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COMPREHENSIVE MANAGEMENT OF DIABETIC PERIPHERAL NEUROPATHY INCLUDING MARMA CHIKITSA AND MAHATIKTAKA SHATADOUDHA GHRITHA ABHYANGA -A CASE REPORT

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ABSTRACT

Diabetic Peripheral Neuropathy is the most common complication of Diabetes Mellitus with a lifetime prevalence of about 50%. The present case report of a 64-year-old female K/C/O Diabetes Mellitus-Type2 for 6 years who had complaints of intermittent burning in both feet's soles (right > left) for a year, as well as an unstable gait and the impression of walking on a sponge. Had complaints of steadily progressing numbness and pain in both legs below the knee to the tips of the toes (right > left). Comprehensive management done along with Marma(Varma) Chikitsa and the use of Mahatiktaka Shatadhouta Ghritha showed significant effects in combating the symptoms of diabetic peripheral neuropathy.

Keywords: Case report, Diabetic Peripheral Neuropathy, Mahatiktaka Shatadoudha Ghritha, Marma Chikitsa

INTRODUCTION

Diabetic Peripheral Neuropathy (DPN) is the most common complication of Diabetes Mellitus (DM) with a lifetime prevalence of about 50%. Neuropathy is defined as a functional disturbance or pathological change in the nerves. Diabetic neuropathy (DN) refers to symptoms and signs of peripheral nerve dysfunction in a patient with diabetes mellitus (DM) in whom other causes of neuropathy (malignancies, chronic alcoholism, nutritional) have been excluded.

CASE REPORT

In the present case study, a 64-year-old female patient who was clinically diagnosed with DPN associated with Type 2 DM in the past 6 years who took treatment at various medical centres preferred for ayurvedic treatment was admitted into the Panchakarma Department of Sri Dharmasthala Manjunatheshwara Ayurveda Hospital, Hassan. She had symptoms of intermittent burning in both feet's soles (right > left) for a year, as well as an unstable gait and the impression of walking on a sponge. Had complaints of steadily progressing numbness and pain in both legs below the knee to the tips of the toes

ASSESSMENT BEFORE TREATMENT

Sl no	Parameter	Score
1	Pain VAS Score	9
2	Neuropathy Disability Score	7
3	Neuropathy Symptom Score	7
4	Michigan Neuropathy Screening Instrument Score	7

(right > left). She was under allopathic oral medication (glimepiride morning 1tablet before food, metformin 1tablet at night before food). Her immediate family members do not present with similar complaints. Her bowel & appetite were normal. Micturition with increased frequency & Sleep was disturbed. She was moderately built with a stable mental disposition. She was a homemaker from a middle-class family with a BMI of 22.9kg/m². Vital signs showed a blood pressure reading of 130/90mmHg, pulse rate and heart rate of 80 beats per minute, respiratory rate of 16 breaths per minute, weight of 55 kg, and height of 155cm.

MATERIALS AND METHODS

Mahatiktaka Ghritha was washed 100 times and made to Mahatiktaka Shatadhouta Ghritha. This was used for Abhayanga and Pada Pichu Bandhana. Marma (Varma) stimulation was done to Marma points in the lower limbs. Marma is a point of concentration of Prana or vital energy. Marmas are the meeting place of Mamsa(muscle tissue), Sira(blood vessels), Snayu(nervous tissue), Asthi (osseous tissue), and Sandhi (joints). Varmam is a subtle energy that helps in the proper functioning of the body and life force. In Sanskrit, this Varmam energy is referred to as Marmam. In Ayurveda classics, there is no mentioning of the procedural technique of Marma Chikitsa hence adopting Varma Chikitsa explained in the Siddha System of medicine. The method of stimulating the Varmam points is called Kaibaagam Seibaagam.

Kaibaagam is the technique of choosing particular fingers to stimulate a Varmam point. The stimulation or application method is Seibaagam. Profound knowledge of the finger measurement and the amount of pressure to be applied is essential for rendering Varmam treatment. Maathirai means the method of touching the Varmam points by fingers and can be considered as a measure. If the Varmam point is either first bone touched with the (interphalangeal joint) of the thumb or the side tip of the thumb, it is considered as 1/4 Maathirai. If it is stimulated with the soft pulp portion of the middle finger i.e., from the tip of the middle finger to the first bone joint, then it is 1 Maathirai. Similarly, it is 3/4 measure when the *Varmam* point is stimulated with ³/₄ portion of this region, and when ½ of this portion is used, then it is ½ Maathirai¹.

