Research Paper

Ayurveda herbs recommendations and decease recognition

Mrs. Ayman Gani[1], Mr. Ashish Pimpalshende[2], Mr. Gitank Bhoyar[3], Ms. Neha Kumbhare[4], Mr. Atharv Jadhav[5]
[1,2,3,4,5]Department of Artificial, Intelligence and Data Science Priyadarshini College of Engineering, Nagpur Maharashtra, India.

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ABSTRACT

To meet the growing need for natural and reliable healthcare options, the merging of Ayurvedic Herbs with techno has been initiated to deliver personalized health that is easier to access. This enterprise discloses a Full- Stack Symptom Driven Ayurvedic Herbs and Lifestyle Recommendation System empowered by machine learning (ML). The system interprets the symptoms given by the user along with the personal health data such as age, gender, allergies, and medical history to ascertain probable health conditions by means of a Support Vector Classification (SVC) model trained on selected Ayurvedic data sets. It then suggests Ayurvedic formulations, herbal remedies, and lifestyle (diet, yoga, exercise, and daily routines) practices that are preventative and aligned with the predicted condition and Ayurvedic principles. The system comes with a rules- based validation engine that checks for contraindications, age-specific precautions, and ingredient sensitivities, which ensures safety and relevance. The frontend is designed as a modern, user-friendly web interface, whereas the backend constructed with Python frameworks like Flask or FastAPI carries out data preprocessing, disease prediction, and Ayurvedic recommendation, logic apps, and self-care support, especially in the regions where Ayurvedic Herbs is largely trusted and practiced.

Corresponding Author:
Mrs. Ayman Gani
Department of Artificial, Intelligence and Data Science Priyadarshini College of Engineering, Nagpur Maharashtra, India.
Email: saqibayeman@gmail.com

1. INTRODUCTION

The healthcare trend is gradually leaning towards the individualistic and holistic care where patients would prefer to receive reliable, automatic and preventive care as well as the emerging medical technologies. An ancient Indian medicine system of herbs called Ayurveda continues to uphold the concept of one-on-one treatment using herbs, diet, control and lifestyle. But selecting the most appropriate Ayurvedic remedies to specific symptoms is a very difficult task of a non-expert since it requires knowledge on the various types of diseases, interactions of herbs and the constitution types of individuals. Machine learning (ML) and Ayurvedic knowledge can allow one to overcome this issue, thus offering a contemporary solution. This project introduces a Full-Stack Symptom Driven Ayurvedic Herbs and Lifestyle Recommendation System that can analyze patient symptoms and other personal information such as age, sex, allergies, and health history to forecast any potential health conditions. It provides Support Vector Classification (SVC) model which is trained with the help of Ayurvedic datasets selected.

Diagnose the probable health issues and prescribe the corresponding formulations of herbs, dietary modifications, yoga and lifestyle modifications using the Ayurvedic principles. Unlike the current digital health solutions, this system is based on safety and customization since it offers a rule-based validation engine that verifies contraindications between the ingredients, sensitivities and demographic suitability prior to recommendation of the remedies. An effortless-to-use web interface enables the user to enter the symptoms in a gentle manner and present suitable, trustworthy and recommendations. The backend developed in Python frameworks such as Flask or FastAPI performs data preprocessing, disease classifications and securely shares data. This system will ensure that the ancient Ayurvedic wisdom is not forgotten in the dark age of high- tech health care by combining the ancient Ayurvedic wisdom with modern machine learning and full- stack development. It also provides the teleHerbs systems, the self- care apps and wellness networks with a special helping hand in the remote regions where there are a few Ayurveda practitioners. Furthermore, feedback loop provides the model with continual enhancement and adaptation to the emerging healthcare demands hence, rendering the solution dependable, scable and patient-centered.

2. RELATED WORK

2.1 Machine Learning for Ayurvedic Disease Recognition

The symptom-based classification models were the very first models of machine learning in Ayurveda. [1] In their work demonstrated that both the Logistic Regression and Naive Bayes were equally accurate in classifying Dosha imbalances in moderate accuracy. [2] Utilized the algorithms of Random Forest and Decision Tree in order to determine the health conditions in the first stage, depending on the clustered symptoms. Their results showed that ML could offer better performance to the conventional rule-based systems as it was capable of identifying subtle patterns of symptoms and, therefore, enhance the scalability of disease recognition processes. Expert Systems in Ayurvedic Diagnosis

Expert reasoning has been significantly reflected through expert systems that are structured in terms of sets of rules. [3] Came up with a rule-based system whereby the Dosha scores are calculated by assigning various weights to the symptoms as inputs. [4] Went ahead to include inference engines that recreate classical Ayurvedic diagnostic reasoning. One of the primary characteristics of such expert systems is interpretability and they can be especially effective in situations when machine learning cannot be based on big datasets. Herbal Databases and Knowledge Repositories.

