhe S, Kulkarni S, "A Review Study of Pulse in Numerous Asian Medical Systems", 2017.
- [40] Narendra N. Khaire , Yashwant V. Joshi, "Diagnosis of Disease Using Wrist Pulse Signal for Classification of Premeal and Post meal Samples", 2016.
- [41] Aniruddha Joshi, Anand Kulkarni, Sharat Chandran, V. K. Jayaraman and B. D. Kulkarni "Nadi Tarangini: A Pulse Based Diagnostic System", 2018.
- [42] H. E. J. Umasha, H. D. F. R. Pulle, K. K. R. Nisansala, R. D. B. Ranaweera and J. V. Wijayakulasooriya, "Ayurvedic Nadi Measurement and Diagnostic System", 2019 14th Conference on Industrial and Information Systems (ICIIS), 2019.
- [43] Sandeep Kumar Khandai and Sachin Kumar Jain "Comparison of Sensors Performance for the Development of Wrist Pulse Acquisition System", 2018.
- [44] Chris S Peter, Manu Elappila, A.C Swathi, "CNN based Model for Severity Analysis of Diabetic Retinopathy to aid Medical Treatment with Ayurvedic Perspective", 2022.
- [45] Vani Rajeskar, Sathya Krishnamoorthi, Muzafar Saracevic, Dzenis Pepic, Mahir Zajmovic, Haris Zogic, "Ensemble Machine Learning Methods to Predict the Balancing of Ayurvedic Constituents in the Human Body", 2022.
- [46] Vinayak Majhi, Vishnu Choudhary, Goutam Saha, Sudip Paul, "The Behavioural Analysis of the Dosha Pattern Derived from Associated Current Diseases and Symptoms along with Parkinson's Disease", 2023.
- [47] T. Thanushree, K.G. Manjunath, "Ayurvedic Medicine based Automated Machine Learning Approach for Determining the Nature of the Human Body", 2022.
- [48] M C Chinnaiah, Sanjay Dubey, N Janardhan, Venkata Pathi, Nandan K, Anusha M, "Analysis of Pitta Imbalance in young Indian adult using Machine Learning Algorithm", 2022.
- [49] Bhushan Patwardhan and Unnikrishnan Payyappalli, "Ayurveda and antimicrobial resistance", Journal of Ayurveda and Integrative Medicine, 2018.
- [50] S. Dubey, I. A. Pasha, M. C. Chinnaiah, K. S. Prasanna and V. P. Kumar, "A Survey on Nadi Pariksha and Pulse Acquisition System", 2019.
- [51] H M Manjula, AnandaRaj S P, "Ayurvedic Diagnosis using Machine Learning Techniques to examine the diseases by extracting the data stored in AyurDataMart", 2021.
- [52] P. Kallurkar, K. Patil, G. Sharma, S. Sharma and N. Sharma, "Analysis of Tridosha in various physiological conditions", 2015.
- [53] N. N. Khaire and Y. V. Joshi, "Diagnosis of Disease Using Wrist Pulse Signal for classification of premeal and post meal samples", 2015.
- [54] Shanmathi M, Bhavika Premachand Arage, Praveena R, "Ayura Ayurvedic Diet App", 2023.
- [55] Sachin Kumar, K Veer, Sanjeev Kumar, "A spider tool based qualitative analysis of machine learning for wrist pulse analysis", 2022.
- [56] K. Laleeth Keerthi, S. Sridevi, "Big data analysis of traditional Indian Ayurveda medicine and treatment process", 2022.
- [57] Damini Niranjana, Kavya M., K. T. Neethi, K. M. Prarthan & B. Manjuprasad, "Machine learning based analysis of pulse rate using Panchmahabhutas and Ayurveda", International Journal of Information Technology, 2021.
- [58] Tiwari P, Kutum R, Sethi T, Shrivastava A, Girase B, Aggarwal S, "Recapitulation of Ayurveda constitution types by machine learning of phenotypic traits", Mathematical Statistician and Engineering Applications", 2017.