Marma (Varmam)point	Location	Position of fingers	Application ²
Talahridaya (Ullangkaal Vellai Varmam)	On the sole of the foot, where muscles below the big	Pulp part of a middle finger was placed on <i>Varmam</i> 's	Using ½ <i>maathirai</i> pressure, press and release three times
	toe &other toes meet	point	

Kshipra (Viruthi Kaalam)	Lies on the dorsal side of the foot in the first web space, at the junction of the bones of the big toe & second toe	The first interphalangeal joint of the thumb placed on <i>Varmam</i> point	Using ½ maathirai pressure, press and release three times
Kurcha (Padangkaal Varmam)	Lies four fingers above <i>Viruthi Kaalam</i> , on the dorsal side of the foot	The middle part of the middle three fingers is placed on the Varmam point	Using ½ maathirai pressure, apply three clockwise rotations & three anticlockwise rotations

INTERVENTION

II (TERC) Extract				
DURATION	TREATMENT			
Day 1 to Day 6	Dhanyamla avagaha of b/l foot for 30 minutes			
Alternate days starting from Day 1, Day 3, Day 5, Day 7, Day 9, Day 11	Sarvanga Udwarthana with Triphala choorna F/B Parisheka with Dasamoola kwatha			
Alternate days starting from Day 2, Day 4, Day 6, Day 8, Day 10, Day 12	Sarvanga Abhyanga with Mahatiktaka Satadoudha Ghritha F/B Parisheka with Dasamoola kwatha			
Day 1 to Day 12	Pada Pichu Bandhana with Mahatiktaka Shatadoudha Ghritha			
Day 1 to Day 12	Marma Chikitsa			
Day 1 to Day 12	Avagundana			
Day 1 to Day 12	Balamoola Capsule 2 BD After food			

Sl no	Parameter	Score
1	Pain VAS Score	3
2	Neuropathy Disability Score	4
3	Neuropathy Symptom Score	3
4	Michigan Neuropathy Screening Instrument Score	2

FOLLOWUP AND OUTCOMES

The patient's symptoms of DPN improved significantly after 12 days of treatment. Both feet' burning sensation was lessened. Her gait became more stable, and she could feel her foot when walking. Numbness

DISCUSSION

Discussion on Pain VAS Score

The pain VAS score was 9 prior to treatment and was lowered to 3 after treatment. <u>Discussion on Neuropathy Disability Score</u>

The score was 7 prior to treatment and was lowered to 4. Prior to the treatment, there was a decrease in the temperature, pinprick feeling, and vibration in both lower limbs, which improved following the treatment.

ASSESSMENT AFTER TREATMENT

and pain were also lessened. The one-month followup demonstrates the same improvement. There were no negative effects observed throughout the treatment or after it was completed.

Discussion on Neuropathy Symptom Score

The score was 7 before treatment and was lowered to 3. Prior to treatment, she experienced significant burning, numbness, and tingling in both feet, as well as nocturnal worsening of symptoms that caused her to awaken from sleep. This improved following treatment.

<u>Instrument Score:</u> The score was 7 prior to treatment and was lowered to 2. Her feet were numb prior to treatment, she complained of burning pain in her feet,

her feet were too sensitive to touch, she felt pricking feelings in her feet, and she used to hurt her feet when walking. The symptoms worsened at night. This improved following treatment.

The pathophysiology of *Prameha Upadrava* has *Vata* Pradhana Tridosha vitiation³. Shoola is caused solely by a vitiated Vata Dosha. Daha is caused by vitiating Vata Dosha in conjunction with vitiated Pitta and Raktha. Supti and Harsha are caused by Vata and Kapha doshas. Abhyanga is Twachya and practises Vata Prashamana because Spanrshanendriya is a Abhyanga Vata Adhishtana. also improves Balakarma, which means it may help the Vatavaha Sira function properly. Because of its pharmacological action, Mahatiktaka Shatadoudha Ghritha aided in the normalisation of the Vata movement. Marma Chikitsa aids in the regulation of blood flow and is effective in the treatment of pain.

CONCLUSION

Based on this single case study, it can be concluded that comprehensive management including *Dhanyamala Avagaha*, *Sarvanga Udwarthana* with *Triphala*

Choorna, Sarvanga Parisheka with Dasamoola Kwatha, Sarvanga Abhyanga & Pada Pichu Bandhana with Mahatiktaka Shatadoudha Ghritha and Marma chikitsa are effective in managing the symptoms of diabetic peripheral neuropathy associated with type 2 DM. As this study is based on a single case, a larger sample size investigation is necessary to determine the more beneficial outcomes.

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