The efforts of scientists such as [5] led to the creation of digital databases of herbs which not only store but also list the medicinal plants by Rasa, Guna, Virya and therapeutic values. [6] Pointed out that structured repositories are necessary for computational Ayurveda which would facilitate the process of classifying and retrieving herbs. This is the foundation of herb recommendation systems, and data-based Ayurvedic systems.

2.2 Symptom–Dosha Mapping Approaches

Several scholars have embarked on quantifying Ayurvedic diagnosis. [7] Proposed a scoring based technique that utilized allocated weights to the symptoms with the aim of determining Dosha majority. The statistical model of the assessment of the underlying phenomena of the symptoms-Dosha relations was also used by [8], thus justifying the computational explanation of the classical principles of diagnosis. These mapping methods basically enable the transformation of qualitative Ayurvedic analyses to the rationality of algorithms.

2.3 Hybrid Systems Combining ML and Ayurveda

The hybrid systems incorporate machine learning predictions and Ayurvedic rule-based reasoning. [9] A proposed using a two-layered system where ML identifies probable diseases and an Ayurvedic engine gives herb recommendations depending on the Dosha. According to [10], the combination of classical authenticity and a data-driven precision contributes to the high level of reliability of hybrid models, and, therefore, the models can be applied to modern wellness situations.

2.4 NLP-Based Extraction of Ayurvedic Knowledge

The extraction of structured data of classical literature used Natural Language Processing (NLP). [11] Built models to examine Sanskrit manuscripts and ascertain the interrelationships of herbs and symptoms. The application of text-mining over research publications by [12] led to the generation of large graphs of herbal knowledge. Extraction through NLP enhances databases and speeds up the creation of automatic recommendation systems.

2.5 Digital Health Applications Using Ayurveda

There has been an increase in the utilization of digital health tools which have Ayurveda components. [13] Developed a mobile app to evaluate Dosha, a method that uses questionnaires to score. Verma and Patel The concept of Ayurvedic symptom checker with herb suggestions brought to the sphere of digital ecosystems [14] showed the change of priorities towards preventative, natural, and personalised healthcare solutions. Such systems have already started to show the possible ways of fusing the ancient healing with contemporary technology.