- [59] V. Madaan and A. Gayal, "An Adaptive Neuro Fuzzy Inference System for Predicting Ayurvedic Dosha", 2019.
- [60] Y. Yoon, M. Lee, and K. Soh., "Pulse type classification by varying contact pressure," 2000.
- [61] V. Lad, "Secrets of the pulse The ancient art of Ayurvedic pulse diagnosis", 2005.
- [62] H. Wang and Y. Cheng, "A quantitative system for pulse diagnosis in traditional Chinese medicine", 2005.
- [63] Alex Hankey, "The scientific value of ayurveda", 2005.

- [64] JianJun Shu, Yuguang Sun, “Developing classification indices for Chinese pulse diagnosis”, 2007.
- [65] Kuanquan Wang, Chao Xu, Dongyu Zhang, Naimin Li, “Analysis of doppler ultrasound blood flow signals of wrist radial artery for discriminating healthy people from 3 kinds of patients” , 2008.
- [66] Meghna Sareen, Abhinav, Prakhar Prakash, Sneha Anand, “Wavelet decomposition and feature extraction from pulse signals of the radial artery” , 2008.
- [67] Bhushan Patwardhan, Gerard Bodeker, “Ayurvedic genomics: establishing a genetic basis for mind–body typologies”, 2008.
- [68] Prasher, S. Negi, S. Aggarwal, A. Mandal, T. Sethi, S. Deshmukh, S. Purohit, S. Sengupta, S. Khanna, F. Mohammad, Gaurav Garg, S. Brahmachari, Mitali Mukerji, “Whole genome expression and biochemical correlates of extreme constitutional types defined in Ayurveda”, 2008.
- [69] Abhinav, Meghnasareen, Mahendrakumar, Jayashree, “Nadi yantra : a robust system design to capture the signal from the radial artery assessment of the autonomic nervous system”, 2009.
- [70] Yinghui Chen, Lei Zhang, David Zhang, Dongyu Zhang, “Wrist pulse diagnosis using modified gaussian models and fuzzy Cmeans classification”, 2009.
- [71] Alex Hankey, “Establishing the scientific validity of Tridosha part 1: doshas, subdoshas and dosha prakritis”, 2010.
- [72] YuFeng Chung, ChingHsing Luo, ChungShing Hu, ChengChang Yeh, “Temporal and spatial properties of arterial pulsation measurement using pressure sensor array”, Evidence Based Complementary and Alternative Medicine, May 2011.
- [73] Mandeep Singh, Anil Anand, “Optimization of questionnaire for determining ayurvedic imbalances”, 2011.
- [74] Mandeep Singh, Anil Anand, “Principal component analysis of combined questionnaire for determining human constituents”, 2011.
- [75] N. Deepa, A. Balaji Ganesh, “Optical sensor for siddha diagnosis system”, 2012.
- [76] Hyunho Kim, Jong Yeol Kim, YoungJae Park, YoungBae park, “Development of pulse diagnostic devices in Korea”, 2013.
- [77] Yufeng Chung , ChungShinghua, “How to standardize the pulsetaking method of traditional Chinese medicine pulse diagnosis”, 2013.
- [78] Sanika Mohagaonkar, Anmol Rawlani, Ankur Saxena, “Efficient Decision Tree using Machine Learning Tools for Acute Ailments”, 2020.
- [79] K. Shailaja, B. Seetharamulu and M. A. Jabbar, "Machine Learning in Healthcare: A Review," 2018 Second International Conference on Electronics, Communication and Aerospace Technology (ICECA), Coimbatore, India, 2018.
- [80] Almansour N.A., Syed H.F., Khayat N.R., Altheeb R.K., Juri R.E., Alhiyafi J., Alrashed S., Olatunji S.O., “Neural network and support vector machine for the prediction of chronic kidney disease: A comparative study”, Computers in Biology and Medicine, 20