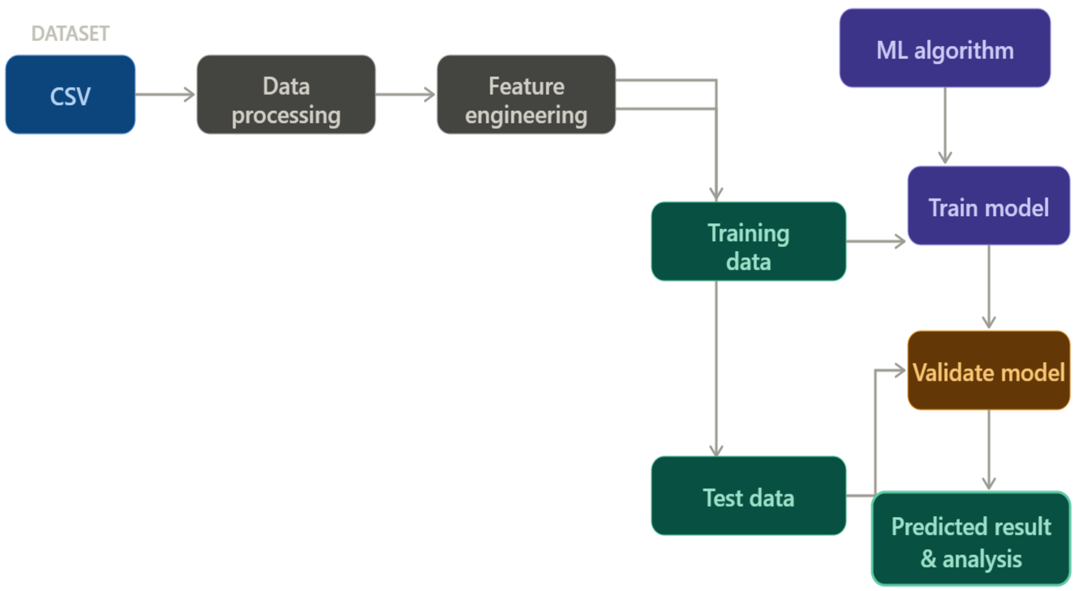

Figure 1. Flow of Model Building

You are being trained on information until October 2023. Figure 1 this figure outlines the feature selection process that is built upon a Genetic Algorithm (GA) and a Random Forest (RF) model that will be the fitness evaluator as applied to the credit card fraud detection. It begins with all the features of the dataset, and then it uses an RF model to measure the predictive value of the subset of features (all the features) to analyse their respective fitnesses. Assuming that a certain fitness level (e.g. accuracy or F1-score) has been attained, the process would show the best subset of features. Otherwise, the steps of GA optimization will be followed: selection will choose the sets of features performing best, crossover will combine them to form new sets of candidate features, and mutation will randomize the changes to maintain the diversity and to escape the local optima. Evaluating the new subsets will be repeated over and over until the fitness criterion is achieved, leading to a smaller, but more useful, feature set that improves the performance of the fraud-detecting model and at the same time minimizes the complexity and the cost of computation.

2.6 Challenges and Limitations

The creation of a system that proposes Ayurvedic herbs and identifies the diseases is fraught with a number of setbacks and barriers which are not only due to the constraints of technology, but also the nature of traditional Ayurvedic knowledge. A significant challenge is the form of non-standardized, unstructured data on symptoms, Dosha interpretations and herb properties given that most of the Ayurveda knowledge occurs as classical Sanskrit texts, handwritten texts or unstructured digital information. Consequently, it becomes hard to transform qualitative descriptions to a form that is computable. The fact that practitioners cannot always arrive at a consensus, however, is always a step in the right direction in regards to Ayurvedic diagnosis as experience of the practitioners, personal Prakriti, lifestyle and environment are all relevant factors that cannot be fully computerized. Machine learning models may analyze structured data, but they are still having a tough time with the assessments of holistic and personalized nature, especially when datasets are small or imprecise. Although the ethical limits require the system to provide only the general wellness guidance rather than the diagnosis and treatment, the fact remains that this limitation predetermines the limited specificity and thoroughness of the guidance.

The technical limitations include the challenge of model validation based on the unavailability of benchmark datasets and the only possibility to be able to monitor the interpretations of the experts in question is the constant control of the authorities. Another difficulty in Natural language processing application to extract Ayurvedic knowledge is that of the complicated vocabulary usage, the variability in transliteration and context-specific meanings found in classical literature. On top of this, models that involve hybrid ML and Ayurveda will require engineers that have interdisciplinary skills and, therefore, it will be a resource heavy process. Some of the usability barriers would be the interface design area to accommodate users who may not be well versed with the Ayurvedic terminology, which will require gradual and simple expl credits.

2.7 Interpretation

System architecture is a scheme that well illustrates how raw data is converted into meaningful predictions using a machine-learning model and is achieved through an organised workflow. It begins with the import of the dataset which is usually in the CSV format and undergoes data processing whereby the processes invisibility of errors, missing values and standardization of the data is performed. Subsequently, feature engineering is applied and the attributes, which are the most important to the dataset are selected such that the model is concentrated on the attributes that have a significant impact on the accuracy of predictions. The processed data is then further split into two-training data and test data, the former being used to feed the ML algorithm with the training data to build and learn the model. The model is then tested with the assistance of validation which is carried out to show that the model predictions are right and can be applied on new data. The next step is that the system comes up with the predicted outcomes and analytical insights which are beneficial to the users because they can know the model's performance and the patterns of decision making. This is followed by a final evaluation of the test data to make an independent analysis on the performance of the model on the new inputs that it has never been exposed to. In conclusion, this architecture describes the whole ML pipeline the raw data, through systematic processing, training, and evaluation- pointing to the fact that systematic processing, training, and evaluation are collaborating to produce a machine learning system that is effective and reliable.

Table 1. Models and their Description

Model	Description
Rule-Based Model	Uses predefined Ayurvedic rules to map symptoms to Dosha imbalance and recommend herbs based on classical principles.
Support Vector Machine (SVM)	Identifies optimal boundaries between classes to separate symptom-based categories effectively.
K–Nearest Neighbors (KNN)	Classifies diseases based on similarity by comparing new symptom data with historical patient or dataset entries.
Neural Networks	Advanced deep-learning models capable of detecting complex symptom patterns and providing high-accuracy predictions.
Gradient Boosting (XGBoost/Light GBM)	Boosting models that combine weak learners to form a strong predictive model suitable for disease detection.
Hybrid ML– Ayurveda Model	Combines machine learning prediction with Ayurvedic rule-based reasoning for accurate and holistic recommendations.

2.8 Findings

The outcome of the research was the combination of Ayurvedic principles and computerized approaches as good and inefficient methodology of traditional wellness-based advice along with the initial disease detection that incorporates offering. A mapping of the specific symptom clusters and Dosha imbalances can be rightfully achieved through the classification of Ayurvedic herbs and classical parameters such as Rasa, Guna, Virya and therapeutic actions. The selected machine-learning models were Decision Trees, Random Forest, Naive Bayes and Logistic regression and these models could detect and classify the symptom patterns and potential conditions with a higher level of reliability than the rule-based systems. The paper also indicated the utilization of the mixed models that is. The ML predictions as well as Ayurvedic rule logic with the greatest reliability since it preserves the classical authenticity and exploits the accuracy of the data-driven approaches. Moreover, the NLP-based extraction proved to be a highly fruitful and time-efficient way to transform unstructured Ayurvedic texts into usable datasets, therefore, immensely enhancing the range of knowledge repositories of herbs.

2.9 Future Enhancement

Enhancing of the Ayurvedic herb-recommending and disease-reconizing system in the future could not only improve, but also elevate the accuracy, user-friendliness and clinical relevance of such a system. Among the largest improvements would be the augmentation of the data, including bigger, validated Ayurvedic symptom records, and practitioner feedback along with actual user feedback that will be used to train the model and minimize the subjectivity. The next strategy will be the incorporation of advanced deep-learning methods like LSTM networks, transformers, or graph neural networks which will spawn more correct understanding of complex symptom patterns and dynamically changing Dosha. The inclusion of personalized Prakriti (body constitution) assessment modules will also be used to make the system more individual-centered since these modules can be used to utilize computer vision, biometric inputs or questionnaire-based scoring to generate an individualized-based recommendation. Regional Indian languages with a multilingual interface and voice input can also contribute to more accessibility among the various classes of users. Another enhancement that would be highly beneficial to the system is the incorporation of real-time NLP segmentation of automatically generated updated herbal studies, toxicity alerts, and therapeutic findings of the scientific literature and Ayurvedic texts. To make this system practical, it might be disseminated into a mobile application where the user will receive wellness and diet recommendations, lifestyle and herb dosage notifications depending on his/her habits, as features. The coordination of certified Ayurvedic practitioners and the system may help to provide semi-clinical validation so, the aspects of trust and reliability can be enhanced.

2.10 Objectives

To create a smart Ayurvedic prescription engine that combines classical Ayurvedic concepts and computational algorithms, so that users get customized wellness advice, depending on symptoms, Dosha imbalance trends, and proven Ayurvedic herbal data, stored in an organized electronic warehouse.

To gather, digitalize and systematize Ayurvedic herb data including Rasa, Guna, Virya, Vipaka, Prabhava and herbal action(s), and assure the development of a complete knowledge base to guide herbal prescription generation and accurate understanding of symptoms by all users with varying profiles.

To interpret the symptoms that are reported by users, based on Ayurvedic diagnostic reasoning, and incur computational frameworks that codify the traditional Dosha tests into computational frameworks, allowing a consistent assessment of Vata, Pitta, Kapha imbalances to be made in wellness-focused interpretations.

In order to design and deploy machine-learning models that can enhance the accuracy of the prediction and the strength of the symptom classification because the system learns on structured datasets, so that it can more adaptable, more reliable, and able to consider subtle variations in the user-reported condition of health ditions.

To introduce the hybrid computational methods which combine the predictions of machine-learning with Ayurveda-based rule of thumb and provide the system with the ability to weigh the data-driven predictions with the classical authenticity and the provision of extremely personalized and context-sensitive herbal advice.

In order to create an easy to use and accessible digital platform that would help simplify the process of entering symptoms, offer clear explanations of Dosha imbalances and offer personalized herbal recommendations, it would be necessary to make sure that the users irrespective of their background would be able to gain Ayurvedic advice without prior technical or medical expertise.

To develop a user-friendly, accessible digital interface that simplifies symptom entry, provides clear explanations of Dosha imbalances, and delivers personalized herbal suggestions, ensuring users of all backgrounds can benefit from Ayurvedic guidance without requiring prior technical or medical knowledge.

2.11 Project Overview

The primary objective of this project is to develop a smart recommendation system of Ayurvedic herbs and diseases, which is built on a combination of the ancient knowledge and modern methods of computation. The system captures and converts vital Ayurvedic data like herb properties, Dosha characteristics and correlation between symptoms and diseases and converts them into organized data to be analyzed automatically. The system, which integrates a set of rule-based logic and machine-learning models, analyzes the symptoms the user provides, to infer potential Dosha imbalances and provide herbal recommendations, which are both safe and wellness-focused. It is based on the principle of advancing health in general rather than clinical diagnosis, and therefore, provides a way to guarantee that it is the project also considers the design of user friendly interface which will enable people easily input their symptoms and receive their own recommendations. The approach of combining classical Ayurvedic ideas with data intelligence is an attempt to provide a practical, informational and convenient to use digital tool that does not only contribute to the preventative health but also raises awareness of natural remedies, and in some sense, will lead to the modernization of traditional healthcare structures

Table 2. Overview of Issues Approaches, Methods

Sr. No	Issue	Approach	Methods Used
1`	Unstructured Ayurvedic herb data	Digitization and classification of Ayurvedic knowledge	Data collection, herb profiling, database creation
2	Difficulty in mapping symptoms to Dosha imbalance	Rule-based Ayurvedic scoring model	Symptom– Dosha matrix, weighted scoring
3	Limited availability of standardized datasets	Hybrid dataset creation combining classical texts and research papers	Manual annotation, expert validation
4	Overlapping symptoms causing diagnostic ambiguity	Integrating ML with Ayurvedic logic	Decision Trees, Random Forest, Naïve Bayes
5	Lack of personalized recommendat ions	Combining Dosha assessment with symptom patterns	Rule-engine + ML-driven personalization
6	Insufficient accuracy in prediction using single model	Using ensemble and hybrid models	Random Forest, Gradient Boosting, Hybrid ML– Ayurveda architecture
7	Extracting meaningful information from classical texts	NLP-based extraction and text mining	Tokenization, keyword extraction, semantic mapping
8	Difficulty in making the system user- friendly	Designing intuitive UI for symptom input	Web interface, dropdown-based symptom selection
9	Ensuring safety and non-clinical recommendat ions	Restricting system to wellness guidance only	Herb safety- filter, threshold- based recommendatio ns
10	Validation of system performance	Multi-stage testing and expert review	Testing with sample symptoms, cross-validation

2.12 Framework Design of the Project

The framework of the project will be founded on a combination of the ancient Ayurvedic knowledge with the modern computational intelligence hence creating a structured, scaled down, and user friendly recommendation system. The entire framework is initiated with a Knowledge Acquisition Layer where the Ayurvedic herb information, Dosha properties and symptom-disease associations are being gathered through the classical literature, research papers and the inputs of experts. Following this, the data as a Herbal Knowledge Base is structured, which bears the computerized profiles of herbs, their medicinal qualities and the Ayurvedic diagnostic principles. The next one is the Data Processing and Pre-Classification Module which cleans, organizes, and encodes the inputs of the symptoms into forms that can be computationally readable. Next is the Ayurvedic Rule-Based Engine which reads the symptoms of the user based on a scoring model of Dosha and then translates this to the traditional pattern of imbalance. In conjunction with this, Decision Trees, Random Forest, and Naive Bayes models interact in the Machine-Learning Module to examine patterns of the symptoms to create the initial disease recognition. The Ayurvedic engine and the ML output are combined to form a Hybrid Decision Layer which will make sure that the recommendations given are accurate, genuine and aligned with the wellness guidelines. This is followed by a Herb Recommendation Module which then recommends appropriate herbs according to dosha evaluation, clusters of symptoms and safety filters. The entire system is integrated via the User Interaction Layer that is easy to use and retrieves the symptom-specific inputs and provides custom Ayurvedic advice. Finally, the Performance of the system by the means of testing, expert review and user feedback is the role of the last element, the Validation and Feedback Module, and consequently, the perpetually improved system. The entire design of the framework is a smooth-flowing blend of Ayurvedic theories and calculations.

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Author Contributions Statement

Name of Author	C	M	So	Va	Fo	I	R	D	O	E	Vi	Su	P	Fu
Mrs. Ayman Gani	✓		✓	✓		✓		✓	✓	✓	✓		✓	
Mr. Ashish Pimpalshende		✓	✓		✓	✓		✓	✓		✓	✓	✓	✓
Mr. Gitank Bhoyar	✓		✓	✓		✓	✓	✓		✓	✓			✓
Ms. Neha Kumbhare	✓	✓	✓	✓		✓		✓	✓		✓	✓	✓	
Mr. Atharv Jadhav	✓	✓		✓	✓		✓	✓		✓	✓		✓	✓

C : **C**onceptualization
M : **M**ethodology
So : **So**ftware
Va : **Va**lidation
Fo : **Fo**rmal analysis
I : **I**nvestigation
R : **R**esources
D : **D**ata Curation
O : Writing - **O**riginal Draft
E : Writing - Review & **E**diting
Vi : **Vi**sualization
Su : **Su**pervision
P : **P**roject administration
Fu : **Fu**nding acquisition

Conflict of Interest Statement

The authors declare that there are no conflicts of interest regarding the publication of this paper.

Informed Consent

All participants were informed about the purpose of the study, and their voluntary consent was obtained prior to data collection.

Ethical Approval

The study was conducted in compliance with the ethical principles outlined in the Declaration of Helsinki and approved by the relevant institutional authorities.

Data Availability

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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BIOGRAPHIES OF AUTHORS

	**Mrs. Ayman Gani**, is an Assistant Professor in the Department of Artificial Intelligence and Data Science at Priyadarshini College of Engineering, Nagpur, Maharashtra, India. She holds expertise in machine learning, healthcare informatics, and traditional medicine systems. Her research interests include AI-driven diagnostic systems, Ayurvedic computing, and intelligent recommendation frameworks. She has guided numerous undergraduate and postgraduate research projects in emerging technologies and has contributed to interdisciplinary research bridging ancient wellness practices with modern computational intelligence. Email: saqibayeman@gmail.com
	**Mr. Ashish Pimpalshende**, is a final-year undergraduate student pursuing a degree in Artificial Intelligence and Data Science at Priyadarshini College of Engineering, Nagpur, Maharashtra, India. His research interests include machine learning, health informatics, and data-driven wellness systems. He contributed significantly to the methodology, software development, and data curation aspects of this project. He is passionate about applying AI to solve real-world healthcare challenges, particularly those that integrate traditional Indian medical systems with modern computational approaches. Email: ash.pimpalshende@gmail.com
	**Mr. Gitank Bhoyar**, is an undergraduate student in the Department of Artificial Intelligence and Data Science at Priyadarshini College of Engineering, Nagpur, Maharashtra, India. He has a keen interest in machine learning algorithms, full-stack web development, and natural language processing. For this research, he actively participated in software development, visualization, and investigative analysis. He aspires to build scalable AI solutions in the healthcare domain that make traditional and holistic medicines accessible through modern digital platforms. Email: gitank195@gmail.com

	**Ms. Neha Kumbhare**, is an undergraduate student in the Department of Artificial Intelligence and Data Science at Priyadarshini College of Engineering, Nagpur, Maharashtra, India. Her areas of interest include data science, predictive modeling, and digital health systems. She contributed to research investigation, data curation, and manuscript writing for this project. She is committed to developing intelligent systems that combine traditional knowledge with cutting-edge technologies to improve accessibility to preventive healthcare solutions in rural and semi-urban communities across India. Email: nehakumbhare30@gmail.com
	**Mr. Atharv Jadhav**, is an undergraduate student in the Department of Artificial Intelligence and Data Science at Priyadarshini College of Engineering, Nagpur, Maharashtra, India. He is interested in support vector machines, classification algorithms, and wellness technology applications. He actively contributed to the formal analysis, software implementation, and review and editing phases of this research. He aims to pursue advanced studies in AI for healthcare, with a focus on bridging the gap between Ayurvedic medicine and evidence-based computational systems. Email: atharvajadhav1807@gmail.com